



# Incident Management Policy

Document number: *PO2021-039- Version 2*

## Approval

Policy owner	Executive Director, Corporate Services		
Approved by	Executive Leadership Team State Council		
Date approved	ELT: 27.01.2022	Review date	21.01.2025
Version 2			

## Purpose

1. The Society of St Vincent de Paul (NSW) and the company titled the St Vincent de Paul Society NSW (together the Society) have developed this policy to establish a consistent framework for the management and reporting of incidents throughout the Society.
2. The Society recognises that incidents that affect the people we assist and work with, or impact Society sites, systems, or business continuity, will occur and must be appropriately managed.
3. The purpose of this policy is to support Society Personnel to:
  - identify, respond to, and manage incidents according to the approved procedure
  - report and record incidents appropriately.
4. This policy and the appended procedures specify the processes for classifying, reporting, reviewing, investigating, and managing incidents.

## Scope

5. This policy applies to incidents or any unplanned event, act, omission, or threat with the outcome of harm or potential for injury, damage, or loss to the people we assist, the Society or members of the public (including **near miss** events) which:
  - are connected with the Society's activities, programs, or services, and
  - impact or involve the people we assist, Society Personnel and members of the public, and
  - occur at:
    - Society premises, offices, retail stores or services
    - off-site work locations such as home visitation, community visitation, a public place, remote working or attendance at a Society function or event
  - are related to a person we assist and are disclosed to Society Personnel despite not occurring at a Society premises, service, or programs.
6. This policy applies to all Society Personnel including members, volunteers, employees, and contractors.
7. This policy does not apply to whistleblower reports or complaints, refer to the Whistleblower Policy and the Feedback and Complaints Policy for further information. Reports under the Whistleblower Policy ensure that an eligible whistleblower's anonymity is protected, which may not be possible under other reporting procedures.
8. This policy does not replace or alter the Society's obligations to report incidents as required under funding agreements or by external regulatory authorities.
9. Incidents must be managed according to the Incident Management Policy and procedures. Management of an incident may also require reference to additional policy and procedures, depending on the type of incident, as outlined in Table 1 below.

**Table 1: Additional policies and procedures to be applied**

Type of Incident	Additional policy and procedures to be applied
Child protection	Safeguarding Children and Young People Policy
Incidents concerning an employee's conduct including bullying, harassment, and discrimination	Counselling and Disciplinary Policy Respectful Workplace Policy
Unauthorised use of restrictive practice or application of restrictive practice not according to Behaviour Support Plan	Restrictive Practices Policy Behaviour Support Policy
Incidents concerning an employee's conduct	Counselling and Disciplinary Policy
Matters relating to fraud or dishonest behaviour by members, volunteers, or employees	Managing Fraud and Dishonesty Policy
Information and Communication incidents	ICT Incident Response Plan
Incidents that may impact on the Society's reputation	Media Policy and Procedures
Injury or incident impacting people or a SafeWork NSW Notifiable Incident	Work Health and Safety Policy
Breach of privacy	Privacy Policy
Health incident within Health Care Services.	Open Disclosure Policy

## Related policies and procedures

10. Related policies and procedures include:

- *Business Continuity Plan*
- *Code of Conduct*
- *Counselling and Disciplinary Policy*
- *Client Centred Service Delivery Policy*
- *Data Breach Response Plan*
- *Feedback and Complaints Policy*
- *Managing Fraud and Dishonest Behaviour Policy*
- *Media Policy and Procedure Policy*
- *Privacy Policy*
- *Possession of Substances on Premises Policy*
- *Records Management Policy*
- *Restricted Practices Policy*
- *Respectful Workplace Policy*
- *Safeguarding Children and Young People Policy*
- *Social Media Policy*
- *Trauma-Informed Care Policy*
- *Work Health and Safety Policy*
- *Whistleblower Policy.*

## Policy principles

11. The Society has a duty of care and responsibility to the people we assist, Society Personnel, members of the public, and regulatory and funding bodies to ensure that all incidents are managed promptly and appropriately.
12. The Society will manage all incidents in a non-discriminatory, culturally appropriate, inclusive, and confidential manner.
13. The Society will take a person-centred and trauma-informed approach to incident response, management, and investigations.
14. The Society will take reasonable steps to ensure that all Society Personnel, the people we assist and, as relevant, their family members, carers or advocates have access to information including:
  - how to report an incident, and
  - how the Society's Incident Management system operates in an appropriate mode and format of communication.
15. The Society is committed to a culture of safety and continuous improvement. The Society will learn from incidents and identify opportunities to improve its operations and drive excellence in its activities, programs, and service provision.
16. The Society is committed to creating a safe culture of trust, learning, and shared accountability. The Society will:
  - comply with all relevant legislation, regulation, standards, and codes of practice
  - respond to incidents promptly and manage incidents collaboratively
  - take a 'no blame' approach which encourages reporting of hazards, incidents, accidents, and near-misses
  - foster an openness about failures, systemic issues, and corrective action between directorates to support learning and continuous improvement
  - ensure procedural fairness when managing incidents and investigations
  - effectively communicate with the people we assist, Society Personnel or other relevant parties involved in an incident
  - ensure Society Personnel receive appropriate training, information, and supervision to implement the Society's Incident Management Policy and Procedures.
17. The Society requires all Society Personnel to comply with relevant external reporting, regulatory requirements, or notification requirements these are further outlined in the procedures at Appendix 2.
18. Vinnies Services employees and volunteers who work in case management or directly with the people we assist will be required to undertake trauma-informed practice training to assist their incident management response.

Table 2: Incident classification and consequence rating

The table below provides an overview of the Society’s Incident Classification and Consequence rating for incident management. Refer to the procedures Attachment B for further information.

	Consequence rating			
Incident type	MINOR	MODERATE	MAJOR	CRITICAL
<b>People-safety and wellbeing</b>	Near miss to minor injury or illness. May require first aid or treatment by a doctor. Absence from work 1-5 shifts. Minimal increase in level/ length of support.	Moderate injury to one or more persons, immediate hospital treatment, absence from work or moderate increase in level/ length of support.	Major injury resulting in partial permanent disability, a significant impact on the level/length of support.	Single fatality or permanent loss injury, including repeat or multiple fatalities.
<b>Operations</b>	No impact to minor impact which is short-term on one or fewer services, programs, or operations.	Minor long-term or medium short-term impact on one or fewer services, programs, or operations.	Medium impact on one or more services or programs.	A critical incident, significant damage to buildings or disruptions to schedule services over an extended period.
<b>Reputation</b>	Localised complaint or isolated adverse local media or complaint. No impact to low impact on community trust, fundraising or volunteers.	Substantiated complaints, moderate adverse local media coverage. Moderate impact on the reputation.	Significant adverse media. High impact on the reputation.	Extended national adverse media coverage and significant damage to reputation.
<b>Financial loss</b>	Within 12 months net loss of less than \$250K, up to 5% reduction of revenue or overspend of directorate budget.	Within 12 months net loss of \$250K-\$1m or 10% reduction of revenue or overspend of directorate budget.	Within 12 months net loss of \$1m to \$5m or 15% reduction of revenue or overspend of directorate budget. Confirmed fraudulent activity.	Within 12 months net loss of over \$5m or 20% reduction of revenue or overspend of directorate budget. Major fraud or identity theft against the Society or people we assist.
<b>Compliance and legal</b>	No fines or minor infringements. Notifiable event requiring no review, minor review, or remediation by Society, minor or no penalties. No funder or regulatory compliance action.	Event requiring review or remediation by Society, moderate or minor penalties.	Potential loss of accreditation or licence, investigation with adverse findings.	Loss of operating licence or accreditation.

## Roles and responsibilities

Role	Responsibilities
CEO	<ul style="list-style-type: none"> <li>• Encourage a culture that is open to reporting incidents.</li> <li>• Manage critical incidents and where appropriate establish a Critical Incident Response team.</li> <li>• Act as Head of Agency for Reportable Conduct allegations as required by the <i>Children’s Guardian Act 2019 (NSW)</i>.</li> <li>• Act as the Society’s Principal Officer for the Society’s Voluntary Out of Home Care service as required by the Child Protection (Working with Children) Regulation, 2013. The CEO may delegate functions of Principal Officer as approved by the Office of the Children’s Guardian.</li> <li>• Review and close critical incidents or delegate this responsibility to an Executive Director.</li> </ul>
Executive Directors and Chief Financial Officer	<ul style="list-style-type: none"> <li>• Ensure that this policy is embedded within their directorate.</li> <li>• Manage major incidents and oversee incident management within their directorate.</li> <li>• Oversee the management of incidents within the Society’s Integrated Risk Management System within their area of responsibility.</li> <li>• Provide feedback or direction on corrective action, incident management or preventative actions.</li> <li>• Ensure that internal and external reporting, regulatory and funding reporting requirements are met for their area of responsibility.</li> <li>• Approve an enquiry, investigations, incident review, assign an investigator and access to information related to incidents, an investigation or person/s within their directorate.</li> <li>• Review and close major incidents.</li> </ul>
Executive Director, Vinnies Services	<ul style="list-style-type: none"> <li>• Oversee Reportable Incidents for the Society’s NDIS services. Act as the Authorised Reportable Incidents Approver to the NDIS Quality and Safeguards Commission, Aged Care and Quality Commission, Australian Health Practitioner Regulation Agency (AHPRA).</li> <li>• Provide quarterly reports to the Executive Leadership Team and Service, Quality and Safety Committee regarding reportable incidents, critical incidents, and trends within the Vinnies Services directorate.</li> </ul>
Executive Director, Corporate Services	<ul style="list-style-type: none"> <li>• Report to the Society’s Board, State Council and Governance, Risk and Nominations Committee regarding risk and incidents.</li> <li>• Approve engagement of an external investigator.</li> </ul>
Executive Director Commercial Enterprise, Fundraising and Communications	<ul style="list-style-type: none"> <li>• Oversee incidents related to adverse media or reputational damage.</li> <li>• Consult with CEO and where required with Legal Counsel on media releases concerning incidents.</li> </ul>
People and Culture team	<ul style="list-style-type: none"> <li>• Provide advice and support to managers in resolving incidents related to Society Personnel conduct or incidents impacting Society Personnel.</li> </ul>

Role	Responsibilities
Governance, Risk and Nominations Committee	<ul style="list-style-type: none"> <li>● Oversee Society-wide risks and incidents and provide recommendations to the Board and relevant directorate.</li> </ul>
Directors and Regional Directors	<ul style="list-style-type: none"> <li>● Manage moderate incidents, oversee incidents within their services or area and ensure incidents are escalated as required.</li> <li>● Ensure Society Personnel receive incident management training and support to implement this policy.</li> <li>● Oversee the management of incidents within the Society's Integrated Risk Management System within their area of responsibility.</li> <li>● Review incident trends for systemic issues and implement recommendations from Executive Director, Governance, Risk and Nominations Committee, Work Health and Safety Partner or WHS Management Committee.</li> <li>● Ensure that internal and external reporting, regulatory and funding reporting requirements are met for their area of responsibility.</li> <li>● Recommend to the appropriate Executive Director that an investigation be conducted, review an incident, suggest a person to be investigator and access to information related to incidents, an investigation or person/s within their directorate.</li> <li>● Approve access to information related to an incident or required for an investigation within their area of responsibility.</li> <li>● Oversee Reportable Incidents for the Society's NDIS services.</li> <li>● Review and close moderate incidents.</li> </ul>
Directors, Vinnies Services	<ul style="list-style-type: none"> <li>● Act as the Authorised Reportable Incidents Approver to the NDIS Quality and Safeguards Commission, Aged Care and Quality Commission, Australian Health Practitioner Regulation Agency (AHPRA) for their area of responsibility.</li> </ul>
Director, Clinical Governance and Quality (Vinnies Services)	<ul style="list-style-type: none"> <li>● Provide guidance and support to Vinnies Services in the management and review of clinical or health related incidents as required.</li> <li>● As required, conduct reviews for Vinnies Services where incidents involve the people we assist, where systemic issues or compliance breaches are identified or for incidents that may have had a significant impact on the health or wellbeing on Personnel or people we assist.</li> </ul>
Senior Managers, Vinnies Services (as delegated)	<ul style="list-style-type: none"> <li>● As the Authorised Reportable Incident Notifier, ensure that Reportable Incidents and reporting responsibilities required under the NDIS Quality and Safeguards Commission, Aged Care and Quality Commission, Australian Health Practitioner Regulation Agency (AHPRA) or Department of Communities and Justice are fulfilled for their area of responsibility.</li> </ul>
Team Leaders, Managers, Regional, Area, Program Manager	<ul style="list-style-type: none"> <li>● Ensure the reporting requirements under the Incident Management Policy are implemented within their activities, programs, or services.</li> <li>● Ensure Society Personnel receive incident management training and support to implement the policy.</li> <li>● Ensure incidents are appropriately managed in their services or programs, maintain local Incident Register, and escalate incidents as required.</li> <li>● Ensure support and supervision for persons impacted by or witness to an incident.</li> </ul>

