## **Incident Management Policy**

## 1. Purpose

The purpose of the Incident Management policy is to outline the actions required to ensure the effective management of incidents. Effectively managing incidents includes taking the appropriate actions in relation to incidents while also identifying any changes required to help prevent or reduce harm to our clients/service users, including children and young people, our personnel and other stakeholders.

Compliance with this policy ensures all incidents are reported and managed in a way that is responsive to the immediate circumstances of the incident, the rights of those involved, and wherever possible, any risks of recurrence are minimised.

This policy assists our organisation to:

- identify incident management and implementation roles and responsibilities
- review incident information over time to identify lessons and practice implications, and making recommendations for improvement
- generate and implement improvement strategies and action plans, and
- monitoring and reviewing the effectiveness of actions taken.

In adhering to this policy, personnel of Chabad Youth will promote equity and respect diversity of the children and young people and their parents /care givers who access our services. This includes Aboriginal and Torres Strait Islander children, children from culturally and linguistically diverse backgrounds and children, young people with a disability, LGBTQI+ children and children who cannot live at home. Our organisation upholds a family's right to have their concern resolved.

Our policies and procedures reflect child safe legislation and promote best practice and care for the children and young people within our organisation. Our Nominated Supervisor / Board approves and endorses our Chabad Youth Incident Management Policy.

## 2. Scope

The Incident Management Policy applies to all personnel, including; employees, casual staff, Board and committee members, volunteers and contractors involved with Chabad Youth.

This policy applies in all our operational environments and without fail wherever children and young people are participating in our organisation's activities, programs, services and / or facilities.

## 3. Responsibilities

All personnel within our organisation have a duty of care, and at times a legal obligation, and specific roles and responsibilities to ensure that incidents are responded to and managed appropriately. 'Reasonable steps' are taken to prevent harm to children and young people. An incident can occur at any time and may be triggered from a conversation, email, phone call or an alarm.

Our personnel are obliged to report any information relating to:

- Incidents, allegations, disclosures or reasonable concerns in relation to abuse or neglect of a child or young person, either by personnel within our organisation or by others
- breaches or actions of other personnel within our organisation that contravene our policies and procedures, such as outlined in our Code of Conduct.

We view failure by personnel to fulfil their role as outlined in the Incident Management Policy as serious misconduct that, depending on the circumstances, may result in disciplinary action or be grounds for dismissal. Further legal implications may also apply.

The responsibility of each role in relation to the development and compliance of the Chabad Youth Incident Management Policy is detailed in section 8 of this policy.

#### **Reporting summary**

In the immediate event of an incident, all personnel must follow the steps outlined in the Reporting Policy

- Responding- immediate response to incident or disclosure
- Reporting- internal and external reporting, including mandatory reporting
- Sharing of Information- confidentiality and sharing between authorities and other stakeholders
- Supporting- provision of support for children and young people and others involved

## 4. Categorisation of Incidents

Categorisation is an essential activity in incident management. The main objective is to understand what type of incident has occurred, and therefore how to manage most effectively. Over time, if incidents are categorised similarly, the data can be used to identify trends and focus efforts on improving proactively.

Given the broad definition of what constitutes an incident, three categories have been developed to allow for specialised responses based on the actual or potential severity of impact. These categories are as follows:

Incident Type	Description	Managed/escalated to
Minor Incident	Events which cause or may cause minor physical stress and or emotional stress to personnel or clients/service users.  Near misses and minor breaches of professional standards or agency policy (for example the Code of Conduct) that do not compromise the health and safety of clients/service users, including children and young people and personnel.	Frontline staff and direct  Managers/Supervisors/ Safeguarding Coordinator/ Manager
Moderate Incident	Events which cause or are likely to cause physical stress or emotional distress to personnel or clients/service users.  Near misses and criminal behaviour or breaches of professional standards or agency policy (for example the Code of Conduct) by personnel that may compromise the health and safety of clients / service users, including children and young people and personnel.	Safeguarding Coordinator / Manager
Critical Incident	Criminal behaviour, breaches of professional standards or organisational policy (for example Code of Conduct) by personnel that cause harm to or significantly compromise the health and safety of including client / service users, including children and young people and personnel.  A critical Incident, in relation to a child under the care of the Organisation (whether or not at the relevant time the child is on premises controlled by the	Nominated Supervisor and Critical Incident Response Team (CIRT Coordinator) and Board

