



AmeCare

Working with you on the canvas of your life




Incident Reporting

Policy and Procedure

Version 3.5

Document Control

3.6	Updates minors and evernote	04.03.2018	05.06.2024	05.06.2025
3.5	Incident Investigation tools (OCC and OHS)	04.03.2018	05.06.2023	05.06.2024
3.4	Work safe, CP and CCYP better outlined	04.03.2018	05.05.2022	05.05.2023
3.3	Document Control added	04.03.2018	03.01.2022	02.01.2023
3.2	Timing reviews for incidents	04.03.2018	02.11.2021	02.11.2022
3.1	NQSC made clearer	04.03.2018	07.08.2021	07.08.2022
3.0	Diagram of risk added	04.03.2018	03.03.2020	03.03.2021
2.0	Format changes and rewording	04.03.2018	04.03.2019	04.03.2020
1.0	Initial Policy	04.03.2018	N/A	04.03.2019
Issue	Description of changes	Created	Updated	Review

ROLE	NAME AND POSITION	SIGNATURE	DATE
Document Author:	Yanie Drysdale – General Manager		04.03.2018
Document Review:	Yanie Drysdale – General Manager		05.05.2022
Document Approval:	Yanie Drysdale – General Manager		05.05.2022

Incident Reporting

Policy

AmeCare will ensure that all incidents regarding participants and employees are responded to, reported, investigated and finalised in an effective and timely manner, and in accordance with legislative requirements.

Purpose and Scope

This policy defines incidents including serious incidents and incidents which are reportable to the NDIS Quality and Safeguards Commission. An incident is broadly defined as:

- Acts, omissions, events or circumstances that occur in connection with providing NDIS supports or services to a person with disability and have, or could have, caused harm to the person with disability
- Acts by a person with disability that occur in connection with providing NDIS supports or services to the person with disability and which have caused serious harm, or a risk of serious harm, to another person
- Reportable incidents that are alleged to have occurred in connection with providing NDIS supports or services to a person with disability.

***This policy has been developed in accordance with the National Disability Insurance Scheme (Incident Management and Reportable Incidents) 2018.
<https://www.legislation.gov.au/Details/F2018L00633>***

Definitions

Child Protection (CP)

Make a report to child protection a person needs to have formed a reasonable belief that a child has suffered or is likely to suffer significant harm as a result of abuse or neglect, and their parent have not protected or is unlikely to protect the child from harm of that type. A reasonable belief does not require proof.

The scheme:

Commission for Children and Young People (CCYP)

- ✓ requires some organisations to respond to allegations of child abuse (and other child-related misconduct) made against their workers and volunteers, and to notify us of any allegations
- ✓ enables us to independently oversee those responses
- ✓ facilitates information sharing between organisations, their regulators, Victoria Police, the Department of Justice and Regulation's Working With Children Check Unit and us.

Victorian Disability Worker Commission (VDWC)

All disability workers in Victoria must abide by the Disability Service Safeguards Code of Conduct (the Code), which provides a standard to protect people with disability from harm and abuse. For registered disability workers, the Board has set a Guideline that all registered workers must comply with the Code. The Code is an accepted standard to be met in the practice of disability worker. If AmeCare suspects an employee has breached the VDWC Code of Conduct, AmeCare's Code of Conduct or the NQSC Code of Conduct, AmeCare will report the employee to the VDWC.

Serious Injury/Serious Risk

Defined as an injury or perceived risk of injury or psychological trauma of a serious nature that:

- ✓ places a life in jeopardy
- ✓ produces unconsciousness
- ✓ results in substantial loss of blood
- ✓ involves the fracture of a leg or arm but not a finger or toe
- ✓ involves the amputation of a leg, arm, hand or foot, not a finger or toe
- (f) consists of burns to a major part of the body
- ✓ causes the loss of sight in an eye

A **reportable incident** is defined by the NQSC as:

- ☑ the death of a person with disability
- ☑ serious injury of a person with disability
- ☑ abuse or neglect of a person with disability
- ☑ 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 the person with disability for sexual activity
- ☑ use of a restrictive practice in relation to a person with disability where the use is not in accordance with an authorisation (however described) of a state or territory in relation to the person, or if it is used according to that authorisation but not in accordance with a behaviour support plan for the person with disability

This policy applies to representatives including key management personnel, directors, full time workers, part time workers, casual workers, contractors and volunteers when supporting and providing service to participants of AmeCare.

