

# Policy for the Reporting of Adverse Incidents, Accidents, Near Misses and Dangerous Occurrences

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# Reference No:

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	Information Security Policy		
	Data Protection & Confidentiality Policy		

# Incident Reporting Policy

# Contents

1.	Introduction	4
2.	Legislation	4
3.	Definitions	5
4.	Scope	5
5.	Responsibilities	6
6.	Incident Management	7
7.	Recording and Reporting	7
8.	Investigation	8
9.	Reporting and Monitoring	8
10.	Non-Compliance	8
11.	Review	8
12.	Equality Statement	9

### 1. Introduction

- 1.1 This document sets out the Business Services Organisation (BSO) policy for the reporting of incidents and gives guidance on what staff should do following an incident, how it should be managed and investigated. It encourages a reporting and learning culture with safety at its heart.
- 1.2 Reporting all data breaches, accidents and near misses, however trivial they may appear, enables a profile to be built of the risks to staff, patients, visitors and the business of BSO, from which a strong and factual basis for targeting resources effectively can be developed. By analysing the root cause of incidents, BSO is able to take action to reduce or eliminate the risk of similar incidents recurring
- 1.3 Furthermore, the reporting of data breaches is mandatory under the General Data Protection Regulation (GDPR). Certain breaches must be reported to the Information Commissioner's Office (ICO) within 72 hours of becoming aware of their occurrence. It is therefore vital for BSO to have appropriate mechanisms in place to report and investigate data breaches (suspected or otherwise) in a timely fashion.
- 1.4 The process of reporting an incident aims to:
  - Focus on service improvement for service users;
  - Recognise the responsibilities of individual organisations and support them in ensuring compliance;
  - Clarify the processes relating to the reporting, investigation, dissemination and implementation of learning arising from Incidents
  - Keep the process for the reporting and review of SAIs under review to ensure it is fit for purpose and minimises unnecessary duplication;
  - Maintain a high quality of information and documentation within a time bound process.

### 2. Legislation

There are obligations under legislation and Departmental Guidance to ensure effective management of incidents and accidents. These include, but are not necessarily limited to:

- Circular HSC (SQSD) 08/2010 which covers medical devices, serious equipment failings, fire, counter fraud and security management as well as serious incidents involving staff, service users or members of the public;
- The Social Security Act 1975 which requires a person who suffers personal injury by accident whilst at work to notify his employer, manager or supervisor at the time of the accident;
- Health and Safety legislation including:
  - o The Health and Safety at Work Act 1974 and NI Order 1978
  - Management of Health and Safety at Work Regulations-(Northern Ireland) 2000
  - Workplace (Health, Safety and Welfare) Regulations (Northern Ireland) 1993

- Manual Handling Operations Regulations 1992 (Amended 2004)
- Provision and Use of Work Equipment Regulations 1998
- o General Data Protection Regulation (GDPR) 2016
- Provision and Use of Work Equipment Regulations (Northern Ireland) 1999
- Lifting Operations and Lifting Equipment Regulations (Northern Ireland) 1999
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)
- Human Rights Act 1998;
- Disability Discrimination Act 1995; and
- HSCB guidance on Serious Adverse Incidents

### 3. Scope

The scope of this policy is to support the control and management of incidents. It applies to all directorates, services and departments, all permanent and temporary staff, all agency workers, and as appropriate to contractors and third party service providers acting on behalf of BSO.

### 4. Definitions

- 4.1 **An accident**: "An unplanned event that causes injury to persons, damage to property or a combination of both and may be minor/ major/ fatal. Injury or harm to staff or other person, caused by an event"
- 4.2 An Adverse Incident: "Any event or circumstances that could have been or did lead to harm, loss or damage to people, property, environment or reputation" which includes an event that has, or may have, impacted upon the delivery of service or health improvement. Incidents include hazards (i.e. anything which has the potential under certain circumstances to cause injury, illness or harm), accidents (direct results of unsafe activities or conditions), dangerous occurrences and significant events. Examples include:
  - Any event that resulted in an adverse effect (however minor) on a service user / member of the public / member of staff or patient;
  - Failure of equipment, whether or not injury occurs;
  - Serious damage to BSO estate or property to which BSO are tenants;
  - Serious damage / loss / theft of BSO property or estate (to which BSO own or are tenants);
  - Damage, loss of theft to personal property whilst on BSO related business;
  - Fire;
  - Violence:
  - Breaches of security;
  - Illegal acts;
  - Breach of information governance arrangements.

