

# **Statutory Notifications of Incidents and Deaths**

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## **Guidance for Providers of Regulated Services**

# Introduction

This guidance document has been produced for Managers and Responsible Individuals of Establishments and Agencies regulated by the RQIA to provide guidance on the requirement to report deaths and adverse events affecting service users to the RQIA.

The aim of this document is to promote

- Awareness of statutory reporting requirements
- Awareness of the procedure of reporting notifiable events to the RQIA
- Improvement in Quality of information submitted to the RQIA in relation to Notifiable Events
- Improvement in service provision through the monitoring and reporting of adverse events

The document does so by answering the following questions:

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## Why am I required to notify the RQIA?

Article 23 (7d) of The Health and Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 states that “Regulations may make provision as to the conduct of establishments and agencies, and such regulations may in particular make provision as to the notification of incidents occurring in establishments or in premises used for the purposes of agencies”.

All Regulations in relation to Services Regulated by the RQIA make provision for this reporting of certain adverse events. All services are therefore required to make formal notifications to the RQIA.

Although the individual service providers have primary responsibility for the investigation and risk management in relation to any adverse events, the RQIA has a responsibility to ensure that effective systems are in place to safeguard and promote the wellbeing of service users.

Robust reporting mechanisms and data definitions furthermore enable the RQIA to identify trends which assists to assure and improve the overall quality of health and social care provided within Northern Ireland.

## What do I need to Report?

Whilst providers should ensure that all incidents are followed up and managed appropriately, only certain events require reporting to the RQIA. In addition to incidents, some services are also required to report the death of service users within the Establishments.

The specific notification requirements vary across the services and the detail of what registered individuals are required to notify is defined in the specific Regulations. The relevant extracts of the applicable legislation can be found in *Appendix 3* of this document.

For convenience a grid summarising the current reporting requirements for each regulated service has been developed. The Grid can be found in *Appendix 1*.

To ascertain which specific event types individual services are required to notify the RQIA of, please look up the service category at the top of the grid and check the events that have been ticked in the column relevant to your service. The grid also provides guidance on the appropriate form to use.

An A3 version of the grid containing the detailed legislative requirement can be downloaded via the RQIA website ([www.rqia.org.uk](http://www.rqia.org.uk)).

**If there is any doubt as to whether an incident should be reported, guidance should be sought by contacting the RQIA using the details given at the end of the document.**

## How do I report a Notifiable Event?

### Submission of a Service Declaration Form (Form 3)

To ensure that notifications are made in a timely and cost effective manner, the RQIA encourages notifications by email or fax.

To enable the RQIA to accept notifications made in this way as well as to ensure that providers have awareness of their obligations in relation to notifiable events, the RQIA has devised a "Service Declaration Form" which registered persons are required to complete prior to the submission of notifications under this guidance.

As the RQIA will accept statutory notifications from any of the email addresses or fax numbers provided on the form, it is the responsibility of the provider to ensure that anyone making a notification to the RQIA in this way is authorised to do so. The details provided relate to the reporting of incidences only and do not affect contact details provided in relation to other important letters or correspondence from the RQIA.

The Declaration Form can be found as Form 3 in *Appendix 4* of this document.

Please also complete this form whenever a change to the authorised Fax/Email details is required and return a signed hardcopy to the RQIA by post.

### Submission of the Notification Form (Form 1a or Form 1b)

It is encouraged to submit any notification of a reportable incident or death via email or fax

- (1) By Email (preferred method)
- (2) By Fax (if providers do not have access to email)
- (3) By Post (in exceptional circumstances only)

Standard reporting templates have been developed for the submission of incidents or events to RQIA. Hardcopies of all relevant templates are available in *Appendix 4* of this document.

Electronic versions for completion are available via our homepage: [www.rqia.org.uk](http://www.rqia.org.uk)

**Please go to our website and download the applicable documents and save them on your computer to use for any future events that you are required to report.**

If you have problems accessing the website, please email [incidents@rqia.org.uk](mailto:incidents@rqia.org.uk) to receive email copies of the required templates.

If you do not have internet access and are required to report by post, please retain photocopies of the appended hardcopies for future use.

## What happens after I have reported an Event?

It is the responsibility of the service provider to ensure that incidents are followed up and that any necessary actions following the occurrence of a notifiable event are taken to ensure the safety and wellbeing of service users.

If required, the inspector might contact the service to ensure that the incident is dealt with appropriately. He/she will aim to do so within one week of the incident having been reported. The inspector might also request additional information or confirmation that other agencies have been notified of the event.

Inspectors might also review the occurrence of any incidents in relation to the service during the next announced or unannounced inspection.

### **Completion and submission of a Follow up Form (Form 2)**

Inspectors might ask services to complete an additional form if a follow-up report of an incident is required. The form contains information on action taken as follow-up as well as lessons learned and any training needs that have been identified. Managers can also use the form to provide additional details that were not available at the time of incident reporting.

### **Records retention**

All statutory notifications received as electronic records are retained on file, archived or destroyed according to the RQIA's Records Management Policy and Procedure and Retention and Disposal Schedule.

Registered Services, as the originators of the document, are required to retain the original record of the notifications made in line with their Records Management Policy and Procedure.

Any additional records relating to the notifiable event should also be retained as further details might be requested during subsequent inspections.

## How do I complete the Reporting Templates?

The templates and this guidance document are not intended to replace the professional judgment of the registered person or designated person reporting the incident.

Please complete all shaded sections on the form (if information available) and follow the guidance given on the forms.

