



# Reportable incidents: neglect

## Serious Incident Response Scheme

A fact sheet for providers of home care and flexible care delivered in a home or community setting



**The Serious Incident Response Scheme (SIRS) helps prevent and reduce the risk of incidents of abuse and neglect in aged care services subsidised by the Australian Government.**

Under the SIRS, all incidents and near misses should be recorded in a provider's incident management system (IMS) to ensure a timely and appropriate response that minimises impact, supports those affected and reduces the risk of recurrence.

There are eight types of reportable incidents that must be recorded in a provider's IMS and reported to the Aged Care Quality and Safety Commission (the Commission).

This fact sheet covers the reporting of incidents in a home or community setting relating to neglect.

### What is neglect?

Neglect of a consumer includes:

- a breach of duty of care to the consumer by the provider or a staff member
- a gross breach of professional standards in providing care or services to the consumer by a provider's staff member.

Duty of care is the obligation to take reasonable care to avoid injury to a person who, it can be reasonably foreseen, might be injured by an act or omission. It exists where someone's actions could reasonably be expected to harm other people.

Neglect includes a provider or staff member's action, or failure to act, that results in harm, injury, poor health outcomes, emotional distress or the death of a consumer. It can be a single significant incident where, for example, a carer fails to fulfil a duty, resulting in actual harm to a consumer or where there is the potential for significant harm to a consumer. Neglect can also be ongoing, repeated failures to meet a consumer's physical or psychological needs.

Some examples of what does and does not constitute neglect can be found in the table on [pages 4 and 5](#). These examples

are a guide only. If an incident occurs, you should carefully consider all the information and circumstances when deciding whether neglect has occurred, particularly the impact on the consumer.

## Choice and control

Consumers have the right to have control over their choices relating to their care and make their own decisions about levels of risk in line with their personal freedoms. You must balance your duty of care to consumers with your responsibilities to support them to make their own choices, even if those choices come with risk.

For home services providers, neglect is not a reportable incident where:

- the incident results from a choice made by the consumer about the care or services provided to them, or how the care or services are to be provided, and
- before the incident occurred, is alleged to have occurred, or is suspected of having occurred, the choice had been communicated by the consumer to the provider, and the provider had recorded the choice in writing.

If a consumer with cognitive impairment refuses to receive care and services in line with their assessed care needs, and this could or does result in harm to the consumer or has a negative impact on their health and well-being, all reasonable efforts must be made to encourage the consumer to receive those care and services.

## Gross breach of professional standards

All staff members who provide care and services to consumers must carry out their duties in accordance with their job descriptions, the knowledge and skills attained as part of their profession

or qualifications, and in accordance with any applicable codes of conduct, practice or standards expected of their employer.

Many staff will not have professional standards tied to their role (particularly those providing care in a home or community setting). For example, cleaners, gardening or maintenance staff or personal care workers do not have a universal professional code of practice or standards. However, staff members may be subject to codes of behaviour or practice relevant to their role under their terms of employment.

In addition, all staff members providing Commonwealth-funded aged care services must comply with the Code, which sets out expectations for providers and staff members regarding the safe and ethical delivery of care and services.

## Possible signs of neglect

There may be warning signs that indicate that a consumer has experienced neglect even if it is not witnessed. These include:

- weight loss
- requesting food more often, being very hungry or thirsty
- constant fatigue, listlessness or falling asleep
- poor hygiene or poor grooming – overgrown fingernails and toenails, unclean hair, unshaven, unbathed, wearing dirty or damaged clothing
- inappropriate or inadequate clothing for the weather
- unattended physical problems, dental, and/or medical needs
- dropping hints or making statements that appear to be about neglect
- extreme longing for company, social isolation, loss of social and communication skills.

## How to respond to neglect

If there is evidence, an allegation or suspicion of a consumer being subjected to neglect, you must immediately ensure their safety and well-being. This may include arranging medical or psychological assistance. Depending on the nature of the incident you may need to contact the police.

All details of the incident must be recorded in the IMS.



### **A Priority 1 reportable incident is a reportable incident:**

- That caused, or could reasonably have been expected to have caused, a consumer physical or psychological injury or discomfort that requires medical or psychological treatment to resolve; or
- Where there are reasonable grounds to report the incident to the police; or
- That involves unlawful sexual contact or inappropriate sexual conduct, the unexpected death of a consumer or a missing consumer.

