

ATTACHMENT B

***EVALUATING THE QUALITY OF  
INVESTIGATIONS***

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# **Evaluating the Quality of Incident Investigations**

## **Purpose**

This evaluation process is designed to provide objective, ongoing information about the quality of investigations. The standards and instructions assume that a quality improvement process is critical to enhancing and maintaining consistent performance in a state-wide investigatory system with numerous and diverse providers of mental health services. The implementation of the process for assessing the quality of investigations serves four purposes.

First, these standards and the operational definitions afford individual investigators clear guidelines regarding the elements of a quality investigation. Investigators should be able to employ these standards and evaluation tools to conduct a self-assessment of their performance using the results to improve their investigative skills.

Secondly, this evaluation process can assist supervisors at the hospital and the Division levels in determining the quality of the investigations to enable them to provide consistent and reliable feedback to individual investigators about their investigative activities.

In addition, knowledge of the evaluation standards can assist hospital administrators in assessing the quality of the investigations and therefore the quality of the information upon which they may be basing critical decisions related to creating a caring and hospitable environment. It will enable administrators and incident management committees to ascertain whether the investigative findings are ones on which they can base sound decisions including making suitable recommendations and taking actions appropriate to those findings.

Finally, at the hospital and the Division levels, this evaluation process provides effective oversight of the investigative function and its implementation across all state operated facilities. As an oversight mechanism, it will assist in monitoring the quality of individual investigations as well as in identifying and correcting any systemic problems in the investigation of incidents.

## **Development of Standards and Evaluation Tools**

In measuring the quality of investigations, these standards apply only to those incidents requiring an investigation as defined by the Division of Mental Health Administrative Bulletin 3:18 [e.g., abuse, neglect, etc]. This evaluation process is designed to provide comprehensive information about the quality of investigations through a series of assessment activities organized as follows:

- ❑ Section I: Speed and timeliness in the collection of evidence
- ❑ Section II: Thoroughness in the collection of evidence
- ❑ Section III: Summary and analysis of evidence
- ❑ Section IV: Objectivity
- ❑ Section V: Appropriateness of Investigations

The methodology includes several evaluation **tools** for the purposes of: 1) comparing information about how the investigation was conducted as documented in the investigative file against standards of quality and 2) reviewing incidents to determine whether those requiring an investigation are actually investigated.

- ❑ **Review of Incident Investigations [Checklist #1]:** The investigator or reviewer will use this checklist to record the findings for all standards related to conducting investigations in Sections I-IV. The following evaluation tools are used to complete this checklist:

**Collecting Physical and Demonstrative Evidence [Worksheet I]** will be used to complete Section IIA.

**Collecting Testimonial Evidence and Interview Statements [Worksheet II]** will be used to complete Section IIB.

**Completeness of Interview Statements [Worksheet III]:** This checklist is a set of standards which measure the quality of the written interview statements as described in Section IIC.

**Collecting Other Documentary Evidence [Worksheet IV]** will be used to complete Section IID.

- ❑ **Appropriateness of Investigations [Worksheet V]:** The data collected using this worksheet can help determine whether all incidents requiring an investigation are actually investigated.

The investigatory file [which should include the investigator's final report and all attachments] is the primary source of information about how the investigation was conducted. One of the assumptions in the development of this methodology is that all hospitals will use the same comprehensive investigatory report form which will include the information required to fully document an investigator's activities and the investigatory procedures used. This report format will also assist staff with supervisory and oversight responsibilities in performing a thorough review of investigations.

The evaluation tools and instructions for their use are described below in Sections I - V following the procedures for conducting quality improvement reviews of incident investigations.

## **Procedures for Self-Assessment and Peer Review at the Hospital Level**

The individual investigator is one of the primary users of these standards and evaluation tools which are designed to provide specific expectations for conducting a quality investigation. To guide and improve performance, individual investigators, particularly those new to the job, should use the checklist and worksheets while conducting their investigations.

For supervisors and managers, these standards and evaluation tools shall be used to obtain objective information about the overall quality of the investigatory process at each hospital. To establish a review process at the facility level, each of the following issues must be addressed:

**Frequency of the review:** Reviews should be done frequently to provide investigators with sufficient on-going feedback to assist them in improving their skills. To accomplish this, the review of investigations shall occur monthly.

