



## INCIDENT REPORT

Dayhome Educators are responsible for reporting incidents to the child's family. If a child is injured in your dayhome and the injury does NOT require an ambulance, contact the family and they can decide if they will take their child for follow-up medical care (i.e.: stitches, x-rays, etc.). Send pictures when necessary, so that they can make an informed decision. Complete the incident report and submit it to your consultant via email as soon as possible. Educators must inform their consultant immediately upon learning a child was taken for follow-up or if a family plans to take the child for follow-up. **If a child is seen by a medical professional as a result of an incident (e.g., medical center, dentist, family doctor, hospital, etc.), it becomes a Reportable Incident to Licensing and must be reported to Licensing by the agency within a specific time frame. If the incident occurred outside of Agency hours, you can call our emergency line number at (780) 715-1166, ext. 0.**

Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time: \_\_\_\_\_

Educator's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name of Parent/Emergency Contact Notified: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Phone Number: \_\_\_\_\_

How was the parent/emergency contact notified?    Phone    in writing    in person

Details of Incident:



Where did the incident occur:

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What first aid was administered:

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By Whom? Specify:

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Was there anyone else present at the time of the incident?      Yes                      No

If yes, then who?

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Were the Authorities contacted (E.g. police, ambulance)?      Yes                      No

If yes, then who?

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Additional information / comments related to the incident:

Name of Agency Personnel notified: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Educator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_