Policy No.: 05-15 Effective: 12/02/2003 Revision Date: 09/13/2021

Subject: Incident Reports

I. Policy Statement

Division staff shall complete an incident report anytime there is a possible safety concern, and/or any unusual, non-routine, or potentially threatening event occurs. Reports shall be completed in a timely manner as directed by policy. This system of notification, documentation, and distribution shall be performed in accordance with this policy.

This Policy is to be used in conjunction with information and directions included in the electronic JJS Incident Report form.

II. Rationale

The purpose of this policy is to establish a consistent and comprehensive reporting system that accounts for all incidents occurring within the Division and its facilities and programs. This system will ensure communication occurs during a crisis situation, a chain of command is followed and the Division is able to monitor all incidents, thereby enhancing Division efficiency. Further, incident reports help document critical situations and help provide accurate descriptions of events.

III. Definitions

"Incident" is any possible safety concern, and/or any non-routine, unusual, or potentially threatening event.

"Primary Incident Report" is a report generated by the staff member who is the primary person involved in the incident. There should only be one Primary Report per incident.

"Supplemental Report" is a report generated by all other staff involved, who witnessed an incident, or who received information about an incident. These reports should accompany the Primary Incident Report.

"Addendum Report" is a report generated by a staff member who has already submitted either a Primary or Supplemental Report. The addendum is needed to clarify, correct, or include additional information after the original incident report was submitted.

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"Level of Severity" defines the seriousness or urgency of an incident. The two different levels of severity are Critical Incidents and Standard Incidents.

"Critical Incidents" are any possible safety concerns, and/or any non-routine, unusual, or potentially threatening event that is critical in nature, requires immediate response, and impacts the wellbeing of the youth.

"Standard Incidents" any possible safety concern, and/or any non-routine, unusual, or potentially threatening event that does not meet the definition of a Critical Incident. These events may require immediate response, however does not impact the wellbeing of the youth.

"Classification" of an incident is the process of identifying the type of behavior, activity, or potentially threatening situation involved in an incident and selecting all applicable options in the incident report.

IV. Procedures: Collection

A. Incident Report Form

- Division staff shall access this policy through the PowerDMS icon on their desktop, and the Incident Report form on the DHS Forms Icon on their desktop, when determining whether an incident report is required and how to complete the report.
- 2. Each incident shall be documented in the appropriate report format using the current incident reporting form accessed through the DHS Forms Icon. Staff are required to access the Electronic Incident Report form for reference, read all applicable definitions, and follow all directions located on the form.
- 3. Reports shall be completed prior to the end of one's shift when the incident occurred. A request for a delayed report must be submitted to a supervisor for approval. A delayed report must be completed no later than 24 hours after the incident.
- 4. Once a report has been submitted, it is considered complete and cannot be edited. The report will be used as an official document accounting for the incident. If additional information is needed, then a Addendum Report must be used to document this information.
- 5. A request made by facility administration (Supervisor or APD), JJS Program Director, Deputy Director, Director or JJS internal Review for additional incident documentation, or corrections shall be accommodated within one business day.
- 6. Each incident shall be classified according to the level of severity, as identified in this policy and the Incident Report form.

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- a. Supervisors and APD's shall review each incident report after it is submitted to ensure proper level and classification.
- b. If changes are required to the form, Supervisors will inform the staff and request that they submit an addendum to correct the issue. If staff do not agree, they will elevate the concern up the chain of command and discuss this with their APD.
- 7. Supervisors shall review each incident to ensure that every employee involved has completed an incident report as required and within required timeframes.

B. Incident Classification

All of the topics below are required to be documented in an incident report:

- 1. The following are Critical Incident selections (definitions are included in hover boxes within the electronic incident report):
 - a. Allegation of Abuse, Neglect, or Exploitation
 - b. Death of a Client Including Death by Suicide
 - c. Client Accident/Injury/Illness (beyond basic first aid)
 - d. Criminal Activity other than Abuse, Neglect, Exploitation, Use of Illegal Drugs, Illegal Contraband, Assault, Use of a Weapon, Sexual Misconduct
 - e. Use of Illegal Drugs/Substances, Chemical Solvents Alcohol or Psychotoxic Chemical Solvents (huffing)
 - f. Illegal Contraband
 - g. Assault Injury
 - h. Physical Escort or Physical Intervention
 - i. Use of Mechanical Restraints
 - j. Use of Weapon
 - k. Misuse of an Item Outside of its Intended Purpose
 - 1. Suicide Self-Directed Violence or Serious Suicide Attempt
 - m. Sexual Misconduct
 - n. Staff Sexual Misconduct
 - o. Medication Errors that Impact the Wellbeing of a Client
 - p. Client Rights Violation
 - q. Outbreak of Illness
 - r. Unauthorized Departure AWOL, Absconsion, Attempted Escape from a Detention/Secure, Escape
 - s. Damaging a Facility and/or State Property
 - t. Natural Disaster
 - u. Contacted Law Enforcement Non-Emergency
 - v. Fire Department or Law Enforcement Responds to Take Command
 - w. Confinement/Isolation over 1 hour

