

FOR OFFICIAL USE ONLY

CI's DB's INJ FRM REF

NOTES

DATE RECEIVED

330 all info received

CRITICAL INCIDENT REPORT 2006This form
MUST BE

1. COMPLETED by ALL STAFF MEMBERS taking part in any Physical Intervention.
2. COMPLETED and STAFF DEBRIEFED within 24 HOURS.
3. COPIED TO Kirsty Stevenson

Time and date of incident:

16.20pm. 4.8.6

Where exactly did the incident take place?

JORDAN'S BEDROOM.

Who Was Involved in the Incident?

STAFF

✓ MICKIE McHAUGHILL 160

✓ GRAHAM McENTHILL 92

YOUNG PERSON NAME & UNIT

JORDAN M'COURT

NORTH UNIT 50

What (briefly) led up to the Physical Intervention?

JORDAN Refused to take direction from staff.

Then became abusive and aggressive when asked to take time-out from the group.

Tick any of the BEHAVIOUR MANAGEMENT or avoidance techniques used. [Please tick]

TRIGGER for the behaviour that led to the decision to assist.

PRIMARY INTERVENTION STRATEGIES

Provide Structure

✓

Family Visit

Other Visit

Positive Surface Behaviour Management

School

Differential Reinforcement

Argument

Positive Correction

Fight

SECONDARY INTERVENTION STRATEGIES

Hearing "no"

✓

Non Verbal – Planned Ignoring

Boredom

Non Verbal – Signals

Phone Call

Non Verbal – Proximity Prompt

Influence of Drugs

Non Verbal – Touch Prompt

✓

Influence of Alcohol

Para-Verbal Intervention – (Volume, Tone, Rate)

✓

Unclear/Other

Verbal – Timing

Trigger Notes

Verbal – Active Listening

Verbal – Genuine Expression of Concern

Verbal – Positive Problem Solving

Why was the decision to implement a physical assist taken?

JORDAN STARTED THROWING ITEMS AT WRITER. HE THEN KICKED TV AND ATTEMPTED TO ASSAULT WRITER. DECISION THEN MADE TO IMPLEMENT A PHYSICAL ASSIST FOR HIS AND STAFF'S SAFETY.

Physical Assist(s) used [Please tick]

