



## INCIDENT MANAGEMENT

Policy Code: 1113	INCIDENT MANAGEMENT
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### **Policy Statement**

CASS is committed to reducing the number of incidents that occur; minimising the harm caused as a result of those incidents and using the lessons learned from incidents to prevent a recurrence of those incidents in the future.

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 in the incident is protected to the extent possible;
- the purpose of reporting is to learn from incidents and to share this knowledge.

### **Roles and Responsibility for Incident Management**

#### **1. Support Workers are responsible for:**

- reporting to their Coordinator, any incident in which they are involved or which they witness; and
- participating in the investigation of incidents, if necessary.

#### **2. Coordinators are responsible for:**

- ensuring all necessary initial care and support has been provided to staff and Participants when an incident has occurred;
- ensuring the incident is properly reported; and
- ensuring the incident is assessed to determine appropriate action has been taken to prevent a recurrence.

#### **3. Unit Head is responsible for:**

- ensuring all reportable incidents comply with NDIS Quality and Safeguards Commission Reportable Incident Guidelines and Requirements
- ensuring coordinators are familiar with these policies and procedures; and
- ensuring any lessons learned from incident management are shared with other staff members.

#### **4. Chief Operations Manager (COM) is responsible for:**

- ensuring all other units are made aware of any new or amended policies relevant to their area of responsibility which relate to or impact on incident management procedures; and



- ensuring information and/or training is provided to assist CASS staff members to implement these amended or new policies.

### **Procedures:**

#### 1. Immediate Response

Staff need to understand what an incident is, and when an incident has occurred. They need to be confident that they can report an incident without fear of retribution, that an incident will be responded to and that they will receive feedback, to the extent possible, on the outcome of an incident. CASS needs to foster a culture of incident reporting.

When an incident is identified it needs to be appropriately managed. This will mean securing the safety of everyone involved in an incident; taking any necessary action to avoid an immediate recurrence of the incident; and/or preventing any further damage arising from the incident.

Depending on the nature of the particular incident this may require:

- obtaining emergency assistance from police, fire or ambulance services;
- ensuring first aid or other medical services are provided;

#### 2. Notification and Reports

A support worker on duty who is involved in, or who witnesses an incident must report the incident as soon as practicable, verbally, in the first instance, to the coordinator. The initial report should be submitted to coordinator within 24 hours if the incident.

The Coordinator's role

- arranging the injured Participant to be assessed by a medical profession and arrange follow-ups if necessary.
- informing Behavior Support Practitioner if the incident is caused by another Participant's behavior.
- submitting an incident report within two weeks to report the progress of the injured person's condition and follow-ups.
- informing appropriate person responsible/ guardian / parents / carer.

Unit Head's role

- evacuating staff or Participants or staff from a facility or workplace;
- discussing with the relevant personnel and service providers to remove an individual participant or staff from a facility or workplace;
- suspending work on a project or at a workplace; and



## CASS Group- Disability Services

- where required, ensuring the site of the incident is not disturbed pending attendance and/or investigation by external authorities.
- Serious or critical incidents shall follow NDIS Quality and Safeguards Commission Reportable Incident Guidelines and Requirements.

<b>Documents related to this policy</b>	
Related Policies	WHS Policy
Forms, record keeping or other organisational documents	<ul style="list-style-type: none"> <li>• Incident Report</li> </ul>

<b>Reviewing and approving this policy</b>		
<b>Frequency</b>	<b>Person responsible</b>	<b>Approval</b>
<b>3 years</b>	<b>Unit Head</b>	<b>HAS &amp; DS Committee</b>

<b>Policy review and version tracking</b>			
<b>Review</b>	<b>Date Approved</b>	<b>Approved by</b>	<b>Next Review due</b>
Version 1	<b>1 June 2014</b>	<b>HAS &amp; DS Committee</b>	<b>31 May 2017</b>
Version 2	<b>29 May 2017</b>	<b>HAS &amp; DS Committee</b>	<b>28 May 2020</b>
Version 3	<b>28 February 2019</b>	<b>HAS &amp; DS Committee</b>	<b>28 February 2022</b>
Version 4	<b>21 February 2022</b>	<b>HAS &amp; DS Committee</b>	<b>21 February 2025</b>