

Org2.7 NDIS Reportable Incident Response and Management

Purpose

1. To ensure that all P4 Movement employees are aware of their responsibilities and have the information required to report incidents in a way that provides effective safeguards for Participants, workers and stakeholders.
2. To provide a framework for Participants and their families, carers, advocates and workers, as well as P4 Movement staff more broadly, to follow should incidents occur during the provision of support services.
3. The framework will provide guidance that aims to assist in the identification, assessment, management and resolution of incidents involving P4 Movement workers and any external parties during the provision of NDIS affiliated activities.

Alignment with Practice Standards

1. Module 1: Rights and Responsibilities
2. Module 2: Provider Governance and Operational Management
3. Behaviour Support Plan Modules

Legislative Alignment

1. Disability Discrimination Act 1992
2. National Disability Insurance Scheme Act 2013
3. National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018
4. National Disability Insurance Scheme (Code of Conduct) Rules 2018
5. National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018
6. The Privacy Act 1988

Key Responsible Executive

General Manager

For More Support

General Manager

Policy Statement

1. P4 Movement recognises the opportunity that Incidents provide to continuously review and improve its practices. Our Incident management System is based on the principles outlined in the NDIS Quality and Safeguards Commission guidance on reportable incidents:
 - a. Centred on people with a disability
 - b. Outcome focussed
 - c. Clear, simple and consistent
 - d. Accountable
 - e. Continual improvement
 - f. Proportionate
2. In the event of an incident, P4 Movement will accurately document the response process and communicate transparently with stakeholders, both internal and external, throughout.
3. P4 Movement requires all staff to report hazards and incidents as soon as possible, and prior to the completion of their shift.
4. P4 Movement recognises the importance of swiftly reporting incidents to the NDIS Commission and other relevant authorities should they occur. Reportable incidents under the NDIS Commission where they are in connection with the provision of supports or services delivered by P4 Movement may include:
 - a. The death of a person with disability
 - b. The serious injury of a person with disability
 - c. The abuse or neglect of a person with disability
 - d. Unlawful sexual or physical contact with, or assault of, a person with disability
 - e. Sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity
 - f. The use of a restrictive practice in relation to a person with disability, other than where the use is in accordance with the Participants authorised behaviour support plan
5. P4 Movement acknowledges its responsibility to fully cooperate with any external investigations that may be undertaken by the NDIS Commission or any other relevant third parties with respect to alleged incidents involving Participants or employees.
6. Any acts of violence, abuse, neglect or exploitation by a Participant will result in an assessment of the Participant's service package and the method of service delivery to ensure they are constructive and of maximum benefit. This may include a view of any behaviour support plans by a specialist behaviour support provider to reduce the risks of future violence.
7. P4 Movement acknowledges the importance of creating a culture that is open, accepting and responsive to feedback, complaints and incident notifications.
8. P4 Movement Participants who report incidents of violence, abuse, neglect or exploitation will be provided with support and assistance.
9. P4 Movement will be supportive of Participants if they choose to be involved in the management and resolution of any incidents.
10. Participants and their families or advocates will have access to documentation relating to hazard and incident management.
11. Mandatory reports to relevant state and territory government departments will be made in a sufficiently timely manner.
12. Records will be made of any details and outcomes of reviews and investigations following allegations and incidents of violence, abuse, neglect, exploitation and/or discrimination

13. The management of hazards and incidents will be reviewed periodically to ensure its ongoing effectiveness.
14. P4 Movement is committed to the maintenance of communication and feedback to ensure continuous improvement of a safe working environment.

Definitions

1. *Harm* can include physical, emotional or psychological impacts such as injuries, emotional impacts such as fear or poor self-esteem, and psychological impacts such as depression or impacts on a person's learning and development.
2. A *reportable Incident* must satisfy the following two requirements:
 - a. The incident must be defined as a reportable incident in section 73Z(4) of the Act and section 16 of the NDIS (Incident Management and Reportable Incidents) Rules 2018 which includes;
 - i. the death of a person with disability; or
 - ii. serious injury of a person with disability; or
 - iii. abuse or neglect of a person with disability; or
 - iv. unlawful sexual or physical contact with, or assault of, a person with disability; or
 - v. sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity; or
 - vi. the use of a restrictive practice in relation to a person with disability, other than where the use is in accordance with an authorisation (however described) of a State or Territory in relation to the person
 - b. The incident must have occurred or be alleged to have occurred in connection with the provision of supports or services you're providing