**Who will conduct the reviews:** Peer reviews will be conducted at each hospital and will be coordinated by the Risk Manager. The committee could be a small group with the participation of two facility investigators in each peer review meeting. In this structure, it is recommended that participation by the investigators should be rotated in those hospitals at least quarterly where there are more than two investigators to allow others an opportunity to enhance their knowledge of investigative procedures as they conduct reviews.

**Sample size:** Two cases conducted during the prior 30 days should be reviewed each month. These cases should be chosen randomly although on occasion the peer review group may want to target a particularly difficult investigation in addition to those chosen randomly. This sample of investigations should include only those conducted for incidents requiring investigation as defined by the Administrative Bulletin 3:18.

**How the reviews will be conducted:** The review of investigations may be accomplished in two ways: 1] the cases drawn in the sample may be divided among the group members for review, or 2] every case may be reviewed by every member. However, for the first two peer reviews conducted, it may be helpful to have the members review the same cases to establish inter-rater reliability. During this process, the members would discuss the case and resolve any variations that emerge in the individual scoring.

After the members feel that they are consistent in their use of the standards, one of the above procedures should be implemented. In either case, it is recommended that the reviewers complete the evaluation tools on the investigations for which they are responsible prior to the peer review meeting to expedite the process. After a discussion of the findings on each case, consensus among the members should be reached on any problems identified in the review. Any member who has a case drawn in the sample will not participate in the evaluation of his or her case.

**Use of the evaluation findings:** A copy of the checklists and worksheets should be provided to the investigator for feedback purposes. Findings of the monthly review should be documented and distributed to all stakeholders, including the Director of Quality Management. Each hospital's Risk Manager should compile an aggregate report of the findings semi-annually for all the cases reviewed so that systemic problems can be identified and remedied through training and other forms of guidance.

## **Oversight and Evaluation of Investigations at the Division Level**

The Division will be responsible for the oversight of the investigative process. This responsibility will include:

- Monitoring and providing guidance to hospitals in conducting investigations;
- Evaluating the quality of those investigations; and,
- Identifying both systemic, facility level and individual investigator problems and using this information to improve the quality of the peer review process through evaluation and oversight.

Similar to peer review in the hospitals, the Patient Services Compliance Unit (PSCU) is responsible for the review of investigations conducted in state operated psychiatric hospitals. This following represents current practices as well as additional recommended practices.

- The review of investigations by the PSCU occurs three times per year at each hospital. All PSCU staff shall have training in conducting investigations to conduct these reviews.
- Two staff from the PSCU are assigned to review a sample of 6 to 10 investigations completed since the prior review (3 to 5 cases per reviewer).
- The sample should also include some cases that have gone through the hospitals' peer review committee during the prior 4 months to assess the implementation of the evaluation process at the hospital level.

- A copy of the checklists and worksheets will be provided to the investigator and hospital's Risk Manager for feedback purposes. An aggregate report of the review findings should be provided to the CEO, Risk Manager and Director of Quality Assurance. If the quality of the aggregated findings indicate needed remedial action, a corrective action plan shall be required.
- An annual report of the reviews conducted by the PSCU shall be compiled for each hospital as well as an aggregate state-wide report so that systemic problems can be identified and remedied through training and other forms of guidance.

## **Section I: Speed and Timeliness in the Collection of Evidence**

One of the three most critical values associated with conducting an investigation is speed. This is an important characteristic because evidence may be lost or will decay if there is a delay in its collection.

- 1. Did the hospital's Risk Manager or designee assign the incident to an investigator as soon as possible but no later than 24 hours after the Risk Manager actually received notification of the incident.**

Any incident which requires investigation should begin immediately; if the assignment is delayed, the investigator has less opportunity to collect evidence before possible contamination.

Compare the date and time that the Risk Manager or designee received **verbal or written** notification of the incident with the date and time that the investigator was assigned the investigation. This information should be found in the written investigatory report.

- a. Code this item Yes if the assignment was made within 24 hours or less or there was a compelling reason for the delay noted in the investigatory report.
- b. Code this item No if the investigator was assigned more than 24 hours after the Risk Manager or designee received notification of the incident.

