

Incident Management Policy

About this Policy

This policy applies to all staff, contractors and subcontractors involved in the management of incidents related to the care and services of HomeMade customers. The purpose of this policy is to ensure that HomeMade safely and effectively manages all incidents and minimises the impact of any incidents on customers and staff, contractors, subcontractors or other persons such as visitors. It is also to provide the reader with information about how HomeMade identifies, assesses, responds to and records incidents so that we can be as transparent as possible about our actions.

It is also a requirement of the Aged Care Quality Standards that aged care providers have effective risk management systems and practices in place to manage and minimise the risk of harm to Customers.

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Aim

HomeMade is committed to delivering services that are responsive to the needs of its customers, provides adequate safeguards and serves the community in which it operates. This policy provides guidance to anyone who wishes to notify us or the Aged Care Quality and Safety Commission (**Commission**) of an incident. It sets out the approach we take when responding to such matters, the principles we apply and highlights our commitment to consistency, quality and continuous improvement.

Introduction / Background

An incident¹ 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 customer or another person (such as a staff member or visitor) or
- Is suspected or alleged to have (or could have been reasonably be expected to have) caused harm to a customer or another person or
- The provider becomes aware of, and that has caused harm to a customer.

Incidents must be managed through an effective incident management system. This incident management system must:

- Identify incidents that caused harm to a customer or other person
- Identify incidents that may have caused harm (near miss) to a customer or other person.

The incident management system must be risk-based and used to:

- Identify an incident or a near miss when it occurs
- Assess an incident or a near miss and respond to the needs of Customers and others that have been impacted by the incident
- Respond to an incident or a near miss through an investigation, review and analysis to inform CI and minimise future occurrence. A root cause analysis approach fulfils this objective.
- Record all incidents or near misses in a manner that supports secure information management and ease of information retrieval that occur during the delivery of care and services to a customer.

¹ *Effective incident management systems: Best practice guidance, Aged Care Quality and Safety Commission December 2022*

The principles of Open Disclosure underpin the management of incidents at HomeMade. Personal information collected in relation to an incident is managed in accordance with **Section 62.1** of the *Aged Care Act 1997 (Cth)* (**Act**).

Policy Statements

HomeMade we foster a safety culture through leadership and an effective risk management system that includes an incidents management system. HomeMade seeks to provide a safe environment for customers, employees, partners in care, volunteers, contractors and others involved in an incident.

HomeMade has an effective incident management system in place by which it identifies, assesses, responds to and records incidents.

HomeMade will comply with all legislative and regulatory obligations in relation to the SIRS. As the Approved Provider, HomeMade will fulfil its obligation to:

- Report Priority 1 and Priority 2 incidents to the Commissioner within specified periods of time
- Take action in relation to reportable incidents
- Authorise the provision of information relating to reportable incidents to the Minister, the Quality and Safety Commissioner or other specified bodies

How to notify an incident to HomeMade

You can notify an incident to HomeMade in one of the following ways:

- Via email to our incidents and complaints team:
incidents@homemadesupport.com.au or
support@homemadesupport.com.au
- By calling us on 1300 655 688
- By contacting your Support Partner directly

Before notifying us of an incident, it is important to consider who else you should notify of your incident.

HomeMade may also be required to notify your incident to other parties in accordance with mandatory reporting requirements in the *Aged Care Quality Standards* and the Serious Incident Response Scheme.

Incident Management and the Serious Incident Response Scheme

HomeMade is required to comply with legislative and regulatory requirements in relation to the Serious Incident Response Scheme (**SIRS**).

The aim of SIRS is to help prevent and reduce the risk and occurrence of incidents of abuse and neglect of older Australians receiving Commonwealth-subsidised aged care and services (Commission).