Types of Incidents Reported at P4 Movement

1. Incidents that must be *reported through the NDIS Commission*
 - a. Acts, omissions, events or circumstances that occur *in connection with* providing support or services to a Participant and have, or could have, caused harm to the Participant.
 - i. The subject of the allegation for these incidents may be anyone, including an employee, or a member of the general public.
 - b. Acts by a Participant that occur in connection with providing support or services to the Participant and which have caused *serious* harm, or a risk of serious harm, to another person.
 - i. Serious harm means that the harm is not minor or trivial. It involves a substantial physical, emotional or psychological impact on the impacted person.
 - c. Reportable incidents that have or are alleged to have occurred *in connection with* providing support or services to a Participant.
2. Incidents that are reported to P4 Movement, but *do not need to be reported to the NDIS Commission*
 - a. Acts, omissions, events or circumstances that occur during, but are *unconnected with* the delivery of support or services to a Participant and have, or could have, caused harm to the Participant.
 - i. The subject of the allegation for these incidents may be anyone, including an employee, or a member of the general public.
 - b. Acts by a Participant that occur in connection with providing support or services to the Participant and which *have or could have caused harm to* another person.
 - i. These would be minor, trivial, or near miss impacts to a person physically, emotionally or psychologically.
 - c. Acts, omissions, events or circumstances that have, or could have caused harm to an employee or stakeholder, that is *unrelated to a specific Participant*.

Incident Management Process

1. How incidents are identified, recorded and reported

- a. Describing an incident: P4 Movement considers *any acts, omissions, events or circumstances that does or could result in physical, emotional or psychological harm during the course of P4 Movement operations, whether related or unrelated to delivering a specific Participant support or service to be considered an incident*. This enables all incidents related to health and safety for Participants, employees and stakeholders to be managed through one simplified system.
- b. Identifying an incident: An incident can be identified by an employee, Participant or other stakeholder and all should be confident and capable of reporting something that they believe MAY be an incident. P4 Movement errs on the side of caution and encourages employees, Participants and stakeholders to report incidents, even when they are in doubt. A table of Indicators of events from the NDIS Commission is provided in the following section to provide some guidance on incident identification.
- c. Recording the incident: A Participant, employee or stakeholder can provide details of the incident by;
 - i. filling in the incident form (available on the website or paper copy),
 - ii. via the phone (calling the P4 Movement office, where a staff member will record the details), or
 - iii. in person to an employee or supervisor.
 - iv. Note that steps to ensure the safety of Participants, employees and the general public should be taken prior to recording the incident.
- d. Timeframe:
 - i. For employees - Incidents that are reportable to the NDIS should be reported to the Service Manager as soon as steps have been taken to ensure the safety of the Participant, employees and general public. All other incidents must be reported before the end of the shift in which they occur. should be reported before the end of the shift in which they occur when it is an employee reporting an incident.
 - ii. For Participants and others - Participants are encouraged to report incidents as soon as possible so that they can be effectively investigated and resolved. Once a Participant has reported an incident to any employee using any of the outlined channels, the employee must escalate these to the Service Manager within the above timeline.
 - iii. For the Service Manager - The Service Manager will be responsible for notifying the GM within 1 hour or potentially reportable incidents and ensuring these are submitted through the NDIS Commission portal within 24 hours of being notified. For non reportable incidents, the Service Manager will ensure the Incident is effectively logged in order to be available on the GM's weekly dashboard.
- e. Reporting: The employee or Participant reporting the incident can do this in writing or verbally in the first instance. However, verbally reported incidents need to be documented by an employee and acknowledged as true and accurate by the reporting employee or Participant in a timely manner and noted in the incident report.

