



New Zealand Incident Management System

A NATIONAL APPROACH TO THE MANAGEMENT OF HEALTHCARE INCIDENTS

Issue 5 May 2009

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- NZIMS Training Programme FAQs
- Course feedback
- Information System

CONSULTATION

Draft IS Specifications
19 May – 16 June

CONTACT US

For more information about any aspect of the NZ Incident Management System please visit our website via:

<http://nzsip.comuniogroup.com>
or contact:

Melanie MacFarlane

Project Manager/Consultant

Mob: 021.330370

melanie.macfarlane@communio.co.nz

PO Box 7485, Wellesley Street,
Auckland

Or

Mark Harris (IS Workstream)

Project Manager/Consultant

Mob: 021.636967

mark.harris@communio.co.nz

PO Box 7485, Wellesley Street,
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RECENT ACTIVITY

Welcome to Issue 5 of the **New Zealand Incident Management System** newsletter.

Recent activity has focused on:

- Pre-training meetings with remaining DHBs
- Continuing to deliver the NZIMS training programme
- Commencement of the information system work stream.

NZIMS TRAINING PROGRAMME

There have been a number of frequently asked questions at the training sessions which we felt warranted a more formal response, primarily around the confidentiality and record keeping within the RCA process. These questions and answers are provided below.

What protection is there for staff participating in an RCA?

At present there is no legislative protection for the RCA process since it is system-based not individual-focused activity.

What about PQAA?

Protected Quality Assurance Activities applies to the ongoing assessment of a health practitioner (or group of practitioners), practices and competency. They encompass a wide range of activities including clinical audits, peer review and systems review. The protection applies to the activities of the established committees and their review activities. Application for PQAA must be made to the ministry. These activities focus on individuals or groups of individuals and their performance. RCAs do not address individual performance but focus on systems, hence they are not covered by PQAA.

Confidentiality

The RCA process is NOT confidential. Where the team identifies, through the RCA process, serious issues related to individual competence or performance, there is an obligation for this information to be managed through the organisation's routine performance management processes. The person who has commissioned the RCA should be advised of the findings.

Where the RCA training refers to confidentiality, it relates to information that is collected by the team only being used for the purpose of formulating the RCA report, and not being discussed at open forums or out of context of the RCA process.

What records need to be kept?

It is not advisable or necessary to take statements or tape the RCA interviews. If this is done they must be retained and are admissible should a complaint be made.

The District Health Boards General Disposal Authority (DA262) considers the following documents as working papers and as such must be retained for a minimum of 15 years after date of incident:

- Incident Reports
- Serious Event Reports
- Correspondence i.e. emails to RCA team, patient letters.
- Reports

The issue of storing the flip chart paper and post-it notes was raised with Archives NZ (they administer the DHBGDA), they stated that these do not need to be kept if they are planning documents for the final report and the information will be transferred.

The final report is an open document and will be retained as above.



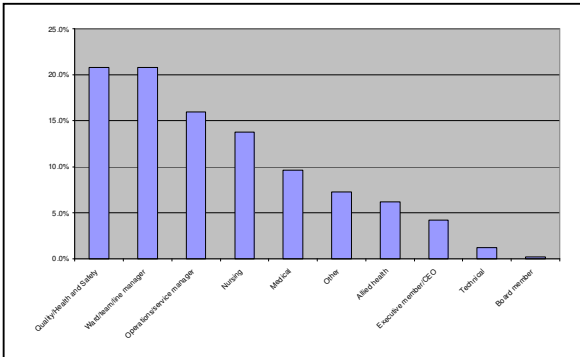
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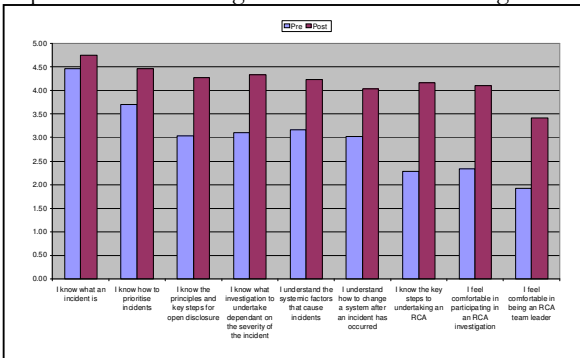
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COURSE EVALUATION

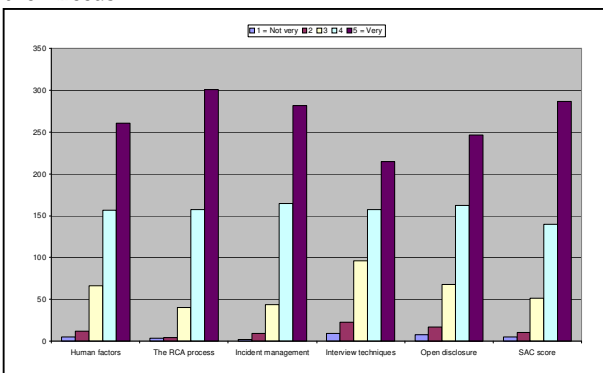
We are more than half way through the delivery of the NZIMS training programme having completed 12 of the 21 DHB's. The training has been well received with 711 people having attended the full 2 ½ days training and a further 282 the evening session only. The chart below demonstrates the demographics of those trained to date (all graphs exclude Canterbury DHB as these data have not yet been collated.)



