**PSIRF – Criteria for Small Provider Revised Incident/PSIRF Policy Sign Off**

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| Provider | Purple |
| Reviewers | Steve McEwe, Quality Lead Nurse |
| Date of Submission | 26/03/2024 |
| Date of Review | 27/03/2024 |
| PSS/Quality Manager review | Discussed with Karen Flitton, Patient Safety Specialist |
| Recommendation | [x] Support approval of policy[ ] Not approved – further information or amendments required |

The ICB process for managing the sign off, of provider Patient Safety Incident Response (PSIRP) Policy for small providers who have been identified as only requiring changes to their incident policy should be followed. The review team should assess if the policy meets the required standards. Ultimately the **policy** should describe the provider’s approach to responding to patient safety incidents for the purpose of learning and improvements and the methods it will use to respond in a way to maximise learning and improvement. The “criteria” below are intended to guide thinking and form an understanding if the requirements have been met.

Ultimately, once the policy is approved by the ICB, it can be submitted for approval within the organisation via their own internal policy sign off processes.

# PSIRF/Revised Incident Policy

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| Criteria | Comments |
| Removal of all references to Serious Incidents from original policy. | Complete |
| An understanding of who will review significant incidents of moderate or greater harm for a proportionate response and making sure they involve the ICB in that discussion. | Described in policy |
| The role of Partnership working and collaboration within the patient safety incident response policy is defined. | Described in policy |
| A process for reporting cross-organisational or cross-system issues is defined, and in line with local arrangements with the ICB. | Described in policy |
| Reference to regular review of incident reporting portfolio (12-24 months etc), so if it increases then the provider will need to consider if they need to pull together a response plan. | Date of policy review given |
| Clear description of the proactive efforts made to promote a positive safety culture, including a reporting culture and a just culture. | Described in policy |
| Description of how patient safety incident response processes support health equality and reduce inequality. | Described in policy |
| Description of how those affected by a patient safety incident will be supported – this includes patients, families and staff. | Described in policy |
| Duty of Candour within PSIRF is described. | Described in policy |
| Confirmation that appropriate training has been and can be accessed by staff. | Described in policy |
| Provider’s internal approach to oversight of Patient Safety should be defined – this should include evidence of collaboration & involvement of ICB | Described in policy |