

**Stinson, Emma M**

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**From:** Stinson, Emma M  
**Sent:** 01 February 2010 10:01  
**To:** Carroll, Anita; Carroll, Ronan; Gibson, Simon; McVey, Anne; Stead, Lindsay; Trouton, Heather  
**Cc:** Burrell, Gail; Lappin, Aideen; McCullough, Elizabeth; Murphy, Jane S  
**Subject:** \*AGENDA\* Action notes and Papers for Acute Monthly Governance Meeting  
**Attachments:** Acute Services Governance Agenda 2 2 10.doc; Actions - Mtg 080110- Governance meeting minutes (3).doc; Item 3iv)Analysis of complaints from MLAs final to SMT.DOC; Item 3iv) comps rec by CE office flowchart (2).ppt; Memo From Dr Loughran.pdf; Professional and Operational Management.pdf

Dear All

Please see attached the agenda, action notes and papers for the Acute Monthly Governance meeting on Tuesday 2nd February 2010 in the Meeting Room, Trust HQ at 2.00 pm.

Many thanks

Emma

Emma Stinson  
Administrative Assistant to Dr Gillian Rankin, Interim Director of Acute Services Admin Floor  
Craigavon Area Hospital

Tel: [Personal Information redacted by USI]  
Fax: [Personal Information redacted by USI]

**Acute Directorate Governance Meeting****AGENDA**

for meeting to be held on Tuesday 2<sup>nd</sup> February 2010, 2.00 pm – 4.00 pm  
in the Meeting Room, Trust HQ

**1. Risk Register**

- Review of Divisional high level risks
- Review of Directorate/Corporate risks
- Divisional/Service mechanisms to identify and mitigate risks
- Monitoring Trends

**2. Incident Reporting**

- Review by Division/Service/Site
- Trends, learning and action plans
- SAIs – action plans for each to be updated and presented

**3. Complaints**

- Directorate compliance with 72%
- Trends on causes of complaints
- Actions and assurance
- Discharge documentation medical nursing

**4. NICE/TRIM Guidance**

- Process for implementation and assurance

**5. Professional Governance**

- Roles and responsibilities
- Clinical Supervision Development Review
- Mechanisms to implement and assure Trust Governance agenda
- Nursing Workforce Review
- Medicines Governance

**6. Specific Governance Issues**

- MEWS, OEWS and CTG
- Fire Training
- HCAI and dashboards, ICNA Audits
- Blood Safety
- Hyponatraemia
- Consent CAS

**7. Effectiveness and Evaluation programme by Division****8. Patient Safety Programme Report – Colum Robinson****9. Enhanced reporting of deaths for information****10. Litigation Update.**

**11. Any Other Business**

- 12.** Date of next meeting – Tuesday 2<sup>nd</sup> February at 2.00 pm in the Communications Room, Admin Floor, CAH with video-conferencing facilities in Committee Room 2, Daisy Hill Hospital

# Acute Services Management Team Meeting

Notes & Actions of Meeting held on Friday 8<sup>th</sup> January 2010 at **2.00 pm**  
in the Meeting Room, Trust HQs, College of Nursing, Craigavon Area Hospital with Video  
conferencing facilities in Tutorial Room, Daisy Hill Hospital

**Present:-**

Dr Gillian Rankin, Lindsay Stead, Heather Trouton, Ronan Carroll, Anita Carroll, Anne McVey, Beatrice Moonan

**Apologies:-**

David Cardwell

**ITEMS DISCUSSED**
**ACTIONS**
**Notes of Previous Meeting**

This is the first formal meeting dedicated to Governance matters .

**Matters Arising**

Dr Rankin, Mrs McAlinden and Mr Rice will attend a regional financial workshop on Monday 11<sup>th</sup> January.

All AD's are required to review all monies allocated to the Trust in the last 2 years for Service Development and advise if any proportion of this has not been spent (list to be circulated). A response is to be coordinated by Mr Simon Gibson.

**Simon Gibson**

Dr Rankin and AD to meet with all Ward managers on the CAH site and the DHH site with regard to the recent winter pressures experienced. Emma to arrange for Dr Rankin to attend relevant meetings. No more than 15 ward managers to attend each meeting.

**Emma Stinson**

**1. Risk Register**
**Review of Divisional high level risks**

Each ward to complete a ward risk register. Those risks which cannot be managed at ward level to be populated onto the divisional risk register. Those risks that cannot be dealt with at divisional level to be added to the Directorate register and again only those risks which lie outside of the control of the Directorate are to be put onto the Corporate Risk Register.

At each level there is to be an action plan to deal with the identified risk so that the risk register is a live rolling register with risks being taken off and others added on as they are dealt with / or identified.

**Review of Directorate/Corporate Risks**

As above.



<p><b>Divisional/Service mechanisms to identify and mitigate risks</b></p> <p>Each area to produce action plans, at each level. Heads of Service to review clinical incidents each month and create an action plan to ensure that processes are put in place to reduce/ eradicate the probability of the incident occurring again as far as is possible.</p> <p>Heads of Service to link in with Beatrice to manage action plans and continually update the register.</p> <p>Need to create a Directorate wide protocol for managing this whole process.</p> <p>Directorate governance meeting to be mirrored at divisional level.</p> <p>Create an accountability structure at divisional level to ensure that this work is managed appropriately.</p> <p>Develop links with medical colleagues - ? audit meeting.</p> <p>Learning across divisions.</p> <p>Monitoring Trends</p>	
<p><b>2. Incident Reporting</b></p> <p><b>Review by Division/Service/Site</b></p> <p>All divisions to review monthly incidents at divisional meetings or another suitable forum. Action plans to be developed to prevent repeated occurrence as far as possible.</p> <p>Trends, learning and action plans</p> <p>Beatrice to develop trend information for the next meeting.</p> <p>SAIs – action plans for each to be updated and presented</p>	Beatrice Moonan
<p><b>3. Complaints</b></p> <p>Directorate compliance with 72%.</p> <p>Good compliance with timely turnaround on complaints. Please keep up the good work.</p> <p>Trends on causes of complaints</p>	

<p>Actions and assurance</p> <p>David was unavailable for the meeting <span style="background-color: black; color: black;">Personal information redacted by the USI</span> so this will be explored further at our next meeting.</p>	
<p><b>4. NICE/TRIM Guidance</b></p> <p><b>Process for implementation and assurance</b></p> <p>Discussion arose regarding the role and responsibilities of the newly advertised post of 'Head of Governance'. It is felt that the governance team will be of great support to the Acute Directorate as we internally create a robust method of dealing with all the recommendations which are published by NICE etc. However, we as the Acute team need to create a clear and robust process for proactively implementing relevant guidance etc into our clinical practice. Agreed that we will identify an acute lead(s) for each standard.</p> <p>We need to have very clear professional responsibility lines.</p> <p><b>ACTION</b> – Dr Boyce to meet with Dr Rankin re poor attendance at the non medical prescribing meetings to devise a new strategy to promote same.</p> <p>It is to be expected that all staff to attend regional learning events report back to their Line Manager on learning achieved so that this can be disseminated to all appropriate personnel.</p> <p>AD's to have a clear mechanism in place for liaising with their relevant AMD to discuss and implement Guidelines etc.</p> <p>.</p>	<p><b>Dr Boyce</b></p>
<p><b>5. Professional Governance</b></p> <p><b>Roles and responsibilities</b></p> <p><b>ACTION</b> – Dr Rankin to meet with Anne, Ronan and Heather to discuss Professional responsibility for Nursing within Acute.</p> <p>Mechanisms to implement and assure Trust Governance agenda</p> <p><b>Medicines Governance</b></p> <p>Dr Boyce gave a report on Medicines Governance. An issue was raised re non follow up on two near miss events which could have had serious consequences. Dr Boyce to explore further detail on these events and team up with the relevant AD's to put an action plan in place</p>	<p><b>Dr Rankin/Anne McVey/Ronan Carroll/Heather Trouton</b></p>

**6. Specific Governance Issues****MEWS****Fire Training****HCAI and dashboards****Blood Safety****Hyponatraemia**

In addition to the list above , the following areas should be reported on and discussed also:-

CTG monitoring  
Consent  
Controls assurance

We required reports on each of the above to be brought to the monthly governance meeting. These are to take the form of a short report highlighting only areas of exception.

There should be renewed emphasis on all wards maintaining a well presented and up to date ward nursing dashboard.

Dr Rankin wishes to visit the following areas with the relevant AD. – DHH  
Theatres  
Surgery

**ACTION** – Emma Stinson to coordinate in diaries please.

**Emma Stinson**

**RE Training** – All divisions to keep a training register which is proactively managed to ensure that all nurses are trained and that regular updates are managed.

**7. Effectiveness and Evaluation programme by Division**

For 2010 the Acute Directorate need to prioritise its requirements for clinical Audit. Can all divisions, in conjunction with their AMD please create a list of audit requirements with a rational for same.

Colm Robinson to attend the next meeting and report on The Patient Safety Program.

**Emma Stinson****8. Enhanced reporting of deaths for information**

Dr Loughran has prepared a paper re same.

**9. Any other business**

For future meetings could the following be added to the Agenda:-

Litigation Items  
Clinical Supervision  
CHKS Action Plan.

**10. Date and time of next meeting**

The next meeting will be held on Tuesday 2<sup>nd</sup> February 2010.

## **Analysis of complaints from MLAs / Public Representatives between April 2009 – December 2009.**

### **Background to issue**

- New DHSSPS complaints standards and guidelines for resolution were introduced April 2009.
- Standards include requirement for consent and timescales for response, ie 2 days to acknowledge, up to 20 days to respond in full.
- Trust guidance (July 2008 Guidance on responding to requests for personal data from elected representatives such as MLAs) sets out when consent is required and the occasions when data can be released without consent. This document may require review to ensure it is in line with regional guidance.
- Public representatives also contact the Chief Executive's office directly leading to a risk of commencing a dual investigation process / consent having to be sought retrospectively.
- The Chief Executive's office also receives regular phone calls seeking progress updates on complaints.
- Patient / Client Liaison staff recommend that all complaints / enquiries about individual patients and clients should only be channelled through central reporting for action, in line with the regional standards and respecting the ethos of local resolution.

Volume of formal complaints from public representatives and response times April – Dec 09.

Directorate	No of complaints	Average Response time (days)
Acute	15	8.5
CYP	4 (no consent for 1)	5 (based on 3 responses)
MHD	12	12
OPPC	14	12.5
	Total 45 (5 a month)	Trust average 9.5 days

*Please note these figures do not capture informal activity.*

### **Recommendations and areas for discussion.**

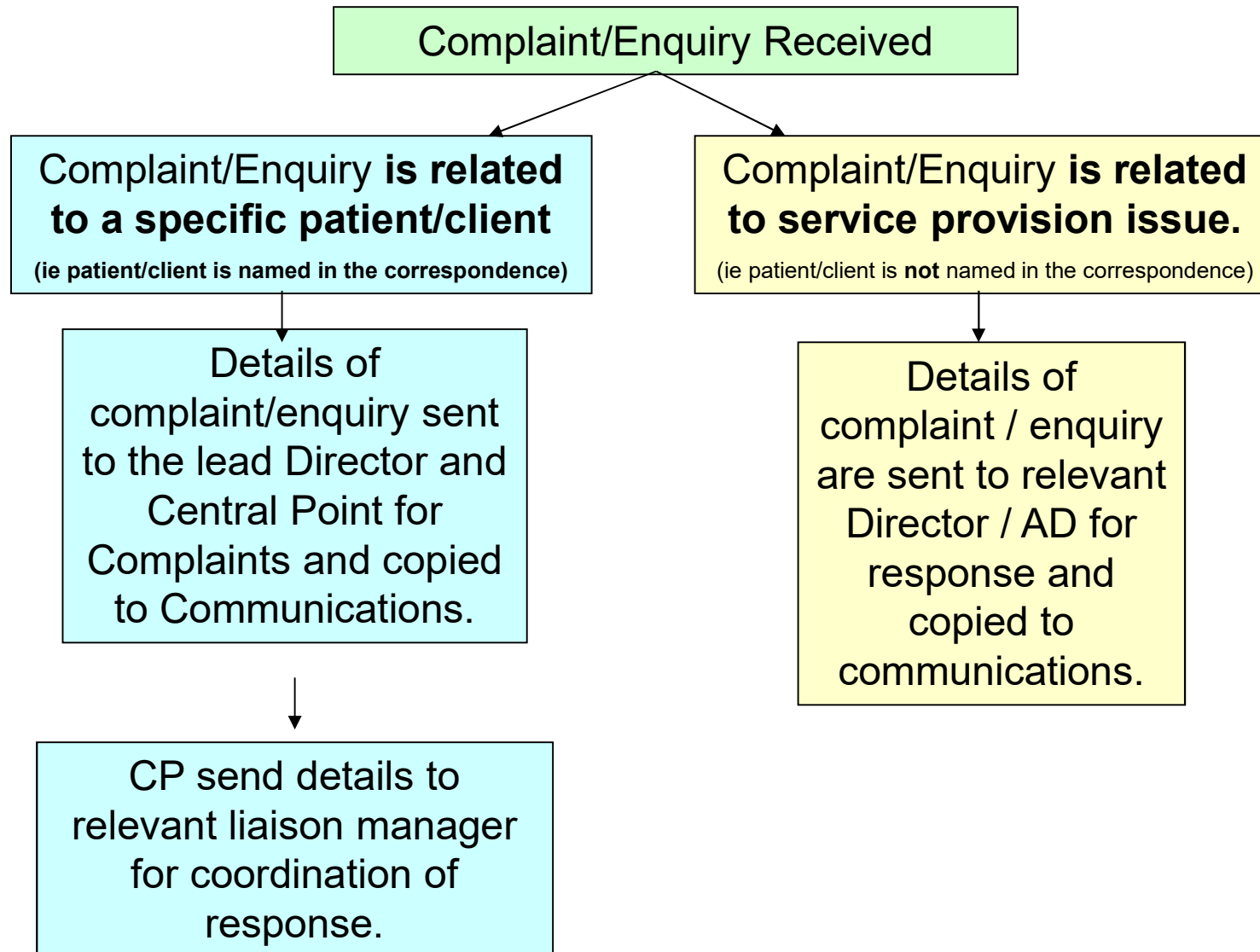
- 1 Agree a method of handling enquiries and complaints which are channelled through the Chief Executive's office. (Suggested flow chart attached). This method has been stated in the Trust complaints procedure section 10.1 ie *"Details of all complaints either formal or locally resolved should be forwarded initially to the CRP"*.
- 2 Provide staff in the Chief Executive and Communications office with read only access to DATIX so the status of current / previous complaints can be checked in the first instance. This can be followed up if required through the Patient / Client Liaison Manager dealing with the enquiry/complaint as they may be aware of issues which may not necessarily be recorded on Datix. The complaints are usually at one of a number of stages ie acknowledged, consent requested, investigation

commenced, draft response, final response. Some may be on hold for other reasons eg Protection of Vulnerable Adults (PVA) enquiry, adverse incident investigation initiated etc.

- 3 Write to all Southern Trust MLAs and Councils including the following messages:-
  - Explain the channels in place to deal with enquiries or complaints they may have including information about the Patient Support service.
  - Highlight response performance percentage.
  - Include consent form to enable MLAs to obtain consent at the point when the complaint is made rather than the Trust obtaining same subsequently. The consent form could also be made available on the Trust's website to further expedite the process.
  - Explain that we aim to resolve complaints in a timely manner and within the timescales of the complaints procedure. (It should also be highlighted that many issues are resolved on the day the complaint is received or within 3 or 4 days. If a matter can be resolved immediately then the Trust aims to do so).
  - Complex complaints may require longer to fully investigate in order to provide a considered and detailed response.
- 4 Given the relatively low volume of formal complaints from public representatives, CRP could notify the Chief Executive and Communications offices (for information only) upon receipt of the complaint in addition to the lead Director. This would facilitate consideration of the complaint against other planned public affairs activity – for example the Chief Executive may be meeting the MLA in question or the complaint may already be attracting Ministerial or media attention.
- 5 The Trust will aim to respond to MLA enquiries within 2 weeks and advise them if the process will take longer than this.
- 6 This paper does not examine the role of the Patient Support Service in dealing with enquiries from public representatives. This service has recently been connected to DATIX so contacts via this route could also be accessible in real time although the planned additional resource in this area has recently been temporarily withdrawn under contingency measures. Could consideration be given to CRP take a lead role in logging this data? The Patient Support has dealt with approximately 14 enquiries from public representatives since August. 09. It is recommended that the Chief Executive, the lead Director and Communications should be notified of these at the point of receipt for the same reasons as outlined above.
- 7 The functions of the Patient Support service and Patient/Client Liaison service need to be clarified within the acute setting as there may be ambiguity regarding the differing roles. Currently all complaints including those from public representatives should be passed through Patient/Client Liaison Department in the first instance.

- 8 Patient advocates are already in post within Learning Disability and Mental Health Services. There are plans to extend the Patient Support service to cover all adult acute services.
- 9 It is important to ensure that lessons are learned from the totality of complaints and enquiries received. SMT, Governance Committee and Patient Client Experience Committee already receive information relating to all formal complaints. This report could be expanded to include all other contacts / enquiries received via Chief Executive's office and the Patient Support Service.

## Flowchart for Complaints/Enquiries Received by Chief Executive's Office







Southern Health  
and Social Care Trust

Quality Care - for you, with you

WIT-16963  
Directorate meeting  
next week. under A&B

YB

## Memorandum

**To:** All Ward Managers in Acute and Non Acute Hospitals  
**From:** Dr Patrick Loughran, Medical Director  
**Date:** 27 January 2010  
**Subject:** Hospital Visiting Times Policy

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Dear Manager

I write to ask for your extra vigilance during these winter months, in ensuring that the Trust's Visiting Times Policy and Guidelines are respected.

Unfortunately at this time of year, bugs are much more common in the community and despite all of your efforts towards prevention, infection can still be brought into our hospitals where patients are vulnerable.

I am appealing to you as managers to help prevent the spread of infection by encouraging visitors only to come to the hospital if they really must and by ensuring that the Trust's Visiting Times and Visiting Guidelines are adhered to.

The Guidelines include:

- Visitors washing their hands or using the alcohol hand rub provided before and after visiting.
- A maximum of two visitors per patient at any one time.
- No children under the age of 13 to visit wards unaccompanied by an adult.
- The Trust endorses a clear locker top approach to improve access for cleaning and to help prevent hospital acquired infections.
- Friends and relatives are asked not to send flowers or unnecessary items.
- Perishable food should not be brought into the hospital for patient's consumption.
- Visitors are asked not to sit on the bed or touch wounds, drips or drains.
- Visitors are asked not to visit if they are ill or might be an infection risk to others.

Whilst we want to provide access to relatives and friends, this guidance has been developed to allow you to provide a supportive, caring atmosphere for patients and to help prevent infection.

You should have Visiting Times posters available at your ward entrances along with the Trust's Visiting Times Guidance. If you need any more of these please contact the Communications Team (Tel: 028 3861 3965). The Trust's Visiting Times Policy for Acute and Non Acute Hospitals can be downloaded from the intranet – [click here](#) (or go to policies and procedures/Acute Services).

I thank you for your continued support and commitment to infection prevention and control.

**Copy To:**

### Visiting Times Policy – Communications Plan

Communications of the Trust's Hospital Visiting Times Policy is a key part of the Healthcare Associated Infection Communications Strategy.

The action plan below details the specific communications activity relating to the Visiting Times Policy to date and planned for the coming months.

Date	Audience	Activity	Status
December 2007	Staff	Ministerial launch of visiting times policy – Ebrieff	Complete
	Staff	Policy available on Trust intranet	Complete
	Staff, visitors and patients	Posters on all wards, leaflets distributed	Complete
January 2008	Staff	Article on Ministerial launch in UP2date	Complete
July 2009	Public	Press release to local papers advising of visiting times policy.	Complete
		A number of the local papers agreed to run a monthly visiting times reminder.	
August 2009	Public	Monthly visiting times reminder to all local papers.	Complete
September 2009	Public	Monthly visiting times reminder to all local papers.	Complete
October 2009	Public	Monthly visiting times reminder to all local papers.	Complete
		Infection Control Week – press release and Ebrieff message from Dr Loughran	
November 2009	Public	Monthly visiting times reminder sent to all local papers.	Complete
December 2009	Public	Monthly visiting times reminder and winter infection control message from Dr Loughran press release and Ebrieff.	Complete
January 2010	Public	Monthly visiting times reminder to all local papers.	Complete
February 2010	Staff	Ebrieff reminder of hospital visiting times policy.	
	Staff	Visiting Times policy to be raised at Team meetings (Memo from Mairead McAlinden to be cascaded via Directors)	
	Staff, patients and visitors	Visiting times posters and leaflets to be replenished on wards.	
	Public, staff	Press feature/Up2date from a staff member on importance of visiting times policy e.g. Lead	

		Midwife – focus on Maternity.	
March 2010	Public, staff	Press feature/UP2date from a staff member on importance of visiting times policy e.g. Consultant Surgeon – focus on Surgical.	
April 2010	Public, staff	Press feature/Up2date from a staff member on importance of visiting times policy e.g. Medical Consultant – focus on Medical.	

ADS Governance meeting  
February.

Yp



Southern Health  
and Social Care Trust

***Good Practice Guidance:***  
***Professional and Operational Management***  
***Interface within the Integrated Care Teams***

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## 1.0 Introduction

The Trust's core business is the delivery of safe and effective quality care and services to its population. Effective supportive arrangements, communication and information systems are needed to both inform and provide assurances that the organisation is safe and fit for purpose. The Southern HSC Trust considered that the best way to achieve this was through the establishment of Care Directorates, namely, Acute; Older Persons and Primary Care; Mental Health and Disability and Children and Young People. Within each of the directorates the delivery of care and service is now the responsibility of newly established Integrated Care Teams.

- 1.1 In the past care and services were often delivered by individual professional groups working side by side, each having a profession-specific care plan for the patient/client which was, when required, shared with other professionals. Staff were usually managed by a senior member from the same profession. However, with RPA, the Southern Trust considered that multidisciplinary and multi-agency teams, in the form of Integrated Care Teams, would support a more holistic and patient/client centred approach to the delivery of care. The significance of the Integrated Care Team approach is that it is known to improve the health and well-being of service users and affords the best use of HPSS resources. In addition, the Integrated Care Team supports a culture of innovation, continuous improvement in the quality of care and organisational modernisation.
- 1.2 The nature of the Integrated Care Team means that staff no longer work along exclusively professional lines and may now report to a manager who is not of the same profession. This new way of working presents challenges to individual staff, professional groups and to the establishment of new Integrated Care Teams. However, in progressing with organisational change the Trust has a responsibility to ensure that the relevant advice and expertise of individual professional groups are taken account of and supported in decisions relating to the development and delivery of care and services.

## 2.0 Guidance on Operational and Professional Management\* Interface

With the establishment of the new Integrated Care Teams staff and managers have sought clarification as to who will be managing the various operational and professional management aspects of their work. In order to support staff and managers the Trust has developed this guidance to clarify operational and professional managers' roles and responsibilities and the required interface around key activities. The roles and responsibilities of operational and professional managers are outlined in section 4.0 below.

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\* An Operational or Professional Manager may be an Assistant Director, an Associate Medical or Clinical Director, a Head of Service or a Team Leader.

An Operational Manager may also hold Professional Management responsibility for his/her individual profession.

### 3.0 *Through partnership and collaborative working this Good Practice Guidance will: -*

- Provide clarity on the role and responsibilities of Operational and Professional Managers;
- Provide consistency of approach and standardisation of practice in relation to key activities across the organisation;
- Provide a structured framework to ensure that the wider professional issues are being addressed and that statutory requirements are being adhered to;
- Will ensure a cohesive approach to multidisciplinary team working which will contribute to the enhancement of the patient/client experience, improve the quality and safety of care, promote the identification and management of risks, and ensure the key targets and objectives if the Trust are met.

### 4.0 *Roles and Responsibilities of key managers*

Trust management roles and responsibilities can be divided into two key functional areas, namely Operational Function and Executive/Professional Function.

#### 4.1 *Operational Function*

Each **DIRECTOR** is responsible for the delivery of safe and effective quality care and services within the directorate. He/she is also the accountable officer responsible for ensuring clinical and social care governance arrangements are in place, including the implementation of any statutory functions, within the directorate. Effective governance is necessary to ensure care is delivered in a safe and effective manner. The responsibility will be delegated to the directorate's operational managers, such as, the assistant director(s) and/or tier 4 or 5 divisional leads or heads of services.

- 4.2 The **OPERATIONAL MANAGER (OM)** who may be the assistant director(s), tier 4 or 5 divisional leads or heads of service has responsibility for the day-to-day operational management, planning, delivery and review of care and services within the directorate. The operational manager may not be of the same profession as the staff providing the care within their division, and where this is the case, the operational manager will work in partnership with, and where relevant, seek and act on advice from relevant professional officers or leads to ensure safe and effective care is delivered and effective professional governance arrangements are in place.

#### 4.3 *Executive / Professional Function*

There are three **EXECUTIVE DIRECTORS with a professional remit** in the Southern Trust, namely an Executive Nurse/AHP, Social Worker and Medical Director. In addition to the operational function, the Executive Directors are responsible for assuring the Trust Board that the organisation has sound arrangements in place to achieve high standards of professional governance. This includes ensuring that there are evidenced-based, safe professional standards and process in place; that the workforce is skilled and knowledgeable in order to meet the needs and objectives of the Trust and that staff are supported and supervised in undertaking their professional roles.

- 4.4 In supporting the Executive Director, the **PROFESSIONAL MANAGER (PM)** will provide expert advice and support in relation to professional rules/standards/guidance/ to the operational managers in relation to professional specific matters. A professional manager may be an assistant director, an associate medical director or clinical director, a tier 4 or 5 divisional lead or head of services. The professional manager will provide support and advice to the operational manager in order to provide assurance that safe and effective care and service arrangements including review processes are in place; that staff have access to appropriate training and development; that they adhere to the relevant professional code of conduct, standards and ethics.

- 4.5 The Executive Directors of Nursing / AHP, Social Care and Medical Directors are supported in their professional role by **ASSISTANT DIRECTORS of NURSING, AHP AND SOCIAL CARE GOVERNANCE AND ASSOCIATE MEDICAL DIRECTORS**. They assist the respective directors to provide the assurances to Trust Board that the trust has robust arrangements in place to achieve high standards of governance within the nursing, AHP, medical and social care professions. They liaise and work collaboratively with staff across all directorates in order to monitor, evaluate and report on the quality of practice and services. They are involved in the analysis of data internal to and independent of the Trust and undertake and commission audit, review and evaluation of practice. The Assistant Directors and Associate Medical Directors are responsible for advising the Trust on legislation, rules, standards and guidance pertaining to the professions. They work closely with the Performance and Reform, Finance, Human Resource and respective operational management systems to ensure the integration of good governance arrangements including staff development and modernization issues.



→ **RECRUITMENT and RETENTION**

SUBJECT	Operational Manager* (OM)	Professional Manager* (PM)	Employee (E)
Recruitment	<ul style="list-style-type: none"> <li>• Complete request documentation</li> <li>• Progress recruitment / consider referral to Scrutiny Committee</li> <li>• Take the lead and liaise with PM &amp; or HR in relation to:-               <ul style="list-style-type: none"> <li>(i) reviewing job description, / specification, / job plan, post banding (except for regionally agreed posts)</li> <li>(ii) agreeing advertisement/ dates for short-listing and interview</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ Provide advice to OM</li> <li>▪ Advise on / recommend external assessor</li> <li>▪ For doctors in training grades recruitment via NIMDTA in liaison with HR &amp; OM</li> <li>▪ For non training grades (Specialty Doctors &amp; Consultants) processes and panels as per Regional Guidance.</li> </ul>	<ul style="list-style-type: none"> <li>• Comply with Trust procedures</li> </ul>
	<ul style="list-style-type: none"> <li>▪ <b>OM and PM, in consultation with HR will: -</b> Validate the suitability of appointments from the waiting list that is held by HR</li> </ul>		
Interview Process	<ul style="list-style-type: none"> <li>▪ Convene and Chair Panel in full co-operation with PM</li> </ul>	<ul style="list-style-type: none"> <li>▪ For medical staff as per national advice (interpreted by SHSCT &amp; BMA) HR &amp; Medical Directorate advise &amp; support each other</li> <li>▪ Advise on constitution and professional Panel members in line with Trust and Professional guidance</li> <li>▪ Through examination of the professional competence and knowledge of each applicant</li> <li>▪ HR to check Registration Status of applicant</li> <li>▪ Panel constitution for non training medical staff as per medical HR.</li> </ul>	

\* An Operational or Professional Manager may be an Assistant Director, an Associate Medical or Clinical Director, a Head of Service or a Team Leader.

An Operational Manager may also hold Professional Management responsibility for his/her individual profession.

→ **RECRUITMENT and RETENTION (continued)**

SUBJECT	Operational Manager* (OM)	Professional Manager* (PM)	Employee (E)
Commencement	<ul style="list-style-type: none"> <li>▪ Complete the Commencement form</li> <li>▪ Ensure all checks have been completed</li> <li>▪ Inform PM of start date</li> </ul>	<ul style="list-style-type: none"> <li>▪ For medical staff HR advises PM and collates "checklist". PM liaises with OM</li> <li>▪ Medical training Grades intake Feb/Aug</li> <li>▪ Ensure professional supervision arrangements are in place</li> </ul>	<ul style="list-style-type: none"> <li>▪ Submit necessary information</li> </ul>
Induction	<ul style="list-style-type: none"> <li>• OM to provide assurances that corporate / departmental induction / preceptorship programmes are in place and implemented</li> </ul>	<ul style="list-style-type: none"> <li>• For medical staff- <u>training grades</u> induction dovetails Feb/Aug intakes</li> <li>• Non trainees (specialty Doctors &amp; Consultants) departmental &amp; generic induction (2-3 times yearly) agreed with OM, PM &amp; HR</li> <li>• Lead role on profession service specific departmental induction</li> <li>• Arrange preceptorship / mentorship for junior qualified staff</li> </ul>	<ul style="list-style-type: none"> <li>• Employee must undertake to attend and completed all induction programmes as required.</li> </ul>
Supervision	<ul style="list-style-type: none"> <li>▪ Responsible for operational issues on a day to day basis</li> <li>▪ Report professional issues to PM</li> <li>▪ Ensure appropriate arrangements for management and professional supervision are in place</li> </ul>	<ul style="list-style-type: none"> <li>▪ Identify/schedule professional practice supervision sessions</li> <li>▪ Agree implementation plans with OM for all functions of supervision</li> <li>▪ Report professional issues to OM</li> <li>▪ For medical staff training grade supervision is by Lead / Supervising Consultant.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Complete documentation and follow Trust policy on supervision</li> <li>▪ Seek appropriate support in relation to Child Protection /VA supervision</li> </ul>

→ **RECRUITMENT and RETENTION (continued)**

SUBJECT	Operational Manager (OM)	Professional Manager (PM)	Employee (E)
Professional Registration	<ul style="list-style-type: none"> <li>• Ensure that all registered members of staff within area of responsibility are appropriately qualified and registered to practice;</li> <li>• Advise the PM if an E's name has been removed from the professional register.</li> <li>• Notify the Salaries and Wages Department (using a Staff Amendment Form) where staff status has changed, for example, if the staff member is suspended without pay as a result of an invalid registration.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that all professional staff members within their area of responsibility comply with the Trust's Registration Policy &amp; Procedures (2009).</li> <li>• Alert all professional staff to renew their registration prior to the expiry date.</li> <li>• If it becomes apparent that a professional has allowed their registration to lapse then ensure that the incident is immediately and fully investigated and agree the action that is required with the Assistant Director / Director in conjunction with advice from Human Resources;</li> <li>• Notify the staff member's relevant regulatory body.</li> <li>• Carry out audit checks to provide assurances that all staff are adhering to their registration responsibilities as outlined in their work contract and policy document.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that the renewal process is completed before the expiry date</li> <li>• Inform his/her line manager immediately if they experience difficulties in renewing their registration;</li> <li>• Advise his/her line manager of changes to their registration status (additions, cautions, suspensions) imposed by the regulatory body.</li> </ul>

→ **RECRUITMENT and RETENTION (continued)**

Rotational Posts	<ul style="list-style-type: none"> <li>Agree approach / arrangements for management of rotational posts / schemes with PM</li> </ul>	<ul style="list-style-type: none"> <li>Organize and communicate rotational post arrangements with OM</li> </ul>	<ul style="list-style-type: none"> <li>Comply with arrangements set out for rotational programme</li> </ul>
Student Placements (incl. Under and Post Graduate)	<ul style="list-style-type: none"> <li>Liaise with PM re student placement timetabling in line with Trust SLAs &amp; contracts</li> </ul>	<ul style="list-style-type: none"> <li>Co-ordinate student placement with educational bodies and communicate arrangements with OM</li> <li>For social work co-ordinated through Social Services Training Unit</li> <li>For medical students PM or educational supervisor comply with processes in place for each specialty as agreed with Medical Directorate &amp; QUB</li> </ul>	<ul style="list-style-type: none"> <li>Adhere to the Trust / HEA contractual arrangements / agreements</li> </ul>
Resignation of Team Member	<ul style="list-style-type: none"> <li>Process documentation</li> <li>Discuss and agree replacement option and recruitment plan with PM</li> </ul>	<ul style="list-style-type: none"> <li>For medical staff divisional PM, OM &amp; HR</li> </ul>	<ul style="list-style-type: none"> <li>Submit resignation to OM</li> </ul>



## PROFESSIONAL GOVERNANCE / PERFORMANCE MANAGEMENT

SUBJECT	Operational Manager (OM)	Professional Manager (PM)	Employee (E)
Individual Professional Governance Forum to ensure safe and effective care and implementation of HPSS Quality Standards	<ul style="list-style-type: none"> <li>To facilitate attendance at professional Governance Fora, professional staff meetings, professional specific training</li> <li>Facilitate the implementation of professional specific items from Governance Fora agenda</li> </ul>	<ul style="list-style-type: none"> <li>Provide OM with information relating to the Forum business ie professional practice matters arising</li> <li>To provide schedule of Professional Governance Forum Meetings to individual staff member and OM</li> <li>Set profession-specific targets advising on training and development and action planning</li> <li>For medical staff PM &amp; OM establish Forum at specialty/sub- divisional level to discuss/ share professional standards. PM feeds back to Medical Director (MD) &amp; Governance system.</li> </ul>	<ul style="list-style-type: none"> <li>Understand profession and personal responsibility in relation to all governance matters</li> <li>Actively contribute to the continuous quality improvement of care and services</li> <li>Input to Professional Governance Forum</li> <li>Have knowledge of and access to Trust's Whistle Blowing procedures</li> </ul>
Risk / Risk Management / Adverse Incidents	<ul style="list-style-type: none"> <li>Lead accountable officer for governance/risk on operational day-to-day basis.</li> <li>Seek expert advice/ report issues to PM.</li> <li>Agree action plan with PM to address risks, dissemination of shared learning and best practice.</li> </ul>	<ul style="list-style-type: none"> <li>Provide expert advice on:               <ul style="list-style-type: none"> <li>Quality related issues</li> <li>Identification / management of risk</li> <li>Development of Action Plans emanating from identified risks/adverse incidents.</li> </ul> </li> <li>Promote and ensure dissemination of learning and best practice. Lead accountable officer on professional risk issues</li> <li>For medical staff OM &amp; PM work jointly to support risk management. PM to feedback to MD &amp; Governance system</li> </ul>	<ul style="list-style-type: none"> <li>Actively identify and contribute to the management of adverse incidents and any learning</li> <li>Adhere to Trust/ Directorate/ risk strategy and related policies</li> <li>Contribute to the population of the risk register</li> <li>Submit necessary information to OM</li> </ul>

## PROFESSIONAL GOVERNANCE / PERFORMANCE MANAGEMENT( continued)

SUBJECT	Operational Manager (OM)	Professional Manager (PM)	Employee (E)
Audit, Evidence Based Practice and Service Development	<ul style="list-style-type: none"> <li>Facilitate time for this activity and will seek relevant input from the PM,</li> </ul>	<ul style="list-style-type: none"> <li>Initiate and agree profession specific activity with OM where appropriate</li> <li>Provide professional opinion in relation to activities to satisfy professional standards and evidence based practice</li> <li>Associate Medical director and /or clinical director leads on for medical staff &amp; ensures participation in both multi-disciplinary / uni-disciplinary audit as appropriate.</li> </ul>	<ul style="list-style-type: none"> <li>Provide information and participate in events to facilitate these activities occurring</li> </ul>
Performance Management / Competence and Capability	<ul style="list-style-type: none"> <li>Set service specific and individual targets, monitor same and initiate remedial action as required</li> <li>Partnership working re this with PM</li> </ul>	<ul style="list-style-type: none"> <li>Provide professional opinion in relation to profession specific performance / competence</li> <li>For training medical staff concerns to be communicated to OM &amp; be channeled via postgrad AMD (Educ) and/ or Medical directorate to NIMDTA.</li> <li>Non trainee grade's concerns notified to MD, AMD or CD and resolved or escalated.</li> </ul>	<ul style="list-style-type: none"> <li>Provide information necessary to facilitate monitoring of activity</li> <li>Adhere to Code of Professional Conduct and Competency and Capability policies</li> </ul>

→ **PROFESSIONAL GOVERNANCE / PERFORMANCE MANAGEMENT (continued)**

SUBJECT	Operational Manager (OM)	Professional Manager (PM)	Employee (E)
Grievance	<ul style="list-style-type: none"> <li>To take a lead role and involve PM. If relates to medical staff involve Associate Medical director who will liaise with HR ( if major Medical director)</li> </ul>	<ul style="list-style-type: none"> <li>Advise OM in line with professional standards</li> </ul>	<ul style="list-style-type: none"> <li>All grievances discussed and submitted in writing to the OM</li> </ul>
Discipline	<ul style="list-style-type: none"> <li>Take a lead role in progressing disciplinary processes. If relates to medical staff involve CD, Associate Medical Director who will liaise with HR ( if major, MD)</li> <li>Involve PM on issues of professional practice</li> </ul>	<ul style="list-style-type: none"> <li>Advise OM in line with Professional Standards</li> <li>Lead role on professional disciplinary issues</li> <li>For medical staff advise if cases are related to profession standards or general disciplinary processes / codes.</li> </ul>	<ul style="list-style-type: none"> <li>Adhere to Trust Disciplinary policy and procedures</li> </ul>



## APPRAISAL / PDR / KSF

SUBJECT	Operational Manager (OM)	Professional Manager (PM)	Employee (E)
APPRAISAL / PDR / KSF	<p>Process:- A range of communication methods (i.e. formal meetings with individuals &amp; groups / use of electronic / teleconference systems) will be agreed between OM and PM in order to:-</p> <ol style="list-style-type: none"> <li>Set new objectives for incoming year;</li> <li>Identify individual / group professional training / development needs to meet objectives;</li> <li>Carry out a 6 monthly review of objectives and determine the progress being made;</li> <li>Ensure agreed objectives are established as agenda items within the supervision process.</li> </ol> <p>(NB – each member of staff to have a signed copy of own PDR)</p> <p>There should be an appropriate balance in terms of the time being given to the Operational and Professional issues identified within the appraisal process. The PM and OM will need to work in partnership in order to ensure that this outcome is achieved.</p>		
	<ul style="list-style-type: none"> <li>▪ Take the lead to agree the structure of the appraisal session with the PM prior to it taking place.</li> <li>▪ Set annual team / individual objectives and link with corporate objectives.</li> <li>▪ Responsible for arranging formal PDR Meetings.</li> <li>▪ Ensure PDR form completed and signed by OM, PM and E.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Contribute to Continuing Professional Development (CPD) and individual training needs of practitioner.</li> <li>▪ Ensure CPD and training needs satisfy professional standards/ governance and are in line with corporate objectives.</li> <li>▪ Organise professional meetings.</li> <li>▪ Ensure ongoing monitoring and validation of professional registration and this will be confirmed with OM.</li> <li>▪ Set professional objectives in conjunction with OM.</li> <li>▪ For medical staff, PM and HR responsibility, delivered in association with the MD's office &amp; Trust guidelines.               <ul style="list-style-type: none"> <li>- for doctors in training as per NIMDTA expectation, &amp; delivered through AMD for education.</li> <li>- for consultants as per regional guidelines &amp; GMC Guidance.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ Contribute to setting own individual professional objectives.</li> <li>▪ Contribute to setting of team objectives.</li> <li>▪ Participate in identifying own training needs.</li> <li>▪ Responsible for ensuring own professional re-registration and maintaining registration throughout the registration cycle.</li> </ul>



## MANAGEMENT OF LEAVE

SUBJECT	Operational Manager (OM)	Professional Manager (PM)	Employee (E)
Monthly Leave Returns	<ul style="list-style-type: none"> <li>Process through to HR and Salaries and Wages</li> </ul>		
Annual Leave	<ul style="list-style-type: none"> <li>Approve</li> <li>Where resources are limited agree cover with PM (giving adequate notice for this) and taking account of the Trust's guidance</li> </ul>		<ul style="list-style-type: none"> <li>Submit necessary information and leave requests for approval to OM</li> </ul>
	All substantive annual leave requests subject to 6 week notification rule.		
Sick Leave	<ul style="list-style-type: none"> <li>Recorded and process directly to HR and S and W. Complete:               <ul style="list-style-type: none"> <li>Staff return</li> <li>Return to work interview</li> <li>Referrals to Occupational Health</li> </ul> </li> <li>Liaise with PM for advice and support regarding sickness management</li> </ul>	For medical notification rules as set out by MD in current Southern Trust guidelines.	<ul style="list-style-type: none"> <li>Adhere to the Trust's Sickness and Absenteeism Policy / procedure</li> </ul>
Courses / Conferences	<ul style="list-style-type: none"> <li>Consider requests for courses/conferences as identified in training needs analysis requesting PM opinion where felt required.</li> <li>Consider minimum standards for CPD in partnership with PM</li> </ul>	<ul style="list-style-type: none"> <li>Provide opinion on / endorse suitability of course for professional courses</li> <li>Recommend appropriate Professional Skills training courses/ conferences etc</li> <li>For Social Work link to Social Work Training Unit or SW trainers</li> <li>For medical staff PM agrees and OM then approves.</li> </ul>	<ul style="list-style-type: none"> <li>Submit clear application to OM discussed and agreed with professional manager</li> <li>Follow Southern Trust guidance on study leave</li> </ul>

→ **MANAGEMENT OF LEAVE (continued)**

<b>SUBJECT</b>	<b>Operational Manager (OM)</b>	<b>Professional Manager (PM)</b>	<b>Employee (E)</b>
<b>Maternity / Paternity / Adoption/ Fostering Leave</b>	<ul style="list-style-type: none"> <li>Process documentation</li> <li>Implement replacement options</li> <li>Seek advice and support from PM regarding replacement arrangements ensuring timeliness of response</li> </ul>	<ul style="list-style-type: none"> <li>Advice and support OM regarding replacement arrangements</li> <li>For medical staff PM approves when cover arrangements agreed with OM</li> </ul>	<ul style="list-style-type: none"> <li>Submit application to OM</li> <li>Adhere to the relevant Trust policies</li> <li>Provide timely Return to Work notification</li> </ul>
<b>Family Friendly Policies</b>	<ul style="list-style-type: none"> <li>Process documentation</li> <li>Discuss application with Services Director</li> <li>OM to seek advice and support from PM regarding replacement arrangements, agree and actions</li> </ul>	<ul style="list-style-type: none"> <li>Provide advice and support as requested</li> <li>For medical staff PM approves when cover arrangements agreed with OM</li> </ul>	<ul style="list-style-type: none"> <li>Submit all necessary information and application to OM</li> <li>Follow Southern Trust guidance on study leave</li> </ul>
<b>Other e.g., Employment Break / Crisis / Carers leave / Trade Union leave</b>	<ul style="list-style-type: none"> <li>Consider request, make a decision whether request granted in line with Trust Policy and Professional Team Practice</li> <li>Consult PM for advice and support re replacement arrangements</li> </ul>	<ul style="list-style-type: none"> <li>Provide advice and support on related issues</li> <li>For medical staff PM approves when cover arrangements agreed with OM</li> </ul>	<ul style="list-style-type: none"> <li>Submit all requests to OM</li> <li>Awareness of and adherence to Trust policies</li> </ul>
<b>Travel and Expenses Claims</b>	<ul style="list-style-type: none"> <li>Approve and process directly to Finance Dept</li> <li>Periodical analysis of travel claims patterns</li> </ul>	<ul style="list-style-type: none"> <li>Sign off by AMD / CD.</li> </ul>	<ul style="list-style-type: none"> <li>Submit mileage for approval to OM</li> </ul>

**Directors, Assistant Directors and Operational Managers can access professional advice on any other issues from the Medical Director, Associate Medical Directors/Clinical Directors and professional Heads of Service as and when required**

## Acute Directorate Governance Meeting

### Action notes

Notes & Actions of Meeting held on Tuesday 2<sup>nd</sup> February 2010 at **2.00 pm**  
in the Meeting Room, Trust HQs, College of Nursing, Craigavon Area Hospital

<p><b>Present:-</b> Dr Gillian Rankin, Lindsay Stead, Heather Trouton, Ronan Carroll, Anita Carroll, Anne McVey, David Cardwell</p> <p><b>Apologies:-</b> Beatrice Moonan</p>	
<b>ITEMS DISCUSSED</b>	<b>ACTIONS</b>
<p><b>Matters Arising</b></p> <p>There were no matters arising.</p>	
<p><b>1. Risk Register</b></p> <p><b>IMWH</b> – in process, training ward managers.  <b>FSS</b> – risk register well embedded reviewed monthly.  <b>SEC</b> – Live risk register and has forum to address.  <b>MUSC</b> – Developing mechanism to address.  <b>Pharmacy</b> – Register reviewed bi-monthly.  <b>CCS</b> – Head of Service registers exist and coming together into a single divisional register.</p>	
<p><b>2. Incident Reporting</b></p> <p>Trend information from Beatrice to be developed.</p> <p>Pharmacy/Medicines incident.</p> <p>SAI/RCAs all to be tracked from Emily Kilpatrick to review and ensure actions taken.</p>	<p><b>Beatrice Moonan</b></p>
<p><b>3. Complaints</b></p> <p>Only met 70% compliance in December. Treatment and Care Quality and Staff Attitude and Behaviour continue to be the main areas of complaint. All Ads to focus on action plans and to address with Heads. Lindsay, Edel and David to discuss the link between patient support and complaints.</p>	<p><b>Lindsay Stead</b></p>
<p><b>4. NICE/TRIM Guidance</b></p>	

No new guidance in month. .	
<b>5. Professional Governance</b>  It was agreed that Anne McVey will provide Professional Nursing Governance for Eileen O'Rourke and services, and Ronan for Paul Smith (A&E) and Loraine Adair.  Each AD with professional responsibility to arrange and hold a professional Governance Workshop with all Ward Managers and Lead Nurses (except SEC) if possible before next Directorate Meeting.  Medicines governance – volume of pharmacists attending divisional meetings supported to discuss medication incidents/near misses.	
<b>6. Specific Governance Issues</b>  Nothing new at present.	
<b>7. Patient Safety Programme Report</b>  Each AD to meet with Colum Robinson to familiarise with PfA targets and to agree reporting arrangements.	<b>All ADs</b>
<b>8. Enhanced reporting of deaths for information</b>  No further information.	
<b>9. Any other business</b>  For future meetings could the following be added to the Agenda:-  Litigation Items Clinical Supervision CHKS Action Plan.	
<b>10. Date and time of next meeting</b>  The next meeting will be held on Tuesday 2 <sup>nd</sup> March 2010.	

**Stinson, Emma M**

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**From:** Stinson, Emma M  
**Sent:** 24 August 2010 08:50  
**To:** Boyce, Tracey; Hall, S Dr; Hogan, M Dr; Mackle, Eamon; McAllister, Charlie; Murphy, Philip; Carroll, Anita; Carroll, Ronan; Conway, Barry; Gibson, Simon; McVey, Anne; Trouton, Heather  
**Cc:** Moonan, Beatrice; Beattie, Pauline; Lindsay, Gail; Renney, Cathy; Smyth, Elizabeth; Burrell, Gail; Graham, Michelle; Lappin, Aideen; Murphy, Jane S  
**Subject:** Never Events Incident Reporting  
**Attachments:** Never Events.doc

Dear All

The list of incidents which we agreed recently would be adopted as "Never Events" was approved at SMT Governance last week. Any incident identified on this list – even if no/minimal harm occurred to the patient – will be reported as a significant incident which will require investigation. The level of investigation ie RCA 1/2/3 should be agreed on an individual basis by the AMD, AD and Director.

Please share this email and the attached list of Never Events with all consultants in order that all senior clinicians are now aware of this approach to improve patient safety by learning from clinical incidents.

Thank you

Gillian

Dr Gillian Rankin  
Interim Director of Acute Services

Emma Stinson  
PA to Dr Gillian Rankin, Interim Director of Acute Services Admin Floor Craigavon Area Hospital

Tel: [Personal Information redacted by USI]  
Fax: [Personal Information redacted by USI]

Southern Health & Social Care Trust advise that this email, any attachment(s), and subsequent replies, may be disclosed under the Freedom of Information Act 2000.

## SHSCT Acute Directorate Never Events List

The NPSA Never Events framework (2010/2011) advises that 'Never Events' are serious, largely preventable patient safety incidents that should not occur if the available preventative measures have been implemented.

The SHSCT Acute Services Directorate will report all such incidents as high risk and therefore will require additional review/investigation.

The core list of never events which focus mainly on acute care are:

### **1. Wrong site surgery**

Description: A surgical intervention performed on the wrong site (for example wrong knee, wrong eye, wrong patient, wrong limb, or wrong organ); the incident is detected at any time after the start of the operation and the patient requires further surgery, on the correct site, and/or may have complications following the wrong surgery.

Main care setting: Organisations that provide major, minor and/or day case surgery. Dentistry continues to be excluded.

### **2. Retained instrument post-operation**

Description: One or more instruments or swabs, or a throat pack, are unintentionally retained following an operative procedure, and an operation or other invasive procedure is needed to remove this, and/or there are complications to the patient arising from its continued presence. This Never Event does not include interventional radiology or cardiology procedures, and the definition of instrument does not include guidewires, screws, or other similar material. It does not include retained swabs after non-operative vaginal delivery.

Main care setting: Organisations that provide major, minor and/or day case surgery.

### **3. Wrong route administration of chemotherapy.**

Description: Intravenous or other chemotherapy (for example, vincristine) that is correctly prescribed but administered via the wrong route (usually into the intrathecal space).

Main care setting: Acute care.

### **4. Misplaced naso or orogastric tube not detected prior to use**

Description: Naso or orogastric tube placed in the respiratory tract rather than the gastrointestinal tract and not detected prior to commencing feeding or other use.

Main care setting: All care settings.

### **5. In-hospital maternal death from post-partum haemorrhage after elective caesarean section**

Description: In-hospital death of a mother as a result of a haemorrhage following elective caesarean section, excluding cases where imaging has identified placenta accreta.

Main care setting: Acute care maternity services.

### **6. Intravenous administration of mis-selected concentrated potassium chloride**

Description: Intravenous administration of mis-selected concentrated potassium chloride.

Main care setting: All care settings.

## SHSCT Acute Directorate Never Events List

### High risk medication incidents

The risk rating of medication incidents is based on the likelihood of recurrence and the potential impact if it were to reoccur. The potential impact of a medication incident requires consideration of the type of medication incident for example wrong route, wrong dose or wrong patient and the medicine involved, since some medicines have an inherently greater degree of risk such as opiates, chemotherapy or insulin. In some cases it may also require consideration of the indication for which the medicine is being used.

High risk medication incidents are often the subject of national and regional guidance to reduce the risk of reoccurrence or to mitigate the effects of such incidents if they were to reoccur.

The following medication incidents are proposed as examples of medication incidents that should be regarded as high risk and require additional review should they occur. The list has been prepared following a review of NPSA Never Events Framework, NPSA medication alerts and reports, regional guidance on medication safety and published lists of high risk medicines. Reference was also made to a *Guide to assigning potential severity* prepared by the Medicines Governance Team.

- Misselection of concentrated intravenous potassium solution (as above)
- Administration of chemotherapy by the wrong route (as above)
- Oral methotrexate once a day instead of once a week for non-malignant conditions
- Overdose ( $\geq 3$  fold) or prolonged omission of oral anticoagulants
- Oral liquid medicines administered parenterally
- Epidural infusions administered intravenously
- Inappropriate dose or duration of oral anti-cancer medicines
- Administration of therapeutic heparin instead of heparin flushing solution
- Overdose of midazolam requiring flumazenil administration
- Overdose of strong opioids requiring naloxone administration
- Toxicity or subtherapeutic dosing of lithium, aminoglycosides, vancomycin, phenytoin or digoxin
- Administration of high flow oxygen to patient with COPD
- Omitted or delayed dose of critical medicines (list to be agreed)
- Overdose of insulin
- Known allergen prescribed, administered or dispensed.

## **Directorate of Acute Services - Patient Support Services Enquiries**

### **3<sup>rd</sup> Quarter Update – 1<sup>st</sup> October 2011 – 31st December 2011**

#### **Executive Summary**

- During the 3<sup>rd</sup> quarter (October–December 2011) there were 106 Patient Support Enquiries received from 89 Enquirers. This represents an increase of 21 enquiries on the same quarter last year (2010).
- 100% of Patient Support Enquiries have been successfully responded to and are now closed.
- The top 5 categories of Patient Support Enquiries for the 3<sup>rd</sup> quarter were:
  - Communication and Information to Patients - 29
  - Treatment and Care - 24
  - Appointments Delay/Cancellation (Outpatients) - 22
  - Admission into hospital Delay/Cancellation (Inpatients) - 11
  - Staff Attitude/Behaviour -3

**The table below lists numbers of enquiries received per hospital and division.**

<b>Hospital &amp; Division</b>	<b>Count</b>
<b>CAH</b>	<b>80</b>
MUC	44
SEC	22
CCS	6
ESTATE	3
OPS	2
IMWH	2
FSS	1
<b>DHH</b>	<b>17</b>
MUC	7
SEC	6
CCS	2
COST	1
FINACC	1
<b>STH</b>	<b>5</b>
CCS	3
MUC	2
<b>COMM</b>	<b>3</b>
ESTATE	1
PRIMAR	1
MHS	1
<b>OTHER</b>	<b>1</b>
	1
<b>Grand Total</b>	<b>106</b>



## 2) Enquiries received by Staff Group and Subject

Staff & Subject	Count
<b>Non Staff</b>	<b>38</b>
Appointments, delay/cancellation (outpatients)	16
Admission into hospital (delay cancellation) (inpatients)	9
Communication/information to patients	3
Access to premises	2
Policy/commercial decisions	2
Patients' property/expenses/finance	2
Treatment and care quality	1
Transport, late or non-arrival/journey time	1
Aids/adaptations/appliances	1
Complaints handling	1
<b>Medical and Dental</b>	<b>27</b>
Treatment and care quality	11
Communication/information to patients	4
Appointments, delay/cancellation (outpatients)	3
Staff attitude/behaviour	2
Admission into hospital (delay cancellation) (inpatients)	2
Theatre/operation/procedure, delay/cancellation	1
Clinical diagnosis	1
Discharge/transfer arrangements	1
Policy/commercial decisions	1
Complaints handling	1
<b>Nursing and Midwifery</b>	<b>16</b>
Treatment and care quality	10
Communication/information to patients	3
Staff attitude/behaviour	1
Appointments, delay/cancellation (outpatients)	1
Infection control	1
<b>Administrative and Clerical</b>	<b>14</b>
Communication/information to patients	9
Appointments, delay/cancellation (outpatients)	2
Patients' property/expenses/finance	2
Transport, suitability of vehicle/equipment	1
<b>Professional and Technical (AHPs)</b>	<b>4</b>
Treatment and care quality	2
Professional assessment of need	2
<b>Social Services</b>	<b>3</b>
Communication/information to patients	1
Other	1
Discharge/transfer arrangements	1
<b>Works and Maintenance</b>	<b>2</b>
Other	1
Access to premises	1
<b>Ancillary and General</b>	<b>2</b>
Hotel/support/security services	1
Discharge/transfer arrangements	1
<b>Grand Total</b>	<b>106</b>

## 3) Enquiries received by Division &amp; Location

Division & Location	Count
<b>MUC</b>	<b>53</b>
ECG Clinic	10
1 South Medical	5
A&E	4
MAU	4
2 North Resp/Medical	4
General Medicine Clinic	4
Neurology Clinic	3
2 North Haematology	2
Rehabilitation, Level 4	2
Rapid Access Chest Pain Clinic, 1 North	2
A&E Clinical Decisions Unit	2
Rheumatology Clinic	2
Stroke/Medical, Level 6	2
Ramone Ward	2
Dermatology Clinic	2
3 South	1
1 West Gynae	1
Cardiology Clinic	1
<b>SEC</b>	<b>28</b>
Urology Clinic	7
General Surgery Clinic	4
Orthopaedic Clinic	3
4 North	3
ENT Clinic	3
Ophthalmology Clinic	3
Pre-operative Assessment Clinic	1
Oral Surgery Clinic	1
3 South	1
4 South	1
Orthopaedic Ward	1
<b>CCS</b>	<b>11</b>
Day Procedure/Day Surgery Unit	3
X-ray Dept (Radiology)	3
Physio Dept	1
Mortuary	1
CT Scanner	1
Entrance/Exit	1
Mandeville Unit	1
<b>ESTATE</b>	<b>4</b>
Lift	1
Entrance/Exit	1
Car Park/Grounds	1
Cloughreagh House, Bessbrook	1
<b>IMWH</b>	<b>2</b>
Gynae Clinic	2

<b>OPS</b>	<b>2</b>
Ward 4, Assessment & Rehabilitation	2
<b>MHS</b>	<b>1</b>
Home of client	1
<b>COST</b>	<b>1</b>
Cashier's Office	1
<b>PRIMAR</b>	<b>1</b>
	1
<b>FINACC</b>	<b>1</b>
Finance Dept	1
	<b>1</b>
Ambulance/Patient Service Vehicle	1
<b>FSS</b>	<b>1</b>
Public place	1
<b>Grand Total</b>	<b>106</b>

*Edel Corr*  
**Patient Support Manager**

# Acute Services Patient Experience Group

Patient Support Enquiries Quarterly Report

**2nd Quarter – July - September 2012**

Edel Corr  
Patient Support Manager

## **DIRECTORATE OF ACUTE SERVICES**

### **Introduction**

The Patient Support Service is a confidential service available in SHSCT Acute Services. It provides information, advice and support to patients, their families and carers. Patient Support can help sort out problems, liaising with NHS staff and others to help sort out problems quickly. Patient Support provides information and “signposting” to local and national statutory, voluntary and support groups/organisations. Patient Support can also explain the Trusts Complaints process and provide support to patients and their families when required.

### **Patient Support Service adding value to the patient’s experience**

The Patient Support Service often receives feedback on how valued their service is by users and staff. However this was not formally recorded. A new Patient Support Annual Survey has now commenced and the findings will be reported in the next quarter.

Anecdotally there is evidence that the service is valued and popular as demonstrated by the number of service users who contact the service for help on more than one occasion.

### **Recording and Reporting**

The Patient Support Service records and collates details of all contacts and issues raised on the Trusts “DATIX” database.

Reports are submitted to the Acute Services Patient Experience Group on a monthly, quarterly and annual basis. Detailed information about concerns is submitted to the Director, Assistant Directors and Heads of service. The experiences of individual service users, their families and carers are useful in providing opportunities for learning and to stimulate service development.

