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# Incident Reporting Policy

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## 1 Aim

The purpose of this policy is to provide guidance on how to identify, investigate, respond to, manage, and implement corrective/preventive actions to eliminate or minimise any harm caused from incidents and hazards at Ear Science Institute Australia (Ear Science). Further, the policy ensures compliance with the NDIS Safeguards & Quality Commission Incident management Policy.

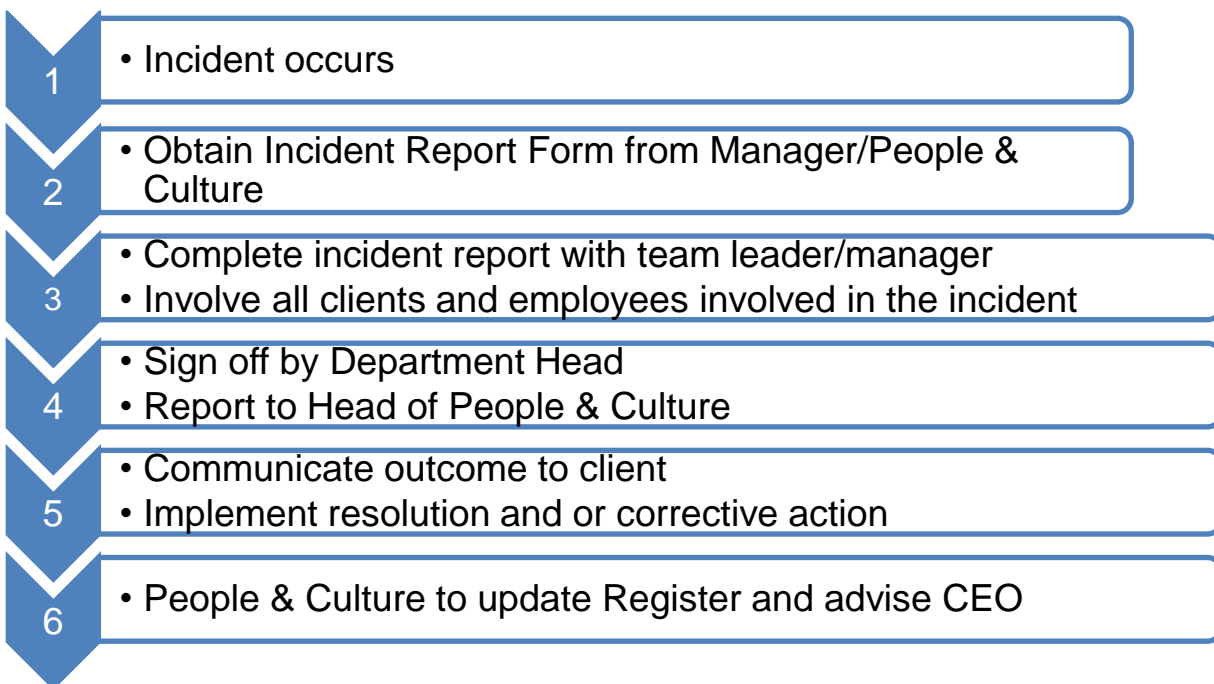
This policy sets out how to record the results of investigations, any changes made to procedures resulting from the preventive or corrective actions taken and the reporting of safety statistics and measurement of safety performance.

## 2 Scope

This policy applies to all incidents which occur at any Ear Science premises or where any activity is being carried out by Ear Science at other locations, including visiting clinics and sites of affiliated companies including suppliers, clients and sponsors.

The policy applies to all Ear Science staff including sub-contractors, consultants, volunteers and students (all referred to as 'Ear Science Personnel') and extends across staff and clients of Lions Hearing Clinics and Ear Science Implant Clinics.

## 3 Internal Procedure



### 3.1 Identifying Incidents

All Ear Science employees are responsible for identifying and reporting incidences.

### 3.2 Mandatory Reporting

Incidents which must be reported are;

1. Incidents which have or could have caused harm to a client or Ear Science Employee (near miss)
2. Acts by a client including clients with a disability which happened in connection with the provision of services and have caused harm or risk of harm to another person
3. NDIS Reportable incidence which are alleged to have occurred in connection with the provision of services. These incidents include:
  - the death of a person with a disability
  - serious injury of a person with a disability
  - abuse or neglect of a person with disability
  - Unlawful sexual or physical contact with or assault of a person with a disability
  - Sexual misconduct committed against or in the presence of a person with a disability, including grooming of the person for sexual activity
  - Use of a restrictive practice in relation to a person with disability, other than where the use is in accordance with an authorisation of a state or territory to a person.
4. Other incidences:
  - Injury or illness sustained at work.
  - Loss of control of a vehicle.
  - Road traffic accident.
  - Equipment damage, including vehicles.
  - Property / building damage.
  - Near miss.
  - Hazard.
  - Environmental damage, i.e. spill.
  - Disruption or interruption of work.
  - Threats of violence, bullying or harassment.
  - Theft or wilful damage.
  - Illegal activity or security breach.
  - Product and/or customer service “Quality” non-conformances.

