



Residential Care: Incident management Procedure

1. Purpose

This procedure supports the Department for child protection (DCP) residential care staff to:

- **identify** an incident that has impacted the safety or wellbeing of a child or young person
- **respond** to the incident to ensure the immediate safety of the child or young person
- **report** the incident to ensure efficient and effective response and management.

2. Scope

This procedure applies to all DCP residential care staff, including agency staff who work in DCP residential care houses.

This procedure does not replace other mandatory requirements including:

- reporting a suspicion that a child or young person may be at risk (section 31 of the *Children and Young People (Safety) Act 2017* (CYPs)). Refer to the [Reporting a suspicion a child or young person is at risk procedure](#)
- reporting to SAPOL in relation to allegations of sexual harm against a child or young person perpetrated by a member of DCP staff (section 64A *Criminal Consolidation Act 1935*). Refer to the [Reporting a suspicion a child or young person is at risk procedure](#)
- removing or reducing a substantial risk of sexual harm of the child or young person allegedly perpetrated by a current DCP employee (section 65 of the *Criminal Law Consolidation Act 1935*). Refer to the [Reporting a suspicion a child or young person is at risk procedure](#)
- reporting a significant incident to the Significant Incident Reporting Unit (SIRU). For further information regarding what determines a significant incident and how to report, refer to the [Significant incident reporting Procedure](#)
- reporting to the NDIS Quality and Safeguarding Commission where there are concerns with the quality of NDIS services provided for a child or young person through their NDIS funded plan, for example mentors, therapists (such as occupational or speech therapist), behaviour practitioner or support coordinator. For further information about reportable incidents under the *National Disability Insurance Scheme Act 2013*, refer to [NDIS Reportable incidents](#).

Incidents relating to the following are out of scope and are covered in alternative procedures (as stated):

- staff work, health and safety incidents - [WHSIM Workplace Hazard and Risk Management Procedure](#)
- staff performance and conduct - [Employee conduct](#)
- cultural safety incidents – [Cultural Safety Procedure](#).

This procedure does not apply to incidents involving the safety and wellbeing of staff where a child or young person under the custody or guardianship of the Chief Executive is not involved.



3. Authority

3.1 Legislative context

DCP has responsibilities and functions under a range of legislation when responding to incidents relating to children and young people. Key legislative responsibilities include:

- [Children and Young People \(Safety\) Act 2017](#)
- [Criminal Law Consolidation Act 1935](#)
- [Family and Community Services Act 1972](#)
- [Family and Community Services Regulations 2024](#)
- [Work Health and Safety Act 2012](#)
- [Work Health and Safety Regulations 2012](#)
- [Independent Commission Against Corruption Act 2012](#)
- [Ombudsman Act 1972](#)
- [Public Service Act 2009.](#)

3.2 Whole of government requirements

Not applicable

3.3 DCP requirements

- [Incident Management Framework](#)
- [Significant incident reporting Procedure](#)
- [Reporting a suspicion, a child or young person is at risk procedure](#)
- [Residential Care: E-Log Procedure](#)

3.4 Principles

The safety of children and young people is the paramount consideration.

This procedure aligns with best practice incident management principles; this includes:

Child and young person centred	The management of incidents is responsive to the individual child or young person's needs while supporting their safety and wellbeing. Children and young people (and their representatives) are engaged in the resolution of incidents and their voices are heard.
Timely	Incidents are accurately reported and resolved in a timely manner and regular updates are provided.
Accountable, open and transparent	The workforce, management and executive know and understand their roles, responsibilities and expectations for the reporting and management of incidents.
Continuous improvement	The incident management process moves beyond compliance and supports continuous improvement across the organisation.
Proportionate	Responses and actions to manage incidents are proportionate to the harm or impact to the child or young person.



4. Procedure requirements

DCP Staff can access residential care incident report training (staff module or supervisor module) by logging into [Pledge](#) (DCP's learning and development portal). These modules support staff to understand the importance of completing incident reports accurately.

Residential care staff should familiarise themselves with the 'Manage and respond to incidents' section within the [Support children and young people in residential care](#) key step in the DCP Residential Care chapter of the Manual of Practice, which provides best practice guidance when supporting children and young people involved in an incident.

4.1 Identify an incident

An incident is any harm or impact on the health, safety or wellbeing of a child or young person under custody or guardianship of the Chief Executive.

Incidents may be isolated or may occur multiple times with varying characteristics and degrees of severity. An incident may occur because of an event or action (accidental and non-accidental).

