

Serious and significant incidents policy

Status of document:	Final
Version:	2
Date of approval:	30 September 2026
Effective from:	30 September 2026
Owner:	Council
Author:	Chief of Staff
Planned next review date:	30 September 2031

1. Purpose

- 1.1 This policy describes how the GOC will identify and manage significant and serious incidents. The policy:
- provides a consistent definition of a serious incident, a significant incident, near miss, and significant preventable event;
 - describes the relevant roles and responsibilities;
 - sets out the process for notification, management, reporting requirements and timescales;
 - provides direction to ensure that all incidents are reported appropriately, and that lessons learned from analysis of the event are shared with relevant departments, stakeholders and individuals.

2. Scope

- 2.1 This policy applies to:
- employees (whether permanent or temporary);
 - members;¹
 - workers; and
 - contractors working with, or on behalf of, the GOC.
- 2.2 Compliance with this policy is mandatory. Non-compliance for employees and workers may be considered a disciplinary matter. Non-compliance for members is a breach of the code of conduct.
- 2.3 If you require further advice and guidance, you should contact the Chief of Staff at amackaysim@optical.org. All requests for advice will be treated in confidence.

3. Definitions

- 3.1 **Serious incident:** As a charity, the GOC has a responsibility to manage and report serious incidents in accordance with guidance issued by the Charity Commission. The definition provided by the Charity Commission is:

‘A serious incident is an adverse event, whether actual or alleged, which results in or risks significant:

- *harm to your charity’s beneficiaries, staff, volunteers or others who come into contact with your charity through its work (who are collectively referred to throughout this guidance as people who come into contact with your charity through its work)*
- *loss of your charity’s money or assets*
- *damage to your charity’s property*
- *harm to your charity’s work or reputation.²*

¹ Members are appointed by the Privy Council (in the case of Council Members) or via the Council's appointment processes for committee members. This term commonly applies where individuals are a member of a committee or Council, regardless of employment status.

² <https://www.gov.uk/guidance/how-to-report-a-serious-incident-in-your-charity>

Appendix 1 sets out examples of what the Charity Commissions considers reportable serious incidents. However, it is not intended as an exhaustive list.

- 3.2 **Significant incident:** For the purposes of this policy, a significant incident does not meet the threshold for reporting as a serious incident to the Charity Commission. However, it is an incident that is either outside the organisation's risk tolerance, or close to breaching that tolerance. This is likely to be any event where the impact is considered 'major' or 'catastrophic' within the GOC risk management strategy and policy. Some categories relating to significant incidents are enclosed in appendix 2. However, it is not intended as an exhaustive list.
- 3.3 **Near miss:** a high-risk event, where it appeared initially to be a significant or serious incident, though the risk did not materialise into an issue.
- 3.4 **Significant preventable event:** a public protection issue that was in our control to prevent. This is an event that impacts public protection which effective management controls should prevent from happening. The significant preventable event framework provides definitions and should be read in conjunction with this policy.

4. Responsibilities

4.1 Chair of Council and Council Members

- 4.2 As trustees, the Council has a duty to report any serious incidents to the Charity Commission. It has delegated the management of significant and serious incidents to the executive via the Chief Executive and Registrar. It has delegated reporting to the Chief of Staff. Reporting and receiving assurance following a serious or significant incident has been delegated to Audit, Finance and Risk Committee (ARC) with a clear line of escalation to Council where concerns are substantial enough to warrant it.

4.3 Chief Executive and Registrar

- 4.4 The Chief Executive and Registrar has overall responsibility for ensuring that the GOC has in place a robust incident reporting and management framework, ensuring that:
- there is an emphasis on a duty of candour and a freedom to speak up culture;
 - internal controls are focussed on preventing risks becoming issues;
 - resources are prioritised to respond to issues; and
 - lessons learned are shared across the organisation.
- 4.5 The Chief Executive and Registrar is accountable to the Council in respect to the prevention and management of significant incidents.
- 4.6 The Chief Executive and Registrar will be responsible for activating the incident management procedure and convening the first meeting of the Strategic Command Group (SCG). This can be done by another member of SMT or the Chief of Staff in an emergency.

4.7 Senior Management Team

- 4.8 As the executive board, the SMT is responsible for ensuring that the structures and culture in the organisation are appropriate to promote management, reporting and

learning from incidents. It also provides leadership as a SCG in the event an incident requires active management.

4.9 Strategic Command Group (SCG)

4.10 The SCG is comprised of the members of SMT and supported by the Chief of Staff. The name applies when the incident management procedure is in place and refers to meetings explicitly convened as part of this procedure and decisions made as part of the significant incident response. The purpose of SCG is to provide the corporate and strategic direction when responding to significant incidents. The SCG will delegate operational oversight of the incident management to the Tactical Coordination Group (TCG).