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At AmeCare:

- ✓ we aim to provide a high standard of duty of care and to ensure the safety and well-being of each participant using our services, our employees and members of our community
- ✓ we will foster a culture of continuous improvement with a proactive approach to preventing incidents
- ✓ if an incident occurs, we will promptly and appropriately respond to the incident in an equitable, objective and fair manner
- ✓ we will record all incidents, report (if required) and investigate (if required)
- ✓ we will ensure the principles of procedural fairness are maintained by providing those affected an opportunity to give their side of the story and to comment on any adverse views
- ✓ we will maintain an incident management system to aid in recording, managing and resolving incidents
- ✓ the incident management policy and process is accessible to workers via the website, electronic staff handbook and Brevity

Responsibilities

All employees are responsible for implementing this procedure. The General Manager is responsible for monitoring and responding to incidents and ensuring that incident reports are completed and logged on the incident register. The Management Team is responsible for reviewing incidents to identify patterns or issues that may require a review of policies and/or change in work processes and practices.

Categories

**For a comprehensive list of incidents, please see appendix 1 below.*

Category One	<ul style="list-style-type: none"> ✓ A NQSC reportable incident as outlined above ✓ serious injury to employees requiring medical treatment/hospitalisation ✓ serious injury to clients and/or carers requiring medical treatment/hospitalisation ✓ events with health and safety implications, e.g. fire hazards such as the storage of chemicals or an attempted break and enter ✓ incident reportable to WorkSafe
Category Two	<ul style="list-style-type: none"> ✓ injuries to employees requiring First Aid ✓ injuries to clients and/or carers requiring First Aid ✓ Significant property damage ✓ any incident involving the police, fire or ambulance services ✓ Absconding/wandering ✓ Physical abuse towards staff
Category Three	<ul style="list-style-type: none"> ✓ Minor injury to a client and/or their carer – First Aid not required ✓ Minor injury to an employee – First Aid not required ✓ Verbal abuse ✓ Minor property damage ✓ Fall - not requiring medical treatment ✓ Medication error

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Procedure

When an accident occurs employees must:

1. Ensure the immediate safety of clients and other employees and render First Aid if required
2. Call 000 – if required (Police, Fire, Ambulance)
3. If the incident is a **Category 1** incident, notify the General Manager by phone as soon as possible **and no later than 2 hours** following the incident occurring. The reporting employee must then complete an incident report within 24 hours of the incident occurring.
4. If an incident is a **Category 2**, notify the line manager by phone or email within **12 hours** of incident occurring. The reporting employee must then complete an incident report within 24 hours of the incident occurring.
5. If the incident is a **Category 3** incident notify the line manager by phone or email and incident report **within 24 hours** of the incident occurring.
6. A person in the management team will **immediately** notify families, carers and guardians of a Category 1 or 2 incident and if a client is injured. A
7. Complete an AmeCare **Incident Report** within 24 hours of the incident occurring and submitting it online via the AmeCare staff portal.
8. If required, a manager notify the NDIS Commission.

Investigation and Assessment of Incidents

Following the incident, the Line Manager or General Manager will complete an assessment with regard to the following issues:

- ✓ 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, and
- ✓ whether other people need to be notified of the incident.

The Line Manager or General Manager will also consider the outcome of the assessment to determine what further action should be taken, which could include:

- ✓ providing ongoing support to impacted people with disability and/or ensuring the ongoing wellbeing and safety of impacted people with disability
- ✓ identifying and implementing quality improvement measures
- ✓ notifying the NDIS Commissioner and/or other agencies, if appropriate
- ✓ identifying and taking corrective action to prevent a reoccurrence of incidents

The Line Manager or General Manager will record the outcome of their assessment on the AmeCare Incident Report form and/or register.

