

# INCIDENT MANAGEMENT POLICY & PROCEDURES

SEPTEMBER 2022

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# **Glossary of terms**

Term	Definition
Incident	<ul> <li>Any event that has taken place during the delivery of supports that has: <ul> <li>resulted in harm to a participant; or</li> <li>the potential to result in harm to a participant.</li> </ul> </li> <li>Under the NDIS (Incident Management and Reportable Incidents) Rules 2018 (Cth) there are three types of incidents that must be covered by our Incident Management policy: <ul> <li>Acts, omissions, events, or circumstances that occur in connection with providing supports to participants and that have, or could have, caused harm to a participant;</li> <li>acts by a person with disability that occur in connection with providing supports or services to the person with disability; and have caused serious harm, or a risk of serious harm, to another person;</li> <li>Reportable Incidents.</li> </ul> </li></ul>
Participant	A person who meets the NDIS access requirements.
Person Centred	Person centred approaches:  - place the participant at the centre of any planning and support process  - allow the person to choose and direct the support they receive according to their aspirations and goals, and how they receive that support  - focus on the strengths, contributions, and abilities of the participant  - recognise the uniqueness of each participant  - work to maximise personal connection and social participation
Policy	A statement of intent that sets out how an organisation should fulfil their vision, mission and goals.
Procedure	A statement or instruction that sets out how a policy will be implemented and by whom.
Reportable Incident	Certain incidents that happen, or are alleged to have happened, in connection with the provision of supports or services by registered ICASs are known as reportable incidents. These incidents include the death, serious injury, abuse or neglect of a person with disability and the use of restrictive practices in particular circumstances.  If a reportable incident occurs, or is alleged to have occurred, the registered ICAS must give details about the incident to the NDIS Commissioner.  Details of certain incidents (such as the death of a person with disability) must be notified within 24 hours, while others must be notified within 5 business days.

#### **Policy Purpose**

This policy is to ensure that each participant is safeguarded by our incident management system, ensuring that incidents are acknowledged, responded to, well managed, and learned from. We are committed to protecting the safety and wellbeing of participants receiving supports from us. Our incident management system links closely with our quality management and risk management systems to ensure ongoing continuous improvement in maximising the wellbeing of participants who access supports from Individualised Community Access Services (ICAS).

#### Objectives:

The Incident Management policy aims to achieve the following:

- We maintain an incident management system that complies with the requirements set out under the <u>National Disability Insurance Scheme (Incident Management and</u> Reportable Incidents) Rules 2018.
- Participants accessing supports from us are provided with information on incident management, including how incidents involving them have been handled and addressed.
- We show continuous improvement in managing incidents by regular review of our incident management policies and procedures, while also examining the root causes of incidents, their handling, and their outcomes. In doing this, we seek both participant and worker feedback, and feedback from other stakeholders within and external to ICAS.
- We ensure that all workers are trained in and comply with our incident management policy and procedures.
- We provide information to both participants and workers, which informs them of their ability to raise concerns about our organisation with the NDIS Commission at any time.
- We ensure participants, chosen supporters, and personnel are all provided with a copy of our Incident Management policy.

# Scope

This policy applies to all employees within ICAS.

# **Policy Statement**

ICAS will ensure that each participant accesses responsive, timely, competent, and appropriate supports to meet their needs, desired outcomes, and goals.

Our **Incident Management** policy is based upon:

- Our recognition of the legal and human rights of each participant.
- o The participant's right to choice and control of supports delivered by us.
- Our commitment to communicating with participants in the language and mode that they identify and best understand.
- Recognising and respecting the individual identity and personhood of each participant.
- Ensuring as far as possible the participant is supported to engage with family, friends, and his/her/their chosen community.

This policy complies with the requirements under the <u>National Disability Insurance Scheme</u> (Quality Indicators) Guidelines 2021, and the <u>NDIS</u> (Incident Management and Reportable Incidents) Rules 2018.