You must notify the Commission of a Priority 1 reportable incident within 24 hours of becoming aware of the incident.

### **A Priority 2 reportable incident is a reportable incident:**

- That does not meet the criteria of a Priority 1 incident.

You must notify the Commission of a Priority 2 reportable incident within 30 days of becoming aware of the incident.

## Reporting neglect to the Commission

All incidents of neglect must be reported to the Commission; the timeframe for this report depends on the impact on the consumer. You must determine whether the incident is a Priority 1 or Priority 2 reportable incident.

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**The Commission considers medical or psychological treatment to include the application of medical treatment or psychological treatment to cure a disease or condition or, to treat and resolve physical or psychological injury or discomfort.**

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In all cases, you should support the consumer and practise 'open disclosure' by explaining what happened and what actions you are taking to respond to the incident.

## How can I find out more?

The Commission has published a suite of fact sheets relating to each type of reportable incident. To access these fact sheets and detailed guidance relating to the SIRS and incident management systems, visit [agedcarequality.gov.au/sirs](https://agedcarequality.gov.au/sirs)

## Examples

What is neglect?	What is not neglect?
<ul style="list-style-type: none"> <li>• Where a staff member does not arrive to provide care and services, resulting in harm and/or discomfort to the consumer, e.g. where:             <ul style="list-style-type: none"> <li>– a staff member does not arrive to assist a consumer into bed, so the consumer remains in their wheelchair all night</li> <li>– a provider fails to deliver meals to the consumer, resulting in the consumer going hungry</li> <li>– a staff member providing assistance with hygiene and toileting does not arrive to change a consumer's continence aids resulting in emotional distress to the consumer</li> <li>– a staff member does not arrive to change a consumer's dressing and their wound worsens as a result.</li> </ul> </li> <li>• Frequent or regular missed instances of care without the consumer's prior agreement.</li> <li>• Withholding personal care (such as showering, toileting or oral care) or agreed outings to community settings (such as not taking the consumer shopping).</li> <li>• Frequent or regular late or missed assistance with administration of medications, or failure to assist a consumer to administer correct or time critical medications (where this is the responsibility of the staff member).</li> <li>• Failing to supervise a consumer in an environment that leaves them susceptible to injury. For example:             <ul style="list-style-type: none"> <li>– failing to appropriately monitor/support a consumer at risk of falls when taking a consumer shopping resulting in the consumer falling over</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• An isolated incident of late or missed medications, where the provider is responsible for assisting the consumer to administer medications and there is no harm and/or discomfort caused (or could reasonably have been expected to have been caused) to the consumer.</li> <li>• Rapid weight loss as a result of disease, where the provider is responsible for delivering meals and all reasonable efforts are made to ensure the consumer is receiving adequate nutrition.</li> <li>• Where a consumer has made an informed choice not to receive care and services in line with their assessed care needs, for example:             <ul style="list-style-type: none"> <li>– where the provider is responsible for delivering meals and a consumer with diabetes chooses not to eat a diabetic diet</li> <li>– where the provider is responsible for delivering personal care and a consumer chooses not to be showered or have their teeth or hair brushed</li> <li>– where the provider is responsible for delivering garden maintenance and a consumer chooses not to have their lawn mowed</li> <li>– where the provider is responsible for delivering clinical care and a consumer chooses not to have their wound cleaned and dressed.</li> </ul> </li> </ul>

## Examples

What is neglect?	What is not neglect?
<ul style="list-style-type: none"><li>– leaving a consumer outside unprotected in the sun resulting in significant burns</li><li>– leaving a consumer enclosed in a vehicle on a hot day where the temperature in the vehicle is likely to increase rapidly and cause significant harm to the consumer.</li><li>• Failing to recognise and respond appropriately when a consumer experiences acute deterioration while services are being delivered.</li><li>• Failing to appropriately modify a consumer's prepared meals to account for specific directions from an assessment and as recorded in their care plan, resulting in the consumer not being able to eat meals or choking.</li><li>• Failing to change soiled continence aids in a timely manner.</li></ul>	

The above table is not an exhaustive list of examples – it is a guide only. You should assess each incident on an individual basis.

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