



Health and Social
Care Board

INCIDENT & NEAR MISS REPORTING POLICY & PROCEDURE

Equality Considerations

This policy has been screened in accordance with the HSCB's statutory duty and is not considered to require a full impact assessment. The screening outcomes will be published on the HSCB website.

Human Rights Act

This policy is compliant with the requirements of the Human Rights Act 1998.

Policy Reference 2011/ Gov/ 02	Responsible Officer Head of Corporate Services	Review Frequency 2 yearly
Approved by Governance Committee	Approval Date: 01/09/11	Next review due September 2013
Superseded documents (if applicable) All legacy HSS Boards' Incident Reporting Policies		

September 2011

1.0 INTRODUCTION

The Health & Social Care Board (HSCB,) recognises that the overall aim of any incident reporting system is to reduce the number of workplace injuries and adverse incidents to a minimum. To achieve such an aim it is important that we not only seek to adopt a proactive safety culture, but that we also record and report all incidents/near misses that occur, in order to learn from them. By combining both proactive and reactive measures, we can seek to implement safe working practices. This will assist us in providing a safe working environment for our staff, service users and visitors and will ultimately lead to the delivery of safe services.

2.0 APPLICATION

This procedure applies to the reporting of all incidents within the HSCB, which occur on HSCB premises or as a result of a service provided by an HSCB employee. This policy affects:

- Service Users
- Employees
- Bank or agency and other contracted staff
- Contractors
- Trainees and students on placement
- Other Health and Social Care (HSC) staff working on behalf of the HSCB
- Visitors and members of the public

All personnel must report any incident or near miss they encounter whilst carrying out work activities on behalf of the HSCB. The most important steps are to:

- Make sure that all relevant accidents, incidents and near misses are reported as soon as possible in accordance with established procedures
- Remove residual hazards that may pose a risk for other people in the area
- Notify management of incapacity for work that results from an injury sustained during a work activity
- Review existing systems of work to prevent recurrence

3.0 BENEFITS

An effective incident reporting process provides the following benefits:

- A clear statement of facts should further reference be required

- Identification of factors contributing to incidents or near misses to assist in implementing risk reductions strategies to reduce recurrence
- Provides a means to analyse trends in incidents or near misses and to take immediate and appropriate action
- Assists in minimising risks to staff, patients and visitors
- Provides a means to identify any necessary procedural changes that may be required
- Ensures the HSCB adheres to the relevant statutory provisions
- Assists in reviewing health and safety management systems as recommended by the Health and Safety Executive

This procedure should contribute to:

- Managing risk and minimising the risk of adverse incidents
- Ensuring that all possible lessons are learnt and shared
- Supporting staff through potentially distressing circumstances

4.0 THE HSCB'S COMMITMENT TO A FAIR AND OPEN CULTURE

Determining safe practice is an important part of successful risk management. Learning from incidents and errors will promote a fair and open culture and safe practice throughout the organisation. This will enable the HSCB to identify trends and take positive action to prevent the error or adverse incident from happening again.

To promote a fair and open culture and encourage the reporting of incidents, the HSCB will take a non-punitive approach to those incidents it investigates. Staff remain accountable to service users, the HSCB and their professional bodies for their actions, but a non-punitive approach means that disciplinary action will not be taken against a member of staff for reporting an incident, except in circumstances where there is evidence of:

- Gross professional or gross personal misconduct
- Repeated breaches of acceptable behaviour or protocol
- A breach of criminal or other law

5.0 RELATIONSHIP WITH OTHER POLICIES

The Incident Reporting procedure is part of the HSCBs Governance Framework, and one of the key elements of many of the Controls Assurance Standards established by Department of Health and Social Service and Public

Safety (DHSSPS). The Framework clearly places the emphasis of risk management being the identification of risk, actions to manage the risk and communication to ensure that lessons are learned from practice and disseminated throughout the organisation.

The management of incidents is structured according to risk management analysis and will complement other governance arrangements. Therefore, this policy must be read in conjunction with other associated HSCB policies or procedures. (Refer to Section 8.0)

6.0 DEFINITIONS

6.1 *Definition of an Adverse Incident*

‘Any event or circumstances that could have or did lead to harm, loss or damage to people, property, environment or reputation’.¹

The following criteria will determine whether or not an adverse incident constitutes a serious adverse incident (SAI).

6.2 *SAI criteria*

- serious injury to, or the unexpected/unexplained death (*including suspected suicides and serious self harm*) of :
 - a service user
 - a service user known to Mental Health services (including Child and Adolescent Mental Health Services, (CAMHS) and Learning Disability (LD) within the last two years
 - a staff member in the course of their work
 - a member of the public whilst visiting a HSC facility.
- 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 assault (*including homicide and sexual assaults*) by a service user
 - on other service users,
 - on staff or
 - on members of the public

¹ Source: DHSSPS How to classify adverse incidents and risk guidance 2006

- occurring within a healthcare facility or in the community (where the service user is known to mental health services (*including CAMHS*) or learning disability services within the last two years).
- serious incidents of public interest or concern involving theft, fraud, information breaches or data losses.