### 4.3 Serious Adverse Incidents (SAIs):

- Serious injury to, unexpected/unexplained death of or unexpected risk to:
  - A service user
  - A staff member in the course of their work
  - A member of the public whilst visiting a BSO facility.
- Unexpected or significant threat to service and/or business continuity.
- 4.4 **A near miss**: An incident includes near misses. This is where any of the above may have happened had intervention or evasive action not been taken

### 5. Responsibilities

- 5.1 **The BSO Board** has overall responsibility for effective risk management and this includes oversight of the management of adverse incidents within BSO for which the Chief Executive is accountable. The Director of Human Resources and Corporate Services has operational responsibility for this policy and is supported by the Head of Corporate Services who is responsible for the day to day administration of the process.
- 5.2 **Directors** are responsible for ensuring that the policy is fully implemented in their Directorate.
- 5.3 **The Business and Development Committee** is responsible for seeking assurance and advising the Board on the management of incidents
- 5.4 **The Data Protection Officer (DPO)** is responsible for liaising with the Information Commissioner's Office (ICO) as appropriate. The DPO should also be advised of all breaches of personal data.
- 5.4 **Managers** are responsible for:
  - ensuring that all staff are aware of the policy and procedures;
  - ensuring appropriate and timely reporting of incidents:
  - supporting the process of reporting and reviewing and investigating local incidents;
  - taking local remedial and preventative action and informing relevant staff or bodies of such action, and about any lessons learned;
  - supporting and debriefing staff.
- 5.5 **Independent contractors** are contractually obliged to report incidents to the relevant BSO staff for onward investigation and reporting.
- 5.6 The Head of Corporate Services will:
  - ensure accessibility of up to date reporting documentation and guidelines:
  - support and facilitate investigations into incidents as appropriate;
  - ensure that incident reports are sent to the appropriate persons and/or bodies:
  - prepare reports as appropriate (Refer to Section 8)
  - ensure information on reported incidents is up to date and available for inspection by appropriate persons or bodies;

- ensure escalation to other appropriate organisations as appropriate
- 5.7 All staff members, whether permanent, temporary or agency workers are responsible for ensuring that they are aware of the requirements incumbent upon them and for ensuring that they comply with these on a day to day basis. Staff are expected to familiarise themselves with, and abide by, this policy. Specifically, all staff are responsible for:
  - adhering to the requirements within this policy and relevant legislation;
  - reporting any relevant incident in line with this policy;
  - provision of information and/or reports as requested as part of an investigation;
  - taking appropriate action to ensure incidents do not recur.

### 6. Incident Management

- 6.1 The immediate responsibility for managing an incident falls to the most senior person on duty at the time the incident occurs. If the event is regarded as an SAI, the Chief Executive, relevant director and Head of Corporate Services must be informed immediately.
- 6.2 It is the responsibility of the individual(s) investigating the incident to, where appropriate:
  - make the situation safe;
  - provide or arrange any first aid or medical care as needed;
  - decide what other parties require to be informed;
  - ensure appropriate person(s) are informed;
  - ensure that the appropriate documentation has been correctly and fully completed, and forwarded to Corporate Services, at the earliest opportunity and no later than two working days after the incident;
  - make every reasonable effort to locate and retrieve any information lost, altered and disclosed in the event of a data breach.

### 7. Recording and Reporting

- 7.1 All non-information related adverse incidents, accidents and near misses must be reported using the Incident Reporting Form, available on BSO's Intranet:
  - http://intranet.bso.hscni.net/2365.htm

This form should be forwarded to admin.bso@hscni.net upon completion

- 7.2 All information related incidents must be reporting using the Data Breach Form, available on BSO's Intranet:
  - http://intranet.bso.hscni.net/2365.htm

This form must be forwarded to databreach@hscni.net upon completion.

7.3 Serious Adverse Incidents must be also reported to the Health and Social Care Board (HSCB) as soon as possible via Corporate Services.

- 7.4 The recording of ICT incidents should be logged by email, phone or via Infra. The Assistant Director of ITS or other relevant Senior Manager will manage ICT incidents in conjunction with the ITS Incident Management Process. Further information on reporting ICT incidents can be found on BSO's Intranet:
  - http://intranet.bso.hscni.net/2542.htm
- 7.5 Regulation 2(2) of RIDDOR also requires BSO to notify the Health and Safety Executive of Northern Ireland (HSENI) of any accident or dangerous occurrence within the workplace. It is the responsibility of Corporate Services to notify HSENI without delay of the details of the incident. This must be followed up within ten days by a completed NI2508 form to HSENI. For further information see the HSENI website: http://www.hseni.gov.uk

### 8. Investigation

- 8.1 Investigations will be led by a member of staff with the requisite expertise, and any reports and/or recommendations approved by BSO's Senior Management Team. The lead investigator will be determined by the nature of the incident, who was involved and where it occurred. Input may also be required from additional personnel (such as a health and safety adviser, technical staff, information governance staff or equipment suppliers) who may need to be involved depending on the nature and seriousness of the incident.
- 8.2 Investigations should use appropriate methodology to identify the cause of a problem, and the actions that are necessary to either eliminate or significantly reduce risk.