### **Part 1: Service Details**

Please complete according to your registration details (see content of Registration Certificate for details)

### **Part 2: Details of Service User Affected**

The RQIA requires the Service to provide the details of the service user affected under Articles 40 and 43 (2) of *The Health and Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003* in relation to notifiable events. It is the duty of providers to comply with the Data Protection Act 1998 by not sending confidential personally identifiable information electronically, therefore statutory notifications must not contain the names of the service users.

Providers are required to allocate a unique Identifier for any service user in relation to which a report was made. The identifier has to be unique to the service user and should be used for all future incidents relating to this user. It is the responsibility of the provider to ensure that service users can be identified if necessary.

If more than one service user is affected by the notifiable event, please go to Part 4 of the form (Description of Event) providing the relevant details for each individual affected.

### **Part 3: Information about the Event**

Please select **only one** of the event categories and specify details if required.

If the incident can be related to more than one incident type, select the type with the most severe consequence, i.e. an "*injury*" leading to the death of a service user should be reported as an "*unexpected death*")

Further definitions of individual incident types can be found in *Appendix 2* of this document.

### **Part 4: Concise and precise description of the surrounding circumstances**

In order to comply with the Data Protection Act 1998 personal information should not be sent electronically, the description of the incident therefore must not contain names or personal details of service users, staff or other persons involved in the incident.

The standard notification templates are provided to support consistency in information provided and it is essential that all notifications are an accurate account of the incident or event.

Completion of the template needs to:

- Be concise, clear and avoid jargon
- Be objective and realistic
- Be open about what has happened and what was done/will be done to minimize the risk of recurrence.

## **When do I need to notify the RQIA?**

Incidents should be reported to the RQIA in line with the legislative requirement **without delay/within 24 hours** of the event taking place (see *Appendix 3*).

In the case of **Adult Placement Agencies** the notification must be made **within 24 hours** of the registered person being informed or otherwise becoming aware of the incident.

In the case of **Domiciliary Care Agencies** and **Nursing Agencies**, notifications have to be made **within 24 hours** of the incident having been reported to the Police.

If deemed necessary the initial notification can be followed up using Form 2 as per *Appendix 4*.

## Whom do I notify within the RQIA?

Completed notification forms should be returned by:

- (1) Email [incidents@rqia.org.uk](mailto:incidents@rqia.org.uk)
- (2) Fax 028 90 517590

In exceptional circumstances, where technical difficulties make it impossible to submit a notification by either Email or Fax, providers can continue to post their notifications to the RQIA. Notifications should be clearly marked as *Private and Confidential* and send to: *RQIA, FAO Incident Administrator, 9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT.*

**Do not** submit notifications directly to Inspection Staff neither by email nor by post.

### Queries and feedback in relation to this Guidance:

If you have any queries about the processes as outlined in this guidance, please contact the Incident Administrator on 028 90 517500 in the first instance.

If you have any queries in relation to the reporting requirements specific to your service, please contact your allocated Inspector either directly or via the RQIA switchboard on 028 90 517500.

The guidance and processes described in it are subject to regular review. We welcome your views on how these could be improved. Please feel free to send comments, suggestions or other feedback to the email given above or contact the Incident Administrator who will forward any suggestions to the appropriate staff within the RQIA.

# Appendix 1 - Reporting Requirements

Please Refer to Appendix 2 - Definitions for Detailed Description of the Reporting Requirements of Individual Events per Service Type

Form	Category	Subcategory	Residential Family Centres	Children's Homes	Nursing Homes	Residential Care Homes	Day Care Settings	Independent Health	Adult Placement Agencies	Domiciliary Care Agencies	Nursing Agencies	
1a+1b	G1	Death	G1.1	Expected	N/A	N/A	√	√	N/A	√	N/A	
			G1.2	Unexpected	√	√	√	√	√	√		
	G2	Serious Injury	G2.1	Fracture (Hip)	√	√	√	√	√	√		
			G2.2	Fracture (Other)								
			G2.3	Head Injury								
	G3	Accident	G3	Uncategorised	√	√	√	√	√			
	G4	Serious Illness	G4	Uncategorised	√	√				√		
	G5	Outbreak of Infectious Disease	G5	Uncategorised	√	√	√	√	√	√		
	G6	Allegation of Misconduct	G6.1	Physical								
			G6.2	Sexual								
			G6.3	Psychological/Emotional								
			G6.4	Financial/Material								
			G6.5	Neglect/Acts of Omission	√	√	√	√	√	√	√	√
			G6.6	Institutional								
			G6.7	Discriminatory								
G6.8			Damage to property									
G6.9	Misuse of drugs											
G7	Incident involving the police	G7	Uncategorised	√	√				√		√	
G8	Any other event adversely affecting service user	A3.1	Medication Error	√	√					√		
		A3.2	Behavioural Issue			√	√	√	√	√		
		A3.3	Suicide/Self Harm									
1a only	A1	Theft of Burglary	A1	Uncategorised			√	√	√	√		
	A2	Unexplained absence	A2	Uncategorised						√		
1b only	C1	Serious Complaint	C1	Uncategorised	√	√						
	C2	Child protection enquiry	C2	Uncategorised	√	√						
	C3	Allegation of serious offence	C3	Uncategorised	√	√						
	C4	Sexual exploitation	C4	Uncategorised	√	√						

## Appendix 2: Definitions

In accordance with the statutory regulations governing service provision, The Regulation and Quality Improvement Authority needs to be notified of events as defined below. The definitions should be read in conjunction with the regulations relevant to the particular service.

- An **Incident** is defined as any event or circumstance that could have or did lead to harm, loss or damage to people, property, environment or reputation (How to classify Adverse Incidents and Risk, HPSS April, 2006)
- A **Near Miss** is defined as an unplanned or uncontrolled event which did not cause injury to persons or damage to property, but had the potential to do so.