Role	Responsibilities
	<ul style="list-style-type: none"> <li>• Provide feedback to Society Personnel and people we assist on the incident investigation, resolution of incidents and resulting improvement or actions.</li> <li>• In consultation with the Director ensure out-of-hours reporting arrangements are established for the activity, program, or service.</li> <li>• Managers, Regional, Area and Program Manager to review and close minor incidents.</li> </ul>
Society members, volunteers, and employees	<ul style="list-style-type: none"> <li>• Understand this policy and seek advice or support on how to implement.</li> <li>• Participate in incident management training relevant to their role.</li> <li>• Respond to incidents in accordance with this and other relevant policies.</li> <li>• Report all incidents to the Conference President, Team Leader, Manager or Supervisor.</li> </ul>
WHS Management Committees and Service, Quality and Safety Committee	<ul style="list-style-type: none"> <li>• Oversee trends, performance and decision-making regarding incident management, systemic issues and identify opportunities for continuous improvement.</li> </ul>
Safety and Emergency Management team	<ul style="list-style-type: none"> <li>• Oversee and provide direction in WHS incident management across the Society.</li> <li>• Support and guide WHS Regional Partners.</li> <li>• Implement strategies to improve the safety, health, and wellbeing of the Society workforce.</li> <li>• Provide specialist advice in relation to risk identification and management strategies and WHS issues.</li> <li>• Report to the Board, People and Culture Committee and Governance, Risk and Nominations Committee regarding Work Health and Safety trends and safety performance.</li> <li>• Provide quarterly reports to Executive Directors and Directors regarding incidents, trends, and safety performance.</li> </ul>
Safety and Wellbeing Partners	<ul style="list-style-type: none"> <li>• Provide informed, specialist and timely support to team leaders and managers as required for incident reporting, response, and investigation.</li> <li>• Encourage continuous improvement in safety culture and develop the required levels of safety knowledge, skills, and capability.</li> </ul>
Safeguarding team	<ul style="list-style-type: none"> <li>• Provide oversight and direction on all Safeguarding incidents including children, young people reports, statutory responses, investigations, and child protection matters.</li> <li>• Maintain Safeguarding Register for Safeguarding Notification Forms and relevant documentation within the Society's Integrated Risk Management System.</li> <li>• Oversee Safeguarding reporting, identify systemic issues and opportunities for continuous improvement.</li> <li>• Oversee incidents involving allegations of Reportable Conduct (as defined by the <i>Children's Guardian Act 2019</i>).</li> <li>• Act as liaison with Office of the Children's Guardian.</li> <li>• Report on Safeguarding incidents to the Chief Executive Officer</li> </ul>



Role	Responsibilities
	<ul style="list-style-type: none"> <li>Conducting investigations and incident reviews on incidents involving children and young people.</li> </ul>

## Review

19. The Executive Director, Corporate Services, will review this policy and the effectiveness of its implementation every three years after coming into operation or on a needs basis as required to align with legislative or practice changes.

## Further assistance

20. Society Personnel must speak with their Manager regarding any questions about the implementation of this policy. They may also contact the Executive Director, Corporate Services, to provide feedback on this policy.

## References

21. List all relevant legislation, regulations or other instruments implemented by this policy.
- Aged Care Quality Standards and *Aged Care Act 1997* (Cth)
  - Children and Young Persons (Care and Protection) Act 1998* (NSW)
  - Children and Young Persons (Care and Protection) Regulation 2012* (NSW)
  - National Disability Insurance Scheme (NDIS) Act 2013 and associated Rules 2018*
  - National Disability Insurance Scheme (NDIS) Incident Management Guidelines 2019*
  - Work Health and Safety Act 2011* (NSW)
  - Work Health and Safety Regulation 2017* (NSW)
  - Workers Compensation Act 1987 No 70* (NSW)
  - State Insurance and Care Governance Act 2015* (NSW)
  - Work Health and Safety Codes of Practice

## Approval and amendment history

Version	Approval authority	Date	Amendment summary
PO2021-039	Executive Leadership Team State Council	ELT: 27.01.2021 State Council: 17.02.2021	Complete redraft no longer limited to critical incidents. Consolidation of various incident procedures into the one policy and procedure document.
PO2021-039 Version 2	Executive Leadership Team	ELT 27.01.2022	Minor updates to align with introduction of the Integrated Risk Management System. Inclusion of Enquiry section. Inclusion of responsibilities for Director of Clinical Governance.

## Appendix 1: Definitions

Relevant definitions include:

Term	Definition
<b>Authorised Reportable Incidents Approver</b>	<p>NDIS Commission:</p> <p><i>'Authorised Reportable Incidents Approver' is the person you want to have the authority to review and be responsible for submission to the NDIS Commission. This could be the person specified in your incident management system who is responsible for reporting incidents to the NDIS Commission. The authorised 'Approver' will have the ability to submit new Reportable Incidents and view previous Reportable Incidents submitted by their organisation.</i></p> <p>Within the Society, the Executive Director, Vinnies Services and Directors of Vinnies Services are the Society's Authorised Reportable Incident Approvers.</p>
<b>Authorised Reportable Incidents Notifier</b>	<p>NDIS Commission:</p> <p><i>'Authorised Reportable Incidents Notifier' is a supporting team member who can assist the 'Authorised Reportable Incidents Approver' to collate and report the required information. The authorised 'Notifier' will have the ability to create new Reportable Incident notifications to be saved as a draft for review and submission by the authorised 'Approver'. The authorised 'Notifier' will need to inform the authorised 'Approver' that the Incident is awaiting their review and submission. The 'Notifier' can also view past Reportable Incidents they have created through the page.</i></p> <p>Within the Society, Vinnies Services, Senior Managers (as delegated) are the Society's Authorised Reportable Incidents Notifiers.</p>
<b>Approved Manager of an Assisted Boarding House</b>	<p>A person appointed by a boarding house operator to act as the manager of the Assisted Boarding House under the terms of the Licence if the operator is a corporation or an individual who is not acting as the manager of the Assisted Boarding House.</p> <p>The Approved Manager must be authorised by both the operator and Department of Communities and Justice to act as the manager of the Assisted Boarding House.</p>
<b>Child Protection</b>	<p>Responsibilities and activities undertaken to prevent or stop children from being abused or maltreated.</p>
<b>Complaint</b>	<p>Expression of dissatisfaction made to or about the Society relating to its services or service quality, decisions, policies, procedures, charges or fees, Personnel, or the complaint handling process itself, where a response or resolution is explicitly or implicitly expected or legally required.</p>
<b>Corrective Actions</b>	<p>Improvements to services, processes, or programs to eliminate the causes and impacts of incidents.</p>
<b>Critical Incident</b>	<p>An unexpected circumstance, event or alleged event that may cause a traumatic reaction to individuals, or severely disrupt the services or operations of the Society or pose a serious threat to the Society's reputation.</p>
<b>Duty of care</b>	<p>A duty of care is the legal responsibility of a person or organisation to take all reasonable measures necessary to prevent activities that could result in harm to people or their property.</p>
<b>Eligible data breach</b>	<p>Under section 26WE(2) of the Privacy Amendment Act 2017, an eligible data breach is when:</p> <ol style="list-style-type: none"> <li>there is unauthorised access to or unauthorised disclosure of personal information or a loss of personal information that an entity holds; and</li> </ol>

Term	Definition
	<p>b) this is likely to result in serious harm to one or more individuals; and</p> <p>c) the entity has been unable to prevent the likely risk of serious harm with remedial action.</p>
<b>Fraud</b>	Causing actual or potential financial loss to any person, or the Society by using deception at the time, before or immediately following the activity. This includes the deliberate falsification, concealment, destruction, or use of falsified documentation used or intended for use for a normal purpose or the improper use of information or position for personal benefit. It also includes fraudulent financial reporting.
<b>Hazard</b>	A hazard is any source of potential damage, harm, adverse health effects, damage to people, the environment or property.
<b>Harm</b>	Harm is the resulting impact of an act or event. It is the loss of or damage to a person's physical or psychological wellbeing, damage to property or the environment.
<b>Incident</b>	An unplanned event, act, omission, or threat with the outcome of or potential for, injury, harm, damage or loss to people, property, assets, or the environment.
<b>Investigator</b>	An employee of the Society who has received formal investigation training, an external party engaged by the Society, or an external investigator assigned by an external regulatory body, who is tasked with undertaking an investigation in relation to this policy.
<b>Incident investigation</b>	<p>The management process by which underlying causes to an incident are identified.</p> <p>An internal or external inquiry ascertaining facts through a detailed and careful examination required where an allegation of unacceptable behaviour has been made that was not witnessed directly by the responsible Manager.</p>
<b>Near-miss</b>	An incident where no personal injury was sustained and no property was damaged but where given a slight shift in time, or position or appropriate actions were not taken, damage, loss or injury could have easily occurred.
<b>NSW Ombudsman</b>	The NSW Ombudsman is an independent integrity agency that holds NSW government agencies and certain non-government organisations accountable to the people of NSW.
<b>Notifiable incident</b>	<p>A 'notifiable incident' under the <u>work health and safety legislation</u> relates to:</p> <ul style="list-style-type: none"> <li>• the death of a person</li> <li>• a serious injury or illness of a person</li> <li>• a potentially dangerous incident.</li> </ul>
<b>NDIS Reportable Incidents</b>	<p>Reportable incidents are serious incidents or alleged incidents which result in harm to an NDIS participant and occur in connection with NDIS supports and services. Specific types of reportable incidents include:</p> <ul style="list-style-type: none"> <li>• The death of a person with a disability.</li> <li>• Serious injury of a person with a disability.</li> <li>• Abuse or neglect of a person with a disability.</li> <li>• Unlawful sexual or physical contact with, or assault of, a person with a disability (excluding, in the case of unlawful physical assault, contact with, and impact on, the person that is negligible).</li> <li>• Sexual misconduct committed against, or in the presence of, a person with a disability, including grooming of the person for sexual activity.</li> <li>• The use of a restrictive practice in relation to a person with a disability, other than where the use is in accordance with an authorisation (however described) of a State or Territory in relation to the person or a behaviour support plan for the person.</li> </ul>

