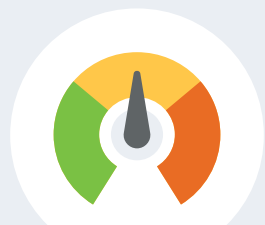


Risk Incidents and Complaints Management Resource Guide



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Resource Page

Purpose of this guide

The purpose of this guide is to provide easy access to new tools and resources developed for NDIS providers to support them to effectively manage and respond to risks, incidents and complaints. These tools and resources will assist providers to implement good systems and processes and will help them meet the NDIS Commission requirements.

Note: These resources are designed to guide and support, they will require customisation and should not be relied upon in and of themselves to meet your audit and quality obligations.

Acknowledgments: This resource was created by National Disability Services supported through grant funding from the Australian Government. Information included in this resource has been built with publically available information from the NDIS Quality and Safeguards Commission website.

Who is this guide for?

This guide is most suited to sole traders, small and medium sized organisations, however large organisations may find the guide and associated resources useful when scaled appropriately and proportionality applied.

Using this interactive document

The icons on this landing page and the buttons at the bottom of each page, act as navigation menu. Clicking on these will take you to the relevant chapter. Words highlighted in green underline are hyperlinks and will take you to the relevant document, resource or tool on the internet.

Disclaimer: National Disability Services Limited (NDS) believes that the information contained in this publication is correct at the time of publishing (June 2021). However, NDS reserves the right to vary any of this publication without further notice. The information provided in this publication should not be relied on instead of other legal, medical, financial or professional advice.

HELLO

Introduction

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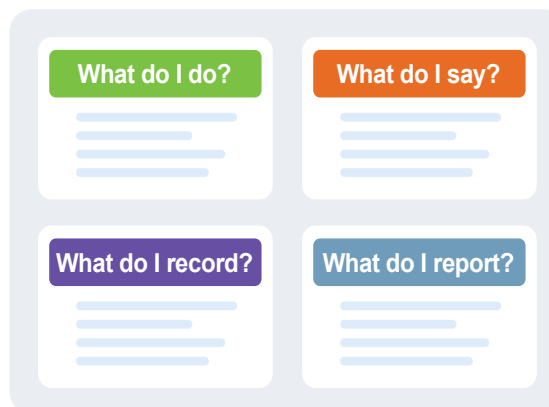
Good Risk, Incidents and Complaints management gives your organisation a way to prevent issues that might impact on your organisation and how to respond in a planned way to minimize or eliminate their reoccurrence.

A well-managed risk, incidents and complaints system will help drive safe and quality outcomes for people with disability and meet the regulatory requirements of the NDIS (National Disability Insurance Scheme) Commission and:

- Ensures participants receive a quality and safe service
- Shows participants you take their needs/concerns seriously
- Saves staff and management time and reduced cost by preventing escalation of issues
- Enhances a good reputation of your service
- Provides you with feedback on what needs to change/improve that you were unaware of
- Enables you to see the cause of problems
- Provides staff with a responsive and supporting environment to work

Using this Guide:

This resource guide contains links to all the resources including introduction film, animations, Excel registers, additional resources and helpful explanations. Follow the 4 steps under each heading.



When using the resources, it is important to remember to adapt and edit adding any additional information and requirements according to your organisations needs and the services you provide.



Watch this film for an introduction to Risk Incidents and Complaints Management



Risk Management

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Risk management is about how your service is aware of the events that could potentially affect its operations and ways to prevent the risks from occurring or minimise the likelihood or impact of them in your service.

The NDIS Commission expects every service provider to have a system in place for identifying, monitoring, and minimising such risks, as well as reporting or referring them when necessary. Such systems will vary according to the size and complexity of the supports you deliver, but all must be fair, consistent, transparent, and safe. It should be simple, manageable and suit your needs.



Sole trader



Organisation

Applying a proportionate response

The NDIS Commission use the concept of proportionality when assessing a provider's systems and processes. Proportionality does not mean that a provider's system can include some but not all the requirements listed in the rules or the practice standards, but it is about the complexity of systems and processes. A sole trader may have a simple system like a basic Excel spreadsheet as compared with a larger organisation which will be required to have a more sophisticated ICT system.

Registered Providers

A provider must be registered when delivering: Plan management, Specialist disability accommodation (SDA), Supports or services during which there is or is likely to be a need to use a regulated restrictive practice, Specialist behaviour supports that involve undertaking behaviour support assessment of the participant or developing a behaviour support plan for the participant.

Registration can provide some assurance to NDIS participants that their provider meets the level of quality required by the NDIS Commission in the rules and NDIS Practice Standards.

Unregistered Providers

Although unregistered providers are not required to demonstrate that they have an incident or risk management system in place, it is the responsibility of all NDIS providers to deliver safe and quality supports and services. They should operate a well management risk plan, an effective complaints and resolution, incident management, investigation and disciplinary processes and uphold the [NDIS Code of Conduct](#).

NDIS Commission documents:

- [NDIS Provider application to register process guide](#)
- [Registration Requirements by Supports and Services](#)
- [Understanding providers' obligations](#)
- [Unregistered provider requirement](#)

What do I do?

It is important to minimize and monitor any risk associated with participants, your business and anyone working for you. The scale, complexity and risk basis of every service is different, and so there is no 'one size fits all' answer to what to include in your approach to managing risk, however there are three common elements that apply across most service.

- You have a way to regularly identify risks
- You have a documented system that manages risk
- Your staff understand their roles

NDS (National Disability Services) has designed the following resources to help you meet NDIS requirements when it comes to managing incidents.

[What good risk management looks like](#) checklist covers the three common elements to assist you to identify what needs improvement in the way you manage risk. It can also be displayed as a prompt and reminder to staff and encourage good practice.

TIP: A risk management plan need not be complex but should be carefully prepared and specific to each organisation and its own risks.

[Risk Management Plan](#) is helpful to think about and guide your approach to ways to eliminate or manage risks and shows what has been identified by the NDIS Commission as required for both certified and verified providers.