2. Who Incidents are reported to

- a. Service Manager: All incidents should be escalated as efficiently as possible to the Service Manager within the appropriate timeline. This means:
 - i. Online forms are automatically emailed directly to the Service Manager
 - ii. Paper Incident forms should be sent to the Service Manager as soon as possible (e.g. a clear photo of the filled in form can be sent by email or text) or handed to the Service Manager if in the same physical location.
 - iii. Verbal notifications of an incident should be recorded directly onto the online incident form which will then go directly to the Service manager.
 - iv. Note that the Service Manager should be called immediately for support in managing an incident where the employee needs support
- b. Police and Emergency Services:
 - i. In any case of life threatening emergency, the employee or Participant should contact 000 to speak with the relevant Emergency Services for support prior to contacting the P4 Movement Service Manager.
 - ii. In non life threatening situations, the employee should contact the Service Manager to agree what immediate and short term action should be taken to support the physical, emotional and psychological health of the Participant and any other relevant parties.
 - iii. Where the incident requires medical attention, the employee, with the Service Managers support will organise for medical support, including transportation via ambulance to a hospital if required.
- c. Guardians, family, carers or advocates:
 - i. Contact with guardians, family, carers and advocates, initially is to be made with the consent of the Participant if they are capable. If due to harm from the incident or capability the Participant is unable to provide consent, the employee will refer to guidance in the care plan about incident management.
 - ii. The Participants support network will be engaged in the investigation and management of the incident, based on the Participant's consent and scope of incident.
- d. Medical and Specialist Practitioners: Depending on the scope and impact if the incident, the employee and Service Manager may also deem that the Participant should be referred to / taken to a medical appointment or specialist practitioner (such as psychologist) immediately. The timeline for this referral will depend on the incident, type of harm and impact on the Participant. For example, if the incident was the use of an unauthorised restrictive practice for an unexpected behaviour of concern that the employee believes may happen again, the Participant will be referred (with consent) to a behavioural support practitioner.
- e. The GM and Board: The GM will be notified of all reportable incidents by the Service Manager as soon as possible, and within 12 hours of the incident occurring. While the Service Manager is responsible for reporting Incidents to the NDIS Commission, the GM is to provide any support needed to the Service Manager in order for this to be completed. The GM will also notify the Board of all incidents, including in the monthly Incident report.

3. Support, assistance and involvement of the affected Participant

- a. Participant and employee health, safety and wellbeing is a matter of priority for P4 Movement. If the incident causes a life threatening risk to health or safety, the employee should contact 000 immediately.
- b. Where there is no imminent life threatening risk, however the impact or risk of impact is significant, the employee should contact the Service Manager immediately to determine the next course of action (see notification of medical and specialist practitioners above)
- c. The impacted Participant is to be involved, to the extent they are comfortable with, in all stages of the process including;
 - i. Initial incident reporting to self report or confirm details where appropriate

- ii. During an investigation to clarify facts and share feedback on the impact of the incident
- iii. At the conclusion of an investigation to provide
 - information on how the incident was managed (including who reported the incident, immediate steps taken to look after the Participants safety and any procedures or protocols that were implemented in order to respond to the incident)
 - insights from the investigation
 - follow up actions.
- iv. In follow up action planning, by providing their feedback on;
 - How they were affected by the incident
 - What they think could have been done to prevent the incident
 - What corrective actions they think are needed post the incident
 - What support they would like to prevent the incident from reoccurring
 - How P4 Movement managed the incident
 - If they think their Care Plan or P4 Movement programs, policies or procedures could change to improve the outcomes for themselves or other P4 Movement Participants or staff.
- d. Participants will be reminded that they are able to have an advocate or support person to participate in the incident management process. Where a Participant is involved, all possible steps will be taken to ensure the Participant feels comfortable and empowered to participate. This includes using language and modes of communication that are appropriate and utilising appropriate environments.

4. Investigation and assessment

- a. The P4 Movement Service Manager (or an appropriate delegate depending on the incident scale, scope and technicality) is responsible for assessing each incident, in relation to the following questions;
 - i. Could the incident have been prevented?
 - ii. How well was the incident managed and resolved?
 - iii. What, if any, regulatory action needs to be undertaken to prevent further similar incidents from occurring?
 - iv. What, if any, regulatory action needs to be undertaken to minimise the impact of an incident?
 - v. Do other persons or bodies need to be notified of the incident (e.g. NSW Department of Community and Justice for a child at risk of abuse)?
- b. In some circumstances it may also be necessary to conduct an investigation to establish the cause of a particular incident, its effect and any operational issues that may have contributed to the incident occurring.
- c. Registered NDIS providers must have a process in place to identify when such an investigation is required, and the nature of that investigation. If Police are involved, an internal investigation must not interfere with Police inquiries. This could include delaying the internal investigation, if required.
- d. Registered NDIS providers should ensure that workers involved in conducting and responding to incidents receive appropriate training. Their incident management systems must require people to be afforded procedural fairness when an incident is being dealt with. Further guidance about how registered NDIS providers should respond to reportable incidents

5. Corrective action

- a. Corrective action aims to address identified systemic issues and drive improvements in the quality of the support services that P4 Movement delivers.
- b. Corrective action should take place in the following circumstances:

- i. Where an incident may have been prevented (or the severity lessened) by some action (or inaction) by a registered NDIS provider or worker.
- ii. Where there is an ongoing risk to people with disability.
- iii. Where action by the registered NDIS provider may prevent or minimise the risk of a recurrence.
- c. Examples of corrective actions include:
 - i. Re-training or further training of workers.
 - ii. Practice improvements including developing or enhancing policies and procedures.
 - iii. Changes to the environment in which supports or services are provided.
 - iv. Changes to the way in which supports or services are provided.

