

# Waylight Pty Ltd

## Waylight Plan Management

<b>Document Title</b>	Incident Management Policy & Procedure
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<b>Approved By</b>	Joshua, Director
<b>Classification</b>	Internal

### 1. Purpose

This policy establishes Waylight's incident management system in accordance with the National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018. It ensures that incidents occurring in connection with Waylight's plan management services are identified, recorded, reported, investigated where required, and resolved. The system is proportionate to Waylight's scale as a sole-operator plan management business.

### 2. Scope

This policy applies to all workers, contractors, and volunteers engaged by Waylight Pty Ltd in the delivery of plan management services. This includes the Director (Joshua), the Contractor-Accountant, and any future plan management workers. It covers all incidents occurring in connection with the provision of plan management supports or services.

### 3. Applicable Standards

- National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018. Parts 2 and 3.
- NDIS Practice Standards, Verification Module, Governance and Operational Management: The risk management system must cover incident management.
- NDIS Act 2013, section 73Y (incident management systems) and section 73Z (reportable incidents).

### 4. Policy Statement

- Waylight maintains an incident management system that covers all incidents occurring in connection with the provision of plan management services, as required by sections 8-9 of the Incident Management Rules 2018.
- All incidents are recorded with the minimum details specified in section 12(2) of the Rules.

- Reportable incidents are notified to the NDIS Quality and Safeguards Commissioner within the timeframes specified in sections 20-21 of the Rules.
- Incident records are retained for 7 years from the date the record is made (section 12(4) of the Rules).
- All persons affected by an incident are afforded procedural fairness (section 11 of the Rules).
- The system is periodically reviewed to ensure effectiveness (section 10(6) of the Rules).

## **5. Procedure**

### **5.1 Incidents Covered (Section 9 of the Rules)**

- Category 1: Acts, omissions, events, or circumstances that occur in connection with providing plan management supports and have, or could have, caused harm to a person with disability (s.9(1)).
- Category 2: Acts by a person with disability that occur in connection with providing supports and have caused serious harm, or a risk of serious harm, to another person (s.9(2)).
- Category 3: Reportable incidents alleged to have occurred in connection with providing supports (s.9(3)).
- For plan management specifically: incidents may include financial harm (e.g., incorrect claim causing budget exhaustion), data breaches affecting participant information, or situations arising during participant contact.

### **5.2 Reportable Incidents (Section 16 of the Rules)**

- A reportable incident means: (a) the death of a person with disability, (b) serious injury of a person with disability, (c) abuse or neglect of a person with disability, (d) unlawful sexual or physical contact with, or assault of, a person with disability, (e) sexual misconduct committed against, or in the presence of, a person with disability including grooming, (f) the use of a restrictive practice other than where in accordance with a State/Territory authorisation.
- Exception: Unlawful physical contact is not reportable if the contact with, and impact on, the person is negligible.
- Note: While reportable incidents are less likely in a plan management context (no direct care delivery), they are not impossible, e.g., abuse or neglect identified through financial patterns, or incidents occurring during face-to-face participant meetings.

### **5.3 Identification and Recording (Section 10(1)(a), Section 12(2))**

- Step 1: Any worker or contractor who identifies or becomes aware of an incident immediately records it in the Incident Register.
- Step 2: The record includes the following minimum details per section 12(2): (a) description of the incident including impact or harm caused, (b) whether it is a reportable incident, (c) if

known, time, date, and place, (d) if (c) does not apply, time and date first identified, (e) names and contact details of persons involved, (f) names and contact details of witnesses, (g) details of assessment undertaken, (h) actions taken in response including support for affected persons, (i) consultations with affected persons, (j) whether affected persons have been provided reports or findings, (k) if investigation undertaken, details and outcomes, (l) name and contact details of the person making the record.

- Step 3: The Director assesses the incident to determine whether it is a reportable incident requiring notification to the Commissioner.

#### **5.4 Notification to the Commissioner**

- 24-Hour Notification (Section 20): For reportable incidents involving death, serious injury, abuse or neglect, unlawful sexual/physical contact or assault, or sexual misconduct, the Director notifies the NDIS Commissioner within 24 hours, providing: (a) provider name and contact details, (b) description of the incident, (c) description of impact/harm (except for death), (d) immediate actions taken including whether reported to police, (e) name and contact details of the person making the notification, (f) if known, time, date and place, (g) names and contact details of persons involved.
- If insufficient information is available within 24 hours: provide items (a)-(e) within 24 hours; remaining information within 5 business days.
- Within 5 business days: provide witness details and further proposed actions.
- 5-Business-Day Notification (Section 21): For reportable incidents involving unauthorised restrictive practice use, written notification within 5 business days.
- Updates (Section 23): If significant new information arises after notification, the Director notifies the Commissioner as soon as reasonably practicable.
- Final Report (Section 24): If required by the Commissioner, a final report is provided within 60 business days (or longer if specified), including investigation details, findings, corrective action, and whether affected persons have been kept informed.

#### **5.5 Support for Affected Persons (Section 10(1)(d-e))**

- Step 1: The Director provides support and assistance to persons with disability affected by the incident, including information about access to independent advocates.
- Step 2: Affected persons are involved in the management and resolution of the incident to the extent they wish to be.
- Step 3: Affected persons are kept informed of progress, actions taken, and outcomes.

#### **5.6 Investigation and Corrective Action (Section 10(1)(f-g))**

- Step 1: The Director assesses whether investigation is required, considering the seriousness of the incident and whether systemic issues may be involved.
- Step 2: If investigation is warranted, the Director conducts it or engages an independent investigator if the Director is involved in the incident.

- Step 3: Following investigation, the Director determines corrective action to prevent recurrence.
- Step 4: Corrective actions are implemented, documented, and reviewed for effectiveness.

### 5.7 Review and Continuous Improvement (Section 10(3-4), 12(5))

- Each incident is reviewed considering the views of affected persons: whether the incident could have been prevented, how well it was managed and resolved, what remedial action is needed, and whether other persons or bodies need to be notified (s.10(3)).
- The Director collects statistical information from the Incident Register to identify systemic issues (s.12(5)).
- The incident management system is reviewed annually for effectiveness (s.10(6)).

### 5.8 Record Keeping (Section 12(4))

All incident records are retained for 7 years from the date the record is made. Records are stored securely in Waylight's digital management system (Supabase) with access restricted to the Director and Contractor-Accountant.

### 5.9 Procedural Fairness (Section 11)

All persons are afforded procedural fairness when an incident is dealt with by Waylight. This includes: the right to be heard, the right to know the case against them, and the right to an unbiased decision-maker.

## 6. Responsibilities

Role	Responsibility
Director (Joshua)	Maintains the Incident Register. Assesses incidents. Notifies the Commissioner within required timeframes. Investigates incidents. Implements corrective action. Reviews system annually. Reports to Commissioner if requested.
Contractor-Accountant	Reports incidents immediately to the Director (s.19, duty of workers). Assists with investigation of financial incidents.
Plan Management Worker (future)	Identifies and records incidents. Reports to the Director immediately. Complies with the incident management system (s.13(2)). Completes training on the system (s.13(3)).
Participants	Are informed of how to report incidents. Are supported and involved in incident management. Are kept informed of outcomes.

## 7. Related Documents

- WL-POL-08 Complaints Management Policy
- WL-POL-09 Risk Management & WHS Policy
- National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018
- NDIS Practice Standards (Verification Module)

## 8. Audit Readiness Notes

- Q: 'Walk me through what happens when an incident occurs.'. A: The person who identifies it records it in the Incident Register immediately with full details per section 12(2) of the Rules. I assess whether it is reportable. If it is, I notify the Commissioner within 24 hours for serious incidents or 5 business days for others. I support the affected person, investigate if needed, take corrective action, and review to prevent recurrence.
- Q: 'Have you had any incidents since starting?'. A: Be honest. If no incidents: 'Not yet, I have not commenced delivering services. The system is in place and I understand the notification timeframes.' If incidents have occurred: describe the type, how it was managed, and what was learned.
- Q: 'How would you handle a reportable incident?'. A: Within 24 hours I notify the Commissioner with my details, a description, the impact, immediate actions taken, whether police were notified, and the time/date/place. Within 5 business days I provide witness details and proposed actions. I support the affected person throughout and keep them informed.

## 9. Review

This policy is reviewed annually or earlier if there are changes to the Incident Management Rules, NDIS legislation, or organisational operations. Next scheduled review: 2027-04-02.

## Version History

Version	Date	Author	Changes
1.0	2026-04-02	Joshua	Initial version
1.1	2026-04-02	Joshua	POLISH: Added explicit distribution step per s.12(1)(b) of Incident Management Rules.