

Version: 2 FOI Status: Public	Derbyshire County Council Adult Social Care Client Incident and Action Record Guidance	V2 Issued: November 2023 Review Due: November 2025 Author: Quality & Compliance
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## Client Incident and Action Record Guidance

As a responsible provider, the Council must have a clear understanding of the incidents that occur across its services. This is also a requirement for the registered managers within each individual service. Registered managers working within regulated services, providing direct care, must ensure the Client Accident and Incident Record is completed in the circumstances below.

- Incident
  - an unexplained bruise/skin tear or other injury is discovered on a person's body
  - an individual is subject to verbal physical abuse by another individual. An example is when a person is sworn at or threatened directly or physically assaulted, and does not usually include incidents where people are in the vicinity of a person swearing/shouting in a generalised way, with no individual being the focus of the language
  - an individual sustains a physical injury that is accidental/non-accidental following contact with another individual
- Client slips, trips, or falls
  - an individual experiences a slip, trip or fall, this can be witnessed or unwitnessed
- Medication error
  - a medication error occurs
- Death
  - any individual in receipt of a direct care service passes away
- Aborted/missed home care call
  - an individual in home care has an aborted, late/early or missed call
- Serious incident
  - an individual has choked, gone missing or other significant event

Further information regarding when to complete the Client Accident and Incident Record can be found in the relevant policies or guidance on [Our Derbyshire](#).

If you have any questions about when to complete the form, please contact the Q&C team at [asch.qualityandcompliance@derbyshire.gov.uk](mailto:asch.qualityandcompliance@derbyshire.gov.uk).

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The Client Accident and Incident Record must be completed electronically on the record of the individual who is affected. For example, an individual who was subjected to direct physical or verbal abuse (including threats).

Marks that do not relate to the care received whilst in our care, such a canular being left in, do not require a Client Incident and Action Record to be completed. Concerns relating to the care of an individual whilst in hospital or on discharge must be reported through Mosaic on the Hospital Concerns Monitoring Form.

The action you take in response to an incident will depend upon the nature of the incident and professional judgement should be applied when considering what action to take. There are some prompts on the record of actions you may want to consider. This is NOT a list of action that must be taken following each incident. If it is appropriate, you may decide to complete a body map ([Appendix 1](#)) and attach to the relevant Client Incident and Action Record. This is only completed at the time of the injury being discovered. A known site that is under treatment does not require any ongoing monitoring through use of a body map or updating of the Client Incident and Action Record. A new body map is only required if a new injury is found which would instigate a new Client Accident and Incident Record.

When completing the Client Accident and Incident Record, the person completing it is asked to consider whether the relevant documentation e.g., Personal Service Plans and any risk assessments are accurate and up to date. Where any paperwork relating to the client is found not to be accurate or up to date, then this should be noted on the record and a referral should be made to the P&P team for consideration of safeguarding. In this situation, all assessments will need to be updated urgently as part of the response to the incident.

Where appropriate, the Care Quality Commission will need to be notified of the incident. Please refer to the [Duty of Candour Policy](#) or speak to the Quality and Compliance Team for further guidance if required.

If you have any doubt about whether or not to make a safeguarding referral to the P&P team, please contact your link worker.

It is imperative that front line staff understand their role in the timely reporting and recording of any incident to their manager.

If an incident occurs during the night and workers on shift do not have access to Mosaic, the form at [Appendix 2](#) must be completed. This must be passed to the manager on duty during hand over who will complete the appropriate incident form.

Workers in the community are to contact the person on duty immediately to report any incident.

## Mosaic

The form can be filled out by any worker with access to Mosaic. Once this is done the form must be finished without delay.

In section 1 '**Details**' you will need to add the date, time event/occurrence took place, when the form was completed and form type.

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This document has been designed to show different screens for both section 2 **'Record'** and section 3 **'Outcome'** for each form type. All sections must be completed for the form to be finished. At times the record may be assigned to another worker for additional information where required.

Thorough completion of the record allows all immediate preventative measures and any other action taken, to be recorded in one place.

In section 4 the only available next action is 'No Further Action'.

The **'New Request'** must be sent to the appropriate manager for them to complete the form once they agree the content. If more information is required, you will need to resume the form and add the necessary amendments.

Any issues please contact [ASCHMosaicteam@derbyshire.gov.uk](mailto:ASCHMosaicteam@derbyshire.gov.uk) or to remove duplicate records raise a request via Halo.

<b>Further actions</b>
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Any changes to the way care is delivered will be discussed with staff and relevant paperwork updated.

Where further learning and changes to practice are implemented to prevent further occurrences, the Internal Management Review process can be instigated. Further information on the Internal Management Review (IMR) is available on [Our Derbyshire](#).

Where incidents have occurred that involve a member of staff, this will be discussed during supervision with their line manager. Where any further training and support is identified, this will be provided. Please note that any incident against a staff member must be reported via Health and Safety incident reporting on [Our Derbyshire](#).

The information generated from the completion of these forms will be used to monitor incidents across the service. The collated information is available on the relevant Dashboard and from the reports sent out by Management Information. This gives managers the ability to understand any patterns and to provide support as required.

The discussing of the report with your team must be a standard staff meeting agenda item.