# **Roles and Responsibilities**

Director	Responsibility	Delivery
	Establishing a culture promoting honest, transparent examination of incidents, and	Openly reports on ICAS's commitment and compliance with National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018.
	opportunities for continuous improvement arising	Oversights internal investigations into incidents as appropriate.
	out of incidents.	Ensures steps taken to ensure continuous improvement and prevention of future recurrence of incidents.
		Participate in Incident review meetings.
		Participate in policy and procedure review as a result of critical incident review.
		Encourages transparency and cooperation with the NDIS Commissioner, and ensures actions recommended are implemented.
		Ensures the Incident Management policy is properly administered.
	Reviews the Incident Management policy with management and staff as required.	
	Supports and ensures staff are trained in Incident Management processes.	

Quality Assurance Manager	Responsibility	Delivery
	Ensures incident management policy and procedure is applied in relation to employees of ICAS.  Develops and maintains all elements of the incident management system.	Frequently reports to Director on incidents and actions taken.  Reviews all incident reports and updates Incident Management System accordingly.  Ensure the recording of all incidents within the Incident Management system, including reviews required, and actions planned or taken.  Analyses compliance with the Incident Management policy and procedures

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across ICAS and works with the Director to implement quality improvement processes.

Reviews the Incident Management System to support organisational issues raised by the incidents, to identify and address systemic issues, and to report information as required to the NDIS Commissioner.

Monitor the currency of the incident management system, and closes out incidents as actions and reviews are completed.

Facilitates Incident Review meetings with staff to review incidents and develop opportunities for continuous improvement – for example, review of policies and procedures, a participant's support plan, training for support staff, changes to processes.

Undertakes reporting of Reportable Incidents to the NDIS Quality and Safeguards Commissioner, with the support of the Human Resources Manager and the Director.

Provides updates to the NDIS Commission in relation to emerging information, investigation, and closure of incidents.

Delivers regular training to personnel in the operation and requirements of the incident management system, their roles and responsibilities.

Ensures all participants, their chosen supporters, and personnel are provided with a copy of the Incident Management policy.

Works with the Director and staff to encourage feedback from participants in relation to the Incident Management policy and procedures.

Convenes internal and external review of incidents, and, with reviewer, works to ensure engagement of affected participants, personnel, and other stakeholders.

Ensures participants, advocates, and chosen supporters are aware of outcomes of reviews of incidents, which have affected them.

Engages with staff in relation to all elements of the incident, including police engagement and investigation

progress, and standing down of staff (if relevant).	
Closes out incidents within the incident management system when the matter is resolved.	
Takes reports of Incidents from support workers, and guides responses.	
Supports support workers in responding appropriately to incidents.	
Liaises as required with affected participants' chosen supporters.	
Maintains contact with support services and police in relation to incidents when required.	

Staff who work with participants	Responsibility	Delivery
	Complies with incident management policy and procedure.  Attends training on incident management policy and procedure.	Comply with the Incident Management policy and procedure.  Ensure safety of participants immediately after an incident.  Understand the Incident Management policy and procedure.  Report incidents to Quality Assurance Officer.  Document all incidents in the Incident Form, and provide to Quality Assurance Officer.  Updates participant files as required in relation to incidents, and adds emerging information to files as required.  Explain Incident Management policy and procedure to participants as required.  Properly record incidents in accordance with the incident management policy and procedures.  Participate in debriefing for staff and participants following an incident.  Attends incident review meetings, identifies opportunities for improvements, and implements them as directed.  Provide feedback to management on issues and opportunities relating to the delivery of the Incident Management policy and procedures.

Participates in internal and external incident reviews as required.
Participates in additional training if required following an incident.

All staff	Responsibility	Delivery
	Complies with incident management policy and procedure. Attends training on incident management policy and procedure.	Understands and practices the incident management policy and procedures in any interactions with participants.  Is aware of, and understands, changes to the incident management policy and procedures.  Implements quality improvement changes as directed by management from evaluation of performance against the incident management policy and procedures.

<u>Last Reviewed: 27<sup>th</sup> September 2022</u> <u>Last Updated: 27<sup>th</sup> September 2022</u>

Signed: by Director

#### **Procedure Purpose**

These procedures have been developed to provide guidance to all staff in implementing our Incident Management policy. ICAS is committed to protecting the rights to independence and informed choice of participants who access our supports.

