



INCIDENT AND HAZARD REPORTING

PURPOSE

Wesley Mission Victoria strives to maintain a safe living and working environment for clients, staff, volunteers and visitors. Incidents and hazards are to be reported, actioned, analysed and trended to continuously improve client outcomes, service delivery and safety.

To ensure Wesley Mission Victoria complies with its responsibility for mandatory reporting of incidents to WorkSafe Victoria, the Department of Human Services and the Department of Health and Ageing.

SCOPE

This procedure applies to all staff, volunteers, clients, contractors and visitors to understand the process that occurs following an incident or hazard and methods to reduce occurrences. Management are responsible for reporting incidents and hazards and ensure data is used to improve client and staff outcomes.

REFERENCES

Standards including ISO
 Department of Human Services, Incident Reporting Guide
 Department of Human Services, Incident Reporting Categorisation Table
 Department of Human Services, Region, Program and Incident Type List
 Department of Human Services, Incident Report Form
 Occupational Health & Safety Act 2004
 Aged Care Act 1997

DEFINITIONS

WMV Incident Form

The Wesley Mission Victoria (WMV) Incident Report Form (OHS F 08) is to be completed for all client and staff incidents that occur in non Department of Human Services, ie. Aged Care, Social Enterprises, Lifeline programs.

DHS Incident Form

Department of Human Services programs such as Disability, Child Youth and Family, Employment and Homelessness Services are to complete the DHS Incident form for client and staff incidents. This form can be completed in hard copy or electronically
<http://fac.dhs.vic.gov.au/publicfolder/publications/DHS/policies/incident-reporting-form-electronic-with-macros-v3-1.doc>.

Reporting Timelines

Category 1 Incidents –

Most serious outcome to be reported within 1 working day. DHS Services to complete the DHS Incident Form. For non DHS services to complete WMV Incident Form.

Category 2 Incidents

Serious threat to well being of clients and staff must be reported within 2 working days; complete DHS form for DHS services as per Appendix A and for non DHS services complete the WMV form.

Category 3 Incidents

Child, Youth and Family Services must report within 2 days to the DHS while all other Category 3 Incidents are to be reported on the WMV Incident form.

Staff Incidents

Complete DHS incident reporting form for DHS Services that involve clients and for staff specific incidents and non-DHS services complete WMV Incident form. Once completed these forms are to be forwarded to the OH&S Adviser.

PROCEDURE

Client Incidents

1.0 Categorisation and Reporting of Incidents

All incidents are to be categorised by the person in charge using DHS guidelines as follows.

1.1 Category 1 : Critical Incidents

Category 1 DHS incidents **must be reported to DHS within 1 working day**. These incidents are the most serious and have the potential for high levels of public and/or media scrutiny, eg staff to client sexual or physical assault, actual rape, death, possible drug/alcohol overdose and prostitution by a client under the age of 18 years. Management of Category 1 incidents are to include:

1.1.1 Incident occurs.

1.1.2 Staff are to respond to the immediate need of those involved in the incident and inform the Program Manager. The Program Manager or delegate is to assist staff to manage the incident and provide the opportunity for debriefing.

- 1.1.3 The Program Manager is to inform and discuss the incident to the Executive Manager of the Portfolio and to the Executive Manager, Community Relations.
- 1.1.4 The DHS Incident Report Form or Wesley Incident Form for non DHS services is to be completed by senior staff in consultation with those involved or witness to the incident.
- 1.1.5 The Executive Manager of the Portfolio is to verbally inform the General Manager of the incident and the action taken.
- 1.1.6 The General Manager is to inform the Chief Executive Officer of the incident.
- 1.1.7 The Executive Manager of the Portfolio or Program Manager is to contact the Department of Human Services and provide a verbal report.
- 1.1.8 The Executive Manager of the Portfolio is to sign and authorise the incident report form prior to faxing the form to the DHS regional office.
- 1.1.9 The Executive Manager of the Portfolio is to forward the incident report to the General Manager and Chief Executive Officer to sign the report as being sighted and actioned appropriately.
- 1.1.10 If staff have been harmed, verbally abused or placed at risk the incident report is to be copied and forwarded in an envelope marked 'Confidential' to the Occupational Health and Safety (OH&S) Adviser. The OH&S Adviser is to sign off on the report, ensure the incident has been actioned and return the report to the General Manager.
- 1.1.11 The Executive Administrator to the General Manager is to enter the incident into the Incident Reporting database, file the report and ensure a copy of the incident form is returned to the program for filing in the client and/or personnel file.

