

INCIDENT MANAGEMENT AND REPORTING POLICY



Purpose

Aurora Support Services is committed to ensuring that staff possess the required knowledge and skills to identify, manage, report and resolve incidents effectively and that the organisation remains compliant with all relevant legislative requirements.

The organisation will collect and review data on incidents in order to inform improvement activities, ensure wellbeing of staff and participants and to facilitate reporting.

The NDIS Commission requires all registered NDIS providers to have an incident management system in place to record and manage incidents.

Incidents that must be recorded and managed include incidents where harm, or potential harm, is caused to or by a person with disability while they are receiving supports or service.

The incident management system must include procedures for identifying, assessing, recording, managing, resolving and reporting incidents.

Certain incidents must be reported to the NDIS Commission, including the death, serious injury, abuse or neglect of a person with disability, or unauthorised use of restrictive practices.

Scope

This policy applies to all employees, students, volunteers, contractors and members of the Committee of Management of Aurora Support Services.

This policy is relevant to all participants who attend Aurora Support Services as well as to their family members and any other supports who may interact with Aurora Support Services on their behalf.

Definitions

Incident	Acts, omissions, events or circumstances that occur, or are alleged to have occurred in connection with providing supports or services to person with disability that have, or could have caused harm to the person with disability or to another person.
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Policy

Reporting and Management of Incidents

All incidents that occur during the delivery of services will be **identified** and **responded** to appropriately. Responses include actions to ensure the safety and wellbeing of participants, staff and others, as well as follow up actions to identify opportunities for improvement and measures to prevent re-occurrence.

Aurora Support Services promotes a culture of open reporting and ensures that all workers understand that they will be supported to report incidents and that there will be no negative consequences for doing so.

All incidents will be appropriately assessed or investigated where appropriate to do so.



Incident Management and Reporting Policy

A number of actions must be taken during or immediately after an alleged incident has occurred and should be co-ordinated by a Program Manager or Services Director.

These actions are listed below, according to the general order in which they should be carried out. Some actions may occur simultaneously, or depending on the circumstances, may need to be prioritised according to the assessment and professional judgement of Management.

Immediate Actions to Ensure Safety and Wellbeing

Call emergency services in the first instance if necessary

Ensure the immediate safety needs of participants, staff and others are met

Notify Management as soon as practicable

Administer First Aid, if necessary

Seek medical attention, if necessary

Participant debriefing or counselling provided as necessary, as well as ensuring all relevant parties are kept informed of relevant follow-up actions

Notify staff, primary carer and family

Report to Victoria Police, if applicable

Follow up Actions:

Complete Incident Report – Most senior witness* to incident should complete and submit Part A of Incident Report as soon as practicable and no later than close of business on the day of the incident.

*Seniority is defined in the following order:

1. Management
2. Permanent Support Workers
3. Casual Support Workers

Program Manager completes Part B of Incident Report and tables incident for review at next staff meeting.

Program Manager emails Services Director copy of Incident Report to be entered into Aurora Support Services' Incident Management Register and reported to the NDIS Quality and Safeguards Commission via the appropriate portal if applicable. Program Manager scans Incident Report into SharePoint, and files the original report in Central Records Folder.

Incidents included on the Incident Management Register are tabled for discussion at Senior Management Meetings and quarterly OH&S Meetings if relevant, and are reported to the Committee of Management.

Staff Orientation and Training in Incident Management and Reporting

All staff will be trained to identify, manage and report incidents.

The following will occur as part of the Induction process for new staff:

- Overview of Incident Management and Reporting Policy, and Incident Report Forms
- Completion of eTrainU online *Incident Reporting* Training Module at induction and with 2-yearly refreshers.



Incident Management and Reporting Policy

- Overview of NDS Zero Tolerance Framework

Reportable Incidents – NDIS Commission

The NDIS Commission deem that each of the following is considered to be a reportable incident if it occurred, or is alleged to have occurred in connection with the provision of supports or services by a registered NDIS provider:

- 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 a disability, including grooming of the person for sexual activity
- Use of a restrictive practice that is unauthorised by the State or Territory, or does not follow a behaviour support plan for the person with disability.

Reportable incidents must be notified to the NDIS Commission **within 24 hours**, except for unauthorised use of a restrictive practices, which is to be notified to the Commissioner **within 5 days** of the provider becoming aware that the reportable incident has occurred.

Upon becoming aware of a reportable incident having occurred, the Services Director will notify the NDIS Commission via the NDIS Commission Portal.

