

alphabee PRO

Incident Reports & Serious Occurrence Reports

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This presentation is for informational purposes only and does not constitute clinical or legal advice. Follow up with a BCaBA/BCBA/BCBA-D is recommended to develop a specific plan for your child or student.

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Objectives

Main Objectives

- Purpose
- When to write an IR or SOR
- How to write an IR or SOR
- Debriefing
- Approval process
- Examples

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Confidentiality Agreement

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- Record any part of this presentation for personal or professional use
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Purpose

- Serious occurrence and incident reporting are tools which provide AlphaBee an effective means of monitoring the appropriateness and quality of service
- Monitoring includes ongoing review of AlphaBee practices, procedures, and training needs

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Purpose

- IRs, SORs, shift logs and communication notes/ books are data
- They can be reviewed at a future date to:
 - Help determine the function of a behaviour
 - Identify behaviour patterns
 - Justify funding
 - Used if there is an investigation
 - Legal documents

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Incident Reports (IRs)



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What Requires an IR?

- PB that is new, more intense and no protocol
- Client injury
- Property damage
- Staff injury

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Serious Occurrence Reports (SORs)

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Serious Occurrences

- Use IR report in oasis
- Implications for:
 - Reporting timelines
 - What has to be included in the report
 - Who to notify
- AB not required to report to MCCSS but we do require staff to document following MCCSS guidelines

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Serious Occurrences

<ol style="list-style-type: none"> 1. Death of a client 2. Serious injury 3. Serious illness 4. Serious individual action 5. Restrictive intervention 	<ol style="list-style-type: none"> 6. Abuse or mistreatment 7. Error or omission 8. Serious complaint 9. Disturbance, service disruption, emergency situation, or disaster
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Ministry of Children, Community and Social Services (MCCSS) Serious Occurrence Reporting Guidelines, 2019

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General Requirements

- Location, date and approximate time of incident
- Date and time of becoming aware of incident (if different than date and time of incident)
- Individuals involved
- Category and subcategory of the SO event
- Who was notified
- Detailed description of the SO

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1. Death

<p>Level 1: All client deaths</p> <p>Level 2: N/A</p>	<p>Subcategory:</p> <ul style="list-style-type: none"> • Suicide • Violence/homicide • Accidental • Known illness or other natural cause • Unknown cause 	<p>Also note:</p> <ul style="list-style-type: none"> • Apparent cause of death • Who was present at the time/ any witnesses
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2. Serious Injury

<p>Level 1: Life-threatening injury, injury cause by the service provide, injury requiring EMS</p> <p>Level 2: All other serious injuries</p>	<p>Subcategory:</p> <ul style="list-style-type: none"> • Accidental • Aggressive behaviour • Self-harm • Unknown cause • During physical or mechanical restraint or placement in de-escalation room 	<p>Also note:</p> <ul style="list-style-type: none"> • How sustained • Hospital taken to • Who was present at the time/ any witnesses • First aid or medical care
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3. Serious Illness

<p>Level 1: Life-threatening illness, illness requiring EMS</p> <p>Level 2: All other serious illnesses</p>	<p>Subcategory:</p> <ul style="list-style-type: none"> • Mental health • Communicable disease • Other disease, illness, or infection • Unknown cause 	<p>Also note:</p> <ul style="list-style-type: none"> • Type of illness if known • How sustained if known • Hospital taken to • Who was present at the time/ any witnesses • First aid or medical care
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4. Serious Individual Action

<p>Level 1: Suicidal, assault, contraband, inappropri use of tech, unusual absence, serious charges, relinquishment of care</p> <p>Level 2: All other serious individual action SOs</p>	<p>Subcategory:</p> <ul style="list-style-type: none"> • Suicidal behaviour • Alleged, witnessed or suspected assault • Contraband/ safety risk • Inappropri use of tech • Unusual or suspicious absence • Serious charges • Relinquishment of care 	<p>Also note:</p> <ul style="list-style-type: none"> • Was there injury • Hospital taken to if applicable • Any witnesses • Were police called, if applicable • Others, specific to sub-category
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5. Restrictive Intervention

Level 1:

Contravenes MCCSS, resulted in physical or emotional injury or harm, resulted in EMS treatment, was administered by an unauthorized person

