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Reporting, Recording, and Notifying Accidents, Incidents, Infectious Diseases, and Deaths including RIDDOR Arrangements Policy

Version Control Sheet

VERSION	DATE OF REVIEW	IMPLEMENTED AND AUDITED BY	STATUS	COMMENTS
4	01/04/2024	Ann Kelly (Registered Manager)	Active	To be reviewed 01/04/2025

Purpose

Clinical24 Staffing Limited has a duty to protect the health, safety and wellbeing of all individuals who are associated with its activities. This policy is aligned with the current legislation, regulations, and guidelines in the United Kingdom, specifically in Northern Ireland, and aims to promote transparency, learning, and compliance with regulatory bodies.

Statement

Clinical24 Staffing Limited Nursing Agency is committed to ensuring the health, safety, and well-being of our clients, patients, and healthcare professionals. The Reporting, Recording, and Notifying Accidents, Incidents, Infectious Diseases, and Deaths including RIDDOR Arrangements Policy is essential in guiding our staff members in promptly reporting, recording, and notifying any incidents, accidents, infectious diseases, or deaths that occur in the course of our operations.

Accidents and incidents are an unfortunate occurrence of day-to-day life. Most are avoidable and if proper care and attention are given to risk assessment prior to carrying out a task, the risks can be significantly reduced.

The DHSSPSNI document “Safety First: A framework for Sustainable Improvement in the HPSS” defines an error or incident as:

“Any event or circumstances that could have or did lead to harm, loss or damage to people, property, environment or reputation”.

This definition includes ‘near misses’ as it acknowledges that not all errors result in harm.

Recent research has indicated that workplace ill health is estimated to be costing the Northern Ireland economy over £238 million per year. In Northern Ireland alone it is

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estimated that 395 people die each year due to work-related disease (https://www.hseni.gov.uk).

Reporting accidents and incidents is covered by the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997 (RIDDOR). These regulations place a requirement on employers to report certain incidents and accidents to the HSE.

These include:

- deaths and certain specified injuries
- injuries resulting in incapacitation lasting seven days or more
- some work-related diseases
- dangerous occurrences (near misses)
- gas incidents

More information on how to report incidents and accidents can be accessed here: https://www.hseni.gov.uk/report-incident

Accidents and incidents can and will happen, but with proper safety management techniques in place, we can keep them to an absolute minimum. The aim of this policy is to establish a clear incident-reporting and investigation procedure and to comply with all relevant legislation, including the:

- Health and Safety at Work (Northern Ireland) Order 1978.
- Management of Health and Safety at Work Regulations (Northern Ireland) 2000.
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997 (RIDDOR).

Procedure and Guidance

Accidents and Incidents

To ensure that any accidents, incidents and near misses are recorded, correctly investigated and, where appropriate, reported to the relevant authorities, we will:

- ensure that a clear accident, incident and near miss reporting protocol is communicated throughout Clinical24 Staffing Limited.
- the Registered Manager will report reportable accidents/incidents/near misses to the relevant authorities.
- ensure all accidents and incidents are recorded in the accident book.
- investigate all accidents and incidents fully, to establish their root cause and to develop new procedures to reduce recurrence.
- review accident and incident statistics periodically, to identify trends.
- review this policy at least annually, but more frequently if necessary.

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To fulfil our responsibilities as outlined above, we will:

- establish and communicate a clear accident, incident and near-miss reporting protocol, where any such occurrence is reported to the responsible person.
- provide easily accessible accident books for the reporting of accidents and incidents.
- appoint a responsible person to report appropriate accidents, incidents and near misses, and to provide training, where practicable.
- ensure all workers are aware of emergency procedures in the event of a major accident or incident.
- establish whether an accident or incident is reportable and contact the relevant authorities as soon as possible, through the online accident reporting toolkit.
- cooperate with the relevant authorities on any external investigations.
- investigate incidents fully, taking witness statements where possible, to establish their root cause and to develop new procedures to reduce recurrence.
- ensure disciplinary action is taken if breaches of policy or misconduct are established by the investigation.
- ensure all elements of an accident, incident or near miss investigation are recorded and filed for future reference.
- protect the health, safety and welfare of our workers by providing appropriate support facilities (such as counselling) for those affected by the accident.
- periodically review accident, incident and near miss statistics to identify trends and set realistic timescales for improvement actions.

