



Staffordshire and  
Stoke-on-Trent  
Integrated Care Board

# **STANDARD OPERATING PROCEDURE FOR MANAGEMENT OF SOFT INTELLIGENCE**

### Information Reader Box

Directorate	Nursing and Quality
Purpose	Guidance
Document Purpose	Procedures
Document Name	Standard Operating Procedure for the Management of Soft Intelligence
Author	Quality and Patient Safety Team
Publication Date	May 2023
Review Date	Dec 2023
Target Audience	All staff employed by Staffordshire & Stoke on Trent Integrated Care Board
Description	Standard Operating Procedure for the Management of Soft Intelligence
Superseded Document	N/A
Action Required	To Note
Approved by	ICB Quality System Group TBC
Contact Details and further information	ICB Nursing and Quality Team

### Document Status

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## 1.0 PURPOSE AND INTRODUCTION

According to the NHS Patient Safety Strategy, Patient safety is about maximising the things that go right and minimising the things that go wrong for people experiencing healthcare. It is integral to the NHS's definition of quality in healthcare, alongside effectiveness and patient experience.

Staffordshire and Stoke on Trent Integrated Care Board (ICB) has a process for the collection of soft intelligence from across the system but also specifically for primary care providers. The information collated from these reports is essential in the triangulation of quality for all SSOT residents receiving healthcare.

This Standard Operating Procedure is intended to define the processes for the collection, management, and reporting of 'soft intelligence', including clinical and patient feedback across the ICB.

Soft intelligence for the purpose of this document is *defined as information that does not fall into the complaints, incidents, serious incidents, or safeguarding category, but which can provide the ICB with valuable intelligence on patient experience/safety. This can be both positive and negative.*

An Incident for the purpose of this document is defined as *any event which impacted adversely or had the potential to impact on the patients care.* Incident should be managed as per the processes and policy agreed within each provider.

It should be recognised that the 'soft intelligence' process will not provide an incident or complaints management function and separate processes exist for these purposes. ICB soft intelligence will be shared and triangulated with relevant providers as defined in section 2.0 and 3.0.

Soft intelligence does not replace a clinician's responsibility operationally and any actions needed to be taken to ensure patient safety and clinical care must be taken by the reporter and cannot be left for the person reviewing the intelligence.

## 2.0 PROCEDURE

Summary of soft intelligence functions:

### Collection of intelligence

Soft Intelligence can be received from various sources:

- From patients via the patient voice inbox – inputted onto the Datix Cloud IQ system by communications team administrator
- Primary Care – directly onto the Datix Cloud IQ system by the primary care provider
- Providers (regulated) – onto the Datix Cloud IQ system by the quality team member who received the intelligence
- Placing commissioners - onto the Datix Cloud IQ system by the quality team member who received the intelligence
- ICB staff – directly onto the Datix Cloud IQ system.

The NHS number should only be included if patient consent for sharing of Personal Identifiable Data has been received. No other identifiable data must be inputted or uploaded, and this includes clinic letters.

Soft Intelligence is collected for themes and trends monitoring dependent on the information it may be reported quarterly or if necessary, it may be quickly escalated as a concerning theme or trend by the relevant quality lead within the ICB.

## Management of intelligence

A review of all new reported soft intelligence is undertaken on a weekly basis to ensure no soft intelligence has met the criteria for Serious Incident, Clinical Incident or Safeguarding Threshold.

If this threshold is met the relevant provider will be advised as will the reporter only if patient NHS number and consent has been confirmed. If consent and NHS number not confirmed, then the reporter will be asked to provide the same and rationale be given to facilitate quick escalation to the relevant provider.

*Of note; If it is felt that the incident should be shared regardless of consent due to a public interest or safety need then the reporter will be asked to discuss the issue with their own Caldicott guardian and seek approval to disclosure/sharing without consent.*

Soft Intelligence that meets the criteria of a clinical incident will be shared with the relevant NHS provider (if consented and with the NHS number) with the request that is to follow their internal processes/incident management system and where relevant be considered as a Serious Incident (from September 2023 a patient safety incident investigation as per the Patient Safety Incident Response Framework: (PSIRF)). This will be done weekly following the weekly review and the reviewer will note this on the system.

Soft intelligence that includes an element of a potential safeguarding issue will be shared regardless of consent with the provider where the incident/event occurred – the reporter will be expected to adhere to the appropriate safeguarding process

Soft Intelligence related to Care Homes A weekly report will be sent to the relevant LA with a summary and name of home, no patient identifiable data will be included unless NHS number and consent evidenced. A copy will be sent to the relevant person in the CHC (CSU monitored) and the nominated Quality person for the ICB at the same time. (if no reports have been submitted a nil report is to be submitted)

Soft intelligence that appears to be a complaint will receive a response that advises contact with the relevant NHS PALs department, independent provider Head Office/Complaints Department or the ICB complaints department as relevant.

Soft intelligence that relates to medication management this will be forwarded to the Quarterly MSO meeting on a quarterly basis. Medication issues reported as errors in dispensing will also be shared with relevant pharmacy to report and act accordingly (if no consent indicated just the issue will be shared) the pharmacy will be required to liaise with the reporter to gain consent if required or discuss with relevant Caldicott guardian in relation to public interest criteria.

Soft Intelligence that relates to the delegated commissioning areas Pharmacy, Optometry and Dentistry (POD) will be shared with the Lead Nurse within the Nursing and Therapies Directorate with portfolio quality responsibility for PODS to be shared with Birmingham and Solihull ICB

All soft intelligence will be considered as valuable theme and trend information and captured as such. All Soft Intelligence can provide the ICB with valuable intelligence on patient experience/safety and will be logged for themes and trends feedback and learning.