Incident Description	Managed/escalated to
Туре	
Organisation or is otherwise under the physical supervision of the Organisation) includes the occurrence of any of the following events or any similar event:  • the child dies and: • abuse or neglect is known or suspected to be a factor in the death; • the death is, or appears to be, the result of suicide or accident; • the death is, or appears to be, the result of alleged murder, homicide, reckless conduct or an act of violence; or • the child is under statutory care; • a child has not died but has sustained significant harm or is at risk of harm under the categories described in the relevant jurisdictional legislation of abuse and neglect; • ACF notifies the Organisation that a child has been, in the opinion of ACF, subjected to cumulative inaction or wrong action; or • ACF notifies the Organisation that an incident and or accumulation of incidents has occurred in relation to the child that, in ACF's opinion, gives rise to serious concerns about the adherence by the Organisation, or any employee or contractor of the Organisation, to any part of the Safeguarding Children Program • (definition as per the ACF Accreditation Terms and Conditions Contract)	

See Appendix 1 for additional guidance in relation to categorising incident types.

As a Safeguarding Children Accredited organisation by the ACF, reports must be made to ACF by completing the Child Abuse Incident- ACF Report Form as follows:

- i. All critical incidents to be verbally reported to ACF within 24 hours; and
- ii. Any allegations of child abuse or neglect, that involves our personnel within 28 days of the incident in accordance with the requirements of the Safeguarding Children Program.

Reports to the ACF will be made by our Safeguarding Coordinator.

Following an incident being reported, the Safeguarding Coordinator / Nominated Supervisor is responsible for assessing and categorising the incident as Minor, Moderate or Critical as defined above.

Moderate incidents and critical incidents must be reported to the Board immediately.

See Critical Incident Management Procedure for further information.

## 5. Investigation

#### **Internal Investigation**

After each incident, an internal investigation is conducted by Nominated Supervisor / Board. This investigation will aim to establish;

- Events that led up to the incident
- What the nature of the incident was
- Category of the incident
- Impact to children and young people
- Action taken by personnel to report
- Causes and influencing factors in the lead up to the incident
- Procedure followed and actions made by personnel
- support provided to individuals impacted by the incident
- follow up actions to be completed
- corrective actions to be taken by the organisation which informs continuous improvement
- report to Board / Nominated Supervisor.

When the organisation lacks the specific skills or impartiality to complete a fair investigation, an incident may be contracted out to an external investigator. The Nominated Supervisor / Board may also initiate an external review

#### **Key Considerations for all Investigations**

Careful planning is key to conducting an accurate and procedurally fair investigation. All investigations should consider;

- Fairness- ensuring the most appropriate investigator is engaged to complete a fair and unbiased analysis. Investigations should be clear in their purpose, scope and plan. Each reportable allegation should be investigated separately. Investigations may still need to be completed regardless of if there has already been a police investigation
- Sensitivity- The rights of all parties involved should be upheld. Consideration for when, how and with whom interviews are conducted, avoiding any potential conflicts of interest. Interviews must be carried out sensitively and culturally appropriately with victims and witnesses. There should be procedural fairness towards the personnel involved and a reasonable opportunity to respond
- Confidentiality- Gathering relevant and appropriate evidence which is clearly documented and stored appropriately. Managing risks during investigations such as impact on service, welfare of children and young people
- Outcomes and Recommendations- Recommending findings and opportunities for continuous improvement should be clear. Any action which goes against the recommendations should be thoroughly explained and justified.

#### **External Investigation**

In some cases, this may be instigated by an external regulatory body as part of a licencing or compliance requirement. An external investigation may be carried out by the appropriate authorities, for example Police, child protection, NDIS, Quality and Safeguards Commission.

#### **5.1 Criminal Acts and Misconduct**

#### Criminal acts

If while categorising, investigating or reviewing an incident, it is suspected that the incident may involve criminal acts, the [org] should refer the matter to the appropriate external body (i.e. police / child protection) so it can be addressed using the appropriate legal processes.

The internal investigation or incident review <u>may</u> continue separately to the criminal / child protection investigation however it will usually be appropriate to suspend the review because of issues relating to the disclosure of information.

All suspected criminal activity must be reported to the Nominated Supervisor and police.

#### Misconduct

If while categorising, investigating or reviewing an incident it is suspected that the incident may contain elements of misconduct, the matter should be referred to the Nominated Supervisor so it can be addressed using the appropriate personnel management processes.

Where an allegation involves personnel within our organisation, the Nominated Supervisor will consider if such conduct contravenes the organisations behavioural guidelines / Code of Conduct and if required to by law, act in accordance with the Reportable Conduct Scheme. Information regarding Reportable Conduct Scheme can be found in Reporting Policy.