Reporting Incidents

- The safety and welfare of the individual(s) affected by the incident is the priority.
- All incidents including near misses are reported to the Registered Manager. For example, clinical care, social care coma personal accidents, violence, abuse or harassment, security, equipment, add fire incidents.
- Registered Manager will determine the immediate actions required following the incident so that the safety and care and services to all individuals is maintained.
- If out of hours the Senior Nurse in Charge should be contacted.
- The individuals directly involved in the incident should immediately complete the incident report form. This may be done in conjunction with the individual charge at the time of incident.
- All local incident reporting policies and procedures should be adhered to.
- Incident report forms should provide a clear and factual description of the circumstances of the incident. Opinion should not be provided.
- Do not make offensive, personal or humorous comments.
- Do not erase, overwrite or ink out entries. Errors or should be scored out with a single line, the corrected entry written alongside, and this should then be dated and signed.

- All individuals involved in the incident must be clearly identified on the incident report.
- Original statements should be forwarded to the Registered Manager.

Assessing Risk

Based on the information is received the Registered Manager should grade the incident Very Low (Green), Low (Yellow), Medium (Orange), High (Amber), and Very High (Red).

The Registered Manager will assess the risk and impact of the incident to determine whether it's considered a serious incident.

Head of Nursing/Responsible Person/ Clinical Governance and Quality Team notified immediately for Very High (Red) and High (Amber) graded incidents.

Recording Information

The Registered Manager will record description of events (e.g. injuries or damage subsequently detected, or deterioration in service user's condition), and document onto the incident spreadsheet.

The Registered Manager will send email acknowledgement to service user and contact the worker by telephone & email of incident within 24 hours.

The Registered Manager will notify relevant teams of any restrictions or requirements & note on system.

Original statements should be forwarded to the Registered Manager.

The Registered Manager will request a meeting with worker if required.

Arrangements for Reporting and Follow-up of Serious Adverse Incidents (SAIs), Significant Event Analysis (SEAs), and Early Alerts in Clinical24 Staffing Limited

Clinical24 Staffing Limited is committed to ensuring the highest standards of care and safety for our service users. This section outlines the arrangements in place to effectively report, analyse, and follow up on Serious Adverse Incidents (SAIs), Significant Event Analysis (SEAs), and Early Alerts in accordance with the Strategic Planning and Performance Group (SPPG) Procedure for Reporting and Follow-up.

Serious Adverse Incidents

The following criteria will determine whether or not an adverse incident constitutes a Serious Adverse Incident (SAI):

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- serious injury to, or the unexpected/unexplained death of a service user; staff at work; and visitor to facility.
- any death of a child in receipt of HSC services or on the Child Protection Register.
- unexpected serious risk to a service user and/or staff member and/or member of the public.
- unexpected or significant threat to provide service and/or maintain business continuity.
- serious self-harm or serious assault by a service user, staff or a member of the public within any healthcare facility.
- serious self-harm or serious assault on other service users, staff, members of the public by a service user in the community who has a mental illness or disorder.
- suspected suicide of a service user who has a mental illness or disorder.
- serious incidents of public interest or concern relating to theft, fraud, information breaches or data losses

A Serious Adverse Incident (SAI) should be reported to the Health & Social Care Board (HSCB), Public Health Agency (PHA), and Northern Ireland Adverse Incident Centre (NIAIC).

All staff members are required to promptly report any Serious Adverse Incidents (SAIs) and Significant Events to their immediate supervisor or manager. This includes incidents that result in or have the potential for severe harm, long-term impact, or fatality.

Incident reporting forms, clearly outlining the essential details and incident classification, are available on the agency's electronic system and in hardcopy.

Each reported incident is assigned a unique reference number for tracking and effective follow-up.

Early Alerts

Early Alerts are used to communicate potential risks or emerging issues that require immediate attention or further investigation to prevent harm or adverse outcomes.

Any staff member who becomes aware of an Early Alert situation is responsible for reporting it to their immediate supervisor or manager.

Early Alerts can be raised through various means, such as incident reporting forms, verbal communication, or electronic systems.

