

# Incident Management



## Policy Details

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## Purpose

People Who Care is committed to ensuring that all incidents and near misses which occur in relation to the provision of services are managed consistently and effectively, and that workers can identify, manage, report and resolve incidents.

## Policy

People Who Care's incident management system is person-centred, and focuses on the health, safety, wellbeing and quality of life for clients, staff and anyone affected by the incident.

Following an incident, People Who Care's investigation and resolution processes are outcomes-focused and conducted in line with the principles of Open Disclosure.

The organisation collects and reviews data on incidents in order to inform improvement activities.

People Who Care regularly reviews its incident management system and processes to ensure that they are:

- Well documented;
- Readily accessible to all staff employed or engaged by the organisation;
- Reflective and adaptive, with an intent to prevent incidents; and
- Compliant with the Reportable Incident Policy.

## Definitions

**Commission:** Refers to either the

- Aged Care Quality and Safety Commission;
- National Disability Insurance Scheme Quality and Safety Commission

**Incidents:** Any unplanned event resulting in, or having a potential for injury, ill health, either physically or emotionally that occurs or could occur during or in relation to the provision of care and services to staff, clients, or other stakeholders.

Incidents also include acts, omissions, events or circumstances that have caused or could cause damage or other loss to property, the environment or cause public alarm.

**Critical Incident:** A critical incident is a sudden, unexpected and traumatic event outside the normal range of experience of the community affected but having the potential to cause death, significant injury, severe emotional stress or distress, significant loss of property, destruction, shut down or disruption of business operations.

**Reportable Incidents:** As defined by the relevant Commission and Reportable Incident Policy

**Work related incidents:** An incident is classified as Work Related if, at the time of the Incident, staff or a contractor were carrying out activities related to their employment.

**Accident:** An incident that happens unexpectedly and unintentionally, typically resulting in injury or damage.

**Hazard:** A situation that has the potential to harm a person or cause damage to the environment or property.

**Near miss:** Is an unplanned event that did not result in injury, illness, or damage – but had the potential to do so.

**Corrective Action:** An action taken after an Incident, Accident, Near Miss or Hazard to eliminate or reduce the risk of a reoccurrence.

**Preventative Action:** An action taken before an Incident, Accident, Near Miss or Hazard to eliminate or reduce the risk of it occurring.

**Injury:** A personal injury by accident arising out of or in the course of employment, or while the worker is acting under the employer's instructions.

- An injury is typically classified as either a;
  - Lost Time Injury (LTI)
  - Medical Treatment Injury (MTI)
  - First Aid Injury (FAI)

**Illness:** Any work related illness, including disease.

**Staff:** Employees, volunteers and contractors employed or engaged by People Who Care.

## Responsibilities

### CEO

The CEO has the overall responsibility for

- Ensuring that a safe workplace is maintained in accordance with all laws and regulations.
- Ensuring that sufficient resources are provided to ensure People Who Care's Incident, Hazard or Near Miss Management Policy is maintained.
- Ensuring that People Who Care's reporting responsibilities are met in relation to Reportable Incidents

### Leadership Team

- Ensuring all incidents, hazards and near hit/misses involving clients, staff, visitors and contractors in the Department for which they have responsibility are reported, investigated and have the appropriate corrective actions implemented.
- Ensuring Safety Health Representatives (SHR) are provided with the time, facilities and assistance they require to perform their functions.
- Ensuring workers in their area are aware and understand these procedures and provide suitable training and can demonstrate competency to carry out their role under these procedures should they be required to.
- Reviewing incident reports for the area and discussing this with the Health and Safety committee for the area.

### Supervisors

- Supervisors are responsible for ensuring that all staff are aware of their incident, hazard, near miss management system responsibilities and obligations.
- Ensure appropriate medical attention is administered in line with the severity of incurred injury and that appropriate injury management procedures are followed. – refer PWC's Injury Management Procedure.
- Notify the People & Culture Department and the Quality and Safety Coordinator of the incident(s), hazard(s) or near miss within 24 hours.
- Ensure all required reports, assessments and investigations into the incidents, hazard or near miss are completed and all investigation findings are forwarded to the Quality and Safety Coordinator in a timely manner.
- Where personal injury has occurred or a hazard still exists the investigation shall take precedence over operational requirements. The Quality and Safety Coordinator can provide assistance with this as required.

### People Who Care Staff

- All People Who Care staff must know their responsibilities and obligations for workplace safety under the Occupational Safety & Health Act.
- When any incident occurs with a client, staff must report it to their supervisor as soon as possible but no longer than 24 hours using a HIA Report form.
- All staff involved in a workplace incident whether it causes injury or not, must report the incident to their supervisor as soon as practicable but no longer than 24 hours using a HIA Report form.
- Any staff who observe a hazard or near miss must report it as soon as practicable but no longer than 24 hours using a HIA Report form.
- Participate in any investigation of the incident.
- Cooperate with People Who Care in carrying out its obligations imposed on it under OSH legislation.

### Safety Coordinator

- Assist Managers/ Supervisors with all components of incidents, hazards and near miss investigations as required.
- Monitor the investigation process to ensure completion of investigations in a timely manner.

- Maintain records of all reported incidents, hazards and near misses.
- Produce monthly reports and statistics on incidents, hazards and near misses.

### **Policy and Risk Committee**

- Standing Item - Review all outstanding incidents, hazards and near miss reports, assessments and investigations and make recommendations on appropriate corrective action.

## **Procedure**

### **Induction and staff training**

All staff must be familiar with the organisation's incident, hazard, near miss management system, understand the organisation's definition of Reportable Incidents, and understand the procedures they must follow for reporting all incidents, hazards and near misses to the organisation and the Commission (if required).

People Who Care promotes a culture of open reporting and ensures that all workers understand that they are supported to report any incident or alleged incident, hazard or near miss and that there will be no negative consequences for doing so.

### **Incident identification**

If staff observe an incident, or a client or member of the public notifies a People Who Care staff member about an incident that does or could cause permanent or temporary detriment to a client, staff member or other stakeholder, then the staff member must report the incident to their Supervisor and the Quality and Safety Coordinator.

Staff and clients will be protected against any adverse actions as a result of reporting or alleging that an incident has occurred.

### **Immediate response**

Where possible, an incident will first be addressed by the organisation's personnel responsible and qualified to effectively manage the incident as it takes place. First responders understand that they must contact emergency services if the situation warrants.

### **Notification procedures**

Staff must report incidents to various agencies and persons based on the following priority system:

- For incidents of a serious nature workers must first contact emergency services (if required).
- Workers must report all incidents and near misses internally to their Supervisor and the Quality and Safety Coordinator.
- If it is determined that the incident is a Reportable Incident, Service Managers are responsible for notifying families, guardians and advocates of the client.
- If an incident is a Reportable Incident, the Service Manager will follow the Reportable Incident Policy.

### **Supporting clients**

Supported by the Open Disclosure Policy, throughout the incident, hazard, near miss management process, from initial response through to review, clients and others affected will be supported by People Who Care through means of:

- Reassurance if the client reported the incident;
- Trauma and counselling services where required;
- Changes to regular care and services if necessary;
- Consistent engagement with clients and others affected by an incident, in line with the principles of open disclosure; and
- Clear, ongoing communication regarding the progress and outcomes of any investigation.

Clients and others affected by an incident, hazard or near miss will be involved in the management and resolution process where appropriate.

Clients and other stakeholders will be informed of People Who Care's incident, hazard and near miss management system, and will have access to this policy.

### **Assessment and investigation**

Line Managers are responsible for creating an initial assessment of any incident, hazard or near miss to determine the severity and to establish the need for, and scope of, an investigation. If an incident is a

Reportable Incident, an internal investigation will take place. All investigations will be undertaken and conducted in accordance with principles of natural justice and procedural fairness.

Incidents involving criminal allegations will be reported to police, who will receive full support of the organisation in their investigations.

Whenever an investigation into an incident, hazard or near miss is conducted, it should establish:

- The cause of the incident;
- The effect of the incident;
- Any organisational processes that contributed to or did not function in preventing the incident;
- Corrective actions the organisation can make to prevent further incidents from occurring;
- The effectiveness of People Who Care's incident management system in relation to the incident.
- Review timeframes for identified corrective actions.

Information related to investigations, including records of phone conversations, emails, documents and, where possible, records of face to face interviews will be documented and kept in strict confidence.

### **Incident resolution**

Based on the assessment or investigation, People Who Care may undertake remedial action proportionate to the severity of the incident, including but not limited to:

- Providing an apology;
- Disciplinary action; and
- Financial compensation.

People Who Care will inform and involve clients, family and advocates in the resolution process. The principles of open disclosure will be observed throughout the resolution process.

### **Implementing and monitoring corrective actions**

Managers are responsible for implementing corrective quality and safety processes based on the findings of an incident investigation.

Quality and Safety Coordinator will monitor the outcomes of corrective quality and safety measures as determined in the assessment or investigation findings.

### **Incident register and review**

People Who Care keeps accurate records of all incidents, hazards or near misses that occur in relation to the provision of services.

Initial notification records should contain the following information:

- A description of the incident, hazard or near miss;
- Time, date and location of the incident, hazard or near miss;
- Names and contact details of all the people involved, including witnesses;
- Time and date the incident, hazard or near miss was identified and reported;
- Name and contact details of the person reporting the incident, hazard or near miss;
- Immediate actions taken after the incident, hazard or near miss

Assessment and/or Investigation records should contain the following information:

- A determination of whether or not an incident is a Reportable Incident;
- For Reportable Incidents, a determination of the priority of the incident;
- Names and contact details of the person completing the assessment and/or investigation;
- Corrective or preventative actions to be taken following the investigation;
- Whether the persons affected by the incident, hazard or near miss have been provided with any reports or findings;

The organisation will review this policy annually to understand trends, address systemic issues, provide feedback and training to staff about preventing and managing incidents, and inform improvement activities.

Records will be kept for a minimum of seven years.

### **Disclosures qualifying for protection**

Individuals can be entitled to protection if they report a Reportable Incident. A person making a disclosure of information (the discloser), may be, or may previously have been any of the following:

- One of People Who Care's key personnel;
- A staff member of People Who Care;
- A family member, carer, representative, advocate (including an independent advocate) of the client, or another person who is significant to the client;

A disclosure of information will qualify for protection if:

- The disclosure is made to one of the following:
  - The Quality and Safety Commissioner;
  - The approved provider People Who Care;
  - One of People Who Care's key personnel;
  - Another person authorised by People Who Care to receive reports of Reportable Incidents;
  - If the disclosure is reported to another person in accordance with the Quality of Care Principles;
  - A police officer; and
- The discloser informs the person to whom the disclosure is made of the discloser's name before making the disclosure; and
- The discloser has reasonable grounds to suspect that the information indicates that a Reportable Incident has occurred; and
- The discloser makes the disclosure in good faith.

If a person makes a disclosure that qualifies for protection under the previous criteria, People Who Care will ensure that:

- The person is not subject to any civil or criminal liability for making the disclosure; and
- No contractual or other remedy may be enforced, and no contractual or other right may be exercised, against the person on the basis of the disclosure.

### **Protection from victimisation**

People Who Care will protect any persons who have disclosed information relevant to a Reportable Incident from conduct which causes, or threatens to cause detriment to the person. People Who Care will not engage in such conduct, nor will it condone the behaviour of any staff members who engage in such conduct.

### **Protecting informants' identities**

If the report has been made to People Who Care, People Who Care will take reasonable measures to protect the identity of the informant. People Who Care will not disclose the identity of the informant to anyone, except the following parties:

- The Commissioner;
- A person, authority or court to whom People Who Care is legally required to report;
- One of People Who Care's key personnel; and
- A police officer.

If the report was made to a key personnel member (the report recipient) of People Who Care, People Who Care will take reasonable measures to ensure that the report recipient does not disclose the identity of the informant to any unauthorised parties.

### **OHS Issue Resolution**

- All occupational safety and health issues are to be addressed according to the steps in PWC's Safety Issue Resolution Flow Chart.

## **Breaches**

Breaches of policy are serious and may result in disciplinary action up to and including termination of employment.

## **Applicable Standard/s**

Aged Care Standards, Standard 8 Organisational governance

NDIS Practice Standards 2, Provider Governance and Operational Management, Governance and Operational Management

#### **Cross reference to relevant policy**

- Injury Management Procedure
- Open Disclosure
- Reportable Incident
- Critical Incident
- Reporting of Abuse of Clients
- Protected Disclosure (Whistle blower)

#### **Documents/Forms/Records pertaining to this policy**

- HIA forms
- HIA records
- OSH Issue Resolution flowchart
- Accident/Incident flowchart
- Safety Hazard/Near Miss Incident flow chart
- Injury Management flow chart