NHS
Frimley
Integrated Care Board

Clinical Feedback Process Flow Chart

Clinical Feedback's main purpose is to provide an insight to quality and safety issues encountered by all services to Frimley ICB and to facilitate learning and improvement.

Pre-submission

Feedback needs urgent response or requires an on-the-day resolution

YES

Person reporting feedback makes direct contact with provider to find a solution This can be facilitated through access to speciality / urgent / routine advice directories

Concern resolved – no further action

Unable to reach conclusion or there is a theme emerging/ repeatedly coming across with similar issue

NO

Raise clinical feedback through the link https://datix.scwcsu.nhs.uk/datix/live/index.php?form_id=5&module=PAL

or via email frimleyicb.clinicalfeedback@nhs.net if having no access to the link

Individual feedback required

YES

NO

Post-submission

Frimley ICB, led by the Quality Team will discuss the clinical feedback and concludes as to which route resolution is sought.

ROUTE A: Potential Serious Incident – sharing with the recipient organisation's Patient Safety Team or equivalent for a response

ROUTE B: Individual/ one-off clinical issues needing individual responses – sharing with the organisation's usual clinical feedback contact for response

ROUTE C: (FHFT only) Non-clinical/ process-related issues – sharing with FHFT Interface & Development Support Team for a response

Frimley ICB, led by the Quality Team will receive the cases 'for information' and uses it as intelligence to identify themes, which will be escalated to the recipient organisation, with whom we will work collaboratively on improvements and reforms to address these themes

Information gathered to improve patient pathways to initiate quality improvement and ensure patient safety is maintained. Feedback is given to all parties by one or more of the following methods:

Individual feedback / programme boards / clinical meetings / quality and safety meetings