SIRS identifies eight types of reportable incidents:

1. **Unreasonable use of force** – for example, hitting, pushing, shoving, or rough handling a customer
2. **Unlawful sexual contact or inappropriate sexual conduct** – such as sexual threats against a customer, stalking, or sexual activities without Customer consent
3. **Neglect of a Customer** – for example, withholding personal care, untreated wounds, or insufficient assistance during meals
4. **Psychological or emotional abuse** – such as yelling, name calling, ignoring a customer, threatening gestures, or refusing a customer access to care or services as a means of punishment
5. **Unexpected death** – where reasonable steps were not taken by the provider to prevent the death, the death is the result of care or services provided by the provider or a failure by the provider to provide care and services
6. **Stealing or financial coercion by a staff member** – for example, if a staff member coerces a customer to change their will to their advantage, or steals valuables from the Customer
7. **Inappropriate use of restrictive practices** – where it is used in relation to a customer in circumstances such as:
 - i. where a restrictive practice is used without prior consent or without notifying the Customer’s representative as soon as practicable
 - ii. where a restrictive practice is used in a non-emergency situation or
 - iii. when a provider issues a drug to a customer to influence their behaviour as a form of restrictive practice
8. **Missing Customer** – this occurs when the Customer is absent during an episode of care. This may be during an outing or a shopping event.

Reportable Incidents are classified as either Priority 1 or Priority 2 incidents and are reported to My Aged Care. If either of these incidents occurs during your support session, you must notify HomeMade’s Incidents & Complaints Team **immediately or as soon as possible**.

HomeMade must comply with strict requirements when reporting SIRS incidents to My Aged Care. For a Priority 1 Reportable Incident, we must notify the Commission within **24 hours** of becoming aware of the incident. Where required, these incidents must also be reported to the Police.

A Priority 1 reportable incident is an incident:

- That is an unexpected death of a customer
- That caused (or reasonably have been expected to cause) a customer physical or psychological injury or discomfort that requires medical or psychological treatment to resolve
- Where there are reasonable grounds to report the incident to Police
- Involving unlawful sexual contact or inappropriate sexual conduct inflicted on a customer or
- Where a customer goes missing during provision of home services.

A Priority 2 Reportable incident is an incident that does not meet the criteria for a Priority 1 reportable incident but meets the criteria of the eight types of reportable Incidents. These incidents must be reported to My Aged Care by HomeMade for the Customer within **30 days** of becoming aware of the incident.

The [SIRS decision support tool](#) can be used to help determine the classification of a reportable incident.

Obligations

The Serious Incident Reporting Scheme outlines compulsory obligations for an Approved Provider to fulfil. Obligations are as detailed in relevant Legislation and Regulations (Commonwealth, State and Territory).

As the Approved Provider, HomeMade fulfils its obligation to:

- Report Priority 1 and Priority 2 incidents to My Aged Care within the time specified
- Take action in relation to reportable incidents
- Authorise the provision of information relating to reportable incidents to the Minister, the Quality and Safety Commissioner or other specified bodies.

Other actions may include:

- Providing an older person with information regarding the use of an advocate (including an independent advocate) in relation to an investigation into the reportable incident and/or

- Arranging for, and covering the cost of, an independent investigation into the reportable incident within a specified period and
- Providing a copy of any report of the independent investigation to the Quality and Safety Commissioner.

Disclosures qualifying for protection

Section 54.4 of the Act provides protections for a disclosure of information by a person or body who is or was any of the following:

- An Approved Provider
- An Approved Provider's key personnel
- Staff member
- A care recipient of an approved provider, or a family member, carer, representative, advocate (including an independent advocate) of the recipient, or another person who is significant to the recipient.
- a volunteer who provides care or services for an Approved Provider.

The disclosure qualifies for protection if:

- The disclosure is made to one of the following:
 - The Quality and Safety Commissioner
 - An Approved Provider
 - An Approved Provider's key personnel
 - A staff member of an Approved Provider
 - Another person authorised by an Approved Provider to receive reports of reportable incidents
 - If the disclosure is reported to another person in accordance with the *Quality of Care Principles*—that person
 - A police officer, and
- The discloser provides their name, has reasonable grounds to suspect that a reportable incident has occurred and the disclosure is made in good faith.

