INCIDENT INVOLVED: ☑ Resident ☐ Visitor ☑ Staff ☑ Other <u>oth inc</u>

DATE OF INCIDENT (D/M/Y) 23 Oct 2024	Time 02:48 PM	LOCATION OF INCIDENT room	WITNESSED BY mng
DATE OF DISCOVERY (D/M/Y) 23 Oct 2024	Time 02:48 PM	LOCATION OF DISCOVERY room	DISCOVERED BY mng

TYPE OF INCIDENT		SAFETY DEVICES IN USE BEFORE OCCURRENCE	OTHER WITNESSES?
☑ **Fall** ☑ **Fire** ☑ **Security** ☑ **Elopement** ☑ **Aggressive Behavior** ☑ **Other <u>other incident</u>**	☑ **Resident Abuse** ☑ **Treatment** ☑ **Loss of Property** ☐ **Choking** ☐ **Death**	**Yes No N/A** Fob was within reach ☑ ☐ ☐ Call bell within reach ☐ ☑ ☐ Caution signs in place ☐ ☐ ☑ Other <u>other safety</u>	☑ **Yes** ☐ **No** Name:<u>nm 1</u> Position:<u>pos 1</u> Name:<u>nm 2</u> Position:<u>pos 2</u>

Condition At Time Of Incident	Fall Assessment	Ambulation	Fire
☑ **Oriented** ☐ **Sedated** ☐ **Disoriented** ☑ **Other (Specify)**	☑ **Medication Change** ☑ **Cardiac Medications** ☐ **Mood Altering Medications** ☐ **Visual Deficit** ☑ **Relocation** ☑ **Temporary Illness**	☐ **Unlimited** ☑ **Limited** ☑ **Required assistance** ☐ **Wheelchair** ☑ **Walker** ☑ **Other (Specify)** <u>other Ambulation</u>	**Yes No** Alarm pulled ☑ ☐ False alarm ☐ ☑ Extinguisher used ☑ ☐ Personal injury ☐ ☑ Resident or facility property damage ☑ ☐

FACTUAL CONCISE DESCRIPTION OF INCIDENT, INJURY, AND ACTION TAKEN:
Fact

Attachments:-

- **https://hamiltondinnerapp.intellidt.com/uploads/public/FormResponses/media/6729c52693d081730790694.jpeg**

- **https://hamiltondinnerapp.intellidt.com/uploads/public/FormResponses/media/6729c52694af61730790694.jpeg**

NOTIFICATION		
INFORMED OF INCIDENT　　　　　**INITIAL** ☑ **Assistant General Manager**　　　agm ☑ **General Manager**　　　gm ☑ **Risk Management Committee**　　　rmc ☑ **Other** other notification 　　　oth	**PERSON NOTIFIED** **Family Doctor:**doc **Time: 02:50 PM** **Other:** other notified **Time: 02:50 PM**	**NOTIFIED RESIDENT'S RESPONSIBLE PARTY** ☑ Yes　☐ No **Name: RAO** **Date: 23 Oct 2024** **Time: 02:50 PM**
COMPLETED BY Rahi	**POSITION** developer	**DATE** **23 Oct 2024 02:50 PM**

FOLLOW UP (For Management Use Only)

ISSUE (Problem)
Issue text
FINDINGS (Gather Information)
Findings text

POSSIBLE SOLUTIONS (Identify Solution)
Solutions text
ACTION PLAN
Plan text
FOLLOW UP (Examine Result – Did the Plan work?)
Follow up text