

A Risk Management Guide to Visitor Injury Incident Prevention & Reporting



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Introduction

MPIE has put together the following Risk Management Guide regarding Visitor Incident Prevention and Reporting to provide tips and tools that can help you manage and reduce slip, trips and falls at your facilities. Within this guide we will be addressing the importance of incident reporting along with standard work for incident reporting and prevention. We highly recommend reviewing this guide with all staff members at your facility on an annual basis to give them the ability to identify and report safety concerns or hazards, and to know how to respond and who to report to when incidents occur.

Reporting Incidents

It is important to report all incidents involving injuries sustained by a patient or visitor at your facility to both your general liability insurer and property manager in order to:

- **Ensure prompt assessment and response** to all incidents, no matter how small, resulting in injury or property loss or damage to patients, visitors, employees and volunteers.
- **Accurately document events/pertinent information** at the time of the incident while it is still fresh in everyone's memory.
- **Identify contributing factors/conditions** that led to the incident, and to identify steps to be taken to prevent the recurrence of a similar incident.
- **Provide accurate, timely information to your property manager** so they can address safety concerns, hazards or trends and to prevent future incidents.
- **Provide accurate and timely information to your general liability insurer** to determine liability, the ability to follow up with injured party in a timely manner if warranted, and to provide the pertinent information needed should the incident turn into a serious legal claim.

Determine in advance key contact information for both property manager and general liability insurer and their incident reporting process. This will give you the ability to know who to report to and how to report in a timely manner. Each facility is unique. The general liability insurer for inside your office may be different than the general liability insurer for the hallways, foyer, parking lot and sidewalks. Your property manager will be able to help determine who your general liability insurer is, and how to report to them. **(See attached Key Contact Template).**

Slip, Trip or Fall Action Plan

How to respond to visitor slip, trip or fall:

The first staff member on the scene should assess the situation and take care of the injured person's medical needs following these guidelines:

- Make the injured person as comfortable as possible.
- Ask individual if they feel the need for medical examination or first aid.
- Call 911 for emergency medical assistance when the injured person shows signs of the following:
 - Is not ambulatory without assistance.
 - Head trauma.
 - Broken bones.
 - Complains of chest pain or pain radiating from arms, shoulders or back.
 - Profuse bleeding that cannot be stopped or slowed.
 - Debilitating injury that would prevent the injured person from self-transport to the closest treatment facility.
- Never transport an injured visitor to a treatment facility in a personal vehicle.
- Do not move the injured person. If the injured person requests assistance in sitting up, getting back to their feet or regaining balance, you may then assist them in doing so as long as these actions are initiated by the injured party and do not appear as though they may negatively affect the injured person.
- As you attend to the person's medical needs, pay attention to any statements from the injured party that indicate the accident may have been the result of a prior medical condition such as diabetes, epilepsy, uncontrolled blood pressure, an equilibrium problem or medications that may have been taken/not taken as prescribed.

Conduct a thorough incident investigation following these guidelines:

- Start an investigation immediately after the incident has occurred.
- Obtain a statement from the injured party regarding their recollection of the incident, if possible.
- Determine if there any witnesses. If there were, obtain their names, contact phone numbers, and a statement of their recollection of the incident.
- Take photographs of the incident scene or draw a sketch of the scene at the time of the incident. (Do not take pictures of the injured party.)

Take note of the following things: weather conditions outside, type of footwear worn by injured party, type and condition of the floors where the injured party fell, presence of "caution" or Wet Floor" signs, if there were rugs/mats involved were they bunched up, etc.

- Report any safety concerns or hazards to ensure appropriate actions taken.
- As soon as possible, report the incident to office or practice manager.

Document the incident:

- Obtain pertinent information at the incident site as quickly as possible (**See attached General Liability Incident Report Form to aid in documenting information at the incident site**).
- Provide completed incident report form to practice or office manager by the end of your shift.

Submit Incident Report: (Practice or Office Manager)

1. Review incident report and obtain additional information if needed.
2. Submit incident report within 24-48 hours to:
 - ☐ Property manager to inform them of any safety concerns or hazards that may be found in order for them to correct and prevent further incidents.
 - ☐ General liability insurer through appropriate incident reporting system to notify them of the incident to determine liability, if further information or action is needed, and to follow up with injured visitor if warranted.

10 Common Contributing Factors

1. Contaminants on the floor (water, grease, oil, fluid, food)

Floor areas that are likely to be wet or spilled upon – cafeteria, foyers, bathrooms, etc.

2. Surface conditions

Loose or torn carpeting, broken tiles and parking lot divots are examples of surfaces that can create potential tripping hazards. Report and repair these hazards as soon as possible. Until repaired, the area should be visibly marked with caution tape, yellow spray paint or blocked from access.

