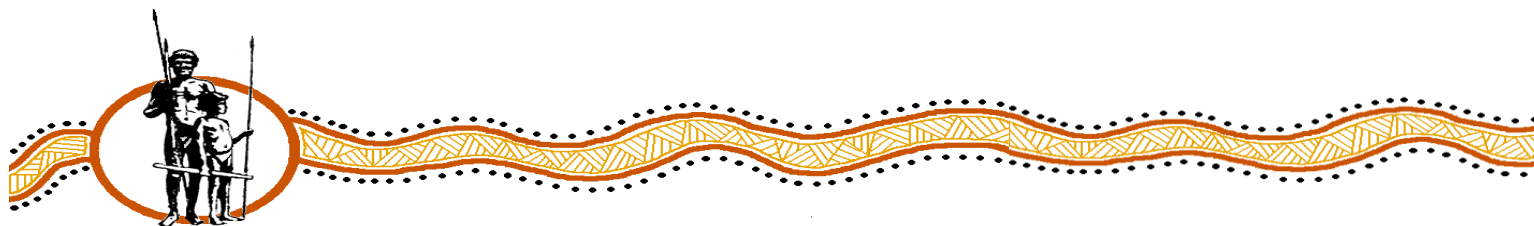


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Objective: Children and young people receive appropriate care relevant to their circumstances, in a safe environment.



Title: Incident Management Policy and Procedures (PSP specific)		
Policy Areas: Governance – Workplace Health and Safety and Out of Home Care – Permanency Support Program		
Policy Number:	Version: 5	Page 1 of 13 (with Annexures)
Final Author: Colleen Murray		
Approved by: Management Committee		
Date: March 2021	For Review: March 2024	

Introduction

Woomera Aboriginal Corporation (WAC) is committed to providing a safe work and care environment and promoting a culture of continuous improvement.

Incidents that occur in the workplace or service environment and involve or impact on a service user, a staff member, or any other person, will be handled in a timely, sensitive and transparent way in compliance with legislative and policy obligations. Safety will be the focus at all times when responding to incidents. WAC will be responsive to immediate circumstances but will strive to learn from incidents to improve its systems and practices to minimise the risk of reoccurrence.

Purpose

This policy and the related procedures describe WAC's responsibilities for managing incidents that occur in the workplace or service environment, including critical events in Out of Home Care (OOHC) and the processes that staff and carers should follow to meet these responsibilities.

Scope

This policy and procedures apply to the management of incidents that occur in the WAC workplace and service environment (including critical events in OOHC). Incidents may involve and/or impact on service users (including children and young people), authorised carers, staff members, contractors or visitors to WAC premises, or any other person involved when a service, or care, is being provided by WAC.

When responding to incidents that may involve Risk of Significant Harm and/or Reportable Conduct, staff must comply with the Child Protection and Child Safety Policy and the Reportable Conduct Procedures. Therefore, this policy and procedures should be read together with these documents and the additional documents listed in section 10.

Definitions

Incidents include, but are not limited to:

- Fire, gas or water leak
- Vehicle or other accidents
- Hazardous materials – chemical or biological spill
- Natural disaster – storm, earthquake, flood, hailstorm, bush fire
- Evacuation for any reason
- Power outage
- Hostage situation
- Medical emergency – serious injury, illness or death of a service user, Foster/Family/Kinship

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carer, staff member

- Personal threat to service user, WAC authorised carer or staff member
- A serious or life-threatening condition for a service user resulting from abuse or neglect, non-accidental injury or unknown cause
- Non-accidental fractures sustained by a service user
- Any serious risk-taking behaviour in a service user (such as self-medication, self-mutilation, serious self-harm or suicide attempts)
- Any unexplained absence of a service user from their placement (such as absconding, kidnapping or the failure of a parent to return a service user following family contact)
- Drug or alcohol abuse by a service user
- Any acute psychiatric admission of a service user
- Any allegation by a service user of sexual or physical assault, abuse or misconduct by staff or member(s), WAC authorised carer(s), or any other person(s) known to the staff, the family, or another resident of a WAC facility
- Any allegation by a service user of unlawful restraint by a staff member or member(s), WAC authorised carer(s), or any other person(s) known to the staff, the family, or another resident of a WAC facility
- Any serious threat of physical harm made to a service user, WAC authorised carers, staff, or members of a service user's family (such as a bomb threat or threats to assault or kill)
- Any allegation that a service user may have committed a criminal offence
- Any allegation that a staff member or WAC authorised carer may have committed a criminal offence
- Breaches of AVO/Court orders
- Unauthorised use of behaviour management practices
- Using a prohibited behaviour management practice

Critical Incidents are events that may:

- Have a significant impact for a service user and other people involved.
- Require additional supports so that it can be managed effectively and, where possible resolved.
- Necessitate a review of casework practice and management.
- Have implications for how WAC delivers its services.
- Attract significant media and public interest.
- Be associated with significant stress that could seriously affect staff and/or WAC authorised carers and threaten the continuity of the service user's placement/access to services.
- Be associated with breaches of legislation and/or accreditation requirements.

Critical events are events occurring in statutory OOHC, as outlined below.

Critical Events in Statutory OOHC

As a funded service provider, WAC has specific responsibilities in relation to 'critical events' as outlined in the Department of Communities and Justice guidelines, PSP Critical events in statutory OOHC (October 2020).¹

A 'critical event' in statutory OOHC is an event that typically causes risk of harm or actual harm to a child or children in OOHC, which requires reporting to one or more government agencies, for example DCJ, NSW Police, NSW Children's Guardian, the NSW Ombudsman or the NSW Coroner.

A critical event occurs when any of the following circumstances affect a child in statutory OOHC, in the case responsibility of a funded service provider:

1. A serious injury or death of a child in statutory OOHC, whether or not in case responsibility of that funded service provider.

¹ https://www.facs.nsw.gov.au/_data/assets/file/0004/676453/PSP-Critical-Events-Policy-v02-Oct-2020.pdf

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2. A death or serious injury to a carer authorised by a funded service provider.
3. Exposure of a child in case responsibility of a funded service section provider to: - a confirmed or suspected registrable person (section 3A, *Child Protection (Offenders Registration) Act 2000*) - a person listed on the Child Protection Register in NSW (section 19 of the same Act).
4. A planned end of life event regarding a child in case responsibility of a funded service provider.
5. A reportable allegation or conviction concerning an employee of a funded service provider.
6. A notifiable finding made by a funded service provider in relation to any person engaged in child related work, whether or not employed by the provider.
7. Cancellation or suspension of a funded service provider's accreditation to provide OOHC.
8. Any other event that results in, or is likely to, result in media attention requiring a media response; or has, or may have, an adverse impact on a funded service provider or DCJ (including PSP).

Refer to Permanency Support - PSP Critical Events in Statutory OOHC (located in PSP Documents – GUIDES)

Prevention Strategies

WAC strives to take a proactive approach to identifying and managing the risk of an incident occurring. All staff and carers are expected to be aware of and utilise appropriate prevention strategies.

Staff Training

All Team Leaders/Managers/Coordinators are responsible for ensuring their team members are:

- informed of WAC's work health and safety policies and procedures (e.g. emergencies, critical incidents, risk management) including reporting responsibilities
- trained in how to de-escalate and respond to any emergency, incident or critical incident
- provided with information about appropriately responding to:
 - fire related emergencies (e.g. knowing where fire extinguishers are located, which fire extinguisher to use for the various types of fires and how to use extinguishers)
 - medical/ first aid related emergencies (e.g. who is the first aid officer(s), where the first aid kit is located)
 - power outage
 - bomb threat
 - personal threats (e.g. harassment, assault, robbery)
 - incidents involving hazardous materials (e.g. gas leak or chemical spill)
 - evacuations (e.g. assembly meeting areas)

In addition, the Manager and Team Leader, PSP are responsible for ensuring that:

- all PSP staff are given training and guidance on assessing safe and suitable home environments when authorising carers
- all PSP staff are aware of the definition of a critical event in OOHC and the associated reporting requirements
- all authorised carers are informed of WAC's policies and procedures for responding to emergencies, incidents, critical incidents and critical events
- where required, each child or young person has an up-to-date Behaviour Support Plan
- staff and authorised carers are trained in implementing the Behaviour Support Plan, including the use of restrictive practices
- on-call staff have a copy of each child or young person's Behaviour Support Plan.

Minimising the Risk of an Incident or Critical Event in OOHC

Client-centred prevention and de-escalation strategies should always be used to minimise the risk of an incident or critical event in OOHC. Strategies may be included in a child or young person's Behaviour Support Plan and include removing triggers or a change in care environment

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that may assist with mitigating challenging behaviour.

When staff or authorised carers identify behavioural issues or concerns about a child or young person which may lead to an incident or critical event, the caseworker should be notified for additional support or advice. If the caseworker is informed of, or identifies, behavioural issues or concerns which may lead to an incident or critical event, they will notify the Team Leader or Manager, who will provide for additional support or advice. See the Behaviour Support Policy.

Initial Response to Incidents

Staff responsibilities when responding to incidents in OOHC

- a. If the incident relates to challenging or otherwise unsafe behaviours by a child or young person**
 - Staff and/or carers should assess if the behaviour exhibited by the child or young person is typical of their character (including where they are unusually absent) and consult any relevant Behaviour Support Plan, Safety Plan or Risk Assessment and Management Plan.
- b. Assess potential risks and take action to ensure immediate safety**
 - Staff and/or carers should assess any potential risks to those involved in the incident while ensuring their legal duty of care obligations for the child or young person.
 - The health and safety of all involved persons is the priority immediately during and following an incident. Contact the Police, Ambulance or Fire Brigade if required.
 - If necessary and safe to do so, involved persons should physically distance themselves from harm – this may mean leaving a room/office or leaving the premises.
 - Action must be taken to prevent further persons from being injured e.g. by removing yourself or others from the scene and administering first aid
 - If police have been contacted to attend, do not touch or disturb any potential evidence, or attempt to question any person. Your role is to ensure the safety of yourself and the child or young person.
- c. Notify the Team Leader or Manager**
 - Staff and carers must immediately verbally report any critical incident to the Team Leader (whether during business hours or after hours) or to the Manager if the Team Leader is unavailable.
- d. Take necessary actions to fulfil duty of care**
 - Staff and/or authorised carers must take necessary actions to ensure duty of care is met for all involved.
 - Staff and/or authorised carers will consider the actions required to support the service user as well as any other person (where applicable) involved in/impacted by the incident (e.g. witness to the incident).
 - Actions taken should seek to minimise ongoing risk of harm or trauma to any person.
 - Physical restraint of a service user during a critical incident is a measure of last resort (PSP staff refer to Behaviour Support Procedures).
 - WAC will not involve police as an incident management strategy unless police involvement is required to respond to an immediate risk to safety. In such emergency situations staff and/ WAC authorised carers should not hesitate to contact the police, but where there is no imminent risk, police involvement will not be sought without appropriate management approval.

Police intervention in Critical Incidents

- Police should be called if there is an immediate safety risk; in emergency situations staff and/or carers should not hesitate to call 000.
- Staff and/or carers should call police to respond to incidents involving a young person where – after prevention and de-escalation techniques have been exhausted – there is an immediate safety risk, in an emergency, or where their behaviour will result in harm or serious injury to themselves or to others.

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- Police are not to be called for minor breaches of house rules or for minor incidents. For example, it is not appropriate to call police for a minor incident where no one is hurt, and the victim wants no police action.

Criminal offences by a Young Person, Staff Member or WAC Authorised Carer

- In critical incidents where police intervention is required, the police will determine whether an action or behaviour by a young person, staff member or authorised carer is a criminal offence.
- All staff are responsible for adhering to directions made by the police regarding criminal offences.
- WAC is responsible for recognising criminal offences or allegations that require an immediate response to protect the safety and wellbeing of children and young people, staff and authorised carers.
- The Team Leader is responsible for initially assessing if a matter may be a criminal offence and/or an allegation of reportable conduct and referring same to the Manager to determine.

Guidance about responding to particular kinds of incidents that may occur in the care environment is provided at the end of this document:

- Annexure 1 – Accidents
- Annexure 2 – Unexplained Absence by Service User in Permanency Support
- Annexure 3 – Death of a Service User in Permanency Support
- Annexure 4 – Child Safety Concern Report Form

Team Leader/Manager Responsibilities when Responding to Incidents

The Team Leader will ensure initial care and support has been provided to all involved persons including staff, authorised carers and service users.

Depending on the severity and nature of the incident, the Team Leader/Manager (or on-call worker after hours) will review the resources needed to support the staff member or authorised carer to resolve or defuse the incident. If the Team Leader/Manager does not attend, they will provide clear instructions on how to proceed.

When notified verbally of any critical incident, the Team Leader will be responsible for:

- obtaining the assistance of relevant emergency personnel (e.g. police, ambulance) as required
- if a staff member is injured or ill, notifying their nominated next of kin as required (with permission)
- making any roster changes needed to ensure service continuity
- verbally reporting the incident to the Manager
- assessing if the incident involves Risk of Significant Harm or reportable conduct and ensuring relevant policies and procedures are followed
- ensuring the relevant staff member completes and forwards an Incident Report to the Manager as soon as practicable
- if the incident requires a police response, ensuring onsite staff:
 - record where the incident occurred
 - not disturb any evidence
 - not to interview people or discuss the incident with those who were involved
 - record event number on incident report.