These procedures provide guidance to staff in implementing our Incident Management System, ensuring the safeguarding of participants accessing supports from us. We are committed to responding to incidents appropriately to improve our practice. At ICAS, incidents are acknowledged, responded to, well managed, and learned from.

This procedure should be read in conjunction with our Incident Management policy.

### A Person-Centred Approach at ICAS

ICAS is committed to a Person-Centred Approach in delivering supports to participants. Person Centred Supports are central to our philosophy, our mission, and our business model.

Please refer our <u>Person-Centred Supports policy & procedure</u> for more information on person-centred approaches.

#### **Incident Management**

ICAS is committed to ensuring that each participant is safeguarded while receiving supports from us. We work to minimise the risks of incidents occurring by constantly reviewing our practices and processes and learning from incidents when they do occur. To assist us to do this, we have an Incident Management System. Which complies with the requirements under the *National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules* 2018. The role of participants in our response to incidents when they occur is critical. We seek feedback from participants in relation to incidents that have affected them, include them in any review and investigation process, and advise them of the outcome. All of our workers are aware of, and trained in, and comply with, our procedures in relation to incident management. We comply fully with any investigation instigated by the NDIS Commission, and actively undertake internal investigations into incidents, which we document. Where a serious breach of policy and procedures has occurred, we will engage an external investigator to examine the causes, our policies and procedures, how we handled the incident, and how we incorporate feedback provided.

# **Incident Management Process**

**Process** 

The process for responding to incidents at ICAS is documented at Attachment A.

An alleged incident is treated in the same manner as all other incidents, including reporting requirements.

#### Incident Management Response

The Director/Quality Assurance Officer has overall responsibility for the Incident Management System. The Incident Management System will be included in Internal Audit processes to ensure periodic review and improvement.

Responsibility includes the updating of the system when an incident occurs, is investigated, the resulting action plan (including timeframes, persons responsible, and required actions), any updates to the investigation, and when the incident is closed.

The Director/Quality Assurance Officer closes out incidents. This includes documenting the resolution on the Incident Management System, and documenting for participants and chosen others the outcome of the investigation and ICAS's response.

Procedural fairness is a key principle in any investigation or exploration of an incident.

Other responsibilities of this position relating to incident management include:

- Reviewing Incident Forms
- Analysing and reviewing incidents to identify trends and systemic issues
- Liaising with Police if a crime has been committed or alleged
- Liaising with internal and external investigators of incidents as required.
- Engaging external investigators for incidents as required
- Undertaking internal investigations of incidents
- Ensuring all staff and participants have a copy of the Incident Management policy
- Ensuring all staff understand they can report directly to the Commission if they believe it is warranted
- Ensuring implementation of actions identified as a result of an incident.

The Director/Quality Assurance Officer reports Reportable Incidents to the NDIS Commission using forms provided by the NDIS Commission at:

https://www.ndiscommission.gov.au/providers/registered-ndis-providers/reportable-incidents-0

- Within 24 hours of an Incident occurring involving death, serious injury, abuses, neglect, unlawful sexual or physical contact, or sexual misconduct;
- Within 5 days of other types of incidents.

Using, as a basis for information, the internal incident form (Attachment B), the Director/Quality Assurance Officer will provide the Commission with:

- Name and contact details of ICAS
- Name and contact details of the responsible position
- A description of the incident
- Except in the case of the death of a person with disability, a description of the impact on, or harm caused to, the person with disability;
- Immediate actions undertaken, including actions taken to ensure the safety and wellbeing of the participant, and whether the incident has been reported to police or other bodies;
- Any witnesses to the incident;

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Actions proposed to remedy factors that contributed to the incident.

Notifications made by the Director/Quality Assurance Officer will be by telephone, and followed up in writing, using forms the Commission has provided.

It should be noted that the following elements do not have to be provided to the Commission by the Director/Quality Assurance Officer if the reporting will prejudice the conduct of a criminal investigation or expose a person with disability to a risk of harm:

- A description of the incident
- The impact or harm caused to a person with disability
- Time, date, place where the incident occurred
- Others involved in the incident, including their names and contact details
- Witnesses, including their names and contact details.