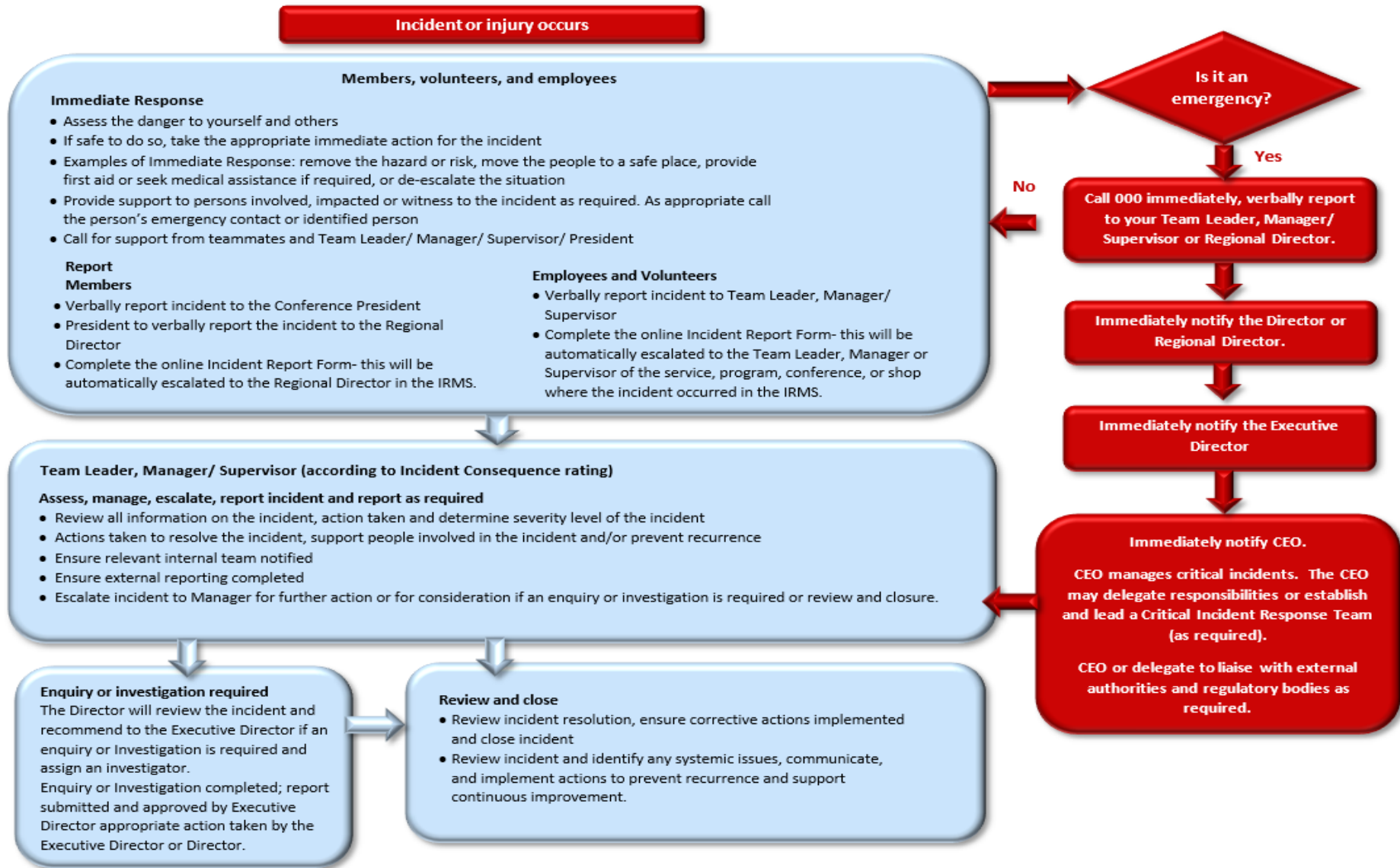
<b>Term</b>	<b>Definition</b>
<b>People we assist</b>	Those people to whom the Society provides support through our services and programs who may also be referred to as clients, participants or residents depending on the nature of the service where the Society assists.
<b>Person-Centred Approach</b>	The Person-Centred Approach places the people we serve (including children and young people) at the centre of all policy, program/service planning, delivery, and decision making. It is respectful of and responsive to the preferences, needs, and values of the individual. It promotes, upholds, and respects individual rights to freedom of expression, self-determination, and decision-making about their lives.
<b>Reportable conduct</b>	Defined and as at 1 March 2020, the <i>Children’s Guardian Act 2019</i> , as: <ul style="list-style-type: none"> <li>• any sexual offence, or sexual misconduct, committed against, with or in the presence of a child (including a child pornography offence); or</li> <li>• any assault, ill-treatment, or neglect of a child; or</li> <li>• any behaviour that causes psychological harm to a child, with or without the consent of the child.</li> </ul>
<b>Restrictive practices</b>	Any practice or intervention that has the effect of restricting the rights or freedom of movement of a person.
<b>Root Cause Analysis (RCA)</b>	A method used to investigate and analyse incidents to identify the root causes and factors that contributed to the incident.
<b>Serious harm</b>	Serious harm is not minor or trivial. It involves a substantial physical, emotional, or psychological impact on the impacted person such as a serious injury, or serious emotional or psychological distress.  Definition from the NDIS Incident Management Guidelines.
<b>SCIS</b>	SCIS is the Society’s Client Information System.
<b>Society Personnel</b>	Any person (or group of people) engaged by the Society to assist in its works. This includes members, volunteers, employees, contractors, consultants, office holders and Directors. The Society considers all Society Personnel as workers of the Society.
<b>Trauma-informed care</b>	A framework for human service delivery recognises the prevalence of trauma in populations accessing community services. It acknowledges that respect, choice, and a sense of safety can contribute to trauma recovery. Trauma-informed practise also recognises the risk of vicarious trauma for staff and incorporates an understanding that staff wellbeing is key to providing quality care.

## Appendix 2

### Incident Management Procedures

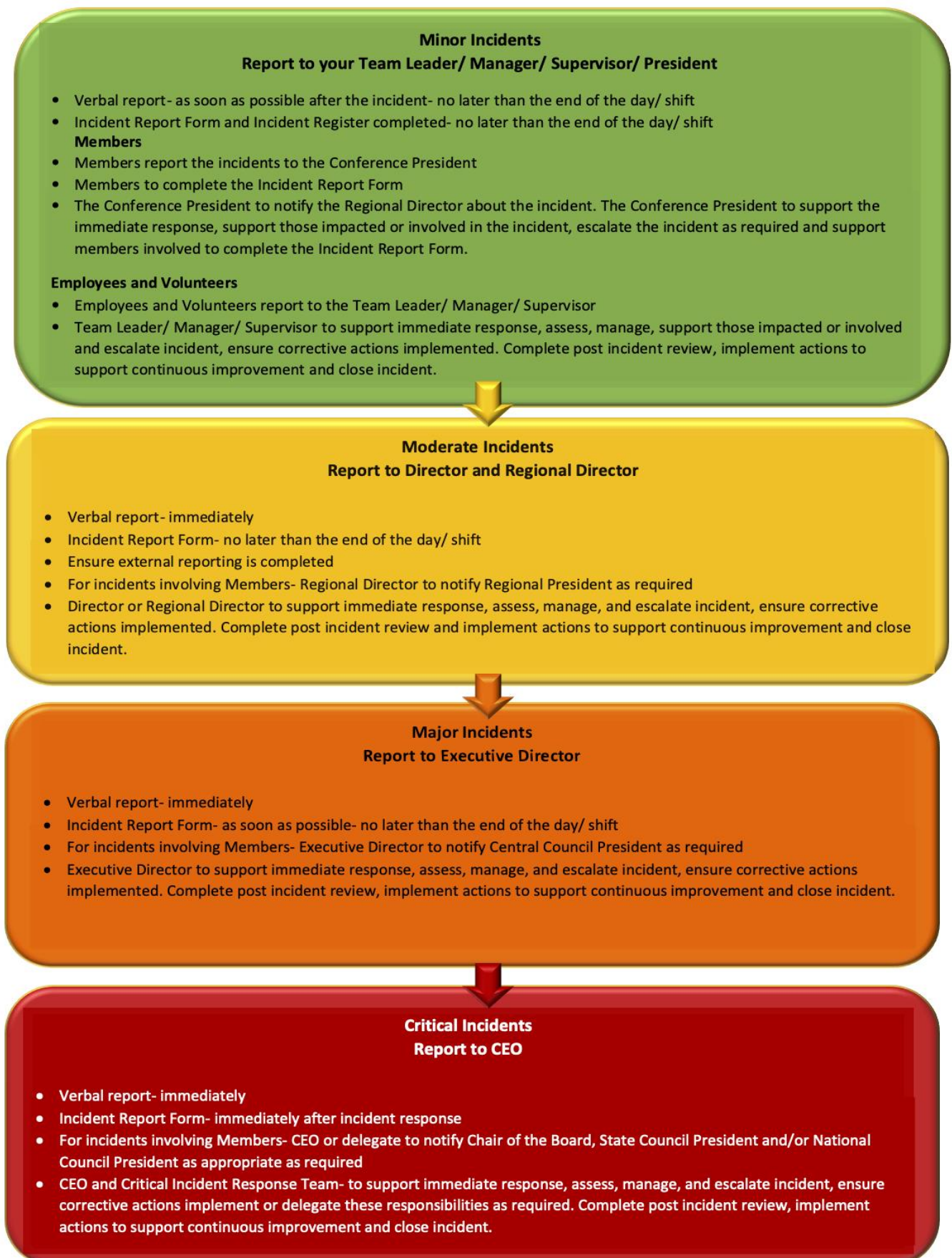
1. The purpose of these procedures is to provide a standard and consistent approach to incident management for Society Personnel.
2. These procedures set out responses to incidents that impact: people's safety and wellbeing including the people we assist, Society Personnel and members of the public; our operations; our compliance and governance processes; and our reputation.
3. Separate procedures are in place for incident involving media, please refer to National Media Policy on Disasters, National Social media Policy and Social Media Handbook, NSW Media Policy and Procedures 2018 and NSW Social Media Policy 2018.
4. In addition to these procedures, some incidents require external regulatory or statutory reporting:
  - Aged Care services
  - Assisting Boarding Houses
  - Health Care services
  - Child Protection
  - Disability services
  - Health services
  - Homelessness and Housing servicesRefer to *Attachment C: External Reporting overview* for further information.
5. Team Leader, Managers, Supervisors and Conference Presidents must encourage their teams to report incidents, including near misses, as soon as possible to ensure that incidents can be managed in an appropriate and timely manner; causal factors of incidents can be analysed; and solutions and improvements can be implemented.
6. Incidents may be identified and reported:
  - in a team discussion, review, complaint, audit, or external report
  - by Society Personnel, the people we assist, or members of the public involved in, impacted or witness to the incident
  - by a member of the public who was told about the incident from someone directly involved or impacted.
7. Society Personnel must report all incidents and near-miss events connected with the Society's activities, programs, and services which:
  - impact or involve the people we assist, Society Personnel or members of the public, and
  - occur on:
    - Society premises, offices, retail stores or services
    - off-site work locations such as home visitation, community visitation, a public place, remote working or attendance at a Society function or event or,
  - are related to a person we assist and are disclosed to Society Personnel despite not occurring at a Society premises, service, or program.

