

1. Incident Reporting Policy

2. Values Statement

RedR Australia (“RedR”) is guided by its values of accountability, integrity, empathy, and collaboration. It is integral that RedR reports all incidents and near misses and maintains an accurate log of all incidents. This will enable RedR to truly be accountable for how we deal with incidents, but to also learn and improve our systems to prevent similar events occurring in the future, and to better safeguard our people.

3. Purpose

The purpose of these procedures is to ensure that all hazards, incidents and accidents involving RedR staff are reported, investigated and recorded in accordance with the requirements of both the Occupational Health and Safety Act 2004 and the organisation’s own operational duty of care.

4. Scope

This policy applies to:

- A. All employees, volunteers, contractors and interns/work placements of RedR,
- B. Associate trainers,
- C. RedR deployees, and
- D. Members of RedR’s roster of professionals
- E. RedR Board members

5. Policy Statement and Principles

Organisational approach

Successful incident investigation requires everyone's co-operation; they are not to be used as vehicles to allocate blame, but rather as a means to identify cause in order to mitigate/eliminate future risk where possible. Any suggestion that blame allocation or 'scapegoating' is intended would jeopardise the investigator's credibility and reduce the quality and accuracy of information supplied.

Hazard/Near Miss reporting

Reporting of a hazard or near miss should be completed via the Incident Reporting Form at Annex A.

Incident reporting

All incidents are to be reported as soon as is practicable. Incident reporting should be deemed secondary to immediate control of/operational response to a given incident. Please note that the Incident Reporting Form at Annex A does not need to be completed if the information listed in the form is documented, though the Incident Reporting Form should be used as a handrail to capture the key details of an incident. The Incident Reporting Form is the preferred means of capturing information, but it is noted that this is not always practicable. It should be noted that some incidents may mandate external reporting within a specified timeframe (see below). Where a formal Incident Reporting Form is not used, RedR’s incident reporting system, House on the Hill (HotH) can be used. Regardless of if an Incident Reporting Form is used to capture the initial response to an incident or not, all incidents must be logged on HotH.

Incident investigation

The submission of the relevant Incident Reporting Form, or any format of incident documentation, should be the trigger for that incident to be included within HotH. This in turn will see the incident either closed (if no further action is required) or an incident investigation commenced. The main aim of incident investigation is to:

- Prevent similar events recurring in the future.
- Identify any new hazards.
- Identify and choose suitable controls.

6. Procedures

All formal incident reporting should be centralised via the Head of Risk, Safety and Security in the first instance.

Whilst an integral part of RedR Australia's due diligence in delivering upon its duty of care, formal incident reporting should ultimately be deemed secondary to immediate control of/operational response to a given hazard or injury. The Incident Response Handbook v3.0 Jun 2023 outlines the operational process for the triage of, response to and recovery from incidents.

Once the incident has been reported, it is to be logged on HotH. The logging of the Incident can take place by either the Incident Response Manager (IRM), Incident Responder (IR) or the Head of Risk, Safety and Security.¹

The organisation extends a duty of care to all staff, including those responding to incidents. Employees can be affected by trauma vicariously as well as directly and creating or reading incident reports may trigger adverse reactions. The Employee Assistance Programme can be one means of obtaining professional support where required.

Investigation should occur as soon as possible, and accurate information be obtained.

External reporting

There may be a number of legislated, contractual and/or donor-stipulated reporting requirements following certain events. These in turn may be accompanied by timebound reporting deadlines that may match or exceed those stated within this policy. Wherever possible we must adhere to these external guidelines.

Example 1; DFAT. As a major donor, DFAT have a number of compulsory reporting requirements for certain types of incidents. In each case this reporting should be referred to, and ultimately submitted by a member of the Senior Leadership Team. This does not preclude following the standard process for submission of an Incident Reporting Form/logging an incident on HotH. Any incident of suspected or alleged fraud must be reported to DFAT within five working days. Any incident concerns relating to the abuse or exploitation of children must reported immediately. See below (Section 6) for links to further information.

Example 2; WorkSafe Australia. RedR Australia, as occupier of a place of work, shall contact WorkSafe Victoria in the event of any 'notifiable incidents' occurring at or in relation to its place of work. A notifiable incident is any incident that results in death or serious injury.

Serious injury includes, but is not limited to, incidents that result in a person requiring:

- Medical treatment within 48 hours of exposure to a substance.
- Immediate treatment as an in-patient in a hospital.
- Immediate medical treatment for:

¹ See the Incident Response Handbook for a detailed description of roles and responsibilities when responding to an incident.

