



# Good Prospects Speech Pathology Pty. Ltd.

## Incident Management and Reportable Incidents System

<b>Authorised by</b>	Diana Bleby - Director
<b>Approval Date</b>	19 <sup>th</sup> October 2018
<b>Next Scheduled Review</b>	19 <sup>th</sup> October 2019
<b>Document location</b>	Shared drive: Policies and Procedures
<b>Description</b>	This policy sets out the principles, objectives and responsibilities for Good Prospects Speech Pathology to manage incidents as they may arise

# Good Prospects Speech Pathology Communication is the Key

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## Background

Good Prospects Speech Pathology recognises that both Safework SA and the NDIS' National Quality and Safeguarding Commission have identified that an Incident Management and Reportable Incidents System aims to support providers to:

- protect and prevent harm to all clients including people with a disability.
- support clients and participants to be informed purchasers and consumers of services including NDIS support and services and to live free from abuse, violence and exploitation.

Providers of all services (including NDIS) have the primary responsibility for preventing and managing all incidents related to people with disability and communication needs receiving support and service from their service.

The purpose of this document is to ensure that all staff of the Practice understand their responsibilities in relation to incidents while also supporting persons with disability, communication needs, their families, carers, advocates and others who receive services to also be aware of their rights and the support and protections available to them.

## Policy

The practice owner or manager of the Practice understands that as a provider of services to private and registered NDIS providers we must:

1. establish incident management arrangements to enable the identification of systemic issues and drive improvements in the quality of supports and services we deliver and that failure by us at any level (including being a registered NDIS provider) to comply with these requirements constitutes a breach of conditions of registration (under paragraph 73 F (2) (g) of the Act) and may lead to compliance and enforcement action (under Division 8 of Part 3A of the Act.) for example,
2. implement and maintain a system to manage incidents,
3. notify, investigate and respond to incidents, and
4. comply with obligations if an incident is the subject of a complaint under Section 73W and 73X of the Act and the NDIS Complaints Management and Resolution Rules 2018, for example.

## Procedure

### 1. Incidents

All staff will report ANY incident that occurs, in relation to the provision of services to an NDIS client or fee paying client to the the practice owner or manager Diana Bleby (or delegate) as soon as they become aware of it. This includes any acts, omissions, events or circumstances that occur by our staff or the person with a disability or communication disorder, in connection with the provision of the support or service, that could cause serious harm, or risk of serious harm to either the person with a disability or another person.

Procedural fairness will be afforded to the person with a disability or communication disorder and all involved in the incident.

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This Incident Management System will be made available to and complied with by all employees/contractors of the Practice.

## 2. Reportable Incidents

A reportable incident is;

- The death of a person with a disability and/or current client within the practice;
- Serious injury of a person with a disability and/or a current client within the practice;
- Abuse or neglect of a with a disability and/or a current client within the practice; ;
- Unlawful sexual or physical contact with, or assault of a person with a disability and/or a current client within the practice; ;
- Sexual misconduct committed against, or in the presences of, a person with a disability and/or a current client within the practice; including grooming of the person for sexual activity;
- The use of a restrictive practice in relation to a person with a disability and/or a current client within the practice other than where the use is in accordance with an authorisation of a state or territory body in relation to the person.

The Practice owner or manager Diana Bleby (or delegate) will complete an Incident Report (see Appendix 1) for all incidents as soon as they become aware an incident has occurred.

The Practice owner or manager Diana Bleby (or delegate) will inform the Commissioner or Safework SA (see contact details below) of any reportable incident within 24 hours of the Practice becoming aware of the incident, utilising the information collected on the Incident Report (see Appendix 1).

**NDIS** The Commissioner of the NDIS Quality and Safeguards Commission,  
PO Box 210  
Penrith NSW 2750  
1800 035 544

**NON-NDIS** Safework SA  
GPO Box 465  
Adelaide, SA 5001  
Telephone: 1300 365 255  
Fax: 8204 9200

The practice owner or manager Diana Bleby (or delegate) will keep the NDIS Commissioner or Safework SA updated in regard to any reportable incidents. If there is a reportable incident, the NDIS Commissioner or Safework SA may require the Practice to provide a final report about the incident within a period specified by either body.

## 3. Providing support and assistance

The practice owner or manager Diana Bleby (or delegate) will arrange and provide the required support and assistance to the person with disability or communication disorder affected by the incident (including providing information about access to advocates such as independent advocates to ensure their health and wellbeing (see the [Australian Federation of Disability Organisations](http://www.austlii.edu.au/au/other/afdo/) website).

## 4. Management and resolution of the incident

The practice owner or manager Diana Bleby (or delegate) will ensure that the person affected by an incident is involved in the management and resolution of the incident.