6.3 **ROOT CAUSE ANALYSIS**

Root cause analysis is a process used to identify the underlying cause of the accident or incident and identify the corrective actions required in order to prevent repetition or at least mitigate the consequences.

6.4 **RIDDOR**

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997 (RIDDOR 1997) (Refer to Appendix 1).

7.0 **TYPES OF INCIDENTS**

Types of incidents/near misses recognised are:

CATEGORY	INCIDENT TYPE
Corporate Governance	<p><i>Financial</i> Loss of revenue through theft, fraud, over or underpayment of debts</p>
	<p><i>Information Communication and Technology (ICT)</i> Any incident that could pose a threat to the availability, integrity and confidentiality of a computer system or network. Such incidents can result in the destruction of data or the disclosure of information or have an adverse impact on computer systems or networks.</p>
	<p><i>Information breaches</i> Any incident involving the intentional or unintentional release, loss, corruption or unauthorized access of secure or confidential or personal information</p>

CATEGORY	INCIDENT TYPE
Health & Safety	<p><i>Security Incident</i></p> <ul style="list-style-type: none"> - Patient or Service user absence - Theft of HSCB property and/or staff personal property. - Malicious Damage - Removal of non-prescribed substances and alcohol - Removal of offensive weapons - Restraint - Any other issue which poses a threat to services users, staff or visitors
	<p><i>Fire Incident</i> Any incident no matter how small, involving fire or fire warning systems (including false alarms).</p>
	<p><i>Vehicle Incident</i> Any incident involving a vehicle e.g. Road traffic accident, excluding vandalism or theft which would be classified as a security incident.</p>
	<p><i>Violence, Abuse or Harassment Incident</i> Any incident involving verbal abuse, unsociable behaviour, racial or sexual harassment or physical assault, whether or not injury results.</p>
Operational & Clinical	<p>A complaint is any communication (other than that associated with legal action against the HSCB) from a service user, or from a person or organisation representing him or her, which expresses dissatisfaction with clinical or social care or other aspects of the HSCB's services, facilities or staff performance, and which requires a response from the HSCB.</p>
	<p><i>Personal Accident or Injury Incident</i> Any accident, no matter how small, which did or could have adversely affected any person.</p>
	<p><i>Ill health incident</i> Any case of known or suspected work or environment related ill health</p>

CATEGORY	INCIDENT TYPE
	<p><i>Clinical Incident</i> Any incident, except medication error, directly related to patient treatment or care which did or could have resulted in adverse outcome (e.g. Treatment, medical equipment failure etc)</p>
	<p><i>Medication Incident</i> Any medication incident which did or may have caused actual or potential harm to patient(s)</p>
	<p><i>Environmental Incident</i> Environmental incidents are those which have resulted in damage or danger to the natural environment. This may include damage to water courses or land or emissions to the air as a result of accidental pollution e.g. spillage, leakage or uncontrolled discharge of substances, emission to air of gas, dust, fumes or other pollutants, escape or improper storage or disposal of waste, etc.</p>
Other	Any other incident which does not fall into the above categories. This type of incident should be marginal in number and might include near misses.

8.0 LEGAL & OTHER REPORTING REQUIREMENTS

The HSCB has a requirement to report certain incidents, analyse causes and take appropriate action. The legislation and key references which reflect this requirement are contained in the following:

- Risk Management Controls Assurance Standard
- Health & Safety Management Controls Assurance Standard
- Fire Safety Management Controls Assurance Standard
- Procedure for the Reporting and Follow-up of Serious Adverse Incidents – in line with Circular HSC(SQS) 08-2010 Learning from Adverse Incidents and Near Misses reported by HSC Organisations and Family Practitioner Services .
- HSCB Reporting and Follow up of Serious Adverse Incident Procedure
- HSC Complaints Procedure

Depending on the type and severity of the incident the following agencies may need to be informed:

8.1 *Department of Health, Social Services and Public Safety*

In line with Circular HSC (SQS) 10-2010 'Establishment of an Early Alert System' all HSC organisations are required to report any events which may require urgent attention by DHSSPS.

8.2 *Health and Safety Executive Northern Ireland*

Serious accidents, building incidents and certain work related diseases in accordance with the Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations (Northern Ireland) 1997. This includes serious injury, over 3 day injuries, specified work related illnesses and serious building related problems.

8.3 *Police Service for Northern Ireland*

There may be certain instances for example theft of property, burglary, fraud, assault etc that the PSNI should be notified.

