LFPSE: Patient Safety Incident Reporting

NHS England LFPSE Service | GPhC Standards | Duty of Candour | Reviewed: June 2026 | Next review: June 2027

IMMEDIATE ACTIONS: After Discovering an Incident

- ☐ 1. Protect the patient from further harm
- ☐ 2. Assess need for urgent clinical intervention
- ☐ 3. Inform pharmacist or manager immediately
- ☐ 4. Document details promptly and factually
- ☐ 5. Consider duty of candour if patient was harmed
- ☐ 6. Report to LFPSE where appropriate
- ☐ 7. Review learning and agree preventive actions

LFPSE submission never replaces urgent clinical action or local escalation. Serious incidents (insulin, methotrexate, anticoagulant errors, significant overdose, serious CD incidents) may require immediate escalation beyond LFPSE.

What to Do: Decision Guide

Did the incident reach the patient?	Was patient harmed?	Action
No (near miss)	N/A	Record internally. Team learning. Routine dispensing near misses are not normally reported to LFPSE.
Yes	No harm apparent	Record internally AND report to LFPSE (No Harm). Consider professional and statutory duty of candour requirements.
Yes	Harm occurred	Urgent action. Record internally AND report to LFPSE with correct harm level. Professional and statutory duty of candour requirements apply.
CD incident	Any	LFPSE if patient safety involved. Follow local Controlled Drug governance procedures; escalate where required.

LFPSE Harm Levels (classify by actual outcome)

- ☐ No harm: incident occurred, patient not harmed
- ☐ Low harm: minimal effect, no lasting impact
- ☐ Moderate harm: short-term harm, needed treatment
- ☐ Severe harm: permanent or serious harm
- ☐ Death: report promptly and follow local escalation and statutory requirements

Classify by the actual outcome experienced by the patient (including psychological harm where relevant), not the type of error.

REPORT: Governance Memory Aid

- ☐ R: Record internally (all incidents and near misses)
- ☐ E: Escalate if urgent clinical action is needed
- ☐ P: Patient informed where duty of candour applies
- ☐ O: Open and honest (candour): apologise, explain, listen, support
- ☐ R: Report to LFPSE as soon as reasonably practicable
- ☐ T: Team learning documented, actions implemented and reviewed

Key compliance points: Patient safety incident: any event that caused harm, could have caused harm, or identifies a risk to patient safety. NRLS decommissioned June 2024: report at record.learn-from-patient-safety-events.nhs.uk. Report as soon as reasonably practicable after identification. GPhC inspections look for: incidents reviewed, trends monitored, learning shared, actions implemented and reviewed. Avoid patient or staff names in LFPSE free-text fields.

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