4.2 Respond to an incident

The priority is to ensure the immediate safety of the child or young person, self and others. If at any time a staff member is unsure of how to respond to an incident or needs guidance to complete an incident report, they should seek support from another staff member at the house, the DCP senior child and youth worker (senior child and youth worker) on shift or the senior night officer.

If it is safe to do so, and as appropriate, consider what actions need to be undertaken, including the following:

- assess the situation for danger or risks to safety
- remove children and young people from any source of danger
- administer first aid and/or seek medical attention
- if necessary, contact emergency services on 000
- if a staff member or another child or young person is accused or suspected of harming a child or young person, separate them from immediate contact with the alleged victim
- provide support to any witnesses
- for incidents where staff are affected, refer to [Work Health Safety](#).

4.3 Significant incidents

Some incidents require closer scrutiny and oversight. These are categorised as significant incidents and require additional reporting. All DCP staff are required to notify the Significant Incident Reporting Unit (SIRU) of significant incidents immediately, or as soon as practicable given the circumstances. Refer to the [Significant incident reporting Procedure](#) for requirements in relation to significant incidents reportable to the SIRU. Significant incidents will require both a completed incident report (refer to section 4.4 in this procedure) and a notification to SIRU.

4.4 Report the incident

Once the immediate safety of the child or young person, self and others has been established and as soon as practicable, a staff member who was involved in or who witnessed the incident should verbally notify the senior child and youth worker on shift or the senior night officer of the incident, and must report the



incident (it is strongly recommended before the end of shift or within 24 hours of the incident occurring) as follows.

4.4.1 Record the incident in the E-log

Record the incident details in the residential care e-log, refer to the [Residential Care E-log Procedure](#) for further guidance.

4.4.2 Record the incident on Connected Client and Case Management System (C3MS)

Record the incident details in C3MS, refer to [Recording Incidents in C3MS – instructional video](#) for further guidance on how to record incidents in C3MS.

All incident reports should be an accurate and thorough account of the incident that sets out:

- when (date and time) did the incident occur
- type of incident
- who was involved
- where did the incident happen
- what happened (including what led up to the incident)
- how the incident was managed
- what follow up actions were taken
- any additional information to provide further understanding or context
- how the child or young person was impacted by the incident and what has been done to support them.

Once the incident report has been completed it should be work flowed via C3MS to the residential care senior child and youth worker for review and endorsement.

The senior child and youth worker should review the incident report and provide feedback, including any follow up required relating to the incident and/or report. For example; were strategies from the Wellbeing plan or safety intervention training applied, what supports the senior youth worker provided to the staff or children during or after the incident. Once completed the senior child and youth worker should workflow the report to the DCP residential care area supervisor (supervisor).

The supervisor should review the incident report and provide feedback, including any follow up required relating to the incident and/or report. Once completed the supervisor should workflow the report to the DCP residential care area manager (manager) for final approval and closure.

Hard copies of incident reports are required to be placed in the relevant 93 file in accordance with State Records requirements.

Incident reports should be written concisely and accurately. Reports may be reviewed by internal and/or external stakeholders as required.

Failure to workflow incident reports through to senior staff members within the time frames referenced within this procedure can result in a breach of reporting requirements.

The supervisor may approve an extension up to two days for the incident report to be recorded in C3MS where exceptional circumstances exist only. A rationale for the extension must be noted by the approving



supervisor in the incident report. Any further extension must be approved by the manager and the reason documented in the incident report.

Reporting process for Agency staff

Agency staff should seek support from another staff member at the house, the senior child and youth worker on shift, or the senior night officer if they are unsure how to respond to an incident or require guidance on completing an incident report.

Agency staff that do not have access to C3MS must complete the [Agency staff incident report form](#) prior to the end of their shift (within 24 hours). Once completed agency staff will need to provide the report to the senior child and youth worker (either electronically or hard copy picked up at the next house visit). Agency staff should contact the senior child and youth worker or senior night officer on shift as soon as practicable following any event requiring an incident report.

The senior child and youth worker is responsible for uploading the completed Agency staff incident report form(s) as an attachment to a C3MS incident report (via the incident reporting tab). Once uploaded the senior child and youth worker should review the report and provide feedback, including any follow up required relating to the incident and/or report and then workflow to the DCP residential care supervisor.

