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THIS POLICY IS FOR:	Staff including Agency Workers (temporary workers), Commissioners and Service Users

ACCIDENT & INCIDENT REPORTING

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ACCIDENT AND INCIDENT REPORTING POLICY AND PROCEDURE

The aim of this policy is to ensure that Nursing Direct Healthcare Limited (hereinafter referred to as "Nursing Direct") as a care provider complies with its legal, ethical, and regulatory responsibilities in relation to accidents, incidents, injuries, and near misses arising within the service or whilst delivering services. It aims to ensure such events are reported, recorded, reviewed, investigated, and used to reduce future risk, improve safety and promote a culture of openness, learning, and continuous improvement. This policy supports Nursing Direct in complying with Care Quality Commission (CQC) regulations, quality statements, and best practice guidance.

1. PURPOSE

- 1.1 To describe the arrangements in place at Nursing Direct which ensure that accidents, incidents, and near misses are recorded, reported, reviewed, and investigated in order to comply with relevant health and safety, safeguarding, and regulatory obligations.
- 1.2 To describe how Nursing Direct reduces the risk of harm arising from its activities by investigating incidents, accidents, and near misses and taking action based on lessons learned.
- 1.3 To ensure there is a clear process for internal reporting through our Radar Healthcare reporting system, escalation to senior management for oversight when required, and external notification to relevant bodies where applicable.
- 1.4 To support Nursing Direct in meeting the relevant Key Lines of Enquiry and Quality Statements as outlined by the Care Quality Commission (CQC).

1.5 Relevant Legislations, Rules, and Regulations

To meet the legal requirements of the regulated activities that Nursing Direct has undertaken, it has taken into consideration the following legislation when complying with its role and duty as a provider.

- Care Quality Commission (Registration) Regulations 2009
- Control of Substances Hazardous to Health Regulations 2002
- The Controlled Drugs (Supervision of Management and Use) Regulations 2013
- Health and Social Care Act 2008 (Registration and Regulated Activities) (Amendment) Regulations 2015
- Health and Safety at Work etc. Act 1974
- The Health and Safety (First Aid) Regulations 1981
- The Ionising Radiation (Medical Exposure) Regulations 2017
- Management of Health and Safety at Work Regulations 1999
- The Medical Devices (Amendment) Regulations 2025
- The Workplace (Health, Safety and Welfare) Regulations 1992
- The Health and Safety (Miscellaneous Amendments) Regulations 2002
- Health and Social Care (Safety and Quality) Act 2015
- UK GDPR
- Data Protection Act 2018
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- The Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2012

2. SCOPE

2.1 The following roles may be affected by this policy:

- All Staff including Agency Workers

2.2 The following people may be affected by this policy:

- Service Users

2.3 The following stakeholders may be affected by this policy:

- Family / Next of Kin / Friends
- Advocates
- Representatives
- Commissioners / Local Authorities / NHS / ICB
- External health professionals

3. OBJECTIVES

- 3.1 To ensure that all accidents, incidents and near misses are appropriately reported, recorded, reviewed, and investigated.
- 3.2 To ensure that Nursing Direct has procedures and trained staff in place to appropriately record, report, review and investigate all accidents, incidents and near misses.
- 3.3 To ensure that, following investigation, and where found to be necessary, action is taken to prevent a recurrence and reduce the risk of future similar incidents

- 3.4 To ensure that incident reporting support effective governance oversight, learning, service improvement, and safer care delivery.
- 3.5 To ensure that notifiable incidents are escalated and reported in line with CQC, RIDDOR, safeguarding, Duty of Candour, and other relevant reporting requirements.

