



**Shropshire, Telford
and Wrekin**
Clinical Commissioning Group

Accident & Incident Reporting Procedure

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The formally approved version of this document is that held on the NHS Shropshire, Telford and Wrekin CCG website:

www.shropshiretelfordandwrekinccg.nhs.uk

Printed copies or those saved electronically must be checked to ensure they match the current online version.

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1 Introduction

According to the Health and Safety Executive (HSE) on average every year there are approximately:

- 250 employees killed at work
- 140,000 injuries to employees reported to the HSE under Reporting of Injuries, Disease and Dangerous Occurrences Regulations (RIDDOR)
- 2.2 million people suffering from an illness that they believed was caused or made worse by their work
- 36 million work days lost due to work related ill health and injuries.

The above statistics highlight the importance of ensuring that good Health and Safety management systems are in place and that the organisation has a statutory duty to provide a safe environment with adequate welfare facilities for our staff, patients and others.

At Shropshire, Telford and Wrekin CCG (STW CCG), incident reporting is one of the primary tools of risk management and supports quality and safety improvement. The CCG can learn from accidents, incidents and near misses.

A systematic approach to reporting and investigating incidents will place the CCG in a better position to:

- take action to prevent re-occurrence
- undertake statutory and mandatory reporting to external agencies
- provide support and information to patients, relatives and staff
- improve practice as a consequence of the findings of an investigation and learn from the occurrence
- set priorities for investment in training and other resources
- deal with any possible legal implications of an incident.

The non-reporting of incidents could result in:

- Prosecution under the Health and Safety at Work Act, 1974
- The NHSLA not settling a claim or withdrawing cover
- The withdrawal of funding from the contract with commissioners of services.

Litigation can be very damaging personally, financially and from a reputational standpoint, for both the CCG and staff involved. Reporting incidents promptly can lead to the avoidance of litigation through good communication with the injured party, and/out-of-court settlement (as appropriate). Where an incident is defensible, prompt and thorough investigation will allow the CCG to effectively defend its position.

In summary, when things go wrong it is the CCG's absolute priority to respond quickly and positively to act in the injured person's best interest and to mitigate problems with the environment, equipment, care or services delivered by the CCG. By improving incident management, the CCG will improve and maintain the safety of staff and any other persons using CCG premises.

2 Purpose

Accurate and timely reporting of incidents and near misses enables lessons to be learned and change to be implemented. Analysis of trends and patterns provides information to inform education and training programmes, revise policies, procedures and guidelines, build on strengths and improve areas of weakness.

The CCG Governing Body accepts that fear of disciplinary action may deter staff from reporting incidents and has therefore chosen to adopt a positive, open and fair approach, based upon improvement through learning rather than punishment, where all staff will feel safe to report incidents and safety issues. The incident process will be fair and equitable and will focus on competence and capability. The CCG will use the individual review and, where appropriate, capability processes to support staff to fulfil their duties and responsibilities appropriately and safely. Disciplinary action will only be considered as part of the response to an incident in specific circumstances, for example, where wilful misconduct (rather than competence) or negligence are apparent.

The list below provides examples for illustrative purposes and is not intended to be exhaustive:

- personal or professional misconduct (gross)
- wilful violation of the organisational policies and procedures
- deliberate failure to report an incident in which the member of staff was involved or about which they were aware
- failure to co-operate with an investigation
- criminal actions where the police are involved which relate to an individual's work activities.

The CCG Governing Body fully supports a safety culture which acknowledges that sometimes things go wrong but as an organisation we can learn from our mistakes and take action to put things right.

3 What is an accident, incident or near miss?

HSE definitions:

Accident: An undesirable or unfortunate happening that occurs unintentionally and usually results in harm, injury, damage or loss

Incident: An undesired (unplanned/uncontrolled) event with the potential for loss.

Near miss: An event not causing harm, but has the potential to cause injury or ill health.

All work related accidents, incidents and near misses should be reported to the CCG's Corporate Affairs Manager using the CCG's Incident Reporting Form (Appendix B).