4.4.3 Reporting requirements where physical intervention (use of force) occurs

Incidents involving physical intervention (use of force) by staff must also clearly detail:

- the name of the child or young person subject to the physical intervention (use of force)
- the name of each staff member involved in, or who witnessed, the physical intervention (use of force)
- the nature of the physical intervention used and the purpose for which, or the circumstances in which, it was used, by whom, the specific risk behaviour and a description of any other non-physical interventions that may have been used
- a clear description of the restrictive intervention (CPI Safety Intervention) used. For example, low level, medium level, high level and the position(s) in which the child or young person was held
- the length of time the child or young person was held
- any injuries that arose from the incident with a specific indication as to any injuries that occurred because of the physical intervention (use of force)
- any follow up actions because of the physical intervention (use of force).

Under sub-regulation 6 (3)(4) of the [Family and Community Services Regulations 2024](#) (“the FACS Regulations”), if the incident involved physical intervention (use of force), any staff members involved in, or who witnessed the incident, must verify the accuracy of the incident report.

In cases where more than one staff member has been involved in or witness to an incident, one staff member (author) should be allocated to complete the incident report. Once the author has completed the incident report, they must provide a hard copy to all staff members who were involved in or who witnessed the incident to enable them to sign their verification. The author should then upload the hard copy (along with any other incident reports that may have been completed by staff members) as an attachment to the original incident report in C3MS and then work flow the report to the senior child and youth worker or supervisor.

If a staff member who was involved in or who witnessed the incident does not agree with the written report provided by the original author, or would prefer to write their own account of the incident instead of verifying the original report, the staff member must complete their own incident report (paper copy) and provide it to the author of the original incident report to upload to C3MS or alternatively email their version



directly to the supervisor (or manager). The supervisor (or manager) should then upload the separate report as an attachment to the original incident report in C3MS and follow up accordingly.

4.4.4 Recording the child or young person's account of the incident (reflection form)

Pursuant to [FACS Regulation 6\(5\)\(6\)\(7\)](#), where an incident occurs involving physical intervention (use of force) by a residential care staff member against a child or young person, the child or young person must be offered reasonable opportunity (by a staff member who was not present during the incident) to record their account of the incident either by using the [reflection form](#) or another means of their choice.

If the child or young person accepts the offer to provide their account, residential care staff should refer to the 'Manage and respond to incidents' section within the [Support children and young people in residential care](#) key step in the DCP Residential Care chapter of the DCP Manual of Practice to ensure the correct process for completing reflection forms are followed, including:

- supporting and encouraging a child or young person to complete a reflection form
- ensuring cultural responsiveness when supporting an Aboriginal or Torres Strait Islander child or young person to complete a reflection form
- legislative compliance.

4.4.5 Report to the DCP case worker

Report the incident to the child or young person's DCP case worker to determine if any further action is required to support the child or young person.

4.4.6 Approve and close incident

Incident reports must be endorsed by the senior child and youth worker who will then workflow to the supervisor for further review and endorsement. The supervisor will then work flow the incident report to the area manager.

Within 10 working days, the area manager should review the incident report and provide feedback where required. When the area manager is satisfied that the incident has undergone appropriate review the incident report should be approved and closed.

5. Compliance monitoring and evaluation

The Out of Home Care Operational Support unit will review the procedure in alignment with the DCP policy review cycle.

6. Related documents

Related documents, forms and templates
Support children and young people in residential care key step in the DCP Residential Care chapter of the Manual of Practice <ul style="list-style-type: none"> • Support children and young people with high risk and complex behaviours • Manage and respond to incidents
Recording Incidents in C3MS



Residential Care: E-Log procedure
Significant incident reporting Procedure
Agency staff incident report form
Reporting a suspicion a child or young person is at risk Procedure
Incident Management Framework

Document control

Reference No./ File No.			
Document Owner	Lead Writer (position)		
Directorate/Unit: Out of Home Care	Senior Project Officer, OoHC Operational Support		
Accountable Director: Director, Residential Care			
Commencement date	12 July 2024	Review date	5 April 2025
Risk rating Risk Assessment Matrix	Consequence Rating	Likelihood	Risk Rating
	Major	Likely	High
REVISION RECORD			
Approval Date	Version	Revision description	
14 October 2021	1.0	This procedure replaces the Incident Management Procedure which has been revised to align with the new Significant Incident Reporting Procedure.	
3 November 2022	1.1	Minor amendment to reflect new requirements under the <i>Criminal Law Consolidation Act 1935</i>	
25 January 2023	1.2	Minor amendments to incident reporting process and to reflect current language	
28 April 2023	1.3	4.3.1 to reflect requirements under section 14 of the Families and Communities Services (FACS) Regulations 2009	
5 April 2024	2.0	Procedure reviewed in accordance with the DCP policy review cycle	
11 July 2024	2.1	Minor amendments to update Practice Paper to align with the Family and Community Services Regulations 2024 .	