

CRITICAL INCIDENT MANAGEMENT POLICY

NATIONAL PREMIER DISABILITY
SERVICES

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MANAGING A CRITICAL INCIDENT

POLICY PRINCIPLES

NPDS is committed to effectively managing critical incidents. The service provides, and where necessary, directs the support required managing a critical incident.

The effective management of an incident aims to maximise the wellbeing of all concerned, and to minimise the risks associated with such an incident.

Staffs are provided with training and direction to assist them to work according to best practice principles to manage significant incidents.

The focus of the management of significant critical incidents is to attempt to prevent any unnecessary re-occurrence by utilising each situation as an opportunity to review current service provision policies.

NPDS ensures that staff members' response to a critical incident regarding a client is legal, protects their personal safety, as well as the safety of the client and others within the vicinity.

Staff members will initiate and participate in any post-critical incident support and counseling as required and maintain confidentiality in documenting the critical incident.

The service acknowledges that on occasions, significant/critical incidents will occur where a staff member has little or no opportunity to manage the situation within standard practices.

In these instances, staff will respect the legal and human rights of the other person whilst maintaining professionalism.

Staff members are sanctioned to use the least intrusive, restrictive and justifiable self-defense in a critical incident.

They are also to do their best to protect the personal safety and belongings of other individuals within the environment where the incident is occurring.

NPDS will review all critical incidents to ensure they have not contributed to the incident, and adjusts future practices to prevent re-occurrence of preventable incidents.

NPDS have clear and effective systems for the management of critical incidents.

MANAGING A CRITICAL INCIDENT

Critical incidents involving a client include, but are not limited to the following incidents:

- Deaths.
- Suicides.
- Incidents that unexpectedly involve police, mental health services, hospitalisation, or emergency services for clients or staff.
- Suspicion of/disclosure of alleged sexual or physical abuse/assault.
- Any exposure to blood/body fluids/needle stick injury/ sharps to client or staff.
- Criminal activity or suspected criminal activity.
- Choking e.g. client can't breathe, clutching throat, choking on a piece of food, object.
- Sudden hospitalisation of client.
- Seizures lasting more than 3 minutes or over, if the client is not diagnosed with epilepsy.
- Client missing more than a reasonable period and this is not part of the current client behavior.
- Fire/bomb threat.
- Any other incident likely to cause public concern/media involvement.
- Lost Time Injury (LTI)-Any work related injury, illness or disease, whether compensation is disputed or not, which results in death or the inability to work for at least one full rostered working day; or one full shift any time after the injury, illness or disease.

CRITICAL INCIDENT MANAGEMENT PROCEDURES

The following procedures are based on Incident Notification and Investigation Procedures and have been amended to include critical incidents involving a client.

The National Premier Disability Services Coordinator and the Director must be advised immediately by phone about all critical incidents and the OH & S implications.

The procedures of National Premier Disability Services to manage a critical incident and in particular the associated reporting requirements vary depending on whether the critical incident involves staff only, staff and client(s), or client(s) only (see below).

CRITICAL INCIDENT INVOLVING STAFF ONLY

Any critical incident involving a staff member only must be managed and reported following the Incident Notification and Investigation Procedure.

In general, the critical incident management involves the following actions and reporting requirements.

Immediately following the incident:

- The staff member informs the National Premier Disability Services Coordinator.
- The National Premier Disability Services Coordinator seeks immediate emergency support for staff and environment to stabilise the incident.
- The National Premier Disability Services Coordinator advises the OH&S officer by phone about the critical incident.
- The concerned staff with the assistance of the National Premier Disability Services Coordinator completes the Incident Notification Form.
- The National Premier Disability Services Coordinator completes all relevant OH&S documentation.

WITHIN 12 HOURS:

- The National Premier Disability Services Coordinator organises for staff to cover shifts in the staff members' absence.
- The National Premier Disability Services Coordinator coordinates appropriate claim actions and required medical support.
- The National Premier Disability Services Coordinator notifies all concerned external bodies and advises them of the type of incident and action undertaken (to date):

WITHIN 48 HOURS:

- The National Premier Disability Services Coordinator completes the investigation and then completes the appropriate documentation. This includes detailing corrective actions and status of employee.
- The National Premier Disability Services Coordinator forwards (fax or email) the documentation to the Director.
- Following the receipt of the completed documentation the OH&S Officer will follow the procedures as outlined in Incident Notification and Investigation Procedure including updating the OH&S Incident and Accident Register and list any corrective action identified in the investigation.

NSW STATE AUTHORITY REQUIREMENTS – WITHIN 7 DAYS:

A critical incident whereby the staff member's life is at risk, they are unconscious or are hospitalised and likely to be away from their usual duties for more than 7 days.

Reporting of these incidents must be in accordance with Work Cover guidelines and is the responsibility of the OH&S Officer.

All questions in relation to these reporting requirements should be directed to the OH&S Officer.

CRITICAL INCIDENT INVOLVING CLIENT(S) ONLY

Any critical incident involving a client **only** must be recorded on the NPDS Client Incident Report Form. The NPDS Client Incident Report Form is a legal document. All sections must be completed, and the incident added to the accident /incident register.

The accident/ incident register can be found in the NPDS office. The accident/incident form must be reviewed by the National Premier Disability Services Coordinator. The accident/incident that has been added to the register will be reviewed by the Occupational Health and Safety Officer. Once reviewed recommendations, timeframes and corrective actions for follow up can be advised. All completed forms must remain stored in a lockable filing cabinet.

