

## Managing and learning from incidents

The increasing requirements of the organisation and the revalidation of doctors in training had led to a change in how clinical incidents, IG incidents and complaints are managed. This policy has been in place since March 2015.

The main driver is our requirement as an organisation to report unresolved or outstanding incidents involving doctors in training to the Lead Employer, to assist in the process of Revalidation. The Deanery (HEENW) aligns the Revalidation process for doctors in training to the ARCP, usually held once a year. Doctors in training are required to declare all incidents (resolved and outstanding) to the panel (via Form R) and this is reconciled with a report provided by each hospital Trust. If there are any discrepancies or insufficient information has been provided, this can lead to a delay in recommendation for revalidation.

In addition, there are often themes that emerge in clinical incidents that we, as an organisation, need to recognise and address through education. By coordinating the flow of information through the medical education department we can review these trends and subsequently tailor and enhance the learning opportunities offered. Many of these incidents have learning points that are equally as valid to us as senior doctors as they are to our younger colleagues.

In making the pathway explicit, it is hoped that all doctors, either reporting or named in an incident, are fully supported by their educational and clinical supervisors. It will also hopefully improve patient safety through lessons learnt.

The following flow charts highlight the management for doctors in training (HEENW). The principles will also apply to trust doctors in similar roles to those in training.

Further support and advice can be sought from the Medical Education Team.

