


Incident/Serious Occurrence Reporting

<p>SECTION: Supports and Services</p> <p>DEPARTMENT: Quality</p>	<p>EFFECTIVE DATE: November 1990</p> <p>DATE LAST REVISED: February 2022</p>	<p>Approved by:</p>  <p>Chief Executive Officer</p>
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POLICY STATEMENT

Kerry's Place Autism Services (Kerry's Place) is committed to promoting and protecting the health, safety and welfare of the persons being supported by the agency. When an incident involving a person supported by Kerry's Place takes place, all appropriate actions will be taken to: document the incident, mitigate the impact of the incident, and prevent the reoccurrence of similar incidents.

This policy is to be used with the MCCSS Serious Occurrence Reporting Guidelines.

Purpose


Adherence to this procedure will ensure that incidents are documented accurately and reviewed by the manager to identify the seriousness of the situation as well as which incident will need to be escalated to a serious occurrence report. The ultimate purpose is to take appropriate actions to:

- Mitigate the impact of the incident;
- Prevent future similar incidents from occurring through changes to the environment, behaviour intervention, employee training, and implementing other supports, controls or actions.

Scope

This procedure defines the reporting requirements for any activities relating to a person supported by Kerry's Place or site which are included in the definition of a Serious

Incident/Serious Occurrence Reporting

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Occurrence by the Ministry of Children, Community and Social Services (MCCSS), or an incident as defined by Kerry's Place.

Roles and Responsibilities

Employee:

- To ensure incidents, which fall within the criteria outlined within the policy, are documented accurately in the incident reporting form.
- To become familiar with types of incidents and understand when they may be escalated and need to be reported as a serious occurrence.

Direct Supervisor:

- To ensure employees receive training on how to identify an incident based on the criteria outlined, and how to complete an incident report. To ensure employees work collaboratively with one another to prevent future occurrences of the incident.

Communication:


The Policy and Procedure will be communicated to new hires during orientation and then at team meetings as required. This policy and procedure will be available on ADP.

Standard/Procedure

Press Ctrl+Click to follow link and quickly find the procedure you are looking for:

Rationale	3
Examples of an Incident	3
Reporting an Incident	4

Incident/Serious Occurrence Reporting

<p>SECTION: Supports and Services</p> <p>DEPARTMENT: Quality</p>	<p>EFFECTIVE DATE: November 1990</p> <p>DATE LAST REVISED: February 2022</p>	<p>Approved by:</p>  <p>Chief Executive Officer</p>
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[Definitions of a Serious Occurrence](#)..... 6

[Serious Occurrence Reporting](#)..... 6

[Elevating the Use of a Physical Restraint to Serious Occurrence Level](#)..... 7

Rationale


The Ministry of Children, Community of Social Services (MCCSS) has issued guidelines in 2019 (please see MCCSS Serious Occurrence Reporting Guidelines) involving the definition and direction of occurrences deemed to be of a serious nature enough to warrant direct reporting to them by all providers of services that are funded, licensed or operated by MCCSS and are responsible for delivering services that promote the health, safety and welfare of the people who are being supported (i.e., children and adults).

Examples of an Incident

The following is a list of all incident types defined by Kerry’s Place. Some incidents may be elevated to be documented as a Serious Occurrence should it fit the criteria outlined in the reporting guidelines. The type of incident is further clarified by the subheadings found in the Incident Reporting Form. An incident may be:

- Injury and/or illness to person supported (e.g., cut themselves while cutting an apple, fell and was injured, high fever and was taken to emergency).
- A behaviour that has re-emerged (e.g., has occurred in the past) or a behaviour never observed such as, but not limited to, act of physical, verbal, self-injurious behaviour or environmental aggression.

Incident/Serious Occurrence Reporting

<p>SECTION: Supports and Services</p> <p>DEPARTMENT: Quality</p>	<p>EFFECTIVE DATE: November 1990</p> <p>DATE LAST REVISED: February 2022</p>	<p>Approved by:</p>  <p style="text-align: center;">Chief Executive Officer</p>
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- The use of physical restraint, secure isolation or contingent time out in response to challenging behaviour – not currently included in a Behaviour Support Plan.
- Alleged or suspected abuse
- Elopement
- Community-based complaint regarding a person supported
- A Medication Incident - includes errors and refusals • Site specific occurrence
- Any crisis situation incidents
- Other (e.g., family member reports an incident to staff)

Reporting an Incident


Immediate steps must be taken to aid or protect the persons impacted by the incident. Any persons (employee or persons supported) having knowledge of the incident should be interviewed in order to gather all information regarding the actual or alleged event.

If on the basis of the inquiry, there is reason to suspect that a person supported has been abused; the Kerry's Place Policy on Abuse must be followed, in addition to this procedure.

If there is a medication error; the Kerry's Place policy on medication administration must be followed, in addition to this procedure. An Incident Report is to be completed in its entirety on the Kerry's Place electronic database by the end of the shift.

Should a family member wish to report an incident, staff will document within the incident report and follow the process outlined within the policy.

Incident/Serious Occurrence Reporting

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Note: All behaviours targeted for reduction within a persons supported behaviour support plan are not to be tracked on an incident report unless otherwise identified by the clinical team. When an intrusive measure is used, the Intrusive Measures Form on EMHWare must also be completed.

