Senior Incident Management Team Guidance
Draft for Consultation

NOTE: When you have reviewed this guidance please open the hyperlink at the end of the document to provide your feedback
Safety Incident Management Team (SIMT) Guidance

Role of the SIMT

1. To meet within 72 hours of the identification of a Category 1 incident or Serious Reportable event
2. To gain assurance in relation to Step 2 of the incident management process and in particular the immediate actions taken pertaining to persons affected and the minimisation of risk of further harm to others.
3. To receive and consider the report of the case officer i.e. all known facts in relation to the incident
4. To make recommendations to the SAO in relation to the review of the incident
5. Where a review is commissioned to monitor the progress of the review to ensure it is completed within the prescribed timeframe of 120 days.
6. To receive the draft report of the review and consider in the context of the Governance Approval Process for Finalising the Review Report.
7. To recommend (or not) acceptance of the report to the Commissioner

Membership of SIMT

At a minimum, membership of the SIMT should involve the participation of the following;
- SAO or their nominee
- Senior clinicians/care professionals relevant to the incident e.g. Clinical Director, Director of Nursing, Estates, ICT etc
- QPS manager,
- HR manager

Timeframe for Decision Making in relation to Review

The SIMT must take this decision within 72 hours of the notification being made to the SAO.

In the period between the service user and/or family becoming aware of the incident and the decision being made around the plan for review the importance of on-going communication and support is critical as this is often the time when it may be perceived that they have been left isolated by the service and are not aware of what is going on.

Note: the SAO may decide to convene the SIMT earlier if the nature of the incident indicates that this would enhance the effective management of the incident or if there was a low level of assurance provided in relation to the robustness of actions taken at Step 2 of the process.

Prior to the SIMT meeting

Assignment of a Case Officer

In order to assist decision making at the SIMT the SAO on notification of the incident will assign a case manager(s) to gather preliminary information to inform the decision making at the SIMT. (e.g. the QPS Manager and the Clinical Director or person nominated by the Clinical Director).
Scheduling the meeting
Participants in the SIMT meeting are notified of the date/time of the meeting (meeting to be held within 3 working days of the notification of the incident to the SAO)

Consideration should also be given to inviting the nominated Patient and Staff Liaison persons as though they will necessarily not be central to the decision making process they will be central to the communication of the decision taken to relevant stakeholder groups after the meeting.

Preparing the case report
In order to assist decision making at the SIMT the SAO on notification of the incident will have assigned a case manager(s) e.g. the QPS Manager who will engage with the Clinical Director or person nominated by the Clinical Director to identify and gather preliminary information related to the incident.

The case manager(s), will use this to prepare a short case report for presentation at the SIMT meeting.

In relation to a service user incident, the case report should at a minimum consist of the following

- A background to the service user and their admission/episode of care
- An update in relation to the immediate actions taken following the incident
- The current status of the person affected
- A brief timeline of events that led up to the incident
- A copy of the NIRF form

Where a meeting with the family/patient has been held a report detailing the outcome of this meeting and the expectations expressed by the family/patient would also be desirable.

At the SIMT Meeting

The case manager(s) will present the case report to the SIMT members present.

The first consideration for the SIMT is to identify whether the incident should be primarily reviewed in line with the Incident Management Framework or whether referral for review/investigation under an alternate process is indicated. Reference to the Making decisions about appropriate investigation pathways guidance may support decision making in this regard. If there may be issues relating to individual culpability the SIMT should use of the Incident Decision Tree to support decision making in this regard.

Options for decision making

1. In the event that a decision is taken that it is appropriate to review the incident using the Incident Management Framework the SIMT should then move to consider the following;
   - Level of Review (including methodology)
   - Level of independence of the Review.
• Commissioner of the Review
• Scope of the Review
• Who will be assigned to undertaken the review (named roles but not named individuals)
• Support requirements for persons affected and the review process.

The decision to recommend review along with the rationale for recommending the level of review and level of independence along with the detail of the remaining items is documented and forwarded to the SAO. The SAO will on receipt of the recommendation will decide whether or not to endorse the recommendation and move to implement this decision.

2. The recommendation of the SIMT may be, **not to commission a review** and refer it back for continued management to the service within which it occurred or recommend that it be reviewed using an alternate management pathway or process. This decision must be formally documented along with detail of the reason/rationale upon which the decision was made. The documented decision along with any supporting documentation must be forwarded to the SAO and the local quality and safety committee (or an equivalent). The local quality and safety committee (or equivalent) will review the decision and the basis for it at their next meeting at which point they may either ratify or reject the decision. In instances where the decision is rejected this should be communicated to the SAO with both a reason for this and a recommendation for further management.

3. In the event that it is recommended that it is appropriate to **both manage the incident** using the Incident Management Framework and **via** one or more other pathways a recommendation is required in relation to the scheduling of these processes. This should be documented per item 1 above and include in this the recommendation in relation to the use of alternate pathways and the scheduling of these processes. This is forwarded to the SAO for review, endorsement and implementation.

**Following the SIMT meeting**

**Making the Decision in relation to the Review**
Where the SAO accepts the recommendation of the SIMT he/she should move to commission and establish the review. In cases where the SAO does not accept the recommendation he/she must document this, the basis for rejection of the recommendation and identify what alternate plan is to be put in place.

**Communicating the Decision**
Persons affected should be advised of the decision of the SAO and where it has been decided to commission a review they should also be advised

• The level and approach to the review
• That their concerns or perspectives will be taken into account during the review process,
- Staff if they have not done so already should be encouraged to write a copy of their recollection of events
- That any supports required to assist them will be put in place for the duration of the review process

**Monitoring Progress of Commissioned Reviews**

The HSE has in place a timeframe of 120 days for the completion of the review i.e. from date of notification of the incident to the SAO. Whilst this timeframe has previously been challenging for services it is anticipated with the introduction of levels of review and the broadening of approaches to review that this will become more realistic.

To further assist will achievement of the timeframe SIMTs should have in place a system for monitoring the progress of all reviews that are commissioned within their area of responsibility. Where it is noted that the timeline for the completion of a review is under threat the SIMT should take or recommend actions to bring it back on track or mitigate the risk of further delay. Issues of significance should be notified to the SAO who has ultimate accountability for the management of these reviews.

**Review of Final Draft Reports**

The SIMT has a role in recommending acceptance of the final report to the Commissioner and in so doing need to be assured in relation to the quality of the report and the integrity of the process applied to the review. The **Governance Approval Process for Finalising the Review Report Guidance** should be used to inform this.

**Provide your feedback on this document here**