The internal investigation or incident review may continue separately to the misconduct processes unless advised by the Nominated Supervisor to cease the review because of issues relating to procedural fairness and transparency.

#### 6. Incident Review

The management of moderate and critical incidents that impact significantly on the persons directly concerned and more broadly on the safe delivery of services and programs will be independently reviewed. An independent internal or external review of the management of the incident may be initiated by the Nominated Supervisor

Incident Reviews and investigations are required for incidents where:

- children and young people or personnel are seriously injured, or their health and wellbeing is compromised
- external authorities / emergency services are involved
- insurance claims arise
- the reputation of the organisation may be brought into disrepute
- Work Health and Safety systems and procedures fail.

A root cause analysis of the incident forms part of this review.

A member of the Board will be assigned as the Incident Review Coordinator. Incident Reviews must be completed by the Incident Review Coordinator in conjunction with relevant personnel who may include Board members and external experts. These personnel will form an Incident Review Team. To support the objectivity of incident review processes the Incident Review Coordinator and Team should not have been involved in the management of the incident.

A Review should be completed within 21 days of the initiating date with a further 21 days for completion of any follow-up actions.

Follow-up actions may be identified throughout the process of an Incident Review. These actions will be assigned to a responsible person and a timeframe for completion be established. Follow-up actions arising will be added to the Risk Register to ensure that effective mitigation activities

are implemented. The Nominated Supervisor is responsible for ensuring that actions on the Risk Register are completed within required timeframes.

If there is a risk, then immediate controls will be put in place to control the hazard. This control may be temporary in nature whilst longer term solutions are determined.

The Incident Review Report must be provided to the Nominated Supervisor. Where follow-up action is required of service / program areas the Incident Review Coordinator will advise the appropriate Manager of the actions to be taken and the timeframes for completion of the actions.

All Incident Review Reports are to be stored on a central and secure system. Regular thematic analysis review of all incidents will be undertaken by the Board, as a minimum twice per year.

## 7. Monitoring

All Incident Reports recorded on the Incident Register are to be regularly reviewed, every 6 months by the board to ensure the effectiveness of actions taken and to identify areas for improvement.

All follow-up actions arising from an incident review, will be monitored by the Nominated Supervisor via the Risk Register.

Data trend reports from both the Incident and Risk Registers are to be provided to the Board every 6 months] to assist with organisation incident and risk management strategies.

Incidents are not to be closed until actions have been completed and reviewed by the board and persons reporting the incident have been informed of the final outcome.

## 8. Roles and Responsibilities

The responsibilities of each role in relation to the development, implementation and compliance of the Chabad Youth Incident Management Policy is detailed below;

Position	Overall Responsibility for Incident Management	Responsibility in the event of an Incident
Board / Nominated Supervisor	<ul> <li>Approval and endorsement of this policy</li> <li>Receiving incident reports for specified categories of incidents, provide support and advice as appropriate, and utilise data to inform organisation incident and risk management strategies. Receiving incident report trends from CEO / Executive</li> <li>Media and/or regulatory reporting oversight</li> </ul>	
Board / Nominated Supervisor	<ul> <li>Implement policies and procedures across the organisation</li> <li>Ensure personnel have access to and understand this policy and related procedures</li> <li>Ensure all managers/supervisors have access to support and advice to understand and implement this policy and related procedures</li> </ul>	<ul> <li>Establish a Critical Incident Response Team (CIRT) and appoint a Coordinator of the CIRT where the incident is categorised as Critical.</li> <li>Lead internal and external incident reviews and investigations</li> <li>Receive a Critical Incident Debriefing Report from the CIRT</li> <li>Establish an Incident Review Team and Coordinator where required.</li> </ul>
Workforce/HR/ Quality	<ul> <li>Review and update this document and supporting resources in consultation with relevant stakeholders</li> <li>Provide training and advice in the application of this policy and procedures</li> </ul>	disciplinary procedures

Position	Overall Responsibility for Incident Management	Responsibility in the event of an Incident
Safeguarding Coordinator Managers/ Supervisors	<ul> <li>Ensure this policy and related procedures are followed and implemented</li> <li>Provide support and advice to personnel to help understand and implement this policy and related procedures</li> </ul>	personnel of the incident as indicated on this policy
Critical Incident Response Team	N/A	<ul> <li>Coordinate the response and recovery of an incident, including coordination of Emergency Evacuation Procedures (if required)</li> <li>Notifying relevant emergency contacts for staff or clients/service users involved in the incident and provide appropriate support</li> <li>Coordinate appropriate counselling and support services</li> <li>Manage internal and external communications include liaising with external authorities</li> <li>Implementing an ongoing plan of support to ensure follow up concerning the well-being of individuals involved in the incident</li> <li>Ensuring that the organisation complies with any additional external / legislative reporting requirements that may arise from the incident</li> </ul>