The Manager is responsible for the following when a critical incident occurs:

- assuming responsibility for the overall management of the critical incident
- if appropriate, assembling a team within 48 hours to investigate the critical incident to establish the cause(s) and recommend action(s) to prevent recurrence
- suspending work in the area where the critical incident occurred, if necessary, for safety purposes, or suspending similar work, until the investigation has been completed and/or corrective action taken

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- if appropriate, briefing other members of the Leadership Group
- if necessary, organising debriefing sessions or professional counselling sessions for affected workers and/or service users.
- ensuring that statutory reporting requirements are met by reporting the matter to the relevant authority, including where relevant to iCare within 48 hours of an injury.

Incident Reporting

WAC is committed to transparent processes around managing and reporting incidents. All incidents must be recorded and reported.

An Incident Form must be completed for all incidents that occur:

- when a staff member is with a service user
- when a staff member is providing in-home support or support in the community
- onsite at WAC, including inside and around the building and locations that are within view of staff
- when a service user is supported by an external service, authorised carer, out of placement or with family or friends.

Remember! You must verbally inform the relevant Team Leader immediately (whether during business or after hours) of critical incidents/critical events.

A separate Incident Form should be completed by all persons who witnessed or were told about the incident. Individuals should not discuss or complete their Incident Report with any other person.

Completing an Incident Form

- Staff should complete an Incident Form as soon as is practicable within twenty-four (24) hours and forward it directly to the Manager by placing it in the container on the front of the WAC Manager's door or emailing it to the Team Leader and Manager.
- Authorised carers should use the Incident Form or an agreed written alternative. The staff member requesting a written report from the WAC authorised carer is responsible for notifying the Team Leader when this has been requested and completed.
- The Incident Form must include:
 - full name of the person reporting the incident
 - full name of the person the report is about, and the persons involved
 - location, date and time of incident and a short description of the incident
 - the possible causes or trigger of the incident
 - the initial actions taken by you
 - the full name and position of the person you reported the incident to at the time
- Have regard to the following consideration when completing the Incident Report:
 - ensure all sections are completed
 - ensure the language you use is objective, respectful and appropriate (unless you are quoting a person for accuracy). If you are quoting a person, use "inverted commas" at the start and end of the quote
 - include only what you witnessed or were told about the event; do not make assumptions about what occurred or assign blame
- The contents of the Incident Report should be kept confidential – do not discuss it with others.
- If the incident involves a child or young person, use the Child Safety Concern Report Form (Annexure 4).
- If the incident involves the use of a restrictive practice, the carer must report this to the caseworker within twenty-four (24) hours, and the caseworker must make a report to the Team Leader within forty-eight (48) hours. The information must include the name of the child or young person, the time and date, a description of the situation, the type of force used, the outcome. The incident should be documented and placed on the child or young person's case file and the details reported in the first instance to the Team Leader within forty-eight (48) hours for advice on next steps. In addition, the Team Leader must update the Register for the use of restrictive practices each time a restrictive practice is used. See the Behaviour Support Policy and Procedures for further details.

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Post-Incident Response

The Team Leader is responsible for post incident follow-up. The Team Leader will assess if an incident involves Risk of Significant Harm, a breach of the Code of Conduct, and/or reportable conduct and ensure the necessary actions are taken within legislative timeframes.

For all other incidents, follow-up actions will depend on the severity and nature of the incident and may include:

- as directed by the Manager, conducting an initial investigation into the matter and the cause of the incident. (Refer to Investigation Protocol for non-reportable conduct matters and Reportable Conduct Procedure for reportable allegations).
- instigating remedial action as required
- monitoring and evaluating the actions
- informing all stakeholders as required
- briefing the Manager on the findings and actions taken to date to eliminate or mitigate risk.