**Patient Support Services Report – 2nd Quarter Report 2012**

The purpose of this report is to inform senior staff within the Acute Directorate about the Enquiries received within the Directorate in the 2nd Quarter 2012 (July - September) and highlight any key issues or recurring themes.

**Summary**

- 147 Patient Support Enquiries were received in the 2<sup>nd</sup> Quarter 2012. This is an increase of 18 enquiries on the same Quarter last year.
- 95% of the Patient Support Enquiries have been responded to and are now closed.

▪ **Top 5 Subjects:**

Subject	2011	2012
Communication/information to patients	22	33
Treatment and care quality	23	19
Appointments, delay/cancellation (outpatients)	23	19
Staff attitude/behaviour	9	15
Admission into hospital (delay cancellation) (inpatients)	18	13

➤ **Top 5 Wards/Departments:**

Ward & Department	2011	2012
Medical Assessment Unit	4	9
Female Medical, Level 5	1	8
Urology Clinic	8	7
Day Procedure/Day Surgery Unit	1	7
Emergency Dept.	13	7

➤ **Top 5 Professions:**

Profession	2011	2012
*Non Staff	42	58
Medical and Dental	49	39
Nursing and Midwifery	22	33
Administrative and Clerical	12	13
Professional and Technical (AHPs)	2	3

\*Non Staff refers to enquiries regarding inpatient/outpatient waiting times and general communication /information enquiries that cannot be attributed to any staff group

Enquiries per Site, Division, Subject & Staff Groupa) Enquiries per Site

Site of Enquiry	2 <sup>nd</sup> Quarter 2012
Craigavon Area Hospital	97
South Tyrone Hospital	14
Daisy Hill Hospital	14
Independent/Voluntary Sector Locations	10
Community	6
Armagh Community Hospital	5
Lurgan Hospital	1
<b>Grand Total</b>	<b>147</b>

b) Enquiries per Division

Division	2 <sup>nd</sup> Quarter 2012
Surgery and Elective Care	52
Medicine and Unscheduled Care	46
Cancer and Clinical Services	10
Integrated Maternity and Women's Health	8
Functional Support Services	7
Primary Care	7
Mental Health Service	5
Specialist Child Health and Disability	3
Other	2
Informatics	2
Financial Accounting, Control and Financial Services	1
Enhanced Services	1
Financial Management	1
Older Peoples Services	1
Estates	1
<b>Grand Total</b>	<b>147</b>

c) Enquiries per Subject

Subject of Enquiry	2nd Quarter 2012
Communication/information to patients	33
Treatment and care quality	19
Appointments, delay/cancellation (outpatients)	19
Staff attitude/behaviour	15
Professional assessment of need	13
Admission into hospital (delay cancellation) (inpatients)	13
Clinical diagnosis	8
Other	6
Discharge/transfer arrangements	5
Patients' privacy/dignity	4
Environmental	3
Records/record keeping	3
Hotel/support/security services	3
Patients' property/expenses/finance	2
Access to premises	1
<b>Grand Total</b>	<b>147</b>

d) Enquiries per Staff Group

Staff	2nd Quarter 2012
Non Staff	58
Medical and Dental	39
Nursing and Midwifery	33
Administrative and Clerical	13
Professional and Technical (AHPs)	3
Other	1
<b>Grand Total</b>	<b>147</b>

Enquiries received per Quarter & Year

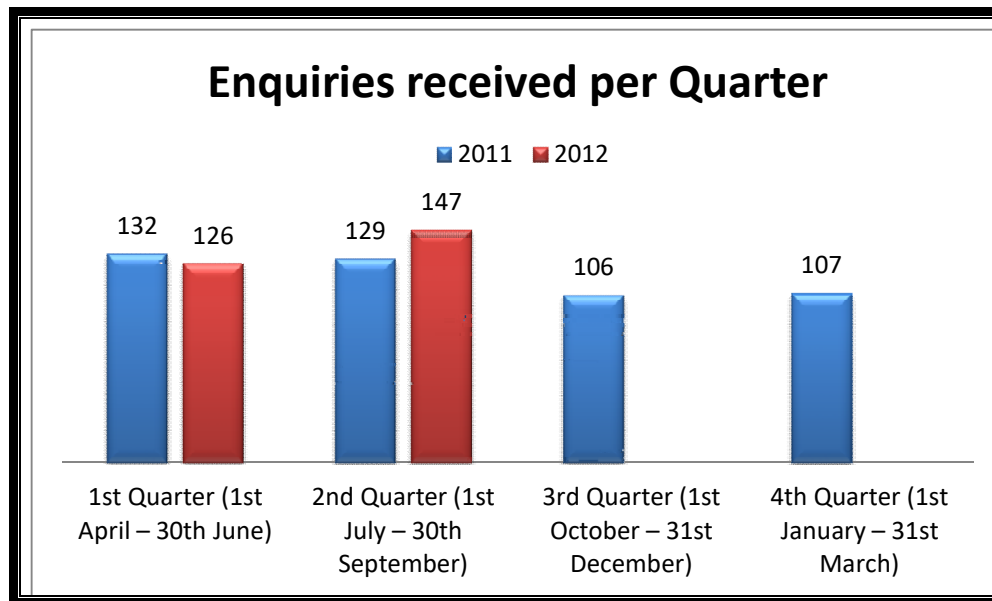
The Table and Chart below compares the number of Patient Support enquiries received per month compared to the number of Patient Support Enquiries received the same month the previous year.

## a)

Quarterly Enquiries Received	2011	2012
1 <sup>st</sup> Quarter (1 <sup>st</sup> April – 30 <sup>th</sup> June)	132	126
2 <sup>nd</sup> Quarter (1 <sup>st</sup> July – 30 <sup>th</sup> September)	129	147
3 <sup>rd</sup> Quarter (1 <sup>st</sup> October – 31 <sup>st</sup> December)	106	
4 <sup>th</sup> Quarter (1 <sup>st</sup> January – 31 <sup>st</sup> March)	107	



b)



### **How Patient Support has helped**

Patient Support has provided advice and support at all stages in the patient's journey; answered queries about access to services; provided information about the range of Trust services; given assistance to resolve any problems 'on the spot' and provided advice and support when the patient, their family or carer was unhappy with their hospital experience.

### **Examples of Patient Support help**

- Helped patients, their families/carers to resolve concerns
- Helped alleviate patients and their families/carers anxiety and distress
- Provided emotional and practical support to a family at a time of great distress due to the Sudden Infant Death of their baby
- Obtained dates for surgery & explained current waiting times
- Obtained Outpatient appointments & explained current waiting times
- Obtained test/investigation results
- Organised family meetings with clinical teams
- Help reduce the incidence of formal complaints

## Quotes from Patient Support Enquirers:

"It is often the small things that make the biggest difference. With this in mind I believe the Patient Support Service plays a vital role in the Trust to improve the quality of Care

Great service

*"Approachable service for patients and relatives to give their feedback and know their experience will improve the service for others*

*Patient Support very helpful to our family*

*Wish I had knew about Patient Support Sooner*

Patient Support staff polite and courteous

Need to tell more people about your service

**Stinson, Emma M**

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**From:** Stinson, Emma M  
**Sent:** 27 July 2010 11:08  
**To:** Hall, S Dr; Hogan, M Dr; Mackle, Eamon; Murphy, Philip; Carroll, Anita; Carroll, Ronan; Conway, Barry; Gibson, Simon; McVey, Anne; Trouton, Heather  
**Cc:** Beattie, Caroline; Beattie, Pauline; Lindsay, Gail; Renney, Cathy; Smyth, Elizabeth; Burrell, Gail; Graham, Michelle; Lappin, Aideen; Murphy, Jane S  
**Subject:** Update on Clinical Standards & Guidelines - report for Acute Services Clinical Services Group  
**Attachments:** Acute Services Clinical Services Group - S&G report 230710 v2.doc  
**Importance:** High

Dear All,

Please see the attached brief summary of current work on NPSA Alerts and a list of work to commence. If there are any issues please let me know or discuss with AD or Caroline Beattie.

Regards  
Gillian

Emma Stinson  
PA to Dr Gillian Rankin, Interim Director of Acute Services Admin Floor Craigavon Area Hospital

Tel: [Personal Information redacted by the USI]  
Fax: [Redacted]

Email: [Personal Information redacted by the USI]

Southern Health & Social Care Trust advise that this email, any attachment(s), and subsequent replies, may be disclosed under the Freedom of Information Act 2000.



Acute Services Clinical Services Group  
23<sup>rd</sup> July 2010 at 8am  
Board Room – Main Building - CAH

### **Update of Clinical Standards & Guidelines**

#### ***Key NPSA Issues:***

##### **NPSA 2008 RRR 004**

##### **Reducing the risks of chest drain insertion**

Funding required for chest drain mannequin and for ultrasound machines - approx £55k with recurrent maintenance / consumable costs. Following discussion at Acute Services S&G meeting on 22/07/10 the asset register of all US machines within the SHSCT is to be reviewed in order to ascertain if existing machines can be accessed (albeit as an interim measure).

Mr Ronan Carroll to identify possible funding for a mannequin that is compatible with U/S which can be used for training purposes.

Dr Convery is to finalise procedures for the insertion of chest drains – MDT focus

##### **NPSA 2009 RRR 012**

##### ***Reducing risk of harm of oral bowel cleansing solutions***

Full action plan identified. Key actions that need to still be taken forward include:

- New prescription form for Oral Bowel Cleansing solutions need to be approved by all of the relevant Clinicians
- Progress to identifying the referral endoscopy pathways for (i) elective and emergency care (ii) Direct access by GP and (iii) referral to Radiology for Barium Enema.
- Finalise information leaflets and submit for translation

##### **NPSA 2009 RRR 005**

##### ***Minimising the risks of suprapubic catheter insertion***

Mr Young is the identified training lead and an action Plan has been agreed with Mr Young. Arrangements are in place to meet with Mr Brown to ensure implementation of recommendations within DHH.

Currently induction processes for SPC insertion are being reviewed to include competency assessment checks. Mr Young now scheduled to participate in both Surgical / A&E trainee programme.

Mr Young liaising with regional colleagues to develop interim guidelines ahead of BAUS issuing national guidance (which was due in Autumn 2009 but delayed).

***NPSA 2009 RRR 006***  
***Oxygen Safety in Hospitals***

Trust Medical Gas Management Committee had its inaugural meeting on 20 July 2010 and constitution being reviewed to include nursing representation from each division within Acute Services – further review also required to ensure representation within NAH.

Oxygen prescription forms have been piloted within 2 North and an implementation plan across the Directorate is now being taken forward.

Key issues: Monitoring, storage and distribution management for medical gas cylinders.

***NPSA 2009 RRR 012***  
***Reducing risks of tourniquets left on after finger and toe surgery***

New T rings have arrived on 20 July 2010 for distribution across the relevant clinical areas

Procedures have been finalised within each of the relevant clinical areas and tailored according to use.

Laminated copies of clinical briefing sheets are on display within each of the relevant clinical areas

***NPSA 2009 RRR 012***  
***Vaccine Cold Storage***

Once finance provide accurate finance costs Dr Boyce will provide Dr Rankin with a business case to be presented at SMT. This paper will provide evidence to identify the key risks issues and support the need for a new transportation vehicle that will ensure continuity of the cold chain during the transportation of vaccines between the Pharmacy department and community drop down sites.

NPSA reference DHSS Reference	Title of NPSA Alert	Date Issue from DHSS	Date of Issue by Cex Office	Date Implementation by SHSCT due by	Director	Lead AMD (Within Acute Services)	Lead AD (Within Acute Services)	Implementation Lead (Within Acute Services)	Divisions (Within Acute Services)
NPSA/2010 RRR010 HSC (SQSD) 06/10	Early detection following Gastrostomy	04/06/10	07/06/10	03/12/10	All Operational Directors	Mr Mackle Dr Hall	Heather Trouton Ronan Carroll	Sx Heads of Service Mary McGeough	Surgery & Elective Care Cancer & Clinical Services
NPSA/2010 RRR011 HSC (SQSD) 07/10	Checking Pregnancy Before Surgery	04/06/10	07/06/10	03/12/10	Dr Rankin	Mr Mackle Dr Hall	Heather Trouton Ronan Carroll	All Heads of Service	Surgery & Elective Care Cancer & Clinical Services
NPSA/2010 RRR012 HSC (SQSD) 09/10	Reducing the risk of retained swabs after vaginal birth and perineal suturing	10/06/10	06/07/10	10/12/10	Dr Rankin	Dr Hogan	Mrs Anne McVey	TBC	Integrated Maternity & Women's Health
NPSA/2010 RRR013 HSC(SQSD) 12/10	Safer Administration of Insulin	14/07/10	Pending	14/01/11	All Operational Directors	All	AD's across all divisions	TBC following next Safe Use of Insulin Group (chaired by Medicines Governance Pharmacist)	Across all divisions
HSC (SQSD) 02/2010:CG 85	Glaucoma: Diagnosis and Management of Chronic Open Angle Glaucoma and Ocular Hypertension	15/06/10	Pending	For Action	Dr Rankin	Mr Mackle	Mrs H Trouton	Louise Devlin	Surgery & Elective Care



## Report to HSCB on December 2009 closed complaints from SHSCT

Type	Ref	First received	Replied	Re-opened	Response Time	Directorate	Site	Division/Speciality	Ward/Dept/Area	Category of Complaint	Summary of Complaint	Summary of Investigation	Action taken & Lessons Learned	Current Stage
FORMAL	Irrelevant information redacted by the USI	24.9.09	22.12.09		63	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	Accident & Emergency	Staff attitude/behaviour	Irrelevant information redacted by the USI		Amendment of the assessment and treatment pathway for all patients with previous CVA, attending A&E with any neurological symptoms.	Closed
FORMAL		6.10.09	9.12.09		46	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	1 South	Discharge/transfer arrangements				Closed
FORMAL		12.10.09	23.12.09		52	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	Accident & Emergency	Treatment and Care quality			Training given to A&E staff and follow up with Bank and Agency staff.	Closed
FORMAL		12.10.09	23.12.09		52	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	Accident & Emergency	Staff attitude/behaviour			Training given to A&E staff and follow up with Bank and Agency staff.	Closed
FORMAL		14.10.09	14.12.09		43	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	1 North Cardiology	Professional Assessment of need				Closed
FORMAL		22.10.09	3.12.09		30	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	1 North Cardiology	Staff attitude/behaviour				Closed
FORMAL		28.10.09	21.12.09		38	ACUTE	Craigavon Area Hospital	Surgery and Elective Care	4 North Surgical	Communication/information to Patients			Staff reminded of the importance of appropriate conversation with all patients.	Closed
FORMAL		4.11.09	17.12.09		31	ACUTE	Craigavon Area Hospital	Integrated Maternity and Women's Health	Antenatal Out Patients	Communication/information to Patients			Review of Booking Blood Results procedure.	Closed
FORMAL		5.11.09	21.12.09		32	ACUTE	Daisy Hill Hospital	Medicine and Unscheduled Care	Female Medical Ward DHH	Patients' property/expenses/finance				Closed
FORMAL		6.11.09	1.12.09		17	ACUTE	Craigavon Area Hospital	Surgery and Elective Care	Orthopaedic Clinic	Staff attitude/behaviour				Closed
FORMAL		6.11.09	3.12.09		19	ACUTE	Craigavon Area Hospital	Surgery and Elective Care	Urology Clinic	Waiting times, out-patient departments			To keep patients informed when clinics are running late. Update notice board.	Closed
FORMAL		9.11.09	17.12.09		28	ACUTE	Daisy Hill Hospital	Integrated Maternity and Women's Health	Delivery Suite DHH	Treatment and Care quality			Enquiry made for radio-opaque drains	Closed
FORMAL		16.11.09	14.12.09		20	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	Accident & Emergency	Professional Assessment of need			The doctor has been spoken to by clinical lead in the department and the x-ray is being used as a teaching tool to other medics	Closed
FORMAL		16.11.09	14.12.09		20	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	Accident & Emergency	Professional Assessment of need			The doctor has been spoken to by clinical lead in the department and the x-ray is being used as a teaching tool to other medics	Closed
FORMAL		16.11.09	14.12.09		20	ACUTE	Craigavon Area Hospital	Surgery and Elective Care	4 South Surgical	Discharge/transfer arrangements				Closed

Type	Ref	First received	Replied	Re-opened	Response Time	Directorate	Site	Division/Speciality	Ward/Dept/Area	Category of Complaint	Summary of Complaint	Summary of Investigation	Action taken & Lessons Learned	Current Stage
FORMAL	Irrelevant information redacted by the USI	17.11.09	8.12.09	21.12.09	15	ACUTE	Craigavon Area Hospital	Integrated Maternity and Women's Health	Maternity/Labour Ward	Treatment and Care quality	Irrelevant information redacted by the USI			Closed
FORMAL		17.11.09	8.12.09	21.12.09	15	ACUTE	Craigavon Area Hospital	Integrated Maternity and Women's Health	2 West Maternity	Communication/information to Patients				Closed
FORMAL		18.11.09	4.12.09		12	ACUTE	Daisy Hill Hospital	Surgery and Elective Care	Male Surgical Ward DHH	Treatment and Care quality				1 Previous notes in this case were not vital in the treatment of the patient's condition. 2. Delay unavoidable due to other more urgent cases but this did not impact upon the welfare of the patient. Closed
FORMAL		18.11.09	16.12.09		20	ACUTE	Craigavon Area Hospital	Surgery and Elective Care	Urology Clinic	Waiting times, out-patient departments				Agreement from staff within the team to cover during unplanned absences. Closed
FORMAL		23.11.09	2.12.09		7	ACUTE	Daisy Hill Hospital	Medicine and Unscheduled Care		Policy/commercial decisions				Closed
FORMAL		23.11.09	24.12.09		23	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	2 South Urology	Treatment and Care quality				Update training given to staff Closed
FORMAL		24.11.09	22.12.09		20	ACUTE	Craigavon Area Hospital	Surgery and Elective Care	Chest Clinic	Records/record keeping				Closed
FORMAL		24.11.09	22.12.09		20	ACUTE	Daisy Hill Hospital	Medicine and Unscheduled Care	Accident & Emergency	Staff attitude/behaviour				Closed
FORMAL		25.11.09	22.12.09		19	ACUTE	Daisy Hill Hospital	Integrated Maternity and Women's Health		Appointments, Delay/Cancellation (Outpatients)				Letter of response included contact details for any further enquiries Closed
FORMAL		25.11.09	23.12.09		20	ACUTE	South Tyrone Hospital	Functional Support Services	Booking and Contact Centre	Appointments, Delay/Cancellation (Outpatients)				Closed
FORMAL		25.11.09	22.12.09		19	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	2 North Haematology	Clinical Diagnosis				Closed

Type	Ref	First received	Replied	Re-opened	Response Time	Directorate	Site	Division/Speciality	Ward/Dept/Area	Category of Complaint	Summary of Complaint	Summary of Investigation	Action taken & Lessons Learned	Current Stage
FORMAL	Irrelevant information redacted by the USI	25.11.09	7.12.09			8 ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	Dermatology Clinic	Confidentiality	Irrelevant information redacted by the USI		1 Staff awareness with immediate effect	Closed
FORMAL		30.11.09	21.12.09	19.01.10	15	ACUTE	Daisy Hill Hospital	Medicine and Unscheduled Care	Accident & Emergency	Staff attitude/behaviour				Enhanced Local Resolution
FORMAL		7.12.09	23.12.09		12	ACUTE	Craigavon Area Hospital	Medicine and Unscheduled Care	Medical Admissions Unit	Treatment and Care quality				Closed
FORMAL		11.12.09	22.12.09		7	ACUTE	Banbridge Polyclinic	Functional Support Services	Booking and Contact Centre	Appointments, Delay/Cancellation (Outpatients)			Staff reminded of importance of clearly communicating information to patients and of good attitude whilst communicating information.	Closed
FORMAL		11.12.09	22.12.09		7	ACUTE	Banbridge Polyclinic	Functional Support Services	Booking and Contact Centre	Staff attitude/behaviour			Staff reminded of importance of clearly communicating information to patients and of good attitude whilst communicating information.	Closed
FORMAL		11.12.09	23.12.09		8	ACUTE	Daisy Hill Hospital	Surgery and Elective Care	Outpatients Dept	Treatment and Care quality				Closed
FORMAL		11.12.09	23.12.09		8	ACUTE	Daisy Hill Hospital	Surgery and Elective Care	Surgical Clinic, Outpatients Department	Appointments, Delay/Cancellation (Outpatients)				Closed
FORMAL		21.12.09	23.12.09		2	ACUTE	Craigavon Area Hospital	Functional Support Services	Car Park	Access to Premises				Closed
FORMAL		22.12.09	23.12.09		1	ACUTE	Craigavon Area Hospital	Surgery and Elective Care	Orthopaedic Clinic	Policy/commercial decisions				Closed
FORMAL		4.11.09	2.12.09		20	CYP	Brownlow H&SSC	Family Support and Safeguarding		Staff attitude/behaviour				
FORMAL		5.11.09	2.12.09		19	CYP	Dromalane, Newry			Children Order Complaints				

Type	Ref	First received	Replied	Re-opened	Response Time	Directorate	Site	Division/Speciality	Ward/Dept/Area	Category of Complaint	Summary of Complaint	Summary of Investigation	Action taken & Lessons Learned	Current Stage
FORMAL	Irrelevant information redacted by the USI	11.11.09	7.12.09		18	CYP	Armagh Community Hospital	Specialist Child Health and Disability		Treatment and Care quality	Irrelevant information redacted by the USI			
FORMAL		11.11.09	7.12.09		18	CYP	Armagh Community Hospital	Specialist Child Health and Disability		Staff attitude/behaviour				
FORMAL		9.11.09	7.12.09		20	CYP		Family Support and Safeguarding		Staff attitude/behaviour				
FORMAL		12.11.09	10.12.09		20	CYP	Craigavon Area Hospital	Specialist Child Health and Disability		Treatment and Care quality				
FORMAL		13.11.09	10.12.09		19	CYP	Home of Client	Family Support and Safeguarding		Staff attitude/behaviour				
FORMAL		19.11.09	16.12.09		19	CYP		Family Support and Safeguarding		Children Order Complaints				
FORMAL		19.11.09	16.12.09		19	CYP		Family Support and Safeguarding		Communication/Information to Patients				
FORMAL		20.11.09			19	CYP		Family Support and Safeguarding		Staff attitude/behaviour				
FORMAL		20.11.09			19	CYP		Family Support and Safeguarding		Patient's Privacy/dignity				
FORMAL		20.11.09			19	CYP		Family Support and Safeguarding		Communication/Information to Patients				
FORMAL		20.11.09	14.12.09		16	CYP		Family Support and Safeguarding		Children Order Complaints				

Type	Ref	First received	Replied	Re-opened	Response Time	Directorate	Site	Division/Speciality	Ward/Dept/Area	Category of Complaint	Summary of Complaint	Summary of Investigation	Action taken & Lessons Learned	Current Stage
FORMAL	Irrelevant information redacted by the USI	20.11.09	14.12.09		16	CYP		Family Support and Safeguarding		Records/record keeping	Irrelevant information redacted by the USI			
FORMAL		20.11.09	14.12.09		16	CYP		Family Support and Safeguarding		Staff attitude/behaviour				
FORMAL		27.11.09	29.12.09		20	CYP	Craigavon Area Hospital	Specialist Child Health and Disability	Childrens Ward	Professional Assessment of need				
FORMAL		27.11.09	24.12.09		19	CYP		Family Support and Safeguarding		Confidentiality				
FORMAL		24.11.09	21.12.09		19	CYP	Cherrygrove Childrens Home	Corporate Parenting		Staff attitude/behaviour				
FORMAL		24.11.09	21.12.09		19	CYP	Cherrygrove Childrens Home	Corporate Parenting		Children Order Complaints				
FORMAL		30.11.09	30.12.09		20	CYP	Craigavon Area Hospital	Specialist Child Health and Disability		Treatment and Care quality				
FORMAL		30.11.09	30.12.09		20	CYP	Craigavon Area Hospital	Specialist Child Health and Disability		Staff attitude/behaviour				
FORMAL		3.11.09	1.12.09	16.12.09	20	MHD	Craigavon Area Hospital	Mental Health Services		Communication/information to Patients			Further Local Resolution (re-opened)	

Type	Ref	First received	Replied	Re-opened	Response Time	Directorate	Site	Division/Speciality	Ward/Dept/Area	Category of Complaint	Summary of Complaint	Summary of Investigation	Action taken & Lessons Learned	Current Stage
FORMAL	Irrelevant information redacted by the USI	3.11.09	1.12.09	16.12.09	20	MHD	Craigavon Area Hospital	Mental Health Services		Staff attitude/behaviour	Irrelevant information redacted by the USI			Further Local Resolution (re-opened)
FORMAL		13.11.09	18.12.09	08.01.10	25	MHD	Oakridge Social Education Centre (SEC) Dungannon	Learning Disability Services		Communication/information to Patients				Further Local Resolution (re-opened)
FORMAL		19.11.09	4.12.09		11	MHD	Longstone Hospital	Learning Disability Services		Treatment and Care quality				Closed
FORMAL		23.12.09	23.12.09		0	MHD	Moylinn House	Learning Disability Services		Aids/Adaptations/Appliances				Closed
FORMAL		23.12.09	23.12.09		0	MHD	Moylinn House	Learning Disability Services		Treatment and Care quality				Closed
FORMAL		3.11.09	1.12.09	N/A	20	OPPC	Home of Client	Older People		Communication/information to Patients				Closed
FORMAL		12.11.09	8.12.09	N/A	18	OPPC	Home of Client	Primary Care		Policy/commercial decisions				Closed



Type	Ref	First received	Replied	Re-opened	Response Time	Directorate	Site	Division/Speciality	Ward/Dept/Area	Category of Complaint	Summary of Complaint	Summary of Investigation	Action taken & Lessons Learned	Current Stage
FORMAL	Irrelevant information redacted by the USI	20.11.09	18.12.09	N/A	20	OPPC	Southern Area Urgent Care Service (GP OOH) Craigavon	Enhanced Services		Communication + Waiting Times	Irrelevant information redacted by the USI			Closed
FORMAL		23.11.09	18.12.09	N/A	19	OPPC	Southern Area Urgent Care Service (GP OOH) Newry	Enhanced Services		Staff attitude/behaviour				Closed
FORMAL		26.11.09	16.12.09	N/A	14	OPPC	Kilkeel Primary Care Centre	Primary Care		Staff attitude/behaviour				Closed
FORMAL		1.12.09	23.12.09	N/A	16	OPPC	Dungannon Clinic	Enhanced Services		Staff attitude/behaviour				Closed
FORMAL		9.12.09	23.12.09	20.1.10	10	OPPC	Home of Client	Primary Care		Waiting times, community services				Further Local Resolution (re-opened)

**Strictly Private and Confidential****Clinical Issues in Urology Service  
Briefing Note for Trust Board Confidential****Background on IV Fluids and Antibiotics**

The clinical practice of managing recurrent urinary tract infections (UTIs) by intravenous (IV) fluids and antibiotics has become part of local urological practice over many years. This was discovered in Spring 2009 during an audit of bed usage, and was considered to be unusual. At that time the therapy was discussed with the clinicians involved and the Trust subsequently took expert advice and was persuaded that this therapy is not evidence based. About 35 patients were in the cohort, and following discussions with the commissioner, the Director of Acute Services at that time, and the clinicians, it was agreed that each member of the cohort would be reviewed with a view to ceasing IV therapy.

This patient group, who have repeated episodes of therapy, ultimately become difficult with regard to venous access. This may result in the need for placement of a central venous line as the only alternative for IV therapy. This procedure carries risks in that the line is left inserted semi-permanently. Equally the patient has difficult peripheral venous access.

The cohort of patients who have received this method of treatment has been reduced considerably to approximately 10 since January 2010.

**Current Action**

The Trust received a letter from the Commissioner seeking an assurance that this treatment had ceased and that no patient had central venous access. The Director of Acute Services and Associate Medical Director of Surgery and Elective Care have met the two surgeons individually to require an immediate review of each patient in the remaining cohort of 10. The review will be chaired by the Clinical Director of Surgery and Elective Care and will also involve Dr Damani, Consultant Microbiologist, to advise on optimum antimicrobial therapy. All potential future patients for IV therapy will also be reviewed in this manner. Both surgeons agreed to participate in this process which is now underway.

**Strictly Private and Confidential****Background on Cystectomies**

The Commissioner has also drawn to the Trust's attention to a slightly increased rate of cystectomy for benign pathology in CAH when compared with the rest of the NI region. Cystectomy is the surgical excision of bladder. The numbers of patients identified are of the order to 2-4 per year.

**Current Action**

In line with guidance provided by the document "Maintaining High Professional Standards in the HPSS" the Trust has commenced a local review. This process includes a case note review of each patient who has undergone cystectomy in the past 10 years. The review will be undertaken by the Associate Medical Director for Surgery and Elective Care, who also has a remit to seek professional advice from an appropriate expert.

The result of this screening review will guide the next step – no further action or the requirement for a deeper investigation.

In keeping with best practice the 2 clinicians have been kept fully informed.

**Regional Urology Review**

One of the requirements of the implementation of the review is that all radical pelvic urological surgery is moved to the Belfast Trust. This now explicitly covers radical pelvic surgery for both malignant and benign conditions. The Trust is in discussion currently with HSCB and Belfast Trust regarding each individual case during the transition period.

**Dr Gillian Rankin**  
**Interim Director of Acute Services**  
**September 2010**



**Minutes of the confidential meeting of the Board of Directors held on Thursday, 30<sup>th</sup> September 2010 at 10.00 a.m. in the Boardroom, Daisy Hill Hospital, Newry**

**PRESENT:**

Mrs A Balmer, Chairman  
Mrs M McAlinden, Acting Chief Executive  
Mrs D Blakely, Non Executive Director  
Mrs R Brownlee, Non Executive Director  
Mr E Graham, Non Executive Director  
Mr A Joynes, Non Executive Director  
Mrs H Kelly, Non Executive Director  
Mrs E Mahood, Non Executive Director  
Dr R Mullan, Non Executive Director  
Mr B Dornan, Director of Children and Young People's Services/Executive Director of Social Work  
Dr P Loughran, Medical Director  
Mr S McNally, Acting Director of Finance and Procurement

**IN ATTENDANCE:**

Dr G Rankin, Interim Director of Acute Services  
Mr K Donaghy, Director of Human Resources and Organisational Development  
Mrs P Clarke, Acting Director of Performance and Reform  
Mrs A McVeigh, Acting Director of Older People and Primary Care  
Mrs J Holmes, Board Secretary  
Mrs R Rogers, Head of Communications  
Mrs S Judt, Committee Secretary (Minutes)

1. **APOLOGIES**

Apologies were recorded from Mr F Rice, Director of Mental Health and Disability Services/Executive Director of Nursing.

**2. MINUTES OF PREVIOUS MEETING**

The minutes of the meeting held on 26<sup>th</sup> June 2010 were agreed as an accurate record and duly signed by the Chairman.

**3. MATTERS ARISING****i) Coroner's Inquest –** Personal Information redacted by USI

Dr Rankin advised that the Coroner's Inquest into the death of Personal Information redacted by USI was held on 28<sup>th</sup> June 2010 when the Coroner reported *'From the evidence I am satisfied, on the balance of probabilities, that the tragic consequences of co-sleeping were the underlying causes of this'*. Dr Rankin reported on the actions taken following the Coroner's Inquest:-

- All mothers continue to be advised of the risks associated with co-sleeping through verbal and written information. Bed-sharing is acceptable in cases where the mother is breastfeeding or to comfort a baby for a short period of time.
- Cot sides are only now used when transferring a mother and baby from one ward/department to another.

**4. UNTOWARD EVENT ID:** Personal Information redacted by USI

Mr Dornan outlined the incident involving a Personal Information redacted by USI child who died Personal Information redacted by USI. Believed cause of death was Cardiac failure. The child had been on the Child Protection Register (potential neglect) from Personal Information redacted by USI. He confirmed that staff continue to provide support to the various family members.

**5. TV PROGRAMME 'IN COLD BLOOD'**

Mr Dornan referred to the documentary on the Crymble case broadcast recently by the BBC and the fact that the son's contribution to this programme was deleted. This was following representations by his mother to the Children's Commissioner. Mr Dornan stated that the Commissioner is aware of the Trust's views in that this deletion was contrary to the son's wishes and without him being consulted.

Mr Dornan stated that the son was very disappointed in the decision and the Trust continues to work closely with him and has offered to take up the matter on his behalf.

6. **COVERAGE IN LURGAN MAIL – TRUST DOMICILIARY CARE SERVICE**

The Acting Chief Executive spoke of the recent negative media coverage in the Lurgan Mail, primarily as a result of a client directly contacting this paper which was followed up by supporting comments from a number of home care workers. The Trust has met with the Editor and a statement from the Trust, together with an article on a Trust's homecare worker and an appreciative client, has since been published in the Lurgan Mail as rebuttal. The client concerned has also been contacted in relation to their issues of complaint.

7. **CLINICAL ISSUES IN UROLOGY SERVICE**

Dr Rankin outlined the clinical issues in the Urology Service as detailed in the briefing note and the action being taken:-

**IV Fluids and Antibiotics**

An immediate review is underway of a cohort of 10 patients who are receiving IV therapy.

**Cystectomies**

The Commissioner had drawn to the Trust's attention a slightly increased rate of cystectomy for benign pathology in Craigavon Hospital compared with the rest of the NI region. The Associate Medical Director for Surgery and Elective Care has commenced a review, which includes a case note review of each patient who has undergone cystectomy in the past 10 years.

**Regional Urology Review**

One of the requirements of the implementation of the review is that all radical pelvic urological surgery is moved to the Belfast

Trust. There are currently 5 patients within the Southern Trust whose care is being transferred to the Belfast H&SC Trust.

8. **ASR MONO-BLOCK CUP HIP REPLACEMENT**

Dr Rankin advised that the process has commenced whereby each patient will be contacted to explain the situation and what action they can expect. She noted, however, that whilst the patients were operated on in this Trust, a number of these patients are from outside the Trust. Discussions are ongoing with the Commissioner and manufacturer regarding funding for replacement of the ASR prosthesis.

9. **FINANCIAL STABILITY PROGRAMME – RATINGS**

The Chairman noted the outcome of the assessment review. The Southern Trust was assessed as 'amber/green' and she stated that this demonstrates a high degree of confidence in the Trust's systems, processes and ability to deliver the agreed cost savings. On behalf of Board members, the Chairman paid tribute to the Acting Chief Executive, Directors, Mrs Magwood and staff involved in this process.

10. **OUTSTANDING MEDICAL NEGLIGENCE CASES**

The Acting Chief Executive advised of a recent Assembly debate on a Sinn Fein motion at the delay in resolving some medical negligence cases. Dr Loughran stated that the Southern Trust has 10 medical negligence cases outstanding for 10 years or more and he assured members that these are being dealt with appropriately and there were no undue delays in their processing by the Trust.

11. **UPDATE ON DR [REDACTED] (GP OUT OF HOURS)**

Mrs McVeigh spoke to the preliminary report of the investigation into concerns about the clinical performance of Dr [REDACTED], who has been employed by the Trust as a GP within the Out of Hours Service since [REDACTED]. Dr [REDACTED] remains excluded from practising as a salaried GP within the Out of Hours Service and a decision by an Interim Order Panel of the GMC on [REDACTED] suspended Dr [REDACTED]'s registration and this remains in place. The



Trust is processing this case under the Maintaining High Professional Standards Policy. The Trust has taken the decision to proceed through the Trust's formal investigation procedures. The Non Executive Director representative on this group is Mrs E Mahood.

12. **ANY OTHER BUSINESS**

i) **Update on NNU/MRSA events**

Mrs G Maguire, Assistant Director, Specialist Child Health and Disabilities, Dr Damani, Clinical Director, Infection Prevention and Control and Mr C Clarke, Lead Nurse, Infection Prevention and Control, joined the meeting for a discussion on this item. Mrs Maguire advised that there are currently four babies in the neo-natal unit at Craigavon Area Hospital who have been identified as carrying MRSA on the skin. The MRSA was identified during routine screening that is carried out on all babies in the unit. All babies are well, with three of them due for discharge very shortly. She also advised of three babies who had also been identified as carrying MRSA and who have been discharged home. Dr Damani explained the range of extra infection control measures put in place, in addition to existing measures and these include:-

Segregating the babies with MRSA;  
Additional deep cleaning of the Unit;  
Increasing the daily clean to three times a day;  
Continued awareness raising of infection control procedures for all staff.

All affected babies (a total of 7) were colonized. Staff screening has commenced and 84 staff have been screened; three were positive for MRSA and decolonization therapy has been started.

The Acting Chief Executive paid tribute to the staff in the NNU and the Infection Control Team for their management of this outbreak.

**ii) MLU, Lagan Valley Hospital**

Dr Rankin advised that discussions continue with the Commissioner in relation to the movement of births from Lagan Valley Hospital to Craigavon Area Hospital upon cessation of the Consultant led service to be replaced by a MLU. The issue for this Trust is how to manage the potential number of deliveries in Craigavon Area Hospital safely given that the funding which may be provided could be significantly less than what is required to deliver the estimated additional 200 births.

**iii) Administrative Error in Breast Screening Programme**

Dr Rankin reported on an administrative error that occurred in February 2009. This came to light in July 2010 when the patient presented with breast cancer. A Root Cause Analysis is nearing completion on this incident.

**iv) Maternal Death**

Irrelevant information redacted by the USI

**v) Case of suspected TB**

Dr Rankin advised of a healthcare worker in A&E with suspected Tuberculosis. A review group has been established, involving the Public Health Agency, to assess the potential risk to patients and staff. GPs in the Trust area have been notified. There was some coverage on this issue in the Irish News at the week-end.

**Clinical Issues in Urology Service  
Briefing Note for Trust Board Confidential**

**Review of patients on IV Fluids and Antibiotics**

The clinical review and development of a management plan for patients which excludes routine IV fluids and antibiotics has been led by Ms Sloan, Clinical Director, Surgery and Elective Care. The review has been completed for 13 patients.

It has been decided by the clinical review team to undertake a review of the whole original cohort of patients and it will take several more weeks to complete this.

No patient in the cohort now has a central venous line.

**Review of Cystectomies**

The clinical review of the records of the small cohort of patients who have had surgical removal of the bladder is underway by Mr Mackle, AMD, Surgery and Elective Care. This will be completed in the next few weeks.

**Regional Urology Review**

The transfer pathway of patients with urological cancer requiring radical pelvic surgery or radiotherapy has been agreed. All patients are now being transferred to the Regional Urology Centre in the Belfast Trust.

**Dr Gillian Rankin  
Director of Acute Services (Interim)  
November 2010**

**Minutes of the confidential meeting of the Board of  
Directors held on Thursday, 25<sup>th</sup> November 2010 at  
10.00 a.m. in the Boardroom, Trust Headquarters,  
Craigavon**

**PRESENT:**

Mrs A Balmer, Chairman  
Mrs M McAlinden, Chief Executive  
Mrs D Blakely, Non Executive Director  
Mrs R Brownlee, Non Executive Director  
Mr E Graham, Non Executive Director  
Mr A Joynes, Non Executive Director  
Mrs H Kelly, Non Executive Director  
Mrs E Mahood, Non Executive Director  
Dr R Mullan, Non Executive Director  
Mr B Dornan, Director of Children and Young People's  
Services/Executive Director of Social Work  
Dr P Loughran, Medical Director  
Mr F Rice, Director of Mental Health and Disability  
Services/Executive Director of Nursing

**IN ATTENDANCE:**

Dr G Rankin, Interim Director of Acute Services  
Mr K Donaghy, Director of Human Resources and Organisational  
Development  
Mrs P Clarke, Acting Director of Performance and Reform  
Mrs A McVeigh, Acting Director of Older People and Primary Care  
Mrs J Holmes, Board Secretary  
Mrs R Rogers, Head of Communications  
Mrs S Judt, Committee Secretary (Minutes)

1. **APOLOGIES**

Apologies were recorded from Mr S McNally, Acting Director of  
Finance and Procurement.

Due to time constraints, the items on the confidential section were not discussed in detail. Members had been provided with briefing papers in relation to agenda items 3, 6 and 7. The Chairman asked that if members had any questions on these items, they should speak to the relevant Director. The Chief Executive advised that a short briefing note on items 4 and 5 would be provided to members.

2. **MINUTES OF PREVIOUS MEETING**

The minutes of the meeting held on 25<sup>th</sup> November 2010 were agreed as an accurate record and duly signed by the Chairman.

3. **MATTERS ARISING**

i) **Update on ID** irrelevant  
redacted by the  
USI

Dr Rankin referred members to the briefing note in their papers outlining the following actions the Trust has taken since a healthcare worker in A&E, Craigavon Area Hospital was confirmed with potential Tuberculosis (TB).

ii) **Update on Urology issues**

Dr Rankin referred members to the update in their papers.

iii) **MRSA outbreak in NNU**

Members were provided with both the interim and the final report and noted the infection control measures that had been implemented.

4. **INQUEST INTO PATIENT WITH HEAD INJURY**

A short briefing note on this item to be provided to members.

5. **BREACH OF CLIENT DATA CONFIDENTIALITY**

A short briefing note on this item to be provided to members.

6. **CLIENT ALLEGATIONS AGAINST CARE WORKER**

Members were provided with a short briefing note and noted the content of same.

7. **SUMMARY OF PROFESSIONAL/NURSING INVESTIGATIONS UNDERWAY**

Members noted the summary of professional nursing issues as at 15<sup>th</sup> November 2010 and the progress of each.

8. **CARRICKORE CHILDREN'S RESPITE CENTRE, NEWRY**

Mr Dornan reported that negotiations with Orana continue to pursue a voluntary/private partnership approach for a single facility.

9. **REMUNERATION COMMITTEE**

The Chairman reported on a recent meeting of the Remuneration Committee held to discuss the remuneration of Mrs McAlinden on her appointment as Chief Executive.

10. **SENIOR EXECUTIVE RECRUITMENT – UPDATE**

The Chief Executive provided an update as follows:-

- Interviews for the Director of Performance and Reform are scheduled for 1<sup>st</sup> December 2010;
- Interviews for the Director of Finance are scheduled for week commencing 10<sup>th</sup> January 2011;

At this point, the Chief Executive referred to the acting up arrangements in place for the above posts and paid tribute to Mrs Clarke and Mr McNally. She also paid tribute to Dr Rankin in her role as Interim Director of Acute Services and to Mrs McVeigh as Acting Director of Older People and Primary Care Services, advising that the Trust continues to work through the recruitment process to achieve stability for the Senior Management Team.

The Chief Executive advised that it was with regret that she received the news from Mr Dornan that he will be retiring in the Spring 2011.

11. **ANY OTHER BUSINESS**

There was no further business to discuss.

Southern Health &  
Social Care Trust

# **Corporate Risk Register**

**December 2009**

**Final Version 9<sup>th</sup> Dec 2009**



**SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009****Contents**

CR1	Preparedness for Pandemic Flu, specifically a H1N1 current pandemic.
CR2	Maintenance and development of Trust estate (facilities, equipment, ICT, etc) to support service delivery and improvement
CR3	Sufficient funding to fully close baseline gaps Achieving the year two BCBV plans (including productivity line)
CR4	Funding constraints on domiciliary care services
CR5	Protection of Vulnerable Adults
CR6	Level of unallocated child care cases in FSS teams.
CR7	Issues relating to release from prison of LD /Mental Health clients into the community including those on probation. Communications between PBNi and HSC. Person Specific.
CR8	Compliance with Standards and Guidelines
CR9	Informatics - Clinical Coding Performance & Contracts Performance & Reform
CR10	Prevention and management of HCAI within the Trust
CR11	RQIA recommendations on maternity services
CR12	Ongoing achievement of Access Targets
CR13	Decontamination of Dental Instruments
CR14	Unaccredited and unregulated accommodation for 16&17 years.
CR15	Risk of non compliance with European Working Time Directive (EWTD)

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Corporate/Cross Programme</b>			
<b>Rating High</b>	<b>Preparedness for Pandemic Flu, specifically a H1N1 current pandemic</b>	1. Provide Safe, High Quality and Effective Care	<ul style="list-style-type: none"> <li>• SHSCT H1N1 Plans in final draft</li> <li>• Weekly SMT/Silver Team meetings</li> <li>• Bronze command and control meetings ongoing at Directorate level</li> <li>• Daily monitoring in place – hospitalized patients, attendances at A&amp;E, GP OOHs, MIUs</li> <li>• Representation at regional Trust Liaison Group meetings</li> <li>• Representation at regional professional fora</li> <li>• Vaccination plan submitted for HPA approval</li> <li>• Business cases for funding submitted to various workstreams</li> <li>• Ward 3 (Isolation Ward) operationally ready</li> </ul>

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	Planning on going as directives from DHSSPS issues/change. Trust synchronisation workshop being arranged	Medical Director	Weekly review by SMT/Silver Control Team	Ongoing

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Corporate/Cross Programme</b>			
<b>Rating High</b>	<b>Maintenance and development of Trust estate (facilities, equipment, ICT, etc) to support service delivery and improvement</b>	1. Provide Safe, High Quality and Effective Care	<ul style="list-style-type: none"> <li>• Maintaining Existing Service capital priorities submitted to DHSSPS and some funding secured to address critical risks</li> <li>• Capital priorities funded where possible from CRL and business cases prepared for major schemes awaiting funding</li> <li>• HCAI risks funded in 08/09 and ongoing</li> <li>• Bi monthly meetings with DHSSPS (Strategic Investment Group) at which capital investment issues are discussed.</li> <li>• CRL report to SMT bi-monthly.</li> </ul>

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	<ul style="list-style-type: none"> <li>• Ongoing prioritization and bidding process in place</li> <li>• CRL management process in place</li> </ul>	Director of Performance and Reform	Bi monthly	CRL Monitoring group SIG meeting bi-monthly with DHSSPS

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Corporate/Cross Programme</b>			
	<b>Sufficient funding to fully close baseline gaps</b>	Making best use of resources.	<ul style="list-style-type: none"> <li>Contingency Plans to address the potential gaps have been drawn up and are being implemented</li> <li>Efforts to identify recurring savings are being given new momentum and additional capacity to identify and drive forward schemes has been created with the appointment of Best Care Best Value (BCBV) senior posts in operational directorates. BCBV Programme Board and project structure is in place including Directorate specific BCBV performance management meetings.</li> <li>Trust Board report (finance paper)</li> <li>Weekly review by SMT</li> <li>BCBV Programme Board and project structure in place</li> </ul>
<b>Rating High</b>	<b>Achieving the year two BCBV plans (including productivity line)</b>		

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	<ul style="list-style-type: none"> <li>Ongoing review of controls</li> <li>BCBV Project Plan</li> <li>Trust contingency plan</li> </ul>	Directors of Finance and Performance and Reform	Ongoing Review within specified timescales	Ongoing

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Corporate/Cross Programme</b>			
	<b>Funding constraints on domiciliary care services</b>	Making best use of resources	<ul style="list-style-type: none"> <li>• Criteria and sub criteria for provision of specific services (eg meals services and night sit services)</li> <li>• Part of financial contingency plan</li> <li>• Multi-disciplinary training package produced</li> <li>• Staff supervision and review of caseloads</li> <li>• Domiciliary Care Review Group has been established (OPPC)</li> <li>• Reported as part of financial reporting</li> <li>• Access to domiciliary care monitored at Directorate level</li> </ul>
<b>Rating High</b>			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	Actions as above – service reform programme underway and ongoing discussions with commissioner regarding sustainable funding.	Directors of Older People and Primary Cares and Mental Health and Disability.	Monthly review of contingency plans	Ongoing

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Potential for Harm	Control Measures
<b>Children and Young Peoples Directorate</b>				
<b>1866</b>	<b>Protection of Vulnerable Adults</b>	1 provide safe, high quality care.	There are inconsistencies in practice and limited specialist expertise available for the protection of vulnerable adults. Systems and processes need to be reviewed.	Lead director and lead professional reviewing arrangements.
<b>Rating High</b>				

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Moderate	<p>Proposal for change to arrangements and appointment of co-ordinator. Awaiting funding from HWIP.</p> <p>DHSSPSNI identified additional monies for protection arrangements.</p> <p>Increased targeted training.</p>	Directors CYP (Ex Dir SW) & OPPC Trust Vulnerable Adults Forum.	1st December, 2009	<p>(I) Reports to Director, SHSSB and Trust Board of Directors.</p> <p>(I) Trust reporting arrangements via vulnerable adults forum.</p> <p>(I) Audit programme.</p> <p>(E) RQIA reviews.</p> <p>(E) HSCB monitoring of statutory functions.</p>

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Potential for Harm	Control Measures
<b>Children and Young Peoples Directorate</b>				
<b>1909</b>	<b>Level of unallocated child care cases in FSS teams.</b>	1 provide safe, high quality care.	There has been insufficient capacity in family support teams to allow allocation of all cases transferred from Gateway. Retention of social work staff in FST has been difficult resulting in significant numbers of relatively inexperienced AYE's in these teams.	Weekly monitoring of numbers of unallocated cases.  Workforce strategy group for family support and safeguarding teams.  Social work supervision and line management arrangements.
<b>Rating High</b>				
<b>Ref No 1909</b>				

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	Independent child care consultant commissioned to review unallocated child care referrals April – June 2009.  RQIA Action plans.  Case management review report action plans.  Further development of workforce strategy paper.	Colm McCafferty	1 <sup>st</sup> December, 2009	Weekly HSCB reports.  Monthly DHSSPSNI reports. Performance report to Trust Governance Committee. Annual Delegated Statutory Functions Report.

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Learning Disability &amp; Mental Health Directorate</b>			
<b>Forensic Services</b>	<b>Issues relating to release from prison of LD /Mental Health clients into the community including those on probation. Communications between PBNI and HSC. Person Specific.</b>	Provide Safe, High Quality and Effective Care	<ul style="list-style-type: none"> <li>• Encourage client engagement with services.</li> <li>• Provisions of the Criminal Justice (N.Ireland) Order 2008.</li> <li>• Individual client specific control measures.</li> <li>• Mental Health Order(where applicable).</li> <li>• Ongoing liaison with PBNI and PPS</li> <li>• Issued raised with DHSSPS and NIO (letter from CX 10/9/09)</li> </ul>
<b>Rating High</b>			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Moderate	Issues to be taken forward at Regional Forensics Steering Group which includes representatives from Court & Probation services.	Director of Mental Health and Disability	Monthly SMT Governance item	Ongoing



## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
Corporate/Cross Programme			
	Risk of non compliance with European Working Time Directive (EWTD).	Making best use of resources and providing safe, high quality care.	EWTD steering group has ensured compliance in the majority of medical specialties. HR leading work to identify and address EWTD issues for other service areas and staff groups.
Rating Moderate			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Moderate	<ul style="list-style-type: none"> <li>• Actions plans being developed to address residual areas of non-compliance.</li> <li>• Regular meetings between HR and medical management to explore alternative solutions for compliance.</li> <li>• Derogation for some specialties.</li> </ul>	Director of HR	Bi-monthly	Ongoing

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

<b>Risk ID</b>	<b>Title / Description</b>	<b>Link to Corporate Objective / Value</b>	<b>Control Measures</b>
<b>Medical Directorate/Cross Directorates</b>			
<b>Compliance with Standards and Guidelines</b>	<b>Assessment of Implementation of national and regional clinical and social care guidelines. Resulting in failure to provide clinical and social care to a recognised standard</b>	<i>Provide Safe, High Quality and Effective Care</i>	<ol style="list-style-type: none"> <li>1. Information on Standards and Guidelines disseminated via chief executives office.</li> <li>2. SABS system in place for the issue and response to Safety Action Bulletins</li> <li>3. Business case submitted to SHSSB in 2008 (business case declined)</li> <li>4. Effectiveness and Evaluation Dept monitoring progress with a small number of clinical guidelines in line with national and regional projects.</li> </ol>
<b>Rating High</b>			

<b>Control Strength</b>	<b>Action Plan</b>	<b>Nominated Lead for Actions</b>	<b>Review Date</b>	<b>Monitoring</b>
Some weaknesses	<i>Pursue appointment of a standards and guidelines post to ensure cataloguing of standards, progress with implementation and to provide assurances that these are being acted upon as appropriate.</i>	<i>Medical Director</i>	<i>January 2010</i>	<i>At each SMT Governance meeting</i>

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

<i><b>Risk ID</b></i>	<i><b>Title / Description</b></i>	<i><b>Link to Corporate Objective / Value</b></i>	<i><b>Control Measures</b></i>
<b>Performance &amp; Reform</b>			
<i>Informatics - Clinical Coding Performance &amp; Contracts Performance &amp; Reform</i> <b>Rating High</b>	<b>Delays in the timeliness and quality of Clinical Coding</b>		<ul style="list-style-type: none"> <li>• Coding Action Plan in place</li> <li>• Corporate recognition of significance of improving position demonstrated via Mid staffs action plan process</li> <li>• CHKS benchmarking project established to identify clinical indicators</li> <li>• Clinical indicators reported at corporate level against peer for mortality, re-admission and length of stay</li> <li>• Initial clinical indicators report commissioned to identify clinical outcomes associated individual performance for consultant medical staff with acute and community activity for inpatients, daycases and outpatients</li> <li>• Clinical interface group established by Medical Director 's Office to engage clinicians in clinical outcome measures and consider options for engagement, validation and integration of this work into current clinical outcome review processes(Dec 09)</li> <li>• Clinical interface group to consider how clinical outcomes measures for consultant medical staff not involved in OP, IP/DC work</li> </ul> <p>Data quality improvement group has been set up and detailed action plan produced.</p>

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

<b>Control Strength</b>	<b>Action Plan</b>	<b>Nominated Lead for Actions</b>	<b>Review Date</b>	<b>Monitoring</b>
	<i>Coding audit to be undertaken annually £5K cost prohibitive. Negotiations ongoing.</i>	<i>Assistant Director Information</i>	<i>March 2010</i>	
	<i>Backlog of £14,000 episodes needs to be addressed, without compromising current FCEs. 2 coders to work on backlog. Further 2 coders to be appointed to backfill this gap.</i>	<i>Assistant Director Information</i>	<i>Dec 09</i>	<i>June 2010</i>
	<i>New coding process to be implemented to improve efficiency Consultation Paper drafted.</i>	<i>Assistant Director Information</i>	<i>Consultation Oct 09</i>	<i>Implement Dec 09</i>
	<i>Mid Staffordshire action plan to be developed further to diagnostics assessment of position against recommendations underway</i>	<i>Project managers Mid Staffs Review</i>		
	<i>Process to be agreed and established to integrate clinical outcome measures into current clinical outcome review processes</i>	<i>Medical Director</i>	<i>Pending meeting Dec 09</i>	
	<i>Standing clinical indicators reports to be agreed and produced to support clinical outcome review processes. Resources to be identified to support above processes</i>	<i>Medical Director (Lesley Leeman)(</i>	<i>Pending meeting Dec 09</i>	

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

There are a number of corporate risks which the Trust is currently managing successfully, however these risks need to remain in focus due to their potential impact. Examples of these are:

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Corporate/Cross Programme</b>			
	<b>Prevention and management of HCAI within the Trust</b>	1. Provide Safe, High Quality and Effective Care	<ul style="list-style-type: none"> <li>• Project structure in place, Strategic, Operational and Clinical Teams</li> <li>• HCAI Improvement plan in place and being implemented</li> <li>• Regular monitoring and reporting to SMT, Trust Board and key staff throughout organization</li> <li>• RCAs completed for all HCAIs(C Diff, MRSA bacteraemia and MSSA bacteraemia) and process for identifying and addressing root cause.</li> <li>• Hand hygiene campaign underway</li> </ul>
<b>Rating Low</b>			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	HCAI Improvement Plan	Medical Director/Operational Directors	Ongoing Review within specified timescales	Ongoing

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Acute Directorate</b>			
	<b>RQIA recommendations on maternity services</b>	1. Provide Safe, High Quality and Effective Care	<ul style="list-style-type: none"> <li>Additional staff have been recruited to address the recommendations of the RQIA review of maternity services</li> <li>Temporary medical staff have been recruited to provide increased labour ward cover in DHH</li> <li>Ongoing discussions with commissioners</li> <li>Weekly reporting to SMT</li> <li>Regular update to Trust Board</li> </ul>
<b>Rating</b>			
<b>Moderate</b>			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	Action plan developed and under discussion with commissioner	Director of Acute Services	Weekly update to SMT	Ongoing

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Acute Directorate</b>			
	<b>Ongoing achievement of Access Targets</b>	1. Provide Safe, High Quality and Effective Care	<ul style="list-style-type: none"> <li>Weekly report to SMT</li> <li>Monthly Trust Board report</li> <li>Reporting of access breaches to SMT and RHSCB</li> </ul>
<b>Rating Moderate</b>			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	<ul style="list-style-type: none"> <li>Action plan provided to RHSCB and interim funding secured</li> <li>Internal analysis as to sufficiency of funding and impact</li> </ul>	Directors of Acute Services, Performance and Reform, Older People and Primary Care, Children and Young People, Finance, Mental Health and Learning Disability	Weekly	Weekly

## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Potential for Harm	Control Measures
<b>Children and Young Peoples Directorate</b>				
<b>1467</b>	<b>Decontamination of dental instruments</b>	1 provide safe, high quality care	Because of revised guidelines the Trust is not permitted to replace dental autoclaves. When an autoclave breaks down clinics have to be cancelled which impacts on capacity to meet targets.	Vigilance by clinicians regarding equipment efficiency and use of instruments prior to treatment.
<b>Rating</b>				
<b>Moderate</b>				

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	Order for new autoclave stopped by DHSSPSNI. Estates have a case developed to bring servicing in house up to the required standard.	Michelle Oliver	1 <sup>st</sup> December, 2009	Decontamination Committee



## SOUTHERN HEALTH AND SOCIAL CARE TRUST CORPORATE RISK REGISTER DECEMBER 2009

Risk ID	Title / Description	Link to Corporate Objective / Value	Potential for Harm	Control Measures
<b>Children and Young Peoples Directorate</b>				
<b>2201</b>	<b>Unaccredited and unregulated accommodation for 16&amp;17 years.</b>	1 provide safe, high quality care	Young people aged 16 and 17 from a care and non care background may be placed in accredited accommodation or other facilities which are not registered as children's homes. The inconsistency between legislation and policy needs to be resolved as well as increasing the range of suitable provision.	Individual risk assessment on each young person placed Placement needs determined by thorough assessment Placement agreed at HOS & AD level Director of Social Services and HSCB notified in writing HSCB, RQIA, DLS and DHSSPS are aware that this is an issue in all Trusts
<b>Rating</b>				
<b>Moderate</b>				

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	<p>Work with young people at risk of homelessness who are from a non care background.</p> <p>HOS to reinforce to teams that all such young people are subject to robust assessment and that such placements are to be notified to Director and HSCB in accordance with procedures.</p> <p>Individual young people to be included in teams risk register.</p>	Carmel Rooney	1 <sup>st</sup> December, 2009	<p>Child Protection, LAC procedures and Family Group Conferencing</p> <p>At least weekly social work visits – young person spoken to on own</p> <p>Regular telephone contact with young</p> <p>Active contact maintained with parents/carers</p> <p>Young person to remain subject to formal reviews LAC/Case planning, agenda to include the appropriateness of the placement and identification of alternative placements.</p> <p>Monthly monitoring by HOS LAC and HSCB</p>

Southern Health &  
Social Care Trust

# **Corporate Risk Register**

**June 2010**

**Version with new updates 21 June 2010**

**Next review of Corporate risk Register tabled  
for September 2010 SMT Governance  
Meeting**

## Contents

Section one	High level Corporate Risks	Status
CR1	Maintenance and development of Trust estate (facilities, equipment, ICT, etc) to support service delivery and improvement	Unchanged
CR2	Sufficient funding to fully close baseline gaps	Unchanged
CR3	Achieving the year two BCBV plans (including productivity line)	Unchanged
CR4	Impact of demand on Trust Domiciliary Care expenditure	Unchanged
CR5	Protection of Vulnerable Adults	Unchanged
CR6	Level of unallocated child care cases in FSS teams.	Unchanged
CR7	Issues relating to release from prison of LD /Mental Health clients into the community including those on probation. Communications between PBNi and HSC. Person Specific.	Unchanged
CR8	Compliance with Standards and Guidelines	Unchanged
CR8	Lack of comprehensive systems of assessment and assurance in relation to safety and quality of Trust services, including morbidity and mortality and other indicators of safety and quality	Unchanged
Section Two	Moderate Level Corporate risks	Status
CR9	Risk of non compliance with European Working Time Directive (EWTD)	Unchanged
CR10	RQIA recommendations on maternity services Updated 28 April 2010	Unchanged
CR11	Ongoing achievement of Access Targets and review appointments	Unchanged
CR12	Decontamination of Dental Instruments	Unchanged
CR13	Carrying out of annual reviews of care plans (Statutory Requirement) for domiciliary placements and care home placements.	Unchanged
Section Three	Low Level Corporate risks	Status
CR 14	Prevention and management of HCAI within the Trust	Unchanged

## Issues downgraded for removal from Corporate Risk Register

Placement of 16 and 17 year olds in unaccredited facilities (B Doran request to remove) No longer a Corporate Risk Issue will be managed as Directorate risk issue.