The Director/Quality Assurance Officer must also notify the Commission in writing as soon as possible if:

New information in relation to the incident emerges which relates to a change in the kind of reportable incident, or is a further reportable incident.

The Commission may provide a form for the submission of this information.

The Director/Quality Assurance Officer must also, within 60 business days of the reporting of the incident, provide the Commission with a completed form, which sets out the details of any internal or external investigation undertaken in relation to the incident, including:

- the name and position of the person who undertook the investigation; and
- when the investigation was undertaken; and
- details of any findings made; and
- details of any corrective or other action taken after the investigation;
- a copy of any report of the investigation or assessment;
- whether persons with disability affected 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 Commissioner.

The Director/Quality Assurance Officer must coordinate any requests made of ICAS by the Commission, including actions required, and investigations undertaken by the Commission.

Investigations undertaken by ICAS, either self-instigated or ordered by the Commission, will always seek to establish:

- 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.

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#### Support Worker

Any incident that occurs in connection with providing supports or services to participants must be reported to the Director/Quality Assurance Officer. Reporting to the Director/Quality Assurance Officer should not occur until participant(s) involved in the incident have been made safe, and any emergency action (for example, applying first aid, calling an ambulance) has been undertaken.

The incidents that must be reported include:

- incidents that have, or could have, caused harm to a person with disability receiving supports or services; and
- acts by a person with disability that happen in connection with the provision of supports
  or services and that have caused serious harm, or a risk of serious harm, to another
  person; and
- reportable incidents that are alleged to have occurred in connection with the provision of supports or services.

The Director/Quality Assurance Officer will then ensure an Incident Form (Attachment B) is completed. The Director/Quality Assurance Officer will make decisions including:

- Whether the police need to be contacted (any allegation of a crime having been committed requires a notification to the police)
- Contacting the next of kin/chosen supporters in the case of all Incidents, involving death, serious injury, abuses, neglect, unlawful sexual or physical contact, or sexual misconduct.

The Director/Quality Assurance Officer must attend the site when a Reportable incident has occurred. They must then:

- In consultation with the participant (or decision maker) organise an advocate for the participant
- In consultation with the participant (or decision maker) identify support services for the participant (for example, debriefing, counselling, sexual assault services) and arrange for connection
- Organise debriefing for staff involved
- Review the Incident Report form
- Supports staff members as required following incidents
- File a copy of the Incident Form on the participant's file.

Following completion of these actions, the Director/Quality Assurance Officer will

- Maintain contact with next of kin/chosen supporters, support services and police in relation to incidents.
- Work to engage affected participants and their supporters in the resolution process.
- Attend incident review meetings with the relevant stakeholders, identify opportunities for improvements, and works with support staff to implement them.
- Participate in external and internal reviews of incidents.

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- Work with Human Resource Manager to seek, review, and implement changes to systems and support plans following an incident.
- Include individual staff performance planning processes, indicators that ensure the understanding, and application, of the Incident Management policy and procedures.
- Work with the staff to encourage feedback from participants in relation to the Incident Management policy and procedures to support quality improvement processes.
- Support and manage staff to comply with the Incident Management System, and provides mentoring and referral for further training when gaps are identified.
- Ensures all Incident Management forms and associated materials are kept on participant files, as well as outcomes of reviews.

#### External Advice

An external consultant (HR Manager, Lawyer) may be engaged by the Director/Quality Assurance Officer in reportable incidents where:

- A crime committed by an employee against a participant in the delivery of supports is alleged or proven.
- Training deficits that contributed, or could have prevented, the reportable incident have been identified.
- Other human resources expertise can be provided.

An external consultant (HR Manager, Lawyer) may be required, at the request of the Director/Quality Assurance Officer, to be involved in both internal and external reviews of reportable incidents.

An external consultant (HR Manager, Lawyer) may be required to stand down and/or dismiss staff that have participated in criminal and/or negligent behaviour which has, or could have, resulted in harm to a participant.

An external consultant (HR Manager, Lawyer) may advise any relevant changes to employment and associated policies, procedures, and processes in accordance with the outcomes of internal or external reviews of reportable incidents.