**Flow Chart 1: Incident Response Process**

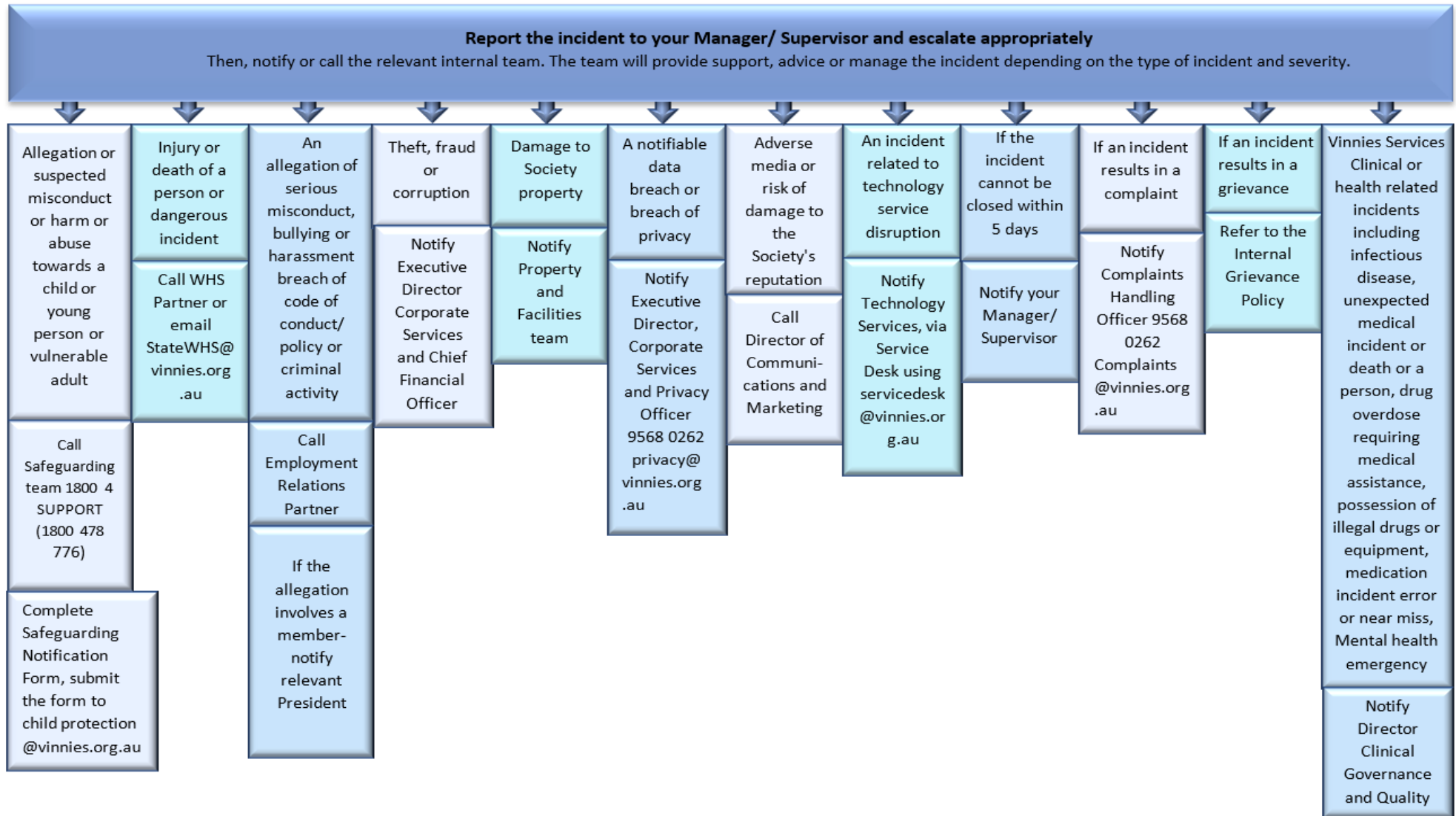


## Flow Chart 2: Incident Reporting and Escalation

### Which manager needs to know and who needs to manage the incident



### Flow Chart 3: Internal Notifications





## Reporting the Incident

8. Society Personnel must report incidents and near-miss events to the Manager, Supervisor or Conference President using the Incident Report Form.
9. People we assist should be encouraged to report all incidents impacting themselves or other people we assist to a Society employee, who will report the incident.
10. The Manager or Supervisor, Team Leader, Regional, Area, Program Manager, or Central Council President in consultation with the Director or Regional Director, must ensure out-of-hours reporting arrangements are established for the service, activity, or program.
11. The Conference President must:
  - ensure the appropriate immediate actions have been taken
  - support people impacted by or involved in the incident
  - ensure all incidents are reported to the Regional Director
  - support the member/s involved in or reporting the incident to complete the Incident Report Form (Attachment A).
12. Where possible, all Incident Report Forms should be completed on the same day as the incident and no later than the timeframes listed in *Flow Chart 2 Incident Reporting and Escalation*.
13. The Director, Regional Director or Executive Director must ensure the incident is reported to regulatory bodies or authorities where required. *Refer to Attachment C External Reporting Overview for further information.*
14. The Director or Regional Director must ensure the incident is recorded and managed within the Society's Integrated Risk Management System.
15. For Vinnies Services, working with people with disabilities where regular minor verbal abuse or repetitive behavioural incidents are common to the person we assist, a Behaviour Support Plan must be developed. All incidents must be reported daily using the data reporting sheet or daily file notes. One-off or abnormal behavioural incidents must be reported as an incident, using the Incident Report Form.
16. If a child, young person, or vulnerable adult is involved, impacted to or witness to an incident a Safeguarding Notification Form may also be required. Refer to the Safeguarding Children and Young People Policy or contact 18004SUPPORT (1800 478 776) for more information.

## Additional reporting Reportable Incidents for NDIS participants

17. Under the National Disability Insurance Scheme Incident Management and Reportable Incidents Rules 2018, if a Reportable Incident occurs, or is alleged to have occurred, in an NDIS service or services with NDIS participants, the following additional reporting requirements must apply:  
<https://www.ndiscommission.gov.au/providers/incident-management-and-reportable-incidents>.
  - An Immediate Notification must be submitted via the NDIS Quality and Safeguards Commission Portal within 24 hours of key Personnel becoming aware of a reportable incident or allegation. Reports must be made via <https://www.ndiscommission.gov.au/providers/ndis-commission-portal19> .
  - After the initial notification, Society Personnel must follow additional reporting requirements. Refer to <https://www.ndiscommission.gov.au/providers/how-notify> for additional reporting requirements.

18. For Reportable Incidents related to NDIS participants who are children and young people, the Safeguarding Children and Young People policy must be applied (refer to Appendix 5 of this policy, *Responding to Reportable Incidents for NDIS participants*). For Reportable Incidents involving an NDIS participant who are adults, refer to Attachment D- *Responding to Reportable Incidents for NDIS participants*.

## Assess and manage the incident

19. Once the immediate response and reporting have been completed, additional actions may be required within the 24 - 72 hours or beyond to support those involved, resolve, or manage the incident.
20. The Team Leader, Manager or Supervisor of the service, program, conference, shop, or site where the incident occurred or is connected with is the person responsible for managing the incident.
21. The Team Leader, Manager or Supervisor must:
- review the incident and ensure the appropriate immediate response or action/s has been taken
  - ensure all information is recorded in the Incident Report Form and complete required information in the Society's Integrated Risk Management System
  - manage the incident according to the appropriate procedures, applying a person-centred approach, and for incidents involving the people we assist, a trauma-informed approach (*Refer to Flow Chart 3 Internal Notifications*)
  - consult or notify the relevant internal department regarding the incident (*Refer to Flow Chart 3- Internal Notifications*)
  - ensure incidents which result in a complaint or grievance are referred to the correct directorate (*Refer to Flow Chart 3 Internal Notifications*)
  - ensure the persons impacted by the incident and their family, friends, guardians, or advocates receive communication and updates on actions that will be taken to manage the incident and outcomes (the correspondence must be documented)
  - provide the person impacted with relevant support such as information about NSW Health Sexual Assault Services
  - if a crime has been committed against a person, provide information to the person to assist their decision of whether to report to the Police and support the person if they decide to report
  - ensure incidents are escalated to the appropriate level according to the incident consequence rating, refer to Attachment B- Incident Classification and Consequence Rating and Flow Chart 2- Incident Reporting and Escalation
  - liaise with relevant Director or Regional Director to ensure external regulatory and reporting requirements are met
  - escalate incidents to the Manager or Supervisor for incidents that cannot be closed within five working days
  - record the Incident Reference Number on the person's physical or electronic file, either Personnel file, person we assist's file in Microsoft Teams or SCIS record as appropriate.
22. The Manager or Supervisor is responsible for reviewing and closing the incident according to the incident consequence rating (*Refer to Flow Chart 2- Incident Reporting and Escalation*).
23. In some situations, the Executive Director may request the support of an alternate employee within or outside their directorate to manage an incident.
24. The Manager, Safety and Emergency Management and Safety and Wellbeing Partners must ensure reporting is completed to Safe Work NSW if the incident is notifiable and the Society's insurer as required.

25. In the event of a critical incident, *outlined in Flow Chart 1 Incident Response Process*:
- Society Personnel must immediately report the incident to the Team Leader, Manager, Supervisor or Conference President
  - The Team Leader, Manager or Supervisor responsible for managing the incident must immediately escalate the incident report to their manager and the appropriate manager within the Integrated Risk Management System, according to the incident consequence rating. Refer to Flow Chart 2: Incident Reporting and Escalation for more information.
  - Manager, Supervisor or Conference President must report immediately to the Director or Regional Director
  - Director or Regional Director must immediately report to the Executive Director
  - Executive Director must immediately report the incident to the CEO.
26. For critical incidents, the CEO must:
- manage or delegate management of the critical incident
  - establish and lead a Critical Incident Response Team, with Personnel with appropriate expertise according to the nature and context of the incident (as required)
  - delegate responsibilities to Society Personnel on the Critical Incident Response Team to develop and implement an incident management plan
  - notify the State Council President, Board, or National Council regarding the incident, as appropriate
  - communicate or delegate persons to liaise with authorities regarding investigation or reporting requirements
  - review and close critical incident or delegate the responsibility.
27. The Critical Incident Response Team must be established if determined necessary by the CEO and may consist of the following roles:
- Executive Directors or Chief Financial Officer
  - State or Central Council Presidents or Board members
  - Directors
  - Safeguarding team
  - Legal Team
  - Manager, Safety and Emergency Management
  - relevant employees as required.
28. For incidents which involve misconduct, fraud or allegations of abuse or neglect towards the people we assist, the Director or Regional Director must:
- report the incident according to the Safeguarding Children and Young People Policy and Safeguarding Vulnerable Adults Policy (under development)
  - ensure the online Safeguarding Notification Form has been completed
  - consider removal, temporary redeployment, or relocation of the person against whom an allegation has been made while a risk assessment is completed
  - seek advice from their People and Culture Partner and Safeguarding team (if the misconduct incident is related to a child or young person under the age of 18 or a vulnerable adult)
  - manage the allegation according to the relevant procedure (*Refer to Flow Chart 3 Internal Notifications and Table 1-Investigations*).
29. The risk assessment must consider the risk the person involved in the investigation poses to:

- the person who is the alleged victim or person impacted (considering the vulnerability of the person we assist, for example if they are a child, or a young person or person with a disability)
  - other people we assist
  - themselves
  - the organisation
  - the investigation process (considering the risk once an allegation is made, during an investigation and at the end of the investigation).
30. The Executive Director, Director or Regional Director (or their delegate) must enact the local Business Continuity Plan if an incident disrupts business or operations to a Major or Critical level. Refer to the local Business Continuity Plans for further information.
31. Personnel must manage incidents or near-miss events related to the provision of health care, medical treatment, medication-related according to this Incident Management Policy and the Medications Policy. Incidents must be managed, reported, and investigated according to the service's external regulatory standards and funding requirements. *Refer to Attachment C External Reporting overview for further information.*

### Additional support or debrief following an incident

32. The Team Leader, Manager or Supervisor as appropriate, must ensure that support is available for the people involved in or who have witnessed the incident.
33. The Team Leader, Manager or Supervisor should encourage persons involved in or who have witnessed a distressing incident to participate in an internal debrief, pastoral support or counselling as appropriate for their engagement with the Society:
- Society Personnel Employee Assistance Program (EAP) 1800 818 728 or [info@accesseap.com.au](mailto:info@accesseap.com.au)
  - if the incident involves sexual assault or domestic violence, it may be appropriate to contact Rape and Domestic Violence Services Australia phone 1800 RESPECT or 1800 737 732
  - Society Personnel may be provided with an internal debriefing or access to pastoral support as appropriate
  - people we assist or their families, visitors or members of the public may be offered access to external counselling services or pastoral support.
34. Where Society Personnel are repeatedly exposed to significant incidents or critical incidents, the Director or Regional Director in consultation with Safety and Wellbeing Partner must:
- investigate the incident and as required complete a Root Cause Analysis according to the WHS Policy
  - implement mitigation strategies to remove or reduce the hazard
  - identify and provide appropriate support including but not limited to; a WHS assessment, debriefing, external supervision, or EAP assistance.

### Enquiry or investigation

35. The Director with the support of the appropriate internal directorates or team must:
- make a recommendation if an enquiry or investigation is required
  - seek the approval of the appropriate Executive Director for the enquiry or investigation and proposed internal or external investigator

- provide support to the investigation process such as seeking approval from the Director or Executive Director regarding access to existing information including but not limited to, email correspondence, file notes, CCTV footage and interviews with witnesses or persons impacted.

36. The person completing the enquiry or internal investigation must:

- be an employee of the Society
- have completed a Society approved accredited investigation training course
- not have or be perceived to have a conflict of interest or bias regarding the incident or people involved.

## Enquiry

37. An enquiry may be completed as a preliminary step to determine if a full investigation is required. The employee assigned to complete the enquiry must:

- review the current information available in the incident record and action taken to manage the incident
- provide findings and recommendation regarding if an investigation is or is not required, additional corrective actions or closure of the incident.

## Incident investigation

38. An incident must be investigated if:

- it is a critical incident
- it is a major incident
- the facts of the incident are unclear or disputed
- it involves allegation or suspicions of misconduct or criminal behaviour by any person such as unacceptable behavior, assault, abuse or harm of a person, theft, or fraud
- it is an allegation of criminal activity or concerns regarding “reportable conduct” or as directed by the external regulatory body.

39. A qualified external investigator must be appointed:

- if the allegation is serious or involves significant reputational risk for the organisation
- where the incident involves a Central Council President, State Council President, the Chief Executive Officer or an Executive Director or the Chief Financial Officer
- only with the approval of the Executive Director, Corporate Services.

40. If an investigation is conducted into an incident involving a Society member, the Central Council President must be informed before the investigation commences and advised of the investigation outcomes.

41. Where an investigation concerns:

- a Central Council President, the State Council President must be informed
- a State Council President, the National Council President must be informed
- an Executive Director or Chief Financial Officer, the Chief Executive Officer must be informed
- the CEO, the Board Chair must be informed.

42. If the Police investigate an incident or a coronial inquest is required, the Society must await the completion of the investigation before the Society conducts an internal investigation or review. Where an investigation is being conducted by Police or an external authority, notes must be made regarding required action by the Society. If all other required action has been completed to manage the incident, the Manager or Supervisor responsible may review and close the incident.

43. The investigator must determine:

- what the facts are, and are not, in dispute between the parties
- the relevance, reliability, and consistency of the information collected
- the root cause of the Incident and whether the Society’s policies and procedures have been followed, including whether the incident could have been prevented
- how well the incident was managed and resolved
- whether any systemic performance or management issues arise
- 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.

