

Incident Management Policy



A R A L U E N

Imagining and achieving better lives

Scope

This policy applies to all Araluen employees, participants, volunteers, contractors, and students.

Policy Statement

The purpose of this policy is to ensure that everyone at Araluen understands how to manage incidents. It also explains how we report and investigate incidents.

A flow chart depicting the incident management procedure can be viewed at the bottom of this policy.

Araluen maintains a documented Incident Management System that complies with NDIS requirements and supports timely and effective responses to incidents.

Definitions

Incident: Incidents are acts, omissions, events or circumstances that have, or could have, caused harm to a person.

Reportable incident: Reportable incidents are serious incidents or allegations that impact a participant. Incidents are only reportable if they occur in connection with Araluen supports. The specific types of reportable incidents are outlined in section 2 of this policy.

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Application

1. What is an incident?

An incident is an event that happens at Araluen where someone is harmed or could have been harmed. This could include physical harm, psychological harm, or financial harm. Some examples of incidents include:

- Someone falling over.
- Missing someone's medication.
- Participants communicating through their behaviour.
- Participants hitting other people or threatening to hit other people.
- Participants throwing objects at other people.
- Seizures that are longer than usual or result in injury/hospitalisation.
- Administration of PRN medication.
- Any injury sustained by a participant or staff.
- Medical issues requiring first aid or hospitalisation.
- Vehicle accidents.

Indicators of Abuse or Neglect

If staff become aware of any indicators of the abuse or neglect of a participant, including unexplained bruising, it must be reported as an incident report. Please see Araluen's Preventing and Responding to Abuse of a Participant policy for further information about indicators of abuse and neglect.

Near Misses

Near misses must be reported as incidents. A near miss is when an incident almost occurred but did not. These are important to report as they can help prevent incidents happening.

2. How to manage an incident

All staff receive training in incident management procedures and their responsibilities under the NDIS Practice Standards and Reportable Incidents Rules.

Staff involved in an incident must:

- Remain calm.
- Assess the situation, prevent any further harm, use positive behaviour support to support participants in need.
- Dial 000 for an ambulance if required.
- Administer first aid if required.
- Contact Manager or Practice Leader to report details and receive further instruction.
- After immediate incident has been responded to, staff to complete an Incident Report Form.
- Complete file notes in VisiCase for all participants involved.
- Preserve evidence, including all physical or documented evidence.
- Notify the persons family, guardian, key support person or other service (such as a person's SIL provider) about the incident.

Person responsible: Quality team

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Managers or Practice Leaders alerted to an incident must:

Provide instruction to staff about how to further respond to the incident.

- Ensure all relevant parties have been informed of the incident and provided a copy of the incident report upon request and as per the “Open Disclosure Policy”. This may include discussing with the Participant, Family member, Carer or Support Coordinator:
 - What has happened
 - Any identified risks
 - What action will be taken to prevent it from happening again
- Ensure staff have submitted an Incident Report.
- Report to Victoria police where it is believed that a crime may have been committed.
- Determine if the incident is a reportable incident in a timely manner to ensure reportable incidents are reported to NDIS Safeguards Commission within 24 hours.
- Ensure supports are in place for anyone affected, including counselling.
- Incidents must be investigated within 48 hours of being notified. Management Response section of incident report must be completed once follow up and investigation outcomes have been completed and finalised.

3. How to report an incident

All incidents must be reported using Araluen’s Incident Report Form. This can be found on Araluen computer desktops and from this link:

https://araluen.foliogrc.com/contracts/new?contract_template=13&token=3LGfTYRcJaiBoCU7vbLH

- An Incident Report Form must be completed as soon as practicable and within 24 hours of the incident occurring.
- Information from the Form goes into Araluen’s Incident Register.
- Managers must determine if the incident is a reportable incident and if so, report the incident to the Commission via PRODA within 24 hours of being notified.

Where Managers are unsure if an incident is reportable or not, they should speak with the appropriate General Manager, member of the Quality Team, or contact the NDIS Quality & Safeguards Commission on 1800 035 544 for clarification.

