#### **Information To Include in Incident Reports**

| **Examples of Information** | | **Reason To Collect This Information** |
| --- | --- | --- |
| Reporting factors | Witnessed/not witnessed | Make a clear distinction between what was seen or heard and the patient’s account of what happened. |
| Outcome of investigations recorded | When patients are reported as having x-rays or other investigations after a fall, the results of the x-ray or other investigation should be included in the report. |
| Type of injury | Be specific, e.g., “fractured tibia,” not “broken leg.” |
| Environmental factors | Call bell available within reach before fall | Highlight whether there is an issue about accessing call bells. |
| If a fall from bed, whether bedrails were in use | Help assess how bedrail use is affecting falls or injury. |
| Floor wet/dry/other | Reflect on cleaning regimen and need for nonslip surfaces. |
| Footwear | If problems with missing or unsuitable footwear are highlighted, develop systems for providing alternatives. |
| Walking aid in use/in reach | May highlight bedside storage issues or access to walking aids for patients. |
| Patient factors | Mental state | Identify those patients most vulnerable to falls because of sedation, dementia, or delirium. |
| Medication affecting risk of falls | Sedative and psychotropic medication, or medication with drowsiness as a side effect, may contribute to falls. |