For incidents resulting in Occupational Violence or Occupational Health and Safety Incident, the AmeCare Human Resources delegate will complete the Incident Investigation Tool that will outline the incident, control measures and quality improvement table to mitigate further incidents and risks.

Support to Participants

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- ✓ If a client is injured while receiving services from us, employees must ensure that they receive medical attention appropriate to the severity of the injury
- ✓ In the event of a serious incident e.g. assault, management should offer counselling to affected clients.
- ✓ The Line Manager or General Manager will invite clients to be involved in the management of the resolution of the incident and this will be recorded in the Practice Manager's report: post-incident review section on the Incident Report template.

Notifying the NDIS Quality and Safeguards Commission (NQSC)

Registered providers **must** report to the **NDIS Commission** serious incidents (including allegations) arising in the context of NDIS supports or services, including:

- the death of an NDIS participant
- serious injury of an NDIS participant
- abuse or neglect of an NDIS participant
- unlawful sexual or physical contact with, or assault of, an NDIS participant
- sexual misconduct committed against, or in the presence of, an NDIS participant, including grooming of the NDIS participant for sexual activity
- the unauthorised use of a restrictive practice in relation to an NDIS participant.

Most reportable incidents must be notified to the NDIS Commission **within 24 hours** of a provider's key personnel being made aware of it, with a more detailed report about the incident and actions taken in response to it to be provided within 5 business days.

The unauthorised use of restrictive practice must be notified to the NDIS Commission within 5 business days of a provider's key personnel being made aware of it.

If there is harm to a participant, it must be reported within 24 hours.

A **final report** may also be required within **60 business days** of submitting the five-day report. The NDIS Commission will advise providers whether a final report is required.

In all cases, the following must be assessed:

- the impact on the NDIS participant
- whether the incident could have been prevented
- how the incident was managed
- what, if any, changes are required to prevent further similar events occurring.

The Commission must be notified using the **online NQSC provider portal**. Alternatively, providers can complete the following forms:

- Reportable incident – **immediate notification form**
(<https://www.ndiscommission.gov.au/document/1516>)
- Reportable incident – **5-day notification form**
(<https://www.ndiscommission.gov.au/document/1521>)

Note: Once a form is completed, email it directly to the NDIS Commission at: reportableincidents@ndiscommission.gov.au.

External Reporting

The Director or appropriate manager is responsible for:

Undertaking follow up actions in relation to individual incidents

- Ensuring all mandatory reporting to:
 - Local police (phone 000)
 - DHHS (<https://www.health.vic.gov.au/site-4/publications/client-incident-report-form>)
 - WorkSafe(<https://www1.worksafe.vic.gov.au/vwa/vwa029-005.nsf/xpOnlineComplaint.xsp>)
 - CCYP (<https://ccyp.vic.gov.au/report-an-allegation/>)
 - OAIC (<https://www.oaic.gov.au/privacy/notifiable-data-breaches/report-a-data-breach>)

is completed within the prescribed timeframes and that the correct procedure to ensure the wellbeing and safety of those involved is followed

- Implementing a formal or informal Investigation as required
- Reviewing incident information over time to identify lessons and practice implications
- Generating and implementing strategies and action plans and monitoring and reviewing the effectiveness of actions taken
- Completing a Final Report where required for external authorities

Reporting to WorkSafe

- Report here: <https://www.worksafe.vic.gov.au/report-incident>

Under the Occupational Health and Safety Act 2004 (OHS Act), employers and self-employed persons must notify WorkSafe immediately after becoming aware a notifiable incident has occurred. Failure to report an incident to WorkSafe is an offence and may result in prosecution.

You must report incidents resulting in

- death of a person
- a person needing medical treatment within 48 hours of being exposed to a substance
- a person needing immediate treatment as an in-patient in a hospital
- a person needing immediate medical treatment for one of the following injuries: amputation, serious head injury or serious eye injury, removal of skin (example: de-gloving, scalping), electric shock, spinal injury, loss of a bodily function, serious lacerations (example: requiring stitching or other medical treatment)

Note: Medical treatment means treatment by a person registered under the Health Practitioner Regulation National Law to practice in the medical or nursing or midwifery profession (doctor, nurse, midwife etc.).