- Amputation.
- Serious head injury.
- Serious eye injury.
- Separation of skin from underlying tissue (for example de-gloving or scalping).
- Electric shock.
- Spinal injury.
- Loss of bodily function.
- Serious lacerations.

Treatment required without delay after an incident is termed 'immediate medical treatment', with The Medical Treatment Act (1988) defining medical treatment as the carrying out of:

- a. An operation.
- b. The administration of a drug or other like substance, or;
- c. Any other medical procedure not including palliative care or procedures carried out for diagnostic purposes only.

7. Roles and Responsibilities

All personnel.

All RedR Australia staff members must:

- Ensure that any injured person is promptly attended to.
- Ensure that all hazards and incidents in which they are involved, or that are in areas for which they have responsibility, are reported using the appropriate form as soon as is practicable, and no later than 5 working days after the hazard or incident is identified.
- Forward the relevant Incident Reporting Form and/or incident documentation to their line manager and/or Head of Risk Safety and Security as appropriate.
- Participate fully in any investigation of the hazard or incident.

Head of Risk, Safety and Security.

The Head of Risk, Safety and Security will collate incident reporting data in the first instance and ensure that this is passed to the People and Capability Manager as required. The Head of Risk, Safety and Security will maintain the Incident Log on HotH and be available to advise on systemic improvements to aid with minimising incident recurrence. They will be focal point for any operational safety and security and OH&S related incident investigations, including those related to staff travel, and must (along with the People and Capability Manager) ensure that the Chief Executive Officer is briefed on any incidents that may be of relevance to the Board.

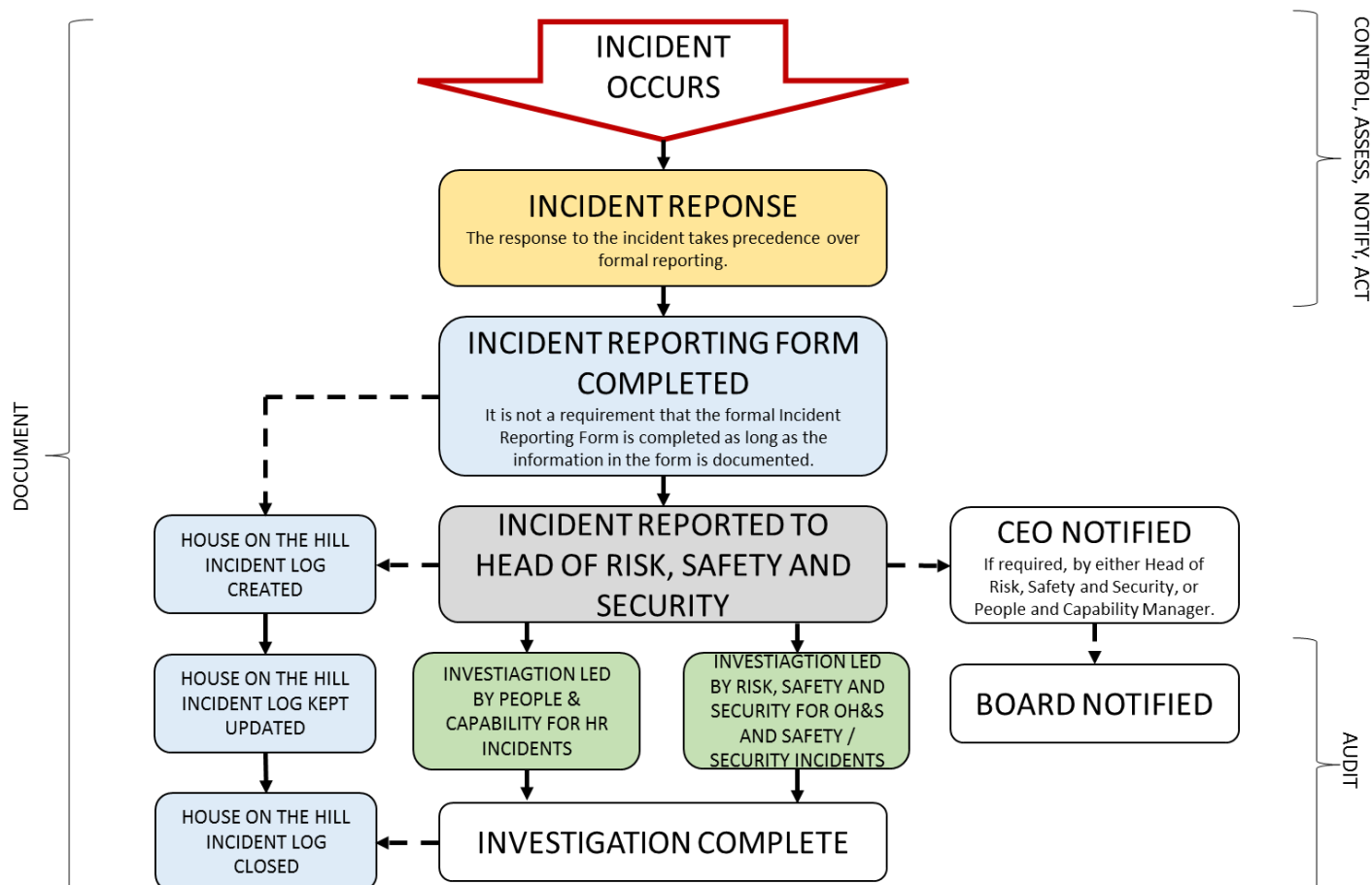
People and Capability Manager.