### 9. Reporting and Monitoring

Monitoring reports will be provided to BSO's Board, SMT, Business and Development Committee, Information Governance Managament Group (IGMG) and the Health and Safety & Environment Group on a quarterly basis. Reports may also be submitted to external bodies (such as HSCB, HSENI, etc.) as required.

### 10. Non-Compliance

A failure to adhere to this policy and any associated procedures may result in disciplinary action. In relation to the use of ICT Equipment including the use of the Internet and Email, staff should be aware that they might be personally liable to prosecution if their actions are found to be in breach of the law.

Serious breaches may be reported to the PSNI, ICO or other public authority for further investigation.

### 11. Review

This policy and any associated procedures will be reviewed no later than two years from approval, to ensure their continued relevance to the effective

management of information governance within BSO.

### 12. Equality Statement

In accordance with the BSO's Equal Opportunities Policy, this policy will not discriminate, either directly or indirectly, on the grounds of gender, race, colour, ethnic or national origin, sexual orientation, marital status, religion or belief, age, union membership, disability, background or any other personal characteristics

# Appendix A



Providing Support to Health and Social Care

## This form should be completed within 24 hours of an incident occurring

Person Involved:	Please Select	D.O.B:	
Name:		Gender:	Male Male
Address:			○ Female
Post Code:			
Facility Name:		Date of Incident:	
Department:		Time Of Incident:	
Other:			
Witness: (Please include N Department, and contact number)	f/or address and		
Incident Detail	Person  Information  Other		

Details of the Incident	
Did harm, loss or damage occur?  Please give a brief description of the incident in the Third person only:  (Only state the facts not opinions)*	
Immediate Action(s) Taken	
☐ Notified Line Manager	
First Aid	
Ambulance Called	Other Actions
Referral to A & E	Taken:
Security / Police	(Please Specify)
Occupational Health	
Notified Relative	
Detail of harm (injury) if apparent:	se Select 🔻
Other:	Body Part(s):
(Please Specify)	(Please Specify eg, Left Leg etc.)
Degree of Harm (Severity)	e Select ▼
Details of Treatment given or Hospitalisation:	

If any equipment or furniture is involved it must be taken out of use <u>immediately</u> .		
Description of Equipment / Furniture:		
Batch No.	Serial No.	
Manufacturer:		
Item Sent for Repair?	Item Withdrawn from Use?	Item Retained for Inspection?
○Yes	○Yes	○Yes
○No	○No	○No
Reporter Details		
Name		
Job Title		
Phone No.		
Submit by Email Print Form		

Please click the submit by email to forward the form to the administration Office. You may also wish to print the form for your own records.



# BUSINESS SERVICES ORGANISATION INFORMATION SECURITY / DATA BREACH NOTIFICATION FORM

Please note, Sections 1-3 should be completed by the individual reporting the incident. Sections 4-6 should only be completed by Corporate Services and/or The Investigating Officer.

### **Section 1 - Background Information**

Date of Incident:
Time of Incident:
Location of Incident:
Date of Notification:
Name and Job Role of
Individual Reporting

Incident:		
Contact Email:		
Contact Telephone:		
Section 2 – Incident Deta	nils	
Summary of the Incident:		
Department(s) Affected:		
Nature of the Incident:		
(Other, please specify):		
Is the data breach ongoing?		
What action has been take	en to mitigate the Incident?	

# **Section 3 - Information Compromised**

What personal data has been breached?	
Category of personal data breached?	
Has a complaint been received by the data subject(s)?	
No. of people whose information is affected:	
Is there a risk of harm / danger to the individual(s)?	
Is there a risk of identity theft?	
Could the breach make the private aspects of a person's life known to others?	
Please provide any addition	nal information to support the above:

Once Sections 1-3 are completed, please save this form and submit it to: <a href="mailto:databreach.bso@hscni.net">databreach.bso@hscni.net</a>

# Section 4 – Investigation

Incident Reference Number:	
Name and role of Investigating Officer(s)	
Can the information be recovered?	
Details of actions taken to	attempt to recover the information:
	en taken to minimise the possibility of a recurrence? Iural changes to reduce risks of future breaches and any
Is it necessary to notify the data subject(s)	
Please provide justification	for the above:
Is it necessary to inform a regulatory body?	
Please provide justification	for the above:

# Section 5 – Training