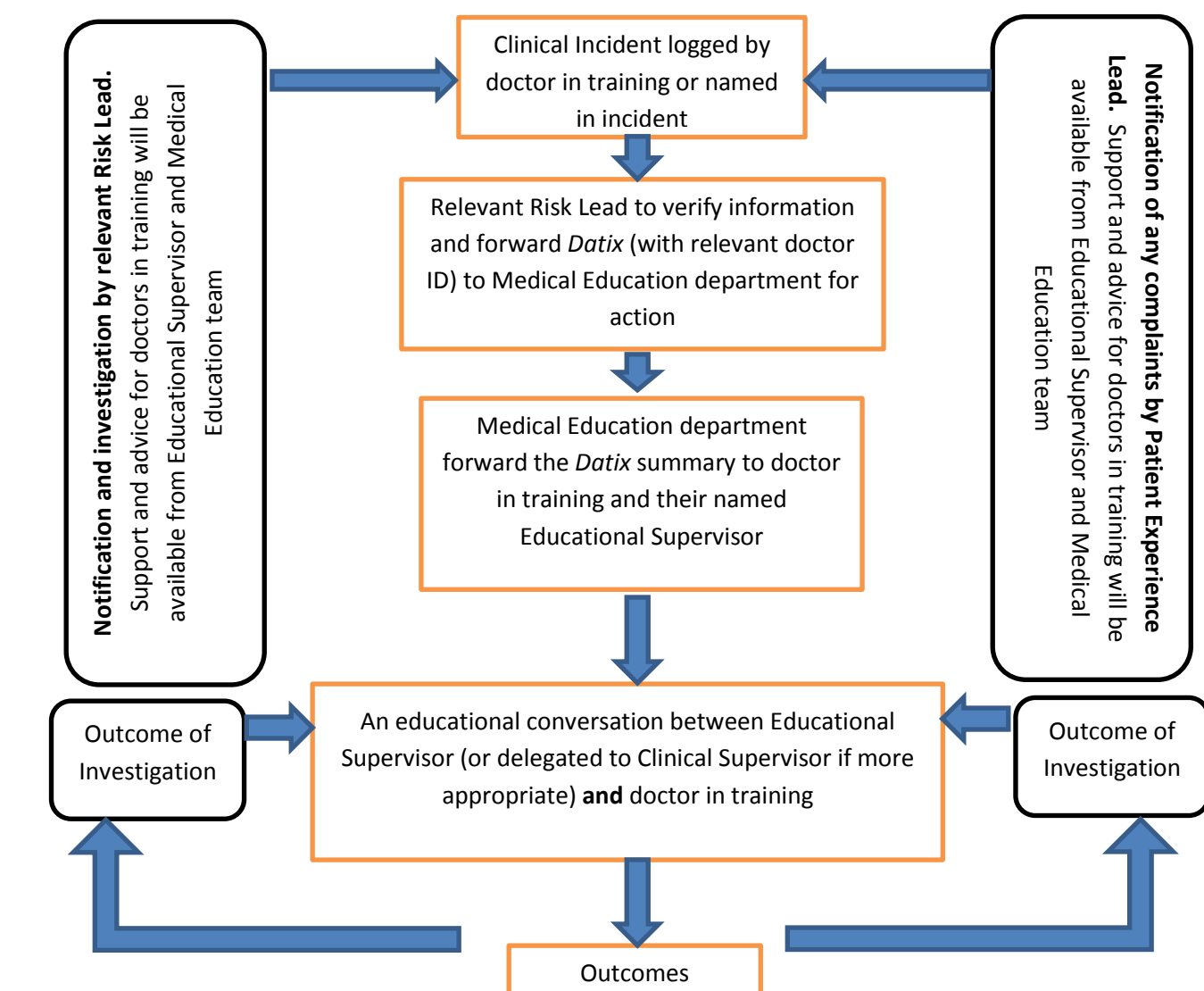
**Dr Ian Benton**

**Director of Medical Education**

**Significant Event:** The GMC state that a significant event (also known as an untoward or critical incident) is any unintended or unexpected event, which could or did lead to harm of one or more patients. This includes incidents which did not cause harm but could have done, or where the event should have been prevented.

All doctors as part of revalidation are required to record and reflect on Significant events in their work with the focus on what you have learnt as a result of the event/s. Use non-identifiable patient data only.

## Flow chart for managing incidents involving doctors in training.



Medical Education.  
Reminder emails will be sent after 3 weeks. Then at 7 days interval

