Incident Reporting Policy

Incident reports require the reporting, investigation and review of unusual and potentially or actually harmful events and occurrences. Incident reports are used to:

- Support the provision of high quality services to service users;
- Ensure that the practice of Interchange Outer East (IOE) is improved for the betterment of all participants;
- Raise and identify issues so that assistance can be provided to reduce the likelihood of reoccurrence;
- Provide a means of quickly identifying unmet needs or organisational systems that require review;
- Assist the agency to strengthen risk management capabilities;
- Ensure that the workplace is made as safe as possible; and
- Meet compliance requirements established under Acts of Parliament and funding and service agreements.

Interchange Outer East accepts that, in working with people, incidents will occur. The approach to incident reporting is not one of blame or retribution, but of learning to reduce the potential for incidents in the future. Incident reports should be completed where incidents have occurred that place participants at risk or caused actual harm to service users, volunteers, members of the community, staff or property.

Due to different funding obligations and legislation, IOE is required to report incidents to various funders and stakeholders. For this reason, IOE has developed the *IOE Incident Report Form* which will record all necessary information related to the incident. When an incident report is submitted, the team leader or general manager will determine if the incident needs to be forwarded onto a particular funding body.

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 you that the incident occurred. An incident report should be completed where any of the following events have occurred:

- Absent/missing person
- Breach of privacy
- Community concern
- Dangerous actions
- Data breach
- Death
- Emotional/psychological abuse or trauma
- Financial abuse
- Illness
- Inappropriate physical treatment
- Serious injury
- IOE vehicle damage
- Medication error
- Physical abuse
- Poor quality of care
- Property damage
- Self harm/attempted suicide
- Sexual abuse
- Sexual behaviour
- Unauthorised restrictive practice

Who completes the incident report form?

The most senior witness to the incident, or, if there were no witnesses, the staff member to whom the incident was disclosed must complete the initial details of the incident. A staff member should always complete an incident report on behalf of a volunteer and support workers should be supported by a coordinator, or after hours staff, to complete the form.

Time frames

IOE must be notified of incidents as soon as possible. If an incident occurs out of hours, staff responsible for the after hours phone should be notified. Serious incidents require the incident report to be submitted within 24 hours. All other incidents should be reported within three days of the incident occurring.

Follow up actions

Follow up actions should be completed by a coordinator or team leader. Actions should include who will do what, by when. This information is recorded on the incident register until all actions have been completed.

Post incident assessment

A post incident assessment should be completed by the coordinator or team leader. The assessment aims to identify the cause of the incident, its effect on the person with disability and any operational issues that may have contributed to its occurrence. The assessment results in follow-up actions required to minimise the risk of the incident occurring again.

Review

The quality coordinator will conduct a six-monthly review of all incidents that have occurred. The review will identify any trends across programs, participants, volunteers and or staff. The review will include recommendations for further actions that may be required to reduce likelihood or impact of reoccurrence.