

## INCIDENT RESPONSE, REPORTING AND INVESTIGATION POLICY

#### 1. PURPOSE

The purpose of this policy is to ensure that incidents involving Lift Up Voices' participants and/or staff members are responded to, reported, investigated and finalised in an effective and timely manner, and in accordance with legislative and contractual requirements.

In addition, the policy and procedure outlines how Lift Up Voices will:

- Address the physical and psychological needs of a participant following an incident in order to reduce the impact of the incident and maximise their wellbeing, and;
- Seek to prevent incidents occurring through systematic review and analysis of incident trends and implementing improvement initiatives.

This policy supports the NDIS Practice Standards, *Provider Governance and Operational* Management Core Module, in relation to *Incident Management*. It also aligns with the NDIS (Incident Management and Reportable Incidents) Rules and the NDIS Amendment (Getting the NDIS Back on Track No.1) Act 2024, which strengthen provider obligations to protect participants and respond transparently to all incidents.

#### 2. SCOPE

This policy applies to the Directors, staff and volunteers of Lift Up Voices. This policy also applies to all contractors, students and any person engaged by Lift Up Voices to provide NDIS supports or services.

This policy applies to all settings where Lift Up Voices services are delivered, including our studio premises and any approved offsite environments such as participant homes. All incidents, hazards, near misses or emergency situations—regardless of location—must be reported, documented and responded to in line with this policy and the NDIS Practice Standards. Offsite staff are expected to follow the same reporting procedures as onsite staff and must ensure that appropriate safety and communication protocols are in place.

In the event that the incident relates to either suspected, observed or alleged abuse or neglect of a participant, the requirements contained in the *Abuse, Neglect and Exploitation Policy* must also be complied with.

#### 3. DEFINITIONS

**Incident** is an event that has the potential to or actually causes injury, harm or other adverse impacts to participants or staff members and/or an event where a staff member or participant contributes to the potential or actual injury, harm or other adverse impacts to others.

Incident severity: incidents are only categorised as "high" or "low"

**Reportable incident:** as per the NDIS Quality and Safeguard Commission Incident Management System guidelines, reportable incident is:

- The death of a person with a disability
- Serious injury of a person with a disability
- Abuse or neglect of a person with a disability
- Unlawful sexual or physical contact with, or assault of, a person with a disability
- Sexual misconduct committed against, or in the presence of, a person with a disability, including grooming of the person for sexual activity
- The use of an unauthorised restrictive practice in relation to a person with a disability.
- Note: Reportable incidents are only required to be reported to the NDIS Commission if they occur
  in connection with the provision of NDIS supports or services by a registered provider.

**Serious incident** (or "high" incident severity): any incident that has the potential to, or results in, a serious outcome for participants/staff or where a participant/staff contributes to potential or actual serious outcomes to others. These include but are not limited to:

- Death
- Abuse and neglect including concern for a person's welfare and suspected abuse
- Serious physical injury
- Serious illness
- Attempted suicide of a participant
- Dysphagia incidents including choking and aspiration
- · Near miss incident that could have resulted in a serious outcome
- Any incident where emergency services are called
- Participant as a missing person
- Participant behaviours of concern that had the potential to, or resulted in, a serious outcome for another person
- · Any incident resulting in a significant disruption to services
- An incident with reputational or legal risk for the organisation

**Minor incident** (or "low" incident severity): any incident that threatens the health, safety and/or wellbeing of participants/staff members where a participant/staff member contributes to a situation that threatens the health, safety and/or wellbeing of others. These include but are not limited to:

· Participant/staff behaviours of concern resulting in minimal impact on themselves or others

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Minor injury

**Staff:** for the purpose of this policy, staff refers to paid employees, contractors, Directors, volunteers and students.

#### 4. POLICY AND PROCEDURE

All incidents must be reported by staff in accordance with this policy.

## 4.1 Incident response and reporting

At the time a staff member becomes aware of an incident, either at the time it occurs or subsequent to the event, they must immediately:

# 4.1.1 Protect the individual from further harm

Staff members who fail to responds immediately and protect the individual from further harm following an incident are in breach of duty of care and this policy, and may be subject to disciplinary action.

#### 4.1.2 Apply and seek first aid and contact emergency services

Apply or seek first aid if required and contact the Ambulance service on 000 in the event that the individual sustains a serious injury requiring medical treatment or is in urgent need of medical help.

The SA Police must be called immediately on 000 in any situation where:

- Life or serious injury is threatened;
- Where there is a threat of danger to people or property;
- When a serious crime is in progress, being witnessed or just committed (for example physical or sexual assault); or
- o Any other situation where urgent SA Police Service assistance is needed.

# 4.1.3 <u>Implement immediate response requirements for suspected, observed or alleged abuse and</u> neglect of participant incidents

Follow the additional steps required for the immediate response to suspected, observed or alleged abuse and neglect of participants as contained in the *Abuse, Neglect and Exploitation Policy.* 

## 4.1.4 Protect evidence

Secure the scene of the incident if appropriate, for investigation purposes.

#### 4.1.5 Contact a Lift Up Voices Director

Contact a Director immediately if the incident is serious. See "Additional steps for serious incidents" below.

#### 4.1.6 Complete an Incident Management Report Form or enter incident details into Splose

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The staff member who identified the incident must, within the shortest practical timeframe of an incident taking place or being identified, either:

- Complete the Incident Management Report Form in Microsoft Word or alternatively, scan a handwritten form and email to team@liftupvoices.com.au or
- If the staff member has access to Splose, enter the details of the incident directly into Splose as a case note and mark as an incident.
- On receipt of an Incident Management Report Form, a Director must enter the details from the Incident Management Report Form or upload a file attachment to the Incident Management Register on Splose within 48 hours from when it was received.
- Incident records must be stored securely, and protected from unauthorised access, in accordance with the Privacy and Confidentiality Policy.

The Incident Management Report includes the following details:

- A description of the incident, including the impact on, or harm caused to the individual;
- If the incident is a reportable 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;
- The names and contact details of the persons involved in the incident and any witnesses to it;
- The actions taken in response to the incident, including action taken to support or assist the individual impacted by the incident;
- If any investigation is undertaken by Lift Up Voices in relation to the incident the details and outcomes of the investigation;
- The name, position and contact details of the person making the record of the incident;
- Nature of the supports or services being provided;
- The seriousness of the incident (include where it is not a reportable incident, but is beyond a simple or minor incident);
- Whether it is part of a pattern of incidents.

All records must be kept for seven years from the day that the record is made.

### 4.2 Additional steps for serious incidents

The following additional steps for serious incidents must be followed. In line with supported decision-making principles, participants should be involved in decisions about how their supports are adjusted following an incident.

## 4.2.1 The staff member who identified the incident must contact a Director

After protecting the individual from further harm, attending to the individual's medical needs and contacting emergency services (if required), the staff member who became aware of the serious incident must immediately make a verbal report to a Lift Up Voices Director either in person or by telephone as soon as practical following their becoming aware of the incident.

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## 4.2.2 The Director must:

- Confirm with the staff member reporting the incident that the incident is a "serious incident" in accordance with the definition contained in this policy.
- Authorise any further contact with the SA Police Service on 000 if an emergency situation still
  exists and where the SA Police Service have not already been called, or contact the SA Police
  Service on 131 444 for attendance in non-emergency situations where it is believed that a crime
  may have been committed.
- Notify the individuals guardians, family or carers
- · Agree on further immediate action to be taken by the staff member reporting the incident.
- Ensure that recommended changes arising from investigations are linked to the Continuous Improvement Register.

## 4.3 Provision of support to participants

Depending on the nature of the incident, participants, their families, their friends or carers must be provided with support where appropriate including referral to specialist organisations, counselling services or by providing information on advocacy services during the course of an investigation.

Additionally, Lift Up Voices will ask the impacted person to provide feedback and input into assessments, investigations and any corrective actions proposed or taken.

Where appropriate, debrief sessions will be offered to participants, staff and witnesses. Participants may also nominate a support person or advocate to be included in post-incident communication and planning.

#### 4.4 Incident investigation

#### 4.4.1 For suspected abuse and neglect incidents

Specific requirements for the investigation of abuse and neglect of participants must be followed and these are located in the *Abuse, Neglect and Exploitation Policy*.

#### 4.4.2 For serious incidents, the Director must:

- Ensure that no internal investigations be conducted which may compromise or prejudice any SA
   Police Service or external agency involvement or investigations in progress.
- Liaise with the SA Police Service if required to assist them in their investigations.
- If no conflict with external investigations exists (e.g. following the conclusion of investigations conducted by the SA Police Service) work with the any relevant staff members involved in the incident to complete an investigation and add the findings of the investigation to the incident created in the Splose participant file within five working days of the initial notification being made. The following information must be included in the Comments section:
  - What immediate response took place;
    - The actions taken to date;

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- The outcome of the investigation and recommended actions required to resolve the incident:
- o An action plan to support participants and their families if appropriate;
- Recommendations to prevent the likelihood of the incident occurring in the future and to improve the response and management of incidents in the event that they reoccur.
- Liaise with relevant government agencies with regards to the incident if required.
- In the event that, as a result of the internal investigation a staff member was found to have breached relevant Lift Up Voices policies and procedures or was found to be criminally responsible, take any necessary disciplinary action.

#### 4.4.3 For minor incidents:

The Director must review all minor incidents, identify any actions required to finalise the incident and to minimise the chance of incidents reoccurring, within seven days of the incident being reported. Full records of incidents, including details of reviews, actions and outcomes must be recorded in Splose.

The Director must add information in Splose regarding the nature of the incident, results of any investigations, actions taken to finalise the incident and actions implemented to reduce the risk of the incident reoccurring.

#### 4.4.4 Whole of service review of incidents

In addition to implementing strategies to prevent incidents reoccurring, the Director must conduct a review of all reported incidents annually to identify themes, trends and factors contributing to incidents. Following these reviews, appropriate improvements aiming to prevent incidents, reduce their impact and improve services must be implemented.

All planned actions to improve services and processes and reduce incidents must be documented in Director meeting minutes and reviewed periodically to ensure that they have resulted in the desired improvement. These reviews will inform staff training needs, policy reviews and service improvement priorities.

### 4.5 <u>Incidents reportable to the NDIS Commission</u>

If an incident is a reportable incident, Lift Up Voices has a legal requirement to notify the NDIS Commission of the incident and keep them informed of any investigation or actions arising from the incident. The NDIS Commission will oversight Lift Up Voices' responses to reportable incidents.

Most reportable incidents must be notified to the NDIS Commission by a Lift Up Voices Director within 24 hours of a provider's key personnel being made aware of it, with a more detailed report about the incident and actions taken in response to it to be provided within 5 business days.

The report must assess:

• The impact on the NDIS participant

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- Whether the incident could have been prevented
- How the incident was managed
- What, if any, changes are required to prevent similar events occurring

A final report may also be required within 60 business days of submitting the five-day report. The NDIS Commission will advise whether a final report is required. Reportable Incident forms are available on the NDIS Commission website. Once a form is completed, it must be emailed directly to reportableincidents@ndiscommission.gov.au.

Where required, Lift Up Voices will follow the Commission's process for submitting additional information, updates or final reports within the portal.

If a restrictive practice was used without appropriate authorisation, a behaviour support practitioner and the relevant state authorisation body will also be notified in accordance with Positive Behaviour Support Capability requirements.

## 4.6 Timeframes for notifying the NDIS Commission about reportable incidents

When a reportable incident occurs, or is alleged to have occurred in connection with the NDIS supports or services you deliver, you must notify us using the NDIS Commission Portal within the required timeframes (set out below). The timeframes are calculated from when a registered NDIS provider became aware that the incident occurred, or was alleged to have occurred.

Reportable Incident	Required Timeframe
Death of a person with disability	24 hours
Serious injury 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	24 hours
disability, including grooming of the person for sexual activity	27110010
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	Five business days
accordance with a behaviour support plan.	

Reporting is required even when you have acted and responded to incidents in accordance with Lift Up Voices' incident management system.

## 4.7 <u>Communication with participants regarding investigation</u>

Participants will be formally acknowledged of an active investigation within two (2) business days of receipt and the investigation resolved and responded to within fourteen (14) days, subject to the Quality and Safeguards Commission. Participants will be regularly updated and advised of progress within agreed

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intervals. If it is perceived that a delay may be experienced, this delay will be clearly articulated in writing to the complainant.

All communication will be made in a format that is accessible to the participant and may involve a support person or advocate. Any outcomes will be clearly explained and documented. Participants will be advised of their right to raise further concerns through the Complaints and Feedback process or with the NDIS Commission.

#### 5. REPSONSIBILITIES

It is the responsibility of the Directors and each staff member to ensure that they remain informed regarding Lift Up Voices policy and procedures which impact upon their duties, and to work within them. Directors are responsible for ensuring all reportable incidents are submitted to the NDIS Commission within the required timeframes.

#### 6. CONTINUOUS IMPROVEMENT

All Lift Up Voices staff members are encouraged to provide feedback on this policy to the Director, to ensure that it remains relevant and continues to reflect the actual manner in which activities are undertaken.

All incident investigations and reviews will be used to identify and document service improvement opportunities. These will be recorded in the Continuous Improvement Register.

#### 7. REVIEW

This policy will be reviewed on a two-year basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly. The policy may also be reviewed following an NDIS Commission notification, audit finding or after a critical incident.

#### **RELATED POLICIES**

Risk Management Policy
Abuse, Neglect and Exploitation Policy
Code of Conduct Policy
Safeguarding for Participants Policy
Compliments, Complaints and Feedback Policy

#### SUPPORTING DOCUMENTS

Risk Management Policy

Incident Management Report Form Incident Management Register Risk Assessment Checklist Continuous Improvement Register

# **RELEVANT LEGISLATION OR STANDARDS**

Disability Discrimination Act NDIS Practice Standards and Quality Indicators (2020) National Disability Insurance Scheme Act (2013)

United Nations' Convention on the Rights of Persons with Disabilities (2006)

NDIS (Incident Management and Reportable Incidents) Rules 2018

NDIS Amendment (Getting the NDIS Back on Track No.1) Act 2024

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