8.4 *Counter Fraud Unit*

In circumstances involving fraudulent activity, the Business Services Organisation Counter Fraud Unit should be contacted.

8.5 *Business Services Organisation (BSO)*

All actual or suspected ICT security incidents are to be reported to the HSC ICT Security Manager.

It will be the responsibility of the local Corporate Business Managers in conjunction with the line manager or director to determine when the above organisations should be notified.

9.0 RESPONSIBILITIES

9.1 *Chief Executive*

The Chief Executive is responsible for the overall implementation, monitoring and review of this policy.

9.2 Head of Corporate Services

The Head of Corporate Services is accountable to the Chief Executive for ensuring this procedure is implemented, reviewed and amended as required. He/she will also provide relevant reports to the Senior Management Team (SMT) and the Governance Committee as and when required.

9.3 Directors

It is the responsibility of Directors to:-

- Disseminate this policy and procedure within their area of responsibility and ensure its promotion and implementation, by providing support and advice to their managers and staff;
- Ensure that incidents are monitored and reviewed within their directorate and ensure any recommendations made as a result of investigations are put in place;
- Take account of relevant incidents when reviewing their risk register;
- Ensure that staff have access to advice and training on incident reporting and management and where appropriate investigation and review;
- Lead and direct the response to a serious adverse incident and report as necessary in line with the HSCB Procedure for Reporting and Follow up of Serious Adverse Incidents.

9.4 Governance Manager

The Governance Manager, supported by the Assistant Governance Manager is responsible for:

- The operation of this policy and procedure;
- Provide support and advice regarding incident investigation and other governance related issues;
- Ensuring that incidents are examined to determine appropriate actions taken and lessons learned;
- Co-ordinate, in conjunction with the Head of Corporate Services the response to all serious adverse incidents;
- Monitor grading of incidents, collate information and produce reports to relevant Managers and the four HSCB

Premises Committees in order to highlight risks and identify trends;

- Meet periodically with corporate business managers in each of the local offices to review incident investigations;
- When necessary communicate to staff, on behalf of the Chief Executive, any action being undertaken by management or the precautions to be taken by staff;
- Update and maintain the risk management incident recording system (currently Datix).

9.5 Corporate Business Manager

The Corporate Business Manager, supported by locally based Assistant Corporate Business Managers (hereafter referred to as Corporate Business Manager see Appendix 2), will be responsible for:

- Completion of the electronic incident forms in each of the four local offices for onward referral to the Governance Manager/Assistant Governance Manager;
- Health and Safety, Fire Management issues and will have the responsibility to ensure in particular that RIDDOR reportable incidents are reported to the Northern Ireland Health and Safety Executive; and where relevant fire incidents reported to Health Estates, DHSSPS;
- Determining and co-ordinating, in conjunction with the line manager or director, those incidents to be reported externally refer to section 8.0;
- Be involved in carrying out incident investigations of any Health and Safety, Fire, facility type incident which falls within their area of responsibility;
- nominating the relevant senior officer to lead the investigation of all other incidents which do not fall within corporate business area of responsibility – refer to section 12;
- Review all incident reports and ensure that investigations are undertaken and remedial action is implemented; in conjunction with the Line or Department Manager and where necessary the relevant director;
- Meet periodically with Governance Managers to review incident investigations.

9.6 Line/Departmental Managers

It is the responsibility of Line or Departmental Managers to:

- Ensure all employees under their control understand and follow the reporting procedure;
- Ensure the incident is reported, to the relevant Corporate Business Manager in one of the four local offices, Refer to Appendix 2, (Where to report) as soon as possible, and no longer than 3 working days; (with the exception of serious adverse incidents which must be reported immediately (refer to section 10.2));
- Review all incident reports and ensure remedial action is implemented where necessary; in conjunction with the local Corporate Business Manager and where necessary the relevant director;
- Be involved in carrying out incident investigations, when required, within their area of responsibility.

9.7 All Employees

All HSCB staff have a responsibility to:

- Report to their line manager or local corporate business manager any incident or near miss they witness or are involved in;
- Attend education and training sessions in relation to incident reporting and management;
- Co-operate with any subsequent investigation;
- Retain any equipment or material evidence securely for any subsequent investigation.

10. REPORTING PROCEDURES

10.1 Reporting Process

- Following an incident, the individual staff member directly involved or present at the time is required to contact the relevant Corporate Business Manager in one of the four HSCB local offices. (Appendix 2). This should be done in conjunction with their line or departmental manager;

- Electronic Incident forms (appendix 3) will be completed by the local Corporate Business Manager or their deputy;
- Incident to be reported at the time of the incident or immediately following the incident but no longer than 3 working days; (with the exception of serious adverse incidents which must be reported immediately (refer to section 10.2)
- Only factual information and not opinion should be reported
- All completed forms should be forwarded by the local Corporate Business Managers to the Governance/Assistant Governance Manager within 5 working days following the incident.