However, to encourage reporting, incidents may be reported to the Corporate Services Manager via other means, for example, telephone, e-mail, word of mouth

in the first instance. However, this should then be followed up the completion of the official Incident Reporting Form. Examples of events which are classified as incidents include: (this list is not exhaustive)

- any injury to a visitor or member of staff
- a failure of equipment
- a failure to follow CCG policy or procedure
- any situation which includes verbal abuse or threatening behaviour towards staff
- any situation which actually or potentially places staff or visitors at unnecessary risk
- where there is evidence of concerns relating to financial probity

4 Immediate action following an incident

The immediate management of the incident is the responsibility of the person in charge of the service/team at the time of the incident. This may or may not be the Service/Team Manager. The immediate action to be undertaken should follow agreed policies for the area concerned but must include the following actions:

- Make any injured or unwell person safe - where necessary contact the local first-aider, local ambulance service or other appropriate member of staff to assist
- Where other services/departments are affected or involved, arrange for these to be notified of the incident as soon as possible

In the event of an incident being notifiable to the Health & Safety Executive in accordance with RIDDOR a member of the Midlands & Lancashire Commissioning Unit (M&LCSU) Health & Safety Team must be contacted immediately during normal working hours

- Preservation of evidence. Any evidence that was involved at the scene of any incident must be preserved for further investigation. In the case of a possible or actual criminal incident no action must be taken to clean up an area until the Police have attended. Any evidence must be preserved until the Scene of Crime Officers has completed their investigation. However, if the safety of service users or staff is at risk reasonable precautions must be taken to remove the danger. This is the responsibility of the senior manager present at the incident.

5 Dissemination

Completing an Incident Report

Any staff member involved in or who has witnessed an incident involving staff or others must complete an incident form via the CCG's Incident Reporting Form (Appendix B). The information given must be fact only, not opinion. Full details including exact times, full names of the people involved and serial numbers of

equipment are required if available. The appropriate sections on the incident form should be completed, paying particular attention to include signature, designation and correct date.

Any immediate action taken to minimise the risk of the incident recurring should be documented on the incident report. As a minimum, the following must be reported:

- Full details of the incident detailing what happened? (event/near miss, severity of actual or potential harm, people and equipment involved)
- Where did it happen? (location/speciality)
- When did it happen? (date and time)
- How did it happen? (immediate causes and contributory factors)
- What action was taken or proposed immediate and longer term?
- What impact did the event have? (Harm to the organisation, the patient, others)
- What factors did, or could have, minimised the impact of the event?

Assigning a Risk Score

All incidents must be assigned a risk score. If an incident is classified as a serious incident or a serious near miss incident (i.e. 9 or above), then the Service Redesign Manager (Corporate) must be informed as soon as possible of knowledge of the serious incident and with an incident form within 1 working day. The Health & Safety Team must also be informed as soon as possible.

6 Feedback from Incidents

Feedback from incidents is the responsibility of the Service Manager and can be given in a variety of ways including one to one with staff, team briefings, investigation reports etc. The CCG's Corporate Services Manager will liaise between managers and the CSU Health and Safety Department for further feedback.

7 Support for Staff

The CCG acknowledges that staff who are involved in or witness an accident or incident may be upset and distressed and may be in need of some support. It is crucial that individuals are offered support following any incident or near miss. This may be as simple as a Line Manager offering the opportunity to discuss the issue. Whatever the support provided it should be recorded on the incident report form. Line Managers are usually the first senior person that a staff member will come into contact with and should always offer support to staff following a stressful or traumatic incident.

Examples of immediate support include:

- Opportunity for staff member to talk about events and ask questions
- Provision of a named person or service for staff member to contact if further support is anticipated or desired. This may include information about what will happen next regarding the investigation.

- Referral to internal or external sources of advice.

The following individuals or groups can provide support and advice:

- Line Manager or a member of the Management Team
- Health & Safety Team
- HR/OH Managers
- Relevant Professional groups (e.g. RCN, RCM, GMC, Unison)
- Occupational Health Department and access to a counselling service.

8 Fraud Bribery and Corruption

Unfortunately fraud, bribery and corruption, as well as theft, does occur throughout the NHS, and as such all NHS employees have a duty to ensure that public funds are protected. The CCG is committed to reducing the level of fraud, bribery and corruption (economic crime) within the NHS to an absolute minimum and keeping it at that level, freeing up public resources for better patient care.

