MINORITY REPORT!
Medical Incident Notification

NAME: ARJUN SHIVANANDA
SITE: SCGH
BACKGROUND

• Clinical Incident reporting is one of the commonest mechanisms used to learn from harm events and near misses.

• Literature suggests that only a small number of incidents that occur are actually reported.

• Literature also suggests that doctors are amongst the worst at reporting incidents.
Clinical incidents reported through Datix CIMS in 2015

Total Incidents Notified: 2229

- 1923, 87%
- 49, 2%
- 6, 0%
- 248, 11%

- Admin
- Allied Health
- Nursing staff
- Doctors

Recommendations

Lessons Learned
Define

Background

Project Aim

Scope

Measure

Survey

Results

Analyse

Results

Improve

Solutions

I.T. solutions

Communication

Education

Recommendations

Lessons Learned
Project Aim and Scope

• Identify current problems/issues and barriers related to reporting of clinical incidents by medical staff
• Improve awareness of clinical incident reporting amongst medical staff
• Increase the clinical incident reporting by medical staff
Measure

SURVEY!!
What is your role?

- Intern: 19%
- Registrar: 35%
- Consultant: 2%
- RMO: 44%

Are you aware of what determines a clinical incident?

- Yes: 45.12%
- No: 26.83%
- Unsure: 0%

Do you know how to report a clinical incident at SCGH?

- Yes: 26.83%
- No: 26.83%
- Unsure: 0%

Answered: 92
Have you ever referred to the SCGH clinical incident management policy?

Have you ever completed an clinical incident report through Datix CIMS?

“Clinical incident reporting is worthwhile in learning from incidents and implementing quality improvement activities to reduce their occurrence”
<table>
<thead>
<tr>
<th>Why have less than 7% of medical staff ever reported a clinical incident?</th>
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<tr>
<td><strong>Lack of awareness about how to report a clinical incident</strong></td>
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<td><strong>Negative connotations</strong></td>
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<td><strong>Lack of awareness on responsibility</strong></td>
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<td><strong>Lack of awareness on what constitutes a clinical incident</strong></td>
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<td><strong>No feedback</strong></td>
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<td><strong>Time pressure</strong></td>
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<td><strong>Dual reporting process</strong></td>
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Affinity Map -Results after voting 11th April 2016
What next?

“It's easy to diagnose the problem, it's harder to solve the problem”

-Hillary Clinton

14th April 2016
Minority Report!
Medical Incident Notification

Ideas Generation Session
14th April 2016

How can doctors know what constitutes a clinical incident?
How can it be clearer whose role it is to report?
How can we remove the stigma around clinical incident reporting?
Ease of Implementation

Quick Wins

- Flow Diagrams
- Posters to change negative connotations
- Quick fact sheets in doctors rooms
- Clinical incident management helpline
- Department league table
- Incentive for reporting (food)
- Personal feedback to those who report
- Email those who report
- Utilise Grand rounds to increase awareness
- CPD points for incident reporting workshops
- Consultant driven
- Senior in charge should lead discussions and mentor jmos
- JMOs as RCA observers
- Discussion on ward rounds
- Senior in charge should lead discussions and mentor jmos
- Debrief tool
- Email: acknowledgement after notification about.
- Engaging background for desktops
- Email: acknowledgement after notification about.

Consider carefully

- Force med students to learn (1)
- University assessments (1)
- Assign most senior doctor to be in charge of notification
- Add to job description (1)
- Excellence notification instead of incident reporting
- Education at Teaching / orientation
- Incentive for reporting (food)
- Posters to change negative connotations
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Impact

LOW → HIGH
Proposed solutions

Education

• Education Package (workshops with CME points) - intern teaching/ orientation
• Quick fact sheets in doctors rooms

I.T solutions

• Engaging/dynamic background for desktops
• Rename Datix CIMS to Datix CIMS – clinical incident reporting
• Pin Datix CIMS to the desktop
• Doctors should not have access to Datix CIMs locked
• Pin Datix CIMS info to the doctors den on CHIPS

Communication

• Clinical incident management hotline
• Email acknowledgement after notification about the process
I.T solutions

- Rename Datix CIMS to Datix CIMS – clinical incident management system
- Doctors should not have to request access to Datix CIMS
- Pin CIMS info to the doctors den on CHIPS

**I.T solutions**

**Background**

**Project Aim**

**Scope**

**Measure**

**Survey**

**Results**

**Analyse Results**

**Improve**

**Solutions**

- I.T solutions
- Communication
- Education

**Recommendations**

**Lessons Learned**
Communication Solution

- Email acknowledgement
- Poster to raise awareness
- Clinical incident management hotline
- Datix for Doctors
Education Solutions

- Education Package (workshops with CME points) - intern teaching/orientation?
- Quick fact sheets in doctors rooms?
Why not make a movie?

“To achieve great things, two things are needed: a plan, and not quite enough time.”

Leonard Bernstein

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LETS MAKE A MOVIE

Lack of awareness on responsibility

Lack of awareness about how to report a clinical incident

Negative connotations

Lack of awareness on what constitutes a clinical incident

No feedback
Recommendation

• Datix Cims to be pinned to the taskbar of all WA health computers

• Background on HIN computers are a valuable resource for communication with staff

• PGME need to incorporate safety and quality into education schedule as most doctors are not aware on process and protocol

• Approach problem on a wider scale in order to reach a wider audience and to avoid limitations from state committees

• Regular review of reporting rates required to monitor change in behaviour
Reflection

- Stakeholder engagement is vital project (Pizza helps)
- Remember that everything is about the patient
- The sooner you fall behind the more time you'll have to catch up
- Fail fast
- Experience is what you get just after you need it
- People management is just as important as project management

What now?
- Presentations at SCGH mHOD meetings, RPH annual symposium, AMA Conference Brisbane, Stanford Healthcare Conference California
- Working with NMHS to extend implementation
- Other safety quality projects with SCGH
- Publications
Questions?

Can you repeat the part of the stuff where you said all about the things?