



HS12	Healthy and Safe Services	Client Incident Reporting Policy and Procedures
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<b>What this policy aims to do</b>	Make sure that we appropriately identify and notify, investigate and act and report as required any incidents which occur during service delivery
<b>Who this policy applies to</b>	All employees of MASS, service users, their families and advocates
<b>Who is responsible for carrying out this policy</b>	All MASS staff
<b>What words used in this policy mean</b>	<p><i>'Client Incident'</i> is an unplanned and unexpected event that injures or harms or has the potential to do so. It occurs regardless of whether a staff member is present or witnesses the event; it can be actual or alleged; and may be accidental or deliberate</p> <p><i>'Reportable Incident'</i> as identified by the Detailed Guidance for Registered NDIS Providers (June 2019)</p> <p><i>'Incident Report'</i> refers to an official written report by those involved in or witnessing the incident and describes the event</p> <p><i>'Incident Management System'</i> is the system in place to identify and notify, investigate and act and report serious incidents or alleged incidents which result in harm to an NDIS participant and occur in connection with NDIS supports and services.</p>

<b>Legislation this policy is based on</b>	<a href="#">National Disability Standards</a> <a href="#">DHHS Human Services Standards</a> <a href="#">DHHS Critical Client Incident Management Instruction, technical update 2014</a> Victorian Child Safe Standards NDIS (Incident Management and Reportable Incidents) Rules 2018
<b>Other relevant policies</b>	HS5 Freedom from Abuse and Neglect HS1 Client Health Care Needs HS15 First Aid HS2 Medication Safety HS7 Privacy and Information Sharing HS14 Childsafe A8 Providing Personal Care to Clients MS12 Workplace Health and Safety MS16 Transporting Clients MFE1 Emergency Management

Version	Date	Author/Editor	Approved by	Notes
1.0	26/8/2016	Peter Lane		
1.1	31/5/2018	D Stephenson		Update format
1.2	7/3/2019	D Stephenson		Review for audit
1.3	19/5/2020	S Walker	S. Reeves	Updated NDIS requirements

## Client Incident Reporting Policy

People with disability have the right to live a life free from abuse, neglect, exploitation and violence therefore a Client Incident Report is required for all incidents occurring at MASS or during service delivery that involve and/or impact upon clients. This includes all incidents that occur:

- While a staff member is with the client; this will sometimes be in the client's home
- When the client attends a service provider premises, including offices, residential services, respite facilities or day services
- When a staff member is providing in-home support or support in the community with the client
- Onsite at the service, including inside and around the building and locations that are within view of staff.

If a service provides 24-hour care (for example, residential care or statutory child protection) a report is required for all incidents involving clients of this service regardless of location.

If a service does not provide 24-hour care, client incidents occurring outside of service delivery may also need to be reported.

MASS implements and maintains a system to record and manage certain incidents that happen in connection with providing supports or services to people with disability.

The incidents that must be recorded and managed are:

- (a) incidents that have, or could have, caused harm to a person with disability receiving supports or services; and
- (b) acts by a person with disability that happen in connection with the provision of supports or services and that have caused serious harm, or a risk of serious harm, to another person; and
- (c) reportable incidents that are alleged to have occurred in connection with the provision of supports or services.

MASS will keep records about incidents and document in our incident management system. Copies of the documented system will be available to certain people, including workers and persons with disability receiving supports or services from MASS.

As MASS works within the guidance of a number of peak bodies, incidents deemed 'Reportable' must be reported to the Director or Team Leader immediately and where relevant to the NDIS Quality and Safeguards Commission, DHHS (CIMS and RIDS) and the Commission for Children and Young People (CCYP), where applicable within the prescribed timelines for each body. The Director will inform the Board of all Reportable Incidents.

## Client Incident Reporting Procedures

### Roles and responsibilities:

- ☑ All MASS staff will be trained in and understand what a 'reportable incident' is:
  - (a) incidents that have, or could have, caused harm to a person with disability receiving supports or services; and
  - (b) acts by a person with disability that happen in connection with the provision of supports or services and that have caused serious harm, or a risk of serious harm, to another person; and
  - (c) reportable incidents that are alleged to have occurred in connection with the provision of supports or services.

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:

- 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 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 or a behaviour support plan for the person.

The incident management system sets up procedures for identifying, assessing, managing and resolving incidents. These procedures specify things such as the people to whom incidents must be reported, how people with disability affected by an incident will be supported and involved in resolving the incident and when corrective action is required. An incident report is respectful of, and responsive to, a person with disability's preferences, needs and values while supporting the person's safety and wellbeing

- ☑ Identify and Notify: When reportable incidents occur, staff present are expected to take responsibility for the following:
  - Responding to the immediate needs of individuals involved, clients, staff and members of the public
  - Taking any remedial action necessary to re-establish a safe environment (this is the first priority where safety is threatened)

- Communicating with the Director or appropriate Team Leader and the family of people affected by the incident in order that they can provide timely support for the person with a disability
- Reporting the incident in accordance with this Procedure
- ☑ Investigate and Act: The Director or appropriate Team Leader will take responsibility for:
  - Undertaking follow up actions in relation to individual incidents
  - Ensuring all mandatory reporting to police, NDIS Quality and Safeguard Commission, DHHS and CCYP is completed within the prescribed timeframes and that the correct procedure to ensure the wellbeing and safety of those involved is followed
  - Implementing a formal or informal Investigation as required
  - Reviewing incident information over time to identify lessons and practice implications
  - Generating and implementing strategies and action plans and monitoring and reviewing the effectiveness of actions taken
  - Ensuring the Board is informed of the incident while maintaining client confidentiality
  - Completing a Final Report where required

### Written incident reports:

- ☑ The members of staff present are required to take responsibility for completing a Client Incident Report Form and providing a copy to the Director or responsible manager (copy of Client Incident Report Form is provided at Attachment A).
- ☑ All sections of the Incident Report Form are to be completed without exception. If a section does not apply, the words 'not applicable' should be entered in the appropriate place
- ☑ Where identified as appropriate a De-Brief Session will be scheduled for clients involved in an incident, this session will be run by the Director or a Team Leader and the client's independent person will be invited to this session.
- ☑ Where identified as appropriate a De-Brief Session will be scheduled for all staff involved in an incident, this session will be run by the Director or a Team Leader and it is compulsory for all staff involved to attend.
- ☑ The original Client Incident Report Form must be retained in the Incident Report Register and a copy placed in a client's file.

### Reporting:

If a staff member providing services becomes aware of an incident, they have a duty to notify the Director or Team Leader as soon as possible.

When staff become aware of a reportable incident they must:

- ☑ Record the details of what the impacted person (or other person) has told them, using their exact words if possible

- ☑ Be sure not to interview the person who allegedly committed the abuse. However, if a worker witnesses any abuse, they must record what they have seen and heard
- ☑ Record details of any witnesses
- ☑ Record what has been seen and following actions
- ☑ Be sure not to include anything that was not directly heard or seen

The Director or Team Leader will work with clients and staff to complete the relevant reporting as specified by **NDIS Commission**:

### **Immediate notification form**

The Immediate Notification Form (available both as a written form and an online form) must be completed by MASS within 24 hours of becoming aware of any reportable incident or allegation occurring, except for an unauthorised use of a restrictive practice or the use of a restrictive practice which is in accordance with an authorisation of a State or Territory but which is not in accordance with a behaviour support plan.

All reportable incidents, including the use of a restrictive practice causing serious injury, must be notified to the NDIS Commission within 24 hours of you becoming aware of the incident. Any unauthorised use of restrictive practices not causing serious injury must be notified within 5 days.

### **Reportable incident: Five Day notification**

The Five Day Notification form must be completed by MASS within 5 business days of becoming aware of a reportable incident or allegation of the use of an unauthorised restrictive practice or the use of a restrictive practice in accordance with an authorisation of a State or Territory but not in accordance with a behaviour support plan (section 21 of the NDIS Rules); and as a follow up notification for all other reportable incidents (section 20 of the NDIS Rules).

The reportable incident Five Day notification form requires MASS to provide information from the immediate notification form as well as the following additional information:

- The name and contact details of the support person for the impacted person with disability
- The name and contact details of the individual or person with disability who is the subject of allegation
- A description of the impact on, or harm caused to, the person with disability
- The name and contact details of any witnesses to the reportable incident
- A description of support provided and further action being considered for the person with disability impacted by the incident and for the subject of the allegation
- A description of the risk processes being undertaken by MASS
- If applicable circumstances surrounding the death of a person with disability
- If applicable details surrounding the use of unauthorised restrictive practice in relation to a person with disability

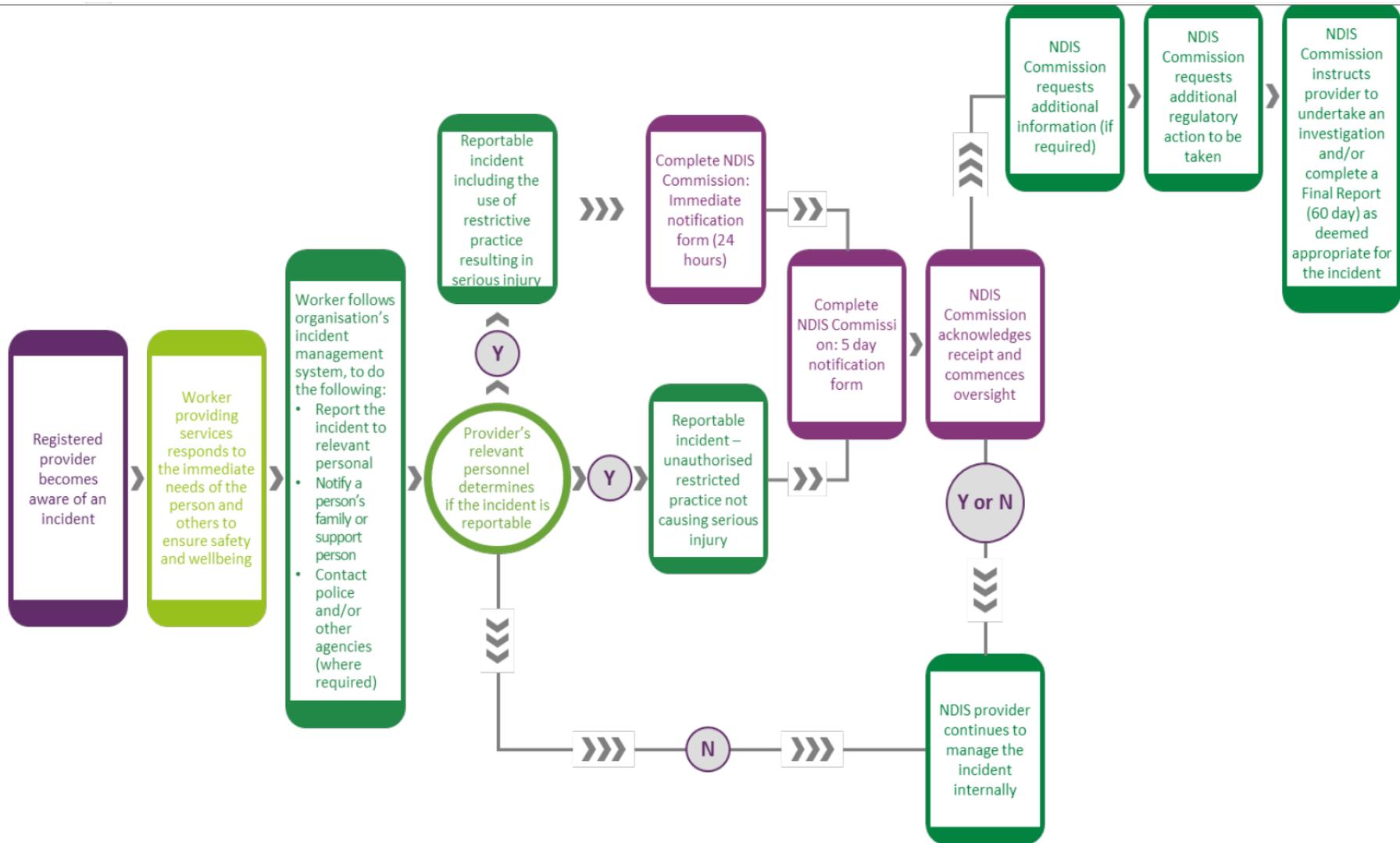
### Longer-term actions

MASS management will:

- Review the Incident Report Register regularly to ensure any identified risks are managed and remedial actions have been taken, identify other potential risks and put in place preventative strategies to minimise occurrence
- Ensure that all incidents are reported to the Board so that it is informed of the nature/ frequency of incidents; and can ensure risk minimisation strategies are implemented

A summary document outlining the NDIS Reportable Incidents notification process is attached below. Source <https://www.ndiscommission.gov.au/document/596>

**NDIS Reportable Incidents Notification Process**





## Client Incident Report Form

### Part 1: Reporter details

Staff Members Name: \_\_\_\_\_

Participant (P) /Witness (W) /Victim (V): \_\_\_\_\_

### Other Staff Involved/Present:

\_\_\_\_\_

### Part 2: Incident Details

Date of incident: \_\_\_\_\_ Time of incident: \_\_\_\_\_ AM PM

For incidents involving assault:

- client to client                       client to other  
 staff/carer to client                       other to client  
 client to staff/carer

### Part 3: Who was involved?

Client 1	Client 2 (if applicable)
Family Name:	Family Name:
First Name:	First Name:
Participant (P), Witness (W), Victim (V)	Participant (P), Witness (W), Victim (V)
Injured Yes (Y), No (N)	Injured Yes (Y), No (N)
Medical Professional Required: Yes(Y), No(N)	Medical Professional Required: Yes(Y), No(N)

### Part 4: What happened?

Setting/Address (where did the incident occur?):

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Trigger (what happened just before?):

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Action (What happened during the incident?):

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Response (What happened after the incident?):

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Attachment A - Client Incident Report Form

\_\_\_\_\_

Was a restrictive intervention used? Yes No

If Yes, please tick chemical (PRN)  locked door  physical  mechanical

If Yes, if door locked. Please indicate for how long: \_\_\_\_\_

If you were injured did you have to stop work Yes No

What was the injury (please describe):

\_\_\_\_\_

If Yes, what was the date: \_\_\_\_\_ time: \_\_\_\_\_

Was first aid given Yes No

If yes, by whom \_\_\_\_\_

Was any property or equipment damaged? Yes No

Details of damage: \_\_\_\_\_

Signature of reporter: \_\_\_\_\_ Date: \_\_\_\_\_

Reported to (name of Manager/On Call) \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

**Part 5: Managers Report**

What actions have been taken and what follow up will be taken in response to the incident?

<p>De- Brief Scheduled <input type="checkbox"/>Yes <input type="checkbox"/>No Date: _____</p> <p>Medical Appointment <input type="checkbox"/>Yes <input type="checkbox"/>No Date: _____</p> <p>Assessment of Incident added to Team Meeting Agenda <input type="checkbox"/>Yes <input type="checkbox"/>No Date: _____</p> <p>This has been recorded on ProSims <input type="checkbox"/> - all Incidents</p> <p>NDIS Q &amp;S <input type="checkbox"/> - Date: _____</p> <p>RIDS <input type="checkbox"/> - State funded Clients Only</p>
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Signature of Manager: \_\_\_\_\_ Date: \_\_\_\_\_