

Patient Safety Incident Response Framework Policy

1. Purpose

This policy supports compliance with the Patient Safety Incident Response Framework (PSIRF), a requirement under the National Health Service England (NHSE) Standard Contract.

2. Scope

This policy applies specifically to patient safety incidents (formerly practice and clinical incidents) and to all staff and volunteers, including agency, temporary staff, and contractors, undertaking activities or providing services within British Red Cross's (BRC) Health Directorate. PSIRF replaces the Serious Incident Framework for patient safety incidents.

3. Policy Statement

This policy underpins the BRC approach to developing and maintaining an effective patient safety incident response system that meets the four key PSIRF aims:

- i. compassionate engagement and involvement of those affected by patient safety incidents;
- ii. application of a range of system-based approaches to learning from patient safety incidents;
- iii. considered and proportionate responses to patient safety incidents and safety issues;
- iv. supportive oversight focussed on strengthening response system functioning and improvement.

We will ensure that the BRC supports the PSIRF and encourages learning and continuous improvement across all our services in the Health Directorate by:

- 3.1.** Ensuring all staff and volunteers are appropriately trained to operate under the PSIRF.
- 3.2.** Promoting a culture of identifying, assessing and reporting patient safety incidents, and near misses using the BRC incident reporting system.
- 3.3.** Providing a safe and accessible environment for individuals to report patient safety incidents and promoting a culture of accountability without blame.
- 3.4.** Establishing communication mechanisms with service users and their families, complying with the Duty of Candour Procedure and ensuring compassionate engagement with all those affected by patient safety incidents.

- 3.5. Applying agreed system-based learning responses when an incident or near miss occurs to maximise the opportunities for learning and improvement.
- 3.6. Learning lessons from incidents and taking appropriate action to avoid recurrence and improve safety.
- 3.7. Providing an effective oversight and governance structure to BRC's response to patient safety incidents.
- 3.8. Monitoring the consistency and accuracy of learning responses and taking timely action to address any deficiencies identified.
- 3.9. Authoring and publishing a Patient Safety Incident Response Plan which will be subject to review at least annually.

4. Responsibilities

The Board of Trustees, together with the Executive Leadership Team, are accountable for, and provide oversight of, the implementation of the policy.

The Risk and Assurance Committee are responsible for approving the policy.

The Executive Director of UK Operations (Policy Owner) is responsible for ensuring that this policy aligns to external and internal standards.

The Head of Quality (Policy Lead), together with the Policy Owner, is responsible for the development, monitoring, and review of this policy.

The Heads of Functions/ Service within Health are responsible for implementing, and ensuring compliance with, the policy within their areas of responsibility.

The Quality Team and Investigations Manager provide advice and support for the implementation of this policy.

The Assurance Team are responsible for reviewing compliance with the policy.

Staff and volunteers working within the Health Directorate are responsible for adhering to and complying with this policy.

5. Governance

Associated policy document/s	<ul style="list-style-type: none"> • Incident Reporting Policy
Policy(ies) superseded	N/A
Legislation / regulatory requirements and standards	<ul style="list-style-type: none"> • NHSE Standard Contract • NHSE Patient Safety Incident Response Framework
Equality impact assessment	No equality impact identified
Data Protection impact assessment	No data protection impact identified
Environmental impact assessment	No environmental impact identified

Endorsing Authority; Endorsement date	Executive Director of UK Operations; May 2024	
Approval Authority; Approval date	Risk Assurance Committee; 07 2024	
Policy Owner	Executive Director of UK Operations	
Policy Lead	Head of Quality	
Date effective	07 2024	
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Version	1.0	
Keywords	PSIRF, patient, safety, incident, response, framework, learning, response, engagement, oversight, near miss, NHS, National Health Service	
Version History	Version	Summary of Changes
	Version 1.0	New policy document

Appendix: Definitions

Continuous improvement: a culture that encourages all employees and volunteers to look for ways to enhance the organisation's operations.

Duty of Candour: a professional responsibility to be honest with patients when things go wrong.

Incident: an unintended or unexpected event that causes harm, injury, loss or damage to our staff or volunteers, service users, partners, customers, contractors, operations, reputation, property or the environment.

Framework: a basic structure underlying a system or concept.

Governance: the process of governing or overseeing the control and direction of the organisation.

Health Directorate: a service within BRC UK Operations that supports people to live independently by offering practical and emotional support.

National Health Service England (NHSE): healthcare system in England publicly funded from taxation.

NHSE Standard Contract: the terms and conditions drafted by the NHSE Commissioning Board for all contracts for healthcare services other than primary care.

Near miss: an unexpected and unplanned event that has the potential to cause harm, injury, loss or damage to individuals, property, equipment, or the environment.

Oversight: watchful care to ensure the following: due diligence takes place before key decisions are made. Policies and strategies are being implemented as intended. Key risks are identified, monitored, and mitigated. Business processes and systems are working well.

Patient Safety Incident Response Framework (PSIRF): sets out the NHSE' approach to developing and maintaining effective systems and processes for responding to patient safety incidents for the purpose of learning and improving patient safety. It provides guidance on how to respond to patient safety incidents; with no distinction between incidents and 'serious incidents' for the purpose of learning.

Patient Safety Incident Response Plan: details how BRC prepares for, reviews and responds to any health-related incident.

Practice and Clinical: Category of incident or near miss in the BRC incident management system relating to the health of service users.

Serious incident: an event with high learning potential or significant consequences which requires a comprehensive response.

Staff: people employed by the BRC including agency, temporary staff and contractors.

System-based learning response: Responses under this policy follow a systems-based approach. This recognises that patient safety is provided by interactions between components and not from a single component. Responses do not take a 'person-focused' approach where the actions or inactions of people, or 'human error', are stated as the cause of an incident.

Volunteer: a person who operates for the BRC but does not get paid for their service.