

The Newcastle upon Tyne Hospitals NHS Foundation Trust

Safety Alert Broadcast System (SABS) Policy and Procedure

Effective: January 2011

Review: December 2012

1. Background and Introduction

The safety alert broadcast system (SABS) is an electronic system developed by the Department of Health, with the Medicines and Healthcare products Regulatory Agency (MHRA), NHS Estates & Facilities (EFA) and the National Patient Safety Agency (NPSA).

SABS has two key elements

1. It is a means to email new safety alerts to nominated leads (SABS Liaison Officers) in Trust and PCTs, who will be asked to disseminate the message to those who need to take action. The system will replace distribution of alerts by fax, post or other means, which has often been relied upon until now.
2. There is now a mandatory feedback function. SABS Liaison Officers will have an additional responsibility for completing a short feedback form to confirm that action has been taken in their organisation in response to an alert. Completed feedback forms will be available on the dedicated Safety Alert Broadcast System website, along with copies of all new alerts.

The Newcastle upon Tyne Hospitals NHS Trust is required to introduce systems to ensure compliance with the DoH requirements. As the new SABS system requires an online acknowledgment of receipt and feedback on actions taken there should be a national improvement in risk management processes relating to alerts. All alerts are now managed via the Clinical Governance and Risk Department (CGARD) to ensure effective co-ordination of actions taken and final closure.

The attached flow chart (Fig1) illustrates progress through the Trust system of an alert which may be from one of the several agencies described above.

2. Procedural Notes

- 1) The SABS Liaison Officer or nominated deputy will check their e-mail account on each working day.
- 2) On receipt of an alert, the SABS Liaison Officer will acknowledge receipt on line using the supplied password.
- 3) The SABS Liaison Officer (or deputy) will ascertain the type of alert received and disseminate as appropriate after taking advice from appropriate Trust officers so ensuring that alerts are targeted to relevant areas of the Trust or other identified areas.

This will include designated staff from

- The Clinical Governance and Risk Department
- Supplies
- Estates

- Pharmacy
 - Any area of expertise
- 4) A copy of the alert will be sent electronically to the appropriate Directorate Liaison Officer for action and response back to the SABS Liaison Officer. The alert deadline date will be stated on communication to the Directorate Liaison Officer. This may differ from the action completion date stated on the actual alert to allow time for any verification work and also time for reporting to the DoH.
 - 5) The responsible officers will ensure that appropriate staff are contacted, electronically if possible, and the actions outlined in the alert are carried out as part of their management role. The responsible officer will collate all directorate responses and return the completed response sheet and/or action form(s) to the SABS Liaison Officer by the date indicated.
 - 6) The SABS Liaison Officer will, if satisfied with the actions taken and after taking appropriate advice from colleagues, update the SABS database (the update function is password protected) via the website at <http://www.info.doh.gov.uk/sar/cmopatie.nsf> where all alerts may be viewed for information.
 - 7) The SABS Liaison Officer will report on a regular basis to the Corporate Governance Committee and the Clinical Risk Group, as a standing agenda item, a status summary of alerts received and action in progress.

3. Monitoring

As part of the Trust monitoring and scrutiny process, a report is submitted at each meeting of the Trust Corporate Governance Committee and the Clinical Risk Group at each meeting. In addition, the Safety Alerts Officer will escalate any breaches in compliance to these Committees.

This policy will be reviewed by the Risk Manager.

Author: Risk Manager

SABS Response Form

Alert title:

Alert No.

Date sent:

Please complete the form below and return by email to SABS@nuth.nhs.uk or SABS Liaison Officer, Clinical Governance and Risk Dept, Peacock Hall, RVI no later than:

I acknowledge that I have received and read the attached Safety Alert Broadcast. Having read the alert my assessment for the Directorate/ Department is:

(please insert x against appropriate response)

No action is required		We do not use this type of equipment
		Recommendations are already in place.
Action taken. Matter resolved		Faulty equipment removed from use
		Information shared with all local users
		Change in practice
Further action necessary-not yet started		Review / revise policies, procedures or guidance
		Organise training
Further action necessary-ongoing		Review / revise policies, procedures or guidance
		Organise training
Other (please specify)		

If action is necessary the Action form will need to be returned as above no later than:

Name of person completing form:

Directorate

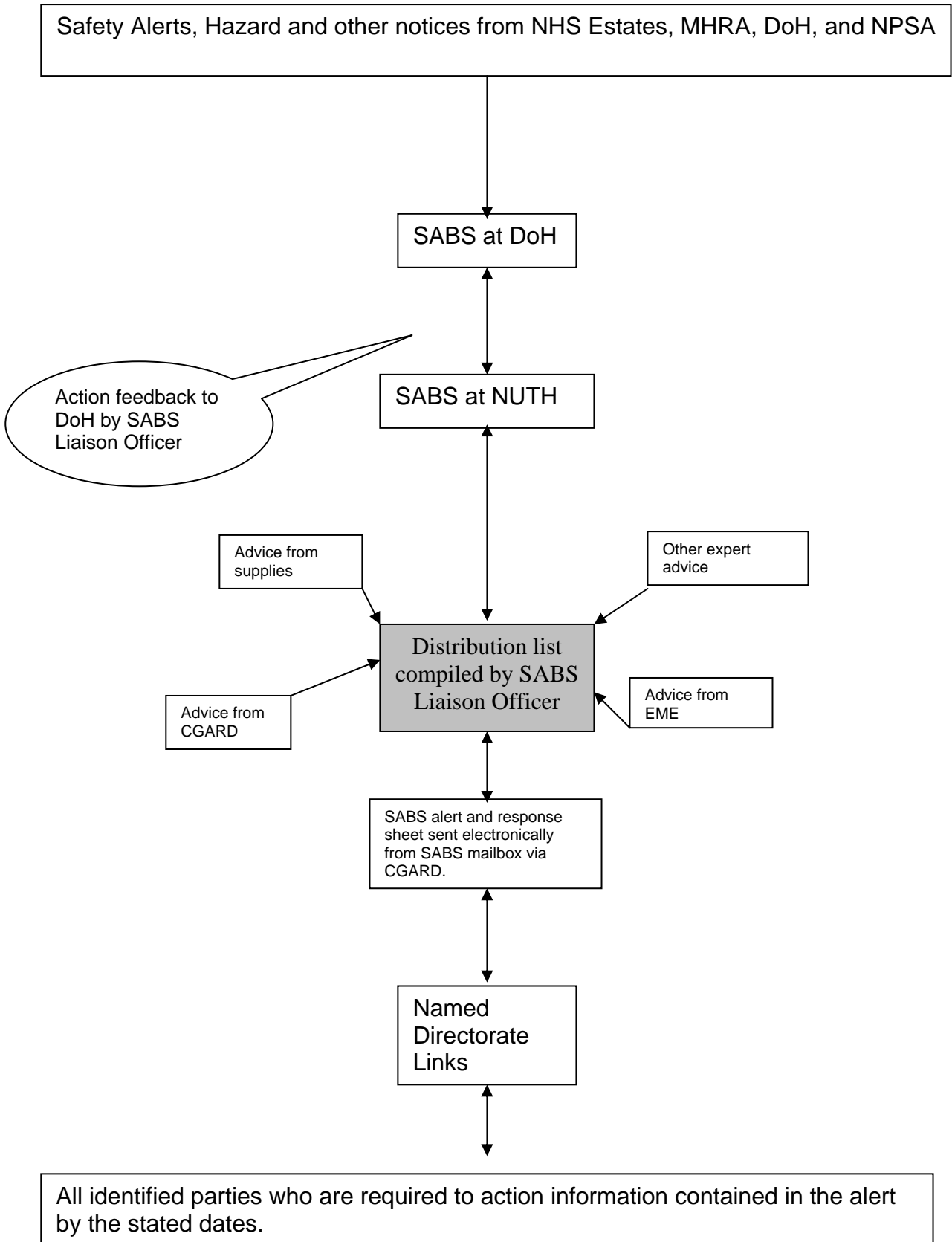
**The Newcastle Upon Tyne Hospitals NHS Foundation Trust
Safety Alert Broadcast System (SABS)**

ACTION REPORT FORM

Notice Number:	DATE:
Notice Title:	
Action Taken. The actions should address fully the issues identified by the Alert and indicate degree of closure. Normally all actions should be completed by the date indicated but in exceptional cases any residual outstanding actions should be clearly identified with an indication of time scale for closure. Action Completion date:	
Date:	Signed:
Print Name	

The Above form should be completed and returned (electronically if possible) by the date requested, to the SABS Liaison Officer, Clinical Governance and Risk Department, Peacock Hall, RVI, Newcastle upon Tyne, NE1 4LP. Tel: 0191 282 4874; e-mail: SABS@nuth.nhs.uk

SABS Flow Diagram (Fig. 1)



THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST
IMPACT ASSESSMENT – SCREENING FORM A

This form must be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Policy Title:	Safety Alert Broadcast System (SABS) Policy and Procedure	Policy Author:	Nicolle Croft, Risk Manager
		Yes/No?	You must provide evidence to support your response:
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of the following: (* denotes protected characteristics under the Equality Act 2010)	No	
	• Race *	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender *	No	
	• Culture	No	
	• Religion or belief *	No	
	• Sexual orientation including lesbian, gay and bisexual people *	No	
	• Age *	No	
	• Disability – learning difficulties, physical disability, sensory impairment and mental health problems *	No	
	• Gender reassignment *	No	
	• Marriage and civil partnership *	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination which can include associative discrimination i.e. direct discrimination against someone because they associate with another person who possesses a protected characteristic, are any exceptions valid, legal and/or justifiable?	No	
4(a).	Is the impact of the policy/guidance likely to be negative? <i>(If “yes”, please answer sections 4(b) to 4(d)).</i>	No	
4(b).	If so can the impact be avoided?	N/A	
4(c).	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
4(d).	Can we reduce the impact by taking different action?	N/A	

Comments: This policy relates to the processes in the management and dissemination of safety alerts across the Trust.	Action Plan due (or Not Applicable): Not applicable
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Name and Designation of Person responsible for completion of this form: Nicolle Croft, Risk Manager Date: February 3rd, 2011
Names & Designations of those involved in the impact assessment screening process: Nicolle Croft, Risk Manager

(If any reader of this procedural document identifies a potential discriminatory impact that has not been identified on this form, please refer to the Policy Author identified above, together with any suggestions for the actions required to avoid/reduce this impact.)

For advice on answering the above questions please contact Frances Blackburn, Head of Nursing, Freeman/Walkergate, or, Christine Holland, Senior HR Manager. On completion this form must be forwarded electronically to Steven Stoker, Clinical Effectiveness Manager, (Ext. 24963) steven.stoker@nuth.nhs.uk together with the procedural document. If you have identified a potential discriminatory impact of this procedural document, please ensure that you arrange for a full consultation, with relevant stakeholders, to complete a Full Impact Assessment (Form B) and to develop an Action Plan to avoid/reduce this impact; both Form B and the Action Plan should also be sent electronically to Steven Stoker within six weeks of the completion of this form.