

# POLICY

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## CRITICAL INCIDENT REPORTING POLICY

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### Policy Statement:

Critical and major incidents involving people receiving supports or services from the Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships, including departmental staff, carers, departmentally funded or contracted services, must be reported to the appropriate management level to ensure effective operational responsiveness.

### Principles:

The timely and comprehensive alerting of critical incidents supports the:

- immediate appropriate assessment, advice and management of a critical incident, including providing staff and client supports
- effective provision of incident information, data requests and briefings
- informed, accurate and timely responses to executive and media enquiries.

### Objective:

This policy aims to ensure that incidents of a critical or sensitive nature involving departmental services, staff and clients are reported to the correct management level so they are dealt with quickly and appropriately. A critical incident reporting system has been implemented to support discharge of this obligation.

### Scope:

This policy applies where departmental staff members become aware of an incident as listed in the supporting document titled ['Categories for critical incident reporting'](#).

### Responsiveness:

#### Category Level 1: Critical Incidents

- Immediate verbal advice to the Director (or similar level officer); and
- Completion of a Critical Incident Report within **four business hours** of the staff member becoming aware of the incident.

#### Category Level 2: Major Incidents

- Immediate verbal advice to the Manager (or similar level officer); and
- Completion of a Critical Incident Report **by 5pm the next business day** following the staff member becoming aware of the incident.



## **Roles and Responsibilities:**

### **All Departmental Officers**

- Advise the appropriate person of the incident and the intention to submit critical incident report, including the reason and any related risk.
- Complete the critical incident report using the online critical incident reporting management system or manual form.
- Staff that do not have access to a computer should verbally notify their manager of the incident and email the details to an appropriate staff member to submit the critical incident report within the applicable timeframe.
- Undertake follow-up actions as requested, or required.

### **Managers**

- Receive critical incident alerts relating to their area of responsibility.
- Provide advice and guidance to staff about submitting critical incident reports and the level of report required.
- Immediately advise the Director of all Category Level 1 Critical Incidents.
- Be advised verbally of all Category Level 2 Major Incidents relating to their area of responsibility.
- Ensure follow-up actions and activities are completed as required, including any referrals to the NDIS Quality and Safeguards Commission for incidents that occurred in connection with the delivery of NDIS supports or services.
- Ensure information is disseminated to all staff where amendments to the critical incident policy, procedures and system are released.

### **Directors**

- Receive critical incident alerts for their business stream.
- Be verbally advised and receive completed Category Level 1 Critical Incident Reports in their business stream.
- If the incident is 'death-in-care', ensure the agency has reported the incident immediately to a Police Officer or Coroner. See *Critical Incident Reporting Procedure* and the *Coroners Act 2003*.
- Ensure follow-up actions and activities are completed as required, including any referrals to the NDIS Quality and Safeguards Commission for incidents that occurred in connection with the delivery of NDIS supports or services.
- Ensure processes are in place for continual improvement and feedback to support staff involved in critical incident reporting.
- Where required, provide direction for any follow up actions.

### **Disability and Seniors Connect (DSC)**

- Receive critical incident alerts for all business streams.
- Initiate an immediate (same day) quality assurance process to ensure critical incident reports and categories have been completed correctly, clients and staff are being appropriately supported, and all required referrals have been made.
- Provide quality assurance outcome advice to the Director-General for noting.
- Provide advice to support departmental staff and leadership in relation to policy application and required actions.
- Initiate the appropriate closure of reports and follow up the recording of any required actions and activities requested.
- Provide statistics and reports as required.

### Office of the Director-General

- Note outcome advice of the quality assurance undertaken by DSC.
- Brief Minister's office if required.
- Manage any media engagement or interest in response to a critical incident.

### Information Services

- Monitor and action access requests to the critical incident reporting management system.

### Authority:

*Disability Services Act 2006*

*Coroners Act 2003*

*Coroners Regulation 2003*

### Delegations:

The Deputy Director-General, Disability, Seniors and Carers is authorised to maintain a quality assurance process supporting implementation of this policy, and to apply the allocated human and financial resources to achieving the objectives of the policy.

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<b>Records File No.:</b>	<If applicable>
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<b>Date to be reviewed:</b>	January 2026

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<b>Office:</b>	Office of the Deputy Director-General, Disability, Seniors and Carers
<b>Help Contact:</b>	Complaints and Investigations

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### Links:

[Procedure – Critical Incident Reporting](#)

[Manual form for Critical Incident Reporting](#)

[Category for Critical Incident Reporting](#)

[Login: Critical Incident Report Management System](#)

[Critical Incident Report Management System – Guidelines for Users](#)

[Critical Incident Report Management System – Guidelines for Quality Assurance Coordinators](#)

[NDIS Quality and Safeguard Commission – Incident Management](#)