

Incident Management Policy

The following policy aims to ensure that Creating Opportunities Speech Pathology appropriately identifies and responds to incidents that may impact on the safety of participants and people who have a disability. Creating Opportunities Speech Pathology aims to support prevention of incidences and participate in ongoing review of this policy to better serve participants.

In this policy, incident refers to an event or actions:

- a) that occurred in connection with providing supports, that have or could have harmed a person who has a disability
- b) that occurred where a person with a disability in connection with providing supports, has caused serious harm or risk of serious harm to another person
- c) which is a reportable incident that have or are alleged to have occurred in connection with providing supports to a person who has a disability. Under the National Disability Insurance Scheme reportable incidences that must be reported to the NDIS Commission 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
 - 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.

1. Policy Objectives

Prioritise safety and wellbeing of participants and people who have a disability

Facilitate timely identification, response, reporting and management of incidences

Hold open and honest communication with participants, families and support persons where fault is identified

Assess and review actions or procedures that held an impact on the incident and implement strategies to rectify problem areas.

2. Procedure

All steps taken will be documented within the participant's file and within the Incident Management System.

2.1 Identification

Incidents may be identified through a number of methods which may include direct observation, discussion with the participant, family, carer or support persons, team discussions with other providers and/or complaints.

2.2 Immediate action

It may be necessary to take immediate action following the identification of an incident. Immediate action may include:

- a) Immediate care to individuals involved in the event to prevent the harm from becoming worse. This may include notifying emergency services.
- b) Making the situation or environment safe to prevent the event reoccurring.
- c) Gathering information from other relevant persons involved in the incident or providing supports.

2.3 Notification/documentation

Incidents will be documented within 5 business days of Creating Opportunities Speech Pathology becoming aware of the incident and documentation will be stored for a minimum of 7 years from the date of the report.

Notification may include:

- a) The incident will be recorded within the participant's clinical file.
- b) The incident will be recorded within the Incident Management System.
- c) The information gathered about the incident will be shared with the participant and/or family/carer/guardian including steps already taken to resolve the incident or prevent future occurrences.
- d) If the incident is deemed a reportable incident, it will be reported to the appropriate service such as the NDIS Commission (see below example)

EXAMPLE: The following will be reported to the NDIS Commission

Type of incident	Time frame
Unauthorised use of restrictive practice	within 5 business days
Harm to the participant	within 24 hours
All other reportable incidents	within 24 hours

The time frame is for immediate notification, with a more detailed report about the incident and actions taken in response to it to be provided within 5 business days. A final report may be submitted within 60 business days of the 5 day report if it is requested by the NDIS Commission.

2.4 Investigation

The incident may be investigated further to identify possible contributors to the incident. This may include further discussions with other support providers, carers, the participant and the participant's family.

Creating Opportunities Speech Pathology is responsible for ensuring analysis of the event and procedures occurs at the provider level.

2.5 Support Plan development and implementation

Support Plan development may include working with the participant and their formal and informal supports to develop a plan to address implications of the incident and to develop plans to reduce the risk of the incident reoccurring. The Support Plan will then be implemented with relevant persons. This may include assessing current procedures and making necessary adjustments, providing therapy supports that directly or indirectly address the incident or providing referrals to relevant services.

2.6 Follow-up

The implementation of the Support Plan will be followed-up and feedback from the participant and their informal and/or formal supports will be discussed. This may be completed face to face, over the phone or via written communication.

The steps taken to respond to the incident by Creating Opportunities Speech Pathology will be assessed and this Incidents Management Procedure will be reviewed with any changes to be actioned.

Providing the participant and/or their family/carers the opportunity to provide feedback is an important part of the process for reducing future incidents and improving incident management of future incidents. The relevant persons will be provided with opportunity to give feedback on the management of the event.

3. Incidents Management System

The incidents management system comprises of a spreadsheet outlining the following:

- Date and time of the incident
- Type of incident
- Description of the incident including the injuries/impact on the person with disability
- Is the incident reportable/not reportable and timeframe for the report
- Place of incident
- How the incident was identified
- Who was present at the time of the incident including contact information
- What happened before, during and after the incident
- What actions were taken to resolve the incident/support the person with disability
- Who was notified of the incident
- Further investigation and/or plan to prevent future incidents
- Follow up information: has plan been implemented, feedback or ongoing support required from person with disability

- Assessment of incident management including steps taken and procedure: comments/actions

4. Review of policy

This policy will be reviewed annually to ensure the process is providing an effective outcome for participants. Participant feedback will be considered.