



INCIDENT MANAGEMENT POLICY AND PROCEDURE

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Person Responsible	Director
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1.0 PURPOSE AND SCOPE

This policy and procedure provides guidelines for reporting, investigating and applying appropriate control measures when an accident, incident (including critical and reportable incidents) or near miss affecting staff or participants occurs.

This policy and procedure deals only with workplace incidents. It does not include incidents of abuse neglect, exploitation and discrimination against NDIS participants; it does not include information on child-related Mandatory Reporting: see the *Preventing and Responding to Abuse, Neglect and Exploitation Policy and Procedure*.

This policy and procedure applies to the Director, and any additional staff, students, contractors and volunteers.

This policy and procedure aligns with the Work Health and Safety Act 2011 (NSW), National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018 (Cwth), relevant state legislation and the NDIS Quality and Safeguards Commission Reportable Incidents Guidance (2018).

2.0 DEFINITIONS

Accident – an unforeseen event that causes damage to property, injury or death.

Participant Incident – Acts, omissions, events or circumstances that occur in connection with providing supports or services to a person with disability who receives funding under the NDIS or the Commonwealth Continuity of Support Programme relating to Specialist Disability Services for Older People.

Near Miss – any incident that occurred at AMPEY PTY LTD , which, although not resulting in any injury, illness or damage, had the potential to do so.

Hazard – a situation that has the potential to harm a person (cause death, illness or injury) or environment or damage property.

Hazard identification – A process that involves identifying all foreseeable hazards in the workplace and understanding the possible harm that each hazard may cause.

Hazard management – A structured process of hazard identification, risk assessment and control, aimed at providing safe and healthy conditions for staff members, contractors and visitors while on the premises.

Harm – Includes death, or injury, illness (physical or psychological) or disease that may be suffered by a person as a consequence of exposure to a hazard.



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Notifiable Incident – Any extremely serious incident arising out of the conduct of a business or undertaking at a workplace, relating to any person —whether an employee, contractor or member of the public.

Under the Work Health and Safety Act 2011 (NSW) and the Work Health and Safety Regulations 2017, businesses are obligated to notify WorkSafe NSW in the event of:

- the death of a person
- a serious injury or illness of a person
- a potentially dangerous incident

NDIS Quality and Safeguards Commission (the Commission) – The regulatory body established to oversee the registration of NDIS providers and monitor compliance, respond to complaints and reportable incidents, monitor behaviour support and restrictive practices, and undertake investigation and enforcement.

Reportable incidents – incidents, or alleged incidents, that:

- arise from acts, omissions, events or circumstances occurring in connection with providing supports or services to a person with disability AND resulted in, or could have resulted in, harm to the person with disability; OR which
- arise from acts by a person with disability that cause, or risk causing, serious harm to another person.
- Section 73Z(4) of the Act defines a reportable incident as:
- the death of a person with disability
- serious injury of a person with disability including fractures, burns, deep cuts, extensive bruising, concussion, and any other injury requiring hospitalisation.
- abuse of a person with disability behaviour management including verbal, psychological and financial abuse
- neglect of a person with disability behaviour management that is seriously inappropriate or improper
- unlawful sexual or physical contact with, or assault of, a person with disability by a worker or another NDIS participant
- sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity
- unauthorised use of a restrictive practice in relation to a person with disability.
- For further examples, consult the **NDIS Quality and Safeguards Commission Reportable Incidents Guidance**.

See the *Preventing and Responding to Abuse, Neglect and Exploitation Policy and Procedure*.

3.0 POLICY

Staff are required to be vigilant in reporting incidents when they occur so that appropriate support can be provided to those affected and the circumstances can be analysed to reduce the likelihood of a similar event occurring again.

All staff, contractors, volunteers and students have a responsibility to ensure that details of any incident are recorded and reported to their immediate supervisor (or Director,

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as appropriate).

Principles of the NDIS Reportable Incidents Scheme

- 1. Centred on people with disability:** Management of an incident is respectful of, and responsive to, a person with disability's preferences, needs and values while supporting the person's safety and wellbeing.
- 2. Outcome focused:** Management of an incident should reveal the factors which contributed to the incident occurring, and seek to prevent incidents from reoccurring, where appropriate.
- 3. Clear, Simple and Consistent:** The process for dealing with reportable incidents is easy to understand, accessible and consistently applied.
- 4. Accountable:** Providers are responsible for appropriately managing the response to reportable incidents. Everyone involved in the management of a reportable incident understands their role and responsibilities, and will be accountable for decisions or actions taken in regard to an incident.
- 5. Continual improvement:** The incident management process facilitates the ongoing identification of issues and implementation of changes to improve the quality and safety of NDIS supports and services.
- 6. Proportionate:** The nature of any investigation or actions following an incident will be proportionate to the harm caused and any risk of future harm to people with disability.

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4.0 PROCEDURE

Overview: All Incidents

Incidents may be reportable to one or more agencies:

Notifiable incidents to the WorkSafe NSW

Reportable incidents to NDIS Quality and Safeguards Commission

Child-related incidents to NSW government – Child safety centres- Dept of Children, Youth Justice and Multicultural Affairs

Violent, sudden and unexplained deaths to the NSW Coroner's Office and NSW Police

Incidents involving criminal activity to the NSW Police.

Abuse and neglect in community settings should be reported to the NSW Ombudsman.

Telephone: 3005 7000, or 1800 068 908

Website: <https://www.ombudsman.NSW.gov.au/about-us/contact-us>

Participants affected by incidents must be provided with information about how incidents involving them have been managed. This will be provided as part of their Induction along with the Welcome Pack.

Internal Reporting: All Incidents

- All incidents and near misses must be reported to the Director (supervisor or nominated NDIS incident reporter) as soon as practicable and within 24 hours through completion of an *Incident Report*.
- If an incident is (or may be) Notifiable or Reportable, it must be reported to the Director immediately. Information required includes the:
 - name and address of the person giving notice;
 - date and time of the event;
 - place where the event happened;
 - apparent cause;
 - nature and extent of the damage;
 - work that was being carried out at the time of the incident; and
 - name and contact details of any injured or affected parties.
- Accidents, incidents and near misses are to be reported to the Management Team monthly by the Director as part of their WHS reporting.
- The Director will track progress and outcomes of accidents, incidents and near misses in the *Incident Report Register* and refer any relevant items for inclusion in the *Continuous Improvement Plan*.

Responding to accidents and violence

- Assess the situation to ensure a safe and secure environment. Remove the

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- source of danger or the person from the source of danger if safe to do so.
- In urgent cases, call 000 – NSW Police and other emergency services should be called immediately (e.g., where a crime is suspected or alleged, or where there is ongoing danger).
- If any person requires immediate medical attention, a medical practitioner or ambulance should be called, or the participant conveyed to the nearest hospital accident and emergency department.
- Where injuries do not require immediate attention, support the person to see a doctor for assessment and treatment of any injuries, including psychological trauma.
- The site where the incident occurred should not be disturbed until WorkSafe NSW, the Police or the Director lift the requirement to preserve the area.

Debrief and Support

For all persons involved in an accident, incident or near miss, if required, the Director must:

- facilitate an informal debrief amongst supervisors, colleagues or peers; and
- ensure appropriate support and access to counselling is made available.
- See also the *Return to Work Policy and Procedure*.

WorkSafe NSW: Notifiable Incidents

Reporting Notifiable Incidents

Notifiable incidents must be reported immediately to WorkSafe NSW on 13 10 50. Incidents can be notified 24 hours a day, 7 days a week.

Investigating Notifiable Incidents

- The Director will work with WorkSafe NSW and/or other relevant authorities to investigate the incident.
- The Director or their nominated representative will:
- commence investigations immediately upon receiving a completed Incident Report
- (where a staff member is injured), involve them in the investigation;
- implement the most effective controls practicable that do not introduce other hazards, and monitor and review these;
- consult with staff who are, or are likely to be, directly affected;
- provide information and feedback to the Management Team; and
- track all relevant information in the *Incident Register*.
- Upon completion of the investigation the Director must finalise the relevant *Incident Report* form and record the outcomes in the *Incident Register*.
- The completed *Incident Report* should be stored on the relevant staff member's file.

