



TOVEY LITTLE DENTAL CENTRE LTD PRACTICE SAFETY AND INCIDENT POLICY

INTRODUCTION

We take patient and staff safety very seriously in this practice and aim to ensure that incidents affecting safety directly and indirectly are kept to a minimum at all times. No matter how careful people are with the work that they undertake, mistakes can sometimes happen – the best people sometimes make the worst mistakes. Within our practice we encourage everyone to report mistakes and near misses as soon as possible so that action can be taken promptly.

HEALTH AND SOCIAL CARE ACT 2008 REGULATIONS 2014 FUNDAMENTAL STANDARD 12

Safe care and treatment 12

- (1) Care and treatment must be provided in a safe way for service users.
- (2) Without limiting paragraph (1), the things which a registered person must do to comply with that paragraph included
 - (a) assessing the risks to the health and safety of service users of receiving the care or treatment
 - (b) doing all that is reasonably practicable to mitigate any such risks
 - (c) ensuring that persons providing care or treatment to service users have the qualifications, competence, skills and experience to do so safely
 - (d) ensuring that the premises used by the service provider are safe to use for their intended purpose and are used in a safe way
 - (e) ensuring that the equipment used by the service provider for providing care or treatment to a service user is safe for such use and is used in a safe way
 - (f) where equipment or medicines are supplied by the service provider, ensuring that there are sufficient quantities of these to ensure the safety of service users and to meet their needs
 - (g) the proper and safe management of medicines
 - (h) assessing the risk of, and preventing, detecting and controlling the spread of, infections, including those that are health care associated
 - (i) where responsibility for the care and treatment of service users is shared with, or transferred to, other persons, working with such other persons, service users and other appropriate persons to ensure that timely care planning takes place to ensure the health, safety and welfare of the service users.

OBJECTIVE

The aim of this policy is to ensure all staff is aware of the procedure for reporting incidents or near miss incidents to the appointed safety officer

ORGANISATION RESPONSIBILITIES

The organisation is responsible for providing adequate training for members of staff to carry out and deal with safety issues, incident reporting, dealing with safety reports

RESPONSIBILITY

Legal Person: Mr C S Tovey & Mr P.A.G Little (Practice Owners)

The ultimate and legal responsibility for implementing regulations and managing the policy

Mrs Karen Fox: Appointed Safety Officer

Responsible for safety within the practice

STAFF RESPONSIBILITIES

All staff has a legal responsibility to adhere to the Policies that are put in place by the Practice for the Health, Safety and Welfare of the employees and patients

SYSTEMS AVAILABLE FOR INCIDENT REPORTING

REPORTING SAFETY INCIDENTS TO THE SAFETY OFFICER

All reported incidents should be made to the Practice Safety officer(Mrs Karen Fox)

She will immediately enter the incident, near miss or concern in the incident report book and begin investigations on what happened, how it happened and why.

When the details of the incident have been established, and if appropriate, the Safety Officer will discuss the matter with the other members of the dental team at a practice meeting. Solutions or changes to current policies and protocols will be discussed fully and action agreed upon. If relevant, changes will be notified to the patient. The Patient Safety Officer will ensure that the incident is fully recorded and that the practice risk assessment is updated in the light of the proposed solutions or changes.

The Patient Safety Officer will, where required, report adverse incidents to the Patient Safety Manager at the National Patient Safety Agency according to national guidelines.

HOW TO REPORT TO THE NATIONAL SAFETY AGENCY

The National Patient Safety Agency (NPSA) was set up to improve the safety of patients by promoting a culture of reporting and learning from patient safety incidents (when something did or could have harmed a patient).

All NHS organisations in England and Wales can report patient safety incidents to the NPSA through the National Learning & Reporting System (NRLS).

Dental practices need to make a written report locally to Local Risk management Systems (LRMS) or report directly to the NPSA using an Eform that can be found at www.npsa.nhs.uk/staffform

Reporting of incidents helps to build a 'safety culture' to promote learning from mistakes that reduces the risks of incidents reoccurring. Any incidents reported should be logged in the Incident Reporting book.

