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## 1. Policy

ELIZABETH MACKNEY will promote the health, safety, welfare and well-being of its Participant/Clients and meet its professional and legal responsibilities by ensuring any incidents are appropriately:

- identified and recorded
- assessed to determine corrective and/or harm minimisation strategies
- investigated where necessary
- followed up in a timely manner and to ensure satisfactory outcomes are achieved
- considered against legislative / funding body requirements / guidelines (including the *NDIS Quality and Safeguards Commission: Incident Management System*) and acted upon / reported as required
- shared where appropriate to assist with quality improvement.

## 2. Outcomes

- Risks will be identified and managed to eliminate or minimise any adverse event
- The impact of any incident will be minimised
- Participants / other stakeholders will be satisfied with the outcome of the management of risks and incidents
- Those involved are aware and accepting of the outcome of the management of risks and incidents
- There will be minimal reoccurrence of incidents
- ELIZABETH MACKNEY will be aware of risks and incidents and the actions taken to manage these events

## 3. Definitions

*Incident* event or situation that could have resulted in harm to an individual or to the business. This includes, but is not limited to:

- Injury and / or near-miss to Participant/Client
- Injury and / or near-miss to workers
- Complaint or negative feedback about the service
- Suspected abuse of Participant/Client / others
- Breach of privacy / other Participant/Client rights
- Less than expected therapeutic outcome
- Damage to equipment / goods
- Breach of statutory obligations

Note: **NDIS Definition** = "acts, omissions, events or circumstances that occur in connection with providing supports or services to a person with disability; and that have, or could have, caused harm to a person with disability."

*NDIS Quality and Safeguards Commission: Incident Management System, p4*

*Accident* event or situation that actually resulted in harm to an individual or damage to equipment

*Risk* something that could potentially lead to an incident or accident

For the purpose of this policy, incidents and accidents will be referred to as "incident" for ease of reading.

#### 4. Related Policies / Documents

- Feedback and Complaints Management Policy
- Safe Management and Environment Policy
- Risk Management Policy
- Service Delivery Model
- Incident and Complaint Report Form
- Incident Investigation Form

#### 5. Procedures

See also:

- Section 6 if incident relates to suspected abuse
- **Feedback and Complaints Management Policy** if the incident is feedback / a complaint)

##### a. Identifying Incidents

While some incidents are obvious (eg a client fall) it is also important to understand that not all incidents may be so readily identified. Section 3.1 of the [NDIS Commission Incident Management Systems: Detailed Guidance for Registered NDIS Providers June 2019](#) provides guidance to ELIZABETH MACKNEY to consider potential indicators and signs associated with particular types of incidents. While it is acknowledged that this is not an exhaustive list, staff will be educated to assist them with better identifying incidents or potential incidents.

##### b. For all incidents

- An Incident and Complaint Report form is to be completed within 24hrs. The report must include all necessary factual details, immediate actions that have been taken and any identified / planned follow-up actions, and any reports made to other bodies
- Actions are to include as a minimum
  - Providing support to affected person/s
  - Consideration by ELIZABETH MACKNEY if the incident is reportable and if police/other agencies should be involved, and actions then taken as appropriate
  - When, how and with whom follow-up will occur
  - Risk assessment of the incident, including seeking feedback from involved parties e.g. Participant/Client, workers (see Incident and Complaint Report Form and/or Incident Investigation Form)
  - Evaluation / review at the conclusion of the incident to ensure involved parties are satisfied with the outcome
  - Consideration of what people / process / policy changes could be made to improve ELIZABETH MACKNEY's systems (refer to 'Outcomes' below).

##### c. Incident investigations

- If required, a formal incident **investigation** will be conducted (use the *Incident Investigation Form*) to explore in more detail why an incident occurred and if any steps are required to prevent it occurring again. As a **minimum**, incidents requiring investigation include:
  - Any 'Notifiable' incident (refer to Appendices A and B for what needs to be reported, to whom and how)
  - Any mandatory report made (See Section 6 below)

- Any incident that could lead to potential litigation.

**Note:** If police are involved in the incident, no internal investigation is to commence until the police investigations are complete.

The Governing body is to be informed as soon as practicable of any incident investigations and their outcomes.