Analysis and Review

The Clinical & Corporate Governance and Risk Management Committee is responsible for reviewing all SAIs, SEAs, and Early Alerts.

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SAIs and SEAs are subjected to thorough analysis and investigation to identify root causes, contributing factors, and any system or process failures.

The Registered Manager may seek additional input from relevant staff members, service users, or external entities, as necessary, to gather detailed information and different perspectives.

Analysis and review activities are conducted in a timely manner to facilitate appropriate actions and prevent similar incidents in the future.

Lessons learned, best practices, and recommendations for improvement are documented and shared with relevant stakeholders within the organization.

Follow-up Actions

Based on the analysis and review findings, appropriate corrective actions and improvements are identified and assigned to the relevant staff members or departments.

All follow-up actions are documented, including timelines for completion and responsible parties.

Regular progress updates are shared, tracked, and monitored to ensure timely implementation of the identified actions.

Follow-up actions related to SAIs and SEAs may involve changes in policies, procedures, training programs, or quality improvement initiatives.

Communication and Documentation

The Registered Manager ensures that key findings, actions, and outcomes related to SAIs, SEAs, and Early Alerts are effectively communicated to relevant stakeholders.

Documentation of all reports, analysis, follow-up actions, and outcomes is maintained securely and in accordance with data protection regulations.

Performance reports and analysis summaries are provided to the Clinical & Corporate Governance and Risk Management Committee for transparency, accountability, and alignment with strategic planning initiatives.

Review and Continuous Improvement

Clinical24 Staffing Limited conducts periodic reviews of the reporting and follow-up procedures for SAIs, SEAs, and Early Alerts to ensure their effectiveness and compliance.

Feedback, suggestions, and concerns from staff, service users, or external entities are welcomed and considered as part of the continuous improvement process.

Any necessary revisions or updates to the procedures are made in a timely manner, communicated to all relevant parties, and incorporated into staff training and education programs.

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Clinical24 Staffing Limited has implemented robust arrangements for reporting, analysing, and following up on Serious Adverse Incidents, Significant Event Analysis reports, and Early Alerts. These arrangements align with the Strategic Planning and Performance Group (SPPG) Procedure for Reporting and Follow-up and are instrumental in ensuring the ongoing delivery of safe, high-quality care to our service users.

Incident Closure

Once satisfied that outcome have been met notify worker/service user/external bodies in writing. All internal staff will be notified of any change of restrictions/exclusions/requirements. All information will be entered onto relevant reports. The Registered Manager will track trends and monitor activity. The Registered Manager will report to Clinical Governance and Standards Team.

Legislation and Regulations

- ***Health and Safety at Work (Northern Ireland) Order 1978***: This legislation outlines employer's responsibilities to ensure the health, safety, and welfare of employees and non-employees, including reporting accidents and dangerous occurrences.
- ***Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations (RIDDOR) 2013***: RIDDOR applies to the reporting of specified accidents, incidents, diseases, and dangerous occurrences in the workplace. It sets out the types of events that need to be reported and the procedure for reporting to the relevant authorities.
- ***Public Health (Control of Diseases) Act (Northern Ireland) 1983:*** This legislation focuses on the control and management of infectious diseases and outlines requirements for reporting notifiable diseases.

Reporting Procedures

- ***Internal Reporting:*** All staff members, including the Registered Manager and agency nurses and healthcare professionals, are obligated to report any accidents, incidents, outbreaks of infectious diseases, or deaths that occur during their work for Clinical24 Staffing Limited. Reports should be made as soon as possible, following the incident or discovery of the infectious disease, using the designated reporting channels or forms.
- ***Incident Reporting:*** All incidents, accidents, or near-miss events should be reported using the agency's incident reporting system. This may involve completing incident report forms, outlining the details of the event, and providing relevant information for investigation and analysis.
- ***Infectious Diseases*****:** Any suspected or confirmed cases of notifiable infectious diseases must be reported to the appropriate public health authorities as required by law. The Registered Manager is responsible for coordinating the notification process and ensuring compliance with reporting requirements.
- ***Deaths:*** In the unfortunate event of a patient's death, it must be reported promptly and in accordance with local procedures, regulations, and the guidance of the

relevant authorities. The Registered Manager is responsible for ensuring the proper documentation and notification of deaths to the relevant bodies, such as the Coroner, PSNI, local authority, as required by law.