Where an incident is determined to be reportable, the Senior Manager responsible for the service area must ensure that the reportable incident is submitted to the NDIS Quality and Safeguards Commission via PRODA within the required timeframe. This includes completion of both the initial notification (within 24 hours) and the five-day follow-up report.

Senior managers must also ensure that the report is accurate, complete, and supported by any relevant documentation or investigation findings.

General Managers will be notified of all reportable incidents and provided with relevant details and documentation as part of Araluen’s oversight and governance processes.

General Manager must complete the General Manager stage of the internal incident report for all reportable incidents.

4. What is a reportable incident?

Reportable incidents are serious incidents or allegations that impact a participant. The NDIS Quality and Safeguards Commission (the Commission) require incidents to be reported strictly within 24 hours of Araluen becoming aware of them. All reportable incidents must be followed by a 5-day follow up report via PRODA.

The types of reportable incidents are:

4.1 The death of a person with disability

Once Araluen staff become aware that a participant has passed away, they must immediately ring an ambulance, the police, and the State Coroners.

4.2 Serious injury of a person with disability

A serious injury includes, but is not limited to:

- fractures
- burns
- deep cuts
- extensive bruising
- concussion
- any other injury requiring hospitalisation

4.3 Abuse or neglect of a person with disability

4.3.1 Abuse

Types of abuse that meet the criteria for being a reportable incident include:

- Physical abuse
 - Intentional physical acts towards a person with disability with intent to cause harm. In some cases, this may also result in unlawful physical contact and serious injury of a person with disability.
- Psychological or emotional abuse
 - Acts that cause significant emotional or psychological pain or distress including verbal taunts, threats of maltreatment, harassment, humiliation, intimidation, or a failure to interact with a person with disability or acknowledge their presence.
- Financial abuse
 - Withholding money belonging to a participant or using money for purposes not authorised by a participant, including NDIS funds.

- Coercion or misleading behaviour to obtain money or property from a participant.
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- Systemic abuse
 - A failure to recognise, provide, or attempt to provide adequate or appropriate services, that as a result has a significant physical, emotional or psychological impact on the person with disability.
- A pattern of abuse
 - Repeated behaviours toward a person with disability from the categories above. Single incidents may not present as abuse but when considered over time, may show a pattern of abuse.

4.3.2 Neglect

Neglect includes an action, or a failure to act, by a person who has care or support responsibilities towards a person with disability. This may include:

- A single incident where Araluen or a staff member fails to fulfil a duty, resulting in harm to a participant, or where there is the potential for significant harm to a participant.
- An ongoing pattern of repeated failures to meet a participant's physical or psychological needs.
- Grossly inadequate support that involves depriving a participant of the necessities of life, such as food, drink, shelter, clothing, medical care, and treatment.
- Supervisory neglect, which involves the intentional or reckless failure to adequately supervise or actively support a participant that results in the death of, or significant harm to the participant.
- Failure to protect a participant from abuse. This includes failing to respond to information that strongly indicates abuse, or the potential of abuse of a person with disability.

4.4 Unlawful physical contact with, or assault of a person with disability

A reportable physical assault is when a person, which can include a staff member, participant, or community member intentionally uses unjustified physical force against a person with disability without that their consent. A physical assault can also happen if a person causes another person to fear that unjustified force will be used against them.

Even if someone does not mean to cause physical harm or the fear of harm, they may have still committed an assault if they knew their actions could cause harm, or the fear of harm. Assaults can include:

- Hitting
- Pushing
- Shoving
- Spitting
- Throwing objects toward other people

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- Making threats of physical harm. This includes face-to-face or over calls, texts, or emails.

4.5 Unlawful sexual contact, or assault of a person with disability

4.5.1 Sexual assault

Sexual assault includes any behaviour of a sexual nature that is an offence under any criminal statute of a state or territory. It includes:

- A person having sexual intercourse with another person without their consent.
- A situation where a person is forced, coerced, or tricked into sexual acts against their will or without their consent.

