Special Incident Reporting

San Andreas Regional Center
Health Services Unit
2021
We hope this material assists you with self-training on Special Incident Reporting during the pandemic. We look forward to your participation when we can provide online sessions and can provide continuing education hours.

Katie Magleby, Risk Assessment Coord.
Incident

A significant event or occurrence that is unusual or out of the ordinary requiring intervention

- required to be reported to DDS.
First, GOOD JOB to all you care providers, for the hard work you do in protecting the health of the people you serve.
Why Report Incidents?

- To satisfy Title 17 regulations
- To ensure accurate information is recorded
- To meet our professional responsibility
Why report

- To analyze and see trends in incident data (Regional Ctr and DDS)
- To provide a healthier and safer environment
SPECIAL INCIDENT REPORTS

1. Special Incident Reports will be submitted verbally by phone and also by fax or email within 24 hours of the time of the incident.

2. Special Incident Reports will include all the “types” that have been designated by DDS or San Andreas Regional Center.

3. All deaths must be reported to San Andreas regardless of the consumers living arrangements.

4. It is recommended that all providers attend SIR training annually.

5. Special Incident Reporting procedures will be outlined in the agencies/facilities Program Design.

Revised 5/27/08
Something happens...

What do you do?
An individual falls out of the wheelchair

An individual appears ill, “not herself”
Two individuals are fighting
• Make observations
• Get help if needed
• Gather information
• Ensure safety of all
• Communicate

Deal with the situation first
What do you do?
Do as you learned in training:

- First Aid
- CPR
- Behavior Plan, Restricted Health Condition Care Plan
- Your facility’s Procedure or emergency response plan, COVID Plan
- Make sure the **scene is safe**
- Make sure the **person is safe**
- *DON’T MOVE INDIVIDUAL UNLESS THE SCENE IS NOT SAFE* (in the street or in water, for example)
- Make sure others in your care are safe
Check for injury

Check for signs of illness
Make sure PPE is part of your first aid kits
For residential providers:

- Daily symptom check for COVID-19 of residents and staff (twice daily better)
- Use of PPE by staff at all times
- 25% of staff to be tested for COVID-19 every week on a rotating basis
- Comprehensive plan for COVID-19 is required, training of all staff
- Communicate and educate residents, families, and staff
• Learn proper use of personal protective equipment (PPE)
• Make it a habit!
• Help residents become comfortable with wearing masks
Keep adequate supplies on site. Contact CCL and/or SARC for more PPE of these types.
• Licensed homes are required to keep a 30-day supply available
• Order through online sources or purchase at retailers
• SARC and CCL are able to provide limited quantities of PPE as a supplement

PPE
Call for help; communicate!
Law Enforcement arrives

Give information about your service, the people involved, how best to communicate with clients, details of the incident.
Paramedics arrive

Give information, Emergency Face Sheet, keep others out of the way
Emergency transport to hospital

What do YOU do?
Who do you need to notify?
Can you stay with him/her?

What information can you provide to the hospital?
• Make sure all person(s) in your care are safe
• Notify your supervisor
• Follow your facility’s policy or procedure
• Gather the facts, make notes, take photos right afterwards if needed
Notify conservator, family, and Service Coordinator

If it’s a COVID-19 positive case, notify your county Public Health Department (PHD or DPH) and the doctor

Fill out a Special Incident Report (SIR)
See SIR hard copy Handout. Fill in every section.

SPECIAL INCIDENT REPORT FOR ALL VENDORS
TO BE E-MAILED OR FAXED TO SAN ANDREAS REGIONAL CENTER
Within 24 hours of the incident

<table>
<thead>
<tr>
<th>Consumer’s Name:</th>
<th>Date of Report:</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCI #:</td>
<td>leave original date UPDATE – add new date when needed</td>
</tr>
<tr>
<td>Consumer’s Address:</td>
<td>Date of Birth:</td>
</tr>
<tr>
<td></td>
<td>Sex: _______Male</td>
</tr>
<tr>
<td></td>
<td>______Female</td>
</tr>
<tr>
<td>Vendor or Agency Name:</td>
<td>Service Coordinator:</td>
</tr>
<tr>
<td>Vendor number:</td>
<td></td>
</tr>
<tr>
<td>Conservator/Guardian name (if applicable):</td>
<td>CCL Facility Number:</td>
</tr>
<tr>
<td>Name of person reporting:</td>
<td>Position at agency:</td>
</tr>
</tbody>
</table>
Injuries Requiring Treatment Beyond First Aide
- Burns that require medical treatment beyond first aid
- Medication reactions
- Bites that break the skin/ require treatment
- Internal bleeding
- Puncture wounds requiring treatment