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## 5. Investigation of the incident

The practice owner or manager Diana Bleby (or delegate) will ensure that all incidents are investigated and assessed. This includes establishing the causes of the particular incident, effects and any operational issues that may have contributed to the incident occurring. The practice manager will ensure that procedural fairness is ensured through the incident process.

## 6. Incident Assessment and Corrective action

The practice owner or manager Diana Bleby (or delegate) will assess all incidents considering the views of the person with a disability or communication disorder affected by the incident and including;

- Whether the incident could have been prevented;
- How well the incident was managed and resolved;
- What, if any, remedial action needs to be undertaken to prevent further similar incidents from occurring, or to minimise their impact;
- Whether other persons or bodies need to be notified of the incident.

## 7. Documentation, record keeping and statistics

The practice owner or manager Diana Bleby (or delegate) must provide copies of the relevant Incident Management and Reportable Incidents System to (where relevant):

- persons with disability receiving NDIS support or services and their families, carers and advocates;
- Non-NDIS clients seen through the practice
- each person employed or otherwise engaged by the Practice
- the family members, carers, independent advocates and significant others of persons with disability or communication disorders receiving support or services from the Practice;

## 8. Incident Management Systems Review

The practice owner or manager Diana Bleby (or delegate) will annually review this Incident Management System to ensure its effectiveness.

## 9. Recording Keeping

All records related to a complaint or reportable incident must be kept for 7 years from the day the record is made. In regards to a reportable incident that subsequently becomes a criminal offence, these records are required to be kept until the relevant statute of limitations expires.

## 10. Monitoring, and Reporting

The practice owner or manager Diana Bleby (or delegate) will log all incidents in the incident register (refer Appendix 2) and collect statistical and other information on an annual basis relating to incidents to

- Review issues raised by the occurrence of incidents.
- Identify and address any systemic issues.

If requested, information relating to complaints will be provided to the Commissioner or Safework SA.

## 11. Roles, Responsibilities and Training

The practice owner or manager Diana Bleby (or delegate) is responsible:

- For this Incident Management System.
- To report all reportable incidents to the Commissioner or Safework SA within the required timeframes (24 hours).
- To identify, manage and resolve incidents, and prevent incidents from occurring.

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- To ensure that all employee/contactors are aware and have been trained in the Incident Management System.



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**Appendix 1 – Incident Report**

Date of Alleged Incident was first identified (If known): \_\_\_\_\_

Time of the Alleged Incident (if known): \_\_\_\_\_

Place of the Incident (If known): \_\_\_\_\_

**Names of persons involved in the alleged incident:**

Client Name with a disability/communication disorder making allegation \_\_\_\_\_

Phone \_\_\_\_\_

Alleged Persons Name: \_\_\_\_\_ Phone \_\_\_\_\_

Other Persons Name: \_\_\_\_\_ Phone \_\_\_\_\_

Witness Names \_\_\_\_\_ Phone \_\_\_\_\_

Witness Names \_\_\_\_\_ Phone \_\_\_\_\_

**Description of the alleged Incident**

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**Impact on, or harm caused to the person with a disability/communication disorder affected by the incident** \_\_\_\_\_

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Is the Incident Reportable

YES

NO

**Incident Form (Continuation)**

**Assessment of the Incident:**

Name of person who conducted assessment of the incident: \_\_\_\_\_

Contact details: \_\_\_\_\_

**Assessment Criteria:**

**A. Could the incident have been prevented?**

\_\_\_\_\_  
\_\_\_\_\_

**B. How well was the incident managed and resolved?**

\_\_\_\_\_  
\_\_\_\_\_

**C. What, if any, remedial action needs to be undertaken to prevent further similar incidents from occurring or minimise their impact?**

\_\_\_\_\_  
\_\_\_\_\_

**D. Do we need to notify any other person or bodies in regard to this incident? YES NO If yes, list names:**

\_\_\_\_\_  
\_\_\_\_\_

**E. If this incident is reportable, when was the Commission or Safeowrk SA (delete where applicable) notified? \_\_\_\_\_**

**Actions taken in response to the incident:**

\_\_\_\_\_  
**What consultation and actions have been taken to support and assist the person with a disability/communication disorder affected by the incident?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Has the person with a disability/communication disorder affected by the incident been provided with any reports or findings regarding the incident by the Practice?**

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YES                      NO

**Has the Practice undertaken an investigation in relation to the incident?**

YES                      NO

**What are the details and outcomes of the investigation?**

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**Date incident closed** \_\_\_\_\_

**Name of the Practice:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Contact Details of the Practice Manager:** \_\_\_\_\_

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## Appendix 2

### Incident Register

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Does incident need to be reported? If yes, who to?	Assessment of Incident	Has support been provided to the persons impacted?	Employees involved	Actions need to undertake to prevent similar incident occurring

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