#### **d. Outcomes**

- Outcomes of formal or informal assessments/investigation could include:
  - Further training of staff / others involved
  - Reviewing and enhancing policies and / or procedures
  - Changes to the environment / delivery mode for support services
  - Participant/Client (and / or his/her family) and Provider agree to accept the risks inherent in support delivery to achieve goals

#### **e. Follow-Up/Review**

- Actions will be monitored by ELIZABETH MACKNEY and updates on progress will be added to the relevant documentation systems until the incident is satisfactorily concluded
- The Governing body will review the management of all incidents
- Incident reports and all related documents are to be kept for 7 years

#### **f. When a Participant incident / injury occurs**

- Respond to immediate needs and re-establish a safe environment. Make sure Participant and any others present are safe
- If required, call emergency services to assist, seek medical attention, commence first aid
- Contact the appropriate emergency contact or 'significant other' (eg parent / spouse / son / guardian) as soon as practicable
- Determine what support the Participant/Client and / or their family require and how this can be best delivered. This is to include asking them if they want the support of an advocate
- Consult with the Participant/Client and / or their family on how to satisfactorily resolve the issue and what could have been done to prevent it occurring
- Keep the Participant/Client informed of progress on the incident
- If a Participant/Client is involved and receives funding from a government body (e.g. NDIS\*, icare, DVA), ELIZABETH MACKNEY will review the requirements and complete the required reporting i.e. Notifiable Incidents (refer to Appendices A & B)
- If the incident could lead to any potential litigation, ELIZABETH MACKNEY's professional liability insurer must be informed.

### **6. Mandatory reporting of suspected incidents of risk of harm to a Participant/Client**

#### **Policy**

ELIZABETH MACKNEY will promote the health, safety, welfare and well-being of its Participant/Clients and meet its professional and legal responsibilities by ensuring any suspected abuse is appropriately assessed and considered against set guidelines and reported as required.

## Outcome

- ELIZABETH MACKNEY fulfils its statutory obligations under the relevant NSW legislation.  
See Appendix C
- ELIZABETH MACKNEY will feel assured Participant/Clients identified as "at risk" will receive assistance through the authorities responsible

## Procedures

**For all suspected incidents of risk of harm the following steps are to be taken. Any specific requirements for children, adults or aged clients are listed below these, as are the documentation requirements.**

Provider who suspects a person (child, adult, aged person) may be at significant risk of harm is to determine if a report may have been made by other members of the support team (e.g. his / her Case Manager, NDIS Support Coordinator). If written evidence of the report having been made is provided, there is no further requirement for a report to be made. If no report has been made the following steps are to be followed:

- a. ELIZABETH MACKNEY is to make observations regarding the Participant/Client to collect as much information as possible about the situation - if safe to do so.
  - b. Record information in the Participant notes.
  - c. As soon as practicably possible, but within at least 24 hours
    - i. review the situation against the appropriate legislation / guides (as per Groups A-D below).
    - ii. complete ELIZABETH MACKNEY's *Incident and Complaint Form*. Where possible, this is to include additional details. A guide on what is useful to record is included in Appendix C.
- II. ELIZABETH MACKNEY is to assess the situation using the appropriate guidance material (as per Groups A-D below) and / or seeking assistance from the relevant authority or (relevant town) Police.
  - III. If a decision is made that mandatory reporting is required, ELIZABETH MACKNEY will follow the reporting process.
  - IV. If after reference to the relevant guide / policy the matter is considered **urgent** it will be reported to the appropriate service by the required method.
  - V. If the risk is considered non-imminent, an online report will be completed
  - VI. ELIZABETH MACKNEY will assist with any investigation or action undertaken by the department or other authorised bodies as a result of the report
  - VII. ELIZABETH MACKNEY will monitor progress and add actions / development to the completed incident form until the matter is resolved or closed. Reporting and monitoring shall be as per the Complaints-Incidents management system

ELIZABETH MACKNEY has identified four groups (A-D) where various requirements will need to be met / followed.

## **Group A Children aged from birth to 18 years regardless of funding source**

### **Specific requirements for children**

- I. If there are concerns the child's health or life is at **imminent risk**, contact the **police** by calling **000**.

In other situations the following steps are to be taken:

- II. Assess the situation using the [NSW online Mandatory Reporter Guide](#) which provides a decision tree on whether or not a report to the Child Protection Helpline is appropriate.
- III. If the matter is considered **urgent** (using the Mandatory Reporting Guide) submit a report by phone to the Child Protection Helpline on **132 111**.
- IV. If the risk is considered non-imminent an electronic report is to be completed using the [eReporting System](#).