If a person makes a disclosure under **Section 54.4**, then that person making the disclosure is protected under **Section 54.5** as follows:

- from any civil or criminal liability for making the disclosure
- no contractual or other remedy may be enforced or contractual or other right may be enforced against the person

- will have qualified privilege in proceedings for defamation relating to the disclosure
- a contract to which the person is a party may not be terminated on the basis that the disclosure constitutes a breach of the contract
- is not liable to an action for defamation relating to the disclosure

As the Approved Provider, HomeMade will ensure it implements and maintains an Incident Management System (IMS) that complies with *Quality of Care Principles (2014)* and any other requirements for managing or preventing incidents specified in the *Quality of Care Principles (2014)*.

Notifications To the Police

For Priority 1 incidents, there is also a requirement to notify the Police where there are reasonable grounds to do so, within **24 hours of becoming aware of the 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).

Reporting to the 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.

For further information in relation to SIRS in Home Service, including examples of reportable incidents, please refer to the following website:

<https://www.agedcarequality.gov.au/sirs/sirs-home-services>.

If you have a SIRS enquiry, you can:

- Call the Commission on 1800 951 822 between 9:00 am and 5:00 pm (AEST) Monday to Friday, or between 8:30 am and 5:00 pm (AEST) Saturday and Sunday
- Email the Commission at sirs@agedcarequality.gov.au

Roles And Responsibilities

It is the responsibility of **all** staff to **identify, manage and resolve** incidents and to prevent incidents from occurring.

HomeMade has accountability for the care provided to older persons and the basic suitability of their key personnel.

As an Approved Provider, HomeMade will:

- Consistently promote a culture that encourages staff/contractors to raise suspicions, concerns or incidents when they occur
- Prevent and manage incidents, ensuring older person safety and wellbeing
- Report serious incidents in a timely manner and
- Use incident data to drive continuous quality improvement.

For the purpose of notifying reportable incidents, HomeMade will ensure that staff who become aware of a reportable incident notify one or more of the following people as soon as possible:

- Key Personnel
- Staff member's supervisor or manager
- The person who is responsible for notifying reportable incidents to the Commission.

All HomeMade staff are required to carry out their duties in accordance with their job descriptions, with the knowledge and skills attained as part of their profession or any qualifications and in accordance with any applicable codes of conduct, practice or standards expected by HomeMade. Staff are expected to engage with Customers appropriately and respectfully and to maintain professional boundaries.

Staff that do not have a universal professional code of practice or standards tied to their role, e.g. personal care workers, are subject to codes of behaviour or practise relevant to their role under their terms of employment.

Staff who are subject to professional standards (e.g., medical, nursing and allied health professionals), will have a higher threshold of professional training and qualifications, knowledge and skills and scope of practice and hence a higher threshold of conduct is expected.

The content of professional standards varies but may relate to:

- The manner in which a customer is treated (including their rights to privacy and dignity);
- The need for tailored, frequent and clear communication with a customer.
- Ensuring informed consent and good record keeping.
- Providing culturally appropriate care; and

- Providing quality care and services

Alignment to the Aged Care Quality Standards and Incident Management

Standard	Requirements
1 Customer dignity and choice	(3) (a) (b) (c) (d) (e) (f)
2 Ongoing assessment and planning with Customers	(3) (a) (b) (c) (d) (e) (f)
3 Assessment and planning	(3) (a) (b) (c) (d) (e) (f)
4 Services and supports for daily living	(3) (a) (b) (c) (d) (e) (f) (g)
5 Organisations service environment	(3) (a) (b) (c)
6 Feedback and complaints	(3) (a) (b) (c) (d)
7 Human resources	(3) (a) (b) (c) (d) (e) (f)
8 Organisational governance	(3) (a) (b) (c i, ii, iv, v vi) (d i, iii)

How To Notify Us

You may report an incident to us in the following ways:

- [Feedback & Complaint Form](#) submitted via our website
- Telephone call to our Customer Support Team 1300 655 688
- Email to incidents@homemadesupport.com.au
- Email to feedback@homemadesupport.com.au

Whilst we accept anonymous incidents, if we cannot identify you, it often makes it difficult for us to investigate and provide feedback.