44. The investigator must:

- investigate the incident as per their training, completing a respectful and thorough investigation ensuring procedural fairness for those involved
- seek advice and support from Safety and Wellbeing Partner or People and Culture Partner
- ensure the incident investigation aligns with the relevant Society policy (Table 3: Investigations)
- treat all information regarding the investigation as confidential
- prepare an investigation report which includes the investigator’s name, role, the date the investigation was undertaken, the findings, outcomes, any recommended action, or corrective action to resolve the incident and prevent a recurrence, other persons or bodies that need to be notified
- ensure the final investigation report is submitted to the Executive Director within 25 days from the date an investigator is assigned (if the investigation cannot be finalised within this timeframe, the investigation must be escalated to the Executive Director)
- ensure all NDIS Reportable Incidents are investigated and a final report completed within 60 days of the initial notification to the NDIS. <sup>1</sup> Refer to *Attachment C External Reporting Requirements* for more information.

45. The Safeguarding team is responsible for conducting investigations related to incidents involving children and young people.

46. The internal investigator or if an external investigator has been engaged, the Manager or Supervisor, must ensure the investigation report and related documents are stored securely within the Society’s Integrated Risk Management System and the Investigation reference number added to the individual’s hard copy or electronic personnel file or case management file within SCIS.

**Table 1: Investigations**

<b>Incident Type/ nature of incident</b>	<b>In line with</b>
Incident results in a complaint	Feedback and Complaints policy
Allegation or suspicion of “reportable conduct” against a child or young person by a members, volunteers, or employees	Safeguarding Children and Young Person policy
Work Health and Safety Incident or damage to property	Work Health and Safety policy

<sup>1</sup> NDIS Reportable Incidents. Detailed Guidance for Registered NDIS Providers, June 2019.

Investigation of an employee related to criminal matters or serious misconduct or harassment or bullying, fraud, or corruption	Counselling and Disciplinary policy Respectful Workplace policy Fraud and Dishonest Behaviour policy
Incidents related to the people we assist and external reporting requirements	Relevant external standards or requirements, e.g., NDIS, Aged Care, Health, Child Protection
Breach of privacy	Privacy policy

## Incident Review

47. All incidents must be reviewed prior to closure to ensure all actions and external reporting has been completed. The incident should also be reviewed and if any areas for continuous improvement are identified, these should be noted on the incident report and communicated to the relevant Personnel.
48. If an investigation is completed, the Manager or Supervisor responsible must review the investigation report, outcome, and recommended corrective actions. The Manager or Supervisor must work with the relevant Executive Director, Director, Regional Director, and employees involved to ensure corrective actions are implemented.
49. Incidents that do not require an investigation must be reviewed to identify any corrective or preventative actions required. The goals of the incident review are to:
- determine the cause or root cause of the incident
  - ensure actions are implemented
  - identify and implement mitigation strategies to prevent a recurrence
  - identify any systemic issues or education and awareness opportunities
  - encourage reflection and apply lessons learned to ensure the continuous improvement of our operations and service delivery.
50. The Director of Clinical Governance and Quality (Vinnies Services) may determine that an incident review for Vinnies Services is required if:
- the incident involves a person we assist
  - systemic issues or trends are identified
  - the incident involves a compliance breach
  - the incident may have had significant outcome for the health or wellbeing of Personnel or the people we assist. Refer to the Incident review process (Attachment F).
51. The Safeguarding team is responsible for conducting all incident reviews related to children and young people.
52. Corrective or preventative actions may include:
- training or education of employees, volunteers, or member
  - modification of the environment
  - review of person we assist support needs or discussion with the person we assist
  - development or amendment of a policy or procedure
  - adjustments or changes to service operations
  - improvements to practice
  - disciplinary action or dismissal

- temporary or permanent suspension of service
- reflection and discussions on lessons learnt.

53. The Manager or Supervisor must ensure preventative actions are added to the program or services Risk Register to prevent a recurrence. *Refer to the Risk Framework for further information.*

## Incident closure and record-keeping

54. An incident is closed when all support needs have been met, corrective or preventative actions implemented, and external reporting has been completed. All incidents must be closed within five working days from the date they incident occurred, where possible.
55. Once all actions are complete, the incident must be reviewed and closed by the appropriate Manager, Supervisor, Director or Executive Director based on the consequence rating:
- Managers, Regional, Area, Program Managers or Regional Director, must review and close minor incidents
  - Directors/Regional Directors must review and close moderate incidents
  - Executive Directors must review and close all major incidents
  - Chief Executive Officer must review and close critical incidents or delegate an employee to review and close the incident.
56. Where appropriate the Manager or Supervisor or Society contact should communicate the outcome of the incident review or investigation, findings or cause identified and corrective actions to those impacted by the incident, this may include witnesses, employees or volunteers, the people we assist, or their family or guardians.
57. The Director, Regional Director or Executive Director must ensure that external reporting, regulatory and funding reporting requirements have been met before closing the incident. *Refer to Attachment C External Reporting Requirements.*
58. If a person we assist or member of the public is not satisfied with the way the incident was managed, they have the right to make a complaint to the service, the Society's Complaints Handling Officer, or the services regulatory body. Refer to the Feedback and Complaints Policy for more information.

## Confidentiality

59. All documents and information regarding investigation and incidents will be kept secure and confidential. Incident reports will be securely stored in the Society's Integrated Risk Management System and only accessible by the Society employees responsible for managing or overseeing the incident.
60. The Society may provide details of an incident requiring internal or external reporting requirements or as required by law.
61. The Director, Regional Director or Executive Director must approve access to information related to an incident such as CCTV footage.

## Record keeping

62. All incidents reports, investigation reports and incident registers must be stored within the Society's Integrated Risk Management System and kept for a minimum of seven years.
63. Incident reports related to children and young people must be kept for seven years after the time the child or young person turns 18 years of age. Incident reports involving harm to a child or young person must be kept indefinitely.



64. All documents related to NDIS Reportable Incident allegations against members, volunteers, and employees must be stored in a separate secure folder “Reportable Incidents” within the Incident Reports folder and the Incident Register on Microsoft 365 SharePoint.
65. All documents relating to allegations of reportable conduct against members, volunteers, and employees must be stored in the Safeguarding Register and in the “Reportable Conduct” File in the Safeguarding Folder on Microsoft 365 SharePoint.
66. If the incident is investigated, the Incident Reference number will be recorded on the individuals' electronic or hard copy personnel file, case management file in Microsoft Teams or SCIS record. Information regarding the incident will only be shared on a need-to-know basis or as required by external bodies or authorities in accordance with the Society's Privacy Policy.

## Continuous improvements

67. Minor incidents may be reviewed and analysed as part of aggregate and de-identified data or as a group of incidents within the Incident Registers, rather than analysing each incident separately.
68. Directors and Regional Directors must review the incidents in their area of responsibility every three months to identify and address any systemic issues or trends and preventative actions.
69. The Manager, Team Leader, Regional, Area, Program Manager or Regional Office must engage the relevant directorate or team for support to identify or implementing preventative actions.
70. The Manager, Safety and Emergency Management will provide regular reports regarding the Society’s incident management and safety to the Governance Risk and Nominations Committee, Board or State Council.
71. The WHS Manager must provide the Executive Directors and Directors with a report every three months regarding incident trend analysis and safety performance.
72. For Vinnies Services, the Service Program and Quality Team must work with relevant Directors and Quality Action Groups on advice provided to develop solution and strategies to improve practices across the directorate.
73. The Work Health and Safety Committee will provide direction regarding continuous improvements within the WHS framework and systems.

## Attachments

Attachment A: Incident Report

Attachment B: Incident Classification

Attachment C: External Reporting Overview

Attachment D: Responding to Reportable Incidents for NDIS participants

Attachment E: Vinnies Services Incident Review Process

## Attachment A

1. Incident Reports provide a formal and legal record of events impacting people we assist, employees, volunteers, or members. The incident report should be:
  - accurate, focused on the facts and specific (try not to include opinions in the description of the incident and identify where something is an opinion, if included)
  - objective, fair, and impartial (try to avoid emotion or words that convey a subjective tone)
  - complete, concise, and clear (describe the details in chronological order, complete the sections of the report for the time of the incident, all parties involved and witnesses as fully as possible)
  - able to answer the questions of who, what, where, when, how, and if known, why.



## INCIDENT REPORT

This form is to be completed for all Society incidents, including near-miss incidents.

- If the form is completed manually and additional rows are required for persons directly involved or injured persons, add the details of the additional persons to a new first page and attach to this incident report.
- If more than one person is injured in the incident, complete the Injury details page for each injured person.

Incident Details			
Details of person completing this report			
Full Name	Click or tap here to enter text.	Role:	Click or tap here to enter text.
Date of reporting:		Time:	
Incident details			
Region: Choose an item.		Directorate and Team: Choose an item.	
Service/Program/ Site that the incident occurred		Click here to enter text.	
Specific locations details <i>eg kitchen, storage room etc</i>		Click here to enter text.	
Date of incident:	Click here to enter text.	Time of Incident:	Click here to enter text.
Incident Type- Primary ( <i>Select from the drop-down</i> )		Choose an item.	
Details of the person directly involved in, injured, impacted or witness to the incident			
First name:	Click here to enter text.	Surname:	Click here to enter text.
Phone:	Click here to enter text.	Email:	Click here to enter text.
Gender:	Click here to enter text.	Over the age of 18: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Relationship with the Society: Choose an item.		Involvement in the incident: Choose an item.	
First name:	Click here to enter text.	Surname:	Click here to enter text.
Phone:	Click here to enter text.	Email:	Click here to enter text.
Gender:	Click here to enter text.	Over the age of 18: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Relationship with the Society: Choose an item.		Involvement in the incident: Choose an item.	

Incident Details			
<p>What was happening immediately before the incident?</p> <p><i>(action/ program/ service/ activity, e.g. this incident occurred during a meeting with the person we assist at XXX, the incident occurred when a customer was shopping at Vinnies store at XXX)</i></p>			
<p>Details of the incident</p> <p><i>(describe the incident in detail: who, what, when, where, what did the impacted person tell you? Use their words if possible)</i></p>			
<p>Immediate response</p> <p><i>(what was the immediate response, response to the person's impacted and support provided)</i></p>			
<p>External parties involved <i>(select check box if relevant):</i></p> <p><input type="checkbox"/> NSW Police   <input type="checkbox"/> Ambulance   <input type="checkbox"/> Fire brigade   <input type="checkbox"/> Medical Attention   <input type="checkbox"/> SES   <input type="checkbox"/> Parent/ Guardian/ Family (if 15 and under a guardian must be notified)</p> <p><input type="checkbox"/> First Aid   <input type="checkbox"/> Safe Work   <input type="checkbox"/> Other Click or tap here to enter text. Details (if required) of external notification including date:</p>			
Details of Person/s Directly Involve, Injured, Impacted or Witness to the incident			
First name:	Click here to enter text.	Surname:	Click here to enter text.
Phone:	Click here to enter text.	Email:	Click here to enter text.
Gender:	Click here to enter text.	Date of Birth or Age	Click here to enter text.
Relationship with the Society:	Choose an item.		
Injury Details			
Which side of the body is the injury located?	Choose an item.	Body part injured	Choose an item.
Specify where on the body	Choose an item.	Nature of injury	Choose an item.
Injury Type	Choose an item.	Immediate assistance provided	Choose an item.

Provide details of assistance provided	Click or tap here to enter text.	Name and contact detail of first aid provider (if applicable)	Click or tap here to enter text.
Incident Report Form submitted to:	Click or tap here to enter text.		