FAQ

Is a policy different to a procedure? Yes. Although your policy and procedure will sometimes be in the same document, a policy is different to a procedure.

Policy: A policy is a statement of instruction aligned to your organisation's mission, vision and values and will detail the key principles and commitments on a particular matter. The policy will reference applicable NDIS Commission, NDIA (National Disability Insurance Agency), WorkSafe and other applicable legislation, rules, and policies.

Procedure: A statement of instruction which sets out how the policy will be implemented and by whom. It will have a step-by-step instruction on how a matter should be responded to.

Why are policies and procedures important? Policies and procedures support an all of organisation's approach to a particular matter and will support staff to deliver service and respond to matters consistently.

Should all staff understand policies and procedures? Yes. A policy and procedure are only as good as how well it is implemented.



Risk Management

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What do I say?

It is important to tell participants how you are focused on preventing incidents and keeping them safe. This shows you are serious about letting participants know you are committed to providing support in a safe manner.

[How we deliver safe services](#) infographic should be included in welcome and information packs with time allocated to discuss what it means for participants.

It is important to explain how you identify and manage any risk associated with participants, staff and your service. Below is a sample policy for verification and certification.

Verification

[Risk Management Policy Checklist](#) is designed for services to understand the required elements of a good policy and check against what you may already have. Ensure you customise the policy to suit your circumstances.

Certification

[Risk Management Policy Checklist](#) is designed for services to understand the required elements of a good policy and check against what you may already have. Ensure you customise the policy to suit your circumstances.

Work Health and Safety

A good WH&S Management policy details the steps you take to minimize and deal with actual and potential risks in relation to providing a safe environment

for participants, visitors, and staff. This is also a legal responsibility. The scale and complexity of every service is different, and so there is no “one size fits all” answer to what to include in a WHS Management policy but there are common elements that apply across most services.

[Worker Health and Safety Policy and Procedure](#) template provides a model for you to customise for your needs or check against what you might already have in place to ensure critical elements are reflected. Ensure you customise the document to suit your circumstances.

Insurance

Insurance is important because it transfers risk to a third party and of course, that transfer is only effective whilst we do everything possible to ensure the insured event does not occur. The scale and complexity of every service is different, and so there is no “one size fits all” answer to what to include in an insurance policy but there are common elements that apply across most services.

[Insurance Management Policy](#) template can be customised for your needs or check against what you might already have in place to ensure critical elements are reflected. Ensure you customise the policy to suit your circumstances.

What do I say? (continued)

Verification and Certification: All registered providers are required to undertake the verification audit. Providers delivering complex supports also undertake the additional certification requirement.

Verification: Commonly known as a desktop audit, undertaken when delivering lower risk and lower complexity supports and the verification module of the NDIS Practice Standards is applicable

Certification: Includes the verification desktop audit as well as onsite visits and interviews with workers and participants, is undertaken when delivering higher risk and complex supports and the core module of the NDIS Practice Standards will be applicable, as well as any other applicable supplementary modules.

NDIS Commission documents:

- [NDIS Practice Standards: Verification Module - Required Documentation](#)
- [NDIS Practice Standards and quality indicators](#)
- [NDIS Provider application to register process guide](#)
- [Registration renewal process guide](#)
- [Suitability assessment process guide](#)
- [Registration Requirements by Supports and Services, Understanding providers' obligations](#)

FAQ

I am a sole trader, does this mean I undertake the verification audit?

The applicable registration and audit process is determined by the complexity of supports being delivered. A sole trader may be required to undertake the certification audit when delivering complex supports and the assessment would be proportionate. Likewise, a medium sized provider may undertake the verification audit when delivering low risk supports, like Assistive Technology.

Which audit type and modules apply to my registration group?

Compare the NDIS registration group description found in the [NDIS Price Guide](#) with the NDIS Commission's [Registration Requirements by Supports and Services](#) table.



Risk Management

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What do I record?

A risk register shows what risks you are currently managing that need to be monitored and it provides a record of the output of the risk management process. There are many different types of risk register, and it is important yours is meaningful for your needs and activities.

[Risk Register](#) shows the fundamental information your organisation should be recording and monitoring for your risks action needs to be taken to address the identified risk. It contains multiple worksheets including:

- [Risk Register Manual](#)
- Risk Register - where details are kept of risks
- Example Worksheet - provides examples of potential risks, for reference to how the register works
- Risk Analysis Worksheet - provides a matrix to assist in prioritising risks
- Report - summary of all identified risks in Pivot Table format (that can be changed to suit your requirements)
- Dropdown Lists - contains lists that standardise dropdown menus in the register

TIP: Read the Risk Register manual before entering any data!

When using this register, it is important to adapt and edit with additional information and requirements according to your organisation's needs and the services you provide.

[Compliance register](#) is a prompt to ensure you comply with your legal and contractual obligations and contains common organisational requirements that can be transferred to an annual plan to help you keep track relevant compliance requirements.

When using this compliance register, it is important to edit with any additional information and requirements according to your organisations needs and the services you provide.



Risk Management

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What do I report?

We all know that [risk registers](#) are used to gather information about identified hazards and risks, their nature and level of impact on your organisation and people you are supporting and documents immediate corrective actions.

What is often overlooked is the fact that a risk register can create reports from the captured data to enable a systematic approach to risk management to enable you to address and manages potential and actual risks for your organisation, people and supports you provide.

The **Risk Analysis Matrix** worksheet provides you with a tool to assist you to identify your Risk Priorities - see [Risk Register manual](#).