3. Surfaces changes

Change in floor surfaces, such as carpet to tile, can create a slip or trip hazard as a person has established a “gait” on one surface and must change his or her “gait.” Look for and eliminate or control these conditions. It is recommended that these surface changes be clearly marked with yellow tape or paint to increase awareness.

4. Level changes

Ramps, sloping areas, ledges, steps (three or fewer) and similar surface irregularities can pose a slip/trip hazard. Be aware of such conditions, especially when there is no “color contrast” to call attention to the change. It is recommended that these level changes be clearly marked with yellow tape or paint to increase awareness.

5. Obstructions

Extension cords, furniture, planters, floor displays and parking lot speed control bumps are examples of obstructions. When located near a common pathway, they have historically contributed to a number of trip and falls, some with serious consequences. Move or eliminate obstructions or highlight or call attention to them with bright paint.

6. Visibility

Lighting, glare, and lack of color contrast are the most common examples of visibility concerns. When identified, seek to correct or eliminate this hazard.

7. Stairs

Stairs are defined as having more than three steps, up or down. The presence of handrails (consider both side and center handrails), and overall stairway condition, including height and depth of risers and treads, are factors to take into account when determining the degree of hazard.

8. Human factors

Consider the age of patients and visitors, as well as choice of footwear (which may be weather dependent). For example, seniors often have sight and other physical impairments, and children may tend to run and “horseplay.” Are there any hazards at a child’s eye level that an adult would not normally see? Consider the type of footwear most commonly worn by people walking through the area.

9. Unusual features

Art work, terrariums, signs, displays, brooks, bridges and similar “mood” setters are common examples of features that can cause a distraction. Of particular concern are signs and other items setup on easels.

10. Poor Drainage: Pipes, Gutters and Drains

Drains, gutters and water pipes that are improperly aligned can cause liquid to spill onto walking surfaces, while clogged drains can cause water to back up onto floor.

Premises Inspections

Be proactive by regularly inspecting building and grounds for slip, trip and fall hazards. Set up a schedule for both inside and outside premises inspections. Use and complete an inspection form to ensure documentation of those activities (**See attached Safety Checklist**).

Slip & fall conditions to be aware of:

- Foyers or entryways without runners or floor mats.
- Insufficient lighting.
- Water on floor surfaces.
- Smooth or worn flooring.
- Ramps without slip-resistant materials applied.
- Aisle ways partially blocked or with items stacked in the aisle way.
- Insufficient trash or water receptacles.
- Sources of leaks or drips that may cause algae to grow or ice to form.
- Surfaces without slip-resistant floor surfaces.
- Cracked or broken step surfaces, uneven treads or risers/steps that do not meet building codes.
- Transition areas, such as from carpeting to a slippery surface.
- Scatter rugs (eliminate!).
- Loose or broken handrails.
- Floor surfaces with litter or debris.
- Potholes or uneven areas in parking lots or walkways.
- Protruding objects, such as sprinkler heads, posts or utility boxes.
- Loose gravel or landscape debris, such as mulch.
- Confusing or insufficient signs to guide pedestrians.
- Handicap ramps that do not meet local or national codes.

General Liability Incident Report

INCIDENT INFORMATION

Date of Incident: _____ Time: _____ AM PM

Type of Incident: Injury Property Damage

Name of Facility: _____ Phone #: _____

Address: _____ City: _____ Zip: _____

Location of Incident: (parking lot, sidewalk, hallway, lab, etc.) _____

Description of what happened: (facts only) _____

Weather conditions: _____

1st Witness Name: _____ Telephone: _____

2nd Witness Name: _____ Telephone: _____

INJURY INFORMATION

Injured Name: _____ Visitor Patient Employee

Address: _____ City: _____ Zip: _____

Parent/Guardian Name: _____

Telephone: Home: _____ Cell: _____

Body Part Injured: _____ Type of Injury: _____
(Head, arm, leg, eye, etc.) (Sprain, burn, scrape, etc.)

Extent of Injury: First Aid Provided Seen by Physician Taken by Car to Hospital 911 Called

ADDITIONAL INFORMATION

Steps taken to prevent further bodily injury or property damage: (If warranted) _____

Name/Title of Incident Reporter: _____ Date Submitted: _____

Sample Checklist

SAMPLE CHECKLIST

A good, detailed walking hazard checklist can help identify hazards and then translate them into work orders that can have the hazards quickly corrected. The following sample is offered to help illustrate how a checklist might look and be used to minimize slip-and-fall incidents; the actual checklist you use should be tailored to your particular facility. Follow the checklist routinely, perhaps weekly. Any "NO" answer should have an entry in the "Action/Comment" column.

