



INCIDENT MANAGEMENT

Policy Code: 1113

INCIDENT MANAGEMENT

Policy Statement

CASS is committed to reducing the occurrence of incidents, minimising the harm caused by those incidents, and using the lessons learned to prevent future occurrences. This policy is based on the following principles:

- Incidents are reported fully and honestly, without fear of inappropriate blame or reprisals.
- Information regarding incidents is treated confidentially, and the privacy of those involved is protected to the extent possible.
- The primary purpose of reporting incidents is to learn from them and share this knowledge for improvement.

Procedures:

When an incident occurs, it must be appropriately managed. This includes securing the safety of everyone involved, taking immediate actions to prevent a recurrence, and mitigating any further harm.

1. Assess the situation and check for danger. Remove the participant from any danger, if it is safe to do so. Ensure the participant's immediate safety needs are met.
2. If the participant requires immediate medical attention, call Emergency Services (000).
3. If the participant has injuries that do not require immediate attention, assist them in seeing a doctor for assessment and treatment, including any psychological trauma.
4. Consider the impact of the incident on other participants within the setting and provide appropriate support.
5. Notify other service providers working with the participant, if applicable.
6. If the incident involves an alleged criminal act, contact the police and preserve any physical or documentary evidence that may be critical for an investigation by the police or CASS Disability Services.
7. If the participant consents, or lacks the capacity to consent, contact the participant's next of kin/guardian/representative.
8. Provide ongoing support to all affected participants and staff, recognizing that their needs may evolve over time.

NDIS Reportable Incident Procedure

An incident is reportable if a certain act or event has occurred (or is alleged to have occurred) in connection with the provision of supports or services by a registered NDIS provider. Reportable incidents include:

- The death of a person with disability
- Serious injury of a person with disability



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- 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
- Unauthorized use of restrictive practices in relation to a person with disability.

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.

- The Immediate Notification Form includes sections for details of the incident, actions taken, and individuals involved.
- An exception applies for the use of unauthorised restrictive practices, which must be reported within five business days, unless harm has occurred, in which case it must be reported within 24 hours.
- To notify the NDIS Commission, the authorised 'Notifier' or 'Approver' must log in to the NDIS Commission Portal and select the 'My Reportable Incidents' tile to complete the form.
- The NDIS Commission recommends designating an 'Authorised Reportable Incidents Approver,' responsible for submitting reports, and an 'Authorised Reportable Incidents Notifier,' who assists with creating and drafting reports.

STEP 2: Submit a 5 Day Form

The 5-Day Form must be submitted within five business days of becoming aware of a reportable incident. This form provides additional details about the incident and actions taken by the NDIS provider.

- The 5-Day Form must also be used for incidents involving unauthorized restrictive practices, except when harm occurs, in which case it should be reported within 24 hours.

STEP 3: Submit a final report, if required

- A final report may be requested by the NDIS Commission. If required, the NDIS Commission will provide the final report form via email.

Roles and Responsibility for Incident Management

1. Support Workers are responsible for:
 - Ensuring all necessary first aid and initial care is provided to participants after an incident.
 - Reporting any incident in which they are involved or witnessing.
 - Completing the incident report form in accordance with requirements.
 - If the incident is clinically related, complete the incident report form on LeeCare.
 - Participating in the investigation of incidents, if necessary.
2. Coordinators/Team Leaders are responsible for:
 - Ensuring all necessary initial care and support is provided to staff and participants after an incident.
 - Arranging for injured participants to be assessed by a medical professional and following up as necessary.
 - Informing the Behavior Support Practitioner if the incident is related to a participant's behavior.



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- Informing the appropriate guardian, parent, or carer.
- Ensuring the incident is assessed to determine appropriate actions to prevent recurrence.
- Submitting the incident report to HRM within 24 hours if an employee is injured.
- Sending the incident report to WHS Liaison Officer for filing and registration within 5 working days.

3. Registered Nurses (RNs) are responsible for:

- Ensuring all necessary initial care and support is provided to staff and participants in clinically related incidents.
- Informing the appropriate guardian, parent, or carer.
- Ensuring clinically related incidents are properly reported and recorded on LeeCare.
- Completing follow-up actions on LeeCare within 5 working days.
- Ensuring the incident is assessed and appropriate actions are taken to prevent recurrence.

4. Executive Team is responsible for:

- Ensuring compliance with NDIS Quality and Safeguards Commission guidelines for reportable incidents.
- Submitting reportable incidents to the NDIS Commission.
- Sharing lessons learned from incident management with staff.
- Ensuring all DS staff are informed of new or amended policies related to incident management.
- Working together with the Corporate Education Officer to provide appropriate training and/or resources to staff members.

Investigations:

The purpose of an investigation is to establish the causes of a particular incident, its effect on the impacted person, and any operational issues that may have contributed to the incident occurring. An investigation may be the most appropriate response for the following examples of incidents; however, this list is not exhaustive:

- The cause of the incident is unknown, or could have been one of a number of factors or a combination of factors
- The nature and the impact of the incident was significant, and requires investigation to support the safety and wellbeing of people with disability
- The incident may involve an allegation against a worker, and an investigation is required to determine what actions are required to manage the potential risk associated with the subject of allegation

A particular person will be nominated to manage or oversee the investigation. An investigation will include the following phases, or steps:

- Establishing the cause of the incident
- Determining its impact
- Identifying operational issues that may have contributed to its occurrence

CASS DS will ensure that the appointed investigator is objective and impartial to the incident and investigation. To maintain independence, the investigator should not have been involved in the incident.



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To ensure that investigations are fair, CASS DS will manage any actual or perceived conflict of interest in relation to the incident investigation.

A conflict of interest refers to a situation where the personal or professional interests of an investigator could influence the performance of their official duties or responsibilities in the investigation.

Learning from Incidents:

Every incident presents an opportunity for learning and continuous improvement. This should involve:

- Reviewing incidents over time to identify patterns or recurring issues when required. This allows for addressing systemic problems that may not have been obvious from individual incidents.
- Relevant training and update operational procedures based on lessons learned, ensuring staff are aware of updated practices to reduce future risks.
- Documenting and tracking improvements in the incident register and continuous improvement plan and that outlines specific measures to prevent future incidents.

Documents related to this policy	
Related Policies	• WHS Policy • Training Needs Analysis • Orientation Checklist • Employment Checklist • Risk Management Policy • Emergency and Disaster Management Policy and Procedure
Forms, record keeping or other organizational documents	• Incident Report • Incident register • Work Health and Safety Act (2011)

Reviewing and approving this policy		
Frequency	Person responsible	Approval
3 years	Unit Head	HAS & DS Committee

Policy review and version tracking			
Review	Date Approved	Approved by	Next Review due
Version 1	1 June 2014	HAS & DS Committee	31 May 2017
Version 2	29 May 2017	HAS & DS Committee	28 May 2020
Version 3	28 February 2019	HAS & DS Committee	28 February 2022
Version 4	21 February 2022	HAS & DS Committee	December 2024
Version 5	December 2024	Board of Directors	December 2027



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Version 6	September 2025	HAS & DS Committee	September 2028
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