The evaluation assesses participants' knowledge pre and post the training programme. The following graph highlights the improvement following attendance at the training.



Participants were asked to rate the relevance of each of the course subjects. The following graph demonstrates that 90% of participants felt all aspects of the training were relevant to their needs.



INFORMATION SYSTEM

Work has recently commenced on the third phase of the NZIMS project. The aim during this phase is to develop a series of specifications for the Ministry of Health for a nationally coordinated incident information management system. The purpose of this system is to support ongoing learning from, as well as management and prevention of, incidents in the New Zealand health and disability sector. This work has not been started until now to allow time to more fully understand the functional and technical operational implication of the national incident management policy. The development or purchase of a suitable system is not an aim of this project. It is important to note that the project will provide a specifications report at the completion of the project. This will not include recommendations regarding specific providers or type of system.

This component of the project involves the establishment of a reference group which widely represents many areas of the health and disability sector. It consists of representatives from many stakeholder groups including consumers, DHB's, health sector IT specialists, Primary Care, PHOs, the Midwifery Council, the Aged Care sector, Mental Health, Private Hospitals and the Ministry of Health. Communio is working with the reference group to prepare a draft document for national consultation. Once feedback has been received, a final submission will be made to the Ministry of Health by early August 2009.

This reference group will meet for an intensive workshop on April 27 to develop the draft specifications. National consultation will be carried out for a period of four weeks between May 19 and June 16. Notification of the consultation period will be widely distributed. The document will be posted for comment on the Communio website and submission invited via an electronic survey. Individuals or organisations are welcome to make submissions.

Key dates

- IS specifications workshop April 27
- Document open for sector consultation May 19
- Sector consultation closes June 16
- Report submitted to MOH August 3

Please be prepared for the posting of the draft IS specifications and kindly arrange an approach to consultation and feedback within your organisation to allow the timelines to be met





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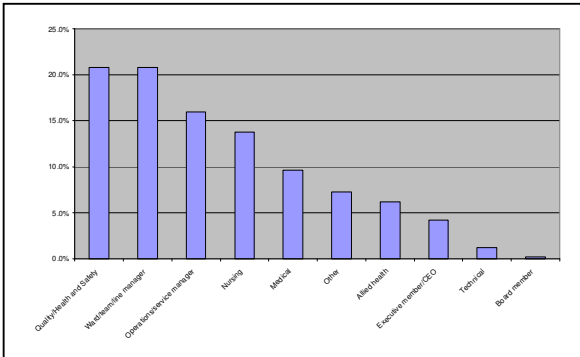
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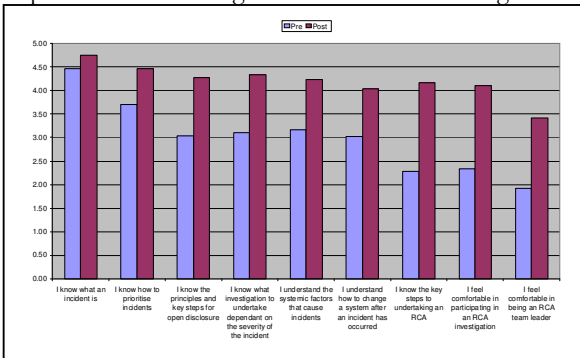
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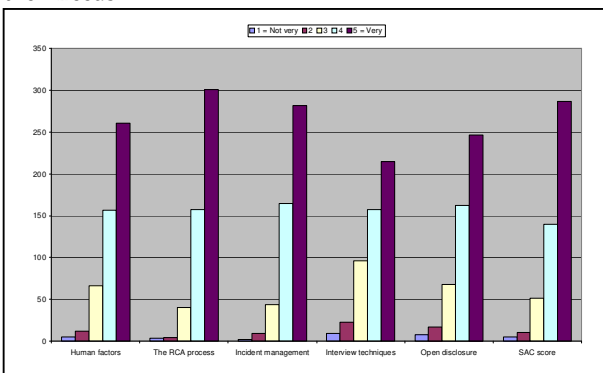
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