

MANAGEMENT PROCESS DESCRIPTION MPD319/7

Accident and Near Miss Reporting

<i>This Management Process Description replaces MPD319/6</i>	Copy Number
	Effective 28/11/16
Summary of Significant Changes	
Alternative method for reporting near misses introduced. Extended definition of a near miss. Changes made to assessment of incidents and investigation requirements. Addition of new process for escalation of staff and member of the public hospitalisation incidents to Chief Executive out of hours.	

Policy

It is the policy of NHSBT to eliminate or control down to an acceptable level risks to all people, including risks to the environment, who could be affected by its undertakings and learn lessons from previously unidentified or inadequately controlled hazards.

Purpose

The purpose of this procedure is to enable NHSBT to achieve its policy by providing a mechanism for ensuring that any unidentified or inadequately controlled hazards resulting in an accident, safety or environmental incident are identified to enable prompt action to eliminate or control them down to an acceptable level, and prevent a re-occurrence. It is also the purpose of this procedure to enable NHSBT to report reportable incidents promptly to the appropriate Enforcing Authority i.e. Health and Safety Executive (HSE) or Environment Agency, and to produce meaningful information from incident trends in order to measure health and safety and environmental performance.

Responsibilities

All staff are responsible for reporting accidents, needlesticks injuries and blood contacts and potential work related ill health to their line manager immediately after they occur providing further information and statements, as necessary, to assist the investigation process. Staff must inform the on-call manager for their department of any incident occurring out of hours which they become aware of that results in a member of staff being admitted to hospital or a member of the public (not a donor) attending hospital as a result of an accident where a member of staff has also been involved e.g. road traffic incident. Staff do not need to report near miss incidents to the manager immediately unless they think that an accident is likely to occur if immediate action is not taken. Members of staff identified as needing an Individual Review and Action Plan must actively participate in this process facilitated by management. This is to ensure a proper review is made of the adequacy of controls along with the identification and implementation of any further actions. The ultimate objective of the Review is to promote their health and wellbeing whilst at work.

Managers are responsible for ensuring that all accidents/near misses are reported promptly and for completing this on behalf of an individual if they are unable to do so. Accidents must be reported electronically on Datix, with the exception of Blood Donation Mobile Collection Teams who can continue to use paper based accident/near miss report forms. Near misses can either be completed electronically on Datix or by completing a near miss reporting postcard. The manager will receive email notice of the accident/near miss and has the overall responsibility for the incident and any investigation requirements including completion of the Management Review and Corrective and Preventative Action (CAPA) section on Datix. In the case of environmental incidents, managers must review and where appropriate report any incident that may have a negative impact on the environment via Datix.

Managers are responsible for ensuring that all specified injuries, hospitalisations and lost time accidents to staff are reported to HR Direct immediately, leaving a message out of hours if necessary. HR Direct must also be called to report any injuries to people not at work which require them to attend hospital for treatment.

Managers are responsible for checking the accident/near miss reports submitted on Datix for their staff.

Managers are responsible for ensuring that all staff suffering from potential work related ill health are referred to occupational health and that an incident report is completed on Datix.

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Managers are responsible for the investigation of accidents, needlesticks, contact with bloods, near misses, reports of work related ill health and environmental incidents ensuring that any actions are implemented and providing feedback to staff. For specified injuries, hospitalisations and lost time accidents managers should advise the employee that Health and Safety (H&S) will be contacting them to check on their wellbeing. There is a positive legal duty to investigate and monitor needlestick injuries under the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013.

Managers are responsible for reviewing, through Datix, accident, needlesticks, contact with bloods, near miss and ill health trends within their area and, where they have identified as appropriate, develop with members of staff an Individual Review & Action Plan.

Managers are responsible for recording on the EASY system, as an 'injury at work', any sickness absence that may be related to an accident or work related ill health following discussion and review of the incident with a Health and Safety Advisor.

Departmental on-call managers are responsible for notifying the Chief Executive by e-mail details of any incident that they are made aware of that results in a member of staff being admitted to hospital as a result of an accident sustained at work out of hours, or a member of the public (not a donor) attends hospital as a result of an accident where a member of staff has also been involved e.g. road traffic incident.

Head of Health & Safety Delivery is responsible for: the accident, needlesticks, contact with bloods, near miss and work related ill health reporting system; training of managers to investigate H&S incidents; and keeping records.

Assistant Director - Health, Safety and Wellbeing is responsible for: escalating specified injuries, staff hospitalisation incidents and lost time accidents to the relevant Directors and providing regular reports to the NHSBT Executive and Board on health and safety performance.

