

Incident Reporting and Management Procedure

CPSN is dedicated to fostering a safe and secure environment by ensuring incidents are promptly reported and addressed with the utmost care and responsibility.

We recognise the importance of a transparent and supportive reporting framework, ensuring all individuals, particularly those in vulnerable situations, feel empowered to report incidents without fear of reprisal.

This procedure and its associated policy promotes a holistic approach to safety, prioritising physical, emotional, and cultural wellbeing while fostering accountability and continuous improvement.

This procedure includes information about how CPSN manages notifiable and/or reportable incidents, including client deaths.

Record of procedure development

Version	Date approved	Date for review
Version 4	February 2026	February 2028

Responsibilities and delegations

This procedure applies to:	Board, members, clients, management, staff, volunteers, contractors
Procedure approval:	CEO
Review of Procedure Compliance	General Manager, Service Delivery

Specific responsibilities:

Board
CEO
General Manager, Service Delivery
Human Resources Manager
Employees with supervisory responsibilities
CPSN Workers
CPSN members, clients & stakeholders

Policy Statement

This procedure describes **how** CPSN implements its Incident Reporting and Management Policy. The policy describes CPSN's intention and standard in relation to all incidents.

Equipment and resources required

Equipment and resources required to adequately respond to incident reporting and management will be embedded into this procedure and reviewed in response to each incident.

Definition

Incidents: are acts, omissions, events or circumstances that occur or could occur during or in relation to the provision of supports, or the alteration or withdrawal of supports, that cause harm, either physically or emotionally, to a worker, client, or other stakeholder. Incidents also include acts, omissions, events or circumstances that have caused or could cause damage to property, the environment, material or cause public alarm.

Notifiable Conduct in relation to a Victorian Disability Worker must be reported to the Victorian Disability Worker Commission and means the disability worker:

- practiced as a disability worker while intoxicated by alcohol or drugs
- engaged in sexual misconduct while practising as a disability worker
- placed, or may place, the public at risk of harm because the disability worker has an impairment that detrimentally affects, or is likely to detrimentally affect, the disability worker's capacity to practice as a disability worker, or
- placed, or is placing, the public at risk of harm because the disability worker practiced, or is practicing, as a disability worker in a manner that constitutes a significant departure from accepted professional standards.

Reportable Incidents: refer to incidents, or alleged incidents, of severity that must be reported to NDIS Quality and Safeguards Commission. This includes but is not limited to:

- the death of a client
- serious injury
- abuse or neglect
- sexual misconduct
- unauthorised restrictive practices.

Reportable Conduct refers to conduct that must be reported by the CEO to the Victorian Commissioner for Children and Young People. There are five types of 'reportable conduct':

- sexual offences committed against, with or in the presence of a child
- sexual misconduct committed against, with or in the presence of a child
- physical violence against, with or in the presence of a child
- any behaviour that causes significant emotional or psychological harm to a child
- significant neglect of a child.

Employee means a person who is employed by CPSN with wages or salary.

Staff means all the people employed by CPSN or within a specific work area.

Worker means any person engaged by CPSN to perform a service, paid or unpaid, and may include but is not limited to employees, consultants, contractors, employees of a labour hire company, apprentices, trainees, students or volunteers.

Please note that CPSN also has responsibility to report “**Notifiable Incidents**” to WorkSafe Victoria or the applicable State/Territory regulator. This term is defined in the Work, Health and Safety Policy.

Procedure

Purpose of this Procedure

The Incident Reporting and Management Policy outlines the roles and responsibilities for implementation of the policy and this procedure. These roles and responsibilities are embedded within this procedure.

Procedure

Induction and staff training

All workers must be familiar with CPSN’s incident reporting and management system, understand the definition of a Reportable/Notifiable Incident, and understand the procedures they must follow for reporting all incidents to the organisation and an external body – i.e. their supervisor, police, NDIS Quality and Safeguards Commission, Commissioner for Children and Young People, Victorian Disability Worker Commission, and/or WorkSafe Victoria.

CPSN promotes a culture of open reporting and ensures that all workers understand that they are supported to report any incident or alleged incident, and that CPSN views incident reporting as positive with a focus on learning and development, rather than punitive measures.

Incident identification

An incident is defined under the following categories and definitions:

- Injury – required first aid (from band-aid/ice-pack to hospitalisation)
- Incident – something occurred, did not require first aid (I.e. near miss)
- Hazard – possibility to cause incident or injury (I.e. flooded floors, electrical issue)
- Error – in medication, process or judgement
- Service Quality – process, action, system, behaviour, response, timelines or decision
- Abuse & Neglect (Reportable/notifiable) – verbal, physical, psychological, sexual misconduct, bullying, intimidation, duty of care, failure to report, financial, etc
- Death – the death of a client supported by CPSN

If a worker observes an incident, alleged incident, hazard or applicable concern, or a client or member of the public notifies a worker about these, and where that does or could cause permanent or temporary detriment to a client, worker or other stakeholder, then the worker must report the incident to their supervisor as soon as practicable, ensuring 000 are called first if the incident is an emergency or is life-threatening.