## Attachment B Incident Classification

INCIDENT TYPE					
Consequence rating	PEOPLE- SAFETY AND WELLBEING (includes Society Personnel, people we assist, visitors and members of the public involved or in connection with Society activities or events)	OPERATIONS, INCLUDING SERVICE DELIVERY	REPUTATION	FINANCIAL	COMPLIANCE AND LEGAL
<b>Critical</b>	<p><b>Safe Work NSW Notifiable Incident:</b></p> <ul style="list-style-type: none"> <li>the death of a person</li> <li>a serious injury or illness of a person</li> <li>a potentially dangerous incident.</li> </ul> <p><b>People we assist:</b></p> <ul style="list-style-type: none"> <li>death of a person engaging with a service or connected with the delivery of a service including natural causes, suspicious death or suspected suicide, or trend of deaths in the service, program, site, community, or persons home</li> <li>abuse or neglect (or allegation of) of a child/ young person or vulnerable person by Society Personnel, contractors, members of the public or another person we assist</li> <li>serious misconduct towards a person we assist involving a child, young person, or vulnerable person</li> <li>drug use or self-harm resulting in death or permanent disability</li> <li>unexplained absence or a missing person in our care</li> <li>release of a child to an unauthorised person</li> <li>unauthorised use of restrictive practices including Seclusion, Chemical Restraint, Mechanical restraint, Physical Restraint, Environmental Restraint or use not in accordance with a behaviour support plan resulting in serious harm or death</li> <li>the spread of contagious disease</li> </ul>	<p><b>Service or extreme disruption with long term impact on service or operations or damage to Society property &gt;\$500,000</b></p> <p>Loss of ability to operate the business of the Society, due to:</p> <ul style="list-style-type: none"> <li>natural disaster, fire, flood</li> <li>threat - bomb threat, explosion, terrorist event etc.</li> <li>dangerous or disruptive behaviour</li> </ul> <p><b>ICT critical incident:</b></p> <ul style="list-style-type: none"> <li>significant interruption to business operations</li> <li>identity theft</li> <li>notifiable data breach</li> </ul> <p><b>Breach of privacy:</b></p> <p>Privacy Amendment Act 2017 26 WE (2):</p> <ul style="list-style-type: none"> <li>unauthorised access to or unauthorised disclosure of personal information, or a loss</li> </ul>	<p><b>Community concern:</b></p> <p>Neighbourhood or localised incidents as the result of:</p> <ul style="list-style-type: none"> <li>a Society event,</li> <li>client's actions,</li> <li>illegal activities on Society premises,</li> <li>or Society decisions which have the potential for or result in significant community comment objections and adverse media</li> </ul> <p><b>Major adverse media:</b></p> <ul style="list-style-type: none"> <li>often related to another incident, major adverse media has the potential to damage the reputation of the Society significantly</li> <li>significant adverse media can elevate a 'high' or 'moderate' incident to a 'critical incident' status</li> <li>widespread loss of community or donor trust and long-term irreparable damage to brand</li> <li>substantial loss of volunteers or members</li> </ul>	<p>Within 12 months net loss of over \$5 million or 20% reduction of revenue or 20% net cost overspend of directorate budget</p> <p><b>Major fraud or identity theft of Society assets</b></p> <p>Loss of assets due to fraud or theft exceeding \$250,000 of Society assets where the fraud or theft is alleged to be perpetrated by:</p> <ul style="list-style-type: none"> <li>Society Personnel</li> <li>People we assist</li> <li>Third-party</li> </ul> <p><b>Major fraud or theft towards a person we assist:</b></p> <ul style="list-style-type: none"> <li>Identity fraud</li> <li>Theft of personal belongings or money</li> </ul>	<ul style="list-style-type: none"> <li><b>Criminal activity</b> connected to Society activities likely to lead to a conviction and sentencing of 12 months or more</li> <li>Supreme or High court litigation involving a claim over \$750,000 of historical institutional sexual abuse</li> <li>Loss of operating license or accreditation for program or facility</li> <li>Breach resulting in penalties or fines</li> <li>Major regulatory change with high impact on Society</li> <li>Employees/Members/Volunteers with a criminal record for sexual assault given access to vulnerable people</li> </ul>

INCIDENT TYPE					
Consequence rating	PEOPLE- SAFETY AND WELLBEING (includes Society Personnel, people we assist, visitors and members of the public involved or in connection with Society activities or events)	OPERATIONS, INCLUDING SERVICE DELIVERY	REPUTATION	FINANCIAL	COMPLIANCE AND LEGAL
	<ul style="list-style-type: none"> <li>• medication, treatment error or medication refusal resulting in serious harm or death</li> <li>• police investigation- allegation of serious crime by residents of Society accommodation</li> <li>• the death of a person with a disability</li> <li>• serious injury of a person with a disability</li> <li>• abuse or neglect of a person with a disability</li> <li>• unlawful sexual or physical contact with, or assault of, a person with a disability</li> <li>• sexual misconduct, committed against, or in the presence of, a person with a disability, including grooming of the person with a disability for sexual activity</li> </ul> <p><b>Society Personnel:</b></p> <ul style="list-style-type: none"> <li>• death of any Society Personnel, visitors, or members of the public while undertaking/ engaged in Society activities</li> <li>• the suicide of any Society Personnel working directly with the people we assist (service staff and health staff) due to the high-risk nature of the work</li> <li>• physical violence or verbal threats, harassment, or assault from the people we assist</li> </ul> <p><b>Emotional or psychological trauma:</b></p> <ul style="list-style-type: none"> <li>• As a result of involvement in, victim to or witness to a traumatic event, threat, physical invasion, life threatening fire</li> </ul> <p><b>Major damage to property</b></p>	<p>of personal information that an entity holds; and</p> <ul style="list-style-type: none"> <li>• this is likely to result in <b>serious harm</b> to one or more individuals, or the Society is unable to prevent the risk with remedial action.</li> </ul> <p><b>Serious or non-reversible environmental damage or impact</b></p>	<p>caused by an incident or decision made</p> <ul style="list-style-type: none"> <li>• Royal Commission or Ministerial inquiry</li> </ul>		

INCIDENT TYPE					
Consequence rating	PEOPLE- SAFETY AND WELLBEING (includes Society Personnel, people we assist, visitors and members of the public involved or in connection with Society activities or events)	OPERATIONS, INCLUDING SERVICE DELIVERY	REPUTATION	FINANCIAL	COMPLIANCE AND LEGAL
Major	<p><b>People we assist:</b></p> <ul style="list-style-type: none"> <li>• major injury caused by an accident or incident resulting in permanent disability or permanent loss of function</li> <li>• significant impact on the level or length of care/ support required</li> <li>• actual, suspected or threatened abuse, neglect or serious misconduct from Personnel or another person we assist in connection with the delivery of the Society's services, programs, or activities</li> <li>• drug use or self-harm resulting in serious harm</li> <li>• medication error or medication refusal – resulting in harm</li> <li>• possession or supply (illegal drugs or medication without a prescription)</li> <li>• trends of serious injuries</li> <li>• accessing Society accommodation, the service, or areas of the services outside the services operating hours, agreed times or house rules</li> </ul> <p><b>Personnel:</b></p> <ul style="list-style-type: none"> <li>• NSW notifiable incident requiring immediate treatment as a hospital inpatient for serious injuries – Society Personnel or the general public as a result of business or asset failure</li> <li>• near miss of a critical incident or potentially fatal incident</li> <li>• SafeWork NSW notifiable dangerous incident</li> <li>• serious injury resulting in hospitalisation</li> <li>• serious misconduct towards other Personnel or people we assist</li> </ul>	<ul style="list-style-type: none"> <li>• Significant short- or medium-term impact on service or operations one or more</li> <li>• Significant damage to Society property \$250,000-500,000</li> <li>• Moderate to long term impact on many services</li> <li>• Negative feedback from Funder at service/ program level</li> <li>• Dangerous or disruptive behaviour that disrupts services</li> <li>• ICT- Key Service or systems are seriously degraded but can continue its operation via a work-around or incremental resource for a short period of time before business stops</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Community Concern</b> Neighbourhood or localised incidents as the result of a Society event, client's actions, illegal activities on Society premises, or service matters that have the potential to result in community comment and localised media</li> <li>• Significant or national adverse media and social media</li> <li>• High impact on community trust to volunteer numbers</li> <li>• Short to medium term damage to brand</li> <li>• Multiple complaints by people we assist related to service provision of a serious nature</li> </ul>	<ul style="list-style-type: none"> <li>• Within 12 months net loss of \$1 million to \$5 million, 15% reduction of revenue or 15% overspend above directorate budget</li> <li>• Confirmed fraudulent activity by Society personnel</li> </ul>	<ul style="list-style-type: none"> <li>• Civil Litigation involving claims between \$350,000 to \$750,000</li> <li>• Claims under the Redress Scheme</li> <li>• A breach or non-compliance resulting in penalties or fines. The potential loss of license/authorisation. Accreditation or regulatory body with investigation funding</li> <li>• Major regulatory change with high impact on Society</li> <li>• Compliance direction or notice</li> <li>• Notification or external investigation by Funder/ regulator</li> </ul>



INCIDENT TYPE					
Consequence rating	PEOPLE- SAFETY AND WELLBEING (includes Society Personnel, people we assist, visitors and members of the public involved or in connection with Society activities or events)	OPERATIONS, INCLUDING SERVICE DELIVERY	REPUTATION	FINANCIAL	COMPLIANCE AND LEGAL
	<ul style="list-style-type: none"> <li>• broad nonconformance with standards or breach of policy</li> <li>• serious verbal or physical assault or threat from a person we assist to other Society Personnel or member of the public</li> </ul>				
<b>Moderate</b>	<p><b>Safe Work NSW Notifiable Incident to any person:</b></p> <ul style="list-style-type: none"> <li>• requiring immediate treatment in hospital, dangerous incident, an improvement notice</li> </ul> <p><b>People we assist:</b></p> <ul style="list-style-type: none"> <li>• moderate injury to a person requiring immediate treatment as a hospital inpatient</li> <li>• increase impact to level or length of care/ support required returning to services or program affected by drugs or alcohol</li> </ul> <p><b>Personnel:</b></p> <ul style="list-style-type: none"> <li>• moderate injury to a person requiring immediate treatment as hospital inpatient or absence from work of more than 5 shifts</li> <li>• notifiable dangerous incident</li> <li>• minor verbal or physical abuse to Personnel from People We Assist, other Society personnel or members of the public</li> </ul>	<ul style="list-style-type: none"> <li>• Minor long-term impact on service/ operations</li> <li>• Moderate damage to property \$100,000 - \$250,000</li> <li>• Moderate short or medium-term impact on one or few</li> <li>• Dangerous or disruptive behaviour that disrupts services</li> <li>• ICT- Access to a system is lost by a small number of users, affecting business functionality</li> </ul>	<p>Moderate adverse impact on:</p> <ul style="list-style-type: none"> <li>• community trust</li> <li>• local media</li> <li>• moderate impact on public profile</li> <li>• moderate impact on volunteer numbers or ability to fundraise</li> <li>• substantial complaints</li> </ul>	<ul style="list-style-type: none"> <li>• Within 12 months net loss of \$250,000 to \$1 million or 10% reduction of revenue or 10% overspend above directorate budget</li> </ul>	<ul style="list-style-type: none"> <li>• Civil Litigation involving claims between \$50,000 to \$350,000</li> <li>• Claims under the Redress Scheme</li> <li>• A notifiable event requiring moderate review of remediation</li> <li>• Moderate fines or penalties</li> <li>• Warning letter of non-compliance breach notice from a regulator</li> </ul>
<b>Minor</b>	<ul style="list-style-type: none"> <li>• Near miss or near hit incident with the potential to cause injury or illness</li> <li>• Emergency evacuation false alarm</li> </ul> <p><b>People we assist:</b></p> <ul style="list-style-type: none"> <li>• absconding or attempt to access a Society service or area outside the services operating hours, agreed times or house rules</li> </ul>	<ul style="list-style-type: none"> <li>• No impact to minor impact which is short term on one or fewer services/ operations</li> <li>• Damage to Society property &lt;\$100,000</li> <li>• Moderate short or medium-term impact on one or fewer</li> </ul>	<ul style="list-style-type: none"> <li>• Localised complaint or isolated adverse media local media or complaint</li> <li>• No impact to low impact on community trust</li> </ul> <p>Little to no impact on volunteers or fundraising.</p>	<ul style="list-style-type: none"> <li>• Within 12 months net less than \$250,000 or up to 5% reduction of revenue or 5% overspend above directorate budget</li> </ul>	<ul style="list-style-type: none"> <li>• No fines or minor infringement</li> <li>• Notifiable event requiring no review, minor review, or remediation by Society, minor or no penalties</li> <li>• Civil Litigation involving claims Under \$50,000</li> </ul>

INCIDENT TYPE					
Consequence rating	PEOPLE- SAFETY AND WELLBEING (includes Society Personnel, people we assist, visitors and members of the public involved or in connection with Society activities or events)	OPERATIONS, INCLUDING SERVICE DELIVERY	REPUTATION	FINANCIAL	COMPLIANCE AND LEGAL
	<ul style="list-style-type: none"> <li>• minor injury or illness to a person related to an incident requiring first aid or treatment from a doctor</li> <li>• recovery without complication or permanent impact, low to a moderate level or length of care/ support required</li> <li>• near miss- medication error, refusal or missed (no impact)</li> <li>• minimal increase in the level of care/ support required</li> <li>• review, evaluation or additional investigation or referral for further treatment/ care related to an incident</li> </ul> <p><b>Personnel:</b></p> <ul style="list-style-type: none"> <li>• minor injury or illness to a person related to an incident or event such as an infectious disease acquired from work requiring first aid or treatment from a doctor, absence from work 1-5 shifts</li> <li>• workplace near-hit with the potential of serious illness or injury</li> <li>• motor vehicle accident resulting in minor damage/ or no injury</li> </ul>	<ul style="list-style-type: none"> <li>• Minor impact across the whole of Society</li> <li>• Dangerous or disruptive behaviour that disrupts services</li> <li>• ICT- single user can operate the system activities, but a fault is identified</li> </ul>			<ul style="list-style-type: none"> <li>• No increase in regulatory focus</li> <li>• No effect on contract performance to minor penalties</li> <li>• No funder or regulatory compliance action</li> <li>• Notifiable event unrelated to Society's actions</li> </ul>