Health & Safety Advisors are responsible for the assessment of the accident, needlesticks, contact with bloods, near miss and ill health reports, deciding on the level of investigation and who will carry out the investigation, finally approving accidents, needlesticks, contact with bloods, near misses, work related ill health on Datix, escalating where managers are not meeting response / investigation requirements, reporting of injuries, diseases and dangerous occurrences to the HSE, after consultation with the Head of H&S Delivery, and the production of statistics. They also provide advice to managers on whether an incident requires classification as an 'injury at work' on EASY.

HR Direct is responsible for inputting onto Datix all near miss report postcards and hard copy accident forms for Blood Donation Mobile Collection Teams only, due to the limited availability and access to the intranet on session and passing on to the Health, Safety and Wellbeing Department calls from managers regarding specified injuries, hospitalisation or lost time injuries.

Occupational Health is responsible, with appropriate consent from individuals, for informing the local Health and Safety Advisor of reportable diseases.

Environmental Manager is responsible for: the environmental incident reporting system; training of managers to investigate environmental incidents; and keeping records. They will also assess all environmental incident reports, facilitating any further investigations as required as well as escalating major incidents to internal and external stakeholders. They will also report on environmental performance.

Accident and Near Miss Reporting

Definitions

Must. This is the minimum criteria that is to be met. Any standard below this is not acceptable

Should. Where reasonably practicable this criterion is to be met.

Accident. An undesired event which results in injury or ill health to a person and/or property damage. This includes all Road Traffic Accidents, for example accidents involving liveried vehicles, lease cars and staff's own vehicles (regular or standard users) driven on NHSBT business.

Near miss. An undesired event which could have resulted in injury or ill health to a person and/or property damage, but was avoided by good luck. Unsafe acts and unsafe conditions can also be reported as near misses.

Disease. Any work related ill health such as skin irritation using hand gels or work related upper limb disorders etc.

RIDDOR. Reporting of Injuries, Diseases and Dangerous Occurrence Regulations.

HSE. Health and Safety Executive

Specified Injuries. Fracture, amputation, loss of sight, hypothermia or heat induced ill health or 24 hr stay in hospital or requiring resuscitation which arise from working in an enclosed space, crush to head or torso causing damage to brain or internal organs, serious burns (covers more than 10% of the body or significant damage to eyes, respiratory system or other vital organs, loss of consciousness caused by head injury or asphyxia, and scalping requiring hospital treatment. We also include within this definition dislocations, electric shock and all hospital admissions as previously RIDDOR reportable and considered by NHSBT as serious.

Lost time accidents. An accident that causes someone to be absent, not be able to carry out their normal duties or requires significant adjustments to allow them to fulfil their normal duties. Within this definition only those absences or restrictions that last more than 7 days must be reported to the HSE under RIDDOR.

Injuries to people not at work. An accident to someone who does not work at the site, e.g. a donor, resulting in them being taken to hospital. These must be reported to the HSE under RIDDOR.

Incident. An accident or near miss or work related ill health.

RTA. Road traffic accident. The majority of these do not fall under the requirements of RIDDOR, further advice available from Health, Safety and Wellbeing Department by contacting HR Direct.

Datix. Electronic incident reporting and risk assessment system.

EASY – Electronic time sheet system used by NHSBT for recording sickness absence, working hours, annual leave and providing payslips to staff.

HR Direct: The single point of contact for both managers and staff for all health, safety and wellbeing queries.

Out of Hours: HR Direct operate 9.00am to 5.00pm Monday to Friday except bank holidays out of hours is considered all other times when they are not available.

Health & Safety Advisors. This refers to any professional member of the Health, Safety and Wellbeing Department.

Environmental Incident. Is an event that has caused, or has the potential to cause one of the following:

- Adverse impact on quality of air, land, water or wildlife species
- Exceeding a permit or external reporting requirements
- Notification of external agencies, due to emergency or a situation beyond normal circumstances
- Adverse publicity with respect to the environment
- Legal or regulatory action with respect to violation of statutes or environmental damage
- Alteration of, or damage to, heritage or archaeological sites

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Applicable Documents

The legislation applicable to reporting health and safety incidents is the Health and Safety at Work Act, and includes the following regulations and Approved Codes of Practice:

- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) and Guidance L73
- Health and Safety (Sharps Instruments in Healthcare) Regulations 2013
- HSE guidance "Investigating accidents and incidents" HSG245

The reporting requirements for environmental incidents is set out in:

ISO14001:2004 Environmental Management Systems – Requirements with guidance for use

NHSBT documents:

- [FRM1373](#) - Accident/near miss incident report form
- [SOP429](#) - Standard operating procedure: Reporting accidents, near misses, Needlesticks and Blood Contacts
- [MPD387](#) - Root Cause Analysis of Events
- [MPD539](#) - Critical Incident Plan
- [DAT417](#) - The correct flow of information between areas following needlestick and contact with blood incidents
- [FRM3956](#) - Individual Review and Action Plan – Health and Safety
- [DAT1999](#) - Accident Investigation Checklist
- [DAT1430](#) - Process Flow Chart for TES Accident and Near Miss Reporting
- [DAT1148](#) - Process Flow Chart for ODT Accident and Near Miss Reporting
- [DAT2466](#) - Process Flow Chart for Cord Blood Accident and Near Miss Reporting
- [MPD1034](#) - Contact with Enforcement Bodies
- [MPD1202](#) - Prevention of Sharps Injuries
- [MPD589](#) - Potential Donor Contamination Incidents

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Process Description

Reporting

Managers must report the following to HR Direct on (2)7700 or 0117 3227700 **as soon as possible**:

- all staff / contractor **specified injuries**;
- all staff / contractor lost time accidents;
- all injuries to members of the public when they have been sent to hospital (e.g. donors, visitors). Donor faints that are the result of a clinical procedure should not be reported through accident and near miss forms, other than when Health and Safety procedures have not been followed e.g. faint onto tea table and donor has been burned by the tea urn.
- **any incident which results in a member of staff being admitted to hospital**
- any other absence stated to be 'work related'.

HR Direct is open between 9.00am and 5.00pm Monday to Friday, except bank holidays. Outside of these hours a voicemail message can be left which will be picked up the next working day. HR Direct will pass the call on to a H&S Advisor, who will provide advice to the manager on the immediate actions required, they will also ring the employee to help support them back to work. The manager should advise the employee that this may be the case.

If hospitalisation of a member of staff or a member of the public (not a donor) attends hospital as a result of an accident where a member of staff has also been involved occurs outside of HR Direct's opening hours, the individual or most senior member of staff locally must inform their departmental on-call manager. In addition to leaving a message for HR Direct the on-call manager must also e-mail the Chief Executive to notify them of the incident. The on-call manager must also establish if any preservation of the scene or gathering of information e.g. photos and equipment is required and instigate this. Any further escalations by the on-call manager will follow [MPD539](#).

All telephone reports must be followed up with a completed accident report, within three working days, either by submitting this via the Datix web reporting system, or for Blood Donation mobile sessions only, completing a hard copy of [FRM1373](#). In both cases the SOP Reporting Accidents, near misses, needlesticks and blood contacts [SOP429](#) is to be used.

All accidents, needlesticks, contact with bloods, near misses and work related ill health must be reported on an accident/near miss report, where the injured person cannot complete then the Manager / Supervisor must complete on their behalf.

The correct flow of information following needlesticks and blood contacts datasheet [DAT417](#) should be used when reporting / dealing with these types of incident. Additional department specific process flow charts to support differences regarding the testing of donor samples are as follows:

- **Tissue and Eye Services (TES) - [DAT1430](#)**
- ODT - [DAT1148](#)
- Cord Blood – [DAT2466](#)
- **Potential Donor Contamination Incidents - [MPD589](#)**

In terms of environmental incidents, the Environmental Manager must be contacted within 24 hours of all major incidents by the manager of the department implicated in the incident. All environmental incidents must be entered onto the Datix system within 48 hours of occurrence by the local manager.

Reporting for Mobile Collection Teams Only

On Blood Donation Mobile Collection Teams where hard copy accident / near miss forms have been completed they must be sent to HR Direct promptly within 3 working days of the accident/near miss/work related ill health. **They can be scanned and sent by e-mail to HR Direct or posted to them at the following address:**

Send to:

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HR Direct, NHSBT Filton Centre, 500 North Bristol Park, Northway, Filton, Bristol, BS34 7QH

Training

Staff must be trained in reporting accidents, needlesticks, contact with bloods and near misses. Managers must also be trained in accident investigation.

Investigation

When an accident, needlestick, contact with blood, near miss report has been submitted in Datix the manager will be notified by e-mail. The manager is then responsible for logging into the system to check the details and complete the Management Review and CAPA section of the record for all incidents. This could include instigating an Individual Review and Action Plan – Health and Safety [FRM3956](#). The incident then proceeds to the Health & Safety Advisor for review, decisions on any further investigation requirements and final approval.