### 3.3 Significant Incidents

A significant incident is defined as any incident resulting in 1) lost time, 2) damage in excess of \$2,000 or 3) long term environmental damage or rehabilitation. It requires a thorough investigation led by the manager, see below. The Incident Report Form must be distributed, per above, within 24 hours of the incident occurring, whether the investigation has been finalised or not.

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The Ear Science Personnel involved in the incident, and their Manager, must together complete the incident investigation report as a joint effort ensuring the information entered on the form is adequate.

The Manager shall ensure all areas of the form have been completed including signatures and dates. Where practical, relevant attachments such as photographs, sketches, witness statements, etc. should be forwarded with the incident report.

The investigation, which is completed by the immediate Manager, must as a minimum provide the following information:

- A detailed description of the event including the result of injury or damage.
- The causative factors which resulted in the incident (highlighting the system failures).
- The corrective actions, including assigning responsibility for actions, required in order to ensure that a similar incident does not occur.

### 3.4 Reportable incidences

Reportable incidences in line with NDIS Rules 2018 are certain incidents which happen, or are alleged to have happened, in connection with the provision of supports or services by registered NDIS providers. These incidents include the death, serious injury, abuse or neglect of a person with disability and the use of restrictive practices in particular circumstances.

These incidents include:

- the death of a person with a disability
- serious injury of a person with a disability
- abuse or neglect of a person with disability
- Unlawful sexual or physical contact with or assault of a person with a disability
- Sexual misconduct committed against or in the presence of a person with a disability, including grooming of the person for sexual activity
- Use of a restrictive practice in relation to a person with disability, other than where the use is in accordance with an authorisation of a state or territory to a person.

See appendix A for reporting requirements including time frames. Reportable incidences must be reported in line with the provided timeframes.

### 3.5 Near Misses

A near miss is an unplanned event which did not result in injury, illness, or damage but had the potential to do so. To avoid future occurrences of a near miss actually resulting in injury, illness or damage it is important near misses are reported (using the Incident Report Form) and for corrective actions to be identified.

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### 3.6 Hazards

A hazard is anything in the workplace which has the potential to result in injury, illness, or damage, for example a trip hazard.

On identifying a hazard, staff must act as quickly as possible to eliminate the hazard. This may mean a simple alteration, substitution or removal of the hazard or other appropriate action.

### 3.7 Incident Report Form

An Ear Science Incident Report [Form](#) available on Sharepoint or from People and Culture(P&C), shall be completed by the Ear Science Personnel involved in the incident and given to their supervisor by the end of the working day on which the incident occurred. The supervisor is responsible for ensuring the entire incident report form has been completed by the Ear Science Personnel and signed off by themselves and the relevant Head of Department. Once signed off, a copy of the report is to be provided to the Head of Department and the original to the P&C department for processing.

The incident report ensures all elements of the incident is investigated, employees and clients are involved in the process and corrective action is put in place.

### 3.8 Involving Clients in the Process

All Ear Science employees and clients including NDIS participants with disabilities must be consulted as part of identifying and rectifying an incident. The process ensures a voice for all including procedural fairness.

Communication with clients must take into consideration clients communication mode, abilities and the level of involvement they choose to have.

### 3.9 Notification

Where formal notification of incidents to a government agency and/or external agency (such as NDIS Safeguards & Quality Commission), following a serious incident i.e. Reportable incident, is required under state or federal legislation, the Head of People & Culture or appointed representative shall report the required injuries and occurrences to the relevant statutory authority as soon as possible after the occurrence.

Ear Science has an obligation to report any serious incidents affecting people with disabilities to the Disability Services Commission. This reporting obligation is further set out in NDIS (Incident Management and Reportable Incidents) Rules 2018.

### 3.10 Resolution/Corrective Action

All incidences are recorded on the incident form and the form guides all involved to collect the required information and ensure a resolution or corrective action is put in place to reduce the risk of future incidences.

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All incidents are to be approached with the aim to resolve or put in place corrective action which meets the needs of clients and Ear Science employees.

The form identifies if the incident;

- Could have been prevented
- How well the incident was handled
- What remedial action needs to be taken to prevent similar incident occurring again or to minimise the impact
- Whether others need to be notified of the incident.

