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| Writing an effective incident report: Client Incident Management System (CIMS) – 27 August 2021 |
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This advice has been developed to provide an overview of the characteristics and features of a well-written Client Incident Management System (CIMS) Report.

## Characteristics of a good incident report

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| The following are characteristics of a good report: | |
| * Well-organised | * Factual |
| * Complete | * Respectful |
| * Concise | * Objective |
| * Accurate and specific | * Light on abbreviations |

### A good report is well-organised

Poorly organised descriptions of an incident can leave readers confused and uncertain about what happened, so it’s important that reports are well-organised. One way to organise information is in chronological order. Be detailed and chronological when you write up the description of the incident.

### A good report is complete

A well-written report is complete when:

* ‘Service Provider Details’ section has accurate information. Specific reference to:
  + Address of service delivery is where the service is usually delivered from eg Resi house address.
  + Use the ‘what is this’ tab for assistance in completing the details of this section.
* ‘Incident Date’ section has accurate information in relation to the time of the incident and date disclosed. This includes putting in an ‘estimated date’ of the incident’ if the exact date is not known.
* ‘The ‘Incident Description’ is clear and concise in relation to where, when, why, and how the incident occurred. It does not leave unanswered questions.
  + It should be factual and arranged in chronological order. It should only include information relevant to the incident.
  + It should be clear the incident occurred *during service delivery* (refer to *Client incident management guide January 2020 (*CIMS guide) sections 3.1.2 and 3.2).
  + It should clearly articulate the *impact on the client* (refer the CIMS guide section 3.3 for the definition of ‘major impact’ or ‘non-major impact’). This may be clear, or you may need to use your professional experience and knowledge of the client to assess and articulate the impact to the client.
  + Avoid cutting and pasting large amounts of text or emails, avoid unnecessary details which are unrelated to the reportable incident,
* ‘The client/s involved in the incident’ section should record all the clients impacted by the incident.
  + Client details need to be accurate including consistent spelling of the client’s name, date of birth etc. The client name recorded in the incident report should be consistent throughout the report and should be the name used in client records (eg CRIS etc) and be the name of the person to whom services are funded/delivered. Nicknames or preferred names are not appropriate.
  + The primary incident type, and secondary incident type if required, should be recorded in accordance with the CIMS guide January 2020 Appendix A: Definition of incident types. Please note some incident types previously in scope of the former incident reporting system are not in scope for CIMS, for example community concern, illness/admission to hospital, drug and alcohol, media, or privacy.
  + Where allegations relate to a carer (foster carer, kinship carer, residential worker, lead tenant) under CIMS this is recorded as *staff to client*.
  + A client can be involved in an incident as a participant, witness, victim or subject of allegation of an incident, depending on the incident type. If more than one client is impacted by an incident, the information should be completed for each client, with separate client details for each person. A decision/judgement needs to be made regarding the impact level (major or non-major) and then the incident type for each client. If a client has not been impacted by an incident but is involved in the incident, their details should be recorded in the ‘others involved in the incident’ section of the incident report form.
  + It is important to record the immediate actions taken to ensure the client’s safety and wellbeing. For instance, in cases of assault, medical attention should be sought from appropriately qualified people (doctors, nurses), as injuries are not always visible/obvious; referrals for support services/counselling should be considered, particularly where a major impact incident has occurred. If the immediate action option is ‘not applicable’ select ‘not applicable’ rather than ‘no’
* ‘Other/s involved in the incident’ should include all other people involved in the incident.
  + This includes subjects of allegation of abuse, witnesses to incidents or participants in the incident as well as client/s who were not directly involved/impacted by the incident.
  + The name of the person listed needs to be accurate, and the relationship to the client and/or incident needs to be clear. Date of birth details should be included when known.
  + If more than one person is involved in an incident, the information should be completed for each person with separate details for each person
  + If a client has not been impacted by an incident but is involved in the incident, their details should be recorded in the ‘others involved in the incident’ section of the incident report form.
* ‘Service Provider Response Details’ includes a brief, one sentence, summary of the incident – key issues/allegation.
  + The ‘brief summary of incident’ should not include information that identifies a client, staff member or member of the client’s family.
  + It is important to record the immediate actions taken by the organisation in response to the client incident in the free text section, as outlined in the CIMS guide (Section 2).
  + In cases of alleged assault, a report to police should be made (CIMS guide Section 2.2.2.), as it is the responsibility of the Police to determine what action they will or will not take. It should not be assumed no action will be taken by Police.
  + Information should also be included regarding consultation with Child Protection (Deputy Area Operations Manager of the relevant DHHS area) as per the *Client incident management* (CIMS) guide Addendum: Out of Home Care January 2020 (Section 3), where the incident relates to a Child Protection client placed in out of home care.
  + Note compliance with reporting obligations, where relevant, under the Disability Worker Exclusion Scheme (DWES) or Reportable Conduct Scheme (CIMS guide section 3.9.8 and CIMS guide Addendum: Out of Home Care (section 8) where relevant.
  + Note reports under section 81 or section 82 of the Children, Youth and Families Act 2005 (CIMS guide Addendum: Out of Home Care section10).
  + Include information regarding consultation with Aboriginal Child Specialist Advice and Support Service (ACSASS) where the impacted client is an Aboriginal or Torres Strait Islander child. as per the *Client incident management* (CIMS) guide Addendum: Out of Home Care January 2020 (Section 6).

### A good report is concise

It may seem contradictory to say that a report should be both complete and concise. However, being concise does not mean leaving out important details. Rather, it means using words economically and omitting words that do not add value. Wordiness interferes with readability.

***Wordy:*** *The staff who arrived first on scene immediately began to search the first floor of the property and rescue anyone who might be trapped.*

***Concise:*** *Staff immediately searched on the first floor of the property.*

### A good report is accurate and specific

Double-check dates, times, names, phone numbers, etc. Proof read your report carefully, and have others proof read your documents as appropriate. Being accurate also means being specific. Vague references do not give readers much information.

***Vague:*** *The client had a high fever.*

***Specific:*** *The client had a fever of 39˚C.*

### A good report is factual

Well-written reports are factual. There’s a difference between accurate and factual. A *fact* is something real that can be either proved or disproved. *The fire destroyed nine homes* is a statement of fact. However, further investigation may show that the fire destroyed three homes and six outbuildings. The first statement was found to be inaccurate, but it was a statement of fact versus an inference or opinion. An *inference* is a conclusion based on reasoning. It becomes sound or believable if supported by facts.

***Inference:*** *We suspected that he was under the influence because we could smell alcohol on his breath and because his speech was slurred.*

***Fact:*** *Blood tests confirmed he had a blood alcohol level that was twice the legal limit.*

An opinion is a belief. It may or may not be appropriate to include opinions in your report. However, if you do include them, you should clearly identify them as such.

***Fact:*** *The client climbed on the table and threw fruit at me after I asked them to clear the dishes.*

***Opinion:*** *The client was naughty.*

### A good report is respectful

Respectful reports use language that is appropriate and mindful of the sensitivity of the personal information provided. Care must be taken to ensure details provided in an incident report are factual, accurate and relevant to the incident being reported. Disrespectful or inappropriate language, unless you are quoting a person and it is necessary to quote the person for accuracy, should not be used in reports.

Client incident reports may be used as evidence in investigations, disciplinary and legal proceedings. The incident report must contain enough details for the reader to understand what happened and who was involved, without creating ambiguity.

***Ambiguous:*** The client indicated that a man inappropriately touched her.

***Fact:*** The client said that Sam touched her breasts.

### A good report is objective

Objective reports are fair and impartial, not influenced by emotion or opinion. One key to being objective is to avoid words whose connotations change the tone of the report.

An objective report includes both sides of the story and does not favour one side or another. The first account below is objective. However, the second and third are slanted to favour the wife and husband, respectively. Only the first one is appropriate.

***Objective:*** *Several clients reported hearing Bob and Mary arguing about which tv program to watch in the lounge room. Bob allegedly hit Mary in the face during the argument. We found Mary with a bloody nose and a swollen cheek.*

***Slanted:*** *Numerous clients reported that Mary and Bob had been fighting because Bob likes to watch The Bachelor. Bob punched Mary in the face because he was furious that she changed the channel. We found Mary with severe injuries to the face, including a bloody nose and a badly swollen cheek.*

***Slanted:*** *Several clients reported that Bob and Mary had been arguing because Mary kept nagging Bob about watching The Bachelor. Mary became so hostile that Bob momentarily lost control and slapped her in the face. Mary claimed to have been badly beaten, but she only had a little bit of blood beneath her nose and a slightly red cheek.*

Statements from clients, witnesses, and other people may not be objective. However, when you include those statements in your reports, you need to make it clear that you are quoting someone else.

### A good report is light on abbreviations

Some abbreviations are acceptable. Do not use an abbreviation without using the full expression first.

***For example:*** *acquired immune deficiency syndrome (AIDS).*

Using too many abbreviations or using them inappropriately can detract from your description and make it hard for the reader to understand it.

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