10.2 Reporting Serious Adverse Incidents

All incidents which meet the criteria of a SAI defined in 6.2 should be reported in line with the HSCB Procedure for the Reporting and Follow up of Serious Adverse Incidents.

11. INCIDENT GRADING

Corporate Business Managers will undertake initial incident grading. This will be verified by Governance Managers. All incidents should be graded using the HSCB's Risk Grading Matrix shown in Appendix 5.

Incidents should be graded based on the actual impact whereas near misses should be graded based on the potential impact.

12. INCIDENT INVESTIGATION

Corporate Business Managers in conjunction with relevant staff and or Line or Departmental Managers are responsible for ensuring that investigations, take place following an incident or near miss.

Areas of consideration for an investigation may include:

- Further details regarding the accident or incident if relevant;
- Analysis of the cause of the event;
- Immediate action taken to make the situation safe;
- Any action recommended to prevent a reoccurrence;
- Any matters requiring further investigation.
- For more serious incidents a root cause analysis may be required

Governance Managers will provide independent support throughout any of the above processes as required.

A process flow chart has been included in Appendix 4 which outlines the key stages of incident / near miss reporting and follow up.

13. RECORD KEEPING

- Completed incident forms will be treated as confidential and securely retained by the relevant managers refer to 10.1.
- Information on the forms will be entered onto the Risk Management Incident Recording System, which is maintained by the Governance Department
- All such information will be kept in accordance with the Data Protection Act and Freedom of Information Act.

14. SUPPORT TO STAFF

Following an incident involving a member/s of staff, the line manager may consider the need for information and support for those involved. Such action may include:

- Informal or formal debriefing and support of staff individually or as a group;
- Occupational Health;
- Counselling Service.

Where further investigation has been carried out and/or remedial action taken, feedback will be provided to staff involved in the incident.

15. EDUCATION AND TRAINING

The HSCB recognises that measures need to be taken to encourage all staff to report incidents including near misses. This will be achieved through an educational process, including awareness training, policy distribution and communication updates.

For those staff who may be required to carry out incident investigation or root cause analysis further training will be provided.

16. ALTERNATIVE FORMAT

Every effort will be made to provide information in an alternative format if written format is not accessible to a member of staff.

APPENDICES

APPENDIX 1	RIDDOR Reportable Incidents
APPENDIX 2	Where to report incidents
APPENDIX 3	Incident Reporting Form
APPENDIX 4	Process Flow Chart
APPENDIX 5	HSCB Risk Grading Matrix

REPORTING INJURIES OR EVENTS TO THE NORTHERN IRELAND HEALTH & SAFETY EXECUTIVE UNDER RIDDOR

The HSCB has a statutory responsibility to report certain incidents under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997, to the Northern Ireland Health & Safety Executive (HSENI).

Under RIDDOR, it is an offence to fail to report a **'reportable'** event or to fail to report within the specified periods.

DEATH OR MAJOR INJURY

The following incidents are to be notified immediately to the local Corporate Business Manager who will inform HSENI by the fastest practicable means i.e. by telephone and will confirm this within ten days on Form NI2508.

- The death of any person as a result of an accident arising out of or in connection with work
- Any person suffering any of the following injuries or conditions as a result of an accident arising out of or in connection with work
- Fracture of any bone (other than fingers, thumbs or toes)
- Amputation (including a finger, thumb or toe, or any part thereof if the joint or bone is completely severed)
- Dislocation of the shoulder, hip, knee or spine
- Loss of sight (temporary or permanent)
- Penetrating injury to an eye, or a chemical or hot metal burn to an eye
- Injury resulting from an electric shock from any electrical circuit or equipment, whether or not due to direct contact (including burns) leading to loss of consciousness or requiring resuscitation or hospitalisation for more than 24 hours
- Any other injury leading to hypothermia, heat-induced illness or unconsciousness, or requiring resuscitation or hospitalisation for more than 24 hours
- The loss of consciousness caused by asphyxia or exposure to a harmful substance(s) or biological agent(s)
- Acute illness requiring medical treatment or loss of consciousness arising from absorption of any substance by inhalation, ingestion or through the skin

- Acute illness requiring medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material.

OVER-THREE-DAY INJURY

If there is an accident connected with work (including an act of physical violence) and an employee, or contractor working on HSCB premises, suffers an over-three-day injury, the Nominated Health & Safety Officer must send a completed accident report form (NI2508) to the HSENI within 10 days.

An over-three-day injury is one which is not major but results in the injured person being away from work or unable to do their normal work for more than three days (including non work days).

