

Reportable Incident Policy

1 Policy Purpose

This policy seeks to ensure that DCF' response to all reportable incidents are professional, appropriate and proportionate in addressing risks, protecting rights and discharging our legal requirements and duty of care.

The expeditious identification and reporting of incidents is necessary to:

- ensure the safety and wellbeing of all persons involved in or who are directly impacted by the incident
- implement best practice in managing and responding to risk, in this and all future similar cases;
- learn from issues arising to improve service delivery and prevent future incidents.

2 Legislative Authority

- *Care and Protection of Children Act*. Section 84A - Power to Investigate harm to children in care.
- *Work Health and Safety (National Uniform Legislation) Act 2011*. Part 3 – Incident Notification.

3 Policy Statement

A reportable incident is any significant incident, or alleged incident, that negatively affects, or is likely to negatively affect a:

- DCF client (child, carers, parents or family) which includes those with an open case as well as those on orders;
- DCF staff member;
- DCF contracted service provider or organisation; or
- member/s of the wider community.

A reportable incident includes:

- actual, alleged, attempted and threatened physical and sexual assault (including grooming);
- illegal or inappropriate behaviour;
- actual, attempted and threatened self-harm and attempted suicides;
- attempted abductions, absconding or missing children;
- serious injury, illness and medical conditions suffered by a child in DCF care or their carers;
- fatalities; and
- actual and alleged breaches of privacy and loss of sensitive client information.

All reportable incidents must be reported in accordance with the procedures set out in this policy. This means a DCF staff member who receives an allegation or disclosure, is present at an incident, or who first becomes aware of an incident or allegation is required to record the details of the incident on the approved [DCF Reportable Incident Form](#).

All forms must be completed and endorsed by the required line managers within 24 hours and then provided to the DCF Practice Integrity Unit at PracticeIntegrity.DCF@nt.gov.au.

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Approved reportable incident forms must articulate the actions that have been, and will be, taken in response to the incident or allegation, the person responsible for the actions and the deadline for the actions.

The chosen response to address a critical incident must align to the nature and severity of the incident, comply with necessary legal requirements and have a clear purpose with desired outcomes.

Responses to a reportable incident may include:

1. addressing the issues arising from the incident through the course of normal casework;
2. taking specific actions to ensure the immediate safety and wellbeing of a child, carer or staff member;
3. engaging Human Resources (HR) to take appropriate human resource actions (including disciplinary actions) in relation to an incident involving a staff member;
4. advising the Chief Executive Officer (CEO), Minister, DCF HR, DCF Central Placement Unit and/or Grants and Contract Management Unit, or other appropriate DCF staff of the occurrence of the reportable incident;
5. informing Central Intake Team (CIT) of an alleged abuse in care, or standard of care concern; and/or
6. requesting an internal case review of practice or decision making.

The Practice Integrity Unit will use the completed [Reportable Incident Form](#) to monitor and record actions taken following a critical incident.

A central database on all reportable incidents including the planned responses and response outcomes will be maintained in order ensure actions are taken and Senior DCF Managers receive regular reports on the number, type and cause of reportable incidents by region, client and response type.

4 Standards of Professional Practice

DCF standards that directly relate to reportable incidents are:

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| 2.9 | DCF responds professionally to adverse events to address the safety of clients, carers and workers as well as departmental risk. |
| 6.10 | Children and carers are aware of the process and their responsibility to report critical incidents, standard of care and abuse in care concerns. |
| 6.11 | DCF takes immediate action to resolve all issues, concerns and allegations in relation to the safety of any placement. |

5 Procedures

STEP 1: Immediate action upon a reportable incident occurring

A staff member either involved in a reportable incident or who first becomes aware of a reportable incident must:

1. **Respond swiftly** and appropriately to ensure the immediate safety and wellbeing of those involved in the incident.
2. **Advise their supervisor** or manager of the incident as soon as possible.

Departmental policies and procedures are internal documents and are not to be given to external parties without the approval of the divisional Executive Director

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3. **Complete** a copy of the *DCF Reportable Incident Form Part A*, as soon as practicable and within 24 hours of the incident or becoming aware of the incident.
4. **Provide the completed form** to the next higher managerial level in accordance with the procedure outlined on the form.
5. Where the required endorser is not available within the 24 hours response timeframe to complete Part B, the form should be referred to the next management level or otherwise provided to the DCF Practice Integrity Unit. (*Refer to Appendix A - Reportable Incident Process – Flow Chart*).

STEP 2: Abuse in care and standard of care concerns and incidents

If the reportable incident involves any actual or alleged harm to a child in the CEO's care:

1. **Report the incident to Central Intake (CIT)** 1800 700 250.
2. CIT staff will independently determine if an 'Abuse in Care' or 'Standard of Care' investigation is required.
3. Investigations will occur in accordance with section 84A 'Power to Investigate' of the *Care and Protection of Children Act*, and the relevant *Abuse in Care Policy*. The outcome of the CIT decision to investigate does not need to be recorded on the reportable incident form.
4. **Record the referral to CIT** on the [Reportable Incident form](#).

STEP 3: Managerial awareness and approval

Each manager who receives a completed *Reportable Incident Form - Part A* must:

1. Complete *Part B* of the [Reportable Incident Form](#).
2. Determine if the proposed actions recorded on the form address the incident and provide appropriate and proportionate review of the incident or alleged incidents circumstances and add any further instructions.
3. Endorse the form.
4. Either **escalate the completed form** to the next higher managerial level in accordance with the procedure outlined on the form or provide the completed endorsed form to the DCF Practice Integrity Unit PracticeIntegrity.DCF@nt.gov.au.
5. **Ensure a reference to the reportable incident form** is placed on the relevant client record. A reference to the Reportable Incident Form should also be placed on the carer, staff member or contracted provider's relevant file where the incident has a direct relationship to this action or inaction.

6 Procedures Checklist

If you observe or are the first DCF staff member to learn of a reportable incident:

- Respond swiftly** and appropriately to ensure the immediate safety and wellbeing of those involved in the incident.
- Advise your supervisor** or manager of the incident.
- If the incident includes or allegedly includes a child in care suffering harm, **immediately inform CIT 1800 700 250**.

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- If the incident includes the death of a child in care or with an open case (specifically child protection or family support case), immediately inform CIT 1800 700 250 and the Practice Integrity Unit PracticeIntegrity.DCF@nt.gov.au.
- If required, advise DCF HR, DCF Central Placement Unit and/or Grants and Contract Management Unit of the incident.
- Complete** a copy of the [DCF Reportable Incident Form](#) Part A within 24 hours.
- Provide the completed form** to the next higher managerial level in accordance with the procedure outlined on the form.
- Part A reviewed** by appropriate line manager and **Part B completed**.
- Appropriate Senior Manager endorses the Part B of the form and provides the completed form to the DCF Practice Integrity Unit at PracticeIntegrity.DCF@nt.gov.au.

7 Appendix

[Reportable Incident Form](#) (Parts A and B).