Reynolds
School District

As a community, we prepare lifelong learners to achieve their full potential in a complex and interconnected world.
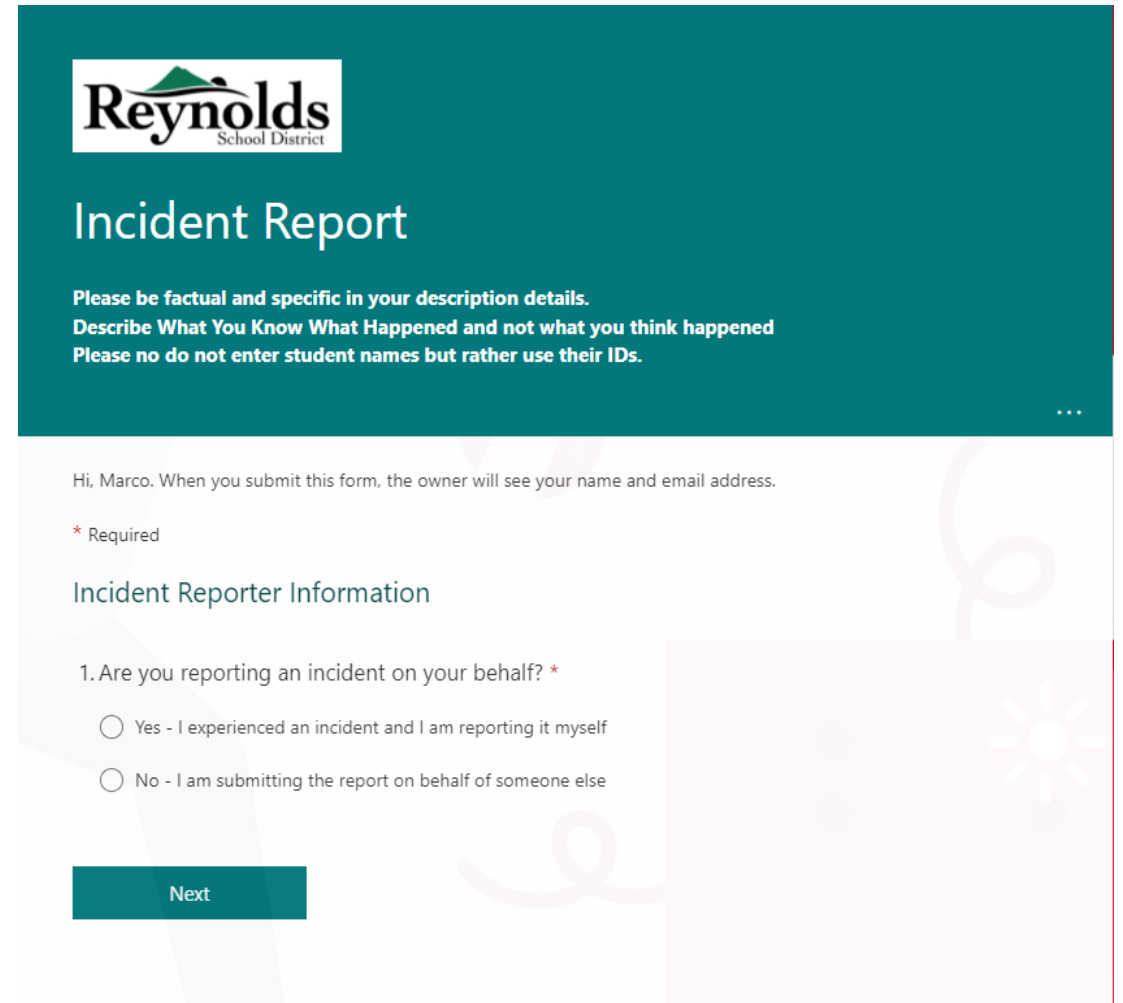
New Incident Report via Microsoft Forms

How to create an incident report

- The new RSD7 incident report is created via Microsoft Forms and here a few important changes

- You as the submitter of the incident report will NOT get a notification email after submitting the incident report, only the Risk Manager will be notified via email that an incident report have been submitted