DANGEROUS OCCURRENCE

If something happens which does not result in a reportable injury, but which clearly could have done, then it may be a dangerous occurrence which must be reported immediately to the Local Corporate Business Manager who will who will inform the Northern Ireland Health & Safety Executive (HSENI) by the fastest practicable means i.e. by telephone and will confirm this within ten days on Form NI2508.

- Collapse or the overturning or the failure of any load bearing part of any lift or lifting equipment
- Explosion, collapse or bursting of any closed vessel or associated pipework
- Plant or equipment coming into contact with overhead power lines
- Electrical short circuit or overload causing fire or explosion
- Any unintentional explosion, misfire, failure of demolition to cause the intended collapse, projection of material beyond a site boundary, injury caused by an explosion
- Accidental release of a biological agent likely to cause severe human illness
- Failure of industrial radiography or irradiation equipment to de-energise or return to its safe position after the intended exposure period
- Failure of any breathing apparatus while in use or during testing immediately prior to use
- Collapse or partial collapse of any scaffold over five metres high, or erected near water where there could be a risk of drowning after a fall
- Unintended collapse of: any building or structure under construction, alteration or demolition where over five tonnes of materials fall; any floor or wall in a place of work; any false-work
- Explosion or fire causing suspension of normal work for over 24 hours

- Sudden, uncontrolled release in a building of: 100kg or more of flammable liquid; 10kg of flammable liquid above its boiling point; or of 500kg of these substances if the release is in open air
- Accidental release of any substance which may damage health

DISEASE

If you are notified that an employee suffers from a reportable work-related disease you must immediately inform the Local Corporate Business Manager who will inform the Northern Ireland Health & Safety Executive (HSENI) on Form (NI2508A).

The list of reportable diseases is lengthy and is not reproduced in its entirety here. The following are the most common, however, please contact the Local Corporate Business Manager Officer for guidance regarding whether a disease is reportable.

- Certain poisonings
- Some skin diseases such as: occupational dermatitis, skin cancer, chrome ulcer, oil folliculitis/acne
- Lung diseases including: occupational asthma, farmers lung, pneumoconiosis, asbestosis, mesothelioma
- Infections such as: leptospirosis (wiels disease); hepatitis; tuberculosis; anthrax; legionellosis and tetanus
- Other conditions such as: occupational cancer; certain musculoskeletal disorders; decompression illness and hand-arm vibration syndrome (vibration white finger)

WHERE TO REPORT INCIDENTS

The Corporate Business Managers in each of the four HSCB local offices will be responsible for the completion of the electronic incident form (Refer to Appendix 3).

Incidents should be reported to the Corporate Business Manager at the local office where the incident has occurred.

If the incident occurs 'off-site' the incident should be reported to the Corporate Business Manager where the member of staff involved (or who has witnessed the incident) is based.

Contact details for Corporate Business Managers/Assistant Managers are as follows:

HSCB Facility	Contacts
Eastern Office	Mrs Patricia Crossan Corporate Business Manager Telephone: 028 9055 3730 Email: patricia.crossan@hscni.net
Northern Office	Mrs Carol Reynolds Assistant Corporate Business Manager Telephone: 028 2531 1002 Email: carol.reynolds@hscni.net
Southern Office	Mrs Shirley McReynolds Assistant Corporate Business Manager Telephone: 028 3741 4561 Email: shirley.mcreynolds@hscni.net
Western Office	Mrs Helena Doherty Assistant Corporate Business Manager Telephone: 028 7186 0086 Email: helena.doherty@hscni.net