Your Privacy

We protect your identity where practical and appropriate. Personal information that identifies you will only be used or disclosed in accordance with relevant privacy laws or our Privacy Policy. There are some limited circumstances where we may disclose your personal information without your consent. This may include matters involving allegations of violence, exploitation, neglect, abuse and sexual misconduct, which may be reported to the police and/or external regulators. For further information please refer to our [Privacy Policy](#).

What You Can Expect from Us

Our approach to incidents is governed by the following key principles:

1	Accessible	We provide a framework that is easy to understand and accessible to everyone. If you would like another person or organisation to assist you with an incident, we are happy to communicate with whoever you chose to represent you (e.g. a family member, advocate, legal or community member, etc.).
2	Responsive	There is a clear process for the timely handling of incidents and you are kept informed of our progress.
3	Respectful	You are treated with dignity and respect and listened to with empathy and compassion.
4	Fair	We approach each matter in an equitable, objective and unbiased manner. We act with integrity, transparency, and accountability.
5	Flexible	We are people centred. Our process is flexible enough to respond to individual needs. Our people are empowered to act promptly and with as little formality as possible.

How Are Incidents Managed?

Assessment & Initial Response	Upon receipt, incidents are assigned an impact level on a scale of 1 (low) to 4 (major), depending on the estimated severity. Immediate actions to mitigate harm may also be required, including providing support to those involved, notifying emergency services in the case of an emergency (e.g. police, fire, ambulance, etc).
Acknowledgement	We will acknowledge receipt of all incidents within two-working days and those with an Impact Level of 3 (high) or 4 (major) will be acknowledged within 8 and 4 hours respectively.
Actions & Decisions	We will develop a plan of action based on the Impact Level and the nature of the incident, which may include the need for further dialogue with involved parties, the offer of trauma counselling or other support, an apology, escalation to HomeMade management, notifying external bodies, suggested actions to prevent recurrence of the incident, reminding users of HomeMade's Code of Conduct / Terms of Use, suspending or removing a user from the platform.
Mandatory Reporting	It is a requirement by law that some incidents are reported to the Aged Care Quality and Safety Commission. Details of the types of incidents that require reporting to each commission can be found here: Aged Care Serious Incident Reporting Scheme .
Closure	If appropriate, we will report the outcome of the incident to the reporting party and any other affected persons before closure.
Continuous Improvement	We are constantly improving our existing processes, policies, and products by using incident data to inform our future decisions and implementations.

Incident Management System (IMS)

HomeMade's IMS sets out the roles and responsibilities of staff members in identifying, managing and resolving incidents and in preventing incidents from occurring.

HomeMade requires that all staff are aware of the IMS and understand their responsibility to comply with this system's requirements.

HomeMade includes the minimum expectation for incident management training, including the use and compliance with the IMS, at least during orientation and then annually according to **Section 15MD (3)** of the *Quality of Care Principles (2014)*. The IMS must include requirements for the provision of training to staff in the use of, and compliance with the IMS.

Reporting Obligations

HomeMade provides its staff with training in how to recognise a situation that may need to be notified to the Commission or another responsible body and know how to respond and make notifications.

In addition to managing incidents, HomeMade reports serious incidents involving older people to the Commission and police where the incident is of a criminal nature or an unexpected absence.

This reporting includes incidents that occur or are alleged or suspected to have occurred and will include incidents involving a care recipient with cognitive or mental impairment (such as dementia).

Incidents involving older persons who are also participants of the National Disability Insurance Scheme (NDIS) must also be reported to the Quality and Safeguards Commission (NDIS Commission).

Record Keeping Requirements including Privacy and Confidentiality

HomeMade will keep a record in relation to each incident that occurs in the service, regardless of whether it is a reportable incident. HomeMade will assure the secure storage of these records in accordance with our *Privacy Policy*.