If an employee, manager or volunteer suspects that there has been a potential act of fraud, bribery or corruption against the CCG or the wider NHS, or has seen any suspicious acts or events, they must report the matter to the CCG's Counter Fraud Team (contact details can be found on the CCG's public website) or report the matter to the NHS Fraud and Corruption Reporting Line on 0800 028 4060. Alternatively reports can be made through the online reporting tool at <https://cfa.nhs.uk/reportfraud>. Further advice on counter fraud issues is available from the Executive Director of Finance, Deputy Executive Director of Finance/Fraud Champion and the CCG's Counter Fraud Team.

CCG Counter Fraud Contact details:

Paul Westwood (Heads CW Audit's Counter Fraud Team and is the CCG's nominated Local Counter Fraud Specialist)

Tel: 07545 502400

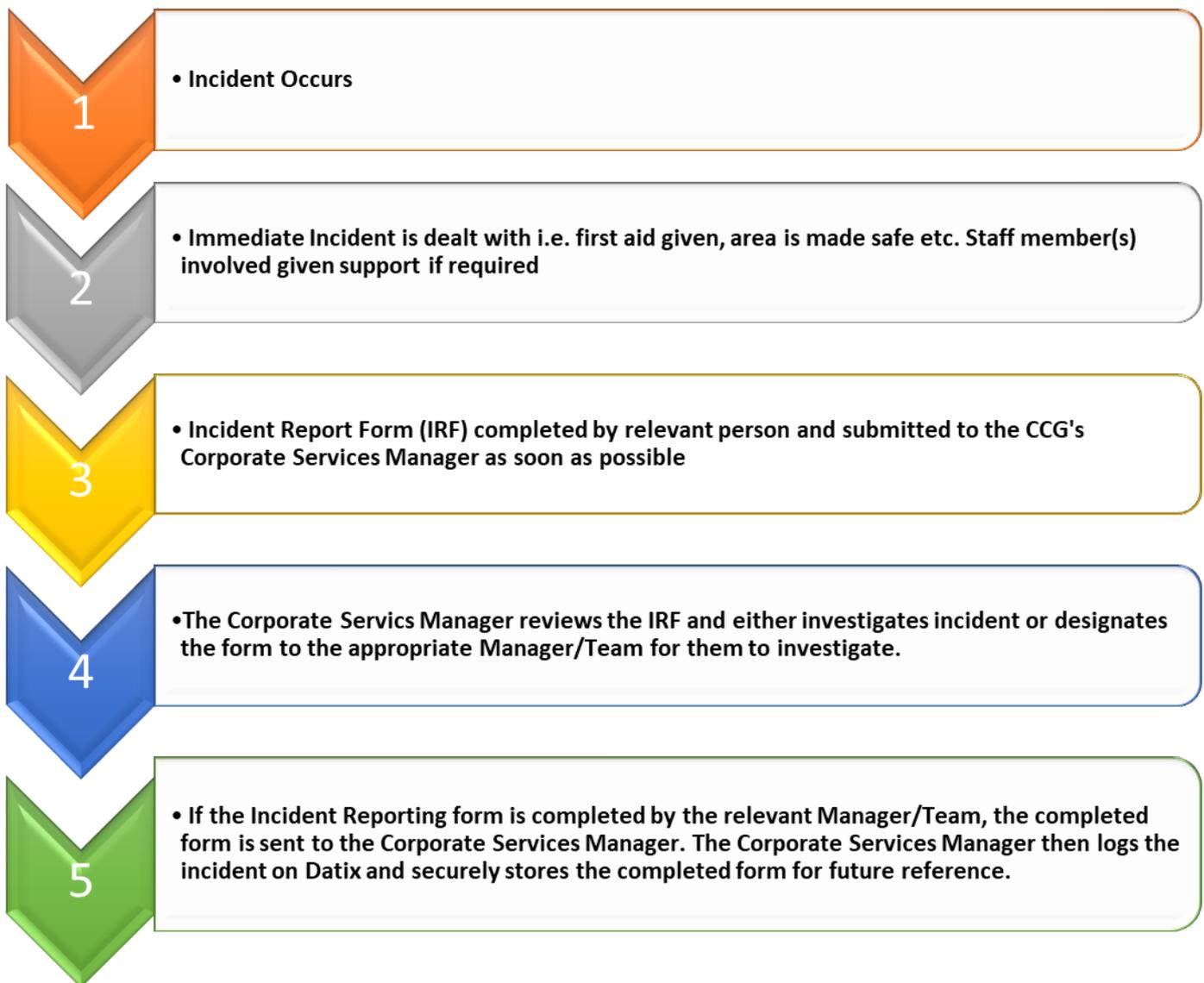
Email: paul.westwood@cwaudit.org.uk

Email: pwestwood@nhs.net (secure)

9 Counter Fraud

This policy should be read in conjunction with the CCG's policies covering counter fraud, bribery and corruption which can be found on the CCG's website (www.shropshiretelfordandwrekinccg.nhs.uk) or you can contact a member of the Team who will be able to supply a copy.

Appendix 1 – Incident Reporting Flowchart



PLEASE NOTE: If the incident is **SERIOUS** it **SHOULD** be reported **IMMEDIATELY** by telephone to the M&LCSU' Health and Safety Manager/Officer on 07771996217 or 07919303749.

Appendix 2 – Incident Reporting Form



HEALTH & SAFETY ACCIDENT, INCIDENT & NEAR MISS REPORT FORM

If the event is serious it should be reported immediately to the CCG's Corporate Affairs Manager

NAME OF MEMBER OF STAFF REPORTING INCIDENT		PERSON INVOLVED (WHERE APPROPRIATE)	
Name	<input type="text"/>	Name (if different)	<input type="text"/>
Job Title	<input type="text"/>	Address	NB If this is a report of an accident to a member of staff, the staff member's home address must be shown
Organisation ie CCG/CSU/Other	<input type="text"/>	<input type="text"/>	
Business Function (Must be completed)	<input type="text"/>	Contact No	<input type="text"/>
Contact Tel. Number must be included)	<input type="text"/>	Date of Birth	<input type="text"/>
Email Address:	<input type="text"/>	Gender (please circle)	Male/Female
		Status (please circle)	Staff / Patient / Visitor / Other
Date of Incident	Time (24 hr)		
If CCG office other than reporter's base (please specify office incident occurred in) _____)			
INCIDENT AFFECTING			
Patient/Staff Member/Organisation/Building/Contractor/Member of Public/Visitor/Other (please specify)			
If incident occurred within external Organisation/CCG/ Other NHS Trust/Service Provider (i.e., nursing home, etc.) Please provide full details site, address, etc.			
WHAT HAPPENED? (Facts only to be recorded – not opinion) Include the names of all affected or involved, or other factors that contributed to the incident - please use continuation sheet if necessary.			
INJURY DETAILS if appropriate			
WHAT ACTION WAS TAKEN AT THE TIME....? (Including any first aid given)			
WERE THERE ANY WITNESSES? (If so who?) (Give contact details)			
WAS ANY MEDICATION INVOLVED? (Give name and dosage)			

TO BE COMPLETED FOR ALL INCIDENTS BY LINE MANAGER/HEAD OF SERVICE (FOLLOWING INVESTIGATION) INTERNAL INVESTIGATION TO BE OVERSEEN BY HEAD OF SERVICE/FUNCTION INCIDENT RELATES TO

WAS ANY EQUIPMENT INVOLVED? YES/NO (Give make, model and serial number)

Who has been notified of the event/incident –

(who has already been notified by you. It can be next of kin or Managers in the organisation, etc./other affected parties.)

Please specify Type of Incident - Patient Safety/Clinical Incident or Non Clinical Incident

Incidents need to be matched against the DOMAIN OF PATIENT EXPERIENCE please identify from list below

Better Information, more choice and breach of confidentiality	<input type="checkbox"/>	Accidents	<input type="checkbox"/>
Building Closer Relationship	<input type="checkbox"/>	Sharps	<input type="checkbox"/>
Clean Friendly, comfortable place to be including security issues	<input type="checkbox"/>	Violence and Aggression	<input type="checkbox"/>
Safe and High Quality co-ordinated care	<input type="checkbox"/>	Other Issues – please specify.	<input type="checkbox"/>

SUB TYPES

Please attempt to further classify the type of incident (e.g. Slip/Trip/Fall, loss of data, security breach, confidential information breach)

Your Assessment of how harmful was this incident?

