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| Incident investigation plan |
| Client incident management system (CIMS) |

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[Under the client incident management system (CIMS), the purpose of an incident investigation is to determine whether there has been abuse or neglect of a client by a staff member (including a volunteer) or another client, pursuant to an allegation in a client incident report.

Any major impact incident involving the alleged abuse of a client by a staff member, carer or another client), poor quality of care, or unexplained injury must be investigated.

The purpose of an incident investigation plan is to:

* ensure that the investigation adopts a person-centred and rights-based approach and addresses the principles of a good incident investigation
* set the scope of the investigation including addressing all relevant allegations, evidence and contextual factors
* make sure that the investigation process is structured and required approaches have been followed
* ensure that the investigation is timely, comprehensive and is likely to meet the requirements of the *Client incident management guide.*

Once the plan has been completed, it must be endorsed by the service provider’s delegated authority. All documents must be stored in a secure location to protect the privacy of the parties involved and to ensure the integrity of the investigation is maintained.

The CIMS investigation plan template should be considered in conjunction with the following CIMS guidance and resources:

* *Client incident management guide*
* *CIMS investigative framework*
* *CIMS investigation and response report template*

The text in orange throughout this template serves as a guide and can be deleted.]

# Service details

## Service details

|  |  |
| --- | --- |
| Organisation name | <Enter organisation name here> |
| Address of service delivery | <Enter address of service delivery here, including facility name (if applicable) here > |
| Area  [As identified in the incident report] | <Enter Department of Health and Human Services service area here> |
| Program  [As identified in the incident report] | <Enter program here> |
| Service type  [As identified in the incident report] | <Enter service type here> |

## Investigation manager details

[Refer to the Client incident management guide for the role, responsibilities and independence required of the investigation manager]

|  |  |
| --- | --- |
| Surname / family name | <Enter surname / family name here> |
| Given name | <Enter given name here> |
| Position title | <Enter position title here> |
| Telephone | <Enter telephone here> |
| Email | <Enter email here> |

In circumstances where the investigation is being jointly managed by the service provider and department, include the details of the department’s joint-investigation manager here

|  |
| --- |
| <Enter joint-investigation manager’s name, title and contact details here> |

In circumstances where the investigator is different than the investigation manager, include the details of the investigator here.

|  |  |
| --- | --- |
| Surname / family name | <Enter surname / family name here> |
| Given name | <Enter given name here> |
| Position title | <Enter position title here> |
| Organisation | <Enter investigator’s organisation here> |
| Telephone | <Enter telephone here> |
| Email | <Enter email here> |

# Incident summary details

## Incident reference number

|  |
| --- |
| <Enter incident report ID (IRD) here> |

## Incident dates

|  |  |
| --- | --- |
| Date of the incident | <Enter date of the incident here> [DD/MM/YYY] |
| Date the incident disclosed to the service provider | <Enter the date incident was disclosed to the service provider here> [DD/MM/YYY] |

## Details of client(s) involved in incident

### Client 1

[This section applies to the alleged victim/s of the incident. Please address the information outlined below individually for each client involved. Where a client is the subject of allegation or a witness to the incident provide client details in the appropriate section below.]

|  |  |
| --- | --- |
| Surname / family name | <Enter the client’s surname / family name here> |
| Given name | <Enter the client’s given name here> |
| Date of birth | <Enter the client’s date of birth here> [DD/MM/YYY] |
| Sex  [As identified in the incident report] | <Enter the client's sex. If unknown, enter 'not stated/inadequately described'> |
| Address | <Enter the client’s current home address here> |
| Indigenous status  [As identified in the incident report] | <Enter the indigenous status of the client here> |
| Client unique ID | <Enter client unique ID here> |
| Client unique ID type (e.g. CRIS or CRISSP number, HiiP ID, etc.) | <Enter client unique ID type here> |

#### Impact of incident on the client

|  |  |
| --- | --- |
| Primary incident type  [As identified in the incident report] | <Enter primary incident type here> |
| Secondary incident type (applicable for incident types of abuse only)  [As identified in the incident report] | <Enter secondary incident type here> |

[Copy and paste the client details and impact on the client for each client that is an alleged victim of the incident, as required, up to a maximum of 10.]

## Details of the subject(s) of allegation(s)

[This section applies to the subject of allegation of the incident (ie: the person to whom an allegation of abuse, poor quality of care or unexplained injury of a client has been made).