NDIS Commission: Reportable Incidents

Responding to abuse and neglect

Assure the client that the incident will be taken seriously, discuss their options with them and ask them how they would like to be supported throughout the process.

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If a staff member is accused or suspected of harming the client, they should be removed from contact with all clients pending an investigation.

Where a client is accused or suspected of harming another client, they should be removed from contact with other clients, where possible, pending an investigation

Consider the impact of the incident on the other clients within the setting and provide them with appropriate support. It is important that they are not treated simply as potential witnesses.

If they can provide informed consent to contact and receive specialist services, the client (or, if not, his or her key support person) should be asked whether he or she wishes to contact specialist/victim support services such as crisis care, counselling, advocacy, a legal information service or a lawyer.

Notify other service providers known to be working with that client, if appropriate.

Record agreed actions for the client's immediate and ongoing needs in the Client Support Plan. This must include:

- steps being taken to ensure the client's ongoing safety and wellbeing
- treatment or counselling the client may access to address their safety and wellbeing
- modifications in the way services are provided (for example, same gender care or placement)
- how best to support the client through any action the client takes to seek justice or redress, including making a report to police
- any ongoing risk management strategy required where this is deemed appropriate.

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Notification of NDIS reportable Incidents

Registered providers are responsible to use the NDIS Commission Portal 'My Reportable Incidents' page to notify and manage all reportable incidents.

Step 1: Notify the NDIS Commission

- The Immediate Notification Form must be submitted via the NDIS Commission Portal **within 24 hours** of key personnel becoming aware of a reportable incident or allegation
- An exception to this rule is notifying the NDIS Commission of the use of a restrictive practice that is unauthorised or not in accordance with a behavior support plan. In these instances, AMPEY PTY LTD must notify the NDIS Commission within five business days of being made aware of the incident. If however, the incident has resulted in harm to a person with disability, it must be reported within 24 hours.
- '**Authorised Reportable Incidents Approver**' is the Director of AMPEY PTY LTD and is responsible for submission to the NDIS Commission by logging onto the NDIS Commission portal – My Reportable Incidents
- '**Authorised Reportable Incidents Notifier**' is NDIS Coordinator of AMPEY PTY LTD to assist the Director to collate and report the required information. The authorised 'Notifier' (NDIS Coordinator) will have the ability to create new Reportable Incident notifications to be saved as a draft for review and submission by the Director. The authorised 'Notifier' will need to inform the authorised 'Approver' that the Incident is awaiting their review and submission.

Step 2: Submit 5 day form

- The 5 Day form must be submitted via the 'My Reportable Incidents' portal within five business days of key personnel becoming aware of a reportable Incident. This provides additional information and actions taken by the NDIS registered provider.
- The five-day form is also to be used for incidents involving the unauthorised use of a restrictive practice, other than those resulting in immediate harm of a person with disability.

Step 3: If required, submit a final report

- AMPEY PTY LTD maybe required to provide a **final report** at the request of the NDIS Commission. When this is the case, the NDIS Commission will provide this form to you via email.

For any unseen circumstances, If AMPEY PTY LTD is not able to report to NDIS Commission then:

AMPEY PTY LTD must take all reasonable steps to resolve the issues within the required timeframe by calling the NDIS Commission for support. Outside of business hours and if all reasonable steps have been taken, a provider should advise the NDIS Commission of these issues as soon as possible via email to reportableincidents@ndiscommission.gov.au with an email that includes:

- The steps taken to complete the authorised notification form and the presenting issue
- The name of the impacted person



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- Describe the immediate response and step taken to ensure the impacted person was safe
- Brief description of the reportable incident
- Whether other authorities, such as the police, were notified

As soon as practical, progress completion of the 24-hour form

Further, If the NDIS Commission portal or “My Reportable Incidents” page is unavailable for a period the NDIS Commission Reportable Incidents team may:

- Provide an authorised form and request the information is submitted via the reportableincidents@ndiscommission.gov.au address; or
- Take the 24 hour notification or further information over the phone.

