

SI Ref and Description	Date of Incident	Degree of Harm	Actions and Assurance
SI35323 Grade 3 HAPU	15.1.13	Moderate Harm	➤ 7 day RCA initiated and due to PCT/SHA on Wednesday 30 th January 2013.
SI35252 Grade 3 HAPU	14.1.13	Moderate Harm	➤ 7 day RCA initiated and due to PCT/SHA on Wednesday 30 th January 2013.
SI35163 Grade 3 HAPU	11.1.13	Moderate Harm	➤ 7 day RCA initiated and due to PCT/SHA on Wednesday 30 th January 2013.
SI35056 #NOF AAU	23.12.12	Severe Harm	➤ RCA highlighted that the Trust policy on Inpatient falls screening scale was not adhered to in a timely manner, lack of documentation on some occasions, confusion and agitation of patient not reported appropriately.
SI34716 HAPU Grade 3	24.12.12	Moderate Harm	➤ 7 day RCA initiated and due to PCT/SHA on an extended deadline of Friday 25 th January 2013
SI34756 HAPU Grade 3	29.12.12	Moderate Harm	➤ RCA concluded that the pressure ulcers to the nasal areas were unavoidable ➤ RCA highlighted more education around the waterlow and its interpretation although the documentation was good and daily waterlow assessments were carried out.
SI34245 HAPU Grade 3	9.12.12	Moderate Harm	➤ RCA concluded that PU was unavoidable ➤ All correct actions were in place and care given as per Trust policy; however the patient was not compliant despite having mental capacity.
SI33717 A&E Pressures	22.11.12	No Harm	➤ RCA highlighted the overall challenges and pressures our emergency department is facing, the current consequences and effects and actions being taken to maintain patient safety and mitigate risks. ➤ SI being put closure by the PCT they are satisfied that the proposed lines of enquiry for the incident as outlined in the 7 day report are being addressed through a number of actions agreed and discussed between our organisations.
SI33436 HAPU Grade 3	16.11.12	Moderate Harm	➤ RCA concluded that PU was unavoidable, PCT agreed and SI downgraded . ➤ Patient was not fully compliant with assessments and interventions in place ➤ RCA highlighted the importance of early and correct assessment of pressure areas

Feedback on the SI RCAs that were in progress at the November 2012 Board

SI32827 Pathological CTG Escalation	29.10.12	Severe Harm	<ul style="list-style-type: none"> ➤ RCA highlighted concerns relating to delays in escalating clinical concerns, CTG misinterpretation thus appropriate intervention was not performed, poor communication and documentation. ➤ There was good evidence of antenatal care overall
SI32942 HAPU Grade 3	29.10.12	Moderate Harm	<ul style="list-style-type: none"> ➤ RCA concluded that PU is unavoidable due to patient's medical history including poor nutritional status, decreased mobility and patient's unwillingness to comply with the repositioning regime. ➤ There was a lack of detailed documentation and RCA highlighted the importance of prompt, thorough, accurate documentation, to include, measures taken to minimise risk to the patient and the patients understanding of and compliance with these measures
SI32919 HAPU Grade 3	1.11.2012	Moderate Harm	<ul style="list-style-type: none"> ➤ RCA concluded that PU was unavoidable as the patient was non complaint, the relevant equipment was in place but the patient did not wish to use it and was aware of the risks. ➤ RCA highlighted poor documentation, lack of skin assessments, no pressure ulcer prevention care plan, confusion about the new care plans and their availability.

Dr Colin Johnston
Director of Patient Safety, Medical Director
22nd January 2013