### Person 1

|  |  |
| --- | --- |
| Surname / family name | <Enter surname / family name here> |
| Given name | <Enter given name here> |
| Date of birth | <Enter date of birth here>  [DD/MM/YYY] |
| Sex | <Enter sex here> |
| Home address | <Enter home address here> |
| Role in incident (subject of allegation) | <Enter role in incident here>does this mean the position title for staff and the type of carer for volunteers?> |

[Copy and paste the subject of allegation details of the incident, as required, up to a maximum of 10]

# Investigation approach

## Investigation period

|  |  |
| --- | --- |
| Proposed investigation start date | <Enter the proposed investigation start date here> [DD/MM/YYY] |
| Proposed completion date  [within 28 business days of the incident being endorsed by the department] | <Enter the proposed investigation completion date here> [DD/MM/YYY] |

## Incident details

Summary of incident

[Including allegations/unexplained injuries against the subject(s) of allegation(s), if applicable]

|  |
| --- |
| <Enter summary of incident here> |

## Victoria Police response

|  |  |
| --- | --- |
| Was the incident reported to Victoria Police? | <Enter Yes or No here> |

If the incident **was** reported to Victoria Police:

|  |  |
| --- | --- |
| Police station/unit reported to | <Enter the name and location of police station/unit here> |
| Police officer reported to | <Enter the name and rank of police officer here> |
| Date and time of report to Victoria Police | <Enter the date reported to Victoria Police here> [DD/MM/YYY] [HH:MM] |
| Name of person who will liaise with police officers throughout investigation (if different from investigation manager) | <Enter the name of person here> |
| Proposed Victoria Police action | <Enter the details of proposed Victoria Police action as advised by Victoria Police> |
| Have Victoria Police agreed to the alleged victim, subject of allegation and witness being interviewed? | <Enter the details of advice provided by Victorian Police regarding interviews progressing here> |

If the incident **was not** reported to Victoria Police:

|  |  |
| --- | --- |
| If the incident was not reported, rationale for not reporting | <Enter rationale for not reporting here> |

## Proposed investigation methodology

### Establishing the investigation approach

1. Allegations / unexplained injuries

[To determine whether abuse or poor quality of care occurred or to investigate incidences of unexplained injury. Allegations should be listed, for example, allegation 1 – physical abuse, allegation 2 – sexual abuse, allegation 3 – poor quality of care etc.]

| Description | Timeline |
| --- | --- |
| <Enter the allegations/unexplained injuries>  [Describe in more specific detail the nature of the allegation] | Not applicable |

1. Type of investigation (internal, external or joint between service provider and divisional office) and rationale for this investigation type.

| Description | Timeline |
| --- | --- |
| <Enter the type of investigation here>  [Select from: internal, external, joint investigation] | [Not applicable] |
| <Enter the rationale for the investigation type here> | [Not applicable] |

1. Outline the scope and objectives of the investigation

| Description | Timeline |
| --- | --- |
| <Enter the scope of the investigation here> | [Not applicable] |
| <Enter the objectives of the investigation here> | [Not applicable] |

1. Human resources required, including:

* Investigator(s), name(s), position(s), contact details (if different from the investigation manager)
* Consultation with experts (if required)
* Other (legal, financial, etc. – if required)

| Description | Timeline |
| --- | --- |
| <Enter the human resources required here> | <Enter timeline here>  [For each of the human resources identified provide timeline details for when they will be contacted / consulted.] |

1. Other lines of enquiry (day books, video-footage, medical reports, case records, prior concerns regarding the staff/carer)

| Description | Timeline |
| --- | --- |
| <Enter the other lines of enquiry to be sought> | [Not applicable] |

1. Communication strategy to notify other clients, families and staff of the investigation while it is underway

[Note: Confidentiality procedures and protection of the client’s and subject(s) of allegation(s) identities must be followed at all stages]

| Description | Timeline |
| --- | --- |
| <Enter the communication strategy here> | <Enter timeline here>  [For each of the communication steps identified provide timeline details for when they will be conducted, who will be responsible for communicating with each person and when will it be completed.] |

1. Arrangements to provide the subject(s) of allegation(s) with the substance of allegations against them (including the method and date of notification and by whom)

[Note: Confidentiality procedures and protection of the client’s identity must be followed at all stages]

| Description | Timeline |
| --- | --- |
| <Enter the arrangements to advise the subject of allegation of the allegations here> | <Enter timeline here>  [For the arrangements to advise the subject of allegation of the allegations and provide timeline details for when they will be conducted and completed.] |

1. In the case of more complex investigations, detail governance, reporting and review arrangements in place.

[Note: Complex investigations include incidents that require police investigation, involve multiple clients/subject(s) of the allegation(s), involve children or persons with mental health concerns, an intellectual disability or cognitive impairment that limit their ability to provide informed consent or an accurate account of the incident. Identify the strategies that will address any risks to the completion of the investigation within the required timeframe of 28 business days.]

| Description | Timeline |
| --- | --- |
| <Enter the detailed governance, reporting and review arrangements here> | <Enter timeline here>  [For each of the governance, reporting and review arrangements identified provide timeline details for when they will be conducted and completed.] |