- Your Supervisor/Principal will receive an email notification from "Microsoft Flow" and also an activity notification via Microsoft Teams that an incident report has been submitted and sends an approval request were the Supervisor is able to enter a comment
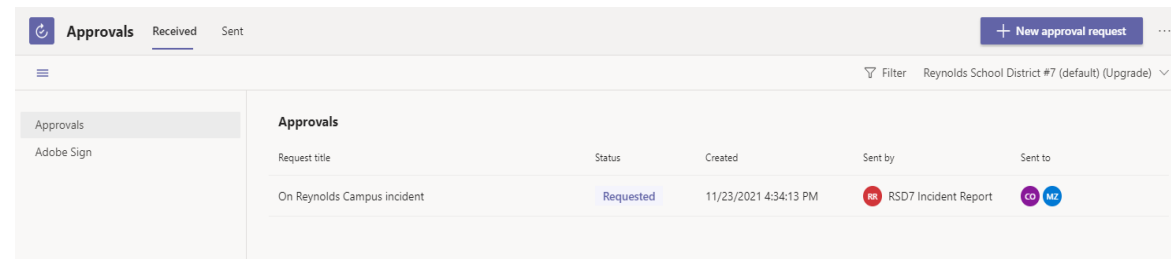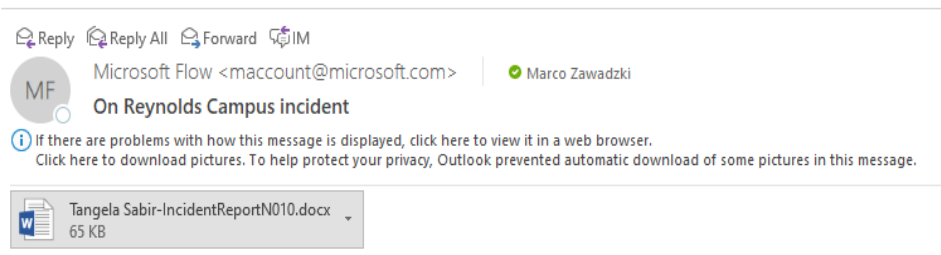
How to create an incident report

- Choose if you are submitting the incident report for yourself or on behalf of someone else

- <mark>Pages 2 – 9 are for Self Reporter</mark>

- <mark>Pages 10 – 14 are for submitting the incident report for someone else</mark> (e.g. a secretary files an incident report on behalf of a student or a staff member)

- **All fields are required and the submitter's name and email will be shown for further questions when you submit the incident report**

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Incident Report

Please be factual and specific in your description details.
Describe What You Know What Happened and not what you think happened
Please no do not enter student names but rather use their IDs.

Hi, Marco. When you submit this form, the owner will see your name and email address.

* Required

Incident Reporter Information

1. Are you reporting an incident on your behalf? *

◯ Yes - I experienced an incident and I am reporting it myself

◯ No - I am submitting the report on behalf of someone else

Next

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3

How to create an incident report

1. If you are submitting the incident report for yourself choose Yes and click next

2. You have to enter your building principal's/supervisor's email address who has to add a comment(s)/investigation(s)

Your building Principal/Supervisor will receive a notification via email and MS Teams

4

How to create an incident report

3. Please fill out when your shift starts

4. Please fill out when your shifts end

5. Please fill out when you left work that day due to your incident (e.g. 07:00AM, 03:30PM)

* Required

Self Reporter shift information

3. SRE - Start Shift - Please enter time regular shift starts *

> 07:00 AM

4. SRE - End Shift - Please enter time regular shift ends *

> 04:00 PM

5. SRE - Left Work - Enter actual time staff left work on the date of injury *

> 11:45 AM

Back   Next

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How to create an incident report

6. Please select if the incident happened On Campus, Off Campus, or On a Reynolds Bus

7. Please select the location in the drop down menu

8. Please enter the incident details

9. Please enter the incident date

10. Please enter the incident time

How to create an incident report

11. Please choose the type of incident report Injury, or Non-injury

12. Please select injury type in the drop down menu

13. Please select the injury area in the drop down menu

14. Please select the date when the injury was reported

15. Please select the injury cause in the drop down menu

* Required

Incident Type Information

11. Injury Report - Please choose the type of report *

Non-Injury

12. Injury Type - Please choose the type of injury *

Bitten

13. Injury Area *

Shoulder

14. Injury Date - Please enter the date of when the injury was reported *

12/8/2021

15. Injury Cause - Please choose the injury root cause *

Conflict

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How to create an incident report

16. Please indicate if there was a witness

17. If so, please enter the name and phone number of the witness(es)

18. Please select if a doctor was seen for the injury

16. Injury Witnesses - Were other people involved in this incident? *

○ Yes

○ No

○ I do not know

17. Witness Info - Please enter the names and telephone number of the other people involved *
e.g. Mark Dozer, 239-403-449; Anthony Tonet, 3554-903-3495