Likelihood		Insignificant	Minor	Moderate	Major	Catastrophic
		Very small impact/effect rectified by normal processes	Easily remedied, with some effort the objectives can be achieved	Some objectives affected, noticeable damage, considerable effort to rectify	Most objectives threatened or one severely threatened	Most objectives may not be achieved, or several severely affected. Large losses and effect
Almost Certain	The event is expected to occur in all circumstances. At least once per week.	Low	Medium	High	Extreme	Extreme
Likely	The event will occur in most circumstances. At least once per month.	Low	Medium	High	Extreme	Extreme
Possible	The event will probably occur at some time. At least once per year.	Low	Low	Medium	High	Extreme
Unlikely	The event could occur at some time. At least once in two years.	Low	Low	Medium	High	High
Rare	The event may occur in exceptional circumstances, or never / Less than once in 100 years.	Low	Low	Low	Medium	High



Incident Management

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It is every service provider's responsibility to ensure the safety and wellbeing of participants. Part of this involves responding proactively when concerning incidents occur, even if they have not resulted in a specific complaint. Such incidents might include acts by a participant that happen in connection with providing supports that cause serious harm, or the risk of serious harm, to another person or their property.

Very small services don't need complex incident management systems but all should have basic procedures in place to safeguard participants, identify systemic issues and drive improvements in service quality.

[National Disability Insurance Scheme \(Incident Management and Reportable Incidents\) Rules 2018](#)

What do the Rules cover?

- The minimum requirements for incident management systems and processes, including staff training requirements
- What a provider is obligated to do and what a provider is obligated to document when an incident occurs and when a reportable incident occurs

NDS has designed the following resources to help you meet NDIS requirements when it comes to managing incidents.

FAQ

How will the NDIS Commission know if a provider is meeting the Rules?

This will be assessed during the audit process and may request information at any time.

FAQ

What's procedural fairness?

The key principles of procedural fairness include:

- All people involved in the incident will be informed about what has happened or alleged to have happened
- They will have the opportunity to explain their view of the incident
- Corrective action will be based on relevant facts and circumstances
- The investigator and decision-maker will be impartial and even-handed

Refer to the [National Disability Insurance Scheme \(Procedural Fairness\) Guidelines 2018](#)

Although these Guidelines relate to Complaints Management, the basic concepts and principles of procedural fairness apply



Incident Management

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What do I do?

Good incident management involves:

- taking all reasonable steps to prevent all forms of harm
- training staff in how to identify risks and follow your incident management procedures
- keeping a record of such incidents
- involving participants in the investigation of incidents
- knowing when incidents must be reported and to where, including the NDIS Commission
- learn from incidents and make changes to systems for improvement.

[What good incident management looks like](#) infographic can assist you to identify what needs improvement in the way you manage incidents and can be displayed as a prompt and reminder to staff and encourage good practice.

The NDIS Commission expects every registered service provider to have ways to recognise and respond when an incident occurs, report it if and when required, and take steps to prevent it occurring again. It is important to have an outline of your system that shows how you acknowledge, respond to, record, and manage any incidents that shows staff there is a consistent approach to incident management.

[Incident Management Policy and Procedures](#) checklist contains recommended elements of an effective policy that meets NDIS Commission requirements. Use it to identify where your policy/procedure could be improved or as a guide to the development of a policy/procedure that suits the size of your service and the types of supports it provides.

[Whistle Blower Protection Policy](#) template provides an example of a whistleblower protection policy that can assist your organisation identify wrongdoing that may not be uncovered unless there is a safe and secure means of disclosing wrongdoing. This policy template in general in nature and is provided as a guide only. It can be modified to suit your circumstances and needs.



Incident Management

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What do I say?

To participants

It is important to keep participants informed about your incident management practices. This shows you are serious about letting participants know you are committed to providing support in a safe manner with care and skill.

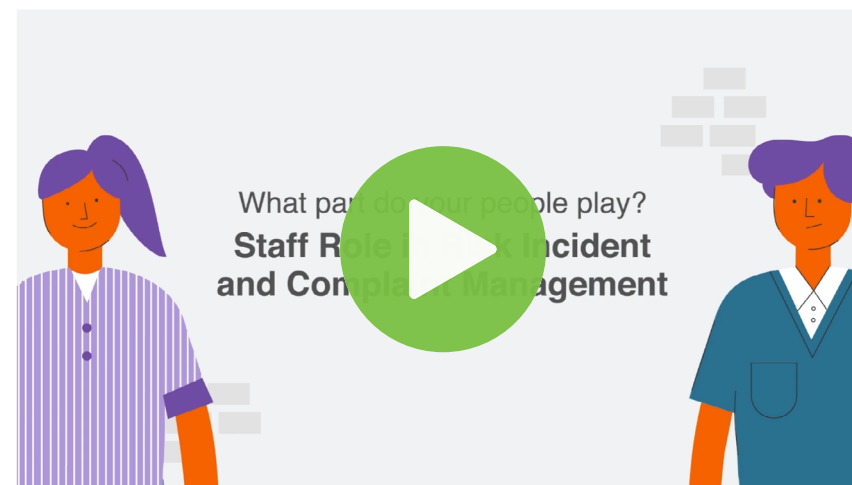
[How we respond to incidents](#) infographic can be shared with participants and should be included in welcome and information packs with time allocated to discuss what it means for the participant. It can assist you to identify what needs improvement in the way you respond to incidents and can be displayed as a prompt and reminder to staff and encourage good practice.

To staff

Skilled staff can help identify risks, prevent incidents, and manage complaints in a supportive and inclusive way - providing a quality service that prioritises the safety of the people you support. Make sure staff have regular, ongoing risk, incidents, and complaints training to build their understanding of the significant role they play.

[Incident Management Resources for Staff](#) can help train staff to appreciate and implement their responsibilities in identifying, reporting, managing, and resolving incidents and in preventing them from occurring.

[Staff Role in Risk Incidents and Complaints Management](#) animation looks at the important role staff play in how your organisation manages risk, incidents, and complaints. It can be used for training for staff and for service providers to increase organisational understanding and awareness.





Incident Management

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What do I record?

A commitment to keeping incident records shows accountability and transparency for decisions you make. This process includes providing information to participants about how incidents that involved them have been managed. It also provides you with a way to demonstrate that you are following the NDIS Commission [National Disability Insurance Scheme \(Incident Management and Reportable Incidents\) Rules 2018](#);

[Incident, Complaint and Feedback and CQI record](#) form can help staff to take a record of all the details of a complaint, incident, feedback, and improvement suggestion to assist with the management and response. It provides a thorough record of the complaint handling process, outcome and participant involvement.