## Section One High level Corporate Risks

There are a number of corporate risks which the Trust is currently seeking to managing successfully, these risk areas are of high concern to the Senior Management Team due to their potential impact and the current restraints on the Trust in seeking to reduce the level of risk in these areas.

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Corporate/Cross Programme</b>			
	<b>Maintenance and development of Trust estate (facilities, equipment, ICT, etc) to support service delivery and improvement</b>	1. Provide Safe, High Quality and Effective Care	<ul style="list-style-type: none"> <li>• Maintaining Existing Service capital priorities submitted to DHSSPS and some funding secured to address critical risks</li> <li>• Capital priorities funded where possible from CRL and business cases prepared for major schemes awaiting funding</li> <li>• HCAI risks funded in 08/09 and ongoing</li> <li>• Bi monthly meetings with DHSSPS (Strategic Investment Group) at which capital investment issues are discussed.</li> <li>• CRL report to SMT bi-monthly.</li> </ul>
<b>Rating High</b>			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	<ul style="list-style-type: none"> <li>• Ongoing prioritization and bidding process in place</li> <li>• CRL management process in place</li> </ul>	Director of Performance and Reform	Bi monthly	CRL Monitoring group SIG meeting bi-monthly with DHSSPS

CR1

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Corporate/Cross Programme</b>			
	<b>Achieving the year two BCBV plans (including productivity line)</b>	Making best use of resources.	<ul style="list-style-type: none"> <li>Contingency Plans to address the potential gaps have been drawn up and are being implemented</li> <li>Efforts to identify recurring savings are being given new momentum and additional capacity to identify and drive forward schemes has been created with the appointment of Best Care Best Value (BCBV) senior posts in operational directorates. BCBV Programme Board and project structure is in place including Directorate specific BCBV performance management meetings.</li> <li>Trust Board report (finance paper)</li> <li>Weekly review by SMT</li> <li>BCBV Programme Board and project structure in place</li> </ul>
<b>Rating High</b>	<b>Sufficient funding to fully close baseline gaps</b>		

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	<ul style="list-style-type: none"> <li>Ongoing review of controls</li> <li>BCBV Project Plan</li> <li>Trust contingency plan</li> </ul>	Directors of Finance and Performance and Reform	Ongoing Review within specified timescales	Ongoing

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Corporate/Cross Programme</b>			
	<b>Impact of demand patterns on Trust Domiciliary Care Expenditure</b>	Provide safe, high quality and effective care.	<ol style="list-style-type: none"> <li>1. Services and staff made aware of SH&amp;SSB Access to Domiciliary Care Criteria.</li> <li>2. Development of OPPC Access to Domiciliary Care sub eligibility Criteria (ie. access criteria and sub criteria agreed for provision of specific services (meals services, personal care, toileting, back to bed and night sit services).</li> <li>3. Raising of authority for Dom Care Package approval to Heads of Services.</li> <li>4. Financial contingency plan in place since Nov '08 and revised in April 2010.</li> <li>5. Agreed content of a training package and the training package has been produced, along with delivery of multi-disciplinary training for staff who assess for services, to ensure consistent roll-out and application of the various access criteria and sub eligibility criteria. and</li> <li>6. Ongoing development of Domiciliary Care access criteria and control measures in discussion with Commissioner</li> </ol>
<b>Rating</b>			
<b>Moderate</b>			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Some Weaknesses	Domiciliary Help Group established to consider issues, develop and implement an action plan.	Director of OPPC in conjunction with Assistant Director	Quarterly	Ongoing
	Care Management RPE Group established to consider issues, develop and implement an action plan.	Director of OPPC in conjunction with Assistant Director	Quarterly	Ongoing

<b>Control Strength</b>	<b>Action Plan</b>	<b>Nominated Lead for Actions</b>	<b>Review Date</b>	<b>Monitoring</b>
	Development of Directorate Financial Contingency Plans to address over expenditure 2010/11 Plan now agreed in April '10	Director of OPPC	Feb '11	Ongoing via BCBV
	Defining level of access criteria which can be met within budget available: last reviewed April '10	Director and Assistant Director	June '10	Ongoing
	Working towards devolving budget responsibility and accountability to HOS and Team Levels	Director and Assistant Director and Finance Officers	April '10	Ongoing

Risk ID	Title / Description	Link to Corporate Objective / Value	Potential for Harm	Control Measures
<b>Children and Young Peoples Directorate</b>				
<b>1866</b>	<b>Protection of Vulnerable Adults</b>	1 provide safe, high quality care.	There are inconsistencies in practice and limited specialist expertise available for the protection of vulnerable adults. Systems and processes need to be reviewed.	Lead director and lead professional reviewing arrangements.
<b>Rating High</b>				

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Moderate	<p>Proposal for change to arrangements and appointment of co-ordinator. Awaiting funding from HWIP.</p> <p>DHSSPSNI identified additional monies for protection arrangements.</p> <p>Increased targeted training.</p>	Directors CYP (Ex Dir SW) & OPPC Trust Vulnerable Adults Forum.	<p>June 2010</p> <p>Commissioning Plan to clarify development funding and priorities 2010/11</p>	<p>(I) Reports to Director, SHSSB and Trust Board of Directors.</p> <p>(I) Trust reporting arrangements via vulnerable adults forum.</p> <p>(I) Audit programme.</p> <p>(E) RQIA reviews.</p> <p>(E) HSCB monitoring of statutory functions.</p>



Risk ID	Title / Description	Link to Corporate Objective / Value	Potential for Harm	Control Measures
<b>Children and Young Peoples Directorate</b>				
<b>1909</b>	<b>Level of unallocated child care cases in FSS teams.</b>	1 provide safe, high quality care.	There has been insufficient capacity in family support teams to allow allocation of all cases transferred from Gateway. Retention of social work staff in FST has been difficult resulting in significant numbers of relatively inexperienced AYE's in these teams.	Weekly monitoring of numbers of unallocated cases.  Workforce strategy group for family support and safeguarding teams.  Social work supervision and line management arrangements.
<b>Rating High</b>				
<b>Ref No 1909</b>				

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	Independent child care consultant commissioned to review unallocated child care referrals April – June 2009.  RQIA Action plans in place and being implemented  Case management review report action plans.  Further development of workforce strategy paper.	Director of C&YP	Monthly	Weekly HSCB reports.  Monthly DHSSPSNI reports.  Performance report to Trust Board and reporting to Governance Committee  Annual Delegated Statutory Functions Report.

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Learning Disability &amp; Mental Health Directorate</b>			
<b>Forensic Services</b>	<b>Issues relating to release from prison of LD /Mental Health clients into the community including those on probation. Communications between PBNI and HSC. Person Specific.</b>	Provide Safe, High Quality and Effective Care	<ul style="list-style-type: none"> <li>• Encourage client engagement with services.</li> <li>• Provisions of the Criminal Justice (N.Ireland) Order 2008.</li> <li>• Individual client specific control measures.</li> <li>• Mental Health Order(where applicable).</li> <li>• Ongoing liaison with PBNI and PPS</li> <li>• Issued raised with DHSSPS and NIO (letter from CX 10/9/09)</li> </ul>
<b>Rating High</b>			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Moderate	Issues to be taken forward by SHSCT Forensics services and also ongoing liaison between Trust and HSC Board, DHSSPSNI and NIO.	Director of Mental Health and Disability	Monthly	Ongoing

<i>Risk ID</i>	<i>Title / Description</i>	<i>Link to Corporate Objective / Value</i>	<i>Control Measures</i>
Corporate/Cross Directorates			
Medical Directorate	Compliance with Standards and Guidelines	Provide Safe, High Quality and Effective Care	1. Information on Standards and Guidelines disseminated via chief executives office to Medical Director and Lead Director. 2. SABS system in place for the issue and response to Safety Action Bulletins 3. Effectiveness and Evaluation Unit monitoring progress with a small number of clinical guidelines in line with national and regional projects 4. Review of C&SC Governance operation systems and processes underway to report in July 2010
Rating High	Lack of assessment of Trust performance against national and regional clinical and social care guidelines endorsed and issued by DHSSPS and commissioner, resulting in lack of assurance and potential failure to identify where the Trust is not providing clinical and social care to endorsed standards		

<i>Control Strength</i>	<i>Action Plan</i>	<i>Nominated Lead for Actions</i>	<i>Review Date</i>	<i>Monitoring</i>
Some weaknesses	Reallocation of resources within the medical directorate to ensure work is taken forward to ensure cataloguing of standards, monitoring of progress with implementation and provision of assurances to SMT and Trust Board that the Trust is compliant with these standards.	Medical Director	July 2010	At each SMT Governance meeting

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures		
Corporate/Cross Directorates					
<b>Medical Directorate</b>	Lack of comprehensive systems of assessment and assurance in relation to safety and quality of Trust services, including morbidity and mortality and other indicators of safety and quality	<b>Provision of Safe Effective Care</b>	<ul style="list-style-type: none"> <li>Governance Committee and SMT Governance Group in place</li> <li>Directorate and Division-specific governance groups in place with regular review of information emerging from SAls, AIs, complaints, etc.</li> <li>System of Root Cause Analysis in place for SAls and HCAls.</li> <li>Limited range of quality and safety indicators in place and reported monthly to Trust Board</li> <li>Staff training in reporting of incidents ongoing</li> <li>The Patient Safety initiative suite of interventions as per the Regional Patient Safety Forum is well established.</li> <li>Effectiveness and evaluation unit have a defined programme of activity.</li> <li>Reallocation of resources in medical directorate to ensure standards and guidelines workload is taken forward.</li> <li>Rolling programme of specialty-specific information to Trust Board from April 2010</li> </ul>		
<b>Rating High</b>					
Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring	
	Review of C&SC Governance operational systems and processes underway, including assessment against recommendations of Mid Staffordshire	Chief Executive	July 2010	Monthly progress report to SMT Governance	
	Development of benchmarked clinical indicators via CHKS.	DP&R/Medical Director	June 2010	Monthly progress update to SMT Governance and bimonthly to Governance Committee	
	Review of Specialty M&M system underway to ensure assurance in relation to service quality and safety	Medical Director	June 2010	Recommendations for SMT approval by June 2010	
	Improvement Plan for clinical coding underway	DP&R	May 2010	Monthly performance reported to Trust Board	

## Section Two Moderate level Corporate Risks

There are a number of corporate risks which the Trust is currently managing successfully, however these risks need to remain in focus due to their potential impact. Examples of these are:

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
Corporate/Cross Programme			
Human Resources	Risk of non compliance with European Working Time Directive (EWTD).	Making best use of resources and providing safe, high quality care.	EWTD steering group has ensured compliance in the majority of medical specialties. HR leading work to identify and address EWTD issues for other service areas and staff groups.
Rating Moderate			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Moderate	<ul style="list-style-type: none"> <li>Actions plans being developed to address residual areas of non-compliance.</li> <li>Regular meetings between HR and medical management to explore alternative solutions for compliance.</li> <li>Derrogation for some specialties.</li> </ul>	Director of HR	Bi-monthly	Ongoing

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
Acute Directorate			
IMWH	Capacity to deliver high quality standards of maternity care as defined by RQIA report.	Provide safe, high quality and effective care.	1. Action plan for final RQIA report in progress. 2. Temporary medical staff have been recruited to provide increased labour ward cover in DHH. 3. Continuing discussions with commissioners, NIMDTA regarding anaesthetic cover and other matters. 4. Monthly report to SMT. 5. Regular update to Trust Board
Rating Moderate			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	Action Plan developed and under discussion with commissioner.	Director of Acute	Monthly update to SMT Governance	Ongoing

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Acute Directorate</b>			
<b>All Divisions</b>	Ongoing achievement of Access Targets and review appointments	1. Provide Safe, High Quality and Effective Care	<ul style="list-style-type: none"> <li>RVBL team established to 'cleanse' the lists of patients waiting, ensuring no duplication or incorrect recording of activity.</li> <li>Specialist Nurses working in Consultation with relevant Consultants to screen urgent, and patients waiting the longest length of time.</li> <li>Patients waiting since 2007 have had their Patient Centre letter on PAS downloaded, and appointment given if appropriate.</li> <li>Vacant Outpatient sessions have been backfilled with Review Backlog patients, when Consultant available.</li> <li>Heads of Service are meeting with Relevant Consultants and conveying current provision on a monthly basis</li> </ul>
<b>Rating Moderate</b>			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Some Weaknesses	<ul style="list-style-type: none"> <li>Arranging additional clinics to target primarily Review Backlog patients- not feasible in current financial situation</li> <li>Reduce the current number of new patients within Outpatient template, to increase the capacity of review patients- not feasible, as performance targets will then be breached.</li> <li>Recruit additional Medical staff to address shortfall in capacity- not feasible in current financial situation.</li> </ul>	Directors of Acute Services, Performance and Reform, Older People and Primary Care, Children and Young People, Finance, Mental Health and Learning Disability	Weekly	Weekly

## OPPC Podiatry issues added 28 April 2010

Risk ID	Title / Description	Link to Corporate Objective / Value	Potential for Harm	Control Measures
<b>Children and Young Peoples Directorate OPPC Directorate</b>				
<b>1467</b>	Decontamination of dental instruments	1 provide safe, high quality care	Because of revised guidelines the Trust is not permitted to replace dental autoclaves. When an autoclave breaks down clinics have to be cancelled which impacts on capacity to meet targets.  Exposure of patients accessing the service and staff working within the service to infection.	Vigilance by clinicians regarding equipment efficiency and use of instruments prior to treatment.
<b>Rating Moderate</b>	Decontamination of Podiatry instruments			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	Order for new autoclave stopped by DHSSPSNI. Estates have a case developed to bring servicing in house up to the required standard.  <b>Use of a Central Decontamination Service for all Podiatry Re-usable Instruments</b> - This is the preferred option of choice and currently the only option that would enable the service to eliminate all decontamination and other potential risks. It is not possible to implement a change from local to central decontamination due to funding shortfalls and CSSD capacity constraints at this time.	Michelle Oliver  Head of Podiatry Services	1 <sup>st</sup> December 2009	Decontamination Committee



Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
Corporate/Cross Programme			
	Carrying out of annual reviews of care plans (Statutory Requirement) for domiciliary placements and care home placements.	Provide safe, high quality and effective care.	
Rating Moderate			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Some Weaknesses	Group constituted to examine operational management of the annual review process. Group has met and given attention to those longest outstanding reviews in the first instance.	Assistant Director & Heads of Services	April 09	June 09
	Consideration being given to the establishment of a Permanent Placement Team.	Assistant Director & HOS	May '10	Sept '10

### Section Three      Low Level Corporate risks

There are a number of corporate risks which the Trust is currently managing successfully, these risks are categorised as low with a plan to reallocate to Directorate risk registers. Examples of these are:

Risk ID	Title / Description	Link to Corporate Objective / Value	Control Measures
<b>Corporate/Cross Programme</b>			
	Prevention and management of HCAI within the Trust	1. Provide Safe, High Quality and Effective Care	<ul style="list-style-type: none"> <li>• Project structure in place, Strategic, Operational and Clinical Teams</li> <li>• HCAI Improvement plan in place and being implemented</li> <li>• Regular monitoring and reporting to SMT, Trust Board and key staff throughout organization</li> <li>• RCAs completed for all HCAIs(C Diff, MRSA bacteraemia and MSSA bacteraemia) and process for identifying and addressing root cause.</li> <li>• Hand hygiene campaign underway</li> </ul>
<b>Rating Low</b>			

Control Strength	Action Plan	Nominated Lead for Actions	Review Date	Monitoring
Strong	HCAI Improvement Plan	Medical Director/Operational Directors	Ongoing Review within specified timescales	Ongoing

**Stinson, Emma M**

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**From:** Loughran, Patrick [Personal Information redacted by USI]  
**Sent:** 19 April 2010 15:01  
**To:** Stinson, Emma M  
**Cc:** Wilson, Roberta; Brennan, Anne  
**Subject:** RE: Acute Clinical Governance Group

Gillian  
Thanks

The first point has been agreed with DLS, and will be provided by the barrister in each settled or contested case. Also if an important matter arises during the evolution of a case than DLS will advise at our regular meeting, and I will in turn put this into the relevant part of the system. CHKS info is being developed with Paula [Clarke] and med directorate, and will be shared, so that there are no surprises. Anne {Brennan} is looking at this with each AMD in turn. Finally Anne [Quinn] has already agreed a template with the AMDs for the feedback referred to by E Mackle.

Paddy

From: Stinson, Emma M  
Sent: 19 April 2010 11:13  
To: Loughran, Patrick  
Cc: White, Laura  
Subject: Acute Clinical Governance Group

Dear Paddy

I chaired the first meeting of this group which involves all acute AMDs and ADs/Dr Boyce supported by Beatrice, David as available.

Issues which arose:

- The request for information on learning points post settlement of a medical litigation. This issue raised by Dr Hall was previously made available by Carson McDowell and was seen to be useful.

I note there is no mention of action learning points being shared back with Operational Directors/AMDs in the paper recently tabled at SMT on the Management of Litigation.

- Learning from M&M. Mr Mackle requested that learning points from the Surgical/Anaesthetic/Radiology M&M be made available to the Acute Clinical Governance Group. I will seek this from Anne Quinn.

- CHKS information – I will discuss with you at our next 1:1 meeting.

Thanks

Gillian

Dr Gillian Rankin  
Interim Director of Acute Services

Emma Stinson  
PA to Dr Gillian Rankin, Interim Director of Acute Services Admin Floor Craigavon Area Hospital

Tel: [Personal Information redacted by USI]  
Fax: [Personal Information redacted by USI]

Email: [Personal Information redacted by the USI]

H - Beth 3  
Free urology

Dear Heather and Ronan,

I presume that you have these guidelines already and are working through the operational detail.

Can I request that there is an urgent review of where we are with uro red flags as there is information/anecdote in the system which says that we do not currently meet the red flag standards for uro patients. I would need assurance that this is incorrect or if it is correct then we have a responsibility to raise it as a risk and put in place an action plan to address.

At present the performance monitoring around 31 days and 62 days is not identifying any breaches regularly so we would also need to check this aspect out to check that all uro red flags are being registered appropriately.

Could I have an indication of whether or not we have a problem quickly in a few days and then we can take from there. I will be for mid week next week, Thanks,

Gillian

818 26<sup>th</sup> May

-----Original Message-----

From: Clarke, Paula [Personal Information redacted by USI]  
Sent: 17 May 2010 11:45  
To: Beth Malloy; Rankin, Gillian  
Cc: Trouton, Heather  
Subject: RE: Referral Guidelines - Urological MDTs

Hi Beth

Just a reminder re need for you to flag up the capital requirements for implementing the review with HEIG as they would need to build this into planning for 1011 allocations.

Thanks

Paula Clarke  
Acting Director Performance and Reform  
[Personal Information redacted by USI]

-----Original Message-----

From: Beth Malloy [Personal Information redacted by USI]  
Sent: 17 May 2010 10:01  
To: Rankin, Gillian  
Cc: Clarke, Paula; Trouton, Heather; Bridget Tourish; Hughes, Dermot2  
Subject: Fw: Referral Guidelines - Urological MDTs

"This email is covered by the disclaimer found at the end of the message."

Dear Gillian

Following our meeting last week.

Please find attached the MDM referral guidelines for Urology.

You may also wish to link with Dermot and Bridget re the Urology MDM. They are working with the other teams to support MDM implementation.

Regards  
Beth

**Stinson, Emma M**

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**From:** Rankin, Gillian  
**Sent:** 17 May 2010 11:45  
**To:** Stinson, Emma M  
**Subject:** FW: Referral Guidelines - Urological MDTs

-----  
From: Clarke, Paula [Personal Information redacted by USI]  
Sent: Monday, May 17, 2010 11:45:18 AM  
To: Beth Malloy; Rankin, Gillian  
Cc: Trouton, Heather  
Subject: RE: Referral Guidelines - Urological MDTs Auto forwarded by a Rule

Hi beth

Just a reminder re need for you to flag up the capital requirements for implementing the review with HEIG as they would need to build this into planning for 2011 allocations.

Thanks

Paula Clarke  
Acting Director Performance and Reform  
[Personal Information redacted by USI]

-----Original Message-----

From: Beth Malloy [Personal Information redacted by USI]  
Sent: 17 May 2010 10:01  
To: Rankin, Gillian  
Cc: Clarke, Paula; Trouton, Heather; Bridget Tourish; Hughes, Dermot2  
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Regards  
Beth

Sent by Blackberry  
Beth Malloy  
Performance Management and Service Improvement Directorate Health and Social Care Board  
[Personal Information redacted by USI]

----- Original Message -----

From: Hughes, Dermot2 [Personal Information redacted by USI]  
To: Beth Malloy  
Sent: Mon May 17 09:48:13 2010  
Subject: FW: Referral Guidelines - Urological MDTs

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-----Original Message-----

From: Bridget Tourish [Personal Information redacted by USI]  
Sent: 14 May 2010 16:22

To: michael.young [Personal Information redacted by USI] Porter, Alison;  
wendy.clayton [Personal Information redacted by USI]  
Cc: Hughes, Dermot2  
Subject: Referral Guidelines - Urological MDTs

"This email is covered by the disclaimer found at the end of the message."

Dear Colleagues

I have been advised that you did not have access to a copy of the agreed standard working policy for the Urological MDTs.

Please now find this attached. This document was formally agreed at the NICA<sup>n</sup> Urology group meeting on 8th October, 2009.

Should you have any queries, please do not hesitate to contact me.

Kind regards

Bridget

Bridget Tourish

Acting Operations Manager & Clinical Network Co-ordinator

NI Cancer Network (NICA<sup>n</sup>)

1st Floor, IT Department

Back Entrance, Knockbracken Clinic

Knockbracken Healthcare Park

Belfast BT8 8BH

Tel: [Personal Information redacted by USI]

Fax: [Personal Information redacted by USI]

Mob: [Personal Information redacted by USI]

Web: [www.cancerni.net](http://www.cancerni.net)

Please note new e-mail address: [Personal Information redacted by USI]

**Stinson, Emma M**

**From:** Rankin, Gillian  
**Sent:** 17 May 2010 10:01  
**To:** Stinson, Emma M  
**Subject:** FW: Referral Guidelines - Urological MDTs

**Attachments:** Urological MDTs - Standard Working Policy.doc



Urological MDTs -  
Standard Wor...

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From: Beth Malloy [Personal Information redacted by USI]  
Sent: Monday, May 17, 2010 10:01:05 AM  
To: Rankin, Gillian  
Cc: Clarke, Paula; Trouton, Heather; Bridget Tourish; Hughes, Dermot2  
Subject: Fw: Referral Guidelines - Urological MDTs Auto forwarded by a Rule

"This email is covered by the disclaimer found at the end of the message."

Dear Gillian  
Following our meeting last week.  
Please find attached the MDM referral guidelines for Urology.

You may also wish to link with Dermot and Bridget re the Urology MDM. They are working with the other teams to support MDM implementation.

Regards  
Beth

Sent by Blackberry  
Beth Malloy  
Performance Management and Service Improvement Directorate Health and Social Care Board  
[Personal Information redacted by USI]

----- Original Message -----

From: Hughes, Dermot2 [Personal Information redacted by USI]  
To: Beth Malloy  
Sent: Mon May 17 09:48:13 2010  
Subject: FW: Referral Guidelines - Urological MDTs

This e-mail is covered by the disclaimer found at the end of the message.

-----Original Message-----

From: Bridget Tourish [Personal Information redacted by USI]  
Sent: 14 May 2010 16:22  
To: michael.young [Personal Information redacted by USI]; Porter, Alison;  
wendy.clayton [Personal Information redacted by USI]  
Cc: Hughes, Dermot2  
Subject: Referral Guidelines - Urological MDTs

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Dear Colleagues

I have been advised that you did not have access to a copy of the agreed standard working policy for the Urological MDTs.

Please now find this attached. This document was formally agreed at the NICaN Urology group meeting on 8th October, 2009.

Should you have any queries, please do not hesitate to contact me.

Kind regards

Bridget

Bridget Tourish

Acting Operations Manager & Clinical Network Co-ordinator

NI Cancer Network (NICaN)

1st Floor, IT Department

Back Entrance, Knockbracken Clinic

Knockbracken Healthcare Park

Belfast BT8 8BH

Tel: [Personal Information redacted by USI]

Fax: [Personal Information redacted by USI]

Mob: [Personal Information redacted by USI]

Web: [www.cancerni.net](http://www.cancerni.net)

Please note new e-mail address: [bridget.tourish](mailto:bridget.tourish@[Personal Information redacted by USI])

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## **NICaN Regional Urology Network**

### **Standard Working Policy Urological Cancer MDTs**

**Formally signed off at NICaN Regional Urology Meeting  
8<sup>th</sup> October, 2009**

**Note:** This document was prepared based on discussions at a meeting held at meetings 23<sup>rd</sup> April 2009 and Thursday 18<sup>th</sup> June, 2009.

### **Future Configuration of Urology MDMs**

Following discussion, it has been agreed that there will be 3 local MDMs outlined below with 1 regional MDM based in Belfast which will have identified slots for local teams to tele-link into for discussion of appropriate patients.

The 3 local MDMs are as follows

- Belfast/South Eastern
- Northern/Western
- Southern

The following was agreed in relation to local and specialist discussion of patients. This is largely based on the Improving Outcomes Guidance<sup>1</sup>, however some local variances have been made. In addition to the criteria set out below, there is an agreement that all local teams will refer patients to the specialist MDM where it is felt clinically appropriate.

### **Monitoring mechanisms**

It has been agreed that a 6 month and 12 month review should be built into new reconfiguration to ensure appropriate discussion of patients.

### **Specialist Discussion**

The following patients should be discussed at the Specialist MDM.

#### **Prostate Cancer**

- Patients being considered for radical surgery
- Patients with biochemical failure post local therapy
- Patients with complex issues (e.g. inflammatory bowel disease, previous radiotherapy etc).
- Patients suitable for brachytherapy

#### **Bladder Cancer**

- Patients with muscle invasive cancer
- Patients being considered for radical cystectomy
- All patients who have received TURBT with failed BCG or other medical therapy for superficial disease
- Patients with radiotherapy failure with severely symptomatic or haemorrhagic tumours
- Patients with PT1 G3 tumours

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<sup>1</sup> Improving Outcomes in Urological Cancer, National Institute for Clinical Excellence, September, 2002

**Kidney Cancer**

- Patients with invasive tumours (locally advanced)
- Patients with limited metastatic disease which might be amenable to resection
- Patients with bi-lateral disease or who require dialysis
- Patients with Hippel-Lindau disease or hereditary papillary tumours
- Patients with small tumours for whom nephron-sparing surgery may be possible

**Penile Cancer**

- Agreed links with Supra-Network Level required

**Testicular Cancer**

The following patients should be referred to specialist MDT before Orchidectomy to the specialist team:

- those with obvious metastatic disease and high tumour markers
- those with lung metastases
- those with germ cell tumours

Agreed that links to supra- network levels are required.

**Clinical trial candidates**

- All patient eligible for clinical trials (e.g.: CHHiP, STAMPEDE) should be discussed by the specialist team as research radiographers and nurses will be in attendance at the meeting.

**Local Discussion**

The following patients should be discussed at the Local MDM

**Prostate Cancer**

- Patients with locally advanced or metastatic disease, however such patients are to be referred for specialist discussion if clinically appropriate. Patients > 85 years old do not require discussion.

t s

**Kidney Cancer**

- PT1A and 1B if appropriate surgical skills are available
- Patients suitable for partial nephrectomy

**Testicular Cancer**

- Initial diagnosis and treatment (orchidectomy) should normally be carried out by local team

## Mackle, Eamon

---

**From:** Mackle, Eamon  
**Sent:** 01 September 2011 10:20  
**To:** Corrigan, Martina; Trouton, Heather  
**Subject:** Fw: O'Brien Aidan DRAFT job plan Jun 2011

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

**Categories:** AD of the Week

FYI

Eamon

---

**From:** Mackle, Eamon  
**To:** Clegg, Malcolm  
**Sent:** Thu Sep 01 10:16:33 2011  
**Subject:** Fw: O'Brien Aidan DRAFT job plan Jun 2011

Malcolm

Will you start the facilitation process please.

Eamon

---

**From:** aidanpobrien [Personal Information redacted by USI]  
**To:** Mackle, Eamon  
**Sent:** Thu Sep 01 09:23:00 2011  
**Subject:** Re: O'Brien Aidan DRAFT job plan Jun 2011

Eamon,

I am unable to agree to revised Job Plan proposal of 26 August 2011 as it is even less workable than previous proposal.

Aidan.

-----Original Message-----

**From:** Mackle, Eamon [Personal Information redacted by USI]  
**To:** aidanpobrien [Personal Information redacted by USI]  
**CC:** Corrigan, Martina [Personal Information redacted by USI]  
**Sent:** Fri, 26 Aug 2011 13:13  
**Subject:** RE: O'Brien Aidan DRAFT job plan Jun 2011

Aidan

Thank-you for your email

Re the points raised.

· The fifth Monday occurs X4 per year equally bank holiday Mondays also equal X4 per year

· The specialist clinic is in Thorndale on a Friday so I cannot understand your point

· I have swapped your ward round on a Tuesday for the occasional patient who needs admitted the day before. You have a total of 4 hours for in-patient ward round per week.

· I note the comment re administration time and following reassessment of the admin time allocated to your colleagues I have reduced your allocation to 4.25 hours per week which is now similar to your colleagues.

· SPA time as I have stated at our meeting is a core of 1.5 SPAs. Any requests for increased SPA will be considered in the future on provision of further detail including Audit Tool, benefits and measureable outcomes.

If you are not able to agree to this job plan by 1/9/11 I am happy to request facilitation.

Eamon

From: [REDACTED] Aidan O'Brien's email address  
Sent: 24 August 2011 11:05  
To: Mackle, Eamon  
Subject: Re: O'Brien Aidan DRAFT job plan Jun 2011

Eamon,

I do not accept the revised Job Plan proposal of 10 August 2011 for following reasons:

\* I find it unacceptable the proposal to travel to Banbridge on the morning of the fifth Monday of the month, to conduct a clinic, lasting four hours, without credit in a Job Plan. If it cannot be accredited, I would prefer that it would not be included in a Job Plan.

\* I believe that it was both important and reasonable to have time allocated to addressing patient management issues arising in Thorndale Unit. Last Friday, I spent one hour doing so. That included contacting the GP of a patient whose serum PSA had increased from 8 ng/ml to 803 ng/ml in less than one year. I had proposed the inclusion of a nominal time allocation of 30 minutes per week (on Tuesdays 1.00 to 1.30 pm). I believe that Urology ICATS cannot function safely without consultant urologists providing advisory input, and I believe time allocated to that function should be included in Job Plans.

\* I believe that it remains a necessity to allocate time to conduct a ward round on Tuesday evening. Irrespective of practices in other specialties, I would anticipate that we will continue to have some patients undergoing surgery, and who will not have been admitted electively on the day of surgery. In any case, all patients admitted electively will have given prior consent. Even if that prior consent is in written form, I believe that it would be better practice to review the patient following admission, and that it would be inappropriate to defer that review to the morning of surgery. Moreover, this round is not solely for the purpose of obtaining written consent from patients undergoing surgery

the following day, but for all inpatients.

\* The time allocated to administration remains inadequate. I note a recent expectation that the results of all investigations (presumably of outpatients) be read by consultants as soon as the results are available. How much administrative time will this consume? How much time will be allocated in Job Plan?

\* Lastly, I would propose to increase SPA time by one PA per month to conduct audit in urological oncology. I have included this in Professional Development in appraisal for coming year, and as stated previously, I believe that audit must begin in order to satisfy MDT peer review. It will not begin with current SPA allocation.

Aidan

-----Original Message-----

From: Mackle, Eamon [Personal Information redacted by USI]  
To: aidanpobrien [Personal Information redacted by USI]  
Sent: Wed, 10 Aug 2011 12:54  
Subject: RE: O'Brien Aidan DRAFT job plan Jun 2011

Aidan

I have written comments in red below and am attaching a revised job plan. If you are in agreement will you let either myself or Martina know and we can get the document printed for signature

Eamon

From: [Aidan O'Brien's email address]  
] Sent: 22 July 2011 10:38  
To: Mackle, Eamon  
Subject: Re: O'Brien Aidan DRAFT job plan Jun 2011

Eamon,

Thank you for amended job plan proposal. I appreciate the attention that has been given to previously submitted comments. I am left with a few issues to be clarified or resolved:

1. Going to Banbridge on Fifth Monday of month. I am confused as to how one calculates recognition of that, both with regard to travelling time and clinic time. I have not been allocated any travelling or clinic time in the proposal. Is it difficult to do so for Fifth 'Anything' in the month? Would it be better or easier not to do clinic on Fifth Monday? I talked to HR and to date it has been taken as swings and roundabouts.



2. I go to Thorndale Clinic on Tuesdays between Day Surgery and Outpatients

Clinic, to address any issues there. These are to decide management of patients who have attended Nurse Led Clinics. So it would be impractical to do Ward Round

between 1pm and 1.30 pm. In fact, it would be good to have that half hour built into every Tuesday, irrespective of whether I am in Day Surgery on Tuesday mornings, or doing Admin, and to have instead half hour for ward round from 5.30

to 6.00, which will enable be to visit and consent any patients who are admitted on Tuesday for surgery on Wednesday, and who would not have been admitted at the earlier time in any case. We have moved in colorectal to admission on the day of

surgery so consents are either done in the OPD or during the preop ward round.

3. It is my view that it would be better to have Inpatient Theatre session extended to 5.30 on Wednesday, followed by allocation of one hour for Ward Round. I do believe that doing so will enable theatre utilisation to be maximised. I believe that terminating the theatre allocation time at 5.00 will certainly result in a drift to have operating actually finishing at 4.30 to 4.45, reducing theatre utilisation and productivity. I believe that would be a negative and short-sighted development. Theatre staff are already annoyed at overruns and I am constantly reminded by Ronan Carroll that the all day list is from 9 until 5.

4. I believe that we three have accepted the split between DCC and SPA on Thursday mornings, but strongly believe that 'Grand' should be restored to 'Ward Round'. Grand has been inserted. When we become five, we would intend to split the team into two firms, in some way, to ensure that Grand Rounds can still be conducted, as we believe that it is a vital component of clinical governance, and wish to retain it.

5. I would prefer to have Admin and Ward Round on Friday switched around, so that Admin can be done from 1.00 - 2.00, so as to complete all Admin arising from Thorndale whilst in Thorndale, followed by Ward Round at 2pm.

6. I believe all of the above can be readily addressed and resolved, leaving one more substantive issue, which is the totality of Administrative time, which currently stands at 4.25 hours. As I have related previously, and in discussion with my colleagues, there is absolutely no doubt that such an allocation is inadequate. It is just simply impossible to do the proposed work with one PA allocated to Admin. Upon your request, I have given consideration to the amount of time required. I am entirely cognisant of the presumed requirement to be perceived to be as productive and as efficient as is possible. Taking that into consideration, I believe that 2 PAs are required to be allocated to Administration. If allocated a total of 2 PAs, I would be committed to continuing to provide, to the best of my ability, all of the administration arising from the proposed Job Plan, knowing that I would be doing unremunerated work. I would propose that one additional hour be allocated to Administration at

the end of each of the four days, Monday to Thursday. I have increased it by a further hour per week.

I do hope that these proposed amendments are received as being helpful and constructive, as they are sincerely intended to be. I would hope that they can be considered in that light, as I would much prefer to avoid facilitation etc,

Aidan.

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Southern Health & Social Care Trust IT Department Personal Information redacted by the USI

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/01/2009	4 North Surgical		Irrelevant information redacted by the USI			14/01/2009	Beatrice Moonan
	02/01/2009	4 North Surgical					24/02/2010	Lee Moonan
	02/01/2009	3 South Surgical					30/03/2009	Jackie Martin
	03/01/2009	Trauma Ward					28/02/2009	Jackie Martin
	04/01/2009	2 South Urology					04/03/2009	Esme Brown
	04/01/2009	Male Surgical Ward DHH					14/01/2009	Esme Brown
	05/01/2009	4 North Surgical					15/01/2009	Beatrice Moonan
	05/01/2009	Orthopaedic Ward CAH					29/01/2009	Beatrice Moonan
	06/01/2009	Male Surgical Ward DHH					04/03/2009	Jackie Martin
	08/01/2009	Male Surgical Ward DHH				1. Transfer between settings of care - Admitted to HDU, went to DPU for the scope. Returned to level 4. C-Diff confirmed moved to side room on MSW	29/09/2009	Lee Moonan
	08/01/2009	3 South ENT					01/10/2009	Jackie Martin
	08/01/2009	3 South ENT					01/10/2009	Jackie Martin
	08/01/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	09/01/2009	Male Surgical Ward DHH					24/09/2009	Jackie Martin
	09/01/2009	4 South Surgical				1. Patient admitted with diarrhoea - ? appropriateness of completing RCA on the ward. 2. Documentation - only one record in nursing notes of any episodes of diarrhoea 3. Patient had no risk factors for C-Diff - ? appropriateness of sending stool sample.	29/09/2009	Lee Moonan
	10/01/2009	2 South Urology					16/01/2009	Jackie Martin
	12/01/2009	2 South Urology					10/09/2009	Jackie Martin
	12/01/2009	3 South ENT					02/02/2009	Jackie Martin
	12/01/2009	Trauma Ward					16/01/2009	Jackie Martin
	12/01/2009	3 South ENT					02/02/2009	Jackie Martin
	13/01/2009	3 South ENT					02/02/2009	Jackie Martin
	14/01/2009	4 North Surgical					24/02/2010	Jackie Martin
	15/01/2009	3 South ENT					01/10/2009	Esme Brown
	15/01/2009	3 South ENT					02/02/2009	Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	15/01/2009	3 South ENT		Irrelevant information redacted by the USI			02/02/2009	Jackie Martin
	18/01/2009	Trauma Ward					31/03/2009	Esme Brown
	18/01/2009	Trauma Ward					28/02/2009	Jackie Martin
	19/01/2009	3 South ENT					28/02/2009	Jackie Martin
	19/01/2009	3 South ENT					28/02/2009	Jackie Martin
	21/01/2009	Trauma Ward					30/03/2009	Jackie Martin
	23/01/2009	Male Surgical Ward DHH					31/03/2009	Esme Brown
	23/01/2009	3 South Surgical					30/03/2009	Jackie Martin
	24/01/2009	Trauma and Orthopaedics Theatres					24/09/2009	Esme Brown
	26/01/2009	Orthopaedic Ward CAH					10/09/2009	Jackie Martin
	26/01/2009	4 South Surgical					30/03/2009	Jackie Martin
	26/01/2009	4 South Surgical					30/03/2009	Jackie Martin
	28/01/2009	Trauma Ward					29/09/2009	Lee Moonan
	28/01/2009	2 South Urology					24/02/2010	Esme Brown
	29/01/2009	4 South Surgical				1. Frequent medical/surgical admissions. Lack of detail on current GP Antibiotic prescribing in community.	29/09/2009	Lee Moonan
	29/01/2009	4 North Surgical					31/03/2009	Jackie Martin
	29/01/2009	3 South Surgical				Nursing - Patient not started on a Bristol Stool Chart - if suspicious when sending a sample should start stool chart and isolated patient - or possibly not transferred the patient from ENT to 3 South. Medics - Is this C-Diff case related to the prophylactic Antibiotics given to the patient in Theatre? Does the policy need revised??	29/09/2009	Lee Moonan
	30/01/2009	Trauma Ward					24/09/2009	Jackie Martin
	31/01/2009	Orthopaedic Ward CAH					31/03/2009	Jackie Martin
	31/01/2009	4 South Surgical					28/02/2009	Jackie Martin
	01/02/2009	4 North Surgical					24/09/2009	Esme Brown
	02/02/2009	4 South Surgical					01/10/2009	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/02/2009	4 South Surgical		Irrelevant information redacted by the USI		1. Possible N-G Feeding as a source of CDI but in retrospect not sure if anything different we would do here.	29/09/2009	Lee Moonan
	02/02/2009	Trauma Ward					24/03/2009	Jackie Martin
	03/02/2009	3 South ENT					24/02/2010	Jackie Martin
	03/02/2009	3 South ENT					30/03/2009	Jackie Martin
	03/02/2009	4 South Surgical				Patient had C-Diff at time of admission - this is not a hospital required case.	29/09/2009	Noleen Elliott
	04/02/2009	Orthopaedic Ward CAH					24/02/2010	Jackie Martin
	04/02/2009	4 North Surgical					24/03/2009	Jackie Martin
	05/02/2009	4 North Surgical					24/09/2009	Esme Brown
	06/02/2009	4 North Surgical					24/09/2009	Esme Brown
	07/02/2009	Fracture Clinic					21/05/2009	Esme Brown
	08/02/2009	4 North Surgical					31/03/2009	Esme Brown
	08/02/2009	2 South Urology					21/05/2009	Esme Brown
	08/02/2009	2 South Urology					24/02/2010	Esme Brown
	11/02/2009	Orthopaedic Ward CAH					01/10/2009	Pamela Truesdale
	11/02/2009	3 South Surgical					24/09/2009	Jackie Martin
	12/02/2009	4 North Surgical				1. ? Relapse of C-Diff ? underlying inflammatory bowel disorder 2. IV Vancomycin given for 4 days should have been orally	29/09/2009	Noleen Elliott
	13/02/2009	Orthopaedic Ward CAH					30/03/2009	Jackie Martin
	13/02/2009	Trauma and Orthopaedics Theatres					24/03/2009	Jackie Martin
	13/02/2009	4 South Surgical					02/03/2009	Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/02/2009	4 North Surgical		Irrelevant information redacted by the USI			30/03/2009	Jackie Martin
	14/02/2009	2 South Urology					31/05/2009	Jackie Martin
	14/02/2009	2 South Urology					30/04/2009	Jackie Martin
	14/02/2009	3 South ENT					30/04/2009	Jackie Martin
	14/02/2009	3 South ENT					30/04/2009	Jackie Martin
	15/02/2009	Trauma Ward					24/02/2010	Pamela Truesdale
	17/02/2009	Trauma Ward					24/02/2010	Jackie Martin
	17/02/2009	Male Surgical Ward DHH					30/04/2009	Jackie Martin
	17/02/2009	4 North Surgical					30/04/2009	Jackie Martin
	18/02/2009	Outpatients Dept					25/03/2009	Jackie Martin
	18/02/2009	4 South Surgical					03/03/2009	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	18/02/2009	Orthopaedic Ward CAH		Irrelevant information redacted by the USI			24/02/2010	Jackie Martin
	18/02/2009	Orthopaedic Ward CAH					24/02/2010	Jackie Martin
	18/02/2009	Day Procedure Unit DHH					11/03/2009	Jackie Martin
	19/02/2009	4 South Surgical					30/03/2009	Jackie Martin
	19/02/2009	ENT Clinic, Surgical Outpatients					01/10/2009	Jackie Martin
	19/02/2009	Trauma Ward					24/02/2010	Lee Moonan
	19/02/2009	4 North Surgical					31/05/2009	Jackie Martin
	19/02/2009	Trauma and Orthopaedics Theatres					24/02/2010	Esme Brown
	20/02/2009	2 South Urology					03/03/2009	Esme Brown
	20/02/2009	2 South Urology					24/02/2010	Jackie Martin
	20/02/2009	2 South Urology						Esme Brown
	20/02/2009	2 South Urology					30/04/2009	Esme Brown
	20/02/2009	2 South Urology					30/03/2009	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/02/2009	2 South Urology		Irrelevant information redacted by the USI			30/04/2009	Esme Brown
	20/02/2009	2 South Urology					24/09/2009	Esme Brown
	21/02/2009	2 South Urology					03/03/2009	Esme Brown
	22/02/2009	Male Surgical Ward DHH					03/04/2009	Jackie Martin
	22/02/2009	4 North Surgical					03/03/2009	Esme Brown
	23/02/2009	Orthopaedic Ward CAH					24/03/2009	Jackie Martin
	23/02/2009	2 South Urology					30/03/2009	Esme Brown
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	23/02/2009	2 South Urology					30/03/2009	Jackie Martin
	25/02/2009	2 South Urology					11/03/2009	Jackie Martin
	25/02/2009	Orthopaedic Ward CAH					30/04/2009	Esme Brown
	26/02/2009	4 North Surgical					25/03/2009	Esme Brown
	26/02/2009	4 South Surgical					11/03/2009	Jackie Martin
	26/02/2009	4 North Surgical					23/03/2009	Jackie Martin
	26/02/2009	4 North Surgical					25/03/2009	Jackie Martin
	26/02/2009	2 South Urology					11/03/2009	Jackie Martin
	26/02/2009	Accident & Emergency Department					25/03/2009	Jackie Martin
	27/02/2009	2 South Urology					10/09/2009	Jackie Martin



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI. Patient 137	27/02/2009	Trauma Ward		Irrelevant information redacted by the USI			31/03/2009	Jackie Martin
	27/02/2009	Trauma Ward					30/03/2009	Lee Moonan
	27/02/2009	4 North Surgical					11/03/2009	Jackie Martin
	01/03/2009	4 North Surgical					30/03/2009	Jackie Martin
	01/03/2009	2 South Urology					24/09/2009	Jackie Martin
	02/03/2009	4 North Surgical					11/03/2009	Esme Brown
	02/03/2009	Male Surgical Ward DHH					25/03/2009	Jackie Martin
	02/03/2009	Orthopaedic Ward CAH					25/03/2009	Lee Moonan
	02/03/2009	4 North Surgical					30/03/2009	Esme Brown
	03/03/2009	4 North Surgical					25/03/2009	Jackie Martin
	04/03/2009	Orthopaedic Ward CAH					25/03/2009	Jackie Martin
	04/03/2009	4 South Surgical					24/09/2009	Jackie Martin
	04/03/2009	Fracture Clinic					10/03/2009	Lee Moonan
	04/03/2009	4 South Surgical					30/06/2009	Jackie Martin
	05/03/2009	Trauma Ward					21/05/2009	Jackie Martin
	05/03/2009	2 South Urology					27/03/2009	Pamela Truesdale
	05/03/2009	Trauma Ward					30/06/2009	Jackie Martin
	05/03/2009	Male Surgical Ward DHH					21/05/2009	Jackie Martin
	06/03/2009	4 North Surgical					24/09/2009	Jackie Martin
	06/03/2009	Trauma Ward					24/02/2010	Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	06/03/2009	Trauma Ward		Irrelevant information redacted by the USI			24/02/2010	Jackie Martin
	06/03/2009	4 South Surgical					30/05/2009	Jackie Martin
	09/03/2009	2 South Urology					31/03/2009	Esme Brown
	09/03/2009	4 North Surgical					24/09/2009	Jackie Martin
	12/03/2009	4 South Surgical					24/09/2009	Jackie Martin
	12/03/2009	4 North Surgical					16/04/2009	Jackie Martin
	13/03/2009	4 North Surgical					24/09/2009	Jackie Martin
	13/03/2009	Orthopaedic Ward CAH					01/10/2009	Jackie Martin
	13/03/2009	4 North Surgical					01/10/2009	Pamela Truesdale
	13/03/2009	4 South Surgical					24/02/2010	Jackie Martin
	13/03/2009	Orthopaedic Ward CAH					24/09/2009	Jackie Martin
	13/03/2009	4 South Surgical					27/03/2009	Pamela Truesdale
	13/03/2009	Trauma Ward					30/06/2009	Jackie Martin
	15/03/2009	Orthopaedic Ward CAH					30/06/2009	Jackie Martin
	16/03/2009	Orthopaedic Ward CAH					29/09/2009	Jackie Martin
	17/03/2009	Trauma Ward					30/06/2009	Jackie Martin
	18/03/2009	4 South Surgical					24/02/2010	Esme Brown
	18/03/2009	Trauma Ward					27/03/2009	Pamela Truesdale
	19/03/2009	Orthopaedic Ward CAH					27/03/2009	Pamela Truesdale
	19/03/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/03/2009	2 South Urology		Irrelevant information redacted by the USI			27/03/2009	Pamela Truesdale
	20/03/2009	Outpatients Dept					16/04/2009	Esme Brown
	20/03/2009	Treatment Room					25/03/2009	Jackie Martin
	20/03/2009	Orthopaedic Ward CAH					27/03/2009	Pamela Truesdale
	20/03/2009	Trauma and Orthopaedics Theatres					27/03/2009	Pamela Truesdale
	21/03/2009	4 North Surgical					27/03/2009	Pamela Truesdale
	21/03/2009	4 North Surgical					27/03/2009	Pamela Truesdale
	22/03/2009	Trauma Ward					21/05/2009	Esme Brown
	22/03/2009	2 South Urology					27/03/2009	Pamela Truesdale
	23/03/2009	Outpatients Dept					16/04/2009	Esme Brown
	24/03/2009	Orthopaedic Ward CAH					01/10/2009	Esme Brown
	24/03/2009	2 South Urology					27/03/2009	Pamela Truesdale
	24/03/2009	Fracture Clinic					01/10/2009	Esme Brown
	24/03/2009	Trauma Ward					21/05/2009	Esme Brown
	26/03/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	26/03/2009	3 South ENT					24/02/2010	Esme Brown
	27/03/2009	Male Surgical Ward DHH					16/04/2009	Jackie Martin
	27/03/2009	4 South Surgical					30/07/2009	Esme Brown
	30/03/2009	Female Surgical Ward DHH					29/09/2009	Noleen Elliott
	30/03/2009	4 South Surgical					30/06/2009	Jackie Martin
	31/03/2009	Trauma and Orthopaedics Theatres					16/04/2009	Esme Brown
	01/04/2009	Thorndale Urology ICATS					24/02/2010	Esme Brown
	02/04/2009	4 South Surgical				1. Diarrhoea at home for 6/52 starting Day 1 after discharge - triple therapy for H.Pylori likely causative factor. 2. GP further prescribed Amoxycillin after discharge when patient had diarrhoea.	29/09/2009	Noleen Elliott
	03/04/2009	Trauma and Orthopaedics Theatres					29/09/2009	Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	03/04/2009	Orthopaedic Ward CAH		Irrelevant information redacted by the USI			01/10/2009	Lee Moonan
	03/04/2009	Trauma and Orthopaedics Theatres					29/09/2009	Jackie Martin
	04/04/2009	3 South ENT					01/10/2009	Esme Brown
	04/04/2009	4 North Surgical					01/10/2009	Esme Brown
	04/04/2009	4 South Surgical				Staff reminded to have all IV infusions double checked.	01/10/2009	Jackie Martin
	04/04/2009	4 South Surgical					24/02/2010	Esme Brown
	04/04/2009	Trauma Ward					21/05/2009	Pamela Truesdale
	06/04/2009	Female Surgical Ward DHH					01/10/2009	Jackie Martin
	06/04/2009	Outpatients Dept					24/02/2010	Esme Brown
	06/04/2009	Orthopaedic Ward CAH						Esme Brown
	06/04/2009	4 South Surgical					01/12/2009	Jackie Martin
	06/04/2009	3 South ENT						Esme Brown
	07/04/2009	3 South Surgical					10/09/2009	Esme Brown
	07/04/2009	3 South ENT					01/10/2009	Esme Brown
	07/04/2009	Male Surgical Ward DHH					30/07/2009	Esme Brown
	07/04/2009	3 South ENT					24/02/2010	Esme Brown
	08/04/2009	Orthopaedic Ward CAH					01/10/2009	Jackie Martin
	08/04/2009	Male Surgical Ward DHH					12/10/2009	Esme Brown
	08/04/2009	Orthopaedic Ward CAH						Pamela Truesdale
	09/04/2009	Trauma Ward						Jackie Martin
	10/04/2009	ENT Clinic, Surgical Outpatients					01/10/2009	Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Personal Information redacted by USI	10/04/2009	Orthopaedic Ward CAH		Personal Information redacted by USI			01/10/2009	Jackie Martin
	10/04/2009	3 South ENT						Esme Brown
	11/04/2009	Male Surgical Ward DHH					01/10/2009	Esme Brown
	11/04/2009	Wards					01/10/2009	Esme Brown
	12/04/2009	4 South Surgical						Esme Brown
	13/04/2009	3 South Surgical						Jackie Martin
	13/04/2009	4 North Surgical						Jackie Martin
	14/04/2009	Trauma Ward					01/10/2009	Esme Brown
	14/04/2009	4 North Surgical					01/12/2009	Esme Brown
	15/04/2009	4 North Surgical					30/07/2009	Esme Brown
	15/04/2009	Fracture Clinic					01/10/2009	Pamela Truesdale
	15/04/2009	Male Surgical Ward DHH					24/02/2010	Esme Brown
	15/04/2009	Male Surgical Ward DHH					01/12/2009	Lyndsay Stewart
	16/04/2009	Male Surgical Ward DHH					24/02/2010	Esme Brown
	17/04/2009	Trauma Ward					21/05/2009	Jackie Martin
	17/04/2009	Outpatients Dept					10/09/2009	Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	17/04/2009	4 South Surgical		Irrelevant information redacted by the USI			01/10/2009	Esme Brown
	17/04/2009	Trauma Ward					30/07/2009	Esme Brown
	17/04/2009	2 South Urology					08/09/2009	Pamela Truesdale
	18/04/2009	Trauma Ward					21/05/2009	Jackie Martin
	18/04/2009	Male Surgical Ward DHH					01/10/2009	Esme Brown
	18/04/2009	4 South Surgical					08/09/2009	Pamela Truesdale
	20/04/2009	3 South ENT						Esme Brown
	20/04/2009	Outpatients Dept						Pamela Truesdale
	21/04/2009	Male Surgical Ward DHH					24/02/2010	Esme Brown
	21/04/2009	Male Surgical Ward DHH					01/10/2009	Jackie Martin
	22/04/2009	4 North Surgical					24/02/2010	Jackie Martin
	22/04/2009	Trauma Ward						Jackie Martin
	22/04/2009	Orthopaedic Ward CAH						Jackie Martin
	22/04/2009	4 South Surgical					01/12/2009	Jackie Martin
	23/04/2009	Outpatients Dept					01/10/2009	Jackie Martin
	23/04/2009	2 South Urology					08/09/2009	Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	23/04/2009	4 South Surgical		Irrelevant information redacted by the USI			08/09/2009	Esme Brown
	24/04/2009	Thorndale Urology ICATS					24/02/2010	Jackie Martin
	24/04/2009	Orthopaedic Ward CAH					01/10/2009	Jackie Martin
	24/04/2009	Orthopaedic Ward CAH					01/10/2009	Jackie Martin
	24/04/2009	Thorndale Urology ICATS						Jackie Martin
	24/04/2009	Discharge Lounge					08/09/2009	Pamela Truesdale
	24/04/2009	Thorndale Urology ICATS						Jackie Martin
	25/04/2009	Male Surgical Ward DHH					01/10/2009	Pamela Truesdale
	25/04/2009	2 South Urology					01/12/2009	Pamela Truesdale
	27/04/2009	Orthopaedic Ward CAH					01/10/2009	Pamela Truesdale
	27/04/2009	3 South ENT					24/02/2010	Esme Brown
	27/04/2009	3 South ENT						Esme Brown
	27/04/2009	Trauma and Orthopaedics Theatres					17/06/2009	Pamela Truesdale
	27/04/2009	3 South ENT						Esme Brown
	28/04/2009	Outpatients Dept					24/02/2010	Pamela Truesdale
	28/04/2009	4 South Surgical						Pamela Truesdale
	28/04/2009	2 South Urology						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	29/04/2009	Trauma Ward		Irrelevant information redacted by the USI				Pamela Truesdale
	29/04/2009	Trauma Ward						Lee Moonan
	29/04/2009	Trauma Ward					05/10/2009	Lee Moonan
	29/04/2009	3 South ENT					21/05/2009	Esme Brown
	29/04/2009	Outpatients Dept						Pamela Truesdale
	29/04/2009	Trauma Ward					01/12/2009	Esme Brown
	29/04/2009	3 South ENT						Esme Brown
	30/04/2009	Orthopaedic Ward CAH					24/02/2010	Lee Moonan
	30/04/2009	Trauma Ward					02/06/2009	Lee Moonan
	30/04/2009	Outpatients Dept						Lee Moonan
	01/05/2009	3 South Surgical					24/02/2010	Lee Moonan
	01/05/2009	Female Surgical Ward DHH					24/02/2010	Pamela Truesdale
	03/05/2009	Male Surgical Ward DHH					02/06/2009	Lee Moonan
	05/05/2009	Outpatients Dept					01/10/2009	Esme Brown



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	05/05/2009	Trauma and Orthopaedics Theatres		Irrelevant information redacted by the USI		On further investigation, 1 Charnley Spoon found to be unit packed which belonged to the set. CSSD informed re incorrect list and staff spoken to re policy of checking instruments correctly.	01/10/2009	Jackie Martin
	06/05/2009	2 South Urology					10/09/2009	Lee Moonan
	06/05/2009	Outpatients Dept					05/10/2009	Lee Moonan
	06/05/2009	2 South Urology						Lee Moonan
	07/05/2009	Orthopaedic Ward CAH						Esme Brown
	08/05/2009	Outpatients Dept					10/09/2009	Esme Brown
	09/05/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	11/05/2009	Outpatients Dept					02/06/2009	Lee Moonan
	11/05/2009	4 North Surgical					27/05/2009	Jackie Martin
	11/05/2009	4 North Surgical					05/10/2009	Lee Moonan
	12/05/2009	Trauma Ward					01/10/2009	Lee Moonan
	12/05/2009	Trauma and Orthopaedics Theatres					01/10/2009	Pamela Truesdale
	13/05/2009	4 North Surgical					10/09/2009	Lee Moonan
	13/05/2009	3 South ENT					24/02/2010	Esme Brown
	13/05/2009	Trauma and Orthopaedics Theatres						Jackie Martin
	14/05/2009	4 North Surgical					01/10/2009	Lee Moonan