This includes incidents investigated and recorded in compliance with incident management requirements. HomeMade will review and collate data from the IMS to enable the review and analysis of recurrent issues, and continuous improvement, the prevention and management of incidents.

HomeMade will ensure that these records are available to the Commission upon request. Privacy and confidentiality are maintained when reports are required to be shared with the Commission or any other agency.

Continuous Improvement

HomeMade collects information relating to incidents to ensure continuous improvement in the prevention and management of incidents, including:

- identifying and addressing systemic issues in the quality of care provided and
- provision of feedback and training to staff about the prevention and management of incidents

HomeMade regularly reviews this information to assess the effectiveness of prevention and management of incidents and determine what, if any, actions could be taken to improve our approach.

HomeMade undertakes any actions identified to ensure continuous improvement.

What If You Are Still Not Satisfied with The Outcome of An Incident?

You may consider using our internal appeals process. Appeals are escalated to, reviewed by, and determined by management. Appeals need to be submitted in writing to: feedback@homemadesupport.com.au.

The appeal submission must state the reason(s) you are appealing the decision or outcome and provide the complaint case reference number (if this has been provided to you). The time limit for lodging an appeal is three months from the original decision or outcome. Appeals are determined within 21 days of the date of submission, and you will be notified in writing of the outcome. The Board reviews all appeals on a regular basis.

If you remain unsatisfied with the outcome following the conclusion of the appeals process, then you may wish to refer the matter to an appropriate external body such as:

- Aged Care Quality & Safeguards Commission Ph: 1800 951 822 Web: www.agedcarequality.gov.au
- Health and Community Services Complaints Commissioner in your State or Territory.

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Relevant Legislative / Compliance Items

Aged Care Quality Standards 2019

Aged Care Act 1997 (Cth)

Aged Care Quality and Safety Commission, Rules 2018

Charter of Aged Care Rights 2019

Privacy Act 1988 and Privacy Principles

Workplace Health & Safety Act 2011

Workplace Health & Safety regulations 2012

Various State and Territory Legislation and Regulations

References

Aged Care Quality and Safety Commission (2019) Aged Care Quality Standards and Guidance Material

Aged Care Quality and Safety Commission (2019) Charter of Aged Care Rights (under User Rights Principles 2019)

Aged Care Quality and Safety Commission (2019) Glossary of Terms

Aged Care Quality and Safety Commission (2019) Language Aged Care Quality and Safety Commission Glossary

Aged Care Quality and Safety Commission Rules

[Aged Care Quality and Safety Commission \(2021\) Effective IMS Guidance](#)

[Aged Care Quality and Safety Commission \(2021\) Recording Incidents in an Incident Management System](#)

[Aged Care Quality and Safety Commission \(2021\) Reportable Incidents Workflow](#)

[Aged Care Quality and Safety Commission \(2021\) Reporting Serious Incidents - Using a Problem Solving Approach to Enhance Effective Incident Management](#)

Anchor Excellence Fact Sheets (2020) Anchor Excellence High Impact Risk

Assessment-Elders (HiRA-E) (2020)

Australian Health Practitioners Registration Agency & International Council of Nurses (2018)

Australian Health Practitioners Registration Agency (2016) Registered Nurse Standards for Nursing Practice

Australian Health Practitioners Registration Agency (2016) Registered Nurse Standards for Nursing Practice Fact Sheet

Australian Health Practitioners Registration Agency (2018) Nursing and Midwifery Board Code of Conduct

Australian Health Practitioners Registration Agency (2018) Nursing and Midwifery Board Code of Conduct

Australian Health Practitioners Registration Agency (2020) Decision-making framework summary Nursing

NSW Health Policy Directive PD2005_234, Effective Incident Response Framework for Prevention and Management in the Health Workplace

NSW Health Policy Directive PD2013_050, Workplace Health and Safety: A Better Practice Guide

Nursing and Midwifery Board Code of Ethics for Nurses

Pharmacy Board of Australia (2014) Code of Conduct for Pharmacists

Various State medication and poisons legislation and regulation

Document Control

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