



Manual Serious Occurrence Reporting Business Process and Form

Purpose

All Serious Occurrence Reports (SORs) must be reported within the Serious Occurrence Reporting and Residential Licensing (SOR-RL) system, including outside of business hours. The manual SOR is to be used by service providers to submit an SOR to the ministry when the SOR-RL online tool is temporarily offline, unavailable or inoperative.

A manual SOR must be submitted within the reporting timeframes as defined in the [*Ministry of Children, Community and Social Services Serious Occurrence Guidelines \(MCCSS SOR Guidelines\)*](#). The manual SOR can be used to report a new serious occurrence or to update an existing SOR.

Service providers must make reasonable efforts to inform their ministry contact when they become aware that the SOR-RL online tool is temporarily offline, unavailable or inoperative for use.

For any accessibility requirements relating to this document, please contact your ministry representative.

Business Process for Service Providers

1. Determine whether to report a manual SOR, based on the following conditions:

- a. If SOR-RL is unavailable or inaccessible and an SO occurs during business hours, service providers must complete and submit a manual SOR and send it to their ministry designate. Youth Justice (YJ) service providers must also notify their ministry contact for all Level 1 SORs.
- b. If SOR-RL is unavailable or inaccessible and an SO occurs outside of business hours but is not highly contentious, service providers must complete and submit a manual SOR and send it to their ministry designate. Youth Justice service providers must also notify their ministry contact for all Level 1 SORs.
- c. If SOR-RL is unavailable or inaccessible and an SO occurs outside of business hours

and is highly contentious, service providers must complete and submit a manual SOR and send it to their ministry designate. Non-Youth Justice service providers must ALSO contact the emergency after hours line, at 905-454-5000 ext. 5314 or 5315. Youth Justice service providers must ALSO notify their ministry contact.

- d. If the system is only temporarily unavailable or inaccessible and it is anticipated that access will be restored within the reporting timelines, service providers can wait to regain access to report the SOR in SOR-RL. Youth Justice service providers must notify their ministry contact for all Level 1 SORs.

2. Complete a manual SOR form

If you have determined that a manual SOR is required, complete the manual SOR form below.

For SOs involving individuals who were in receipt of both Youth Justice and non-Youth Justice services at the time of the SO, complete two manual SOR forms. On one, enter the Youth Justice service information and on the other, enter only the non-Youth Justice service information.

3. Send the manual SOR to the appropriate ministry designate:

- East Region: ERSOR-RL@ontario.ca
- Toronto Region: AskTorontoRegionSORRL@ontario.ca
- West Region: WestRegionSO@ontario.ca
- Central Region: AskCentralRegionSORRL@ontario.ca
- North Region: AskNorthRegionSORRL@ontario.ca
- Indigenous Healing and wellness Strategy: IHWS.SOR@ontario.ca AND cc your program supervisor
- For SORs from a Youth Justice Directly Operated facility or Probation Office: YJIMU@ontario.ca
- For SORs from a Youth Justice-funded program: regional office above, AND cc YJIMU@ontario.ca

In the subject line, include details such as "Manual SOR" and the "Service Provider name". For incidents involving a program funded by Youth Justice, include the term "YJ" or "Youth Justice" in the subject line. Do not include any personal information, including names, in the file name or subject line.

4. Submit an update

Until MCCSS deems that no further action is required from the service provider with

respect to the SO, service providers are required to provide updates as new information becomes available about the SO and at a minimum every 7 business days. If SOR-RL is offline, unavailable or inoperative at the time at which an update must be reported, send an updated manual SOR to the ministry designate.

It is important to mark the checkbox indicating that the report is an update in the form, and, if the initial SOR was submitted through SOR-RL, to include the SOR-RL SO Identification (SORID) number if it is known.

5. Submit the SOR on SOR-RL

Once access to the system is re-established, the SOR must be submitted onto SOR-RL by the service provider, and the Manual SOR and any Manual SOR updates should be uploaded as attachments to the SOR. All manual SORs must be submitted onto SOR-RL, even if the incident has been resolved.

Personal Information Disclaimer

Full names or initials of individuals involved in the occurrence, including residents, clients, staff persons, guardians, or other individuals who would be identifiable through the inclusion of their personal information, should not be included in the Manual SOR Report or the file name. SOR-RL has built-in privacy and security safeguards that the Manual SOR does not. Service providers are required to take reasonable steps to safeguard the sensitive information contained in SORs, including when securely transferring and/or sharing SOR data.

