



Incident Management Policy and Procedure

For Soaring Sparrows Pty Ltd

Document Control

- **Policy Title:** Incident Management Policy and Procedure
 - **Date Policy Developed:** 15 September 2025
 - **Review Date:** 15 September 2026
 - **Version:** 1.2
 - **Policy Owner:** Director, Soaring Sparrows Pty Ltd
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Purpose

This policy outlines how Soaring Sparrows Pty Ltd identifies, manages, responds to, reports, and investigates incidents that occur during the delivery of NDIS support coordination services. The policy ensures compliance with the **NDIS Quality and Safeguards Commission** and applicable South Australian laws.

Scope

This policy applies to all employees, contractors, and volunteers of Soaring Sparrows Pty Ltd in all activities involving or impacting NDIS participants.

Policy Statement

Soaring Sparrows Pty Ltd is committed to:

- Responding to incidents quickly, respectfully, and appropriately.
 - Ensuring participant safety and wellbeing is the highest priority.
 - Meeting all requirements under the **NDIS (Incident Management and Reportable Incidents) Rules 2018**.
 - Supporting continuous improvement by learning from incidents.
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Definitions

- **Incident:**

An action, omission, event or circumstance that:

- Has caused or could cause harm (physical, emotional, psychological, or financial) to a participant.
- Is an unexpected emergency impacting a participant (e.g., mental health crisis, unplanned hospitalisation).
- The participants action that occurred in connection with the provision of services has caused harm or a serious risk of harm to another person.
- Involves abuse, neglect, unlawful sexual or physical contact, exploitation, or use of unauthorised restrictive practices.

- **Near Miss:**

An event or circumstance that:

- Could have caused harm (physical, emotional, psychological, or financial) to a participant or staff member but did not.
- Did not result in actual harm, but indicates a potential risk or safety issue.
- Serves as a warning that corrective action or risk mitigation may be required to prevent a future incident.

- **Reportable Incident:**

An incident that must be reported to the **NDIS Commission**, including:

- Death of a participant
- Serious injury
- Abuse or neglect
- Unlawful sexual or physical contact
- Sexual misconduct
- Use of an unauthorised restrictive practice

Procedures (see Appendix A for more detail)

1. Internal Reporting

- All incidents must be reported immediately to the Line Manager or Director.

- **Initial notification:** within 2 hours of becoming aware (verbally, phone, or email).
- **Written Incident Report:** completed using the Internal Incident Report Forms (Splose or Microsoft Forms) within 24 hours.
- Reports are stored securely in the incident management system and participant file.

2. External Reporting

Where required, incidents must be reported to external bodies:

Agency	Triggers	Timeframe
NDIS Commission	All reportable incidents	Within 24 hours (initial); follow-up within 5 business days
SAPOL	Suspected criminal acts (e.g. assault, theft)	As soon as practically possible
CARL (Child Abuse Report Line)	Suspected child abuse or neglect	As soon as practically possible
Mental Health Triage (SA Health)	Mental health crises	As soon as practically possible
SA Ambulance Service (SAAS)	Medical emergencies or serious injury	As soon as practically possible
Adult Safeguarding Unit	Suspected abuse, neglect, exploitation, or harm of an adult at risk	As soon as practically possible

The Director (or delegated Incident Manager) ensures required external reporting is completed.

3. Incident Investigation

- **Commencement:** within 2 business days.
- **Completion:** within 10 business days (unless complexity requires longer, with reasons documented).
- **Conducted by:** Line Manager or delegated Senior Officer not involved in the incident.

Process includes:

- Interviewing staff and participants.
- Reviewing documents and case notes.
- Identifying contributing factors and root cause.
- Recommending corrective and preventative actions.

Findings are documented in an Incident Investigation Report and reviewed by the Director.

4. Supporting Participants

Participants affected by an incident will be supported through:

- Counselling or advocacy services.
- Clear communication in a way they understand.
- Involvement of a nominee, family member support person or advocate where appropriate.
- Ongoing updates about actions taken.
- Ensuring safe continuity of supports.

5. Preventing Future Incidents

Following each investigation:

- A Corrective and Preventative Action Plan (CAPA) will be created (see Appendix B).
- Training or retraining will be provided as required.
- Policies and procedures will be reviewed.
- Systemic risks will be identified and escalated.
- Outcomes (anonymised) may be shared with staff as a learning tool.

6. Recordkeeping

All incident-related records (reports, investigations, CAPA plans, correspondence) must be:

- Stored securely for **7 years** (or longer if legally required).
- Accessible only to authorised personnel.