Reporting Practices

1. Identification of incidents

- a. Incidents are identified in a number of ways, including where a worker or another person observes the incident, a Participant makes a disclosure about the incident, or another party informs P4 Movement that the incident occurred.
- b. Some incidents are simple to identify, however, other incidents are harder to identify, especially where they involve abuse, neglect, or other types of reportable incidents.
- c. In addition to incidents or allegations of incidents that are disclosed by an impacted person, or witnessed by someone, there are also additional signs that may indicate someone is an impacted person. These are indicators of potential incidents, especially where they involve abuse, neglect, sexual misconduct, or unauthorised use of restrictive practices. These are outlined below (NDIS Commission Incident Management Guidance). P4 Movement also has an Abuse and Neglect Policy which provides greater detail on identifying instances of abuse or neglect and additional reporting requirements based on these incidents.

Incident types	Behavioural indicators and physical signs
Physical abuse, unlawful physical contact or physical assault	● Inconsistent, vague, unexpected or unlikely explanation for the injury. ● Unexplained injuries – broken bones, fractures, sprains, bruises, burns, scalds, bite marks, scratches or welts. ● Other bruising and marks that may suggest the shape of the object that caused it. ● Avoiding or being fearful of a particular person or worker. ● Being overly compliant with workers. ● Frequent and overall drowsiness (associated with head injuries). ● Out of character aggression.

Sexual contact, sexual assault or sexual misconduct	● Dropping hints that appear to be about abuse. ● Bruises, pain, bleeding – including redness and swelling around breasts and genitals. ● Torn, stained, or bloody underwear or bedding. ● Repeating a word or sign, such as 'bad', 'dirty'. ● Presence of a sexually transmitted disease. ● Pregnancy. ● Sudden changes in behaviour or character, e.g.: depression, anxiety attacks (crying, sweating, trembling, withdrawal, agitations, anger, violence, absconding, sexually expressive behaviour, seeking comfort and security). ● Sleep disturbances, refusing to go to bed, and/or going to bed fully clothed. ● Refusing to shower.
Psychological, emotional or verbal abuse	● Depression, withdrawal, crying or emotional behaviour ● Being secretive, and trying to hide information and personal belongings. ● Speech disorders. ● Weight gain or loss. ● Feelings of worthlessness about life and themselves; extremely low self-esteem, self-abuse, or self-destructive behaviour. ● Extreme attention-seeking behaviour and other behavioural disorders (e.g.: disruptiveness, aggressiveness, bullying). ● Being overly compliant.
Domestic violence	● Depression, withdrawal, crying or violence. ● Feelings of worthlessness about life and themselves; extremely low self-esteem, self-abuse, or self-destructive behaviour. ● Extreme attention-seeking behaviour and other behavioural disorders (e.g.: disruptiveness, aggressiveness, bullying). ● Being overly compliant.

Neglect	● Inappropriate or inadequate shelter or accommodation, including unclean and unsanitary living conditions. ● Weight loss. ● Requesting, begging, scavenging, or stealing food. ● Being very hungry or thirsty. ● Inadequate supply of fresh food. ● Constant fatigue, listlessness or falling asleep. ● Dropping hints that appear to be about neglect. ● Extreme longing for company. ● Poor hygiene or poor grooming – overgrown fingernails and toenails, unclean hair, unshaven, unbathed, wearing dirty or damaged clothing. ● Inappropriate or inadequate clothing for the weather. ● Unattended physical problems, dental, and/or medical needs. ● Social isolation. ● Loss of social and communication skills. ● Removal of means of communication. ● Displaying inappropriate or excessive self-comforting behaviours.
Financial abuse	● Sudden decrease in bank balances. ● No financial records or incomplete records of payments and purchases. ● Person controlling the finances does not have legal authority. ● Sudden changes in banking practices. ● Sudden changes in wills or other financial documents. ● Unexplained disappearance of money or valuables. ● People does not have enough money to meet their budget. ● Person is denied outings and activities due to lack of funds. ● Borrowing, begging, stealing money or food.