Manual Serious Occurrence Report Template

Context

Indicate the reason for submitting the Manual SOR to the ministry rather than reporting the Serious Occurrence through the SOR-RL online tool, including any actions taken:

New SOR or update to existing SOR?

If an update, indicate the update #:

If an update to an existing SOR submitted in SOR-RL, indicate the SOR-RL SORID:

SOR Level (to determine SOR levels, refer to the *MCCSS Serious Occurrence Reporting Guidelines* or the *Summary of Level 1 and Level 2 prompts tip sheet* for definitions and reporting requirements):

Section 1: Site, Date and Time

Program Area/Division:

Region:

Service Provider Name/Probation Office Name/DO Facility Name:

Site Name (only sites which are on SOR-RL – MCCSS-funded, licensed, or directly operated sites – should be indicated):

Site Address (for confidential sites, enter “confidential”):

Transfer Payment Recipient # (for ministry-funded programs only, from service contract. Leave blank if not applicable.):

License ID (for ministry-licensed children's residences, staff model homes, and foster care programs only. Leave blank if not applicable):

Does this SO relate either to a home, or to an individual whom you have placed in a home, where the home is NOT licensed nor funded by MCCSS and is operated by a third-party

agency?

Date and Time of Serious Occurrence:

Date (YYYY-MM-DD):

Time (HH:MM XM):

Date and Time of becoming aware of the SO/deeming the incident a serious occurrence (if different from the date and time of serious occurrence):

Date (YYYY-MM-DD):

Time (HH:MM XM):

Date and Time of phone/email notification to ministry if applicable (Youth Justice service providers for Level 1 SORs only):

Date (YYYY-MM-DD):

Time (HH:MM XM):

Ministry contact:

If submitted outside of the required reporting timelines, please indicate the reason(s) why (timelines are determined by the Level of the SOR):

Section 2: Individuals Involved

- If the SO involves one or several individuals (service recipients), list all individuals below. If the occurrence involves more than 4 individuals, attach additional pages as needed.
- If the SO does not involve individuals (relates to a site (e.g., a power outage) or to staff/foster parent (e.g., a complaint relating to services delivered), select the "SO not related to an individual but to the service provider" option in the drop-down list below and leave the remainder of section 2 below blank.

Number of individuals (service recipients) involved in the occurrence:

Number of additional pages attached for Section 2 (if applicable):

Individual #:

Age:

Program at time of occurrence (non-Youth Justice only):

Young Person Identifying Factors (Youth Justice only):

Identifier Type (if applicable):

Identifier (if applicable):

Legal Guardian Status:

Placing Agency (if applicable):

Individual #:

Age:

Program at time of occurrence (non-Youth Justice only):

Young Person Identifying Factors (Youth Justice only):

Identifier Type (if applicable):

Identifier (if applicable):

Legal Guardian Status:

Placing Agency (if applicable):

Individual #:

Age:

Program at time of occurrence (non-Youth Justice only):

Young Person Identifying Factors (Youth Justice only):

Identifier Type (if applicable):

Identifier (if applicable):

Legal Guardian Status:

Placing Agency (if applicable):

Individual #:

Age:

Program at time of occurrence (non-Youth Justice only):

Young Person Identifying Factors (Youth Justice only):

Identifier Type (if applicable):

Identifier (if applicable):

Legal Guardian Status:

Placing Agency (if applicable):

Section 3: Categories

- If the SO involves one or several individuals (service recipients), select "Individual" in the Related to column and list each individual below, each with a minimum of one category/subcategory. Each individual can have more than one category/subcategory. If the occurrence involves more than 4 individuals, attach additional pages as needed.
- If the SO does not involve individuals and relates to a site or a staff (e.g., a power outage), select "Service Provider" in the Related to column, and identify a minimum of one category/subcategory.