Every time an incident is reported, it should be recorded. An incident register captures information about the incident and help identify trends or patterns that may reflect gaps or training requirements. It also assists you to demonstrate you are following the [National Disability Insurance Scheme \(Incident Management and Reportable Incidents\) Rules 2018](#).

[Incident Register](#) is a working document and contains multiple worksheets to assist you manage your incidents and any actions. It shows what incidents you have managed, are currently managing and it provides a record of the outcomes and what action needs to be taken to address the identified incident. The register has dropdown menus to make the process faster and easier to use and support a consistent approach by staff. It also includes space to link to documents that might relate to the incident and can be used where document permission restrict access to authorised persons only to protect the privacy of anyone involved in the incident.

TIP: Read the [Incidents Register manual](#) before entering any data!



Incident Management

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What do I report?

Reportable Incidents

All registered providers have obligations in relation to reportable incidents which have occurred or are alleged to have occurred in connection with the delivery of supports and services. [National Disability Insurance Scheme \(Incident Management and Reportable Incidents\) Rules 2018](#); [NDIS Commission: Reportable Incidents Guidance](#).

[NDIS Commission Reportable Incident](#) infographic has more information, videos, and factsheets regarding your Reportable Incidents requirements.

Fact Sheet: [When to notify the NDIS Commission about a reportable incident](#)

Timeframe to report	Reportable incident
Within 24 hours of the incident occurring, or of being notified of the incident occurring	<ul style="list-style-type: none"> • The death of a participant • Serious injury • Abuse and neglect • Unlawful sexual or physical contact or assault of a person with disability • Sexual misconduct
Within 5 business days Where you routinely use chemical or environmental unauthorised restrictive practices the Commission will contact your organisation and provide information on weekly reporting	<ul style="list-style-type: none"> • Unauthorised use of restrictive practice

FAQ

How do I notify the Commission of a reportable incident?

Submit an immediate notification online form through the 'My Reportable Incident' page using the [NDIS Commission Provider Portal Form](#) found on the NDIS Commission website.

FAQ

What's the timeframe for the NDIS Commission to acknowledge the report?

When notification is given in writing, the NDIS Commission must provide acknowledgement within 24 hours.



Complaint Management

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All registered NDIS providers are required to have an effective system for management and resolution of complaints about the supports or services they provide and maintain appropriate records of all complaints received. It is necessary for NDIS providers to keep accurate records to enable them to identify any systemic issues and to be able to provide those records to the Commissioner or quality auditor when required.

Such systems will vary according to the size and complexity of your service, but they must always be fair, consistent, transparent, and safe. [The National Disability Insurance Scheme \(Complaints Management and Resolution\) Rules 2018](#), [Effective Complaint Handling Guidelines for NDIS Providers](#)

What do the Rules cover?

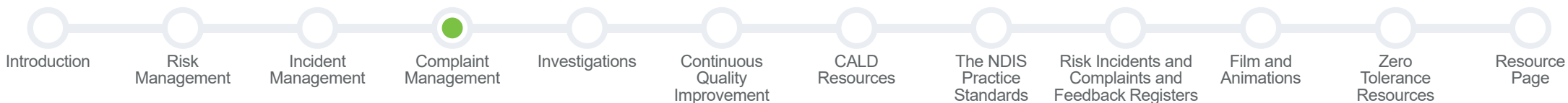
- Expected complaints culture
- The minimum requirements for complaints management systems and processes, including staff training requirements
- What a provider must do and what must be documented when a complaint is made

[Unregistered providers](#) must also be able to effectively manage complaints and all NDIS providers and workers are bound by the [NDIS Code of Conduct](#).

NDS has designed the following resources to help you meet NDIS requirements when it comes to complaints management.

Reflection: One of the surest signs of a bad or declining relationship with a customer is the absence of complaints - Ted Levitt, Harvard Business Review, 1991

TIP: The resolution of complaints needs to be consistent with a rights-based principle that has been presented by the disability rights movement – ‘nothing about us, without us’ – which is also fundamental to the [United Nations Convention on the Rights of Persons with Disabilities](#).





Complaint Management

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What do I do?

Registered NDIS providers are required to have complaints management arrangements in place and support people with disability to understand how to make a complaint to the provider and to the NDIS Commissioner. It is important to have an outline of your system that shows how you acknowledge, respond to, record, and manage any complaints.

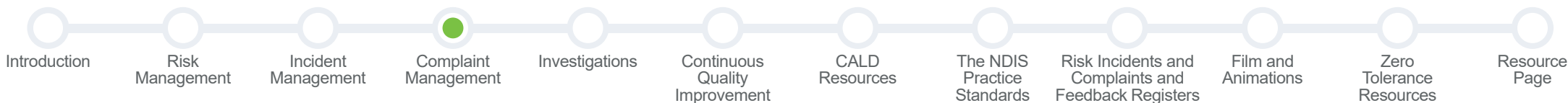
The system should provide clarity to staff on how to respond to complaints, as well as informing the people using your services of the organisation's commitment to use complaints to continually improve the service. Complaint management is important for any sized service not only to safeguard participants and provide an effective means of dealing with complaints, but they also provide an opportunity for your organisation to find out where problems may be occurring and where changes need to be made.

[What good complaint management looks like](#) infographic contains recommended elements that meets the NDIS Commission requirements and will help identify what needs improvement in the way you manage complaints. Display as a prompt and reminder to staff and encourage good practice.

[Complaints and Feedback Management Policy and Procedure Checklist](#) is about how you manage complaints. The checklist contains recommended elements of an effective complaint and feedback policy and procedure that meets the NDIS Commission requirements.

Use the checklist to identify where your policy and procedure could be improved or as a guide to the development of a policy and procedure document. Remember to use it in a way that suits the size of your service and the supports it provides.

TIP: Small services do not need complex systems to achieve good complaint management.





Complaint Management

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What do I do?

Complaints training for Staff

Why is this important? A registered NDIS provider must ensure that the roles and responsibilities of all their workers are set out in its complaints management and resolution system. This system must also ensure that workers understand and comply with the system, and are trained in how to receive, manage, and resolve complaints.

