

|  |
| --- |
| CIMS Recommendations template |
| Attachment to Reportable Conduct Scheme investigation report - Client Incident Management System |
|  |

Instruction text

Use this template when your organisation has elected to submit a Reportable Conduct Scheme investigation report in lieu of a CIMS Investigation report.

This template must be submitted to the Department with the Reportable Conduct Scheme investigation report to acquit CIMS requirements.

[Bracketed text is a guide only and should be deleted prior to providing the investigation report to the department

*Text in purple italics is guidance or example – please delete prior to providing the investigation report to the department*.

Chapter 4: Investigating an incident of the *Client incident management system – Policy and guidance* sets out the minimum requirements for incident investigations.

Delete these instructions before submitting your report to the department. End instruction text.

# Incident details

|  |  |
| --- | --- |
| CIMS Incident number: | [IRD number] |
| Date incident occurred (or was disclosed) |  |
| Date of incident report |  |
| Organisation conducting investigation | [Organisation name] |
| Investigation manager | [Name, Position title, Organisation, Contact details] |
| Investigator/s (if different to investigation manager) | [Name, Position title, Organisation, Contact details] |
| Joint investigation with service provider and department? | [yes, no][If yes, name, position title, organisation and contact details of the joint investigation manager.] |
| Service provider CEO or equivalent delegate/signatory: | [Yes / No][If yes, name, position title, organisation and contact details of the joint investigation manager.] |

# Recommendations

|  |  |  |  |
| --- | --- | --- | --- |
| Client / Allegation | Finding | Outcome  | Recommendation |
|  | *Identify findings made from the evidence gathered throughout the investigation. There may be multiple findings listed against each outcome.* | *Include an outcome against each allegation identified in this incident report. One outcome per row.* | *Detail the high-level recommendations being made to promote the safety and wellbeing of the client or support the continuous improvement of service delivery. Each recommendation must address the finding and outcome in the same row. Multiple recommendations can be made against the same findings and outcome.* |
| *EXAMPLE**Client 1**Allegation one* | * *CCTV footage recorded the subject of allegation hitting the client with a closed fist on and around the face and torso*
* *Client identified the subject of allegation as the person in the CCTV footage*
* *Carer support plan not completed even though potential risk factors impacting on the sustainability of the placement were identified at the time of placement commencement.*
 | *Allegation: The subject of allegation hit the client on or around 01/01/2024.**Reportable Conduct Scheme: The allegation of* ***physical violence*** is **substantiated.**CIMS: The allegation of **physical abuse** is **substantiated.** | * *Care team review of the placement and appropriateness for the client to remain in the kinship care placement.*
* *Review processes associated with the commencement of new kinship carer arrangements to ensure early identification and implementation of supports that the carer may need during the initial phase of the placement*.
 |

# Different Reportable Conduct Scheme and CIMS outcomes

*Delete this section if not required*

|  |
| --- |
| *Complete this section when the allegation is substantiated under one scheme, but not the other. For example, the allegation may be substantiated in CIMS but not under the Reportable Conduct Scheme.**Fill in this section when entering a substantiation outcome in CIMS that does not match the Reportable Conduct Scheme investigation report. Provide a clear rationale why a different outcome decision is being submitted, include:** *How the evidence gathered in the investigation supports the different outcome being submitted*
* *How the findings of the investigation lead to the outcome decision*
 |

# Approval

*To be completed by the investigator*

|  |  |
| --- | --- |
| Report prepared by: | [Name and position of investigator] |
| Conflict of interest declaration | As the investigator, 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.  |
| Signature |  |
| Date |  |

*Delete this table if investigator/investigation manager are the same person*

|  |  |
| --- | --- |
| Report endorsed by | [name and position of investigation manager] |
| Conflict of interest declaration | As the investigation manager, 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 |  |
| Date |  |

*To be completed by the service provider’s Chief Executive Officer, or delegated authority*

|  |  |
| --- | --- |
| Approved by: | [Name and title of service provider CEO or equivalent, or delegated authority] |
| Signature |  |
| Date |  |