Responsibilities

- **All Staff:** Report incidents as soon as practically possible and cooperate with investigations and inquiries from the NDIS commission .
 - **Line Manager:** Review reports, initiate investigations, and support staff and participants.
 - **Director:** Ensure compliance with NDIS and SA laws; oversee investigations; collect statistical data in relation to the occurrence of incidents; identify and rectify systemic issues; provide regular training to staff on incident management.
 - **Incident Manager (if delegated):** Conduct investigations and liaise with external agencies.
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Related Legislation

- **NDIS Act 2013 (Cth)**
 - **NDIS (Incident Management and Reportable Incidents) Rules 2018 (Cth)**
 - **NDIS Practice Standards (Core Module – Incident Management)**
 - **Children and Young People (Safety) Act 2017 (SA)**
 - **Work Health and Safety Act 2012 (SA)**
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Other Relevant Documents

- Internal Incident Report Forms (Microsoft Forms and Splose)
 - Soaring Sparrows Code of Conduct
 - Soaring Sparrows Participant Safeguarding Policy
 - Soaring Sparrows Privacy and Confidentiality Policy
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Review

This policy will be reviewed annually, or sooner if:

- There are changes in legislation or NDIS requirements.
- A serious incident highlights gaps in the process.
- Feedback suggests improvements are needed.

Approval

Approved By: Kathryn Soar

Position: Managing Director, Soaring Sparrows Pty Ltd

Date: 19/09/25



Appendix A

Incident Reporting Procedure

For Soaring Sparrows Pty Ltd

Purpose

This guide explains how staff must report and record all incidents and near misses, whether they involve participants or general workplace matters.

Participant-Specific Incidents or Near Misses

Examples: *A participant has a fall during a home visit. A participant's medication is missed or incorrectly administered by a third party.*

1. **Immediate verbal report** → Notify the Team Leader or Director as soon as possible.
2. **Initial notification** → Within **2 hours** of becoming aware (verbally, by phone, or email).
3. **Written notification** → Support Coordinators complete a **Participant Incident Report** in **Splose**.
4. **Automatic submission** → Completed form is emailed to the **Office Manager** and **Director**.
5. **Recording** → Office Manager enters the incident into the **Participant Incident Register**.
6. **External reporting** → Director ensures mandatory NDIS Commission or other external reporting is completed if required.

General Incidents or Near Misses

Examples: *A staff member trips over office equipment. A near miss involving a company vehicle.*

1. **Immediate verbal report** → Notify the Team Leader or Director as soon as possible.
2. **Initial notification** → Within **2 hours** of becoming aware (verbally, by phone, or email).
3. **Written notification** → Staff complete the **Incident Report form in Microsoft Forms**.
4. **Automatic submission** → Form is emailed to the **Director and Office Manager**.
5. **Recording** → Data automatically populates the **Organisational Incident Register**.
6. **Review** → Director and/or Office Manager review the register regularly and initiate any required corrective actions.



Appendix B

Corrective and Preventive Action (CAPA) Form

For Soaring Sparrows Pty Ltd

Corrective and Preventive Action (CAPA) Form

Soaring Sparrows Pty Ltd

Related Policy: Incident Management Policy

Version: 1.0

Date: [Insert Date]

1. Incident Details

- **Incident Reference Number:** [Insert]
- **Date & Time of Incident:** [Insert]
- **Location:** [Insert]
- **Type of Incident:** [e.g., participant injury, staff injury, near miss, behaviour-related, etc.]
- **Reported By:** [Name & Role]
- **Description of Incident:**
[Brief summary of what happened]

2. Immediate Actions Taken

- **Actions:** [e.g., first aid, supervision, emergency services contacted]
- **By Whom:** [Name & Role]
- **Date/Time Completed:** [Insert]

3. Investigation Summary

- **Investigation Conducted By:** [Name & Role]
- **Date Completed:** [Insert]

- **Root Cause(s) Identified:**
[List the underlying cause(s) of the incident]
 - **Contributing Factors:**
[e.g., environmental, human error, equipment failure]
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4. Corrective Actions (For Immediate Risk Control)

- **Action Description:** [What will be done to fix the immediate issue?]
 - **Responsible Person:** [Name & Role]
 - **Due Date:** [Insert]
 - **Status:** [Pending / Completed]
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5. Preventive Actions (To Avoid Recurrence)

- **Action Description:** [What systemic changes, training, or monitoring will prevent recurrence?]
 - **Responsible Person:** [Name & Role]
 - **Due Date:** [Insert]
 - **Status:** [Pending / Completed]
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6. Monitoring and Review

- **How Effectiveness Will Be Monitored:** [e.g., follow-up audits, observation, feedback from staff or participants]
 - **Responsible Person:** [Name & Role]
 - **Date for Review:** [Insert]
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7. Sign-Off

- **Investigator Name & Signature:** _____
 - **Director / Manager Name & Signature:** _____
 - **Date:** _____
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Notes / Comments
