

#### The EarlyON Centres Serious Incident Report (SIR) has 3 parts:

Part 1 - Within 24 hours of the serious incident the EarlyON operator completes Section 1A, Section 1B and Section 1C, and submits the SIR via email to <a href="https://example.com/HEYQP@hamilton.ca">HEYQP@hamilton.ca</a>. Quality Analyst staff will complete Section 1D and return the SIR to the EarlyON operator;

Part 2 – Within 7 days of submitting Part 1, the EarlyON provider completes Section 2A and Section 2B and submits the SIR to <a href="https://example.com/HEYQP@hamilton.ca">HEYQP@hamilton.ca</a>. Quality Analyst staff will complete Section 2C and return the SIR to the EarlyON operator. If the serious incident has been fully resolved, no further action is required by the EarlyON provider or City staff, the SIR is closed. If the serious incident is not resolved, requires follow-up and further action, Part 3 of the SIR process is required;

Part 3 – When the serious incident has been resolved, the EarlyON operator completes Section 3A and submits the SIR to <a href="https://example.com/HEYQP@hamilton.ca">HEYQP@hamilton.ca</a>. Quality Analyst staff will complete Section 3B and return the SIR to the EarlyON operator. The SIR is resolved and considered complete.

#### Part 1: Submit within 24 hours of serious incident to: HEYQP@hamilton.ca

### Section 1A: EarlyON Centre Details and Time of Serious Incident

Hame of Early Old Operator
Name of centre/outdoor location or online program involved
Date of incident(dd/mm/yyyy)
Time of incident

Name of FarlyON Operator



Reported by:
<u>Email</u>
<u>Position</u>
Date of report(dd/mm/yyyy)
Section 1B: Information on Individual Involved
Indicate if the individual involved in the incident is a: (select all that apply) $\Box$ Child $\Box$ Parent $\Box$ Guardian $\Box$ Caregiver $\Box$ EarlyON staff $\Box$ Visitor/Vendor $\Box$ N/A
Section 1C: Type of Serious Incident and Details (report only one of the following):
<ul> <li>□ Death of a child or adult</li> <li>Identify if the death was:</li> <li>□ Due to an injury □ Due to an illness □ Accidental □ Self-Inflicted/Unexplained</li> <li>□ Life threatening injury or illness that may involve the police, fire or ambulance/EMS/paramedics</li> </ul>
Life threatening injury or illness that may involve the police, fire or ambulance/EMS/paramedics  Identify the type of injury: ☐ Head, back or neck injury ☐ Substantial blood loss ☐ Eye injury ☐ Seizure ☐ Fall ☐ Near Drowning ☐ Fracture or Sprain ☐ Anaphylactic reactions ☐ Injuries to the chest ☐ Other
☐ Report of an allegation or suspicion of abuse and/or neglect of a child



☐ Child is Missing – as reported by the child's parent(s), guardian(s), or
caregiver(s) ☐ Parent/guardian/caregiver is missing
☐ An unplanned disruption of the normal programming/services offered at or by the EarlyON Centre that poses a risk to the health, safety or well-being of children and parents/guardians/caregivers accessing programs/services (not including inclement weather)
Identify the nature of the situation: □ Fire □ Outbreak □ Flood □ Lockdown □ Power Outage □ Evacuation □ Carbon monoxide exposure □ Other □ Other Toxic Substance (please specify)
☐ Situation that has high potential for public criticism of the City of Hamilton, and/or the Ministry of Education which may lead to questions being asked by the media
Nature of situation: (select all that apply) □ Behavior related □ Missing/Stolen items □ Discrimination/Harassment □ Political in nature □ Religious in nature □ Public/Client Complaint □ Health or Safety issue □ Privacy breach □ Cyber security incident □ Other
Who has been notified: (select all that apply) □ Parent/Guardian/Caregiver □ Fire □ Police □ Paramedics □ Children's Aid Society □ Hamilton Public Health □ Other
Has there been media attention: $\square$ Yes $\square$ No $\square$ Anticipated
If yes, please provide details
Next steps
Is it anticipated that further action is required $\square$ Yes (complete below) $\square$ No (submit form)
Follow-up with: □ Child □ Parent □ Guardian □ Caregiver □ EarlyON staff □ Visitor/Vendor □ N/A