Number of additional pages attached for Section 3 (if applicable):

Related to:

Category #1:

Category #2 (if applicable):

Category #3 (if applicable):

Related to:

Category #1:

Category #2 (if applicable):

Category #3 (if applicable):

Related to:

Category #1:

Category #2 (if applicable):

Category #3 (if applicable):

Related to:

Category #1:

Category #2 (if applicable):

Category #3 (if applicable):

Related to:

Category #1:

Category #2 (if applicable):

Category #3 (if applicable):

Related to:

Category #1:

Category #2 (if applicable):

Category #3 (if applicable):

Related to:

Category #1:

Category #2 (if applicable):

Category #3 (if applicable):

Section 4: Notifications

- List all notifications which have been made. Please note the following notification requirements:
 - For each individual who is not a Legally Independent Adult, a **Parent/Legal Guardian notification** is required before closure.
 - For each individual with a Placing Agency, a corresponding **Placing Agency notification** is required before closure.
 - For each Death category added, a corresponding **Coroner notification** is required before closure.
 - For each Death category added to a Youth Justice SOR, a corresponding **Police notification** is required before closure.
 - For each Communicable Disease or Infectious Outbreak category added, a corresponding **Local Public Health Unit notification** is required before closure.
- Beyond those automatically required above, add all notifications which have been made (e.g., Ombudsman notification if Ombudsman was notified, Other notification if the Law Enforcement Complaints Agency (LECA) was notified, Local CAS Intake notification if a duty to report notification was made to a Society, etc.)
- If the SO involves one or several individuals (service recipients), select "Individual" in the Related to column and list each individual below. More than one notification can be added for each individual. If the occurrence involves more than 4 individuals, attach additional pages as needed.
- If the SO does not involve individuals and relates to a site or a staff (e.g., a power outage), select "Service Provider" in the Related to column.

Number of additional pages attached for Section 4 (if applicable):

Related to:

Notification Type:

Notification Date:
Notification Time:

Related to:
Notification Type:
Notification Date:
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Section 5: Description, Further Details, Updates

- Refer to the “Category-specific reporting requirements” section of the *MCCSS SOR Guidelines* to determine the information required in the description for each type of SO.
- Do not include full names or initials of individuals involved in the occurrence, nor of staff persons, guardians, or other individuals who could be identifiable through the inclusion of their personal information in the description. Use non-identifying descriptors, such as individual 1, parent, staff 1, staff 2, etc. Individual numbers should correspond to the individual numbers from Section 2.
- Do not include health/medical information (diagnoses, prescription names or dosages, detailed medical history or test results), familial narratives, racial/ethnic origin, sexual orientation, or other types of personal information in the description. Where possible, use alternative language to avoid an unjustified invasion of personal privacy¹. Exclude

¹ For example, rather than writing “individual has a diagnosis of bipolar disorder and sometimes has difficulty regulating emotions”, write “individual sometimes has difficulty regulating emotions”.

any information that is not directly relevant to the SOR and its review/follow-up or that is not necessary for the purpose of serious occurrence reporting.

- Minimum required information to include:
 - What happened and where in chronological order
 - Precipitating factors
 - If incident involved an alleged criminal offence
 - Current condition of the individual(s)
 - Service Provider action
 - Debrief with individuals or staff, if applicable
 - Any media attention

Description or Update:

Further action proposed by Service Provider (include what steps you plan to take to respond to the serious occurrence and any follow up):

Has this occurrence resulted in any media attention?

Is there expected to be any media attention in the future?

Direction, if any, provided by Ministry (include any direction provided by the ministry, including the ministry staff name and method of contact):

Is this expected to be the only/last report (including updates)?

If not, please explain why:

Section 6: Individual's Views

Include each individual's views/perspective where applicable/available. To the extent possible, the individual's views should be in the individual's own words. Service providers must ensure that the individual has provided their consent to having their view/opinion included in the SOR. Do not include any personal information.

Section 7: Supporting Documents

Any supporting documents that the service provider or ministry deems necessary to support the review of the SOR should be attached with the Manual SOR Form. Only attach files that are directly relevant to the SOR and ensure that no personal information is visible in the document file name or the document body. Exclude any information or attachments that are not directly relevant to the SOR and its review/follow-up or that are not necessary for the purpose of serious occurrence reporting.

Are any supporting documents attached with this Manual SOR form (excluding additional form pages)?

Number of supporting documents attached (if applicable):

Section 8: Sign-Off

Reported by:

Name:

Position:

Phone number:

Email address:

Approved by (if applicable):

Name:

Position:

Phone number:

Email address: