

|  |
| --- |
| Guide to reporting a notifiable incident  |
| For incidents that happen during service delivery |
|  |

## Contents

[Introduction 1](#_Toc180055173)

[What is a notifiable incident? 1](#_Toc180055174)

[What incidents must be reported? 2](#_Toc180055175)

Reporting serious risk and serious harm [2](#_Toc180055176)

[Notifiable incidents 2](#_Toc180055177)

[Extra reporting step for critical notifiable incidents 4](#_Toc180055178)

[Further reporting protocols for supported residential services 6](#_Toc180055179)

[**How to report 7**](#_Toc180055180)

Reporting a critical notifiable incident

What happens after I report a notifiable incident?

[Breakout box “For the purpose of the guidance below, serious incidents are identified as ‘notifiable incidents’.”]

## Introduction

Under section 7 of the Act, one of the Regulator’s objects is ‘to promote and support the delivery of safe and effective social services’.

Monitoring notifiable incidents in a timely fashion helps the Regulator promote and support the delivery of safe and effective social services.

The Regulator employs an integrated, intelligence-drive strategy to make decision regarding reported incidents. By gathering and examining data, including from notifiable incident reports, we discern trends and needs within the sector. This decision-making approach aligns with one of the Regulator’s legislative guiding principles under section 8 of the Act, to ‘make decisions using an intelligence-led and integrated approach that is proportionate to risk and minimises regulatory burden’.

For this reason, the Regulator has developed the following guidance.

The guidance outlines:

* serious incidents that must be reported to us, and
* the steps for service providers to take to report these incidents, and forms to access and complete, to provide this information.

This information does not cover Worker Carer Exclusion Scheme (WCES) notifications. More information on WCES notifications visit [The Worker and Carer Exclusion Scheme](https://www.vic.gov.au/worker-and-carer-exclusion-scheme).

**This content was updated on 25 June 2025.**

Service providers registered with the Social Services Regulator are responsible for reporting notifiable incidents that occur during the delivery of a registered social service.

The requirement to report starts once a service providers is registered.

This guide is a downloadable version of [this webpage](https://www.vic.gov.au/ssr-reporting-notifiable-incident).

## What is a notifiable incident?

Notifiable incidents include incidents that the Regulator considers critical based on the impact they have, where:

1. **Serious harm is reasonably likely** – a serious incident that is **reasonably likely** to cause serious harm to a service user
2. **Serious harm** **has resulted** – a serious incident that **has resulted** in serious harm or serious injury to a service user.

## What incidents must be reported

**All** notifiable incidents must be reported to the [Social Services Regulator](https://www.vic.gov.au/social-services-regulator). The definitions of notifiable incidents are listed below.

These requirements come from section 48 of the *Social Services Regulation Act* *2021* (the Act).

Your reporting is important to help safeguard social service users.

Reporting notifiable incidents informs the Regulator of serious harm and risks of serious harm to service users during social service delivery, and of actions taken by service providers to address the immediate health and safety of their service users.

Monitoring notifiable incidents in a timely fashion helps the Regulator promote and support the delivery of safe and effective social services. This is an object of the Regulator under the legislation.

The Regulator employs an integrated, intelligence-driven strategy to make decisions regarding reported incidents. By gathering and examining data, including from notifiable incident reports, we discern trends and needs within the sector. This decision-making approach aligns with one of the Regulator’s legislative guiding principles under section 8 of the Act, to ‘make decisions using an intelligence-led and integrated approach that is proportionate to risk and minimises regulatory burden’.

## Reporting serious risk and serious harm

A ‘notifiable incident’ is defined by the Regulator as one that results in serious harm. See below for descriptions and reporting protocols.

### Notifiable incidents

‘Serious harm’ is defined by the Regulator as an incident which results in serious injury to a service user (physical or psychological). It is defined in section 3 of the Act as a single, repeated, or persistent incident of harm which results in one or more of the following:

* death
* loss of a foetus
* permanent or long-term serious impairment
	+ self-harm/attempted suicide (example)
	+ poor quality of care/neglect (example)
* permanent or long-term serious disfigurement
* permanent or long-term severe psychological injury or developmental delay
	+ Emotional/psychological abuse (example)
	+ Sexual exploitation (example)
	+ Financial abuse (example)

 Some examples of serious harm are listed below in Table 1.