Medical Need/Accident/Other:
- Fractures
- Injury-Accident
- Lacerations requiring sutures/ staples/glue
- Medication Errors
- Disease Outbreak
- Injury-Unknown origin
- Injury from seizure
- Injury from another consumer
- Injury from behavior episode
- Choking

Other COVID-19
- Condition Requiring Medical Intervention
- Drug/Alcohol Abuse
- Emergency Room Visit
- Seizures
- Theft by a Consumer
- Community Safety
- Law Enforcement Involvement
- EPS-Psych Emergency Team-No Hospital Admission
- Pregnancy
- Planned Hospitalization
- Voluntary Psych Admission

Suspected Neglect
- Failure to Provision of Food/ Clothing/ Shelter
- Failure to Assist in Personal Hygiene
- Failure to Prevent Dehydration
- Failure to Protect Health/Safety Hazards
- Failure to Provide Medical Care
- Failure to Provide Care Elder/Adult
- Failure to Prevent Malnutrition
- Alleged Neglect-Other

Unauthorized Absence
- Missing Person Law Notified
- Unauthorized Absence-Law Not Notified

Unplanned Hospitalizations
- Involuntary psychiatric admission
- Nutritional deficiencies
- Cardiac
- Diabetes
- Internal infection
- Respiratory illness
- Seizures
- Wound/skin care
- Other

Victim of Crime
- Aggrivated assault
- Burglary
- Larceny
- Personal Robbery
- Rape or Attempted Rape

Aggressive Acts
- Aggressive act to another consumer
- Aggressive act to family/visitor
- Aggressive act to self
- Aggressive act to staff
- Severe Verbal Threats
- Suicide Attempt
- Suicide Threat
- Other Sexual Incident
- Property Damage
- Fire Setting
Provider to select these Incident Types:

Other: Consumer exposed, test results unknown or negative.

Hospitalization: Consumer hospitalized due to signs/ symptoms of C19.

Condition requiring medical intervention: Consumer seen by doctor or treated for C19.
<table>
<thead>
<tr>
<th>Incident date</th>
<th>Time of incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definite</td>
<td>Approximate</td>
</tr>
<tr>
<td>Definite</td>
<td>Approximate</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date incident reported to RC</th>
<th>Medical Care/Treatment Required.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes   No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Relationship of alleged perpetrator to consumer</th>
<th>Relative/Family Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self</td>
<td>Individual known to</td>
</tr>
<tr>
<td>Another Consumer</td>
<td>consumer (Not a provider or another consumer)</td>
</tr>
<tr>
<td>Vendor or Employee of Vendor</td>
<td>Unknown</td>
</tr>
<tr>
<td>Non-Vendor or Employee of Non-Vendor</td>
<td>Not applicable</td>
</tr>
</tbody>
</table>

*These 3 slides are Page 1 of Special Incident Report*
Individuals that are exposed to person who tested positive with Covid 19:

• Submit a SIR within 24 hours of getting test results/exposure

• If a Provider has several SIRs to enter, they are to send in each separately (not in a group)

• If the Provider is reporting for several individuals, they can write Description of Incident in a manner where they can cut & paste the info into each SIR (i.e. instead of using the individual’s name in the narrative, state “the individual was tested on ….”).
Definitions

• “Exposure” means that you have spent 15 minutes or more within 6 feet of a person with COVID-19 illness (having symptoms and/or a positive test).

• Quarantine separates and restricts the movement of people who have been exposed to a contagious disease to see if they become sick.

• Isolation prevents the spread of an infectious disease by separating people who are sick or have tested positive from-those who are not. See handout with “Brief Definitions”
In addition to a SIR,

There are two other forms required for the following situations-

Find these forms on https://www.sanandreasregional.org/service-providers/special-incident-report/

1. Staff tests positive or is diagnosed with C19

“SARC Covid 19 Staff Form.”
2. If the consumer meets any of the following 3 criteria (required in addition to the SIR):

- A consumer tests **POSITIVE** for COVID-19;
- A consumer receives medical attention at a hospital, emergency room, or urgent care clinic due to COVID-19 **symptoms**; or
- A consumer’s **death** is related to COVID-19, either by confirmed Covid19 positive testing or by medical diagnosis unconfirmed by testing.