The Manager will:

- record the details of an incident from an Incident Form on the incident register.
- assign the incident to the responsible Team Leader to conduct an initial investigation into the matter and the cause of the incident, as per the Investigation Protocol.
- on receipt of the report from the Team Leader, record actions in the incident register. If the incident involved a specific service user, the incident must be recorded in their individual file.
- monitor and evaluate the actions and close the incident when complete.
- implement actions required to eliminate or mitigate the reoccurrence of the incident and continuously improve WAC's service delivery processes.
- when appropriate, reporting the matter to the WH&S Committee so that the Committee can assume responsibility for monitoring the implementation of any recommended corrective actions and control strategies required to prevent a reoccurrence.
- summarise the incident and table the report at the monthly WH&S meeting
- brief the Management Committee (the Board) as required (see Governance Policy).

The Principal Officer (Manager) will also ensure the following obligations are met:

- DCJ requirements for responding to and reporting critical events in OOHC including complying with the requirement under s.83 of the *Children's Guardian Act 2019* to immediately report the death of a child or young person in OOHC to the OCG.
- mandatory reporting requirements for incidents involving ROSH (See Child Protection and Child Safety Policy and Procedures).
- notification, investigation and reporting requirements for incidents involving reportable conduct by a staff member (including an authorised carer or Board member (See Reportable Conduct Procedure).
- any additional requirements for reporting incidents to external agencies, including the OCG, DCJ, the Police, Coroner and other appropriate regulatory authorities such as WHS Regulators, WorkCover/WorkSafe.

Monitoring and Review

WAC is committed to ongoing monitoring and review of incidents to identify opportunities to improve systems and practices and when the matter does not breach the confidentiality and privacy principles and is reported to the Committee the WH&S Committee will:

- review the summary of incidents tabled by the Manager at the monthly WH&S meeting
- assist with workplace inspections, audits and incident/accident investigations
- undertake a job safety analysis (JSA) for work tasks and practices deemed to present a high risk to the safety of workers
- identify specific training required for eliminating, controlling or minimising identified areas of risk
- provide advice regarding any proposed corrective actions or control strategies
- brief the Manager on any further actions or training required
- as required, reviewing policy and procedures related to work health and safety for the WAC

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workforce and clients.

The Leadership Group will be responsible for:

- as required, drafting, reviewing and revising policy and procedures related to work health and safety for the WAC workforce and clients
- reporting trends or whole of organisational responses raised in incident forms
- using incident reporting data to improve practices and procedures to ensure recurrence of incidents is minimised and managed.

Implementing Open Explanation

In general, the open explanation process should be invoked whenever unintended harm has resulted to a client receiving a service from WAC when it is reasonably likely a client will suffer harm in the future. The initial explanatory discussion with the patient and their support person should occur as soon as possible after recognition of the adverse event.

See Open Explanation Policy

Related Documents

This document is supported by and should be read together with the documents listed below:

- Child Protection and Child Safety Policy
- Reportable conduct Procedure
- Investigation Protocol
- Work Health & Safety Policy
- Open Explanation Policy
- Department of Communities and Justice Permanency Support - PSP Critical Events in Statutory OOHC (October 2020)

References

- *Work Health and Safety Act 2011 (NSW)*
- THE RED BOOK - Emergency Procedures and Checklists AS/NZS 4360:1990

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Annexure 1: Accident Reporting Process

When a service user has an accident, the case worker and/or WAC authorised carer will immediately assess the situation and work out how serious the injury is.

If the service user needs to go to hospital, the Caseworker, and/or WAC authorised carer will arrange transportation without delay. This may involve calling (000) for assistance.

The Team Leader/Manager can authorise medical treatment to be given to a service user in an emergency situation without the consent of the person with parental responsibility, if the medical officer believes it is necessary in order to save the service user's life or prevent serious harm.

The case worker will notify the Team Leader/Manager.

If an accident is not serious but the caseworker, and/or WAC authorised carer is concerned about the service user's health, the caseworker will instruct the WAC authorised carer to look after the service user, complete an Incident Report and record the accident and other details in the daily logbook (where applicable) and/or via email correspondence to the case worker and to the Team Leader/Manager.

All accidents, no matter how small or minor, should be reported.

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Annexure 2 Unexplained Absence by Service User in Permanency Support

Case workers, WAC authorised carers are to notify the Team Leader immediately if they suspect that a service user in their care has absconded or been kidnapped.

The Team Leader will instruct the appropriate staff member to complete an Incident Report immediately. The Team Leader will investigate the service user unexplained absence using the Incident Report.

