# Policy guide and checklist

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| This front page is to guide users in creating your Policy and Procedure.**Delete** this table once your Policy and Procedure has been approved and finalised. Before submitting this Policy and Procedure for approval, check that you have completed the following: * Read the HSQF Framework
* Read the HSQF User guide - for Certification, or User Guide – Self-Assessable, depending on your service agreement and what applies to your organisation.
* Referred to the most recent HSQF Version Control Register and Log of Changes
* Updated or deleted all the yellow highlighted sections in this document
* Updated the document code and version number to suit your organisation’s naming convention
* Updated the supporting documents section (where relevant)
* Updated the header and footer of this document
* Added a review date
* Logged any changes of your internal policies in your register
* Removed QCOSS branding and replace with your organisation’s
* Removed this page/table from your final version.
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Incident Management Policy and Procedure

#### Document Code / Version Number

# Policy Statement

{Organisation Name} provides services that maximise the health, safety and well-being of clients and staff.

Any incidents, accidents, and near-miss that occur in connection with the provision of supports and services we deliver are assessed, responded to and reported as per regulatory and non-regulatory requirements and within the required timeframes.

Incidents are registered as part of our continuous improvement processes, and action is taken to prevent the likelihood of the incident, accident or near-miss reoccurring.

## Scope

This Policy and Procedure applies to {Organisation Name} as a whole.

# HSQF Related Standards

* Human Services Quality Standards Indicator 4.3
* Human Services Quality Standards Indicator 6.1

# Related Legislation

|  |  |
| --- | --- |
| Common | * *Critical Incident Policy* (Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships)
* [POLICY - Critical Incident Reporting Policy (dsdsatsip.qld.gov.au)](https://www.dsdsatsip.qld.gov.au/resources/dsdsatsip/disability/service-providers/critical-incident-policy.pdf#:~:text=Critical%20and%20major%20incidents%20involving%20people%20receiving%20directly,appropriate%20management%20level%20to%20ensure%20effective%20operational%20responsiveness.)
 |
| Child Protection Placement Services {remove if not required}  | The Department of Children, Youth Justice and Multicultural Affairs Policies:* *Child Safety Practice Manual*
* *Guidelines for approved carers and care services*
* *Responding to Concerns About the Standards of Care Policy*
* *Positive Behaviour Support and Managing High Risk Behaviour Policies*

For non-family based placement services: * *Incident management for residential care services*
* *Incident reporting guide for residential care services*
* *Joint agency protocol to reduct preventable police call-outs to residential care services*
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# Definitions

|  |  |
| --- | --- |
| Critical or Reportable Incident | An incident involving our clients that meet the description of a Level 1 or Level 2 Critical Incident, as referenced in Appendix 1 - Related Legislation.  |
| Incident | An event that causes, or could have caused, damage to property, illness, injury or death. An incident can occur whether or not there is an injury. Incidents may be reportable to different agencies.  |
| Notifiable Incident | An incident involving staff that requires reporting to Workplace Health and Safety Queensland.  |

# Principles

The principles that support good incident management practices at {Organisation name} are:

* Human rights - services are planned and delivered in a manner that respects and upholds the individual's human rights
* Accessibility - information is accessible
* Respect - diversity, values and beliefs of individual clients are respected
* Safe - staff are trained to identify, respond to and report potential or known risks.

# Procedure

There are three critical stages of incident management:

* Identifying and responding to incidents
* Assessment of incidents
* Reporting incidents.

## Identifying and responding to incidents

* An incident is identified when a client, carer, family member or {Organisation Name} team notify the {Board/Governance body}, team leaders, staff member, volunteer, student, a subcontractor of an incident
* When an incident is identified:
	+ All incidents are reported within {include: timeframe}
	+ A written Incident Report is completed and submitted to within {Include: timeframe}
	+ {include: Position Title} investigates, and were identified as a notifiable incident, notify relevant emergency contacts.
	+ All incidents are recorded in the {include: name of register}
* All critical, reportable or notifiable incidents must be reported in accordance with our legislated obligations
* The {include: Position title or Board/Governing body} are advised of incidents and corrections
* All incidents or near misses are subject to review.

