

## Summary

Life Without Barriers (LWB) is committed to ensuring a person's well-being, including their right to be safe, free from abuse, neglect and exploitation, and supporting their access to various health/medical services.

This procedure provides staff with knowledge and guidance on responding to, monitoring, and reporting on an incident where a person we support presents with unexplained bruising, suspicious marks or an injury from an unknown source.

This approach will help LWB achieve its goal of partnering with people and improving lives. This procedure will be reflected in our practice supporting children and young people within LWB Children Youth and Families foster care, residential care and aftercare services, and our Disability and Mental Health supports, e.g., Short Term Stay, Behaviour Intervention and Support (BIS) and Support Coordination.

This procedure will be implemented in conjunction with the [LWB Disability Client Incident Management National Procedure](#).

## Recognising and Responding to Unexplained Bruising, Marks or Injury

Record a bruise, mark or injury **EVERY TIME** one is noticed on the [NDIS LWB 5553 Bruising, Injury and Skin Integrity - Recording Chart](#) **AND** complete an iReport event.

## If you identify a bruise, mark or injury on a person you support, you must:

### Procedure

#### Check



- Ensure the person is immediately safe. If you have any concerns for the person's immediate well-being or the person has a severe injury, unexplained pain, or reduced or loss of function of a joint, limb or muscle, immediately **call emergency services (000) before you contact anyone else, including your manager.**  
[NDISC Reference Card: 'Incident response: Is everyone safe?'](#)
- For any non-urgent injury, provide the appropriate first aid.
- Reassure the person, calmly inform them that you have found a bruise, mark or injury and tell them on what part of their body you have located this.

**Check**






- If a person tells you they have a bruise, mark or injury, ask if you can see it and explain this so you can support them safely and complete LWB’s documentation of bruises, marks or injury. See **Determining if the injury is from an unknown source** below.
- If the person declines to show you ask them if they can tell you where the bruise, mark or injury is located on their body and ask if they need medical assistance.
- Document conversations with the person in Progress Notes and inform the Disability Support Leader (DSL)<sup>1</sup> or On Call that the person has an injury but declined to let you observe it.
- Ask the person to explain to you in their own words or mode of communication how they sustained the bruising, mark or injury. Listen carefully to what the person is telling you. If a person tells you things are not OK and discloses an allegation of abuse, you must report this immediately to the DSL or On-call.
- Ask or seek to identify if the person is feeling any pain or discomfort.
- Explain to the person the steps you must take because you have found or been informed about a bruise, mark or injury.
- Any unexplained bruising, marks or injury (for example, broken bones, fractures, sprains, bruises, burns, scalds, bite marks, scratches, or welts) can be a red flag for abuse, neglect or a more serious medical condition. Also, consider bruising that may suggest the shape of an object that caused it.
- Some unexplained injuries may be internal and only identified through behavioural changes or indicators or the person reporting internal pain with an unlikely explanation.
- Follow up and check that the allegation has been reported and is being managed to protect the person and safeguard against any further abuse, ensuring we are meeting our Duty of Care and mandatory reporting requirements.

**Protect**



- With the person or their Authorised Decision Maker, organise an assessment of the bruising, mark or injury within 24 hours by a Doctor or AQHP (the AQHP can be a Pharmacist who can triage the injury and provide their medical opinion as to if the person should see a Doctor for medical assessment).

<sup>1</sup> All references to Disability Support Leader (DSL), includes all Frontline Leadership roles, such as House Supervisor

	<ul style="list-style-type: none"> <li>• Early recognition and immediate action in responding to any bruises, marks or injury can prevent the escalation of abuse and serious illness and enhance the health and well-being outcomes for the people we support.</li> <li>• Observing bruising, marks and injury on and around the genital area can be a sign of sexual abuse. You must respond by following the guidelines in the <a href="#">NDIS LWB 923k Reportable Incidents – Responding to Allegations and Incidents of Sexual Violence</a>.</li> </ul>
<p><b>Support</b></p> 	<ul style="list-style-type: none"> <li>• Take note of the location on the body of the bruise, mark or injury, its size (i.e., length and width), appearance (shape, pattern and colour), and any presentation of pain or discomfort.</li> <li>• Monitor the person for additional symptoms that may indicate a more serious medical condition, injury, or any other injury presentation or continued pattern of injuries.</li> <li>• Complete the <a href="#">NDIS LWB 5553 Bruising, Injury and Skin Integrity - Recording Chart</a>. Ensure that the chart is completed before the end of your shift and communicated to other support staff for their awareness.</li> <li>• If the person expresses any discomfort during the healing process or if the bruise, mark, or injury does not appear to be healing, the person must be taken to a Doctor for a further medical review.</li> <li>• Always keep the person informed.</li> </ul> <p>Refer to <a href="#">Stop It Before It Starts</a> for more information on keeping the people we support safe and free from abuse, neglect and exploitation.</p>
<p><b>Report</b></p> 	<ul style="list-style-type: none"> <li>• As a worker, you are responsible for providing immediate support to the person and reporting the incident in iReport, where the National Safeguarding Unit (NSU) will triage the incident to identify if it meets the threshold for a <a href="#">reportable incident</a> under the NDIS Commission.</li> <li>• Create a written report in iReport – Category Client Wellbeing&gt;Category type Injury&gt;Category Subtype; choose the subtype relevant to the injury sustained&gt; Unexplained Serious Injury or Unexplained Minor Injury.</li> <li>• Record follow-up actions and outcomes in the iReport event under the Activity tab.</li> </ul>
<p><b>Monitor</b></p> 	<ul style="list-style-type: none"> <li>• Bruising, marks and injury can appear at varying timeframes following an incident, depending on the person, the place on the body and the type of injury.</li> <li>• If any new marks develop, staff must start back at the <i>CHECK</i> stage of the procedure to assess the person for any new marks or injuries and assure their immediate safety.</li> </ul>