**Table 1: Reporting notifiable incidents**

|  | **Type** | **Description** | **Reporting timeframe** | **Reporting requirements** |
| --- | --- | --- | --- | --- |
|  | **Pattern of incidents causing serious harm** | A pattern of incidents related to one service user which:* when taken together has a cumulative effect that causes serious harm or creates a risk of serious harm even if each individual incident is not a notifiable incident.
 | 3 business days | Clear summary of the incident and actions taken  |
|  | **Emotional/****psychological abuse** | Actions or behaviours that reject, isolate, intimidate, or frighten by threats, or* witnessing of family violence
* to the extent that the service user’s behaviour is disturbed, or their emotional/psychological wellbeing is (or is at risk of being) seriously impaired. This includes:
* rejecting, isolating, terrorising and ignoring behaviours
* denying cultural or religious needs and preferences
* emotional abuse perpetrated by other clients
* staff on service user assault (see the frequently asked questions for more information).

Service providers should consider any potential power imbalance between the service user and the person engaging in the behaviour. | 3 business days | Clear summary of the incident and actions taken  |
|  | **Financial abuse** | The misuse of a service user’s assets, property, possessions and finances without their consent, including:* denying a service user the use of their own assets, property, possessions and finances
* theft, fraud, exploitation and pressure in relation to assets, property, possessions and finances
* obtaining assets through deception.

This also includes financial abuse perpetrated by other service users. | 3 business days | Clear summary of the incident and actions taken  |
|  | **Self-harm/attempted suicide** | * Actions that intentionally cause harm or injury to self, or
* actions to attempt suicide (the intention to end one’s own life).
 | 3 business days | Clear summary of the incident and actions taken  |
|  | **Sexual exploitation** | Sexual exploitation is defined as the abuse of a person under 18 or a person with a cognitive disability, which may include:* the exchange of sex or sexual acts for money, goods, substance or favours
* involving a child in creating pornography
* contact with a known sex offender.
 | 3 business days | Clear summary of the incident and actions taken  |
|  | **Poor quality of care/neglect** | Inappropriate or inadequate care by caregivers or staff to the extent that the health, wellbeing and development of the service user is significantly impaired or at risk. | 3 business days | Clear summary of the incident and actions taken  |

### Extra reporting step for **critical** notifiable incidents

Critical notifiable incidents are a small group of notifiable incidents that have an additional and more immediate reporting step due to the critical nature of the harm or risk of harm.

Because this group of incidents is critical, the Regulator has come up with an approach to reporting that ensures there is a timely review of the way the service provider responded to the incident.

This extra reporting step means providers alert the Regulator that a critical notifiable incident has occurred by completing a critical notifiable incident short form (referred to as ‘Short form’ in Table 2 below). Do this by close of business the next business day.

If the incident occurs on a Friday or on the weekend, report it by close of business the following Monday.

Because critical notifiable incidents are also notifiable incidents, providers have a second step, which is to complete a full incident report within three business days. **This means that service providers** **have a 2-step** **reporting requirement for critical notifiable incidents.**

The Regulator’s definitions of **critical notifiable incidents** are belowin Table 2.

Table 2: Reporting critical notifiable incidents

|  | Type | Description | Reporting timeframes | Reporting requirements |
| --- | --- | --- | --- | --- |
| 1 | **Unexpected death** | * Death of a service user during service delivery where the death is unexpected.
 | **Short form** by close of business next business day**Full incident report** within 3 business days | Clear summary of the incident and immediate actions takenOther organisations/stakeholders contacted  |
| 2 | **Escape from a secure facility** | Only applies to service users in:* Secure care
* Custodial care
* Disability services where the relevant service user is subject to compulsory treatment or judicial orders.

