

RPO PO Box 20004 Tamarack Mall Cranbrook, BC V1C 6K5 f: 1.866.728.2938

Name of Support Worker or HSP reporting incident: Location incident occurred: Incident Categories Injuries Medication errors	Time of incident: (24 Hr Clock) Date incident Reported: (YY-MM-DD)	
Incident Categories Injuries	ported:	
Injuries		
Medication errors	Falls	
	Illness	
Choking	Weapons Possession	
Aggressive behaviour	Threats of suicide	
"Near Miss"	Motor Vehicle Accident	
Self Neglect	Service Delivery Problem / Disruption of Services	
Describe events preceding the incident:		
Describe the incident:		



Community Connections Support Services
Unit 236
9- 3151 Lakeshore Road
Kelowna, BC V1W 3S9
t: 250.491.2907
158 View Street
Nelson, BC V1L 2T9
w: www.commconn.ca
toll free: 1.888.491.2907

RP
W: www.commconn.ca
toll free: 1.888.491.2907

f: 1

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		Describe events following the incident:
Time:	Date:	Person Completing Report:
Time:	Date:	Supervisor:
	ordinator (if applicable)	Follow up from Service Coordinator or Home Share Co
	(FF)	of the second se
	Date:	



Community Connections Support Services Unit 236 15B View Street RF

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15B View Street Nelson, BC V1L 2T9 w: www.commconn.ca toll free: 1.888.491.2907 RPO PO Box 20004 Tamarack Mall Cranbrook, BC V1C 6K5 f: 1.866.728.2938

Guidelines for Completing a Non-Critical Incident Report

1. Name of Person Supported and Date of Incident	Type the first and last name of the person involved / affected by the incident. Each person supported affected by the incident must have a separate Non-Critical Incident Report form completed on their behalf. Provide the Date that the incident took place.
2. Name of Support Worker or HSP reporting Incident	Type the name of the person with direct knowledge or observation of the incident. This must be the same person completing the form.
3. Time of Incident	Type the time that the incident took place including a.m. or p.m.
4. Location incident occurred	Type the physical address of where the incident took place. Include street, city, postal code.
5. Date incident reported	Type the date that the report is being submitted to the Service Coordinator or the Home Share Coordinator.
6. Incident Categories	Check the Non-Critical Incident Category that best reflects the incident being reported. Refer to the list of Non-Critical Incident Categories below to ensure the appropriate incident type is reported.
7. Describe events preceding the incident	 When describing what happened before, provide details on: the general health and disposition of the person supported that day, including any recent events that are unusual or may have compromised the general well being of the person supported (eg. poor sleep, seizure, recent stressful event, cold or flu symptoms, onset of menses, new equipment or attire, changes in support, etc) where was the person supported prior to the incident and what they were doing. What others were doing around the person any changes to the environment of the person supported.
8. Describe the incident	 When describing the incident: use objective language and report only on what you observed happening for the person supported. Do not speculate on possible feelings of the person supported or others, ensure that you report the incident in sequential steps; that is, what happened first? What happened next? Then what? Focus on the behaviour or events for the person supported and the negative impact on the person supported. Refrain from reporting on the impact of others – use a separate NCIR if other



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	 persons supported were impacted or a HSIR if employees were impacted if the incident was witnessed, provide details on who else was in the general proximity of the person supported when the incident took place.
9. Describe the events	Provide details on what was done with and for the person supported to
following the incident	immediately address the incident and its impact. What immediate
	actions were taken to attempt to resolve the incident? What is the status
	of the person supported at the time that the report is submitted?
10. Signatures	Type the name, position and date for the following:
	• person who completed the form
	• Supervisor
	Service Coordinator for Residential and Community
	Support Services
	➤ Home Share Coordinator for Home Share Support Services
11. Follow up	Service Coordinator or Home Share Coordinator provides details on any follow up actions necessary to address prevention of future incidents (if applicable).



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Non-Critical Incident Categories

Injuries not requiring emergency care

Any injury sustained by the person supported that does not require any emergency medical attention by a nurse or health care practitioner. Injury may require consultation with the person's physician at a later date. Injury may require minor First Aid treatment.

Medication Errors not requiring emergency care

Any medication error that does not result in an adverse reaction for the person supported that requires emergency medical attention from a nurse or health care practitioner. Includes missed medication not resulting in need for emergency care.

Choking

Any incident of choking where the person supported recovers on their own and does not require any First Aid treatment or emergency medical attention. *Follow up requires reporting the incident to a healthcare professional.

Aggressive Behaviour

Any aggressive or threatening behaviour that does not result in injury of others or destruction of property.

Near Miss

Any situation that had a strong possibility of resulting in a Critical Incident but was avoided due to circumstances or intervention.

Self Neglect

Any evidence of self neglect such as when an individual fails to take care of him or herself that causes, or is reasonably likely to cause within a short period of time, serious physical or mental harm or substantial damage or loss with respect to the adult's financial affairs.



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Falls not requiring emergency care

Any fall that does not require any emergency medical attention by a nurse or health care practitioner. Person supported may require minor First Aid treatment. Unexplained falls may be an indicator of other underlying medical conditions. *Follow up requires reporting the incident to a healthcare professional.

Illness

Any illness that does not require any emergency medical attention by a nurse or health care practitioner. Illness may require consultation with the person's physician at a later date. Illness may require over the counter treatment.

Weapons Possession

Possession of a weapon such as loaded or unloaded firearms, knives, swords, mace, pepper spray or derivatives, and improper use of laser beams where the person does not use or threaten to use the weapon to harm or threaten somebody.

Threats of Suicide

Any threat made to self-harm with the intent to end ones life. The threat may be spoken or written. Includes suicidal ideation (person supported reports having thoughts about suicide). Does not result in an attempt at suicide. *Follow up requires reporting the incident to a healthcare professional. Follow up is also required if there is a pattern of suicidal threats or suicidal ideation.

Motor Vehicle Accident not resulting in any injury

Service Delivery Problem / Disruption of Services

Events that may affect service delivery but are not critical incidents including incarceration and expected hospitalization. In these situations, CLBC should be contacted to inform them that the individual is expected to be away from service.