The Manager shall review the Incident Report within 48 hours of the incident and may require further clarification from the employees involved. Once the incident report is reviewed by the manager they will assess whether a SOR needs to be submitted. The BT will also be notified for any incidents clinical in nature in order to monitor cases that may require clinical support. Should the manager require additional clarification on submitting a SOR, the Director and/or RED will be informed in order to make the final decision.

Note: Incident reports and/or serious occurrence reports that are clinical in nature will have a follow up form completed within 48 hours by the Behaviour Therapist and/or Clinical Supervisor. A quarterly summary of these incidents will be provided to the Vice President Clinical Supports and Services (VPCS) to identify any trends or patterns.

Communicating to Families: The manager will notify the families of any incident pertaining to their loved one within 48 hours upon review of the incident. The account of the incident as well as next steps to mitigate future occurrences will be shared with the families and documented in the persons electronic file (i.e., EMHware).

Incident/Serious Occurrence Reporting

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Definitions of a Serious Occurrence

The definitions and descriptions of Serious Occurrences can be found in the Ministry of Children, Community and Social Services (MCCSS) Serious Occurrence Reporting Guidelines, 2019. When deciding if an incident is a Serious Occurrence the guidelines should be reviewed in order to obtain as much clarity of understanding as possible. Each Region will have a Designated Authority (i.e., Regional Executive Director) available who will clarify detail required within Serious Occurrence Reporting.


Serious Occurrence Reporting

Appropriate steps shall be taken to address current and/or continuing risks to the person's supported health or safety. Where an Incident is escalated to a Serious Occurrence, the following steps must be taken:

The full name of the employee completing the form needs to be recorded in the appropriate location. If employees are involved in an incident that warrants a Serious Occurrence to be completed, the first name initial and the last name initial are all that should be used. Regional Executive Director (RED) name and Board Chair names need to be completed on the serious occurrence form. See guidelines for further information.

In most cases where a person supported is involved in a Serious Occurrence, his/her Substitute Decision Maker (SDM) will be notified as soon as possible or within 24 hours of the Serious Occurrence unless the person is 18 years of age or over, is able to provide informed consent, and has requested that no notification be given. Notification options are to be arranged with the person acting on behalf of the person supported in advance of a crisis

Incident/Serious Occurrence Reporting

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situation. If the person supported does not provide consent, then the person acting on behalf of the person supported will not be notified. If the person supported does not have the capacity to provide informed consent, then the contact person is notified.

Employees delegated to submit a serious occurrence report through the Serious Occurrence Reporting and residential licensing (SOR-RL) on-line tool are required to complete the on line training - <https://www.iaccess.gov.on.ca/SORRLTraining/en/index.htm>.

Note: Annually, a summary and analysis report of all serious occurrences is provided to the Ministry upon their request. This report is completed by the Department of Clinical Supports and Services and after review and feedback from regional management, is submitted to the Ministry.


Quarterly SOR reports are reviewed by the clinical department and data is compiled and trended for analysis with the intent to mitigate, prevent and reduce the frequency of similar types of incidents.

Elevating the Use of a Physical Restraint to Serious Occurrence Level

The use of a physical restraint shall be reported to the ministry as a serious occurrence only when:


- A physical restraint was used on a child or young person who is receiving a service. Any use of a physical restraint on a child or young person while receiving a service is to be reported as a Serious Occurrence.

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- The physical restraint was used with an adult with a developmental disability to address a crisis situation when positive interventions have proven to be ineffective, where:
 - a person with a developmental disability is displaying challenging behaviour that is new or more intense than behaviour that has been displayed in the past and the person lacks a behaviour support plan that would address the behaviour, or the behaviour intervention strategies that are outlined in the person's behaviour support plan do not effectively address the challenging behaviour,
 - the challenging behaviour places the person at immediate risk of harming themselves or others or causing property damage, and
 - attempts to de-escalate the situation have been ineffective;
- The physical restraint was used with an adult with a developmental disability who was displaying challenging behaviour (either as part of the person's behaviour support plan or in a crisis situation) and the physical restraint resulted in the injury to the person supported who was restrained, and/or the staff person(s) who employed the use of the physical restraint, and/or anyone else in the vicinity where the physical restraint took place; or
- The physical restraint was used with an adult with a developmental disability who was displaying challenging behaviour (either as part of the person's behaviour support plan or in a crisis situation) and the physical restraint resulted in an allegation of abuse.

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<p>SECTION: Supports and Services</p> <p>DEPARTMENT: Quality</p>	<p>EFFECTIVE DATE: November 1990</p> <p>DATE LAST REVISED: February 2022</p>	<p>Approved by:</p>  <p>Chief Executive Officer</p>
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The use of a physical restraint can be traumatic for the person supported, the persons supported witnessing the incident, and for employees involved. Ministry guidelines require that a debriefing process be conducted with all parties who may have been involved or have witnessed the restraint.

Debriefing must be conducted with manager and all persons involved within 24 hours after the restraint is carried out. The Behaviour Therapist is to be notified of the incident to provide additional support as required. Employees must indicate on the Serious Occurrence Reports that a debriefing has been conducted, and with whom and when. Debriefing for any other traumatic event will be up to the discretion of the manager.

Training

Employees will be provided with training to identify and understand what constitutes an incident or a serious occurrence.

Evaluation

This policy will be reviewed every three years.

Related Documents, Forms and Tools:

- MCCSS Serious Occurrence Reporting Guidelines
- Decision tree
- Quick reference chart
- Intrusive Measure data form