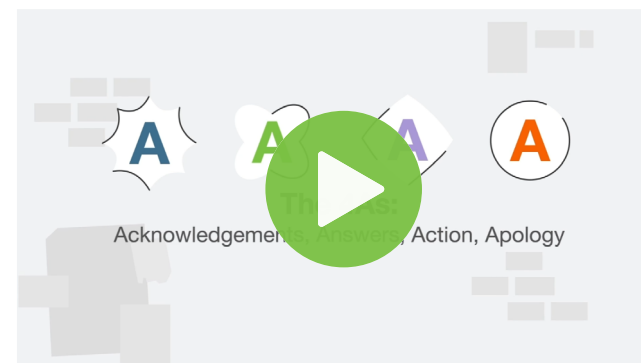
Complaint handling training for staff can boost their commitment to and confidence in the complaints system while at the same time demonstrating that management take the system seriously. Everyone in the organisation needs to look at complaints as a positive opportunity to review processes, develop staff and for your business to continue to improve.

The following two resources have been adapted from the [Disability Services Commission Victoria Complaints resources](#).

[Complaints Handling for Staff Tips](#) infographic can be used for induction of staff, staff training and can be displayed as a reminder to staff and encourage best practice.

Reflection: Does your organization recognise complaint handling as an integral part of the staff role and workload and not an extra?

[4A's of Complaint Management](#) animation can be used for induction of staff and staff training. It covers the 4A's approach to complaints and talks about the importance of an organisational culture that values and learns from complaints.



Reflection: Are the people using your service, and their families and carers, provided with information about how to make a complaint?

Here is a great resource that can help:
[DSC Complaints Systems and Practice Self Audit Tool](#)



Complaint Management

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What do I say?

How you respond to a complaint can just as important as whether the complaint is resolved. There is no definitive way to do this, but the complainants need to know that you take feedback seriously and you are prepared to acknowledge mistakes when they do happen. Staff are to be encouraged to make suggestions and identify problems even if a complaint is not made. It is important that you have a clear and easy to use process for staff and people who use your supports to report concerns and offer feedback.

Information for Participants

Why this is important? It shows you are serious about letting participants know you are committed to providing support in a safe manner with care and skill and they feel they have been listened to; that their opinion was valued and that you did everything you could to address their concerns.

[It is Ok to Complain](#) infographic shows good messages to give participants about your approach to complaints and should be included in welcome and information packs with time allocated to discuss the information and what it means for the participant.

TIP: What do people who use your service think about your complaints system? How do you know? [DSC Complaints Culture Survey](#)

What do I record?

Every time a complaint is received, it should be recorded. This allows you to manage and monitor progress with its resolution, identify patterns and trends to improve service and ensure participant safety and satisfaction is maintained. Complaints that must be recorded include those that seek a resolution/action, and anonymous complaints that allege concerns for participant safety and/or satisfaction.

[Incident, Complaint, Feedback and CQI Form](#) helps staff to record all the details of a complaint, incident, feedback, and improvement suggestion to assist with the complaint handling process, investigation, outcomes, and participant involvement.

FAQ

Does the requirement of an anonymous complaints option apply to sole traders?

Yes. The [Rules](#) apply to all registered providers regardless of size. An anonymous complaints form, suggestion box or online option would be sufficient.



Complaint Management

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What do I record?

[Complaint and Feedback Register](#) is a working document that shows what complaints you have managed and are currently managing, and it provides a record of the process followed and outcomes. It provides a central record that captures information about a complaint or feedback and helps identify trends or patterns that may reflect gaps or training requirements.

The register contains multiple worksheets and has dropdown menus to make the process faster and easier to use and support a consistent approach by staff. It also includes space to link to documents that might relate to the complaint and can be used where document permission restrict access to authorised persons to protect the privacy of anyone involved in the complaint.

The register does not ask you to record why something happened as this is usually a matter for a review or investigation, and care must be taken not to breach that process.

TIP: Read the [Complaints and Feedback Register manual](#) before entering any data!

What do I report?

The complaints management and resolution system must ensure that complaints are referred or notified to any other bodies if required by law. You must provide clear instructions for staff when a complaint (e.g. criminal allegations, assault, serious misconduct, fraud, corrupt behaviour, breach of the [Code of Conduct](#)) must be directed to the police, the NDIS Commission or any other required body such as in relation to mandatory reporting or other legal obligations such as Worker Health and Safety.

It is the responsibility of each NDIS provider to understand and comply with any relevant mandatory reporting or other obligation it has under the Australian law.



Investigations

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Investigations play a key role in providing safer and better-quality services by helping providers learn from mistakes and prevent future incidents.

The process can also help with rebuilding trust and relationships when something has gone wrong. Whether allegations are substantiated or not, an investigation provides opportunities for continuous quality improvement to protect the wellbeing and safety of people with disability and minimise the possibility of future incidents.

These resources have been developed to support disability services to undertake investigations and are intended for use by staff who have the responsibility for conducting investigations as part of their role. The resources are general in nature and are to be used as guide depending on the size of service and the supports it provides.

Accessible versions of these resources are available on the [NDS website under the Quality and Safeguards Hub](#).

Investigations Animation:

This short animation takes you through the principles of a good Investigation to protect the wellbeing and safety of people with disability and provide opportunities for continuous quality improvement.











What do I do?

The NDIS Commission requires you to have a way to conduct an investigation into an incident to identify what caused it and how to prevent it from happening again.

A provider has an obligation to investigate when there has been an allegation, observation or report of abuse or neglect. Other times, a provider might need to have better understanding of what has caused an incident; or they might decide to investigate to help resolve a complaint. Whatever type of investigation is being conducted, there are a few basic principles that should be followed:

-  **Person Centred:** An investigation should be person centred and support the full and safe inclusion of people with disability. Communication needs and preferences should always be clarified and respected.
-  **Confidential:** Confidentiality and privacy of all people is essential.
-  **Procedurally fair:** This means that the investigation should follow the key principles of procedural fairness.
-  **Timely:** Investigations should be thorough and careful, but they must also be done in a reasonable time frame.
-  **Communication:** All communication regarding investigations must be clear, and linked to a commitment to human rights, and a zero-tolerance approach to abuse, neglect, and violence toward people with disability.
-  **Documented outcomes:** An investigation should have a report with clear outcomes, findings or recommendations with reasons that are based on the evidence that has been collected.