Position	Overall Responsibility for Incident Management	Responsibility in the event of an Incident
		(The CIRT would usually include persons with management responsibilities for the effected program and appropriate skills in incident management.)
Incident Review Coordinator	N/A	<ul> <li>Coordinate an Incident Review including:</li> <li>Providing a confidential Incident Review Report to the CEO</li> <li>Making recommendations for the management of such incidents in the future. (This would usually be a person with no management responsibility for the effected program and who has appropriate skills and knowledge of Incident Management Policy requirements).</li> </ul>
Incident Review Team	N/A	<ul> <li>Assisting the Incident Review Coordinator to acquit their responsibilities as outlined above</li> <li>(This would usually be persons who have with no line management responsibility for the effected program and who have appropriate skills and knowledge of Incident Management Policy requirements)</li> </ul>
Personnel	Awareness of and compliance with this policy and related procedure.	<ul> <li>Where necessary and if safe to do so, provide an immediate management of incident as stated in Reporting Policy</li> <li>Notify and report to Safeguarding Coordinator as soon as possible of the incident.</li> </ul>



#### 9. Communication

The Incident Management Policy will be communicated to all personnel. Personnel will be involved in reviews of the Incident Management requirements. Any significant alterations to the Incident Management requirements and resources will be communicated to all personnel.

## 10. Policy Review

This document will be reviewed every three years, in consultation with stakeholders. Some circumstances may trigger an early review, this includes but not limited to legislative changes, organisational changes, incident outcomes and other matters deemed appropriate by the board are retained to document each review undertaken. Such records may include minutes of meetings and documentation of changes to policies and procedures that result from a review.

## 11. Supporting Resources

- Incident Report Form
- Reporting to Australian Childhood Foundation (ACF) Incident Report Form
- Incident Review Report
- Incident Register
- Risk Register
- Risk Assessment

### 12. Related Policies

- Reporting Policy
- Engagement Procedure
- Policy, Procedure and Practice Review Procedure
- Risk Management Policy
- Critical Incident Procedure
- Investigation Procedure



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## 13. Related Frameworks and Legislation

Our guidelines comply with relevant legislation.

In upholding this policy, the following legislation and frameworks must be considered by all Chabad Youth personnel:

- United Nations Convention on the Rights of the Child
- National Framework for Protecting Australia's Children 2009-2020
- Australian Human Rights Commission National Principles for Child Safe Organisations
- WHS Act, 2011

#### 14. Definitions

Term	Definition		
Clients / service users	Persons accessing services from the organisation including children and young people and their families.		
Incident Register	A register of incidents identified through incident report system.		
Incident Review	<ul> <li>A review of the management of an incident that:</li> <li>assesses whether the incident has been effectively managed</li> <li>assesses whether the Incident Management Policy and processes are effective</li> <li>makes recommendation(s) to ameliorate and deficiencies in policies and processes.</li> </ul>		
Personnel	All who work for the organisation whether in a paid or unpaid capacity, including; employees, casual employees, volunteers, Board and committee members and contractors		
Risk Register	A register of risks identified through risk assessments and incident reviews. Risk mitigation activities and time frames for their completion are recorded. Risks remain on the risk register until risk mitigation activities are completed.		
Root Cause Analysis	Part of an Incident Review. Root Cause Analysis probes the source of a problem and then suggests productive solutions in the form of preventive system changes. Root cause analysis:  • focuses primarily on systems and processes, not individual performance		

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Term	Definition
	progresses from special causes to common causes in organisational processes
	<ul> <li>identifies changes that could be made in systems and processes to improve the level of performance and reduce the risk of a particular and serious incident occurring in the future.</li> </ul>

# Appendix 1- Additional Guidance on incident definition and categorisation

Minor incidents are events which are within the range of ordinary human experiences and have no after effect on those involved and do not disrupt the normal operations or services of an organisation. For example: injuries not requiring medical treatment1 (cuts, abrasion, bruises, minor sprain), near misses or minor breaches of organisation policy or procedure that do not compromise the health and safety of children and young people.