4. POLICY

- 4.1 Nursing Direct will record, and, where necessary, report to the relevant authorities, all accidents, incidents, and near misses which occur in connection with its service activities. Incidents of all types, whether or not they result in actual injury, ill health, harm, or property damage, will be recorded, and investigated.
- 4.2 All accidents or incidents which involve Service Users, Staff including Agency Workers, family members, advocates, visitors, and members of the public, which occur during or in connection with service provision, will be recorded, reviewed and investigated. This includes incidents arising in any location where Nursing Direct is delivering care.
- 4.3 Accidents, incidents and near misses which occur in connection with Nursing Direct service activities and affect Staff including Agency Workers, or Service Users at any location will be recorded on the Radar Healthcare reporting system and investigated.
- 4.4 All accidents, incidents and near misses will be recorded on an appropriate form which may be held in paper or electronic copy. All completed reports will be stored in accordance with UK GDPR principles, policies, and procedures.
- 4.5 Near miss reporting should not be ignored or minimised as it can help prevent future incidents and reduce the likelihood of injury.
- 4.6 This policy will support the arrangements in place for the reporting and notification of serious incidents. It has been reviewed and updated around the new Patient Safety Incident Response Framework (PSIRF), which is contractual under the NHS Standards Contract and, as such, is mandatory for services provided under that contract.
- 4.7 All accidents, incidents, and near misses are escalated to the Quality Assurance Team.
- 4.8 Nursing Direct promotes an open and transparent culture in which staff feel comfortable to raise concerns, report incidents, identify measures to improve safety, and share learning and ideas for improvement. Nursing Direct recognise that some people may access and understand information in different ways. This policy can be made available in accessible formats, when required.

5. PROCEDURE

5.1 Immediate Response

In the event of an accident or incident, or near miss the immediate priority will be the safety of all Service Users, staff including Agency Workers, and other visitors. Before responding to any incident, the area will be made safe, and Staff including Agency Workers will not put themselves in the line of danger.

- 5.2 As soon as it is safe to do so, any person harmed as a result of an accident, incident or near miss will be encouraged to seek the necessary first aid treatment or medical assistance, where required. Where there is immediate risk to life, serious injury, or significant deterioration, emergency services must be contacted without delay and all appropriate immediate safeguarding and clinical escalation actions taken.

5.3 Notification and Recording

Nursing Direct adopts an open and transparent culture where staff including Agency workers feel comfortable raising concerns, identify measures to improve safety and sharing innovative ideas.

- 5.3.1 Nursing Direct will be notified of the accident or incident by the quickest means achievable and initial details recorded on the relevant incident or accident form.
- 5.3.2 Notification of the accident or incident to Nursing Direct shall occur at the earliest convenience and within 24 hours, ensuring it is safe to do so.
- 5.3.3 The completed accident or incident report form will be submitted to Nursing Direct, where it will be acknowledged and subjected to a thorough review process.
- 5.3.4 The appropriate level of accident or incident investigation will be conducted, or Nursing Direct will ensure the initiation of a suitable investigation.
- 5.3.5 Nursing Direct will oversee a thorough investigation into the causes of the accident or incident, identifying appropriate actions through a comprehensive process that may involve reviewing reports and statements, examining relevant documentation, and conducting debriefs with both Service Users and staff including Agency Workers where appropriate
- 5.3.6 The treatment of any injury must also be documented in the Radar Healthcare reporting system, including the ongoing progress of treatment of any injury, through the internal welfare process, with completion of subsequent follow-up actions.
- 5.3.7 If the incident involves Service Users, the Duty of Candour Policy and Procedure will be referred to and, in the event of a notifiable safety incident, appropriate actions taken.
- 5.3.8 This policy will support the arrangements in place for the reporting and notification of serious incidents in line with the Patient Safety Incident Response Framework (PSIRF), which is contractual under the NHS Standards Contract and, as such, is mandatory for services provided under that contract. Further information about reporting incidents can be found in the Patient Safety Incident Response Policy and Procedure.

- 5.3.9 Nursing Direct must notify the CQC of all incidents that affect the health, safety and welfare of people who use services. The full list of incidents is detailed in the text of Regulation 18 of the Care Quality Commission (Registration) Regulations 2009.
- 5.3.10 Nursing Direct aims to close all accidents, incidents and near misses reported on our Radar Healthcare Reporting System within 28-working days, from the notification an event unless there is a clear and recorded reason why further review, external process, or monitoring is required.
- 5.3.11 After the accident, incident or near miss investigation and when all matters concerned with it are complete, a copy of the full accident or incident report will be centralised and available in the Radar Healthcare Reporting System.
- 5.3.12 Should the accident, incident or near miss qualify as a reportable Safeguarding concern, Nursing Direct will refer to the Adult Safeguarding Policy and Procedure and/or the Safeguarding Children and Child Protection Policy and Procedure. Safeguarding procedures run alongside internal incident reporting and investigation.
- 5.3.13 Once the investigation into the accident, incident or near miss is complete and all related matters have been addressed, a copy of the report will be made available on the Radar Healthcare reporting system. All affected staff, including agency workers, will be documented in the Accident and Injury Log, which is also accessible via the Radar Healthcare reporting system.
- 5.3.14 In the case of a Service User, all accidents, incidents or near misses form part of the care plan and risk assessment reviews. Where appropriate this will include review of behavioural intervention, medication, environmental risks, moving and handling arrangements, clinical oversight, escalation plans, and contingency arrangements

5.4 RIDDOR 2013 Reporting Requirements

The following injuries are reportable under RIDDOR when they result from a work-related accident:

- The death of any person
- Specified injuries to Staff including Agency Workers
- Injuries to Staff including Agency Workers which result in their incapacitation for more than 7 days
- Injuries to non-workers result in them being taken to hospital for treatment.

A report must be received within 10 days of the accident.

The following injuries are reportable;

- Fractures, other than to fingers, thumbs, and toes
- Amputations
- Any injury likely to lead to permanent loss of sight or a reduction in sight
- Any crush injury to the head or torso causing damage to the brain or internal organs
- Serious burns, including scalding, which cover more than 10% of the body, or causing significant damage to the eyes, respiratory system, or other vital organs
- Any scalding requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Any other injury arising from working in an enclosed space which:
 - Leads to hypothermia or heat-induced illness
 - Requires resuscitation or admittance to hospital for more than 24 hours

The Registered Manager is responsible for the submission of reports to the HSE in accordance with RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013). A record of all submissions will be maintained all records of accidents and incidents, including copies of submitted RIDDOR reports, for a minimum of 3 years.

5.4.1 Seven Day Injuries

Where staff including Agency Workers are unable to work for more than seven consecutive days following a work-related accident and remains unable to perform their normal duties throughout this period, a RIDDOR report must be submitted as soon as practicable and within 15 days of the accident.

5.4.2 Injuries to Non-workers

Where an injury occurs to a non-worker (e.g. member of the public, visitor, or Service User) and they require transportation to hospital by any means for treatment of that injury, this is RIDDOR reportable. If the accident occurred at a hospital, only 'specified injuries' need reporting.

5.4.3 The following diseases are reportable where they are linked to occupational exposure to specified hazards:

- Carpal tunnel syndrome
- Severe cramp of the hand or forearm
- Occupational dermatitis
- Hand-arm vibration syndrome
- Occupational asthma
- Tendonitis or tenosynovitis of the hand or forearm
- Any occupational cancer
- Any disease attributed to an occupational exposure to a biological agent
- Staff including Agency Worker has been diagnosed as having COVID-19 and there is reasonable evidence that it was caused by exposure at work

5.4.4 Dangerous Occurrences Requiring Reporting - for example:

- The collapse, overturning or failure of load-bearing parts of lifts and lifting equipment
- Explosions or fires causing work to be stopped for more than 24 hours

5.4.5 How to Report Online

Go to the HSE RIDDOR reporting service and complete the appropriate online report form, which is then directly submitted to the RIDDOR database. A copy should be downloaded or retained for organisational records.

5.4.6 Telephone

All incidents can be reported online but a telephone service remains available for reporting fatal and specified injuries only. Call the Incident Contact Centre on 0845 300 9923 (opening hours Monday to Friday 8.30 am to 5 pm).

6. DEFINITIONS

6.1 Staff including Agency Workers

6.1.1 Staff

Denotes the employees of Nursing Direct Healthcare Limited.

6.1.2 Agency Workers

Refers to individuals who are contracted with Nursdoc Limited or another employment business as an Agency Worker (temporary worker) provided to Nursing Direct Healthcare Limited to perform care services under the direction of Nursing Direct.

6.2 Nursing Direct

Nursing Direct, also known as Nursing Direct Healthcare Limited, is the entity regulated by the CQC (Care Quality Commission) and responsible for the care service provision, contracted to provide homecare services to service users in their homes, in placements, essential healthcare facilities and in the community.

6.3 Nursdoc Limited

As the sister company to Nursing Direct Healthcare Limited, Nursdoc Limited acts as an employment business, specialising in providing staffing solutions to the healthcare sector.

6.4 CQC (Care Quality Commission)

CQC throughout this policy, the term "CQC" refers to the Care Quality Commission (CQC) which is the independent regulator of health and social care in England.

6.5 Accident

An accident is an incident which results in an injury to a person or multiple people or damage to property

6.6 Incident

An incident is any unintended event or occurrence that has caused or could have caused death, injury, ill-health, or damage

6.7 Radar Healthcare Reporting System

Radar Healthcare is the software used within Nursing Direct designed to streamline incident reporting while seamlessly integrating various modules for comprehensive management of quality, audits, patient safety, risk management and compliance processes.

6.8 Near Miss

A near miss is an incident that did not result in injury, illness, or damage, but which has the potential to do so. Near miss reporting should not be ignored or minimised; it can help prevent future incidents and reduce the likelihood of injury

6.9 RIDDOR

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations. A legal requirement to report specified injuries, diseases and occurrences to the Health and Safety Executive (HSE) or Local Authority (LA)

6.10 Responsible Person

Persons filling in the reporting form should not be concerned about differentiating between an incident and an accident if the allocation is unclear. The Registered Manager will complete the allocation on review of the form

6.11 Dangerous Occurrence

A dangerous occurrence is an adverse event with the potential to cause significant harm, as specified by RIDDOR, which must be reported to the HSE

6.12 Work-Related Accident - RIDDOR

- For a specified or over 7-day injury to require notification to the HSE under RIDDOR, it must result from an accident, and this accident must be work related
- Accident: In relation to RIDDOR, an accident is a separate, identifiable, unintended incident, which causes physical injury. This specifically includes acts of non-consensual violence to people at work
- Injuries themselves, e.g. 'feeling a sharp twinge', are not accidents. There must be an identifiable external event that causes the injury, e.g. a falling object striking someone. Cumulative exposures to hazards, which eventually cause injury (e.g. repetitive lifting), are not classed as 'accidents' under RIDDOR Work-Related: An accident is 'work-related' if any of the following played a significant role:
 - The way the work was carried out
 - Any machinery, plant, substances, or equipment used for the work or
 - The condition of the site or premises where the accident happened


OUTSTANDING PRACTICE

To be 'outstanding' in this policy area you could provide evidence that:

- Nursing Direct adopts an open and transparent culture where Staff including Agency Workers feel comfortable to raise concerns, identify measures to improve safety and share innovative ideas
- There is a regular programme of training and a learning culture that is subject to regular audit
- Nursing Direct undertakes an analysis of accidents, incidents and near misses and applies lessons learned to support continuous improvement

FORMS ASSOCIATED WITH THIS POLICY

- Incident/Accident Report Form
- Incident Timeline Form
- ABC Behaviour Chart (where appropriate)
- Service User Debrief Form (where appropriate)
- Welfare Checks Form (where appropriate)

COMPLETED DATE:	10.04.2025
SIGN OFF DATE:	10.04.2026
REVIEW DATE:	10.04.2027
SIGNED:	 Marc Stiff – Group Managing Director