Recording and Documentation

- ***Accurate and Detailed Records:*** All accidents, incidents, infectious diseases, and deaths must be accurately recorded, including relevant details such as date, time, location, people involved, nature of the incident, and actions taken. The documentation should be factual, objective, and maintained in a secure manner.
- ***Confidentiality and Data Protection:*** Clinical24 Staffing Limited Nursing Agency adheres to strict confidentiality and data protection regulations. Personal information and sensitive data related to accidents, incidents, infectious diseases, or deaths should be handled in compliance with relevant legislation, such as the General Data Protection Regulation (GDPR) 2018.

Notifying Relevant Authorities

- The Registered Manager to notify relevant bodies. E.G. Regulation and Quality Improvement Authority (RQIA); Northern Ireland Adverse Incident Centre (NIAIC); PSNI; Vulnerable Adults Designated Officer; and Coroner
- The Registered Manager will report Serious Adverse Incidents to the Health and Social Care Board (HSCB)and Public Health Agency (PHA).
- The Registered Manager will report Early Alerts to DHSSPSNI.
- RIDDOR Reporting: When a reportable accident, incident, or dangerous occurrence occurs, it should be reported to the Health and Safety Executive (HSE) in accordance with RIDDOR legislation. Reports can be made online or via telephone, following the specific requirements outlined by the HSE.
- Public Health Authorities: The Registered Manager is responsible for notifying the appropriate public health authority of any suspected or confirmed cases of notifiable infectious diseases as required by the Public Health (Control of Diseases) Act (Northern Ireland) 1983. The relevant public health authority should be contacted promptly, and all necessary information should be provided.

Training and Awareness:

- ***Staff Training:*** Clinical24 Staffing Limited ensures that all staff members, including the Registered Manager and agency nurses and healthcare professionals, receive training on the policies, procedures, and legal requirements related to reporting, recording, and notifying accidents, incidents, infectious diseases, and deaths. Training sessions may cover reporting channels, documentation requirements, confidentiality, and data protection.

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- ***Ongoing Awareness:*** Continuous communication, reminders, and updates on reporting procedures, legal obligations, and regulatory changes will be provided to ensure that all staff members remain knowledgeable and vigilant in reporting any incidents or events.

Review and Updates:

This Reporting, Recording, and Notifying Accidents, Incidents, Infectious Diseases, and Deaths including RIDDOR Arrangements Policy will be reviewed annually to ensure compliance with current legislation, regulations, industry standards, and best practices. Updates will be made as necessary to maintain alignment with evolving requirements and to address any feedback or lessons learned.

References:

1. Health and Safety at Work (Northern Ireland) Order 1978

2. Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations (RIDDOR) 2013

3. Public Health (Control of Diseases) Act (Northern Ireland) 1983

4. General Data Protection Regulation (GDPR) 2018

Next Review

Reviewed by:	Ann Kelly
Title:	Registered Manager
Signed:	
Last Review Date:	01/04/2024
Actions:	Address Updated

