

EXPOSURE TRACKING AND WELLBEING

After a difficult job, what happens next?

Connect recorded exposure with assigned outreach, peer support, clinical referral and follow-up.

CaseNote brings incident histories, support contacts and clinical care into one case-management system. Your team can see concerns that need review, give the next action an owner and check what happened afterwards.

For Australian emergency-service peer-support and mental-health programs

 > Reports > Cumulative Exposure

Cumulative Exposure

Aggregate exposure profiling — model output framed as a screening signal for human review, not a clinical assessment.

Screening signal — not a diagnosis. Cumulative exposure scores are model outputs based on volume, severity, and recency of attended PTE incidents. They flag members the model suggests should be reviewed — not members assessed as “at risk.” Every flagged member requires human review by a supervisor or duty officer before any welfare action. False positives and false negatives are expected; the missing-flag check below surfaces the latter.

PRIMARY · ACT NOW

CONCERNING

Are any members at acute cumulative exposure right now?

2 crossed into high in last 7 days; 0 critical and 2 high alerts active.

As of 04 Oct 2026 · Last 30 days · Compared to prior 30 days

MEMBERS THE MODEL SUGGESTS SHOULD BE REVIEWED (TOP 2, LAST 7D CROSSINGS)

High	Nguyen, L. · #40020145	crossed 0d ago	·	last incident: Self Harm (10d ago)	·	last contact: 6d ago
High	O'Brien, R. · #40018542	crossed 0d ago	·	last incident: RCR (180d ago)	·	last contact: never

Drives immediate welfare check decisions. “Last contact: never” or >14 days warrants priority outreach. Names and member numbers visible to supervisors and duty officers only.

Exposure patterns and the most recent recorded contact help authorised staff prioritise review. Actual CaseNote screen with synthetic data.

Your people provide the care. CaseNote keeps the work connected.

Give the next step an owner

After a recorded incident, a concern needs to reach someone who can respond. CaseNote keeps the handover and the next action visible.

01 Record exposure

Link an incident to the members who attended and record its tags.

02 Review the concern

Exposure indicators and alerts prompt staff to review the recorded information.

03 Assign outreach

A co-ordinator assigns a check-in to a named person with a due date.

04 Record contact

A peer records the conversation, raises concerns and documents the next step.

05 Refer when needed

A referral is reviewed and assigned, then accepted by a practitioner into care.

06 Review follow-up

Contacts, tasks and recorded outcomes help the team review follow-through.

Coordinator

Assign and track tasks for peer support, duty officer and co-ordinator staff.

New bulk tasks

New task

Pending

1

In progress

1

Overdue

1

Completed (30d)

1

Tasks needing attention

Welfare check-in with member after callout

high

Overdue

Assigned to PeerSupport User

03/10/2026

Recently completed

Last 14 days · 1 task

Follow up on outstanding supervision booking

normal

Completed

Completed by PeerSupport User · Peer Support

03/10/2026, 04:18 pm

3d

Assigned outreach and recorded progress in the co-ordinator view. Actual CaseNote screen with synthetic data.

This is an illustrative sequence. Staff decide the response and provide the support. An alert prompts review; it does not show that contact has occurred.

Built around the people doing the work

Paid staff and volunteers can be supported in the same program, with access matched to each person's responsibilities.

Program owners

Oversee referrals, assigned outreach and overdue tasks. Review recorded activity to understand where follow-up or additional support is needed.

Peer supporters

Record contacts, duration and next steps. Raise a concern for review without access to member clinical notes, assessments or treatment plans.

Clinicians

Work with assigned members using assessments, clinical notes and care plans. Accept reviewed referrals and retain clinical responsibility for the response.

My Tasks

Tasks assigned to you by a coordinator.

Open (2) Completed (1)

Welfare check-in with member after callout high Pending Overdue 1 new comment
Assigned by Admin User

Due 03/10/2026
Created 01/10/2026

Arrange debrief session for the responding crew normal In progress
Assigned by Admin User

Due 05/10/2026
Created 02/10/2026

A peer supporter's assigned tasks and their status. Actual CaseNote screen with synthetic data.

Configure the program you need

Optional modules include early warning, occupational wellbeing measures, team reporting and psychosocial hazard surveys. Availability depends on what your organisation enables.

Exposure indicators support human review. They do not diagnose a condition or determine fitness for duty. Your organisation governs permitted use and provides the care team.

See the workflow with your team

Arrange a demonstration around a handover your program wants to improve. Follow an incident through recorded exposure, assigned outreach and clinical referral using synthetic data.

Review the safeguards

A dedicated environment

Each organisation has its own application, database and master encryption key. The application and databases are hosted in Australia.

Protection for sensitive content

Sensitive identifiers and clinical content are encrypted. Role-based access restricts clinical information; protected audit records support review of access and changes.

Third-party processing and deployment settings form part of due diligence. Detailed assurance material is available for your reviewers.

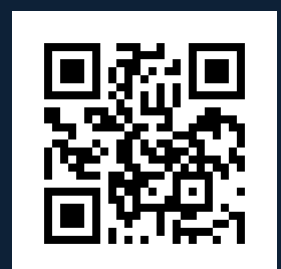
Start with a clear question

Choose a small cohort and agree response owners, access boundaries and measures such as recording effort, outreach timing and referral completion. Review privacy, security, recovery and exit arrangements before introducing real information.

Arrange a demonstration

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Scan to request a demonstration