- 2. Did the investigator review the video, visit the scene or take the first interview statement as soon as possible but no later than the next business day from the time s/he received the assignment?**

In deciding how to determine the initiation of an investigation, it is important to identify a characteristic common to all or most investigations. For example, the collection of physical evidence does not occur in every

case; therefore, it would not be the best piece of data to use to measure this standard. However, when beginning an investigation, the investigator will usually need to immediately visit the scene or he/she will begin the collection of testimonial evidence. A video of the incident may also be available for the investigator to review. Given the fact that in almost all incident investigations the most common form of evidence one collects is testimonial evidence, the first statement taken by the investigator is a good proxy measure to use for the “beginning” of the investigator’s activities and an important indicator of the speed with which the investigation is conducted. (Investigators should note that their first interview, when possible, should be with the reporter of the incident.)

To determine when the investigation was initiated, the reviewer should enter both the time and date the investigator visited the scene, reviewed the video (if available), and collected the first interview statement. Compare the date/time that the investigator received the assignment [item 1] with the date and time the investigator visited the scene, reviewed the video, or collected the first interview statement, whichever occurred first. The investigator needs to document a compelling reason for any delay.

- a. Code this item Yes if the result is by the next business day or less, or the investigative report provides compelling justification for a delay.
- b. Code this item No if it was taken more than by the next business day or less after assignment.

**3. Did the investigator complete the final investigative report within 20 calendar days from the date the investigator was assigned?**

In many cases, the investigator may be awaiting additional information that was not available during the 20-day time frame (e.g., autopsy results, a witness who was out of town, etc.). In such cases, this standard will be met if the investigator obtained written approval for an extension from the Risk Manager. The reason for an extension should be documented in the investigative report.

Compare the date/time that the investigator received the assignment [item 1] with the date and time the investigator completed the investigative report.

- a. Code this item Yes if an investigative report was completed within 20 calendar days of the investigator’s assignment [item 1], or there is written approval for an extension.

- b. Code this item No if an investigative report was completed more than 20 calendar days after the discovery of the incident.

## Section II: Thoroughness in the Collection of Evidence

At the onset of an investigation there is no way to know which information will be important in finally determining what happened. An investigator should collect all of the relevant information available so that no decision will be made without as much evidence as possible at the investigator's disposal. To assess the thoroughness of the investigation, this phase will examine whether all available relevant evidence has been collected.

### Part A: Collection of Physical and Demonstrative Evidence

*Worksheet 1: Collecting Physical and Demonstrative Evidence* is used to assist the investigator and reviewers in assessing the thoroughness of the collection of physical and demonstrative evidence. The worksheet should be completed using the instructions on the bottom of the worksheet before coding items 4-6 below.

#### 4. Was all available physical evidence collected?

In determining whether all of the physical evidence available was collected, it is important to make a distinction between the physical evidence that may have existed and those pieces of evidence actually *available* to the investigator during the investigation [e.g., evidence may not be available because it was destroyed or lost prior to the investigator's assignment]. This standard relates only to those pieces of physical evidence which may actually be taken from the scene such as blood stained clothing, any object used as a weapon, bodily fluids, etc. This evidence may have been collected by the HSPD or the State Police and must be noted in the report. Those pieces of physical evidence which are preserved through the creation of demonstrative evidence [e.g., the victim's injury is preserved by taking a photograph which then becomes demonstrative evidence] will be addressed in standard #6 below.

Compare the list of physical evidence that should have been collected and was listed on *Worksheet 1: Collecting Physical and Demonstrative Evidence* with the section in the investigatory report which lists the physical evidence actually collected.

- a. If every piece of physical evidence listed on the worksheet was actually collected by the investigator or the HSPD or State Police as noted in the investigatory report, mark Yes.
- b. If one or more items is missing but there is a compelling reason justifying the investigator's inability to collect the item [e.g., the

evidence was destroyed, lost or no longer available in a state which would provide information about what actually happened], mark Yes.

- c. If one or more items which was appropriate for collection and listed on the worksheet was not collected by the investigator and compelling justification was not provided by the investigator, mark No.
- d. If there was no physical evidence that should have been collected or if any physical evidence would more appropriately be preserved through the creation of demonstrative evidence, mark NA.