You must also report the following incidents if they expose a person to a serious risk to their health or safety emanating from an immediate or imminent exposure to:

- an uncontrolled escape, spillage or leakage of any substance , including dangerous goods within the meaning of the Dangerous Goods Act 1985, or
- an implosion, explosion or fire, or
- electric shock, or
- the fall or release from a height of any plant, substance or thing, or
- the collapse, overturning, failure or malfunction of, or damage to, any plant, including plant in relation to a mine, that is prescribed by the Occupational Health and Safety Regulations 2017 (OHS Regulations), or the design of which must be registered in accordance with the OHS Regulations, or
- the collapse or partial collapse of a building or structure, or
- the collapse or failure of an excavation or mine or of any shoring supporting an excavation or mine, or
- the inrush of water, mud or gas in workings in a mine, underground excavation or tunnel, or
- the interruption of the main system of ventilation in a mine, underground excavation or tunnel.

Dangerous goods incidents

Under the Dangerous Goods Act 1985 all accidents involving dangerous goods must be reported to the nearest fire authority or police station, including:

- fire
- explosion
- spills
- leakage
- escape

Note: This does not apply to prescribed dangerous goods or prescribed quantities of dangerous goods.

Explosive incidents

Under the Dangerous Goods (Explosives) Regulations 2022 the following must be reported:

- incidents relating to explosives involved in explosions, fire or other incidents causing:
 - injury to any person or immediate risk to their health or safety
 - property damage
 - theft or loss of explosives, break in or attempted break in

If AmeCare employees are still unsure if needing to report an incident - call us on [13 23 60](tel:132360)

Record Keeping Requirements

Under the NDIS Incident Management requirements, for each incident, registered NDIS providers must record, at a minimum, the following details:

- a description of the incident, including the impact on, or harm caused to, any person with disability
- whether the incident is a reportable incident
- if known, the time, date and place at which the incident occurred or if not known, the time, date and place at which the incident was first identified
- the names and contact details of the persons involved in the incident and any witnesses to it
- the actions taken in response to the incident, including action taken to support or assist a person with disability impacted by an incident
- if an investigation is undertaken by the provider in relation to the incident —the details and outcomes of the investigation, and
- the name, position and contact details of the person making the record of the incident.

All records must be kept for seven years from the day that the record is made.

For all minors that entering AmeCare's service, their records will be kept until the age of 25.