**Monitor**



- Record a bruise, mark or injury **EVERY TIME** one is noticed and complete an iReport event and the [NDIS LWB 5553 Bruising, Injury and Skin Integrity – Recording Chart](#). Do not assume that someone else has already reported the injury.
- Track any injury patterns and record changes over the healing timeframe. It is essential to be consistent in recording injuries so that links can be made with any previously completed charts to assist in identifying any possible patterns of injury.
- Staff will continue to monitor any bruise, marks or injury and record observations on the [NDIS LWB 5553 Bruising, Injury and Skin Integrity – Recording Chart](#) until it completely fades or heals. Only when a wound is completely healed should the chart be considered complete.
- An example of monitoring injury and tracking the pattern of injuries can be found in the Appendix of the [NDIS LWB 5553 Bruising, Injury and Skin Integrity – Recording Chart](#).

**Managing the Response**

**Procedure - Disability Support Leader (DSL) will**

**Check**





- Speak with the person, seek their consent to speak with their family, and inform them that an unexplained injury has been identified and what steps LWB is taking with the person.
- Review any previously completed Bruising, Injury and Skin Integrity – Recording Charts to identify any possible pattern of injury or abuse that the person may be experiencing.

**Protect**



- Ensure the person has an initial medical assessment and follow-up medical review as required.
- Seek to explore and eliminate possible causes of the bruise, mark or injury.
  - Has the person been able to advise how they sustained the injury?
  - If not, has a medical professional reviewed them?
  - Do we suspect the injury may have been caused through abuse?
  - If the injury is related to slips, trips and falls, has an environmental assessment been undertaken to explore ways to reduce the risk and/or prevent the issue from reoccurring?

**NOTE:** if the bruising, mark or injury is a possible sign of sexual abuse, any process for examining the incident will be undertaken as part of a Police investigation. Therefore, it should not be completed by the DSL.

Procedure - Disability Support Leader (DSL) will	
<b>Support</b> 	<ul style="list-style-type: none"> <li>• Ensure activities related to monitoring the pattern of injury are completed.</li> <li>• Undertake required activities related to Reportable Incidents as guided by the NSU.</li> </ul>
<b>Report</b> 	<ul style="list-style-type: none"> <li>• Ensure follow-up actions and outcomes are recorded in the iReport event, including that the correct category has been selected.</li> </ul>

## Determining if the injury is from an unknown source

If the source of the injury was not observed or reported as witnessed by another staff member, family member, friend or support provider and the person is unable to provide a clear and reasonable explanation that is consistent with the:

- type and location of bruise, mark or injury;
- usual activities undertaken by the person;
- signs and symptoms related to an existing medical condition as documented by an AQHP;
- side effects of any medication as documented by an AQHP,

then it will be determined that the injury is unexplained, from an unknown source, and may constitute a [reportable incident](#). The NSU will triage the incident when reported in iReport and determine if it meets the threshold of a reportable incident.

## Reporting to Police

If it is disclosed that the injury resulted from an interaction between staff and the person we support, the DSL **must** report the allegation to the police. The Police event number and the Police Officer’s name must be uploaded to the iReport event.

If it is disclosed that the injury resulted from an interaction between two or more of the people we support, the DSL must discuss with the injured person and or their supported decision maker/family (with the person’s consent) their right to report the incident to the police if they so wish to. The conversation with the person and their supported decision maker/family must be documented in the iReport event.

- When reporting to the Police and/or emergency services, make the report as soon as possible.

- Ensure emergency services are informed about the person's disability, any cultural and language diversity and their preferred means of communicating/engaging. For example (e.g. COMPIC, pictures, signing) or the need for questions to be simplified to aid their understanding.
- Provide details regarding the family member, authorised decision maker and/or preferred support person who will be supporting the person or arrange for an independent person.

The NSU will guide any requirements for police reporting concerning Reportable Incidents.