

General Form

Form Response

safety_caution :-

No

incident_location :-

h

condition_at_incident :-

Sedated,

fire_false_alarm :-

Yes

discovery_location :-

j

fire_extinguisher_used :-

Yes

safety_fob :-

Yes

incident_involved :-

Resident, Visitor, Staff, test other

witnessed_by :-

g

fall_assessment :-

other_witnesses :-

No

fire_property_damage :-

Yes

safety_callbell :-

No

type_of_incident :-

Fire,Treatment,Death,Aggressive Behavior,other type inc

discovery_date :-

17 Nov 2023 08:27 PM

incident_date :-

17 Nov 2023 08:27 PM

safety_other :-

discovered_by :-

k

ambulation :-

Limited,Wheelchair

factual_description :-

fire_alarm_pulled :-

No

fire_personal_injury :-

No