4.5.2 Indecent assault

Indecent assault usually involves touching or threatening to touch a person's body in a sexual manner without the consent of the other person. For example, it can include unwanted touching of a person's breast, bottom, or genitals.

4.5.3 Sexual misconduct committed against, or in the presence of a person with disability

Sexual misconduct includes a broad range of sexualised behaviour with or towards participants. While it is not possible to provide a complete and definitive list of unacceptable sexual conduct involving participants, the following types of behaviour give strong guidance:

- Sexualised behaviour with or towards a participant (including sexual exhibitionism).
- Inappropriate conversations or comments of a sexual nature.
- Unwarranted and inappropriate touching of a participant.
- Personal correspondence and communications (including emails, social media, and web forums) with a participant concerning staff's romantic, intimate, or sexual feelings for the participant.
- Inappropriate exposure of participants to sexual behaviour of others.
- Watching participants undress in circumstances where supervision is not required, and it is clearly inappropriate.
- Taking inappropriate photos or videos of a person where they are unclothed, or in compromising positions including those of a 'sexual nature'.

Crimes which involve encouraging another person to commit a sexual offence against a participant would also constitute sexual misconduct.

4.5.4 Grooming

Behaviour should only be seen as grooming where there is evidence of a pattern of behaviour that is consistent with grooming a participant for sexual activity, and there is no other reasonable explanation for that pattern.

The types of behaviours that may lead to such a conclusion include, but are not limited to:

- Persuading a participant or group of participants that they have a 'special' relationship with staff by:
 - inappropriately giving gifts
 - inappropriately showing special favours to some participants but not others, or
 - asking the participant to keep the relationship to themselves.
- Testing boundaries by:
 - undressing in front of a participant
 - encouraging inappropriate physical contact (even where it is not overtly sexual)
 - 'accidental' intimate touching.
- Extending a relationship with a participant outside of work.

4.6 Unauthorised use of restrictive practices

The use of a restrictive practice, other than where the use is in accordance with an authorised Behaviour Support Plan written by an approved NDIS behaviour support practitioner, must be notified to the Commission. This includes the emergency use of a restrictive practice. Unauthorised use of restrictive practices must be reported:

- Within 5 days if no harm came to the participant.
- Within 24 hours if harm came to the participant.

Further information about restrictive practices can be found within Araluen's Positive Behaviour Support and Restrictive Practices policy.

5. How Araluen investigates incidents

Incidents that have caused significant harm to a person or form part of a pattern of incidents will be investigated. This can help prevent them from reoccurring and identify areas for improvement or training.

An investigation involves gathering and analysing all relevant facts by:

- interviewing witnesses
- examining documentation
- skilled observation and,
- obtaining expert opinion.

Participants involved in investigations should be offered support to communicate information about their experience. This may be in the form of a person they trust such as a family member, carer, friend, or advocate.

5.1 Responsibilities

Responsibilities are outlined within the "Managing Investigations: Guide for Managers".

6. What happens after an incident

Within 5 days of a reportable incident occurring, Araluen must inform the participant or their key support people of the root cause and any action taken to prevent the incident from happening again.

Feedback about the outcome and possible improvement actions taken should be sought from people involved in the incident and where appropriate, their key support people. This is to determine if they are satisfied or have any suggestions about how they could be prevented or improved.

All incident data will be reviewed regularly to identify trends, risks, and opportunities for continuous improvement. Learnings will be shared across the organisation where appropriate to strengthen practice and safeguard participants.

Related Documents

- Preventing and Responding to Abuse of a Participant policy
- Behaviour Support Plans & Restrictive Practices policy
- Providing Positive Behaviour Support policy
- Code of Conduct
- Open Disclosure Policy
- NDIS Incident Management System Guidance & NDIS Reportable Incidents Guidance: <https://www.ndiscommission.gov.au/rules-and-standards>
- State Coroner's Office: 1300 309 519

Review and Authorisation

This policy should be reviewed every 2 years. The Quality Team will be responsible for reviewing and where necessary updating this policy.

Please see next page for Incident Management procedure

