



**LOS ANGELES UNIFIED SCHOOL DISTRICT
BEYOND THE BELL BRANCH**

STEPS AND GUIDING QUESTIONS FOR COMPLETING THE INCIDENT NOTES

1. Determine the type of incident and make sure you have the appropriate report form ready to complete.
 - a. Suspected child abuse – Child Abuse Form and Incident Notes Form
 - b. Accident, Death, Injury, Medical – OEHS Injury/Accident Investigation Report Form and Incident Notes Form
 - c. Other types of incidents – Incident Report Form
2. Where did the incident occur and its exact location?
 - a. On Campus (e.g. G building in Room 123, girl's bathroom at the gym, football field, etc.)
 - b. Off Campus (e.g. across from the school at a store – 234 North Adams St., Los Angeles)
 - c. District Facility (e.g. Beaudry Bldg. 1st floor lobby, PCSB room 123)
 - d. District School Bus/Vehicle (e.g., Bus 12345 drop off route to ABC School)
3. When did the incident happen? What time?
4. Know the correct type of incident(s) to be reported. Is the incident centered around or initiated by
 - a. Student
 - b. Employee
 - c. Parent/Guardian/Community Member
 - d. Facility
5. Include all detailed information related to the incident such as:
 - Harassment – physical or verbal
 - Medical – asthma, chest pain, faint, heat stress, intoxication, illness, diabetes, seizure, etc.
 - Possession of illegal substance – alcohol, cigarette, drugs, ecstasy, marijuana, etc.
 - Possession of weapon – bomb, firecracker, gun, imitation weapon, knife, etc.
6. Who was involved in the incident?
 - a. Victim
 - b. Suspect
 - c. Witness
7. Is the person involved in the incident a/an:
 - a. Student – student number, name, DOB, gender, grade, school of attendance
 - b. Employee – name, employee number, site/location name, classification (certificated or classified), job title
 - c. Parent/community member/visitor – name, home address, information of the child attending LAUSD school
8. Brief description of the incident – How did the incident occur? Include all important information and activities related to the incident such as:
 - Burglary – What is the estimated cost of the property damage? Was the intrusion alarm activated?
 - Abduction/Kidnapping – Was law enforcement contacted? If yes, which one?
 - Act of Violence – If this incident is between employee to student and warrants a child abuse incident, was it reported?
 - Bullying – Does this incident require suspension?
9. Brief description of school actions taken or administrative follow-through – What was done to address the incident? Include all important information and activities related to the incident such as:
 - Arrest of an employee – Contacted Staff Relations and Employee Relations for notification and information
 - Assault/Battery – The school utilized the District Crisis Team.
 - Bullying – Requested training and intervention from the Office of School Operations, Human Relations, Diversity and Equity.
 - Possession of weapon - Parent of the student was notified and expulsion proceedings will be followed.

Who else was notified regarding the incident?



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INCIDENT NOTES KEY

When you are documenting witness statements, description of incident, and follow up by the supervisor, use the abbreviations below to note the title (with names) of the individuals.

Example: LABSC/Sheila Williams means that Sheila Williams is an LA's BEST Site Coordinator

Agency/CBO Key	
CBOSC	= CBO Site Coordinator
CBOS	= CBO Staff
CBOST	= CBO Student
LA's BEST Key	
LABSC	= LA's BEST Site Coordinator
LABS	= LA's BEST Staff
LABST	= LA's BEST Student
LABTPS	= LA's BEST TPS
Youth Services Key	
YSPS	= YS Program Supervisor
YSPW	= YS Program Worker
YSST	= YS Student
YSTPS	= YS TPS
YDP Key	
YDPSC	= YDP Site Coordinator
YDPS	= YDP Staff
YDPST	= YDP Student
YDPTPS	= YDP TPS
YS PLUS Key	
YSPSC	= YS Plus Site Coordinator
YSPPS	= YS Plus Staff
YSPST	= YS Plus Student
YSPTPS	= YS Plus TPS
School Administration / Other	
SA	= School Administration
SP	= School Principal
SS	= School Staff
ST	= School Teacher
PAR	= Student's Parent/Guardian
VA	= Visiting Adult (Non-Parent/Guardian)
VM	= Visiting Minor



LOS ANGELES UNIFIED SCHOOL DISTRICT BEYOND THE BELL BRANCH INCIDENT NOTES

CONFIDENTIAL

Immediate Action Required

This is a **CONFIDENTIAL REPORT** for use by the Los Angeles Unified School District – Beyond the Bell (BTB) staff. No copies of this report shall be furnished to anyone including employees, students, or parents without permission from a BTB administrator or from the Office of the General Counsel.

This report must be completed within 24 hours of an incident involving injury to students, employees, or visitors. Attach additional documents, photos, etc., as necessary.

NOTIFY YOUR BEYOND THE BELL UNIT OFFICE BY TELEPHONE IMMEDIATELY

Date: _____

Name of School
Where Incident Occurred: _____

ESC: _____

Reporting Office/Agency: _____

Name of Reporter: _____

Reporter Contact Number: _____

Reporter Email Address: _____

Incident Occurred: On Campus Off Campus
 District Office At Another School
 District School Bus/Vehicle Cafeteria
 Going to/from School Before/After School
 Going to/from School to a School Sponsored Activity
 Other: _____

Exact Location of Incident: _____

Date of Incident: _____

Time of Incident: _____ A.M. P.M.

Is this incident centered around or initiated by a: Student(s) Employee(s) Community Member(s)/Parent(s)/Visitor(s) Facility(ies)

TYPE OF INCIDENT/ISSUE (Additional forms must be completed for incident(s)/issue(s) marked with {*} e.g., Accident, Injury)

- Accident*
- Lockdown/Shelter-in-Place
- Suicidal Behavior
- Bullying
- Medical
- Theft
- Child Abuse (Complete additional information below)
- Asthma
- Heat Stress
- Damage/attempt to damage school/private property
- Chest Pain
- Illness
- Inappropriate Conduct
- Diabetes
- Intoxication
- Threat (Caused/attempted physical injury)
- Non-Sexual
- Faint
- Seizure
- Weapons
- Sexual
- Head Injury
- Shock
- Other Issue Type: _____
- Injury*
- Missing/Runaway

TO BE COMPLETED IF TYPE OF INCIDENT/ISSUE IS CHILD ABUSE

Did the incident warrant/require a SCAR to be filed? Yes No

*(Principal/Site Administrator **MUST** be notified immediately if a SCAR is filed)

If "YES," which agency was notified? DCFS LAPD Sheriff Other

Was the SCAR made due to allegations regarding the action/behavior of a Beyond the Bell employee or other adult employee? Yes No

If "YES," Employee Name: _____ Employee #: _____ Date of Birth: _____

If you did attempt to file a SCAR over the phone, you must include the name and badge number of the person you spoke to.

Name: _____ Badge #: _____ Case/Report #: _____

After you make your report over the phone, regardless of whether or not DCFS or law enforcement say they will investigate, you **MUST** complete a written SCAR **within 36 hours** and send it to:

DCFS – Child Abuse Unit, 1933 South Broadway, 5th Floor, Los Angeles, CA 90007