Moderate incidents are events which may be within the range of ordinary human experiences but have a short-term effect on those involved. Moderate incidents may cause temporary closure to an area of an organisation or interrupt normal services. For example: injuries requiring immediate medical treatment (concussion, lacerations, fracture or dislocation) threats of violence, near misses, criminal behaviour, breaches of Code of Conduct that compromise the health and safety of children and young people.

Critical incidents are events which are outside the range of ordinary human experiences and have the potential to leave lasting effects on those involved. Critical incidents cause temporary closure of an organisation / service. For example: serious injuries, fatalities, near fatalities, extreme threats of violence, assaults, an event or media coverage that has the potential to bring the organisation into disrepute, criminal behaviour or serious breaches of the Code of Conduct, that cause harm to or significantly compromise the health and safety of children and young people.

#### **Moderate / Critical Incident Types**

Health, safety, and wellbeing

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<sup>&</sup>lt;sup>1</sup> 'Medical Treatment' means treatment by a medical professional



Absent/missing client	Client who is in the care of the organisation is absent and there are concerns for their safety and welfare
Accidental Injury	Actions or behaviours that unintentionally cause harm which requires medical treatment
Assault - physical	Actions or attempted actions that involve the use of physical force against a person that result in or have the potential to cause harm.  Any assault of a client or staff member must be recorded as a critical incident. Assaults can vary in nature from life-threatening events to incidents that threaten clients or others health, safety or wellbeing. Allegations of assault of a client by a staff member, volunteer carer or member of the carer's household must be reported as a critical incident regardless of whether medical attention is required and regardless of the type of assault alleged.
Assault - sexual	Sexual assault includes the full range of sexually abusive behaviour including rape, assault with intent to rape and indecent assault. Inappropriate touching or exposure by a client with a disability needs to be considered in the context of the individual client's behaviour or disability. A police report may not be necessary or appropriate in this case. If the behaviour is such that criminal charges are likely, or the client has previously been charged with sexual offences, then the incident must be categorised as a critical incident.
Client Behaviour – dangerous	Client actions that place self or others at risk of harm or are violent and dangerous including sex work of a client under 18
Death – client, staff, other	The death of a client or staff member or another person during service delivery.  All deaths occurring during service delivery are classified as critical incidents.  The death of a client that doesn't occur during service delivery does not in itself constitute a critical incident. However, a critical incident classification
	<ol> <li>Is of a client under the age of 18 years</li> <li>occurs in unusual or unexpected circumstances, such as, but not limited to, murder, overdose or suicide</li> <li>has a direct or obvious correlation to the service the person was receiving</li> <li>is reportable, for example to the Commission for Children and Young People.</li> </ol>

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	5. Client deaths as the consequence of the progression of a diagnosed condition or illness are not usually classified as critical incidents.
Drug/alcohol misuse	Life threatening use of drugs and/or alcohol and/or other substances including potential overdose
Property damage/disruption	Damage or disruption to premises that involves or impacts upon services to clients
Self-harm / Suicide attempted	Actions that intentionally cause harm or injury to self or with the intention to end one's own life
Conduct of Personnel	
Criminal behaviour by personnel	Behaviour that has had or may have an adverse impact on clients or the organisation including the possession of illegal or unauthorised goods.
Breach of confidentiality	The inappropriate disclosure of confidential client information.
Breach of professional standards, policy or duty of care	Poor professional practice, inappropriate behaviour or breach of professional standards or agency policy by staff or that results in or has the potential to cause harm to a client, or other personnel.
Public Relations	
Community concern	<ul> <li>Incidents that involve or impact upon clients which cause community concern and had or may have an adverse impact on the reputation and standing of the organisation. Community concern includes: <ul> <li>subpoena of agency personnel to Coronial or other Statutory Inquires in relation to service users</li> <li>information that suggests that the organisation is in breach of regulatory or certification requirements</li> <li>A breach of agency policy that leads to an adverse impact on the reputation and standing of the agency.</li> </ul> </li> </ul>
Involvement of External Authorities	Emergency Services, Police Child Protection, courts

Referen	ce	Date approved	Date last amended	Date of next review	Status
		16/10/21	23/8/2022	01/09/2023	Endorsed by:Dina Kahn

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#### Approval and Endorsement from the Director and CIVL Board

This policy has the approval and endorsement of the Chabad Youth Director Moshe Kahn, Yossi Gestetner of the CIVL board, and

all division heads. We take seriously our responsibility to deliver a safe environment that is caring, supportive and nurturing. Our directors are committed to ensuring the safety of all children and young people to whom we provide services or who participate in our programs.

Director Chabad Youth

M. K

CIVL Board