Next Review Date: April 2025

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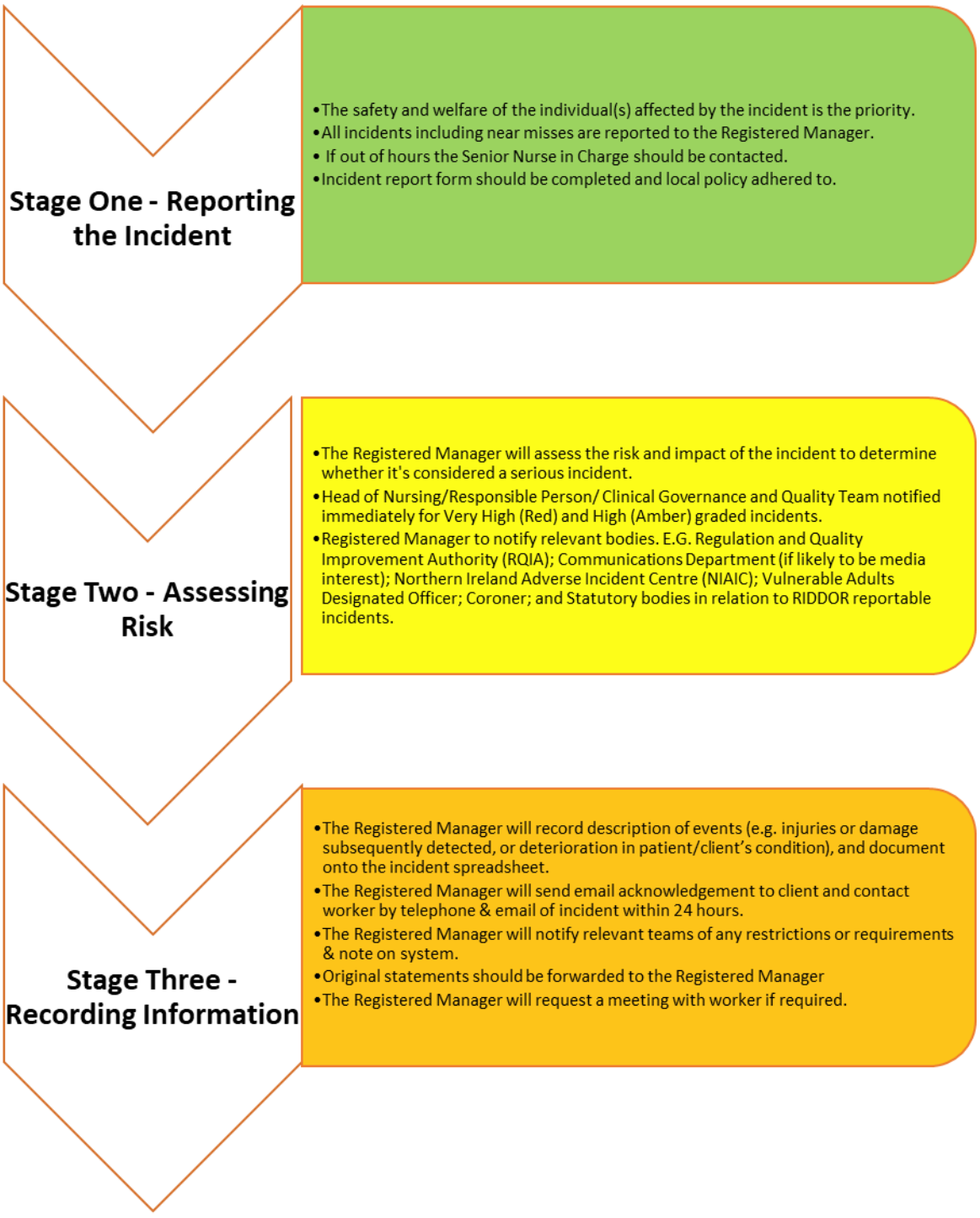
Incidents Procedure