Subcategory:

- Physical restraint
- Mechanical restraint
- Secure de-escalation (or secure isolation/ confinement time-out)

Also note:

- Reason used/ Imminent threat that led to use
- Any injuries
- Less intrusive measured used first
- Who was involved
- Monitoring and debriefing
- Type of restraint used

Level 2:

All other restrictive intervention SOs

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6. Abuse or Mistreatment

Level 1:

Imminent threat to health, safety or well-being, a current staff is implicated, threats or harassment from a human trafficker

Subcategory:

- Physical abuse
- Emotional harm
- Neglect
- Exploitation (e.g. human trafficking, financial abuse)
- Sexual abuse

Also note:

- Who allegations are made against
- Who allegations were disclosed to
- When the alleged incident occurred
- Was medical attention needed
- Who it was reported to (e.g. CAS, police)

Level 2:

All other abuse or mistreatment SOs

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7. Error or Omission

Level 1:

Medication error, improper detention/ commitment/ release, or breach/ potential breach or privacy and/or confidentiality

Subcategory:

- Medication error
- Improper detention, commitment or release
- Privacy breach (real or potential)

Also note:

- Date and time of indecent
- Who was involved
- Others, specific to sub-category

Level 2:

All other error and omission SOs

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8. Serious Complaint

Level 1:

Complaint is about a service provider staff, director or owner being charged or arrested for a crime that may affect or has affected clients

Level 2:

All other serious complaint SOs

Subcategory:

- Rights-based (privacy or human)
- Service-related
- About an individual receiving service
- Other

Also note:

- What is the complaint
- Who is making the complaint
- Who is it against
- How was it reported

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9. Disturbance, Service Disruption, Emergency Situation or Disaster

Level 1:

Danger to community, site evacuation, site lockdown, police involvement

Level 2:

All other disturbance, service disruption, emergency situation or disaster SOs

Subcategory:

- Water quality
- Fire
- Flood
- Natural disaster
- Power outage (that disrupts services)
- Gas leak
- Carbon monoxide
- Abduction
- Infectious outbreak
- Riot
- Stand-off
- Hostage taking
- External threat (e.g. bomb)
- Other

Also note:

- Who was involved
- Any injuries
- Who was notified
- Any property damage
- Evacuation details

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How to Write IRs/SORs



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How to - Where?

Oasiis

IT scheduled - in oasiis, under the shift the incident occurred

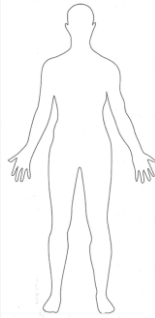
Person not scheduled- submit word document to the client's ST and the ST will upload



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Body Sketch

- Included with incident report in Oasiis
- Can be used for marks that occurred during and outside of session
- Indicate body part and what you saw. Upload picture if possible



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How to - General

- Approximate time
- Location(s)
- Initials to refer to client and staff
- Write in 3rd person, past tense
- Antecedents
- Note injury on body sketch
- First aid procedures, if applicable
- Objective and descriptive

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How To - When CPI Holds/Restraints Are Used

- Any **less intrusive interventions** used before the restraint/hold. For example:
 - AB did not utilize his self-regulation coping strategies when requested by this writer
 - AB was prompted to sit and put his hands down to complete a puzzle
- Include the **type, duration and level of hold** used (if applicable). For example:
 - Children's control, medium level hold for a total of 5 minutes from approx. 1:05-1:09pm

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How To - Who Is Notified

Include who was notified:

- **Incident Report:** Parent and ST
- **Serious Occurrence:**
 - Level 2 - Parent, ST, CS, and Program Manager
 - Level 1 - Oncall (ensure you speak to a person live, voicemail not sufficient) and they will notify the parent, ST, CS, CEO and Program Manager

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How To - Timelines



- **Incident Reports**
Within 12 hours of the incident
 - **Serious Occurrences**
Within 1 hour (Level 1) or 12 hours (Level 2) of the incident
- Note: oasiis locks shifts after 24 hrs

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Debriefing

A graphic for a debriefing session. On the left, five colorful speech bubbles are arranged in a semi-circle, each containing a question: 'WHERE' (yellow), 'WHAT' (blue), 'WHEN' (pink), 'WHY' (orange), and 'WHO' (red). A green bubble with 'HOW' is partially visible behind the others. To the right of these bubbles, the word 'Debriefing' is written in a simple, black, sans-serif font.

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Debriefing

- Structured review of the experience
- Opportunity to learn
- Identify any follow up responses

Note: debriefing is not a replacement for other debriefing services, counseling or medical intervention by qualified professionals (www.crisisprevention.com)



An illustration showing a man with a beard and a woman talking. The man is on the left, wearing a striped shirt, and is holding a document. The woman is on the right, wearing a green top. There are speech bubbles above them, indicating a conversation.

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Approval Process



Approval Process

A graphic with a dark blue background on the left and a white background on the right. The text 'Approval Process' is written in white on the blue background. On the right, there are two hand icons: a thumbs-up and a thumbs-down, both in black outline.

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Approval Process

- For Incident reports the ST will review the report for approval.
 - If denied the ST will provide feedback and require edits until approved
- For Serious Occurrence reports the ST will complete debriefing notes and note who was contacted (i.e. parent, instructor, etc.)

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Examples

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Example 1

Antecedent	Behaviour	Consequence
Justin was eating dinner.	Justin began to throw his food	I told Justin to stop throwing his food and he did.

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Example 1 – Revised

Antecedent	Behaviour	Consequence
At 6:00 pm, client JF was eating dinner at the table in the kitchen	At 6:10 pm JF started to scream very loudly in 5 second intervals and throw his food at this writer.	This writer told JF to “Stop screaming or you will have to eat alone, away from other people”. JF sat down quietly and continued to eat his dinner.

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Example 2

Antecedent	Behaviour	Consequence
At 3pm Lisa grabbed another client's cookies at snack. IT told Lisa to give them back.	Lisa attempted to kick and hit this IT's leg. She flopped to the floor and bumped her head.	Lisa was instructed to sit in her chair. The chair was pulled back from the table so she could not reach other clients' food.

Once Lisa was calm for 5 seconds and followed 3 high probability instructions her chair was pushed into the table and she continued eating. No visible injuries to her head were noted. An Incident Report was completed. Lisa's senior therapist and mother were notified.

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Example 3

At approximately 2:15 pm, client DD was playing musical chairs with 3 other peers in the AlphaBee centre, common area. While DD was skipping around the chairs she tripped on her own feet and struck the right side of her forehead on a chair. DD began to cry, and staff PP verbally supported DD and comforted her in a chair. Staff PP performed a visual body scan and there were no visible injuries.

First aid was applied to her forehead (ice was placed on the forehead for 2-5-minute intervals). DD stopped crying at approximately 2:25 pm and continued to play with her peers and complete the activity. DD and her injury were monitored by staff PP for the remainder of the day without further incident.

DD's parents and the Senior Therapist were notified of this incident.

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Example 4

At approximately 1pm, client SS arrived on site at the AlphaBee Centre (100 the East Mall Etobicoke). She was asked by this writer to use a different coat hook other than her own due to ongoing renovations at the AlphaBee Centre.

At approximately 1:05 SS started to cry and kick the wall and this writer's left leg with her left foot. This writer gave space and blocked with both legs as outlined in the CPI protocol. SS also attempted to bite this writer's right arm several times during this time.

SS continued to display aggression and did not use her self-regulation coping skills when requested to by this writer. This writer and staff BB utilized the team control position as outlined in the CPI protocol at approximately 1:15pm. This writer maintained the left side of SS and BB maintained the right side.

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Example 4 (continued)

At approximately 1:20pm this writer and staff BB disengaged the team control hold, however SS continued to display kicking at this writer. For safety reasons the team control was utilized with SS again.

At approximately 1:23pm SS displayed calm behaviour (10 seconds of calm and complied with 3 instructions), thus the team control position was disengaged. SS completed 2 neutral activities (puzzles) and hung her coat up on a different coat hook.

There were no visible injuries sustained by any parties.
The Senior Therapist and Program Manager were notified of the incident.
Total duration of episode of challenging behaviour - 18 minutes
Total duration of hold - 8 minutes

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References

Ministry of Children, Community and Social Services (MCCSS) Serious Occurrence Reporting Guidelines, 2019

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