There is a positive legal duty to investigate all needlestick injuries [MPD1202](#). Managers must determine the cause of the injury and if any changes are required along with the outcome of any call to the sharps line i.e. whether the individual was supported appropriately and results received, any issues with this should be stated within the Management Review and CAPA section and managers must raise any concerns directly with HR Direct for further review and investigation.

The manager has the same responsibility to log into the system and carry out the Management Review and CAPA section for environmental incidents however subsequent review and classification of the incident and final approval of the incident (H&S Review section) is completed by the Environmental Manager.

Review and Assessment of Incidents

A Health & Safety Advisor will assess and categorise, on Datix, all accident, needlestick, contact with blood, near miss, work related ill health reports and decide on the level of further investigation. This will be commensurate with the category of accident and any management corrective action already completed.

Health & safety incidents are classified as follows:

Level 1 – these are RIDDOR reportable events - an absence of more than 7 days or a specified injury

Level 2 - these are absences of 4 to 7 days which would have met the previous threshold for RIDDOR

Level 3 – these are incidents resulting in 1 – 3 days absence, or involving blood contact with a cut, which includes piercing, or mucous membrane, or was influenced by a significant system or management failure. RIDDOR reportable Dangerous Occurrences also fall within this category. Near misses where significant failure in controls may also be included in this category.

Level 4 – these are incidents which are outside of NHSBT control, or due to human error, or are a minor oversight which are easy to resolve and unlikely to come up again. All other near misses fall within this category.

Other – this covers road traffic accidents, ill health and security incidents.

All Level 1 and 2 incidents must have a Root Cause Analysis (RCA) completed with all the relevant stakeholders involved in the process. These will be facilitated by the local H&S Advisor who will also invite to the Level 1 RCA meetings an employee H&S representative. All documents pertinent to an investigation must be attached to the Datix record by the manager or H&S Advisor.

In addition to the RCA an investigation report will be produced for these level incidents, with all Level 1 reports and their recommendations approved and authorised by the director of the injured person.

The Environmental Manager will decide and facilitate the level of investigation required for environmental incidents identifying and involving the relevant stakeholders to look for the immediate, underlying and root causes.

Investigation Timescales

Accidents should be investigated and analysed as soon as possible by the Manager or Supervisor as memory is best and motivation greatest immediately after an accident.

Following the accident investigation the H&S Advisor must decide if the actions are appropriate and ensure these are logged appropriately in Datix. The H&S Advisor must send out an internal safety alert if it is

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identified as required to prevent a serious incident elsewhere in the organisation. Accidents, needlestick, contact with blood, near miss reports will only be finally approved in Datix once the Management Review and CAPA section and /or the investigation has been completed.

The request for Root Cause Analysis must be sent to the manager by the Health and Safety Advisor within 5 working days of knowledge of the accident.

The manager with the H&S Advisor must investigate the accident or near miss using Root Cause Analysis of Events [MPD387](#) and the Accident Investigation Checklist [DAT1999](#) to identify action taken to prevent re-occurrence, and upload the completed root cause analysis documentation into Datix within 10 working days. H&S Advisors as the stakeholders of accident investigations will facilitate this process, rather than QA, providing training if required and approving the completed root cause analysis.

The above timescales also apply to environmental incidents, however, the Environmental Manager will facilitate the process.

Escalation

Datix Administrators will remind and escalate to line managers non-compliance with timescale requirements. Health & Safety Advisors are responsible for escalating continued or major non-compliance e.g. return of the manager's root cause analysis or closure of actions with management for resolution. Escalation will usually be to the functional SMT for the department responsible for the incident.

Managers must ensure that if any actions are identified following investigation that these are implemented, also for informing staff of the actions and for any additional training requirements. They are also responsible for providing feedback to the individual on the incident.

If an Enforcement Agency becomes involved at a site level the requirements of [MPD1034](#) must be followed.

Enforcement Agency Reporting

The Health & Safety Advisor must inform the HSE of all reportable incidents and diseases in accordance with RIDDOR.

The Environmental Manager must inform the Environment Agency of major incidents as required by law.

Near miss postcards and Input to Datix

HR Direct must ensure that details from the hard copy near miss postcards are recorded electronically on Datix for the department manager to review.

Mobile Collection Teams Paper Forms and Input to Datix

HR Direct must ensure that accidents and near misses from Blood Donation Mobile Collections Teams are recorded on Datix and that a copy of the accident form is uploaded against the incident record, for the manager to refer to and ensure the original form is disposed of confidentially.

Escalation of Over Seven Day Absence and Specified Injuries

The Health & Safety Advisor must inform the Head of Health & Safety Delivery of specified and over seven day injury accidents as soon as their awareness of these for review before they report them under RIDDOR. The Head of Health & Safety Delivery will then inform the Assistant Director - Health, Safety and Wellbeing.

The Assistant Director – Health, Safety and Wellbeing must inform the Director of Workforce, the Director of Marketing and Communications (or other relevant Director) and the appropriate Director of staff involved in the specified or over seven day injury accident as soon as possible (within 24 hours).

Analysis of Trends

Managers have access via Datix to incident information for their area of responsibility. They must monitor their own incidents to identify where the development of Individual Review and Action Plans may be appropriate.

The centre Health & Safety Advisor must produce statistics for the health and safety committees, Centre Partnership Committee (or equivalent), and for Directorates.

The Assistant Director – Health, Safety & Wellbeing must produce an annual and monthly accident report for the NHSBT Executive, Governance and Audit Committee and Board. This must include the Accident Frequency Rate and details of HSE reportable incidents.

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Needlestick injuries are monitored by reviewing the sharps line log against Datix incidents with any gaps or concerns addressed in a timely manner. Formal management review is performed quarterly by the Occupational Health Standards Group. [MPD1202](#) also supports this review of controls and their overall effectiveness.

The Environmental Manager will produce trends and data on environmental incidents for senior management review.

Individual Review and Action Plans

Potential triggers for these would be:

- A single serious incident such as a dangerous occurrence, lost time accident or major injury where the individual either caused the accident or was harmed as a result of it.
- An individual has several similar types of accident within a defined period of time e.g. two or three slip or trips or manual handling related accidents which perhaps indicates an underlying issue that needs to be explored / reviewed. A defined period of time would be a 12 month rolling period of time.
- Several accidents, of any type, within a short period of time (up to 6 months).
- Any reports of potentially work related ill health such as skin or respiratory issues related to products used or possible work related upper limb disorders.

Managers have discretion as to when to instigate an Individual Review and Action Plan [FRM3956](#) and in all cases a clear rationale for it must be explained to the individual at the beginning of the process and documented in the Plan.

Managers must complete the Review and Plan in partnership with the member of staff to ensure their maximum engagement and understanding of the process. Additional actions may also be identified during this process for implementation to promote their health and wellbeing and ultimately reduce further incidents occurring.

Staff will be given at least 5 days notice of the intention to complete an Individual Review and Action Plan. At the meeting they have the right to be accompanied by a colleague or union Health & Safety representative. Managers may choose to involve the Health and Safety Advisor to facilitate this process and assist with the completion of their responsibilities and to ensure there is a neutral expert involved. Advice from Occupational Health may also be sought / reviewed as part of this process.

Where an individual is off sick, this meeting could be arranged linked to other meetings they may be attending or postponed until their return to work. If staff fail to co-operate in this process i.e. avoid the meeting or fail to follow requirements, then a potential disciplinary situation may occur.

Once completed, with the necessary documentary evidence, the Individual review and Action Plan is signed off by both parties (manager and individual). A copy of the completed Individual Review and Action Plan is kept on the Individual's HR file with a copy of the same available to the member of staff for their own records.

The Individual Review and Action Plan is monitored and reviewed according to the requirements of the case which should be stipulated on the Plan.

Work Related Ill Health

Managers must refer staff suffering from **potential** work related ill health to Occupational Health and ensure that an incident report form is completed. If there is a related absence then HR Direct must be contacted on day 1 of the absence.

Occupational Health must, with appropriate consent from individuals, inform the local Health and Safety Advisor of reportable diseases.

Recording of Work Related Sickness Absences (Accidents and Ill Health) on EASY

Managers must record these absences on EASY as 'injury at work' where the criteria is considered to be met. H&S Advisors will provide advice to managers on this when they call HR Direct.

Data Protection

The information provided on the accident/near miss report form will be used for monitoring purposes by the NHSBT to learn from incidents and in order to prevent recurrence. The report (hard or electronic copy) will

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be kept securely by the Health & Safety Department. Personal identifiable information will only be disclosed when required by law or with the member of staff's explicit consent. The original reports constitute our accident book for purposes of Social Security Regulations. Safety representatives may inspect the accident book, but not take copies unless personal information has been removed by the Health & Safety Advisor.

Exclusions

Donor hospitalisations are covered in [SOP1510](#) Managing and Reporting Donor Adverse Events.