Urgent Care Plan

Clinician Incident Management Standard Operating Procedure

Title	Clinical Incident Management Standard Operating Procedure
Status	V1.0
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File Ref.	Clinical Governance 001

Approval Sign-off (For formal issue) *For completion by Review Panel*			
Approver	**Organisation / Role**	**Signature**	**Date**
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Purpose

The purpose of this operating procedure (SOP) is to set out the Urgent Care Programme (UCP) clinical incident management process. Clinical incidents may arise whilst users engage with the dynamic Urgent care Plan. The aim of this SOP is to ensure:

- there is accurate and timely review of clinical incidents raised to the UCP by any user
- level of investigation required is ascertained
- appropriate management and escalation of the issue
- appropriate resolution and sign-off
- there is an accurate record of the reviews undertaken and the outcomes.

To ensure and enable the sharing of learning across all provider organisation, relevant outputs of clinical incidents may be shared with users via the UCP FAQ document and other mechanisms.

Scope of SOP

This SOP covers all UCP staff. UCP staff have direct responsibility for ensuring the SOP is effectively followed.

To ensure and enable the sharing of learning across all provider organisation, relevant outputs of clinical incidents may be shared with users via the UCP FAQ document and other mechanisms

Governance

The UCP is a digital transformational programme working in conjunction with pan-London clinical stakeholders to design the content of the UCP template. Thus, the digital governance components of the programme are the responsibility of the UCP Programme Board, and the clinical governance components remains with individual organisations utilising the UCP template.

It is therefore the responsibility of the UCP user to report clinical incidents to their organisation, as required by their organisation policy, for example via a datix management reporting system or equivalent.

Where a clinical incident has been deemed to arise from the UCP digital template or UCP 3rd party integrations, the end user shall report the clinical incident to both their organisation and to the UCP Programme via the incident reporting form Report an incident (office.com).

Incident Management process

<table>
<tr><td>Location</td><td colspan="2">120 The Broadway</td></tr>
<tr><td>Risk</td><td colspan="2">Clinical Incident</td></tr>
<tr><td colspan="2">Immediate Actions – 24 hours</td><td>Responsibility</td></tr>
<tr><td colspan="2">1. On receipt of a complete Incident Reporting form is received in the UCP mailbox ucp.helpdesk@nhs.net, helpdesk staff shall immediately forward this to the UCP Clinical Leads and copy the UCP Head of Service.

2. UCP Head of Programme shall send a standard reply to the incident reporter.

“Dear XX

Your submitted Clinical Incident for has been received and handed over to the UCP Clinical Leads for review. Once the clinical review has been completed, the UCP Team will contact you with further information pertaining to the Clinical incident.”</td><td>1. Helpdesk Project Manager

2. Head of Programme - UCP</td></tr>
<tr><td colspan="2">Interim Actions – 48 hours</td><td>Responsibility</td></tr>
<tr><td colspan="2">Clinical Incident Review
1. The UCP Clinical Leads shall review the reported Clinical Incident form, risk rate the incident using the clinical risk management matrix below and recorded as illustrated in the following table

Example of risk recording
<table>
<tr><td rowspan="2">Risk Score</td><td>Impact</td><td>Catastrophic</td><td>Overall Score</td></tr>
<tr><td>Likelihood</td><td>Low</td><td>4</td></tr>
</table></td><td>1. UCP Clinical Lead</td></tr>
</table>

2. Where a risk above 4 is recorded, a Clinical Design Group meeting (UCP and Better) shall be convened by the clinical Lead within 24 working hours following the rating 3. Where a risk of 3 is recorded, the risk shall be reviewed at the next Clinical Touchpoint meeting (every Tuesday) 4. Where a risk of 1 or 2 is recorded, the reported Clinical Incident shall be discussed at the next Clinical Design Group meeting (held monthly)	
Subsequent Actions	**Responsibility**
Where immediate and interim actions have been completed: 1. UCP Head of service shall instruct (detailing the agreed fix) the UCP Helpdesk to raise a ticket to Better, via Zendesk, as detailed in the Better OneLondon Technical playbook V1.0.3.2 2. UCP Head of Programme shall keep Programme Director and clinical Leads informed of progress towards resolving the clinical incident	1. Head of Programme and Helpdesk Project Manager 2. Head of Programme
External contacts and timescales	**Responsibility**
1. UCP HOP shall update the clinical incident report of outcome, resolution and relevant feedback pertaining to the reported clinical incident 2. UCP HOP shall produce a programme Clinical incident report to be shared with the UCP Clinical Quality Reference Group	1. Head of Programme

Clinical Risk Management Matrix

The criteria that were used for scoring are provided below. The values obtained forseverity and likelihood were then applied to the following matrix to obtain an overall risk score from 1 to 5, where 5 represents the greater risk

The following risk matrix has been used to categorise the function level

Likelihood	Very High	3	4	4	5	5
	High	2	3	3	4	5
	Medium	2	2	3	3	4
	Low	1	2	2	3	4
	Very Low	1	1	2	2	3
		Minor	Significant	Considerable	Major	Catastrophic
		Severity				

Risk Matrix Key

Risk Category	Risk Score	Consequences for End User
Very High	5	Unacceptable level of risk
High	4	Mandatory elimination of hazard or addition of control measure to reduce risk to an acceptable level
Medium	3	Undesirable level of risk. Attempts should be made to eliminate the hazard or implement control measures to reduce risk to an acceptable level. Shall only be acceptable when further risk reduction is impractical
Moderate	2	Acceptable where cost of further reduction outweighs benefits gained or where further risk reduction is impractical
Low	1	Acceptable, no further action required