4.11 The SCG convenes when the incident management procedure is activated. It determines the scope of the TCG, the frequency of SCG meetings and any reporting requirements. The SCG approves the step-down of the procedure when the incident has been successfully managed.

4.12 Tactical Coordination Group (TCG)

4.13 The Tactical Coordination Group will be comprised of heads of service with the relevant corporate remits to manage a developing incident. The type of incident and associated risks will define the membership of the TCG and will be subject to approval by SCG. This will include, but not be limited to:

- Chief Financial Officer (if required)
- Chief Legal Officer (if required)
- Chief of Staff
- Head of Communications
- Facilities Manager (if required)
- Head of People and Culture (if required)
- Head of IT (if required)
- Risk owner
- Other heads of department as judged appropriate

4.14 The TCG will be convened by SMT/SCG and expected to provide SMT and the risk owner with additional operational capacity, corporate coordination and support. The TCG will disband at the direction of SCG once the incident has been managed and the process has been stepped down to the review phase. TCG members may participate at the review stage as required.

4.15 Directors

4.16 Individual directors are responsible for ensuring:

- that the content of this policy is followed in their area of responsibility;
- that their directorates have established adequate internal controls to reduce the risk of significant or serious incidents;
- that learning from incident reporting is shared appropriately to encourage learning in their area of responsibility; and

- that staff training needs identified in the application of this policy are met to ensure improvement.

4.17 Chief of Staff

4.18 The Chief of Staff will ensure that there is an appropriate and effective incident management framework, including but not limited to:

- assessment of whether an issue meets the relevant criteria for a serious or significant incident;
- arrangements for record keeping and reporting;
- documented policies, procedures and guidance;
- appropriate training and support made available and delivered; and
- adequate resources are made available for the operation of this policy.

4.19 All persons in scope of this policy

4.20 All persons listed in the scope of this policy are responsible for:

- familiarising themselves with its contents;
- complying with all reasonable instructions issued by the SCG or TCG: and
- highlighting to their line manager any training they feel they require.

4.21 Person identifying the incident

4.22 At all times, the safety of the public, employees, members and workers is of primary importance. As a first step, the person identifying the incident should take immediate action to ensure that they and others remain safe.

4.23 The incident should be reported as soon as is possible so appropriate advice can be sought. Reporting should be directed to the Chief of Staff (amackaysim@optical.org). The person reporting should also inform their line manager, relevant risk owner and director.

4.24 Risk owners

4.25 An incident is a risk that has actualised. The priority for the owner of the risk to which the incident relates is ensuring the appropriate steps are taken to manage the incident in line with the policy and then completion of any necessary recovery work.

4.26 The expectation is that the risk owner will fully participate in the incident management and reporting processes, and seek the necessary advice, guidance and support from the TCG and Chief of Staff. The risk owner will be accountable to the TCG in terms of regular reporting and keeping the necessary parties informed during the incident management procedure.

4.27 The risk owner should also ensure that any required updates are undertaken following the incident and investigation findings.

5. Process

5.1 Incident Management

Step-up of the incident management process

- 5.2 Upon notification of an incident, the Chief of Staff and risk owner will use the risk scoring in the corporate and departmental risk registers as a means of assessing the severity of the risk. The rating of the incident should be consistent with the risk matrix and appetite contained in the GOC risk management policy. The risk scoring should inform the Chief Executive and Registrar's decision to implement the incident management process, alongside the professional judgement of the risk owner and Chief of Staff
- 5.3 The extent to which this procedure is followed will be determined by the following:
- the likelihood of an extended disruption due to an incident;
 - the risk to the public, member, workers and employees; and/or
 - the extent to which the GOC is exposed to reputational, financial or legal risk.
- 5.4 The SCG will be responsible for determining the terms of reference for the TCG, the regularity by which both the SCG and TCG will convene and the necessary reporting requirements. This will be proportionate to how the situation is developing. Examples might include:
- a weekly SMT meeting with TCG meeting daily;
 - both SMT and TCG meeting daily; or
 - alternate days for SCG and TCG meetings.
- 5.5 This will be kept under review throughout the incident management process and can be altered as best suited to assist workflow and developments.
- 5.6 The Chair of Council, Chair of ARC and Senior Council Member will be kept apprised of when the incident management procedure has been activated by the Chief of Staff. The Head of Communications will establish what member, worker and employee communications are required throughout the course of the incident.

Step-down of the incident management procedure

- 5.7 SCG will be responsible for approving the stepping down of the incident management procedure. The TCG will disband once this procedure is stepped down.
- 5.8 Investigation**
- 5.9 Investigations will be commissioned by the Chief of Staff on behalf of the Chief Executive and Registrar. The nature and extent of the issue will determine the investigation methodology and reporting arrangements. Upon being asked by the Chief of Staff to undertake a review, the investigating officer will coordinate an investigation to identify the factors that were likely to have led to the incident. The investigating officer should liaise with the risk owner to ascertain what, if any, corrective actions are required to prevent the incident from recurring.
- 5.10 Findings, lessons learnt and remedial actions should be reported to the SMT. SMT is responsible for tracking the implementation of any recommendations. An outcome summary will also be provided to ARC following the conclusion of any investigation or review.
- 5.11 On occasions there may be other considerations, such as potential management action, where the commissioning of the review and consideration of the subsequent

report may be limited to the Chief Executive and Registrar (or Chair of Council in exceptional circumstances). In such cases the investigation report would be on limited circulation. The Chief of Staff will coordinate communication in such instances.