### Interviewing and supporting the client

1. Arrangements for interview of the client(s)

[including consideration of how best to support the client to provide their account of the incident, including involvement of a support person, the location of the client / interview, the age of the client, the sex of the client/interviewer, if the client has mental health concerns, an intellectual disability or cognitive impairment, if required]

| Description | Timeline |
| --- | --- |
| <Enter the arrangements for interviewing clients here, including the details of who will be conducting interviews> | <Enter timeline here>  [For each of the arrangements for interviewing clients identified provide timeline details for when they will be conducted and completed.] |

1. Any interim arrangements to be put in place while the subject(s) of allegation(s) is/are being investigated

[For example, in the case of a person working/volunteering with the organisation, suspending the subject(s) of allegation(s) or removing them from a role with direct contact with clients, etc. In the case where a client is the subject of allegation, measures include removal from contact with the client(s) concerned, more frequent monitoring of their behaviour and support people and procedures, etc.]

| Description | Timeline |
| --- | --- |
| <Enter interim arrangements in relation to the subject(s) of allegation(s) here> | <Enter timeline here>  [For each of the interim arrangements for the subject(s) of allegation(s) identified and provide timeline details for when they will be conducted and completed.] |

### Interviewing and supporting witnesses/other relevant people

[If a client is a witness to the incident, complete their details in this section, including consideration of involvement of a support person, the location of the client / interview, the age of the client, the sex of the client/interviewer, if the client has mental health concerns, an intellectual disability or cognitive impairment,]

1. Witnesses/other relevant people to be interviewed and order of interviews (including proposed dates, location and support procedures in place)

| Description | Timeline |
| --- | --- |
| <Enter arrangements to interview witnesses/ other relevant people here> | <Enter timeline here>  [For each of the arrangements to interview witness or other relevant people identified provide timeline details for when they will be conducted and completed.] |

### Interviewing, managing and supporting the subject(s) of allegation(s)

1. Arrangements to interview subject(s) of allegation(s) (including proposed dates and location)

[If a client is the subject of allegation in this incident, complete their details in this section, including consideration of involvement of a support person, the location of the client / interview, the age of the client, the sex of the client/interviewer, if the client has mental health concerns, an intellectual disability or cognitive impairment.]

| Description | Timeline |
| --- | --- |
| <Enter arrangements to interview the subject(s) of allegation(s) here> | <Enter timeline here>  [For each of the arrangements to interview the subject(s) of allegation(s) identified, provide timeline details for when they will be conducted and completed.] |

### Gathering and documenting evidence

1. Documentary evidence to be reviewed by the investigator(s)

[For example, client file daybook, video surveillance footage, etc.]

| Description | Timeline |
| --- | --- |
| <Enter documents to be reviewed here> | <Enter timeline here>  [For each of the documentary evidence reviews identified provide timeline details for when they will be conducted and completed.] |

1. Arrangements for site visits (including dates and locations)

| Description | Timeline |
| --- | --- |
| <Enter site visit details here> | <Enter timeline here>  [For each of the site visits identified provide timeline details for when they will be conducted and completed.] |

1. Arrangements to obtain expert advice

[For example, a forensic medical assessment]

| Description | Timeline |
| --- | --- |
| <Enter expert advice to be referenced here> | <Enter timeline here>  [For each item of expert advice identified provide timeline details for when they will be conducted and completed.] |

# Investigation plan approval

|  |  |
| --- | --- |
| Prepared by | <Enter name of person who prepared investigation plan (the investigation manager)> |
| Position/title | <Enter position or job title of person who prepared investigation plan> |
| Conflict of interest declaration: | I declare that I have not had any prior personal involvement in this matter, nor do I have any personal bias or inclination, obligation or loyalty, that would in any way affect my conducting this investigation; nor any comments or critical analysis that I provide. As the investigation manager, I have verified that any other staff member involved in conducting the investigation also does not have a conflict of interest relating to this incident. |
| Signature | <Enter signature of person who prepared investigation plan. Electronic signatures are acceptable.> |
| Date | <Enter date of above signature> [DD/MM/YYY] |

|  |  |
| --- | --- |
| Approved by  [Service provider’s Chief executive officer or delegated authority] | <Enter name of person who approved the investigation plan.> |
| Position/title | <Enter position or job title of person who endorsed investigation plan> |
| Signature | <Enter signature of person who approved the investigation plan. Electronic signatures are acceptable > |
| Date | <Enter date of above signature> [DD/MM/YYY] |

In the case of a joint investigation the divisional office may need to endorse the investigation plan.

|  |  |
| --- | --- |
| Endorsed by  [Divisional office Director] | <Enter name of person who endorsed the investigation plan.> |
| Position/title | <Enter position or job title of person who endorsed investigation plan> |
| Signature | <Enter signature of person who endorsed investigation plan> |
| Date | <Enter date of above signature> [DD/MM/YYY] |

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