**5. Was all physical evidence collected and preserved consistent with the need to establish a “chain of custody”?**

Merely collecting all relevant physical evidence does not speak to all issues associated with thoroughness. It is possible that some of the collection techniques would nonetheless render the physical evidence useless as evidence if not collected and preserved appropriately. In evaluating this standard, the evaluator should consider the following:

- Did the investigator make a documentary record of every item removed, including the date and time collected, where collected and by whom? This would be marked N/A or unknown if collected by the State Police or HSPD.
- Did the investigator place the items in a truly secure location?
- Did the investigator create a record documenting the removal of any item from the secure location, including the reason for the removal, the date and time removed and the person, if any, to whom the material was delivered?
- If someone received the evidence from the investigator, did he or she maintain a documentary record that would similarly account for the security of the evidence while in his or her possession?
- When returned to the investigator, did the investigator place the items in a secure location and update his or her documentary record (see items 1 & 3 above)?

Review the investigatory report to determine how physical evidence was collected and preserved.

- a. If every item collected by the investigator was collected and preserved consistent with the requirements associated with the establishment of the chain of custody, mark Yes.
- b. If one or more items was not collected and preserved consistent with the requirements of the chain of custody **but** there is a compelling reason for the investigator's inability to use appropriate procedures, mark Yes.
- c. If one or more items was not collected and preserved consistent with the requirements of the chain of custody and there is no compelling justification for the omission, mark No.
- d. If there was no physical evidence that should have been collected or it was collected by the State Police or HSPD, mark NA.

**6. Did the investigator collect all available demonstrative evidence?**

Demonstrative evidence is the manner in which an investigator preserves physical evidence. Examples of demonstrative evidence are photographs, diagrams, x-rays and maps of house and building layouts.

Compare the list of demonstrative evidence that needed to be created [listed on *Worksheet 1: Collecting Physical and Demonstrative Evidence*] with the section in the investigatory report which describes the demonstrative evidence actually created.

- a. If every piece of physical evidence listed on the worksheet which required that demonstrative evidence be created was actually created by the investigator as noted in the investigatory report [or was not relevant for collection], mark Yes. [If the demonstrative evidence was of poor quality, i.e., an unintelligible diagram or blurry photograph, the review should note such problems in the comments section.]
- b. If one or more items is missing but there is a compelling reason justifying the investigator's inability to preserve the evidence by creating demonstrative evidence [e.g., the evidence was destroyed, lost or no longer available in a state which would provide information about what actually happened], mark Yes.
- c. If the investigator failed to preserve as demonstrative evidence one or more items listed on the worksheet and compelling justification was not provided by the investigator, mark No.
- d. If there was no demonstrative evidence that should have been created, mark NA.

**Part B: Collection of Testimonial Evidence and Interview Statements**

*Worksheet II: Collecting Testimonial Evidence and Interview Statements* is used to assist the investigator and reviewers in assessing the thoroughness of the collection of testimonial evidence and interview statements. The worksheet should be completed using the instructions on the bottom of the worksheet before coding items 7 and 8 below.

**7. Did the investigator conduct in-person interviews with all potential witnesses, including the alleged victim?**

The most common form of evidence collected by investigators in the course of serious incident investigations is testimonial evidence. Witnesses may include those at or about the scene of the incident -- including alleged victims -- as well as those providing background information. (Note: Telephone interviews are acceptable if that is the only way the interview can be conducted.)

Use the worksheet to list the witnesses that should have been interviewed. Then compare the list of witnesses on the worksheet with that section of the investigatory report which lists the witnesses actually interviewed.

- a. If every person listed on the worksheet was interviewed by the investigator, mark Yes.
- b. If one or more persons was not interviewed but there is compelling reason justifying the investigator's inability to conduct the interview [e.g., the witness was an individual receiving services who lacked communication skills or refused to cooperate] or to conduct an ***in-person*** interview [e.g., travel distance for the investigator would have significantly impeded the speed of the investigation], mark Yes.
- c. If one or more persons on the worksheet was not interviewed by the investigator and there is no compelling reason justifying the omission, mark No.

**8. Did the investigator take an interview statement or its equivalent from each actually interviewed?**

Using *Worksheet II: Collecting Testimonial Evidence and Interview Statements* make a list of all persons who were actually interviewed and from whom interview statements should have been obtained. Compare the list of witnesses on the worksheet with that section of the investigatory report which lists the witnesses from whom statements were actually taken. In those cases where there are compelling reasons not to take a written statement [i.e., the witness was not capable of participating in the statement taking process or the witness refused to participate], then the investigator must preserve the testimonial evidence in an equivalent

manner such as an interview summary or notes or tape recording. A statement or its equivalent must be taken for every witness who was in a position to have relevant information [i.e., was at or near the scene of the incident], even those who say they did not see or hear anything. The fact that they did not see or hear anything is evidence and should be documented in a written statement. For those employees who are found during the interview process to not have been at the scene [e.g., had been reassigned to another unit the day the incident occurred], this information must also be documented in a statement unless facility documentation exists to verify this [e.g., assignment sheet or unit log].

