

# Incident Management



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**System:** Workplace Health and Safety

## Responsible Person/s:

Directors

CEO

Team Leaders

All Footsteps Community Services (FCS) Employees, Contractors, and Volunteers

## Purpose:

This policy aims at defining clear guidelines to manage incidents including reporting, addressing, and implementing strategies to reduce risks. This policy also aims at providing further details to ensure that critical incidents involving FCS's clients, employees, volunteers, and services are addressed appropriately, as per contractual and legal requirements. This policy is to be read in the broader context of FCS' risk management.

## Scope:

This policy applies to all FCS employees, including subcontractors, consultants, and volunteers as well as clients.

## Statement:

FCS is committed to ensuring that all employees, volunteers, clients, carers and visitors are properly informed and adequately protected from the risk of illness, accident or injury within the workplace by promoting good occupational health and safety practices that are consistent with legislative requirements.

FCS is also committed to ensuring the timely and comprehensive notification of incidents to the relevant agencies and departments it works with. As a provider of services to people with a disability, children and older Australians, FCS is required to ensure that all incidents of a critical nature are reported to the relevant agencies as per FCS's service agreements with the applicable funding bodies (*i.e. Department of Communities, Disability Services and Seniors, Department of Child Safety, Youth and Women (the Department) and the National Disability Insurance Scheme (NDIS) Quality and Safeguards Commission (the Commission)*).

## Definition

An incident is defined as an unplanned accident, event or unusual occurrence that may affect the safety/health of a client, carer, volunteer and/or employees of FCS while participating in a service, visiting FCS or whilst at work. Those include but are not limited to:

- Unnecessary harm to a person, or loss or damage to property including use of Restrictive Practices (RP).
- Allegation/identification of abuse and neglect cases.

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- A near miss which did not cause harm but had the potential to do so.
- Medication error.
- Anything illegal (e.g., assault, sexual misconduct, fraud).

## Principles:

- The timely and comprehensive alerting of incidents results in:
  - Immediate appropriate advice and management of incidents including the provision of employee and client supports.
  - Effective provision of incident information, data requests and briefings.
  - Informed, accurate and timely responses including to external agencies and Departments and potential media enquiries.
- Proper recording and reporting.

## General

- FCS will ensure it has appropriate systems in place to properly manage incidents.
- FCS will maintain Information Technology (IT) systems to ensure incidents linked to service delivery are managed in a seamless way.

### 1. Identifying and reporting

It is mandatory for all individuals identifying an incident to first act upon the incident to ensure the safety of the workplace and people. This can be by directly acting on the cause when possible or ensuring it has been reported to the appropriate person. At a minimum, the person identifying the incident is responsible for ensuring the environment is safe for clients, employees, and potential visitors to the location. FCS might have specific reporting obligations stemming from the law or its registrations/funding received.

FCS maintains an Incident Register to ensure incidents are logged, acted upon appropriately and that potential improvements are captured in FCS's Continuous Improvement Plan (CIP) (see FCS' *Continuous Improvement and Service Quality Policy*).

### 2. Types of incidents

The organisation considers two types of incidents based upon their seriousness and associated reporting, being:

- A general or minor incident can be easily resolved or responded to.
- A major or critical incident, whether deliberate or accidental, which is more serious and/or complex in nature.

Note that FCS use a traffic light system to further categorise and address those incidents to ensure granularity in reporting as follows:

Categories	Description	Examples
	A minor incident where	Abrasions, water spills,

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Green	danger is very low	minor altercations
Yellow	A minor incident where risks are higher to individuals	Incident resulting in use of first aid, Use of registered RP, Medication errors, Complex behaviors, suicide ideations seizures.
Red	All Major incidents	See Major Incidents, harm to staff other than needing first aid.

Examples of “general or minor incidents” include but are not limited to:

- Minor injuries that can cause short-term pain or discomfort (such as a scratch or bruise).
- Minor accidents like slipping, tripping or falling.
- The recurrence or aggravation of any pre-existing injury or illness.
- Near misses or dangerous occurrences which could have, but did not, injure any person(s).
- Complex behaviors.
- Seizures.
- Use of Restrictive Practice (registered).
- Situations when first aid and/or medical attention/advice is required.

Examples of “critical incidents” include but are not limited to:

- Situations where the application of first aid is not sufficient.
- Use of un-registered Restrictive Practice (RP).
- Any indication or allegation of abuse, assault or negligence.
- Any complaint or allegations made by clients themselves.
- Any indication of possible sexual interference.
- Any injury considered suspicious.
- Any injury which could not have been self-inflicted e.g. hand imprint, rope mark.
- Any client injury where a staff injury occurred at the same time.
- Any client injury which occurred when staff had to intervene to protect the client, themselves, or other people.
- Suspected or actual abuse (this can include physical, sexual, psychological, emotional, financial, or legal abuse).
- Sexual assault on or off the organisational premises.
- Allegations of assault against employees/client.
- Major accidents.
- Death in service.
- Serious self-harm.