Related Documents

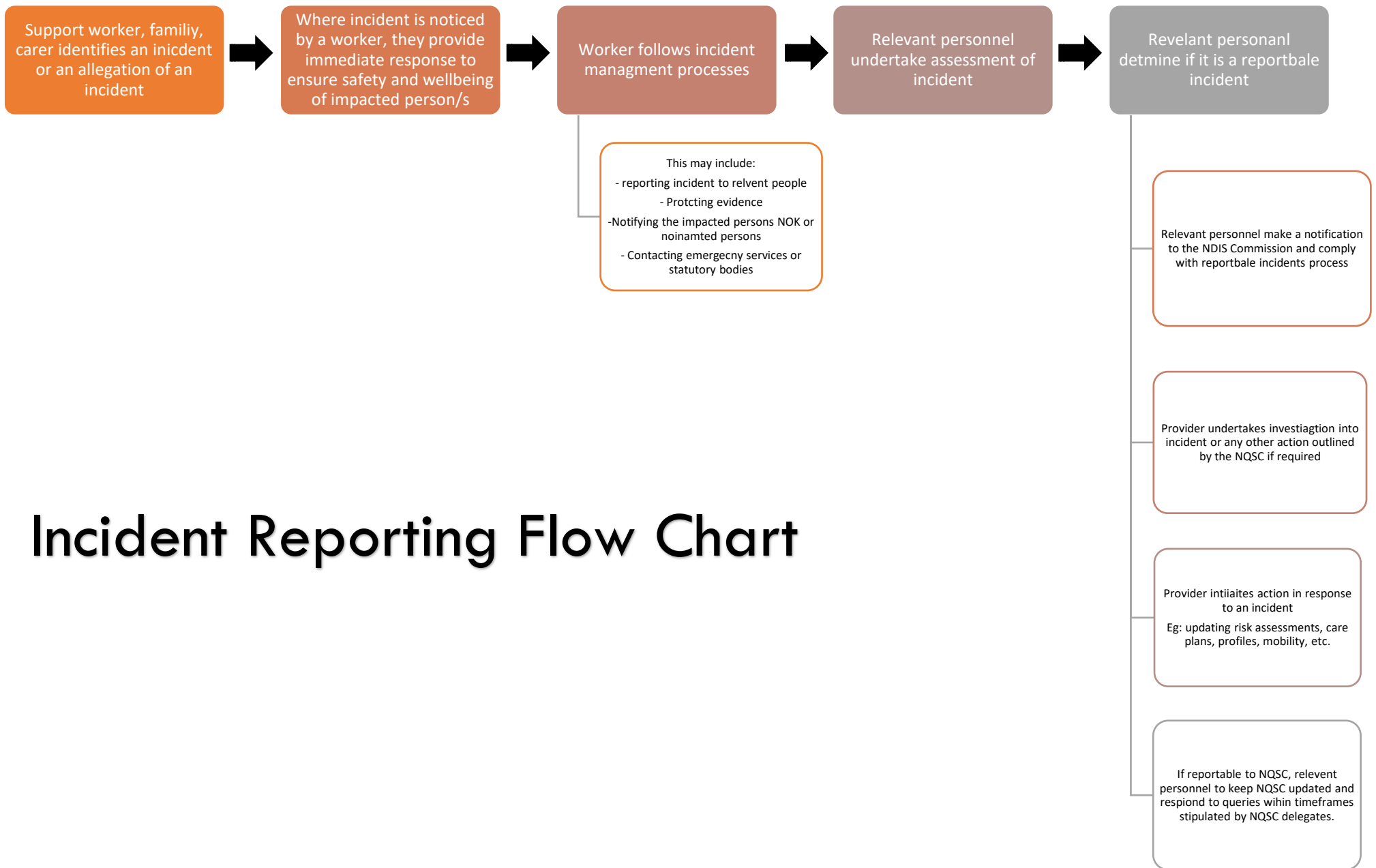
- **Continuous Improvement Policy**
- **Freedom from Abuse and Neglect Policy**
- **Staff Handbook**
- **AmeCare website**
- **Incident Reporting Register**
- **Privacy and Confidentiality Policy**
- **OH&S Policy**
- **Incident Investigation Tool**
- **OVA Site Assessment**



Appendices

**if an incident occurs, and it cannot be found in this list or the list above, all AmeCare employees must act in accordance with a Category One.*

Category One	<ul style="list-style-type: none"> ✓ an injury or illness that requires immediate treatment as an in-patient in hospital (an in-patient in hospital is a person who has been admitted to hospital and requires at least one overnight stay) ✓ serious head, eye or burn injury ✓ spinal injury ✓ loss of bodily function ✓ serious laceration ✓ exposure to a substance which requires medical treatment within 48 hours ✓ an uncontrolled leakage of a substance ✓ an uncontrolled implosion, explosion, or fire ✓ an uncontrolled escape of gas or steam ✓ WorkSafe incident
Category Two	<ul style="list-style-type: none"> ✓ Error in medication (Dose, Time, Drug) ✓ Call to emergency services ✓ Sexual advancements ✓ Medication Count Discrepancy ✓ Money Ledger Discrepancy ✓ Self-Harm, ✓ Suicidal Ideation ✓ Medical Change ✓ After hours medical support (locum or nurse on call) ✓ Abuse
Category Three	<ul style="list-style-type: none"> ✓ Smoking Indoors ✓ Unsecured chemicals ✓ Inappropriate behaviours ✓ Threats/Intimidation ✓ Drugs ✓ Alcohol ✓ Adverse Reaction to medication (not administered by AmeCare) ✓ Behavioural Change (significant) ✓ Medication Refusal ✓ Accidental property damage ✓ Breach of privacy and/or confidentiality ✓ Occupational Health and Safety hazard



Incident Reporting Flow Chart