

Purpose and Scope

Access4u and our associated entities (we, us, our) are committed to providing safe, high quality and person-centred services and supports and minimising any risk of harm to our customers and their families, our community and employees. Compliance with this policy will ensure all incidents are reported, managed and investigated in an appropriate and timely manner and the physical and psychological wellbeing of any person involved is addressed with appropriate supports and treatment.

The implementation of and compliance with this policy, and its supporting procedure, ensures

- the safety and wellbeing of our customers, employees and other people is actively managed and results in continuous improvement.
- a consistent organisational approach to the reporting, management, investigation and resolution of incidents.
- timely notification of incidents both internally, and externally as required.
- accurate and consistent documentation of circumstances relating to incidents.
- identification and evaluation of risks associated with our services and supports.
- open disclosure to our customers and their families about any incident that may have caused harm.
- continual improvement of our services and supports through monitoring and acting on individual incidents and the identification of trends through the analysis of incident reports.
- employees are trained in and understand their responsibilities for incident management.

Scope

Compliance with this policy, and its supporting procedure, is mandatory for all our staff, contractors, students, volunteers, visitors, board members, and any other person supporting our customers or that have a responsibility for the safe operation of our services, collectively referred to as 'employees' throughout this document.

For the purpose of this policy, and associated procedure, the term 'incident' generally refers to an undesirable event that has, or could have caused harm to our customers, community or employees, or any loss or damage to property. It includes all actual and alleged incident, near miss, accident, injury, hazard events and sleep disturbances.

Behaviours of concern and notable behaviours are also managed as 'incidents' in line with the policy and associated procedure. This ensures these events are reported, managed and trended to support escalation, as well as improvement and changes to existing behaviour supports.

Responsibilities and delegations

This policy applies to	Governing Body. Staff and Volunteers
Specific responsibilities	The Board – Responsible for ensuring effective governance mechanisms are in place. The CEO and Managers – Responsible for monitoring and ensuring adherence to Policy and related procedures. Ensure due diligence and take reasonable steps to ensure Access4u are meeting their obligations. Ensure objectives of the policy are achieved. Staff – Responsible for adherence to this and related policies, procedures and forms that support this policy.
Policy approval	CEO

Policy context – this policy relates to:

Standards	• Family and Community Services Act 1972 • National Disability Insurance Scheme Quality and Safeguarding Framework • National Standards for Out-of-Home care (NOOHCS) • The Office of the Guardian for Children and Young People - Charter of Rights
Legislation	• Children and Young People (Safety) (Transitional Provisions) Regulations 2017 • Children and Young People (Safety) Act 2017 • Children's Protection Law Reform (Transitional Arrangements and Related Amendments) Act 2017 • Disability Discrimination Act (DDA) 1992 • National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018 • National Disability Insurance Scheme Act 2013 • The Disability Act 2006 • The Disability Services Act SA 1993 • Work Health and Safety Act 2012 (SA)
Contractual obligations	• Government of SA, DCP Contract Management Framework • NDIS Code of Conduct
Organisation policies and procedures	• Incident management • Open disclosure • Incidents of a critical and distressing nature • Investigations and disciplinary action • Investigations and disciplinary action • Feedback and complaint management • Adult safeguarding • Incident Review Group Terms of Reference • Clinical and Care Governance Terms of Reference • Quality Risk and Compliance Terms of Reference • Workplace Health and Safety Committee Terms of Reference • Reducing Restrictive Practices Committee Terms of Reference
Forms, record keeping, other documents	• Incident Report Form • Incident Reflection Form • Incident Investigation Form • Reportable incident risk assessment • LMS Complaints Management and Incident reporting training • Access4u incident acknowledgement Letter • Access4u incident 14 Day Letter

Definitions for the purpose of this policy the following definitions apply:

Word	Definition
<i>Accidents</i>	are events or situations that actually resulted in harm to an individual or damage to equipment or property. This policy includes accidents as incidents.
<i>Behaviour of concern</i>	is any behaviour which causes actual harm, or the risk of harm, to the person, their family, an employee or any other person or property.
<i>Harm</i>	includes death, injury, illness (physical and psychological) or disease that may be suffered by a person
<i>Hazard</i>	as a situation that has the potential to harm a person (death, illness or injury), environment or damage property.
<i>Near miss</i>	means no harm was caused but had the potential to do so.
<i>Notable behaviour</i>	is a behaviour that has not, or is unlikely to, result to harm, however is required to be reported under the IMS to enable monitoring and escalation to support improvements or changes to behaviour supports.
<i>Notifiable incident</i>	means a serious incident arising out of service delivery relating to any person that has mandatory reporting requirements under legislation. They include 'reportable incidents' to be reported to the NDIS Commission, 'significant incidents' to be reported to the Department for Child Protection (DCP), and 'notifiable incidents' to be reported to SafeWork SA.
<i>Risk</i>	is something that could potentially lead to an incident or accident.
<i>Specified personnel</i>	in relation to NDIS reportable incidents, is the Quality, Risk and Compliance (QRC) team. The QRC team are responsible for notifying the NDIS Commission of all reportable incidents. Notification timeframes for NDIS reportable incidents commence when the QRC team has reviewed the incident and identified this to be related to a reportable incident.

Policy Statement

Our customer cohort, including children and young people, and people living with disability, are among the most vulnerable members of our society. We are committed to the safety and wellbeing of all customers accessing our services and support their right to be safe and feel safe.

We aim to provide effective management of incidents in accordance with our obligations under the National Disability Insurance Scheme Act 2013, its associated rules and practice standards, the *Children and Young People (Safety) Act 2017*, and the *Work Health and Safety Act 2012*.

Notifiable incidents

Incidents that are reportable, significant or notifiable may require immediate notification to SA Police, SA Ambulance or other emergency services. This is a priority action for any employee involved in or witnessing such an incident.

Incidents that may be reportable, significant or notifiable may be required to be reported to multiple agencies. For example, if an incident occurs meets the criteria as notifiable to SafeWork SA, and this involves a NDIS participant, the incident would be required to be reported to both SafeWork SA and the NDIS Commission.

Reportable incidents (NDIS Commission)

As a registered NDIS provider, we must notify the NDIS Commission of all reportable incidents (including allegations). All reportable incidents are notified to NDIS Commission through the NDIS Quality and Safeguards Commission Portal by our specified personnel. It is assumed that we have become aware of the reportable incident once the specified personnel has been notified.

For an incident to be deemed a reportable incident it must satisfy the following two requirements:

The incident must involve an act, event or omission defined in section 73Z(4) of the NDIS Act and section 16 of the NDIS (Incident Management and Reportable Incidents) Rules 2018

The incident must have occurred or is alleged to have occurred in connection with the provision of supports or services by a registered NDIS provider

Subsection 73Z(4) of the NDIS Act defines reportable incidents as:

- the death of a person with disability; or
- serious injury of a person with disability; or
- abuse or neglect of a person with disability; or
- unlawful sexual or physical contact with, or assault of, a person with disability; or
- sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity; or
- the use of a restrictive practice in relation to a person with disability, other than where the use is in accordance with an authorisation (however described) of a State or Territory in relation to the person.
- For more information go to [NDIS Incident management and reportable incidents \(NDIS providers\)](#).
- Any incident of suspected abuse or neglect of vulnerable adults may also require reporting to the Adult Safeguarding Unit. Go to our Adult Safeguarding policy for more information.

Significant incidents (DCP)

As a DCP service provider, we must notify DCP of all significant incidents (including allegations). Significant incidents are defined as those events that cause or are likely to cause significant negative impact on the health, safety or wellbeing of children and young people, employees or others involved in the event such as:

- child death or serious injury (including expected death)
- a missing child (extreme risk)
- abuse and/or neglect in out of home care
- allegations of serious criminal offences
- serious threats to the safety of a site or person
- staff death or serious injury.

If the child or young person is in care, as soon as a significant incident is identified, the DCP allocated case worker or supervisor or the manager of the office at which the child or young person is allocated must be contacted.

Any incident of suspected child abuse or neglect must be reported to the Child Abuse Report Line (CARL) during business hours or the Crisis Response Unit (CRU) after hours and potential issues of corruption or misconduct to the Office of Public Integrity (OPI).

In addition to reporting significant incidents, we provide a weekly incident report to DCP for all children and young people we support in our residential services. This includes all incidents and near misses reported.

For more information go to [DCP Significant Incident Management - Requirements for Service Providers](#).