Best Practice

The investigator and decision maker should not be someone who has a stake or view in the outcome as this can be seen as a conflict of interest and a provider should engage an external party.

[Conducting Investigations Policy Checklist](#) contains recommended elements of a policy to guide the conduct of investigations and is intended for senior staff with formal responsibility for conducting investigations as part of their role on behalf of their service.

[Investigation Procedure Checklist](#) contains recommended elements to guide the conduct of investigations and is intended for senior staff with formal responsibility for conducting investigations as part of their role on behalf of their service.



Investigations

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What do I say?

Investigations help providers to share information, give explanations and apologies to staff and people they support, where needed. All communication regarding investigations must be clear, and linked to a commitment to human rights, and a zero-tolerance approach to abuse, neglect, and violence toward people with disability.

[For participants - How we investigate incidents](#) infographic shows messages to give participants about your approach to investigations. It can be used as a conversation guide with participants involved in an incident or complaint requiring investigation and can be included in your welcome pack.

[Investigation Interview Tips](#) is intended for senior staff with formal responsibility for conducting investigations as part of their role on behalf of their service. All relevant people to the investigation (parties) should be interviewed.

What do I record?

When you are planning your investigation, it is important to identify who will need to be kept regularly up to date about the status of the investigation, and to record their communication needs and preferences. This will assist in ensuring that stakeholders are well informed about the progress which will result in a smoother process. It also means that if someone else has to pick up the investigator role, they know exactly who they need to communicate with, what information to provide, and how that stakeholder likes or needs to receive information. This will help prevent complaints and issues about the investigation process and assist the responsible individual to manage the heightened emotions that can arise around investigations.

It is critical to identify what evidence may be important to the investigation early on in the process. This could include work rosters, progress/case notes, medical records, photographs etc. Ensure that all relevant logs, records, and other evidence are collected and stored securely.

[Identification and analysis of Evidence](#) contains instructions and a worked example to help create an Evaluation Matrix Analysis tool.

[Investigation Action Plan template](#) contains recommended elements of an Investigation Plan to guide investigations.

[Communication Plan Handout](#) is a living document and additional people may need to be included as the investigation progresses



Investigations

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What do I report?

An investigation should have a report with clear outcomes, findings or recommendations with reasons that are based on the evidence that has been collected. When conducting an investigation, it is important that providers rely on evidence, not feelings or hunches, because investigation findings can have significant repercussions for all parties involved.

Providers need to inform relevant participants, families, guardians, and witnesses that the investigation has concluded, what the outcome was, and what decisions and what actions will be taken.

Providers must seek feedback from the participants involved in the investigation asking if they are satisfied with the process and outcome and if not, support that person to contact the NDIS Commission.

Providers must also notify their board of management of the investigation findings, recommendations, and actions to be undertaken.

Embracing the investigation process and following the best practice principles will go a long way towards better outcomes for disability providers and the people they support.



Continuous Quality Improvement

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What is Continuous Quality Improvement (CQI)?

CQI is systematic and ongoing identification and implementation of improvements. It is a process that helps identify what actions a service provider may need to take to make sure it always provides the best possible service for the people it supports.

- listening to people who receive services and valuing their feedback
- understanding what it is doing well
- identifying where improvements are needed
- acting to best meet the needs of participants.
- has policies and procedures, including risk management, complaint handling and incident management
- A paper based or electronic tool which meets the requirements of the NDIS Commission rules and allows for data entry and analysis and includes staff training requirements.

How does the NDIS Commission view CQI?

The principles of quality management and CQI underpin the Commission’s approach to regulation and audit. It is applicable to all registered providers, the rules relating to incidents and complaints include the requirement of periodic review of systems and require that systems capture statistical information to review and respond to issues.

This [Continuous Quality Improvement](#) animation looks at how your risk management with your insights and lessons learnt from incidents and complaints plays a big part in your organisation’s continuous quality improvement.



Audit rating and CQI

The [NDIS \(Approved Quality Auditors Scheme\) Guidelines 2018](#) provides the framework for auditing registered NDIS service providers. The Commission requires a documented system which is reviewed in accordance with the rules, this applies to both verification and certification.

FAQ

Which audit type and modules apply to my registration group?

Compare the NDIS registration group description found in the the [NDIS Price Guide](#) with the Commission’s Registration [Requirements by Supports and Services](#) table.



Resources for Providers supporting people from culturally and linguistically diverse communities

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When providing support to someone from a CALD background consider:

- differences in expectations about family involvement in decision making
- any impact of gender from their cultural perspective
- potential fear of people perceived to be in authority
- the significant impact that stigma, discrimination and trauma may have on their life
- being patient when communicating and asking when unsure about something
- asking questions in a way that the person understands, which may mean asking questions in a different way until you find the way that is best
- some people will prefer a worker who speaks their language and understands their culture, while others will prefer someone from outside their community
- using a professional interpreter (NB: Participants from CALD backgrounds can access free interpreter services when using the services of NDIS registered providers)

Complaints and Feedback

Seeking feedback from participants and families is an important part of providing a quality service. Feedback gives service providers an indication of how services are being received and if there are areas that can be improved. A major barrier to CALD Australians interacting with feedback and complaints systems is lack of trust and fear of negative repercussions.

To be confident to give feedback or make a complaint, a person must know that they can complain and be aware of the available complaints processes.

In a [Federation of Ethnic Communities' Councils of Australia \(FECCA\) survey](#), around half of the respondents said they had considered whether there would be negative consequences before making a complaint. Over one third said that this fear had stopped them from acting.

