Risk Management

To access Click on the Risk Management button

OR click on File – Risk Management

Select Medication Incident or Resident Incident/Accident and click ok
Medication Incident
Select the Resident. Once the resident is selected the Unit #, Gender and Date of Birth will populate. Select the type of incident and answer the question Is this a Sentinel Event?

Click on the look up to select the Effects Observed or Reported
Click the look up to select the Medication Name. Enter the dose and time ordered.
Describe the incident in detail is an open text field, click in the field and type in your response.

Notifications:
Resident in the Y/N field, if you enter Y the date, time and by whom fields open. In the by whom field type in a portion of the employee name and tab to be able to select from the list.

Family: Click on the look up and you can select from the resident contacts

HSD and Person Discovering Incident Fields type in a portion of the employee name and tab.

After you have completed all of the questions enter your name in person completing the report and click on “Click here to digitally sign” You will be prompter to enter your password. If there are unanswered questions you will not be able to sign the Report.

Once it is signed, when the HSD logs in the tab for Investigation will be available, click on that tab and complete the investigation. The HSD will digitally sign and then the ED can review the incident and then sign.
Any changes to the form from when it is saved will be logged on the changes tab.
Complete all of the fields. Use the look ups/drop downs where available. For Y/N questions. If you enter Y for yes, grayed out fields will be available for entry. You will be able to mark the bodies with a red X to indicate the area(s) of injury. Once Report 1 tab is complete. Click on the Report 2 tab to complete.
Complete all of the fields and digitally sign. Once it is signed, when the HSD logs into the system and opens the report the Investigation tabs open.
Modifying Resident Incident: 1 of 1

Resident: Albertson, Albert
Unit #: 108
Date: 11/18/08
Time: 9:20 AM
Gender: Male
DOB: 01/20/1939

Type of Incident: Found on Floor

Location of Incident, General: Own Apartment
Location of Incident, Specific: Bathroom

What did the Resident tell you about what happened?
Mr. Albertson said that he slipped in water he had spilled on the floor.

Describe what you saw and heard (just the facts).
Went to room to remind him about going to see the barber at 9:15 am and found him on the floor.

Were there witnesses? Y/N: No
Names:

Were there apparent injuries? Y/N: Yes
Specify Injuries: Bruise foot, Swelling, Pain, Hit head

Vital Signs:
BP: 138/82
Pulse: 72
Resp: 16
Temp: -

If known:
O2 sat: -
Bld. Sugar: -

Click on the diagram to mark injuries.
### Risk Management

#### Modifying Resident Incident: 1 of 1

**#1004, Albertson, Albert, 11/18/2000**

<table>
<thead>
<tr>
<th>Report 1</th>
<th>Report 2</th>
<th>Investigation 1</th>
<th>Investigation 2</th>
<th>Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was there previous history of this type of incident?</td>
<td>Y/N</td>
<td>Explain:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Was a prevention plan in place?</td>
<td>Y/N</td>
<td>Explain:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Contribution Factors**

- **Environmental Factors**
- **Resident Factors**
- **Medical Factors**

**Resident Follow-up and Prevention**

- **General**
- **Environmental Modifications**
- **Assistive Devices Added**

**Fall reduction interventions implemented**

**Comments**

**Systems Follow-up**
Printing the Reports
To print the template Click on the print from the list screen
To print a completed Report Click on the print icon within an open Report