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/05/2009	3 South ENT		Irrelevant information redacted by the USI			01/10/2009	Lee Moonan
	14/05/2009	3 South ENT					24/02/2010	Jackie Martin
	14/05/2009	Outpatients Dept						Lee Moonan
	14/05/2009	ENT Clinic, Surgical Outpatients					06/10/2009	Noleen Elliott
	15/05/2009	Orthopaedic Ward CAH					24/02/2010	Lee Moonan
	15/05/2009	Female Surgical Ward DHH				. A&E . Admission criteria . Ward catherization . Transfer of a dying patient at 0300 hours	29/09/2009	Noleen Elliott
	16/05/2009	4 South Surgical					05/10/2009	Lee Moonan
	16/05/2009	4 North Surgical					10/06/2009	Esme Brown
	17/05/2009	4 South Surgical					24/02/2010	Lee Moonan
	17/05/2009	Outpatients Dept					24/09/2009	Lee Moonan
	18/05/2009	3 South ENT					01/10/2009	Esme Brown
	18/05/2009	3 South ENT					24/02/2010	Esme Brown
	18/05/2009	4 North Surgical					11/06/2009	Lee Moonan
	19/05/2009	2 South Urology					03/06/2009	Lee Moonan
	19/05/2009	4 North Surgical					08/06/2009	Lee Moonan
	19/05/2009	4 South Surgical						Esme Brown
	20/05/2009	Orthopaedic Ward CAH					11/06/2009	Esme Brown
	20/05/2009	3 South ENT					24/02/2010	Jackie Martin
	22/05/2009	Outpatients Dept						Esme Brown
	22/05/2009	4 South Surgical						Lee Moonan
	23/05/2009	4 South Surgical						Pamela Truesdale
	24/05/2009	Male Surgical Ward DHH					18/06/2009	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	25/05/2009	Trauma Ward		Irrelevant information redacted by the USI				Esme Brown
	26/05/2009	Outpatients Dept					01/10/2009	Pamela Truesdale
	26/05/2009	ENT Clinic, Surgical Outpatients					10/09/2009	Pamela Truesdale
	26/05/2009	Trauma Ward					24/02/2010	Pamela Truesdale
	28/05/2009	Trauma Ward					24/02/2010	Pamela Truesdale
	29/05/2009	Male Surgical Ward DHH					24/09/2009	Esme Brown
	29/05/2009	Fracture Clinic						Pamela Truesdale
	30/05/2009	4 North Surgical					24/02/2010	Esme Brown
	30/05/2009	Trauma and Orthopaedics Theatres					01/10/2009	Jackie Martin
	30/05/2009	4 North Surgical						Esme Brown
	31/05/2009	Orthopaedic Ward CAH					24/02/2010	Pamela Truesdale
	01/06/2009	ENT Clinic, Surgical Outpatients					01/10/2009	Pamela Truesdale
	01/06/2009	4 North Surgical					24/09/2009	Jackie Martin
	02/06/2009	Male Surgical Ward DHH					24/02/2010	Jackie Martin
	04/06/2009	4 South Surgical					01/12/2009	Esme Brown
	04/06/2009	Fracture Clinic						Esme Brown
	05/06/2009	Outpatients Dept					24/02/2010	Jackie Martin
	05/06/2009	3 South Surgical				Multiple courses antibiotics for LRT1 - Antibiotics by the hospital were appropriate however antibiotics by GP were not in line with hospital policy. Use of anti-diarrhoeal agents in the month prior to admission - Patient admitted to 1 week of diarrhoea. However a review of her acute prescriptions revealed Kaolin and Morphine and Lomotil - presumably for diarrhoea. This lady's c-diff probably was present from before 27.5.09 when this was prescribed by GP. Possible underlying bowel condition - Admission in February identified a microcytic anaemia and outpatient investigations of her bowel had been requested.	29/09/2009	Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Personal information redacted by USI	05/06/2009	Orthopaedic Ward CAH		Irrelevant information redacted by the USI				Pamela Truesdale
	06/06/2009	4 South Surgical					01/10/2009	Lee Moonan
	07/06/2009	Female Surgical Ward DHH					24/02/2010	Lee Moonan
	07/06/2009	4 North Surgical					24/02/2010	Jackie Martin
	07/06/2009	4 North Surgical					01/12/2009	Jackie Martin
	07/06/2009	4 South Surgical						Lee Moonan
	09/06/2009	Male Surgical Ward DHH					24/02/2010	Lee Moonan
	09/06/2009	ENT Clinic, Surgical Outpatients				. Errors occur in bouts. This offers up an unfavourable impression to patients. Reason ssociated with a "Blip" in the PAS system - with new PAS proformas for clinic set ups hould resolve this issue.	01/10/2009	Jackie Martin
	09/06/2009	Male Surgical Ward DHH						Lee Moonan
	10/06/2009	4 South Surgical					24/02/2010	Lee Moonan
	11/06/2009	2 South Urology					24/02/2010	Lee Moonan
	11/06/2009	2 South Urology				. Communication to Clinicians regarding outstanding issues created at ward level. Result of failure to communicate on this occasion led to delays in theatres.	01/10/2009	Lee Moonan
	12/06/2009	4 North Surgical					10/09/2009	Lee Moonan
	12/06/2009	2 South Urology					01/10/2009	Lee Moonan
	12/06/2009	4 North Surgical					24/02/2010	Lee Moonan
	12/06/2009	2 South Urology						Lee Moonan
	13/06/2009	4 North Surgical					01/10/2009	Lee Moonan
	13/06/2009	2 South Urology						Lee Moonan
	13/06/2009	Outpatients Dept					24/09/2009	Lee Moonan

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/06/2009	Male Surgical Ward DHH		Irrelevant information redacted by the USI			01/10/2009	Lee Moonan
	14/06/2009	4 South Surgical					24/02/2010	Lee Moonan
	14/06/2009	4 South Surgical						Lee Moonan
	15/06/2009	4 North Surgical					24/02/2010	Lee Moonan
	16/06/2009	Outpatients Dept					30/07/2009	Lee Moonan
	16/06/2009	2 South Urology					24/02/2010	Lee Moonan
	16/06/2009	2 South Urology				Wards must ensure to follow correct procedure on labeling laboratory specimens to prevent reoccurrence	24/02/2010	Lee Moonan
	16/06/2009	ENT Clinic, Surgical Outpatients				1. Errors occur in bouts. This offers up an unfavourable impression to patients. Reason associated with a "Blip" in the PAS system - with new PAS proformas for clinic set ups should resolve the issue.	01/10/2009	Lee Moonan
	17/06/2009	Orthopaedic Ward CAH				1. Basic checks at POA should have been preformed. Viewed as potentially serious	10/09/2009	Lee Moonan
	17/06/2009	4 North Surgical					24/02/2010	Lee Moonan
	18/06/2009	2 South Urology						Lee Moonan
	19/06/2009	4 North Surgical					01/12/2009	Lee Moonan
	20/06/2009	4 North Surgical					24/02/2010	Jackie Martin
	20/06/2009	Trauma Ward				Zero tolerance to staff discussed and how as a team this can be managed. As staff have taken time to complete out adverse incident forms to highlight occurrences, support and action needs to follow. What are we doing to support staff. Simon suggested that the process needs to be reflected back in order to show leadership and management taking incidents seriously. Training implementation or security to be heightened was discussed	24/09/2009	Esme Brown
	21/06/2009	Orthopaedic Ward CAH					01/10/2009	Lee Moonan

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	21/06/2009	Trauma Ward		Irrelevant information redacted by the USI		Zero tolerance to staff discussed and how as a team this can be managed. As staff have taken time to complete out adverse incident forms to highlight occurrences, support and action needs to follow. What are we doing to support staff. Simon suggested that the process needs to be reflected back in order to show leadership and management taking incidents seriously. Training implementation or security to be heightened was discussed	24/09/2009	Esme Brown
	21/06/2009	Orthopaedic Ward CAH					24/09/2009	Lee Moonan
	21/06/2009	4 South Surgical					01/12/2009	Lee Moonan
	22/06/2009	Fracture Clinic					23/06/2009	Lee Moonan
	22/06/2009	Trauma Ward				Zero tolerance to staff discussed and how as a team this can be managed. As staff have taken time to complete out adverse incident forms to highlight occurrences, support and action needs to follow. What are we doing to support staff. Simon suggested that the process needs to be reflected back in order to show leadership and management taking incidents seriously. Training implementation or security to be heightened was discussed	24/09/2009	Esme Brown
	23/06/2009	Male Surgical Ward DHH					01/10/2009	Lee Moonan
	23/06/2009	Orthopaedic Ward CAH					08/09/2009	Esme Brown
	23/06/2009	Male Surgical Ward DHH					01/10/2009	Lee Moonan
	23/06/2009	Female Surgical Ward DHH					24/02/2010	Lee Moonan
	23/06/2009	3 South ENT						Jackie Martin
	25/06/2009	4 South Surgical				History of MRSA - Patient not screened on admission Peripheral Cannula - No record of insertion/maintenance Patient had history of osteomyelitis and medical team queried source of bacteraemia as ?osteomyelitis	29/09/2009	Noleen Elliott
	26/06/2009	Male Surgical Ward DHH					24/02/2010	Lee Moonan
	26/06/2009	Male Surgical Ward DHH						Lee Moonan
	27/06/2009	Orthopaedic Ward CAH					01/12/2009	Lee Moonan
	28/06/2009	Male Surgical Ward DHH				1. Catheterization in community in difficult anatomy - need to trace back to D/N team and review procedure for reviewing catheter and training records of staff. 2. Need for continued catheter if for continence management - Discuss continence management with continence specialist nurses. Could sheath avoid catheter? Should continence pads be used instead? 3. No documented micro input - Was micro contacted? Was there a need? 4. No documentation of Blood Culture process - no note from procedure to reflect asepsis.	29/09/2009	Lee Moonan
	29/06/2009	2 South Urology						Lee Moonan

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	30/06/2009	2 South Urology		Irrelevant information redacted by the USI			24/02/2010	Lee Moonan
	30/06/2009	Male Surgical Ward DHH				1. Patient admitted with cellulitis - therefore the infection os not relevant to having been acquired in hospital. 2. Patient presented with community acquired cellulites was appropriately sampled and treated. Blood culture sampling documentation and training for staff 3. ? Antibiotic Therapy - length of course	29/09/2009	Lee Moonan
	01/07/2009	Fracture Clinic					08/09/2009	Esme Brown
	01/07/2009	2 South Urology					01/12/2009	Lee Moonan
	01/07/2009	3 South Surgical						Lee Moonan
	02/07/2009	Outpatients Dept					10/09/2009	Lee Moonan
	02/07/2009	3 South ENT						Lee Moonan
	03/07/2009	4 South Surgical					01/10/2009	Lee Moonan
	03/07/2009	Orthopaedic Ward CAH					24/02/2010	Lee Moonan
	03/07/2009	Orthopaedic Ward CAH						Lee Moonan
	03/07/2009	3 South ENT						Lee Moonan
	03/07/2009	Orthopaedic Ward CAH						Lee Moonan
	05/07/2009	Orthopaedic Ward CAH					24/02/2010	Lee Moonan
	06/07/2009	Male Surgical Ward DHH					24/02/2010	Lee Moonan
	06/07/2009	Fracture Clinic					28/10/2009	Lee Moonan
	07/07/2009	Fracture Clinic						Noleen Elliott
	07/07/2009	Recovery Ward				1. Cannula core - poor documentation of insertion and maintenance of cannula i.e. cannula red how long had cannula been in for - reinsertion of cannula - no documentation. 2. MRSA decolonisation - not commenced on decolonisation treatment after MRSA diagnosis	29/09/2009	Noleen Elliott
	08/07/2009	Clinic area					22/09/2009	Lee Moonan

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	09/07/2009	Fracture Clinic		Irrelevant information redacted by the USI				Lee Moonan
	09/07/2009	3 South Surgical					01/10/2009	Lee Moonan
	10/07/2009	3 South Surgical						Lee Moonan
	10/07/2009	3 South Surgical						Lee Moonan
	11/07/2009	4 North Surgical					06/10/2009	Lee Moonan
	11/07/2009	4 South Surgical				1. Source of Infection: Patient had been sutured at ward level that day because of bleeding from open bowel fistular - that afternoon patient became pyrexix and central line removed as a precautionary measure. ? source - (1) abdominal wound heavily contaminated (2) CVC. 2. CVC - Daily review chart missed x 8 days.	29/09/2009	Noleen Elliott
	14/07/2009	Trauma Ward					24/02/2010	Lee Moonan
	14/07/2009	3 South Surgical						Lee Moonan
	15/07/2009	3 South Surgical					01/10/2009	Lee Moonan
	15/07/2009	3 South Surgical					24/02/2010	Lee Moonan
	15/07/2009	Fracture Clinic						Lee Moonan
	15/07/2009	4 North Surgical						Lee Moonan
	16/07/2009	ENT Clinic, Surgical Outpatients					01/10/2009	Esme Brown
	16/07/2009	Female Surgical Ward DHH					30/07/2009	Lee Moonan
	17/07/2009	Trauma Ward					30/07/2009	Lee Moonan
	17/07/2009	Orthopaedic Ward CAH					24/02/2010	Lee Moonan
	19/07/2009	4 South Surgical					01/10/2009	Lee Moonan
	20/07/2009	3 South ENT					01/10/2009	Lee Moonan
	20/07/2009	3 South ENT					01/10/2009	Lee Moonan
	20/07/2009	3 South ENT					24/02/2010	Lee Moonan
	20/07/2009	3 South ENT						Lee Moonan
	20/07/2009	3 South ENT						Lee Moonan
	21/07/2009	ENT Clinic, Surgical Outpatients					01/10/2009	Esme Brown
	21/07/2009	Orthopaedic Ward CAH					24/02/2010	Lee Moonan
	21/07/2009	Male Surgical Ward DHH						Esme Brown



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	21/07/2009	Orthopaedic Ward CAH		Irrelevant information redacted by the USI			02/09/2009	Esme Brown
	23/07/2009	3 South Surgical					01/10/2009	Lee Moonan
	24/07/2009	3 South Surgical					24/02/2010	Lee Moonan
	24/07/2009	Independant Contractor					24/02/2010	Beatrice Moonan
	24/07/2009	3 South Surgical						Pamela Truesdale
	25/07/2009	4 North Surgical					24/02/2010	Esme Brown
	25/07/2009	4 South Surgical					01/12/2009	Esme Brown
	26/07/2009	Male Surgical Ward DHH					06/10/2009	Esme Brown
	27/07/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	27/07/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	27/07/2009	4 North Surgical					24/02/2010	Esme Brown
	29/07/2009	4 North Surgical						Esme Brown
	29/07/2009	Orthopaedic Ward CAH						Esme Brown
	29/07/2009	Outpatients Dept					24/09/2009	Esme Brown
	30/07/2009	Male Surgical Ward DHH					24/02/2010	Jackie Martin
	30/07/2009	4 North Surgical					01/10/2009	Esme Brown
	30/07/2009	Trauma Ward					24/02/2010	Esme Brown
	30/07/2009	Male Surgical Ward DHH					01/12/2009	Esme Brown
	31/07/2009	Outpatients Dept					24/02/2010	Jackie Martin
	01/08/2009	Orthopaedic Ward CAH					05/10/2009	Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	03/08/2009	3 South ENT		Irrelevant information redacted by the USI			01/10/2009	Lee Moonan
	05/08/2009	3 South Surgical					18/09/2009	Lee Moonan
	05/08/2009	Outpatients Dept					05/10/2009	Jackie Martin
	06/08/2009	Orthopaedic Ward CAH					24/02/2010	Jackie Martin
	07/08/2009	3 South ENT					24/02/2010	Jackie Martin
	07/08/2009	Male Surgical Ward DHH					01/10/2009	Lee Moonan
	08/08/2009	4 North Surgical					18/09/2009	Lee Moonan
	08/08/2009	4 South Surgical						Lee Moonan
	08/08/2009	Female Surgical Ward DHH					27/08/2009	Lee Moonan
	09/08/2009	2 South Urology					02/09/2009	Esme Brown
	09/08/2009	Male Surgical Ward DHH					22/09/2009	Lee Moonan
	09/08/2009	Male Surgical Ward DHH					22/09/2009	Lee Moonan
	10/08/2009	Outpatients Dept					22/09/2009	Jackie Martin
	10/08/2009	Orthopaedic Ward CAH					24/02/2010	Lee Moonan
	10/08/2009	Orthopaedic Ward CAH					24/02/2010	Lee Moonan
	11/08/2009	Male Surgical Ward DHH					16/09/2009	Lee Moonan
	11/08/2009	4 South Surgical					22/09/2009	Lee Moonan

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	11/08/2009	Male Surgical Ward DHH		Irrelevant information redacted by the USI			18/09/2009	Lee Moonan
	11/08/2009	Orthopaedic Ward CAH						Lee Moonan
	12/08/2009	4 North Surgical					18/09/2009	Jackie Martin
	12/08/2009	Outpatients Dept					22/09/2009	Jackie Martin
	12/08/2009	Orthopaedic Ward CAH						Lee Moonan
	13/08/2009	Outpatients Dept					18/09/2009	Jackie Martin
	15/08/2009	3 South Surgical					27/08/2009	Lee Moonan
	16/08/2009	Trauma Ward					12/10/2009	Lee Moonan
	19/08/2009	3 South Surgical						Lee Moonan
	20/08/2009	3 South Surgical						Lee Moonan
	20/08/2009	Female Surgical Ward DHH					18/09/2009	Pamela Truesdale
	21/08/2009	Thorndale Urology ICATS					02/09/2009	Esme Brown
	21/08/2009	Outpatients Dept						Pamela Truesdale
	22/08/2009	Female Surgical Ward DHH					10/09/2009	Pamela Truesdale
	22/08/2009	4 North Surgical						Lee Moonan

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	23/08/2009	3 South Surgical		Irrelevant information redacted by the USI				Lee Moonan
	24/08/2009	3 South Surgical					24/02/2010	Lee Moonan
	24/08/2009	3 South Surgical					24/02/2010	Lee Moonan
	24/08/2009	3 South Surgical						Lee Moonan
	24/08/2009	4 South Surgical					18/09/2009	Lee Moonan
	24/08/2009	3 South Surgical						Lee Moonan
	25/08/2009	Orthopaedic Ward CAH					24/02/2010	Lee Moonan
	26/08/2009	Orthopaedic Ward CAH						Jackie Martin
	26/08/2009	Ophthamology Clinic						Esme Brown
	27/08/2009	4 North Surgical					18/09/2009	Jackie Martin
	27/08/2009	4 South Surgical					18/09/2009	Jackie Martin
	27/08/2009	Male Surgical Ward DHH					16/09/2009	Esme Brown
	27/08/2009	General Surgery Clinic				Irrelevant information redacted by the USI The policy of not sending the hospital notes with the patient when going for a procedure to the independent sector to be reviewed.		Jackie Martin
	27/08/2009	Trauma Ward						Jackie Martin
	28/08/2009	Orthopaedic Ward CAH						Jackie Martin
	28/08/2009	Orthopaedic Ward CAH						Jackie Martin
	31/08/2009	Trauma Ward						Esme Brown
	01/09/2009	4 South Surgical						Esme Brown
	01/09/2009	4 North Surgical					18/09/2009	Pamela Truesdale
	02/09/2009	4 North Surgical					18/09/2009	Pamela Truesdale
	02/09/2009	Orthopaedic Ward CAH					22/09/2009	Jackie Martin
	02/09/2009	Orthopaedic Ward CAH					10/09/2009	Pamela Truesdale
	02/09/2009	Orthopaedic Ward CAH						Jackie Martin
	03/09/2009	Surgical Clinic, Outpatients Department						Esme Brown
	05/09/2009	Male Surgical Ward DHH					24/09/2009	Jackie Martin
	05/09/2009	Female Surgical Ward DHH					12/10/2009	Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	05/09/2009	Male Surgical Ward DHH		Irrelevant information redacted by the USI			22/09/2009	Esme Brown
	06/09/2009	Orthopaedic Ward CAH					05/10/2009	Esme Brown
	06/09/2009	4 South Surgical					12/10/2009	Pamela Truesdale
	07/09/2009	Fracture Clinic					04/12/2009	Pamela Truesdale
	08/09/2009	4 North Surgical					22/09/2009	Esme Brown
	08/09/2009	Male Surgical Ward DHH					22/09/2009	Jackie Martin
	08/09/2009	Male Surgical Ward DHH					22/09/2009	Jackie Martin
	08/09/2009	Female Surgical Ward DHH					24/02/2010	Pamela Truesdale
	09/09/2009	Female Surgical Ward DHH					22/09/2009	Esme Brown
	11/09/2009	Female Surgical Ward DHH					24/02/2010	Pamela Truesdale
	11/09/2009	Trauma Ward					22/09/2009	Jackie Martin
	12/09/2009	Trauma Ward					24/02/2010	Jackie Martin
	12/09/2009	4 North Surgical					24/02/2010	Jackie Martin
	13/09/2009	Trauma Ward					24/02/2010	Jackie Martin
	15/09/2009	Orthopaedic Ward CAH					22/09/2009	Jackie Martin
	15/09/2009	Female Surgical Ward DHH					22/09/2009	Jackie Martin
	16/09/2009	Trauma Ward						Jackie Martin
	17/09/2009	4 North Surgical					25/09/2009	Esme Brown
	18/09/2009	3 South ENT					28/09/2009	Esme Brown
	19/09/2009	4 North Surgical					24/02/2010	Esme Brown
	20/09/2009	4 North Surgical					05/10/2009	Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/09/2009	3 South ENT		Irrelevant information redacted by the USI			30/09/2009	Esme Brown
	21/09/2009	4 North Surgical					24/02/2010	Pamela Truesdale
	21/09/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	21/09/2009	4 South Surgical						Jackie Martin
	22/09/2009	Surgical Assessment Unit					24/02/2010	Pamela Truesdale
	22/09/2009	Surgical Clinic, Outpatients Department					05/10/2009	Pamela Truesdale
	22/09/2009	3 South Surgical					05/10/2009	Pamela Truesdale
	23/09/2009	ENT Clinic, Surgical Outpatients					24/02/2010	Pamela Truesdale
	23/09/2009	Orthopaedic Ward CAH						Esme Brown
	23/09/2009	3 South ENT					05/10/2009	Pamela Truesdale
	24/09/2009	3 South ENT					05/10/2009	Esme Brown
	24/09/2009	Trauma Ward					01/12/2009	Una Woolsey
	24/09/2009	Trauma Ward					24/02/2010	Esme Brown
	24/09/2009	Trauma Ward					01/12/2009	Esme Brown
	24/09/2009	4 North Surgical						Esme Brown
	25/09/2009	3 South Surgical					24/02/2010	Una Woolsey
	25/09/2009	Orthopaedic Ward CAH						Esme Brown
	26/09/2009	Trauma Ward						Beatrice Moonan
	28/09/2009	Fracture Clinic						Pamela Truesdale
	28/09/2009	Trauma Ward					12/10/2009	Esme Brown
	29/09/2009	3 South Surgical					24/02/2010	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	29/09/2009	Male Surgical Ward DHH		Irrelevant information redacted by the USI			24/02/2010	Jackie Martin
	29/09/2009	Orthopaedic Ward CAH					24/02/2010	Pamela Truesdale
	29/09/2009	3 South ENT						Pamela Truesdale
	29/09/2009	Orthopaedic Ward CAH						Una Woolsey
	29/09/2009	Trauma Ward						Jackie Martin
	30/09/2009	Outpatients Dept					24/02/2010	Una Woolsey
	30/09/2009	4 South Surgical						Jackie Martin
	01/10/2009	Trauma Ward						Esme Brown
	01/10/2009	Trauma Ward						Esme Brown
	01/10/2009	4 South Surgical					20/11/2009	Pamela Truesdale
	02/10/2009	3 South Surgical					24/02/2010	Una Woolsey
	02/10/2009	Orthopaedic Ward CAH						Jackie Martin
	02/10/2009	3 South Surgical					24/02/2010	Una Woolsey
	02/10/2009	Lift						Pamela Truesdale
	02/10/2009	Orthopaedic Ward CAH						Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	03/10/2009	3 South ENT		Irrelevant information redacted by the USI				Esme Brown
	05/10/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	05/10/2009	Male Surgical Ward DHH					20/11/2009	Jackie Martin
	05/10/2009	4 South Surgical						Una Woolsey
	05/10/2009	4 North Surgical						Esme Brown
	05/10/2009	3 South Surgical						Una Woolsey
	07/10/2009	Male Surgical Ward DHH					24/02/2010	Jackie Martin
	07/10/2009	3 South ENT					03/12/2009	Jackie Martin
	07/10/2009	3 South Surgical				1. Patient not screened pre op. 2. No documentation on Blood cultures 3. No careplan for urinary catheter - Catheter insertion was documented and was under aseptic conditions 4. No careplan for surgical wound - patient removed wound dressing at times. 5. No careplan for toe ulcer 6. No daily review or record of peripheral cannula - Expedite daily review for peripheral cannulation. 7. Decolonisation not prescribed - No documentation on reason for no decolonisation (however patients ill condition may have been a factor and patient died 16/10/09) 8. Ward stating at the time due to illness and unfilled posts may have affected documentation - 3 WTE qualified posts vacant and 4 staff off sick 9. No MRSA care plan 10. Likely Root cause Chest Infection secondary to COPD and post op drowsiness which affected post op breathing exercises. Post op surgical site infection - as no MRSA screening pre op no appropriate antibiotic prophylaxis was given at time of surgery. Due to post op condition patient removed dressing.	01/12/2009	Noleen Elliott
	07/10/2009	Orthopaedic Ward CAH						Jackie Martin
	08/10/2009	Orthopaedic Ward CAH					24/02/2010	Pamela Truesdale
	08/10/2009	Orthopaedic Ward CAH					24/02/2010	Pamela Truesdale
	08/10/2009	3 South Surgical						Jackie Martin
	08/10/2009	Outpatients Dept					24/02/2010	Esme Brown
	08/10/2009	4 South Surgical					24/02/2010	Jackie Martin
	08/10/2009	Trauma Ward					24/02/2010	Pamela Truesdale



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	10/10/2009	Trauma Ward		Irrelevant information redacted by the USI				Pamela Truesdale
	13/10/2009	Male Surgical Ward DHH					29/10/2009	Una Woolsey
	13/10/2009	Orthopaedic Ward CAH					24/02/2010	Una Woolsey
	13/10/2009	Pre-Operative Assessment Clinic						Una Woolsey
	14/10/2009	Surgical Clinic, Outpatients Department						Esme Brown
	14/10/2009	3 South Surgical					24/02/2010	Pamela Truesdale
	14/10/2009	4 North Surgical						Una Woolsey
	14/10/2009	Trauma Ward						Pamela Truesdale
	14/10/2009	Orthopaedic Ward CAH						Una Woolsey
	15/10/2009	3 South Surgical					24/02/2010	Pamela Truesdale
	15/10/2009	Orthopaedic Ward CAH					24/02/2010	Una Woolsey
	16/10/2009	4 North Surgical				4 North did not include the clinical history of the patient or attach a high risk sticker on laboratory request form nor place the sample in a danger of infection bag.	24/02/2010	Esme Brown
	17/10/2009	3 South Surgical					24/02/2010	Pamela Truesdale
	17/10/2009	Orthopaedic Ward CAH						Esme Brown
	19/10/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	19/10/2009	4 South Surgical					24/02/2010	Esme Brown
	19/10/2009	Orthopaedic Ward CAH						Esme Brown
	20/10/2009	3 South Surgical					24/02/2010	Pamela Truesdale
	20/10/2009	3 South Surgical						Pamela Truesdale
	20/10/2009	Orthopaedic Ward CAH						Esme Brown
	21/10/2009	Male Surgical Ward DHH					03/12/2009	Jackie Martin
	22/10/2009	Trauma Ward					24/02/2010	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/10/2009	Orthopaedic Ward CAH		Irrelevant information redacted by the USI			24/02/2010	Jackie Martin
	23/10/2009	4 North Surgical						Esme Brown
	24/10/2009	4 North Surgical					24/02/2010	Esme Brown
	26/10/2009	4 North Surgical					24/02/2010	Jackie Martin
	26/10/2009	4 North Surgical					30/10/2009	Jackie Martin
	26/10/2009	Orthopaedic Ward CAH						Esme Brown
	26/10/2009	Orthopaedic Ward CAH						Esme Brown
	27/10/2009	Orthopaedic Ward CAH					24/02/2010	Jackie Martin
	27/10/2009	Orthopaedic Ward CAH					24/02/2010	Jackie Martin
	27/10/2009	4 South Surgical						Pamela Truesdale
	27/10/2009	4 South Surgical				Irrelevant information redacted by the USI		Noleen Elliott
	27/10/2009	4 North Surgical				Documentation poor in both A&E and Surgical No documentation who,why and how blood cultures taken Poor documentation re informing patient		Jackie Martin
	28/10/2009	ENT Clinic, Surgical Outpatients					24/02/2010	Pamela Truesdale
	29/10/2009	Fracture Clinic					24/02/2010	Jackie Martin
	29/10/2009	3 South ENT					24/02/2010	Esme Brown
	29/10/2009	4 North Surgical				Irrelevant information redacted by the USI		Jackie Martin
	31/10/2009	Outpatients Dept					24/02/2010	Una Woolsey
	31/10/2009	4 North Surgical				Inappropriate sampling - laxative induced sample sent 2 days after laxatives commenced. No stool chart (Bristol) No daily review. No recording in nursing or medical	01/12/2009	Noleen Elliott
	01/11/2009	Trauma Ward					12/11/2009	Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	01/11/2009	Trauma Ward		Irrelevant information redacted by the USI			12/11/2009	Pamela Truesdale
	02/11/2009	Female Surgical Ward DHH					24/02/2010	Esme Brown
	02/11/2009	3 South ENT						Pamela Truesdale
	03/11/2009	3 South Surgical					24/02/2010	Esme Brown
	03/11/2009	3 South Surgical						Esme Brown
	04/11/2009	Pre-Operative Assessment Clinic					24/02/2010	Una Woolsey
	04/11/2009	Female Surgical Ward DHH					01/12/2009	Una Woolsey
	05/11/2009	Trauma Ward					12/11/2009	Pamela Truesdale
	05/11/2009	Outpatients Dept					03/12/2009	Jackie Martin
	06/11/2009	4 North Surgical					24/02/2010	Pamela Truesdale
	06/11/2009	4 North Surgical					15/01/2010	Esme Brown
	07/11/2009	3 South ENT					24/02/2010	Pamela Truesdale
	10/11/2009	3 South ENT						Esme Brown
	10/11/2009	Orthopaedic Ward CAH						Esme Brown
	11/11/2009	Trauma Ward					04/12/2009	Pamela Truesdale
	11/11/2009	3 South Surgical					24/02/2010	Esme Brown
	11/11/2009	3 South Surgical					24/02/2010	Esme Brown
	12/11/2009	Male Surgical Ward DHH					07/12/2009	Esme Brown
	12/11/2009	3 South Surgical						Esme Brown
	13/11/2009	4 North Surgical					15/01/2010	Esme Brown
	13/11/2009	4 South Surgical						Pamela Truesdale
	14/11/2009	4 South Surgical						Pamela Truesdale
	14/11/2009	Male Surgical Ward DHH						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	16/11/2009	3 South Surgical		Irrelevant information redacted by the USI			24/02/2010	Esme Brown
	16/11/2009	3 South Surgical					24/02/2010	Esme Brown
	16/11/2009	3 South Surgical					24/02/2010	Esme Brown
	16/11/2009	4 South Surgical					24/02/2010	Pamela Truesdale
	16/11/2009	Male Surgical Ward DHH					30/11/2009	Pamela Truesdale
	17/11/2009	3 South Surgical					24/02/2010	Esme Brown
	17/11/2009	3 South Surgical					24/02/2010	Esme Brown
	17/11/2009	ENT Clinic, Surgical Outpatients					24/02/2010	Pamela Truesdale
	17/11/2009	4 South Surgical					30/11/2009	Esme Brown
	17/11/2009	Orthopaedic Ward CAH					24/02/2010	Pamela Truesdale
	17/11/2009	3 South Surgical						Esme Brown
	18/11/2009	Orthopaedic Ward CAH					15/01/2010	Pamela Truesdale
	19/11/2009	3 South ENT					24/02/2010	Pamela Truesdale
	19/11/2009	4 South Surgical					01/12/2009	Esme Brown
	19/11/2009	Orthopaedic Ward CAH						Jackie Martin
	19/11/2009	Orthopaedic Ward CAH						Jackie Martin
	19/11/2009	4 South Surgical						Jackie Martin
	19/11/2009	Trauma Ward						Pamela Truesdale
	20/11/2009	Male Surgical Ward DHH					15/01/2010	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/11/2009	Orthopaedic Ward CAH		Irrelevant information redacted by the USI			04/12/2009	Jackie Martin
	20/11/2009	Thorndale Urology ICATS					24/02/2010	Esme Brown
	20/11/2009	Independant Contractor					24/02/2010	Beatrice Moonan
	21/11/2009	Female Surgical Ward DHH						Pamela Truesdale
	21/11/2009	Female Surgical Ward DHH						Pamela Truesdale
	22/11/2009	Male Surgical Ward DHH					15/01/2010	Esme Brown
	22/11/2009	Fracture Clinic						Jackie Martin
	23/11/2009	3 South ENT					24/02/2010	Jackie Martin
	23/11/2009	4 South Surgical					03/12/2009	Pamela Truesdale
	23/11/2009	4 North Surgical						Pamela Truesdale
	24/11/2009	Trauma Ward					24/02/2010	Esme Brown
	24/11/2009	4 North Surgical						Pamela Truesdale
	24/11/2009	4 North Surgical						Esme Brown
	24/11/2009	Female Surgical Ward DHH						Pamela Truesdale
	25/11/2009	Orthopaedic Ward CAH					24/02/2010	Pamela Truesdale
	25/11/2009	4 South Surgical					24/02/2010	Esme Brown
	25/11/2009	3 South Surgical						Esme Brown
	26/11/2009	3 South Surgical					24/02/2010	Esme Brown
	27/11/2009	4 North Surgical					24/02/2010	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	27/11/2009	4 South Surgical		Irrelevant information redacted by the USI			24/02/2010	Esme Brown
	27/11/2009	Male Surgical Ward DHH					24/02/2010	Esme Brown
	27/11/2009	Male Surgical Ward DHH						Esme Brown
	27/11/2009	Female Surgical Ward DHH					10/12/2009	Esme Brown
	28/11/2009	3 South Surgical						Esme Brown
	30/11/2009	Male Surgical Ward DHH						Esme Brown
	01/12/2009	Male Surgical Ward DHH					24/02/2010	Pamela Truesdale
	01/12/2009	4 North Surgical					24/02/2010	Esme Brown
	02/12/2009	Male Surgical Ward DHH					24/02/2010	Esme Brown
	02/12/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	03/12/2009	Female Surgical Ward DHH						Esme Brown
	04/12/2009	3 South Surgical					24/02/2010	Esme Brown
	04/12/2009	Orthopaedic Ward CAH					24/02/2010	Pamela Truesdale
	06/12/2009	Outpatients Dept					24/02/2010	Esme Brown
	06/12/2009	Male Surgical Ward DHH					24/02/2010	Esme Brown
	06/12/2009	Surgical Clinic, Outpatients Department					24/02/2010	Jackie Martin
	06/12/2009	Surgical Clinic, Outpatients Department					24/02/2010	Esme Brown
	07/12/2009	Male Surgical Ward DHH					18/02/2010	Esme Brown
	07/12/2009	4 South Surgical					24/02/2010	Esme Brown
	07/12/2009	4 South Surgical					24/02/2010	Jackie Martin
	07/12/2009	Female Surgical Ward DHH					24/02/2010	Esme Brown
	07/12/2009	Fracture Clinic					24/02/2010	Jackie Martin
	08/12/2009	Outpatients Dept						Esme Brown
	09/12/2009	Trauma Ward					24/02/2010	Esme Brown
	09/12/2009	4 North Surgical						Jackie Martin
	09/12/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	09/12/2009	Trauma Ward					24/01/2010	Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	10/12/2009	Trauma Ward		Irrelevant information redacted by the USI			24/02/2010	Esme Brown
	10/12/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	12/12/2009	Female Surgical Ward DHH					24/02/2010	Pamela Truesdale
	14/12/2009	Trauma Ward					24/02/2010	Esme Brown
	14/12/2009	Trauma Ward					24/02/2010	Esme Brown
	14/12/2009	Trauma Ward					24/02/2010	Esme Brown
	14/12/2009	Trauma Ward					24/02/2010	Esme Brown
	14/12/2009	3 South Surgical					24/02/2010	Jackie Martin
	15/12/2009	3 South ENT					24/02/2010	Esme Brown
	15/12/2009	Female Surgical Ward DHH					24/02/2010	Esme Brown
	16/12/2009	Day Clinical Centre					24/02/2010	Jackie Martin
	16/12/2009	3 South ENT						Esme Brown
	16/12/2009	Female Surgical Ward DHH					24/02/2010	Esme Brown
	16/12/2009	4 North Surgical					24/02/2010	Esme Brown
	16/12/2009	Orthopaedic Ward CAH					24/02/2010	Esme Brown
	17/12/2009	4 North Surgical				24.02.10 - Incident reviewed at SEC gov meeting - a template for handover to be discussed with HOS A+E and AD.		Pamela Truesdale
	17/12/2009	4 North Surgical					24/02/2010	Esme Brown
	18/12/2009	4 North Surgical					24/02/2010	Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	18/12/2009	Orthopaedic Ward CAH		Irrelevant information redacted by the USI			24/02/2010	Esme Brown
	18/12/2009	4 North Surgical					24/02/2010	Esme Brown
	19/12/2009	3 South Surgical					24/02/2010	Jackie Martin
	20/12/2009	3 South ENT					24/02/2010	Esme Brown
	24/12/2009	4 North Surgical					24/02/2010	Jackie Martin
	24/12/2009	Female Surgical Ward DHH					24/02/2010	Jackie Martin
	24/12/2009	Fracture Clinic					24/02/2010	Esme Brown
	24/12/2009	Male Surgical Ward DHH						Jackie Martin
	24/12/2009	Male Surgical Ward DHH						Esme Brown
	25/12/2009	4 North Surgical						Esme Brown
	29/12/2009	Male Surgical Ward DHH					24/02/2010	Jackie Martin
	30/12/2009	Trauma Ward					24/02/2010	Jackie Martin
	30/12/2009	4 North Surgical				Patient admitted to 4 North on 18/12/09 with diarrhoea and directly to a sideroom. Sample sent next day appropriately as per guidelines. Sample tested for C Diff as patient over 65 years old. Patient received laxative treatment which was required for a investigative procedure.	24/02/2010	Jackie Martin
	31/12/2009	Trauma Ward					24/02/2010	Pamela Truesdale
	31/12/2009	Trauma Ward					24/02/2010	Pamela Truesdale
	01/01/2010	Trauma Ward						Pamela Truesdale
	01/01/2010	Orthopaedic Ward CAH						Pamela Truesdale



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/01/2010	Orthopaedic Ward CAH		Irrelevant information redacted by the USI			24/02/2010	Pamela Truesdale
	02/01/2010	Trauma Ward					22/01/2010	Esme Brown
	02/01/2010	Orthopaedic Ward CAH						Pamela Truesdale
	02/01/2010	Orthopaedic Ward CAH						Pamela Truesdale
	02/01/2010	3 South ENT						Esme Brown
	03/01/2010	Orthopaedic Ward CAH						Pamela Truesdale
	03/01/2010	Trauma Ward					15/01/2010	Pamela Truesdale
	03/01/2010	Orthopaedic Ward CAH						Pamela Truesdale
	04/01/2010	4 South Surgical					15/01/2010	Pamela Truesdale
	04/01/2010	Surgical Assessment Unit						Noleen Elliott
	06/01/2010	3 South ENT					24/02/2010	Pamela Truesdale
	06/01/2010	4 North Surgical				Patient admitted with diarrhoea with history of Chronns. Sample sent and O&S requested ONLY. However, lab tested for C-Diff inappropriately as patient under age 65.		Pamela Truesdale
	06/01/2010	Outpatients Dept					26/01/2010	Pamela Truesdale
	07/01/2010	3 South ENT						Pamela Truesdale
	07/01/2010	Trauma Ward						Pamela Truesdale
	07/01/2010	Male Surgical Ward DHH						Noleen Elliott
	09/01/2010	Orthopaedic Ward CAH					22/01/2010	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	09/01/2010	Orthopaedic Ward CAH		Irrelevant information redacted by the USI				Pamela Truesdale
	12/01/2010	Surgical Clinic, Outpatients Department						Pamela Truesdale
	12/01/2010	3 South ENT						Esme Brown
	12/01/2010	Fracture Clinic						Esme Brown
	14/01/2010	Outpatients Dept					18/02/2010	Pamela Truesdale
	14/01/2010	Pre-Operative Assessment Clinic					24/02/2010	Noleen Elliott
	14/01/2010	4 North Surgical						Jackie Martin
	18/01/2010	3 South Surgical						Pamela Truesdale
	18/01/2010	Outpatients Dept						Jackie Martin
	20/01/2010	Surgical Clinic, Outpatients Department						Esme Brown
	20/01/2010	Fracture Clinic					24/02/2010	Jackie Martin
	20/01/2010	Female Surgical Ward DHH				1. Blood culture competency training not established 2. No cannulae chart commenced in Theatre		Noleen Elliott
	21/01/2010	4 North Surgical						Esme Brown
	22/01/2010	Male Surgical Ward DHH						Jackie Martin
	24/01/2010	3 South ENT						Esme Brown
	24/01/2010	3 South ENT						Jackie Martin
	24/01/2010	3 South ENT						Jackie Martin
	25/01/2010	3 South ENT						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	25/01/2010	3 South ENT		Irrelevant information redacted by the USI				Jackie Martin
	25/01/2010	Male Surgical Ward DHH					04/02/2010	Esme Brown
	26/01/2010	Pre-Operative Assessment Clinic						Pamela Truesdale
	26/01/2010	4 North Surgical						Jackie Martin
	27/01/2010	ENT Clinic, Surgical Outpatients						Noleen Elliott
	27/01/2010	3 South Surgical						Esme Brown
	27/01/2010	4 North Surgical						Esme Brown
	28/01/2010	Urology Clinic						Pamela Truesdale
	28/01/2010	Male Surgical Ward DHH						Jackie Martin
	28/01/2010	3 South Surgical						Pamela Truesdale
	28/01/2010	Male Surgical Ward DHH						Jackie Martin
	28/01/2010	4 South Surgical						Pamela Truesdale
	28/01/2010	Pre-Operative Assessment Clinic						Pamela Truesdale
	28/01/2010	Female Surgical Ward DHH						Esme Brown
	28/01/2010	4 North Surgical						Esme Brown
	29/01/2010	Female Surgical Ward DHH						Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	29/01/2010	4 North Surgical		Irrelevant information redacted by the USI				Esme Brown
	30/01/2010	3 South Surgical						Pamela Truesdale
	31/01/2010	4 North Surgical						Esme Brown
	31/01/2010	Female Surgical Ward DHH						Pamela Truesdale
	31/01/2010	Female Surgical Ward DHH					24/02/2010	Esme Brown
	31/01/2010	Trauma Ward						Pamela Truesdale
	31/01/2010	3 South ENT						Esme Brown
	31/01/2010	4 North Surgical						Esme Brown
	01/02/2010	Outpatients Dept					10/05/2010	Jackie Martin
	01/02/2010	Surgical Clinic, Outpatients Department						Pamela Truesdale
	02/02/2010	3 South Surgical						Pamela Truesdale
	02/02/2010	Orthopaedic Ward CAH						Esme Brown
	02/02/2010	4 North Surgical						Esme Brown
	03/02/2010	4 North Surgical						Esme Brown
	03/02/2010	Male Surgical Ward DHH						Jackie Martin
	04/02/2010	4 North Surgical						Esme Brown
	04/02/2010	Trauma Ward					23/02/2010	Esme Brown
	05/02/2010	Orthopaedic Ward CAH						Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	05/02/2010	Female Surgical Ward DHH		Irrelevant information redacted by the USI				Esme Brown
	05/02/2010	4 North Surgical						Jackie Martin
	05/02/2010	4 South Surgical						Esme Brown
	05/02/2010	Male Surgical Ward DHH						Jackie Martin
	05/02/2010	4 South Surgical						Esme Brown
	06/02/2010	4 South Surgical					01/03/2010	Jackie Martin
	06/02/2010	4 North Surgical						Jackie Martin
	06/02/2010	Male Surgical Ward DHH						Pamela Truesdale
	07/02/2010	3 South ENT						Pamela Truesdale
	08/02/2010	Male Surgical Ward DHH						Jackie Martin
	09/02/2010	4 North Surgical						Jackie Martin
	09/02/2010	4 North Surgical					15/03/2010	Jackie Martin
	10/02/2010	Outpatients Dept					26/02/2010	Pamela Truesdale
	11/02/2010	Female Surgical Ward DHH						Noleen Elliott
	11/02/2010	4 South Surgical						Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/02/2010	4 North Surgical		Irrelevant information redacted by the USI				Pamela Truesdale
	13/02/2010	Female Surgical Ward DHH					10/03/2010	Noleen Elliott
	13/02/2010	Male Surgical Ward DHH					15/03/2010	Jackie Martin
	13/02/2010	4 North Surgical						Pamela Truesdale
	15/02/2010	Orthopaedic Ward CAH						Pamela Truesdale
	15/02/2010	4 North Surgical					24/02/2010	Pamela Truesdale
	15/02/2010	Orthopaedic Ward CAH						Jackie Martin
	15/02/2010	Female Surgical Ward DHH					23/04/2010	Esme Brown
	17/02/2010	Orthopaedic Ward CAH						Jackie Martin
	18/02/2010	3 South Surgical						Jackie Martin
	19/02/2010	4 South Surgical					04/03/2010	Jackie Martin
	20/02/2010	Male Surgical Ward DHH						Esme Brown
	20/02/2010	Male Surgical Ward DHH					15/03/2010	Jackie Martin
	20/02/2010	4 South Surgical						Jackie Martin
	20/02/2010	4 North Surgical						Jackie Martin
	20/02/2010	Female Surgical Ward DHH					10/05/2010	Noleen Elliott
	21/02/2010	Trauma Ward					15/04/2010	Noleen Elliott
	21/02/2010	Female Surgical Ward DHH						Noleen Elliott
	22/02/2010	Male Surgical Ward DHH					10/05/2010	Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	23/02/2010	Male Surgical Ward DHH		Irrelevant information redacted by the USI			15/03/2010	Esme Brown
	23/02/2010	4 South Surgical						Jackie Martin
	23/02/2010	4 North Surgical				Il Trust Policies adhered to from time of admission.		Jackie Martin
	23/02/2010	3 South ENT						Jackie Martin
	23/02/2010	4 South Surgical					01/03/2010	Jackie Martin
	23/02/2010	Orthopaedic Ward CAH						Esme Brown
	24/02/2010	Trauma Ward						Esme Brown
	24/02/2010	Trauma Ward						Jackie Martin
	26/02/2010	Orthopaedic Ward CAH						Jackie Martin
	26/02/2010	Female Surgical Ward DHH						Jackie Martin
	26/02/2010	Trauma Ward						Noleen Elliott
	27/02/2010	4 North Surgical				None		Pamela Truesdale
	27/02/2010	4 North Surgical					12/03/2010	Jackie Martin
	28/02/2010	4 South Surgical					15/03/2010	Esme Brown
	28/02/2010	Male Surgical Ward DHH					15/03/2010	Esme Brown
	28/02/2010	Male Surgical Ward DHH					15/03/2010	Esme Brown
	01/03/2010	Fracture Clinic						Esme Brown
	01/03/2010	Male Surgical Ward DHH						Pamela Truesdale
	01/03/2010	4 South Surgical						Esme Brown
	01/03/2010	Urology Clinic						Noleen Elliott
	01/03/2010	Female Surgical Ward DHH						Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Personal Information redacted by USI	01/03/2010	3 South Surgical		Irrelevant information redacted by the USI				Esme Brown
	01/03/2010	Female Surgical Ward DHH						Pamela Truesdale
	02/03/2010	Male Surgical Ward DHH						Jackie Martin
	02/03/2010	Orthopaedic Clinic						Esme Brown
	03/03/2010	Ophthamology Clinic						Esme Brown
	03/03/2010	Female Surgical Ward DHH						Esme Brown
	03/03/2010	Female Surgical Ward DHH						Esme Brown
	03/03/2010	Fracture Clinic						Pamela Truesdale
	03/03/2010	Ophthamology Clinic						Esme Brown
	03/03/2010	Ophthamology Clinic						Esme Brown
	03/03/2010	Outpatients Dept						Esme Brown
	03/03/2010	Female Surgical Ward DHH						Esme Brown
	03/03/2010	Ophthamology Clinic						Esme Brown
	03/03/2010	Orthopaedic Ward CAH						Esme Brown
	04/03/2010	ENT Clinic, Surgical Outpatients					19/07/2010	Esme Brown
	04/03/2010	2 South Urology						Noleen Elliott
	04/03/2010	Female Surgical Ward DHH						Esme Brown
	05/03/2010	Female Surgical Ward DHH						Esme Brown
	05/03/2010	Male Surgical Ward DHH						Jackie Martin
	05/03/2010	Female Surgical Ward DHH						Esme Brown
	06/03/2010	Male Surgical Ward DHH						Jackie Martin
	06/03/2010	Female Surgical Ward DHH						Esme Brown
	07/03/2010	Female Surgical Ward DHH						Jackie Martin
	07/03/2010	Female Surgical Ward DHH					02/04/2010	Esme Brown



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/03/2010	Male Surgical Ward DHH		Irrelevant information redacted by the USI				Pamela Truesdale
	08/03/2010	3 South ENT					01/04/2010	Pamela Truesdale
	08/03/2010	Male Surgical Ward DHH						Jackie Martin
	08/03/2010	Female Surgical Ward DHH						Esme Brown
	08/03/2010	Surgical Assessment Unit						Esme Brown
	09/03/2010	Male Surgical Ward DHH						Jackie Martin
	09/03/2010	Male Surgical Ward DHH						Jackie Martin
	09/03/2010	Orthopaedic Ward CAH						Noleen Elliott
	09/03/2010	Female Surgical Ward DHH						Esme Brown
	10/03/2010	Outpatients Dept						Esme Brown
	10/03/2010	Male Surgical Ward DHH						Esme Brown
	10/03/2010	1 Surgical EAW						Esme Brown
	10/03/2010	Trauma Ward						Esme Brown
	11/03/2010	Orthopaedic Ward CAH					01/04/2010	Esme Brown
	12/03/2010	ENT Clinic, Surgical Outpatients						Pamela Truesdale
	12/03/2010	Fracture Clinic						Jackie Martin
	12/03/2010	Female Surgical Ward DHH						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Personal Information redacted by USI	13/03/2010	Trauma Ward		Irrelevant information redacted by the USI				Jackie Martin
	14/03/2010	3 South ENT						Esme Brown
	14/03/2010	Male Surgical Ward DHH						Jackie Martin
	15/03/2010	4 South Surgical						Lyndsay Stewart
	15/03/2010	Female Surgical Ward DHH						Jackie Martin
	15/03/2010	Male Surgical Ward DHH						Esme Brown
	16/03/2010	Female Surgical Ward DHH				Irrelevant information redacted by the USI		Noleen Elliott
	16/03/2010	Female Surgical Ward DHH						Esme Brown
	17/03/2010	3 South ENT					22/04/2010	Pamela Truesdale
	18/03/2010	3 South Surgical						Lyndsay Stewart
	18/03/2010	Fracture Clinic						Esme Brown
	18/03/2010	3 South ENT					22/04/2010	Pamela Truesdale
	18/03/2010	Thorndale Urology ICATS						Esme Brown
	19/03/2010	Female Surgical Ward DHH						Noleen Elliott
	19/03/2010	Trauma Ward						Jackie Martin
	20/03/2010	Orthopaedic Ward CAH						Esme Brown
	21/03/2010	Male Surgical Ward DHH						Esme Brown
	21/03/2010	Male Surgical Ward DHH						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	21/03/2010	Trauma Ward		Irrelevant information redacted by the USI				Noleen Elliott
	22/03/2010	Female Surgical Ward DHH						Esme Brown
	22/03/2010	4 South Surgical						Esme Brown
	22/03/2010	Female Surgical Ward DHH						Esme Brown
	22/03/2010	4 South Surgical						Jackie Martin
	22/03/2010	3 South Surgical						Pamela Truesdale
	22/03/2010	Trauma Ward						Esme Brown
	23/03/2010	Trauma Ward						Esme Brown
	23/03/2010	1 Surgical EAW						Esme Brown
	23/03/2010	4 South Surgical						Jackie Martin
	23/03/2010	Trauma Ward						Esme Brown
	24/03/2010	Thorndale Urology ICATS						Esme Brown
	24/03/2010	Female Surgical Ward DHH						Esme Brown
	24/03/2010	Thorndale Urology ICATS						Esme Brown
	25/03/2010	Male Surgical Ward DHH						Esme Brown
	26/03/2010	Female Surgical Ward DHH						Esme Brown
	26/03/2010	Male Surgical Ward DHH						Esme Brown
	26/03/2010	4 North Surgical						Esme Brown
	27/03/2010	3 South Surgical						Pamela Truesdale
	28/03/2010	4 South Surgical						Esme Brown
	29/03/2010	3 South Surgical						Pamela Truesdale
	29/03/2010	3 South Surgical						Pamela Truesdale
	29/03/2010	3 South ENT						Pamela Truesdale
	29/03/2010	Male Surgical Ward DHH						Esme Brown
	29/03/2010	Surgical Clinic, Outpatients Department						Esme Brown
	29/03/2010	Female Surgical Ward DHH						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	29/03/2010	3 South Surgical		Irrelevant information redacted by the USI				Pamela Truesdale
	29/03/2010	3 South Surgical						Pamela Truesdale
	29/03/2010	3 South Surgical						Pamela Truesdale
	30/03/2010	3 South Surgical						Pamela Truesdale
	30/03/2010	Fracture Clinic						Jackie Martin
	30/03/2010	Female Surgical Ward DHH					23/05/2010	Esme Brown
	30/03/2010	Fracture Clinic						Esme Brown
	31/03/2010	4 North Surgical						Esme Brown
	31/03/2010	1 Surgical EAW						Esme Brown
	31/03/2010	Orthopaedic Ward CAH						Noleen Elliott
	31/03/2010	Orthopaedic Ward CAH						Noleen Elliott
	31/03/2010	General Surgery Clinic						Esme Brown
	31/03/2010	Fracture Clinic						Noleen Elliott
	01/04/2010	3 South CESU						Jackie Martin
	01/04/2010	Fracture Clinic						Esme Brown
	01/04/2010	3 South CESU						Jackie Martin
	01/04/2010	4 North Surgical						Esme Brown
	02/04/2010	3 South Surgical						Noleen Elliott
	02/04/2010	1 Surgical EAW						Jackie Martin
	03/04/2010	3 South CESU						Jackie Martin
	04/04/2010	3 South CESU						Jackie Martin
	06/04/2010	3 South CESU						Jackie Martin
	07/04/2010	3 South CESU						Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/04/2010	3 South CESU		Irrelevant information redacted by the USI				Jackie Martin
	07/04/2010	4 South Surgical						Jackie Martin
	07/04/2010	Male Surgical Ward DHH					07/05/2010	Jackie Martin
	08/04/2010	4 North Surgical						Pamela Truesdale
	08/04/2010	Orthopaedic Ward CAH						Jackie Martin
	08/04/2010	Surgical Assessment Unit						Pamela Truesdale
	08/04/2010	Trauma Ward					23/06/2010	Jackie Martin
	08/04/2010	Female Surgical Ward DHH						Pamela Truesdale
	08/04/2010	4 South Surgical						Pamela Truesdale
	08/04/2010	Male Surgical Ward DHH						Noleen Elliott
	08/04/2010	3 South CESU						Jackie Martin
	09/04/2010	3 South CESU						Jackie Martin
	09/04/2010	1 Surgical EAW						Jackie Martin
	09/04/2010	1 Surgical EAW						Jackie Martin
	09/04/2010	1 Surgical EAW						Jackie Martin
	09/04/2010	4 North Surgical						Jackie Martin
	10/04/2010	Trauma Ward						Jackie Martin
	10/04/2010	4 North Surgical						Jackie Martin
	11/04/2010	Urology Clinic						Jackie Martin
	11/04/2010	Urology Clinic						Noleen Elliott
	11/04/2010	Trauma Ward						Jackie Martin
	12/04/2010	Male Surgical Ward DHH					10/05/2010	Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/04/2010	3 South CESU		Irrelevant information redacted by the USI				Jackie Martin
	12/04/2010	3 South CESU						Jackie Martin
	13/04/2010	1 Surgical EAW						Jackie Martin
	13/04/2010	Thorndale Urology ICATS						Jackie Martin
	13/04/2010	Fracture Clinic						Jackie Martin
	13/04/2010	Thorndale Urology ICATS						Jackie Martin
	13/04/2010	Thorndale Urology ICATS						Jackie Martin
	13/04/2010	1 Surgical EAW						Jackie Martin
	13/04/2010	4 North Surgical						Jackie Martin
	14/04/2010	3 South CESU						Jackie Martin
	14/04/2010	Male Surgical Ward DHH						Jackie Martin
	14/04/2010	3 South CESU						Jackie Martin
	14/04/2010	3 South Surgical						Pamela Truesdale
	15/04/2010	4 North Surgical						Jackie Martin
	16/04/2010	Female Surgical Ward DHH						Jackie Martin
	16/04/2010	Female Surgical Ward DHH						Jackie Martin
	17/04/2010	3 South CESU						Jackie Martin
	17/04/2010	3 South CESU						Jackie Martin
	18/04/2010	4 North Surgical						Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	19/04/2010	Female Surgical Ward DHH		Irrelevant information redacted by the USI				Jackie Martin
	19/04/2010	3 South CESU						Jackie Martin
	19/04/2010	3 South CESU						Jackie Martin
	20/04/2010	Fracture Clinic						Pamela Truesdale
	20/04/2010	4 South Surgical					07/05/2010	Jackie Martin
	20/04/2010	3 South CESU						Jackie Martin
	21/04/2010	Day Clinical Centre						Jackie Martin
	21/04/2010	ENT Clinic, Surgical Outpatients					13/05/2010	Esme Brown
	21/04/2010	Day Clinical Centre						Jackie Martin
	21/04/2010	Thorndale Urology ICATS						Jackie Martin
	21/04/2010	Thorndale Urology ICATS						Jackie Martin
	21/04/2010	Thorndale Urology ICATS						Jackie Martin
	22/04/2010	4 South Surgical						Esme Brown
	23/04/2010	4 North Surgical					07/05/2010	Jackie Martin
	23/04/2010	4 South Surgical						Jackie Martin
	23/04/2010	Day Clinical Centre						Jackie Martin
	23/04/2010	3 South CESU						Jackie Martin
	23/04/2010	4 South Surgical						Jackie Martin
	24/04/2010	4 South Surgical					18/05/2010	Jackie Martin
	25/04/2010	4 North Surgical						Jackie Martin
	25/04/2010	Orthopaedic Ward CAH						Pamela Truesdale
	25/04/2010	4 South Surgical					07/05/2010	Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	25/04/2010	Female Surgical Ward DHH		Irrelevant information redacted by the USI				Jackie Martin
	26/04/2010	4 North Surgical						Esme Brown
	26/04/2010	ENT Clinic, Surgical Outpatients						Pamela Truesdale
	26/04/2010	4 North Surgical						Esme Brown
	26/04/2010	Fracture Clinic						Pamela Truesdale
	27/04/2010	4 North Surgical						Pamela Truesdale
	27/04/2010	Male Surgical Ward DHH						Jackie Martin
	27/04/2010	Trauma Ward						Pamela Truesdale
	28/04/2010	ENT Clinic, Surgical Outpatients						Pamela Truesdale
	28/04/2010	Thorndale Urology ICATS						Lyndsay Stewart
	28/04/2010	3 South Surgical						Pamela Truesdale
	28/04/2010	3 South CESU						Jackie Martin
	28/04/2010	Thorndale Urology ICATS						Lyndsay Stewart
	28/04/2010	Thorndale Urology ICATS						Jackie Martin
	29/04/2010	4 South Surgical					18/05/2010	Jackie Martin
	29/04/2010	Thorndale Urology ICATS						Jackie Martin
	29/04/2010	Thorndale Urology ICATS						Jackie Martin
	30/04/2010	4 North Surgical						Jackie Martin
	01/05/2010	Male Surgical Ward DHH						Jackie Martin
	01/05/2010	Male Surgical Ward DHH						Jackie Martin
	01/05/2010	3 South CESU						Esme Brown
	02/05/2010	Male Surgical Ward DHH						Esme Brown
	03/05/2010	4 South Surgical						Jackie Martin
	03/05/2010	3 South CESU						Jackie Martin



