

# *S<sup>D</sup> Associates LLC*

Behavioral Services Assessment, Consultation, Training and Direct Service  
*www.sdplus.org* (802) 235-9322 referrals

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## Incident Report

**Incident**-anything not covered in SIRF reporting and or body check; (for instance, hospital visit, incident in public, and/or law enforcement, property damage, pulled over while client with you, any time you give id to community member)

**CONTACT YOUR BA AS SOON AS POSSIBLE (AND WHEN SAFE TO DO SO) IF AN INCIDENT REPORT IS REQUIRED**

By the end of the program day please fully complete this form and send to the case Behavior Analyst.

<b>Client # and Funding Source AZ BZ CZ</b>	
<b>Region</b>	
<b>Date</b>	
<b>Time</b>	
<b>Duration</b>	
<b>Location</b>	
<b>Staff/clients involved</b>	
<b>Others inv.</b>	

**Describe the Incident (include antecedents & any injuries or property damage):**

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**Action Taken (including any emergency care):**

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**\*\* For office use only \*\***

<u>Person/Agency notified</u>	<u>Date</u>	<u>Time</u>
<b>Parent/Guardian:</b>		
<b>Behavior Analyst:</b>		
<b>Case Manager:</b>		
<b>Special Educator:</b>		
<b>DCF/APS:</b>		
<b>Other:</b>		

*\*For Director's use only\**

**Review of incident or preventative/corrective action to be taken:**

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