G1 Death		
Coding	G1.1 Expected G1.2 Unexpected	
Reporting Requirement	Residential Centres Children's Homes Nursing Home Residential Care Homes Day Care Settings Adult Placement Agencies	Family Death of any accommodated service user including circumstances of death
	Independent Clinics Independent Hospitals	The death of a patient in an establishment and surrounding circumstances, which occurred during treatment provided by an establishment or agency or as a consequence of treatment provided by an establishment or agency within the period of seven days ending on the date of the death.
<p><b><u>Explanatory Note:</u></b></p> <p>The <i>certified cause of death of death</i> should be provided, if known at the time of the notification. It should be specified if the <i>death was unexpected</i>, i.e. occurred as the result of an incident or a sudden unexpected illness.</p> <p>The RQIA needs to be informed of whether the provider intends to carry out any review into the care and treatment provided for the service user.</p> <p>In some instances, the death may also need to be notified to another regulatory body, such as the Health and Safety Executive.</p>		

<b>G2 Serious Injury</b>		
<b>Coding</b>	<b>G2.1 Fracture (Hip)</b> <b>G2.2 Fracture (Other)</b> <b>G2.3 Head Injury</b>	
<b>Reporting Requirement</b>	Residential Family Centres Children's Homes	Serious accident sustained by a child accommodated in the centre/home
	Nursing Homes Residential Care Homes Day Care Settings	Any serious injury to a services user in establishment
	Independent Clinics Independent Hospitals Adult Placement Agencies	Any serious injury to a service user
<b><u>Explanatory Note:</u></b>  <u>The following types of injuries should in particular be specified:</u> <ul style="list-style-type: none"> <li>• <i>Fracture (Hip)</i></li> <li>• <i>Fracture (other)</i></li> <li>• <i>Head Injury</i></li> </ul>		

<b>G3 Accident</b>		
<b>Coding</b>	<b>G3.1 Unspecified</b>	
<b>Reporting Requirement</b>	Residential Family Centres Children's Homes	Serious accident sustained by a child accommodated in the home/centre
	Nursing Homes Residential Care Homes Day Care Settings Independent Clinics Independent Hospitals	Any accident in the Establishment or Agency
<b><u>Explanatory Note:</u></b>  An accident which occurs in the establishment involving service users, staff or other persons can be deemed serious where medical intervention needs to be sought.		

<b>G4 Serious Illness</b>		
<b>Coding</b>	<b>G4.1 Unspecified</b>	
<b>Reporting Requirement</b>	Residential Family Centres Children's Homes Adult Placement Agencies	Serious illness of a child accommodated in the home/services user during placement
<b><u>Explanatory Note:</u></b>		
<p>Serious and unexpected illness that requires medical care of services user. Notification should not be delayed until a diagnosis has been confirmed. If required follow up form can be used to provide detail.</p>		

<b>G5 Outbreak of Infectious Disease</b>		
<b>Coding</b>	<b>G5.1 Unspecified</b>	
<b>Reporting Requirement</b>	Residential Family Centres Children's Homes Nursing Homes Residential Care Homes Day Care Settings Independent Clinics Independent Hospitals Adult Placement Agencies	Outbreak within the adult placement carer's home/establishment of any infectious disease which, in the opinion of a medical practitioner is sufficiently serious to be so notified
<b><u>Explanatory Note:</u></b>		
<p>Symptoms in two or more patients which may indicate a possible outbreak in a care facility are:</p> <ul style="list-style-type: none"> <li>- Cough and/or fever (e.g. influenza)</li> <li>- Diarrhea and/or vomiting (e.g. Clostridium difficile/norovirus/food poisoning)</li> <li>- Itchy skin lesion/rash (scabies)</li> </ul> <p>All staff in regulated establishments needs to be aware of their role in infection control and the local arrangements for accessing advice on the prevention and control of infection. Notifiable diseases and infections that could be a potential risk to others should be reported to the local Consultant in Communicable Disease Control (CCDC).</p>		

<b>G6 Allegation of Misconduct</b>		
<b>Coding</b>	<b>G6.1 Physical</b> <b>G6.2 Sexual</b> <b>G6.3 Psychological/Emotional</b> <b>G6.4 Financial/Material</b> <b>G6.5 Neglect/Acts of Omission</b> <b>G6.6 Institutional</b> <b>G6.7 Discriminatory</b> <b>G6.8 Damage to property</b> <b>G6.9 Misuse of drugs</b>	
<b>Reporting Requirement</b>	Residential Family Centres Children's Homes	Referral to the Department pursuant to Article 4(1) of the Protection of Children and Vulnerable Adults (Northern Ireland) Order 2003 of an individual working at the centre/home
	Nursing Homes Residential Care Homes Day Care Settings	Any allegation of misconduct by the registered person or any person who works at the establishment
	Independent Clinics Independent Hospitals	Any allegation of misconduct resulting in actual or potential harm to a patient by the registered person, any person employed in or for the purposes of the establishment or for the purposes of the agency, or any medical practitioner with practising privileges
	Adult Placement Agencies	Any allegation of misconduct by a service user in relation to the adult placement carer or a member of his family
	Domiciliary Care Agencies	Allegation of abuse, neglect or other harm reported to the police, not later than 24 hours after the registered person—(i) has reported the matter to the police; or(ii) is informed that the matter has been reported to the police.

## G6 Allegation of Misconduct

### Explanatory Note:

The incidents that the above may cover can vary but might include:

- Suspicion of, or actual misconduct that could give rise to public concern
- Incidents that might give rise to criminal charges, such as theft and/or fraud or misuse of drugs
- Incidents that might give rise to referral to a professional body, such as the General Medical Council, Nursing and Midwifery Council or the Northern Ireland Social Care Council. These could include clinical negligence or assault of a service user.
- Incidents involving serious damage to property or breach of security
- Persistent failures by a person employed by or for the establishment/Agency, which over time have the potential to, or actually, cause harm.
- Actual serious injury or harm to a service user, as a result of breach of confidentiality.

The nature of the misconduct should be specified as follows:

<i>Physical</i>	<i>Financial/Material</i>	<i>Discriminatory</i>
<i>Sexual</i>	<i>Neglect/Acts of Omission</i>	<i>Damage to property</i>
<i>Psychological/Emotional</i>	<i>Institutional</i>	<i>Misuse of drugs</i>

Only the main (most serious) type of misconduct should be specified.

## G7 Incident Involving the Police

Coding	G7.1 Unspecified	
Reporting Requirement	Residential Family Centres Children's Homes	Serious incident necessitating calling the police to the centre
	Adult Placement Agencies	Any incident which occurs in connection with the placement; and is reported to, or investigated by the police
	Nursing Agencies	Any incident reported to the police not later than 24 hours after the registered person has reported the matter to the police; is informed that the matter has been reported to the police.

### Explanatory Note:

Any other incident not covered by other categories which required the police has been called in relation to an incident in connection with the service.

<b>G8 Any other event adversely affecting service user</b>		
<b>Coding</b>	<b>A3.1 Medication Error</b> <b>A3.2 Behavioural Issue</b> <b>A3.3 Suicide/Self Harm</b>	
<b>Reporting Requirement</b>	Nursing Homes Residential Care Homes Day Care Settings Independent Clinics Independent Hospitals	Any event in the home which adversely affects any service user
	Adult Placement Agencies	Any event (in connection with placement) of which the adult placement career is aware which adversely affects the care, health, welfare or safety of any service user;
	Domiciliary Care Agencies Children's Homes Residential Family Centres	Medication errors and incidents only
<b><u>Explanatory Note:</u></b> <u>Other events include:</u> <ul style="list-style-type: none"> <li>• Incidents of alcohol or drug abuse by a resident where this is not already recognised as a risk and included in their care plan</li> <li>• Involvement of the police in a matter involving the wellbeing of a service user</li> <li>• Failure in a basic utility (electricity, gas, water, sewage) that lasts for more than 24 hours</li> <li>• Fire at the premises, or any occasion on which the fire alarm equipment is operated (false alarms)</li> <li>• Significant damage to premises that affects service users</li> <li>• Failure of any safety related equipment such as fire detection or call systems</li> </ul> <p><u>It should further be specified, if the event relates to a</u></p> <ul style="list-style-type: none"> <li>• <i>Medication Error</i> (i.e. an error in the administration of prescribed medication, any unexplained loss or theft of prescribed medication, a near miss. - any event involving the management of medicines whereby an error was noticed prior to administration (including dispensing/prescribing errors),</li> <li>• <i>Behavioral Issue</i> (i.e. serious incidents of threatening or challenging behaviour in which a service user is harmed or at risk of harm)</li> <li>• <i>Suicide/Self-Harm</i> (i.e. actual self-harm where this is not already recognised as a risk and included in their care plan or the attempted suicide by a service user)</li> </ul>		

**Adult Services Only:**

<b>A1 Theft or Burglary</b>		
<b>Coding</b>	<b>A1.1 Unspecified</b>	
<b>Reporting Requirement</b>	Nursing Homes Residential Care Homes Independent Clinics Independent Hospitals Adult Placement Agencies	Any theft or burglary in the establishment/carer's home
<b><u>Explanatory Note:</u></b>		
Not required		
<b>A2 Unexplained absence</b>		
<b>Coding</b>	<b>A2.1 Unspecified</b>	
<b>Reporting Requirement</b>	Adult Placement Agencies	Any unexplained absence of more than 12 hours of a service user from the adult placement carer's home.
<b><u>Explanatory Note:</u></b>		
Any occasion on which the missing persons procedure is used		

**Children's Services Only:**

<b>C1 Serious Complaint</b>		
<b>Coding</b>	<b>C1.1 Unspecified</b>	
<b>Reporting Requirement</b>	Residential Family Centres Children's Homes	Any serious complaint about the centre or persons working there
<b><u>Explanatory Note:</u></b>		
Any complaints that relate to child protection, serious harm and/or exploitation of a child or young person. Do not include those matters resolved at the informal stage of the complaints process (local resolution).		

<b>C2 Child Protection Enquiry</b>		
<b>Coding</b>	<b>C2.1 Unspecified</b>	
<b>Reporting Requirement</b>	Residential Family Centres Children's Homes	Instigation and outcome of any child protection involving a child accommodated in the centre/home or a parent who is under the age of 18 accommodated in the Residential Family Centre.
<b><u>Explanatory Note:</u></b>		
Not required		

<b>C3 Allegation of serious offence</b>		
<b>Coding</b>	<b>C3.1 Unspecified</b>	
<b>Reporting Requirement</b>	Residential Family Centres Children's Homes	Allegation that a resident/child accommodated at the centre/home has with the committed a serious offence
<b><u>Explanatory Note:</u></b>		
Any offence which could result in a remand, court appearance or custodial sentence.		