Documentation of meeting / learning outcomes

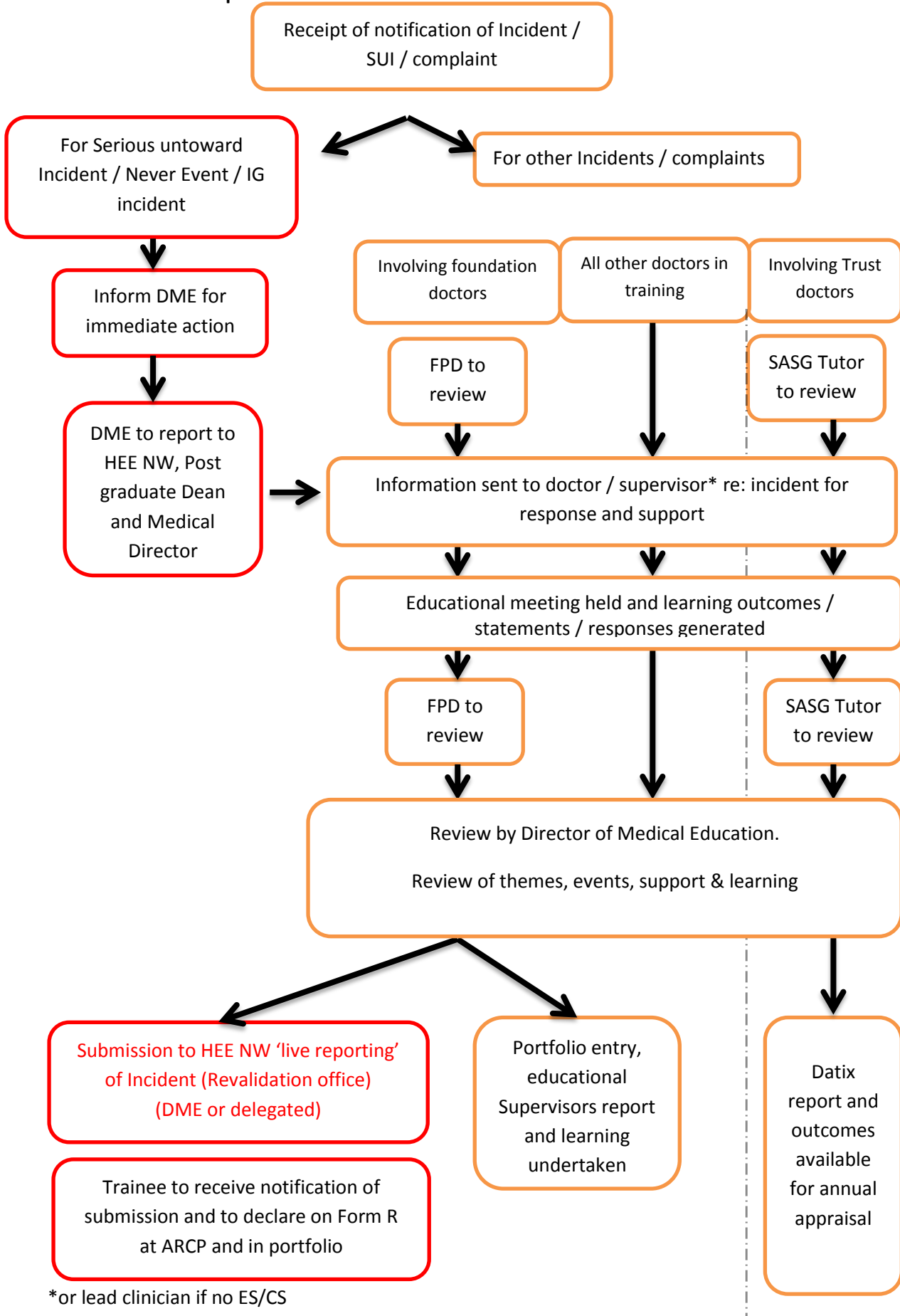
Identify any learning needs

1. Written reflection in training portfolio
2. Statement by Educational Supervisor notifying the identified educational needs and that clinical incident resolved or still outstanding.

It is a requirement for all doctors in training to declare on an annual basis (usually at the time of an ARCP) whether they have been involved in any incidents, and whether they have been satisfactorily resolved. The Trust submits a list by exemption, of resolved or completed incidents. Failure to complete the notification of the outcome is likely to result in delay of an ARCP award.

<https://www.nwpgmd.nhs.uk/form-r-part-a>  
<https://www.nwpgmd.nhs.uk/form-r-part-b> (correct as at 1.10.16)

**Department of Medical Education – Process for Incident review**



\*or lead clinician if no ES/CS

## Example of email to be sent to Educational Supervisor AND doctor in training

### 1. Where doctor in training has been named in an incident

Dear Dr X

The attached incident involves a doctor in training / Trust doctor whom you are named as their Educational Supervisor.

Please could you review the incident and discuss with your trainee. It is important that feedback of these discussions is recorded within the trainee's portfolio. The outcome of the discussions will need to be fed back to the Medical Education Department. We will then share this with the Risk and Patient Safety Team.

To inform the ARCP process for the Revalidation of doctors in Training we are required to submit the outcome of all clinical incidents. If the clinical incident is not closed it is likely this will cause unnecessary delay and distress for the trainee at the time of their ARCP.

Please can you notify medical education department once the discussion has taken place. A brief summary of any learning points should also be included.

Please use this email to reply with the appropriate statement.

- The clinical incident has been discussed with the doctor, aspects of learning from the event have been identified, a piece of clinical reflection will be completed. I consider the incident resolved / closed.\*
- The clinical incident is being reviewed and future learning has been identified. The incident is still ongoing. Estimated date for completion\*
- Other: please comment\*  
(\*deleted where applicable)

Learning point discussed:

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For further advice / documentation please see 'supporting doctors guidance'

## 2. Where doctor in training has reported an incident

Dear Dr X

The attached incident has been reported by a doctor in training whom you are named as their Educational Supervisor.

Please could you review the findings of the incident review and ensure adequate feedback has been given. It is important that feedback of these discussions is recorded within the trainee's portfolio. The outcome of the discussions will need to be fed back to the Medical Education Department.

The reporting of clinical incidents by all doctors is an important role, and the impact of junior doctors doing so cannot be underestimated. Please offer support to your junior doctors as they are likely to be anxious about having done so.

Please can you indicate, by replying to this email after a discussion has been completed.

- Meeting has been held and incident investigation outcome informed. No further action required.\*
  - Meeting has been held and incident investigation outcome informed. Further action ongoing: please comment:\*
- (\*deleted where applicable)

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