



Serious Incident Reporting Policy

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1.1. Purpose

Down South Therapy (DST) is committed to ensuring that all incidents involving clients of the organisation are properly investigated and resolved or referred to the appropriate managing body. The NDIS Commission states it is compulsory for service providers to report to the NDIS Commission any death or non-trivial injury (including physical, psychological and sexual abuse, violence, neglect or exploitation as well as use of restrictive practices), to a person in their care. The intent of the NDIS Commission is to safeguard people with disabilities and to make service providers more accountable.

The following documents are relevant to this policy:

- NDIS Act 2013
- NDIS Commission Quality and Safeguarding Framework 2016
- NDIS Incident Management and Reportable Incidents 2018
- NDIS Practice Standards and Quality Indicators 2021
- NDIS Reportable Incidents Guide for Providers 2019
- NDIS Code of Conduct 2019
- Disability Services Act 1993
- UN Convention on Rights of Persons with Disabilities

The following policy should also be reference in conjunction with the Serious Incident Reporting Policy.

- Freedom from Violence, Abuse, Neglect, Exploitation and Discrimination Policy 1.4

1.2. Scope

This policy relates to all Down South Therapy activities and applies to all employees, contractors, students, advocates, Directors and others who may act on behalf of Down South Therapy.

1.3. Application of Policy

All incidents involving clients regardless of whether they need to be reported to the NDIS Commission are to be reported to Down South Therapy for appropriate recording and management.

Down South Therapy is committed to meeting its obligations under the NDIS Commission and the General Provisions of its Service Agreement that requires reporting of all serious incidents involving clients through to the NDIS Commission.

Definition of serious incident (also called Reportable Incident in NDIS Framework)

Reportable incidents are incidents or alleged incidents which result in harm to a NDIS participant and occur in connection with NDIS supports and services. Types of reportable incidents include:

- The death of a person with a disability who is a client.
- Serious physical injury of a person with disability who is a client
- Abuse or neglect of a person with disability who is a current client
- 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.
- Use of restrictive practice in relation to a person with disability, other than where the use is

in accordance with an authorisation of a State or Territory in relation to the person and there is no Positive Behaviour Support Plan in place.

- An assault on staff or a visitor to the service by a person with disability who is a current client.

A serious incident form should still be completed if and submitted to the organisation:

- In relation to a client, your service receives serious verbal or written complaints.
- Is required to inform your insurer about a matter.
- If a matter or complaint about your service is referred to any statutory or investigative body; and/or
- When a service provider has concerns over the welfare of a person with a disability.

1.4. Performance Standards

The following performance standards must be met to ensure that the procedures specified are implemented effectively:

- All incidents involving clients are to be reported to Down South Therapy.
- Staff and contractors are informed about the definitions of a serious incident and the requirements of reporting.
- Information on the Serious Incident Reporting process is available to staff and contractors via the organisation website.
- In the event of a serious incident, staff and contractors forward the required information to the NDIS Commission in the prescribed and timely manner.
- The Clinical Services Manager along with the Director has responsibility for the overseeing of all Serious Incident Reporting and provides a summary of issues to the Reference Group at scheduled meetings.
- Where a matter involves potential criminal charges or a minor under the age of 18 years the matter is reported to the appropriate external agency.
- All Serious Incidents Reports are viewed as confidential and kept in accordance with the Policy on Privacy and Confidentiality.

1.5. Procedures

The following procedures are to be implemented to ensure that Down South Therapy meet its policy objective of Serious Incident Reporting.

Reporting Responsibility

The responsibility for reporting all serious incidents rests with the service provider which is providing services to the client where and when the incident occurred.

A DST Serious Incident Report (SIR) form should be completed for each client even if several clients are involved in one incident. If a client is involved in several incidents each incident must be reported separately. Guidelines on how to complete the SIR form are available on the DST Portal.

Reporting to the NDIS Commission

Whenever a serious incident has occurred that satisfies the below criteria, Down South Therapy must ensure the matter is reported to the NDIS Commission via the NDIS Commission website or the NDIS Commission Portal.

NDIS Reportable incidents are those that are outlined in section 1.3 of this policy and satisfy the below criteria:

- Incidents that have, or could have, caused harm to a person with disability receiving supports or services
- Acts by a person with disability that happen **in connection with** the provision of support or services and that have caused serious harm, or a risk of serious harm, to another person; and
- Reportable incidents that are alleged to have occurred in connection with the provision of supports or services.

When one of the above acts have occurred Down South Therapy staff are required to complete the Serious Incident Report Form, with sign off by the Clinical Service Manager or Director. If deemed Reportable to NDIS then an allocated staff member will complete the reportable incidents process on the NDIS Commission Portal.

It is important that action is taken to minimise the consequences of the serious incident and where possible prevent the occurrence of a similar serious incident in the future.

External Investigation

Where the matter involves the potential for criminal charges, such as sexual abuse or serious physical abuse of a person with disability by a staff member or contractor of the Commission or a disability sector organisation, it is essential that the police are consulted as part of the process of external investigation. This action should then be noted in the SIR.

Where the matter involves a child under the age of 18 years, the Commission requires the incident to be reported to the Department for Child Protection and Family Support (DCPFS). If DCPFS are not advised as part of the reporting sequence, an explanatory memorandum should be forwarded to the Commission’s Director General detailing the reasons why DCPFS have not been notified.

Where statutory agencies such as Police, Department for Child Protection and Family Support, Office of the Public Advocate and the Coroner are involved this needs to be recorded in the Action Plan.

Internal Reporting

All incidents involving Down South Therapy clients are to be reported to your Senior/ Team Leader for appropriate risk assessment and recording.

Timeliness

Serious Incident Reporting will be completed as per the NDIS Commission timeframes.

- Death of a person with a disability 24 hours
- Serious injury of a person with a disability 24 hours
- Abuse or neglect of a person with a disability 24 hours
- Unlawful sexual or physical contact with, or assault of, a person with a disability 24 hours
- Sexual misconduct committed against, or in the presence of, a person with a disability, including grooming of the person for sexual activity 24 hours
- Use of restrictive practices not in accordance with a behaviour support plan 5 business days.

Confidentiality of Information

Reports of serious incidents will be kept confidential, in accordance with the NDIS Incident Management and Reportable Incidents Rules 2018 and/or other relevant legislation that is applicable unless disclosure is required in the public interest.

NDIS Commission Follow Up

The NDIS Commission may initiate any follow-up action deemed necessary.

Appendix A: Responding to violence, abuse, neglect, exploitation and discrimination

Responding to Violence, Abuse, Neglect, Exploitation and Discrimination Staff Actions (Taken from Policy 1.4) and included here for reference.

If a client's rights are infringed, or we have reason to believe that they have been abused or neglected, we will respond quickly, professionally and compassionately and in accordance with the NDIS Incident Management and Reportable Incidents Rules 2018.

- 1) It is the personal responsibility of all Staff, Contractors and Students on placement to communicate any concerns relating to an infringement of human rights, or the abuse or neglect of a consumer to their Supervisor or Clinical Services Manager within 24 hours of the concern arising, or immediately if it is believed that the consumer is at imminent risk of harm. The Supervisor or Clinical Services Manager will determine how the matter should be managed.
- 2) The Supervisor or Clinical Services Manager will reassure the reporting staff member that their concerns will be managed in a confidential and professional manner, and that they have acted correctly in bringing their concern to attention.
- 3) The Supervisor or Clinical Services Manager will assist the staff member raising the concern or allegation to factually and non-judgementally document an account of the concern or allegation on a clinical incident form. This should be done within 24 hours of the Supervisor or Clinical Services Manager being made aware of the concern.
- 4) If the Supervisor or Clinical Services Manager believes that the consumer is at immediate risk, he or she will take whatever steps are required to mitigate the risk, and ensure the clients safety while the matter is fully investigated.
- 5) Except for staff who have been given specific authority to do so, no staff member will undertake any level of investigation of a concern or allegation.
- 6) Generally, it will be expected that a staff member who the client trusts (determined by the Supervisor) informs them of the concern, reassures them and ensures their involvement in deciding the course of action to be taken. However, it is recognised that in some situations this might not be possible due to the consumer's disability or the nature of the concern. If the consumer is not to be involved in decision-making about the concern, the reasons for this decision will be documented, and consideration given to the need to involve an advocate to represent their interests.
- 7) The Supervisor, Clinical Services Manager and Directors will jointly decide on the appropriate action to be taken according to the circumstances and generally taking into account the clients views. The action could be:
 - a) to manage the matter within the organisation if it doesn't meet reportable criteria;
 - b) to engage in discussion with family members or advocate;
 - c) to elicit the advice and expertise of another organisation or individual from outside of our organisation;
 - d) to involve an organisation with the required legislative mandate to take action (eg the Department for Child Protection, WA Police, the Office of the Public Advocate);
 - e) to take no further action at this time, however continue to monitor the situation and review at a specified later date; or
 - f) to take no further action.
- 8) The decision that is taken and the reasons that led to the decision will be documented by the Supervisor or Clinical Services Manager and endorsed by signature, by the Director.

- 9) If the matter is assessed to involve any actions that are unlawful, the Supervisor or Clinical Services Manager must immediately advise the Director.
- 10) Duty of care carries greater weight than the duty to maintain confidentiality in matters of care and protection. This means that the matter may be discussed between those reporting or investigating, but not with any other person. This includes confidentiality of consumer and alleged perpetrator information.
- 11) In reporting a concern/allegation, staff will ensure that the consumers' right to dignity, confidentiality and privacy is maintained in accordance with NDIS Incident Management and Reportable Incidents 2018 and the requirements of the Privacy Act.
- 12) If the matter is considered to be a serious incident, it must be reported to the NDIS Commission or funding body by the or Supervisor, Systems Manager or Clinical Services Manager within the relevant timeframes mentioned above and in accordance with the Serious Incident Reporting policy.
- 13) The Supervisor will provide feedback to support the staff member who raised the concern or made the allegation regarding the outcome.
- 14) Debriefing will be undertaken with all relevant individuals when the matter reaches a conclusion. The Supervisor or Clinical Services Manager will determine who the appropriate person is to conduct the debriefing.
- 15) When the matter is concluded, the Supervisor or Clinical Services Manager will arrange for a review to be conducted, to evaluate the organisation's performance in responding to the matter, and to identify opportunities to develop strategies to prevent a future occurrence of a similar incident.
- 16) When the abuse or neglect is alleged to have been perpetrated by an employee or contractor the Supervisor or Clinical Services Manager and the Director will meet with the client's family and/or person who registered the complaint in order to obtain all relevant information. The Supervisor or Clinical Services Manager and the Director will meet with the employee or contractor against whom the complaint is lodged in order to obtain all relevant information and explanation for the alleged behaviour and meet with other potential witnesses as necessary. They will then prepare a report for within 24 hours of the allegation with recommendations and an action plan to support the client and their family, and the staff member. The Management team may then seek industrial/professional advice, plan further meetings, seek an external assessment or refer the matter to the police. The management team may immediately suspend the staff member or send them on leave pending the results of the investigation.