

Reference:	FOI.17594.25
Subject:	Local policy on reporting incidents, concerns and near misses
Date of Request:	17 June 2025

Requested:

I require a copy of your local policies and procedures on what of your employed staff are expected to do in the event of incident or near misses.

Clarified

To assist you, I will be more precise.

1. Is it local policy to report incidents, concerns and near misses via the DATIX system?
2. If, in the event a DATIX is done, is it policy for the person who completed the DATIX to do the investigation or is it policy for someone removed from the incident, concerns or near miss to investigation?

Response:

1. Hywel Dda University Health Board (UHB) confirms that its Incident, Near Miss and Hazard Reporting and Management Policy states that *“Any member of staff who is involved in, witnesses or discovers an adverse incident/accident or near miss incident/accident must complete the Datix Cymru Incident Report Form”*. All UHB staff members have access to the Datix Cymru, RLDatix system.

Complaints and claims that are managed under the Putting Things Right Regulations are included within the umbrella term “concerns” and are also recorded within Datix Cymru.

It is recognised that in some circumstances, staff may wish to raise an issue but fear retribution. In these instances, support may be needed to report via normal mechanisms, and so staff have access to a ‘Working in Confidence’ platform which allows them to raise concerns confidentially under the ‘Speak Up’ process. However, this platform does not replace the requirement to report incidents and near misses via the RLDatix system.

2. The UHB’s Incident, Hazard and Near Miss Reporting and Investigation process is arranged as a 3-tier process:
 - i. The staff member submits an incident report through Datix Cymru,
 - ii. a different staff member investigates the incident, and
 - iii. a third staff member will close the incident.

For example, a nurse reports a medication error, the investigation is undertaken by the ward manager or a nominated deputy (not the reporter), the incident investigation is checked and then approval for closure is made by a Senior Nurse. The policy states *“An incident record should not be closed by the investigator of the incident”*.

However, there are some agreed exceptions to this e.g. a verbal incident report is made to the patient safety team who record the incident details, the patient safety officer reporting the incident may then be the investigating officer, meaning that the same staff member reported and

investigated the incident. The Quality Assurance and Safety Team (QAST) undertake several routine validation checks to ensure incidents are processed correctly, in accordance with policy.

The policies mentioned above are available on the UHB's website. Therefore, the UHB has applied an exemption under Section 21 of the Freedom of Information Act 2000 (FoIA), as they are accessible by another means:

- Policy 982 – Incident, Near Miss and Hazard Reporting and Management Procedure
- Policy 894 – 'Putting Things Right' Management and Resolution of Concerns Policy (Incidents, Complaints and Claims)

Additionally, the UHB has identified the following policies, which may also be of use to you:

- Policy 558 – Management of Nursing and Midwifery Medication Errors/Near Misses Policy
- Policy 435 – All Wales Procedure for NHS Staff to Raise Concerns

For ease of reference, please click on the link provided below, which will take you directly to the policies and written control documents webpage:

[Policies and written control documents - Hywel Dda University Health Board](#)