- are unaware of their right to complain about services they are receiving
- unaware how to make a complaint
- do not have access to information (in English or LOTE) on complaints forms and systems
- may come from a country which may not have a system whereby the private citizen was empowered to complain
- believe that there may be negative consequences as a result of making a complaint
- are unaware of the protections available to complainants when making a complaint
- are unaware of their rights to redress in complaints processes

"Immigrants are scared to complain because they worry about causing trouble. They think if I cause trouble for the government maybe they will send me home."



Resources for Providers supporting people from culturally and linguistically diverse communities

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Ways to encourage feedback

This excellent resource from the Migrant Information Centre (MIC) is a [Guide for Service Providers Working with Culturally and Linguistically Diverse Home and Community Care](#) provides a number of different ways organisations can use to gain feedback from people and families.

Good practice: [Australian Human Rights Commission \(AHRC\)](#) publishes a booklet entitled [‘It’s Your Right’](#) which guides CALD Australians through different scenarios which might give rise to a complaint, and how to make the complaint.

This resource is an excellent way of instructing individuals and communities on their rights and protections as part of the process of making complaints. As part of an inclusive feedback and complaints mechanism it may be useful for organisations to produce similar documents to support and guide CALD Australians on their rights regarding feedback and complaints.

Cultural Competence

Cultural competence is the ability to understand, communicate and effectively interact across cultures. It is commonly defined as: ‘...a set of congruent behaviours, attitudes and policies that come together in a system, agency or among professionals and enable that system, agency or those professionals to work effectively in cross-cultural situations’.

There is an organisational and an individual aspect to cultural competence.

At the individual level, developing cultural competence requires acknowledgment of one’s own cultural assumptions, values and beliefs. It involves understanding that culture shapes worldview, and that individuals view the world differently based on their cultural background and related experiences.

Cultural competence at the organisational level involves developing systems, policies and processes that ensure cultural diversity and difference are considered in all aspects of an organisation’s work.

Source: [Federation of Ethnic Communities’ Councils of Australia \(FECCA\): Guide to Cultural Competence](#)

Good Practice:

Efforts should be made to hire bicultural and bilingual staff to increase an organization’s ability to create trust between families and professionals. However, researchers note that what is even more essential is to hire staff who embrace diversity as an asset and demonstrate a willingness to learn about the experiences and traditions of individuals whose backgrounds are different from their own.



Resources for Providers supporting people from culturally and linguistically diverse communities

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Translated Resources

The following Complaints resources and 4 A's of Complaints animation have been translated into seventeen different languages including Assyrian, Turkish, Spanish, Dari, Khmer, Korean, Traditional Chinese, Arabic, Chinese, Filipino, French, Greek, Hindi, Italian, Macedonian, Samoan, and Vietnamese.

Complaints Tips for Staff Training infographic

[Translations](#)

It's Ok to Complain infographic for participants

[Translations](#)

How we deliver safer services infographic for participants

[Translations](#)

4A's to Complaints Animation

[Translations](#)

Staff Training: [The way we use language](#)

Language people use plays an important role in creating the right organisational for people to feel respected and safe to speak up. This film is part of the Positive Cultures series of the Zero Tolerance resources and can be used for staff training and looks at the way we use language in disability services and the impact of words on the people we are supporting.

For more training resources go to [Zero Tolerance Resources](#).



The NDIS Practice Standards

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Overview

The [NDIS Practice Standards](#) guide the minimum evidence requirements for provider registration and audit.

There is a standard relevant to each risks, incidents and complaints for both the certification and verification registration and audit process.

The [Approved Quality Auditor](#) will refer to the NDIS Practice Standards when conducting your audit to guide the assessment of evidence.

Providers undertaking certification are required to evidence the quality management module, this is not required for verification.

However, evidence of an effective quality system through the way in which your organization approaches risks, incidents and complaints will be required.

FAQ

If the Incident Management Rules and the Complaints Handling Rules apply in full to all registered providers regardless of audit type, why are the Practice Standards different?

The same rules apply to all registered providers. The Practice Standards are in relation to the audit and the evidence you will be expected to produce.

For providers undertaking the certification audit, both the Incident Management and Complaints Management modules of the standards include an indicator asking for evidence of staff training, this doesn't appear in the verification module, does that mean we don't need to train staff?

Both certification and verification providers are expected to train staff and contractors or other people engaged in understanding their systems and processes. Certification providers will be required to show how they do this during audit.

There are things included in the rules that are not listed in the Practice Standards, does that mean we don't need to have them in place?

No. The first indicator of both the Incident Management module and the Complaints Handling module of the Standards notes that the system must comply with the relevant rule. This is applicable to both verification and certification.

There isn't a rule legislated by the NDIS Commission about risk management?

Unlike incident management and complaints handling, there is not a rule. The NDIS Practice Standard will guide your risk management requirements.

I'm a sole trader, do I need to comply with the Rules?

Yes. The rules apply to all registered providers regardless of audit type or size of your organization. Proportionality will be applied when undertaking audit.



Risk Incidents and Complaints and Feedback Registers



Film and Animations

The Excel Registers are working documents and contain multiple worksheets to assist you in managing Risk Incidents and Complaints, Compliance and CQI. Your register may require additional columns detailing things like review dates, risk trends and other comments. The registers show the fundamental information your organisation should be recording and monitoring for your risk, incidents and complaints.

Before using the registers, take some time to read the manuals and work with the examples in the different worksheets.



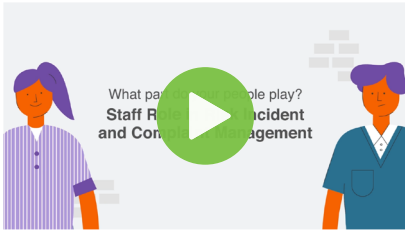
- [Risk Register](#)
- [Incidents Register](#)
- [Complaints and Feedback Register](#)
- [Compliance Register](#)
- [How-to series of short videos](#)



Introduction Film:
Why is risk, incidents, and complaints management important



Animation:
The 4 A's of Complaints



Animation:
What role does your staff play in risk incidents and complaints management



Animation:
How to make your service better - CQI



Animation:
The principles of a good Investigation



Zero Tolerance Resources

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Zero Tolerance is an initiative led by NDS in partnership with the disability sector. It assists disability service providers to understand, implement and improve practices which safeguard the rights of people they support. Built around a national evidence-based framework, Zero Tolerance is a collection of resources to educate and train staff at all levels to understand their responsibilities in preventing and responding to abuse.