→ Fill out and submit “**SARC COVID-19 Consumer Form**” also found at
[https://www.sanandreasregional.org/service-providers/special-incident-report/](https://www.sanandreasregional.org/service-providers/special-incident-report/)
## Incident location
*(Check only one location where it happened or was discovered)*

<table>
<thead>
<tr>
<th>Day program</th>
<th>Acute hospital–Emergency Room</th>
<th>Job Site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consumer’s residence</td>
<td>Acute hospital–not ER</td>
<td>Hospice</td>
</tr>
<tr>
<td>Community setting</td>
<td>Out of home respite</td>
<td>Jail or related setting</td>
</tr>
<tr>
<td>Home of family</td>
<td>Sub-acute or pediatric sub-acute</td>
<td>Public school</td>
</tr>
<tr>
<td>In transit</td>
<td>SNF</td>
<td>Rehabilitation facility</td>
</tr>
<tr>
<td>Day care/ Intervention program</td>
<td>Psychiatric treatment center</td>
<td>Other</td>
</tr>
</tbody>
</table>

## Person/Agency responsible for consumer at time of incident

<table>
<thead>
<tr>
<th>Vendor</th>
<th>Residential</th>
<th>Name:</th>
<th>Address:</th>
<th>City/Zip:</th>
<th>Telephone:</th>
<th>Vendor #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vendor</td>
<td>Residential</td>
<td>Name:</td>
<td>Address:</td>
<td>City/Zip:</td>
<td>Telephone:</td>
<td>Vendor #</td>
</tr>
<tr>
<td>Parent/Family</td>
<td>Day Program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Other agencies notified by person/agency making this report

<table>
<thead>
<tr>
<th>Community Care Licensing</th>
<th>Child Protective Services</th>
<th>DHS/DPH Licensing &amp; Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>fax (408) 324-2133</td>
<td>Parent/Guardian/Conservator</td>
<td>Adult Protective Services</td>
</tr>
<tr>
<td>Police/Law Enforcement</td>
<td>Other Specify</td>
<td>Long-Term Care Ombudsman</td>
</tr>
<tr>
<td>Coroner</td>
<td>Other Specify</td>
<td>Day Program</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other Specify</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Day Program</td>
</tr>
</tbody>
</table>
Description of the Incident

Who
What
Where
When

Connect or explain specifically what happened with the “Type” of incident you selected on page 1
The SIR narrative should include: The date the consumer was exposed to person testing positive; if the C-19+ person is a staff member- the date staff last worked in the facility; is the consumer displaying any s/sx of C-19; date of consumer’s C-19 test; date of test results and if they are positive or negative.

For COVID-19 SIR
Can you remember the details?

Try to be aware and alert. Write things down as soon as possible. Take photos if appropriate.
Describing the Incident

- Thorough
- Accurate
- Clear
- Grammatically correct
Description of the Special Incident

After reading the Report, everyone should have the same understanding of what happened.

Have someone else “proofread” the SIR before submitting it.
EXPLAIN HOW INFORMATION WAS ACQUIRED

Document what witnesses reported
(what occurred/possible causes)
Document Public Health and CCL contacts (phone calls, emails)
A separate SIR must be filled out for each individual that was involved- send in separate emails please

Don’t draw conclusions or make judgments; do be objective

Don’t use nicknames
Attending physician’s name, findings, and treatment

- Who treated the consumer?
- What was the diagnosis?
- What medical care or procedure was done for the consumer?

Enter whatever information you have at the time and send update when you have more info.
Specific preventative action taken or planned (mitigation)

- How could you keep this from happening again?
- Involve the planning team as much as possible
- Make use of all available resources (SC, consultants, Administrator, other staff, SARC RN, family, etc)
For COVID-19 SIR

Under “**Specific Preventative Action Taken/Planned**”: Provider to include the preventative measures being practiced (i.e. following CDC guidelines, following SCC Public Health guidelines, use of Personal protective Equipment, surveillance testing of staff, physical distancing, etc.). Refer to your COVID Prevention, Mitigation, & Containment Plan required by CCL and/or the business plan required by the county.
Disposition