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- Abandonment or risk of abandonment of a client.
- A missing client.
- Unexpected or unusual seizure.
- Suicide /attempted suicide.
- Fights involving weapons.
- Accusations of illegal drug use or supply within the service.
- Vandalism of premises or major break-ins.
- Critical illness.
- Criminal activity.
- Unfavorable community and/or media attention relating to FCS.
- Serious threats to employees, volunteers, clients and/or facilities.
- Fire or natural disaster.
- Overall, any matters which in the short or medium term is susceptible to create liabilities for the organisation.

## Note that

- **All incidents which cause harm to employees will always be considered as major/critical.**
- **Suicidal ideations are treated as categories orange and will be re-classified by the Team Leader depending on clients' risks assessment.**

FCS has built below a non-exhaustive list of critical incidents and their reportable obligations as follow:

<b>Immediate verbal notification to the Chief Executive Officer followed by an Incident Report submitted within four (4) business hours of the employee becoming aware of the incident. CEO to immediately notify the relevant agency or Department upon becoming aware of the incident as per FCS procedure</b>	
Death of a person (Reportable police/coroner and to Department/NDIS Commission)	Who was a child or young person known to Child Safety in the previous 12 months; or With a disability which is defined as a 'death in care' under the <i>Coroners Act 2003</i> ; or Where another client, foster or kinship carer or employees member is allegedly involved in the death; or While attending or using a department provided or funded services, facilities or activities.
Life threatening injury to a person (Reportable to Department/ NDIS Commission)	Where another client, foster or kinship carer or employees member is allegedly involved in the injury; or While attending or using departmental provided or funded services, facilities or activities.
Serious injury to a child that results in hospitalisation (Reportable to Department/Child Safety/ NDIS Commission)	When a child or young person, currently known to Child Safety or known to Child Safety within the previous 12 months is believed to have an injury that meets the definition of a serious physical injury under the <i>Child Protection Act 1999</i> .

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Abduction (reportable to Department/Child Safety)	Abduction of a child or young person subject to departmental intervention from their carer/service provider.
Major security incident (Reportable to police, work cover as applicable)	A major security incident involving an emergency response to a hostage situation, fire, power failure, bomb threat or discovery of a bomb.
Alleged rape, sexual assault, or serious assault of a child under 14 years of age (Reportable to Department/ NDIS Commission /Child Safety)	With a disability while attending or using departmentally provided or funded services, facilities or activities; or Of or by a child or young person subject to departmental intervention; or While attending or using department provided or funded services, facilities or activities.
Serious injury to a person that results in hospitalisation (Reportable to Department/NDIS Commission/Child Safety)	Where another client, foster or kinship carer or employees is allegedly involved in the injury; or While attending or using department provided or funded services, facilities or activities.
Alleged rape, sexual assault or serious assault reportable to Department/NDIS Commission/Child Safety/Work cover)	Of a person with a disability while attending or using department provided or funded services, facilities or activities; or Of or by a child or young person subject to departmental intervention; or Of or by a person while attending or using department provided or funded services, facilities or activities; or Of an employee whilst performing their duties.
Attempted Suicide (reportable to Department/NDIA/Child Safety)	Of a person in a departmental facility; or Of a person who is a client of accommodation support provided or funded by the department; or Of a child or young person in care.
Missing Child (reportable to Police/Department/ Child Safety)	Any child whose location is unknown and there are fears for the safety or concern for the welfare of that child.
Missing person (reportable to police/Department/Child safety)	Clients are missing from their place of residence where there are serious concerns for their safety or wellbeing due to their vulnerability
Alleged abuse, neglect or exploitation of a person with a disability (reportable to the Department/NDIS Commission)	At all time Where another client, employees or direct carer is allegedly involved; or Who is a client of accommodation support provided by the department.
Major Data/IT/privacy breach (reportable to OAIC)	When those happen and have strong impact on individual privacy and when the type of data exposed might pose a risk to individuals.

## Roles and Responsibilities

### 1. The role of the Directors is to:

- Overview incidents within the organisation by monitoring the incident register. This is done via the CEO reporting (in a de-identified manner) all incidents. This is critical incidents are fully reported in a deidentified manner and minor incidents are reported in a quantitative format.
- Remaining aware of legal reporting obligations and when relevant, how to report critical incidents.
- Hold ultimate responsibility for FCS to meet its legal requirements.

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## 2. All employees must:

- Maintain a safe working environment at all times.
- Always follow FCS policies and procedures.
- Always attempt to prevent incidents:
  - Report all incidents to their Line Manager (i.e. Team Leader/Chief Executive Officer as soon as practical following an incident).
  - Seek advice on how to respond to the incidents and follow directions given to them.
- Only provide assistance that they are qualified to provide following an incident.
- Participate in incident investigations.
- Seek and/or participate in debriefings following an incident.
- Ensure they have read and understood a client's Support Plan and fully implement.
- Ensure they communicate with Team Leader(s) and or officers any suggestions of change/adaptation of Client's Support Plan.
- Ensure they do not make any comments to any media and refer any enquiries to the Chief Executive Officer.

