

STRIPE
Module 2

Georgie's journey







Follow up on the Anaphylaxis













Georgie's progress

- How would you approach this?

Georgie's progress

- How would you approach this?
 - Solo?
 - With colleagues?
 - With a senior?
 - Where? At the nurses station? In a private room? At Georgie's bedside?

Georgie's progress

- What are his concerns? What is his frame?

Georgie's progress

- What are his concerns? What is his frame?
 - Misunderstanding about the disease process
 - Is he guilty for not being around previously?
 - Personal connection to Nan/home

Georgie's progress

- What do you understand by “open disclosure”?

Georgie's progress

- What do you understand by “open disclosure”?
 - Expression of regret
 - Explanation of what happened
 - Consequences of what happened
 - Steps taken to manage the event
 - Steps taken to prevent recurrence

Georgie's progress

- What do you understand by “open disclosure”?
 - Not an admission of liability
 - May lead to increased litigation

Georgie's progress

- What do you understand by “open disclosure”?
 - Shift from past cultures
 - Blame/shame
 - Non-transparent
 - Systemic responsibility vs. individual responsibility

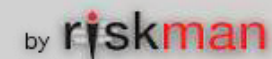
Georgie's progress

- How would you feel if you were the person who made the 'mistake' e.g.. Gave or prescribed the medication that caused the anaphylaxis?

Georgie's progress

Quality assurance cycle





Help | Log Out |

USER LOGIN

Username

Password

WELCOME TO RISKMAN

ALL STAFF ARE REQUIRED TO CREATE THEIR OWN USERNAME AND PASSWORD. PLEASE SEE DETAILS ON THE LEFT OF THE SCREEN. ENTER YOUR USERNAME TO BE THE SAME AS YOUR WH USERNAME. ENTER YOUR WORK EMAIL ADDRESS. YOUR PASSWORD WILL NOT CHANGE WITH YOUR OTHER WESTERN HEALTH PASSWORDS (IT IS SEPARATE TO OTHERS AT WESTERN).

[Forgotten Password?](#)

For New Users

If you have never logged into RISKMAN.NET before, you can create a login for yourself now that will allow you to fill out an incident form immediately.

If you wish to do this please click the button.

What is	Staff responsibility	What happens next?
An Incident is an event or circumstance that could have or did lead to unintended or unnecessary harm to a consumer, staff member or member of the public	<p>Promptly respond to any incidents and hazards that come to your attention.</p> <p>Promptly report any incidents and hazards to your manager and via RiskMan.</p>	All incidents will be investigated to ensure the Adverse Outcome/Hazard/Feedback contributes to quality improvement to provide quality care for our patients along with a safe environment for all who enter our facilities.

User Resources

[Click HERE to access quick user guides and extensive Incident Types \(Classification\) cheat sheets located on the intranet. Click HERE to access the Health Care Incident Reporting and Investigation procedure.](#)

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The Riskman (VHIMS) learning package is now available in the Quality and Clinical Governance module in eLearn. Click on the link on the intranet and follow the prompts. <http://elearn.wh.org.au/>

For all issues with RISKMAN refer to the links above, ask your manager or fellow workers for assistance or contact Megan Clooney via email Megan.Clooney@wh.org.au. The Incident System Manager (Megan Clooney) is available to provide ongoing training for staff when requested/required. Please ask your Quality Manager or the Incident Sytem Manager to schedule a session.

NB: Please only contact IT on 28888 if you require assistance with your Western Health log in details.

Effective Risk Management

When an incident occurs you should review and follow these steps

- Assess the situation
- Immediately provide fist aid or call for further medical asistance
- Make the area safe and provide assistance to stakeholders involved
- Notify the incident factually to your manager for further advice and assistance and via RiskMan
- Contact significant others that an incident has occurred
- Confidentiality must be maintained by ensuring only factual infomation that does not attribute blame is documented on RiskMan
- An investigation will be conducted to establish the facts in all incidents as required
- OH&S staff may be involved in the investigation
- Couselling and debriefing will be offered to any staff involved in a serious incident



Incident Entry

Submit this form to record the incident.
You will be able to modify this page once it is submitted.

Type Of Notification

Notification Type*

Incident/Notification Type
The type of incident in this notification.

- **Clinical incident:** Harm was caused, or potentially caused, to at least one patient/client/resident but there was no harm to a staff member, contractor or other non-patient
- **OH&S incident:** Harm was caused, or potentially caused, to at least one staff member, contractor, visitor or other non-patient, but there were no patient/client/residents directly involved
- **Non clinical/non OH&S incident/issue:** The incident was not a clinical and/or OH&S incident/issue - use this notification type to record hazards in VHIMS

Who Is Reporting?

Reporter Role*

First Name Surname

Relationship to Persons Affected*

Who Was Affected?

Role*

UR No. / Employee No.

First Name* Surname*

Gender*

Date of Birth - Known*

Street

Suburb/City

Postcode

Preferred Language Indigenous Status

Interpreter Required?

What Happened?

Summary*

Details¹



Service Being Provided*

Activity/Procedure Description¹

Immediate Actions Taken*

Transferred to External Service Provider/Facility¹

Internal transfer required?

Yes No

NOK Notified

Discussed with Client/Carer¹

Details

Please provide a comprehensive description of what occurred, to assist us with reviewing this incident. Provide details of any error **observed**, but avoid statements of blame, and do not rely on hearsay or secondhand information. If other staff can provide further information, please note their names in the Personnel Involved area at the bottom of this section.

When Did It Occur?

Incident Date*

27 Aug 2012

Incident Time Known?

Yes No

Start of Incident Time Band*

Finish of Incident Time Band*

Duration of Incident*

Less than 1 day

Number of Occurrences*

1

Where Did It Happen?

Site

Location / Ward / Dept

Physical Setting*

Address Where Incident Occurred*

Postcode Where Incident Occurred*



Witnesses/Other Involved

Witness/First Attendee to Scene

First Name Surname

Others Involved

First Name Surname

First Name Surname

How Is It Classified?

Primary Incident Type

Related Incident Types

Did this involve?

Department Critical Incident? (DASWest Only) Yes No

Incident Assessment

Set Severity

Overall Severity (Actual) Unknown

Description of Possible Contributing Factors

Incident Follow-Up

Investigations/Findings

Investigated By

HALTS

Hungry

Angry

Late

Tired

Stressed





The end.

References

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