CAREGIVER MISCONDUCT REPORTING REQUIREMENTS WORKSHEET

The Division of Quality Assurance (DQA) established consistent requirements for regulated entities to conduct thorough internal investigations and report allegations of caregiver misconduct and injuries of unknown source. The worksheet is designed to assist in determining if an incident must be reported to DQA. Completion of this worksheet is voluntary. Nursing homes must refer to the federal definitions

If you have questions regarding this worksheet, refer to Chapter 6 of *The Wisconsin Caregiver Program Manual* (DQA publication P-00038) at https://www.dhs.wisconsin.gov/publications/p0/p00038.pdf or contact the Office of Caregiver Quality by emailing DHSCaregiverIntake@wisconsin.gov or by calling **608-261-8319**.

INCIDENT

Possible caregiver misconduct allegations and injuries of unknown source are considered "incidents." Anyone who has information regarding an incident may report the incident to the entity. You can learn of an incident from:

- A verbal or written statement of a client or someone in a position to have knowledge of the incident through direct or indirect observation
- Discovering an incident after it occurs
- Hearing about an incident from others
- Observing injuries (physical, emotional, or mental) to a client
- Observing misappropriation of a client's property or
- becoming aware of an incident by any other means

ACTION

Upon learning of an incident, you must **immediately protect clients** from possible further incidents of misconduct or injury. In addition to DQA reporting requirements, entities are encouraged to **notify local law enforcement authorities** of any situation where there is a potential criminal offense.

ACTION

You must **conduct a thorough internal investigation** and document your findings for ***all*** incidents at the entity.

- Collect and preserve physical and documentary evidence.
- Interview victims and witnesses (persons with direct or indirect knowledge of the incident).
- Collect other corroborating/disproving evidence.
- Involve other regulatory authorities who can assist.
- Document each step taken during the internal investigation.

ACTION

Name an **accused individual**, if possible. If you are unable to name an accused individual, another regulatory authority or investigating agency (such as DQA or the police) may be able to identify an accused person.

- A caregiver is any person who is employed by or under contract with an entity; has regular, direct contact with the entity's clients or the personal property of the clients; and, who is under the entity's control.
- A non client resident is a person who is not a client of the entity but who resides at the entity and has regular, direct contact with entity clients.

NAME:

REPORTING REQUIREMENTS			
1.	Do you have **information or other evidence** to prove that the incident happened or do you believe that a regulatory authority or investigating agency may be able to obtain evidence to prove that the incident occurred? **EVIDENCE:**	**YES** ☐	**NO** ☐
2.	Do you believe that the incident meets the **DHS 13 definition** of abuse, neglect, or misappropriation? Refer to Chapter 6 of *The Wisconsin Caregiver Program Manual* for the complete DHS 13 definitions of the following: ☐ **Abuse.** An act done intentionally to cause harm that causes or could reasonably be expected to cause pain, injury, or death or substantially disregards a client's rights or a caregiver's obligations to a client; an act of sexual intercourse or sexual contact; the forcible administration of medication; a course of conduct by a caregiver done with the intent to harass, threaten, intimidate, or frighten and which does or could be expected to do so. ☐ **Neglect.** Substantial carelessness or negligence which disregards the facility policy or the client's care plan and causes or could be expected to cause pain, injury, or death or substantially disregards a client's rights or a caregiver's obligations to a client. ☐ **Misappropriation**. Taking or using a client's property (money, credit card, jewelry, phone, etc.); obtaining the property of a client by deceiving the client; having possession of a client's money or checks; using a client's personal identifying information to obtain credit, money, services, etc.	**YES** ☐	**NO** ☐

ACTION

If you answered "**YES**" to questions 1 and 2, you **must** submit a Caregiver Misconduct Incident Report (DQA form F-62447) to DQA.

If you answered "**NO**" to **either** question 1 or 2, proceed to question 3.

		YES	NO
3.	Are you **reasonably certain that the incident does NOT meet the definition** of caregiver misconduct (abuse, neglect, or misappropriation) or the definition of an injury of unknown source? Does your investigation support that the incident is not caregiver misconduct or an injury of unknown source? **Injury of Unknown Source.** The source of the injury was not observed by any person or the source of the injury can not be explained by the resident; and, the injury is suspicious because of the extent of the injury or the location of the injury. If you do not believe that there is evidence to show that the incident actually occurred **or** you do not believe that the incident meets the definitions of misconduct, you must determine if you have evidence (documentation, nurse's notes, witnesses, etc.) to show that you can **rule out** the incident as caregiver misconduct or an injury of unknown source. For example, the discovery of a large bruise on a resident's arm can be traced back to documentation that the resident bumped into the wall when self-ambulating. **EXPLANATION:**	☐	☐

ACTION

If you answered "**NO**" to question 3, proceed to question 4.

If you answered "**YES**" to question 3, you are **not required to report** the incident to DQA. Document your investigation and maintain on file the results of the **30** most recent internal investigations.

		YES	NO
4.	Is the alleged incident or the effect(s) of the incident on the client **minor**? **EFFECT ON CLIENT:** A minor effect on the client is one that causes no apparent physical, emotional, mental pain or suffering or property / financial loss to a client. Examples include: • Taking a piece of the client's candy • Food missing from a client's plate after the client has finished eating • Mild profanities not directed at a client The following examples are **not** considered to be minor effects on a client: • Discomfort occurring as a result of a skin tear due to rough handling • Client cowering or crying due to verbal or physical threats • Taking a client's spending money, even though the amount was small	☐	☐

ACTION

If you answered "**NO**" to question 4, **you MUST submit a Caregiver Misconduct Incident Report** (DQA form F-62447) to DQA.

If you answered "**YES**" to question 4, you are **not required to report** the incident to DQA. Document your investigation and maintain on file the results of the **30** most recent internal investigations.

Follow these steps to report an incident of caregiver misconduct or an injury of unknown source to DQA:

1. Complete the Caregiver Misconduct Incident Report (DQA form F-62447) and attach all relevant internal investigation documents.
2. Ensure that the complete Caregiver Misconduct Incident Report is submitted according to the appropriate timeframe:
   - **Nursing homes and intermediate care facilities for individuals with intellectual disabilities (ICFs/IID)** must submit reports of alleged caregiver misconduct to DQA/OCQ within five working days of the incident or the date that the entity became aware of the incident.
   - **All other entities** must submit reports of alleged caregiver misconduct to DQA/OCQ within seven calendar days of the incident or the date that the entity knew of the incident.
3. Submit the completed incident report to:

   Division of Quality Assurance
   Office of Caregiver Quality
   P.O. Box 2969
   Madison, WI 53701-2969

DQA/OCQ will forward reports involving credentialed staff (physicians, RNs, LPNs, social workers, etc.) to the Department of Safety and Professional Services (DSPS).