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	03/05/2010	4 South Surgical		Irrelevant information redacted by the USI			04/06/2010	Jackie Martin
	04/05/2010	3 South CESU				Irrelevant information redacted by the ████████ Developed urology symptoms urology investigations normal. Delay in commencing topical decolonisation treatment. No documentation of who took the blood culture or how it was taken.		Jackie Martin
	04/05/2010	3 South CESU						Jackie Martin
	04/05/2010	Day Surgery Unit						Jackie Martin
	05/05/2010	Theatres						Pamela Truesdale
	05/05/2010	Orthopaedic Ward CAH						Jackie Martin
	05/05/2010	4 South Surgical					08/06/2010	Pamela Truesdale
	05/05/2010	3 South Surgical						Jackie Martin
	06/05/2010	Fracture Clinic						Pamela Truesdale
	06/05/2010	4 South Surgical						Pamela Truesdale
	07/05/2010	4 North Surgical					07/06/2010	Pamela Truesdale
	09/05/2010	4 South Surgical						Esme Brown
	09/05/2010	Male Surgical Ward DHH						Esme Brown
	09/05/2010	4 South Surgical						Esme Brown
	10/05/2010	Trauma Ward						Esme Brown
	10/05/2010	4 South Surgical						Jackie Martin
	10/05/2010	3 South CESU						Esme Brown
	11/05/2010	Trauma Ward						Esme Brown
	11/05/2010	4 North Surgical					04/06/2010	Esme Brown
	11/05/2010	4 South Surgical						Esme Brown
	11/05/2010	Orthopaedic Clinic						Esme Brown
	12/05/2010	4 South Surgical						Esme Brown
	12/05/2010							Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/05/2010	4 South Surgical		Irrelevant information redacted by the USI				Esme Brown
	12/05/2010	4 North Surgical					04/06/2010	Esme Brown
	12/05/2010	4 South Surgical						Esme Brown
	12/05/2010	X-Ray Dept						Jackie Martin
	12/05/2010	Female Surgical Ward DHH						Esme Brown
	12/05/2010	4 South Surgical						Esme Brown
	12/05/2010	X-Ray Dept						Jackie Martin
	12/05/2010	4 South Surgical						Jackie Martin
	12/05/2010	3 South CESU						Esme Brown
	13/05/2010	ENT Clinic, Surgical Outpatients						Esme Brown
	13/05/2010	Male Surgical Ward DHH						Esme Brown
	13/05/2010	Outpatients Dept						Esme Brown
	13/05/2010	3 South CESU						Esme Brown
	13/05/2010	3 South CESU						Esme Brown
	14/05/2010	3 South CESU						Esme Brown
	14/05/2010	4 South Surgical					04/06/2010	Esme Brown
	14/05/2010	4 South Surgical					04/06/2010	Esme Brown
	14/05/2010	4 South Surgical					04/06/2010	Esme Brown
	14/05/2010	Male Surgical Ward DHH						Esme Brown
	15/05/2010	Male Surgical Ward DHH						Esme Brown
	15/05/2010	3 South CESU						Esme Brown
	17/05/2010	3 South CESU						Esme Brown
	17/05/2010	3 South CESU						Esme Brown
	17/05/2010	3 South CESU						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	17/05/2010	4 North Surgical		Irrelevant information redacted by the USI				Esme Brown
	18/05/2010	Day Surgery Unit						Esme Brown
	18/05/2010	Female Surgical Ward DHH						Esme Brown
	18/05/2010	Day Surgery Unit						Esme Brown
	18/05/2010	Trauma Ward						Esme Brown
	19/05/2010	Day Surgery Unit						Esme Brown
	19/05/2010	Trauma Ward						Esme Brown
	19/05/2010	Recovery Ward						Esme Brown
	19/05/2010	4 South Surgical					04/06/2010	Esme Brown
	19/05/2010	Trauma and Orthopaedics Theatres						Pamela Truesdale
	19/05/2010	Trauma Ward						Esme Brown
	20/05/2010	3 South CESU						Esme Brown
	21/05/2010	3 South CESU					11/06/2010	Esme Brown
	21/05/2010	4 North Surgical						Esme Brown
	23/05/2010	Male Surgical Ward DHH						Esme Brown
	24/05/2010	Trauma Ward						Esme Brown
	25/05/2010	Day Surgery Unit						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	25/05/2010	Male Surgical Ward DHH		Irrelevant information redacted by the USI				Esme Brown
	25/05/2010	Day Surgery Unit						Esme Brown
	25/05/2010	Theatres						Esme Brown
	25/05/2010	3 South CESU						Esme Brown
	26/05/2010	Thorndale Urology ICATS					08/06/2010	Noleen Elliott
	26/05/2010	1 Surgical EAW						Esme Brown
	26/05/2010	Orthopaedic Ward CAH						Esme Brown
	28/05/2010	1 Surgical EAW						Esme Brown
	28/05/2010	1 Surgical EAW						Esme Brown
	29/05/2010	3 South CESU						Esme Brown
	30/05/2010	4 North Surgical						Pamela Truesdale
	01/06/2010	Female Surgical Ward DHH						Esme Brown
	02/06/2010	4 North Surgical						Noleen Elliott
	02/06/2010	3 South Surgical						Esme Brown
	03/06/2010	Male Surgical Ward DHH						Esme Brown
	03/06/2010	Male Surgical Ward DHH						Esme Brown
	03/06/2010	Male Surgical Ward DHH					28/06/2010	Noleen Elliott
	03/06/2010	1 Surgical EAW						Noleen Elliott
	03/06/2010	4 North Surgical						Esme Brown
	04/06/2010	3 South CESU						Esme Brown
	04/06/2010	4 North Surgical						Noleen Elliott
	04/06/2010	Orthopaedic Ward CAH						Esme Brown
	06/06/2010	3 South CESU						Esme Brown
	06/06/2010	4 South Surgical						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/06/2010	Orthopaedic Ward CAH		Irrelevant information redacted by the USI				Esme Brown
	07/06/2010	ENT Clinic, Surgical Outpatients						Esme Brown
	07/06/2010	Outpatients Dept						Esme Brown
	07/06/2010	4 North Surgical						Esme Brown
	07/06/2010	Theatres						Esme Brown
	07/06/2010	3 South CESU						Jackie Martin
	08/06/2010	Urology Clinic						Jackie Martin
	08/06/2010	Urology Clinic						Jackie Martin
	08/06/2010	4 South Surgical						Noleen Elliott
	09/06/2010	Female Surgical Ward DHH					18/06/2010	Esme Brown
	10/06/2010	Day Surgery Unit						Esme Brown
	10/06/2010	Male Surgical Ward DHH						Noleen Elliott
	10/06/2010	4 North Surgical						Noleen Elliott
	10/06/2010	4 North Surgical						Noleen Elliott
	11/06/2010	Outpatients Dept						Pamela Truesdale
	11/06/2010	4 North Surgical						Esme Brown
	11/06/2010	Outpatients Dept						Pamela Truesdale
	11/06/2010	Outpatients Dept						Pamela Truesdale
	13/06/2010	4 North Surgical						Esme Brown
	13/06/2010	Male Surgical Ward DHH						Noleen Elliott
	14/06/2010	Theatres						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/06/2010	4 South Surgical		Irrelevant information redacted by the USI				Noleen Elliott
	14/06/2010	Corridor/Landing						Esme Brown
	14/06/2010	Orthopaedic Ward CAH						Esme Brown
	14/06/2010	Pre-Operative Assessment Clinic						Esme Brown
	14/06/2010	Trauma Ward						Esme Brown
	15/06/2010	Orthopaedic Ward CAH						Esme Brown
	15/06/2010	4 North Surgical						Noleen Elliott
	15/06/2010	4 North Surgical						Noleen Elliott
	16/06/2010	Orthopaedic Clinic						Pamela Truesdale
	16/06/2010	Surgical Clinic, Outpatients Department						Noleen Elliott
	16/06/2010	Orthopaedic Ward CAH						Esme Brown
	16/06/2010	Pre-Operative Assessment Clinic						Pamela Truesdale
	17/06/2010	4 South Surgical				Irrelevant information redacted by the USI		Noleen Elliott
	17/06/2010	Orthopaedic Ward CAH						Esme Brown
	17/06/2010	3 South CESU						Jackie Martin
	19/06/2010	Trauma Ward						Esme Brown
	21/06/2010	Female Surgical Ward DHH					14/07/2010	Noleen Elliott
	21/06/2010	Day Surgery Unit						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	21/06/2010	4 North Surgical		Irrelevant information redacted by the USI				Noleen Elliott
	22/06/2010	Male Surgical Ward DHH						Esme Brown
	22/06/2010	Male Surgical Ward DHH						Esme Brown
	22/06/2010	3 South ENT						Noleen Elliott
	22/06/2010	Male Surgical Ward DHH						Noleen Elliott
	22/06/2010	Male Surgical Ward DHH						Esme Brown
	23/06/2010	4 North Surgical				Irrelevant information redacted by the USI		Noleen Elliott
	24/06/2010	Male Surgical Ward DHH						Noleen Elliott
	24/06/2010	Day Surgery Unit						Esme Brown
	25/06/2010	Trauma Ward						Esme Brown
	26/06/2010	Trauma Ward						Esme Brown
	26/06/2010	3 South ENT						Noleen Elliott
	28/06/2010	4 North Surgical						Noleen Elliott
	28/06/2010	3 South CESU						Esme Brown
	28/06/2010	Orthopaedic Ward CAH						Esme Brown
	28/06/2010	2 South Urology						Noleen Elliott
	28/06/2010	4 North Surgical						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	29/06/2010	Office(s)		Irrelevant information redacted by the USI				Jackie Martin
	29/06/2010	Pre-Operative Assessment Clinic						Jackie Martin
	29/06/2010	4 North Surgical					05/07/2010	Jackie Martin
	29/06/2010	4 North Surgical						Esme Brown
	30/06/2010	Outpatients Dept						Jackie Martin
	01/07/2010	Outpatients Dept						Pamela Truesdale
	01/07/2010	Outpatients Dept						Noleen Elliott
	01/07/2010	Male Surgical Ward DHH						Noleen Elliott
	05/07/2010	3 South	Urology Surgery				17/08/2012	DS
	05/07/2010	4 South Surgical						Noleen Elliott
	05/07/2010	Male Surgical Ward DHH						Noleen Elliott
	06/07/2010	Fracture Clinic						Noleen Elliott
	07/07/2010	4 South Surgical						Noleen Elliott
	07/07/2010	Urology Clinic						Noleen Elliott
	08/07/2010	3 South Surgical						Noleen Elliott
	08/07/2010	Female Surgical Ward DHH						Noleen Elliott
	09/07/2010	3 South ENT						Noleen Elliott
	09/07/2010	4 South Surgical						Noleen Elliott
	12/07/2010	Trauma Ward						Noleen Elliott



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	13/07/2010	Surgical Clinic, Outpatients Department		Irrelevant information redacted by the USI				Noleen Elliott
	14/07/2010	4 North Surgical						Noleen Elliott
	15/07/2010	4 North Surgical				Irrelevant information redacted by the USI		Noleen Elliott
	15/07/2010	3 South Surgical						Noleen Elliott
	16/07/2010	3 South Surgical						Noleen Elliott
	17/07/2010	4 South Surgical						Noleen Elliott
	17/07/2010	ENT Clinic, Surgical Outpatients						Noleen Elliott
	18/07/2010	Male Surgical Ward DHH					16/08/2010	Noleen Elliott
	18/07/2010	4 North Surgical						Noleen Elliott
	18/07/2010	4 North Surgical					13/08/2010	Noleen Elliott
	18/07/2010	4 North Surgical					13/08/2010	Noleen Elliott
	19/07/2010	Female Surgical Ward DHH					13/08/2010	Noleen Elliott
	19/07/2010	3 South Surgical						Noleen Elliott
	20/07/2010	1 Surgical EAW						Noleen Elliott
	20/07/2010	1 Surgical EAW						Noleen Elliott
	20/07/2010	1 Surgical EAW						Noleen Elliott
	20/07/2010	1 Surgical EAW						Noleen Elliott
	20/07/2010	3 South Surgical						Noleen Elliott
	20/07/2010	1 Surgical EAW						Noleen Elliott
	21/07/2010	Male Surgical Ward DHH						Noleen Elliott
	21/07/2010	1 Surgical EAW						Noleen Elliott
	21/07/2010	1 Surgical EAW						Noleen Elliott
	21/07/2010	Thorndale Urology ICATS						Noleen Elliott
	22/07/2010	Personal Information redacted by USI						Noleen Elliott
	22/07/2010							Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/07/2010	Thorndale Urology ICATS		Irrelevant information redacted by the USI				Noleen Elliott
	23/07/2010	Outpatients Dept						Noleen Elliott
	23/07/2010	Female Surgical Ward DHH						Noleen Elliott
	23/07/2010	Trauma Ward						Noleen Elliott
	23/07/2010	Pre-Operative Assessment Clinic						Noleen Elliott
	23/07/2010	Trauma Ward						Noleen Elliott
	24/07/2010	4 North Surgical					23/08/2010	Esme Brown
	26/07/2010	Outpatients Dept						Noleen Elliott
	26/07/2010	Female Surgical Ward DHH						Noleen Elliott
	27/07/2010	Female Surgical Ward DHH						Noleen Elliott
	27/07/2010	3 South Surgical						Noleen Elliott
	27/07/2010	Surgical Clinic, Outpatients Department						Noleen Elliott
	28/07/2010	3 South ENT						Noleen Elliott
	28/07/2010	Outpatients Dept					16/08/2010	Noleen Elliott
	29/07/2010	4 North Surgical						Lyndsay Stewart
	29/07/2010	1 Surgical EAW						Noleen Elliott
	30/07/2010	Female Surgical Ward DHH						Noleen Elliott
	02/08/2010	Thorndale Urology ICATS					17/08/2010	Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/08/2010	4 South Surgical		Irrelevant information redacted by the USI				Noleen Elliott
	02/08/2010	ENT Clinic, Surgical Outpatients						Noleen Elliott
	03/08/2010	ENT Clinic, Surgical Outpatients						Esme Brown
	03/08/2010	Female Surgical Ward DHH						Noleen Elliott
	03/08/2010	4 South Surgical						Noleen Elliott
	03/08/2010	Female Surgical Ward DHH						Noleen Elliott
	04/08/2010	Outpatients Dept						Noleen Elliott
	05/08/2010	Fracture Clinic						Pamela Truesdale
	07/08/2010	ENT Clinic, Surgical Outpatients						Noleen Elliott
	08/08/2010	4 North Surgical						Noleen Elliott
	09/08/2010	4 South Surgical						Noleen Elliott
	09/08/2010	4 North Surgical						Noleen Elliott
	09/08/2010	3 South Surgical					24/08/2010	Noleen Elliott
	10/08/2010	Male Surgical Ward DHH				Irrelevant information redacted by the USI		Noleen Elliott
	11/08/2010	Female Surgical Ward DHH						Noleen Elliott
	13/08/2010	3 South Surgical						Noleen Elliott
	14/08/2010	4 North Surgical						Noleen Elliott
	15/08/2010	2 South Urology						Noleen Elliott
	16/08/2010	4 North Surgical						Noleen Elliott
	16/08/2010	Female Surgical Ward DHH						Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	19/08/2010	Male Surgical Ward DHH		Irrelevant information redacted by the USI				Pamela Truesdale
	20/08/2010	Male Surgical Ward DHH						Noleen Elliott
	21/08/2010	3 South Surgical					05/10/2010	Esme Brown
	23/08/2010	Female Surgical Ward DHH						Noleen Elliott
	24/08/2010	ENT Clinic, Surgical Outpatients						Esme Brown
	24/08/2010	Female Surgical Ward DHH						Pamela Truesdale
	25/08/2010	Orthopaedic Ward CAH						Noleen Elliott
	25/08/2010	4 North Surgical						Noleen Elliott
	26/08/2010	Male Surgical Ward DHH						Noleen Elliott
	26/08/2010	Trauma Ward					17/09/2010	Noleen Elliott
	26/08/2010	Fracture Clinic						Noleen Elliott
	27/08/2010	4 North Surgical					17/09/2010	Noleen Elliott
	30/08/2010	Female Surgical Ward DHH						Noleen Elliott
	31/08/2010	4 South Surgical						Noleen Elliott
	31/08/2010	Fracture Clinic						Esme Brown
	01/09/2010	4 North Surgical				Irrelevant information redacted by the USI		Esme Brown
	01/09/2010	Outpatients Dept						Esme Brown
	02/09/2010	Female Surgical Ward DHH						Jackie Martin
	02/09/2010	Fracture Clinic						Esme Brown
	02/09/2010	4 North Surgical						Esme Brown
	03/09/2010	Male Surgical Ward DHH						Esme Brown
	03/09/2010	4 North Surgical						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	05/09/2010	4 North Surgical		Irrelevant information redacted by the USI				Esme Brown
	05/09/2010	3 South Surgical						Noleen Elliott
	07/09/2010	Outpatients Dept						Noleen Elliott
	07/09/2010	Outpatients Dept						Esme Brown
	07/09/2010	Outpatients Dept						Esme Brown
	07/09/2010	Female Surgical Ward DHH						Jackie Martin
	08/09/2010	Trauma Ward						Jackie Martin
	08/09/2010	Pre-Operative Assessment Clinic						Lyndsay Stewart
	09/09/2010	Orthopaedic Ward CAH						Esme Brown
	10/09/2010	2 South Urology					08/10/2010	Esme Brown
	12/09/2010	4 North Surgical						Esme Brown
	13/09/2010	Surgical Assessment Unit						Esme Brown
	13/09/2010	Fracture Clinic						Esme Brown
	13/09/2010	Female Surgical Ward DHH						Esme Brown
	13/09/2010	Orthopaedic Ward CAH						Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/09/2010	Outpatients Dept		Irrelevant information redacted by the USI				Jackie Martin
	14/09/2010	Female Surgical Ward DHH						Jackie Martin
	14/09/2010	Outpatients Dept						Jackie Martin
	15/09/2010	Male Surgical Ward DHH						Jackie Martin
	15/09/2010	Male Surgical Ward DHH						Jackie Martin
	15/09/2010	Orthopaedic Ward CAH						Jackie Martin
	16/09/2010	4 South Surgical						Jackie Martin
	16/09/2010	4 South Surgical						Jackie Martin
	17/09/2010	Outpatients Dept						Jackie Martin
	18/09/2010	Male Surgical Ward DHH					27/09/2010	Noleen Elliott
	18/09/2010	3 South Surgical						Jackie Martin
	20/09/2010	4 North Surgical						Pamela Truesdale
	20/09/2010	3 South Surgical					14/10/2010	Pamela Truesdale
	20/09/2010	Male Surgical Ward DHH						Pamela Truesdale
	21/09/2010	Outpatients Dept						Jackie Martin
	21/09/2010	Fracture Clinic						Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/09/2010	Male Surgical Ward DHH		Irrelevant information redacted by the USI				Esme Brown
	22/09/2010	4 North Surgical						Jackie Martin
	24/09/2010	3 South Surgical						Esme Brown
	24/09/2010	Female Surgical Ward DHH						Jackie Martin
	26/09/2010	3 South ENT						Pamela Truesdale
	27/09/2010	Outpatients Dept						Jackie Martin
	27/09/2010	Fracture Clinic						Pamela Truesdale
	28/09/2010	ENT Clinic, Surgical Outpatients						Jackie Martin
	28/09/2010	Female Surgical Ward DHH						Pamela Truesdale
	28/09/2010	3 South ENT					19/10/2010	Pamela Truesdale
	02/10/2010	4 North	General Surgery					Pamela Truesdale
	04/10/2010	General Surgery Clinic	General Surgery					Pamela Truesdale
	06/10/2010	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	07/10/2010	Treatment Room	Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/10/2010	Treatment Room	Outpatients - (general opd area including waiting lists and nursing staff)	Irrelevant information redacted by the USI				Mrs Jackie Martin
	07/10/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	08/10/2010	3 South	Urology and ENT					Pamela Truesdale
	11/10/2010	Male Surgical/HDU	General Surgery					Pamela Truesdale
	12/10/2010	Male Surgical/HDU	General Surgery					Pamela Truesdale
	12/10/2010	4 South	General Surgery					Pamela Truesdale
	12/10/2010	Female Surgical/Gynae	General Surgery					Pamela Truesdale
	12/10/2010	Opthamology Clinic	Ophthalmology					Esme Brown
	13/10/2010	3 South	Urology and ENT					Pamela Truesdale
	15/10/2010	3 South	Urology and ENT					Mrs Jackie Martin
	17/10/2010	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	17/10/2010	4 South	General Surgery					Pamela Truesdale
	17/10/2010	4 South	General Surgery					Esme Brown
	17/10/2010	Fracture Clinic	Trauma and Orthopaedics					Esme Brown
	18/10/2010	Pre-operative Assessment Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	18/10/2010	Corridor/Stairs	Outpatients - (general opd area including waiting lists and nursing staff)	Irrelevant information redacted by the USI				Mrs Jackie Martin
	18/10/2010	Corridor/Stairs	Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin
	18/10/2010	Pre-operative Assessment Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Pamela Truesdale
	19/10/2010	Male Surgical/HDU	General Surgery					Esme Brown
	19/10/2010	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	20/10/2010	Male Surgical/HDU	General Surgery					Pamela Truesdale
	21/10/2010	1 Surgical	General Surgery					Mrs Jackie Martin
	22/10/2010	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	22/10/2010	4 North	General Surgery					Mrs Jackie Martin
	23/10/2010	Female Surgical/Gynae	General Surgery					Esme Brown
	24/10/2010	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	26/10/2010	Fracture Clinic	Trauma and Orthopaedics					Pamela Truesdale
	26/10/2010	4 South	General Surgery					Esme Brown
	26/10/2010	3 South	Urology and ENT					Pamela Truesdale
	26/10/2010	4 North	General Surgery					Esme Brown
	27/10/2010	Day Surgery Unit CAH	Day Procedure/Surgery			None, All appropriate actions followed.	01/12/2011	Brigeen Kelly
	27/10/2010	3 South	Urology and ENT					Esme Brown
	27/10/2010	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	28/10/2010	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	28/10/2010	Male Surgical/HDU	General Surgery					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	29/10/2010	3 South	Urology and ENT	Irrelevant information redacted by the USI				Mrs Jackie Martin
	29/10/2010	ENT Clinic	Urology and ENT					Esme Brown
	30/10/2010	4 North	General Surgery					Mrs Jackie Martin
	31/10/2010	4 North	General Surgery					Mrs Jackie Martin
	01/11/2010	3 South	General Surgery					Noleen Elliott
	02/11/2010	3 South	General Surgery					Noleen Elliott
	02/11/2010	ENT Clinic	Urology and ENT					Noleen Elliott
	02/11/2010	Treatment Room	Outpatients - (general opd area including waiting lists and nursing staff)					Noleen Elliott
	03/11/2010	Female Surgical/Gynae	General Surgery					Noleen Elliott
	03/11/2010	4 South	General Surgery					Noleen Elliott
	03/11/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	04/11/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	04/11/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	05/11/2010	Fracture Clinic	Trauma and Orthopaedics					Noleen Elliott
	05/11/2010	Female Surgical/Gynae	General Surgery					Noleen Elliott
	05/11/2010	1 Surgical	General Surgery					Noleen Elliott
	05/11/2010	Male Surgical/HDU	General Surgery					Noleen Elliott
	07/11/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	08/11/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	08/11/2010	4 North	General Surgery					Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	09/11/2010	ENT Clinic	Urology and ENT	Irrelevant information redacted by the USI				Noleen Elliott
	09/11/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	09/11/2010	4 North	General Surgery					Noleen Elliott
	09/11/2010	ENT Clinic	Urology and ENT					Noleen Elliott
	13/11/2010	4 South	General Surgery					Noleen Elliott
	14/11/2010	4 North	General Surgery					Noleen Elliott
	14/11/2010	4 North	General Surgery					Noleen Elliott
	16/11/2010	Pre-operative Assessment Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Noleen Elliott
	16/11/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	16/11/2010	3 South	Urology and ENT					Noleen Elliott
	16/11/2010	1 West Gynae	General Surgery					Noleen Elliott
	16/11/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	17/11/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	18/11/2010	3 South	General Surgery					Noleen Elliott
	18/11/2010	Entrance/Exit	Outpatients - (general opd area including waiting lists and nursing staff)					Noleen Elliott
	19/11/2010	3 South	General Surgery					Noleen Elliott
	20/11/2010	4 North	General Surgery					Noleen Elliott
	21/11/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	22/11/2010	Treatment Room	Outpatients - (general opd area including waiting lists and nursing staff)					Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/11/2010	Pre-operative Assessment Clinic	Outpatients - (general opd area including waiting lists and nursing staff)	Irrelevant information redacted by the USI				Noleen Elliott
	23/11/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	24/11/2010	Male Surgical/HDU	General Surgery					Noleen Elliott
	25/11/2010	4 North	General Surgery					Noleen Elliott
	25/11/2010	Trauma/Orthopaedic Theatre	Trauma and Orthopaedics					Noleen Elliott
	26/11/2010	4 North	General Surgery					Noleen Elliott
	27/11/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	01/12/2010	Fracture Clinic	Trauma and Orthopaedics					Noleen Elliott
	02/12/2010	Female Surgical/Gynae	General Surgery					Noleen Elliott
	02/12/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	02/12/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	03/12/2010	Male Surgical/HDU	General Surgery					Noleen Elliott
	03/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	04/12/2010	3 South	General Surgery					Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	04/12/2010	Trauma Ward	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Noleen Elliott
	05/12/2010	Male Surgical/HDU	General Surgery					Pamela Truesdale
	05/12/2010	3 South	General Surgery					Noleen Elliott
	05/12/2010	3 South	General Surgery					Noleen Elliott
	07/12/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	07/12/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	07/12/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	07/12/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	07/12/2010	3 South	General Surgery					Noleen Elliott
	08/12/2010	4 North	General Surgery					Mrs Jackie Martin
	08/12/2010	Male Surgical/HDU	General Surgery					Noleen Elliott
	09/12/2010	Male Surgical/HDU	General Surgery					Noleen Elliott
	10/12/2010	3 South	General Surgery					Noleen Elliott
	10/12/2010	3 South	General Surgery					Noleen Elliott
	11/12/2010	3 South	Urology and ENT					Mrs Jackie Martin
	12/12/2010	3 South	Urology and ENT					Noleen Elliott
	12/12/2010	3 South	Urology and ENT					Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/12/2010	4 North	General Surgery	Irrelevant information redacted by the USI				Noleen Elliott
	12/12/2010	4 North	General Surgery					Noleen Elliott
	12/12/2010	4 South	General Surgery					Noleen Elliott
	13/12/2010	3 South	Urology and ENT					Esme Brown
	13/12/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	13/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	14/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	15/12/2010	Fracture Clinic	Trauma and Orthopaedics					Noleen Elliott
	16/12/2010	Fracture Clinic	Trauma and Orthopaedics					Noleen Elliott
	16/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	16/12/2010	3 South	Urology and ENT					Noleen Elliott
	18/12/2010	3 South	Urology and ENT					Noleen Elliott
	18/12/2010	3 South	Urology and ENT					Noleen Elliott
	20/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	20/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	20/12/2010	Trauma/Orthopaedic Theatre	Trauma and Orthopaedics					Noleen Elliott
	20/12/2010	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	20/12/2010	4 South	General Surgery					Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/12/2010	4 South	General Surgery	Irrelevant information redacted by the USI				Noleen Elliott
	20/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	21/12/2010	4 North	General Surgery				27/04/2012	GH
	21/12/2010	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	21/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	22/12/2010	4 North	General Surgery					Noleen Elliott
	23/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	23/12/2010	4 North	General Surgery					Noleen Elliott
	25/12/2010	4 North	General Surgery					Noleen Elliott
	29/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	29/12/2010	Male Surgical/HDU	General Surgery					Noleen Elliott
	30/12/2010	Female Surgical/Gynae	General Surgery					Noleen Elliott
	30/12/2010	Fracture Clinic	Trauma and Orthopaedics					Noleen Elliott
	30/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	31/12/2010	4 South	General Surgery					Noleen Elliott
	31/12/2010	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	03/01/2011	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	04/01/2011	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	04/01/2011	3 South	Urology and ENT					Noleen Elliott
	04/01/2011	3 South	General Surgery					Noleen Elliott
	04/01/2011	1 Surgical	General Surgery					Esme Brown
	05/01/2011	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	05/01/2011	3 South	Urology and ENT	Irrelevant information redacted by the USI				Noleen Elliott
	06/01/2011	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	07/01/2011	Treatment Room	Outpatients - (general opd area including waiting lists and nursing staff)					Noleen Elliott
	07/01/2011	3 South	General Surgery					Noleen Elliott
	07/01/2011	4 South	General Surgery					Noleen Elliott
	10/01/2011	Fracture Clinic	Trauma and Orthopaedics					Noleen Elliott
	10/01/2011	Female Surgical/Gynae	General Surgery					Noleen Elliott
	11/01/2011	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	11/01/2011	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	11/01/2011	1 Surgical	General Surgery					Noleen Elliott
	11/01/2011	Fracture Clinic	Trauma and Orthopaedics					Noleen Elliott
	11/01/2011	1 Surgical	General Surgery					Noleen Elliott
	11/01/2011	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	11/01/2011	1 Surgical	General Surgery					Noleen Elliott
	12/01/2011	3 South	General Surgery					Noleen Elliott
	12/01/2011	4 South	General Surgery					Noleen Elliott
	13/01/2011	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	13/01/2011	1 Surgical	General Surgery					Noleen Elliott
	13/01/2011	Male Surgical/HDU	General Surgery					Noleen Elliott
	14/01/2011	1 Surgical	General Surgery					Noleen Elliott
	14/01/2011	1 Surgical	General Surgery					Noleen Elliott
	15/01/2011	3 South	Urology and ENT					Esme Brown
	16/01/2011	Male Surgical/HDU	General Surgery					Noleen Elliott
	19/01/2011	Reception/Waiting Area	Outpatients - (general opd area including waiting lists and nursing staff)					Esme Brown



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/01/2011	3 South	Urology and ENT	Irrelevant information redacted by the USI				Pamela Truesdale
	21/01/2011	4 South	General Surgery					Mrs Jackie Martin
	23/01/2011	4 South	General Surgery					Esme Brown
	24/01/2011	1 Surgical	General Surgery					Mrs Jackie Martin
	24/01/2011	4 South	General Surgery					Mrs Jackie Martin
	25/01/2011	3 South	Urology and ENT					Mrs Jackie Martin
	25/01/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	26/01/2011	4 North	General Surgery					Pamela Truesdale
	26/01/2011	4 South	General Surgery					Esme Brown
	26/01/2011	4 South	General Surgery					Mrs Jackie Martin
	27/01/2011	4 South	General Surgery					Mrs Jackie Martin
	27/01/2011	Male Surgical/HDU	General Surgery					Mrs Jackie Martin
	27/01/2011	Male Surgical/HDU	General Surgery					Esme Brown
	27/01/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	27/01/2011	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	28/01/2011	4 South	General Surgery					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	28/01/2011	3 South	Urology and ENT	Irrelevant information redacted by the USI				Mrs Jackie Martin
	31/01/2011	Male Surgical/HDU	General Surgery					Pamela Truesdale
	01/02/2011	Male Surgical/HDU	General Surgery					Noleen Elliott
	01/02/2011	Female Surgical/Gynae	General Surgery					Noleen Elliott
	01/02/2011	4 North	General Surgery					Noleen Elliott
	02/02/2011	4 South	General Surgery			Venflon removed immediately when patient complained however there is no record of monitoring same in nursing notes.		Noleen Elliott
	02/02/2011	4 South	General Surgery					Noleen Elliott
	04/02/2011	Urology Clinic	Urology Surgery					Martina Corrigan
	04/02/2011	Female Surgical/Gynae	General Surgery					Noleen Elliott
	04/02/2011	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	05/02/2011	Orthopaedic Ward	Trauma and Orthopaedics					Noleen Elliott
	06/02/2011	3 South	General Surgery					Noleen Elliott
	07/02/2011	3 South	Urology and ENT					Noleen Elliott
	07/02/2011	X-ray Dept (Radiology)	Trauma and Orthopaedics					Noleen Elliott
	08/02/2011	3 South	General Surgery					Noleen Elliott
	09/02/2011	Female Surgical/Gynae	General Surgery					Noleen Elliott

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	09/02/2011	Female Surgical/Gynae	General Surgery	Irrelevant information redacted by the USI				Noleen Elliott
	10/02/2011	Fracture Clinic	Trauma and Orthopaedics					Noleen Elliott
	11/02/2011	3 South	Urology and ENT					Noleen Elliott
	11/02/2011	4 South	General Surgery					Pamela Truesdale
	12/02/2011	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	13/02/2011	Female Surgical/Gynae	General Surgery					Noleen Elliott
	14/02/2011	3 South	General Surgery					Esme Brown
	14/02/2011	Theatre	General Surgery					Esme Brown
	15/02/2011	Female Surgical/Gynae	General Surgery					Pamela Truesdale
	15/02/2011	4 North	General Surgery					Pamela Truesdale
	16/02/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	16/02/2011	Treatment Room	Outpatients - (general opd area including waiting lists and nursing staff)					Esme Brown
	17/02/2011	Fracture Clinic	Trauma and Orthopaedics				09/06/2011	Noleen Elliott
	17/02/2011	4 South	General Surgery					Noleen Elliott
	18/02/2011	Surgical Assement Unit	General Surgery					Noleen Elliott
	18/02/2011	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	19/02/2011	3 South	Urology and ENT					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/02/2011	Orthopaedic Ward	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Esme Brown
	20/02/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	21/02/2011	Fracture Clinic	General Surgery					Mrs Jackie Martin
	21/02/2011	ENT Clinic	Urology and ENT					Esme Brown
	21/02/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	22/02/2011	3 South	General Surgery					Esme Brown
	25/02/2011	Orthopaedic Ward	Trauma and Orthopaedics					Pamela Truesdale
	25/02/2011	4 South	General Surgery					Pamela Truesdale
	25/02/2011	Orthopaedic Ward	Trauma and Orthopaedics					Pamela Truesdale
	26/02/2011	3 South	Urology and ENT					Mrs Jackie Martin
	27/02/2011	Trauma Ward	Trauma and Orthopaedics					Noleen Elliott
	27/02/2011	4 North	General Surgery					Noleen Elliott
	02/03/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	02/03/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	05/03/2011	4 South	General Surgery					Esme Brown
	06/03/2011	3 South	General Surgery					Esme Brown
	07/03/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	07/03/2011	ENT Clinic	Urology and ENT					Esme Brown
	07/03/2011	4 South	General Surgery					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	08/03/2011	Orthopaedic Ward	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Mrs Jackie Martin
	09/03/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	10/03/2011	Entrance/Exit	General Surgery					Mrs Jackie Martin
	10/03/2011	4 South	General Surgery					Mrs Jackie Martin
	10/03/2011	Fracture Clinic	Trauma and Orthopaedics					Esme Brown
	10/03/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	10/03/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	11/03/2011	4 South	General Surgery					Mrs Jackie Martin
	11/03/2011	Male Surgical/HDU	General Surgery					Esme Brown
	12/03/2011	3 South	Urology and ENT					Esme Brown
	12/03/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	13/03/2011	3 South	General Surgery					Mrs Jackie Martin
	14/03/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	14/03/2011	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	14/03/2011	Fracture Clinic	Trauma and Orthopaedics					Mrs Jackie Martin
	15/03/2011	4 North	General Surgery					Mrs Jackie Martin
	15/03/2011	General Surgery Clinic	General Surgery				09/06/2011	Mrs Jackie Martin
	15/03/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	16/03/2011	1 West Gynae	General Surgery					Esme Brown
	16/03/2011	Female Surgical/Gynae	General Surgery					Pamela Truesdale
	16/03/2011	4 North	General Surgery					Mrs Jackie Martin
	16/03/2011	4 North	General Surgery					Mrs Jackie Martin
	17/03/2011	Male Surgical/HDU	General Surgery					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	18/03/2011	Trauma Ward	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Mrs Jackie Martin
	19/03/2011	Female Surgical/Gynae	General Surgery			Irrelevant information redacted by the USI Irrelevant information redacted by the USI Irrelevant information redacted by the USI Irrelevant information redacted by the USI No evidence of transmission while in hospital. Most likely antibiotic use PPI and existing bowel pathology put patient at risk. NOTE compliance with isolation, sampling, communication to patient and relatives.		Esme Brown
	19/03/2011	4 North	General Surgery					Esme Brown
	19/03/2011	3 South	Urology and ENT					Mrs Jackie Martin
	21/03/2011	3 South	Urology and ENT					Mrs Jackie Martin
	22/03/2011	4 North	General Surgery					Mrs Jackie Martin
	22/03/2011	4 North	General Surgery					Mrs Jackie Martin
	25/03/2011	4 North	General Surgery					Mrs Jackie Martin
	25/03/2011	Fracture Clinic	Trauma and Orthopaedics					Esme Brown
	25/03/2011	Orthopaedic Ward	Trauma and Orthopaedics					Pamela Truesdale
	25/03/2011	4 North	General Surgery					Mrs Jackie Martin
	26/03/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	26/03/2011	4 South	General Surgery					Mrs Jackie Martin
	28/03/2011	Male Surgical/HDU	General Surgery					Mrs Jackie Martin
	28/03/2011	Fracture Clinic	Trauma and Orthopaedics					Pamela Truesdale
	29/03/2011	4 North	General Surgery					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	29/03/2011	Trauma Ward	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Mrs Jackie Martin
	29/03/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	30/03/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	30/03/2011	4 South	General Surgery					Pamela Truesdale
	31/03/2011	4 North	General Surgery					Pamela Truesdale
	31/03/2011	1 Surgical	General Surgery					Pamela Truesdale
	31/03/2011	ENT Clinic	Urology and ENT					Esme Brown
	31/03/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	31/03/2011	4 North	General Surgery					Mrs Jackie Martin
	31/03/2011	1 Surgical	General Surgery					Pamela Truesdale
	01/04/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	01/04/2011	Orthopaedic Ward	Trauma and Orthopaedics					Pamela Truesdale
	01/04/2011		Outpatients - (general opd area including waiting lists and nursing staff)					Pamela Truesdale
	02/04/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	03/04/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	04/04/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	04/04/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	05/04/2011	College of Nursing/ST Headquarters	Outpatients - (general opd area including waiting lists and nursing staff)					Esme Brown
	05/04/2011	ENT Clinic	Urology and ENT					Esme Brown
	05/04/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	06/04/2011	Male Surgical/HDU	General Surgery	Irrelevant information redacted by the USI		Irrelevant information redacted by the USI		Mrs Jackie Martin
	06/04/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	07/04/2011	Ashleigh House, Longstone Site	General Surgery					Mrs Jackie Martin
	08/04/2011	ENT Clinic	Urology and ENT					Mrs Jackie Martin
	09/04/2011	4 North	General Surgery					Mrs Jackie Martin
	09/04/2011	4 North	General Surgery					Pamela Truesdale
	10/04/2011	4 South	General Surgery					Esme Brown
	11/04/2011	4 North	General Surgery					Mrs Jackie Martin
	12/04/2011	Trauma Ward	Trauma and Orthopaedics					Pamela Truesdale
	12/04/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	12/04/2011	Male Surgical/HDU	General Surgery					Mrs Jackie Martin
	13/04/2011	Female Surgical/Gynae	General Surgery					Pamela Truesdale
	13/04/2011	4 South	General Surgery					Mrs Jackie Martin
	13/04/2011	4 North	General Surgery					Mrs Jackie Martin
	14/04/2011	4 South	General Surgery					Mrs Jackie Martin



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	15/04/2011	3 South	General Surgery	Irrelevant information redacted by the USI				Mrs Jackie Martin
	17/04/2011	Male Surgical/HDU	General Surgery					Esme Brown
	18/04/2011	Trauma/Orthopaedic Theatre	Trauma and Orthopaedics					Esme Brown
	19/04/2011	4 South	General Surgery					Esme Brown
	19/04/2011	3 South	Urology and ENT					Esme Brown
	19/04/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	20/04/2011	Urology Clinic	Urology and ENT					Mrs Jackie Martin
	20/04/2011	Male Surgical/HDU	General Surgery					Mrs Jackie Martin
	20/04/2011	Male Surgical/HDU	General Surgery					Esme Brown
	20/04/2011	4 North	General Surgery					Pamela Truesdale
	21/04/2011	4 South	General Surgery					Mrs Jackie Martin
	24/04/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	25/04/2011	3 South	Urology and ENT					Mrs Jackie Martin
	26/04/2011	Male Surgical/HDU	General Surgery					Mrs Jackie Martin
	26/04/2011	4 North	General Surgery					Esme Brown
	27/04/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	03/05/2011	Treatment Room	Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin
	03/05/2011	4 North	General Surgery					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	05/05/2011	4 South	General Surgery	Irrelevant information redacted by the USI				Pamela Truesdale
	06/05/2011	Urology Clinic	Urology and ENT					Pamela Truesdale
	06/05/2011	4 North	General Surgery					Pamela Truesdale
	06/05/2011	4 North	General Surgery					Pamela Truesdale
	08/05/2011	3 South	Urology and ENT			Irrelevant information redacted by the USI		Mrs Jackie Martin
	08/05/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	09/05/2011	3 South	Urology and ENT					Mrs Jackie Martin
	09/05/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	09/05/2011	3 South	Urology and ENT					Mrs Jackie Martin
	09/05/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	10/05/2011	4 North	General Surgery					Mrs Jackie Martin
	10/05/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	10/05/2011	4 North	General Surgery					Mrs Jackie Martin
	11/05/2011	3 South	Urology and ENT			Irrelevant information redacted by the USI		Mrs Jackie Martin
	12/05/2011	4 South	General Surgery					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/05/2011	Treatment Room	Outpatients - (general opd area including waiting lists and nursing staff)	Irrelevant information redacted by the USI				Mrs Jackie Martin
	13/05/2011	3 South	Urology and ENT					Esme Brown
	13/05/2011	Male Surgical/HDU	General Surgery					Mrs Jackie Martin
	13/05/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	14/05/2011	4 North	General Surgery					Mrs Jackie Martin
	14/05/2011	3 South	General Surgery					Mrs Jackie Martin
	16/05/2011	Outpatients Reception/Waiting Area	Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin
	16/05/2011	4 North	General Surgery					Mrs Jackie Martin
	16/05/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	17/05/2011	Fracture Clinic	Trauma and Orthopaedics					Mrs Jackie Martin
	17/05/2011	4 North	General Surgery					Mrs Jackie Martin
	17/05/2011	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	18/05/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	18/05/2011	4 South	General Surgery					Esme Brown
	19/05/2011	4 South	General Surgery					Pamela Truesdale
	19/05/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	19/05/2011	Orthopaedic Ward	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Mrs Jackie Martin
	20/05/2011	4 South	General Surgery					Mrs Jackie Martin
	20/05/2011	4 North	General Surgery					Esme Brown
	20/05/2011	4 North	General Surgery					Esme Brown
	21/05/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	21/05/2011	4 North	General Surgery					Mrs Jackie Martin
	21/05/2011	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	23/05/2011	4 South	General Surgery					Mrs Jackie Martin
	23/05/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	24/05/2011	3 South	General Surgery					Mrs Jackie Martin
	24/05/2011	4 North	General Surgery					Mrs Jackie Martin
	25/05/2011	4 South	General Surgery					Pamela Truesdale
	25/05/2011	Female Surgical/Gynae	General Surgery			Irrelevant information redacted by the USI		Mrs Jackie Martin
	25/05/2011	3 South	General Surgery					Mrs Jackie Martin
	25/05/2011	4 South	General Surgery					Mrs Jackie Martin
	25/05/2011	3 South	General Surgery					Mrs Jackie Martin
	25/05/2011	4 North	General Surgery					Mrs Jackie Martin
	26/05/2011	1 Surgical	General Surgery					Esme Brown
	26/05/2011	Male Surgical/HDU	General Surgery					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	26/05/2011	4 South	General Surgery	Irrelevant information redacted by the USI				Mrs Jackie Martin
	27/05/2011	Delivery Suite, DHH	Anaesthetics				29/12/2011	Dr Katharine Loane
	27/05/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	27/05/2011	3 South	Urology and ENT					Mrs Jackie Martin
	27/05/2011	3 South	General Surgery					Mrs Jackie Martin
	27/05/2011	4 South	General Surgery					Pamela Truesdale
	28/05/2011	4 South	General Surgery					Pamela Truesdale
	30/05/2011	Fracture Clinic	Outpatients				22/05/2012	GH
	31/05/2011	4 South	General Surgery					Mrs Jackie Martin
	31/05/2011	4 South	General Surgery					Mrs Jackie Martin
	31/05/2011	4 South	General Surgery					Mrs Jackie Martin
	31/05/2011	4 North	General Surgery					Esme Brown
	31/05/2011	4 North	General Surgery					Mrs Jackie Martin
	01/06/2011	4 North	General Surgery					Mrs Jackie Martin
	02/06/2011	4 South	General Surgery					Mrs Jackie Martin
	02/06/2011	4 South	General Surgery					Mrs Jackie Martin
	02/06/2011	Emergency Dental Clinic	General Surgery					Mrs Jackie Martin
	03/06/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	03/06/2011	Surgical Assement Unit	General Surgery					Mrs Jackie Martin
	03/06/2011	4 North	General Surgery					Mrs Jackie Martin
	04/06/2011	4 North	General Surgery					Mrs Jackie Martin
	05/06/2011	4 North	General Surgery					Mrs Jackie Martin
	05/06/2011	4 North	General Surgery					Mrs Jackie Martin
	06/06/2011	4 North	General Surgery					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	06/06/2011	3 South	Urology and ENT	Irrelevant information redacted by the USI				
	06/06/2011	4 South	General Surgery					
	06/06/2011	4 South	General Surgery					
	06/06/2011	4 North	General Surgery					
	07/06/2011	1 Surgical	General Surgery					
	07/06/2011	Trauma Ward	Trauma and Orthopaedics					
	07/06/2011	1 Surgical	General Surgery					
	08/06/2011	4 North	General Surgery					
	09/06/2011	4 South	General Surgery					
	09/06/2011	4 North	General Surgery					
	10/06/2011	4 North	General Surgery					
	10/06/2011	1 Surgical	General Surgery					
	10/06/2011	4 North	General Surgery					
	10/06/2011	4 North	General Surgery					
	10/06/2011	4 North	General Surgery					
	10/06/2011	4 North	General Surgery					
	10/06/2011	4 North	General Surgery					
	11/06/2011	4 North	General Surgery					
	12/06/2011	Trauma Ward	Trauma and Orthopaedics					
	12/06/2011	4 North	General Surgery					
	13/06/2011	Female Surgical/Gynae	General Surgery					
	13/06/2011	4 South	General Surgery					
	13/06/2011	1 Surgical	General Surgery					
	14/06/2011	ENT Clinic	Urology and ENT					

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/06/2011	Outpatients Reception/Waiting Area	Outpatients - (general opd area including waiting lists and nursing staff)	Irrelevant information redacted by the USI				Mrs Jackie Martin
	14/06/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	14/06/2011	4 North	General Surgery					Esme Brown
	14/06/2011	4 North	General Surgery					Esme Brown
	14/06/2011	4 North	General Surgery					Esme Brown
	15/06/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	15/06/2011	3 South	Urology and ENT					Pamela Truesdale
	16/06/2011	4 North	General Surgery					Pamela Truesdale
	16/06/2011	1 Surgical	General Surgery					Esme Brown
	16/06/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	16/06/2011	4 South	General Surgery					Mrs Jackie Martin
	16/06/2011	4 South	General Surgery					Esme Brown
	19/06/2011	4 South	General Surgery					Mrs Jackie Martin
	19/06/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	20/06/2011	3 South	General Surgery					Mrs Jackie Martin
	21/06/2011	1 Surgical	General Surgery					Esme Brown
	22/06/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	23/06/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	23/06/2011	3 South	Urology and ENT					Mrs Jackie Martin
	24/06/2011	4 North	General Surgery					Mrs Jackie Martin
	24/06/2011	4 North	General Surgery					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	24/06/2011	3 South	Urology and ENT	Irrelevant information redacted by the USI				Mrs Jackie Martin
	24/06/2011	4 North	General Surgery					Mrs Jackie Martin
	25/06/2011	4 North	General Surgery					Esme Brown
	25/06/2011	3 South	Urology and ENT					Esme Brown
	25/06/2011	4 North	General Surgery					Mrs Jackie Martin
	25/06/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	26/06/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	27/06/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	27/06/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	27/06/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	27/06/2011	4 North	General Surgery					Pamela Truesdale
	28/06/2011	Audiology Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Esme Brown
	28/06/2011	Male Surgical/HDU	General Surgery					Esme Brown
	28/06/2011	ENT Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin
	28/06/2011	1 Surgical	General Surgery					Esme Brown
	28/06/2011	Male Surgical/HDU	General Surgery					Pamela Truesdale
	29/06/2011	4 North	General Surgery					Esme Brown
	29/06/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	29/06/2011	4 North	General Surgery					Esme Brown



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	29/06/2011	ENT Clinic	Outpatients - (general opd area including waiting lists and nursing staff)	Irrelevant information redacted by the USI				Mrs Jackie Martin
	29/06/2011	3 South	General Surgery					Pamela Truesdale
	29/06/2011	4 North	General Surgery					Esme Brown
	30/06/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	01/07/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	01/07/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	03/07/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	04/07/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	04/07/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	04/07/2011	4 South	General Surgery					Esme Brown
	04/07/2011		Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin
	05/07/2011	Outpatients Reception/Waiting Area	Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin
	05/07/2011	ENT Clinic	Urology and ENT					Esme Brown
	06/07/2011	1 Surgical	General Surgery					Mrs Jackie Martin
	06/07/2011	Orthopaedic Ward	Trauma and Orthopaedics					Pamela Truesdale
	06/07/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	06/07/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	06/07/2011	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	07/07/2011	3 South	General Surgery					Mrs Jackie Martin
	07/07/2011	Outpatients Reception/Waiting Area	Outpatients - (general opd area including waiting lists and nursing staff)					Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/07/2011	4 North	General Surgery	Irrelevant information redacted by the USI				Mrs Jackie Martin
	07/07/2011	1 Surgical	General Surgery					Pamela Truesdale
	07/07/2011	Fracture Clinic	Trauma and Orthopaedics					Mrs Jackie Martin
	07/07/2011	Fracture Clinic	Trauma and Orthopaedics					Mrs Jackie Martin
	08/07/2011	4 North	General Surgery					Pamela Truesdale
	08/07/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	09/07/2011	4 North	General Surgery					Pamela Truesdale
	11/07/2011	4 North	General Surgery					Mrs Jackie Martin
	11/07/2011	1 Surgical	General Surgery					Mrs Jackie Martin
	12/07/2011	Female Surgical/Gynae	General Surgery					Pamela Truesdale
	12/07/2011	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	12/07/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	13/07/2011	4 North	General Surgery					Pamela Truesdale
	13/07/2011	1 Surgical	General Surgery					Mrs Jackie Martin
	13/07/2011	1 Surgical	General Surgery					Mrs Jackie Martin
	13/07/2011	3 South	General Surgery					Mrs Jackie Martin
	14/07/2011	1 Surgical	General Surgery					Esme Brown
	14/07/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	14/07/2011	1 Surgical	General Surgery					Esme Brown
	14/07/2011	Fracture Clinic	Trauma and Orthopaedics					Esme Brown
	15/07/2011	4 North	General Surgery					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	15/07/2011	Fracture Clinic	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Esme Brown
	15/07/2011	4 North	General Surgery					Esme Brown
	15/07/2011	3 South	Urology and ENT					Esme Brown
	15/07/2011	4 North	General Surgery					Pamela Truesdale
	15/07/2011	4 South	General Surgery					Esme Brown
	16/07/2011	4 North	General Surgery					Esme Brown
	17/07/2011	4 South	General Surgery					Mrs Jackie Martin
	18/07/2011	General Male Medical, Level 5	General Surgery					Mrs Jackie Martin
	18/07/2011	3 South	Pharmacy					Mrs Jackie Martin
	19/07/2011	Fracture Clinic	Trauma and Orthopaedics					Mrs Jackie Martin
	19/07/2011	1 Surgical	General Surgery					Pamela Truesdale
	19/07/2011	1 Surgical	General Surgery					Pamela Truesdale
	19/07/2011	1 Surgical	General Surgery					Pamela Truesdale
	19/07/2011	Fracture Clinic	Trauma and Orthopaedics					Mrs Jackie Martin
	19/07/2011	3 South	Urology and ENT					Esme Brown
	19/07/2011	1 Surgical	General Surgery					Pamela Truesdale
	19/07/2011	1 Surgical	General Surgery					Pamela Truesdale
	20/07/2011	1 Surgical	General Surgery					Pamela Truesdale
	20/07/2011	3 South	Urology and ENT					Esme Brown
	20/07/2011	4 North	General Surgery					Pamela Truesdale
	20/07/2011	1 Surgical	General Surgery					Pamela Truesdale
	20/07/2011	1 Surgical	General Surgery					Pamela Truesdale
	21/07/2011	Fracture Clinic	Trauma and Orthopaedics					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	21/07/2011	ENT Clinic	Urology and ENT	Irrelevant information redacted by the USI				Esme Brown
	21/07/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	21/07/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	21/07/2011	Emergency Dental Clinic	Orthodontics					Esme Brown
	22/07/2011	4 North	General Surgery					Pamela Truesdale
	24/07/2011	4 North	General Surgery					Mrs Jackie Martin
	24/07/2011	4 North	General Surgery					Pamela Truesdale
	26/07/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	26/07/2011	4 North	General Surgery					Esme Brown
	27/07/2011	ENT Clinic	Urology and ENT					Esme Brown
	27/07/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	27/07/2011	3 South	Urology and ENT					Esme Brown
	27/07/2011	4 South	General Surgery					Mrs Jackie Martin
	28/07/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	28/07/2011		Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin
	30/07/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	01/08/2011	Fracture Clinic	Trauma and Orthopaedics					Esme Brown
	01/08/2011	Fracture Clinic	Trauma and Orthopaedics					Esme Brown
	01/08/2011	Fracture Clinic	Trauma and Orthopaedics					Esme Brown
	02/08/2011	Male Surgical/HDU	General Surgery					Esme Brown
	02/08/2011	Fracture Clinic	Trauma and Orthopaedics					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/08/2011	Orthopaedic Ward	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Esme Brown
	03/08/2011		Outpatients - (general opd area including waiting lists and nursing staff)				18/11/2011	Mrs Jackie Martin
	03/08/2011	Ophamology Clinic	General Surgery					Mrs Jackie Martin
	03/08/2011	4 South	General Surgery					Esme Brown
	03/08/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	03/08/2011	3 South	Urology and ENT					Esme Brown
	03/08/2011	4 North	General Surgery					Esme Brown
	04/08/2011	Male Surgical/HDU	General Surgery					Esme Brown
	06/08/2011	4 South	General Surgery					Pamela Truesdale
	08/08/2011	4 South	General Surgery				18/11/2011	Mrs Jackie Martin
	08/08/2011	4 South	General Surgery					Esme Brown
	08/08/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	08/08/2011	4 South	General Surgery					Esme Brown
	09/08/2011	4 North	General Surgery					Esme Brown
	09/08/2011	3 South	Urology and ENT					Esme Brown
	10/08/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	11/08/2011	4 South	General Surgery					Esme Brown
	11/08/2011	4 South	General Surgery				18/11/2011	Mrs Jackie Martin
	11/08/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	12/08/2011	4 South	General Surgery					Esme Brown
	13/08/2011	4 South	General Surgery					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	13/08/2011	3 South	Urology and ENT	Irrelevant information redacted by the USI				Mrs Jackie Martin
	13/08/2011	4 North	General Surgery					Esme Brown
	13/08/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	16/08/2011	Admin Floor/Offices	Medical Secs/Ward Clerks General Surgery					Esme Brown
	17/08/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	17/08/2011	General Surgery Clinic	General Surgery					Esme Brown
	17/08/2011	Trauma Ward	Trauma and Orthopaedics				18/11/2011	Esme Brown
	18/08/2011	Treatment Room	Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin
	18/08/2011	ENT Clinic	Urology and ENT					Esme Brown
	18/08/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown
	19/08/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	20/08/2011	4 North	General Surgery					Esme Brown
	21/08/2011	3 South	Urology and ENT					Esme Brown
	21/08/2011	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	22/08/2011	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	23/08/2011	ENT Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Pamela Truesdale
	23/08/2011	3 South	Urology and ENT					Esme Brown
	23/08/2011	Trauma Ward	Trauma and Orthopaedics					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler	
Irrelevant information redacted by the USI	23/08/2011	3 South	Urology and ENT	Irrelevant information redacted by the USI					Esme Brown
	25/08/2011	3 South	Urology and ENT						Esme Brown
	26/08/2011	3 South	Urology and ENT						Esme Brown
	28/08/2011	Trauma Ward	Trauma and Orthopaedics						Mrs Jackie Martin
	29/08/2011	Trauma Ward	Trauma and Orthopaedics						Mrs Jackie Martin
	30/08/2011	3 South	Urology and ENT						Mrs Jackie Martin
	31/08/2011	Theatres 1-4 CAH	ENT Surey				s above	15/09/2014	Connie Connolly
	31/08/2011	Orthopaedic Ward	Trauma and Orthopaedics						Esme Brown
	31/08/2011	Fracture Clinic	Trauma and Orthopaedics						Esme Brown
	31/08/2011	3 South	Urology and ENT						Esme Brown
	01/09/2011	ENT Clinic	Outpatients - (general opd area including waiting lists and nursing staff)						Pamela Truesdale
	01/09/2011	4 North	General Surgery						Esme Brown
	02/09/2011	3 South	Urology and ENT						Pamela Truesdale
	02/09/2011	Female Surgical/Gynae	General Surgery						Esme Brown
	02/09/2011	3 South	Urology and ENT						Pamela Truesdale
	04/09/2011	Orthopaedic Ward	Trauma and Orthopaedics						Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	05/09/2011	Orthopaedic Ward	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Mrs Jackie Martin
	06/09/2011	1 Surgical	General Surgery					Esme Brown
	06/09/2011	4 North	General Surgery					Esme Brown
	06/09/2011	3 South	Urology and ENT					Pamela Truesdale
	07/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	08/09/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	08/09/2011	General Surgery Clinic	General Surgery					Esme Brown
	09/09/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	09/09/2011	4 North	General Surgery					Esme Brown
	09/09/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	10/09/2011	4 North	General Surgery					Esme Brown
	11/09/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	12/09/2011	3 South	Urology and ENT					Pamela Truesdale
	12/09/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	13/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	13/09/2011	3 South	General Surgery					Mrs Jackie Martin
	13/09/2011	Fracture Clinic	Trauma and Orthopaedics					Esme Brown
	14/09/2011	3 South	Urology and ENT					Pamela Truesdale
	14/09/2011	4 South	General Surgery					Esme Brown
	14/09/2011	4 South	General Surgery					Esme Brown