(Refer to <https://www.ndiscommission.gov.au/providers/incident-management-and-reportable-incidents>)

Working with Police

- A police investigation takes priority over a reportable incident investigation.
- Clearance must be obtained from police before taking any action that might compromise the investigation. AMPEY will manage any ongoing risk and should maintain an open dialogue with police about any investigation they are conducting.
- AMPEY will inform the NDIS Commission where a Police investigation delays conducting a required investigation and finalising a report.

NDIS Commission: Investigating Incidents

AMPEY will investigate and respond to all Reportable Incidents. The nature of any investigation or actions following an incident will be proportionate to the harm caused and any risk of future harm to people with disability.

If the NDIS Commission requires a Reportable Incident to be investigated, either internally or by an external independent investigator, AMPEY will fully comply with the Commission's requests.

- Where an incident relates to potential staff-to-participant abuse or poor quality of care, some degree of independence is required for the investigation. Depending on the nature of the incident and the AMPEY, one of the following may be appropriate to conduct the investigation:
 - an area of the AMPEY that is sufficiently independent from staff who are the subject of any allegations, such as another division or an independent investigative function
 - another service provider independent from the staff who are the subject of any allegations
 - an external investigative body.
- An investigation must:
 - be in proportion to the nature and significance of the incident and any associated allegations;
 - include the identification of any previous relevant allegations that should be considered regarding the relevant individuals;
 - include a degree of independence appropriate to the seriousness of the incident;
 - adopt a person-centred and rights-centred approach, taking into account what is important to the participant;
 - abide by the standard principles of good investigations:
 - procedural fairness
 - confidentiality and privacy
 - appropriate interview techniques
 - evidence based
 - properly documented
 - result in an investigation report
- Internal and external investigators must be appropriately trained in conducting serious workplace investigations, including investigating serious incidents that may involve a criminal element.
- The Director (or delegated investigator) will appropriately assess and/or investigate all incidents having regard to the views of any person with disability impacted by an incident and including the following:
 - whether the incident could have been prevented;
 - how well the incident was managed and resolved;
 - what, if any, remedial action needs to be undertaken to prevent further similar incidents from occurring, or to minimise their impact;
 - whether other persons or bodies need to be notified of the incident.

Investigation Reports

- If required, AMPEY will supply details to the NDIS Commission in connection with any internal or external investigation or assessment that has been undertaken in relation to the reportable incident, including:
- the name and position of the person who undertook the investigation;
- when the investigation was undertaken;
- details of any findings made;
- details of any corrective or other action taken after the investigation;
- a copy of any report relating to the investigation;
- information about whether persons with disability impacted by the incident (or their representative) have been kept informed of the progress, findings and actions relating to the investigation or assessment;
- any other information required by the NDIS Commission.
- The details outlined above should be included in the final report to the NDIS Commission which must be provided within 60 business days following the initial notification. The NDIS Commission may extend the period for providing the final report – for example, if there is a concurrent police investigation the reportable incident investigation will be justifiably delayed.
- The notification must be made in writing, by completing a form approved by the NDIS Commission and returning it to the NDIS Commission via email.

NDIS Commission: Corrective and Restorative Action

- Participants affected by incidents will be provided information about how the incident has been managed and the measures taken to ensure against recurrence.
- All investigations should determine whether corrective and/or restorative measures are required. The NDIS Commission may require AMPEY to take corrective and/or measures. The NDIS Commission may work with AMPEY to implement the measures, and monitor progress.
- Restorative measures may include, but are not limited to:
- providing ongoing support to people with disability impacted by a reportable incident
- giving an apology
- providing compensation - for example, through an enforceable undertaking.
- Corrective measures may include, but are not limited to:
- disciplinary action
- training or education of workers
- modification of the environment
- development or amendment of a policy or procedure

- changes to the way in which supports or services are provided
- other practice improvements.