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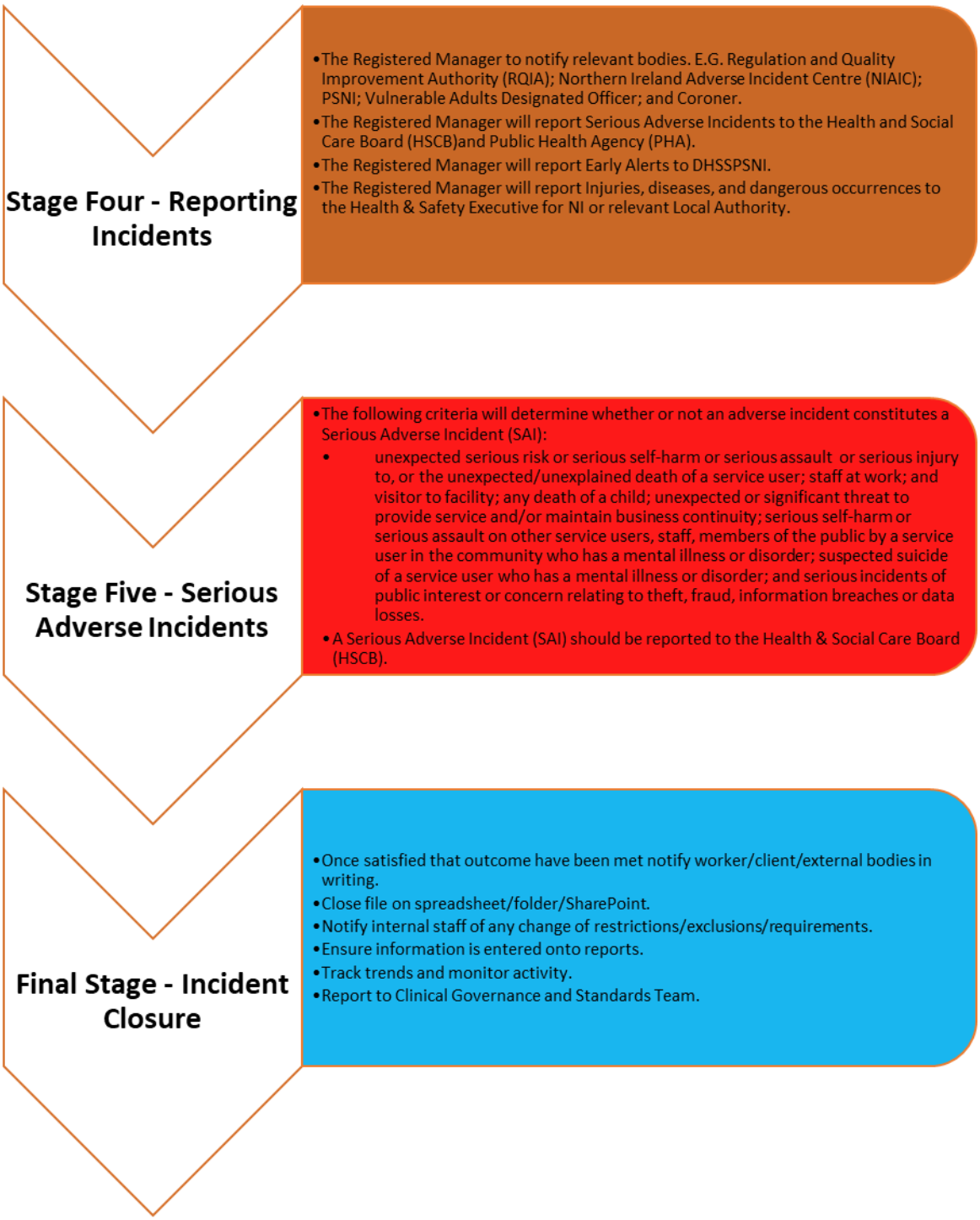

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Incidents Matrix

TYPE	SEVERITY
Very Low	Isolated or one-off incident. No impact or risk to provision of care or treatment. Usually a single resolvable issue. Minimal impact and relative minimal risk to the delivery of care, treatment or service. Minimal investigation required by the Registered Manager. However, they must be monitored regularly to identify patterns or trends and, where necessary, develop and implement actions. Should normally be completed and closed within 7 days.
Low	Infrequent incident but may have happened before. Usually a resolvable issue. Minimal impact and relative minimal risk to the provision of care treatment or service. Requires a formal investigation by the Registered Manager to determine recommendations and outcome. Tracking of potential trends and to mitigate further similar complaints. Should normally be completed and closed within 7 days.
Medium	Previously occurred but is not frequent or regular. The service or experience below reasonable expectations in several ways but not causing lasting problems. Has potential to impact on service provision. Minimal impact and relative minimal risk to the provision of care treatment or service. Requires a formal investigation by the Registered Manager to determine recommendations and outcome. Tracking of potential trends and to mitigate further similar complaints. Should normally be completed and closed within 10 days.
High	Significant degree of seriousness, and impact on individual(s) involved. Incidents with clear quality assurance or risk management issues that may cause lasting problems for the organisation, staff or service user. Head of Nursing/Responsible Person/ Clinical Governance and Quality Team notified. May require multi-disciplinary or independent investigation. Should normally be completed and closed within 21 days.
Very High	Serious incident that may cause long term damage such as grossly substandard care, professional misconduct or death. Requires immediate comprehensive investigation by the Registered Manager. Head of Nursing/Responsible Person/ Clinical Governance and Quality Team notified. The Head of Nursing and the Clinical Governance and Quality Team will determine whether a Root Cause Analysis is required. Should normally be completed and closed within 21 days. However, it is depending on the complexity of the incident. Closure or down-grading of red incidents requires approval by the Head of Nursing, and Clinical Governance and Quality Team.