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/09/2011	4 South	General Surgery	Irrelevant information redacted by the USI				Esme Brown
	15/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	15/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	15/09/2011	3 South	Urology and ENT					Mrs Jackie Martin
	15/09/2011	Sterile Services Dept	General Surgery					Pamela Truesdale
	17/09/2011	4 South	General Surgery					Esme Brown
	17/09/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	18/09/2011	4 South	General Surgery					Esme Brown
	18/09/2011	4 South	General Surgery					Esme Brown
	19/09/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	19/09/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	19/09/2011	Female Surgical/Gynae	General Surgery					Esme Brown
	20/09/2011	4 North	General Surgery					Esme Brown
	20/09/2011	3 South	Urology and ENT					Pamela Truesdale
	20/09/2011	Opthamology Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Pamela Truesdale
	20/09/2011	3 South	Urology and ENT					Pamela Truesdale
	21/09/2011	4 South	General Surgery					Esme Brown
	22/09/2011	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	22/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/09/2011	Trauma Ward	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Mrs Jackie Martin
	23/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	23/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	23/09/2011	4 North	General Surgery					Esme Brown
	24/09/2011	4 South	General Surgery					Mrs Jackie Martin
	26/09/2011	4 South	General Surgery					Esme Brown
	27/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	27/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	27/09/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	27/09/2011	Recovery Unit	General Surgery					Esme Brown
	27/09/2011	Sterile Services Dept	Outpatients - (general opd area including waiting lists and nursing staff)					Pamela Truesdale
	28/09/2011	Ophthamology Clinic	Ophthalmology					Mrs Jackie Martin
	29/09/2011	ICU CAH	ICU				01/12/2011	Brigeen Kelly
	29/09/2011	Day Surgery Unit CAH	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	29/09/2011	Day Surgery Unit CAH	Day Procedure/Surgery					Brigeen Kelly
	29/09/2011	3 South	Urology and ENT					Pamela Truesdale
	30/09/2011	3 South	Urology and ENT					Pamela Truesdale
	30/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	30/09/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	01/10/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	01/10/2011	4 North	General Surgery					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler	
Irrelevant information redacted by the USI	02/10/2011	Male Surgical/HDU	General Surgery	Irrelevant information redacted by the USI					Esme Brown
	02/10/2011	Male Surgical/HDU	General Surgery						Esme Brown
	02/10/2011	4 South	General Surgery						Esme Brown
	02/10/2011	4 North	General Surgery						Esme Brown
	03/10/2011		General Surgery						Mrs Jackie Martin
	04/10/2011	Theatres 1-4 CAH	Theatres				heatre admission process to be followed.	06/02/2012	Brigeen Kelly
	04/10/2011	Orthopaedic Ward	Trauma and Orthopaedics						Esme Brown
	04/10/2011	1 Surgical	General Surgery						Mrs Jackie Martin
	05/10/2011	Theatres 1-4 CAH	Theatres					06/02/2012	Brigeen Kelly
	05/10/2011	ICU CAH	ICU					01/12/2011	Brigeen Kelly
	05/10/2011	Theatres/DPU STH	Day Procedure/Surgery					06/02/2012	Brigeen Kelly
	05/10/2011	Theatres 1-4 CAH	Theatres				s noted	06/07/2012	Brigeen Kelly
	05/10/2011	1 Surgical	Medical Secs/Ward Clerks General Surgery						Mrs Jackie Martin
	05/10/2011	4 South	General Surgery						Esme Brown
	05/10/2011	Trauma Ward	Trauma and Orthopaedics						Mrs Jackie Martin
	05/10/2011	Orthopaedic Ward	Trauma and Orthopaedics						Mrs Jackie Martin
	06/10/2011	4 South	General Surgery						Esme Brown
	06/10/2011								Mrs Jackie Martin
	07/10/2011	Theatres 1-4 CAH	Theatres						Brigeen Kelly
	07/10/2011	ICU CAH	ICU				his was a doctor error. Consultants informed, junior doctor informed and advised not to sign a drug prescription chart without checking the printed drugs. Dr. Ferguson looks after the electronic drug prescription info in the unit. This same incident happened twice. BK /12/11	06/02/2012	Brigeen Kelly
	07/10/2011	Theatres 5-8 CAH	T&O Theatres					06/02/2012	Brigeen Kelly
	07/10/2011	Day Surgery Unit CAH	Day Procedure/Surgery					06/02/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/10/2011	Theatres DHH	Theatres	Irrelevant information redacted by the USI			05/12/2011	Brigeen Kelly
	07/10/2011	Day Surgery Unit CAH	Day Procedure/Surgery				05/12/2011	Brigeen Kelly
	07/10/2011	4 North	General Surgery					Mrs Jackie Martin
	07/10/2011	Pre-operative Assessment Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Esme Brown
	10/10/2011	ICU CAH	ICU			entral Lines on Patients in DHH need to be secured prior to transfer of the patient to AH	05/12/2011	Brigeen Kelly
	10/10/2011	Recovery CAH	Recovery Unit				05/12/2011	Brigeen Kelly
	10/10/2011	Theatres 1-4 CAH	Theatres				06/02/2012	Brigeen Kelly
	10/10/2011	Male Surgical/HDU	General Surgery					Pamela Truesdale
	10/10/2011	Male Surgical/HDU	General Surgery					Esme Brown
	10/10/2011	Fracture Clinic	Trauma and Orthopaedics					Mrs Jackie Martin
	11/10/2011	Orthopaedic Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	11/10/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	11/10/2011	Fracture Clinic	Trauma and Orthopaedics					Mrs Jackie Martin
	12/10/2011	ICU CAH	ICU				01/03/2012	Brigeen Kelly
	12/10/2011	ICU CAH	ICU				06/02/2012	Brigeen Kelly
	12/10/2011	ICU CAH	ICU				06/02/2012	Brigeen Kelly
	12/10/2011	ICU CAH	ICU				06/02/2012	Brigeen Kelly
	12/10/2011	3 South	General Surgery					Esme Brown
	12/10/2011	4 North	General Surgery					Esme Brown
	12/10/2011	Trauma Ward	Trauma and Orthopaedics					Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/10/2011	Trauma Ward	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Mrs Jackie Martin
	12/10/2011	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	13/10/2011	ICU CAH	ICU				06/02/2012	Brigeen Kelly
	13/10/2011	Theatres DHH	Theatres				06/02/2012	Brigeen Kelly
	13/10/2011	4 South	General Surgery					Esme Brown
	13/10/2011	4 South	General Surgery					Esme Brown
	13/10/2011	4 North	General Surgery					Esme Brown
	13/10/2011	4 North	General Surgery					Esme Brown
	13/10/2011	Male Surgical/HDU	General Surgery					Pamela Truesdale
	13/10/2011	3 South	Urology and ENT					Pamela Truesdale
	13/10/2011	3 South	Urology and ENT					Pamela Truesdale
	13/10/2011	3 South	Urology and ENT					Pamela Truesdale
	13/10/2011	4 South	General Surgery					Esme Brown
	14/10/2011	Theatres DHH	Theatres				06/02/2012	Brigeen Kelly
	14/10/2011	Fracture Clinic	Trauma and Orthopaedics					Pamela Truesdale
	14/10/2011	4 South	General Surgery					Esme Brown
	14/10/2011	Female Medical, Level 5	General Surgery					Mrs Jackie Martin
	15/10/2011	Theatres 1-4 CAH	General Surgery				01/02/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	15/10/2011	Theatres DHH	Anaesthetics	Irrelevant information redacted by the USI			01/05/2014	Brigeen Kelly
	16/10/2011	ICU CAH	ICU				06/02/2012	Brigeen Kelly
	16/10/2011	ICU CAH	ICU				06/02/2012	Brigeen Kelly
	16/10/2011	ICU CAH	ICU				20/09/2012	Brigeen Kelly
	17/10/2011	Theatres 1-4 CAH	Theatres				06/02/2012	Brigeen Kelly
	18/10/2011	Day Surgery Unit CAH	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	18/10/2011	Theatres DHH	Theatres				06/02/2012	Brigeen Kelly
	18/10/2011	Day Surgery Unit CAH	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	18/10/2011	Day Surgery Unit CAH	Day Procedure/Surgery				05/12/2011	Brigeen Kelly
	18/10/2011	Day Surgery Unit CAH	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	19/10/2011	4 South	General Surgery					Esme Brown
	19/10/2011	1 Surgical	General Surgery					Esme Brown
	19/10/2011	Trauma Ward	Trauma and Orthopaedics					Pamela Truesdale
	19/10/2011	4 South	General Surgery					Esme Brown
	19/10/2011	1 Surgical	General Surgery					Esme Brown
	20/10/2011	Theatres 1-4 CAH	Anaesthetics				06/02/2012	Brigeen Kelly
	20/10/2011	Theatres 1-4 CAH	Theatres				06/02/2012	Brigeen Kelly
	20/10/2011	Day Surgery Unit CAH	Day Procedure/Surgery				29/12/2011	Brigeen Kelly
	20/10/2011	4 South	General Surgery					Esme Brown
	20/10/2011	1 Surgical	General Surgery					Esme Brown
	20/10/2011	3 South	General Surgery					Esme Brown

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	21/10/2011	ICU CAH	ICU	Irrelevant information redacted by the USI			06/02/2012	Brigeen Kelly
	21/10/2011	Fracture Clinic	Trauma and Orthopaedic					Mrs Jackie Martin
	21/10/2011	4 South	General Surgery					Esme Brown
	21/10/2011	1 Surgical	General Surgery					Esme Brown
	21/10/2011	1 Surgical	General Surgery					Esme Brown
	22/10/2011	4 South	General Surgery					Esme Brown
	23/10/2011	Theatres DHH	T&O Theatres				06/02/2012	Brigeen Kelly
	23/10/2011	3 South	Urology and ENT					Mrs Jackie Martin
	24/10/2011	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	24/10/2011	Recovery CAH	Recovery Unit				01/03/2012	Brigeen Kelly
	24/10/2011	General Surgery Clinic	General Surgery					Mrs Jackie Martin
	25/10/2011	Day Surgery Unit CAH	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	25/10/2011	ICU CAH	ICU				24/07/2012	Brigeen Kelly
	25/10/2011	Male Surgical	General Surgery				12/12/2011	PMK
	25/10/2011	1 Surgical	General Surgery					Esme Brown
	25/10/2011	Trauma Ward	Trauma and Orthopaedic					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	25/10/2011	3 South	Urology and ENT	Irrelevant information redacted by the USI				Mrs Jackie Martin
	25/10/2011	1 Surgical	General Surgery					Esme Brown
	25/10/2011	3 South	Urology and ENT					Mrs Jackie Martin
	26/10/2011	Male Surgical	General Surgery				21/06/2012	GH
	26/10/2011	1 Surgical	General Surgery					Esme Brown
	26/10/2011	1 Surgical	General Surgery					Esme Brown
	27/10/2011							Brigeen Kelly
	27/10/2011	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	27/10/2011	1 Surgical	General Surgery					Esme Brown
	27/10/2011	3 South	Urology and ENT					Mrs Jackie Martin
	27/10/2011	1 Surgical	General Surgery					Esme Brown
	28/10/2011	ICU CAH	ICU				06/02/2012	Brigeen Kelly
	29/10/2011	3 South	Urology and ENT					Pamela Truesdale
	30/10/2011	Theatres 1-4 CAH	Theatres				06/02/2012	Brigeen Kelly
	30/10/2011	3 South	Urology and ENT					Mrs Jackie Martin
	30/10/2011	3 South	Urology and ENT					Mrs Jackie Martin
	31/10/2011	Recovery CAH	Recovery Unit				24/07/2012	Brigeen Kelly
	31/10/2011	Theatres 1-4 CAH	Theatres				28/05/2012	Brigeen Kelly
	31/10/2011	Pre-operative Assessment Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Mrs Jackie Martin



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	01/11/2011	Day Procedure Unit DHH	Day Procedure/Surgery	Irrelevant information redacted by the USI			28/05/2012	Brigeen Kelly
	01/11/2011	ICU CAH	ICU			Check and double check the volume in the IV fluid bottles no matter how busy the ward is. Many IV fluids and drugs come in identical packaging which require exceptional vigilance and take time and it is important pharmaceutical companies are aware of these potential risks.	06/04/2012	Brigeen Kelly
	01/11/2011	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Ms Joanne McEvoy
	01/11/2011	4 South	General Surgery					Esme Brown
	02/11/2011	4 North	General Surgery					Esme Brown
	02/11/2011	3 South	Urology and ENT					Mrs Jackie Martin
	03/11/2011	Theatres/DPU STH	Day Procedure/Surgery				15/02/2012	Brigeen Kelly
	04/11/2011	Theatres/DPU STH	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	04/11/2011	Male Surgical	General Surgery					GH
	04/11/2011	Theatres DHH	Theatres					Brigeen Kelly
	06/11/2011	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	06/11/2011	4 North	General Surgery					Esme Brown
	07/11/2011	4 North	General Surgery				04/01/2012	GH
	07/11/2011	Trauma Ward	Trauma Surgery				04/01/2012	GH
	07/11/2011	Female Surgical/Gynae	General Surgery				19/12/2011	GH
	07/11/2011	Female Surgical/Gynae	General Surgery				04/01/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/11/2011	Outpatients Reception/Waiting Area	Outpatients - (general opd area including waiting lists and nursing staff)	Irrelevant information redacted by the USI				Mrs Jackie Martin
	08/11/2011	CEAW	ENT Surery				04/01/2012	GH
	08/11/2011	Theatres 1-4 CAH	Theatres				30/10/2012	Brigeen Kelly
	08/11/2011	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	08/11/2011	Theatres/DPU STH	General Surgery				11/01/2012	GH
	08/11/2011	Male Surgical	General Surgery				04/01/2012	GH
	08/11/2011	Theatres/DPU STH	Day Procedure/Surgery				20/02/2012	Brigeen Kelly
	08/11/2011	Theatres/DPU STH	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	08/11/2011	4 North	General Surgery					Pamela Truesdale
	09/11/2011	Female Surgical/Gynae	General Surgery				04/01/2012	GH
	09/11/2011	4 North	General Surgery					Pamela Truesdale
	09/11/2011	4 North	General Surgery					Esme Brown
	10/11/2011	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	10/11/2011	4 North	General Surgery					Esme Brown
	11/11/2011	Theatres/DPU STH	T&O Theatres					Brigeen Kelly
	11/11/2011	Trauma Ward	Orthopaedic Surgery				04/01/2012	GH
	11/11/2011	4 North	General Surgery				12/12/2011	GH
	11/11/2011	4 South	General Surgery					Esme Brown
	12/11/2011	Day Procedure Unit DHH	General Surgery				01/02/2012	GH
	12/11/2011	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/11/2011	4 South	General Surgery	Irrelevant information redacted by the USI				Pamela Truesdale
	13/11/2011	ICU CAH	ICU				01/03/2012	Brigeen Kelly
	14/11/2011	3 South	Urology Surgery				04/01/2012	ST
	14/11/2011	Trauma Ward	Trauma Surgery			Risks have reduced Staff awareness Had difficulty in sources buzz mats but now resolved	04/01/2012	GH
	14/11/2011	Urology Clinic	Urology and ENT					Esme Brown
	14/11/2011	4 North	General Surgery					Esme Brown
	15/11/2011	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	15/11/2011	B Floor	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	15/11/2011	Paediatric Ward	ENT Surery				27/04/2012	Dr David Grier
	15/11/2011	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	15/11/2011	B Floor	Day Procedure/Surgery					Brigeen Kelly
	15/11/2011	B Floor	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	15/11/2011	4 South	General Surgery				04/01/2012	Tracey McGuigan
	15/11/2011	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	15/11/2011	B Floor	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	15/11/2011	Treatment Room	General Surgery					Mrs Jackie Martin

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	16/11/2011	Theatres/DPU STH	General Surgery	Irrelevant information redacted by the USI			01/02/2012	GH
	16/11/2011	Theatres/DPU STH	General Surgery				01/02/2012	GH
	16/11/2011	4 South	General Surgery				12/12/2011	GH
	16/11/2011	4 South	General Surgery				12/12/2011	GH
	16/11/2011	ICU CAH	General Surgery				22/02/2012	GH
	16/11/2011	Opthamology Clinic	General Surgery					Mrs Jackie Martin
	17/11/2011	Female Surgical/Gynae	Breast Surgery				12/12/2011	GH
	17/11/2011	ICU CAH	ICU				15/05/2012	Brigeen Kelly
	17/11/2011	Orthopaedic Ward	Orthopaedic Surgery				14/12/2011	GH
	17/11/2011	3 South	Urology and ENT					Mrs Jackie Martin
	18/11/2011	3 South	Urology Surgery				01/02/2012	GH
	18/11/2011	4 South	General Surgery				14/12/2011	GH
	18/11/2011	Orthopaedic Ward	Orthopaedic Surgery				04/01/2012	GH
	18/11/2011	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	19/11/2011	4 North	General Surgery					Mrs Jackie Martin
	20/11/2011	Theatres 1-4 CAH	Anaesthetics				24/07/2012	Brigeen Kelly
	20/11/2011	4 South	General Surgery				14/12/2011	GH
	20/11/2011	ICU CAH	ICU			This incident occurred in recovery ward just prior to transfer of patient, Central line was just being inserted, had not been x-rayed. Both Anaesthetist and nurse were spoken to by consultant anaesthetist on call and myself, and also on arrival at ICU staff there also raised the issue. I will raise this issue at Meeting on Mon am to clarify to all staff. M Madine	24/07/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler			
Irrelevant information redacted by the USI	21/11/2011	Recovery Unit	Recovery Unit	Irrelevant information redacted by the USI				24/07/2012	Brigeen Kelly		
	21/11/2011	3 South	ENT Surey					14/12/2011	GH		
	21/11/2011	ENT Clinic	Urology and ENT								Mrs Jackie Martin
	22/11/2011	4 South	General Surgery							19/12/2011	GH
	22/11/2011	Trauma Ward	Trauma Surgery							14/12/2011	GH
	22/11/2011	4 South	General Surgery							14/12/2011	GH
	22/11/2011	Orthopaedic Ward	Orthopaedic Surgery							14/12/2011	GH
	22/11/2011	CEAW	General Surgery							14/12/2011	GH
	22/11/2011	3 South	Urology and ENT								Mrs Jackie Martin
	23/11/2011	Theatres DHH	Theatres							02/01/2013	Brigeen Kelly
	23/11/2011	Orthopaedic Ward	Orthopaedic Surgery							19/12/2011	GH
	23/11/2011	Fracture Clinic	Outpatients							19/12/2011	GH
	23/11/2011	4 South	General Surgery							19/12/2011	GH
	23/11/2011	Day Procedure Unit DHH	Day Procedure/Surgery							28/05/2012	Brigeen Kelly
	23/11/2011	Day Surgery Unit CAH	Day Procedure/Surgery							28/05/2012	Brigeen Kelly
	23/11/2011	4 South	Medical Secs/Ward Clerks General Surgery							19/12/2011	GH
	23/11/2011	Theatres DHH	Theatres							06/02/2012	Brigeen Kelly
	24/11/2011	ICU CAH	ICU							15/05/2012	Brigeen Kelly
	24/11/2011	4 North	Urology Surgery							19/12/2011	GH
	24/11/2011	Trauma Ward	Trauma Surgery						e importance of processes for continous checking of equipment	19/12/2011	GH
	24/11/2011	Trauma Ward	Trauma Surgery							19/12/2011	GH
	24/11/2011	4 South	General Surgery							19/12/2011	GH
	24/11/2011	4 North	General Surgery								Pamela Truesdale

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	24/11/2011	4 North	General Surgery	Irrelevant information redacted by the USI				Pamela Truesdale
	24/11/2011	4 North	General Surgery					Pamela Truesdale
	25/11/2011	Day Procedure Unit DHH	Day Procedure/Surgery					Brigeen Kelly
	25/11/2011	Orthopaedic Ward	Medical Secs/Ward Clerks Trauma and Orthopaedics				19/12/2011	GH
	25/11/2011	Recovery CAH	Anaesthetics				24/07/2012	Brigeen Kelly
	25/11/2011	Female Surgical/Gynae	General Surgery				19/12/2011	GH
	25/11/2011	Theatres/DPU STH	T&O Theatres				24/07/2012	Brigeen Kelly
	25/11/2011	4 North	General Surgery				19/12/2011	GH
	25/11/2011	ENT Clinic	Urology and ENT					Mrs Jackie Martin
	25/11/2011	General Surgery Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Pamela Truesdale
	25/11/2011	ENT Clinic	Urology and ENT					Mrs Jackie Martin
	28/11/2011	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	28/11/2011	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	28/11/2011	Theatres 5-8 CAH	T&O Theatres				21/05/2012	Brigeen Kelly
	28/11/2011	ICU CAH	ICU				15/05/2012	Brigeen Kelly
	28/11/2011	Theatres/DPU STH	Outpatients				19/12/2011	GH
	28/11/2011	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	28/11/2011	CEAW	ENT Surery				19/12/2011	GH
	28/11/2011	Theatres 5-8 CAH	Orthopaedic Surgery					GH
	28/11/2011	Theatres/DPU STH	General Surgery				19/12/2011	GH
	29/11/2011	3 South	ENT Surery				19/12/2011	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	29/11/2011	Theatres/DPU STH	Day Procedure/Surgery	Irrelevant information redacted by the USI			28/05/2012	Brigeen Kelly
	29/11/2011	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	30/11/2011	Thorndale Unit	Outpatients				01/02/2012	GH
	01/12/2011	Theatres 1-4 CAH	ENT Surery				02/02/2012	GH
	01/12/2011	Pharmacy Stores / Distribution	Urology Surgery				19/12/2011	GH
	01/12/2011	4 South	General Surgery				19/12/2011	GH
	01/12/2011	Theatres 1-4 CAH	Theatres			peciment policy revised and sent to Sr Kearney and Mrs McGeough for approval. mendments highlighted that left and right sided specimens should be place in seperate ontainers.The pathology lab was also contacted for advice and have approved mendments made to specimen policy.	24/07/2012	Brigeen Kelly
	01/12/2011	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	01/12/2011	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	01/12/2011	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	01/12/2011	CEAW	General Surgery				19/12/2011	GH
	01/12/2011	Male Surgical	General Surgery				02/02/2012	GH
	01/12/2011	ICU CAH	ICU			urther communication with all staff. ncreased vigilance in caring for insulin infusions & enteral feeds.	15/05/2012	Brigeen Kelly
	01/12/2011	ICU CAH	ICU					Brigeen Kelly
	02/12/2011	Trauma Ward	Trauma Surgery				19/12/2011	GH
	02/12/2011	ICU CAH	ICU				15/05/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/12/2011	Day Surgery Unit CAH	Day Procedure/Surgery	Irrelevant information redacted by the USI			28/05/2012	Brigeen Kelly
	04/12/2011	Female Surgical/Gynae	General Surgery				19/12/2011	GH
	05/12/2011	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	05/12/2011	Theatres/DPU STH	Day Procedure/Surgery					Brigeen Kelly
	05/12/2011	4 North	General Surgery				19/12/2011	GH
	05/12/2011	4 North	General Surgery				19/12/2011	GH
	05/12/2011	Trauma Ward	Trauma Surgery				19/12/2011	GH
	05/12/2011	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	05/12/2011	Orthopaedic Ward	Orthopaedic Surgery				19/12/2011	GH
	06/12/2011	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	06/12/2011	Theatres 1-4 CAH	Anaesthetics				24/07/2012	Brigeen Kelly
	06/12/2011	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	06/12/2011	Theatres DHH	Theatres				30/03/2012	Brigeen Kelly
	07/12/2011	4 South	General Surgery				19/12/2011	GH
	07/12/2011	4 South	General Surgery				19/12/2011	GH
	08/12/2011	Theatres 1-4 CAH	Anaesthetics				24/07/2012	Brigeen Kelly
	09/12/2011	Trauma Ward	Trauma Surgery				19/12/2011	GH
	09/12/2011	Fracture Clinic	Outpatients				19/12/2011	GH
	09/12/2011	Orthopaedic Ward	Orthopaedic Surgery				19/12/2011	GH
	09/12/2011	Theatres DHH	Theatres				30/03/2012	Brigeen Kelly
	10/12/2011	3 South	Urology and ENT					Mrs Jackie Martin
	11/12/2011	Trauma Ward	Trauma Surgery				19/12/2011	GH
	11/12/2011	Orthopaedic Ward	Orthopaedic Surgery				19/12/2011	GH
	12/12/2011	4 South	General Surgery				19/12/2011	GH
	12/12/2011	Blood Transfusion Lab (Blood Bank)	Trauma and Orthopaedics					Pamela Truesdale



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/12/2011	Blood Transfusion Lab (Blood Bank)	Trauma and Orthopaedics	Irrelevant information redacted by the USI				Pamela Truesdale
	13/12/2011	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	13/12/2011	Orthopaedic Clinic	MAU					Lyndsay Stewart
	14/12/2011	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	14/12/2011	Theatres DHH	Theatres					Mrs Patricia Kingsnorth
	14/12/2011	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	14/12/2011	CEAW	General Surgery				19/12/2011	GH
	15/12/2011	Theatres 1-4 CAH	General Surgery					GH
	15/12/2011	Recovery Unit	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	16/12/2011	CEAW	Vasculur Surgery				19/12/2011	GH
	17/12/2011	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	17/12/2011	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	17/12/2011	Trauma Ward	Trauma and Orthopaedics					Pamela Truesdale
	18/12/2011	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	18/12/2011	Theatres DHH	Anaesthetics				24/07/2012	Brigeen Kelly
	19/12/2011	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	19/12/2011	Theatres 5-8 CAH	T&O Theatres				21/05/2012	Brigeen Kelly
	19/12/2011	Trauma Ward	Trauma and Orthopaedics					Pamela Truesdale
	20/12/2011	4 South	General Surgery				04/01/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/12/2011	CEAW	General Surgery	Irrelevant information redacted by the USI			04/01/2012	GH
	20/12/2011	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	21/12/2011	CEAW	General Surgery				04/01/2012	GH
	21/12/2011	CEAW	Urology Surgery				04/01/2012	GH
	22/12/2011	Theatres 1-4 CAH	Breast Surgery					GH
	22/12/2011	Male Surgical	General Surgery				04/01/2012	GH
	22/12/2011	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	22/12/2011	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	22/12/2011	CEAW	Urology Surgery				04/01/2012	GH
	23/12/2011	ICU CAH	Anaesthetics				21/05/2012	Brigeen Kelly
	23/12/2011	4 North	General Surgery				04/01/2012	GH
	23/12/2011	4 North	General Surgery				01/02/2012	Mr Stephen Mahon
	23/12/2011	Pre-operative Assessment Clinic	ENT Surery				23/02/2012	GH
	24/12/2011	4 South	General Surgery					Pamela Truesdale
	25/12/2011	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	25/12/2011	ICU CAH	ICU				21/05/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	25/12/2011	Theatres 1-4 CAH	Anaesthetics	Irrelevant information redacted by the USI			02/01/2013	Brigeen Kelly
	26/12/2011	3 South	Urology Surgery					GH
	27/12/2011	3 South	Urology Surgery				04/12/2012	DS
	28/12/2011	Theatres/DPU STH	General Surgery					GH
	28/12/2011	Theatres/DPU STH	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	28/12/2011	Theatres/DPU STH	General Surgery					GH
	28/12/2011	3 South	Urology Surgery				04/01/2012	GH
	29/12/2011	Day Surgery Unit CAH	General Surgery					Brigeen Kelly
	29/12/2011	Theatres DHH	Theatres			PPE wearing reinforced to all staff JW?BK 17/01/12	30/03/2012	Brigeen Kelly
	29/12/2011	Male Surgical	General Surgery				04/01/2012	GH
	30/12/2011	Female Surgical/Gynae	General Surgery				04/01/2012	GH
	30/12/2011	4 North	General Surgery				04/01/2012	GH
	30/12/2011	4 South	General Surgery				01/02/2012	GH
	01/01/2012	4 North	General Surgery				04/01/2012	GH
	01/01/2012	Female Surgical/Gynae	General Surgery				04/01/2012	GH
	02/01/2012	4 North	General Surgery				04/01/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/01/2012	Female Surgical/Gynae	General Surgery	Irrelevant information redacted by the USI			04/01/2012	GH
	03/01/2012	CEAW	Urology Surgery				01/02/2012	GH
	03/01/2012	4 North	General Surgery					Pamela Truesdale
	03/01/2012	4 South	General Surgery					Mrs Jackie Martin
	04/01/2012	Theatres/DPU STH	Day Procedure/Surgery				15/02/2012	Brigeen Kelly
	04/01/2012	3 South	Urology Surgery					GH
	04/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	04/01/2012	CEAW	General Surgery				01/02/2012	GH
	05/01/2012	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	05/01/2012	Theatres 5-8 CAH	T&O Theatres				21/05/2012	Brigeen Kelly
	05/01/2012	ICU CAH	ICU			It was re-iretated at the monthly staff meetings importance of correct labelling of images.	02/03/2012	Brigeen Kelly
	05/01/2012	4 North	General Surgery				01/02/2012	GH
	05/01/2012	Theatres 1-4 CAH	Anaesthetics				24/07/2012	Brigeen Kelly
	05/01/2012	4 North	General Surgery				01/02/2012	GH
	05/01/2012	4 North	General Surgery					Esme Brown
	06/01/2012	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	06/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	06/01/2012	Theatres/DPU STH	Recovery Unit					Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	06/01/2012	Paediatric Ward	ENT Surery	Irrelevant information redacted by the USI			01/02/2012	GH
	06/01/2012	Theatres/DPU STH	General Surgery				01/02/2012	GH
	06/01/2012	4 North	General Surgery				01/02/2012	Mr Stephen Mahon
	07/01/2012	Male Surgical	General Surgery				01/02/2012	GH
	07/01/2012	Day Surgery Unit CAH	Anaesthetics					Brigeen Kelly
	07/01/2012	Theatres 5-8 CAH	T&O Theatres				21/05/2012	Brigeen Kelly
	07/01/2012	3 South	General Surgery					Esme Brown
	09/01/2012	Female Surgical/Gynae	General Surgery				16/01/2012	GH
	10/01/2012	Trauma Ward	Trauma Surgery				01/02/2012	GH
	10/01/2012	CEAW	Urology Surgery				01/02/2012	GH
	10/01/2012	Theatres/DPU STH	Theatres			Robust checking of instruments in all departments. adherance to policy. roles & responsibility. Policy adherence highlighted at monthly sisters meeting for all satff to be fully compliant with policys & procedures.	24/07/2012	Brigeen Kelly
	10/01/2012	4 North	General Surgery				01/02/2012	GH
	10/01/2012	Paediatric Ward	General Surgery				01/02/2012	GH
	11/01/2012	4 North	General Surgery				01/02/2012	GH
	11/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery					Brigeen Kelly
	12/01/2012	Theatres 5-8 CAH	T&O Theatres				21/05/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/01/2012	Car Park/Grounds	Theatres	Irrelevant information redacted by the USI			30/03/2012	Brigeen Kelly
	12/01/2012	CEAW	General Surgery				01/02/2012	GH
	12/01/2012	CEAW	General Surgery				01/02/2012	GH
	12/01/2012	Treatment Room	Urology and ENT					Esme Brown
	13/01/2012	CEAW	Urology Surgery				01/02/2012	GH
	13/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	13/01/2012	CEAW	General Surgery				01/02/2012	GH
	13/01/2012	Trauma Ward	Trauma Surgery				01/02/2012	GH
	14/01/2012	4 North	General Surgery				01/02/2012	GH
	14/01/2012	4 North	Medical Secs/Ward Clerks General Surgery				01/02/2012	GH
	14/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery			Admin staff to be more viligant when filing up notes	28/05/2012	Brigeen Kelly
	15/01/2012	Trauma Ward	Trauma Surgery				01/02/2012	GH
	15/01/2012	Trauma Ward	Trauma Surgery			as above	23/09/2014	GH
	15/01/2012	4 North	General Surgery				01/02/2012	GH
	15/01/2012	Theatres 1-4 CAH	Theatres				02/03/2012	Brigeen Kelly
	15/01/2012	Orthopaedic Ward	Trauma and Orthopaedics					Esme Brown
	16/01/2012	Theatres DHH	Theatres					Brigeen Kelly
	16/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	16/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	16/01/2012	Theatres/DPU STH	Theatres				22/02/2012	Lyn Watt

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	16/01/2012	4 North	General Surgery	Irrelevant information redacted by the USI			01/02/2012	GH
	16/01/2012	Recovery Unit	General Surgery				01/02/2012	GH
	16/01/2012	4 North	General Surgery				01/02/2012	GH
	17/01/2012	1 West Gynae	General Surgery				01/02/2012	GH
	17/01/2012	4 North	Medical Secs/Ward Clerks - General Surgery				01/02/2012	GH
	17/01/2012	4 South	General Surgery				01/02/2012	Tracey McGuigan
	17/01/2012	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	17/01/2012	Theatres 5-8 CAH	T&O Theatres				21/05/2012	Brigeen Kelly
	17/01/2012	4 North	General Surgery					Esme Brown
	18/01/2012	4 North	General Surgery				01/02/2012	GH
	18/01/2012	Recovery CAH	Recovery Unit			Personal Information redacted by USI	24/07/2012	Brigeen Kelly
	18/01/2012	4 South	General Surgery				01/02/2012	GH
	18/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	19/01/2012	Theatres/DPU STH	General Surgery				01/02/2012	GH
	19/01/2012	3 South	Urology Surgery				02/02/2012	GH
	19/01/2012	4 North	General Surgery					Mrs Jackie Martin
	23/01/2012	Orthopaedic Ward	Orthopaedic Surgery				08/02/2012	GH
	23/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery			Quick action of staff following patient telephone call averted unnecessary arrival of patientst for the wrong list. BK 24/01/12	28/05/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	23/01/2012	4 South	General Surgery	Irrelevant information redacted by the USI				Mrs Jackie Martin
	23/01/2012	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	23/01/2012	Male Surgical/HDU	General Surgery					Esme Brown
	24/01/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	24/01/2012	CEAW	General Surgery					GH
	24/01/2012	4 North	General Surgery				02/02/2012	GH
	24/01/2012	3 South	ENT Surery				08/02/2012	ST
	24/01/2012	Paediatric Ward	ENT Surery				02/02/2012	GH
	25/01/2012	Theatres DHH	ENT Surery				06/02/2012	GH
	25/01/2012	Theatres 1-4 CAH	Theatres			Staff to be made aware of the IR2 procedure as this was sent to the wrong Directorate thus resulting in a reporting delay. BK 17.4.12	30/10/2012	Brigeen Kelly
	25/01/2012	4 North	General Surgery				22/02/2012	Mr Stephen Mahon
	25/01/2012	ICU CAH	ICU				06/02/2012	Brigeen Kelly
	25/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	25/01/2012	4 North	General Surgery				08/02/2012	GH



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	25/01/2012	Recovery Unit	Recovery Unit	Irrelevant information redacted by the USI			24/07/2012	Brigeen Kelly
	26/01/2012	Theatres DHH	Theatres			Raised at tomorrow mornings' meeting so staff continue to be vigilant re documenting amount of drug used and discarded.	24/07/2012	Brigeen Kelly
	26/01/2012	CEAW	General Surgery				06/02/2012	GH
	26/01/2012	3 South	ENT Surery				02/02/2012	GH
	26/01/2012	Theatres 1-4 CAH	Theatres			30/1/12 I investigated this complaint on 30/1/12 and e-mailed was my response to Mrs McGeough and Sr Kearney. I feel there is a valuable lesson to be learnt and I discussed the importance of being ultra vigilant in checking all of patient documentation at this morning's meeting with staff. Often there are incorrect labels in charts and these have been detected in the past so staff know to be thorough in checking all documentation. Often patients have significant medical history and there is no reference made to this as either the nurse who comes down does not know patient or indeed there is no RN and only an auxillary nurse. When the patient arrives in theatre the accompanying nurse does not routinely introduce the patient to theatre nurse. There is also a problem with missing addressograms in charts. All above issues should be raised to manager on relevant ward.PM	22/05/2012	MMG
	26/01/2012	ICU CAH	ICU				08/05/2012	Brigeen Kelly
	27/01/2012	CEAW	General Surgery				22/02/2012	GH
	27/01/2012	Theatres/DPU STH	General Surgery				06/02/2012	GH
	27/01/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	27/01/2012	Orthopaedic Clinic	Trauma and Orthopaedics					Mrs Jackie Martin
	27/01/2012	ENT Clinic	Outpatients - (general opd area including waiting lists and nursing staff)					Pamela Truesdale
	28/01/2012	1 West Gynae	General Surgery					GH
	29/01/2012	ICU CAH	ICU				06/02/2012	Brigeen Kelly
	29/01/2012	3 South	Urology Surgery				22/02/2012	ST
	29/01/2012	ICU CAH	ICU				21/05/2012	MMG
	30/01/2012	Theatres 5-8 CAH	T&O Theatres				21/05/2012	Brigeen Kelly
	30/01/2012	3 South	Medical Secs/Ward Clerks - Urology and ENT				02/02/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	30/01/2012	ICU CAH	ICU	Irrelevant information redacted by the USI			06/02/2012	Brigeen Kelly
	30/01/2012	Theatres 1-4 CAH	Theatres				18/09/2012	MMG
	30/01/2012	Recovery Unit	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	30/01/2012	4 North	General Surgery				22/02/2012	Mr Stephen Mahon
	30/01/2012	4 North	General Surgery				02/02/2012	GH
	30/01/2012	Recovery CAH	Recovery Unit				06/02/2012	Brigeen Kelly
	30/01/2012	Fracture Clinic	Outpatients				06/02/2012	GH
	31/01/2012	Theatres 1-4 CAH	Theatres				24/07/2012	MMG
	31/01/2012	4 North	General Surgery				22/02/2012	GH
	31/01/2012		Urology and ENT					Mrs Jackie Martin
	01/02/2012	Recovery Unit	Day Procedure/Surgery				06/02/2012	Brigeen Kelly
	01/02/2012	4 North	General Surgery				02/02/2012	GH
	01/02/2012	CEAW	Urology Surgery				27/04/2012	Nichola McClenaghan
	01/02/2012	Theatres/DPU STH	General Surgery				02/02/2012	GH
	01/02/2012	4 South	General Surgery				22/02/2012	GH
	02/02/2012	Theatres DHH	Theatres				24/07/2012	MMA
	02/02/2012	Theatres 1-4 CAH	Theatres				18/09/2012	Brigeen Kelly
	02/02/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	MMG
	02/02/2012	4 South	General Surgery				22/02/2012	Tracey McGuigan
	02/02/2012	Day Surgery Unit CAH	Day Procedure/Surgery					Brigeen Kelly
	02/02/2012	Theatres/DPU STH	General Surgery				22/02/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	03/02/2012	Day Surgery Unit CAH	Day Procedure/Surgery	Irrelevant information redacted by the USI			28/05/2012	Brigeen Kelly
	03/02/2012	ICU CAH	ICU			1. Despite appropriate technique, this unfortunate gentleman sustained a recognised complication of attempted central line insertion 2. Appropriate imaging was used due to an index of suspicion, but unfortunately due to the bilateral nature of the pneumothoracies, they were not appreciated. The pneumothoracies were not detectable on clincial examination, and the patient had a near normal NEWS score. 3. Feedback on choice of insertion site was provided to the staff involved, though it is unlikely that the pnuemothoracies would have been avoided. The lines were attempted with direct senior trainee supervision and the recorded technique was appropriate. 4. The patient was debriefed and a full explanation given by the duty ICU Consultant at ward level	26/11/2013	Brigeen Kelly
	03/02/2012	CEAW	ENT Surery				27/04/2012	GH
	03/02/2012	3 South	ENT Surery				22/05/2012	ST
	03/02/2012	Recovery Unit	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	03/02/2012	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	04/02/2012	Trauma Ward	Orthopaedic Surgery				22/02/2012	RB
	06/02/2012	ICU CAH	ICU				16/02/2012	Brigeen Kelly
	06/02/2012	Theatres 1-4 CAH	Anaesthetics			None	15/10/2013	MMG
	06/02/2012	Recovery Unit	Recovery Unit				06/02/2012	Brigeen Kelly
	06/02/2012	Trauma Ward	Trauma Surgery				27/04/2012	GH
	06/02/2012	4 North	General Surgery				22/02/2012	Mr Stephen Mahon
	07/02/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	07/02/2012	ICU CAH	ICU				16/02/2012	Brigeen Kelly
	07/02/2012	Recovery CAH	Recovery Unit				24/07/2012	GH
	07/02/2012	CEAW	Urology Surgery				27/04/2012	Nichola McClenaghan
	07/02/2012	4 North	General Surgery				22/05/2012	GH
	07/02/2012	Trauma Ward	Trauma Surgery				22/05/2012	RB
	07/02/2012	Fracture Clinic	Outpatients				27/04/2012	GH
	07/02/2012	3 South	General Surgery					Mrs Jackie Martin
	07/02/2012	Female Surgical/Gynae	General Surgery					Mrs Jackie Martin
	07/02/2012	3 South	General Surgery					Mrs Jackie Martin
	08/02/2012	Theatres 1-4 CAH	Theatres				04/04/2012	Brigeen Kelly
	08/02/2012	4 South	General Surgery				27/04/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler		
Irrelevant information redacted by the USI	08/02/2012	CEAW	Urology Surgery	Irrelevant information redacted by the USI				27/04/2012	Nichola McClenaghan	
	08/02/2012	CEAW	Urology Surgery					27/04/2012	Nichola McClenaghan	
	08/02/2012	Recovery Unit	General Surgery						25/06/2012	GH
	08/02/2012	Theatres DHH	ENT Surery				/A		21/06/2012	GH
	08/02/2012	4 South	General Surgery						22/05/2012	GH
	08/02/2012	Rehabilitation, Level 4	General Surgery							Mrs Jackie Martin
	09/02/2012	Corridor/Stairs	Theatres							Brigeen Kelly
	09/02/2012	Trauma Ward	Trauma Surgery						22/05/2012	GH
	09/02/2012	1 West Gynae	Urology Surgery						22/03/2012	GH
	09/02/2012	Day Surgery Unit CAH	Day Procedure/Surgery						28/05/2012	Brigeen Kelly
	10/02/2012	Theatres/DPU STH	Day Procedure/Surgery						24/07/2012	Brigeen Kelly
	10/02/2012	4 South	General Surgery						22/03/2012	GH
	10/02/2012	CEAW	General Surgery						27/04/2012	Nichola McClenaghan
	10/02/2012	CEAW	General Surgery						27/04/2012	Nichola McClenaghan
	10/02/2012	CEAW	Urology Surgery						22/05/2012	GH
	10/02/2012	4 South	General Surgery						22/05/2012	GH
	12/02/2012	Recovery CAH	Recovery Unit						16/02/2012	Brigeen Kelly
	13/02/2012	ICU CAH	ICU						16/02/2012	Brigeen Kelly
	13/02/2012	CEAW	General Surgery						22/05/2012	Nichola McClenaghan
	13/02/2012	CEAW	General Surgery						22/05/2012	GH
	13/02/2012	Theatres 1-4 CAH	Theatres						10/04/2013	Brigeen Kelly
	14/02/2012	Theatres 1-4 CAH	Theatres					DMISSION LETTER AMENDED	24/07/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/02/2012	4 North	Medical Secs/Ward Clerks General Surgery	Irrelevant information redacted by the USI			27/04/2012	Mr Stephen Mahon
	14/02/2012	3 South	General Surgery					Mrs Jackie Martin
	15/02/2012	Day Surgery Unit CAH	Day Procedure/Surgery				24/07/2012	MW1
	15/02/2012	Theatres/DPU STH	General Surgery				22/05/2012	GH
	15/02/2012	Theatres/DPU STH	General Surgery				22/05/2012	GH
	15/02/2012	CEAW	General Surgery				22/05/2012	Nichola McClenaghan
	15/02/2012	Theatres/DPU STH	General Surgery				22/05/2012	GH
	16/02/2012	CEAW	Breast Surgery				22/05/2012	Nichola McClenaghan
	16/02/2012	4 South	General Surgery				01/05/2012	GH
	16/02/2012	CEAW	General Surgery				22/05/2012	Nichola McClenaghan
	16/02/2012	CEAW	General Surgery				22/05/2012	Nichola McClenaghan
	16/02/2012	4 South	General Surgery				22/02/2012	Tracey McGuigan
	16/02/2012	4 South	General Surgery				01/05/2012	GH
	16/02/2012	Day Surgery Unit CAH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly
	16/02/2012	4 South	General Surgery				01/05/2012	GH
	16/02/2012	4 South	General Surgery				01/05/2012	GH
	17/02/2012	4 North	General Surgery				22/03/2012	GH
	17/02/2012	3 South	Urology Surgery				01/05/2012	GH
	20/02/2012	Orthopaedic Ward	Orthopaedic Surgery				01/05/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/02/2012	Fracture Clinic	Outpatients	Irrelevant information redacted by the USI			01/05/2012	GH
	20/02/2012	4 South	Urology Surgery				01/05/2012	GH
	20/02/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	20/02/2012	4 South	General Surgery				01/05/2012	GH
	20/02/2012	Trauma Ward	Trauma and Orthopaedics					Mrs Jackie Martin
	21/02/2012	Orthopaedic Ward	Orthopaedic Surgery				22/03/2012	GH
	21/02/2012	Day Surgery Unit CAH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly
	21/02/2012	Fracture Clinic	Outpatients				23/05/2012	GH
	22/02/2012	Theatres 1-4 CAH	Theatres					Brigeen Kelly
	22/02/2012	4 South	General Surgery				01/05/2012	GH
	22/02/2012	Trauma Ward	Trauma Surgery				01/05/2012	GH
	22/02/2012	Theatres DHH	Theatres				24/07/2012	Brigeen Kelly
	23/02/2012	Theatres/DPU STH	Day Procedure/Surgery			Scehduling & appointments are currently under review please see attached documents. BK 23/02/12	24/07/2012	Brigeen Kelly
	23/02/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	23/02/2012	CEAW	General Surgery				01/05/2012	GH
	24/02/2012	3 South	Urology Surgery				22/05/2012	GH
	24/02/2012	ICU CAH	Anaesthetics				08/05/2012	Brigeen Kelly
	24/02/2012	3 South	Urology Surgery				02/05/2012	GH
	24/02/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	24/02/2012	Day Procedure Unit DHH	Day Procedure/Surgery			Eye protection available but not worn at this time as only in observational capacity. All staff aware of PPE provision and wearing of same. Phil McGuigan contacted regarding incident, staff member pouring formalin was wearing PPE and the student was standing well back, it has been reinforced that all staff must be highly aware of splashes and the wearing ofPPE.	24/07/2012	Brigeen Kelly
	24/02/2012	3 South	Urology Surgery				02/05/2012	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	25/02/2012	ICU CAH	ICU	Irrelevant information redacted by the USI			24/07/2012	Brigeen Kelly
	25/02/2012	Paediatric Ward	ENT Surgery				02/05/2012	GH
	25/02/2012	Trauma Ward	Trauma Surgery				02/05/2012	DS
	26/02/2012	Car Park/Grounds	Theatres			No lessons to be learnt.		Brigeen Kelly
	26/02/2012	3 South	Urology Surgery				22/05/2012	GH
	28/02/2012	Theatres DHH	General Surgery				15/05/2012	GH
	28/02/2012	Theatres DHH	Theatres				30/03/2012	Brigeen Kelly
	28/02/2012	Female Surgical/Gynae	General Surgery				22/05/2012	GH
	28/02/2012	Theatres DHH	Theatres				30/03/2012	Brigeen Kelly
	29/02/2012	3 South	Urology Surgery				02/05/2012	GH
	29/02/2012	ICU CAH	ICU				04/04/2012	Brigeen Kelly
	29/02/2012	Car Park/Grounds	Outpatients - (general opd area including waiting lists and nursing staff)					Pamela Truesdale
	01/03/2012	Female Surgical/Gynae	ENT Surgery				22/05/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	01/03/2012	ICU CAH	ICU	Irrelevant information redacted by the USI			21/05/2012	Helen McGarry
	01/03/2012	Theatres/DPU STH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly
	01/03/2012	Female Surgical/Gynae	ENT Surgery				22/05/2012	GH
	01/03/2012	Theatres/DPU STH	Day Procedure/Surgery			Ensure patient has recieved a copy of the Trust information leaflet on OGD and that an adequate explanation is given on the effects and benefits of sedation prior to the procedure being carried out. 24/07/12	24/07/2012	Brigeen Kelly
	02/03/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	02/03/2012	CEAW	Urology Surgery				22/05/2012	Nichola McClenaghan
	02/03/2012	Theatres DHH	Theatres				24/07/2012	Brigeen Kelly
	02/03/2012	Theatres DHH	Theatres				24/07/2012	Brigeen Kelly
	02/03/2012	3 South	Urology and ENT					Mrs Jackie Martin
	03/03/2012	Male Surgical	General Surgery			patient put in a close observation bed	23/03/2012	PMK
	04/03/2012	Orthopaedic Ward	Medical Secs/Ward Clerks Trauma and Orthopaedics				02/05/2012	GH
	04/03/2012	Orthopaedic Ward	Trauma Surgery				02/05/2012	GH
	05/03/2012	Trauma Ward	Trauma Surgery				02/05/2012	GH
	05/03/2012	Theatres/DPU STH	Ophthalmology				16/05/2012	GH
	05/03/2012	4 South	General Surgery				22/05/2012	GH
	07/03/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/03/2012	CEAW	General Surgery	Irrelevant information redacted by the USI			22/05/2012	GH
	08/03/2012	Trauma Ward	Trauma Surgery				04/05/2012	DS
	09/03/2012	Recovery CAH	Recovery Unit				24/07/2012	Brigeen Kelly
	09/03/2012	Male Surgical	General Surgery				22/05/2012	PMK
	09/03/2012	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	09/03/2012	Orthopaedic Ward	Orthopaedic Surgery				24/05/2012	Maureen Farley
	10/03/2012	3 South	ENT Surery				23/05/2012	GH
	11/03/2012		Outpatients					David Cardwell
	12/03/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	12/03/2012	Theatres/DPU STH	Acute Pain Management				24/07/2012	Brigeen Kelly
	12/03/2012	Orthopaedic Ward	Orthopaedic Surgery				04/05/2012	DS
	12/03/2012	ICU CAH	T&O Theatres			Staff must all be aware of the importance of following Right Patient Right Blood training and adhering to the trust policies and procedures. Care should be taken when adhering stickers into patient blood carepathway.	21/05/2012	Laura Murphy
	14/03/2012	Theatres/DPU STH	Outpatients				19/06/2012	DS
	14/03/2012	Theatres DHH	Theatres				30/03/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/03/2012	Trauma Ward	Trauma Surgery	Irrelevant information redacted by the USI			19/06/2012	DS
	14/03/2012	4 South	General Surgery				08/05/2012	DS
	16/03/2012	3 South	Urology Surgery				04/05/2012	DS
	16/03/2012	Recovery Unit	Day Procedure/Surgery				24/07/2012	Brigeen Kelly
	16/03/2012	4 North	General Surgery			MSSA not preventable	08/05/2012	DS
	16/03/2012	Urology Clinic	Outpatients				23/05/2012	DS
	16/03/2012	ICU CAH	Anaesthetics			None	17/10/2017	EmmaJane Kearney
	17/03/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	19/03/2012	Male Surgical	General Surgery				23/05/2012	PMK
	19/03/2012	Trauma Ward	Trauma Surgery				04/05/2012	DS
	19/03/2012	Trauma Ward	Trauma Surgery				04/05/2012	DS
	19/03/2012	3 South	ENT Surery				04/05/2012	DS
	20/03/2012	3 South	ENT Surery				22/03/2012	GH
	20/03/2012	4 North	General Surgery					DS
	20/03/2012	3 South	ENT Surery				23/05/2012	GH
	20/03/2012	Recovery Unit	ENT Surery				08/05/2012	DS
	20/03/2012	3 South	ENT Surery				21/05/2012	GH
	20/03/2012	Recovery CAH	Recovery Unit			staff made aware of her responsibility	24/07/2012	Brigeen Kelly
	20/03/2012	4 South	General Surgery				04/05/2012	DS
	21/03/2012	Theatres 1-4 CAH	Theatres			Staff must adhere to waste mangemant policy and will be reinforced at staff meetings. JR 22.3.12	24/07/2012	Brigeen Kelly
	21/03/2012	4 South	Vasculur Surgery			Junior Dr advised re issues & importance of safe prescribing. to be escalated through mr C Weir for learning	22/05/2012	DS
	21/03/2012	4 North	General Surgery				08/05/2012	DS
	22/03/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/03/2012	Female Surgical/Gynae	General Surgery	Irrelevant information redacted by the USI			23/05/2012	DS
	22/03/2012	Female Surgical/Gynae	General Surgery				21/05/2012	DS
	22/03/2012	Female Surgical/Gynae	General Surgery				23/05/2012	DS
	22/03/2012	Female Surgical/Gynae	General Surgery				21/06/2012	GH
	22/03/2012	Male Surgical	General Surgery				23/05/2012	PMK
	23/03/2012	Male Surgical	General Surgery				23/05/2012	PMK
	23/03/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	23/03/2012	4 North	General Surgery					Mrs Jackie Martin
	24/03/2012	4 North	General Surgery				21/06/2012	GH
	25/03/2012	Male Surgical	Medical Secs/Ward Clerks - General Surgery				23/05/2012	PMK
	25/03/2012	Recovery CAH	Recovery Unit				24/07/2012	Brigeen Kelly
	26/03/2012	Theatres/DPU STH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly
	26/03/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	26/03/2012	ICU CAH	ICU				26/03/2012	Helen McGarry
	26/03/2012	Theatres 5-8 CAH	T&O Theatres			Personal reflected on incident. Felt he was rushing and accepted responsibility.	27/03/2012	Brigeen Kelly
	26/03/2012	Trauma Ward	Trauma Surgery				25/05/2012	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	27/03/2012	CEAW	General Surgery	Irrelevant information redacted by the USI			23/05/2012	Nichola McClenaghan
	27/03/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	27/03/2012	Theatres 1-4 CAH	Theatres					Brigeen Kelly
	27/03/2012	Trauma Ward	Trauma Surgery				08/05/2012	DS
	28/03/2012	Theatres 1-4 CAH	Theatres				20/09/2012	Brigeen Kelly
	28/03/2012	X-ray Dept (Radiology)	General Surgery				19/06/2012	GH
	29/03/2012	Theatres/DPU STH	General Surgery				21/06/2012	GH
	29/03/2012	Orthopaedic Ward	Orthopaedic Surgery				25/05/2012	GH
	29/03/2012	X-ray Dept (Radiology)	General Surgery				29/05/2012	DS
	29/03/2012	4 North	General Surgery				25/05/2012	DS
	29/03/2012	Orthopaedic Ward	Orthopaedic Surgery				25/05/2012	GH
	29/03/2012	4 South	General Surgery					Mrs Jackie Martin
	30/03/2012	Fracture Clinic	Outpatients				19/06/2012	DS
	30/03/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	31/03/2012	Recovery Unit	General Surgery				29/05/2012	DS
	01/04/2012	4 North	General Surgery				08/05/2012	DS
	01/04/2012	CEAW	General Surgery				23/05/2012	Nichola McClenaghan
	02/04/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	02/04/2012	Theatres 1-4 CAH	Breast Surgery					DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	03/04/2012	Recovery Unit	Recovery Unit	Irrelevant information redacted by the USI			24/07/2012	Brigeen Kelly
	03/04/2012	3 South	Urology Surgery			This incident is not an IR1	08/05/2012	DS
	03/04/2012	Recovery CAH	Anaesthetics			See attached Documents BK 24.7.12	24/07/2012	Brigeen Kelly
	03/04/2012	Theatres/DPU STH	General Surgery				19/06/2012	DS
	03/04/2012	Trauma Ward	Trauma Surgery				30/05/2012	DS
	04/04/2012	CEAW	General Surgery				23/05/2012	Nichola McClenaghan
	04/04/2012	3 South	Urology Surgery				16/05/2012	DS
	04/04/2012	4 South	General Surgery			241113cc-this has been screened as SAI Level 2. Await learning within report	25/11/2014	Connie Connolly
	04/04/2012	Theatres DHH	General Surgery					DS
	05/04/2012	ICU CAH	ICU				24/07/2012	Brigeen Kelly
	05/04/2012	ICU CAH	ICU			Staff informed to read NMC code of conduct, medicines management and Trust Policies again and to sign education list to confirm they have done so.		Brigeen Kelly
	05/04/2012	Day Procedure Unit DHH	General Surgery				21/06/2012	GH
	05/04/2012	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	06/04/2012	3 South	Urology Surgery				30/05/2012	DS
	07/04/2012	Theatres DHH	Theatres					Brigeen Kelly
	10/04/2012	Trauma Ward	Orthopaedic Surgery				30/05/2012	DS
	11/04/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	11/04/2012	Theatres 1-4 CAH	Anaesthetics	Irrelevant information redacted by the USI			24/07/2012	Brigeen Kelly
	11/04/2012	General Outpatients Reception/Waiting Area	Outpatients					DS
	12/04/2012	Theatres/DPU STH	General Surgery				21/06/2012	GH
	12/04/2012	Theatres 5-8 CAH	T&O Theatres			Staff must be vigilant when checking implants and opening same for members of the scrub team.	21/05/2012	Laura Murphy
	12/04/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	12/04/2012	Theatres/DPU STH	General Surgery				21/06/2012	GH
	13/04/2012	ICU CAH	ICU				21/05/2012	Brigeen Kelly
	13/04/2012	General Surgery Clinic	Medical Secs/Ward Clerks - Outpatients				18/06/2012	GH
	16/04/2012	Theatres/DPU STH	General Surgery				21/06/2012	GH
	16/04/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	16/04/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	16/04/2012	Day Surgery Unit CAH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	16/04/2012	4 South	General Surgery				15/06/2012	GH
	16/04/2012	Day Surgery Unit CAH	Day Procedure/Surgery					Brigeen Kelly
	16/04/2012	CEAW	General Surgery				23/05/2012	Nichola McClenaghan
	16/04/2012	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	16/04/2012	Theatres 1-4 CAH	Theatres	Irrelevant information redacted by the USI			24/07/2012	Brigeen Kelly
	17/04/2012	Pre-operative Assessment Clinic	Oral Surgery				23/05/2012	DS
	18/04/2012	Theatres 5-8 CAH	T&O Theatres				21/05/2012	Brigeen Kelly
	18/04/2012	Theatres/DPU STH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	18/04/2012	ICU CAH	ICU				18/09/2012	Brigeen Kelly
	18/04/2012	Theatres/DPU STH	Ophthalmology					DS
	18/04/2012	General Surgery Clinic	General Surgery				21/06/2012	GH
	19/04/2012	General Outpatients Reception/Waiting Area	Outpatients				08/05/2012	DS
	19/04/2012	3 South	ENT Surery			Ward informed to complete discharge care plan of which checking for venflons is part of	16/05/2012	DS
	19/04/2012	3 South	Urology Surgery				08/05/2012	DS
	19/04/2012	3 South	Medical Secs/Ward Clerks - Urology and ENT				08/05/2012	DS
	19/04/2012	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	20/04/2012	ICU CAH	ICU				15/05/2012	MMG
	20/04/2012	3 South	General Surgery				08/06/2012	DS
	21/04/2012	4 South	Vasculur Surgery				08/05/2012	DS
	22/04/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	23/04/2012	3 South	Urology Surgery				15/06/2012	GH
	23/04/2012	Oral Surgery Clinic	Oral Surgery			Does this issue require an IR1 form	08/05/2012	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	23/04/2012	ICU CAH	ICU	Irrelevant information redacted by the USI			18/09/2012	Brigeen Kelly
	24/04/2012	ICU CAH	ICU				18/09/2012	Mary Lennon
	24/04/2012	ICU CAH	ICU				15/05/2012	Brigeen Kelly
	24/04/2012	Orthopaedic Ward	Orthopaedic Surgery				19/06/2012	GH
	24/04/2012	Paediatric Ward	General Surgery					AMM
	24/04/2012	Theatres DHH	Theatres			None	24/07/2012	Brigeen Kelly
	24/04/2012	ICU CAH	ICU					Brigeen Kelly
	24/04/2012	ICU CAH	ICU				15/05/2012	Brigeen Kelly
	24/04/2012	4 North	General Surgery				08/06/2012	DS
	25/04/2012	Orthopaedic Ward	Orthopaedic Surgery				19/06/2012	GH
	25/04/2012	4 North	General Surgery				15/06/2012	GH
	25/04/2012	Theatres 1-4 CAH	Theatres			None identified. However will reinforce the importance of PPE when dealing with chemicals and blood.	24/07/2012	Brigeen Kelly
	26/04/2012	4 North	General Surgery				15/06/2012	GH