1.2 Category 2 : Serious threat to wellbeing of clients and staff

Category 2 DHS incidents **must be reported to DHS within 2 working days**. Category 2 incidents involve events that seriously threaten clients or staff that do not meet the Category 1 definition and include incidents that result in injury requiring medical attention, assaults that do not classify as category 1 incidents, serious threats, unethical behaviour by staff, client behaviour that could result in potential risk, criminal behaviour resulting in police intervention, unauthorised absenteeism and incidents that have the potential to escalate to Category 1.

The following procedure is to occur for reporting Category 2 incidents:

- 1.2.1 Incident occurs.
- 1.2.2 Staff are to respond to immediate need to those involved in the incident and inform the Program Manager. The Program Manager or delegate is to assist staff to manage the incident and provide the opportunity for debriefing.
- 1.2.3 The DHS Incident Report Form or Wesley Incident form for non DHS services is to be completed by senior staff in consultation with those involved or witness to the incident.

- 1.2.4 The Incident Report is to be reviewed and authorised by the Program Manager and emailed or faxed to the Executive Manager of the Portfolio, Administration Manager and General Manager.
- 1.2.5 The Program Manager or delegate is to fax the incident report to the Department of Human Services regional office.
- 1.2.6 If staff have been harmed, verbally abused or placed at risk the incident report is to be copied and forwarded in an envelope marked 'Confidential' to the Occupational Health and Safety (OH&S) Adviser. The OH&S Adviser is to sign off on the report, ensure the incident has been actioned and return the report to the General Manager.
- 1.2.7 The Executive Administrator to the General Manager is to enter the incident into the Incident Reporting database, file the report and ensure a copy of the incident form is returned to the program for filing in the client and/or personnel file.

1.3 Category 3: Medium/Low level Incidents

Category 3 DHS incidents are required to be reported within 2 working days for Child, Youth and Family Services only. For non DHS services these incidents include those that are not detailed above. These incidents occur where normal work or routine is interrupted, but the significance of the incident does not extend beyond the workplace or facility. Category 3 incidents include those which can be dealt with.

The following procedure is to occur:

- 1.3.1 Incident occurs.
- 1.3.2 Incident report is to be completed by staff present or to whom incident reported.
- 1.3.3 The Program Manager or delegate is to review and sign off on the incident report ensuring it has been actioned appropriately.
- 1.3.4 For Child, Youth and Family Services only the Program Manager or delegate is to fax the incident report to DHS Regional office.
- 1.3.5 The Program Administrator is to enter the incident into the Incident Reporting database, file the report and ensure a copy of the incident form is returned to the program for filing in the client and/or personnel file.

2.0 **Reportable Behaviours**

For Category 2 and 3 incidents where behaviour is clearly identified in a client care plan or support plan and occurs multiple times in a single work day or shift the incidents may be summarised in one incident report. The incident report must clearly describe the number of episodes of the behaviour outlined.