future re-occurrence: ☐ Yes ☐ No
Briefly describe the review and/or changes made as well as next steps: (include timelines, if applicable)
Are additional pages attached? □ Yes □ No
Submit completed form via email to: <u>HEYQP@hamilton.ca</u>
Section 1D: Serious Incident Report – City of Hamilton's Response  ☐ Section 1 Reviewed by City of Hamilton
Comments (include any action/follow-up required by EarlyON centre):
Regional Sign-Off:



## PART 2: Submit within 7 days of initial Serious Incident Report to HEYQP@hamilton.ca

Section 2A: Additional Action Final report for serious incident:  $\square$  Yes (proceed to Section 2B)  $\square$  No (complete below and proceed to Section 2B) Select all that apply: Police investigating ☐ Yes ☐ No ☐ Unknown Children's Aid Society investigating ☐ Yes ☐ No ☐ Unknown Hamilton Public Health investigating ☐ Yes ☐ No ☐ Unknown Media attention ☐ Yes ☐ No ☐ Unknown Follow-up with: ☐ Child ☐ Parent ☐ Guardian ☐ Caregiver ☐ EarlyON staff ☐ Visitor/Vendor ☐ N/A Review and/or make changes to operations/practices to alleviate potential for future reoccurrence ☐ Yes ☐ No Briefly describe the next steps (include timelines, if applicable): Section 2B: EarlyON Operator sign-Off Reported by: Date(dd/mm/yyyy)



<u>Email</u>
Position
$\hfill\Box$ I declare that information provided on this form is true and correct to the best of my knowledge
Submit form with Part 2 completed via email to: <u>HEYQP@hamilton.ca</u>
Note: If the serious incident is still ongoing, the EarlyON operator will be required to complete Part 3 of the SIR when the serious incident has been resolved, and submit to <a example.com="" href="https://example.com/html/&gt; &lt;a href=" html="" https:=""></a> HEYQP@hamilton.ca">https://example.com/html/> https://example.com/html/ html/
Section 2C: Serious Incident Report - City of Hamilton Response  ☐ Section 2 Reviewed by City of Hamilton
Comments:
Has the serious incident been resolved? ☐ Yes ☐ No
If no, EarlyON operator will complete Part 3 of the SIR when the serious incident is resolved.
Regional Sign-Off:
Date: (dd/mm/yyyy)



## PART 3: Complete and submit when serious incident is resolved to HEYQP@hamilton.ca

## Section 3A: Summary of Serious Incident Resolution and EarlyON Operator Sign-Off

$\square$ Final report for serious incident; the serious incident is resolved
Provide a summary of serious incident resolution
Reported by:
Date(dd/mm/yyyy)
Email:
Position:
☐ I declare that information provided on this form is true and correct to the best of my knowledge
Submit form with Part 2 and Part 3 completed, via email to: HEYQP@hamilton.ca.

Version 1.0, June 2023



# Section 3B: Serious Occurrence Report – City of Hamilton Response Section 3 Reviewed by City of Hamilton Comments (if applicable) Regional Sign-Off: Date: (dd/mm/yyyy)

#### **Notice of Collection**

The City of Hamilton collects personal information as defined the *Municipal Freedom* of *Information and Protection of Privacy Act, 2001* and by section 71 of the *Child Care* and *Early Years Act, 2014*. Any personal information collected as part of the Serious Incident Reporting webform for EarlyON operators will be used for the purposes of monitoring serious incidents.

By providing your email address, you are consenting to receiving emails from the City of Hamilton and/or their agents/contractors for the purposes relating to the Serious Incident Reporting program. Information collected for this program may be stored on servers located in Canada and the United States and may be subject to Canadian and/or American laws. Questions about the collection of this personal information can be directed to Early Years Manager, CWELCC, City of Hamilton, P.O. Box 2040 Hamilton, ON L8P 4Y5 (905) 546-2424 ext. 4120.