Flooring and Stairs	YES	NO	N/A	ACTION/COMMENT
Are flooring surfaces inspected regularly?				
Are flawed flooring surfaces promptly repaired or replaced?				
Are caution signs posted for all wet floors? (Are signs selected with large open bottoms to cover hazards, or are cones used to mark off hazardous areas?)				
Are the floor signs used above knee height, visible from 360 degrees, and located near areas that are subject to wetness?				
Is loose debris swept up?				
Are tracked-in water and spilled liquids mopped up?				
Is electrical wiring that runs across the floor secured with tape?				
Are all physical hazards, including inclines and drop-offs, marked using yellow safety paint?				
Are aisles clear?				
Are staircases, ramps, and landings well illuminated?				
Is the carpet plain, not "busy"?				
Is low pile interwoven industrial grade carpet used?				
Are all cover plates flush with the surrounding flooring?				
Are restroom floors made of non-skid material?				
Are paper towel and soap dispensers installed close to sinks so that people don't drip water from their hands on the way to the dispenser?				
Cleaning Chemicals and Floor Finishes	YES	NO	N/A	ACTION/COMMENT
Are "high-risk" areas maintained using slip-resistant cleaners?				
Is non-skid floor wax used and applied in a thin coating?				
Is non-skid flooring and deck paint used where appropriate?				
Are maintenance employees trained to apply floor-finishing products correctly?				
Matting	YES	NO	N/A	ACTION/COMMENT
Are absorbent walk-off mats used at all doorways that lead to the outside?				
Are the mats changed frequently during inclement weather?				
Are mats in good condition?				
Do all the mats lie flat?				
Are thick mats constructed with beveled yellow edges to minimize tripping?				
Are mats used with a nonslip backing?				
Are additional mats stored on site so that worn and wet mats can be replaced?				
Parking Lots and Sidewalks	YES	NO	N/A	ACTION/COMMENT
Are safe access routes well-marked?				
Are these areas free of ice, snow, and grease?				
Are these areas well-lit?				
Are receiving areas, ramps, stairs, walkways clear of snow and ice?				
Are parking lot dividers, curbs, and speed bumps well-marked?				
Are walking surfaces subject to wet or icy conditions coated with a rough, textured finish?				
Are automatic lawn sprinkler heads oriented so excess water doesn't puddle on walkways?				
Are speed bumps painted using non-skid paints that contrast with the driving surfaces?				
Are wheel stops situated so they do not permit vehicles to extend into walkways?				
Are parking lots regularly checked for potholes, cracks, and depressions, and are they patched on a regular basis?				
Are islands identified with signs?				
Are parking lot lights checked nightly to identify bulbs that need replacing?				
Is snow removal done before employees report to work?				
Are curbs painted with contrasting colors?				
Does maintenance staff regularly remove leaves and debris?				
Have slippery spots caused by oil or grease been treated with absorbent materials and cleaned up?				
Housekeeping Procedures	YES	NO	N/A	ACTION/COMMENT
Are all passageways, storerooms, restrooms, and patient/visitor areas kept clean, sanitary, orderly, dry, and free of protrusions (such as nails or splinters)?				
Is a rigid cleaning and mopping schedule in place to keep floors clean and dry?				
Are "Use Caution: Wet Floor" signs used when floors are being mopped?				
Does someone keep a log of all cleanings/repairs? (A log should record products used, when and by whom tasks are performed, surfaces cleaned/repaired, and cleaning/repair procedures used.)				
Employee Training	YES	NO	N/A	ACTION/COMMENT
Are employees trained about safety procedures and offered ongoing training and education as necessary?				
Are written slip/fall-prevention and accident-handling policies posted on employee bulletin boards?				
Are employees trained to provide customers or employees who do trip/fall with prompt attention, which may include securing or directing them to proper medical treatment?				
Miscellaneous	YES	NO	N/A	ACTION/COMMENT
Are awnings or blinds used to block the sun's rays in areas where sun glare inhibits a person's ability to see walking surfaces or obstacles?				
Are file drawers closed when not in use?				
Are there enough electrical outlets to eliminate the use of extension cords?				
Are electrical outlets installed where they do not pose a tripping hazard?				

Key Contact Information Template

KEY CONTACT INFORMATION	
Practice Manager or Office Manager Name / #:	
Rescue / Ambulance #:	
Police Dept #:	
Fire Dept #:	
Real Estate Property Manager Name / #:	

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Practice Manager or Office Manager Name / #:	
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Police Dept #:	
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(Template can be laminated and updated with key contact information so they are on hand and easily assessable.)