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	26/04/2012	Theatres 1-4 CAH	Theatres	Irrelevant information redacted by the USI			24/07/2012	Brigeen Kelly
	26/04/2012	X-ray Dept (Radiology)	Urology Surgery				15/06/2012	GH
	26/04/2012	Entrance/Exit	Outpatients					Connie Connolly
	27/04/2012	4 North	General Surgery				15/06/2012	GH
	27/04/2012	Recovery Unit	Chronic Pain Management				20/09/2012	Wendy Clayton
	28/04/2012	4 North	Medical Secs/Ward Clerks - General Surgery				15/06/2012	GH
	30/04/2012	Theatres 5-8 CAH	T&O Theatres				21/05/2012	Laura Murphy
	30/04/2012	Fracture Clinic	Outpatients				15/06/2012	GH
	30/04/2012	Theatres/DPU STH	Theatres				24/07/2012	Brigeen Kelly
	30/04/2012	Thorndale Unit	Urology Surgery				21/06/2012	GH
	30/04/2012	CEAW	Breast Surgery				23/05/2012	Nichola McClenaghan
	01/05/2012	Trauma Ward	Trauma Surgery				15/06/2012	GH
	01/05/2012	Theatres DHH	Theatres				22/06/2012	MMA
	01/05/2012	Theatres 1-4 CAH	General Surgery				21/06/2012	GH
	02/05/2012	X-ray Dept (Radiology)	Medical Secs/Ward Clerks - General Surgery				18/06/2012	GH
	02/05/2012	Theatres/DPU STH	General Surgery				21/05/2012	GH
	02/05/2012	Theatres/DPU STH	General Surgery				18/06/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	03/05/2012	Theatres DHH	Theatres	Irrelevant information redacted by the USI		Need to further investigate why the needle came out the side of tubing instead of end of tube as designed. Needle was tested before being inserted into scope and was working as it is designed to do.	24/07/2012	MMA
	03/05/2012	Theatres 5-8 CAH	T&O Theatres			24/07/2012 Need for all medical and nursing staff to be instructed and updated in the use of all equipment. Equipment should be standardised Trust wide. MW	21/05/2012	Laura Murphy
	03/05/2012	Theatres 5-8 CAH	Orthopaedic Surgery				21/05/2012	DS
	03/05/2012	Colposcopy Clinic	Outpatients				21/06/2012	GH
	04/05/2012	ICU CAH	ICU				02/01/2013	Brigeen Kelly
	04/05/2012	Trauma Ward	Trauma Surgery				30/05/2012	DS
	06/05/2012	3 South	ENT Surery				15/06/2012	GH
	06/05/2012	ICU CAH	ICU			Due to patient's critical illness and poor skin state lprobable unavoidable.	15/05/2012	Brigeen Kelly
	08/05/2012	CEAW	Urology Surgery				15/06/2012	GH
	08/05/2012	Day Procedure Unit DHH	Day Procedure/Surgery				28/05/2012	Brigeen Kelly
	09/05/2012	Theatres 5-8 CAH	T&O Theatres				21/05/2012	
	09/05/2012	3 South	Urology Surgery				25/05/2012	DS
	09/05/2012	ICU CAH	ICU				15/05/2012	Helen McGarry
	09/05/2012	4 North	General Surgery				25/05/2012	DS
	09/05/2012	Male Surgical	General Surgery				15/06/2012	GH
	10/05/2012	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	12/05/2012	ICU (HDU)	ICU				23/05/2012	Brigeen Kelly
	12/05/2012	ICU (HDU)	ICU					Vivienne Kerr
	12/05/2012	Theatres 5-8 CAH	T&O Theatres				21/05/2012	Laura Murphy
	14/05/2012	Theatres/DPU STH	General Surgery				21/06/2012	GH
	15/05/2012	Theatres DHH	Anaesthetics			Reviewed from obstetric perspective, care appropriate except HART document not completed when meconium was recognised but this did not have any negative impact on mother or baby.	20/09/2012	Mrs Patricia Kingsnorth

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	15/05/2012	Male Surgical	General Surgery	Irrelevant information redacted by the USI			21/06/2012	GH
	15/05/2012	Fracture Clinic	Outpatients				18/06/2012	GH
	16/05/2012	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	16/05/2012	Theatres 1-4 CAH	Urology Surgery				15/06/2012	GH
	16/05/2012	Theatres/DPU STH	General Surgery				21/06/2012	Brigeen Kelly
	16/05/2012	Day Surgery Unit CAH	Medical Secs/Ward Clerks - General Surgery				21/06/2012	GH
	17/05/2012	Day Surgery Unit CAH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly
	17/05/2012	Recovery CAH	Recovery Unit					Brigeen Kelly
	17/05/2012	CEAW	Breast Surgery				15/06/2012	GH
	18/05/2012	4 North	General Surgery				18/06/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	18/05/2012	Day Surgery Unit CAH	Day Procedure/Surgery	Irrelevant information redacted by the USI			28/05/2012	Brigeen Kelly
	19/05/2012	Corridor/Stairs	General Surgery				18/06/2012	GH
	20/05/2012	4 North	General Surgery				08/06/2012	DS
	21/05/2012	Theatres/DPU STH	General Surgery				18/06/2012	Brigeen Kelly
	21/05/2012	Day Surgery Unit CAH	General Surgery				21/06/2012	GH
	21/05/2012	Orthopaedic Ward	Orthopaedic Surgery				18/06/2012	GH
	21/05/2012	3 South	Urology Surgery				18/06/2012	GH
	22/05/2012	3 South	Urology Surgery				18/06/2012	GH
	22/05/2012	Day Surgery Unit CAH	Medical Secs/Ward Clerks - General Surgery				18/06/2012	Brigeen Kelly
	22/05/2012	4 South	General Surgery				06/06/2012	GH
	23/05/2012	Theatres/DPU STH	Ophthalmology				18/06/2012	GH
	23/05/2012	Day Surgery Unit CAH	General Surgery				18/06/2012	GH
	23/05/2012	Theatres 1-4 CAH	Theatres			Process reviewed for sterilisation of choledochoscopes, SOP being amended, brought to the attention of all staff	20/09/2012	MW1
	23/05/2012	X-ray Dept (Radiology)	General Surgery				18/06/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	23/05/2012	Day Surgery Unit CAH	General Surgery	Irrelevant information redacted by the USI			18/06/2012	GH
	24/05/2012	4 North	General Surgery				18/06/2012	GH
	24/05/2012	Theatres 1-4 CAH	Theatres					Brigeen Kelly
	25/05/2012	General OutpatientsTreatment Room	Outpatients				06/06/2012	GH
	25/05/2012	Pre-operative Assessment Clinic	Outpatients				25/06/2012	GH
	25/05/2012	Theatres DHH	Outpatients					GH
	25/05/2012	4 North	General Surgery				18/06/2012	GH
	25/05/2012	CEAW	General Surgery				18/06/2012	GH
	25/05/2012	Refraction Clinic	Outpatients				18/12/2012	DS
	26/05/2012	ICU CAH	ICU				20/09/2012	Brigeen Kelly
	28/05/2012	4 North	General Surgery				18/06/2012	DS
	28/05/2012	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	29/05/2012	Theatres 1-4 CAH	General Surgery					Brigeen Kelly
	29/05/2012	Theatres 1-4 CAH	Theatres				15/06/2012	Brigeen Kelly
	29/05/2012	Orthopaedic Ward	Orthopaedic Surgery				31/05/2012	GH
	29/05/2012	Orthopaedic Ward	Orthopaedic Surgery				29/05/2012	DS
	30/05/2012	CEAW	ENT Surery				18/06/2012	GH
	30/05/2012	Fracture Clinic	Outpatients				31/05/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	30/05/2012	Day Surgery Unit CAH	Day Procedure/Surgery	Irrelevant information redacted by the USI			15/06/2012	Brigeen Kelly
	30/05/2012	Day Surgery Unit CAH	General Surgery				18/06/2012	GH
	30/05/2012	3 South	Urology Surgery				02/08/2012	Jennifer Taylor
	31/05/2012	4 North	General Surgery				18/06/2012	GH
	01/06/2012	4 North	General Surgery				21/06/2012	GH
	03/06/2012	ICU CAH	ICU				20/09/2012	Brigeen Kelly
	05/06/2012	3 South	Urology Surgery				29/06/2012	GH
	06/06/2012	ICU CAH	ICU				18/09/2012	Brigeen Kelly
	06/06/2012	Recovery CAH	General Surgery				18/06/2012	GH
	07/06/2012	Recovery Unit	Anaesthetics				24/07/2012	Brigeen Kelly
	07/06/2012	Day Surgery Unit CAH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly
	07/06/2012	Pre-operative Assessment Clinic	Outpatients				20/06/2012	GH
	08/06/2012	CEAW	General Surgery				25/06/2012	GH
	08/06/2012	Day Surgery Unit CAH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly
	08/06/2012	Orthopaedic Ward	Orthopaedic Surgery				12/06/2012	GH
	09/06/2012	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	11/06/2012	General OutpatientsTreatment Room	Outpatients				20/06/2012	GH
	11/06/2012	Theatres DHH	Anaesthetics			None	26/11/2013	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	11/06/2012	Trauma Ward	Trauma Surgery	Irrelevant information redacted by the USI			27/06/2012	DS
	12/06/2012	ICU CAH	ICU				18/09/2012	Brigeen Kelly
	12/06/2012	Theatres/DPU STH	Day Procedure/Surgery					Brigeen Kelly
	12/06/2012	Theatres 1-4 CAH	Theatres				24/07/2012	NR Pamela Johnston
	14/06/2012	Day Surgery Unit CAH	General Surgery				25/06/2012	GH
	14/06/2012	ICU CAH	ICU				20/09/2012	Helen McGarry
	14/06/2012	4 South	General Surgery				02/07/2012	GH
	14/06/2012	3 South	ENT Surery				17/08/2012	DS
	14/06/2012	3 South	Urology Surgery				18/06/2012	GH
	15/06/2012	4 North	General Surgery				29/06/2012	GH
	15/06/2012	4 South	General Surgery				15/06/2012	GH
	15/06/2012	Female Surgical/Gynae	General Surgery				25/06/2012	GH
	16/06/2012	General Surgery Clinic	Medical Secs/Ward Clerks - Outpatients				05/07/2012	GH
	16/06/2012	Trauma Ward	Trauma Surgery			errors that ocured, message should not have been left on answerphone as it was a saturday. mobile for district nurse was not reported as not working.	29/06/2012	GH
	19/06/2012	CEAW	Urology Surgery				20/06/2012	GH
	19/06/2012	4 South	General Surgery				26/07/2012	GH
	19/06/2012	ICU CAH	ICU				22/06/2012	Brigeen Kelly
	19/06/2012	ICU CAH	ICU				22/06/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	19/06/2012	CEAW	General Surgery	Irrelevant information redacted by the USI			27/06/2012	GH
	19/06/2012	Maternity Admissions/Assessment Unit	General Surgery				27/06/2012	GH
	19/06/2012	4 South	General Surgery				27/06/2012	GH
	19/06/2012	Theatres 1-4 CAH	Anaesthetics				22/06/2012	Brigeen Kelly
	19/06/2012	CEAW	Urology Surgery				21/06/2012	GH
	20/06/2012	Female Surgical/Gynae	General Surgery				20/06/2012	GH
	20/06/2012	Theatres/DPU STH	General Surgery				20/06/2012	GH
	20/06/2012	ICU CAH	ICU				21/06/2012	Helen McGarry
	20/06/2012	Theatres 1-4 CAH	Theatres				24/07/2012	Brigeen Kelly
	20/06/2012	Health Records	General Surgery				27/06/2012	GH
	20/06/2012	Trauma Ward	Trauma Surgery			Importance of accurate communication	29/06/2012	GH
	21/06/2012	ENT Clinic	Outpatients				26/07/2012	GH
	21/06/2012	Orthopaedic Ward	Orthopaedic Surgery				21/06/2012	GH
	21/06/2012	Theatres 5-8 CAH	Anaesthetics				24/07/2012	Brigeen Kelly
	22/06/2012	Female Surgical/Gynae	General Surgery				25/06/2012	GH
	22/06/2012	Theatres DHH	Theatres				30/10/2012	MMA



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/06/2012	Orthopaedic Ward	Orthopaedic Surgery	Irrelevant information redacted by the USI			25/06/2012	GH
	25/06/2012	ICU CAH	ICU				28/06/2012	Brigeen Kelly
	25/06/2012	Theatres/DPU STH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly
	25/06/2012	Trauma Ward	Trauma Surgery			Trauma ward involved in falls pilot & also have commenced intentional rounding to try & prevent same happening	26/06/2012	DS
	26/06/2012	3 South	Urology Surgery				27/06/2012	GH
	26/06/2012	Trauma Ward	Trauma Surgery				29/06/2012	GH
	26/06/2012	3 South	Urology Surgery				03/07/2013	GH
	26/06/2012	Trauma Ward	Trauma Surgery				06/07/2012	DS
	26/06/2012	Day Surgery Unit CAH	Urology Surgery				19/09/2012	Brigeen Kelly
	27/06/2012	ICU CAH	ICU				10/07/2012	Brigeen Kelly
	27/06/2012	Day Procedure Unit DHH	Day Procedure/Surgery				10/07/2012	Brigeen Kelly
	27/06/2012	Theatres/DPU STH	General Surgery				11/07/2012	Amie Nelson
	28/06/2012	4 North	General Surgery				29/06/2012	GH
	28/06/2012	3 South	ENT Surery				17/08/2012	DS
	28/06/2012	CEAW	General Surgery				29/06/2012	GH
	29/06/2012	4 North	General Surgery				06/07/2012	Mr Stephen Mahon
	01/07/2012	Male Surgical	Medical Secs/Ward Clerks General Surgery				06/07/2012	GH
	02/07/2012	Trauma Ward	Trauma Surgery				02/07/2012	GH
	03/07/2012	Day Surgery Unit CAH	Day Procedure/Surgery				18/09/2012	Brigeen Kelly
	03/07/2012	4 North	General Surgery				05/07/2012	GH
	03/07/2012	CEAW	General Surgery				05/07/2012	GH
	03/07/2012	3 South	General Surgery				06/07/2012	GH
	03/07/2012	3 South	Urology Surgery				03/07/2012	DS
	04/07/2012	Male Surgical	General Surgery				26/07/2012	GH
	05/07/2012	X-ray Dept (Radiology)	Anaesthetics				24/07/2012	Ushagowri Mavuri
	05/07/2012	X-ray Dept (Radiology)	Anaesthetics				24/07/2012	Ushagowri Mavuri
	06/07/2012	Day Surgery Unit CAH	Urology Surgery				19/09/2012	Brigeen Kelly
	06/07/2012	Trauma Ward	Trauma Surgery				26/07/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/07/2012	Trauma Ward	Trauma Surgery	Irrelevant information redacted by the USI			09/08/2012	DS
	07/07/2012	Female Surgical/Gynae	General Surgery				09/07/2012	DS
	08/07/2012	4 North	General Surgery				09/07/2012	DS
	08/07/2012	Orthopaedic Ward	Orthopaedic Surgery				19/07/2012	GH
	08/07/2012	Trauma Ward	Trauma Surgery				09/07/2012	DS
	09/07/2012	Day Surgery Unit CAH	Day Procedure/Surgery			All procedures followed correctly by nursing staff. Bk 10.7.12	24/07/2012	Brigeen Kelly
	09/07/2012	4 North	General Surgery				09/07/2012	DS
	09/07/2012	4 North	General Surgery				09/07/2012	DS
	09/07/2012	4 North	General Surgery				10/07/2012	DS
	10/07/2012	Theatres DHH	Theatres				24/07/2012	MMA
	11/07/2012	Theatres/DPU STH	Theatres				24/07/2012	Brigeen Kelly
	12/07/2012	Maternity Admissions/Assessment Unit	Urology Surgery				20/08/2012	DS
	13/07/2012	Trauma Ward	Trauma Surgery				26/07/2012	GH
	13/07/2012	Day Surgery Unit CAH	Day Procedure/Surgery				24/07/2012	Ushagowri Mavuri
	13/07/2012	Trauma Ward	Trauma Surgery				19/07/2012	GH
	14/07/2012	3 South	Urology Surgery				16/07/2012	GH
	14/07/2012	Orthopaedic Ward	Orthopaedic Surgery				26/07/2012	Sharon Young
	14/07/2012	4 South	General Surgery				23/07/2012	GH
	15/07/2012	4 South	General Surgery				26/07/2012	GH
	15/07/2012	4 North	General Surgery				26/07/2012	GH
	16/07/2012	4 South	General Surgery				23/07/2012	GH
	16/07/2012	Day Surgery Unit CAH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	17/07/2012	Day Surgery Unit CAH	Day Procedure/Surgery	Irrelevant information redacted by the USI			24/07/2012	Brigeen Kelly
	17/07/2012	4 North	General Surgery				26/07/2012	Mr Stephen Mahon
	17/07/2012	CEAW	General Surgery				25/07/2012	GH
	17/07/2012	Recovery CAH	Recovery Unit					Brigeen Kelly
	17/07/2012	CEAW	General Surgery				23/07/2012	GH
	17/07/2012	Theatres/DPU STH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly
	17/07/2012	CEAW	General Surgery				25/07/2012	GH
	18/07/2012	CEAW	General Surgery				25/07/2012	GH
	18/07/2012	Car Park/Grounds	Outpatients				25/07/2012	GH
	18/07/2012	Male Surgical	General Surgery				25/07/2012	GH
	19/07/2012	Thorndale Unit	Outpatients				25/07/2012	GH
	21/07/2012	4 North	General Surgery				25/07/2012	GH
	22/07/2012	4 South	General Surgery				25/07/2012	GH
	23/07/2012	ENT Clinic	Outpatients				25/07/2012	GH
	23/07/2012	Day Surgery Unit CAH	Day Procedure/Surgery				24/07/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	24/07/2012	Theatres/DPU STH	Day Procedure/Surgery	Irrelevant information redacted by the USI	Irrelevant information redacted by the USI		24/07/2012	Brigeen Kelly
	24/07/2012	CEAW	Urology Surgery				25/07/2012	GH
	24/07/2012	4 South	General Surgery				26/07/2012	GH
	24/07/2012	4 South	General Surgery				02/08/2012	DS
	25/07/2012	CEAW	Urology Surgery				25/07/2012	GH
	26/07/2012	Maternity Admissions/Assessment Unit	Urology Surgery				07/08/2012	EMC
	26/07/2012	3 South	Urology Surgery				02/08/2012	DS
	27/07/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	28/07/2012	Theatres 1-4 CAH	Anaesthetics				20/09/2012	Brigeen Kelly
	28/07/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	28/07/2012	Trauma Ward	Trauma Surgery				02/08/2012	DS
	29/07/2012	4 South	Vasculur Surgery				02/08/2012	DS
	30/07/2012	Theatres 1-4 CAH	Theatres				10/04/2013	Brigeen Kelly
	30/07/2012	CEAW	General Surgery				31/07/2012	Nichola McClenaghan
	30/07/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	30/07/2012	Kilkeel Health Centre	Outpatients				02/08/2012	DS
	31/07/2012	General OutpatientsTreatment Room	Outpatients				02/08/2012	DS
	31/07/2012	Day Surgery Unit CAH	General Surgery				19/09/2012	Brigeen Kelly
	31/07/2012	Day Surgery Unit CAH	General Surgery					Brigeen Kelly
	31/07/2012	4 South	General Surgery				06/08/2012	AL
	01/08/2012	3 South	Urology Surgery				02/08/2012	GH
	01/08/2012	Fracture Clinic	Outpatients					DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	01/08/2012	Theatres/DPU STH	General Surgery	Irrelevant information redacted by the USI			02/08/2012	Brigeen Kelly
	01/08/2012	Entrance/Exit	Outpatients				28/08/2012	DS
	01/08/2012	Recovery Unit	Outpatients				02/08/2012	DS
	02/08/2012	CEAW	General Surgery				03/08/2012	DS
	02/08/2012	Day Surgery Unit CAH	General Surgery				19/09/2012	Brigeen Kelly
	02/08/2012	Theatres 1-4 CAH	ENT Surey				11/07/2013	DS
	03/08/2012	Fracture Clinic	Outpatients				03/08/2012	DS
	03/08/2012	Theatres 1-4 CAH	Theatres				03/09/2012	Brigeen Kelly
	04/08/2012	1 West Gynae	Urology Surgery			Staff promptly recognised the incorrect dose and reported medical staff to change prescription. Patient did not recieve the incorrect medication. Incident transferred for comment to surgical governance team.	20/08/2012	GH
	04/08/2012	ICU CAH	ICU			All blades to be replaced throughout ATICs division, ordered 2.1.13 BK	20/12/2012	Mary Lennon
	05/08/2012	ICU CAH	ICU				20/09/2012	Mary Lennon
	06/08/2012	Trauma Ward	Trauma Surgery				07/08/2012	DS
	06/08/2012	3 South	Urology Surgery				14/08/2012	GH
	06/08/2012	Male Surgical	General Surgery				06/08/2012	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/08/2012	Theatres DHH	Theatres	Irrelevant information redacted by the USI			20/09/2012	MMA
	08/08/2012	CEAW	ENT Surgery				08/08/2012	DS
	08/08/2012	4 South	General Surgery					DS
	08/08/2012	ICU CAH	ICU				22/11/2012	Mary Lennon
	08/08/2012	Theatres/DPU STH	Theatres				02/01/2013	DS
	09/08/2012	Theatres 1-4 CAH	Theatres				20/09/2012	Brigeen Kelly
	10/08/2012	Theatres DHH	Theatres			? Where / Why this incident occurred. Importance of traceability and accurate timely decontamination records. Importance of accurate record keeping and good communication.	10/03/2013	MW1
	10/08/2012	Paediatric Ward	ENT Surgery				17/08/2012	DS
	10/08/2012	3 South	Urology Surgery				14/08/2012	GH
	11/08/2012	Theatres 1-4 CAH	Theatres				02/01/2013	Brigeen Kelly
	13/08/2012	Theatres 1-4 CAH	Urology Surgery				14/08/2012	GH
	13/08/2012	Theatres 1-4 CAH	Anaesthetics				02/01/2013	Brigeen Kelly
	13/08/2012	Trauma Ward	Trauma Surgery				14/08/2012	GH
	13/08/2012	Orthopaedic Ward	Orthopaedic Surgery				20/08/2012	GH
	14/08/2012	Theatres/DPU STH	General Surgery				30/08/2012	Brigeen Kelly
	14/08/2012	Day Procedure Unit DHH	General Surgery					Brigeen Kelly
	14/08/2012	CEAW	Urology Surgery				04/09/2012	DS
	15/08/2012	Day Procedure Unit DHH	General Surgery				21/08/2012	Brigeen Kelly
	15/08/2012	Theatres 1-4 CAH	General Surgery				17/08/2012	DS
	15/08/2012	Orthopaedic Ward	Orthopaedic Surgery				17/08/2012	DS
	15/08/2012	Day Procedure Unit DHH	General Surgery				17/08/2012	DS
	15/08/2012	Day Surgery Unit CAH	General Surgery					Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	15/08/2012	Theatres/DPU STH	Day Procedure/Surgery	Irrelevant information redacted by the USI		Stress the importance of good record keeping. Also the importance of data protection.	10/04/2013	Brigeen Kelly
	15/08/2012	4 South	Medical Secs/Ward Clerks General Surgery				28/08/2012	DS
	16/08/2012	X-ray Dept (Radiology)	General Surgery				10/09/2012	GH
	16/08/2012	Theatres/DPU STH	Day Procedure/Surgery				31/10/2012	Brigeen Kelly
	17/08/2012	CEAW	ENT Surery				04/09/2012	DS
	17/08/2012	CEAW	General Surgery				04/09/2012	DS
	18/08/2012	4 South	General Surgery				21/08/2012	DS
	19/08/2012	Trauma Ward	Medical Secs/Ward Clerks Trauma and Orthopaedics				20/08/2012	GH
	20/08/2012	CEAW	Breast Surgery				10/09/2012	DS
	20/08/2012	Theatres/DPU STH	General Surgery				28/08/2012	Brigeen Kelly
	20/08/2012	Theatres 1-4 CAH	General Surgery				28/08/2012	Brigeen Kelly
	20/08/2012	Male Surgical	General Surgery				21/08/2012	DS
	20/08/2012	Male Surgical	General Surgery					DS
	20/08/2012	Theatres 1-4 CAH	Anaesthetics			As documented	15/10/2013	Brigeen Kelly
	20/08/2012	Theatres 1-4 CAH	Theatres			Yes - staff aawreness raised regarding labelling of syringes. Bk 9.4.13	10/04/2013	Brigeen Kelly
	21/08/2012	Trauma Ward	Trauma Surgery				22/08/2012	GH
	22/08/2012	Day Surgery Unit CAH	Day Procedure/Surgery			All staff made aware of the importance of confidentiality.	02/11/2012	Brigeen Kelly
	22/08/2012	Day Surgery Unit CAH	Day Procedure/Surgery				11/04/2013	Brigeen Kelly
	22/08/2012	ICU CAH	ICU				02/10/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/08/2012	ICU CAH	ICU	Irrelevant information redacted by the USI			02/10/2012	MW1
	22/08/2012	3 South	Urology Surgery				14/09/2012	GH
	22/08/2012	General Outpatients Reception/Waiting Area	Outpatients				23/08/2012	GH
	22/08/2012	Theatres/DPU STH	General Surgery				30/08/2012	Brigeen Kelly
	23/08/2012	Trauma Ward	Trauma Surgery				10/09/2012	GH
	23/08/2012	Trauma Ward	Trauma Surgery				30/08/2012	DS
	23/08/2012	Theatres/DPU STH	Day Procedure/Surgery				02/11/2012	Brigeen Kelly
	23/08/2012	4 North	General Surgery				29/08/2012	DS
	23/08/2012	CEAW	ENT Surery				10/09/2012	DS
	24/08/2012	Theatres 1-4 CAH	Theatres				02/01/2013	Brigeen Kelly
	24/08/2012	Trauma Ward	Medical Secs/Ward Clerks Trauma and Orthopaedics				30/08/2012	DS
	24/08/2012	CEAW	Urology Surgery				30/08/2012	DS
	24/08/2012	CEAW	Urology Surgery				10/09/2012	DS
	25/08/2012	CT Scanner	ICU				02/01/2013	MW1
	25/08/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	26/08/2012	Male Surgical	General Surgery				19/09/2012	DS
	27/08/2012	Trauma Ward	Trauma Surgery				28/08/2012	DS



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	27/08/2012	Theatres 5-8 CAH	T&O Theatres	Irrelevant information redacted by the USI		T+O keep a record of which patients external fixators are applied to. We have asked the trauma co-ordinator on many occasions to inform us if the patient is then tranferred to the Ulster hospital or the Royal, as if they leave this trust it becomes extremely difficult to track the patient and retrieve our ecuipment after use. We would appreciate the help and support of the Trauma co-ordinator to facilitate this in the future, to ensure that our equipment is returned to us.	18/09/2012	Brigeen Kelly
	27/08/2012	Theatres 5-8 CAH	T&O Theatres			CSSD are going to mark on the set list if any screws are missing or outstanding. I have contacted the suppliers of DVR (Biomet) and asked that they use the Unitas for direct order, to enable faster delivery.	18/09/2012	Brigeen Kelly
	28/08/2012	Theatres 1-4 CAH	Anaesthetics				18/09/2012	Brigeen Kelly
	29/08/2012	Trauma Ward	Trauma Surgery				30/08/2012	DS
	29/08/2012	Theatres 1-4 CAH	Theatres			None	15/10/2013	Brigeen Kelly
	29/08/2012	Orthopaedic Ward	Orthopaedic Surgery				29/08/2012	DS
	30/08/2012	Theatres 1-4 CAH	Theatres			Monthly drain flushing in place	15/10/2013	Laura Murphy
	30/08/2012	Theatres/DPU STH	Outpatients					DS
	30/08/2012	Theatres 1-4 CAH	Theatres			None	15/10/2013	Brigeen Kelly
	30/08/2012	4 South	General Surgery				30/08/2012	DS
	31/08/2012	Theatres DHH	General Surgery					DS
	31/08/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	31/08/2012	Day Surgery Unit CAH	Day Procedure/Surgery				11/04/2013	Brigeen Kelly
	01/09/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	01/09/2012	3 South	ENT Surery				04/12/2012	DS
	03/09/2012	Theatres/DPU STH	Anaesthetics				02/01/2013	Brigeen Kelly
	03/09/2012	Theatres/DPU STH	Chronic Pain Management				11/04/2013	Brigeen Kelly
	03/09/2012	Trauma Ward	Orthopaedic Surgery				04/09/2012	DS
	03/09/2012	Fracture Clinic	Outpatients				03/09/2012	DS
	03/09/2012	Theatres/DPU STH	Chronic Pain Management				11/04/2013	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	03/09/2012	Recovery Unit	Anaesthetics	Irrelevant information redacted by the USI			11/04/2013	Brigeen Kelly
	03/09/2012	Fracture Clinic	Outpatients				03/09/2012	DS
	03/09/2012	Theatres/DPU STH	General Surgery				19/09/2012	Brigeen Kelly
	04/09/2012	Trauma Ward	Trauma Surgery				14/09/2012	GH
	05/09/2012	3 South	ENT Surery				10/09/2012	DS
	06/09/2012	Theatres 5-8 CAH	T&O Theatres			When checking sets pre-operatively be vigilant for any additional items to tray to ensure sterility is maintained.	18/09/2012	Laura Murphy
	06/09/2012	X-ray Dept (Radiology)	Day Procedure/Surgery			It has be agreed with Nursing Staff Radiology syringe which is utilised for the injection of Lidocaine will be immediately discarded after use syringes will not be pre labelled Gallipot with contrast medium will be labelled	11/04/2013	Ushagowri Mavuri
	06/09/2012	1 West Gynae	Urology Surgery				22/10/2012	GH
	06/09/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	06/09/2012	Theatres 5-8 CAH	T&O Theatres				18/09/2012	Laura Murphy
	07/09/2012	Theatres DHH	Theatres			Importance of accurate documentation. All records dated and signed. We found this would be helpful when investigating incidents. SAI review taken place 22/11/12, awaiting report & feedback.	26/11/2013	Brigeen Kelly
	07/09/2012	Day Surgery Unit CAH	Day Procedure/Surgery					Brigeen Kelly
	07/09/2012	4 North	General Surgery				10/09/2012	DS
	08/09/2012	Theatres 1-4 CAH	Theatres			Nil	15/10/2013	Brigeen Kelly
	08/09/2012	4 South	Vasculur Surgery				10/09/2012	AL
	09/09/2012	4 North	General Surgery				19/09/2012	GH
	10/09/2012	Day Procedure Unit DHH	Day Procedure/Surgery				24/01/2013	Brigeen Kelly
	10/09/2012	CEAW	ENT Surery				19/09/2012	GH
	10/09/2012	Male Surgical	General Surgery				14/09/2012	DS
	10/09/2012	Trauma Ward	Trauma Surgery				14/09/2012	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	11/09/2012	4 South	General Surgery	Irrelevant information redacted by the USI			14/09/2012	DS
	11/09/2012	Theatres/DPU STH	Day Procedure/Surgery				10/04/2013	Brigeen Kelly
	11/09/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	11/09/2012	4 South	General Surgery				11/09/2012	DS
	12/09/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	12/09/2012	ICU CAH	Anaesthetics				17/09/2012	Brigeen Kelly
	12/09/2012	Female Surgical/Gynae	General Surgery				14/09/2012	DS
	12/09/2012	CEAW	Urology Surgery				19/09/2012	Nichola McClenaghan
	12/09/2012	3 South	Urology Surgery				12/04/2013	EMC
	13/09/2012	General Outpatients Reception/Waiting Area	Outpatients				14/09/2012	DS
	13/09/2012	ICU CAH	ICU				17/09/2012	Brigeen Kelly
	13/09/2012	4 North	General Surgery				14/09/2012	DS
	13/09/2012	4 North	General Surgery				14/09/2012	DS
	13/09/2012	4 South	General Surgery				14/09/2012	DS
	14/09/2012	Day Surgery Unit CAH	Day Procedure/Surgery			Bottles to be checked at all times by 2 members of staff and signed before using.	23/09/2013	Brigeen Kelly
	14/09/2012	4 South	General Surgery				30/10/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/09/2012	Day Surgery Unit CAH	General Surgery	Irrelevant information redacted by the USI			19/09/2012	Brigeen Kelly
	14/09/2012	Theatres DHH	Theatres			Sharps awareness reiterated throughout teams.	26/11/2013	Brigeen Kelly
	15/09/2012	1 West Gynae	Urology Surgery				21/09/2012	Mrs Patricia Kingsnorth
	16/09/2012	4 South	Breast Surgery				19/09/2012	DS
	16/09/2012	4 North	General Surgery				19/09/2012	DS
	17/09/2012	ICU CAH	ICU			None	26/11/2013	Brigeen Kelly
	17/09/2012	Male Surgical	General Surgery				19/09/2012	DS
	17/09/2012	ICU CAH	ICU				02/10/2012	Brigeen Kelly
	17/09/2012	CEAW	ENT Surery				19/09/2012	DS
	18/09/2012	Fracture Clinic	Outpatients				19/09/2012	DS
	18/09/2012	Fracture Clinic	Outpatients				19/09/2012	DS
	18/09/2012	ICU CAH	ICU				02/10/2012	Helen McGarry
	18/09/2012	ICU CAH	ICU				02/10/2012	Helen McGarry
	18/09/2012	4 North	General Surgery				26/09/2012	DS
	18/09/2012	4 South	General Surgery				19/09/2012	DS
	18/09/2012	Female Surgical/Gynae	General Surgery				19/09/2012	DS
	18/09/2012	Day Surgery Unit CAH	General Surgery				06/10/2012	MMG
	19/09/2012	Colposcopy Clinic	Outpatients				19/09/2012	DS
	19/09/2012	4 South	General Surgery				21/09/2012	DS
	19/09/2012	Theatres 1-4 CAH	Theatres			None	15/10/2013	Brigeen Kelly
	19/09/2012	4 South	General Surgery				21/09/2012	DS
	19/09/2012	Theatres/DPU STH	General Surgery				19/09/2012	DS
	19/09/2012	Theatres 1-4 CAH	Theatres			None	15/10/2013	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	19/09/2012	Day Surgery Unit CAH	Day Procedure/Surgery	Irrelevant information redacted by the USI			12/12/2012	Ushagowri Mavuri
	20/09/2012	Recovery Unit	Recovery Unit				21/09/2012	DS
	20/09/2012	4 South	General Surgery				09/10/2012	DS
	20/09/2012	4 South	General Surgery				09/10/2012	DS
	20/09/2012	Day Surgery Unit CAH	Day Procedure/Surgery			Sr McSherry has spoken to staff involved in this incident as the policy had been followed but attention to important details missed. The policy has been reinforced to all staff and the ramifications of non-deteccion have been highlighted. UMcS 25.10.12	25/10/2012	Ushagowri Mavuri
	20/09/2012	Ophamology Clinic	Outpatients				21/09/2012	DS
	21/09/2012	Theatres 1-4 CAH	Theatres			Clinical supervision session carried out. Prompting of specimen where normal routine tonsils are automatically dosposed of. Gap identified and closed.	15/10/2013	Brigeen Kelly
	21/09/2012	4 South	General Surgery				21/09/2012	DS
	23/09/2012	ICU CAH	ICU					Helen McGarry
	23/09/2012	ICU CAH	ICU				22/03/2013	Helen McGarry
	23/09/2012	ICU CAH	ICU			Nurses on ward should know the importance of transferring critically ill patients to ICU with a qualified nurse present at all times.	22/03/2013	Helen McGarry
	24/09/2012	CEAW	General Surgery				25/09/2012	Nichola McClenaghan
	24/09/2012	ICU CAH	ICU				02/10/2012	Helen McGarry
	24/09/2012	Daisy Day Clinical Centre	Outpatients			Mrs Murray advised this incident had occured in the DPU UNIT AND NOT THE DAY CLINICAL CENTRE	02/10/2012	DS
	25/09/2012	General Outpatients Reception/Waiting Area	Outpatients				28/09/2012	GH
	25/09/2012	4 South	General Surgery				26/09/2012	DS
	25/09/2012	General Outpatients Reception/Waiting Area	Outpatients				25/09/2012	DS
	25/09/2012	Theatres/DPU STH	Ophthalmology				10/10/2012	MMG
	26/09/2012	4 South	General Surgery				28/09/2012	GH
	26/09/2012	4 South	General Surgery				26/09/2012	DS
	26/09/2012	Theatres DHH	Theatres			When fast tracking trays make TSSU staff aware why you are doing that.	26/11/2013	MMA

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	27/09/2012	Fracture Clinic	Outpatients	Irrelevant information redacted by the USI			04/10/2012	GH
	27/09/2012	Day Surgery Unit CAH	General Surgery				30/10/2012	Brigeen Kelly
	28/09/2012	Theatres 1-4 CAH	Theatres			None	15/10/2013	NR Pamela Johnston
	28/09/2012	4 South	General Surgery				01/10/2012	GH
	28/09/2012	4 North	General Surgery					DS
	28/09/2012	4 North	Medical Secs/Ward Clerks - General Surgery				05/10/2012	DS
	30/09/2012	ICU CAH	ICU				02/10/2012	Helen McGarry
	30/09/2012	ICU CAH	ICU				02/10/2012	Helen McGarry
	30/09/2012	4 North	General Surgery				01/10/2012	GH
	30/09/2012	Male Surgical	General Surgery				02/10/2012	PMK
	30/09/2012	Male Surgical	General Surgery				02/10/2012	PMK
	30/09/2012	Recovery Unit	Theatres			Need the availibilty of technical backup to accomodate checking of this trolley between transfers. Dicussions are ongoing between the MDT involved though to date issues continue to arise. We have taken the trolley on a practice run without patient to identify issues with plugs and fuses which give rise to a further incident last week. Another dummy run is planned for am on 19/9/12.	26/11/2013	MMA
	01/10/2012	Day Surgery Unit CAH	Day Procedure/Surgery			as above	23/09/2013	Brigeen Kelly
	01/10/2012	Male Surgical	General Surgery				02/10/2012	PMK

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	01/10/2012	X-ray Dept (Radiology)	Day Procedure/Surgery	Irrelevant information redacted by the USI		To improve prioritisation of workload	04/10/2012	MMG
	02/10/2012	ICU CAH	ICU				03/10/2012	Helen McGarry
	02/10/2012	ICU CAH	ICU				03/10/2012	Helen McGarry
	02/10/2012	CEAW	Urology Surgery				02/10/2012	DS
	02/10/2012	4 South	General Surgery				09/10/2012	DS
	02/10/2012	Theatres/DPU STH	General Surgery			Ds - escalated to SG & AN	30/10/2012	Brigeen Kelly
	04/10/2012	Theatres 1-4 CAH	Theatres				09/10/2012	Brigeen Kelly
	04/10/2012	4 North	ICU				09/10/2012	DS
	04/10/2012	Theatres 1-4 CAH	Theatres			Increased vigilance throughout process.	15/10/2013	Brigeen Kelly
	04/10/2012	Recovery Unit	General Surgery				10/10/2012	DS
	04/10/2012	Day Surgery Unit CAH	Day Procedure/Surgery			Ensure staff know to check the importance of having available all equipment/drugs etc prior to lists	13/03/2013	Brigeen Kelly
	04/10/2012	Theatres/DPU STH	Day Procedure/Surgery				24/01/2013	Brigeen Kelly
	05/10/2012	ICU CAH	ICU				21/12/2012	Helen McGarry
	05/10/2012	ICU CAH	ICU				09/10/2012	Helen McGarry
	05/10/2012	ICU CAH	ICU				30/10/2012	Brigeen Kelly
	05/10/2012	Fracture Clinic	Outpatients				11/10/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	06/10/2012	ICU CAH	ICU	Irrelevant information redacted by the USI		Staff advised to check infusions on handover.	26/11/2013	Brigeen Kelly
	06/10/2012	Theatres/DPU STH	General Surgery					Brigeen Kelly
	06/10/2012	Orthopaedic Ward	Trauma Surgery				10/10/2012	DS
	06/10/2012	Trauma Ward	Trauma Surgery				10/10/2012	DS
	07/10/2012	ICU CAH	ICU				30/10/2012	Brigeen Kelly
	07/10/2012	4 South	Vasculur Surgery				10/10/2012	DS
	08/10/2012	Female Surgical/Gynae	General Surgery				10/10/2012	DS
	08/10/2012	Orthopaedic Ward	Orthopaedic Surgery				09/10/2012	DS
	09/10/2012	Theatres DHH	Theatres			None	17/12/2013	Brigeen Kelly
	09/10/2012	Theatres/DPU STH	Theatres			as documented	17/12/2013	Brigeen Kelly
	10/10/2012	Theatres 1-4 CAH	Theatres			New BSTp system in use to prevent these issues arising again	15/10/2013	Brigeen Kelly
	10/10/2012	Theatres 1-4 CAH	Theatres					Brigeen Kelly
	10/10/2012	Day Surgery Unit CAH	General Surgery				23/04/2013	Brigeen Kelly
	10/10/2012	Day Surgery Unit CAH	General Surgery					GH
	10/10/2012	Day Surgery Unit CAH	General Surgery					Brigeen Kelly
	10/10/2012	Day Surgery Unit CAH	Day Procedure/Surgery				07/05/2013	Brigeen Kelly
	10/10/2012	Day Surgery Unit CAH	General Surgery				07/05/2013	Brigeen Kelly



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	11/10/2012	4 North	General Surgery	Irrelevant information redacted by the USI			12/10/2012	Mr Stephen Mahon
	11/10/2012	Trauma Ward	Trauma Surgery				22/10/2012	DS
	11/10/2012	Male Surgical	General Surgery				12/10/2012	DS
	12/10/2012	Trauma Ward	Trauma Surgery				16/10/2012	DS
	12/10/2012	3 South	Urology Surgery				16/10/2012	DS
	15/10/2012	Theatres 1-4 CAH	General Surgery					DS
	16/10/2012	ICU CAH	ICU				30/10/2012	Brigeen Kelly
	16/10/2012	General Surgery Clinic	Outpatients				22/10/2012	DS
	17/10/2012	Theatres 5-8 CAH	T&O Theatres				13/12/2012	Laura Murphy
	17/10/2012	Orthopaedic Ward	Orthopaedic Surgery				19/10/2012	DS
	17/10/2012	Orthopaedic Ward	Orthopaedic Surgery				19/10/2012	DS
	17/10/2012	Theatres 1-4 CAH	Theatres				16/11/2012	Brigeen Kelly
	18/10/2012	ICU CAH	ICU				12/11/2012	Brigeen Kelly
	18/10/2012	Orthopaedic Ward	Orthopaedic Surgery				29/10/2012	Maureen Farley
	18/10/2012	Theatres 1-4 CAH	Theatres			BSTP up and running - should have no further issues of no signatures.	15/10/2013	Brigeen Kelly
	18/10/2012	3 South	Urology Surgery				22/10/2012	DS
	18/10/2012	Chest Clinic	Outpatients				29/10/2012	DS
	18/10/2012	Recovery Unit	Anaesthetics				11/04/2013	Brigeen Kelly
	18/10/2012	Theatres 1-4 CAH	ENT Surery				16/11/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	18/10/2012	Theatres 1-4 CAH	Theatres	Irrelevant information redacted by the USI		as above - Nil of not	15/10/2013	Brigeen Kelly
	19/10/2012	ICU CAH	ICU				12/11/2012	Brigeen Kelly
	19/10/2012	3 South	ENT Surery				22/10/2012	GH
	19/10/2012	X-ray Dept (Radiology)	General Surgery				23/10/2012	DS
	19/10/2012	4 South	General Surgery				23/10/2012	DS
	19/10/2012	4 South	General Surgery				23/10/2012	DS
	19/10/2012	4 South	General Surgery				23/10/2012	DS
	19/10/2012	4 North	General Surgery				29/10/2012	GH
	21/10/2012	Theatres DHH	Theatres			None	17/12/2013	MMA
	22/10/2012	3 South	Urology Surgery				23/10/2012	DS
	22/10/2012	Theatres 1-4 CAH	Theatres			As above	15/10/2013	Brigeen Kelly
	22/10/2012	Theatres 1-4 CAH	Theatres			Nil	15/10/2013	Brigeen Kelly
	22/10/2012	Opthamology Clinic	Outpatients				23/10/2012	DS
	22/10/2012	Theatres 1-4 CAH	Theatres		K		12/11/2012	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/10/2012	ENT Clinic	Outpatients	Irrelevant information redacted by the USI			23/10/2012	DS
	23/10/2012	Theatres 1-4 CAH	Theatres			None	15/10/2013	Brigeen Kelly
	23/10/2012	Day Procedure Unit DHH	Day Procedure/Surgery				07/05/2013	Brigeen Kelly
	24/10/2012	Theatres 5-8 CAH	T&O Theatres			At satff meeting on monday morning we will stress the importance of instumentation checks.	30/10/2012	Laura Murphy
	24/10/2012	3 South	ENT Surery				24/10/2012	DS
	25/10/2012	Female Surgical/Gynae	General Surgery				29/10/2012	DS
	25/10/2012	4 North	General Surgery					DS
	26/10/2012	ICU CAH	ICU				12/11/2012	Brigeen Kelly
	26/10/2012	General Outpatients Reception/Waiting Area	Outpatients				13/11/2012	DS
	26/10/2012	Orthopaedic Ward	Orthopaedic Surgery				26/10/2012	DS
	26/10/2012	3 South	ENT Surery				29/10/2012	DS
	27/10/2012	Theatres 1-4 CAH	Theatres			None	15/10/2013	Brigeen Kelly
	27/10/2012	Trauma Ward	Trauma Surgery				29/10/2012	DS
	28/10/2012	Theatres 5-8 CAH	T&O Theatres			Closed by ATICs for further investigation from Trauma Ward 2.1.13 BK	02/01/2013	Laura Murphy
	28/10/2012	Trauma Ward	Trauma Surgery				29/10/2012	DS
	29/10/2012	Fracture Clinic	Medical Secs/Ward Clerks - Outpatients				30/10/2012	DS
	30/10/2012	4 North	General Surgery				31/10/2012	DS
	30/10/2012	4 South	General Surgery				30/10/2012	DS
	30/10/2012	4 South	General Surgery				16/11/2012	DS
	30/10/2012	Day Surgery Unit CAH	Day Procedure/Surgery			To ensure all previous patienst documenttaion has left the procedure room with them.		MW1

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	31/10/2012	3 South	Urology Surgery	Irrelevant information redacted by the USI			16/11/2012	DS
	31/10/2012	CEAW	General Surgery				09/11/2012	DS
	31/10/2012	Theatres 1-4 CAH	Theatres			New equipment purchased in use.	15/10/2013	Brigeen Kelly
	31/10/2012	Male Surgical	General Surgery				05/11/2012	PMK
	31/10/2012	X-ray Dept (Radiology)	Day Procedure/Surgery				07/05/2013	Ushagowri Mavuri
	01/11/2012	4 South	General Surgery				16/11/2012	AL
	01/11/2012	4 North	General Surgery				16/11/2012	DS
	02/11/2012	Theatres 5-8 CAH	Anaesthetics				12/11/2012	Brigeen Kelly
	02/11/2012	Day Surgery Unit CAH	Day Procedure/Surgery			To contatc lab in advance of urgent specimen being delivered and ensure the time required for the test is reported back to the team leader and surgeon to ensure timely decisions are made.	23/09/2013	Ushagowri Mavuri
	02/11/2012	3 South	Urology Surgery				16/11/2012	DS
	03/11/2012	Theatres 1-4 CAH	Anaesthetics				11/04/2013	Brigeen Kelly
	03/11/2012	Theatres 1-4 CAH	Theatres			Room is on urgent capital list for upgrading with the next financial year.	15/10/2013	Brigeen Kelly
	03/11/2012	4 North	General Surgery				16/11/2012	Brigeen Kelly
	04/11/2012	4 South	General Surgery				05/11/2012	DS
	04/11/2012	Entrance/Exit	General Surgery				05/11/2012	DS
	05/11/2012	4 North	General Surgery				09/11/2012	Mr Stephen Mahon

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	05/11/2012	4 North	General Surgery	Irrelevant information redacted by the USI			09/11/2012	Mr Stephen Mahon
	05/11/2012	Orthopaedic Ward	Orthopaedic Surgery				09/11/2012	DS
	05/11/2012	4 North	General Surgery				16/11/2012	DS
	05/11/2012	ICU CAH	ICU				12/11/2012	Brigeen Kelly
	05/11/2012	4 North	General Surgery				04/12/2012	DS
	05/11/2012	Trauma Ward	Trauma Surgery				09/11/2012	DS
	06/11/2012	ICU CAH	ICU			As detailed above.	04/12/2012	Brigeen Kelly
	06/11/2012	Theatres/DPU STH	Day Procedure/Surgery				07/05/2013	Mrs Marti McKenna
	06/11/2012	ICU CAH	ICU				22/03/2013	Brigeen Kelly
	06/11/2012	ICU CAH	ICU				22/03/2013	Brigeen Kelly
	07/11/2012	Trauma Ward	Trauma Surgery				14/12/2012	DS
	07/11/2012	Theatres 1-4 CAH	Theatres				12/11/2012	Brigeen Kelly
	07/11/2012	4 North	General Surgery				16/11/2012	Mr Stephen Mahon
	07/11/2012	4 North	General Surgery				09/11/2012	DS
	07/11/2012	4 North	General Surgery				09/11/2012	Mr Stephen Mahon
	07/11/2012	4 North	General Surgery				16/11/2012	Mr Stephen Mahon
	07/11/2012	4 North	General Surgery			4- meeting with FAC & SEC - please see previous IR1 as same detail . S/N to be referred to OH	16/11/2012	Mr Stephen Mahon

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/11/2012	4 North	General Surgery	Irrelevant information redacted by the USI			16/11/2012	DS
	08/11/2012	ICU CAH	ICU				17/12/2012	MMG
	08/11/2012	CEAW	General Surgery				06/03/2013	GH
	08/11/2012	4 North	General Surgery				09/11/2012	Mr Stephen Mahon
	09/11/2012	X-ray Dept (Radiology)	Day Procedure/Surgery			To ensure all staff are appropriately trained in the washing of endoscopes, this however has been taken over by CSSD in 2013.	23/09/2013	Ushagowri Mavuri
	09/11/2012	ICU CAH	ICU				09/12/2012	Brigeen Kelly
	09/11/2012	4 North	Breast Surgery				21/01/2013	DS
	09/11/2012	Trauma Ward	Trauma Surgery				13/11/2012	DS
	09/11/2012	Day Surgery Unit CAH	Day Procedure/Surgery				07/05/2013	Ushagowri Mavuri
	10/11/2012	4 South	General Surgery				13/11/2012	DS
	10/11/2012	CEAW	General Surgery				13/11/2012	DS
	10/11/2012	Female Surgical/Gynae	General Surgery				16/11/2012	HF
	11/11/2012	Trauma Ward	Trauma Surgery				13/11/2012	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/11/2012	ICU CAH	ICU	Irrelevant information redacted by the USI			09/05/2013	Brigeen Kelly
	12/11/2012	Theatres 5-8 CAH	T&O Theatres				11/04/2013	Laura Murphy
	12/11/2012	Paediatric Ward	General Surgery				16/11/2012	DS
	12/11/2012	Male Surgical	General Surgery				13/11/2012	DS
	12/11/2012	ICU CAH	ICU				17/04/2013	MMG
	12/11/2012	ICU CAH	ICU				04/12/2012	Brigeen Kelly
	13/11/2012	4 South	General Surgery				16/11/2012	DS
	13/11/2012	Trauma Ward	Trauma Surgery				28/11/2012	GH
	13/11/2012	Theatres DHH	Theatres			I have explained to staff the importance off checking the table base is securley in place to avoid repeat of similair incident	17/12/2013	Brigeen Kelly
	13/11/2012	CEAW	ENT Surery				16/11/2012	DS
	14/11/2012	Male Surgical	General Surgery				28/01/2013	PMK
	14/11/2012	4 North	General Surgery				16/11/2012	DS
	14/11/2012	Trauma Ward	Trauma Surgery				16/11/2012	DS
	15/11/2012	Paediatric Ward	ENT Surery				30/11/2012	DS
	15/11/2012	4 North	General Surgery				11/02/2013	GH
	15/11/2012	4 North	General Surgery				28/11/2012	DS
	15/11/2012	Recovery CAH	Recovery Unit			query need for review earlier in the day re continuing to operate on patients when no bed available and patients blocked in wards and ED	11/04/2013	Brigeen Kelly
	16/11/2012	4 North	General Surgery				30/11/2012	GH
	16/11/2012	Day Surgery Unit CAH	Day Procedure/Surgery			n/a	07/05/2013	Ushagowri Mavuri
	16/11/2012	Trauma Ward	Trauma Surgery				28/11/2012	DS
	16/11/2012	4 South	General Surgery				04/12/2012	Tracey McGuigan
	17/11/2012	4 North	General Surgery				20/11/2012	DS
	17/11/2012	4 North	General Surgery				04/12/2012	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	17/11/2012	Male Surgical	General Surgery	Irrelevant information redacted by the USI			04/12/2012	GH
	17/11/2012	Recovery Unit	Theatres				25/03/2013	MMA
	19/11/2012	Theatres/DPU STH	General Surgery				04/12/2012	Brigeen Kelly
	19/11/2012	4 North	General Surgery				22/11/2012	DS
	19/11/2012	4 South	General Surgery				04/12/2012	Tracey McGuigan
	19/11/2012	3 South	Urology Surgery				20/11/2012	DS
	19/11/2012	Day Surgery Unit CAH	Day Procedure/Surgery				23/09/2013	Ushagowri Mavuri
	19/11/2012	Trauma Ward	Trauma Surgery				28/11/2012	DS
	19/11/2012	X-ray Dept (Radiology)	General Surgery				07/05/2013	Brigeen Kelly
	19/11/2012	X-ray Dept (Radiology)	General Surgery				07/05/2013	Brigeen Kelly
	20/11/2012	Paediatric Ward	ENT Surery				22/11/2012	DS
	20/11/2012	Female Surgical/Gynae	General Surgery				21/11/2012	DS
	20/11/2012	4 South	General Surgery				04/12/2012	DS