Scope includes where a service user fails to return from temporary leave. | **Short form** by close of business next business day**Full incident report** within 3 business days | Clear summary of the incident and immediate actions takenOther organisations/stakeholders contacted  |
| 3 | **Medication error** | The incident results in the service user requiring medical treatment at a hospital (see further information below). Key definitions:* Medical treatment means medical interventions undertaken to treat the physical impact of the medication error.
* Examples of medication errors may include (and are not limited to) when a service user is:
* not administered their required medication
* given the wrong medication
* given a double dose of medication
* gaining access to and taking secured medications (or to medications not adequately secured).

Examples of medication errors would *not* typically include incidents of substance abuse where the substance is obtained outside of the facility/care situation. | **Short form** by close of business next business day**Full incident report** within 3 business days | Clear summary of the incident and immediate actions takenOther organisations/stakeholders contacted |
| 4 | **Physical abuse** | An incident results in the service user requiring medical treatment at a hospital.Additional guidance:* Medical treatment means medical interventions undertaken to treat an injury
* This does not include interventions to identify the existence of an injury.
 | **Short form** by close of business next business day**Full incident report** within 3 business days | Clear summary of the incident and immediate actions takenSupports provided to the alleged victimOther organisations/stakeholders contacted |
| 5 | **Sexual abuse** | An incident required police involvement and the service user required medical treatment at a hospital (see further information below).Additional guidance:* Medical treatment means medical interventions undertaken to treat an injury arising from the sexual abuse and/or a forensic medical examination.
* Medical treatment at a hospital includes a forensic examination at an alternative facility.
* Police involvement means that the nature of the allegations and presentation of the alleged victim has warranted a notification to the police. This does *not* include any subsequent determination by the police on their pursuit of the matter.
 | **Short form** by close of business next business day**Full incident report** within 3 business days | Clear summary of the incident and immediate actions takenSupports provided to the alleged victimOther organisations/stakeholders contacted |
| 6 | **Fire, flood or other** **emergency event** | Fire, flood or other emergency event that: * results in a service user requiring medical treatment at a hospital; and/or
* the relocation of service users.
 | **Short form** by close of business next business day**Full incident report** within 3 business days | Clear summary of the incident and immediate actions takenOther organisations / stakeholders contacted |

## Further reporting protocols for supported residential services

Supported residential services (SRS) have further reporting protocols for notifiable incidents. These protocols only apply to providers of supported residential services.

The following notifiable incidents must be reported to a resident’s guardian or person nominated:

* deterioration in health
* injury
* medication error
* personal behaviour that may pose a serious risk to safety
* relocation of resident
* termination of residential and services agreement.

The Regulator has identified that because of the unique risk profile of SRSs, notifiable incidents are to be reported to the resident’s guardian (or person nominated) **within 3 business days**.

These reporting protocols apply **in addition to** the other requirements for reporting notifiable incidents under the Act.

SRS providers may also, on request, need to provide further evidence to the Regulator about responding to medication errors and changes in health and support needs.

### Responding to medication errors

For medication errors, providers of SRS are to:

* seek medical advice (for example, the treating doctor, local chemist or Nurse-On-Call) about the potential risks and recommended follow up action
* immediately make records after any medication errors, including:
	+ the date and time
	+ what occurred
	+ what was administered
	+ the name and signature of the staff member who administered or supervised the administration of the medication.

### Change in health and personal support needs

If a resident’s health and personal support needs change:

* the service provider must ensure that the resident’s ongoing support plan is reviewed and changed as necessary to meet the changed needs of the resident
* ongoing support plans must set out the ongoing health and personal support requirements of the resident. There must also be agreements as to how a service provider can help with the resident’s ongoing health and support needs.

## How to report

### Reporting notifiable incidents

**All** notifiable incidents must be reported to the Regulator..

Service providers do this by completing a full incident report. There are different ways to complete the incident report.

Client Incident Management System (CIMS) is an e-system used by the Department of Families, Fairness and Housing (DFFH) for incident reporting for providers funded by DFFH. Relevant reports made in CIMS will be sent to DFFH and the Social Services Regulator. This means service providers report once. If your service is not funded by DFFH, you will not report through CIMS.