#### 4 Incident Register

The Head of People & Culture (HPC) shall maintain an Incident Register containing the following information:

- Maintain a schedule of incidents summarising the key details from the Incident Forms and including the status of the incident and action items.
- Maintain statistics on incidents by type and using hours worked prepare monthly and year to date reports on safety metrics, targets and performance.
- Follow up on outstanding corrective actions and close the incident when the investigation is finalised and all actions are complete.

#### 5 Other relevant ear science policies

All Ear Science staff including sub-contractors, consultants, volunteers and students (all referred to as 'Ear Science Personnel') and extends across staff and clients of Lions Hearing Clinic and Ear Science Implant Clinic are required to read this policy in conjunction with other relevant Ear Science policies including:

- Workplace Health and Safety Policy
- Ear Science Security, Fire and First Aid Policy
- Ear Science Injury Management Policy
- Workplace Health and Safety Inspection Policy

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## 6 Appendix A

### Reporting Reportable incidences - 24 hours and 5 days

#### 6.1 Certain reportable incidents must be notified to the Commissioner within 24 hours

(1) This section applies if:

(a) a registered NDIS provider becomes aware that a reportable incident has occurred in connection with the provision of supports or services by the provider; and

(b) the reportable incident is:

- (i) the death of a person with disability; or
- (ii) the serious injury of a person with disability; or
- (iii) the abuse or neglect of a person with disability; or
- (iv) the 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.

Note: For the purposes of subparagraph (b)(iv), certain physical contact is not a reportable incident and so is not covered by the requirements of this section (see subsection 16(2)).

(2) Subject to subsection (3), the registered NDIS provider must notify the Commissioner of the following information within 24 hours:

- (a) the name and contact details of the registered NDIS provider;
- (b) a description of the reportable incident;
- (c) except for a reportable incident of a kind covered by subparagraph (1)(b)(i)—a description of the impact on, or harm caused to, the person with disability;
- (d) the immediate actions taken in response to the reportable incident, including actions taken to ensure the health, safety and wellbeing of persons with disability affected by the incident and whether the incident has been reported to police or any other body;
- (e) the name and contact details of the person making the notification;

- (f) if known—the time, date and place at which the reportable incident occurred;
- (g) the names and contact details of the persons involved in the reportable incident;
- (h) any other information required by the Commissioner.

Note: The information required by paragraphs (b), (c), (f) and (g) may not need to be given in certain circumstances (see section 22).

- (3) If, within 24 hours after the provider became aware that the incident occurred, insufficient information is available to comply with subsection (2), the provider must:
  - (a) provide the information mentioned in paragraphs (2)(a) to (e) within the 24 hour period; and
  - (b) provide the remaining information required by that subsection within 5 business days after the provider became aware that the incident occurred.
- (4) The registered NDIS provider must notify the Commissioner of the following information within 5 business days after the provider became aware that the incident occurred:
  - (a) the names and contact details of any witnesses to the reportable incident;
  - (b) any further actions proposed to be taken in response to the reportable incident.
- (5) A notification in accordance with subsection (2) may be given by telephone or in writing.
- (6) A notification given in accordance with paragraph (3)(a) or (b) or subsection (4) must be given in writing.
- (7) If a notification is given in writing, the Commissioner must acknowledge its receipt within 24 hours.
- (8) The Commissioner must approve a form for the purposes of giving notifications in writing under this section.

## 6.2 Other reportable incidents must be notified to the Commissioner within 5 business days

- (1) A registered NDIS provider must notify the Commissioner in accordance with this section if:

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- (a) the registered NDIS provider becomes aware that a reportable incident has occurred in connection with the provision of supports or services by the provider; and
  - (b) the reportable incident is not of a kind covered by paragraph 20(1)(b).

(2) The notification must:

- (a) be given in writing; and
- (b) be given within 5 business days after the provider became aware that the reportable incident occurred; and
- (c) include all of the information required by subsection (3).

(3) The information required is as follows:

- (a) the name and contact details of the registered NDIS provider;
- (b) a description of the reportable incident, including the impact on, or harm caused to, the person with disability;
- (c) if known—the time, date and place at which the reportable incident occurred;
- (d) the names and contact details of the persons involved in the reportable incident;
- (e) the names and contact details of any witnesses to the reportable incident;
- (f) the immediate actions taken in response to the reportable incident, including actions taken to ensure the health, safety and wellbeing of persons with disability affected by the incident and whether the incident has been reported to police or any other body;
- (g) any further actions proposed to be taken in response to the reportable incident;
- (h) the name and contact details of the person making the notification;
- (i) any other information required by the Commissioner.

Note: The information required by paragraphs (b) to (e) may not need to be given in certain circumstances (see section 22).

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- (4) The Commissioner must acknowledge receipt of the notification within 24 hours after receiving it.
  - (5) The Commissioner must approve a form for the purposes of giving notifications under this section.