Workers 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 immediate supervisor. First respondents 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 serious incidents workers must first contact emergency services
- workers must report all incidents internally to their immediate supervisor

- if it is determined that the incident is serious the General Manager, Service Delivery is responsible for notifying families, guardians and advocates of the client.
- if an incident is a Reportable Incident or Notifiable/Reportable Conduct, the CEO and/or the General Manager, Service Delivery is responsible for notifying the relevant external body/ies including but not limited to: NDIS Quality and Safeguards Commission, Victorian Disability Worker Commission, Commission for Children and Young People (the CEO must report), WorkSafe Victoria, Victorian Ombudsman, and Victoria Police (or applicable State/Territory bodies) within required timeframes.
- if an incident is a severe Reportable Incident or Notifiable/Reportable Conduct, the CEO and/or the General Manager, Service Delivery will notify the Board Chairperson within required timeframes.
- where a Reportable Incident is a client death, the CEO and/or the General Manager, Service Delivery will follow the applicable checklist to ensure relevant person(s) and body(ies) are notified, including the Chairperson and the Board.

Supporting clients

Throughout the incident management process, from initial response through to review, clients will be supported by CPSN through means of:

- reassurance if the client reported the incident
- trauma and counselling services where required
- changes to regular supports if necessary
- access to external advocacy
- clear, ongoing communication regarding the progress and outcomes of the investigation.

Clients will be involved in the management and resolution of the incident where appropriate.

Supporting workers

Throughout the incident management process, from initial response through to review, workers will be supported by CPSN through means of:

- reassurance if the worker reported the incident and/or alleged another worker engaged in serious misconduct or notifiable conduct
- trauma and counselling services where required via CPSN's Employee Assistance Program
- changes to regular services (clients) and/or shifts, if necessary
- clear, ongoing communication regarding the progress and outcomes of the investigation.

Workers may be interviewed and involved in the incident investigation where appropriate, necessary and/or required.

Assessment and investigation

The General Manager, Service Delivery is responsible for creating an initial assessment of any incident, to determine the severity of an incident and to establish the need for, and scope of, an investigation.

If an incident is a Reportable Incident or Reportable/Notifiable Conduct, an internal investigation will take place. All investigations will be undertaken and conducted in accordance with principles of natural justice and procedural fairness. Depending on the nature of the incident/alleged incident, CPSN may follow the Complaints Management Policy and Procedure and/or the Underperformance and Misconduct Policy and Procedure.

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

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 to or did not function in preventing an incident

- changes CPSN can make to prevent further incidents from occurring.

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

Incident resolution

Based on the initial assessment, CPSN may undertake remedial action proportionate to the severity of the incident, including but not limited to:

- providing an apology
- disciplinary action.

CPSN will inform and involve clients, family and advocates in the process of incident management and resolution.

Incident register and review

CPSN keeps an accurate register of all incidents that occur in relation to the provision of services. This is held on Salesforce, CPSN's customer records management system. Each entry in the register contains:

- a description of the incident
- a determination of whether the incident is a Reportable Incident
- where possible, time, date and location
- names of all the people involved, including witnesses
- details of the incident assessment
- actions taken regarding the incident.

Where warranted and appropriate, issues raised by incidents will be added to the Risk Register and Management Plan and the Continuous Improvement Register.

The CPSN Leadership Team will review this information every month to understand trends, address systemic issues and inform improvement activities.

Notifying CPSN Chair and/or Board

Incident reports, including data and trends are provided to the Board quarterly through the Financial and Audit and/or Human Rights Committees, depending on Terms of Reference relevance.

Where the death of a client occurs,(and any notifiable event e.g. child safety) the CEO and/or General Manager, Service Delivery will notify the Chair and/or Board out-of-cycle (i.e. before the next Board or Committee meeting) via email. Notification processes will follow the Client Death Reporting Checklist.

Records will be kept for a minimum of seven years.

Review of Procedure

This procedure will be reviewed by the General Manager, Service Delivery upon any of the following events occurring:

- a review of the Incident Reporting and Management Policy
- changes in accepted practice standards
- changes in external requirements such as legislation
- staff identifying gaps or problems in implementing the procedure
- service user feedback.

Training plan

CPSN employees implementing this procedure are required to undertake the relevant CPSN training as provided.

Prerequisites

Read Incident Reporting and Management Policy.

Maintaining appropriate records

Records will be kept for seven years.

CPSN records are maintained using cloud-based technology systems, covering HRIS, CRM and Operational documentation.

Forms that apply to this procedure

- NDIS Commission Reportable Incident template (accessed through NDIS Commission Portal – My Reportable Incidents)
- Incident Report forms
- Salesforce incident data
- Client Service Agreements
- Risk Register and Management Plan
- Complaint Forms
- Continuous Improvement Register
- Client Death Reporting Checklist

Document Revision History

This document is only valid on the day it was printed.

Who	Version	Date	Description of Review
CEO	V1,2	Unknown	Unknown
CEO	V3	Sept 2024	Scheduled Review
CEO	V4	Feb 2026	Scheduled Review and update roles following organisational restructure.