

STANDARD OPERATING PROCEDURE SOP429/6

Reporting Accidents, Near Misses, Needlesticks and Blood Contacts

This SOP replaces

SOP429/5

Copy Number

Effective

28/11/16

Summary of Significant Changes

Alternative method for reporting near misses introduced. Extended definition of a near miss. Improved flow and now includes process for escalation of certain incidents to the Chief Executive out of hours.

Purpose

To ensure that all accidents or near misses or diseases are documented and reported. This is to enable prompt action, investigation and prevention of further accidents. It supports [MPD319](#).

Responsibilities

All staff must

- Ensure they report accidents, needlesticks, blood contact injuries and near misses in a timely manner providing as much information as possible to assist with the investigation.
- Co-operate with H&S, Supervisor / Manager and Environmental Manager.
- Inform their manager of any environmental incidents for review and reporting as appropriate.
- Inform the on-call manager for their department of any incident occurring out of hours resulting in a member of staff or member of the public (not a donor) being admitted to hospital.

Supervisor/Manager must

- Ensure that all accidents are reported and that forms are completed and submitted within 3 working days
- Ensure that accidents are investigated.
- Report immediately to **HR Direct** fatal, specified, lost time accidents and any incident which results in a member of staff or someone not at work being admitted to hospital.
- Ensure that any work related disease is reported on an accident form and that the individual is referred to occupational health for further review.

Restrictions

This SOP does not give details on how to deal with accidents or incidents; it is only to be used for reporting accidents or near misses.

This SOP must not be used for reporting donor incidents such as faints unless it results in injury to the donor.

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

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- Fill-in the accident/near miss form, if the person to whom the accident occurred is incapacitated
- Ensure needlestick/blood contacts are reported to the Occupational Health Sharps line as soon as possible and the cause investigated with trends monitored.
- Review and where appropriate report any incidents that may have a negative impact on the environment.

On-Call Managers must notify the Chief Executive by e-mail details of any out of hours incident which results in a member of staff or member of the public (not a donor) being admitted to hospital and also leave a message for HR Direct.

HR Direct is responsible for escalating incidents notified to them to Health and Safety and inputting near miss postcards and mobile team accident reports onto Datix.

Health & Safety Advisor is responsible for the assessment of accident/near miss reports and advising the Health & Safety Executive of any reportable accidents/incidents under RIDDOR.

Environmental Manager is responsible for the assessment of environmental incident reports and escalating major incidents to internal and external stakeholders.

Definitions

Accident – An undesired incident, which results in harm to a person and/or property damage

Near Miss (NMI) – An undesired incident, which could have resulted in harm 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

Blood Contact – Any accident where the skin is breached with a sharp object (e.g. a piece of glass or knife or scalpel) which is contaminated with blood or body fluids.

An accident where the skin is not intact and exposed to blood or body fluids.

An accident where blood or body fluids are exposed to mucous membranes, for example a blood splash to the eyes, nose or mouth.

An accident where material that could be

Manager / Supervisor – Person who can complete / sign accident forms. For Blood Donation Collection Teams where [FRM1373](#) is completed, this includes the Senior Sister, Senior Charge Nurse, Healthcare Professional (HCP), Donor Care Supervisor (DCS) or Area Manager

TES – Tissue and Eye Services

ODT – Organ Donation and Transplantation

HSE – Health and Safety Executive

HR Direct – must be called to inform H&S of all work related absence. The number is (2) 7700 or 0117 3227700. Opening hours are 9.00am to 5.00pm Monday to Friday except bank holidays.

Out of Hours – for the purposes of this SOP is any time outside of HR Direct operating hours.

Timely – same day / within 24 hours of incident.

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infected with a blood borne virus e.g. laboratory positive controls are exposed to mucous membranes or to broken skin

Needlestick – An accident caused by piercing of skin or body by a needle contaminated with blood

Occupational Health Sharps Line – Sharps 24 hour phone line is 0845 371 0572

RTA – Road Traffic Accident. The majority of these do not fall under the requirements of RIDDOR

Datix – Electronic incident reporting and risk assessment system

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

- Adverse impact on the quality of air, land, water or wildlife species.
- Exceeding a permit or external reporting requirement.
- Notification of external agencies due to an 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 of archaeological sites.

RIDDOR – Reporting of injuries, diseases and dangerous occurrence regulations

Reportable under RIDDOR to the HSE by the Health and Safety Advisors:

Fatal Accident – An accident connected with work, which results in the death of an employee or self-employed person or a member of the public

Lost time Accident (LTA) – An accident that causes someone to be absent, or their work impaired, for more than 7 consecutive days, not counting the day of the accident but including any days which would not have been working days. However any absence due to an accident must be reported to **HR Direct**.

