Washington County

Child Foster Care
Incident Report

Name of Provider: _____

An incident report must be entered into the child's personal file by the operator within eight hours after knowledge of the incident. Incident Reports must be filed when a child requires:

1. Emergency Care;
2. Police report involving a resident has been made;
3. When a complaint has been filed under the Child Maltreatment Law.

Name of Child: _____

Date of Report: _____ Time of Report: _____

Reporter: _____ Telephone: _____

Date of Incident: _____ Time of Incident: _____

Report of Details Given (Who, what, where, when): _____

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Was Person Involved Taken to a Hospital? ☐ Yes ☐ No	When:	Where:	By Whom:
Was a Report Filed with Child Protection? ☐ Yes ☐ No	When:	By Whom:	
Were the Police Involved? ☐ Yes ☐ No	When:		

Indicate on Diagram Location of Injury:
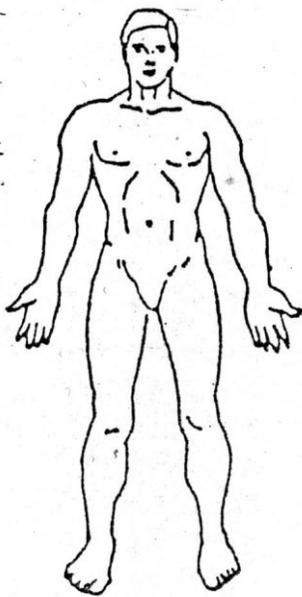
Type of Injury

1. Laceration _____

2. Hematoma _____

3. Abrasion _____

4. Burn _____

5. None apparent _____

6. Other _____

   Specify: _____
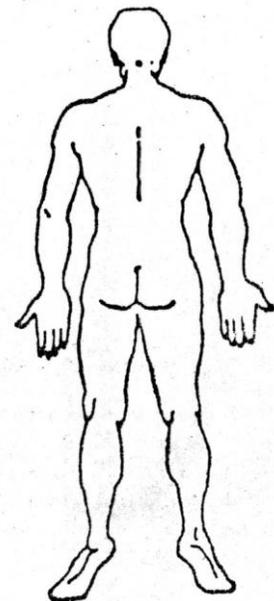
Accident

1. Fatal _____

2. Nonfatal _____

Reported incident to caseworker? ☐ Yes ☐ No	Date:
Reported incident to licensor? ☐Yes ☐ No	Date:

Follow up: _____

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