

enabling and empowering people to reach their potential and live fulfilling lives

Summary Report – Trust Board Meeting (Part 1)	Date: 26th September 2012
Report Title:	
Electronic incident reporting integration with clinical records	
Agenda Item: 12	Enclosures:
Sponsor; NCAS Director	Presenter: NCAS Director
Report Author: Head of Risk & Compliance,	Clinical Systems Manager
Report discussed previously at:	<i>n/a</i>

Purpose of the Report and Action required		
To brief the Board on the feasibility of pursuing electronic incident reporting integration with the RiO clinical record.	Approval	√
	Discussion	
	Information	

Executive Summary of Key Issues
There are significant technical barriers to integrating incident reporting with the RiO clinical record as well as impacts on external statutory reporting requirements, such that the Board is asked not to pursue this objective further.

Which Strategic Objective does this paper address	
A sustainable value for money business	Yes
Excellent service user access and experience	Yes
Excellent partnership working with other organisations	Yes
Effective engagement and improvement in staff satisfaction	Yes

Link to Fit for the Future Implementation Plan	
<i>Specify objective number</i>	8.2

Corporate Impact Assessment	
Quality and Safety implications	Incident reporting is a key aspect of safety management.

Recommendations to other committees
<i>n/a</i>

Recommendation/Decision
The Board is recommended to approve the recommendation at paragraph 4.1.

Electronic incident reporting integration with clinical records

1. Introduction

- 1.1. One of the actions arising out of Fit for the Future Implementation Plan was to evaluate and brief the Board on the feasibility of integrating electronic incident reporting with the RiO clinical record. The purpose of this paper is to brief the Trust on the issues associated with this.

2. Analysis and Discussion

- 2.1. The Trust has given considerable thought as to how it could adapt the RiO system or make other changes in order that it can capture patient incident information, to satisfy the recommendation in the Fit for the Future Implementation Plan and hopefully further improve patient safety.
- 2.2. Whilst the benefits of using the RiO system to capture patient safety incident data can be imagined, the reality is that there is not a technically viable solution to achieve this. The functionality to achieve this goal does not currently exist within the RiO system. There are no known national ambitions to achieve this, and the Trust is not aware of any other healthcare organisation wishing to pursue this option.
- 2.3. To pursue this option would therefore require the Trust to go on a foray of its own and the opportunities to do this are both limited and fraught with risks. CSE (the RiO system owners) do not permit systems being bolted on to RiO. If the Trust wished to pursue its own system development work, then it would need to take care not to infringe their intellectual property rights. Legal advice would be required in the first instance.
- 2.4. The Trust currently uses the Safeguard risk management system provided by Ulysses to record details of its incidents. This system is also used to manage complaints and PALS activity. The Safeguard system is used by over 100 healthcare organisations and is one of the market leading products for risk management in healthcare. The Trust has a high level of satisfaction with this product and is currently expanding the use of the system to enable web incident reporting.
- 2.5. The Safeguard system has been established for 10 years, and has kept pace with national developments. For example, the system has links with the Electronic Staff Record and is able to accept uploads of staff detail. It also receives patient data uploads from RiO, which includes the RiO number. This integration minimises repeat data entry, and the synchronised use of the RiO number enables the systems to be cross-referenced.
- 2.6. Importantly, the Trust is required to share its patient safety incidents with the National Learning and Reporting System (NRLS) and any incidents of violence towards staff or security incidents with NHS Protect. The Safeguard system has been mapped to both of these national systems and the Trust routinely shares its

Report for the Avon & Wiltshire Mental Health Partnership Trust Board Dated 26 th September 2012		
For the Part 1 Session sponsored by NCAS Director		
Agenda Item: 12	Serial: 12.0674	Page 2 of 3

Electronic incident reporting integration with clinical records

data. These national systems are only linked to the market leading healthcare risk management systems and there are no known plans to establish links with clinical records systems, such as RiO. Reports on the relevant patient safety incidents uploaded to the NRLS are automatically shared with the Care Quality Commission and the Trust is therefore obligated to sustain this link.

- 2.7. The Safeguard system as described above is capable of recording both patient incidents and staff incidents; the RiO system is patient centric and care needs to be exercised about the recording of information about or from third parties in the clinical record. If integration with a clinical record system proved possible in the future, then the Trust would still need mechanisms to record and report on non-patient safety incidents, which account for approximately 10% of its total. Additionally, the Safeguard system has broad functionality and is able to record incidents ranging from fire or theft to sexual assault to seclusion, to name but a few.
- 2.8. It is obviously important that patients' risk management plans are informed by any incidents they have been involved in, and the Trust has well established procedures in place to ensure that this happens.

3. Conclusion

- 3.1. The Trust is very satisfied with its risk management system and does not see any compelling catalyst for change, as it is felt the possible benefits would be outweighed by the risks. Practically speaking there is no technically viable option to pursue to enable integration.

4. Recommendation

- 4.1. The Trust Board is recommended to continue using its Safeguard Risk Management System and not pursue possible integration with the RiO system.

5. Additional Report Contributors

- 5.1. Linda Hutchings, Head of Risk and Compliance
- 5.2. Mark Francis, Clinical Systems Manager

Report for the Avon & Wiltshire Mental Health Partnership Trust Board Dated 26 th September 2012		
For the Part 1 Session sponsored by NCAS Director		
Agenda Item: 12	Serial: 12.0674	Page 3 of 3