2. Support for the impacted person

- a. Participant and employee health, safety and wellbeing is a matter of priority for P4 Movement, along with the safety of the general public who could be affected by an incident. If an incident causes a life threatening risk to health or safety, the employee working with the Participant should contact 000 immediately.
- b. Where there is no imminent life threatening risk, however the impact or risk of impact is significant, the employee should contact the Service Manager immediately to determine the next course of action. The immediate response plan will consider;
 - a. Is there likely a need for medical assistance for the Participant, employee or a member of the public due to the incident?
 - b. Is there a safety concern that requires police support due to the incident?
 - c. What other imminent risks may affect the health, safety and wellbeing of the Participant and what mitigations are in place in P4 Movement policies and procedures or the Participants care plan?
 - d. What support services or stakeholders can support the impacted Participant or employee to maintain health, safety and wellbeing post the incident?
 - e. Is there alleged or suspected criminal conduct?
 - f. If and when should a guardian, family member or advocate be contacted to support the Participant?

- c. Based on the above, the Service Manager and employee will develop an immediate response plan. This response plan should be flexible and agile enough to adapt to any changing circumstances and be inclusive of the Participants needs, preferences and ability to make their own decisions.

3. Record keeping

- a. P4 Movement keeps records to improve accountability, promote transparent decision-making and ensure best practice.
- b. All records relating to investigations of an allegation against an employee are to be stored in a secure, locked storage facility
- c. P4 Movement acts on all reports including development of risk reduction plans and documenting outcomes achieved
- d. Records will reflect strategies implemented and the efficacy of those strategies
- e. Risk reduction actions plans will be monitored within a risk register
- f. Care is taken when storing and transmitting sensitive data to maintain privacy and confidentiality of all impacted parties including Participants and employees.
- g. Additional information on record keeping can be found in P4 Movement's Privacy Policy and Participant Record Management Policy.
- h. The minimum information P4 Movement collects per incident is outlined below.

Subject	Details
Details of the incident or allegation	• Description of the incident • The impact on, or harm caused to, any person with disability • Note as to whether the incident is reportable, if known • The time, date and place at which the incident occurred or if not known, the time, date and place at which the incident was first identified • The names and contact details of the persons involved in the incident and any witnesses to it • The name and contact details of the person making the record of the incident or alleged incident
Initial response	• The registered NDIS provider's initial response to the person making the allegation, the impacted person and the worker who is the subject of the allegation. This must include actions taken to support or assist persons with disability affected by the incident
Reporting to other bodies	• Note whether the registered NDIS provider considered the need to notify the Police about a suspected criminal offence or a child protection agency if the incident relates to a child or young person, and the outcome of any reports made

Assessment and Investigation	● Details of the assessment undertaken for each incident or allegation in accordance with minimum requirements set out in Table 2 above ● Where and when investigation is undertaken, the details for how the investigation was conducted, as well as the outcomes of the investigation. This could include the following information: ○ Describe a plan detailing how an investigation into the allegation is to be conducted ○ Details of all interviews conducted as part of the investigation, including details of the questions and responses ○ Any decisions made, both during and at the conclusion of the investigation, including their rationale, the position and name of the person making the decision and the date the decision was made
Risk	● The registered NDIS provider's initial risk assessment following identification of the incident or receipt of the allegation, including identified risks, arrangements for managing those risks, and decisions made about the worker and the action taken in relation to the person with disability person with disability or worker (e.g. change in duties, support or counselling)
Consultation	● Any consultations undertaken with the impacted person. This might include the following information: ○ Note the details of the discussions – questions, advice and outcome ○ Note the name of the person making the contact ○ Note the date of the correspondence ● As good practice, the incident management system may also cover other personal contact, discussions or emails with others about the matter, including witnesses and other parties. In these cases, the system should note the details of corresponding individual's position and organisation and where appropriate, the reason for the contact
Statistical and other information	● Provide for the collection of statistical and other information that will allow the registered NDIS provider to review issues raised by occurrence of incidents, identify and address systemic issues, and report information relating to complaints to the Commissioner, if requested to do so
Follow up actions	● Record whether persons with disability affected by the incident have been provided with any reports or findings regarding the incident ● Record changes to services provided ● Establishment or review of policy and/or procedures ● Training of the organisation's personnel

4. Correspondence

- a. Correspondence relating to the assessment, or potential investigation, of an incident is documented and retained. This includes:

- b. For correspondence between P4 Movement and, the Participant or their family:
 - i. All correspondence following any incident is retained
 - ii. Any statements made by the impacted person to deny or correct remarks, statements or claims is recorded
 - iii. All statements are dated, with the dates mailed or delivered to the Participant.
 - iv. If there has been a reply from the Participant or their representative, this is attached to the record and date
 - v. If there is no reply or response from the Participant, this should also be recorded
 - b. For correspondence from the subject of the allegation following the incident:
 - i. All correspondence is retained
 - ii. Any statements made by the subject of the allegation to deny or correct remarks, statements or claims made by the impacted person is recorded
 - iii. All statements are dated
 - c. For records of correspondence between P4 Movement, the Participant or advocates
 - i. Meetings between P4 Movement and the Participant are recorded with the date, items discussed and names of those present
 - ii. Paper and electronic correspondence is dated and copies filed
 - iii. Oral discussion notes, including telephone discussions (date, time, people involved) is dated and filed
5. Reporting Incidents
- a. All reportable incidents, except for the unauthorised use of a restrictive practice, are to be notified to the NDIS Commission within 24 hours of P4 Movement becoming aware of the incident. Any unauthorised use of restrictive practices is to be notified within 5 days.
 - b. P4 Movement is only required to notify the NDIS Commission of reportable incidents that occur in connection with the service P4 Movement provides. If a P4 Movement employee witnesses an incident or conduct, by another registered NDIS provider, that is reportable, this should be raised by that registered NDIS provider as a concern to the NDIS Commission. This should only happen when:
 - i. They witness or become aware of an incident that is not in connection with the services they themselves are providing; and,
 - ii. They believe the registered NDIS provider linked to the incident hasn't notified the NDIS Commission.
 - iii. The employee should discuss the incident with the Service Manager who will work with the employee to raise the concern with the NDIS Commission.
 - iv. Contact the NDIS Commission on 1800 035 544 and ask to speak to the Complaints Team who will follow up with the relevant registered NDIS provider.
6. Investigations
- a. At the conclusion of each incident, it must be determined:
 - i. the cause of the incident,
 - ii. its effect on the person with disability and
 - iii. any operational issues that may have contributed to its occurrence
 - b. Where the above three factors cannot be established, an investigation must be conducted to determine these factors.
 - c. While the Service manager is responsible for determining if the above factors can be determined, they can delegate the collection and documentation of incident details to another member of staff to support in the process.
 - d. The Service Manager will delegate the investigator role to an appropriate member of staff (Unless they have a conflict of interest. Where the Service manager is involved in the incident in any way, the GM shall determine who the investigator will be. The Service manager can not be the investigator, as they are involved in the Incident management process) who;
 - i. is appropriately trained and capable of carrying out the investigation
 - ii. was not involved in the incident and can maintain impartiality
 - e. Either the Service Manager or GM, can request a Board member or external party to carry out the investigation, for example if they believe there is a conflict of interest internally or the investigation would benefit from external technical skills.

7. Learning from Incidents

- a. Learning from each incident should be taken into account to determine how P4 Movement can improve outcomes for the impacted Participant, broader Participant cohort, P4 Movement organisational practices and employee professional development. Organisational insights.
- b. Just as every incident must be assessed at P4 Movement, every incident must also have a debrief. The debrief will depend on the scope and impact of the incident, but could include debrief(s) between;
 - i. the Participant and care worker
 - ii. The Participant, care worker, supervisor and advocate, guardian or family member
 - iii. the support worker and their supervisor
 - iv. the support worker team as part of a team development conversation
 - v. The Service Management team
 - vi. The executive team
 - vii. The Board and Service Manager
- c. As a result of each debrief and assessment of the incident, the following corrective actions may occur;
 - i. Training and education of workers
 - ii. Modification of the environment
 - iii. Development or amendment of a policy or procedure
 - iv. Changes in the way in which support or services are provided
 - v. Changes to, or creation of a new Participant behaviour support plan
 - vi. Other practice improvements
 - vii. Disciplinary action for the worker involved in the incident including ongoing performance reviews, imposing a probationary period, or termination of employment
- d. Alternatively / or in conjunction with one of the following restorative actions
 - i. Providing ongoing support to the person with disability impacted by the incident
 - ii. Giving an apology to the person with disability involved in the incident

References to other P4 Movement policies and external sources

1. CS 1.4 Privacy and Confidentiality
2. CS 1.5 Abuse and Neglect
3. CS 2.1 Person Centred Practices
4. CS 3.1 Participant Care
5. CS 3.5 Participant Record Management
6. CS 5.1 Restrictive Practises and Behaviour Support

Summary of attachments

1. Nil

Version Control

1. 1 April 2026 - New Policy Creation