Enter your answer

18. Injury Seen - Was a doctor seen for the injury? *
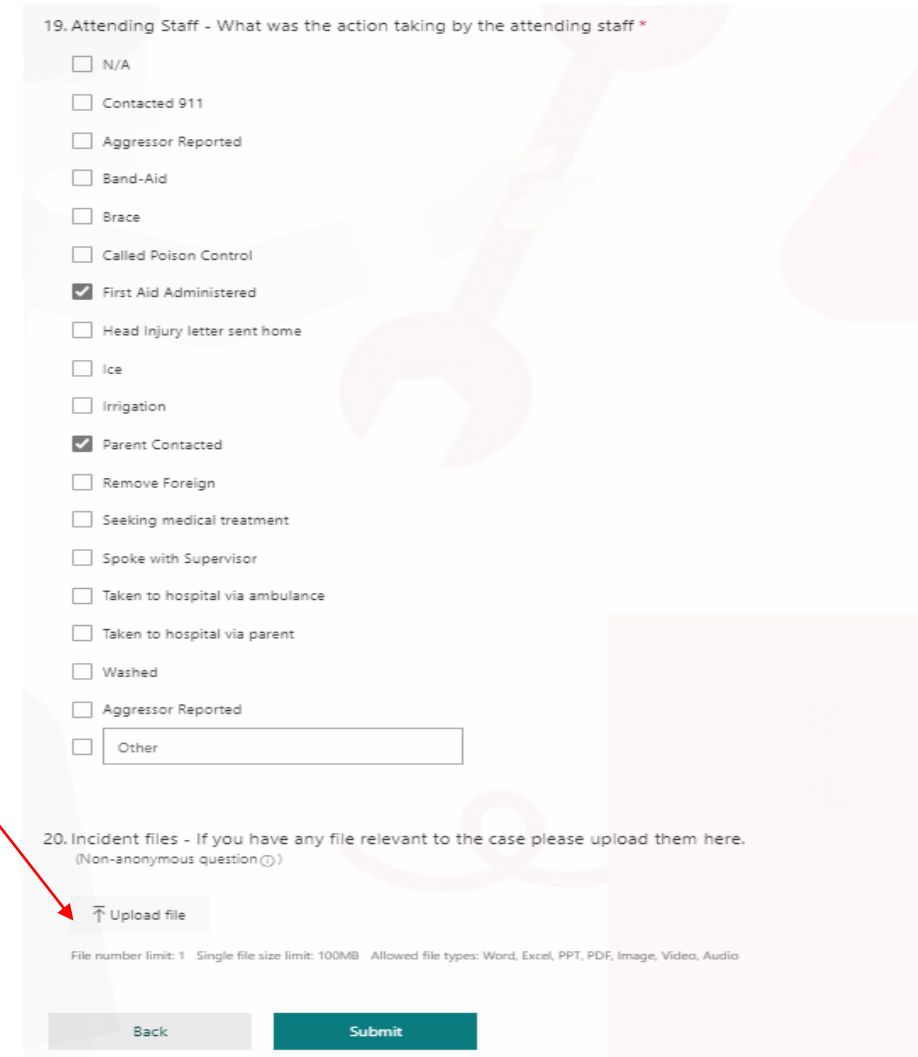
○ Yes

○ No

○ I do not know

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How to create an incident report

19. Please select was action(s) was/were taken by attending staff

20. If you have files relating to this incident you can upload them here

21. Click submit to finish the incident report

19. Attending Staff - What was the action taking by the attending staff *
- [ ] N/A
- [ ] Contacted 911
- [ ] Aggressor Reported
- [ ] Band-Aid
- [ ] Brace
- [ ] Called Poison Control
- [x] First Aid Administered
- [ ] Head Injury letter sent home
- [ ] Ice
- [ ] Irrigation
- [x] Parent Contacted
- [ ] Remove Foreign
- [ ] Seeking medical treatment
- [ ] Spoke with Supervisor
- [ ] Taken to hospital via ambulance
- [ ] Taken to hospital via parent
- [ ] Washed
- [ ] Aggressor Reported
- [ ] Other

20. Incident files - If you have any file relevant to the case please upload them here. (Non-anonymous question ⓘ)

↑ Upload file

File number limit: 1 Single file size limit: 100MB Allowed file types: Word, Excel, PPT, PDF, Image, Video, Audio

Back   Submit

9

How to create an incident report

1. If you submitting the incident report for someone else, select No – I am submitting the report on behalf of someone else

2. Now you have to choose between an Employee, a Student, or Not a Reynolds Employee

If you select student, you have to enter the student's ID Number as well

How to create an incident report

3. Please enter the First Name

4. Please enter your Last Name

5. Please enter the email address of the staff member you are creating the incident report for

6. Please fill out when your shift starts

7. Please fill out when your shift ends

8. Please fill out when you left work that day due to your incident (e.g. 07:00AM, 03:30PM)

9. Please enter the staff member's Supervisor/building Principal's email as well, who has to add a comment(s)/investigation(s)