Generally any critical incident involving a **client only** must be managed and reported according to the following procedures:

IMMEDIATELY FOLLOWING THE INCIDENT:

- The staff member informs the National Premier Disability Services Coordinator.
- The National Premier Disability Services Coordinator seeks immediate emergency support for staff and environment to stabilise the incident.
- The National Premier Disability Services Coordinator notifies the Emergency Contact/Next of Kin regarding the incident.
- The National Premier Disability Services Coordinator advises the OH&S officer about the critical incident.

BY THE END OF THE SHIFT:

- The concerned staff with the assistance of the National Premier Disability Services Coordinator completes the Incident Accident Form.
- The National Premier Disability Services Coordinator completes all other relevant OH&S documentation including adding the incident to the register for follow up by the OH&S officer.
- The National Premier Disability Services Coordinator forwards the Client Incident Report Form to the OH&S officer.
- The National Premier Disability Services Coordinator offers debriefing to any staff members involved, or who are affected by the critical incident.
- The National Premier Disability Services Coordinator speaks directly with the next of kin and offers debriefing and any information available regarding grief counseling.

WITHIN 12 HOURS:

- Coordination of appropriate claim actions, e.g. property insurance claims, and required medical support between National Premier Disability Services Coordinator and the OH&S officer if required.
- The National Premier Disability Services Coordinator notifies the Director of the incident and advises them of the type action undertaken (to date):
- The OH&S Officer reviews all relevant information about the incident and advises the National Premier Disability Services Coordinator about next steps to be taken.

WITHIN 48 HOURS:

- The National Premier Disability Services Coordinator will meet with the OH & S officer to discuss the incident. This includes detailing corrective actions and status of employee.
- The National Premier Disability Services Coordinator forwards the minutes and the outcome of the meeting to the Director.

CRITICAL INCIDENT INVOLVING STAFF AND CLIENT(S)

For critical incidents involving staff and client(s); staffs are to follow the above procedures in conjunction with the procedures and reporting requirements for managing a critical incident.

DEBRIEFING AND TRAUMA SUPPORT FOR STAFF

After any incident has been managed and reported, the National Premier Disability Services Coordinator may identify the need for staff and others involved, to receive debriefing. Similarly, staff involved may request debriefing either by phone or by indicating so on the Critical Incident Form.

Should the incident require trauma support, NPDS First Aid Procedures must be followed and an Accident and Incident Report Form must be completed.

DEBRIEFING AND SUPPORT FOR CLIENTS

After any incident has been managed and reported, the National Premier Disability Services Coordinator may identify the need for the client and others involved to receive debriefing and/or organise appropriate support.

In urgent cases the Director is required to access private services that can be accessed for client support.

APPROPRIATE RESPONSES AND COMMUNICATION WITH A CLIENT DURING A CRITICAL INCIDENT

- Staff members responding to a crisis involving a client should use the least restrictive/minimally
- intrusive option.
- In cases where force or restraints are necessary to prevent harm to a client or other person, it is permissible to use only 'reasonable force' to accomplish this aim.
- Response procedures are to be in accordance with the clients Behavioral Management Plan (if available).
- Responses should be documented and advice sought from the OH&S Officer and/or external specialist staff as to more positive means of intervention.
- If more 'reasonable force' or restraint is used, the staff members' action may be considered unlawful and may not be covered by the defense or self-defense; or necessity section of the policy.
- If the police, ambulance or mental health services become involved with a client at the time of a critical incident, staff members are to:
 - 1) Explain to the client their legal rights and responsibilities as outlined in the client rights and responsibilities policy.
 - 2) Access an independent support person (emergency contact/next of kin) for the client.
 - 3) Assist the police/mental health service where possible.
 - 4) Provide any information as required.
 - 5) Notify their National Premier Disability Services Coordinator.
- As soon as possible following the critical incident, the staff member will meet with the National Premier Disability Services Coordinator to complete any documentation required.
- Crisis management is only to be used to respond to particular incidents. Pro-active planned approaches are to be used to address the long-term issues contributing to challenging behaviour.

- Behavioural Management Plans are to be in place where possible.
- It is the responsibility of the National Premier Disability Services Coordinator to ensure that all staff are adequately trained in dealing with, or responding to, a critical incident and providing behaviour support.

FEEDBACK ON CRITICAL INCIDENT REPORTS

Staff making the incident report receives written feedback from OH&S officer within **two weeks** of the report date. The feedback should:

- Note the receipt of the report.
- Provide acknowledgement or praise for staff action.
- Provide consultation/direction and if required information and advice for staff on the correct action should any future incidents occur.
- Advise that a request for further investigation into the issue has been received from the director (if necessary).

Further, critical Incidents should be discussed at regular Staff Support meetings, feedback regarding the progress on recommended actions can be provided at that time.

The NPDS Client Incident Report Forms require recommended actions to be documented, a report on these actions should be provided to staff concerned.

CRITICAL INCIDENT MANAGEMENT REVIEW

A quarterly report summarizing all critical incidents is forwarded by the OH&S officer to the Director as part of the review process. All OH&S incidents are to be reviewed at the quarterly Staff Meetings as outlined in the Occupational Health and Safety Policy.

FORMS AND TEMPLATES

NPDS Client Accident/ Incident Report Form (Form No.)

NPDS OH&S Staff Incident Report Form (Form No.)

NPDS OH&S Home Environment Checklist

REFERENCES

NSW Department of Family & Community Services, Ageing, Disability and Home Care (ADHC)

ADHC Client Risk Policy and Procedures, March 2008

Occupational Health and Safety Act 2000 and Regulations 2001 (NSW)

NATIONAL PREMIER DISABILITY SERVICES Occupational Health and Safety Manual

National Premier Disability Services

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