Supporting Participants through the Justice Process

- AMPEY will support participants through the justice process, including police investigation, prosecution and crimes compensation processes as appropriate. This may include:
 - Ensuring the participant has access to appropriate communication aides and tools to facilitate disclosures and the provision of evidence.
 - Ensuring the participant has access to an interpreter should they be from culturally or linguistically diverse backgrounds.
 - Ensuring the participant has access to a key support person of their choosing or by providing information about advocates and other supports.
 - Alerting police to the need for an Independent Person or advocate, the participant's particular communication support needs, and the need for timely interviews to facilitate the recall of information.
 - Facilitating arrangements with police for interviews and examination of evidence.
 - Facilitating arrangements with specialist support services.
 - Working proactively with the participant to consider whether they will provide a witness statement, including making sure they understand they have time to make their decision if they are initially reluctant and the right to seek independent legal advice (in some instances NSW Police may be better placed to provide this information).
 - Including participants affected by incidents in the management and resolution of the incident, where doing so does not expose the participant to added trauma or risk, by:
 - keeping the participant informed of the investigation,
 - consulting with the participant, where possible, concerning:
 - the release of information to third parties
 - the investigation process
 - corrective actions
 - Supporting participants who were witness to an incident.
 - Where a participant perpetrates a reportable offence and requires legal representation and assistance during the investigation and hearing, AMPEY will assist the participant or contact the service most directly responsible for the participant's care to organise support.

NDIS Commission: Record Keeping

Records of all reportable incidents that occur or are alleged to have occurred must be kept for a period of seven years from the date of

notifying the NDIS Commission.

AMPEY will retain:

- completed reportable incident notification forms
- records of investigations, including:
 - records of interviews,
 - evidence collected,
 - any relevant correspondence,
 - investigation reports and outcomes.
- Incidents involving participants under 18 years old should be kept until the participant turns (or would have turned) 25 years old.
- The Director (or delegate) will be responsible for creating and maintaining incident records, while the provider will be required to retain them.

Child-related: Mandatory Reporter Guide (MRG)

The MRG is an online automated decision-making tool which generates decisions in response to input information, assisting mandatory reporters determine how to respond to and report child-related abuse and neglect. Responses include:

Immediate Report to Community Services – staff should report concerns to the Helpline immediately, following the instructions on the screen.

Consult with a Professional – the indicators border on the threshold for Risk Of Significant Harm. Staff should consider further action to address child wellbeing concerns, consulting their supervisors or other informed parties about referral options or other strategies.

Consult with your Referral Network – indicates that there is no risk of significant harm but the family may benefit from a referral to additional services and has shown a willingness to accept services. For example there may be a need for specialist mental health services or respite care.

Document and Continue Relationship – indicates that concerns don't meet the threshold for reporting. Where AMPEY has a continuing relationship with the participant, staff should monitor the situation and note any deterioration in the family's circumstances, and to use that information to review the MRG.

Where staff strongly disagree with the MRG decision, they should ensure their Decision Tree selections best fit their concerns, particularly in the case of neglect and/or where they strongly believe that there exists a Risk Of Significant Harm.

Where new information becomes available, review the MRG's decision accordingly.

Ongoing support

- Irrespective of gender, victims of sexual assault frequently

experience negative outcomes including dissociation, posttraumatic stress disorder, depression and anxiety. Victims of physical assault also frequently experience shock, numbness, fear, depression and anxiety. In recognition of this, after an allegation of abuse, additional support and/or a review of supports provided to the participant may be required.