- a. If there is a written statement for every witness identified on the worksheet, mark Yes.
- b. If there is an equivalent form of preserving the testimonial evidence and there was a compelling reason to use this method, mark Yes.
- c. If there is not a written statement or its equivalent for one or more of witnesses, mark No.
- d. If the potential witness was not at the scene at the time of the incident and this is verified by facility documentation, mark NA.

### **Part C: Completeness of Interview Statements**

The criteria contained in *Worksheet III: Completeness of the Interview Statements* are ones which fully document the person's testimony in order to commit the witness to the information s/he has regarding the incident and, if needed, to assist in refreshing their memory or impeaching their testimony if different from that provided in the statement.

Before coding standards 9 and 10 below, review the interview statements [a maximum of 5 statements] against the criteria in *Worksheet III: Completeness of the Interview Statement*. The reviewer should focus on completing criteria #5 and #6.

Criteria #5 (standard 9 on *Checklist #1*): Mark this criterion Yes for a statement on Worksheet III only if there is evidence that the interviewer made an attempt to obtain the information in an ordered manner such that the reviewer is able to understand what happened when. Also mark this criterion Yes for the following two exceptions: 1] an explanation is provided in the investigatory report for not being able to do so [e.g., witness was unable to provide information in a sequential manner or was uncooperative] and, 2] information is added to the end of a statement to clarify the witness' knowledge of what happened, but which does not confuse the reader as to the overall knowledge of the witness.

Criterion #6 (standard 10 on *Checklist #1*): Mark this criterion for Yes for a statement on Worksheet III only if there is evidence that the interviewer made an

attempt to include the following elements in the statements unless an explanation is provided in the investigatory report for not being able to do so [e.g., witness was unable to provide the level of detail needed or was uncooperative].

1. The statement provides the witness' knowledge of the incident including who, what, when, where, why and how.
2. The statement includes information regarding the witness' involvement and the basis of his or her knowledge of the incident.
3. The statement identifies all other persons referred to in the statement at least by name, if not by title.
4. The statement includes sufficient detail such that it is clear that follow-up questions have been asked.

Complete Worksheet III in its entirety first. After doing so, only items 5 and 6 from *Worksheet III* will be coded on *Checklist #1* (standards 9 and 10 respectively) since they are the principle measures of quality of an interview statement.

**9. Did the events described in the statements flow sequentially?**

Use the results of Worksheet III from criterion #5 to reach a single result for standard 9.

- a. If every statement received a Yes for criterion #5 in Worksheet III, code this item Yes (i.e., the events identified by the witness flow in order through time).
- b. If there was an exception for one or more of the statements [e.g., explanation given as to why information could not be given sequentially or the clarity of the statement was not effected] and the other statements had this item marked Yes, then code this item Yes.
- c. If any single statement was marked No on criterion #5, code this item No.

**10. Did the statements contain appropriate detail?**

Use the results of *Worksheet III* from criterion #6 to reach a single result for standard 10.

- a. If every statement received a Yes for criterion #6 in Worksheet III, code this item Yes.
- b. If there was an exception for one or more of the statements [e.g., the investigative report indicates the witness was uncooperative in

- giving the statement] and the other statements have this item marked Yes, then code this item Yes.
- c. If any single statement was marked No on criterion #6, code this item No.

#### **Part D: Collection of Other Documentary Evidence**

*Worksheet IV: Collecting Other Documentary Evidence* is used to assist the investigator and reviewers in assessing the thoroughness of the collection of documentary evidence. The worksheet should be completed using the instructions on the bottom of the tool before coding item standard 11 below.

#### **11. Did the investigator collect all other available relevant documentary evidence?**

Another large source of data during a serious incident investigation is documentary evidence. Relevant information may include assignment sheets, work schedules, home logs, treatment plans, behavior programs [if applicable], and medical records.

Compare the list of available relevant documentary evidence on the worksheet with the section of the investigatory report which lists the documentary evidence actually collected.