* Required

Affected District Employee Information

3. ADE - Affected Name - Please enter the name of the person affected in this incident *

[Enter your answer]

4. ADE - Affected Surname - Please enter the surname of the person affected in this incident *

[Enter your answer]

5. ADE - Affected Email - Please enter the email of the person affected in this incident *

[Enter your answer]

6. ADE - Start Shift - Please enter time regular shift starts
*
e.g. 9:45 AM or e.g. 3:55 PM or 13:30

[Enter your answer]

7. ADE - End Shift - Please enter time regular shift ends
*
e.g. 9:45 AM or e.g. 3:55 PM or 13:30

[Enter your answer]

8. ADE - Left Work - Enter actual time staff left work on the date of injury
*

[Enter your answer]

9. ADE - Email Supervisor - Please enter the supervisors email of the person affected in this incident
*
If the affected individual works for Nutrition Services enter cfoote@rsd7.net. If you are a custodial staff enter sgallagher@rsd7.net. If you are facilities staff enter iladu@rsd7.net. If you work in Transportations staff enter melson@rsd7.net.
Teachers enter your school principal's email. For other departments enter your department head's email.

[Enter your answer]

Back   Next

How to create an incident report

10. Please select if the incident happened On Campus, Off Campus , or On a Reynolds Bus

11. Please select the location in the drop down menu

12. Please enter the Incident details

13. Please select the incident date

14. Please enter the time the incident occurred

* Required

Incident location and detail Information

10. Place where the incident occurred *
- ⦿ On Reynolds Campus
- ○ Off Reynolds Campus
- ○ On a Reynolds Bus

11. Incident Location - Please select the on campus location, or sponsoring school, or school route involved when the incident occurred? *

District Office ⌄

12. Incident Detail - What caused the injury to occur? Include tools used, machinery, vehicle, etc. *

(Please include as much detail as you know, do not use names in this section, use specified field for names)

Enter your answer

13. Incident Date - Please select the date when the incident occurred *

12/1/2021

14. Incident Time : Please enter the time when the incident occurred *

e.g. 9:45 AM or e.g. 3:55 PM or 13:30

11:30 AM

Back   Next

Reynolds School District

How to create an incident report

15. Please select the type of report in the drop down menu, Injury, or Non-Injury

16. Please enter the injury type in the drop down menu

17. Please select the injury area in the drop down menu

18. Please select the date when the injury was reported

19. Please select the injury cause in the drop down menu

20. Please indicate if there was a witness

21. If so, please enter the name and phone number of the witness(es)

* Required

Incident Type Information

15. Injury Report - Please choose the type of report *

Non-Injury

16. Injury Type - Please choose the type of injury *

Bitten

17. Injury Area *

Shoulder

18. Injury Date - Please enter the date of when the injury was reported *

12/8/2021

19. Injury Cause - Please choose the injury root cause *

Conflict

20. Injury Witnesses - Were other people involved in this incident? *

○ Yes
○ No
○ I do not know

21. Witness Info - Please enter the names and telephone number of the other people involved *
e.g. Mark Dozer, 239-403-449; Anthony Tonet, 3554-903-3495

Enter your answer

How to create an incident report

22. Please select if a doctor was seen for the injury

23. Please select was action(s) was/were taken by attending staff

24. If you have files relating to this incident you can upload them here

25. Click submit to finish the incident report

22. Injury Seen - Was a doctor seen for the injury? *
○ Yes
○ No
○ I do not know

23. Attending Staff - What was the action taking by the attending staff *
☐ N/A
☐ Contacted 911
☐ Aggressor Reported
☐ Band-Aid
☐ Brace
☐ Called Poison Control
☐ First Aid Administered
☐ Head Injury letter sent home
☐ Ice
☐ Irrigation
☐ Parent Contacted
☐ Remove Foreign
☐ Seeking medical treatment
☐ Spoke with Supervisor
☐ Taken to hospital via ambulance
☐ Taken to hospital via parent
☐ Washed
☐ Aggressor Reported
☐ Other

24. Incident files - If you have any file relevant to the case please upload them here. (Non-anonymous question ⓘ)

⊼ Upload file

File number limit: 1   Single file size limit: 100MB   Allowed file types: Word, Excel, PPT, PDF, Image, Video, Audio

Back   Submit

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For further question please contact
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As a community, we prepare lifelong learners to achieve their full potential in a complex and interconnected world.