Reportable Incidents – Victorian Disability Worker Commission (VDWC)

The VDWC must be notified of any conduct by a disability support worker that may put participants at risk, under the *Disability Worker Regulation Scheme*. Aurora Support Services must make a report to the VDWC if there is a reasonable belief that a support worker has engaged in any of the following notifiable conduct:

- Intoxication: a support worker practicing while under the influence of alcohol or drugs.
- Sexual misconduct: any unwelcome sexual behaviour, physical or verbal, from a worker towards a person with disability, whether or not it constitutes a criminal offence.
- Impairment: a support worker has an impairment which significantly affects their ability to practice and places the public at risk of harm.
- Significant departure from professional standards: a support worker has acted in a way that significantly deviates from accepted professional standards, such as those in a Code of Conduct.

The VDWC must consider a notification within 60 days of receiving it and will then determine the most appropriate actions after considering the notification.

Other Policies and Procedures to be Implemented if Relevant

Critical Incident and Stress Management Procedure – to be implemented for incidents that may cause emotional distress or discomfort for the staff members involved.

Internal Workplace Investigation Procedures – to be implemented in response to incidents which include an allegation of a staff member conducting violence, abuse, neglect, exploitation or discrimination.



Incident Management and Reporting Policy

Notifying WorkSafe of a Serious Injury or Dangerous Occurrence Procedure – to be implemented for incidents involving injury to staff which meet WorkSafe's requirements for what must be reported to them.

Performance Management and Development Policy – to be implemented where incidents indicate that staff members involved may not have done their job properly, have behaved in an unacceptable way at work, or may require support to understand the required standards of performance.

Privacy, Dignity and Confidentiality Policy – to be implemented for an incident involving personal information being lost or being accessed or disclosed without authorisation.

WorkSafe Policy – to be implemented for incidents involving injury to staff which results in their requiring time off from work or seeking medical attention.

Policy Review

Document Owner/Approver	Services Director
Date Reviewed	27 October 2025
Timeframe For Next Review	This policy is reviewed on a two-yearly basis. The policy will, however, be reviewed before this time if it is identified that changes in the legislative, policy and/or funding environment have rendered the policy no longer appropriate in its current form.
Next Review Due	27 October 2027

Policy Context

NDIS Rules and Standards	NDIS (Code of Conduct) Rules 2018 NDIS (Provider Registration and Practice Standards) Rules 2018 NDIS (Incident Management and Reportable Incidents) Rules 2018 NDIS Practice Standards Core Module 2, Provider Governance and Operation Management – Incident Management
Relevant Legislation	Disability Act 2006 NDIS Act 2013 Dangerous Goods Act 1985 Disability Service Safeguard Act 2018 Privacy Act 1988 Occupational Health and Safety Act 2004 Work Health and Safety Act 2011 Workplace Injury Rehabilitation and Compensation Act 2013
Contractual Obligations	NDIS Conditions of Registration Individual Service Agreements for NDIS Participants Individual Brokerage Agreements for DSOA Participants
Related Policies and Procedures	Critical Incident and Stress Management Policy (Incorporating Employee Assistance Program) Employee Professional Standards Policy Internal Workplace Investigation Procedure Notifying WorkSafe of a Serious Injury or Dangerous Occurrence Procedure Performance Management and Development Policy Training and Development Policy WorkSafe Policy
Related Forms and Documents	Incident Report Forms <i>If You Are Injured at Work</i> (Gallagher Bassett) Poster



Incident Management and Reporting Policy

Incident Management Register
Risk Assessment Report – Venue
Risk Assessment Report – General
Risk Assessment Report – Participant
Code of Conduct Agreement
National Disability Services' Zero Tolerance Framework

Incident Management and Reporting Policy – Easy Read



What is an Incident?

An incident is something that happens that:

- Hurts someone, or
- Could hurt someone.

This can happen during your support or service.



If you feel unsafe or something is wrong:

- Tell a staff member.
- Tell a Manager.
- Tell someone you trust (family, carer, advocate).

Nobody gets in trouble for reporting a problem.



If something goes wrong

Your safety comes first.

Staff will:

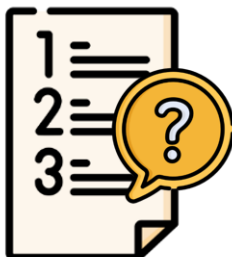
- Make sure you are safe.
- Call emergency services if needed.
- Give first aid or seek medical help.
- Tell a Manager.
- Tell your family or carer.
- Offer you support like talking or counselling, if you need it.



What happens after an incident?

Staff will:

- Write a report about what happened.
- Look at what went wrong.
- Try to stop it from happening again.



Managers will review incidents to improve services and keep people safe.

Incident Management and Reporting Policy – Easy Read

Serious Incidents



Some incidents must be reported to the NDIS Commission, such as:

- Death.
- Serious injury.
- Abuse or neglect.
- Sexual misconduct.
- Unauthorised restrictive practices.

These must be reported quickly (usually within 24 hours).

If a worker does the wrong thing



Aurora must report workers if they:

- Are under the influence of drugs or alcohol.
- Behave in a sexual or unsafe way.
- Cannot do their job safely.
- Break professional rules.