How did it result?  How is client now?
Incident Types
<table>
<thead>
<tr>
<th>Injuries Requiring Treatment Beyond First Aide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burns that require medical treatment beyond first aid</td>
</tr>
<tr>
<td>Medication reactions</td>
</tr>
<tr>
<td>Bites that break the skin/ require treatment</td>
</tr>
<tr>
<td>Internal bleeding</td>
</tr>
<tr>
<td>Puncture wounds requiring treatment</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Medical Need/Accident/Other:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fractures</td>
</tr>
<tr>
<td>Injury-Accident</td>
</tr>
<tr>
<td>Lacerations requiring sutures/ staples/glue</td>
</tr>
<tr>
<td>Medication Errors</td>
</tr>
<tr>
<td>Disease Outbreak</td>
</tr>
<tr>
<td>Injury-Unknown origin</td>
</tr>
<tr>
<td>Injury from seizure</td>
</tr>
<tr>
<td>Injury from another consumer</td>
</tr>
<tr>
<td>Injury from behavior episode</td>
</tr>
<tr>
<td>Choking</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>Condition Requiring Medical Intervention</td>
</tr>
<tr>
<td>Drug/Alcohol Abuse</td>
</tr>
<tr>
<td>Emergency Room Visit</td>
</tr>
<tr>
<td>Seizures</td>
</tr>
<tr>
<td>Theft by a Consumer</td>
</tr>
<tr>
<td>Community Safety</td>
</tr>
<tr>
<td>Law Enforcement Involvement</td>
</tr>
<tr>
<td>EPS-Psych Emergency Team-No Hospital Admission</td>
</tr>
<tr>
<td>Pregnancy</td>
</tr>
<tr>
<td>Planned Hospitalization</td>
</tr>
<tr>
<td>Voluntary Psych Admission</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Suspected Neglect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Failure to Provision of Food/ Clothing/ Shelter</td>
</tr>
<tr>
<td>Failure to Assist in Personal Hygiene</td>
</tr>
<tr>
<td>Failure to Prevent Dehydration</td>
</tr>
<tr>
<td>Failure to Protect Health/Safety Hazards</td>
</tr>
<tr>
<td>Failure to Provide Medical Care</td>
</tr>
<tr>
<td>Failure to Provide Care Elder/Adult</td>
</tr>
<tr>
<td>Failure to Prevent Malnutrition</td>
</tr>
<tr>
<td>Alleged Neglect-Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Unauthorized Absence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing Person Law Notified</td>
</tr>
<tr>
<td>Unauthorized Absence-Law Not Notified</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Unplanned Hospitalizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Involuntary psychiatric admission</td>
</tr>
<tr>
<td>Nutritional deficiencies</td>
</tr>
<tr>
<td>Cardiac</td>
</tr>
<tr>
<td>Diabetes</td>
</tr>
<tr>
<td>Internal infection</td>
</tr>
<tr>
<td>Respiratory illness</td>
</tr>
<tr>
<td>Seizures</td>
</tr>
<tr>
<td>Wound/skin care</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Victim of Crime</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aggravated assault</td>
</tr>
<tr>
<td>Burglary</td>
</tr>
<tr>
<td>Larceny</td>
</tr>
<tr>
<td>Personal Robbery</td>
</tr>
<tr>
<td>Rape or Attempted Rape</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Aggressive Acts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aggressive act to another consumer</td>
</tr>
<tr>
<td>Aggressive act to family/visitor</td>
</tr>
<tr>
<td>Aggressive act to self</td>
</tr>
<tr>
<td>Aggressive act to staff</td>
</tr>
<tr>
<td>Severe Verbal Threats</td>
</tr>
<tr>
<td>Suicide Attempt</td>
</tr>
<tr>
<td>Suicide Threat</td>
</tr>
<tr>
<td>Other Sexual Incident</td>
</tr>
<tr>
<td>Property Damage</td>
</tr>
<tr>
<td>Fire Setting</td>
</tr>
</tbody>
</table>
Injuries Requiring Treatment Beyond First Aid
Burns

Second Degree Burn

©The Wound Doctor
Any unexpected or dangerous reaction to a drug; an unwanted effect caused by the administration of a drug. The onset of the adverse reaction may be sudden or develop over time.
Hives – urticaria - wheal

Indicate **allergic reaction**

← Swelling of lips or face indicate severe allergic reaction known as anaphyaxis
– CALL 911 immediately!
Bites that break the skin or require treatment

Report any human bites
Insect or animal bites that require treatment

Bed bug bites

Scabies
GI bleeding may cause vomiting or bloody stools.
Internal Bleeding

Most common causes are in the GI system, usually by an ulcer. Bleeding is possible anywhere in the body, due to trauma, blood disorders, or disease.
Skull fracture and internal bleeding in brain after a fall
Puncture wounds requiring treatment
Fracture
(broken bone)
Injury-Accident

- General term for an injury requiring
Lacerations
Find out how the skin was closed and get written instructions for care.