<b>C4 Sexual Exploitation/Prostitution</b>		
<b>Coding</b>	<b>C4.1 Unspecified</b>	
<b>Reporting Requirement</b>	Residential Family Centres	Involvement or suspected involvement in prostitution of the a child; or a parent who is under the age of 18 accommodated in the centre
	Children's Homes	Involvement or suspected involvement of a child accommodated at the home in sexual exploitation
<b><u>Explanatory Note:</u></b>		
Refer to definitions used in the Area Child Protection Committee's Regional Policy and Procedures.		

## Appendix 3: Regulatory Framework

### The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003

#### Regulations relating to establishments and agencies

23.—(1) Regulations may impose in relation to establishments and agencies any requirements which the Department thinks fit for the purposes of this Part and may in particular make any provision such as is mentioned in paragraph (2) or (7).

[...]

(7) Regulations may make provision as to the conduct of establishments and agencies, and such regulations may in particular—

[...]

(d) make provision as to the notification of incidents occurring in establishments or in premises used for the purposes of agencies;

#### Power to require information from establishments and agencies and power of entry and inspection

40.—(1) The Regulation and Improvement Authority may at any time require a person who carries on or manages an establishment or agency to provide it with any information relating to the establishment or agency which the Regulation and Improvement Authority considers it necessary or expedient to have for the purposes of its functions.

#### Restrictions on disclosure of information under Article 40 or 41

43. - (1) Subject to subsection (2), a person shall not be required under Article 40 or 41 to provide confidential information which relates to and identifies a living individual unless -

(a) the information is disclosed in a form in which the identity of the individual cannot be ascertained;

(b) the individual consents to the information being disclosed; or

(c) the individual cannot be traced despite the taking of all reasonable steps.

(2) A person may be required to provide confidential information which relates to and identifies a living individual if -

(a) it is not practicable to disclose the information in a form in which the identity of the individual cannot be ascertained;

(b) the Regulation and Improvement Authority considers that there is a serious risk to the health or safety of any person; and

(c) having regard to that risk and the urgency of the exercise of those functions, the Regulation and Improvement Authority considers that the information should be disclosed without the consent of the individual.

(3) A person shall not be required under Article 40 or 41 to provide information the disclosure of which is prohibited under another statutory provision unless -

(a) the prohibition on the disclosure of information operates by reason of the fact that the information is capable of identifying an individual; and

(b) the information in question is in a form in which the identity of the individual cannot be ascertained.

(4) In a case where -

(a) the disclosure of information is prohibited under this Article; and

(b) the prohibition operates by reason of the fact that the information is capable of identifying an individual, the Regulation and Improvement Authority or a person authorised by it under Article 40 or 41 may require the person holding the information to put the information in a form in which the identity of the individual concerned cannot be identified, in order that the information may be disclosed.

(5) In this Article "confidential information" means information which is held subject to a duty of confidence, and includes information contained in an accessible record within the meaning of section 68 of the Data Protection Act 1998 (c. 29).

#### The Nursing Homes Regulations (Northern Ireland) 2005

30.—(1) The registered person shall give notice to the Regulation and Improvement Authority without delay of the occurrence of –

(a) the death of any patient, in the nursing home, including the circumstances of his death;

(b) the outbreak in the nursing home of any infectious disease which in the opinion of any medical practitioner attending persons in the home is sufficiently serious to be so notified;

(c) any serious injury to a patient in the nursing home;

(d) any event in the nursing home which adversely affects the wellbeing or safety of any patient;

(e) any theft or burglary in the nursing home;

(f) any accident in the nursing home;

(g) any allegation of misconduct by the registered person or any person who works at the nursing home.

(2) Any notification made in accordance with this regulation which is given orally shall be confirmed in writing within 3 days of the oral report.

## **Residential Care Homes Regulations (Northern Ireland) 2005**

### **Notification of death, illness and other events**

30.—(1) The registered person shall give notice to the Regulation and Improvement Authority without delay of the occurrence of –

- (a) the death of any resident, including the circumstances of his death;
- (b) the outbreak in the home of any infectious disease which in the opinion of any medical practitioner attending persons in the home is sufficiently serious to be so notified;
- (c) any serious injury to a resident in the home;
- (d) any event in the home which adversely affects the care, health, welfare or safety of any resident;
- (e) any theft or burglary in the home;
- (f) any accident in the home;
- (g) any allegation of misconduct by the registered person or any person who works at the home.

(2) Any notification made in accordance with this regulation which is given orally shall be confirmed in writing within 3 working days of the oral report.

## **The Nursing Agencies Regulations (Northern Ireland) 2005**

### **Notification of incidents**

13. Where an agency acting as an employment business supplies a nurse to provide nursing care in the private residence of a service user or patient, the registered person shall notify the Regulation and Improvement Authority of any incident reported to the police not later than 24 hours after the registered person –

- (i) has reported the matter to the police;
- (ii) is informed that the matter has been reported to the police.

## **The Domiciliary Care Agencies Regulations (Northern Ireland) 2007**

15.—(1) Paragraphs (2) to (12) apply only to the supply of domiciliary care workers to service users by an agency which is acting otherwise than as an employment agency.

[...]

(6) The registered person shall ensure that where the agency arranges the provision of prescribed services to a service user, the arrangements shall—

- (a) specify the procedure to be followed after an allegation of abuse, neglect or other harm has been made;

[...]

(12) The procedure referred to in paragraph (6)(a) shall in particular provide for—

[...]

(b) the Regulation and Improvement Authority to be notified of any incident reported to the police, not later than 24 hours after the registered person—(i) has reported the matter to the police; or(ii) is informed that the matter has been reported to the police.