3.0 **Aged Care Mandatory Reporting**

- 3.1 All episodes of incidents that are required to be reported (Category 1), ie sexual assault, physical assault and absconding are to be documented on a WMV Incident Report Form by the Facility Manager or their delegate. **The Department of Health and Ageing and Police are to be notified within 24 hours.**

- 3.2 The Facility Manager is to inform the Executive Manager of the Portfolio and the General Manager via email or fax including a copy of the Incident Report.
- 3.3 The General Manager is to forward the Incident Report to the Chief Executive Officer for signing the report as being sighted and actioned appropriately.
- 3.4 The Executive Administrator to the General Manager is to enter the incident as a Category 1 into the Incident Reporting database, file the report and ensure a copy of the incident form is returned to the program for filing in the client file.

4. Medication Incidents

Medication Incidents can be categorised and managed as per above (2.1, 2.2, 2.3) according to their severity. As per DHS guidelines:

Category 1: Any error that impacts upon client's health or safety and results in physical/psychological impairment OR the incorrect administration of PRN restraint medication.

Category 2: Any error that impacts on the clients health or safety (as determined by the doctor or pharmacist notified of the error).

Category 3: An error that does not impact the client's health or safety. Medication missed without impact such, such as antibiotics. Client refused medication without impact to health.

Staff are to be counselled by the Program or Facility Manager in situations where the staff member has made a medication error, eg missed signatures, administration of wrong medication or wrong dose.

5.0 Review, analysis and trending of Incidents

To ensure incidents are reviewed and actioned appropriately, incident data is to be analysed and reported, ensuring trends and client outcomes are evident, as follows.

5.1 Supervisors/Coordinators

Supervisors/Coordinators are to review the list of incidents at the end of the month to identify clients who have multiple incidents and where possible update client care plans/support plans with strategies to prevent recurrence.

5.2 Program Managers

At the end of the month the Program Manager is to review incidents for trends ensuring they have been actioned appropriately and report on Key Performance Indicators:

- Total number of Category 1, 2 and 3 incidents
- Type of incidents
- Time of incidents
- Actions taken as a result of these incidents
- Outcomes for clients

This report is to be forwarded to the Executive Manager of the Portfolio for reporting to the General Manager.

5.3 Quality, Risk and Compliance

On a quarterly basis the Quality, Risk and Compliance Unit is to provide an organisational analysis and trend report to the Executive Committee. If there is a trend in a specific incident, the Quality, Risk and Compliance team is to update the Risk Register.

Staff/Volunteer Incidents

- 6.1 In the event of a workplace incident staff / volunteers are to inform their Supervisor/Manager of the incident and complete a WMV Incident Form.
- 6.2 If a staff member is injured the supervisor or manager is to report the incident, via telephone, to OccCorp as soon as they become aware of the injury. OccCorp run a 24 hour a day reporting service on 1300 666 303.
- 6.3 The Supervisor/Manager is to inform the Occupational Health and Safety Adviser via email or telephone (03 9666 1255) of the Incident and provide a copy of the Incident form.
- 6.4 At the end of the month the Occupational Health and Safety Advisor is to collate staff/volunteer incidents and provide an analysis and trend report detailing key performance indicators:
 - Total number of staff/volunteer incidents
 - Total number of WorkCover Claims
- 6.5 The OH&S Adviser is to forward the report to the Human Resources Manager.
- 6.6 The Human Resources Manager is to forward report to the Executive Manager, Quality, Risk and Compliance for reporting to Executive.
- 6.7 For further details refer to Appendix D Flowchart for reporting staff incidents.

7.0 Completing a Hazard/Near Miss Form

Staff, volunteers, clients, contractors and visitors who observe a potential hazard or a near miss are to communicate this with the person in charge and complete a Hazard/Near Miss form (OHS F 27).

In the event of a hazard being identified if possible staff are to remove the hazard. If the hazard is unable to be removed, eg building works or maintenance required, the Supervisor/Manager is to organise for works to be commenced.

The Program Manager is to review and sign the completed form and forward it to the Administration person for registering. The staff member who reported the hazard and the local Occupational Health and Safety Representative are to be advised by the manager of the action taken.

7.1 Review and Reporting of Hazards / Near Misses

The Program Manager is to review the hazards/near misses to ensure they have been actioned appropriately.

At the end of the month the Program Manager is to provide a report detailing Key Performance Indicators:

- Total number of Hazards and Near Misses
- Action taken to prevent/reduce recurrence.

The Executive Manager of the Portfolio is to report the total number of hazards quarterly at the Executive Committee.

Appendix A:

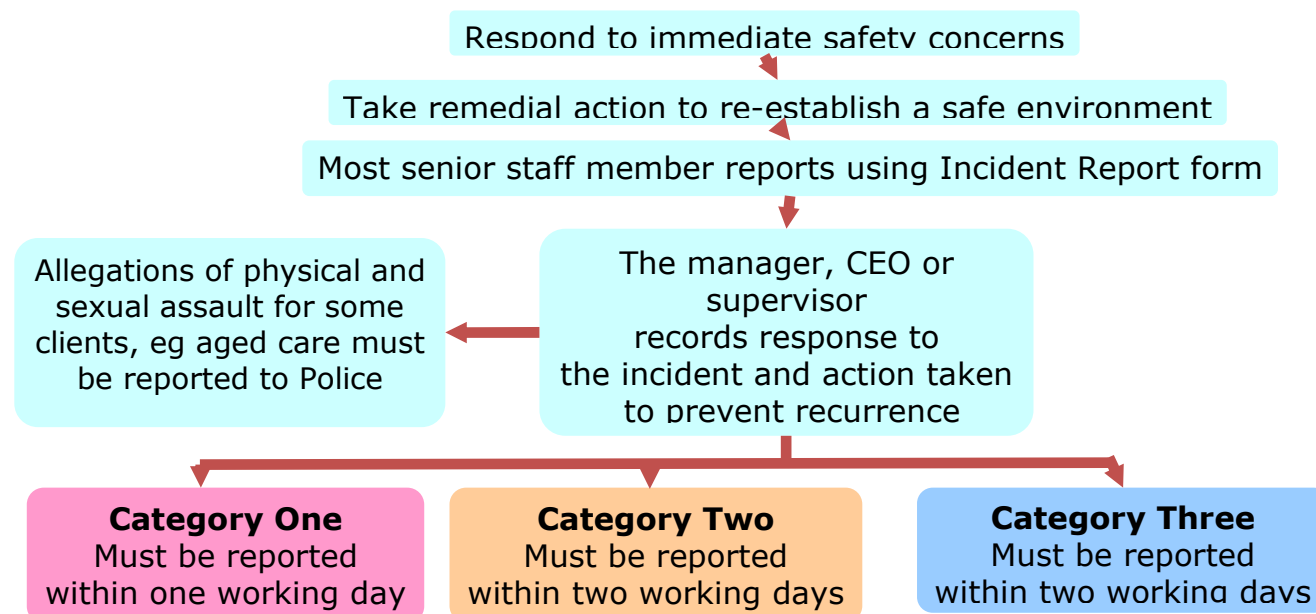
Reporting requirements as per DHS programs as at November 2010 update:

Program	Category		
	1	2	3
Child Protection	X	X	X
Disability Services & Respite care for client with disability	X	X	X
Out of Home Care (CYF)	X	X	X
Youth Justice Community Supervision	X	X	X
Youth Justice Custodial Services	X	X	X
Housing and Community Building	X	X	
Homelessness and Support Services	X	X	
Family Services	X		
Child FIRST	X		

Reference: DHS, Incident Reporting Presentations

Appendix B:

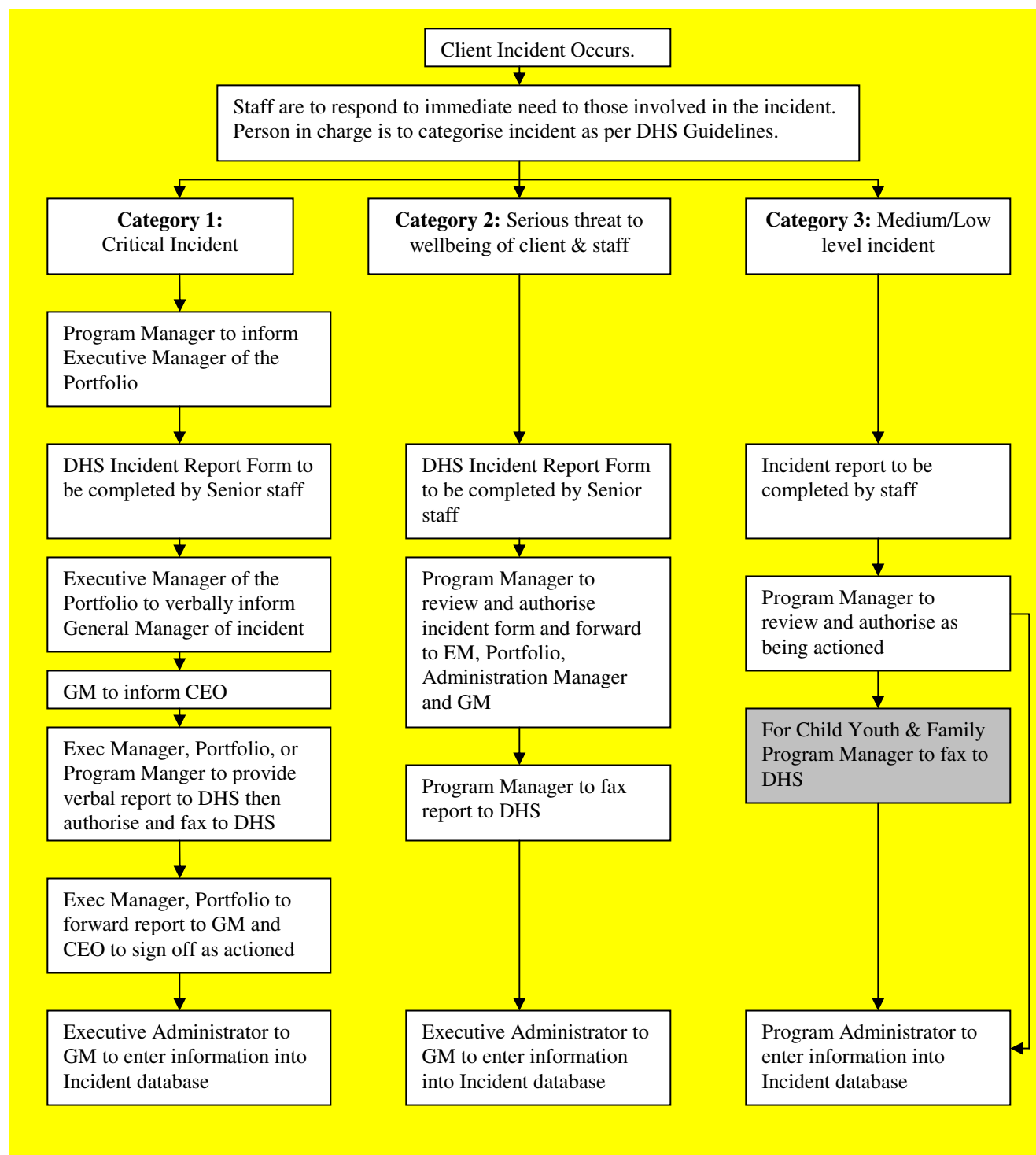
Immediate response and reporting requirements



Reference: DHS, Incident Reporting Presentation for CYF and General.

Note: This flowchart represents CYF and General Services. For Housing and Community Building Services, Category Three Incidents do not need to be reported to DHS.

Appendix C: Reporting of Client Incidents



Appendix D Flowchart for reporting staff incidents