## Feedback mechanisms

Where the report is clearly soft intelligence, the reporter will be advised that it has been added to the ICB themes and intelligence process and will feature in the quarterly themed report presented and escalated as appropriate via System Quality Group.

A response will be sent which says:

*Thank you for your report this will now be closed, and the reported theme/trend added to the quarterly trends and theme report which is presented to the System Quality Group. At this point the report will be closed.*

Where the report is about a provider's actions and meets the criteria of an incident:

**If consent is evidenced** the reporter will be told that the provider has been advised about the incident and asked to report on their own incident management system and manage as per their process as well as feedback to reporter if required. The response will also say that the issue/event has been added to the ICB themes and intelligence data capture and will feature in the quarterly themed report presented and escalated as appropriate via System Quality Group.

If no consent evidenced the reporter will be advised that the provider cannot be asked to add as an incident as no consent but that the issue has been added to the ICB themes and intelligence data capture and will feature in the quarterly themed report presented and escalated as appropriate via System Quality Group.

*If it is felt that the incident should be shared regardless of consent due to public interest and safety needs, then the reporter will be asked to discuss the issue with their Caldicott guardian and seek approval to disclose without consent.*

All soft intelligence and relevant outcomes/learning and will be captured in quarterly reports which will be provided for information to the System Quality Group Bi-monthly and when in place with the Patient Safety Incident Response Framework (PSIRF) Learning Group. Until the PSIRF Learning group is commenced they will be forwarded to the Patient Safety Specialists for the three system NHS Trusts. These reports will also be shared via Quarterly Newsletters sent via the Practice News e-bulletin to all GP Practices.

### 3.0 PROCESS MAP FOR SOFT INTELLIGENCE

Soft Intelligence logged on the Datix Cloud IQ system will be recorded in the 'Capture Incidents' module.

A review is undertaken on a weekly basis by a member of the quality team. Datix Cloud IQ 'review' section will be updated/categorised accordingly.

- Soft Intelligence that meets the criteria of a clinical incident will be shared with the relevant provider
- Soft intelligence where there is a safeguarding element will be shared regardless of consent with the provider where the incident/event occurred – the reporter will be expected to adhere to the appropriate safeguarding process
- Soft Intelligence related to Care Homes - A weekly report will be sent to the relevant LA with a summary and name of home, no patient identifiable data will be included unless NHS number and consent evidenced. A copy will be sent to the relevant person in the CHC (CSU monitored) and the nominated Quality person for the ICB at the same time.
- Soft intelligence that appears to be a complaint will receive a response that advises contact with the relevant complaints department
- Soft intelligence that relates to medication management this will be forwarded to the Quarterly MSO meeting on a quarterly basis
- Soft Intelligence that relates to the delegated commissioning areas Pharmacy, Optometry and Dentistry (POD) will be shared with the Lead Nurse within the Nursing and Therapies Directorate with portfolio quality responsibility for PODS to be shared with Birmingham and Solihull ICB

Soft Intelligence that does not require a response will be logged for themes and trends and will be captured in quarterly reports.

All soft intelligence and relevant outcomes/learning and will be captured in quarterly reports which will be provided for information to the System Quality Group and after shared directly with all patient safety specialists in the three main NHS Trusts in the system.

The Soft Intelligence record will be updated with actions taken by relevant ICB quality members and feedback will be provided to the reporter via Datix Cloud IQ as to the process adhered to only. Communication is captured in Datix Cloud IQ to provide audit trail and will include closure by specialist teams in ICB reports are forwarded to.

## 4.0 MANAGING SOFT INTELLIGENCE ON DATIX CLOUD IQ

Agreed ICB approval statuses:

Datix Approval Status	Current Status	Timescales
Awaiting review	Soft Intelligence is awaiting review.	5 working days
Being Reviewed	Soft intelligence shared with safeguarding/care homes and actions to be determined	10 working days
Closed	Soft Intelligence updated for themes and trends and closed. Soft intelligence escalated to provider for actions and closed Soft intelligence reviewed by safeguarding/care homes and actions documented	15 working days

## 5.0 REPORTING REQUIREMENTS

Content	Forum(s)	Frequency
Summary of Soft Intelligence	ICB System Quality Group.	Quarterly
Summary of Soft Intelligence	individual Patient Safety Specialists NHS Trusts	Quarterly
Summary of Soft Intelligence	PSIRF System Group (when commenced)	TBC
Summary of Soft Intelligence	E-bulletin Practice Newsletter.	Quarterly
Summary of Medicines Reporting	MSO	Quarterly
Summary of Care Homes Reporting	Relevant LA (including Nil report)	Weekly

## 6.0 RESPONSIBILITIES

### 6.1 ICB Quality and Patient Safety Team

- Manage soft intelligence using the Datix Cloud IQ system as described in sections 2.0, 3.0 and 4.0 above.
- Producing quarterly summaries of Soft Intelligence and sharing at ICB System Quality Group, PSIRF System Group and E-bulletin Practice Newsletter.
- Share any soft intelligence relating to Pharmacy, Optometry and Dentistry with the Quality Lead for the PODS portfolio for onwards sharing to Birmingham & Solihull ICB
- Soft intelligence that relates to medication management this will be forwarded to the Quarterly MSO meeting on a quarterly basis
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### 6.2 ICB Quality Leads supporting care homes/independent hospitals

- Receive themes and trends identified by soft intelligence for information and monitoring.
- Act if necessary, regarding soft intelligence if concerns raised
- Update Datix report with actions taken and close report.

## 7.0 REVIEW AND MONITORING

The efficacy of this procedure will be monitored by the ICB Nursing and Quality Team and particularly by the ICB Quality and Patient Safety Team.

The procedure will be reviewed in December 2023 and sooner if required.