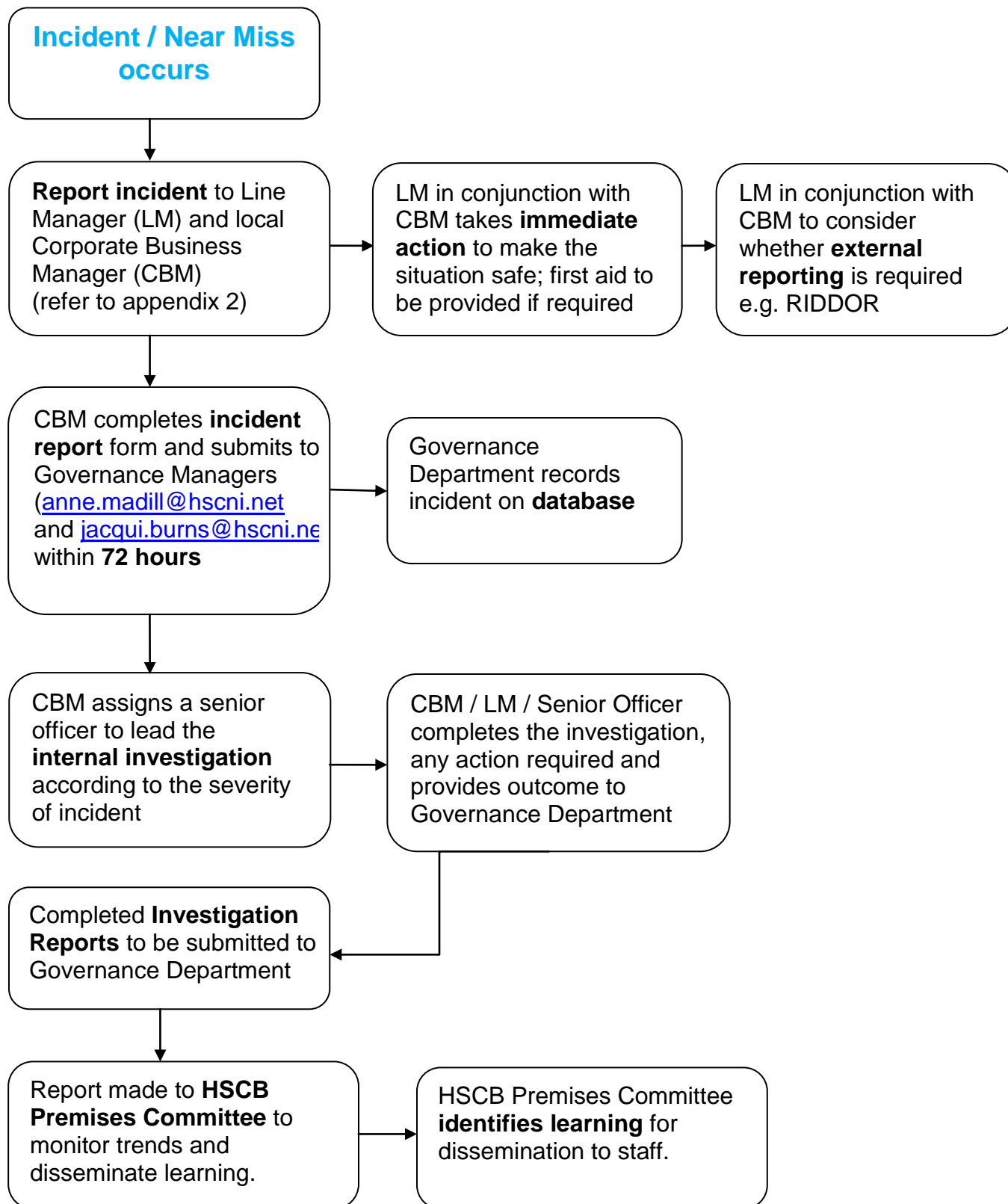


HSCB GOV/IRF 001 Incident / Accident Report Form

A. TYPE OF INCIDENT: <i>(Please tick at least one box)</i>	Health & Safety	Accident/ First Aid	Fire / Fire related	Security	Clinical
	Violence / Abuse	Medication	ICT / Information	Environmental	Other
B. CLASSIFICATION OF INCIDENT: <i>(Please select)</i>					
ADVERSE INCIDENT	C. WHEN AND WHERE INCIDENT / ACCIDENT OCCURRED:				
NEAR MISS					
SERIOUS ADVERSE INCIDENT					
DATE: / / 20		TIME: (24hr)			
FACILITY: <i>(Premises where incident occurred)</i>			LOCATION: <i>(Please give room number if applicable)</i>		
D. PERSON/S AFFECTED OR INJURED: <i>(if applicable)</i>					
Is the person affected a member of staff? YES / NO		First Name:		Surname:	
JobTitle: <i>(if applicable)</i>		Organisation: <i>(if applicable)</i>		Directorate/Department: <i>(if applicable)</i>	
If not a member of staff please indicate status and address: <i>(e.g. service user, contractor, visitor, student, member of public, other etc.)</i>				Status:	
Address:				Postcode:	
E. WHERE A PERSON HAS BEEN INJURED PLEASE INDICATE NATURE OF INJURY: <i>(Please select)</i>					
Graze	Bruise/Swelling	Burn/scald	Fracture	Cut	
Back ache	Sprain/Strain	Sting	Other <i>(Please specify)</i>		
F. TREATMENT GIVEN OR OFFERED: <i>(Please select)</i>					
None	First Aid	Attended GP	Taken to A&E	Hospital Admis	Refer to OH
Did the incident result in sick leave? <i>(Please select)</i>		Yes	No	Not known	Sick Leave >3days
Was next of kin / relative / carer informed? <i>(Please select)</i>				Yes	No
G. DETAILS OF SECURITY RELATED INCIDENTS: <i>(Please select)</i>					
Break In	Theft	Property damage	Property loss	Equip Failure	Other <i>(Please specify)</i>
Details of property: <i>(if applicable)</i>		Item:		Asset Number: <i>(if applicable)</i>	
H. FACTUAL ACCOUNT OF INCIDENT: <i>(Outline what happened along with relevant circumstances / contributing factors – continue on a separate sheet if necessary)</i>					