## **Group B Participant/Clients being *funded by NDIS* - all ages**

If funded by NDIS, follow procedures for NDIS Incident Management (refer to Appendix A).

## **Group C Disability clients aged 16 to 65 not being funded under NDIS**

### **For non-government funded *clients with a disability* aged 16-65**

Advice is to be sought from:

- the National Disability Abuse and Neglect Hotline can receive complaints – phone 1800 880 052  
<https://www.jobaccess.gov.au/service-providers/making-complaint-and-reporting-abuse-and-neglect>
- NSW Police Force 131 444 can investigate all crimes, including assault, theft and fraud
- NSW Ombudsman phone 02 9286 1000, 1800 451 524, [nswombo@ombo.nsw.gov.au](mailto:nswombo@ombo.nsw.gov.au)
- Assistance for the participant to access an advocate as required can also be by referral to [Disability Advocacy NSW](#)

## **Group D Older clients *aged 65 and over***

Information about abuse and abuse prevention, as well as advocacy, useful contacts and options for getting help:

- See **Appendix C**
- [My Aged Care](#) includes elder abuse contacts / links for all states and territories.
- Guidance if the abuse happens in residential care facilities

<https://agedcare.health.gov.au/ensuring-quality/aged-care-quality-and-compliance/guide-for-reporting-reportable-assaults>

### **Specific requirements for clients aged over 65**

- I. If you witness, are told about or suspect elder abuse is occurring, seek advice from either
  - a. The national 1800 ELDERHelp (1800 353 374) line (freecall). They provide information on how you or the person involved can get help, support and get referrals.
  - b. Follow guidance as per Appendix C

## **7. Training Workers on Incident Management**

Sole trader, Elizabeth Mackney, will review ELIZABETH MACKNEY's Incident Management policy and procedures regularly. Evidence of this will be maintained in the **SELF-MONITORING INDUCTION/REFRESHER TRAINING/CPD/PEER REVIEW & UPDATE OF POLICIES & PROCEDURES AND REGISTRATIONS/INSURANCE CHECKLIST.**

## 8. Appendix A: Reportable Incidents

### NDIS require to be reported:

“Reportable incidents are serious incidents or alleged incidents which result in harm to an NDIS participant and occur in connection with NDIS supports and services. Specific types of reportable incidents include:

- The 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 (excluding, in the case of unlawful physical assault, contact with, and impact on, the person that is negligible).
- Sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity.
- The use of a restrictive practice in relation to a person with disability, other than where the use is in accordance with an authorisation (however described) of a State or Territory in relation to the person or a behaviour support plan for the person.”

[NDIS Commission Incident Management Systems: Detailed Guidance for Registered NDIS Providers June 2019](#), p4

## 9. Appendix B: NDIS Processes for Reporting Incidents

In the box below is an extract from the NDIS Quality and Safeguards Commission. It outlines the reporting requirements to the NDIS including **timeframes and required forms**.

Extracted 31 Oct 2019

<https://www.ndiscommission.gov.au/providers/incident-management-and-reportable-incidents>

### “How to notify the NDIS Commission of a Reportable Incident from 1 July 2019

There are key steps for registered NDIS providers to notify the NDIS Commission about reportable incidents. These are outlined below.

From 1 July 2019 registered NDIS Providers in ACT, SA, NSW, NT, QLD, TAS and VIC should use the [NDIS Commission Portal](#) ‘My Reportable Incidents’ page to notify and manage all reportable incidents.

#### STEP 1. Notify the NDIS Commission

- The Immediate Notification Form must be submitted via the [NDIS Commission Portal](#) **within 24 hours** of key personnel becoming aware of a reportable incident or allegation.
- The Immediate Notification Form includes a number of sections and questions, concerning details of the reportable incident, actions taken in response to the incident and the individuals involved in the incident.
- An exception to this rule is notifying the NDIS Commission of the use of a restrictive practice that is unauthorised or not in accordance with a behavior support plan. In these instances, the provider must notify the NDIS Commission within five business days of being made aware of the incident. If however, the

incident has resulted in harm to a person with disability, it must be reported within 24 hours.