- a. If every piece of documentary evidence which the reviewer listed on the worksheet was collected by the investigator, mark Yes.
- b. If one or more pieces of documentary evidence was not collected but there is compelling reason justifying the investigator's inability to collect the evidence, mark Yes.
- c. If any single piece of documentary evidence listed on the worksheet was not collected by the investigator and there is no compelling reason justifying the omission, mark No.

### **Section III: Summary and Analysis of Evidence**

Having collected all the relevant evidence, generally organizations expect an investigator to use the investigatory report as a vehicle to draw conclusions about what actually occurred. The investigator's ability to provide conclusions based on the evidence is enhanced when the person adheres to standards #12 - 15. This process begins with the investigatory question.

#### **12. Was the investigatory question appropriately written based on the nature of the incident?**

A properly framed investigatory question is essential to the clear identification of information relevant to explaining and describing the incident. While the investigator will need to collect information to answer a number of questions, the investigatory question represents the fundamental purpose that drives the investigator's activities. In evaluating this standard, the evaluator should consider the following elements:

- Where possible, was the investigatory question written as an open-ended question (e.g., "How did Fred receive the injury...?", rather than, "Did Jim hit Fred causing the injury...")?
- Did the investigatory question contain the time and location of the incident, if known (e.g., "Did staff member John call Joe "a crazy loon" in the living room at approximately 2:00 p.m. on April 23, 2007?")?
- If the time and location of the incident was not known, did the investigatory question contain a reference to when and where the incident was discovered?
- Did it describe the incident using concrete terms (e.g., avoid such questions as "Did staff member John respond appropriately to Joe's behavior?").
- Does the investigatory question avoid characterizing whether the findings of fact represent a violation of policy or law such as "Did John's failure to follow Joe's behavior plan constitute neglect?"
- Did the investigatory question avoid suggesting certain pieces of information were true which reasonably could be in dispute (e.g., "How did Mary fall to the floor...", rather than "Who pushed Mary to the floor" when the reports alleges that Mary fell as a consequence of a "push")?
- Did the investigatory question represent the reason the investigation was initiated rather than a sub-question (or questions) the investigator would ask during the investigative process? (e.g., "What was the cause of Joe's broken leg...?" rather than "Had John been trained on Joe's behavior plan?").
- Does the question reflect not just the initial report but, where additional information was found, did the investigator more clearly state the question to reflect that information (e.g., investigator obtained information which identified the location and time of the incident not contained in the initial report)?

Review the investigatory question to determine whether it adheres to the criteria noted.

- a. If question did not violate any of the elements above or where a deviation from one of these criteria was minor, mark this item Yes.
- b. Code all others No.

**13. Was the evidence accurately summarized in the “Summary of Evidence” section of the investigatory report?**

Based on all the evidence provided in the investigatory file [including attachments], the reviewer must determine whether the “Summary of Evidence” provides an accurate account of all relevant and available evidence. It is particularly important to avoid characterization of the facts. For example, suppose someone wrote the following in a statement: Mary called Jane a little “bitch” and slapped her across the face. It would not be appropriate to write in the summary as follows: “According to Larry, Mary made derogatory statements to Jane and behaved quite aggressively.”

Compare the investigator’s summary of the evidence against the information collected in the course of the investigation including interview statements and other documentary evidence.

- a. Mark this item Yes if the summary of evidence is an accurate account of all relevant and available evidence.
- b. Mark this item No if the report fails to include relevant information found in the supporting documentation or the information is mischaracterized.
- c. Mark this item NA if the investigator includes information in the “Summary of Evidence” for which there are no supporting documents found in the file to make this comparison.

**14. Was the evidence concisely summarized in the “Summary of Evidence” section of the investigatory report?**

The investigator must provide a concise account of the evidence. A summary will not be considered concise where the investigator includes the entire content of witnesses’ statements in the Summary of Evidence.

Also, in creating the summary the investigator must be mindful that for each piece of information noted, his text should identify the source of that information. For example, the following sentence might appear in the summary: “Fred was in the room when the incident occurred.” However, as it stands the sentence represents a conclusion of fact, not a summary of evidence. For it to appropriately appear in Section III it should read

similar to the following: “According to three witnesses – Larry, Mary and Jane – Fred was in the room when the incident occurred.”

Compare the investigator’s summary of the evidence against the information collected in the course of the investigation including interview statements and other documentary evidence.

