

Incident Management and Reporting Policy Template

Purpose:

To ensure that all incidents, near misses, and hazards within the aged care organisation are promptly reported, investigated, managed, and reviewed in accordance with legal, regulatory, and organisational requirements, promoting continuous improvement and resident safety.

Scope:

Applies to all staff, contractors, students, and volunteers in all areas of the organisation who identify, witness, or are involved in an incident or near miss affecting consumers, staff, visitors, or operations.

Policy Statement:

The organisation will:

- Maintain an effective incident management system that ensures timely reporting, investigation, documentation, and feedback on all incidents.
- Comply with the Serious Incident Response Scheme (SIRS) reporting requirements under the Aged Care Act 1997.
- Foster a culture of transparency, learning, and accountability to prevent recurrence.
- Support affected individuals and ensure confidentiality throughout all stages of incident handling.

Legislative Context:

- Aged Care Act 1997 (Cth)
- Quality of Care Principles 2014
- Aged Care Quality Standards (Standard 2 – The Organisation; Standard 3 – The Care & Service)
- Work Health and Safety Act 2011 (Cth)
- Serious Incident Response Scheme (SIRS)
- Privacy Act 1988 (Cth)

Definitions:

- **Incident:** An event or circumstance that resulted, or could have resulted, in unintended harm.
- **Near Miss:** An event that did not cause harm but had the potential to do so.
- **SIRS Incident:** A reportable event under the Serious Incident Response Scheme, including abuse, neglect, or unexplained absence.
- **Investigation:** A structured process to determine contributing factors and identify preventive strategies.

Key Principles:

1. Immediate action is taken to ensure safety and mitigate further harm.
2. All incidents and near misses must be reported within designated timeframes.
3. Investigations are blame-free, fair, and focused on system improvement.
4. Findings lead to documented corrective actions and continuous learning.
5. Communication with residents, families, and stakeholders is open and respectful.

Responsibilities:

- **Approved Provider / Board:**
Review serious incidents and ensure compliance with reporting and review obligations.
- **Facility Manager:**
Ensure the incident management system is implemented, monitored, and reviewed.
- **Quality & Compliance Manager:**
Investigate trends and prepare incident data reports for continuous improvement.
- **Supervisors and Care Staff:**
Report and document all incidents immediately.
- **All Staff and Volunteers:**
Participate in incident prevention and cooperate with investigations.

Procedures:

1. **Identification:** Recognise an incident, hazard, or near miss and take immediate safety measures.
2. **Notification:** Report all incidents promptly using the organisation's incident reporting form or digital system.
3. **Recording:** Log the event in the incident management system, noting date, time, persons involved, and description.
4. **Investigation:** Conduct root cause analysis; involve clinical teams or external agencies as appropriate.
5. **Corrective Actions:** Implement actions to address contributing factors and prevent recurrence.
6. **SIRS Reporting:** Submit mandatory SIRS reports within required timeframes (24 hours for Priority 1 incidents).
7. **Feedback and Communication:** Notify residents and families where applicable and provide updates on outcomes.
8. **Review:** Use incident data for monthly quality meetings and organisational learning.

Investigation and Follow-Up:

- Each incident must be analysed to determine whether policies, procedures, or environmental factors contributed.
- Lessons learned inform policy reviews, staff training, and system improvements.
- Corrective actions are monitored until resolved.

Monitoring and Review:

- Incident data reviewed monthly for trends and corrective effectiveness.
- Policy reviewed annually or after major system changes.
- Compliance audits conducted in line with Aged Care Quality Standards.

Associated Policies:

- Risk Management Policy
- Feedback and Complaints Management Policy
- Emergency and Disaster Management Policy

- Work Health and Safety Policy
- Behaviour Support and Restrictive Practices Policy

Evidence and Records:

- Incident reports and investigation records
- Corrective action logs and audit results
- SIRS notifications and acknowledgements
- Staff training and competency records

Policy Control:

Version	Effective Date	Review Date	Policy Owner	Approved By	Status
1.0	20 January 2026	20 January 2027	Quality & Compliance Manager	Approved Provider Board	Draft

Compliance Summary:

Entity Type	Entity Name	Completion Rate	Status
Policy	Incident Management and Reporting Policy	100%	FULLY COMPLIANT (100%)