Specified Injury – 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. NHSBT also include within this definition dislocations, electric shock and all hospital admissions.

Injuries to people not at work – An accident to someone who does not work at the site (e.g. a donor being injured where they have tripped over a trailing cable placed there by NHSBT) resulting in them being taken to hospital

DGO – Dangerous occurrence

Items Required

[FRM1373](#) – Accident /Near Miss Incident Report or Datix on-line form (which is equivalent)

[MPD326](#) – Carriage and Packaging of Dangerous goods

[MPD319](#) – Accident and Near Miss Reporting

[MPD339](#) – First Aid

[MPD387](#) – Root Cause Analysis of Events

[MPD1027](#) – Environment and Sustainability Management – System Overview

[FRM820](#) – Serum Save

[INF803](#) – Information for Staff Following a Needlestick

[DAT668](#) – Definitions to be used in conjunction with Accident Reporting

[DAT417](#) – The correct flow of information between areas following needlestick and contact with blood incidents

[DAT1148](#) – Process Flow Chart for ODT Accident and Near-Miss Reporting

[DAT1430](#) – Process Flow Chart for TES Accident and Near-Miss Reporting

[DAT2466](#) – Process Flow Chart for Cord Blood Accident and Near Miss Reporting

[FRM413](#) – Record of First Aid Treatment Given

[MPD539](#) - Critical Incident Plan

[MPD589](#) - Potential Donor Contamination Incidents

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STEP	DETAILS	INFORMATION
<p style="text-align: center;">Note</p> <p>All accidents, needlestick, contact with blood injuries and diseases must be reported to your Manager/Supervisor and an accident report completed to comply with MPD319.</p> <p>Near misses must be reported using either a near miss postcard or electronically directly on Datix.</p> <p>Any member of staff or member of the public (not a donor) admitted to hospital out of hours as a result of our work activities must be escalated to the Chief Executive by the on call manager for the department involved. Further management and escalation should be in accordance with MPD539.</p> <p>A message should also be left on HR Direct for these incidents out of hours.</p> <p>ODT staff should read this document in conjunction with DAT1148.</p> <p>TES staff should read this document in conjunction with DAT1430.</p> <p>Cord Blood Bank staff should read this document in conjunction with DAT2466.</p> <p>In the event of potential staff to donor contamination MPD589 to be followed for managing the incident.</p> <p>The Environmental Manager will also follow the requirements set out in MPD1027</p>		

Individual to Whom Accident/Near Miss has Occurred

<p>1. Has a needlestick injury/ blood exposure accident occurred?</p>	<p style="text-align: center;">Yes No</p> <p style="text-align: center;">↓ ↓</p> <p style="text-align: center;">2 10</p>	<p>Follow 'NO' path for 'near miss' injury/exposure.</p>
<p style="text-align: center;">WARNING</p> <p>DO NOT allow site of needlestick injury/blood contact to come into contact with your mouth or other mucous membranes.</p>		
<p style="text-align: center;">Note</p> <p style="text-align: center;">Important: Place all contaminated waste in a clinical waste container</p>		
<p style="text-align: center;">Note</p> <p>Important: All needlesticks/blood contact accidents must be reported to your Manager and for staff incidents to the Occupational Health Sharps line. An accident/near miss report must also be completed.</p> <p>INF803 – Information for Staff Following a Needlestick leaflet is also available for support.</p>		
<p>2. Has exposure resulted in blood contact with broken skin or mucous membrane?</p>	<p style="text-align: center;">Yes No</p> <p style="text-align: center;">↓ ↓</p> <p style="text-align: center;">3 4</p>	<p>Broken skin examples; Skin has been pierced/cut Contact with existing cut Contact with eczema</p> <p>Mucous membrane examples; Eye Mouth</p>

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3. Dress the injury	3.1 If broken skin contact has occurred: <ul style="list-style-type: none"> Place under running water for 2-3 minutes and allow to bleed freely Dry and cover with a plaster 3.2 If mucous membrane contact has occurred, rinse with running water 3.3 Discard any waste into a clinical waste bin 3.4 Complete First Aid Treatment Form (FRM413) if necessary	e.g. rinse mouth with running water, rinse eye with eye wash OR under running water e.g. any paper towels you have used to absorb blood and/or dry injury site See MPD339				
4. Who was injured in the needlestick injury/ blood exposure accident ?	<table border="0"> <tr> <td style="text-align: center;">Member of Staff</td> <td style="text-align: center;">Donor</td> </tr> <tr> <td style="text-align: center;"></td> <td style="text-align: center;"></td> </tr> </table>	Member of Staff	Donor			Donor means member of staff had potential needlestick before inserting the needle into the donor. In addition to this SOP follow MPD589 to manage the incident.
Member of Staff	Donor					
						