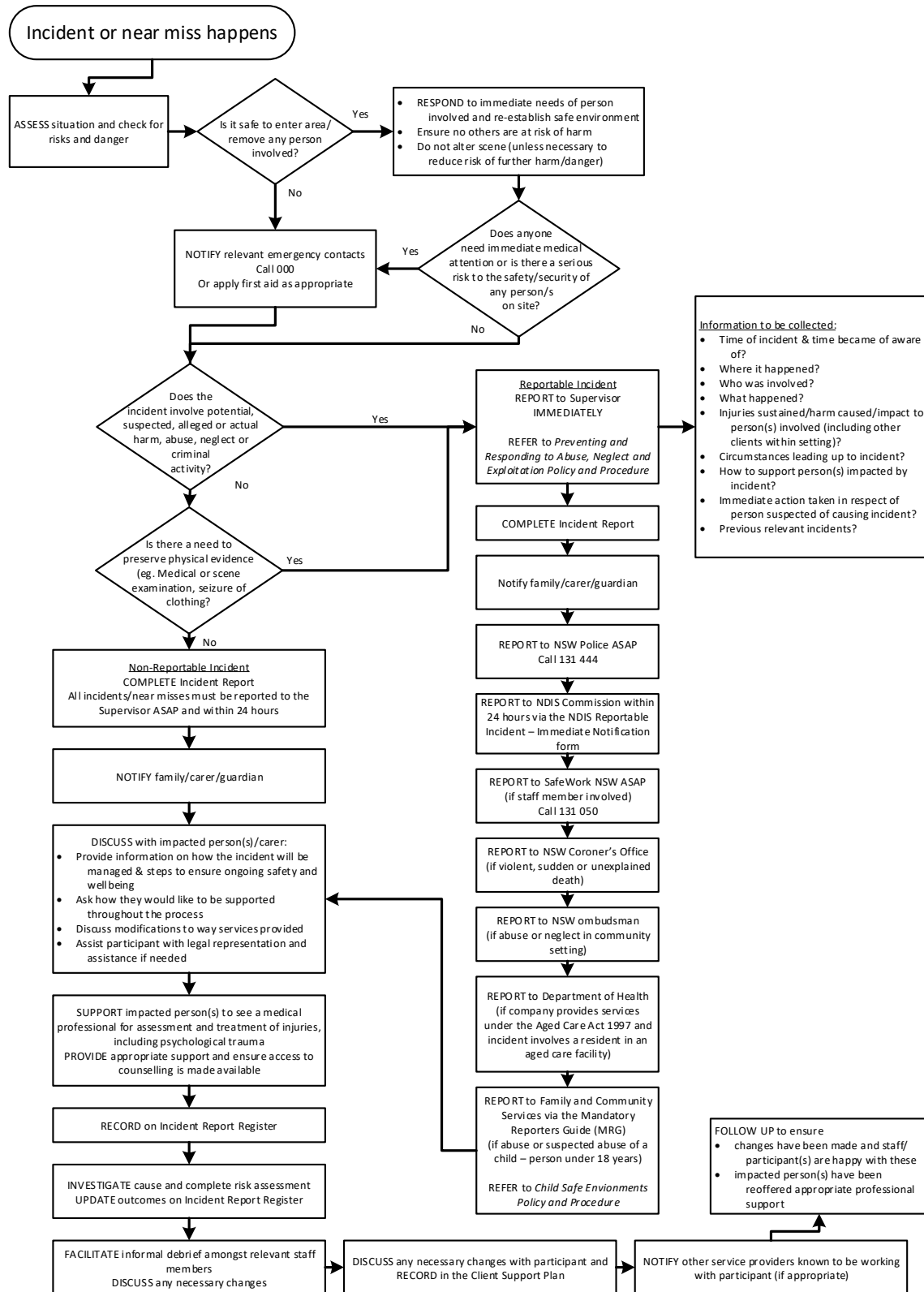
- A quality of support review must also be undertaken by the Director for participants who are victims or alleged perpetrators of an assault. Agreed actions for the participant's immediate and ongoing needs must be recorded on the participant's care plan. This must include:
 - steps being taken to assure the participant's safety and wellbeing in the future
 - treatment or counselling the participant may access to address their safety and wellbeing
 - modifications in the way services are provided (for example, same gender care or placement)
 - how best to support the participant through any action the participant takes to seek justice or redress including making a report to Police
 - any ongoing risk management strategy required where this is deemed appropriate.

Review of Incident Management System

- The incident management system will be regularly reviewed as per the *Internal Review and External Audit Schedule*.
- Reviews will include:
 - a document review of policies and procedures,
 - a review of the causes, handling and outcomes of incidents,
 - participant and worker input, and
 - other relevant feedback.
- Where policies, procedures and processes are revised, changes will be communicated to staff, participants and their supporters as appropriate.

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Incident Management Flowchart





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POLICY AMENDMENT RECORD		
DATE	BRIEF DESCRIPTION OF AMENDMENT	AUTHORISED

End of policy document. Uncontrolled when printed.