I. WAS THE INCIDENT WITNESSED BY ANYONE?		YES <i>(Please provide details below)</i>	NO		
WITNESS 1		WITNESS 2			
Name	Surname	Name	Surname		
Address		Address			
Postcode	Tel	Postcode	Tel		
<i>Please provide witness statements on separate page, if necessary</i>					
J. IMMEDIATE ACTION TAKEN TO MAKE SITUATION SAFE AND PREVENT A RECURRENCE:					
K. WAS THE INCIDENT REPORTED TO PSNI?		YES <i>(Please provide details below)</i>	NO		
Date: / / 20	Name of PSNI Officer	PSNI Station			
L. DETAILS OF PERSON COMPLETING THE FORM:		Name:			
Directorate/Department:		Date form completed: / / 20			
<i>By completing this section you are verifying that the information contained in this form is what you have been told to the best of your knowledge</i>					
M. NAME OF DIRECTOR / MANAGER INCIDENT WAS REPORTED TO:					
HSCB BUSINESS MANAGER:		DATE RECEIVED:			
N. OTHER ORGANISATIONS INFORMED:					
DHSSPS Date:	HSENI Date:	NIAIC Date:	ICO Date:		
PHA Date:	HSC Trusts Date:	Environmental Health Date:	BSO Date:		
		Other <i>(Please provide details below)</i>			
O. WHAT RISK RATING DOES THIS INCIDENT/NEAR MISS MERIT? <i>(Please select the relevant risk rating)</i>					
LOW	MEDIUM	HIGH	EXTREME		
<i>(Please refer to the HSCB rating matrix and impact table for further information on how to grade incidents and near misses)</i>					
P. ACTION TAKEN BY HSCB FOLLOWING INVESTIGATION					
Further investigation required	YES	NO	Incident re-graded	Y / N	Date
Date of investigation			Staff circular	Y / N	Date
RIDDOR Reportable	YES	NO	CE – Director notified	Y / N	Date
Date of RIDDOR report			Premises Committee	Y / N	Date
Q. Additional comments / information:					
THE FORM SHOULD NOW BE FORWARDED BY E-MAIL TO THE HSCB GOVERNANCE AND ASSISTANT GOVERNANCE MANAGER					
HSCB DATIX Reference:					

INCIDENT AND NEAR MISS REPORTING PROCESS FLOW CHART KEY STAGES



HSCB RISK ASSESSMENT TABLE

APPENDIX 5

Category Impact	INSIGNIFICANT	MINOR	MODERATE	MAJOR	CATASTROPHIC
PEOPLE (Any person affected by an incident: Staff, User, Visitor, Contractor)	Minor incident Minor injury/harm First aid administered	Short-term injury/harm requiring medical treatment. < 3 days absence. Emotional distress. (Recovery expected within days /weeks.)	Semi permanent physical/emotional injuries/trauma/harm requiring hospital admission / specialist treatment or support (recovery expected within 1 year).	Fatality. Permanent disability physical/emotional /trauma/harm.	Multiple fatalities Multiple permanent disability physical/emotional /trauma/harm.
RESOURCES (Safeguard services avoiding business interruption/problems with service provision)	No impact on public health social care Minimal disruption to routine activities of staff and organisation Insignificant unmet need	Short term impact on public health social care Minor impact on staff, service delivery and organisation, rapidly absorbed. Minor unmet need	Moderate impact on public health and social care. Moderate impact on staff, service delivery and organisation absorbed with significant level of intervention. Moderate unmet need	Significant impact on public health and social care. Significant impact on staff, service delivery and organisation - absorbed with some formal intervention with other organisations. Significant unmet need	Severe impact on public health and social care. Severe impact on staff, service delivery and organisation - absorbed with significant formal intervention with other organisations. Severe unmet need
FINANCE & ASSETS (Protect assets of the organisation and avoid financial loss)	Financial Impact of < £10k	Financial Impact of £10k - <£50k	Financial Impact of £50k - <£100k	Financial Impact of £100k - <£1m	Financial Impact > £1m
INFORMATION (Protect information assets of the organisation and avoid loss)	Minor loss of non-personal information	Loss of information – short term inability to provide service	Loss of or unauthorised access to sensitive / business critical information - short term inability to provide service	Loss of or corruption of sensitive / business critical information sustained inability to provide service	Permanent loss of or corruption of sensitive/business critical information inability to provide service
ENVIRONMENT (Air, Land, Water, Waste management)	Nuisance release	Minor on site release contained by organisation	Moderate on site release contained by organisation	Significant release affecting minimal off-site area requiring external assistance (fire brigade, radiation, protection service etc)	Toxic release affecting off-site with detrimental effect requiring outside assistance.

