



Incident Report Summary (2016)

For the year 2016, Touchstone Family Association documented 91 significant incidents in its programs with the majority of incidents occurring in the residential program, Francis House, with 76 significant incidents. The 15 incidents that occurred in the Richmond Programs break down into the following categories:

Abuse Disclosure:	6	incidents
Aggressive Behaviour:	1	incident
Suicide Ideations:	3	incidents
Injury	1	incidents
Other	4	incidents
Alcohol/Drug	0	incidents

The Richmond Programs provide service to over 300 children, youth and families so we consider this small amount of reportable incidents an expected number over the course of the year. The majority of the incidents were disclosures of abuse (physical, emotional and/or sexual in nature). There was one incident of aggressive behavior which occurred in the Richmond office. All agency staff are trained in Non-violent Crisis Intervention and are subsequently adequately prepared to properly debrief with their clients and help them identify triggers. These incidents were reported to MCFD. There were three incidents of suicide ideations this year, indicating that the Touchstone counsellors are working with clients with very complex needs. There were four incidents in the “other” category that included reported erratic behavior by a client over the phone, a dog barking at and disturbing a client in the office, a client on vacation in Los Angeles that needed to return to Vancouver and a former client that came to the office with a suspected stolen bike and dog (which appeared to have just had puppies).

These incidents were followed up by the clients’ counsellors, when needed. All incidents were handled in a timely and appropriate manner ensuring that the clients were kept safe.

Trends (Richmond Programs)

The noticeable trend at the Richmond site is that the majority of reported incidents were pertaining to incidents of disclosures of abuse and suicide ideations. This is expected, given the services that Touchstone offers to the community.

Francis House

In reviewing the incidents for 2016, it was noted that the reported number of incidents was higher than last year for the residential program (76 reported incidents; up from 29).

The incidents that occurred at Francis House break down into the following categories:

Aggressive or Assaultive Behaviour (including verbal) - 8
Suicide Ideations/Self-harm – 10
Property Damage - 1
Alcohol or Drug Use - 3
AWOL (including late curfew) – 23
Allegations (towards staff or youth) - 0
Unusual Behaviour (erratic behaviour, car accident) – 15
Fire Setting - 0
Injury - 2
Theft - 3
Medication Error - 7
Disclosures - 4

This report noted a substantial increase in the overall number of incidents reported in 2016. There were a total of 76 incidents documented at Francis House, up from a total of 29 in 2015. Most notably there was a significant increase in the amount of “AWOL”, “Unusual Behaviour” and “Suicide Ideation” related incidents among the youth living in the resource. These numbers increased significantly in 2016 due to a few youth in particular; youth living with severe mental health issues. These youth also accounted for the increase in the “Medication Error” category (although there was only 1 staff error; the rest were medication refusals by the youth that we are required to report) and for the slight increase in “Aggressive or Assaultive Behaviour”.

Another reason for the increase in overall incident reports was by the sheer fact that Francis House was at full capacity for most, if not all, of the year (as opposed to a lower occupancy rate in 2015).

The “Disclosures” and “Injuries” in the program were reported to the youths’ respective social workers and to Licensing, and were investigated appropriately.

Use of Restraint

For the year 2016, there were no restraints in the residential program (similar to 2013, 2014 and 2015). Staff have had to intervene physically at times; most typically redirecting the youth with body positioning or placing a hand on the client’s shoulder to prevent them from running into traffic. However, no official two-person, CPI approved restraint was used.

In an effort to minimize or eliminate the number of restraints in the program, Touchstone continues to train its staff in non-violent crisis intervention training (commonly called “CPI”). This allows staff to be fully trained or refreshed in proper de-escalation techniques, awareness of personal triggers for youth and staff and to learn or practice the proper technique for restraints. This training has been maintained on a consistent basis (annually) and is reviewed at staff meetings.

Our goal is to minimize and/or eliminate restraints but understand that it may be necessary as a last resort (which is also the mandate taught in CPI). This goal will be reviewed annually alongside our review of pertinent training for Touchstone programs.

