INCIDENT MANAGEMENT POLICY AND PROCEDURE



Purpose and Scope

Cahoots is committed to providing a safe environment for all participants, staff, volunteers, and visitors. Cahoots is committed to establishing a formal process to report and investigate all workplace accidents/incidents and near miss occurrences. This includes all participants, staff, volunteers and visitors. The process includes identifying contributing factors of the accident/incident or near miss and making the necessary recommendations to prevent a recurrence.

The purpose of this policy and procedure is to provide guidelines as far as reasonably practicable to establish the process for reporting, investigating and applying appropriate control measures when an accident, incident or near miss occurs in a timely manner.

This policy and procedure replaced the Incident and Hazard Management Reporting and Recording Procedure.

This policy and procedure applies to all participants, staff and volunteers.

The Operations Manager is responsible for the implementation of this policy.

Definitions

Incidents are:

- acts, omissions, events or circumstances that occur or could occur during or in relation to
 the provision of supports, or the alteration or withdrawal of supports, that cause harm,
 either physically or emotionally, to a worker, client, or other stakeholder. Incidents also
 include acts, omissions, events or circumstances that have caused or could cause
 damage to property, the environment, material or cause public alarm;
- acts by a person with disability that occur in connection with providing NDIS supports or services to the person with disability and which have caused serious harm, or a risk of serious harm, to another person;
- reportable incidents that have or are alleged to have occurred in connection with providing NDIS supports or services to a person with disability.

Reportable Incidents means an incident involving a Cahoots participant where one or more of the following occurs:

- Death;
- Serious injury;
- Abuse or neglect;
- 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;
- Use of an unauthorised restrictive practice or, the use of an authorised restrictive practice if it is not used in accordance with the participants Behaviour Support Plan.

Participant means a person accessing a Cahoots service, including all potential, current and previous participants of Cahoots.

Worker means a person who carries out work in any capacity for Cahoots, including work as an employee, a contractor or sub-contractor or an intern, trainee or volunteer.

POLICY STATEMENT

The Cahoots incident management system aims to maximise the safety and wellbeing of its participants and workers, while respecting participants needs, values, and preferences. The system aims to be easily understood and accessible for all participants and workers to ensure accountability when dealing with such incidents.

Continuous improvement

The system also identifies any issues which emerge from incident analysis, providing opportunities for continuous improvement and effective risk management. Cahoots will comply with all requirements of the NDIS Commission, and Commonwealth and state legislation in regard to the reporting of critical and reportable incidents or dangerous workplace incidents.

Staff training

Workers will be made of aware of the incident management policy and procedure during onboarding, in staff meetings and through online training for service delivery staff.

INTERNAL PROCEDURES

How incidents are identified, recorded and reported

Incidents may be identified in a number of ways, including where a worker or another person observes the incident, a person with disability makes a disclosure about the incident, or another party informs that the incident occurred.

Whilst some incidents may be easy to identify (witnessing an injury, disclosure being made to a worker, observing a behaviour of concern), others may be harder to identify. Appendix A sets outs the potential indicators and signs associated with particular types of incidents. These are only examples and not an exhaustive list.

When an incident occurs, the first step is to ensure the safety and wellbeing of all people involved in the incident.

A worker should ensure the impacted person is safe from harm:-

- 1. Contact Police if there is a risk of immediate harm which requires their assistance.
- 2. Contact an Ambulance, other relevant service or apply first aid, if required.
- 3. Advise affected person(s) about potential advocates and supports they can access.
- 4. Contact the participant's emergency contact, if required.
- 5. Contact the on-call phone to notify Cahoots management.
- 6. Complete the Cahoots Incident Report Form online (Appendix B illustrates an example incident report form).

Note: if a participant or worker does not wish to participate in a victim interview or provide a witness statement, this decision is to be respected.

The Cahoots Incident Report Form is a digital form accessible via QR code which collects information from the following incident types:

- Behavioural
- Disclosure
- Hazard
- Injury
- Medication
- Near-Miss
- Restrictive Practice
- Vehicle
- Medical Emergency (Seizure, Asthma, Anaphylaxis)

Which people incidents must be reported to

Once a Cahoots Incident Report Form has been completed and submitted, the relevant Coordinator and/or Manager receives the report via email as per Schedule 1 below. The incident is also automatically logged in the Cahoots Incident Register.

The notified worker(s) assess the incident type, risk level and whether further investigation is required internally or whether an external party is required to undertake an investigation. The post-incident assessment criteria is detailed in Schedule 2 below.

If the incident is deemed to be a reportable incident, the Coordinator will notify the Cahoots Quality and Safeguarding Lead who will notify the NDIS Commission via the NDIS Commission portal.

All reportable incidents, except for the unauthorised use of a restrictive practice, must be notified to the NDIS Commission within 24 hours of you becoming aware of the incident.

Any unauthorised use of restrictive practices must be notified within 5 days.

Schedule 1: Incident notification			
Insignificant	Service Coordinator		
Minor	Service Coordinator		
Moderate	Service Coordinator		
	Operations Manager		
Major	Service Coordinator		
	Operations Manager		
	CEO		
0-44	Service Coordinator		
	Operations Manager		
Catastrophic	CEO		
	Board Chair		

Schedule 2: Post-incident assessment
Why the incident occurred
Whether the incident could have been prevented
How well the incident was managed and resolved
What, if any, regulatory action needs to be undertaken to prevent further similar incidents from occurring, or to minimise their impact
Whether other persons or bodies need to be notified of the incident

The Quality and Safeguarding Lead reviews the causes, handling and outcomes of incidents in the Cahoots Incident Register monthly, will look for patterns and report at the Manager's monthly meeting team. This report is then tabled at the next meeting of the Governance, Risk, Audit and Quality Sub-Committee. The Parent and Carer Reference Group will be provided a summary of this report.

How is the impacted person involved in the management and resolution of the incident

Following an incident, the impacted participant(s) and/or their legal decision maker will be:-

- Advised again of their right to an advocate or supports.
- Kept informed and asked to provide feedback of the post-incident assessment, any investigations and corrective actions.

Depending on the severity of the incident, this update will be communicated by a Family Relationship Officer or Cahoots Management.

Investigations

An investigation may be an appropriate response. The following may be reasons to undertake an investigation:-

 The cause of the incident is unknown, or could have been one of a number of factors or a combination of factors.

- The nature and the impact of the incident was significant, and requires investigation to support the safety and wellbeing of people with disability.
- The incident may involve an allegation against a worker and an investigation is required
 to determine what actions are required to manage the potential risk associated with the
 subject of allegation.

Where an investigation is required, the CEO will appoint a Lead Investigator. The Lead Investigator will have no conflict of interests, will maintain independence, and have had no involvement in the incident.

An external body might be engaged as the Lead Investigator if a conflict of interest arises or Cahoots does not have the required expertise.

The Lead Investigator will:

- Be impartial and objective.
- Gather relevant evidence to ensure an in-depth understanding of the incident.
- Establish the cause of the incident.
- Determine its impact.
- Identify operational issues that have contributed to its occurrence and detail an action plan to rectify operational issues.

Corrective actions

Corrective actions may be required following an incident to continuously improve the support Cahoots provides to participants.

A corrective action should be undertaken:

- Where an incident could have been prevented (or the severity lessened) by action (or inaction) by yourself, participant, worker or other person.
- Where there is an ongoing risk to people with disability.
- Where action by yourself may prevent or minimise the risk of a reoccurrence.
- Where a pattern of incidents is identified in the Incident Register.

When corrective actions are required, workers identified in Schedule 1 will consider the details raised in the post-incident assessment (Schedule 2) as well as:

- The views of people with disability impacted by the incident.
- What has been learnt and could be improved.

Corrective actions aimed at reducing the likelihood of similar incidents occurring may include:

- Training and education of workers
- Modification of the environment
- Development or amendment of a policy or procedure
- Changes in the way in which support or services are provided
- Other practice improvements
- Disciplinary action for the worker involved in the incident including ongoing performance reviews, imposing a probationary period, or termination of employment

Restorative actions aimed at repairing a relationship with a person with disability may include:

- Providing ongoing support to the person with disability impacted by the incident.
- Giving an apology to the person with disability involved in the incident.

Corrective actions will be added to the Quality and Risk Action Plan.

The Quality and Safeguarding Lead is responsible for regular review of the Quality and Risk Action Plan and ensuring actions are complete.

Record Management

All records, correspondence and information relating to incidents will be stored securely in Cahoots information management system for a minimum of 7 years.

Records are not to be printed and removed from Cahoots location.

Access to records will be limited to appropriate workers who have a business purpose for doing so.

Correspondence relating to the assessment or potential investigation of an incident should also be documented and retained as detailed in NDIS Incident Management Systems Detailed Guidance for Registered NDIS Providers June 2019.

External Reporting of Abuse

There are three reporting channels that must be adhered to in the event of any allegations or disclosures of abuse. These are detailed below:

1. Reporting to the NDIS Quality & Safeguarding

Any disclosures of abuse must be reported **immediately**, both verbally to the on-call staff and by submitting a Cahoots Incident Report. The Quality & Safeguarding Lead is responsible for reporting the disclosure to the NDIS Quality & Safeguarding Commission within the required timeframe of twenty-four hours from the initial disclosure.

2. Reporting to Western Australian Police

If the disclosed and reported abuse constitutes a criminal offense, the Chief Executive Officer or their delegate will report to and coordinate with the Western Australian Police, in accordance with the Cahoots Protecting Participants from Harm Procedure.

3. Reporting to the Ombudsman Western Australia

Any disclosures or allegations of abuse, whether current or historical, involving current paid or unpaid staff will be reported to the Ombudsman Western Australia within seven working days, as outlined in the Western Australian Reportable Conduct Scheme.

Other Considerations:

4. Reporting to the Department of Communities

Any disclosures or allegations of abuse involving participants under the care or guardianship of the Department of Communities, must be reported to their allocated Case Worker immediately.

Communication

This policy will be communicated in an appropriate way to:

- Participants and their support networks through Cahoots e-newsletter, website, intake process, easy to read flyers and accessible on request.
- Staff and volunteers through inductions, professional development and staff meetings.

Policy Review

This policy will be reviewed every two years in consultation with participants and their support networks together with staff and volunteers.

This policy is not intended to be a static document and Cahoots commits to its ongoing development as part of continuous quality improvement, and as policy and legislation changes dictate.

References and Related Documents

- NDIS Incident Management Systems Detailed Guidance for Registered NDIS Providers June 2019
- Cahoots Safeguarding Children and Adults at Risk Policy
- Cahoots Information Management Policy
- Cahoots Emergency and Disaster Management Policy
- Cahoots Emergency and Disaster Management Plan
- Cahoots Advocacy List
- Reportable Conduct Scheme Western Australia

Versions

No.	Approval Date	Description of Amendment
1.0	16/06/2011	Policy created
2.0	17/01/2013	Reviewed
3.0	30/9/2015	Reviewed
4.9	3/10/2017	Reviewed
5.0	13/01/2021	Updated
6.0	30/04/2021	Reviewed and updated including NDIS commission
7.0	21/05/2021	Reviewed and updated – Appendices added
8.0	02/06/2023	Updated, NDIS Quality Standards, replaces Incident and Hazard Management Reporting and Recording Procedure
9.0	28/06/2024	Reviewed and updated to include Reporting of Abuse

Owner	Approver	Next Review
Operations Manager	CEO	May 2025

APPENDIX A: INDICATOR OF INCIDENTS (NDIS Guidelines)

Incident types	Behavioural indicators and physical signs
	Inconsistent, vague, unexpected or unlikely
	explanation for the injury.
	Unexplained injuries – broken bones, fractures,
	sprains, bruises, burns, scalds, bite marks, scratches
	or welts.
Physical abuse, unlawful	Other bruising and marks that may suggest the
physical contact or physical	shape of the object that caused it.
assault	Avoiding or being fearful of a particular person or
	worker.
	Being overly compliant with workers.
	Frequent and overall drowsiness (associated with
	head injuries).
	Out of character aggression.
	Dropping hints that appear to be about abuse.
	Bruises, pain, bleeding – including redness and
	swelling around breasts and genitals.
Sexual contact, sexual assault or sexual misconduct	Torn, stained, or bloody underwear or bedding.
	Repeating a word or sign, such as 'bad', 'dirty'.
	Presence of a sexually transmitted disease.
	Pregnancy.
	Sudden changes in behaviour or character, e.g.:
	depression, anxiety attacks (crying, sweating,
	trembling, withdrawal, agitations, anger, violence,
	absconding, sexually expressive behaviour, seeking
	comfort and security).
	Sleep disturbances, refusing to go to bed, and/or
	going to bed fully clothed.
	Refusing to shower. Depression, withdrawal, crying or emotional
	behaviour
	Being secretive, and trying to hide information and
	personal belongings.
	Speech disorders.
	Weight gain or loss.
Psychological, emotional or	Feelings of worthlessness about life and themselves;
verbal abuse	extremely low self-esteem, self-abuse, or self-
	destructive behaviour.
	Extreme attention-seeking behaviour and other
	behavioural disorders (e.g.: disruptiveness,
	aggressiveness, bullying).
	Being overly compliant.
	Depression, withdrawal, crying or violence.
	Feelings of worthlessness about life and themselves;
	extremely low self-esteem, self-abuse, or self-
Domestic violence	destructive behaviour.
Domostio violetto	Extreme attention-seeking behaviour and other
	behavioural disorders (e.g.: disruptiveness,
	aggressiveness, bullying).
	Being overly compliant.

Inappropriate or inadequate shelter or accommodation, including unclean and unsanitary living conditions. Weight loss. Requesting, begging, scavenging, or stealing food. Being very hungry or thirsty. Inadequate supply of fresh food. Constant fatigue, listlessness or falling asleep. Dropping hints that appear to be about neglect. Extreme longing for company. Neglect Poor hygiene or poor grooming – overgrown fingernails and toenails, unclean hair, unshaven, unbathed, wearing dirty or damaged clothing.	Incident types	Behavioural indicators and physical signs
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		unbathed, wearing dirty or damaged clothing.
Inappropriate or inadequate clothing for the weather.		Inappropriate or inadequate clothing for the weather.
Unattended physical problems, dental, and/or		Unattended physical problems, dental, and/or
medical needs.		medical needs.
Social isolation.		Social isolation.
Loss of social and communication skills.		Loss of social and communication skills.
Removal of means of communication.		Removal of means of communication.
Displaying inappropriate or excessive self-comforting		
behaviours.		
Sudden decrease in bank balances.		
No financial records or incomplete records of		
payments and purchases.		
Person controlling the finances does not have legal		
authority.		
Sudden changes in banking practices.		
Financial abuse Sudden changes in wills or other financial	Financial abuse	
documents.		
Unexplained disappearance of money or valuables.		
Person does not have enough money to meet their		
budget. Person is denied outings and activities due to lack of		
Person is denied outings and activities due to lack of funds.		
Borrowing, begging, stealing money or food.		

APPENDIX B: SAMPLE - INJURY INCIDENT REPORT

Note: Cahoots Incident Report Form is a digital form completed and submitted online.

Report ID: 1147

Basic Details

Name of Program/Camp Kids Weekend Camp

Date of the Incident: 2023-03-27

Time of the Incident: test

Reported by: Pearl test test Facilitator's Name: Carey Benier

Description of the Incident

test
test
test
test
test
test
test

First Aid Details:

i ii ot Aid Dotaiio.	
Was First Aid given to anyone involved?	No
Names and roles of everyone given first aid:	
First Aider Name:	
First Aid Time:	
First Aid Date:	
Description of the type and location of injury and	
what first aid was given:	
Did anyone need transfer to hospital or further	
medical attention. Include names and details.	

Notification Details - Emergency Contact

When was the emergency contact person, for	
anyone involved, consulted / informed? Give	test
details of who, when and their response.	

Risk Analysis and Internal Notification

Risk Level	Major
Name(s) and Position(s) of on call Person(s) Notified	test
Date of Notification	2023-03-27
Time of Notification:	test

If you have any questions regarding this incident report, please contact <u>info@cahoots.org.au</u> or 1300 103 880.

Important Terms:

Safeguarding:

Cahoots staff and volunteers are obligated to act to protect all children and vulnerable people participating in Cahoots' services. This includes reporting any suspected causes of neglect, abuse or exploitation.

Definitions of Abuse:

Abuse is defined as any of the following; emotional, psychological, physical, sexual abuse, neglect, constraints and restrictive practices and bullying.

Privacy Disclaimer:

Cahoots acknowledges and respects privacy of individuals. The information that is being collected on this form is for the purposes of providing and recording first aid rendered to you while in a Cahoots' service. The intended recipients of this information are Cahoots, its staff, insurers, and medical professionals (Ambulance Services), hospital, doctor & nurses. You have the right to access and alter personal information concerning yourself in accordance with the Privacy Act 1988 and Cahoots Privacy Policy.

Follow-up Details:

(Please complete investigations and follow-up details here)

Level & descriptor	Safeguarding (includes disclosure or threat of any nature to self and others)	Accident & Injury (participants and staff)	Staffing requirements and service continuation	Organisational reputation	Staff non-compliance	Notification process
Insignificant - A	Threat to assault (minor) but no contact made. Threat does not escalate. No disclosure is made. Evidence of unexplained bruses and cuts observed (on arrival to Cahoot's service)	- First aid only	No impact.	- No impact. - No media exposure	Unintended failure to follow organisational policy and process. No impact.	Facilitator to inform Parent/Carer upon service completion/pick up
Minor - B	Attempt to assault. May include minor contact. If contact occurred, First Aid may be required. No disclosure is made. Evidence of unexplained bruises and cuts observed (on arrival to Cahoot's service) that require medical attention.	- First aid with possible medical follow-up.	Minor changes to participant allocations made. Able to continue service.	Fault acknowledged and rectified. Negligible impact. No media exposure.	Negligent breach of organisational policy and process. Further investigation and/or action required.	Facilitator to advise On- Call Staff for direction on further escalation. Notify Parent/Carer as soon as practical.
Moderate - C	Significant threat to assault. This may include the use of a weapon. If contact occurred, further medical attention would be required. Support from emergency services may be required to de-escalate. There is a disclosure with indication that abuse/negligence has occurred.	Medical professional advice/action required following First Aid. Injured party may remain on Cahoot's service.	Additional support may be required. Service requires amendments but able to continue.	Repeated fault acknowledged. Gov. Agency reporting may be required. Potential media exposure.	Breach of organisational policy and process. Further investigation and/or action required May result in performance management.	Facilitator to advise On- Call Staff for direction on further escalation. Advise Parent/Carer Immediately.
Major - D	Serious threat to assault. This may include the use of a weapon. If contact occurred, emergency medical attention would be required. Support from emergency services may be required to de-escalate. There is a disclosure with evidence that abuse/negligence has occurred.	Immediate emergency medical attention required (000).	Additional support required immediately. Service requires significant amendment.	Repeated unresolved fault acknowledged. Gov. Agency reporting will be required. Media exposure.	Deliberate breach of organisational policy and process. Further investigation and/or action required. Will result in performance management. May require external agency reporting.	Facilitator to advise On- call staff if not contactable, contact CEO directly for direction on notifying parents/carers and further escalation.
Catastrophic - E	Assum has occurred requiring inserticus injury. Enlargency maints attention both nex. E. which appears from enlargency services may 26 inquired to disease from enlargency services may 26 inquired to disease from enlargency services. These is a disease a pittle sindence that source freed games has accounted.	- Immediata Emergency - medical attention - required (000) - Multiple assign hearth - cheat/mjury or death	Additional susceet Fequines but not syellable Service unable to son true	- Demaging media exposure - Minuterial Investigation	Criminal act. Disciplinary action including dismissal. Reporting to Police and external agencies.	Facilitator to advise CRI- cali Staff if not contactable contact CED directly for direction on notifying parents/bases and further assistation (including board notification).