5.12 Communication and Data Protection

- 5.13 In the event of a serious incident, Council and the appropriate relevant agencies must be informed either prior to, or at the same time as filing the Charity Commission online form. Depending on the nature of incident, appropriate relevant agencies may include the Professional Standards Authority and Department of Health and Social Care. Any decisions regarding the requirement to inform other agencies will be taken by the Chief Executive and Registrar in consultation with the Chair of Council. For serious data breaches requiring reporting to the Information Commissioner's Officer, reporting must be made within 72 hours of being first alerted to the incident. The GOC's information governance policies contain further details about the process and paperwork.
- 5.14 Serious or significant incidents may lead to a high level of media attention, and not only in the immediate aftermath. Communications are a vital element in supporting and delivering effective management of incidents. Therefore, any media requests must be directed to the Communications Team.

5.15 Duty of Candour

- 5.16 The GOC has a duty of candour in how it identifies, manages and reports on significant incidents. It is committed to improving standards in public administration, particularly where it has the opportunity to learn from unforeseen issues and risks. This duty must be upheld by anyone named within this policy, or working with the GOC.

6. Training requirements

- 6.1 New staff, members and workers will be made aware of their responsibilities for incident reporting as part of the corporate induction.
- 6.2 All lessons learnt reviews will identify learning points which will be accommodated into training for the teams and individuals likely to benefit from the information.

7. Monitoring and compliance

- 7.1 The Chief of Staff is responsible for monitoring and reporting on compliance with this policy.
- 7.2 Breaches of this policy will be reported to SMT and ARC. A breach where a serious incident is not appropriately reported to the Charity Commission or other relevant authorities is a significant failure of internal controls and should be subject to investigation.

8. Associated documentation

- 8.1 While not an exclusive list, this policy should be read in conjunction with:
- Business continuity plan;
 - Anti-fraud policy and response plan;

- Risk management policy;
- Significant preventable events framework;
- Freedom to speak up policy for employees, members and workers;
- Information governance handbook;
- IT policy;
- Health and Safety policy; and
- GOC member code of conduct.

9. Review of this policy

- 9.1 Governance will be responsible for reviewing this policy every three years, considering new or changes to legislation and regulations as well as best practice before presenting it for consideration by SMT and ARC and approval by Council.

Appendices

Appendix 1 – Charity Commission serious incidents examples table

Appendix 2 – Incident categories

Appendix 1

[Charity Commission serious incidents examples table](#)

Appendix 2 – Incident Categories

1. Health and Safety (including accidents and fire)

Examples of the sort of incidents that would be reported under this type are:

- Accidental injury
- Contact with or exposure to hazards
- Fires including false alarms
- Moving and handling
- Slips, trips and falls by service users, staff members and visitors

2. Security incidents

Security incidents include any incident that involved theft, loss or damage to organisation or personal property, such as:

- Deliberate damage to equipment, property and vehicles
- Loss or theft of equipment, property and vehicles
- Intruder alarms including false alarms
- Breaches of security

3. Violence and aggression incidents

Examples of incidents falling within this type of incident would include:

- Aggressive behaviour, physical assaults, verbal abuse.
- Harassment/inappropriate behaviour including sexual and racial

4. Information governance: confidentiality breaches, records management

Examples of these incidents are:

- Unauthorised or inappropriate disclosure of confidential service user information, (accidental or deliberate).
- Unavailability of records, missing or destroyed records
- Inaccurate information
- Breach of computer password security
- Loss or damage to Human Resources records
- Disclosure of staff information, accidental or deliberate

5. Information Technology (IT) incidents

Examples of reportable IT incidents are:

- IT system failures
- Network / system security
- Malware
- Loss of electronic data
- Unauthorised access or misuse of IT systems
- Inappropriate use of IT and Internet facilities, e.g. accessing pornographic/obscene material

6. Regulatory delivery

These incidents include:

- Breach of organisational policy
- Integrity of the register
- Illegal acts including legal challenge to GOC.

7. Other incidents

Wherever possible, incidents should be included as one of the above types. However these lists are not exhaustive and sometimes an incident will occur that does not apply to these types and included as 'other'. Examples of might include:

- Financial loss
- A number of staff becoming unwell during working hours
- Non-violent / inappropriate behaviour of service user
- Use of illegal substances/drugs on GOC premises.