Notifiable incidents (SafeWork SA)

We must notify SafeWork of fatalities and certain serious injuries/illnesses, dangerous incidents or COVID-19 cases that occur at work as a result of the conduct of the business or undertaking. Incidents may relate to anyone at a workplace such as an employee, contractor or member of the public.

A serious injury or illness of a person includes

- where the person requires immediate treatment as an in-patient in hospital for any duration.
- immediate treatment for:
 - amputation of any body part
 - serious head, eye or burn injury
 - degloving or scalping
 - spinal injury
 - loss of bodily function
 - serious lacerations
 - medical treatment within 48 hours of exposure to a substance.

For further information on notifiable incidents go to [SafeWork SA workplace incidents](#).

Electrical shock incident (OTR)

Where an incident involves the electric shock of an employee, customer or visitor, we must report this to the Office of the Technical Regulator (OTR). This would be in addition to reporting to any of the external agencies listed above.

The OTR can be contacted by phone on 8226 5518 (Monday to Friday, 8.00 am to 4.30 pm). Electrical shock incidents must be notified to the OTR

- immediately by phone, in the case of a death
- within 1 working day of an incident requiring medical assistance
- within 10 working days of any other case.

Incident management approach

It is everyone's responsibility to ensure the safety and wellbeing of our customers. We foster a culture of continuous improvement with a proactive approach to managing incidents.

Incident management system

Our incident management system (IMS) provides a systematic process for recording and monitoring all incidents. All employees must report any incident in our IMS as soon as practicable. Key employees can review incidents within the IMS as soon as an incident is submitted. Incidents are allocated in the IMS to the relevant owner each

working day by the Quality, Risk and Compliance team. Our Incident Review Group (refer below) reviews incidents to assess and escalate as required. Our Quality, Risk and Compliance Committee, Clinical and Care Governance Committee, Reducing Restrictive Practices Committee and Workplace Health and Safety Committee review incident data and reports to identify patterns or issues that may require a review of policy or change in work processes and practices.

Incidents are updated in the IMS to show accountability and transparency of decisions made and actions taken in relation to each incident.

Incident classification

The Senior Manager Specialist Services or the Quality and Compliance Officer(s) are responsible for reviewing and classifying every incident into one of the following three categories:

- **Reportable** – Serious incidents or alleged incidents that are reportable to the NDIS Commission. Specific types of reportable incidents include:
 - The death of a person with disability.
 - Serious injury of a person with disability.
 - Abuse or neglect of a person with disability.
 - Unlawful sexual or physical contact with, or assault of, a person with disability (excluding, in the case of unlawful physical assault, contact with, and impact on, the person that is negligible).
 - Sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity.
 - The use of an unauthorised restrictive practice in relation to a person with disability
- **Significant** – An incident that involves potential harm to self or another, in terms of physical, emotional or psychological distress. Behaviour which is out of character and raises concerns.
- **Minor** – Minor or moderate behaviour which is consistent and is not out of character.

Assessment and investigation

Any incident will be initially assessed, to determine the severity and to establish the need for, and scope of, an investigation. If an incident is a reportable incident, an internal investigation will take place. All investigations will be undertaken and conducted in accordance with principles of natural justice and procedural fairness.

The Senior Manager Specialist Services or the Quality and Compliance Officer(s) will send an acknowledgement letter to notify the customer or their nominee of any Reportable and Significant incidents.

Incidents involving criminal allegations will be reported to law enforcement, who will receive full support of the organisation in their investigations.

Whenever an investigation into an incident is conducted, it should:

- Establish the cause of the incident
- Establish the effect of the incident
- Include consultation with the customer/family/advocate
- Identify organisational processes that contributed to or did not function in preventing an incident
- Identify changes the organisation can make in order to prevent further incidents from occurring
- Ensure everyone involved in the investigation understands their role and responsibilities and will be accountable for decisions or actions taken in regard to an incident.

- Information related to incident investigations, including records of phone conversations, emails, documents and, where possible, records of face-to-face interviews will be recorded and kept in strict confidence.

Incident resolution

Based on the incident assessment, Access4u may undertake remedial action proportionate to the severity of the incident, including but not limited to:

- Providing an apology
- Disciplinary action
- Financial compensation
- Access4u will inform and involve participants, family and advocates in the process of incident management and resolution.
- For all reportable and significant incidents, The Senior Manager Specialist Services or the Quality and Compliance Officer(s) will write to the customer or their nominee with details of the investigation and conclusion.