- a. Mark this item Yes if the summary of evidence is a concise account of all relevant and available evidence.
- b. Mark this item No if the summary is not concise.

**15. Was the available evidence analyzed and weighed in drawing conclusions in the “Analysis” section of the investigatory report?**

It would not be sufficient for someone who writes an investigatory report to merely summarize the evidence and state his or her findings. In drawing a conclusion, the investigator should refer to specific evidence, how it was weighed and, where appropriate, the credibility of witnesses. In reviewing this aspect of the investigator’s work it is important that the reviewer not assess the investigator’s work negatively merely because s/he does not agree with the analysis. However, the reviewer should make comments regarding any problems noted with the process of the analysis or its plausibility.

Review the section of the investigatory report which contains the investigator’s analysis and findings.

- a. Mark this item Yes if the investigator provides information about how s/he weighed evidence in reaching a finding.
- b. Mark this item No if there is no analysis or weighing of the evidence.

**16. Were the conclusions supported by the summary and analysis of evidence?**

In evaluating an investigator’s conclusions, we again have to be careful not to assess the person’s work merely because the person drew a conclusion with which we might disagree. The critical issue, however, is whether there is evidence on which a reasonable person can draw a conclusion. However, in evaluating this standard, the evaluator need not accept any conclusion as supported by facts where it clearly violates the nature of the evidence presented in the report’s summary and analysis of evidence.

Compare the findings the investigator reached with the summary of the evidence and its analysis. Mark this item Yes if the investigator's findings are supported by the summary of evidence and analysis. Mark this item No if the investigator's findings are not supported by the summary of evidence and analysis. Mark NA if either standard 13 is marked No or NA or 15 is marked No.

**17. Did the investigatory report contain recommendations, where warranted, for preventing the recurrence of this incident or similar incidents?**

Many investigations will present the facility with an opportunity to identify harm or potential harm to individuals and implement preventive or corrective action. In such cases, the investigative report should contain **general** recommendations to address any problems identified during the course of the investigation. These may include but are not limited to the need for additional training for staff, the development or revision of facility policies or procedures, or referral to the treatment team or a specific discipline to review the treatment plan of an individual. It should be noted that not all investigations would necessitate corrective action. Such cases include those unsubstantiated cases where the incident did not occur as reported or where the investigative findings were unsubstantiated or inconclusive and the investigation did not uncover any issues that placed individuals at risk or potential risk.

Review the section of the investigatory report which contains the investigator's recommendations.

- a. Mark this item Yes if the investigative report contains recommendations for preventing future occurrences of this incident or similar incidents.
- b. Mark this item No if recommendations are warranted and none are contained in the report.
- c. Mark this item NA if recommendations were not warranted based on the investigative findings.

#### **Section IV: Objectivity**

**18. Based on the nature of the evidence collected and the manner in which it was collected, did the investigator maintain his or her objectivity when conducting this investigation?**

In addition to speed, timeliness and thoroughness, objectivity is another key principle of conducting investigations of incidents. In evaluating this standard, the evaluator should look for evidence such as:

- Does the investigator characterize any witness or facts in either disparaging or superlative terms or provide commentary beyond that which merely describes or analyzes the person's conduct?
- Does the investigator reveal any possible personal biases or values which would interfere with his or her objectivity with regard to the persons involved or the circumstances surrounding the incident?

Review the information in the investigatory report including attachments to determine whether there is any evidence that the investigator lacked objectivity based on the possible sources of bias noted above.

- a. Mark this item Yes If there is no evidence of bias in the report.
- b. If there is any single instance of bias, mark this item No.

## **Section V: Appropriateness of Investigations**

The purpose of this phase of the review process is to determine that all incidents that require investigation according to policy are being investigated. Each hospital shall draw a random sample of 10% of all incidents with injuries occurring during each month with a maximum sample of 30 incidents. *Worksheet V: Appropriateness of Investigations* shall be used to list each incident drawn for the sample and determine whether an investigation was actually conducted for those that require one according to policy.

- a. Enter the incident report number, date of incident and type of incident for each incident reviewed.
- b. In the column titled "Investigation Required" enter Yes if the incident should have been investigated according to Division policy and No if it did not require an investigation.
- c. For only those that required an investigation, in the column titled "Investigation Conducted", enter Yes if an investigation was conducted and No if one was not. This information should be available in the hospital's investigative log.
- d. To obtain the percent of incidents appropriately classified for investigation, divide the number of incidents that required an investigation and were actually investigated by the total number of incidents which required one (i.e., all those marked Yes in the column, "Investigation Required).

