

## 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](mailto:DHSCaregiverIntake@wisconsin.gov) or by calling **608-261-8319**.

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

### 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

### INITIAL ACTIONS

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.

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.

**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.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	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? <b>Describe evidence below.</b>
2.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do you believe that the incident meets the <b>DHS 13 definition</b> of abuse, neglect, or misappropriation? Refer to Chapter 6 of <i>The Wisconsin Caregiver Program Manual</i> for the complete DHS 13 definitions of the following: <input type="checkbox"/> <b>Abuse.</b> 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. <input type="checkbox"/> <b>Neglect.</b> 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. <input type="checkbox"/> <b>Misappropriation.</b> 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.

**ACTION**

- If “**YES**” to questions 1 and 2, you **must** submit a *Caregiver Misconduct Incident Report* (DQA form F-62447) to DQA.
- If “**NO**” to **either** question 1 or 2, proceed to question 3.

3.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<p>Are you <b>reasonably certain that the incident does NOT meet the definition</b> 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?</p> <p><b>Injury of Unknown Source.</b> The source of the injury was not observed by any person or the source of the injury cannot be explained by the resident; and, the injury is suspicious because of the extent of the injury or the location of the injury.</p> <p>If you do not believe that there is evidence to show that the incident actually occurred <b>or</b> 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 <b>rule out</b> 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.</p> <p><b>Provide explanation below.</b></p>
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**ACTION**

- If “**NO**” proceed to question 4.
- If “**YES**” 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.

4.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<p>Is the alleged incident or the effect(s) of the incident on the client <b>minor</b>?</p> <p><b>Effect on Client</b></p> <p>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:</p> <ul style="list-style-type: none"> <li>• Taking a piece of the client’s candy</li> <li>• Food missing from a client’s plate after the client has finished eating</li> <li>• Mild profanities not directed at a client</li> </ul> <p>The following examples are <b>not</b> considered to be minor effects on a client:</p> <ul style="list-style-type: none"> <li>• Discomfort occurring as a result of a skin tear due to rough handling</li> <li>• Client cowering or crying due to verbal or physical threats</li> <li>• Taking a client’s spending money, even though the amount was small</li> </ul>
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**ACTION**

- If “**NO**,” you **MUST submit a Caregiver Misconduct Incident Report** (DQA form F-62447) to DQA.
- If “**YES**,” 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.

**REPORT AN INCIDENT OF CAREGIVER MISCONDUCT OR AN INJURY OF UNKNOWN SOURCE TO DQA**

- Log into the Misconduct Incident Report (MIR) system using your WILMS ID and password.
  - Access the MIR system at: <http://dhsapps.health.wisconsin.gov/DQAREporting/wilms>
  - Information about how to access and use the MIR system can be found on the DHS website at: <https://www.dhs.wisconsin.gov/caregiver/complaints.htm>
- Completely fill out a Misconduct Incident Report (DQA form F-62447) and attach relevant internal investigation documents to the report in the MIR system.
- For allegations involving all staff (non-credentialed and credentialed), submit the report to DQA through the MIR system. If unable to submit through the MIR system, refer to the DHS website at: <https://www.dhs.wisconsin.gov/caregiver/complaints.htm>
- Ensure the completed incident report is submitted according to the appropriate timeframe.
  - **Nursing homes and intermediate care facilities for individuals with intellectual disabilities** (ICFs/IIDs), certified to receive Medicare and Medicaid funds, must submit reports of alleged caregiver misconduct to DQA within five working days (Monday through Friday, except legal holidays) of the date the entity knew or should have known of the incident.
  - **All other entities** must submit reports of alleged caregiver misconduct to DQA within seven calendar days of the date the entity knew or should have known of the incident.

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