Incident register and review

Access4u keeps an accurate register of all incidents that occur in relation to the provision of services. Each entry in the register contains:

- A description of the incident
- A determination of whether or not the incident is a reportable incident
- Where possible, time, date and location
- Names or initials of the people involved
- Details of the incident assessment, including notifying the customer or their nominee
- Actions taken in regard to the incident (eg. changes to services, review of policy or procedure, staff training).

The organisation will review this information every month to understand trends, address systemic issues and inform improvement activities. This information will be summarised in a monthly incident report and provided to the Board.

Records will be kept for a minimum of seven years.

Incident Review Group

The primary purpose of the Incident Review Group (IRG) is to ensure a systematic approach to the review and management of all incidents, through the provision of appropriately qualified and/or experienced leadership and advice, to reduce avoidable harm and safeguard customers and employees.

The IRG operates on the principles of challenge and transparency, acknowledging the benefits of different views and expertise, for the purpose of safeguarding and continuous improvement.

Our Incident Review Group (IRG) reviews all relevant incidents recorded in our IMS. The IRG identifies any incident that requires further investigation and determines any notifiable incidents.

The IRG provides monthly incident reports to our Quality, Risk and Compliance Committee.

For more information go to our Incident Review Group Terms of Reference.

Principles for zero harm incident management:

Access4u has adopted the following guiding principles that support zero harm:

- The management of incidents is respectful of and responsive to, a Customer's preferences, needs and values, while supporting their immediate and ongoing personal safety and the safety of any impacted stakeholders, as well as Customer's ongoing wellbeing and their right to exercise choice and control
- Customers are able to engage an advocate of their choice at any stage of the incident management process
- The management of the incident aims to identify the root cause behind the incident and reveal contributing factors to seek to prevent similar incidents from re-occurring.
- Natural justice, procedural fairness, privacy, confidentiality and respect apply to all parties involved in a Customer related incident
- The nature of the investigation or actions following an incident are in proportion to the actual or potential harm caused to the Customer/s and any risk of future harm to Customers.
- Incident reporting is actively encouraged and supported through education of Customers, carers, families, guardians, other stakeholders and all staff
- Customers and their representatives provide feedback into the incident management policies, procedures and systemic improvement opportunities

Incidents will be appropriately prevented and managed by ensuring:

- Incidents (or allegations) that are deemed to be Reportable Incidents under the NDIS Incident Management and Reportable Incident Rules (2018) are reported to the NDIS Commission in accordance these rules and the NDIS Quality and Safeguarding Framework (2016)
- Customers are provided with information about the Incident Management Policy, how to report incidents, the incident management process and their rights to an advocate of their choice at any stage of the incident management process or at any time during the provision of services and supports in a manner tailored for them
- Appropriate procedures, guidelines, business processes are in place to manage incidents and identify and address any systemic issues requiring improvement.
- Employees are provided the training and support required to respond to and manage Customer incidents in accordance with this Policy.
- We promote a culture of open reporting and ensure that all workers understand that they are supported to report any incident or alleged incident, and that there will be no negative consequences for doing so.
- Governance processes are in place where incidents are reported and managed using our internal systems so that appropriate internal and external reporting and monitoring can occur, trends and patterns can be identified and systemic improvements are monitored to ensure they are implemented effectively
- Incidents are treated as a learning opportunity, where we seek to understand what may have gone wrong and how we can prevent it happening again at individual and whole of business level, including seeking Customer, family and carer input into improvement actions.
- Workers and participants will be protected against any adverse actions as a result of reporting or alleging that an incident has occurred.

Open disclosure

When an incident occurs we communicate openly with our customers and their families, ensuring that communication with, and support for all affected persons occurs in a supportive and timely manner. Our open disclosure procedure provides a framework for a standard approach to open disclosure across our organisation.

For more information go to our open disclosure procedure.

Risk management

Our risk management system supports the elimination or minimisation of organisational risks identified through our incident management system.

For more information go to our risk management framework.

Incident management training

All employees receive training on reporting, responding to and managing incidents in line with their role and delegations.

Review and continuous improvement

We review the operation of our IMS regularly to ensure it is delivering effective outcomes and to look for improvements in our processes.