## Reporting incidents

**Child Protection and placement services**

{delete as applicable for your organisation/client type}

* {Organisation Name} ensures that the management and reporting of incidents is consistent with The Department of Children, Youth Justice and Multicultural Affairs Policies, as noted in {Organisation Name} Appendix 1 - Related Legislation and complies with the Human Services User Guide for Certification (current version)
* Additionally, for non-family based placement services, all incidents are managed and reported in accordance with the department, as noted in {Organisation Name} Appendix 1 - Related Legislation and complies with the Human Services User Guide for Certification (current version)
* {Include: the position title of who is responsible and how the organisation complies with these Procedures, the timeframes for reporting and review of the legislation - how this is communicated to the workforce}

**Disability Services**

{delete as applicable for your organisation/client type}

* The organisation identifies, investigates and reports incidents consistent with the Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships
* {Include: here your process for promoting a culture of no retribution, what systems and processes the organisation has for responding to abuse, neglect or exploitation of people with a disability, and that these are achieved in a manner consistent with the DSDSATSIP's Policy}

**Alcohol and Other Drugs**

{delete as applicable for your organisation/client type}

* {Include: the organisation's process for identifying and responding to and reviewing clinical incidents, variations in practice and unexpected outcomes that focus on and include processes for open disclosure, persons responsible, ensuring outcomes of reviews that are used to inform the organisation's risk management and continuous improvement}

## Critical incidents

* Critical Incidents are to be reported as per the Department of Communities, Disability Services and Seniors' *Critical Incident Policy* or the Department of Child Safety, Youth and Women's *Incident reporting guide for residential care services*.
* Deaths in Care are reported to the Queensland Coroner.

**Child Protection Placement Services**

{delete as applicable for your organisation/client type}

* {Include: responding to the department determining that an incident requires a Harm Report, Standards of Care Review or monitoring of the Standards of Care}
* {Include: how you report incidents to police in line with the *Joint agency protocol to reduce preventable police call-outs to residential care services*}
* If a child or young person is missing or absent, staff must follow the Department of Child Safety, Youth, and Women's *Reporting Missing Children: Guidelines for approved carers and care services.* Please ensure you refer to this document immediately upon suspecting that a child or young person is missing or absent.
* Regardless of the order or care agreement the child or young person is subject to, if a child or young person in out-of-home care is missing, immediate efforts are required to locate them. An absence may be an early indicator that a child or young person is missing. Therefore, the child or young person's absence needs to be carefully monitored and escalated if the child or young person becomes 'missing.'
* {include: Position Title} must make all reasonable attempts to locate the child or young person if they have been absent for a short period, and then make a judgement about the seriousness of the situation. It may be appropriate to contact the child or young person's parents or family members and enquire if the child or young person is with them or in contact with them. It may be preferable for this action to be undertaken by the department's Child Safety Officer.
* If there is doubt about how to respond, the {include: Position Title} must contact {Include: contact Position Title or agency} or the Child Safety Service Centre for advice
* Following a critical incident, {include: Position Title} must review or develop the child or young person's de-escalation and cultural support plan. {Include: further details of your process here}

**Domestic and Family Violence**

{delete as applicable for your organisation/client type}

* If a staff member identifies that a child or young person involved in our services is experiencing significant intra-familial harm or is at risk of the same, that staff member must:
* {Include: who the staff member must report to internally, as well as how the concern is notified to the Department of Child Safety, Youth and Women and Police}

**Perpetrator Intervention Programs**

{delete as applicable for your organisation/client type}

* The following process must be followed if staff are witness to or become aware of a crime and for managing reported threats or acts of violence:
* {Include: how staff must report to relevant authorities. Include your internal reporting process, responsibilities, and timeframes}

**Disability Services**

{delete as applicable for your organisation/client type}

* The organisation has policies consistent with the Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships
* {Include: reporting critical incidents in accordance with the DSDSATSIP *Critical Incident Reporting Policy,* how you implement, monitor and review, including persons responsible and timeframes }

## Review and incident management

* The organisations quality assurance of incidents and near misses are identified through a review of the {include: registers, including incident and accident records, hazard notification records, reported near misses or observation of the environment}
* Incidents, near misses and ongoing quality management of supports and services, are identified through complaints, incidents, feedback and quality audits. Team leaders and {include: Position title} work together to implement corrective actions
* Non-conforming processes are identified through scheduled internal process audits, staff performance monitoring, competency assessments and observation of practice, staff meetings, client complaints and review of registers. Non-conforming processes are registered in the continuous improvement register and addressed through staff education, supervision, and process review and improvement.

# Related Policies and Procedures

{List your supporting documents here, e.g. registers and forms}

* Preventing, Reporting and Responding to Harm, Abuse and Neglect Policy and Procedure
* Workplace Health and Safety Policy and Procedure
* Continuous improvement
* Staff Induction, Training, Supervision and Support

# Supporting Documents

{List your supporting documents here, e.g. registers or forms}

# Review

This document was last reviewed on {include: date}.