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	Severity	Very Low	Low	Medium	High	Very High
Likelihood	Very Likely	Low	Medium	High	Very High	Very High
	Likely	Low	Low	High	Very High	Very High
	Possible	Very Low	Low	Medium	High	Very High
	Unlikely	Very Low	Very Low	Low	High	High
	Very Unlikely	Very Low	Very Low	Low	Medium	High

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Clinical24 Accident / Incident Form

Instructions:
1. Please use this form to report all work-related injuries, diseases, ill health and near misses.
2. Complete the form immediately after the incident or arrange for someone to do it on your behalf.
3. Email the completed form to the Registered Manager without delay.
4. Email a copy of the completed form to ann.kelly@clinical24ni.co.uk or complaints@icg-medical.com.
5. The Registered Manager will then need to complete an Investigation and may conduct a Risk Assessment.

For further guidance on completing this form please contact the Registered Manger or Head of Nursing.

1.2 When did it happen?

Day:	Date:	Time (24hr clock)

1.3 Where did it happen?
Please give specific details. Please provide address or location (road, building, floor, room, outdoor location, private residence etc).

1.4 What happened?
Please describe the near miss, accident, incident, dangerous occurrence etc., including events that lead to it, and details about any equipment, substances or materials involved.

1.5 What category best describes the incide

1.6 Witnesses

Name (s) and contact details o
anyone who witnessed the inci

Section 2 - About the Person

2.1 Who was involved?
Name, role and contact details (include staff number). Please Include the details for any third party injured (e.g. service user, member of the public etc, but use initials to ensure confidentially).

If Near Miss reported - plea

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2.2 What type of injury / illness / disease has been sustained?

Please include which part / side of the body was affected.

For injuries only:

2.3 What treatment was provided?

Please include whether first aid and/or hospital treatment was needed.

2.4 Did the injured person go straight back to work afterwards?

If no, please given duration of absence if known.

Section 3 – Person Completing this Form – If same as Section 2.1 above, go to Section 4

3.1. Details of the person completing this form (if different to those give in box 2.1 above)

Name, role and contact details.

3.2. Date form completed:

Section 4 – Information Sharing

Trade union appointed safety representatives have a legal right under Safety Representatives and Safety Committees Regulations (Northern Ireland) 1979 to see all accident reports. This form may also be shared with other legal representatives outside the organisation.

If you do not wish for your personal details on this form to be provided to Trade Union appointed safety representatives or legal representatives, then pl tick this box:

Section 5 – Signature

Name:	Role:

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Signature:	Date:

Data Protection Act 2018
The information you have provided will be held by Clinical24 Staffing Limited on computerised or manual files within the organisation. The information will be used for record purposes. The form will also be shared with the Head of Nursing/Business Manager and Governance Team in order that they can ensure the matter has been properly investigated and reported to enforcement agencies (if required). The data may be disclosed to other departments or organisations, but only in order to ensure compliance with relevant legislation or to prevent fraud or a crime.

THIS FORM ON COMPLETION SHOULD BE RETURNED TO THE REGISTERED MANAGER AS SOON AS POSSIBLE.

Section 6 - Investigation

6.1 Causes

Was the scene of the incident visited? Yes □ No □
Have photographs been taken? Yes □ No □ (if Yes please attach)
Has any physical evidence been retained? Yes □ No □
Has the direct/indirect cause of the incident been identified? Yes □ No □

Please detail below the causes of the accident, incident or work-related ill-health and any previous relevant incidents:

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Continue on a separate sheet as required.

Section 7 - Signature of Investigator(s)

	Print Name:	Signature:	Date:
Person Investigating Incident	.....	.....	.....
Reviewed by:	.....	.....	.....
(Review actions)			

It is the responsibility of the Registered Manager to ensure the accident/incident is fully investigated and details recorded on this form before it is submitted to the Head of Nursing/Governance Team.