

Incident Management and SIRS Policy and Procedure

1. Purpose and Scope

The purpose of this policy is to provide the foundation for a transparent and coordinated approach to our overall Incident Management System, to be adhered to by all workers of Belong at Home (BaH). The term workers applies to all employees, volunteers and contractors.

2. Definitions

Incident	An act, omission, event or circumstance that has caused harm, that could have caused harm (near miss), and has occurred in connection with the provision of services or throughout the course of business operations and includes incidents where there are reasonable grounds to suspect that there may be a connection between the incident and the provision of services or business operations.
SIRS	Serious Incident Response Scheme - Compulsory reporting of serious incidents of to the Aged Care Quality and Safety Commission (ACQSC).
Contractors	Associated providers contracted to deliver care or services on behalf of BaH.

3. Policy Statement

An effective Incident Management System is a feature of safe and high-quality care and services, and an important element of quality improvement and client centred approach to aged care. Belong at Home is committed to maintaining a documented Incident Management System (IMS) that contains procedures for identifying, assessing, managing, resolving and reporting incidents. The IMS includes the identification and timely reporting and review of incidents legislated under the SIRS.

Belong at Home workers are required to report suspected or confirmed incidents without delay in line with this policy and procedure.

4. Procedure

BaH has adopted the Aged Care Quality and Safety Commission resource [Effective incident management systems: Best practice guidance](#) as the guiding document to our management of incidents. This policy does not replace this guide, rather complements it.

4.1 Identifying Incidents

Incidents may be identified internally by a worker or externally by a client, another care/ healthcare provider, family member, advocate, representative or concerned individual. All aged care workers must take prompt steps to act on safety concerns of clients and workers. All workers are required to report allegations, suspicions or concerns for investigation. The reporting of incidents also includes near misses, hazards and evidence of client decline/ deterioration for follow up.

4.2 Reporting Incidents

BaH has a “no wrong door” approach to who and how incidents are reported, however the following process outlines the organisations standard approach.

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- The Care Support Officer (CSO) Hotline and After-Hours manager are primarily used by internal workers to report incidents. After-hours contact number: 0428 947 979.
- The CSO/After-hours manager will document the incident report on behalf of the worker and gather a detailed and accurate account.
- Contractors may contact the Care Partner/Site Manager/After-hours to report incidents.
- Note types are available in Sandwai for the reporting of incidents, including "Concern with Client" and "Client Incident/Accident/Adverse Event Notification". These note types have Site Manager, Support Coordinator plus Care Partner/ CSC included to support swift review and address. Workers should report via CSO/Afterhours, and only if not able to contact either, they may log an incident report form via Sandwai.
- Once reported into Sandwai, the reviewing Site Manager/ Support Coordinator or Care Partner/ CSC should review, to confirm the immediate safety needs of the client/worker has been addressed and further reporting requirements such as SIRS reporting or escalation to the Executive Leadership Team due to severity/ consequences (in line with the Severity and Escalation Protocol).

4.3 Actioning Incidents

- The actioning CSO/ CSC and/or Site Manager must ensure the immediate safety of all involved.
- Support should be offered and provided, it should never be assumed that this will be provided by a another party (i.e. clients family) or that the incident does not require any support.
- When responding to an incident, in addition to ensuring the current safety and wellbeing in involved person/s, it is essential to consider other factors related to the incident.
- Typical actions may include:
 - asking affected people if they're okay;
 - seek timely and appropriate medical or psychological treatment for affected people;
 - shape your response to consider the views of all affected people;
 - stop, prevent and reduce the risk of an incident happening again;
 - contact family members or representatives as soon as it's practical; and
 - help those affected access advocates or support services.
- Determine if the incident is SIRS reportable and notify authorities in line with requirements.

4.4 Recording Incidents

- Sandwai (client incidents) and Employment Hero (worker injuries) are the initial location for reporting an incident, and the incident investigation is recorded in Logiqc.
- CSO/After-Hours Manager are primarily responsible for logging to Logiqc. Incidents reported in Sandwai via Admin/Care Partner/CSCs/Site Managers may be entered into Logiqc by the CSO. Where a Logiqc has not been created, the Site Manager must ensure this is logged.
- Privacy requirements must be met in the recording and investigation of incidents.
- Key details that are captured in the Logiqc record include:
 - details of the incident/allegation including immediate and further response;
 - people involved;
 - investigation and analysis (or completion of the assigned Response Protocol); and
 - implementing changes and improvements.

