**INCIDENT REPORT**

**Name of Child: Date of Birth:**

**Referring County: Date/Time of Incident:**

**Others Involved:**

**Did you witness the incident? Yes No**

**County Caseworker: Notified: Time:**

**GAL: Notified: Time:**

**Department of Human Services: Notified: Time:**

**Law Enforcement: Notified: Time: \_\_\_\_\_\_**

Any serious illness or injury resulting in a foster child's medical treatment away from the foster care home

Hospitalization of a foster child

Foster child ran away

The death of a child or household member as a result of an accident, suicide, assault, or any natural cause while at the foster home, or while on authorized or unauthorized leave from the foster home

An injury to a child or foster parent that requires emergency medical attention by a health care professional or admission to a hospital

A mandatory reportable illness, as required by the Colorado Department of Public Health and Environment, of a child or foster parent that requires emergency medical attention by a health care professional or admission to a hospital. For a list of mandatory, reportable illnesses, visit:
<http://www.cdphe.state.co.us/dc/Reportables%20physicians%202010.pdf>

Any allegation of physical, sexual, or emotional abuse/neglect to a child that results in reporting to a Law Enforcement or Social Services Agency

Any fire that is responded to by a local fire department

Any major threat to the security of a foster home, including but not limited to, a threat to kidnap a child, riots, bomb threats, hostage situations, use of a weapon, or drive by shootings

A drug or alcohol related incident involving a foster parent or a child that requires outside medical or emergency response

An assault, by a child upon a child, a child upon an adult in the home, or an adult in the home upon a child which results in a report to Law Enforcement

A suicide attempt by a child at the foster home which requires emergency intervention

Felony theft or destruction of property by a child while in placement at the foster home for which Law Enforcement is notified

Any police or sheriff contact with the foster home for a crime committed by a foster child while in placement

Missed medications or a medication error (must be called in to the child abuse hotline)

Any crisis mental health assessment for a child, even if it doesn't result in hospital admission

***If ANY of the above boxes are checked, this is a critical incident. KAIROS Family Services must submit a critical incident form to CDHS within 24 hours (excluding weekends or holidays) or the next business day.***

If none of the above applies, please detail the incident that occurred here:

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Signature Date

Printed Name Date