# Appendix B

# BEHAVIOURAL INCIDENT REPORT

Personal information collected under this plan is collected under the authority of B-14 Protection of Privacy, in compliance with the Freedom of Information and Protection of Privacy Act (FIPPA) of Ontario and the Personal Health Information Protection Act (PHIPA) of Ontario. The purpose of this data collection is related directly to and needed by Canadore College to administer the college/student relationship including, but not limited to, providing for the health and safety of all members of the College community. At all times, personal information will be protected in accordance with the Freedom of Information and Protection of Privacy Act and the Personal Health Information Protection Act. If you have questions about the collection, use and disclosure of personal information, please contact Executive Assistant to the President and CEO.

This Behavioural Incident Report is designed to enable faculty, staff and students to voluntarily report “Behaviour(s) of Concern” about a student who may need help at Canadore College. A report in this context is an event that does not warrant immediate intervention. **In the event of an emergency that does require immediate intervention, call 911 or Campus Security 705-498-7244 or (ext. 5555).** This report provides a standardized method for recording observations for alerting staff of potential concerns. It helps serve as an early warning system to assist students who are potentially in distress and in need of assistance.

**Information about the subject student: *(Please enter as much information as possible)***

Name Student ID #

Address Phone

(If known, please indicate whether the address is local or permanent.)

### Incident (“Behaviour of Concern”) Information:

Date of incident\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date form completed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Class/Location of incident Time of incident (approximate)

**Name of person reporting incident** *[*Individuals may make anonymous reports. However if a name is not provided it may hamper the team’s ability to seek follow-­‐up information that may be critical in determining an appropriate course of action. *Every effort will be made to ensure your identity will remain confidential]*

Email Address Phone

Are you a student instructor staff member other (please indicate) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name(s) of others Involved

Please provide a detailed description of the “Behaviour of Concern”, paying particular attention to the behaviours of the student. Concrete specific observations are most useful. Avoid providing judgments, assessments, and opinions. (Use additional pages if required.)

Please describe any conversations or other communications you have had with the student and any action you have taken regarding this incident (“Behaviour of Concern”): (Use additional pages if required.)

**Please submit this report online or email a copy to** **canadoreact@canadorecollege.ca**

**If you wish to submit a paper copy instead, please deliver it to the Canadore Assessment and Care Team c/o the Security office at either campus location.**