The Manager or where delegated the Team Leader will:

- take all possible steps to locate the service user, which might include visiting or telephoning the service user's parents, friends and relatives
- talk with the caseworker and direct care staff about the circumstances leading up to the service user's unexplained absence
- contact the police immediately if the service user cannot be found
- make a child protection report immediately if the service user cannot be found
- take all reasonable steps to bring the service user home once they are found
- update the Helpline and police once the service user has been located and is safe
- talk with the service user once they've returned to the placement about the reason for unexplained absence and provide help to try and remove the problem
- assess whether a specialist counsellor is needed, especially if the problem persists
- arrange an emergency case planning meeting to identify an emergency placement option if necessary, and
- record the reasons for the service user's unexplained absence in the case file.

In cases where service user habitually absconds from the same placement:

- pay special attention to the circumstances of the placement
- spend time alone with the service user, on more than one occasion, to make sure that the service user is safe in the placement
- be mindful that most service users do not run away without a valid reason
- look at the factors that might contribute to this behaviour
- give the service user the opportunity and support they need to talk with someone outside of WAC if necessary
- record the reasons for the service user absconding in the case file and an Incident Report
- review any existing risk, safety and/or Behaviour Support Plans, and
- develop a management plan in consultation with a specialist support service.

All documents are to be filed on the service user's case file for reference.

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Annexure 3 Death of a Service User in Permanency Support

In the event that a service user dies, the case worker and/or WAC authorised carer will immediately notify the Team Leader, for immediate notification to the Manager. The Manager must immediately cause notice of the death to be given to the following persons as shown by the sequence below:

- Nearest police station
- Department of Community and Justice
- The parents of the service user as can reasonably be located
- The Children's Guardian
- The Coroner
- The Board of WAC

The Manager will instruct the appropriate staff member to complete Incident Form as soon as practical following the death of the service user.

Under the s.83 of the *Children's Guardian Act 2019*, the Principal Officer of an accredited agency must immediately notify the Children's Guardian of the death of a child or young person in statutory out-of- home care placed with the agency

The notification form is available at:

<https://www.kidsguardian.nsw.gov.au/statutory-out-of-home-care-and-adoption/notifications-to-the-childrens-guardian>

All documents are to be filed on the service user's case file for reference.

Police will requisition the files of a service user who has died in Permanency Support. In the event that these files are hard copy files, where possible, the caseworker will make a copy of the file before Police remove the file.

The Team Leader/Manager must ensure wrap-around support is offered and provided to significant others of the service user. This may include referral to counselling and debrief services.

The Team Leader or Manager must ensure wrap-around support is also offered to:

- Case workers
- WAC authorised carers
- Birth parents and significant others
- Other service users within the same placement as the service user who has died. This may include clinical supervision and referral to other services.

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Annexure 4: Safety Concern Report template

Safety Concern Report template²	
This template should be used to record safety concerns about children.	
1	Affected child
	Name:
	Age:
	Gender:
	Do they identify as Aboriginal or Torres Strait Islander? If yes, specify:
	Are they from a culturally and linguistically diverse background? If, yes, specify:
	Do they have a disability? If, yes, provide any relevant details:
	Do they have communication support needs? If yes: <ul style="list-style-type: none"> • Have they been offered an interpreter? • Have they been offered a communication assistant? • Have they been offered a support person, advocate, family member? • Any other supports?
	Provide any other relevant information relating to the child's preferred communication methods, support needs, and involvement in the reporting process:
2	If the concern was reported by someone other than the affected child
	Name:
	Age:
	Gender:
	Relationship to affected child (if relevant):
3	Nature of the concern
	Accurately record the issues, concerns, details of any witnesses:
	<i>If the concern was disclosed by the affected child or another party, as far as possible record the nature of the concern using their own words.</i>
4	Immediate risk considerations
	Details of any injuries and if the affected person or others received medical attention:
	Does the complaint indicate the possibility of criminal conduct? Yes/No/Unsure
	Is a mandatory child protection report required? Yes/No
	Does the complaint involve a reportable allegation? Yes/No/Unsure
	Is any immediate risk management action required? Yes/No
5	Outcome sought
	What outcome is the affected child/person who reported the concern seeking?
6	Contact details of person reporting the concern

² Adapted from National Office of Child Safety, *Complaint handling guide: Upholding the rights of children and young people*, 2019. Appendix M: Complaint record form
<https://chidsafety.pmc.gov.au/sites/default/files/2020-09/nocs-complaint-handling-guide.pdf>

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	Address: Phone number: Email: Preferred contact method:
7	Person completing this safety concern report Signed: _____ Date: _____ Print name: _____
8	Person receiving this safety concern report Signed: _____ Date: _____ Print name: _____ Next steps: _____