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- x. Building Safety Issues Lost, Missing, or Found Tools or Keys
- y. Staff Misconduct
- z. Staff Injury While on Shift
- 2. The following are Standard Incident sections:
 - a. Confinement/Isolation between 15 minutes to 1 hour
 - b. Medication Errors that do not impact the wellbeing of the client
 - c. Damaging Personal Property
 - d. Accident/Injury/Illness Resulting in Basic First Aid
 - e. Any potential Litigation or Threat/Notice of a Lawsuit
 - f. Suicide Watch
 - g. Contraband Program Prohibited
 - h. False Alarm
 - i. Gang Activity
 - j. Suicide Awareness
 - k. Threat of Violence not Resulting in Law Enforcement Contact
 - 1. Suspicious Circumstance
 - m. Youth Self Confinement Sick Day
 - n. Age Appropriate Physical Contact Non-Sexual Program Prohibited (kissing, hugging)
 - o. Non-Suicidal Self-Directed Violence
 - p. Information Only

C. Notification of Incidents and Distribution of Incident Reports

- 1. All Critical Incidents require immediate notification to the person(s) or party(s) as outlined on the Incident Report Form. This information is included in the hover box over each Critical Incident topic in the actual form.
 - a. Notification shall be done by telephone and contact shall be made with a live person.
 - b. A voicemail message is not sufficient as notification for a Critical Incident; although a message should be left indicating that notification was attempted.
 - c. Once a live person has been contacted, it is the responsibility of that contacted person to notify the next person or party in the chain of command.
 - d. Case managers, when applicable, shall be notified immediately of a Critical Incident. This notification is in addition to the chain of command. Staff

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shall attempt to speak to the case manager directly, but may leave a voicemail or text message.

- 2. Staff shall inform their immediate Supervisor and APD of Critical Incidents that do not require immediate notification and Standard Incidents no later than 24 hours after the occurrence via email, text, voice mail, or incident report. The APD shall immediately notify the PD of all critical incidents via voice, voicemail, or text message.
- 3. Case managers (when applicable for JJS Custody youth) shall be notified within 24 hours of Critical Incidents that don't require immediate notification and Standard Incidents after the occurrence via email, text, voice mail, or incident report.
- 4. Parents/guardians, and other appropriate parties shall be notified of all Critical Incidents, as well as other incidents involving medical concerns or law enforcement action, as soon as possible. Staff shall attempt to speak to a live person, but may leave a voicemail or text message.
- 5. Supplemental Incident Reports shall be sent to the designated Office Support staff to assign the Primary Episode Number, at which time the report will be sent to the Supervisor and APD. It is the APD's responsibility to forward all Critical Incident reports to their assigned PD.
- 6. For youth in JJS custody, incident reports for all levels shall be distributed to the case manager and Youth Parole Authority (if the youth is in Secure Care) within three (3) business days of the incident. This is the responsibility of the Supervisor.
- D. Referrals and Distribution of incident reports to law enforcement shall be authorized by JJS Internal Review. This will be in conjunction with a staffing with JJS Administration and following approval from the Division Director.
- E. Documents and records generated pursuant to this policy are subject to the Governmental Records Access and Management Act. These documents and records shall not be distributed, disclosed or disseminated other than as outlined in this policy. Requests for records from any other person shall be forwarded to the APD, who will then submit it to the GRAMA coordinator for review.

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V. Continuous Renewal

This policy shall be reviewed every three (3) years to determine its effectiveness and appropriateness. This policy may be reviewed before that time to reflect substantive change.

This policy has been reviewed by the Division of Juvenile Justice Services Executive Management Team, and is approved upon the signature of the director.

Brett M. Peterson, Director

Division of Juvenile Justice Services

09/13/2021

Signature Date