

**HOPE ANIMAL-ASSISTED CRISIS RESPONSE
SERVICES & OPERATIONS HANDBOOK**

**APPENDIX B-3
CONFIDENTIAL OCCURRENCE REPORT FORM**

Directions for Completing Form:

- Occurrences are any event that is not consistent with the routine operation of the organization; they represent an opportunity for improvement of services.
- All incident reports should be reviewed with your supervisor as soon as possible and forwarded to the President within 24 hours of the occurrence. If a major incident occurs (for example, a dog bite), this should be reported to your supervisor and to the President *immediately*. The president can be contacted at any time by calling 877-HOPE-K9s (877-467-3597).
- If information in any category isn't available, please note this on the form.
- Please identify your recommendations for corrective action, if necessary. For example, if an incident occurred between two visiting dogs, you should identify what actions could have been taken to prevent the occurrence. Your honest input is important to maintain the quality of our services.
- If multiple individuals/dogs are involved in an occurrence, the individuals may either complete one form that everyone signs or multiple forms signed by each individual. Please assure that the information reflects your understanding of the events before you sign the form.

Date of Incident: _____

Incident Involving: _____

Exact Location of Occurrence: _____

Time of Occurrence: _____ AM PM

Nature of Occurrence: _____

Description of Occurrence:

If incident involved injury to person or animal:

Was medical attention sought and obtained? Yes No Not Applicable

If medical treatment was obtained please check all that apply:

First Aid: EMT: Nurse Practitioner/Physician's Assistant/Medical Doctor:

Hospital or Other Treatment Facility: Veterinarian or Vet Tech:

