

1. No Blame Incident/Accident Reporting

Policy

Canterbury DHB is committed to striving to “continuously improve all processes and services that support the care of our patients”.

Canterbury DHB supports a no-blame culture being developed for Canterbury DHB employees and staff working in services funded by Canterbury DHB to report incidents and accidents.

Canterbury DHB recognizes that despite the best intentions of competent and caring professionals, adverse events may occur and the Canterbury DHB takes a no-blame approach towards employees or staff working in services funded by Canterbury DHB for reporting them.

Canterbury DHB believes that:

- There must be a no-blame, supportive environment for all Canterbury DHB employees and staff working in services funded by Canterbury DHB to report adverse events and near misses.
- Many adverse events result from an inadequate or complex system.
- Incidents and accidents should be recorded, investigated and monitored in an attempt to establish trends and patterns, to learn from them and prevent a recurrence, thus improving patient safety.
- Incident and accident reporting is an important component of Canterbury DHB’s patient safety and risk management programme.

There may be particular circumstances where some action is required against employees or staff working in services funded by Canterbury DHB. These could include:

- Knowingly intentional acts with intent to harm or deceive.
- In the event it becomes clear that staff competency is the root cause for a pattern of errors, management will make every reasonable effort to ensure staff can reliably deliver safe care. If it becomes clear that a staff member cannot practice in a reliably safe manner by providing support such as education and mentoring, this situation will be treated as a staff competency issue through normal disciplinary procedures.
- Canterbury DHB recognizes that it does not have control over an investigation that has been activated by external agencies but it will provide support and encouragement where appropriate to those involved.

Policy Owner	Quality and Patient Safety Council
Policy Authoriser	Clinical Board
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