

Occurrence Report – Controlled Drugs Concerns

This template should be used by Accountable Officers to submit their quarterly reports to the Chair of the Local Intelligence Network in accordance with Regulation 29 of The Controlled Drugs (Supervision of Management and Use) Regulations (Northern Ireland) 2009.

Name of Designated Body	
Name of Accountable Officer	
Reporting three month period	

I confirm that my Designated Body has **no / the following** (delete as appropriate) concerns regarding its management or use of controlled drugs during this period.

Accountable Officer signature	
Date signed	

Description of concern ¹	Date aware ²	Actions taken ³

Notes

The Controlled Drugs (Supervision of Management and Use) Regulations (Northern Ireland) 2009 came into operation on 1 October 2009.

Regulation 29 refers to occurrence reports and is shown in full below. In brief, regulation 29 requires Accountable Officers to give an occurrence report to the Chair of the Local Intelligence Network. This should contain details of concerns that their designated body has regarding its management or use of controlled drugs (or confirmation that it has no concerns to report).

¹Short description of cause of concern, including dates(s). Details may be attached in a separate document. Please include type of healthcare professional, where appropriate. Note regulations 25 and 26 regarding the disclosure of patient identifiable information.

²Date the Accountable Officer of the Designated Body became aware of the concern.

³Action already taken (if any) within or outside the Designated Body eg as part of the internal incident investigation process. To include the reference number of the internal incident investigation process (where relevant), and whether the incident is closed or still open.

This document will be held securely by the Chair of the LIN in accordance with the LIN agreed locally policies for handling information.

Occurrence Reports to be completed in accordance with agreed LIN procedures and should be **received 2 weeks before** the date of the LIN meeting.

Reports completed electronically may be forwarded to shona.coy@dhsspsni.gov.uk or posted to:

Mrs Shona Coy
Principal Pharmaceutical Officer
Room D4.3
Castle Buildings
Stormont Estate
BELFAST BT4 3SQ

Occurrence Reports

1. (1) All accountable officers shall give, on a quarterly basis, an occurrence report to the chair of the local intelligence network.
- (2) The occurrence report may contain the following information –
 - (a) details of any concerns that his designated body has regarding its management or use of controlled drugs; or
 - (b) confirmation by his designated body that it has no concerns to report regarding its management or use of controlled drugs.
- (3) Nothing in this regulation requires or permits any disclosure of information which is prohibited by or under any other enactment.
- (4) In determining for the purposes of paragraph (3) whether disclosure is not prohibited by reason of being a disclosure of personal data which is exempt from the non-disclosure provisions of the Data Protection Act 1998 by virtue of section 35(1) of that Act (disclosure required by law or made in connection with legal proceedings etc), it is to be assumed that the disclosure is required by this regulation.

Update on previously reported concerns

Previous LIN reference	Details

Learning Points

Where possible, please cross-reference to Occurrence Report entry.

Incident	Learning Points