The People and Capability Manager will be focal point for any HR/discipline-related incident investigations, and must (along with the Head Risk, Safety and Security) ensure that the Chief Executive Officer is briefed on any incidents that may be of relevance to the Board.

Chief Executive Officer.

The Chief Executive Officer is responsible for briefing the board on any relevant incidents/follow-up using the information supplied by the People and Capability Manager and Head of Risk, Safety and Security.

8. Flow Chart



Flow chart outlining the incident reporting process.

9. Definitions

Event	Occurrence that changes a set of circumstances [ISO/IEC Guide 73].
Follow- Up	A catch all term for any investigatory and/or corrective actions taken in response to an incident.
Incident	Any unplanned event resulting in injury, ill health, damage or other loss n.b. this could include damage to organisational reputation.
Hazard	A source or a situation with a potential for harm in terms of human injury or ill health, damage to property, damage to environment, or a combination of these [AZ/NZS 4801]. N.b this could include damage to organisational reputation.
Medical treatment	The carrying out of an operation, the administration of a drug or other like substance, or any other medical procedure (not including palliative care or procedures carried out for diagnostic purposes only).
Near Miss	Any unplanned event that does not, but could potentially have resulted in, or had a potential for injury, ill health damage or other loss [adapted from AZ/NZS 4801].

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Notifiable incident As described in Worksafe Victoria Guide to Incident Notification, 3rd ed (2008).

Risk Effect of uncertainty on objectives [ISO 31000].

10. Related Policies and Documents

- a. DFAT
 - b. <https://www.dfat.gov.au/about-us/corporate/fraud-control>
 - c. <http://dfat.gov.au/international-relations/themes/child-protection/Pages/child-protection.aspx>
- d. WorkSafe Victoria
 - i. <https://www.worksafe.vic.gov.au/resources/incident-notification-form>
 - ii. <https://www.worksafe.vic.gov.au/resources/guide-incident-notification>
- e. ISO/IEC Guide 73:2009 *Vocabulary for Risk Management*
- f. ISO 45001:2018 *Occupational Health & Safety Management Systems*
- g. ISO 31000:2018 *Risk Management – Principles & Guidelines*
- h. RedR Australia Incident Reporting Handbook v3.0 Jun 2023

11. Document Control

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Annex A – Incident Reporting Form

Instructions for completion.

1. This form should be completed as part of the Incident Reporting Policy process.
2. It should be completed by the Incident Responder (IR) or Incident Response Manager (IRM).
3. It should be completed as soon as possible after the incident occurs to ensure integrity of information, but its completion is secondary to immediate control of/operational response to a given incident.
4. Upon completion it is to be passed to the Head of Risk, Safety and Security.

Completed by:		Date completed:	
Who:	<i>Name, contact details and organisation of affected individual(s).</i>		
When:	<i>Date and time incident/near miss/hazard took place.</i>		
What:	<i>What happened/could have happened, activity being undertaken at the time, sequence of events, environmental factors etc. Photos, maps and diagrams may all help to illustrate this information.</i>		
Where:	<i>Describe the location as accurately as possible.</i>		
Actions taken prior to incident/hazard/near miss (including any preventative/mitigating measures in place):			
Immediate Actions taken after the incident/hazard/near miss (First Aid, assets used, people contacted, etc.):			

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Required follow up or further actions:

Signature of RedR appointed person completing the form	Date