

## Incident Management Policy

The purpose of the Maali Medical Incident management policy is to record, manage incidents and near misses that occur and record learnings to prevent future incidents from occurring.

Under the National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018 an Incident is defined as and the Incident Management System must cover:

- Acts, omissions, events or circumstances that occur in connection with providing NDIS supports or services to a person with a disability and have, or could have, caused harm to person or persons
- Acts by a person or persons that occurs in connection with providing NDIS supports or services to the person with disability and which have caused serious harm, or a risk of serious harm to another person.
- Reportable incidents that have or are alleged to have occurred in connection with providing NDIS supports or services to a person with disability

All incidents (not just reportable incidents) must be reported, investigated, reviewed and closed out within a suitable timeframe dependent on outcome of incident.

Incident reporting and investigation shall follow Table 1 below:

Principle	Description
 <b>Centred on people with disability</b>	Management of an incident is respectful of, and responsive to, a person with disability's preferences, needs and values while supporting the person's safety and wellbeing.
 <b>Outcome focussed</b>	Management of an incident should reveal the factors which contributed to the incident occurring, and seek to prevent incidents from reoccurring.
 <b>Clear, simple and consistent</b>	The process for dealing with incidents is easy to understand, accessible and consistently applied.
 <b>Accountable</b>	Providers are responsible for appropriately managing the response to incidents. Everyone involved in the management of an incident understands their role and responsibilities, and will be accountable for decisions or actions taken in regard to an incident.
 <b>Continual improvement</b>	The incident management process facilitates the ongoing identification of issues and implementation of changes to improve the quality and safety of NDIS supports and services.
 <b>Proportionate</b>	The nature of any investigation or actions following an incident will be proportionate to the harm caused and any risk of future harm to a person with disability.

Table 1

### **Reporting an Incident**

All incidents shall be reported in writing via email to [info@maalimedical.com.au](mailto:info@maalimedical.com.au) or via the Maali Medical Incident Report Form available on the Maali Medical website ([www.maalimedical.com.au](http://www.maalimedical.com.au)) and is accessible to:

- Clients receiving supports or services
- Family members, carers, independent advocates and significant others
- All Maali Medical Employees

or directly to the NDIS via telephone (1800 035 544) or in writing via the NDIS Commission website ([www.ndiscommission.gov.au/about/complaints-feedback/complaints](http://www.ndiscommission.gov.au/about/complaints-feedback/complaints))

### **How incidents are identified, recorded and reported**

- Maali Medical Pty Ltd shall document all incidents they are aware of, once safe to do so via the Maali Medical Incident Report Form, sign and submit to Maali Medical Pty Ltd Director or Senior Management once completed.
- Incident details shall be recorded in the Maali Medical Incident Management register by Maali Medical Pty Ltd Director or Senior Management
- Details that must be recorded include:
  - Names and contact details of persons involved in the alleged incident
  - Description of the alleged incident
  - Time, date and place alleged incident occurred
  - Details of witnesses to the incident
  - Actions taken to assist the person affected by the incident
  - Name and contact details of the person recording the alleged incident.
- All incidents must be notified to Maali Medical Director.
- The Director will assess the incident and report reportable incidents to the NDIS Quality and Safeguards Commissioner.
  - The following reportable incidents will be notified to the Commissioner with a copy of the incident report via email within 24 hours of occurrence:
    - Death
    - Serious injury
    - Abuse or neglect
    - Unlawful sexual or physical contact or assault of a person with a disability
    - Sexual misconduct
  - All other reportable incidents will be reported by the Director to the Commissioner within 5 days of the incident's occurrence.

### Patient support

- Maali Medical will provide support and assistance as required to all clients involved this may be via the NDIS or their Local Area Coordinator
- Before any investigation is conducted, Maali Medical Pty Ltd Director will contact the involved parties to request feedback to assist with the investigation.

### Incident Investigations

- All incident investigations conducted by Maali Medical Pty Ltd will be conducted using the 5 Why / Root Cause method of incident investigation to identify the following:
  - What caused the incident to occur
  - Could the incident have been prevented
  - How can we prevent the incident from occurring again
- All incident investigations shall be reviewed by a third party HSE adviser to identify the following:
  - How well the incident was managed and reported by Maali Medical Pty Ltd
  - Are Root Causes identified appropriate
  - Are corrective actions appropriate to prevent reoccurrence
  - What, if any, regulatory action needs to be undertaken to prevent further similar incidents from occurring.
  - What, if any, regulatory action needs to be undertaken to minimise the impact of an incident.
  - Whether other persons or bodies need to be notified of the incident.

### Corrective actions

- Corrective actions aim to address identified systemic issues (Root Causes) and drive improvements in the quality of the service provided by Maali Medical Pty Ltd
- Improve Maali Medical Pty Ltd Systems and processes
- Prevent incidents from occurring and minimise their impact when they do occur.

#### Expectations



**Store** information and records relating to investigations of an allegation against an employee in a safe and secure place.



**Act** on all reports including development of risk reduction plans and documenting the outcomes achieved.



**Reflect** on whether a strategy was effective or ineffective and reflect the learning in other practice.



**Monitor** the documented risk reduction action plans in a risk register or other tracking system.



# MAALI MEDICAL