- To notify the NDIS Commission of an incident the authorised 'Notifier' or 'Approver' needs to login to the NDIS Commission Portal and select 'My Reportable Incidents' tile at the top of the screen. From here, you will be able to complete an Immediate Notification Form.
- The NDIS Commission suggests the '**Authorised Reportable Incidents Approver**' is the person you want to have the authority to review and be responsible for submission to the NDIS Commission. This could be the person specified in your incident management system who is responsible for reporting incidents to the NDIS Commission. The authorised 'Approver' will have the ability to submit new Reportable Incidents and view previous Reportable Incidents submitted by their organisation.
- The NDIS Commission suggests the '**Authorised Reportable Incidents Notifier**' is a supporting team member who can assist the 'Authorised Reportable Incidents Approver' to collate and report the required information. The authorised 'Notifier' will have the ability to create new Reportable Incident notifications to be saved as a draft for review and submission by the authorised 'Approver'. The authorised 'Notifier' will need to inform the authorised 'Approver' that the Incident is awaiting their review and submission. The 'Notifier' can also view past Reportable Incidents they have created through the page.

### **STEP 2: Submit a 5 Day Form**

- The 5 Day form must be submitted via the 'My Reportable Incidents' portal **within five business days** of key personnel becoming aware of a reportable Incident. This provides additional information and actions taken by the NDIS registered provider.
- The five-day form is also to be used for incidents involving the unauthorised use of a restrictive practice, other than those resulting in immediate harm of a person with disability.

### **STEP 3: Submit a final report, if required**

- You may be required to provide a **final report** at the request of the NDIS Commission. When this is the case, the NDIS Commission will provide this form to you via email.

There are key considerations for registered NDIS providers. In all cases, providers must assess:

- The impact on the NDIS Participant/Client.
- Whether the incident could have been prevented.
- How the incident was managed and resolved.
- What, if any, changes will prevent further similar events occurring.
- Whether other persons or bodies need to be notified.

Where appropriate, the NDIS Commission may require a provider to take remedial measures. The NDIS Commission may work with the provider to implement these measures, and monitor progress. Remedial measures may include, but are not limited to, additional staff training and development or improved services to support NDIS Participant/Clients and updating policies and procedures.

For further information including hints and tips, please refer to the [Reportable Incidents Frequently Asked Questions](#)."

## **10. Appendix C: Statutory obligations under the relevant NSW legislation.**

- Mandatory reporting of suspected incidents of risk of harm to a Participant/Client - CHILDREN

The following extracts are from

<https://aifs.gov.au/cfca/publications/mandatory-reporting-child-abuse-and-neglect>

*Key features of legislative reporting duties: "state of mind" that activates reporting duty and extent of harm:*

*Suspects on reasonable grounds that a child is at risk of significant harm*

*A child or young person “is at risk of significant harm if current concerns exist for the safety, welfare or wellbeing of the child or young person because of the presence, to a significant extent, of ... basic physical or psychological needs are not being met or at risk of not being met ... not receiving necessary medical care ... not receiving an education in accordance with the Education Act 1990 ... physical or sexual abuse or ill-treatment ... serious physical or psychological harm as a consequence of living in a household where there have been incidents of domestic violence ... serious psychological harm ... the child was the subject of a prenatal report under section 25 and the birth mother did not engage successfully with support services to eliminate, or minimise to the lowest level reasonably practical the risk factors that gave rise to that report”*

**Key features of the legislation in each state and territory: who must report, and what must be reported:**

New South Wales	
<b>Who is mandated to report?</b>	<p>A person who, in the course of his or her professional work or other paid employment delivers health care, welfare, education, children's services, residential services or law enforcement, wholly or partly, to children.</p> <p>A person who holds a management position in an organisation, the duties of which include direct responsibility for, or direct supervision of, the provision of health care, welfare, education, children's services, residential services or law enforcement, wholly or partly, to children</p>
<b>What must be reported?</b>	Reasonable grounds to suspect that a child is at risk of significant harm; and those grounds arise during the course of or from the person's work
<b>Abuse and neglect types that must be reported</b>	<ul style="list-style-type: none"> <li>▪ Physical abuse</li> <li>▪ Sexual abuse</li> <li>▪ Emotional/ psychological abuse</li> <li>▪ Neglect</li> <li>▪ Exposure to domestic violence</li> </ul>
<b>Legal provisions</b>	Sections 23 and 27 of the <i>Children and Young Persons (Care and Protection) Act 1998 (NSW)</i>

Further details and information about mandatory reporting can be obtained from the relevant statutory child protection authority in each jurisdiction. Contact and other details for each state and territory office can be found in ‘*Reporting Abuse and Neglect: State and Territory Departments Responsible for Protecting Children*’ at <https://aifs.gov.au/cfca/publications/mandatory-reporting-child-abuse-and-neglect>