## **The Independent Healthcare Regulations (Northern Ireland) 2005**

### **Notification of deaths and other events**

28.—(1) The registered person shall give notice to the Regulation and Improvement Authority of –

- (a) the death of a patient –

- (i) in an establishment;

- (ii) during treatment provided by an establishment or agency; or

- (iii) as a consequence of treatment provided by an establishment or agency within the period of seven days ending on the date of the death, and the circumstances of his death;

- (b) any serious injury to a patient;

- (c) the outbreak in an establishment of any infectious disease, which in the opinion of any medical practitioner employed in the establishment is sufficiently serious to be so notified;

- (d) any event in the establishment or agency which adversely affects the well-being or safety of any patient;

- (e) any allegation of misconduct resulting in actual or potential harm to a patient by the registered person, any person employed in or for the purposes of the establishment or for the purposes of the agency, or any medical practitioner with practising privileges;

- (f) any theft, burglary or accident in the establishment or agency.

(2) Notice under paragraph (1) shall be given within the period of 24 hours beginning with the event in question and, if given orally, shall be confirmed in writing as soon as practicable.

## **The Children's Homes Regulations (Northern Ireland) 2005**

### **Notifiable events**

29—(1) If, in relation to a children's home, any of the events listed in column 1 of the table in Schedule 5 takes place, the registered person shall without delay notify the persons indicated in respect of the event in column 2 of the table.

[...]

(3) Any notification made in accordance with this regulation which is given orally shall be confirmed in writing.

### **Events and Notifications required to be reported to the RQIA as per**

#### **Column 2 Schedule 5:**

Death of a child accommodated in the home

Referral to the Department pursuant to Article 4(1) (a) of the Protection of Children and Vulnerable Adults (Northern Ireland) Order 2003 (b) of an individual working at the home

Serious illness or serious accident sustained by a child accommodated in the home

Outbreak of any infectious disease which in the opinion of a registered medical practitioner attending children at the home is sufficiently serious to be so notified

Allegation that a child accommodated at the home has committed a serious offence

Involvement or suspected involvement of a child accommodated at the home in sexual exploitation

Serious incident necessitating calling the police to the home

Any serious complaint about the home or persons working there

Instigation and outcome of any child protection enquiry involving a child accommodated at the home

## **The Day Care Setting Regulations (Northern Ireland) 2007**

### **Notification of death, illness and other events**

29.—(1) The registered person shall give notice to the Regulation and Improvement Authority without delay of the occurrence of—

(a) the death of any service user in the day care setting, including the circumstances of his death;

(b) the outbreak in the day care setting of any infectious disease which in the opinion of any general medical practitioner is sufficiently serious to be so notified;

(c) any serious injury to a service user in the day care setting;

(d) any event in the day care setting which adversely affects the wellbeing or safety of any service user;

(e) any theft or burglary in the day care setting;

(f) any accident in the day care setting;

(g) any allegation of misconduct by the registered person or any person who works in the day care setting.

(2) Any notification made in accordance with this regulation which is given orally shall be confirmed in writing within 3 working days of the oral report.

## **The Residential Family Centre Regulations (Northern Ireland) 2007**

### **Notifiable events**

30.—(1) If, in relation to a residential family centre, any of the events listed in column 1 of the table in Schedule 5 takes place, the registered person shall without delay notify the persons indicated in respect of the event in column 2 of the table.

[...]

(3) Any notification made in accordance with this regulation which is given orally shall be confirmed in writing.

(4) References in column 1 of the table in Schedule 5 to a centre shall be construed as references to a residential family centre.

### **Events and Notifications required to be reported to the RQIA as per**

#### **Column 2 Schedule 5**

Death of a resident accommodated in the centre

Referral to the Department pursuant to Article 4(1) (a) of the Protection of Children and Vulnerable Adults (Northern Ireland) Order 2003 (b) of an individual working at the centre

Serious illness or serious accident sustained by a child accommodated in the centre

Outbreak of any infectious disease which in the opinion of a registered medical practitioner attending residents at the centre is sufficiently serious to be so notified

Allegation that a resident accommodated at the centre has with the committed a serious offence

Involvement or suspected involvement in prostitution of the (i) a child; or (ii) a parent who is under the age of 18 accommodated in the centre

Serious incident necessitating calling the police to the centre

Any serious complaint about the centre or persons working there

Instigation and outcome of any child protection involving (i) a child; or (ii) a parent who is under the age of 18 accommodated in the centre

## **The Adult Placement Agencies Regulations (Northern Ireland) 2007**

### **Notification of incidents**

**33.**—(1) The registered person shall notify the Regulation and Improvement Authority and the placing authority if an incident described in paragraph (3) takes place.

(2) That notification must be made within 24 hours of the registered person being informed, or otherwise becoming aware, of the incident.

(3) The incidents are—

(a) the death of any service user, including the circumstances of his death;

(b) the outbreak within the adult placement carer's home of any infectious disease which, in the opinion of any medical practitioner attending persons in the home, is sufficiently serious to be so notified;

(c) any serious injury to a service user;

(d) any serious illness of a service user;

(e) any event of which the adult placement carer is aware which adversely affects the care, health, welfare or safety of any service user;

(f) any theft or burglary at the adult placement carer's home;

(g) any incident which—

(i) occurs in connection with the placement; and

(ii) is reported to, or investigated by the police;

(h) any allegation of misconduct by a service user in relation to the adult placement carer or a member of his family;

(i) any unexplained absence of more than 12 hours of a service user from the adult placement carer's home.

(4) Any notification under this regulation which is given orally shall be confirmed in writing within 3 working days of the oral report.

(5) The registered person must ensure that members of staff are required to inform the registered person forthwith when they become aware of the occurrence of any of the incidents described in paragraph (3).