Outcome/Severity of incident	Score	Tick	Staff absence	Other																																
None	1		None – immediate return to work <input type="checkbox"/>																																	
Low (minimal harm)	2		Over 1 hour/less than 1 day/shift <input type="checkbox"/>																																	
Moderate/Semi Permanent Injury (short term)	3		1-3 days <input type="checkbox"/>																																	
Major/Permanent Injury (long term)	4		More than 3 days <input type="checkbox"/>																																	
Catastrophic/death destruction	5		Is the incident notifiable to the Health & Executive – Y/N (If in doubt contact M&LCSU's H&S Manager)																																	
Likelihood of Recurrence																																				
Almost Certain	5		<table border="1"> <thead> <tr> <th colspan="2">Was this incident a 'near miss'?</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td colspan="4">If this is a near miss, please consider what might have without intervention</td> </tr> <tr> <th>Potential Impact</th> <th>Score</th> <th>Tick</th> <th></th> </tr> <tr> <td>Insignificant/No Injury</td> <td>1</td> <td></td> <td></td> </tr> <tr> <td>Minor/Short Term</td> <td>2</td> <td></td> <td></td> </tr> <tr> <td>Moderate/Semi Permanent Injury</td> <td>3</td> <td></td> <td></td> </tr> <tr> <td>Major/Permanent Injury</td> <td>4</td> <td></td> <td></td> </tr> <tr> <td>Catastrophic/Death/Destruction</td> <td>5</td> <td></td> <td></td> </tr> </tbody> </table>		Was this incident a 'near miss'?		Yes	No	If this is a near miss, please consider what might have without intervention				Potential Impact	Score	Tick		Insignificant/No Injury	1			Minor/Short Term	2			Moderate/Semi Permanent Injury	3			Major/Permanent Injury	4			Catastrophic/Death/Destruction	5		
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Likely but not persistent Issue	4																																			
Possible (may recur occasionally)	3																																			
Unlikely (but possible)	2																																			
Rare (not expected to occur for years)	1																																			
OVERALL GRADING (Impact x Likelihood)																																				
0-3 LOW RISK	4-8 MODERATE RISK	9 & ABOVE SIGNIFICANT RISK	15 & ABOVE HIGH RISK																																	

SIGNED

PRINT NAME

DATE

WHY DID THIS INCIDENT HAPPEN?		
(e.g. failure of processes, missing procedures etc)		
WHAT ACTION HAS ALREADY BEEN TAKEN?		
WHAT FURTHER ACTION IS RECOMMENDED OR PROPOSED?		
ANY OTHER COMMENTS? HAVE ANY SERVICE IMPROVEMENT ISSUES BEEN IDENTIFIED?		
IS FURTHER INVESTIGATION BEING UNDERTAKEN YES/NO Responsible officer		
IF NO - ARE THERE ANY FURTHER RECOMMENDATIONS OR PROPOSALS (please detail)		
PLEASE TICK BOX IF THERE ARE ANY SAFEGUARDING ADULT/CHILDREN ISSUES INVOLVED	IF YES TICK HERE	DATE OF REFERRAL

SIGNED	PRINT NAME	DATE
MANAGER CONTACT TELEPHONE NUMBER OR EMAIL ADDRESS		
MANAGER ADDRESS/BASE		
HOW TO USE THIS FORM		
<ul style="list-style-type: none"> • This form should be freely available to everyone working with the organisation • It can be completed by any member of staff but should be signed by immediate supervisor or line manager • Use this form to report anything which causes you concern • Events resulting in injury or serious harm should always be drawn immediately to the attention of your manager 		
ON COMPLETION THIS FORM SHOULD BE SENT TO THE CCG'S CORPORATE SERVICES MANAGER (TRACY EGGBY-JONES) WITHIN THREE (3) DAYS, HOWEVER IF THE EVENT IS SERIOUS IT SHOULD BE REPORTED IMMEDIATELY BY TELEPHONE TO THE M&LCSU's Health & Safety Manager/Officer on 07771996217 or 07919303749. PLEASE SEND BY EMAIL TO: tracy.eggby-jones@nhs.net		
IF THE INCIDENT IS NOTIFIABLE TO THE HEALTH & SAFETY EXECUTIVE – THE HEALTH & SAFETY MANAGER – M&LCSU SHOULD BE INFORMED IMMEDIATELY ON mobile 07771 996217		
FAIR BLAME STATEMENT – COMPLETION OF THIS FORM WILL NOT LEAD TO DISCIPLINARY ACTION, EXCEPT WHERE ACTS OR OMISSIONS ARE MALICIOUS, CRIMINAL, OR CONSTITUTE GROSS OR REPEATED PROFESSIONAL MISCONDUCT		

Continuation Sheet