Staples

Skin glue

Sutures (stitches)
Medication error – any of the “rights” that go wrong

Report ANY medication error (when any of the “Rights” go wrong)
Medication Documentation Error (7th Right)

- You must verify whether the person actually took the medication as prescribed.
- Were all other Rights correct?
  - If so, SIR type is “Other”
  - If not, SIR type is “Medication Error”
Medical Need/Accident/other, cont.

✿ Disease outbreak – more than 2 consumers with same contagious disease
✿ Injury – injury that requires medical attention; see specific causes listed
  (injury = hurt, damage)
Choking – send SIR even if person is successfully assisted with back blows & abdominal thrusts
“Other”

- Only when there is no other possible category to use
- Examples: exposure to staff tested + for COVID-19; medication refusal; med documentation error.
- Do not make up your own “type”
Condition requiring medical intervention

Such as a new diagnosis of medical condition requiring care

Examples: COVID-19; pressure sore, asthma, routine PAP smear shows cancer needing treatment; kidney failure needing dialysis; orders for hospice care
Drug/alcohol abuse
Emergency Room visit

Includes Urgent Care clinics
For expected seizures in someone with epilepsy:

The specific circumstances for sending (or not sending a SIR) for an Individual’s seizures should be determined by the ID Team and documented in the IPP.
- Theft by a consumer
- Community safety
- Law enforcement involvement
EPS – Psychiatric emergency treatment but no hospital admission

Pregnancy
Medical Need/Accident/other, cont.

- **Planned** hospitalization
  Examples: biopsy, colonoscopy, dental treatment under anesthesia
- **Voluntary** psychiatric admission
- **Routine** lab or blood tests do not need to be reported
Suspected abuse or exploitation
For suspected abuse/neglect:

❖ In licensed residential facility, call

Long Term Care Ombudsman: 408-944-0567

Crisis Line: 800-231-4024

❖ In unlicensed setting (such as ILS or SLS), call Adult Protective Services for individual 18 or older: 800-414-2002
For suspected abuse or neglect of someone under 18 years of age:

Call CPS (Child Protective Services) at

**Central County**
(408) 299-2071

**North County**
(650) 493-1186

**South County**
(408) 683-0601
For any type of abuse/neglect

Fill out SOC 341 form after making the call

*Do not send SOC 341 to SARC – it goes to Licensing*

Every incident of client-to-client physical abuse must be reported according to AB 40 requirements (see handout)
AB 40 requires:

if the suspected abuse results in serious bodily injury make a telephone report to local law enforcement agency, IMMEDIATELY, and no later than within 2 hours of the reporter observing, obtaining knowledge of, or suspecting the physical abuse.
“Serious bodily injury” means an injury involving extreme physical pain, substantial risk of death, or protracted loss or impairment of function of a bodily member, organ, or of mental faculty, or requiring medical intervention, including, but not limited to, hospitalization, surgery, or physical rehabilitation.
Suspected Abuse or Exploitation

Financial
Physical
Sexual
Emotional or mental
Physical or chemical restraints
Alleged violation of rights
Suspected Neglect

Failure to

❖ Provide food/ clothing/ shelter
❖ Assist with personal hygiene
❖ Prevent dehydration
❖ Protect from health/safety hazards
❖ Provide medical care
❖ Provide care to the elderly
❖ Prevent malnutrition
Must answer all of these questions on the SIR

- Is the physical aggression a behavior related to their disability, and do we have a Behavior Plan and training?
- Is the physical aggression abuse?
• If a behavior related to the ID/DD, you must provide information about the Behavior Plan, staff training, and how the Behavior Plan was implemented (or was not implemented)

• Reminder: Write a separate SIR for each individual involved

• The SIR is always about the individual, not written for a facility and not for staff.
Unauthorized Absence

Missing person

Unauthorized absence
Unplanned Hospitalizations
Involuntary Psychiatric Admission

http://www.sccgov.org/sites/mhd/Services/EmergencyPsychiatricServices
Emergency Psychiatric Services (EPS) is the only 24-hour locked psychiatric emergency room, which provides emergency psychiatric care to residents of Santa Clara County.

Mental Health Urgent Care (MHUC) operates a walk-in crisis clinic, with a psychiatrist on duty, seven days a week for those seeking voluntary services.