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#### Related documents/resources

#### Applicable NDIS Practice Standards Policies and Procedures

- Incident Management
- o Violence, Abuse, Neglect, Exploitation and Discrimination
- Feedback and Complaints
- Risk Management
- o Governance and Operational Management
- Human Resource Management
- Easy English Feedback and Complaints

#### Applicable Forms/Registers

- o Client incident report form
- Incident Register
- o Continuous Improvement Register
- o NDIS Training Plan
- Individual Risk Assessment Form
- o Risk Identification Form
- Risk Treatment Plan
- o Risk Register
- o Feedback & Complaint Form
- o Feedback & Complaints Register

#### Applicable Legislation and NDIS requirements

- National Disability Insurance Scheme (Quality Indicators) Guidelines 2018 (Cth)
- National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018 (Cth)

#### **Attachment A**

#### Incident

Secure safety and address needs of affected participants

Personnel on duty (or personnel to whom incident was disclosed completes the Incident Form.

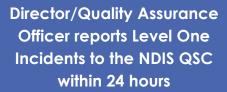
Director is advised

Director notifies
Participant's
Chosen Supporters

If required, Director

contacts Police

Director and Quality Assurance
Officer review incident form, action
taken, and action required. Action
plan developed and implemented.
IMS updated



Director/Quality Assurance
Officer checks with the NDIS
QSC if a Level Two Incident
for 5 day reporting

Quality Assurance
Officer notifies QSC of
developments in
investigation

Incident Review and investigation (may be internal or external), instigated by ICAS or QSC.

Incident closed by QSC or Quality
Assurance Officer

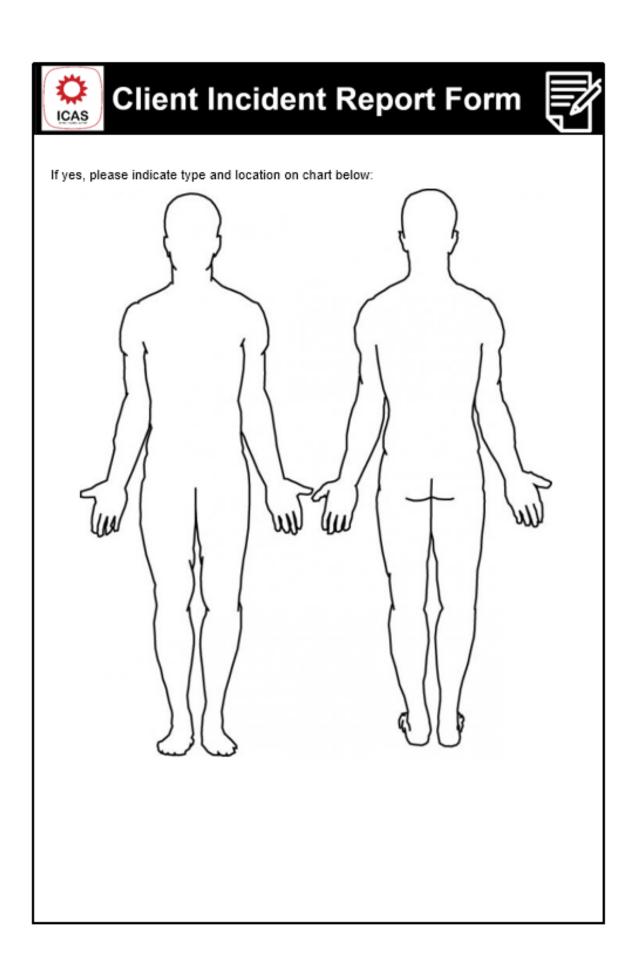
Analysis, communication of outcome, application of continuous improvement



## **Attachment B**

Clicas Clic	ent Incident Report Form	
Reporting Staff Member:		
Job title:		
Telephone:		
Email:		
Date of Report:		
How many participants involved in incident:		
Please add additional participant names at the end of the form		
Participant One Surname:		
Participant One		
First name:		
Participant One		
Date of Birth:		
Participant One		
Address:		
Date of Incident:	(accuracy - exact, estimated, unknown)	
Time of Incident:	(accuracy - exact, estimated, unknown)	
Date incident disclosed:		
Time incident disclosed:		

