

DOMESTIC VIOLENCE CRITICAL INCIDENT RESPONSE & MANAGEMENT FORM

NOTE: You must email the completed form to ALL of the following at PCADV: calexy@pcadv.org, jdavis@pcadv.org, ekramer@pcadv.org, jbankroft@pcadv.org, mkemeny@pcadv.org (Carole Alexy, Special Projects; Jan Davis, Contract Monitor; Ellen Kramer, Dep. Dir. Program Svcs.; Julie Bancroft, Dir. Outreach; and Matt Kemeny, Sr. Comm. Specialist.)

Section 1: General Information

Program Name: County:
Staff Name: Title/Position:
Phone: Email:

Was the incident contained to one county? Yes No
If not, list other county(s):

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Tier One Incidents – Major incidents, such as domestic violence fatalities, near fatalities, or natural deaths of shelter residents; *Requires immediate notification to PCADV by phone along with submission of this form.*

Tier Two Incidents – Other incidents, such as fires, floods, bed bugs, or no heat in shelter, that disrupt your program’s continuity of services and may attract unwanted media attention; *Requires report submission only.*

Incident Tier Level: 1 2

Date of Incident: Location of Incident:

Please provide a brief description of the incident and its impact on services and staff:

Please describe how the program was notified:

Were there any witnesses? Staff Volunteers
Clients Relatives Bystander
Law Enforcement U Unknown

Children-Ages & How Many:

0-5
6-10

PCADV Incident Reporting Procedure
14-17

7-1-11/ rev. 3-30-2017

Fire Department EMS/Paramedics County Emergency Management
Health Department Coroner
Other - Please list:

Did the Program request crisis intervention/critical supports?

KCIT CVVC NOVA/Bucks

Keystone Crisis Intervention Team, Center for Victims of Violence and Crime, Network of Victim Assistance

Other - Please list:

Were there any media contacts? If so, please list:

Other Funders Notified:

PCAR

PCCD

United Way

Other - Please list:

Section 3: Continuity of Service

How will the program ensure continuity of services? What is your timeframe for restoration of services?

Describe any modification of intake/referral processes for victims in your county in order to access domestic violence services:

Section 4: PCADV Follow-Up

How can PCADV provide additional supports or assistance?

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