- Mandatory reporting of suspected incidents of risk of harm to a Participant – THE ELDERLY, NSW

The following extracts are from

<https://www.ageingdisabilitycommission.nsw.gov.au/contact-us>

Updated and reviewed by Elizabeth Mackney and Meghan Thamm April 2026

### The Elder Abuse Suspicion Index (EASI)

*Future research is needed to provide appropriate and validated tools useful across various fields that play a role in identifying abuse of older people in NSW where abuse is suspected. One such validated tool promoted by the Royal Australian College of General Practitioners is the **Elder Abuse Suspicion Index**, which was developed for use in a general practice.*

### Caregiver Strain Index

*Caregiver stress is common and it is normal to feel emotional and physical stress when caregiving. People who experience caregiver stress can be vulnerable to changes in their own health. It is important to recognise when a carer needs assistance, even if they are not asking for help - see **assessment tool for carer's strain PDF***

- Mandatory reporting of suspected incidents of risk of harm to a Participant/Client - ADULTS, NSW

The following extracts are from

<https://officeofsafeguarding.org.au/reporting-abuse/reporting-abuse-of-a-vulnerable-adult/>

*Except in extraordinary circumstances, you should discuss your concerns with the vulnerable adult and ensure they are in control of reporting their abuse. If the vulnerable adult states they do not want you to report suspected abuse, you must discuss the situation with your supervisor and carefully consider your ethical obligations.*

Abuse of people with a disability as having occurred when someone's human rights are violated by the actions of another person, and should be considered in terms of:

*Exploitation: Taking advantage of a person or situation in a way to get benefit*

*Neglect: Failure by the person's responsible caregiver to provide necessary care, aid or guidance*

*Violence: Threatening or using physical force that results in injury, psychological harm or death*

*Impact: The physical and emotional effect of an action on a person.*

Abuse and neglect can happen:

*Deliberately: Someone wants to harm or take advantage of a person*

*Accidentally: People do not realise their actions are abuse or the impact their actions have on people they are supporting*

*Systemically: Staff not trained or supervised properly or adequately supported to do their job, or not enough funding to meet needs.*

### **WHERE TO REPORT ABUSE AND NEGLECT:**

#### **Contact the NSW Ageing and Disability**

**Commission:** <https://www.ageingdisabilitycommission.nsw.gov.au/>

P: 02 4904 7500

E: [Commissioner@adc.nsw.gov.au](mailto:Commissioner@adc.nsw.gov.au)

#### **Contact the Ageing and Disability Abuse Helpline:**

To report allegations of abuse or neglect of frail aged or adults with disabilities:

P: 1800 628 225 (9am-5pm Mon-Fri)

E: [nswadc@adc.nsw.gov.au](mailto:nswadc@adc.nsw.gov.au)

If you are unable or unwilling to contact the NSW Ageing and Disability Commission or you believe it is more appropriate to make direct contact with the particular responsible authority:

**Emergency:**

If the vulnerable adult is seriously injured or in need of urgent medical help, if they or you are being threatened, or if you just witnessed a serious accident or crime; stay calm and ring **000**.

**Criminal offence:**

If you believe a criminal offence has been committed against a vulnerable adult, but it does not warrant a 000 call, you should contact the local Police station. You can locate the local Police station online:

[www.police.nsw.gov.au/about\\_us/regions\\_commands\\_districts/police\\_station\\_search](http://www.police.nsw.gov.au/about_us/regions_commands_districts/police_station_search)

You may contact the Police Assistance Line: 131 444 (available 24 hours, 7 days a week)

**Victim of domestic violence:**

If the vulnerable adult is a victim of domestic or family violence, you should ring the National Sexual Assault, Domestic and Family Violence Counselling Service for advice, support and referrals. P: 1800 737 732 available 24 hours, 7 days a week

**Reporting alleged abuse by an NDIS worker:**

If the vulnerable adult is being abused by a person employed by a NDIS service or by a peer in a NDIS service, contact the NDIS Quality and Safeguards Commission:

[www.ndiscommission.gov.au](http://www.ndiscommission.gov.au) P: 1800 035 544 (9am-5pm Mon-Fri)

Online complaint:

[www.forms.business.gov.au/smartforms/servlet/SmartForm.html?formCode=PRD00-OCF](http://www.forms.business.gov.au/smartforms/servlet/SmartForm.html?formCode=PRD00-OCF)