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| 5. | <input type="checkbox"/> + <input type="checkbox"/> = <input type="checkbox"/> |
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| Severity Scale: | | Preventability Scale: | |
|-----------------|--|-----------------------|--|
| 1 | Any incident with the potential to cause harm | 1 | Not preventable and originated in secondary care |
| 2 | Mild harm: inconvenience, further follow-up or investigation to ensure no harm occurred. | 2 | Preventable and originated in secondary care OR not preventable and originated in primary care |
| 3 | Moderate harm: required intervention or duration for longer than a day | 3 | Potentially preventable and originated in primary care |
| 4 | Prolonged, substantial or permanent harm, including hospitalization | 4 | Preventable and originated in primary care |

Patient Safety Incident:
“Any incident that caused harm, or could have caused harm to a patient as a result of their interaction with health care”
 (The definition encompasses error, harm, adverse event, significant event and near miss)

Step Three: Reflection, Action & Improvement

A. Please describe any Actions/Improvements made DURING the review (e.g. updated coding or prescribing)

B. What do you plan to do NEXT as a result of the trigger review findings?
 (Use PRIORITY scores to guide you - tick as appropriate)

| Specific actions | 1 | 2 | 3 | 4 | 5 | Please describe: |
|-------------------------------------|---|---|---|---|---|------------------|
| Significant event analysis | | | | | | |
| Audit | | | | | | |
| PDSA Cycle | | | | | | |
| Feed back to colleagues | | | | | | |
| Make a specific improvement(s) | | | | | | |
| Add to Appraisal documentation | | | | | | |
| Discuss with Educational Supervisor | | | | | | |
| Update or develop a protocol | | | | | | |

C. Please describe identified Personal, Professional or Practice Team Learning Needs:

Personal:

Professional:

Practice Team:

Please add any comments about the trigger review process: