PATHWAYS ABILITIES SOCIETY

PROCEDURE: INCIDENT REPORTING

Applies to: All Personnel

Effective/Revision Date:

1993 April 28, 2003 September 4, 2003 November 22, 2004 June 27, 2005 September 6, 2006 December 4, 2006 May 28, 2007 October 2, 2008 December 17, 2008 April 19, 2010 September 12, 2011 December 7, 2011 November 2, 2012 April 10, 2014 July 29, 2014 January 26, 2015 May 25, 2015 June 9, 2015 June 16, 2015 October 26, 2015 January 25, 2016 March 29, 2016 January 26, 2017 March 26, 2018 September 23, 2019 October 18, 2019 June 29, 2020

February 22, 2021

There are two types of incident report forms. Frontline staff is responsible for completing one of the two. A supervisor or manager or their designate complete the second. *Refer to the policy to ensure the correct form is completed. All forms must be completed and submitted prior to staff leaving their shift.

- 1. A ShareVision "Incident Report" (electronic).
- 2. An Interior Health "Community Care Licensing Residential Care Incident Report" which is completed by the supervisor or designate (electronic).

When a serious incident occurs, staff notifies the supervisor, manager or executive director immediately and completes the specified form in ShareVision and/or as outlined below. Serious incidents are any allegations of abuse, neglect, injuries resulting in the person requiring medical attention or potential medical attention and unexpected death and suicide.

ShareVision "Incident Report"

- Staff:
- Determines if it is a serious incident and notifies the supervisor, manager or executive director immediately.

- -Inputs the information in the ShareVision Incident Report form ensuring <u>all</u> appropriate fields are completed including proper grammar, spelling and punctuation.
- Completes a separate incident report for all parties involved.
- Notifies the supervisor or manager that the form has been <u>completed prior</u> to leaving their shift.
- Residential staff is required to email the executive director and supervisor or designate notifying them that a report has been completed.
- Reviews previous reports to remain informed.

2. The supervisor or manager:

- Determines if it is a serious incident and notifies the executive director immediately.
- Reviews the form(s) and ensures all areas of the form are accurately and correctly completed including proper grammar, spelling and punctuation.
- Emails the executive director or designate to notify them that an Incident Report has been completed prior to leaving their shift.
- Contacts the caregiver or family if the individual had a fall, injury or they were the recipient of physical aggression and are unable to effectively communicate they were harmed or felt threatened. If the primary contact does not answer the phone and there is a relevant secondary contact listed, then the secondary contact is notified.
- Completes all follow up required.
- Ensures staff knows whom to notify in their absence.

3. The executive director or designate:

- Reviews the report.
- Determines if the person is a CLBC client and if the incident is reportable to CLBC.
- Determines if it is a serious incident and calls CLBC at 250-712-3610 or, if it is after hours, the Provincial Centralized Screening team at 1-800-663-9122.
- If the report, as outlined in the policy, is reportable to CLBC (some incidents though reportable via fax, do not require a telephone call as outlined above), prints a copy of the report and signs the report in the appropriate area (beside the Executive Director notification). The report is faxed to the local office at 250-712-5426 within 24 hours of the incident occurring.
- If it is a non-critical incident, reviews and completes their portion of the report.
- Brings a copy of reports faxed to CLBC to the monthly leadership meeting at which time all reports are reviewed for further analysis, strategy development, follow up and a potential referral to the Occupational Health and Safety (OH&S) committee in order to prevent reoccurrence.
- Inputs the results of the leadership meeting review on or in the Incident Report.
- Provides the board of directors with a copy of the quantitative summary of the incident reports for the year in June.
- 4. The leadership team members complete the follow-up requirements identified at the leadership team review.
- 5. The Activity Quality Assurance Manager (AQAM):
- If required, provides the OH&S committee with a copy for analysis, strategy development and follow-up to prevent reoccurrence and ensures the recommendations are implemented and the results documented.

- In the month of April provides the executive director and leadership team with a quantitative summary of the incident reports for the year.

Interior Health "Community Care Licensing Residential Care Incident Report" 1. Staff:

- Determines if it is a serious incident and notifies the supervisor, senior residential support worker, manager or executive director immediately.
- -Inputs the information in the ShareVision Incident Report form ensuring <u>all</u> appropriate fields are completed including proper <u>grammar</u>, <u>spelling and punctuation</u>.
- Completes a separate incident report for all parties involved.
- Notifies the supervisor or senior residential support worker or manager that the form has been <u>completed prior</u> to leaving their shift. If the incident occurs on a Friday, Saturday, Sunday or holiday and the person cannot get a hold of the supervisor or a senior residential support worker, the staff is to call the on-call telephone.
- Residential staff is required to email the executive director and supervisor or designate notifying them that a report has been completed.
- Reviews previous reports to remain informed.
- 2. The supervisor or senior residential support worker or the person on-call:
- Reviews the ShareVision Incident Report form and determines if the incident is reportable to Interior Health.
- If the incident is reportable they complete the Community Care Licensing Residential Care Incident Report on-line at

https://www.interiorhealth.ca/YourEnvironment/RCFacilities/IncidentReporting/Pages/RCIncidentReportForm.aspx, prints a copy before submitting and gives it to the executive director or designate and notifies them that an additional report has been completed.

- 3. The supervisor or senior residential support worker:
- Completes all follow up required.
- Ensures staff knows whom to notify in their absence.
- 4. The executive director or designate:
- Reviews the report.
- Determines is the incident is reportable to CLBC. If so faxes a copy of the ShareVision report and a copy of the licensing report to CLBC.
- Brings a copy of the report to the monthly leadership meeting for further analysis, strategy development, follow up and a potential referral to the OH&S committee in order to prevent reoccurrence.
- Inputs the results of the leadership meeting on the Incident Report.

Home Share and Respite Incident Reporting

- 1. The Home Share Provider (HSP) or Respite Provider (RP):
- Determines if it is a serious incident and notifies the home share manager (HSM) or executive director immediately.
- Completes either a paper version of CLBC Critical Incident form and submits the form to the HSM for review or provides the HSM verbally with the information and they input the information in the ShareVision Incident Report.

2. The HSM:

- Inputs the information in the ShareVision Incident Report form ensuring all appropriate fields are completed, corrects any spelling and punctuation errors from the original paper form.
- Completes a separate incident report for all parties involved if required.
- Notifies the executive director or designate that the form has been completed prior to leaving their shift.
- Reviews previous reports and makes recommendations as required.
- Files the original form signed by both HSP or RP and HSM in individual's binder.
- Ensures the HSP or RP knows who to notify in their absence.
- 3. The executive director or designate:
- Reviews the report.
- Determines if the person is a CLBC client and if the incident is reportable to CLBC.
- Determines if it is a serious incident, calls CLBC at 250-712-3610 or, if it is after hours, the Provincial Centralized Screening team at 1-800-663-9122
- If the report, as outlined in the policy, is reportable to CLBC (some incidents though reportable do not require a telephone call as outlined above), prints a copy of the report, signs the report in the appropriate area (beside the Executive Director notification) and faxes the report to the local office at 250-712-5426 within 24 hours of the incident occurring.
- If it is a non-critical incident, reviews and completes their portion of the report.
- Brings a copy of reports faxed to CLBC to the monthly leadership meeting at which time all reports are reviewed for further analysis, strategy development, follow up and a potential referral to the OH&S committee in order to prevent reoccurrence.
- Inputs the results of the leadership meeting review on or in the Incident Report.
- Provides the board of directors with a copy of the quantitative summary of the incident reports for the year in June.
- 4. The leadership team members complete the follow up requirements identified at the leadership team review.
- 5. The Activity Quality Assurance Manager (AQAM):
- If required, provides the OH&S committee with a copy for analysis, strategy development and follow-up to prevent reoccurrence and ensures the recommendations are implemented and the results documented.
- In the month of April, provides the executive director and leadership team with a quantitative summary of the incident reports for the year.