Note: To determine if a facility is investigating incidents not required by policy (i.e., over-investigating), those incidents coded NO under the column, "Investigation Required" could also be checked against the investigative log. If an incident is coded No for "Investigation Required", but the log indicates that the incident was investigated, this incongruence will indicate that this was an unnecessary investigation. The same computation described in item (d) above could be obtained to determine the extent that incidents are being inappropriately classified as requiring an investigation.

### Checklist #1: Review of Incident Investigations

Case \_\_\_\_\_ Investigator \_\_\_\_\_ Reviewer \_\_\_\_\_

Description of the incident:

**Y = Yes**

**N = No**

**NA = Not applicable (NA can not be used as a code for those items where the NA column is shaded)**

Standard	Y	N	NA	Comments
<b>Section I. Speed and Timeliness in the Collection of Evidence</b>				
1. Did the hospital's Risk Manager or designee assign the incident to an investigator as soon as possible but no later than 24 hours after the Risk Manager actually received notification of the incident?  Date/time Risk Manager notified: _____  Date/time investigator assigned: _____				
2. Did the investigator review the video, visit the scene or take the first interview statement as soon as possible but no later than the next business day from the time s/he received the assignment?  Date/time of video review: _____  Date/time of visit to the scene: _____  Date/time of first interview statement: _____				
3. Did the investigator complete the final investigative report within 20 calendar days from the date the incident was assigned?  Date of final report: _____				

Standard	Y	N	NA	Comments
<b>Section II A. Thoroughness Collection of Physical and Demonstrative Evidence (Worksheet I)</b>				
4. Was all available physical evidence collected?				
5. Was all physical evidence collected and preserved consistent with the need to establish a "chain of custody"?				
6. Did the investigator collect all available demonstrative evidence?				
<b>Section IIB. Thoroughness Collection of Testimonial Evidence and Witness Statements (Worksheet II)</b>				
7. Did the investigator conduct in-person interviews with all potential witnesses, including the alleged victim?				
8. Did the investigator take a witness statement or its equivalent from each witness actually interviewed?				
<b>Section IIC. Completeness of Witness Statements (Worksheet III)</b>				
9. Did the events described in the statements flow sequentially?				
10. Did the statements contain appropriate detail?				
<b>Section IID. Thoroughness Collection of Other Documentary Evidence (Worksheet IV)</b>				
11. Did the investigator collect all other available relevant documentary evidence?				

Standard	Y	N	NA	Comments
<b>Section III. Summary and Analysis of Evidence</b>				
12. Was the investigatory question appropriately written based on the nature of the incident?				
13. Was the evidence accurately summarized in the "Summary of the Evidence" section of the investigatory report?				
14. Was the evidence concisely summarized in the "Summary of the Evidence" section of the investigatory report?				
15. Was the available evidence analyzed and weighed in drawing conclusions in the "Analysis" section of the investigatory report?				
16. Were the conclusions supported by the summary and analysis of evidence?				
17. Did the investigatory report contain general recommendations, where warranted, for preventing the recurrence of this incident or similar incidents?				
<b>Section IV. Objectivity</b>				
18. Based on the nature of the evidence collected and the manner in which it was collected, did the investigator maintain his or her objectivity when conducting the investigation?				





## Completeness of Witness Statements

Case \_\_\_\_\_ Investigator \_\_\_\_\_ Reviewer \_\_\_\_\_

Evaluation Question	Initials of Witnesses							Comments
1. Does the statement identify the case for which this activity took place?								
2. Is the time and place of the interview recorded on the statement?								
3. Is the name of the interviewer recorded on the statement?								
4. If the witness is an employee, does the statement include his/her title and work location? If the witness is not an employee, does the statement contain identifying information about that person? Address; affiliation; relationship to principals, etc.?								
5. Do the events described in the statement flow sequentially? <b>If not, give an example.</b>								
6. Does the statement contain appropriate detail? <b>If not, give an example.</b>								
7. If any part of the text is out of order - e.g. margin notes, cross outs -- did the witness initial and date each such change?								
8. Were all parts of the statement, including any changes, written in ink?								
9. If the final statement was typed, was the original draft, including the witness's signature, attached?								
10. Did the witness sign and date the statement?								