REPORTING AN INCIDENT TO THE HSE (Incident Control Centre)

It is a legal responsibility to report serious incidents as detailed in RIDDOR.

Major incident reports should be made to:

- Health and safety executive (HSE) and the Incident Control Centre (ICC) on **0845 300 9923**
This is available Monday – Friday from 8.30am to 5pm
- Accidents causing more than 3 days absence from work must be reported by sending a completed accident report form from F2508, within 10 days of the accident. No immediate telephone action is required.
- Reports must be submitted using the designated form and can be accessed from the HSE website at www.riddor.gov.uk/reportanincident.html
- Employers are required to maintain records of all reported injuries and dangerous occurrences; this must include the date and time of the incident, the name and occupation of the person affected and the circumstances.
- All instances should be recorded in the Accident & Incident Book

DEALING WITH SAFETY ALERTS

Safety alerts appear periodically from Agencies such as MHRA and NPSA and provide information relating to equipment and/or materials commonly used in dental practices.

- On receipt of a safety notice the individual responsible for maintenance/infection control (or in their absence the practice manager) is informed
- The content of the notice is assessed to see if it is relevant to any equipment or materials held at the practice. If this is the case the recommended actions are carried out as specified, including acknowledgement with the Agency or Authority that action has been taken
- If following assessment of the notice no action is required, a reply is sent to the Agency or Authority to acknowledge receipt

ASSOCIATED POLICIES

This policy should be read in conjunction with the following policies

Infection Control Policy including waste policy

The purpose of this policy is to confirm the practice arrangements for Infection Prevention and Control to protect both Patients and staff from the avoidable risks of the spread of infection. This policy has been constructed based on the Health Technical Memorandum 01-05 and the Health and Social Care Act 2008(Regulated activities) regulations 2010

Manual Handling Policy

The purpose of this policy is to ensure all staff is trained in correct manual handling techniques. If there is risk of injury then handling should be avoided. The Health and Safety Manager is responsible for all manual handling and should be contacted if you have any questions

Safety and Suitability of the Premises Policy

The purpose of this policy is to ensure that Patients, staff and other visitors feel safe when visiting our premises and that the premises are fit for purpose, This policy is in accordance with the Health and Regulatory Reforms (Fire Safety) Act 2005, Safety at Work Act 1974 and the Disability Discrimination Act 1995.

Safety and Suitability of Equipment Policy

The purpose of this policy is to ensure that patients, staff and visitors to the practice should have equipment and furniture that is safe and meets their needs. This policy is in accordance with Regulation 16 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Health Technical Memorandum 01 – 05.

CCTV Policy

The purpose of this policy is to outline how Tovey Little Dental Centre uses CCTV, to ensure that it is not misused and is justified in monitoring the practice premises. This policy has been constructed based on the Data Protection Act and Information Commissioners Office.

Fire Policy

The purpose of this policy is to ensure that we have adequate and appropriate fire safety measures in place to minimise the risk of injury or loss of life in the event of a fire and to implement appropriate fire precautions and protective measures within a management plan The Fire and Rescue Authorities deal with general fire safety matters in workplaces. This policy is delivered through compliance with the Regulatory Reform (Fire Safety) Order 2005 and The Dangerous Substances and Explosive Atmospheres Regulations 2002 (DSEAR)

Management of Medicines Policy

The purpose of this policy is to provide guidance to all staff regarding the prudent prescribing of antibiotics and dispensing of medicines. Treatment under the NHS requires following NHS Regulations. This policy is in accordance with Regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Medicines Act 1968

Radiography Policy

The purpose of this policy is to ensure that when providing care for our patients radiographs are only taken when clinically necessary. The practice will follow guidelines for providing radiographs authorised under the Ionising Radiation (Medical Exposure) Regulations 2018 (IRMER) and the Ionising Radiation Regulations 2017 (IRR17)

QUESTIONS

If you have any questions or comments regarding this policy, please contact the practice manager. If you do not have any questions, the organisation presumes that you understand and are aware of the requirements of the policy and will adhere to them.

The Practice Manager is responsible for enforcing, maintaining and auditing the policy. This includes an annual review.