## 3. Team Leaders and delegates

In addition to employees' requirements, Team Leaders and delegates are to:

- Ensure they promptly respond to incidents and requests for advice, support and training.
- Inform the Chief Executive Officer/delegate as soon as practical when a critical incident has occurred.
- Convey incident report to FCS delegate for registration in the incident register.
- Undertake all work needed and close the incident as appropriate.
- Develop holistic plans with clients, carers and employees.
- Ensure employees are aware of any plans developed for the clients and implement these.
- Inform the Chief Executive Officer/delegate of any training needs or areas that require improvement to prevent incidents and manage risk.
- Ensure information is provided to all relevant employees where amendments to Incident Management Policy and/or reporting systems and processes are released.

## 4. Chief Executive Officer (CEO) and/or delegate

In addition to the above, the CEO and its delegates are to:

- Ensure relevant policies and procedures are in place.
- Ensure employees are aware of and appropriately follow procedures.

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- Ensure preventative strategies are identified and implemented. These strategies are to minimize the occurrence of incidents while respecting the rights of individuals to take risks and make informed decisions.
- Ensure employees are provided with adequate training and support to maintain individual's health and safety and respond to incidents. Training is to be provided as part of employees' orientation and then intermittently.
- Ensure the Incident Register is maintained.
- Address major incidents as needed.
- Report Major incidents to the Board by informing the Chair of critical incidents as soon as practical and providing a full account of these incidents at the next Board Meeting (inclusive of informing Management).
- Ensure that all critical incidents as defined in this document are reported to the relevant external agencies and Departments within the timeframes indicated in this policy (for example, the relevant Departments, Work Cover, etc).
- Ensure incidents are responded to in a timely fashion.

In accordance with FCS' Organisational Authority and Delegation Policy. When the CEO is not in a position to address the incident, the General Manager or identified individuals will act as the delegate.

## 5. Clients, Carers and Visitors

Are asked to:

- Inform FCS of any needs that could impact on the individualised services that FCS provides.
- Allow FCS to undertake necessary assessments (e.g. in-home risk assessments).
- Follow employees' instructions and FCS procedures to maintain their health and safety.
- Ensure employees are aware when they arrive and leave the office or activity.
- Refrain from attending a service when they are unwell/have an infectious illness.
- Not put themselves or others at risk; and
- Ensure incident investigations are a collaborative process and that post incident strategies are implemented.

## Reporting an incident

Overall incidents need to be reported to the appropriate Team Leaders/ Manager on the day they happen, and incident report formally submitted within 24 hours. Incidents are to be submitted electronically when feasible (see Incident Management procedures).

### 1. Reporting to external agencies including the NDIS Commission

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FCS has a broad range of agencies it needs to report to. Those are specified in the associated procedure.

Under the NDIS Act, the following incidents need to be directly reported to the commission within 24 hours:

- The death of a person with disability.
- Serious injury of a person with disability resulting in hospitalisation.
- Abuse or neglect of a person with disability or allegation of the same.
- Unlawful sexual or physical contact with, or assault of a person with disability.
- Sexual misconduct committed against, or in the presence of, a person with disability, including grooming of such a person for sexual activity.
- The use of a Restrictive Practice in relation to a person with disability that is an unauthorised use or not in accordance with a behavior support plan.

All incidents above need to be reported within 24 hours of becoming aware of it occurring. This is done by FCS delegate(s).

Reporting is done through the Commission Portal by FCS delegates or by emailing [reportableincidents@ndiscommission.gov.au](mailto:reportableincidents@ndiscommission.gov.au) using form 661 <https://www.ndiscommission.gov.au/document/661>

All other information linked to the reported matter must be submitted within 5 Days from the organisation becoming aware of said incident.

**Note:** Please see the “STA, RP and Positive Behavior procedures” for specific guidelines around those incidents).

## 2. Reporting to other stakeholders

FCS will endeavor to contact relevant stakeholders in a timely manner (e.g.: next of kin, family, guardian) when and if appropriate.

## Prevention and Continuous Improvement

FCS will ensure it has clear process to prevent incidents, mitigate risk(s) and raise awareness.

This will be achieved through rigorous training of employees and integration of lessons learnt from incident reports into the FCS *Continuous Improvement Plan*.

Alternatively, FCS will review its incident registered at least annually to identified trends and areas for improvement.

## Related Documents:

*Incident Management Procedure.*

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*Organisational Authority and Delegation Policy*

[NDIS \(Incident Management and Reportable Incidents\) Rules 2018 \(Cth\)](#)

Incident Register

Risk Register

Continuous Improvement Plan

Continuous Improvement and Service Quality Policy

## **Scheduled Review Date:**

This policy will be reviewed as required, or within no later than five (5) years from date of authorisation.

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