Category Impact	INSIGNIFICANT	MINOR	MODERATE	MAJOR	CATASTROPHIC
REPUTATION (Adverse publicity, complaints, Legal/Statutory Requirements, Litigation)	Informal complaint Local public/political concern. Local press < 1day coverage Little effect on staff morale Minor out-of-court settlement Audit / Inspection – small number of recommendations which focus on minor quality improvements issues.	Local level internal investigation into an incident/complaint. Local public/political concern. Extended local press < 7 day coverage Local adverse publicity with minor effect on staff morale/public confidence. Legal challenge Minor out-of-court settlement Audit / Inspection – recommendations can be addressed by low level management action	Internal investigation (high level), into an incident/complaint. Regional public/political concern. Regional/National press < 3 days coverage DHSSPS notification Significant effect on staff morale/public confidence Legal challenge Civil action – no defence / Improvement Notice Audit / Inspection – challenging recommendations that can be addressed action plan	External investigation or Independent Review into an incident or complaint. National Media interest > 3days Public confidence in the organisation undermined Questions in Assembly Criminal prosecution /Prohibition notice. Executive Officer dismissed. Audit / Inspection – Critical Report	Major public / political concern. Full Public Enquiry. Critical PAC Hearing Criminal prosecution – no defence. Executive Officer fined or imprisoned. Audit / Inspection – Severely critical Report
QUALITY, STATUTORY & PROFESSIONAL STANDARDS (including government priorities, targets and organisational objectives)	Minor non compliance. Up to 1% off planned service provision target Up to 1 month late	Single failure to meet internal standard or follow protocol. 1 ?5 % off planned service provision target Fail to meet National target 1quarter. Up to 3 months late	Repeated failure to meet internal standards or follow protocols. 2-4 ?5-20 % off planned service provision target Fail to meet National target 2 quarters. Up to 6 months late	Failure to meet national standards. Repeated failure to meet professional standards or failure to meet statutory functions/ responsibilities 5-10 >20% off planned service provision target Fail to meet National target > 2 quarters. Up to 12 months late	Gross failure to meet external/national standards. Gross failure to meet professional standards or statutory functions/ responsibilities 5-10 >35% off planned service provision target Fail to meet National target > 2 quarters. > 12 months late

Risk Assessment

Step 1 Determine the Risk Management Objective compromised. If there is more than one select the criteria with the highest impact.

Determining Likelihood

Descriptor	Description
Almost certain	Will occur or does occur regularly
Likely	Will probably occur, Likely to occur imminently
Possible	May occur occasionally
Unlikely	Don't expect it to happen but it is conceivable
Rare	Could only happen in exceptional circumstances

Step 2 Determine the likelihood of the risk occurring. This is based on the likelihood of the event occurring in any one year

Determining the level of risk

IMPACT	Risk Quantification Matrix				
	A	B	C	D	E
5 - Catastrophic	High	High	Extreme	Extreme	Extreme
4 - Major	High	High	High	High	Extreme
3 - Moderate	Medium	Medium	Medium	Medium	High
2 - Minor	Low	Low	Low	Medium	Medium
1 - Insignificant	Low	Low	Low	Low	Medium
LIKELIHOOD	Rare	Unlikely	Possible	Likely	Almost Certain

Step 3 Plot the Impact along the vertical axis and the likelihood against the horizontal axis this will determine the level of risk.

For example;
 Risk Impact = Moderate
 Risk Likelihood = Possible
 Risk Score = Medium

EXAMPLE: Select the appropriate category compromised from impact table i.e. Finance and Information, People, Reputation. Using the impact descriptors for the category and likelihood of occurrence descriptors make an assessment of the overall risk rating i.e. Low, Medium, High etc. If there is more than one category compromised (a method of recording this will need to be developed) select the criteria with the highest impact.

If a risk has a MINOR impact on PEOPLE, a MODERATE impact on RESOURCES and a MAJOR impact on FINANCE AND INFORMATION and the likelihood of occurrence is POSSIBLE then the overall risk rating will be determined from the FINANCE AND INFORMATION category (MAJOR) and POSSIBLE likelihood – assessing the overall risk as **HIGH**

		Risk Quantification Matrix				
IMPACT		High	High	Extreme	Extreme	Extreme
5 - Catastrophic		High	High	Extreme	Extreme	Extreme
4 – Major		High	High	High	High	Extreme
3 - Moderate		Medium	Medium	Medium	Medium	High
2 – Minor		Low	Low	Low	Medium	Medium
1 – Insignificant		Low	Low	Low	Low	Medium
	LIKELIHOOD	A Rare	B Unlikely	C Possible	D Likely	E Almost Certain

IMPACT:
FINANCE & INFO

IMPACT:
RESOURCES

IMPACT:
PEOPLE

LIKELIHOOD:
POSSIBLE