## Attachment C External Reporting overview

Area/ Regulatory Requirements	Who needs to report	What needs to be reported?	Timelines and to whom		
<p><b>Health services</b></p> <p>AHPRA- Mandatory notifications about registered health practitioners March 2020</p>	<p>The groups who must make <b>mandatory notifications</b> about practitioners are:</p> <ul style="list-style-type: none"> <li>• non-treating practitioners, and</li> <li>• employers of practitioners</li> </ul> <p><b>Voluntary notifications</b> any person (including practitioners or employers) may report an incident</p>	<p>Four concerns may trigger a mandatory notification, depending on the risk of harm to the public:</p> <ul style="list-style-type: none"> <li>• Impairment - practicing with an impairment and place the public at risk of substantial harm</li> <li>• Intoxication -practicing while intoxicated by alcohol or drugs</li> <li>• departure from standards- by significantly departing from professional standards and place the public at risk of harm</li> <li>• sexual misconduct - engaging in sexual misconduct connected to their practice</li> </ul> <p>Voluntary reports can be made by any person (including practitioners or employers) if a person believes a:</p> <ul style="list-style-type: none"> <li>• Practitioner’s conduct is placing the public at risk</li> <li>• a practitioner is practicing their profession in an unsafe way, or</li> <li>• a practitioner’s health is having a detrimental effect on their capacity to practice safely. A concern under mandatory notifications</li> </ul>	<p><b>Timeline:</b> Serious clinical incidents 24 hours- for notice 48 hours- for report</p>	<p><b>To whom:</b></p> <ul style="list-style-type: none"> <li>• Funding and contracting agency</li> <li>• AHPRA <a href="http://www.Ahpra.gov.au/notifications">www.Ahpra.gov.au/notifications</a>.</li> <li>• 1300 419 495</li> </ul>	<p><b>For details refer to:</b> AHPRA Australian Health Practitioner Regulation Agency (AHPRA) <i>Mandatory notifications about registered health practitioners’ March 2020</i></p>
<p>Health Services NSW Health and Primary Health Network</p>	<p>Any person (including practitioners or employers) may report an incident.</p>	<p>Follow Incident Management policy. SAC level 1 or 2</p> <p>Primary Health Network SWSPHN Category 1 and Category 2</p>	<p><b>Timeline:</b> SAC Level 1 and within 24 hours Root Cause Analysis Report within 70 days</p> <p><b>Timeline:</b> Category 1- 24 hours from the time of the incident Category 2- within 5 business day of the incident occurring. Root Cause Analysis report due 45 days from Incident Notification</p>	<p><b>To whom:</b> SWSPHN and NSW Health</p>	<p><b>For details refer to:</b> Primary Health Network <a href="https://www1.health.gov.au/internet/main/publishing.nsf/Content/PHN-Home">https://www1.health.gov.au/internet/main/publishing.nsf/Content/PHN-Home</a></p> <p>NSW Health Incident Management policy <a href="https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2020_020.pdf">https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2020_020.pdf</a></p>

<p>Health Services</p> <p>NSW Health and Primary Health Network</p>	<p>Any person (including practitioners or employers) may report an incident</p>	<p>Follow Incident Management policy SAC level 1 or 2</p> <p>Primary Health Network SWSPHN Category 1 and Category 2</p>	<p><b>Timeline:</b> SAC Level 1 and within 24 hours Root Cause Analysis Report within 70 days</p> <p><b>Timeline:</b> Category 1- 24 hours from the time of the incident Category 2- within 5 business day of the incident occurring. Root Cause Analysis report due 45 days from Incident Notification</p>	<p><b>To whom:</b> SWSPHN and NSW Health</p>	<p><b>For details refer to:</b> Primary Health Network <a href="https://www1.health.gov.au/internet/main/publishing.nsf/Content/PHN-Home">https://www1.health.gov.au/internet/main/publishing.nsf/Content/PHN-Home</a></p> <p>NSW Health Incident Management policy <a href="https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2020_020.pdf">https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2020_020.pdf</a></p>
<p>Aged care</p> <p>Aged Care Quality Standards</p>	<p>Provider of residential aged care services</p>	<ul style="list-style-type: none"> <li>• Suspicion or allegations of reportable assaults occurring at their services</li> <li>• Absence without explanation/ missing resident</li> <li>• Reportable assault: A reportable assault as defined in the Aged Care Act (section 63-1AA) means:</li> <li>• unlawful sexual contact with a resident of an aged care home, or</li> <li>• unreasonable use of force on a resident of an aged care home</li> </ul>	<p><b>Timeline:</b> 24 hours complete related Commission form Local Police and the Aged Care Quality and Safety Commission.</p>	<p><b>To whom:</b> Aged Care Quality and Safety Commission <a href="mailto:compulsoryreports@agedcarequality.gov.au">compulsoryreports@agedcarequality.gov.au</a> call the compulsory reporting line on 1800 081 549 <i>Aged Care Act 1997</i></p>	<p><b>For details refer to</b> Aged Care Quality and Safety Commission <a href="https://www.agedcarequality.gov.au/">https://www.agedcarequality.gov.au/</a></p>
<p>Assisted Boarding Houses</p> <p>Boarding Houses Regulation 2013 and Boarding House Regulation Act 2012</p>	<p>Approved Manager of an Assisted Boarding House</p>	<p>Incidents involving a resident on the premises of the boarding house which results in the resident needing medical, dental or hospital treatment. Incidents or death involving residents with additional needs. Including:</p> <ul style="list-style-type: none"> <li>• the death of a resident</li> <li>• the sexual assault (or an allegation of sexual assault) of a resident of the boarding house</li> <li>• the unexpected absence of a resident of the boarding house with additional needs for more than 24 hours</li> <li>• an assault or allegation of assault (other than a sexual assault) under Part 3 of the Crimes Act of: <ul style="list-style-type: none"> <li>○ a resident by a staff member</li> <li>○ a staff member by a resident; or</li> <li>○ a resident by another resident</li> </ul> </li> <li>• A serious accident involving a resident on the premises of the boarding house resulting in the resident needing medical, dental or hospital treatment</li> </ul>	<p><b>Timeline:</b> Within 24 hours- for sexual assault or allegations of a sexual assault to the Police 24 hours to report a death to DCJ 48 hours to report to DCJ for any of the listed incidents including complaints to DCJ</p> <p>You must also complete reporting required for NDIS Practice Standards (below)</p>	<p><b>To whom:</b> The Approved Manager must report a death or sexual assault or allegation of sexual assault of a resident to the Police as soon reasonably practicable after becoming aware of the incident either orally or in writing.</p> <p>DCJ must be notified as soon as reasonably practicable after the attendance of Police at the premises to</p>	<p><b>For details refer to:</b> Department of Communities and Justice.</p> <p>Assisted Boarding House Practice Guide (Boarding House Act 2012, Boarding House Regulation 2013) <a href="https://www.facs.nsw.gov.au/download?file=578416">https://www.facs.nsw.gov.au/download?file=578416</a></p>

		<ul style="list-style-type: none"> <li>the making of a complaint about the treatment of a resident whereby it is alleged that the BH Act or BH Regulation has been contravened, a staff member has committed fraud against a resident, or the resident has been neglected, ill-treated or otherwise had their safety, health or wellbeing compromised while living at the boarding house</li> <li>other incidents involving residents, including serious attempted self-harm. BH Act s83(1) BH Reg cl26</li> </ul>		investigate an incident involving an additional needs resident. You must report the incident to the Police &	
NDIS NDIS Practice Standards	The Society as an NDIS provider for: NDIS participants Supported group accommodation	<p>Registered NDIS providers must notify the NDIS Commission of all reportable incidents (including allegations). The incident must be reported to the NDIS Commission that are in connection with the provision of services as an NDIS provider.</p> <p><b>Reportable incidents involving a person with a disability:</b></p> <ul style="list-style-type: none"> <li>The death of a person with a disability</li> <li>Serious injury of a person with a disability</li> <li>Abuse or neglect of a person with a disability</li> <li>Unlawful sexual or physical contact with, or assault of, a person with a disability</li> <li>Sexual misconduct, committed against, or in the presence of, a person with a disability, including grooming of the person with a disability for sexual activity</li> <li>Unauthorised use of restrictive practices in relation to a person with a disability.</li> <li>**Information from Subsection 73Z of the NDIS ACT.</li> <li>The list must be read with Section 16 of the Rule:</li> <li>Unlawful physical contact is not reportable if the contact with the person with a disability is negligible</li> <li>Use of restrictive practices is not reportable if the use is in accordance with an approved behaviour support plan.</li> </ul> <p>Incidents involving a child or young person with a disability must also be reported according to Safeguarding children and young people policy reporting below.</p>	<p><b>Timeline:</b> 24 hours of becoming aware</p> <p>If related to unauthorised restrictive practices or not in accordance with behaviour support plan report within 5 days unless resulted in harm to a person with a disability- report within 24 hours.</p>	<p><b>To whom:</b> NDIS Commission</p> <p>Complete NDIS Commission: Immediate Notification Form (24 hours) 5-day notification form</p> <p>Or if an error with portal advises NDIS Commission via <a href="mailto:reportableincidents@ndiscommission.gov.au">reportableincidents@ndiscommission.gov.au</a></p>	<p><b>For details refer to:</b> NDIS Quality and Safeguards Commission.</p> <p>Reportable Incidents- detailed guidance for registered NDIS providers June 2019 <a href="https://www.ndiscommission.gov.au/sites/default/files/documents/2019-06/detailed-guidance-reportable-incidents-detailed-guidance-registered.pdf">https://www.ndiscommission.gov.au/sites/default/files/documents/2019-06/detailed-guidance-reportable-incidents-detailed-guidance-registered.pdf</a></p>
Safeguarding Adults with a disability and older people	The Society- voluntary reporting	Abuse, neglect, and exploitation of adults with disability and older people living in their home and the community	<b>Timeline:</b>	<b>To whom:</b> Ageing and Disability Commission 1800 628 221 <a href="mailto:NSWADC@adc.nsw.gov.au">NSWADC@adc.nsw.gov.au</a>	<b>For details refer to:</b> <a href="https://www.ageingdisabilitycommission.nsw.gov.au/about-us/what-we-do">https://www.ageingdisabilitycommission.nsw.gov.au/about-us/what-we-do</a>
Safeguarding children and young people Child Protection	Mandatory reporters (refer to Safeguarding children and young people policy)	<ul style="list-style-type: none"> <li>A child or young person is at current "risk of significant harm" if current concerns exist for the safety, welfare or wellbeing of the child or young person because of the presence, to a significant extent, or anyone or more of the following circumstances:</li> <li>the child or young person's basic physical or psychological needs are not being met or are at risk of not being met</li> <li>the parents or other caregivers have not arranged and are unable or unwilling to arrange for the child or young person to receive necessary medical care</li> <li>in the case of a child or young person who is required to attend school in accordance with the Education Act 1990, the parents or other caregivers have not</li> </ul>	<b>Timeline:</b> Immediately or within 24 hours depending on the incident.	<p><b>To whom:</b> Internally The Society requires all Personnel to report any concern to 1800 478 776 or <a href="mailto:childprotection@vinnies.org.au">childprotection@vinnies.org.au</a>.</p> <p>Externally</p>	<p><b>For details refer to:</b> Society's Safeguarding children and young people policy.</p> <p>Department of Communities and Justice website at <a href="https://www.facs.n">https://www.facs.n</a></p>