SINGLE PERSON**MULTIPLE PERSON****LEVEL 1 TECHNIQUES****LEVEL 2 TECHNIQUES - (ELEVATED RISK)**SINGLE PERSON
STANDING

Extended Arm Assist

Crossed Arm Assist

Cradle Assist

Upper Torso Assist

MULTIPLE PERSON
STANDING

Extended Arm Assist

Crossed Arm Assist

Cradle Assist

Physical Assist(s) used <i>Continued</i> - [Please tick]			
LEVEL 3 TECHNIQUES - (ELEVATED RISK)		LEVEL 4 TECHNIQUES - (ELEVATED RISK)	
SINGLE PERSON	Cradle Assist	MULTIPLE PERSON	Crossed Arm Assist
SITTING/KNEELING	Upper Torso Assist	SITTING/KNEELING	Upper Torso Assist
SINGLE PERSON FLOOR - FACE UP	Supine Torso Assist		Hook & Carry Assist
Physical Assist Notes		MULTIPLE PERSON	Hook & Carry Assist
		FLOOR - FACE UP	Supine Torso ☒
		LEVEL 5 TECHNIQUES - (ELEVATED RISK)	
		MULTIPLE PERSON FLOOR - FACE DOWN	Prone Torso Assist
How long was the young person held for? - [Please tick]			
0 - 5 minutes		6 - 10 minutes ☒	
If more than 10 minutes please specify: _____ minutes			
If the assist took longer than 15mins a qualified first aider should be called - was this carried out? [Please tick]			
YES		NO	
Was an independent monitor present? [Please tick]			
YES		NO	
If yes - please state name of monitor:			
Was anyone injured? [Please tick]			
YES		NO ☒	
Who was injured		What were the injuries	
JORDAN M'COWET		SMALL LUMP AT SIDE OF HEAD	
If injuries occurred was an accident form completed and passed to Marion Cunningham? [Please tick]			
YES		NO	
Conclusion of Restraint			
How did the restraint come to an end, and what help and support did you offer the YP?		JORDAN BECAME CALM, AND WAS ALLOWED TIME TO HIMSELF TO REFLECT ON HIS BEHAVIOUR.	
Has LSI Taken Place [Please tick]			
YES		NO	
What was the young person's perception of the incident?			
JORDAN REFUSED TO ENGAGE WITH STAFF. ABOUT INCIDENT, THIS WILL BE REVISITED AT A LATER DATE			
How well did this fit with the young person's Behaviour Support Plan?			
THIS FITS EXACTLY.			
Were you debriefed? [Please tick]			
YES		NO	
If Yes - By Whom		If no - Why and When will it take place?	
Who was notified about the incident? [Please tick]			
Parents / Carers		Social Worker/Department	
Duty Manager		Police	
Duty Manager Name MAEGIE RAMSAY 148			
Signed	M. McHugh		Print M. McHUGH
Date	4.8.06		

INJURIES CHECKED – FOLLOWING A CRITICAL INCIDENT

THIS FORM MUST BE COMPLETED IF THERE WERE ANY INJURIES SUSTAINED

IT MUST BE COMPLETED BY A MEMBER OF STAFF WHO WAS NOT INVOLVED IN THE ASSIST – IT IS SUGGESTED THAT THE DEBRIEFER CHECK THE INJURED AND COMPLETE THIS FORM.

THIS FORM ONLY HAS TO BE COMPLETED ONCE PER INCIDENT – IF IT HAS NOT BEEN COMPLETED – CRITICAL INCIDENT FORMS WILL BE RETURNED.

INJURED – please tick

Member of Staff ☐

Young Person ☒

Name of Injured Jordan McCourt

What were the injuries

A small lump on side of Jordan's head

Did someone get medical help

yes ☒

no ☐

Was first aid given

yes ☐

no ☐

Was an accident form completed

yes ☒

no ☐

Were the police involved

yes ☐

no ☒

If yes, please state why, who called and when, and the outcome of their involvement.

Completed by

Name Mick McLaughlin

Signature M. McLaughlin

Date completed _____

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CRITICAL INCIDENT REPORT 2006

This form MUST BE	1. COMPLETED by ALL STAFF MEMBERS taking part in any Physical Intervention.
	2. COMPLETED and STAFF DEBRIEFED within 24 HOURS.
	3. COPIED TO Kirsty Stevenson

Time and date of incident.	Where exactly did the incident take place?
4/8/06 10.30 pm.	J. McLOUT'S BEDROOM

Who Was Involved in the Incident?	
STAFF GRAHAM MCCOILL MICK McLAUGHLIN	YOUNG PERSON NAME & UNIT JORDAN McLOUT NORTH UNIT

What (briefly) led up to the Physical Intervention?
JORDAN REFUSED TO TAKE STAFF DIRECTION. JORDAN THEN BECAME VERBALLY ABUSIVE AND ASKED TO TAKE SOME TIME AWAY, FROM THE GROUP

Tick any of the BEHAVIOUR MANAGEMENT or avoidance techniques used. [Please tick].	TRIGGER for the behaviour that led to the decision to assist.
PRIMARY INTERVENTION STRATEGIES	Family Visit
Provide Structure	Other Visit
Positive Surface Behaviour Management	School
Differential Reinforcement	Argument
Positive Correction	Fight
SECONDARY INTERVENTION STRATEGIES	Hearing "no"
Non Verbal - Planned Ignoring	Boredom
Non Verbal - Signals	Phone Call
Non Verbal - Proximity Prompt	Influence of Drugs
Non Verbal - Touch Prompt	Influence of Alcohol
Para-Verbal Intervention - (Volume, Tone, Rate)	Unclear/Other
Verbal - Timing	Trigger Notes
Verbal - Active Listening	
Verbal - Genuine Expression of Concern	
Verbal - Positive Problem Solving	

