AGED CARE SERVICES INCIDENT MANAGEMENT GUIDELINE

Target audience

This guideline applies to all Alfred Health Staff and Volunteers involved in caring for clients in our Commonwealth Home Support Program (**CHSP**) and Transition Care Program (**TCP**) services, and Associated Providers covered by the *Aged Care Act* 2024 (**Act**).

Purpose

This guideline outlines the procedures for identifying, managing, and reporting incidents including serious incidents, in accordance with the Aged Care Quality Standards and the Commonwealth's Serious Incident Response Scheme (SIRS).

This Guideline should be read in conjunction with Alfred Health's Clinical Incident Management Guideline.

Summary

Incident management is integral to risk management, continuous improvement, and the delivery of safe and quality care.

An incident as defined by the Aged Care Safety & Quality Commission (**the Commission**) is any act, omission, event or circumstance that occurs in connection with the provision of care or services that:

- has (or could reasonably be expected to have) caused harm to a client or another person (such as a staff member or visitor); or
- is suspected or alleged to have (or could reasonably be expected to have) caused harm to a client or another person; or
- Alfred Health, as the registered provider, becomes aware of and that has caused harm to a client.

The Alfred Health incident management system (IMS), known as Riskman, is used to identify, assess, respond to and record all incidents and near misses, regardless of whether they are known to have occurred or are alleged or suspected to have occurred

A subset of the incidents recorded in Riskman are reportable to the Commission under the SIRS.

Associated providers must cooperate fully with investigations and provide any information requested by Alfred Health or a regulatory authority.

GUIDELINE

1. Safety Culture

Building and maintaining a good safety culture is vital for safe and inclusive care.

A good safety culture ensures staff:

- identify incidents and near misses
- learn together to prevent incidents
- observe, report and mitigate risks
- have the confidence to record and report risks or incidents correctly
- develop continuous improvement solutions
- escalate issues.

Safety culture supports effective use of Riskman and is vital to meeting the requirements of the Serious Incident Response Scheme (SIRS).

2. How to respond to, record and report an incident when it happens

2.1 Response to an incident

If there's an incident, you must:

- take immediate action to help those involved
- examine the harm and impact on those involved - refer to the Impact Assessment Tool (ACQSC) to consider the potential or actual impacts on an individual
- make sure there are no more safety issues that need immediate attention

An investigation and/or analysis of the incident should include:

- the underlying causes of the incident
- any additional actions required to address the incident that occurred
- additional actions that reduce the occurrence of a similar incident in the future, including any systemic changes.

2.2 Recording of an incident

Report the incident in Riskman as soon as practicable.

The report should be entered by the staff member who identified/witnessed the incident, or the person delegated by the manager or senior staff member

This includes allocating an initial incident severity rating (ISR).

The incident entry will require the following information:

- Who is reporting?
- Who was affected?
- When and where the incident occurred?
- What occurred?
- What were the consequences for the client/staff?
- Immediate actions taken in response to the incident and an incident severity rating to be allocated.
- Alleged or suspected incidents must also be reported

If an incident is reportable under the Serious Incident Response Scheme (**SIRS**), you must notify the Commission.

The 8 types of reportable incidents are:

- unreasonable use of force
- unlawful sexual contact or inappropriate sexual conduct
- psychological or emotional abuse
- unexpected death
- stealing or financial coercion by a staff member
- neglect
- inappropriate use of restrictive practices
- unexplained absence.

2.2.1 Priority 1 incidents

For Priority 1 incident, as classified by SIRS, notify the Commission within 24 hours of becoming aware, (Noting: the next working day should the incident occur on a weekend or public holiday).

Examples of Priority 1 incidents include:

- a physical or psychological injury or discomfort that needs medical or psychological treatment
- unlawful sexual contact or inappropriate sexual conduct
- the unexpected death of a person using aged care
- the unexplained absence of a person receiving care.

If there are reasonable grounds for reporting the incident to the police, this is considered a Priority 1 incident.

This includes scenarios where you are aware of facts or circumstances that lead to a belief that an incident is unlawful or considered to be of a criminal nature (for example sexual assault). These incidents must also be reported to police within 24 hours of becoming aware of the incident. Reporting to police in relation to criminal conduct should occur regardless of whether the incident is alleged or suspected to have occurred. If you are in any doubt about whether an incident is of a criminal nature, make a report to the police. Police are the appropriate authorities to investigate and identify whether an incident may involve criminal conduct.

2.3.2 Priority 2 incidents

For Priority 2 incidents, notify your Manager within 5 days of the incident and notify the Commission within 30 days of becoming aware of the incident. Priority 2 incidents are all other incidents that aren't Priority 1.

2.3.3 Reporting to the Commission

You must notify the Commission about reportable incidents through My Aged Care's provider portal. Refer to Appendix A for a diagram of the workflow.

If further guidance is required, Alfred Health Legal will be contacted, in consultation with the Manager.

3. Providing support and assistance to those affected

Individuals must be informed of any incidents affecting them, be invited to participate in resolution processes, and have access to the incident management guideline. Communication must be clear, respectful, and timely using open disclosure.

3.1 Open disclosure

Open disclosure must be used when handling incidents and providing resolution

Staff should:

- Acknowledge that something has gone wrong and either apologise or express regret
- Explain the process that will be undertaken to review the incident and the response times
- Ask the client how often they would like to be contacted in relation to the incident and provide information about access to advocates
- Document that open disclosure has occurred
- Refer to Alfred Health's Open Disclosure following an Adverse Event guideline

4. Analysing incident trends and data

Reports will be used to monitor trends through Clinical Governance frameworks. These will:

- identify and address systemic issues in the quality of care provided
- identify repeated occurrences (including alleged/suspected occurrences) of similar incidents or near misses
- analyse trends and identify patterns of incidents
- provide feedback and training to staff about preventing and managing incidents
- provide information to the Commission as requested.

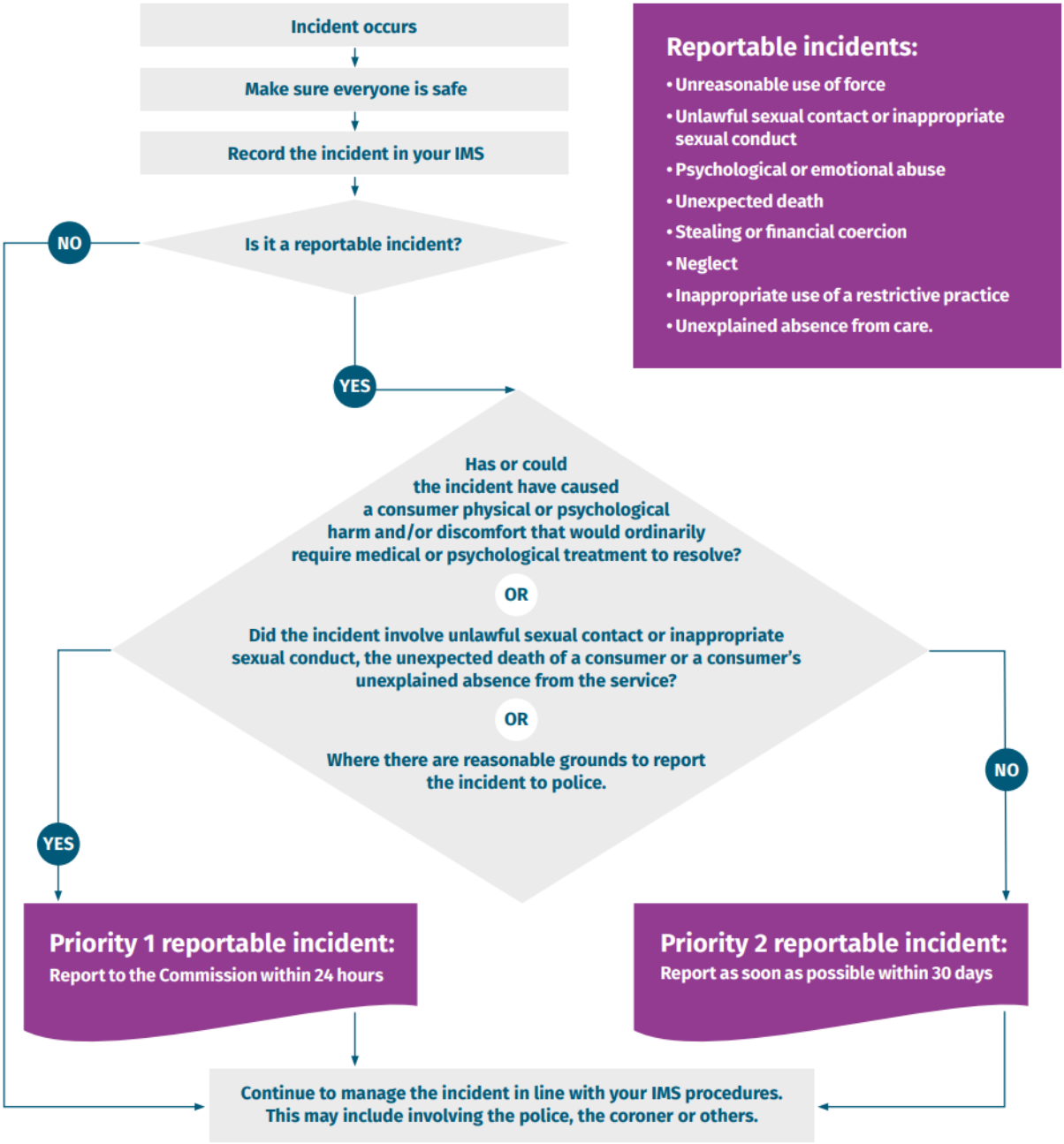
Appendix A

Australian Government
Aged Care Quality and Safety Commission

Engage
Empower
Safeguard

Reportable incidents workflow

Take the following steps when an incident occurs in your residential aged care service:



Key related documents

- Aged Care Service Provision Policy
- Aged Care Services Complaints and Feedback Management Guideline
- Alfred Health Incident Management Policy
- Clinical Incident Management Guideline
- Risk Management Policy
- Risk Management Framework and Guideline
- Statutory Duty of Candour and Open Disclosure Following an Adverse Event Policy
- Patient Complaint Management Policy
- Patient Complaint Management Guideline
- Patient Feedback

Key legislation, acts & standards:

- *Charter of Human Rights and Responsibilities Act 2006* (Vic)
- *Aged Care Act 2024* (C'wealth)

References

- SIRS provider resources | Aged Care Quality and Safety Commission
- Support tool | Aged Care Quality and Safety Commission

Keywords

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Author / Contributors

* denotes key contact

Name	Position	Service / Program
Melanie Reed*	Director of Operations	Home, Acute & Community Program
Emily Adcock	Legal Counsel	Legal Office
Narelle Best	Operations Manager	Health of Older People & Ambulatory Care
Jane Evans	Aged Care Assessment: Transition Support Lead	Health of Older People & Ambulatory Care
Melanie Hill	Senior Manager (Acting)	Community Health Programs
Ilana Hornung	Manager Business & Strategy	Home, Acute & Community Program
Haria Lambrou	Practice Leader	Caulfield Community Health Service
Emily Ratnagobal	Deputy General Counsel	Legal Office
Vanessa Robertson	Manager (Acting)	Carer Services
Janelle Russell	Manager	Transition Care Program