# **Incident Report Cheat Sheet**

# Require Reporting

- o 911/Police/EMT Involvement
- o Death
- Elopement
- o Search & Seizure
- o Medication Refusal
- o Medication Error
- o Medication Reaction
- Side Effects
- o Physical Intervention
- o Self-Injurious Behavior
- Assaulting staff/peers
- o Urgent Care/ER Visit
- o Arrest
- Hospitalization
- o Suicide attempt or gesture
- o Fire
- o Vehicle Accident
- o Communicable Disease
- o Any new behavior/oddity/out of the ordinary

## **Common Staff Actions**

- o Verbal Redirection
- o Blocking Techniques
- o Bite Release
- o Hair Pull Release
- o Coping Skills
- o Validation of Feelings
- o DBT Skills
- o Distracting Techniques
- Increased supervision
- First Aid/vital signs
- o Notify guardian
- o CMH on-call
- o Notify Case Manager
- Notify Rights
- o Notify prescribing physician when appropriate

### Reason/Cause of Incident

- o Verbal/Physical Altercation
- o Family Interaction
- o Relationship Issues
- Lack of funds
- o Telephone
- o Internet
  - Over stimulation (identify the stimulation)

### Tips

- o Stick to the facts; don't assume. No opinions
- o If medication related, be sure to include medication name(s) and dosage
- Describe what occurred; what did it look like, where and when did it occur
- o For any urgent care, emergency room, or hospitalization, please include the diagnosis and discharge instructions if any
- Remember IR's are to be completed by the end of your shift and must be reported to the CMH within 24 hours
- o Don't document using emotions; ensure language is free of judgement and frustration
- o Don't use IR's as a form of punishment! This will more than likely cause a behavior.
- o Recipients should not be aware an IR is being completed
- o Don't assume others have completed an IR, when in doubt, fill it out