Why was the decision to implement a physical assist taken?
JORDAN BEGAN TO THROW THINGS AT STAFF. JORDAN THEN KICKED HIS T.V. AND LASHED OUT AT STAFF BY ATTEMPTING TO ASSAULT THEM. AT THIS POINT THE DECISION WAS MADE TO IMPLEMENT AN S.C.M ASSIST FOR THE SAFETY OF BOTH JORDAN AND STAFF MEMBERS

Physical Assist(s) used - [Please tick].			
SINGLE PERSON		MULTIPLE PERSON	
LEVEL 1 TECHNIQUES		LEVEL 2 TECHNIQUES - (ELEVATED RISK)	
SINGLE PERSON STANDING	Extended Arm Assist	MULTIPLE PERSON STANDING	Extended Arm Assist
	Crossed Arm Assist		Crossed Arm Assist
	Cradle Assist		Cradle Assist
	Upper Torso Assist		

Physical Assist(s) used <i>Continued</i> - [Please tick]			
LEVEL 3 TECHNIQUES - (ELEVATED RISK)		LEVEL 4 TECHNIQUES - (ELEVATED RISK)	
SINGLE PERSON	Cradle Assist	MULTIPLE PERSON	Crossed Arm Assist
SITTING/KNEELING	Upper Torso Assist	SITTING/KNEELING	Upper Torso Assist
SINGLE PERSON FLOOR - FACE UP	Supine Torso Assist		Hook & Carry Assist
Physical Assist Notes		MULTIPLE PERSON	Hook & Carry Assist
		FLOOR - FACE UP	Supine Torso ☒
		LEVEL 5 TECHNIQUES - (ELEVATED RISK)	
		MULTIPLE PERSON FLOOR - FACE DOWN	Prone Torso Assist
How long was the young person held for? - [Please tick]			
0 - 5 minutes		6 - 10 minutes ☒	
If more than 10 minutes please specify: _____ minutes			
If the assist took longer than 15mins a qualified first aider should be called - was this carried out? [Please tick]			
YES		NO	
Was an independent monitor present? [Please tick]			
YES		NO ☒	
If yes - please state name of monitor:			
Was anyone injured? [Please tick]			
YES		NO	
☒			
Who was injured		What were the injuries	
JORDAN MCCOY		LUMP TO THE LEFT SIDE OF JORDAN'S HEAD	
If injuries occurred was an accident form completed and passed to Marion Cunningham? [Please tick]			
YES		NO	
☒			
Conclusion of Restraint			
How did the restraint come to an end, and what help and support did you offer the YP?		YP SHOWS COMPOSURE AND CALMNESS IN HIS BEHAVIOUR THAT ALLOWED STAFF TO HELP JORDAN TO A SITTING POSITION AND TO BE ABLE TO REFLECT ON HIS BEHAVIOUR	
Has LSI Taken Place [Please tick]			
YES		NO	
☒			
What was the young person's perception of the incident?			
JORDAN REFUSED TO ENGAGE WITH STAFF STAFF WILL TRY AT ANOTHER TIME			
How well did this fit with the young person's Behaviour Support Plan?			
Fit with plan			
Were you debriefed? [Please tick]			
YES		NO	
☒			
If Yes - By Whom		If no - Why and When will it take place?	
MORA McDONALD			
Who was notified about the incident? [Please tick]			
Parents / Carers		Social Worker/Department	
Duty Manager		Police	
☒			
Duty Manager Name MORA McDONALD			
Signed	G. McNeill		Print GRAHAM McNEILL
Date	4/8/06		