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4.5 Investigating Incidents

BaH follows the principles of open disclosure following incidents. See the Open Disclosure Policy. When investigating any incident, the following factors must be considered:

- the severity of the incident;
- the impact of the incident on the client (and carers) confidence and safety;
- the probability of recurrence or history of similar incidents in the past;
- whether it involves people who have been involved in other incidents in the past;
- the complexity of the incident (for example, where the facts are in question or the underlying cause is unclear);
- views of the affected people (including any clients, families/representatives); and
- if the incident is a reportable incident under the SIRS.
- An investigation and/or analysis may consider:
 - the underlying causes of the incident;
 - additional actions required to address the incident that occurred; and
 - additional actions that reduce the occurrence of a similar incident in the future.

4.6 Improving/ Implementing Changes

BaH leadership may undertake remedial action to prevent similar incidents from recurring in the future. Whenever an incident occurs, the accountable manager should consider whether:

- it may have been prevented (or the severity lessened) by action taken by someone at BaH;
- there is an ongoing risk to clients, visitors, workers or others following the incident;
- actions can be undertaken or ceased to prevent or minimise the risk of a recurrence; and
- reporting the outcome of the investigation to the relevant stakeholders such as the client.

Remedial actions may include:

- providing or mandating individual and/or service-wide training or re-training;
- making changes to BaH's organisational or clinical governance frameworks;
- developing or reviewing the BaH's procedures to support workers to manage risks and issues;
- making changes to the service environment or equipment used to provide care and services;
- taking actions to promote a safe culture of care;
- making additional workers available to assist clients with certain activities;
- seeking specialist advice and/or implementing strategies to manage client behaviours; and
- updating care planning documentation to address the cause or impacts of the incident.

It may also be appropriate to take disciplinary actions with respect to workers (i.e. performance management, standing down a worker pending investigation or terminating a worker's employment).

4.7 Closing the Loop

Logiqc will enable the collection of data and other information relating to incidents supporting the accountable executive/s to:

- identify and address systemic issues in the quality of care provided;
- identify repeated occurrences (including alleged/suspected occurrences) of similar incidents;
- analyse trends and identify patterns of incidents (e.g. behaviours);
- provide feedback and training to workers about preventing and managing incidents;
- provide information to the Commission as requested; and
- develop reports for the Board and relevant BaH committees.

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4.8 Serious Incident Response Scheme (SIRS)

The SIRS aims to prevent and reduce incidents of abuse and neglect in Commonwealth funded aged care services. The SIRS requires providers notify all reportable incidents that occur or are alleged/suspected to have occurred to the ACQSC (and the police where there are reasonable grounds). The 8 types of reportable incidents under the SIRS include:

- unreasonable use of force (i.e. hitting, pushing, shoving, rough handling);
- unlawful sexual contact or inappropriate sexual conduct;
- neglect (i.e withholding person care, untreated wounds, insufficient assistance during a meal);
- psychological or emotional abuse (i.e. yelling, name-calling, ignoring, threatening gestures);
- unexpected death (i.e. the provider didn't take reasonable steps to prevent a death);
- stealing or financial coercion by a worker;
- inappropriate use of restrictive practices; and
- unexplained absence from care (i.e. missing clients during outing).

5. Responsibilities

All Workers must report incidents/hazards/concerns in line with this policy and procedure and complete any assigned training on incidents / SIRS but the following have specific responsibilities:

Board of Management

- Promoting a culture of transparency, safety and responsiveness regarding incidents, review of data/ reports and communicating with the CEO and EMT on Continuous Improvement (CI).

Executive Management Team (EMT)

- Maintain a robust IMS. Monitor and evaluate the effectiveness of the IMS.
- Review incident data/ investigations outcomes and implement CI activities.
- Manage the intake and review of Associated Providers including providing information on their responsibilities to report incidents to BaH.

Quality and Client Experience Manager

- Ensure incidents are recorded, investigated, and resolved in a timely and transparent manner.
- Ensure compliance with legislative and regulatory requirements.
- Oversight of SIRS completion with relevant Site Manager and Care Partner/CSC.
- Report trends, risks, and CI opportunities to the Exec/Board and relevant stakeholders.

People and Culture Manager

- Management and oversight of a training program that includes information on the IMS/SIRS.

Leaders and Managers / Care Partners/ CSC's

- Facilitate open disclosure and implement actions to prevent recurrence.
- Ensure incidents are recorded, investigated, and resolved in a timely and transparent manner.
- Regularly review and report incident data to identify trends and implement improvements.

6. Related Documents

- Strengthened Aged Care Standards 2.3, 2.5, 2.9, 3.3 and 5.4.
- Open Disclosure Policy and Procedure
- Quality and Clinical Governance Framework
- Severity and Escalation Protocol
- Code of Conduct for Aged Care
- Statement of Rights

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