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| Applies to | For the purpose of this document, the term “Worker” applies to all employees, volunteers, contractors, students and Directors and Family Day Care (FDC) Educators. | | | | |
| Version | 1.0 | Date approved | 27/02/2025 | Next review date | 27/02/2028 |

## Policy Statement

The purpose of this policy outlines the requirements for identifying, responding to and managing incidents and near misses to reduce the risk of recurrence to ensure the wellbeing, safety and security of our people and participants.

Intereach recognises that at times incidents may occur and are committed to ensuring we are prepared to respond to an incident promptly, professionally and compassionately with the goal of minimising injury to person, damage to property/environment, impact on business continuity or reputation.

## Objective

This policy and its related documents are designed to ensure the organisation:

* identifies and mitigates all incidents to the extent that is reasonably practicable;
* meets its duty of care obligation to provide the highest possible standard of health, safety and quality for our people, participants and those effected by our actions;
* is compliant with relevant legislation, standards and policies to provide an environment that prioritises the safety, health and wellbeing of participants;
* is able to respond swiftly, effectively and appropriately in the event of an incident; and,
* minimises disruption to the provision of service and can recover promptly from any crisis to resume normal business as soon as possible.

## Definitions

* **Corrective action**an action taken to control the risk and reduce the likelihood and/or severity of injury or illness following an incident occurring or a hazard present.
* **Data Breach** (as defined by the Privacy Commission) occurs when personal information that an entity holds is subject to unauthorised access, unauthorised disclosure or is lost. A data breach may be caused by malicious action (by an external or insider party), human error, or a failure in information handling or security systems.
* **Incident:** any act, omission, event or circumstance that occurs or is suspected or alleged to have occurred that has, or could reasonably be expected to have caused harm, such as a , physical, psychological or illness injury to a person or damage to property/environment. It can include theft, exposure to dangerous substances or occurrences and breaches of privacy.

Note: this extends to participants in connection with provision of care or delivery of services

* **Injury** is any physical or mental damage to the body caused by exposure to a hazard.
* **Hazard** a source or a situation with the potential for harm in terms of human injury or ill-health, damage to property, damage to the environment, or a combination of these**.**
* **Critical and Serious incident** is an event out of the range of normal experience – one which is sudden and unexpected, involves the perception of a threat to life and can include elements of physical and emotional loss. Often such events are sufficiently disturbing to overwhelm, or threaten to overwhelm, a person’s coping capacity.  Such events can cause or could cause harm to an individual, group or the public. A critical and serious incident can include physical, psychological or financial damage. Examples include death, injury, illness, harm to mental health or a child going missing from an education and care service.

*Please note that there might be different critical or serious incident definitions relating to specific program areas and regulatory authorities. Refer to the program specific procedures and regulations for specific serious incident definitions.*

* **Notifiable/Reportable Incident** a serious incident which is prescribed by a governing body or regulator to be reported to them within specific guidelines. Please refer to the context section for references to governing bodies.
* **Near miss** an incident or potential incident that was averted and did not cause harm but had the potential to do so. The potential incident that could have resulted in an injury or illness to people, danger to health, and / or damage to property or the environment.
* **Business Continuity** business conducted, and service delivery provided as normal, without disruption.
* **Critical Incident Management Team** workers will be assigned uniquely for each Critical and Serious incident and will consist of:
  + one or more Executives;
  + one or more Senior Managers or Program Manager/s; and,
  + Work Health and Safety and Environment Manager
* **Incident Response Leader** is the most senior person on site or other delegate who will coordinate incident response
* **Incident Response Team** is a group that is selected and lead by the Incident Response Leader to support with tasks associated with incident management. This team will carry out the incident management checklist and escalate any issues where required.
* **Manager** term used in this policy to represent Senior Managers / Program Managers/ Regional Managers / Team leaders
* **Open disclosure** refers to the practice of communicating with a consumer when things go wrong, addressing any immediate needs or concerns and providing support, apologising and explaining the steps the provider has taken to prevent it happening again.

## Responsibilities

It is the responsibility for the CEOs and Executive team to:

* ensure the directives of this policy are implemented and maintained;
* promote an open culture of reporting;
* monitor the recommendations from investigations and their implementation;
* ensure formal review of the incident management system annually; and,
* using feedback on incident and other safety and quality data to improve the safety of all workers and participants covered by this policy.

It is the responsibility of the Work Health, Safety and Environment (WHSE) team to:

* ensure WHS/Occupational Health and Safety (OHS) State Government Regulator is notified immediately of relevant notifiable incidents;
* to support the Manager, were required, in notifiable incidents involving participants e.g. in Aged Care;
* provide governance to the incident management process;
* coordinate and lead incident response for serious incidents and where incidents involve participants, support Senior Managers in incident response and management;
* coordinate and develop incident cause analysis investigations for serious incidents and where incidents involve participants, support Senior Managers in incident response and management;
* provide guidance and expert advice on the application of this policy and use of related tools and guides;
* collaborate with Human Resources (HR) to ensure resourcing of mental health and wellbeing supports for staff and managers following an incident; and,
* ensure near misses and incidents are investigated in collaboration with the Program Managers and Team Leaders.

It is the responsibility of Managers to:

* ensure that external notifications are made as required by relevant legislation and/or funding arrangements;
* ensure serious incidents are investigated;
* ensure workers and participants understand they are supported to report any incident or alleged incident, and that there are no negative consequences for doing so;
* lead by example in supporting and championing a culture of reporting;
* ensure workers understand they are required to report any incident or alleged incident;
* support and / or undertake open disclosure; and,
* escalate incidents to a General Manager depending on incident severity.

It is the responsibility for all workers to:

* immediately report incidents to their line manager
* understand the different types of incidents;
* comply with all directives in this policy; and,
* cooperate with directions given in the event of an emergency including any associated investigation.

## Policy

**Phases of incident management**

Intereach incident management will follow the below general phases. The phases are designed to support the implementation of the best practice principles of incident management.

*Diagram 1: The 9 Phases of incident management*

### 5.1 Incident Identification

If a worker observes an incident, hazard or near miss, or a participant or member of the public notifies a worker about an incident, hazard or near miss that does or could cause permanent or temporary detriment to a participant, worker or other stakeholder, then the worker must report the incident to their line manager. Their line Manager will then follow the incident response checklistto navigate the incident.

Incidents can be identified from several sources, which may include:

* direct observation;
* team / staff discussions;
* feedback and complaints;
* participant, carer and family input (for example, questions, concerns, information); and,
* audits.

#### 5.1.1 Receiving disclosures

If a disclosure constituting a Reportable Incident is made in good faith to Intereach or its workers, and the discloser has provided their details, the discloser:

* + will be protected from any civil or criminal liability;
  + will have qualified privilege in related defamation proceedings,
  + is not liable for defamation related to the disclosure; and,
  + is protected from someone enforcing a remedy against them.

For hazards and Near misses please refer to the [Incident Response Procedure](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Procedure_WHS_IncidentResponse.docx?web=1).

### 5.2 Immediate Action

Where possible, an incident will first be addressed by the responsible worker (first responder) or their Line Manager to effectively manage the incident as it takes place and minimise the immediate risk. First responders must contact emergency services if the situation warrants. These immediate actions include:

* making a self, situation or scene safe;
* providing immediate care to the individuals involved if it does not put self in danger, this includes the participants, carers, families, and members of the workforce;
* notifying the line Manager / Program Manager and/or WHSE Team, consideration to be given to program specific policies that deal with managing participant incidents;
* notifying building security and/or the police (as relevant to the incident);
* remove or manage malfunctioning equipment or supplies if it is safe to do so; and,
* gathering information about the chain of events and objectively document these.

#### 5.2.1 Office Closures

In cases following an immediate closure of the office, to maintain safety and security of staff in the impacted office, there might be a need for the office to remain closed from the public for a period of time following an incident or to change operations. The Incident Response Leader must seek Executive approval to take this action i.e. make a change to operations or retain office closure.

### 5.3 Notification

Intereach will take measures to ensure that internal reporting of incidents allows for essential information gathering and documenting. It is essential that all notifications and reporting for external regulators and funding bodies be made in accordance with the stipulated timeframes and requirements. Please refer to the *Appendix 1: Reporting and Regulator List.*

Incidents must be internally reported in line with *Appendix 1: Reporting and Regulator* List as soon as practicable.

* For critical incidents that impact operations, Intereach will stand up a Critical Incident Management Team and maintain an Organisational Business Continuity Plan which includes:
* planning and preparedness for Incidents;
* notification and activation;
* containment and response checklist; and,
* recovery and review.
* A **Critical Incident Management Team** will be assigned to manage serious or critical incidents and review the Business Continuity Plan every six months for currency
* An **Incident Response Team** will be assigned to manage incidents that are not classified as critical or severe.
* All Managers will be trained on incident management.
* Where an interruption to business continuity occurs the Business Continuity Recovery Procedure (BCP) will be implemented by Executive Team.
* Where a WHSE incident is Notifiable to the state regulator, the incident site must be preserved until an inspector arrives or directs otherwise. Note: this does not prevent any action to help an injured person or make the site safe.

### 5.4 Assessment and prioritisation

An initial assessment of any incident must be made, to determine the severity of the incident and to establish the need for, and scope of, an investigation. Program Managers being responsible for participant and WHSE Manager being responsible for worker related incidents.

Where an internal investigation is undertaken, the investigations will be conducted with principles of natural justice and procedural fairness and will identify and assess actual and / or potential risk. Please consider governing/regulatory principals when conducting internal investigations involving participants.

The manager responsible for the initial assessment, will:

* review the incident within 24 hours;
* ensure privacy, accuracy, quality and completeness of the notification and update any additional information;
* allocate a risk or severity rating;
* consider whether the identified risk needs to be on the organisation’s risk register;
* decide the level of Open Disclosure that is necessary where relevant; and,
* ensure that the Executive Team is notified of all incidents with the highest severity rating.

### 5.5 Analysis, investigation & classification

Incidents involving criminal allegations will be reported to law enforcement, who will receive full support of Intereach in their investigations.

The type and level of investigation is determined by the severity or risk rating. All incidents with the highest severity rating should undergo an in-depth and detailed investigation. The main goal of the investigation is to assess the system, not to blame people involved.

For data breaches, the investigation determines whether harm is likely and therefore whether the incident is reportable.

Whenever an investigation into an incident is conducted, it should establish:

* the cause of an incident;
* the effect of an incident;
* any organisational processes that contributed or did not function in preventing an incident; and,
* changes the organisation can make in order to prevent further incidents from occurring.

Information related to incident investigations will be recorded and kept in strict confidence.

Where an incident or near miss involves a participant, the participant and their carer and family should be partners in the investigation. Time and care should be taken to:

* facilitate and support the participant, carer and family to recount their experience(s);
* ensure that the expectations and concerns of the patient, carer and family are considered; and,
* discuss the nature of the investigation, time frame and how feedback will be provided on the findings and recommendations.

Where a question of professional misconduct or unsatisfactory professional conduct arises, this should be managed in collaboration with HR and in accordance with Intereach’s performance management processes and fair work legislation requirements.

Where incidents involve abuse and neglect refer to the *Abuse and Neglect Policy* as it establishes the appropriate and timely response to reported concerns and allegations of abuse and neglect of people accessing Intereach’s services.

#### 5.5.1 Notifiable (reportable) Incidents and escalation

Some serious incidents require the relevant regulator to be notified which may trigger an external investigation, these include, but are not limited to:

* death of a participant;
* serious injury of a participant;
* abuse or neglect of a participant;
* unreasonable use of force;
* psychological or emotional abuse;
* neglect;
* unlawful sexual or physical; contact with, or assault of, a participant by a worker or another participant;
* sexual misconduct committed against, or in the presence of, a participant, including grooming of the participant for sexual activity:
* significant damage to, or destruction of, property impacting service delivery;
* adverse community reaction to some of Intereach’s activities e.g. Families, Mental Health Services (FMHSS);
* negative media coverage;
* misuse of funding;
* unauthorised use of restrictive practices and/or,
* unexplained absence (ACS).

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

* + - Incidents of a serious nature, workers must first contact emergency services.
    - Workers must report all incidents and near misses internally to their Manager
    - If it is determined that the incident is a Reportable Incident, the Senior Manager is responsible for notifying families, guardians and advocates of the participant.
    - If an incident is a Notifiable/Reportable Incident, the Senior Manager will notify the relevant body within the expected timeframe noted in *Appendix A.*

Critical Incident must be escalated and notified to the Executive team and they will in turn notify the Board.

Intereach also has a responsibility to its funding bodies to notify them when a critical or serious incident occurs that impacts or has the potential to impact on the program it funds.

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#### 5.5.2 Escalation

Critical incidents must be escalated to the Geneal Manager or Executive Team as soon as practicable. Severity of incidents may include:

* + critical incidents;
  + Serious threats/incidents affecting the business operation;
  + incidents impacting business continuity;
  + criminal activity in, or related to, the workplace;
  + violence or threats of assaults on participants, staff, contractors or visitors;
  + vehicle accidents;
  + unexpected death;
  + suspected suicide;
  + death of a staff member, potentially arising from the activities or the workplace of that staff member; and,
  + suspected suicide by a staff member potentially arising from the activities or the workplace of that staff member.

### 5.6 Incident Support

It is a crucial step that when a critical or serious incident occurs that has caused trauma, specialist assistance will be made available that can provide:

* debriefing within 48 hours;
* guidance to managers on managing and defusing the situation; and,
* provision of more intensive support to those affected if needed.

Injured workers must be managed and supported in accordance with the Return to Work Policy.

### 5.7 Action - implementation of recommendations and action plan

Intereach will always seek opportunities to improve and will assess any improvements made via recommendations arising from investigations and analysis.

Recommendations arising from investigations and analysis should:

* include an action plan detailing support for the workers or participants;
* address the contributing factors found in the investigation or analysis;
* consider the participant perspective and include suggestions for improvements from participants, carers and families;
* consider suggestions for improvement from the workforce;
* be written in a SMART (Specific, Measurable, Achievable, Realistic, Time-bound) format;
* each be assigned to a manager responsible for the implementation;
* have a stipulated timeframe for each recommendation and an accountable lead for each action;
* be approved by the General Manager; and,
* when a recommendation from a serious incident investigation is not supported, the General Manager must be able to document the reason and propose an alternative recommendation.

#### 5.7.1 Incident Register, hazard and recommendations tracker

Intereach maintains an accurate register of all incidents that occur in relation to the provision of services. Intereach collects and reviews data on incidents in order to understand trends, address systemic issues, provide feedback and training to staff and to inform improvement activities.

Intereach regularly reviews its incident management system and processes to ensure that they are:

* well-documented;
* readily accessible to all workers engaged by the organisation;
* reflective and adaptive, with an intent to prevent incidents; and
* compliant with contractual and legislative requirements.

Led by the WHSE Manager, Intereach will:

* consult with and provide support to Managers on incidents where participants are involved to ensure consistency of practice in relation the incident register, hazard and recommendations tracker;
* consider whether the incident and recommendations have relevance for other areas of the organisation;
* link the recommendations and actions to address the risk to the organisation’s risk register (where applicable);
* develop a strategy to implement recommendations across the organisation (where applicable);
* undertake ongoing monitoring to ensure the recommendations are addressed within the agreed time frame; and,
* evaluate the success of any action taken to achieve improvement.

The register of recommendations is reviewed by the Quality, Risk and Performance Governance Group, once a quarter.

### 5.8 Feedback

A key success factor of Intereach’s incident management system is timely and meaningful feedback to stakeholders.

Feedback should be provided to:

* participants, carers and families;
* members of the workforce who notified and were involved in the incident;
* safety and quality committees;
* ESG Committee where appropriate; and,
* other members of the workforce and the organisation, potentially at multiple levels.

Communicating the improvements in safety resulting from the incident will encourage the workforce to report future safety concerns.

Regular reports on individual incidents and their outcomes, trended and aggregated data, should be provided to:

* the executive and board; and,
* safety and quality committees.

### 5.9 System-wide learning

Formal reviews of the incident management system will take place on an annual basis.

For Intereach system-wide learning encompasses several different activities including:

* implementing recommendations more broadly in other similar and applicable contexts;
* monitoring their effectiveness;
* providing feedback to the workforce, executive, board and the wider community; and,
* communicating lessons learnt from different incidents via various mediums.

Another important activity is undertaking aggregated themed analysis of all safety data, not just incidents, and using these to inform improvement plans and projects in a strategic way.

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| --- | --- |
| Context | |
| Standards or other external requirements | Aged Care Quality Standards  Aged Care Charter of Rights  Child Safe Standards NSW  Child Safe Standards Vic  Add other standards such as National Quality Standards |
| Legislation or other requirements | Privacy Act 1988 (Cth)  Privacy and Data Protection Act 2014 (VI)  WHS Act 2011 (NSW)  OHS Act 2004 (Vic) |
| Reference Internal documents | [Disciplinary and Dismissal Policy](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Policy_DisciplinaryandDismissal.docx)  [Privacy Policy](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Policy_All_Privacy.docx)  [Return to Work Policy](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Policy_ReturntoWork.docx?web=1)  Incident Management Plan  [Intereach Organisational Risk Register](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/KeyDocument_Intereach_OrganisationalRiskRegister_2021-2022.docx?web=1)  [Risk Management Framework](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Framework_RiskManagement.docx?web=1)  [WHS Management Framework](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Framework_All_WHS.docx?web=1)  [Children’s Services Missing Child Procedure](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Procedure_ChildrensServices_MissingChild.docx?web=1)  [Children’s Services Death of a child Procedure](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Procedure_ChildrensServices_DeathofaChild%20.docx?web=1)  [Children’s Services Incident, Injury, Trauma and Illness Procedure](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Procedure_ChildrensServices_IncidentInjuryTraumaandIIlness.docx?web=1)  [Children’s Services Notification of Serious Incidents procedure](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Procedure_ChildrensServices_NotificationofSeriousIncidents.docx?web=1)  [Community Transport Incident Guide](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Guidance_CT_SeriousIncidentGuide.pdf)  [ACS Incident Management Plan and supporting documents (report form, investigation form)](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Plan_ACS_IncidentManagementPlan.docx?web=1)  [Aged Care Services SIRS Reporting Procedure](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Procedure_ACS_SIRS%20Reporting%20Procedure.docx?web=1)  [Significant Incident Cause Analysis Tool (WHS)](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Tool_WHS_SignificantIncidentCauseAnalysis.docx?web=1)  [Incident Response Procedure (WHS)](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Procedure_WHS_IncidentResponse.docx?web=1)  [Incident and Hazard Report Form](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Tool_WHS_IncidentandHazardReportForm.docx?web=1)  Incident Investigation Report  [OOSH Incident Response Plan](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Plan_OOSH_IncidentResponsePlan_OOSHCrashCard.docx?web=1)  [Aged Care Services Participant Incident Report Form](https://intereachltd179.sharepoint.com/KnowledgeCentre/QMS%20Documents/Tool_ACS_ClientIncidentReportForm.docx) |

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| Document control | | | |
| Version | Date approved | Approved by | Next review date |
| 1.0 | 27 February 2025 | Board | 27 February 2028 |

## Appendix 1: Reporting and regulatory bodies list

## Incident involving participant

| Serious Incident Type | Internal Notification | Program | External Notification | Report Name | Reporting Timeframe |
| --- | --- | --- | --- | --- | --- |
| Death of a person in the course of receiving a service | * Relevant Senior Manager * Relevant General Manager (notifies the Executive Team) * WHSE Manager (notifies State WHS Regulator) | Aged Care | Aged Care Quality and Safety Commission | SIRs Report | Immediately  For all SIRS Incident types refer to the ACS Incident Management Plan and supporting documents (report form, investigation form) |
| Community Transport | Transport for NSW | Contact TMC  immediately on  1300 725 886 | Immediately |
| Executive Team |  | | | Immediately |
|  | Board |  | | | Within 48 hours |
| A serious injury or illness as defined by the WHS Regulator\*  Or dangerous incident/occurrence (e.g. electrical shocks) that exposes any person to a serious risk, even if no one is injured | * Relevant Senior Manager * Relevant General Manager * WHSE Manager (notifies State WHS Regulator) | Aged Care | Work Safe NSW  [Incident notification | SafeWork NSW](https://www.safework.nsw.gov.au/notify-safework/incident-notification)  Work Safe Australia  [Incident notification | Safe Work Australia](https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/incident-notification) | Notifiable Incident | Immediately |
| Aged Care Quality and Safety Commission | SIRs Report | Immediately |
| Community Transport | Transport for NSW | Contact TMC  immediately on 1300 725 886 | Immediately |
| An injury, trauma or illness that is not defined as serious by the state WHS Regulator, however, requires urgent medical attention from a medical practitioner, the attendance of emergency services or where the person should have attended a hospital | * Relevant Program Manager * WHSE Manager (notifies State WHS Regulator) | Aged Care | Work Safe NSW  [Incident notification | SafeWork NSW](https://www.safework.nsw.gov.au/notify-safework/incident-notification)  Work Safe Australia  [- Incident notification | Safe Work Australia](https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/incident-notification)  Aged Care Quality and Safety Commission | Notifiable Incident  SIRs Report | Immediately  Immediately |
| Community Transport | Transport for NSW | Contact TMC immediately on 1300 725 886 | Immediately |
| * Relevant Senior Manager * WHSE Manager |  | | | Within 4 hours |
| Privacy / Data Breach | * Incident Response Team    Privacy Officer – GM PQ&R (notifies relevant funding body and regulator as appropriate to contractual requirements) | All | Office of the Australian Information Commission  [Report a data breach | OAIC](https://www.oaic.gov.au/privacy/notifiable-data-breaches/report-a-data-breach)  National Disability Insurance Agency (where applicable) | Notifiable data breach form  Report a privacy incident (via Privacy Service Desk) | Immediately |
| Quality Team |  | | | Within 24 hours |
|  | Executive |  | | | Within 24 hours |
| Any serious incident involving a child as per serious incident definition | * Relevant Senior Manager   (notifies relevant funding body and regulator as appropriate to contractual requirements)   * WHSE Manager | Early Childhood  Children’s Services | Office of Children’s Guardian  NSW - [General information | Reportable Conduct notification forms | Office of the Children's Guardian](https://ocg.nsw.gov.au/organisations/reportable-conduct-scheme/reportable-conduct-notification-forms)  Vic – Commission for children and young people  [CCYP | Report a concern or allegation](https://ccyp.vic.gov.au/report-an-allegation/#TOC-1)  NQAITS  [Reporting requirements about children | ACECQA](https://www.acecqa.gov.au/resources/applications/reporting)  [Department of Education, Australian Government](https://www.education.gov.au/early-childhood/community-child-care-fund/restricted-grant/serious-incidents) | Reportable Conduct Notifications forms | NSW - Within 7 Days  VIC – Within 3 Days  Within 24hrs |
|  | Executive Team |  | | | Within 2 hours |
|  | Board |  | | | Within 48 hours |
| Any incident involving a Participant | Relevant Program Manager  (Senior Manager notifies relevant funding body and regulator as appropriate to contractual requirements) | Early Childhood / LAC | National Disability Insurance Agency  Participant critical incidents include the following situations/allegations:   * unexpected death of a National Disability Insurance Scheme (NDIS) participant, or a death that occurs in connection with the provision of NDIS supports or services * serious injury of an NDIS participant * abuse or neglect of an NDIS participant * unlawful sexual or physical contact with, or assault of, an NDIS participant * sexual misconduct committed against, or in the presence of, an NDIS participant, including grooming of the NDIS participant for sexual activity * unauthorised use of a restrictive practice in relation to an NDIS participant * a NDIS participant threatening or attempting self-harm or suicide. | Participant Critical Incident Notification Form | Immediately |
| Any event that causes disruption to the ability to deliver services for any length of time | * Relevant General Manager * General Manager (notifies relevant funding body as appropriate to contractual requirements) * Relevant Program Senior Manager |  |  |  | Immediately |
|  | * Executive |  |  |  | Immediately |
| Serious incident  criteria  - Fatality/serious injury  of a passenger or member of public requiring transportation to hospital.  - Partial or full closure  of a road or an incident  resulting in a significant impact on other modes of transport e.g.  collision, rollaway bus,  multiple services  impacted, departure  from roadway.  - Failure of, or major  damage to  infrastructure or asset.  - Incidents with  significant media  presence or potential to  attract public interest  e.g. children left on  buses, assault  allegations etc.  - Security related  incidents e.g. bomb  threat, serious  threatening behaviour  etc | * Relevant Senior Manager * Relevant General Manager * WHSE Manager | Community Transport | Transport for New South Wales | Contact TMC immediately on1300 725 886 | Immediately |
| For the 8 types of reportable incidents which are:  unreasonable use of force  unlawful sexual contact or inappropriate sexual conduct  psychological or emotional abuse  unexpected death  stealing or financial coercion by a staff member  neglect  inappropriate use of restrictive practices  unexplained absence. | * Relevant Senior Manager * Relevant General Manager | Aged Care | Aged Care Quality and Safety Commission | SIRS | Immediately |
|  | * WHSE Manager |  | | | Within 24 hours |
| Any circumstances that pose a risk to the health, safety or wellbeing of a child in Family Day Care or OOSH | * Program Manager * Senior Manager (notifies relevant funding body and regulator) * WHSE Manager | Children’s Services | NQA IT System  [[National Quality Agenda IT System | ACECQA](https://www.acecqa.gov.au/resources/national-quality-agenda-it-system)](https://www.acecqa.gov.au/resources/national-quality-agenda-it-system) |  | Within 24 hours |
| Reportable Conduct Scheme (state specific) | * Program Manager * Senior Manager (notifies relevant funding body and regulator as appropriate) * WHSE Manager | Children’s Services  Early Childhood  FMH | NSW - [Landing page | Reportable Conduct Scheme | Office of the Children's Guardian](https://ocg.nsw.gov.au/organisations/reportable-conduct-scheme)  Assessment Tools prior to making a report - [General information | Assessment tools | Office of the Children's Guardian](https://ocg.nsw.gov.au/organisations/reportable-conduct-scheme/assessment-tools)  Notification Forms - [General information | Reportable Conduct notification forms | Office of the Children's Guardian](https://ocg.nsw.gov.au/organisations/reportable-conduct-scheme/reportable-conduct-notification-forms) |  | Within 7 business days |
| Reportable Conduct Scheme (state specific) – | * Program Manager * Senior Manager (notifies relevant funding body and regulator as appropriate) * WHSE Manager | Children’s Services  Eealy Childhood | VIC - [CCYP | Reportable Conduct Scheme](https://ccyp.vic.gov.au/reportable-conduct-scheme/)  Reporting Process - [CCYP | Report a concern or allegation](https://ccyp.vic.gov.au/report-an-allegation/)  Reporting Forms  - [CCYP | Notify about a reportable allegation](https://ccyp.vic.gov.au/report-an-allegation/notify-about-a-reportable-allegation/) |  | Within 3 business days |
| Child protection (state specific) | * Program Manager * Senior Manager (notifies relevant funding body and regulator as appropriate) * WHSE Manager | Children’s Services  Early Childhood  FMH | NSW - [Making the report to the Child Protection Helpline | Communities and Justice](https://dcj.nsw.gov.au/children-and-families/protecting-our-kids/reporting-a-child-at-risk/should-i-call-to-report-a-child-at-risk-/making-the-report-to-the-child-protection-helpline.html)  VIC - [Reporting child abuse - DFFH Services](https://services.dffh.vic.gov.au/reporting-child-abuse) |  | Immediately or within 24 hours |
| Serious incident involving NDIS participant | * Relevant Program Manager * (Senior Manager notifies relevant funding body and regulator as appropriate to contractual requirements) * Relevant General Manager | NDIS | NSW, mandatory reporting is regulated by the Children and Young Persons (Care and Protection) Act 1998 (the Care Act), https://www.facs.nsw.gov.au/families/Protecting-kids/mandatory-reporters/about; and,  Victoria, mandatory reporting is regulated under the Children, Youth and Families Act 2005, https://providers.dhhs.vic.gov.au/mandatory-reporting. | Mandatory Reporting | Immediately |
| All incidents involving NDIS participant | Relevant Program Manager  (Senior Manager notifies relevant funding body and regulator as appropriate to contractual requirements) | NDIS | NSW, mandatory reporting is regulated by the Children and Young Persons (Care and Protection) Act 1998 (the Care Act), https://www.facs.nsw.gov.au/families/Protecting-kids/mandatory-reporters/about; and,  Victoria, mandatory reporting is regulated under the Children, Youth and Families Act 2005, https://providers.dhhs.vic.gov.au/mandatory-reporting. | Mandatory Reporting | Within 24 hours |

## Worker related incidents

| Person involved in incident | Serious Incident Type | Internal Notification | Program | External Notification | Report Name | Notification timeframes  *(to key stakeholders and external bodies)* |
| --- | --- | --- | --- | --- | --- | --- |
| Any | Death of a person in the course of work | Relevant Program Senior Manager  Executive Team  Senior Manager WHSE & Quality (notifies State WHS Regulator) | WHS&E | Work Safe Victoria  [Report an incident | WorkSafe Victoria](https://www.worksafe.vic.gov.au/report-incident)  Work Safe NSW  [Incident notification | SafeWork NSW](https://www.safework.nsw.gov.au/notify-safework/incident-notification)  Work Safe Australia  [- Incident notification | Safe Work Australia](https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/incident-notification) | WHS&E | Immediately |
| Board | | | | Within 2 hours |
| Any | A serious injury or illness as defined by the WHS Regulator\*  Or dangerous incident/occurrence (e.g. electrical shocks) that exposes any person to a serious risk, even if no one is injured | Relevant Program Senior Manager  Senior Manager WHSE & Quality (notifies State WHS Regulator) | WHS&E | Work Safe Victoria  [Report an incident | WorkSafe Victoria](https://www.worksafe.vic.gov.au/report-incident)  Work Safe NSW  [Incident notification | SafeWork NSW](https://www.safework.nsw.gov.au/notify-safework/incident-notification)  Work Safe Australia  [- Incident notification | Safe Work Australia](https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/incident-notification) | WHS&E | Immediately |
| General Manager to notify Executive Team | | |  | Within 2 hours |

| Person involved in incident | Serious Incident Type | Internal Notification | Program | External Notification | Report Name | Timeframe |
| --- | --- | --- | --- | --- | --- | --- |
| Any | An injury, trauma or illness that is not defined as serious by the state WHS Regulator, however, requires urgent medical attention from a medical practitioner, the attendance of emergency services or where the person should have attended a hospital | Relevant Program Manager  Program Manager, WHS |  | Work Safe Victoria  [Report an incident | WorkSafe Victoria](https://www.worksafe.vic.gov.au/report-incident)  Work Safe NSW  [Incident notification | SafeWork NSW](https://www.safework.nsw.gov.au/notify-safework/incident-notification)  Work Safe Australia  [- Incident notification | Safe Work Australia](https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/incident-notification) |  | Immediately |
|  | Relevant Program Senior Manager  Senior Manager WHSE & Quality | | | | Within 4 hours |
| Any | Privacy/Data Breach | Incident Response Team  (notifies relevant funding body and regulator as appropriate to contractual requirements) | All | Office of the Australian Information Commission  [Report a data breach | OAIC](https://www.oaic.gov.au/privacy/notifiable-data-breaches/report-a-data-breach) |  | Immediately |
| Quality Team | | |  | Within 24 hours |
| Any | Any event that causes disruption to the ability to deliver services for any length of time | General Manager (notifies Executive Team)  General Manager (notifies relevant funding body as appropriate to contractual requirements)  Relevant Program Senior Manager |  |  |  | Immediately |