At this time, there are no areas that require significant improvement; our training is thorough and includes full-time staff, part-time staff, students and volunteers. We will continue to maintain our high level of awareness and training.

In terms of factors impeding the elimination of restraints, there are no program or staff factors contributing to this at this time. However, the program receives referrals for youth that are extremely volatile, mentally ill and aggressive; this in itself is a factor that impedes the complete elimination of restraints for the program.

The Richmond site has a “no restraint” policy.

In terms of seclusion; the Richmond site and the residential program do not utilize seclusion as a behaviour management technique.

As the youths’ needs become more complex, additional support is required. Integrated Case Management is an integral part of the child’s welfare and helps provide the necessary comprehensive care of these youth. Francis House continues to work in collaboration with other professionals when dealing with some of these incidents. Emergency Services, Ambulance, and Child and Youth Mental Health have all provided invaluable assistance to the staff of Francis House. These additional resources continue to be an asset to the youths’ overall well being.

Trends (Francis House)

In summary, the staff of Francis House have resolved these significant incidents in an appropriate and professional manner. The management and staff teams, as well as the Health and Safety Committee, consistently review these incidents in search of improvements, alternative interventions, trends or patterns. Francis House continues to strive to be a safe and therapeutic environment for the youth at all times.

The only noted trend over this last year is the average age remained the same as the last two years (14/15 years old). The Francis House program works collaboratively with MCFD Resources to ensure that the youth referred to the program are appropriate and a good fit. This too, helps tremendously in establishing a safe environment for all youth living at Francis House.

One factor that continues to be a trend is that the staff team at Francis House has also had little change over the past few years. An experienced and close team can have a very positive impact on the therapeutic responses within the program.

Training Needs

Touchstone Family Association is an accredited agency and Francis House is a licensed facility (Vancouver Coastal Health Authority). These governing bodies ensure that Touchstone delivers a high level of service at all times. All agency staff are trained in Non-Violent Crisis Intervention and First Aid.

Accreditation standards ensure that there is competency-based training provided to the Francis House staff on an annual basis. This includes, but is not limited to, trauma, attachment, learning disabilities, growth and development and the effects of placement on children. The Francis House staff are trained annually on proper Medication Management and have a Clinical Counsellor that provides family and individual counseling to the youth and their families.

The most recent training for the Francis House team was Naloxone Administration Protocols Training. Due to the fentanyl crisis in the Province, MCFD has mandated that all residential programs receive the appropriate training and have a Naloxone Kit in the resource. The program director and another staff have received "Train the Trainer" training and have subsequently trained all of the staff. The program has a Naloxone Kit located alongside the First Aid Kit.

At the Richmond site, ongoing training is sought after to meet the current needs of the clients. For example, the staff have participated in Trauma Informed counselling training.

This report, in combination with the annual Performance Outcome Evaluation Reports, identifies the training needs of the staff. By regularly reviewing incidents on a multi-level capacity and by providing relevant training to staff, we aim to decrease the number of recurring incidents. Regular staff meetings and supervision also contribute to the prevention of significant incidents and the recurrences thereof.

Reporting Requirements

Internal: All incident reports are completed by the staff involved in the incident on the same day of the incident. The report is then sent to the Program Director for review.

All incident reports are subsequently reviewed by the Health, Safety and Accessibility Committee, the management team and the staff team (at staff meetings).

External: All incident reports are sent to the guardianship worker of the client/youth and to the MCFD Resource worker when applicable. Additionally, the residential program is a licensed facility and is required to report to the Vancouver Coastal Health Authority.

Reports may go to collateral professionals as appropriate (probation officers, mental health workers, etc.).

In conclusion, upon review of the incidents at Touchstone Family Association for the year 2016, it is noted that each incident was handled professionally and in a timely manner. The appropriate authorities were contacted as needed and any necessary follow-up was performed. The reports are reviewed by the Health, Safety and Accessibility Committee as well as by the management and staff teams, allowing for direct and consistent communication pertaining to incidents, throughout the agency. The staff at Touchstone work with an extremely vulnerable and/or high risk clientele and encounter crisis almost daily. Their commitment to their client's safety and well being is commendable.

Respectfully submitted,



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