Fall Reporting Requirements

Was the fall witnessed?

Yes

Investigate the cause(s) leading to the fall.

Could the fall be the result of Abuse and/or Neglect (including not following care plan)?

Yes

Follow your abuse and neglect policies; refer to Reasonable Suspicion of a Crime flow diagram.

No

*Was the fall witnessed?*

No

*Was the fall witnessed?*

Yes

*Was the fall witnessed?*

Could the fall be the result of Abuse and/or Neglect (including not following care plan)?

Yes

Was there serious bodily injury
*Extreme physical pain
*Possibility of loss or impairment of a bodily member, mental faculty, or organ
*A risk of death, or
*Injury that may require surgery, hospitalization, or rehabilitation
*Was medical treatment beyond first aid required

No

*Was there serious bodily injury
*Extreme physical pain
*Possibility of loss or impairment of a bodily member, mental faculty, or organ
*A risk of death, or
*Injury that may require surgery, hospitalization, or rehabilitation
*Was medical treatment beyond first aid required

Yes

*ALC – initial report within 48 hours
*SNF – F609 - initial report within 2 hours per DOH request to ensure abuse/neglect investigation has been initiated

No

*Keep the results of your investigation at your facility

May 2018