## **Appendix 4 - Reporting Templates**

<b>Form 1a -</b>	<b>Initial Notification</b>	<b>-</b>	<b>Adult Services</b>
<b>Form 1b -</b>	<b>Initial Notification</b>	<b>-</b>	<b>Children's Services</b>
<b>Form 2 -</b>	<b>Follow up Notification</b>	<b>-</b>	<b>All Services</b>
<b>Form 3 -</b>	<b>Service Declaration</b>	<b>-</b>	<b>All Services</b>

## Form (1a) - Statutory Notification of Events (Adult Services)

*(Please complete all relevant shaded sections)*

### Part 1: Service Details

Establishment/Agency Name:	
Establishment/Agency Type:	<i>(i.e. Nursing Home, Residential Care Home, Day Care Setting, Domiciliary Care Agency, Adult Placement Agency, Nursing Agency, Independent Hospital, Independent Clinic)</i>
RQIA Registration Number:	<i>(please refer to your current certificate of registration)</i>

### Part 2: Details of Service User affected

Unique Identifier <i>(please Do Not Use Name)</i>	Year of Birth <i>(yyyy)</i>	Gender <i>(male/female)</i>

More than one Service user affected?	<input type="checkbox"/>	<i>(if more than 1 service user is affected please tick box and list the details of remaining individuals as above in Part 4 of this form)</i>
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### Part 3: Information about the Event/Death

Timing of Event/Death:	Date <i>(dd/mm/yy)</i>	Time <i>(hh:mm)</i>

**Please select one of the following:**

<input type="checkbox"/>	<b>(G1) Death</b>
	<i>please provide details:</i>
	Certified cause: <i>(if known)</i>
	G1.2 Death unexpected: <i>(if yes, please complete Part 4, if no, please go to Part 5)</i>
<input type="checkbox"/>	<b>(G2) Serious Injury</b>
	<i>please specify injury (if applicable):</i>
	G2.1 Fracture (Hip) <input type="checkbox"/> G2.2 Fracture (Other) <input type="checkbox"/> G2.3 Head Injury <input type="checkbox"/>
<input type="checkbox"/>	<b>(G3) Accident</b>
<input type="checkbox"/>	<b>(G4) Serious Illness</b>
<input type="checkbox"/>	<b>(G5) Outbreak of Infectious Disease</b>
<input type="checkbox"/>	<b>(G6) Allegation of Misconduct</b>
	<i>please specify (select <b>one main type</b> only):</i>
	G6.1 Physical <input type="checkbox"/> G6.4 Financial/ Material <input type="checkbox"/> G6.7 Discriminatory <input type="checkbox"/>
	G6.2 Sexual <input type="checkbox"/> G6.5 Neglect/Acts of Omission <input type="checkbox"/> G6.8 Damage to property <input type="checkbox"/>
	G6.3 Psychological/ Emotional <input type="checkbox"/> G6.6 Institutional <input type="checkbox"/> G6.9 Misuse of drugs <input type="checkbox"/>
<input type="checkbox"/>	<b>(G7) Incident involving the police</b>
<input type="checkbox"/>	<b>(G8) Any other event adversely affecting service user</b>
	<i>please specify (if applicable):</i>
	G8.1 Medication Error <input type="checkbox"/> G8.2 Behavioural Issue <input type="checkbox"/> G8.3 Suicide/Self Harm <input type="checkbox"/>
<input type="checkbox"/>	<b>(A1) Theft or Burglary</b>
<input type="checkbox"/>	<b>(A2) Unexplained absence</b>

**Any other organisations and/or individuals informed:**

Name of organisation/individual	Date (dd/mm/yy)
Police Service of Northern Ireland (PSNI)	
Care manager/key worker (HSC Trust)	
Independent Safeguarding Authority (ISA)	
Northern Ireland Social Care Council (NISCC)	
Nursing and Midwifery Council (NMC)	
<b>Others:</b> (e.g. NIAIC)	

**Part 4 Concise description of surrounding circumstances**

<p><b>Details of the event/death</b> (where appropriate: incident details, duration, people involved, behaviors displayed, condition of those involved)</p>	
<p><b>Any immediate action taken following the event</b> (where appropriate)</p>	
<p><b>Any action taken to prevent recurrence</b> (where appropriate)</p>	

Has associated risk assessment and care plan been fully updated?  (Yes, No, N/A)

**Part 5: Form Completed by:**

Name	Job Role	Date (dd/mm/yy)

Please return form by email to: [incidents@rqia.org.uk](mailto:incidents@rqia.org.uk)



# Form (1b) - Statutory Notification of Events (Children's Services)

*(Please complete all relevant shaded sections)*

## Part 1: Service Details

Establishment/Agency Name:		
Establishment/Agency Type:		<i>(Residential Family Centre, Children's Home)</i>
RQIA Registration Number:		<i>(please refer to your current certificate of registration)</i>

## Part 2: Details of Service User affected

Unique Identifier <i>(Please Do Not Use Name)</i>	Year of Birth <i>(yyyy)</i>	Gender <i>(male/female)</i>

More than one Service user affected?	<input type="checkbox"/>	<i>(if more than 1 service user is affected please tick box and list the details of remaining individuals as above in Part 4 of this form)</i>
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## Part 3: Information about the Event/Death

Timing of Event/Death:	Date <i>(dd/mm/yy)</i>	Time <i>(hh:mm)</i>

***Please select one of the following:***

<input type="checkbox"/>	<b>(G1) Death</b>			
	<i>please provide details:</i>			
	Certified cause: <i>(if known)</i>			
	G1.2 Death unexpected:		<i>(if yes, please complete Part 4, if no, please go to Part 5)</i>	
<input type="checkbox"/>	<b>(G2) Serious Injury</b>			
	<i>please specify injury (if applicable):</i>			
	G2.1 Fracture (Hip)	<input type="checkbox"/>	G2.2 Fracture (Other)	<input type="checkbox"/>
			G2.3 Head Injury	<input type="checkbox"/>
<input type="checkbox"/>	<b>(G3) Accident</b>			
<input type="checkbox"/>	<b>(G4) Serious Illness</b>			
<input type="checkbox"/>	<b>(G5) Outbreak of Infectious Disease</b>			
<input type="checkbox"/>	<b>(G6) Allegation of Misconduct</b>			
	<i>please specify (select <b>one main type</b> only):</i>			
	G6.1 Physical	<input type="checkbox"/>	G6.4 Financial/ Material	<input type="checkbox"/>
	G6.2 Sexual	<input type="checkbox"/>	G6.5 Neglect/Acts of Omission	<input type="checkbox"/>
	G6.3 Psychological/ Emotional	<input type="checkbox"/>	G6.6 Institutional	<input type="checkbox"/>
			G6.7 Discriminatory	<input type="checkbox"/>
			G6.8 Damage to property	<input type="checkbox"/>
			G6.9 Misuse of drugs	<input type="checkbox"/>
<input type="checkbox"/>	<b>(G7) Incident involving the police</b>			
<input type="checkbox"/>	<b>(G8.1) Medication Error</b>			
<input type="checkbox"/>	<b>(C1) Serious Complaint</b>			
<input type="checkbox"/>	<b>(C2) Child Protection Enquiry</b>			
<input type="checkbox"/>	<b>(C3) Allegation of Serious Offence</b>			
<input type="checkbox"/>	<b>(C4) Sexual Exploitation</b>			

**Any other organisations and/or individuals informed:**

<b>Name of organisation/individual</b>	<b>Date</b> <i>(dd/mm/yy)</i>
Police Service of Northern Ireland (PSNI)	
Care manager/key worker (HSC Trust)	
Independent Safeguarding Authority (ISA)	
Northern Ireland Social Care Council (NISCC)	
Nursing and Midwifery Council (NMC)	
<b>Others:</b> <i>(e.g. NIAIC)</i>	

**Part 4 Concise and precise description of surrounding circumstances**

<p><b>Details of the event/death</b> <i>(where appropriate: incident details, duration, people involved, behaviors displayed, condition of those involved)</i></p>	
<p><b>Any immediate action taken following the event</b> <i>(where appropriate)</i></p>	
<p><b>Any action taken to prevent recurrence</b> <i>(where appropriate)</i></p>	

<b>Has associated risk assessment and care plan been fully updated?</b>		<i>(Yes, No, N/A)</i>
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**Part 5: Form Completed by:**

<b>Name</b>	<b>Job Role</b>	<b>Date</b> <i>(dd/mm/yyyy)</i>

Please return form by email to: [incidents@rqia.org.uk](mailto:incidents@rqia.org.uk)



## Form (2) - Statutory Notification of Events (Follow up)

*(Please complete all shaded sections)*

### Part 1: Service Details

Establishment/Agency Name:		
Establishment/Agency Type:		<i>(Nursing Home, Residential Care Home, Day Care Setting, Adult Placement Agency, Independent Hospital, Independent Clinic, Domiciliary Care Agency, Nursing Agency, Children's Home, Residential Family Centre)</i>
RQIA Registration Number:		<i>(please refer to your current certificate of registration)</i>

### Part 2: Details of Service User affected

Unique Identifier <i>(Please Do Not Use Name)</i>	Year of Birth <i>(yyyy)</i>	Gender <i>(male/female)</i>

### Part 3: Information about the Event/Death

Timing of Event/Death:	Date <i>(dd/mm/yy)</i>	Time <i>(hh:mm)</i>
RQIA Incident ID <i>(if known)</i>		

### Part 4: Detail of Follow up action:

Summary of incident follow up	
Lessons learned	
Training needs identified	

### Part 5: Form Completed by:

Name	Job Role	Date

Please return form by email to: [incidents@rqia.org.uk](mailto:incidents@rqia.org.uk)

## Form (3) - Statutory Notification of Events (Service Declaration)

This form needs to be completed initially by the Registered Manager or Responsible Person to confirm awareness of the RQIA Guidance on Notifiable Events.

Please also complete this form whenever a change to the authorised Fax/Email details is required.

The RQIA will accept statutory notifications from any submitted email address or fax number. Please ensure that anyone making a notification to the RQIA in this way is authorised to do so.

The details provided below relate to the reporting of incidents only and do not affect contact details provided in relation to other important letters or correspondence from the RQIA.

### Service Details

Service Name:		
Service Type:		<i>(Nursing Homes, Residential, Day Care Setting, Adult Placement Agency, Independent Hospital, Independent Clinic, Domiciliary Care Agency, Nursing Agency, Children's Home, Residential Family Centre)</i>
Registration Number:		<i>(please refer to your current certificate of registration)</i>

Fax Number/Email	Authorisation <i>(Add/Remove)</i>	Date effective <i>(dd/mm/yy)</i>

I hereby confirm that I have read the guidance on Notifiable Events and authorise the RQIA to accept any statutory notifications submitted via the provided Fax Numbers/ Email addresses.

Original Signature	Name	Designated Role <i>(Registered Individuals only)</i>	Date <i>(dd/mm/yy)</i>

Please return this by post to:

**Incident Administrator  
Regulation and Quality Improvement Authority  
9th Floor Riverside Tower  
5 Lanyon Place  
Belfast  
BT 1 3BT**