5. Contact Occupational Health	5.1 Telephone Occupational health on the 24-hour Sharps line 5.2 Give the following information: <ul style="list-style-type: none"> Your name Your Department/Team name Your contact details Date and time of the accident Information on the source of the needlestick/blood contact Type of accident Which lab the donor samples have gone to for virology testing. 	0845 371 0572 e.g. home or department telephone number Using 24 hour clock For Donor give donation number For patient give the information from the Hospital request. Needlestick/eye splash/contamination e.g. Testing at Filton, or Manchester or NTMRL Colindale				
6. Have Occupational Health recommended that a 'serum save' sample is taken?	<table border="0"> <tr> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> </tr> <tr> <td style="text-align: center;"></td> <td style="text-align: center;"></td> </tr> </table>	Yes	No			In the event of a staff needlestick injury/blood contact a 'serum save' sample may be requested
Yes	No					
						




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<p>Note</p> <p>Important: Occupational Health will advise when the sample is to be taken. The serum save sample will be stored but will not be tested without your consent.</p> <p>If in the future you have any health problems that may be related to this accident the blood can be tested with your consent to see if you had the health problem before the accident.</p>		
<p>7. Donate a 'serum save' sample</p>	<p>7.1 Contact a Health Care Professional or trained venepuncturist, to take a sample</p> <p>7.2 Take a blood sample into a white topped plasma partition tube (pp)</p> <p>7.3 Ensure that the following details are written onto the label on the sample tube:</p> <ul style="list-style-type: none"> • Your surname • Your first name • Your date of birth • Your Department name • Date of incident 	<p>If unsure who to contact, ask your Manager/Supervisor for advice. This will usually be done by NHSBT staff.</p> <p>pp tube is normally used for discretionary testing</p>
<p>8. Fill-in the serum save form</p>	<p>8.1 Fill-in sections A, B and C</p> <p>8.2 Ensure details on sample and form match</p>	<p>FRM820 Use '24 hour clock' format</p>
<p>9. Send the serum save sample and form to the designated testing site</p>	<p>9.1 Package sample in accordance with the 'Carriage and Packaging of Dangerous goods' MPD or put in with the samples to go to a testing site</p> <p>9.2 Ensure the serum save form is included with the sample</p> <p>9.3 Ask your manager/supervisor to arrange for the sample to be sent to a testing site</p>	<p>MPD326 Filton or Manchester</p> <p>DAT417 The correct flow of information between areas following a needlestick or blood contact incident</p> <p>Best practice is for the individual/manager to confirm with the Testing site the next day that the serum save has arrived with them as if not there is still time for a further serum save to be taken.</p>

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10. Contact Manager/Supervisor	10.1 Always inform your Manager or Supervisor immediately if you have had an accident or are suffering from a work related disease or an environmental incident has occurred.	Contact by telephone, if necessary near miss incidents do not need to be reported to the Manager or Supervisor immediately unless you think that an accident is likely to occur if immediate action is not taken and you are unable to intervene.
11. Are you completing this form electronically or hard copy ?	<p style="text-align: center;">Electronically Hard Copy</p> <p style="text-align: center;"> 12  13</p>	<p>Near misses can be reported either way.</p> <p>For Environmental incidents the Manager must complete the electronic form within Datix.</p>
12. Fill-in electronic form on Datix	<p>12.1 Go to Datix on the intranet.</p> <p>12.2 Select whether you are reporting an accident or near miss</p> <p>12.3 Complete all necessary fields on the form</p> <p>12.4 Ensure all times are recorded in '24 hour clock' format</p> <p>12.5 For near misses, ensure you complete the centre/department/team where you are based</p> <p>12.6 For accidents, ensure you confirm who your line manager is</p> <p>12.7 For accidents, complete a First Aid Treatment Form (FRM413) if necessary</p> <p>12.8 Review and check the form prior to submission on the system</p> <p style="text-align: center;"> 14</p>	<p>Icon on front page of intranet provides a quick link</p> <p>No user / log in details are required to report an accident or near miss.</p> <p>DAT668</p> <p>Near miss incidents do not require the name of the reporter. However staff must inform their Manager or Supervisor of near misses immediately if you think that an accident is likely to occur if immediate action is not taken</p> <p>Managers complete the Management Review and Corrective and Preventative Action (CAPA).</p> <p>See MPD339. Upload a scanned copy of this to the on-line form.</p> <p>On submission Datix generates an e-mail notification to the line manager to review incident/near miss as a precursor to step 14</p>

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13. Fill in hard copy	<p>Near Miss reporting (option available to all departments)</p> <p>13.1 Fill in near miss reporting postcard completing all fields</p> <p>13.2 Ensure the date and time section is completed and that times are recorded in '24 hour clock' format</p> <p>13.3 Ensure you complete the centre/department/team where you are based</p> <p>13.4 Send the completed postcard to HR Direct via the internal post for inputting and submission onto Datix</p> <p>Accident reporting (Blood Donation Mobile Teams only)</p> <p>13.5 Complete all necessary sections on the form</p> <p>13.6 Ensure all times are recorded in '24 hour clock' format</p> <p>13.7 Ensure you confirm who your line manager is</p> <p>13.8 Complete a First Aid Treatment Form (FRM413) if necessary</p> <p>13.9 Review and check the form prior to its submission</p> <p>13.10 Send the completed original form immediately (same day) to HR Direct for inputting and submission onto Datix on their behalf</p> <p>13.11 Retain a copy for your records and in case the original is lost in the post</p>	<p>Near miss incidents do not require the name of the reporter. However staff must inform their Manager or Supervisor of near misses immediately if you think that an accident is likely to occur if immediate action is not taken</p> <p>Only Blood Donation Mobile Collection Teams complete hard copy accident forms as they have no or limited access to the intranet DAT668, FRM1373</p> <p>See MPD339. Attach copy to FRM1373.</p> <p>NHSBT postal address for this is: HR Direct, NHSBT Filton Centre, 500 North Bristol Park, Northway, Filton, Bristol, BS34 7QH</p> <p>Accident report forms can also be scanned from the team ipads using the genius scan app and then sent by e-mail to HR Direct to speed up the process of inputting them onto Datix.</p>

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<p style="text-align: center;">Note</p> <p>Where hard copy accident forms are completed by Blood Donation they should not be sent using internal envelopes as these are not secure. They need to be in sealed envelopes, with a return address on the reverse, clearly labelled as follows:</p> <p style="text-align: center;">HR Direct, NHSBT Filton Centre, 500 North Bristol Park, Northway, Filton, Bristol, BS34 7QH</p> <p>They can be sent via the normal blood run to the main Centre to then be sent out via the Post Room / Facilities or direct from the team. The first option will negate the need for stamps.</p> <p>On receipt by HR Direct the incidents will be put onto Datix and the line manager notified by e-mail.</p> <p>A copy of the form will be uploaded against the record and the original disposed of confidentially</p>		
<p>Manager/Supervisor</p>		
<p>14. Is the incident 'reportable' (fatal, specified injury, staff hospitalisation or <u>any</u> lost time) ?</p>	<p style="text-align: center;">Yes No</p> <p style="text-align: center;">↓ ↓</p> <p style="text-align: center;">15 16</p>	<p>This should be determined at the time of the incident or as soon as possible afterwards (usually within 24 hours).</p>
<p>15. Contact HR Direct</p>	<p>15.1 Telephone HR Direct to inform them of the incident.</p> <p>15.2 Manager to co-operate with any requests made from Health & Safety linked to call.</p>	<p>The number is: (2)7700 or 0117 3227700</p> <p>HR Direct will pass you to a member of the Health and Safety Team.</p>
<p>16. Fill-in electronic form on Datix</p>	<p>16.1 Check details / information in What happened ?</p> <p>16.2 Fill-in and save Management Review and CAPA within 3 working days of receiving e-mail notification to complete the form.</p> <p>16.3 Where requested or identified as appropriate complete additional Root Cause Analysis.</p>	<p>Log in to Datix via intranet and find record, based on e-mail notification. Line Managers are responsible for completing the Management Review and CAPA section on Datix.</p> <p>Flow charts are available to assist with Datix reporting as you enter the system.</p> <p>MPD387</p> <p>For potential donor contamination use MPD589 to manage the incident with them.</p> <p>H&S Review is then completed by Health and Safety or the Environmental Manager which is outside the remit of this procedure.</p>