		<p>arranged and are unable or unwilling to arrange for the child or young person to receive an education in accordance with that Act</p> <ul style="list-style-type: none"> <li>• the child or young person has been, or is at risk of being, physically or sexually abused or ill-treated.</li> <li>• the child or young person is living in a household where there have been incidents of domestic violence and, as a consequence,</li> <li>• the child or young person is at risk of serious physical or psychological harm; a parent or other caregiver has behaved in such a way towards the child or young person that the child or young person has suffered or is at risk of suffering serious psychological harm; and</li> <li>• the child was the subject of a pre-natal report under section 25 of the Children, and Young Persons (Care and Protection) Act 1998 and the birth mother of the child did not engage successfully with support services to eliminate or minimise to the lowest level reasonably practical, the risk factors that gave rise to the report.</li> </ul>		<p>Department of Communities and Justice Phone: 132 111</p> <p>Or e-report at <a href="https://reporter.childst.ory.nsw.gov.au">https://reporter.childst.ory.nsw.gov.au</a></p>	<p>sw.gov.au/families/Protecting-kids/mandatory-reporters.</p>
<p>Safeguarding children and young people</p> <p>Reportable Conduct</p>	The Society	<p><b>Reportable conduct</b> involves allegations or concern regarding the below conduct, committed by a member, volunteer or employee towards a person we assist or Society Personnel under the age of 18.</p> <p><b>Defined by the Children's Guardian Act 2019, as:</b></p> <p>Reportable conduct means the following conduct, whether or not a criminal proceeding in relation to the conduct has been commenced or concluded:</p> <ul style="list-style-type: none"> <li>• a sexual offence,</li> <li>• sexual misconduct,</li> <li>• ill-treatment of a child,</li> <li>• neglect of a child,</li> <li>• an assault against a child,</li> <li>• an offence under section 43B or 316A of the Crimes Act 1900,</li> <li>• behaviour that causes significant emotional or psychological harm to a child.</li> </ul>	<p><b>Timeline:</b> Within 7 days</p>	<p><b>To whom:</b> Office of the Children's Guardian</p> <p>If the child or young person has a disability in a residential service report to Office of the Children's Guardian</p>	<p><b>For details refer to:</b> Children's Guardian Act 2019</p>
<p>Work Health and Safety</p> <p>Notifiable incident</p>	The Society	<p><b>A 'notifiable incident' under the <a href="#">work health and safety legislation</a> relates to:</b></p> <ul style="list-style-type: none"> <li>• the death of a person</li> <li>• a serious injury or illness of a person</li> <li>• a potentially dangerous incident</li> </ul>	<p><b>Timeline:</b> Immediately</p>	<p><b>To whom:</b> Safe Work NSW 13 10 50</p>	<p><b>For details refer to:</b> NSW Government Safe Work</p>
<p>Privacy</p>	The Society	<p><b>Eligible data breaches:</b></p> <ul style="list-style-type: none"> <li>• unauthorised access to, or unauthorised disclosure of, personal information or loss of personal information</li> <li>• unauthorised access to or disclosure of personal information is likely to result in serious harm to one or more individuals</li> <li>• efforts to contain the harm with remedial action have been unsuccessful</li> </ul>	<p><b>Timeline:</b></p>	<p><b>To whom:</b> Office of the Australian Information Commissioner (<b>OAIC</b>) and affected individuals</p>	<p><b>For details refer to:</b> Privacy Policy and OAIC <a href="https://www.oaic.gov.au/">https://www.oaic.gov.au/</a></p>

## Attachment D- Responding to Reportable Incidents for NDIS participants

**This procedure must be used for a reportable incident in relation to adults engaging with the Society/ NDIS Services.**

For the procedure for reportable incidents in relation to children and young people engaging with the Society's NDIS Services refer to Appendix 5 of the Safeguarding Children and Young People Policy.

The incident must be managed and reported according to the Society's Incident Management policy and procedures. Society Personnel must take appropriate actions to respond to an incident, complete the online Incident Report Form and submit to their Manager or Supervisor.

Any reportable incident that has occurred, or is alleged to have occurred, **in connection with the NDIS supports or services** must be notified to the NDIS Quality & Safeguards Commission within set timeframes.

### **What to report and when to report it:**

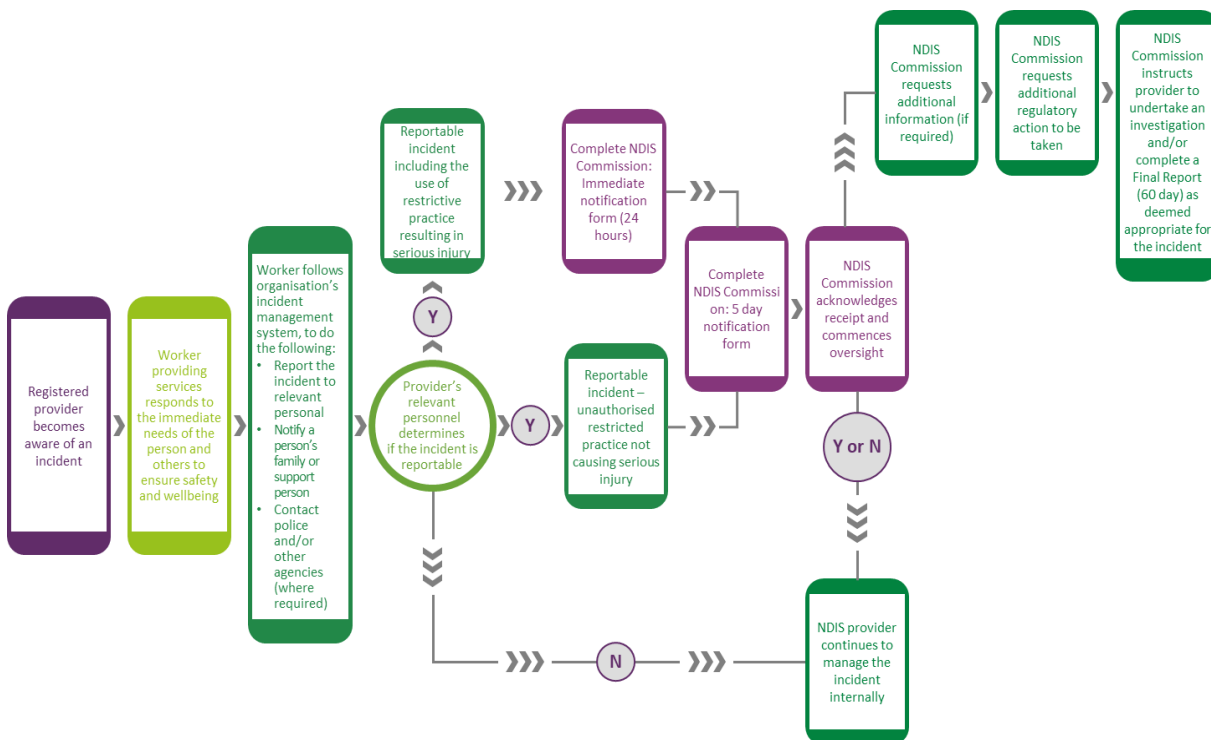
- report the death of a person with a disability **within 24 hours**
  - report the serious injury of a person with a disability **within 24 hours**
  - report abuse or neglect of a person with a disability **within 24 hours**
  - report unlawful sexual or physical contact with, or assault of a person with a disability **within 24 hours**
  - report sexual misconduct committed against, or in the presence of, a person with a disability, including grooming of the person for sexual activity **within 24 hours**
  - report the use of the unauthorised restrictive practice in relation to a person with a disability **within 5 business days.**
1. Clarify the allegation – exactly what has been alleged. Who, what, when, where, etc.? Do not commence investigation at this time. Focus on clarifying the key elements of the allegation.
  2. Notify your Service Manager, Team Leader, Regional Manager or Program Manager.
  3. Notify the relevant Director, Vinnies Services and the Executive Director, Vinnies Services.
  4. If the incident is related to a child or young person, notify the Safeguarding Team 1800 4 SUPPORT (1800 478 776) as soon as possible after an allegation is made. The Safeguarding Team will oversee any further enquiries or investigations and will inform the CEO.
  5. As soon as practicable, Society Personnel who received the disclosure or witnessed the incident must:
    - a. document the allegation or concern, using the Safeguarding Notification Form
    - b. send the Safeguarding Notification Form to [childprotection@vinnies.org.au](mailto:childprotection@vinnies.org.au)
  6. Society Personnel must report any concern regarding potential risk of significant harm to a child or young person to the Department of Communities and Justice (DCJ) and Safeguarding team.
  7. The Safeguarding team and relevant employees must report to the OCG and NDIS Quality and Safeguards Commission as required and manage the incident according to Appendix 5 of the Safeguarding Children and Young People Policy.
  8. The Society's Authorised Reportable Incident Notifiers and Approvers must report any reportable incidents involving an adult NDIS participant to the NDIS Quality and Safeguards Commission.
  9. Society Personnel must report all criminal matters to the Police immediately, as part of the immediate incident response, or as soon as possible after becoming aware that a crime has been committed.
  10. The Senior Managers, Vinnies Services who have been delegated with this responsibility are the Society's **Authorised Reportable Incident Notifiers.**
  11. The Vinnies Services Director and Executive Director are the **Authorised Reportable Incident Approvers.**
  12. Conduct a risk assessment which considers and documents the risk to the safety and wellbeing of the child

and young person or adult, including the alleged victim, the alleged perpetrator, staff, other people we assist, and the organisation. Refer to Safeguarding Risk Template.

13. Where a Police or external investigation is required, the Society must await the outcome of the Police or external investigation before the Society conducts any further enquiries or investigations.
14. Consider who needs to be notified about the allegation as well as what to tell others who are not involved but aware (e.g. parents, employees). Remind all parties of the sensitivity of the situation and confidentiality requirements.
15. The Manager or Supervisor must update and manage the incident report within the Society's Integrated Risk Management System.
16. If the incident involves a child or young person records of these reports will also be recorded in the Safeguarding Register within the Society's Integrated Risk Management System and according to the Safeguarding Children and Young People Policy.
17. The Manager, Team Leader, Regional Manager, Program Manager or Regional Director must ensure reports are documented and escalated appropriately.
18. Address support needs of both the person impacted and the person who is the subject of the allegation/ incident.

### **Reporting via the NDIS Portal**

*Process for notification of reportable incidents*



### **Investigation:**

19. The Society may choose, or the NDIS Commission may direct the Society to engage an external investigator to undertake the investigation.
20. Both internal and external investigators need to be appropriately qualified to conduct serious investigations of this sort, including investigating serious incidents that may involve a criminal element.

An investigation must include:

- whether Society policies and procedures have been followed



- whether the incident could have been prevented
  - how well the incident was managed and resolved
  - whether any systemic performance or management issues arise
  - 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.
21. Where and as appropriate, the Incident Manager or Society contact should inform the person on the progress or outcome of an investigation to the person, parent or guardian or nominated person.

## Corrective action

22. Corrective steps may include, but are not limited to:
- disciplinary action or dismissal
  - training or education of workers
  - modification of the environment
  - development or amendment of a policy or procedure
  - changes to how supports or services are provided
  - practice improvements
  - temporary or permanent suspension of service
  - opportunities for continuous improvement.

## Final report

20. In certain circumstances, the Society can be required to give the NDIS Commission a final report with information about any internal or external investigation or assessment that has been undertaken in relation to the reportable incident, including:
- the name and position of the person who undertook the investigation
  - when the investigation was undertaken
  - details of any findings made
  - details of any corrective or other action taken after the investigation
  - a copy of any report of the investigation or assessment
  - information about whether persons with disability impacted 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 NDIS Commission.
23. The final report needs to be provided to the NDIS Commission within 60 business days following the initial notification. The NDIS Commission may extend the period for providing the final report.

## Record Keeping

24. The Society must maintain a record of the incident in the incident management system according to the Society's Incident Management Policy.
25. All Incident Reports and investigations must be kept for a minimum of seven years. Incident reports related to children and young people must be kept for seven years after the time the child or young person turns 18 years of age. Incident reports involving harm to a child or young person must be kept indefinitely.
26. The record must include:
- description of the incident – including the impact on, or harm caused to, any person

- nature of the incident – details of whether the incident is a reportable incident
- details of the 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
- assessment and investigation – detailed assessment of the incident or allegation, detailed plan of how the investigation will be conducted, details of all interviews, and a decision made regarding the outcome of the investigation
- contact details – the names and contact details of the persons involved in the incident and any witnesses to it
- initial Response and follow up – the actions taken in response to the incident and changes to support continuous improvement
- consultations – a record of any consultations with the child or young person, adult or their parent, guardian, or support person affected by the incident and whether the person has been given reports or findings regarding the incident.

## Documentation and Record-Keeping

27. The Director, Regional Director, Senior Manager must ensure:

- all documents relating to allegations of reportable conduct against members, volunteers, and employees are dealt with and stored confidentially
- all documents relating to allegations of reportable conduct against members, volunteers, and employees will be retained indefinitely
- all documents related to allegations of the reportable incident against members, volunteers, and employees will be stored separate secure folder “Reportable Incidents” on Microsoft 365 SharePoint within Incident Reports and recorded within Incident Register
- all documents relating to allegations of reportable conduct against members, volunteers, and employees will be stored in the Safeguarding Register and in the “Reportable Conduct” File in the Safeguarding Folder on Microsoft 365 SharePoint
- information regarding notifications to the Office of the Children’s Guardian will be stored confidentially in a secure location and kept indefinitely.

# Attachment E – Vinnies Services Incident Review Process