

# Policy C12 - Serious Incident Response Scheme (SIRS) – Aged Care

Scope Home Access has an incident management system that complies with the requirements under the Aged Care Serious Incident Response Scheme (SIRS), designed to provide safeguards for clients receiving service and ensure registered Aged Care provider's obligations to notify, investigate and respond to reportable incidents, are met. Scope Home Access ensures incidents are acknowledged, responded to, well-managed and learned from to improve service delivery and prevent harm, abuse and neglect of older people.

# 1.0 SERIOUS INCIDENT RESPONSE SCHEME (SIRS)

### 1.1 OBJECTIVE OF THIS POLICY

To provide instruction for identifying, responding to and reporting of incidents that occur to aged care clients whilst receiving supports or service from Scope Home Access as an approved Commonwealth Home Support Program (CHSP) provider.

### 2.0 POLICY

Scope Home Access recognises that many of the clients using Scope Home Access services are at risk of incidents and accidents. Scope Home Access's SIRS Policy seeks to:

- minimise risk and prevent future incidents through the development of appropriate, staff training, assessment and review
- ensure that there's immediate management of an incident, accident or emergency and that each of these events are prioritised, managed and investigated appropriately
- identify opportunities to improve the quality of participant supports by ensuring that the incident system is planned and coordinated and is linked to the quality and risk management systems.

Clients will be provided information in Easy Read format, as required.

# 3.0 STAFF TRAINING

Scope Home Access recognises the importance of prevention to ensure the safety of both staff and the client. Our induction and orientation process includes training in work health and safety practices, including manual handling, infection control, safe environments, risk and hazard reduction.

Upon commencing employment with Scope Home Access, all staff are trained in organisational incident management processes, including how to report an incident and who to report an incident to, i.e. (Head of Division/Regional Supervisor/CEO). To provide further guidance, access to all of our policies and procedures is provided to staff at this time and ongoing via the online WHS/Compliance System.



### 4.0 REPORTABLE INCIDENTS

The CEO, or their nominated delegate, is responsible for reporting all reportable incidents to the Aged Care Quality and Safety Commission (ACQSC). Reportable incidents should be reported to the Commission using the My Aged Care Provider Portal. Reportable incidents are serious incidents, or allegations, which result in harm to any aged care client.

Incidents in Home Care are reportable only when they occur in connection with the care or service being provided.

Reportable incidents include the actions or inaction of a staff member, which includes employees, agency staff, subcontractors or volunteers.

Scope Home Access, as a registered provider, is required to report serious incidents (including allegations) arising from the organisation's service provision to the ACQSC. Reportable incidents include:

- 1. Unlawful sexual contact or inappropriate sexual contact
- 2. Unreasonable use of force
- 3. Psychological or emotional abuse
- 4. Neglect of a consumer
- 5. Stealing or financial coercion by a staff member
- 6. Unexpected death
- 7. Missing consumers
- 8. Inappropriate use of restrictive practices

In regard to the above, some incidents will differ to residential care due to situational differences in home care, specifically:

- 6. Unexpected death where a death occurs in home care as a result of care or services provided or the failure to provide care and services. This includes where death occurs due to a mistake being made, care and services not being delivered in line with the client's assessed needs or where care or services are poorly managed or not in line with best practice.
- 7. Missing consumers does not apply where the consumer is not at home when the provider arrives, or if they leave their home while maintenance or modifications are taking place. This is reportable when there is a concern about where the consumer is/has gone. Where there is a concern the police should be called within a reasonable time frame. This incident should be reported even if the client is subsequently found prior to reporting.
- 8. Inappropriate use of restrictive practices before reporting the use of restrictive practices, it should be determined if the restrictive practice has been prescribed, is part of a care plan or is used with consent. Should a restrictive practice be used in an emergency situation this should be reported.



### 4.1 INCIDENT PRIORITIES

Reportable Incidents should be reported within the prescribed time as below:

Priority 1 Incidents – should be reported within 24 hours of the provider being aware of the incident. If the incident occurs on a Friday or start of a long weekend, reporting should not be delayed until the following week.

## Priority 1 Incidents are:

- 1. Unlawful sexual contact or inappropriate sexual conduct
- 6. Unexpected death
- 7. Missing consumers

In addition any incident should be considered a Priority 1 Incident where -

- the incident caused, or could have reasonably been expected to cause, a client physical or psychological discomfort that requires medical or psychological treatment to resolve
- there are reasonable grounds to report the incident to police

Priority 2 Incidents – should be reported within 30 calendar days

### Priority 2 Incidents are:

- 2. Unreasonable use of force
- 3. Psychological or emotional abuse
- 4. Neglect of a consumer
- 5. Stealing or financial coercion by a staff member
- 8. Inappropriate use of restrictive practices

### 5.0 DOCUMENTATION

- All reportable incident reports and registers must be maintained for seven (7) years.
- This policy is to be reviewed on a regular basis, or when changes to legislation occur.
- All clients, families and advocates are informed of this policy in the Client Information and Service Guide (CHSP) or verbally.
- All staff will be trained in the procedures outlined in this policy. Training details are recorded in staff personnel files.



### **RELATED POLICY:**

B10 Dealing with Abuse and Assault of an Adult

B13 Supporting Participation in Planning

C04 Managing a Medical Emergency

C05 Responding to and Reporting Death of a Client

D06 Work Health and Safety

E08 Planning and Evaluation

E11 Risk Management

E13 Quality Systems

### **RELATED PROCEDURES:**

AD23 Aged Care SIRS Procedure
Appendix 2 Procedure for Dealing with Abuse of Adults
Appendix 7 Procedure for Medical Emergency
WHS Policy and Procedure Manual

### RELEVANT LEGISLATION AND/OR GOVERNMENT POLICY:

- Fair Work Act 2009
- Work Health and Safety Act 2011 (WHS Act 2011)

# POLICY APPROVAL BY BOARD OF DIRECTORS

Christine Spackman / Chairperson	C. Hachen	8/12/22
Print Name/Title	Signature	Date