

### **Policy Purpose**

The purpose of this policy is to outline the rules, roles, and responsibilities for managing incidents across Home & Community Services (HCS).

## **Scope & Applicability**

This policy applies to all Catholic Healthcare Home & Community Services staff, external brokerage agencies, and stakeholders.

### **Definitions**

- An incident is any unplanned occurrence resulting in or with the potential to result in loss, damage or injury. Examples include; a client who has absconded or is missing, stolen or damaged property, or aggressive behaviour from a client, family or staff member. Incidents include hazards, near misses and injuries.
- A hazard is a source or situation with a potential for harm in terms of; human injury or ill health, damage to property, damage to the environment, or a combination of these. Many hazards can be fixed immediately by staff. If hazards are unable to be removed, they should be reported so that they can be assessed, and appropriate corrective action taken to reduce the risk they present.
- A near miss is an event that could have had adverse consequences but did not. An example would be slipping on a wet floor but not actually falling over.
- Injury is damage or harm done to or suffered by a person or thing. Examples include skin tear or sprain.
- A Reportable Incident is an incident that must be reported to the program funding body or another external body. For example, allegation of abuse or client death. See Reportable Incidents Policy for more details.
- Open Disclosure Refers to open communication when something goes. The elements include:
  - Identify when something goes wrong
  - Address immediate needs and provide support
  - Acknowledge and apologise or express regret
  - Find out and explain what happened
  - Learn from the experience and make improvement
- A **Risk Assessment** is an assessment that is conducted on every incident which identifies its severity level and the timeframe for actions. Refer to the Risk Assessment Matrix.

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## **Policy**

- All Catholic Healthcare Home & Community Services staff, external brokerage agencies and other stakeholders are responsible for reporting incidents.
- Incidents must be reported immediately via the Customer Service Centre free call number 1800 225 474 or logging an incident report through the Incident Register on SharePoint. Staff can access the Customer Service Centre using the staff number 8878 5910.
- The Catholic Healthcare Home & Community Services incident management system is oriented towards learning from previous incidents to reduce the risk of them occurring again both on an individual client/staff level and organisational wide.
- Catholic Healthcare is committed to an open disclosure approach when something goes wrong. Refer to CHL's Open Disclosure Policy. We demonstrate open disclosure by:
  - Identifying when something goes wrong
  - Addressing immediate needs and provide support to clients and their carers
  - Acknowledging and apologising or expressing regret
  - Finding out and explaining what happened
  - Learning from the experience and making improvements
- Investigation of Incidents must be initiated within 24 hours of the incident being logged. For Medication, Falls and Non-Response to a scheduled visit incidents, investigation and action must be taken immediately to reduce the risk of the incident, these should be resolved within 24 hours.
- Where a staff member incurs an injury where they will require medical attention (either through a doctor or hospital), the staff member must follow the Staff Work Injury Line process, this is available on Connect page. In these circumstances, the employee must contact the Staff Injury Hotline on 1300 303 952.
- Incidents must be logged using objective language and follow the Catholic Healthcare Home & Community Services Client Documentation Policy.
- Regional Managers monitor trends in service incidents on a monthly basis. These are reported at the Quality & Compliance 365 meeting that is scheduled each month. Client incident trends are to be tabled at Regional Care Management Meetings for discussion.
- The reporting, investigation and management of incidents must follow the Catholic Healthcare Home & Community Services Incident Reporting and Management Procedure. Incidents are to be investigated and where possible closed within 2 weeks of the incident being logged.
- Regional Managers are responsible for ensuring reportable incidents are identified and reported to the correct external body. See Reportable Incidents Policy for more details.

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### **Procedures**

- All incidents are logged in the centralised location on SharePoint so that:
  - o Incidents can be viewed and reviewed as appropriate, strategies implemented to minimise risk and ensure safety and wellbeing of clients and staff.
  - o Efficient and effective way to provide documentation re: risk management for insurance and external audit/reviews.
  - o Formal notification to all stakeholders to ensure timely documentation, stakeholder notification, investigation and actions required.

#### Reporting an incident

- All incidents that occur at work, as well as on the way to and from work, must be reported immediately. This includes hazards, near misses, injuries, and reportable incidents. Staff who sustain an injury must also report immediately to the Staff Injury Hotline.
- o Incidents are to be reported to the Customer Service Centre who will register the incident through the SharePoint Incident Management System and document the person responsible for investigation and follow-up. Staff with network access can also self-enter incidents into SharePoint directly. Once a client related incident is logged, the incident must also be documented as an interaction in the client's ORCA file including documenting the incident number.
- o Information recorded is to be factual, including what led to the incident, those involved, equipment and timelines.
- o Documenting the incident must occur as close to the time of the incident to ensure a true and accurate account.
- When an incident is logged, it is the responsibility of the person reporting to consider if the incident falls into the programs Reportable Incidents, and if so, ensuring the Regional is notified immediately (see Reportable Incidents Policy for more information).

#### • <u>Investigation</u>

- The management of an incident must include an investigation where the cause and/or contributing factors of the incident are identified and corrective actions are identified and put in place to prevent or reduce the risk of harm and/or the incident occurring again. An incident cannot be closed in the system until the corrective actions have been put in place and they have been confirmed as actively reducing the incident risk.
- o The investigation and management of incidents falls to the manager of the staff or client involved. Where both a client and staff are involved, managers must work together to

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investigate the incident objectively and ensure corrective actions are taken that reduce the risk for both the client and staff members.

 Where the investigation of an incident identifies training or competency renewal for staff, this must be documented in the staff members personnel file and the refresher session organised.

#### • Monitoring

- o The Compliance Manager can provide support and assistance for the logging, investigation, and management of incidents.
- o Managers are responsible for monitoring their services incidents and providing localised information sessions or briefings based on any localised trending data.
- Regional Managers or their delegate are responsible for monitoring and reviewing incidents on the Community Services Dashboard on a weekly basis. This is to ensure actions are updated on the Incident Management System and provide support to staff where needed.

#### Analysis

- o Manager, Compliance is responsible for preparing monthly reports for the General Manager.
- Regional Managers are responsible for reviewing their monthly data and conducting localised analysis based on their results.
- o Analysis of incident data assists with the identification of trends in client outcomes and risk management and identifying areas for improvement that gets documented in Monthly Reports. This analysis is tabled at the Quality and Compliance 365 meeting.

### **Review History**

Date of update	Outline of change
September 2011	Created
March 2020	Version 5
November 2021	Version 6
January 2022	Version 7
January 2025	Due for Review

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### **Related Policies & Documents**

#### Related Policies:

- HCS Client Documentation Policy
- HCS Client Emergency Plan Policy
- HCS Reportable Incidents Policy
- HCS Incident Reporting and Management Procedure
- HCS Protecting Vulnerable Persons Policy
- CS Risk Management Policy
- CHL Open Disclosure Policy (in development January 2022)

## Key words for search

Incident, hazard, injury, near miss, reporting, risk reduction, investigation, continuous improvement.

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