

Section J: Reporting and learning

		Evidence / Details	Yes / No
Q1	Do you have a SOP for dealing with a significant event involving CDs?	Yes - they have a full incident policy	Yes
Q2	Is there an open culture that encourages staff to report incidents?	Yes . All incidnets are logged and these are sent to senior staff. They are also discussed in hand over meetings	Yes
Q3	Have there been any significant events involving CDs in the last 12 months?	yes	Yes
Q4	Have these events been reported to your CDAO or nominated lead?	Yes - but there is a gap at present as the nominated person has left .	Yes
Q5	Do you have a process in place for formally escalating CD concerns on to another organisation and share with the NHS England's Area Team lead CDAO?	All incidents are reported via a centralised system they get fed up to the whole organisation.	Yes
Q6	Have there been any complaints or concerns involving the prescribing and or handling of CDs in the last 12 months?	Yes	Yes
Q7	Have there been any concerns about unusual, excessive or inappropriate prescribing of CDs in the last 12 months? (expressed by colleagues, police, drugs misuse services or others)	No	No
Q8	Have all CD concerns been investigated and resolved or referred?	Yes	Yes
Q9	Have any changes been introduced as a result of the learning from CD incidents?	Yes, any actions are always taken forward	Yes
Q10	Is there a process in identifying themes from CD incidents?	Not at such. The database is robust and the clincial goveranace group review all incidents drug and non drug related.	No
Q11	Is there a system in place for sharing learning from CD incidents?	Yes - incident review group take on this role.	Yes