#### Reporting using CIMS

If you use CIMS, you can complete the full incident report using CIMS.

**Step 1** Ensure the immediate safety and wellbeing of service users directly and indirectly impacted.

**Step 2** Within 3 business days report using [CIMS](https://providers.dffh.vic.gov.au/cims).

The CIMS guide has further information about reporting at [CIMS guidance and resources – DFFH Service Providers](https://providers.dffh.vic.gov.au/cims-guidance-resources).

#### For all non-CIMS users

Some service providers do not use CIMS. Non-CIMS users include SRSs,
providers funded by the Transport Accident Commission (TAC), and providers funded by WorkSafe.

This means you can complete the full incident report using a form on our website.

**Step 1.** Ensure the immediate safety and wellbeing of service users directly and indirectly impacted.

**Step 2.** Within 3 business days report using the [Social Services Regulator incident report form](https://dhhschange.syd1.qualtrics.com/jfe/form/SV_erGLolVeBRFsQdw).

Health services providers also complete the non-CIMS users’ full incident report form. It is not possible to report notifiable incidents through VHIMS. Providers of SRSs should also use this form to make a full incident report.

### Reporting a critical notifiable incident

Determine if the incident meets the definition of a critical notifiable incident (see Table 2).

**Step 1.** Ensure the immediate safety and wellbeing of service users directly and indirectly impacted.

**Step 2.** By close of business the next business day report using the [Social Services Regulator critical notifiable incident short form](https://dhhschange.syd1.qualtrics.com/jfe/form/SV_6lmYzG7K4DBP8H4).

This short form asks you to provide a brief description of the incident and actions taken.

If the incident occurred on a Friday or the weekend, you are to submit the form by close of business the next business day.

**Step 3.** Within 3 business days complete and submit **a full incident report**.

* CIMS users submit the full incident report via [CIMS](https://providers.dffh.vic.gov.au/cims).
* Non-CIMS users submit the full incident report using the [Social Services Regulator incident report form](https://dhhschange.syd1.qualtrics.com/jfe/form/SV_erGLolVeBRFsQdw).

### What happens after I report a notifiable incident?

#### Response to a full incident report

Shortly after submitting a full incident report, you will receive a confirmation email. This will include a reference number. You may need to check your junk email (or trash) folder.

After receiving the full incident report on a notifiable incident, the Regulator will:

* review the information
* confirm the report is in scope
* assess the risk of the incident and determine a response.

The Regulator takes all reports seriously and is committed to preventing and responding to significant harm or risk of harm to service users. The Regulator may:

* ask you for further information
* monitor the response to the notifiable incident
* investigate the notifiable incident
* take action for non-compliance against the Social Services Standards (Standards), or breaches of the Act or the Social Services Regulations 2023 (the Regulations)
* close the report with no further action.

The Regulator records all notifiable incidents for intelligence purposes and identifying trends.

#### Response to critical notifiable incidents

In most cases, if the critical notifiable incident short form is completed correctly and the reported response is deemed appropriate, the Regulator will wait to review the full incident report before contacting the service provider. The information provided in the short form helps to inform the Regulator’s decision.

|  |
| --- |
| To receive this document in another format, email Social Services Regulator Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.© State of Victoria, Australia, Department of Families, Fairness and Housing, June 2025.Except where otherwise indicated, the images in this document show models and illustrative settings only, and do not necessarily depict actual services, facilities or recipients of services. This document may contain images of deceased Aboriginal and Torres Strait Islander peoples.In this document, ‘Aboriginal’ refers to both Aboriginal and Torres Strait Islander people. ‘Indigenous’ or ‘Koori/Koorie’ is retained when part of the title of a report, program or quotation.ISBN 978-1-76130-699-0 **(pdf/online/MS word)**Available at [vic.gov.au/ssr-reporting-notifiable-incident](https://www.vic.gov.au/ssr-reporting-notifiable-incident)  |

Ends