



1.3 INCIDENT MANAGEMENT POLICY AND PROCEDURE

1.0 Purpose

To ensure that each participant is safeguarded by the provider's incident management system, ensuring that incidents are acknowledged, responded to, well-managed and learned from.

2.0 Scope

The policy applies to:

- ESG Inclusive Homes employee and workers, whether permanent or casual, contractors, volunteers, and stakeholders
- All participants, their families, carers and/or advocates.

3.0 Definitions

Terminology	Definition
Impacted person	A person with a disability who has been affected by an incident that has occurred during the provision of NDIS supports and services.
Incident	<p>An incident is defined as an act, omission, event, or circumstance. It may mean any of the following:</p> <ul style="list-style-type: none"> - Acts, omissions, events, or circumstances that occur in connection with providing NDIS supports or services to a person with a disability and have, or could have, caused harm to the person with a disability - Acts by a person with a disability that occur in connection with providing NDIS supports or services to the person with a disability and which have caused serious harm, or a risk of serious harm, to another person; or - Reportable incidents that have or are alleged to have occurred in connection with providing NDIS supports or services to a person with a disability.
Near Miss	An incident that occurs at which although not resulting in any injury, illness, or damage, had the potential to do so.
Reportable Incident	<p>Reportable incidents are serious incidents or alleged incidents which result in harm to a NDIS participant and occur in connection with NDIS supports and services delivered by the registered NDIS provider.</p> <p>Specific types of reportable incidents include:</p> <ul style="list-style-type: none"> - 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 - 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.
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4.0 Policy

ESG Inclusive Homes has a comprehensive and effective incident management system in place to ensure each participant is safeguarded by ESG Inclusive Homes incident management system that complies with the requirements of the *National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018*.

ESG Inclusive Homes will promote a supportive incident management system where participants are provided with information on incident management including how incidents involving the participant have been managed and to allow for ESG Inclusive Homes to identify areas for improvement, coordinate a consistent approach to incident management, reduce the potential for future incidents to occur and allow for reporting and efficient allocation of resources.

On initial engagement with ESG Inclusive Homes, all participants will be provided with a *Participant Handbook* which provides detailed information on ESG Inclusive Homes incident management processes and contact information for both ESG Inclusive Homes and relevant external agencies.

ESG Inclusive Homes information management processes and other related resources will be displayed at all ESG Inclusive Homes locations and be available in easy-to-read formats and alternative languages on request. Information surrounding how to access an advocate or interpreter will also be provided.

All personal information ESG Inclusive Homes collects to ensure effective incident management complaints will be handled in accordance with ESG Inclusive Homes *Privacy and Confidentiality Policy and Procedure* and *Information Management Policy and Procedure* and other relevant legislation.

4.1 Responsibilities

4.1.1 Responsibilities of the Director and/or Appointed Delegate

- Primary accountability for this *Information Management Policy and Procedure*
- Internal and external audits, schedules, and reviews
- Ensure all employee, volunteers and contractors undergo National Police Check screening and all other mandatory checks as per ESG Inclusive Homes *Human Resources Policy and Procedure*; and
- Ensure availability of comprehensive incident management training that provides an understanding of incident management including how to respond to an incident and obligations for mandatory reporting.

4.1.2 Responsibilities of All ESG Inclusive Homes Management Employee

- Implement incident management training for all employees
- Undertaking annual employee performance reviews; and
- Ensure the timely and efficient response to all incident management concerns raised by ESG Inclusive Homes employees, participants, and other stakeholders.

4.1.3 Responsibilities of All ESG Inclusive Homes Employees

- Ensure privacy and confidentiality is always upheld
- Keeping up-to-date and complying with any relevant changes in legislation and practices in relation to this *Information Management Policy and Procedure*

- Undertake comprehensive incident management training including how to respond to an incident, recognising symptoms and signs of abuse and obligations for mandatory reporting
- Protecting the rights, confidentiality and privacy of participants and encourage their participation in decision-making; and
- Ensure the timely and efficient reporting of incidents to management and submission of *Incident Forms* and reporting obligations.

4.2 Training

On initial engagement with ESG Inclusive Homes, all employees will undergo comprehensive induction training on ESG Inclusive Homes incident management processes as well as receive a copy of ESG Inclusive Homes *Employee Handbook* which contains a succinct version of ESG Inclusive Homes *Incident Management Policy and Procedure* for reference.

Employees will also receive annual incident management refresher training to ensure all workers are aware of, trained in and comply with the required procedures in relation to incident management and to ensure that best practice outcomes are maintained.

Employees are required to complete an annual performance development review which is designed to assess employee awareness of incident management and their roles and responsibilities surrounding these processes. Additional on-the-job and formal training will be provided where required.

4.3 Meeting Minutes

Incidents are recorded in the *Incident Register*, the *Quality and Continuous Improvement Register* and are included as a discussion topic at every team meeting and subsequently recorded on a *Meeting Minutes Form* and where relevant, forwarded to ESG Inclusive Homes employees. Feedback from both the perspective of participants and ESG Inclusive Homes employees on ESG Inclusive Homes incident management system is continuously sought, discussed, and implemented throughout all aspects of ESG Inclusive Homes.

5.0 Procedure

5.1 Incident Management Procedure

5.1.1 Step 1 – Immediate Response

1. Assess the situation and check for danger. Remove the participant from danger if it is safe to do so and ensure the participant's immediate safety needs are met.
2. If the participant requires immediate medical attention, a medical practitioner or ambulance must be called (call Emergency Services on 000).
3. Where an employee is accused or suspected of harming the participant, any medical practitioner called must be independent to ESG Inclusive Homes. The employee in question must be removed from contact with all participants pending an investigation.
4. If another participant is accused or suspected of harming the participant, where possible, they must be removed from contact with other participants pending an investigation.
5. If the participant has injuries that do not require immediate attention, support the person to see a doctor for assessment and treatment of any injuries, including psychological trauma
6. Contact the participants next of kin:
 - If the participant is under 18
 - If over 18 but in need of an advocate
 - If a participant has a legal guardian
 - Inform them of the incident; or
 - If next of kin is the abuser, correct measures must be taken with police.
7. If the incident involves an alleged criminal act, determine whether to contact Victoria Police.
8. Employees must preserve any physical or documentary evidence that may be critical to an investigation by Police or ESG Inclusive Homes; and

9. Provide appropriate support to the participant such as victim support services (counselling, legal aid etc).

Further information about responding to incidents where the participant is an adult with disability or mental illness is provided on:

- OPA's website - www.publicadvocate.vic.gov.au
- The Disability Services Commissioner's website - www.odsc.vic.gov.au

5.1.2 Step 2 – Inform of Incident

1. Employees are to report the incident to the Director and/or appointed delegate; and
2. Complete an *Incident Report Form* that identifies and records details relating to the incident.

5.1.3 Step 3 - Investigation

1. The Director and/or appointed delegate will determine if the information on the *Incident Report Form* meets the criteria to be classified as a reportable incident to the NDIS Commission.
2. The Director and/or appointed delegate will review details of the incident including:
 - People involved
 - Location
 - Severity of the incident - Major impact incidents in the following categories must be investigated:
 - Physical abuse
 - Sexual abuse
 - Financial abuse
 - Emotional/psychological abuse
 - Poor quality of care; and
 - Unexplained injury (to determine whether there has been any abuse or neglect that caused the injury).
 - Injury or illness determination
 - Circumstances; and
 - Outcome.

5.1.4 Step 4 - Reporting

- For every incident, the Director and/or appointed delegate must appoint an Investigation Manager to oversee the investigation of the incident
- ESG Inclusive Homes must notify to the NDIS Commission of all reportable incidents (including alleged reportable incidents) that occur in connection with all supports and/or services delivered as per the timeframes stipulated by the NDIS Commission listed below:

Reportable Incident	Required Timeframe
Serious injury of a person with disability	24 hours
Death of a person with disability	24 hours
Abuse or neglect of a person with disability	24 hours
Unlawful sexual or physical contact with, or assault of, a person with disability	24 hours
Sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity	24 hours

The use of a restrictive practice in relation to a person with disability if the use is not in accordance with a required state or territory authorisation and/or not in accordance with a behaviour support plan	Five business days
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- Notifications made to the NDIS Commission relating to a reportable incident should be made through the NDIS Commission Portal at <https://www.ndiscommission.gov.au/providers/how-notify>
- The Investigation Manager must notify and update the participant and their next of kin with updates about the investigation progress as it occurs.
- All investigations must be completed (including report finalisation) within 28 working days of receiving confirmation of the appropriate investigative action from the NDIS Commission.
- If the NDIS Commission requires an investigation report to be completed, this must be submitted to the NDIS Commission within 60 days of the initial incident report and sent to reportableincidents@ndiscommission.gov.au
- All appropriate information must be recorded in ESG Inclusive Homes *Incident Register*.

5.1.5 Step 5 - Incident Analysis and Corrective Action Measures

Incident data analysis includes the monitoring, interrogating, and acting on trends identified through the analysis of incident information. The purpose of analysing incident data is to learn from patterns of participant incidents to safeguard the safety and wellbeing of individual participants, as well as improve the quality of services and the service system. The information gained from an incident will be incorporated into ESG Inclusive Homes *Continuous Improvement Plan* to enable prevention of the incident or accident in the future.

The Director and/or appointed delegate must undertake an analytical review of the reportable incident including:

- Determining the cause of the incident
- Ascertaining if the incident was an operational issue
- Consulting with participants and relevant stakeholders to design specific risk control mechanisms to reduce any risks to the participant and their environment
- Whether the incident could be prevented
- How the incident was managed and reviewed
- Remedial action to prevent future incidents; and
- Planning for employee training in these new strategies.

All incidents will be reviewed by the management team monthly to determine if there are any trends or preventive measures that ESG Inclusive Homes can take to prevent future incidents. If trends or measures are identified, these will be tracked in the *Quality and Continuous Improvement Register*.

5.2 Record Management

ESG Inclusive Homes is committed to ensuring transparency, accountability, and continuous improvement in our operations. As part of this commitment, ESG Inclusive Homes maintains comprehensive records of all incidents and complaints for a period of seven years. This practice allows us to effectively analyse and investigate any reported incidents or complaints, ensuring that necessary actions are taken to prevent their recurrence in the future. Keeping records for seven years also aligns with legal and regulatory requirements, providing ESG Inclusive Homes with the necessary documentation to demonstrate our commitment to addressing concerns promptly and professionally. Maintaining such records is integral to fostering trust, accountability, and quality service within our organisation.

6.0 Related Documents, Legislation, Regulations and Standards

- *Incident Form*
- *Incident Register*
- *Risk Register*
- *Risk Assessment Form*
- *Participant Handbook*
- *Quality and Continuous Improvement Register*
- *Quality and Continuous Improvement Plan*
- *Privacy and Confidentiality Policy and Procedure*
- [National Disability Insurance Scheme Act 2013](#)
- [National Disability Insurance Scheme \(Complaints Management and Resolution\) Rules 2018](#)

7.0 Policy Review

This *Incident Management Policy and Procedure* will be reviewed on an annual basis to ensure that ESG Inclusive Homes operates in accordance with legal, regulatory and company standards. This process will include a review and evaluation of current practices and service delivery types and locations, relevant policies and procedures, forms and registers and will incorporate all ESG Inclusive Homes employee, participant, and other stakeholder feedback.

ESG Inclusive Homes *Quality and Continuous Improvement Register* will be used to record and monitor progress of any improvements identified and where relevant feed into service planning and delivery processes.

ESG Inclusive Homes may make changes to this *Incident Management Policy and Procedure* at any time to allow for continual improvement, evaluation, and implementation of best practices to improve the effectiveness of its operation.