871 Enborg Court   San Jose
Nutrition Deficiency

Know what normal weight range is for each individual and help achieve and maintain it.
Cardiac = Heart

Angiogram, heart cath, angioplasty, stent, coronary artery bypass surgery
Congestive heart failure
Blood vessel or circulation disorders
Stroke or cerebrovascular accident (CVA)
Diabetes

DIABETES
KNOW THE SYMPTOMS

- Always tired
- Sudden weight loss
- Frequent urination
- Always hungry
- Blurry vision
- Sexual problems
- Vaginal infections
- Numb or tingling hands or feet
- Always thirsty

If you have any of these symptoms, see your doctor. For more information about diabetes call Eli Lilly and Company at 1-800-455-5979 or Boehringer Mannheim Corporation at 1-800-986-8072.
Internal infection
Urinary tract infection (urosepsis) most common
Respiratory conditions include Pneumonia, bronchitis, asthma, COPD, and COVID-19.
Seizures

Epilepsy is a disorder marked by disturbed electrical rhythms in the central nervous system.
Wound or Skin Care

- Pressure sores
- Skin infection - cellulitis
- Burns
Hospital - other

When person is hospitalized for conditions not listed above
Victim of Crime
• Aggravated Assault: a sudden, violent attack

• Burglary: breaking & entering with intent to commit a crime

• Larceny: the wrongful taking of another’s possessions, stealing

• Personal robbery: taking something off the person (body)

• Rape or attempted rape- unwanted or forcible sexual assault, with or without penetration
When a crime occurs and law enforcement is involved…

- When given a card by the officer, it will have a case number, type of incident/report, and contact information of the officer.
- Use this case number and incident type when contacting the law enforcement agency.
- The “type” of incident is what should be entered on the Regional Center SIR form.
Aggressive acts
Other types of aggressive acts include:
- Severe verbal threats
- Suicide attempt
- Suicide threat
- Other sexual incident
- Property damage
- Fire setting
- Aggressive act involving a weapon
Death – always a separate SIR
Information to Include for Deaths

- All Deaths must be reported to the Regional Center regardless of situation or circumstance
- Document if 911 was called
- Document if CPR was done
- Include any information about an autopsy
- Contact your SC and or Manager by phone
- If the consumer is receiving Hospice, that agency must be notified
Complete Only if Incident Type is Death

Describe the circumstances of the consumer’s death/nature of medical treatment and where administered

Other comments or information regarding death (Please include all psycho-social information)

<table>
<thead>
<tr>
<th>Type of Death</th>
<th>Non-Disease Related</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disease Related</td>
<td>Suicide Alleged</td>
</tr>
<tr>
<td>Unknown</td>
<td>Homicide</td>
</tr>
<tr>
<td></td>
<td>Accident</td>
</tr>
<tr>
<td></td>
<td>Abuse/Neglect</td>
</tr>
<tr>
<td></td>
<td>Suspected Substance Abuse</td>
</tr>
<tr>
<td></td>
<td>Catastrophic Event (Fire, Flood)</td>
</tr>
<tr>
<td></td>
<td>Other (specify)</td>
</tr>
</tbody>
</table>
SOC 624A

Community Care Licensing requires the licensee to submit the form SOC 624A when a resident passes away, even if the person was in the hospital.
Incident Response

- Insure safety
- Notify people or agencies as required
- Check for completeness
- Inquire into inconsistencies
- Document details
- Explore causes
- Note necessary additions or corrections
- Track follow-up & completion

See handout
Submit SIR quickly!

- Email within 24 hours of occurrence
- Can fax it as an alternative, but email is the best way
- Follow instructions on the website: [www.sanandreasregional.org](http://www.sanandreasregional.org) Click on “Service Providers” tab, then click on “Special Incident Report”
Close the Loop: Prevention
Be Prepared!

★ Staff training - scenarios of possible incidents and how to respond

★ Quarterly Reports – summary of data collected relating to SIRs, behavior plan, care plan

★ Assess your residents and know what equipment, documents, supplies would be needed if an unexpected situation occurred
Like the Boy Scouts, BE PREPARED.

Be prepared for incidents and accidents to happen.
Be prepared for natural disasters.

Train, train, train!
Maintaining SIRS in Consumer File

- The Special Incident Report is considered a legal document

- All SIRS and related documentation must be kept in the consumer file
Ask for help if needed

SIR desk: 408-341-3440

kmagleby@sarc.org

Call or email your Service Coordinator for assistance
Questions?

Thank you for your time and attention!