Listed here are the most popular resources that you might find useful when talking to staff about risk, incidents and complaints.



The Positive Cultures Films and Guide

[The way we use language](#) - Sometimes the language used in disability services can hurt people and change the way others see them. We need to think about the words we use.

[Power and Control](#) - Some people have more power than others, and this is true in every part of our lives. We need to think about what we can do so that every person can use their own personal power.

[Structured Opportunities](#) - Structured opportunities include things like meetings, feedback forms and complaints processes. There are lots of ways to make these opportunities more positive and inclusive for everyone.

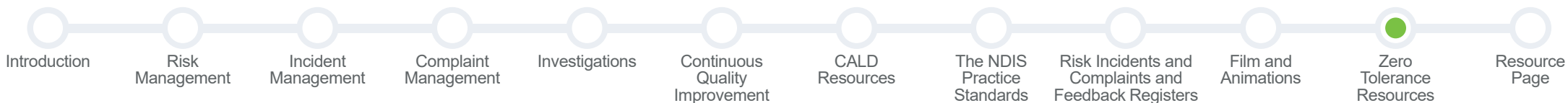
[Everyday Opportunities](#) - Part of creating a respectful and safe culture where people know they will be listened to and supported is recognising and creating opportunities to do this every day.

 [Link to Films](#)
 [Link to Guide](#)

Trauma Informed Support Films

These 5 films have been developed to assist support workers, providers, people with disability and their families to understand what trauma is, the impact it can have, and ways in which everyone in an organisation can provide trauma-informed support.

 [Link to Films](#)






Zero Tolerance Resources

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Responding to Abuse Films and Guide

[Being a Bystander](#)

A bystander is someone who sees or hears something wrong happening, but doesn't do anything about it or get involved. This film explores reasons why people don't get involved in situations and ways to do things better.

 [Link to Films](#)
 [Link to Guide](#)

[The Role of Supervisors](#)

Sometimes people report abuse, but nothing happens. In some cases, this is because managers and supervisors do not act or follow up on information. Supervisors play a critical role in setting expectations so people know they can speak up and that something will happen if they do.

[Early Warning Signs](#)

People communicate in different ways such as facial expressions, moods and actions. Sometimes these things can be hard to spot. Get to know the people you support and how they communicate and create opportunities for people to tell you if something's wrong.

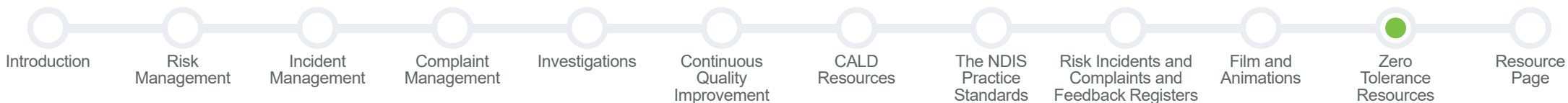
Resources for Staff Discussions

[The Empowerment Circle](#)

The Empowerment Circle can be used to work with a person to identify things to do to support them to be more empowered, to understand what we mean when we talk about abuse, neglect and violence in the context of a person's whole life, to reflect on your own life, in team meetings and training, in reflective practice, to reduce the use of restrictive practices, one slice at a time.

['Understanding Abuse' Learning Bites](#)

The 'Understanding Abuse' Learning Bites are 3-5 minute videos addressing eight life areas. They can be used to promote discussion and personal reflection by support workers. Each Learning Bite has a printable worksheet to be completed and discussion and can be signed off by a supervisor.



List of Resources

Risk Management Resources

- [What good risk management looks like infographic](#)
- [Risk Management Policy checklist - Verification](#)
- [Risk Management Policy checklist - Certification](#)
- [Risk Management Plan checklist](#)
- [Worker Health and Safety Management policy and procedure](#)
- [Insurance Management Policy](#)
- [How we deliver safer services infographic](#)

Incident Management Resources

- [What good incident management looks like infographic](#)
- [Incident Management Policy and Procedure Checklist](#)
- [Incident Management resources for staff training](#)
- [Incident Complaint feedback and CQI Record form](#)
- [Whistle Blower Protection policy](#)
- [NDIS Commission reportable incidents resources](#)

Complaint Management Resources

- [What good complaints management look like infographic](#)
- [Complaint Feedback Policy and Procedure Checklist](#)
- [It is OK to complain infographic](#)
- [Incident Complaint feedback and CQI Record form](#)
- [Complaint Handling for Staff Training](#)

Other useful resources:

- [Flow chart: Registered providers: NDIS Worker Screening Check](#)
- [Flow chart: Unregistered providers: NDIS Worker Screening Check](#)
- This [Quality Management Guide](#) is for organisations new to quality management, the guide provides a starting point and a step by step guide, while experienced providers may find it useful for checking their existing system.
- [Zero Tolerance](#) is an initiative led by NDS in partnership with the disability sector. It assists disability service providers to understand, implement and improve practices which safeguard the rights of people they support with a suite of resources to educate and train staff at all levels to understand their responsibilities in preventing and responding to abuse.

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Other useful resources (continued):

- The [Safer Services Toolkit](#) can help organisations to build their internal capabilities and ensure all stakeholders including people with disability, families, staff and managers are part of this process in line with the domains of the NDIS Quality and Safeguarding Framework:
- [Office of Disability Services Commission Victoria Support for Service Providers/Complaints resources](#) These complaints resources are excellent for service providers and contains a number of templates, guides, self-audit tools and information booklets.
- [Code of Conduct Films and Guide](#) is a useful resource for staff training.
- NDS audit resources: [Quality and Safeguards in the NDIS Provider Guide](#).