

Critical Incidents and Complaints Analysis Report - 2022

Incident Reports 2022

Staffed Residential Med Error Program	15
Staffed Residential Med Error Pharmacy	5
Staffed Residential Health Issues	11
Staffed Residential Staff Injury	2
Staffed Residential Fall	2
Staffed Residential Injury	1
Staffed Residential Aggressive Behavior	1
Staffed Residential Dangerous object/Weapon	1
Day Programming Health Issues	2
Day Programming Injury	1
Day Programming Staff Injury	3
Day Programming Aggressive Behavior	1
Food Bank Injury	3
Emergency Shelter Health Issues	1
Emergency Shelter Aggressive Behavior	2
Housing First Outreach Aggressive Behavior	7
Housing First Outreach Health issues	7
Main BLDG/Admin Aggressive Behavior	<u>2</u>
Total Incidents reported 2022	67

Complaints and Suggestions 2022

Three formal Complaints and Suggestions were submitted during 2022. All were from Emergency Shelter users expressing concerns about the manner in which they spoken to by Shelter staff.

Comments and Analysis:

Prior year Critical Incident reports were **48**. It is noteworthy that one change from last year was the establishment of a more substantial staffed residential service in which Island Community Services assumed responsibility for three more aging and health-compromised adults.

All of the incident reports were reviewed by the Joint Safety and Health Committee, with specific recommendations and follow up as determined on an individual basis.

WorkSafe BC claims were completed as required for each of the 5 incidents of staff injury. These injuries were all connected to the transport/moving of persons served with mobility issues.

Staffed Residential Health Issues (11 reports) were concentrated on two circumstances. January 2022 serious flu outbreak (4 reports) followed by a February Covid-19 outbreak (5 reports).

Staffed Residential medications errors were the most frequent incidents, and it is noted that they were all of a minor nature (timing, missing one dose, misplaced or lost pill). Any medication error that results in an adverse effect are incidents of a more serious nature requiring further actions and reporting.

Housing First Outreach reports of health issues (7) and aggressive behavior (7) were concentrated on one time-limited circumstance in which intensive support services was provided to a motel site housing homeless people during Covi-19. This accounts 11 of the 14 reports from this program area.

Food Bank injuries involved individuals presenting at the Food Bank with minor injuries that required first aid, including calls to the ambulance.

Of all the incidents, none involved serious injury or death.

There were an additional 16 Incident Reports completed by staff that once reviewed did not meet the criteria of being a critical incident. Each of these were still treated seriously and routed back to program coordinators and staff teams to address from a service delivery perspective (eg. Verbal conflicts between persons served, behavior of persons served being observed in the community).

A review of the Complaints and Suggestions submitted was done at a program level. Shelter staff have been encouraged and supported to be welcoming and open-minded about receiving complaints.

Follow Up:

1. Continue to fine-tune incident reporting procedures and provide staff training. It is suspected there may be some minor incidents that were not reported in some program areas, and would have offered good learning for ongoing preventative health and safety measures.
2. Provide positive feedback to staff for their care and attention in going through a busy year of service delivery without a major incident.

3. Provide positive feedback to staff for attending quickly and properly to incidents as they arise. Incident reports indicate very effective responses, and there were no cases in which staff made no response or an improper response.
4. Increase staff training for medication management, and review systems in the staffed residential program to reduce errors.
5. Prioritize training and support in managing difficult individuals and difficult situations for Housing First Outreach and Emergency Shelter programs.
6. Include the principles and practices of Trauma-Informed Care in the orientation and training of emergency shelter staff, as well as emphasizing the need for consistency in approach and limit-setting among staff team members.