Clie	ent Inciden	t Report F	orm 🕎
Person disclosing incident:			
Location of incident:			
Description of incid	dent:		
	s to the incident? Who? an external witness)		
Are there photos o evidence of the inc	r other recorded ident? (Please attach)		
Are there injuries to body? If yes, please indicat the image below:	o the participant's te type and location on	YES 🗆	ΝО□



Client Incident Report Form				
Further injury detail if required:				
Multi-incident or Single incident? (e.g. medication error and fall)	Multi	Single		
Category of incident	Level One	Level Two		
Participant one involvement in i	incident:			
Were there other people involved in the incident? Who are they, what was their role in				
the incident, and what is their re				

Client Inciden	t Report	Form
Has the participant been made safe?	YES 🗆	NO 🗆
If yes, how. If not, why not		
Has medical attention been provided?	YES 🗆	NO 🗆
Is participant debriefing or counselling required?	YES 🗆	NO 🗆
Are other support services required? (for example, sexual assault services).	YES 🗆	NO 🗆
What services?		
Has the matter been reported to the police?	YES 🗆	NO 🗆
Date of report	,	
Has the police investigation been instigated?	YES 🗆	NO 🗆
Name of person who reported to the police:		
Does the participant's support plan require review?	YES 🗆	NO 🗆
Has the next of kin/guardian/chosen supporters been contacted?	YES 🗆	NO 🗆
If not, why not?		

Client Incide	nt Report	Form
U		
Has an advocate been offered and organised for the participant(s)?	YES 🗆	NO □
Advocate name		
Advocate contact details		
Any other notes relating to this incident		
Signed		
Name		
Position		
Date		

# OFFICE USE ONLY - DIRECTOR AND/OR QUALITY ASSURANCE MANAGER TO COMPLETE

Client Incide	nt Report	Form
Incident recorded on incident management system	YES 🗆	NO 🗆
Reportable incident?	YES 🗆	NO 🗆
Reported to NDIS commission within 24 hours?	YES 🗆	NO 🗆
By who:		
Date of report:		
Reported to NDIS commission within 5 days?	YES 🗆	NO 🗆
By who:		
Date of report:		
Internal investigation underway?	YES 🗆	NO 🗆
Person responsible for investigation:		
External investigation required?	YES 🗆	NO 🗆
Incident reported to police?	YES 🗆	NO 🗆
Police investigation underway?	YES 🗆	NO □
Debriefing of staff required?	YES 🗆	NO □
Debriefing of participants required?	YES 🗆	NO □
Debriefing organised?	YES 🗆	NO □
Incident review meeting scheduled?	YES 🗆	NO □
Participant involvement in review scheduled?	YES 🗆	NO 🗆
Date for incident review meeting	YES 🗆	NO 🗆
Director advised?	YES 🗆	NO 🗆



# **Client Incident Report Form**



NDIS commission updated?	YES 🗆	NO 🗆
Review of participant support plan scheduled if required?	YES 🗆	NO □
Participant/guardians/chosen supporters advised of incident review outcome?	YES 🗆	NO 🗆
Continuous improvement meeting scheduled to consider incident review and actions required to prevent future recurrence	YES 🗆	NO 🗆

Forms for notifying the NDIS Commission of a reportable incident are provided below:

- Reportable incident Immediate notification form
- Reportable incident <u>5 day</u> notification form

#### Administrative:

	Incident Management System Updated
	Incident Form on Participant's File
	Record of Report to NDIS Commission where required - Copy on Participant's file
	Record of Investigation – Copy on Participant's File
	Record of Update to NDIS Quality and Safeguards Commission – Copy on Participant's
	file
	Record of Outcome – Copy on Participant's File
	Recommendations to prevent further occurrence - Copy on Participant's file
	Notification of Outcome to Participant, Advocate/Chosen Supporter, NDIS Quality and
	Safeguards Commission
	Closure of Incident – Copy on Participant's File
	Scheduled for discussion at Management Review Meeting