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/11/2012	Car Park/Grounds	Outpatients	Irrelevant information redacted by the USI			20/11/2012	DS
	20/11/2012	ICU CAH	ICU			none	31/12/2013	Brigeen Kelly
	20/11/2012	Theatres 1-4 CAH	Theatres			Communication & planning in these instances is vital to a condusive environment in emergency situation.Bk 4.12.12	04/12/2012	Brigeen Kelly
	21/11/2012	Orthopaedic Ward	Orthopaedic Surgery				22/11/2012	DS
	21/11/2012	Theatres 5-8 CAH	T&O Theatres				13/12/2012	Laura Murphy
	22/11/2012	ICU CAH	ICU				09/05/2013	Helen McGarry
	23/11/2012	Female Surgical/Gynae	General Surgery				28/11/2012	DS
	24/11/2012	Paediatric Ward	ENT Surery			communication	25/11/2013	Dr David Grier
	26/11/2012	Day Surgery Unit CAH	Day Procedure/Surgery			follow DSU /Trust policies /procedures /protocols	07/01/2013	Brigeen Kelly
	26/11/2012	Theatres 5-8 CAH	T&O Theatres				13/12/2012	Laura Murphy
	26/11/2012	X-ray Dept (Radiology)	General Surgery			as above	07/05/2013	Brigeen Kelly
	27/11/2012	4 South	General Surgery				04/12/2012	DS
	27/11/2012	Day Surgery Unit CAH	General Surgery			Care needs to be taken by Secretaries/Schedulars to ensure patienmts are booked onto appropiate lists/depts	07/05/2013	Brigeen Kelly
	27/11/2012	Day Surgery Unit CAH	General Surgery			More care needs to be taken by schedulers when adding patients to list to ensure that they are scheduled onto theatre lists for correct procedures	07/05/2013	Brigeen Kelly
	27/11/2012	4 South	Vasculur Surgery				04/12/2012	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	27/11/2012	3 South	Urology Surgery	Irrelevant information redacted by the USI			14/01/2013	Sharon Holmes
	27/11/2012	Day Surgery Unit CAH	Day Procedure/Surgery			as above	07/05/2013	Ushagowri Mavuri
	27/11/2012	4 North	General Surgery				28/11/2012	DS
	27/11/2012	Theatres 1-4 CAH	Theatres			Personal Information redacted by the USI	15/10/2013	Brigeen Kelly
	28/11/2012	X-ray Dept (Radiology)	Day Procedure/Surgery			Agreement need to met with acute services and Head of medicine to ensure that patients attending Radiology have a bed post procedure and are not expected to lie in the deptment following biopsies etc post procedures	07/05/2013	Brigeen Kelly
	28/11/2012	4 South	General Surgery				05/12/2012	DS
	28/11/2012	Female Surgical/Gynae	General Surgery				05/12/2012	DS
	28/11/2012	Day Surgery Unit CAH	Day Procedure/Surgery				07/05/2013	Ushagowri Mavuri
	28/11/2012	Theatres 1-4 CAH	Theatres				14/03/2013	Brigeen Kelly
	29/11/2012	ICU CAH	ICU				04/12/2012	Brigeen Kelly
	29/11/2012	ICU CAH	ICU				04/12/2012	Brigeen Kelly
	29/11/2012	Theatres 1-4 CAH	Anaesthetics			Reinforced the importance of checking the ampoules and not replacing single amps back into boxes alone, 2 nurse to check if there is any medication being replaced back into boxes.	15/10/2013	Brigeen Kelly
	29/11/2012	Male Surgical	General Surgery				29/11/2012	GH
	29/11/2012	Female Surgical/Gynae	General Surgery				05/12/2012	DS
	29/11/2012	Day Surgery Unit CAH	Day Procedure/Surgery				07/05/2013	Ushagowri Mavuri
	30/11/2012	Refraction Clinic	Outpatients				18/12/2012	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler	
Irrelevant information redacted by the USI	01/12/2012	4 North	General Surgery	Irrelevant information redacted by the USI				14/12/2012	DS
	03/12/2012	Day Surgery Unit CAH	Day Procedure/Surgery					07/05/2013	Ushagowri Mavuri
	03/12/2012	4 North	General Surgery					04/12/2012	DS
	03/12/2012	General Outpatients Treatment Room	Outpatients					18/12/2012	Mr Nigel McClelland
	03/12/2012	Trauma Ward	Trauma Surgery					05/12/2012	DS
	04/12/2012	Male Surgical	General Surgery					04/12/2012	PMK
	05/12/2012	4 North	General Surgery					05/12/2012	DS
	05/12/2012	Recovery Unit	Day Procedure/Surgery				To ensure patient are checked on a regular basis and are asked regarding their comfort.	23/09/2013	Brigean Kelly
	05/12/2012	Trauma Ward	Trauma Surgery					05/12/2012	DS
	06/12/2012	Trauma Ward	Trauma Surgery					06/12/2012	DS
	07/12/2012	Theatres 1-4 CAH	Theatres					13/12/2012	Brigean Kelly
	07/12/2012	ICU CAH	ICU					02/01/2013	Brigean Kelly
	07/12/2012	Paediatric Ward	ENT Surgery					14/12/2012	DS
	07/12/2012	Paediatric Ward	ENT Surgery					14/12/2012	DS
	08/12/2012	3 South	Urology Surgery					17/12/2012	DS
	08/12/2012	1 West Gynae	General Surgery						DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	09/12/2012	4 South	General Surgery	Irrelevant information redacted by the USI			17/12/2012	Tracey McGuigan
	10/12/2012	Day Surgery Unit CAH	Day Procedure/Surgery				13/12/2012	Brigeen Kelly
	10/12/2012	3 South	Urology Surgery				18/12/2012	DS
	10/12/2012	3 South	General Surgery				21/12/2012	DS
	10/12/2012	Theatres/DPU STH	General Surgery				14/12/2012	Brigeen Kelly
	11/12/2012	Theatres 1-4 CAH	Theatres				02/01/2013	Brigeen Kelly
	11/12/2012	4 South	General Surgery				17/12/2012	Tracey McGuigan
	11/12/2012	Day Surgery Unit CAH	General Surgery				18/12/2012	Brigeen Kelly
	11/12/2012	Corridor/Stairs	General Surgery					DS
	11/12/2012	Trauma Ward	Trauma Surgery				18/12/2012	DS
	11/12/2012	Theatres/DPU STH	Theatres			as documented	17/12/2013	Brigeen Kelly
	11/12/2012	4 South	General Surgery				18/12/2012	DS
	11/12/2012	Day Surgery Unit CAH	General Surgery				18/12/2012	Brigeen Kelly
	12/12/2012	4 South	General Surgery				18/12/2012	DS
	12/12/2012	4 South	General Surgery				18/12/2012	DS
	12/12/2012	Theatres/DPU STH	General Surgery				18/12/2012	Brigeen Kelly
	12/12/2012	CEAW	Urology Surgery				14/12/2012	Nichola McClenaghan
	13/12/2012	Male Surgical	General Surgery				08/04/2013	PMK
	13/12/2012	3 South	ENT Surery				14/12/2012	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/12/2012	X-ray Dept (Radiology)	Day Procedure/Surgery	Irrelevant information redacted by the USI		Regarding the contaminate - pertinent to check all equipment prior to use.	23/09/2013	Ushagowri Mavuri
	14/12/2012	Trauma Ward	Trauma Surgery				18/12/2012	DS
	14/12/2012	ICU CAH	ICU				02/01/2013	Brigeen Kelly
	14/12/2012	ICU CAH	ICU				02/01/2013	Brigeen Kelly
	14/12/2012	X-ray Dept (Radiology)	Day Procedure/Surgery			wards need to prepare patients appropriately for radiology procedures	23/09/2013	Ushagowri Mavuri
	14/12/2012	Orthopaedic Ward	Orthopaedic Surgery			ds - Shared with other areas for learning	11/12/2013	David Cardwell
	15/12/2012	4 South	General Surgery				17/12/2012	Tracey McGuigan
	15/12/2012	4 North	General Surgery				18/12/2012	DS
	15/12/2012	Orthopaedic Ward	Orthopaedic Surgery				18/12/2012	DS
	15/12/2012	Recovery Unit	Day Procedure/Surgery			All handsets to be checked daily. See NIAIC closure letter	23/09/2013	Brigeen Kelly
	16/12/2012	4 South	General Surgery				17/12/2012	Tracey McGuigan
	17/12/2012	Day Surgery Unit CAH	Day Procedure/Surgery				15/02/2013	Brigeen Kelly
	17/12/2012	4 North	General Surgery				18/12/2012	DS
	17/12/2012	4 South	General Surgery			Communication break down in relation to transferring patient.	21/12/2012	Tracey McGuigan
	17/12/2012	Theatres 1-4 CAH	Theatres				02/01/2013	Brigeen Kelly
	17/12/2012	4 South	General Surgery				17/12/2012	Tracey McGuigan
	17/12/2012	Theatres DHH	General Surgery				14/01/2013	Brigeen Kelly
	18/12/2012	CEAW	General Surgery				18/12/2012	DS
	18/12/2012	Theatres 1-4 CAH	Theatres				02/01/2013	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	18/12/2012	Recovery CAH	Recovery Unit	Irrelevant information redacted by the USI			02/01/2013	JAR
	18/12/2012	Theatres DHH	Theatres			Weekly check on invoices to ensure dept not been overchaged.	25/03/2013	Brigeen Kelly
	19/12/2012	4 South	General Surgery				21/12/2012	DS
	19/12/2012	X-ray Dept (Radiology)	Theatres			None - no requirement to purchase a further scope of this nature at present due to the low numbers of patienst requiring this treatment	17/12/2013	Ushagowri Mavuri
	19/12/2012	Trauma Ward	Trauma Surgery				19/12/2012	DS
	20/12/2012	4 North	General Surgery				11/01/2013	DS
	21/12/2012	ICU CAH	ICU				02/01/2013	Brigeen Kelly
	21/12/2012	CEAW	Urology Surgery				21/12/2012	DS
	21/12/2012	4 North	General Surgery				27/12/2012	DS
	21/12/2012	Fracture Clinic	Outpatients				27/12/2012	DS
	22/12/2012	Orthopaedic Ward	Orthopaedic Surgery				27/12/2012	DS
	22/12/2012	Trauma Ward	Trauma Surgery			Ds - more vigilance required with PODs	11/12/2013	David Cardwell
	23/12/2012	Recovery Unit	Anaesthetics					Brigeen Kelly
	24/12/2012	3 South	Urology Surgery			Addressed with Dr	02/01/2014	Martina Corrigan
	24/12/2012	General Outpatients Reception/Waiting Area	Outpatients				04/01/2013	DS
	25/12/2012	Trauma Ward	Trauma Surgery				27/12/2012	DS
	26/12/2012	4 South	General Surgery				27/12/2012	DS
	26/12/2012	General OutpatientsTreatment Room	Outpatients			nil of note	16/01/2014	Connie Connolly
	27/12/2012	Orthopaedic Clinic	Outpatients				27/12/2012	DS
	28/12/2012	ICU CAH	ICU				02/01/2013	Brigeen Kelly
	28/12/2012	Theatres DHH	Theatres			As there is no O.H onsite at DHH for staff who require immediate treatment the only alternative is A&E which often incurs along waiting time. Could staff on duty be prioritised in A&E?	10/04/2013	Brigeen Kelly

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Irrelevant information redacted by the USI	29/12/2012	3 South	Urology Surgery	Irrelevant information redacted by the USI			18/02/2013	GH
	29/12/2012	4 South	General Surgery				14/01/2013	Tracey McGuigan
	31/12/2012	Trauma Ward	Trauma Surgery				02/01/2013	GH
	31/12/2012	Theatres DHH	Theatres				02/01/2013	MMA
	02/01/2013	Theatres DHH	ENT Surery				02/01/2013	GH
	02/01/2013	Theatres/DPU STH	General Surgery					Brigeen Kelly
	02/01/2013	Theatres DHH	Theatres			Leads should be handled with care and do generate heat when plugged into system.	17/12/2013	Brigeen Kelly
	02/01/2013	Theatres DHH	ENT Surery					GH
	02/01/2013	Theatres 5-8 CAH	T&O Theatres				11/04/2013	Brigeen Kelly
	02/01/2013	ICU CAH	ICU			none	31/12/2013	Brigeen Kelly
	03/01/2013	Trauma Ward	Trauma Surgery				04/01/2013	DS
	03/01/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Continual maintenance and servicing on all equipment required and kept up to date.	23/09/2013	Mr Nigel McClelland
	03/01/2013	3 South	ENT Surery				04/01/2013	DS
	03/01/2013	3 South	ENT Surery				04/01/2013	DS
	03/01/2013	Female Surgical/Gynae	General Surgery				04/01/2013	DS
	04/01/2013	3 South	ENT Surery				07/01/2013	DS
	05/01/2013	4 South	General Surgery				14/01/2013	DS
	05/01/2013	Female Surgical/Gynae	General Surgery				07/01/2013	DS
	06/01/2013	Theatres 1-4 CAH	Anaesthetics			as documented	30/12/2013	Brigeen Kelly
	06/01/2013	Male Surgical	Medical Secs/Ward Clerks - General Surgery				11/01/2013	DS
	06/01/2013	3 South	Urology Surgery				07/01/2013	DS
	07/01/2013	CEAW	General Surgery				07/01/2013	Nichola McClenaghan
	07/01/2013	Paediatric Ward	ENT Surery				28/01/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	08/01/2013	ICU CAH	ICU	Irrelevant information redacted by the USI			11/01/2013	Brigeen Kelly
	08/01/2013	CEAW	Urology Surgery				18/01/2013	DS
	08/01/2013	3 South	Urology Surgery				18/01/2013	DS
	08/01/2013	4 South	General Surgery				23/01/2013	DS
	08/01/2013	ICU CAH	ICU			il	14/03/2014	Brigeen Kelly
	09/01/2013	ICU CAH	ICU					Brigeen Kelly
	09/01/2013	Theatres 1-4 CAH	Day Procedure/Surgery			roblem under review to be addressed if further delays	23/09/2013	Ushagowri Mavuri
	09/01/2013	4 North	General Surgery				14/01/2013	DS
	10/01/2013	ICU CAH	ICU			one	20/02/2013	MMG
	10/01/2013	Day Surgery Unit CAH	Day Procedure/Surgery			s above importance og maintaning proper moving /handling techniques	23/09/2013	Ushagowri Mavuri
	10/01/2013	Day Surgery Unit CAH	Day Procedure/Surgery			s above	23/09/2013	Ushagowri Mavuri
	10/01/2013	X-ray Dept (Radiology)	Day Procedure/Surgery			s above	23/09/2013	Ushagowri Mavuri
	11/01/2013	Male Surgical	General Surgery				15/01/2013	DS
	11/01/2013	Theatres 1-4 CAH	Anaesthetics			Remove all prefilled amiodarone syringes and replace with a box of ampoules	11/01/2013	CMA
	11/01/2013	Theatres 5-8 CAH	T&O Theatres			nsure until situation rectified if blood will not be available until the patient is on the ward hat prescription for blood is over 2-4 hours.	11/04/2013	Laura Murphy
	11/01/2013	CEAW	Urology Surgery				18/01/2013	DS



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	11/01/2013	ICU CAH	ICU	Irrelevant information redacted by the USI		none	31/12/2013	MMG
	12/01/2013	3 South	Urology Surgery				15/01/2013	DS
	12/01/2013	Male Surgical	General Surgery				28/01/2013	AL
	12/01/2013	3 South	Urology Surgery				16/01/2013	DS
	12/01/2013	Trauma Ward	Trauma Surgery				28/01/2013	DS
	12/01/2013	3 South	General Surgery				21/01/2013	DS
	13/01/2013	Male Surgical	General Surgery				29/01/2013	AL
	13/01/2013	3 South	Urology Surgery			share with wd sisters	11/12/2013	GH
	14/01/2013	4 South	General Surgery				15/01/2013	DS
	14/01/2013	4 North	General Surgery				28/01/2013	DS
	15/01/2013	Car Park/Grounds	Outpatients				17/01/2013	Connie Connolly
	15/01/2013	Car Park/Grounds	Outpatients				29/01/2013	DS
	15/01/2013	Theatres/DPU STH	Day Procedure/Surgery			All staff need to be aware of the need to follow the SOP for changing chemicals. Proper checking procedures need to be adhered to and documentation completed in accordance with the Trust Record Keeping Standards(2009)	23/09/2013	Brigeen Kelly
	15/01/2013	Car Park/Grounds	Outpatients				17/01/2013	Connie Connolly
	15/01/2013	Car Park/Grounds	Outpatients				17/01/2013	Connie Connolly
	15/01/2013	ICU CAH	ICU			none	24/12/2013	MMG
	15/01/2013	Theatres/DPU STH	ENT Surery				15/01/2013	DS
	17/01/2013	Theatres 1-4 CAH	Theatres			As documented - noticed prior to use - evidence of staff vigilance. BK	17/12/2013	NR Pamela Johnston
	17/01/2013	Theatres DHH	ENT Surery					GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	17/01/2013	X-ray Dept (Radiology)	Day Procedure/Surgery	Irrelevant information redacted by the USI		To ensure adequate bed provision for post procedure patients.	23/09/2013	Ushagowri Mavuri
	18/01/2013	Theatres 1-4 CAH	Theatres				19/03/2013	Brigeeen Kelly
	18/01/2013	4 South	General Surgery				29/01/2013	GH
	18/01/2013	Female Surgical/Gynae	General Surgery				18/01/2013	DS
	18/01/2013	ICU CAH	ICU				11/02/2013	MMG
	18/01/2013	Theatres/DPU STH	Day Procedure/Surgery			as documented	28/05/2014	Mrs Marti McKenna
	20/01/2013	4 North	General Surgery				29/01/2013	DS
	20/01/2013	4 South	General Surgery					Tracey McGuigan
	20/01/2013	Male Surgical	General Surgery				24/01/2013	GH
	21/01/2013	Theatres/DPU STH	General Surgery				18/02/2013	Brigeeen Kelly
	21/01/2013	Theatres 1-4 CAH	Anaesthetics			all staff advised of medicines code	30/12/2013	NR Pamela Johnston
	21/01/2013	ICU CAH	ICU			None	24/12/2013	MMG
	21/01/2013	ICU CAH	ICU			none	12/02/2013	MMG
	21/01/2013	Orthopaedic Ward	Orthodontics				28/01/2013	DS
	21/01/2013	4 North	General Surgery				25/01/2013	DS
	21/01/2013	Discharge Lounge	Outpatients			as above		Connie Connolly
	22/01/2013	Cellular Pathology Lab	Theatres			specimen procedure reiterated to all staff & surgeons regarding the processing of specimens through the unit	17/12/2013	Brigeeen Kelly
	23/01/2013	Female Surgical/Gynae	General Surgery				25/01/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	23/01/2013	4 North	General Surgery	Irrelevant information redacted by the USI			25/02/2013	DS
	24/01/2013	Theatres 5-8 CAH	Trauma Surgery				01/02/2013	DS
	24/01/2013	ENT Clinic	Outpatients				29/01/2013	David Cardwell
	24/01/2013	ICU CAH	Anaesthetics				10/04/2013	MMG
	24/01/2013	Theatres 1-4 CAH	Theatres			As above	17/12/2013	NR Pamela Johnston
	28/01/2013	Theatres DHH	Theatres			Up date stock levels	17/12/2013	John Carroll
	28/01/2013	Theatres 5-8 CAH	Orthopaedic Surgery				29/01/2013	DS
	28/01/2013	Theatres 5-8 CAH	Orthopaedic Surgery				29/01/2013	DS
	29/01/2013	Theatres 1-4 CAH	Theatres			all staff advised regarding the importance oif protecting the eyes and ensuring they are safely closed with tape or cornea care.	17/12/2013	NR Pamela Johnston
	29/01/2013	Trauma Ward	Trauma Surgery				30/01/2013	DS
	29/01/2013	Trauma Ward	Trauma Surgery				30/01/2013	GH
	29/01/2013	Emergency Department DHH	Day Procedure/Surgery			to ensure universal precautions are used when handling COSHH.	28/05/2014	Brigeen Kelly
	29/01/2013	4 North	General Surgery				29/01/2013	DS
	29/01/2013	3 South	Urology Surgery				29/01/2013	DS
	29/01/2013	Male Surgical	General Surgery			RCA Findings	13/02/2014	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	30/01/2013	Theatres/DPU STH	Chronic Pain Management	Irrelevant information redacted by the USI		Nil	22/08/2013	MMG
	31/01/2013	ICU CAH	ICU			ALL STAFF ADVISED TO ADHERE TO SHARPS POLICY. COMMUNICATION TO ALL TAFF IN COMMUNICATION BOOK	31/12/2013	MMG
	31/01/2013	ICU CAH	ICU			None	31/12/2013	MMG
	31/01/2013	3 South	Urology Surgery				01/02/2013	DS
	01/02/2013	Theatres 1-4 CAH	Theatres				06/03/2013	NR Pamela Johnston
	01/02/2013	Trauma Ward	Trauma Surgery				11/02/2013	DS
	01/02/2013	Trauma Ward	Trauma Surgery				08/02/2013	DS
	01/02/2013	Female Surgical/Gynae	General Surgery				11/02/2013	GH
	01/02/2013	Day Surgery Unit CAH	Day Procedure/Surgery			S ABOVE importance of staff adhering to PPE	23/09/2013	Ushagowri Mavuri
	02/02/2013	3 South	ENT Surery				08/02/2013	DS
	02/02/2013	3 South	Urology Surgery				11/02/2013	GH
	03/02/2013	ICU CAH	ICU			il	04/02/2014	MMG
	03/02/2013	Trauma Ward	Trauma Surgery				04/02/2013	DS
	05/02/2013	Theatres DHH	Theatres			Communication improvement between teams required.	17/12/2013	MMA
	06/02/2013	Theatres 1-4 CAH	ENT Surery				11/02/2013	GH
	06/02/2013	4 South	General Surgery				11/02/2013	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	06/02/2013	CEAW	General Surgery	Irrelevant information redacted by the USI			11/02/2013	GH
	06/02/2013	Theatres 1-4 CAH	Theatres			All processes followed	17/12/2013	Brigeen Kelly
	06/02/2013	Theatres 1-4 CAH	Theatres			Decontamination process to be quality assured at the key point.	17/12/2013	Brigeen Kelly
	07/02/2013	CEAW	Vasculur Surgery				11/02/2013	GH
	07/02/2013	Theatres 1-4 CAH	Theatres			as agreed with Farrans	17/12/2013	NR Pamela Johnston
	07/02/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Nil	28/05/2014	Ushagowri Mavuri
	07/02/2013	Trauma Ward	Trauma Surgery				11/02/2013	GH
	07/02/2013	4 South	General Surgery				08/02/2013	DS
	08/02/2013	Theatres 1-4 CAH	Anaesthetics			Clearly communication strategy.	11/04/2013	MMG
	08/02/2013	Trauma Ward	Trauma Surgery				18/02/2013	GH
	08/02/2013	1 West Gynae	General Surgery				11/02/2013	GH
	09/02/2013	Theatres 1-4 CAH	Theatres			As above.	17/12/2013	Brigeen Kelly
	10/02/2013	3 South	Urology Surgery				11/02/2013	GH
	10/02/2013	4 South	General Surgery				11/02/2013	GH
	11/02/2013	Male Surgical	General Surgery				18/02/2013	GH
	11/02/2013	3 South	Urology Surgery					DS
	11/02/2013	Trauma Ward	Trauma Surgery				25/03/2013	GH
	11/02/2013	Theatres/DPU STH	Day Procedure/Surgery				06/03/2013	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	11/02/2013	Pre-operative Assessment Clinic	Outpatients	Irrelevant information redacted by the USI			18/02/2013	GH
	12/02/2013	4 South	General Surgery				18/02/2013	GH
	12/02/2013	CEAW	Urology Surgery				18/02/2013	GH
	12/02/2013	3 South	Urology Surgery				12/03/2013	GH
	12/02/2013	CEAW	ENT Surey				18/02/2013	GH
	12/02/2013	X-ray Dept (Radiology)	Day Procedure/Surgery				06/03/2013	Alaine Devlin
	13/02/2013	Theatres 1-4 CAH	Theatres				06/03/2013	Brigeen Kelly
	13/02/2013	Trauma Ward	Trauma Surgery				18/02/2013	DS
	13/02/2013	Theatres 1-4 CAH	Theatres			As above.	17/12/2013	Brigeen Kelly
	13/02/2013	Theatres 1-4 CAH	Theatres			None	17/12/2013	Brigeen Kelly
	14/02/2013	Trauma Ward	Trauma Surgery				12/03/2013	GH
	14/02/2013	4 North	General Surgery				18/02/2013	GH
	14/02/2013	Theatres DHH	Theatres			To ensure telescopes are placed in quivers by the surgeosn when not in use.	17/12/2013	Brigeen Kelly
	15/02/2013	Theatres/DPU STH	Day Procedure/Surgery				06/03/2013	Brigeen Kelly
	15/02/2013	Trauma Ward	Trauma Surgery				20/02/2013	GH
	15/02/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Highten sharps awareness throughout th eUnit	23/09/2013	Ushagowri Mavuri
	15/02/2013	General Outpatients Reception/Waiting Area	Outpatients				25/02/2013	David Cardwell
	16/02/2013	4 North	General Surgery				22/02/2013	DS
	17/02/2013	Trauma Ward	Trauma Surgery			all falls require gcs observations. all patients on admission require bed rail assessment. staff involved spoken to on ward.	12/03/2013	GH
	17/02/2013	4 North	General Surgery				18/02/2013	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	17/02/2013	4 South	General Surgery	Irrelevant information redacted by the USI			18/02/2013	GH
	18/02/2013	4 North	General Surgery				12/03/2013	GH
	19/02/2013	4 North	General Surgery				20/02/2013	GH
	19/02/2013	4 North	General Surgery				20/02/2013	GH
	19/02/2013	4 North	General Surgery				20/02/2013	GH
	20/02/2013	ICU CAH	ICU			one	03/12/2013	Mary Lennon
	20/02/2013	CEAW	General Surgery				20/02/2013	DS
	21/02/2013	Day Procedure Unit DHH	Day Procedure/Surgery			Replacement machines being purchased in the upgrade of DHH Th & DPU	23/09/2013	Mr Nigel McClelland
	21/02/2013	Trauma Ward	Trauma Surgery					DS
	21/02/2013	Theatres 1-4 CAH	Anaesthetics			None	30/12/2013	Brigeen Kelly
	22/02/2013	ICU CAH	ICU				11/03/2013	Helen McGarry
	22/02/2013	Theatres 1-4 CAH	Theatres				19/03/2013	Brigeen Kelly
	22/02/2013	Theatres 1-4 CAH	Theatres			None	17/12/2013	Brigeen Kelly
	22/02/2013	ICU CAH	ICU			il	19/02/2014	Brigeen Kelly
	22/02/2013	Day Surgery Unit CAH	Day Procedure/Surgery			o take time and care when carrying out manual lifting duties.	23/09/2013	Brigeen Kelly
	22/02/2013	3 South	Urology Surgery				20/03/2013	DS
	22/02/2013	General Outpatients Reception/Waiting Area	Outpatients				27/02/2013	Connie Connolly
	22/02/2013	ICU CAH	ICU			checking drugs is followed in totality.	10/01/2014	Mary Lennon
	25/02/2013	ICU CAH	ICU			efore labeling samples staff reminded to check patient labels and any documentation elated	12/03/2013	Mary Lennon
	25/02/2013	Paediatric Ward	General Surgery			s above	10/09/2014	Connie Connolly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	25/02/2013	Theatres DHH	Theatres	Irrelevant information redacted by the USI		None	17/12/2013	MMA
	25/02/2013	Female Surgical/Gynae	General Surgery				12/03/2013	GH
	25/02/2013	Theatres/DPU STH	Day Procedure/Surgery			Unavoidable transfer with an unwell patient.	23/09/2013	Brigeen Kelly
	26/02/2013	Theatres DHH	Theatres			This has been resolved	17/12/2013	MMA
	26/02/2013	Trauma Ward	Trauma Surgery				01/03/2013	DS
	27/02/2013	Paediatric Ward	General Surgery				01/03/2013	DS
	27/02/2013	General Surgery Clinic	General Surgery				01/03/2013	DS
	28/02/2013	4 North	General Surgery				08/03/2013	DS
	28/02/2013	ICU CAH	ICU			None	08/01/2014	Helen McGarry
	28/02/2013	Theatres DHH	Theatres			None	17/12/2013	MMA
	01/03/2013	4 South	Vasculur Surgery				05/03/2013	Tracey McGuigan
	04/03/2013	Theatres/DPU STH	Day Procedure/Surgery			Nii for the team who managed th epatients procedure - escalated to SEC.	23/09/2013	Brigeen Kelly
	04/03/2013	4 North	General Surgery				12/03/2013	GH
	04/03/2013	Theatres 1-4 CAH	Anaesthetics			Ongoing SAI 28.05.14 Datix closed as this is an SAI investigation as discussed with Mr Carroll B Kelly	28/05/2014	Brigeen Kelly
	04/03/2013	Trauma Ward	Trauma Surgery				05/03/2013	DS
	05/03/2013	4 North	General Surgery				13/03/2013	GH
	05/03/2013	Male Surgical	General Surgery					DS



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	06/03/2013	Trauma Ward	Trauma Surgery	Irrelevant information redacted by the USI			12/03/2013	GH
	06/03/2013	Tower Block	Breast Surgery				30/07/2013	DS
	06/03/2013	Theatres 1-4 CAH	Theatres			None	17/12/2013	Brigeen Kelly
	06/03/2013	3 South	General Surgery				12/03/2013	DS
	07/03/2013	Theatres 1-4 CAH	Anaesthetics			None	30/12/2013	Brigeen Kelly
	07/03/2013	ICU CAH	ICU			none	30/12/2013	Mary Lennon
	07/03/2013	Male Surgical	General Surgery				23/04/2013	DS
	07/03/2013	Fracture Clinic	Outpatients				26/03/2013	DS
	07/03/2013	4 South	General Surgery				08/03/2013	Tracey McGuigan
	07/03/2013	Male Surgical	General Surgery				23/04/2013	DS
	07/03/2013	Day Surgery Unit CAH	Day Procedure/Surgery			None	23/12/2013	Brigeen Kelly
	08/03/2013	3 South	General Surgery					DS
	08/03/2013	Theatres 1-4 CAH	Theatres			Clear labelling on critical equipment plugs.	17/12/2013	Brigeen Kelly
	08/03/2013		Orthopaedic Surgery				13/05/2013	David Cardwell
	08/03/2013	Trauma Ward	Trauma Surgery				15/03/2013	DS
	08/03/2013	MEC	Orthopaedic Surgery				27/03/2013	Brigeen Kelly
	09/03/2013	Lift	General Surgery				12/03/2013	DS
	10/03/2013	4 North	General Surgery				12/03/2013	DS
	10/03/2013	ICU CAH	ICU			none	08/01/2014	Mary Lennon
	10/03/2013	ICU CAH	ICU			none	03/12/2013	Mary Lennon
	10/03/2013	3 South	Urology Surgery				27/03/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	11/03/2013	4 North	General Surgery	Irrelevant information redacted by the USI			12/03/2013	DS
	11/03/2013	ICU CAH	ICU			NONE	12/03/2013	Mary Lennon
	11/03/2013	Theatres/DPU STH	Theatres			As documented above	17/12/2013	Brigeen Kelly
	11/03/2013	4 North	General Surgery				12/03/2013	DS
	11/03/2013	4 South	Vasculur Surgery				15/03/2013	DS
	11/03/2013	4 North	General Surgery				12/03/2013	DS
	12/03/2013	Urology Clinic	Outpatients				28/08/2013	Connie Connolly
	12/03/2013	Theatres/DPU STH	Day Procedure/Surgery			All staff hanve been informed of the need to check all injections with another nurse and the endoscopist prior to administration	23/09/2013	Brigeen Kelly
	12/03/2013	4 North	General Surgery				12/03/2013	DS
	13/03/2013	ICU CAH	ICU			none		Mary Lennon
	13/03/2013	Male Surgical	General Surgery				20/03/2013	DS
	13/03/2013	Male Surgical	General Surgery				20/05/2013	DS
	14/03/2013	4 North	General Surgery				27/03/2013	DS
	14/03/2013	4 North	General Surgery				28/03/2013	DS
	15/03/2013	Day Surgery Unit CAH	Day Procedure/Surgery			nil	23/09/2013	Ushagowri Mavuri
	15/03/2013	X-ray Dept (Radiology)	Day Procedure/Surgery			N/A	19/02/2014	Ushagowri Mavuri
	16/03/2013	ICU CAH	ICU				19/03/2013	Brigeen Kelly
	16/03/2013	Female Surgical/Gynae	General Surgery				26/03/2013	HF
	16/03/2013	4 North	General Surgery				21/03/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	17/03/2013	ICU CAH	ICU	Irrelevant information redacted by the USI		none	16/12/2013	Brigeen Kelly
	18/03/2013	4 South	General Surgery				20/03/2013	Tracey McGuigan
	18/03/2013	Female Surgical/Gynae	General Surgery			await above actions	23/10/2014	Connie Connolly
	18/03/2013	Theatres 5-8 CAH	Trauma Surgery					DS
	18/03/2013	Trauma Ward	Trauma Surgery				23/04/2013	DS
	19/03/2013	Car Park/Grounds	Ophthalmology				26/04/2013	DS
	19/03/2013	4 South	General Surgery				06/06/2013	DS
	19/03/2013	Car Park/Grounds	Ophthalmology					DS
	20/03/2013	Theatres DHH	Theatres			Disposables should be trialled before introduced.	17/12/2013	Brigeen Kelly
	20/03/2013	4 South	General Surgery				21/03/2013	Tracey McGuigan
	20/03/2013	Female Surgical/Gynae	General Surgery				26/03/2013	DS
	20/03/2013	Trauma Ward	Trauma Surgery				27/03/2013	DS
	21/03/2013	Theatres 1-4 CAH	General Surgery				08/04/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	21/03/2013	Corridor/Stairs	Recovery Unit	Irrelevant information redacted by the USI			11/04/2013	Brigeen Kelly
	21/03/2013	Trauma Ward	Trauma Surgery				21/03/2013	DS
	21/03/2013	Trauma Ward	Trauma Surgery				27/03/2013	DS
	21/03/2013	Trauma Ward	Trauma Surgery				27/03/2013	DS
	22/03/2013	General Outpatients Reception/Waiting Area	Outpatients				07/05/2013	Connie Connolly
	23/03/2013	4 North	General Surgery				27/03/2013	DS
	23/03/2013	Male Surgical	General Surgery				31/05/2013	DS
	25/03/2013	Day Surgery Unit CAH	Day Procedure/Surgery			as above	07/05/2013	Ushagowri Mavuri
	25/03/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Ensure all equipment necessary for new procedures are considered at the outset/procurement to prevent occurrences like this	07/05/2013	Ushagowri Mavuri
	25/03/2013	Day Surgery Unit CAH	Day Procedure/Surgery				07/05/2013	Ushagowri Mavuri
	25/03/2013	3 South	Urology Surgery				12/04/2013	DS
	25/03/2013	4 North	General Surgery				27/03/2013	DS
	25/03/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Investigate all requirements prior to commencing new procedures	23/09/2013	Ushagowri Mavuri
	25/03/2013	4 North	General Surgery				27/03/2013	DS
	26/03/2013	General Outpatients Reception/Waiting Area	Outpatients				27/03/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	27/03/2013	Theatres DHH	Theatres	Irrelevant information redacted by the USI		Communication must be conveyed and understood when planning obstetric care	17/12/2013	Brigeen Kelly
	27/03/2013	3 South	Urology Surgery				26/04/2013	DS
	27/03/2013	3 South	Urology Surgery			ds - Shared with other wds	19/12/2013	GH
	27/03/2013	Trauma Ward	Trauma Surgery				28/03/2013	DS
	27/03/2013	Paediatric Ward	General Surgery			as above	10/09/2014	Dr David Grier
	28/03/2013	CEAW	General Surgery				28/03/2013	DS
	28/03/2013	Trauma Ward	Trauma Surgery				12/04/2013	DS
	28/03/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Personal Information redacted by USI	23/09/2013	Ushagowri Mavuri
	28/03/2013	Theatres 1-4 CAH	Theatres			NIAIC closure attached	17/12/2013	Brigeen Kelly
	29/03/2013	Paediatric Ward	General Surgery			as above	10/09/2014	Dr David Grier
	29/03/2013	Orthopaedic Ward	Orthopaedic Surgery				23/04/2013	Maureen Farley
	30/03/2013	Theatres 1-4 CAH	Theatres			None	17/12/2013	Brigeen Kelly
	30/03/2013	Trauma Ward	Trauma Surgery				12/04/2013	DS
	30/03/2013	Trauma Ward	Trauma Surgery				12/04/2013	DS
	31/03/2013	Trauma Ward	General Surgery				12/04/2013	DS
	01/04/2013	Trauma Ward	Trauma Surgery			Learning shared at str meeting	04/06/2014	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/04/2013	Theatres 1-4 CAH	Anaesthetics	Irrelevant information redacted by the USI		This incident has been closed due to time lapse and lack of detail, there has been no further incidents of this type reported in the last 3 months.	30/12/2013	Brigeen Kelly
	02/04/2013	4 North	General Surgery				22/04/2013	GH
	02/04/2013	4 North	General Surgery			No head injury sustained . falls pathway completed	23/04/2013	DS
	03/04/2013	ICU CAH	ICU				10/04/2013	Brigeen Kelly
	03/04/2013	Fracture Clinic	Outpatients				20/05/2013	GH
	03/04/2013	Trauma Ward	Trauma Surgery				26/04/2013	DS
	03/04/2013	4 South	General Surgery				26/04/2013	DS
	03/04/2013	Trauma Ward	Trauma Surgery				26/04/2013	DS
	03/04/2013	Trauma Ward	Trauma Surgery				26/04/2013	DS
	03/04/2013	Trauma Ward	Trauma Surgery				26/04/2013	DS
	04/04/2013	4 North	General Surgery				26/04/2013	DS
	04/04/2013	3 South	Urology Surgery				26/04/2013	DS
	04/04/2013	Theatres/DPU STH	Day Procedure/Surgery				10/04/2013	Brigeen Kelly
	04/04/2013	3 South	ENT Surery				26/04/2013	DS
	05/04/2013	Orthopaedic Ward	Orthopaedic Surgery				23/04/2013	Maureen Farley
	05/04/2013	ICU CAH	ICU			none	17/12/2013	Brigeen Kelly
	06/04/2013	Theatres 1-4 CAH	Theatres			Sharps awareness highlighted to all staff	17/12/2013	Brigeen Kelly
	06/04/2013	Trauma Ward	Trauma Surgery				26/04/2013	DS
	06/04/2013	Female Surgical/Gynae	General Surgery				07/05/2013	DS
	06/04/2013	4 North	Medical Secs/Ward Clerks General Surgery				26/04/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	07/04/2013	4 North	General Surgery	Irrelevant information redacted by the USI			29/04/2013	DS
	08/04/2013	3 South	General Surgery				29/04/2013	GH
	08/04/2013	1 West Gynae	General Surgery				29/04/2013	DS
	08/04/2013	4 North	General Surgery				29/04/2013	DS
	09/04/2013	Theatres 1-4 CAH	Theatres			environment too cold to ensure machines ability to run, this has been an ongoing issue in very cold weather - capital funding requested for building upgrade	17/12/2013	MW1
	09/04/2013	Male Surgical	General Surgery				10/04/2013	GH
	09/04/2013	Anticoagulant Clinic	Outpatients				28/06/2013	GH
	10/04/2013	Theatres 5-8 CAH	T&O Theatres			Staff must be vigilant to ensure that correct runners are used for each prop. The runner that was used was incorrect for the particular prop.	11/04/2013	Laura Murphy
	10/04/2013	Theatres 1-4 CAH	Theatres			Environment to be addressed within Capital upgrade scheme	17/12/2013	MW1
	10/04/2013	Theatres/DPU STH	General Surgery				29/04/2013	DS
	10/04/2013	Theatres 5-8 CAH	T&O Theatres				11/04/2013	Laura Murphy
	11/04/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Medical records staff advised to ensure all records are correct	23/09/2013	Brigeen Kelly
	11/04/2013	Day Surgery Unit CAH	Day Procedure/Surgery			care needs to be taken by all staff when opening glass vials to avoid sharps injury	23/09/2013	Brigeen Kelly
	11/04/2013	Theatres DHH	General Surgery				03/07/2013	GH
	12/04/2013	ICU CAH	ICU				02/05/2013	Brigeen Kelly
	12/04/2013	ICU CAH	ICU			none		Brigeen Kelly
	12/04/2013	Female Surgical/Gynae	General Surgery				03/05/2013	DS
	13/04/2013	Female Surgical/Gynae	General Surgery				03/05/2013	DS
	15/04/2013	Day Surgery Unit CAH	Day Procedure/Surgery			To ensure poiclies and procedures are followed.	23/09/2013	Brigeen Kelly
	15/04/2013	Male Surgical	General Surgery				03/05/2013	DS
	15/04/2013	Paediatric Ward	General Surgery			as above	10/09/2014	Dr David Grier

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	15/04/2013	Recovery Unit	Recovery Unit	Irrelevant information redacted by the USI		None	30/12/2013	Brigeen Kelly
	15/04/2013	Male Surgical	General Surgery				03/05/2013	DS
	15/04/2013	3 South	Urology Surgery				03/05/2013	DS
	16/04/2013	Trauma Ward	Trauma Surgery				03/05/2013	DS
	16/04/2013	Theatres 1-4 CAH	Theatres			Nil	20/05/2014	Brigeen Kelly
	17/04/2013	Theatres/DPU STH	Anaesthetics			as documented	30/12/2013	Brigeen Kelly
	17/04/2013	Delivery Suite, CAH	Anaesthetics			None	30/12/2013	Brigeen Kelly
	17/04/2013	3 South	General Surgery				03/05/2013	DS
	17/04/2013	Theatres 5-8 CAH	T&O Theatres			Replace old worn equipment as soon as problems arise.	30/12/2013	Brigeen Kelly
	18/04/2013	ICU CAH	ICU				02/05/2013	Brigeen Kelly
	18/04/2013	Trauma Ward	Trauma Surgery				03/05/2013	DS
	18/04/2013	3 South	General Surgery				08/05/2013	DS
	19/04/2013	Theatres/DPU STH	General Surgery			Await feedback from Sharon/Amie re scheduling protocol	02/07/2013	Brigeen Kelly
	19/04/2013	Male Surgical	General Surgery				10/05/2013	DS
	20/04/2013	ICU CAH	ICU			none	24/12/2013	Brigeen Kelly
	20/04/2013	Day Surgery Unit CAH	Day Procedure/Surgery			To address issue promptly as they arise.	23/09/2013	Brigeen Kelly
	21/04/2013	Orthopaedic Ward	Orthopaedic Surgery				14/05/2013	DS



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	21/04/2013	Car Park/Grounds	General Surgery	Irrelevant information redacted by the USI			20/05/2013	DS
	23/04/2013	Theatres/DPU STH	Medical Secs/Ward Clerks - Outpatients			as above in action	16/01/2014	Connie Connolly
	23/04/2013	Anticoagulant Clinic	Outpatients				28/06/2013	GH
	23/04/2013	Theatres/DPU STH	General Surgery				07/05/2013	Brigeen Kelly
	24/04/2013	CEAW	Urology Surgery				14/05/2013	DS
	24/04/2013	CEAW	Urology Surgery				14/05/2013	DS
	24/04/2013	Theatres 1-4 CAH	Theatres			All scopes replaced & upgraded.	17/12/2013	Brigeen Kelly
	24/04/2013	4 South	General Surgery				14/05/2013	DS
	24/04/2013	Male Surgical	General Surgery				14/05/2013	DS
	24/04/2013	Trauma Ward	Trauma Surgery				14/05/2013	DS
	25/04/2013	1 West Gynae	Urology Surgery				20/05/2013	Mrs Patricia Kingsnorth
	25/04/2013	Trauma Ward	Trauma Surgery				31/05/2013	DS
	26/04/2013	Recovery CAH	Recovery Unit			this product would only rarely be used in recovery and it comes in this glass bottle . I have highlighted the problem with staff and the need to ensure it is firmly secured . I have not received any feedback from pharmacy	30/12/2013	Brigeen Kelly
	26/04/2013	ICU CAH	ICU				02/05/2013	Brigeen Kelly
	27/04/2013	Male Surgical	General Surgery				31/05/2013	DS
	27/04/2013	Male Surgical	General Surgery				29/04/2013	DS
	27/04/2013	Theatres/DPU STH	Day Procedure/Surgery			To ensure all staock is adequately check & rotated . Expired stock to be replaced immediately.	23/09/2013	MW1
	27/04/2013	Emergency Department DHH	Trauma Surgery				03/07/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	29/04/2013	General Outpatients Reception/Waiting Area	Outpatients	Irrelevant information redacted by the USI			07/05/2013	Connie Connolly
	29/04/2013	4 North	General Surgery				31/05/2013	DS
	29/04/2013	Maternity Ward	Anaesthetics			All treatment and readmission appropriate from obstetric view point. Transferred to anaesthetics for comments and closure.	30/12/2013	Shahid Latif Tariq
	29/04/2013	Male Surgical	General Surgery				20/05/2013	DS
	29/04/2013	4 North	General Surgery				15/05/2013	DS
	29/04/2013	Theatres 1-4 CAH	Theatres				07/05/2013	Brigeen Kelly
	30/04/2013	Day Surgery Unit CAH	General Surgery				15/05/2013	Brigeen Kelly
	30/04/2013	Trauma Ward	Trauma Surgery				20/05/2013	DS
	30/04/2013	Male Surgical	Medical Secs/Ward Clerks - General Surgery				31/05/2013	AL
	30/04/2013	Theatres 1-4 CAH	Theatres			None	17/12/2013	NR Pamela Johnston
	30/04/2013	4 North	General Surgery				15/05/2013	DS
	01/05/2013	ICU CAH	ICU				09/05/2013	Brigeen Kelly
	01/05/2013	ICU CAH	ICU				09/05/2013	Brigeen Kelly
	01/05/2013	4 South	Vasculur Surgery				07/05/2013	DS
	02/05/2013	3 South	Outpatients				28/06/2013	DS
	02/05/2013	Trauma Ward	Orthopaedic Surgery				07/06/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/05/2013	Trauma Ward	Trauma Surgery				03/05/2013	DS
	02/05/2013	4 North	General Surgery				02/07/2013	DS
	02/05/2013	3 South	Urology Surgery				10/06/2013	DS
	02/05/2013	Trauma Ward	Trauma Surgery			all staff made aware of incident and learning from same communicated to all staff.	31/05/2013	RB
	03/05/2013	Theatres 1-4 CAH	Theatres			clinical assessment to be discussed with consultant - open lines of communication.  Provide correct details including patienst name - this has been addressed with all staff completing Datix forms.	24/12/2013	Brigeen Kelly
	03/05/2013	Theatres 1-4 CAH	Anaesthetics				19/08/2013	Brigeen Kelly
	03/05/2013	Orthopaedic Ward	Orthopaedic Surgery				10/06/2013	DS
	03/05/2013	Trauma Ward	Trauma Surgery				04/06/2013	RB
	05/05/2013	ICU CAH	ICU			nil	20/05/2013	Brigeen Kelly
	07/05/2013	Theatres/DPU STH	Day Procedure/Surgery			To follow hospital protocol in the event of a spillage.	23/09/2013	Brigeen Kelly
	07/05/2013	Theatres 1-4 CAH	Theatres			Security reviewed	17/12/2013	Brigeen Kelly
	08/05/2013	AMU	Urology Surgery				10/06/2013	DS
	08/05/2013	Theatres DHH	Theatres			none	17/12/2013	Brigeen Kelly
	08/05/2013	General Surgery Clinic	General Surgery				25/06/2013	DS
	08/05/2013	ICU CAH	ICU				09/05/2013	Brigeen Kelly
	08/05/2013	CEAW	Urology Surgery				08/05/2013	DS
	09/05/2013	Theatres 1-4 CAH	Theatres			Lead midwife to address	17/12/2013	Brigeen Kelly
	09/05/2013	ICU CAH	ICU			none	20/05/2013	Helen McGarry

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	09/05/2013	ICU CAH	ICU	Irrelevant information redacted by the USI		patients are at risk of critical care delerium is not moved in timely fashion	12/05/2014	Brigeen Kelly
	09/05/2013	Theatres/DPU STH	Day Procedure/Surgery				12/06/2013	Brigeen Kelly
	09/05/2013	ICU CAH	ICU			none	20/05/2013	Helen McGarry
	09/05/2013	4 South	General Surgery				04/06/2013	Tracey McGuigan
	09/05/2013	Delivery Suite, DHH	Anaesthetics			Prompt action for pathological CTG. Senior involvement.	30/12/2013	Mrs Patricia Kingsnorth
	10/05/2013	ICU CAH	ICU			none	20/05/2013	Helen McGarry
	10/05/2013	Urology Clinic	Urology Surgery				10/06/2013	DS
	11/05/2013	Theatres 1-4 CAH	Urology Surgery				02/07/2013	DS
	12/05/2013	4 North	General Surgery				02/07/2013	Mr Stephen Mahon
	12/05/2013	Male Surgical	General Surgery				04/06/2013	AL
	12/05/2013	Trauma Ward	Trauma Surgery				19/06/2013	GH
	13/05/2013	4 North	General Surgery				19/06/2013	DS
	13/05/2013	4 North	General Surgery				14/05/2013	DS
	14/05/2013	Trauma Ward	Trauma Surgery			s/n aware of clenaxe policy and will be more vialent regarding inr results. will share with other staff the incident	04/06/2013	RB
	14/05/2013	Theatres DHH	Theatres				12/06/2013	Brigeen Kelly
	14/05/2013	General OutpatientsTreatment Room	Outpatients			none of note	16/01/2014	Connie Connolly
	15/05/2013	Theatres/DPU STH	Day Procedure/Surgery			Checking procedure not followed	12/06/2013	Brigeen Kelly
	15/05/2013	General OutpatientsTreatment Room	Orthopaedic Surgery				19/06/2013	DS
	15/05/2013	Trauma Ward	Trauma Surgery				04/06/2013	RB
	15/05/2013	Paediatric Ward	ENT Surery			as above	10/09/2014	Dr David Grier
	16/05/2013	Urology Clinic	Medical Secs/Ward Clerks - Outpatients				04/06/2013	DS
	16/05/2013	CEAW	Urology Surgery				19/06/2013	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	16/05/2013	Day Surgery Unit CAH	Day Procedure/Surgery	Irrelevant information redacted by the USI		staff need to ensure pre procedures that all equipmet required is available Ensure that companies/staff inform ward manager regarding what equipment is taken out of action	23/09/2013	Ushagowri Mavuri
	18/05/2013	Male Surgical	General Surgery				02/07/2013	DS
	18/05/2013	4 North	Medical Secs/Ward Clerks - General Surgery				21/06/2013	DS
	18/05/2013	Male Surgical	General Surgery				04/06/2013	AL
	20/05/2013	Theatres/DPU STH	Day Procedure/Surgery			All preassessment staff made aware of the need to check patient details following biometry and prior to filing in notes.	12/06/2013	Brigeen Kelly
	20/05/2013	ICU CAH	ICU				12/06/2013	Brigeen Kelly
	20/05/2013	Day Surgery Unit CAH	General Surgery				02/07/2013	Brigeen Kelly
	20/05/2013	Urology Clinic	Urology Surgery				19/06/2013	DS
	20/05/2013	Theatres 1-4 CAH	Theatres			WHO checklist to address equipment availability prior to commencement of procedures.	17/12/2013	Brigeen Kelly
	20/05/2013	4 North	General Surgery				02/07/2013	Mr Stephen Mahon
	20/05/2013	Theatres 1-4 CAH	Theatres			Instrument , swab & needle policy raised at sisters and staff meetings on a weekly basis.	17/12/2013	Brigeen Kelly
	20/05/2013	Recovery CAH	Recovery Unit				12/06/2013	Brigeen Kelly
	21/05/2013	Theatres 1-4 CAH	Urology Surgery				21/06/2013	DS
	21/05/2013	Theatres DHH	Theatres			None	17/12/2013	Brigeen Kelly
	21/05/2013	4 South	General Surgery				06/06/2013	Tracey McGuigan

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/05/2013	Theatres/DPU STH	Day Procedure/Surgery	Irrelevant information redacted by the USI		To follow manufacturers instructions.		MW1
	22/05/2013	Theatres 1-4 CAH	Theatres			Replacement system would be an advantage	17/12/2013	Brigeen Kelly
	22/05/2013	Theatres 1-4 CAH	ENT Surery				02/07/2013	Brigeen Kelly
	23/05/2013	Theatres 1-4 CAH	Theatres			nil	24/04/2014	Brigeen Kelly
	23/05/2013	Theatres 1-4 CAH	Theatres			none	17/12/2013	Brigeen Kelly
	24/05/2013	ICU CAH	ICU			nil	08/05/2014	Brigeen Kelly
	24/05/2013	CEAW	ENT Surery				21/06/2013	GH
	24/05/2013	3 South	Urology Surgery				03/07/2013	DS
	24/05/2013	Female Surgical/Gynae	General Surgery				21/06/2013	DS
	25/05/2013	ICU CAH	ICU			NONE	09/01/2014	Brigeen Kelly
	25/05/2013	Theatres/DPU STH	Day Procedure/Surgery				12/06/2013	Brigeen Kelly
	26/05/2013	Emergency Department CAH	General Surgery				02/07/2013	DS
	26/05/2013	ICU CAH	ICU			none	12/06/2013	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	26/05/2013	Theatres 1-4 CAH	Anaesthetics	Irrelevant information redacted by the USI		As documented	30/12/2013	Brigeen Kelly
	27/05/2013	4 South	Vasculur Surgery				29/05/2013	Tracey McGuigan
	27/05/2013	Male Surgical	General Surgery				21/06/2013	DS
	27/05/2013	ICU CAH	ICU			NONE	27/01/2014	Brigeen Kelly
	28/05/2013	ICU CAH	Anaesthetics				12/06/2013	Brigeen Kelly
	30/05/2013	4 South	General Surgery				06/06/2013	Tracey McGuigan
	30/05/2013	Day Surgery Unit CAH	Day Procedure/Surgery			F disseminated as above	23/09/2013	Brigeen Kelly
	30/05/2013	Recovery CAH	Recovery Unit			none	30/12/2013	Brigeen Kelly
	31/05/2013	Urology Clinic	Urology Surgery					DS
	31/05/2013	ICU CAH	ICU			none	09/01/2014	Brigeen Kelly
	31/05/2013	Female Surgical/Gynae	General Surgery				25/06/2013	DS
	01/06/2013	Trauma Ward	Trauma Surgery				25/06/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/06/2013	Male Surgical	General Surgery	Irrelevant information redacted by the USI			25/06/2013	DS
	02/06/2013	Trauma Ward	Trauma Surgery				04/06/2013	RB
	03/06/2013	Recovery Unit	Chronic Pain Management			Nil	30/05/2014	Brigeen Kelly
	04/06/2013	Theatres/DPU STH	Day Procedure/Surgery				16/07/2013	Brigeen Kelly
	04/06/2013	Theatres/DPU STH	Theatres			as documented above- further checking to be carried out daily	24/12/2013	Brigeen Kelly
	04/06/2013	Day Surgery Unit CAH	Day Procedure/Surgery			to ensure patientst who require preassessment have this done prior to commencement of admission, any discrepancies to inform preassessment team.	23/09/2013	Brigeen Kelly
	04/06/2013	Theatres 1-4 CAH	Anaesthetics			as documented	30/12/2013	Brigeen Kelly
	04/06/2013	Emergency Department CAH	General Surgery				25/06/2013	DS
	04/06/2013	Day Surgery Unit CAH	Day Procedure/Surgery			To ensure patientst are preassessed prior to surgery and to highlight any discrepancies to preassessment team	23/09/2013	Brigeen Kelly
	05/06/2013	Theatres/DPU STH	Theatres				12/06/2013	Brigeen Kelly
	05/06/2013	4 North	General Surgery				02/07/2013	Mr Stephen Mahon
	05/06/2013	3 South	Medical Secs/Ward Clerks - Urology and ENT				05/06/2013	DS
	05/06/2013	3 South	Urology Surgery				01/08/2013	GH
	05/06/2013	3 South	Urology Surgery				25/06/2013	DS
	05/06/2013	Fracture Clinic	Outpatients				28/06/2013	GH
	06/06/2013	ICU CAH	ICU				12/06/2013	Brigeen Kelly



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	06/06/2013	ICU CAH	ICU	Irrelevant information redacted by the USI			12/06/2013	Brigeen Kelly
	06/06/2013	Orthopaedic Ward	Orthopaedic Surgery				01/07/2013	DS
	07/06/2013	4 North	General Surgery					Mr Stephen Mahon
	07/06/2013	Female Surgical/Gynae	General Surgery				03/07/2013	GH
	08/06/2013	Theatres 1-4 CAH	Theatres			As above	24/12/2013	Brigeen Kelly
	10/06/2013	Theatres/DPU STH	Day Procedure/Surgery			New checking protocols have been drafted which require the signature of two members of staff instead of the previous one. I also contacted Puricore to ask why the machine would not pick up the incorrect disinfectant and was advised that the machine was not set up to do so and was only programmed to measure conductivity. They advised me to contact the manufactures of the chemicals we currently use to discuss the level if any of disinfection the scopes would have received. This has not been completed as yet, however it will be completed on the 12/6/13. As all electronic systems were down this morning (all PC""s and reporting tools)it was not possible to generate a list of scopes that went through the 133 following the addition of the incorrect chemicals, however this will be undertaken on 12/06/2013 and then the serial numbers from each scope can be used to generate a possible list of patients that these scopes were used on if required.	23/09/2013	MW1
	10/06/2013	4 North	General Surgery				03/07/2013	DS
	10/06/2013	Orthopaedic Ward	Orthopaedic Surgery				01/07/2013	DS
	10/06/2013	4 North	General Surgery				02/07/2013	DS
	10/06/2013	ICU CAH	ICU			none	24/12/2013	Mary Lennon
	10/06/2013	3 South	ENT Surery				02/07/2013	DS
	11/06/2013	Theatres 1-4 CAH	Theatres			None	24/12/2013	Brigeen Kelly
	11/06/2013	4 North	General Surgery				08/08/2013	DS
	12/06/2013	3 South	Outpatients				28/08/2013	Connie Connolly
	12/06/2013	Theatres 5-8 CAH	T&O Theatres				12/08/2013	Brigeen Kelly
	13/06/2013	Theatres 1-4 CAH	ENT Surery			none	06/11/2013	Brigeen Kelly
	13/06/2013	Paediatric Ward	General Surgery				02/07/2013	DS
	13/06/2013	Pre-operative Assessment Clinic	Outpatients				28/08/2013	Connie Connolly
	13/06/2013	Theatres/DPU STH	General Surgery				08/08/2013	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/06/2013	ICU CAH	ICU	Irrelevant information redacted by the USI			16/07/2013	Brigeen Kelly
	14/06/2013	General Outpatients Reception/Waiting Area	Urology Surgery				03/07/2013	GH
	14/06/2013	4 South	General Surgery				03/07/2013	Tracey McGuigan
	14/06/2013	Male Surgical	General Surgery				03/07/2013	GH
	15/06/2013	ICU CAH	ICU				16/07/2013	Brigeen Kelly
	15/06/2013	Theatres 1-4 CAH	Theatres			None	19/03/2014	Brigeen Kelly
	17/06/2013	Theatres DHH	Theatres			none	24/12/2013	Brigeen Kelly
	17/06/2013	4 North	General Surgery				03/07/2013	GH
	17/06/2013	Theatres 1-4 CAH	Theatres			None.	24/04/2014	NR Pamela Johnston
	18/06/2013	Theatres DHH	Theatres			none - technical fault	24/12/2013	MMA
	18/06/2013	Male Surgical	Urology Surgery				03/07/2013	GH
	18/06/2013	Theatres 5-8 CAH	T&O Theatres			None	30/12/2013	Laura Murphy
	18/06/2013	4 North	General Surgery				03/07/2013	GH
	18/06/2013	Theatres 1-4 CAH	General Surgery			Specialty needs to sort	05/04/2016	Dr David Grier
	18/06/2013	Orthopaedic Ward	Orthopaedic Surgery				03/07/2013	GH
	18/06/2013	General Outpatients Reception/Waiting Area	Urology Surgery				03/07/2013	GH
	18/06/2013	Trauma Ward	Trauma Surgery				03/07/2013	GH
	19/06/2013	CEAW	Urology Surgery				03/07/2013	GH
	19/06/2013	Female Surgical/Gynae	General Surgery				03/07/2013	GH
	19/06/2013	CEAW	Urology Surgery				03/07/2013	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/06/2013	4 North	General Surgery	Irrelevant information redacted by the USI			03/07/2013	GH
	20/06/2013	Day Surgery Unit CAH	Day Procedure/Surgery			1. need for Consultants/Drs to ensure that mandatory forms i.e. green OPD preforma etc are completed to ensure patientrs follow appropriate pathways 2. Patient need to properly pre assessed in order for them to be directed to correct areas for care/ treatment	23/09/2013	Ushagowri Mavuri
	20/06/2013	Theatres 5-8 CAH	T&O Theatres			as documented - once off failure - addressed servicing schedule	30/12/2013	Brigeen Kelly
	20/06/2013	Trauma Ward	Trauma Surgery				03/07/2013	GH
	20/06/2013	4 North	General Surgery				03/07/2013	GH
	21/06/2013	3 South	ENT Surery				03/07/2013	GH
	22/06/2013	Male Surgical	General Surgery				03/07/2013	GH
	23/06/2013	Theatres DHH	Theatres			Labour Ward staff must understand that theatres often has other lists /cases running and the times and service provided for Maternity Cover. Thaetre Staff also must foster positive working relationships. All Staff must work colaboratively to ensure the best available care is delivered for the Patient/ client that promote positive outcomes.	20/05/2014	Brigeen Kelly
	23/06/2013	4 North	General Surgery				03/07/2013	GH
	23/06/2013	3 South	Urology Surgery				03/07/2013	GH
	23/06/2013	4 South	General Surgery				03/07/2013	Tracey McGuigan
	23/06/2013	4 South	Breast Surgery				03/07/2013	Tracey McGuigan
	24/06/2013	ICU CAH	ICU				16/07/2013	Brigeen Kelly
	24/06/2013	Female Surgical/Gynae	General Surgery				03/07/2013	HF
	25/06/2013	Recovery Unit	Urology Surgery				25/06/2013	DS
	25/06/2013	Day Surgery Unit CAH	Day Procedure/Surgery			to complete complaint form and advise correct department.	23/09/2013	Frances Kelly
	25/06/2013	Orthopaedic Ward	Orthopaedic Surgery				03/07/2013	Maureen Farley
	25/06/2013	ICU CAH	ICU				16/07/2013	Brigeen Kelly
	25/06/2013	Male Surgical	Medical Secs/Ward Clerks - General Surgery				03/07/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	25/06/2013	General OutpatientsTreatment Room	Outpatients	Irrelevant information redacted by the USI			03/07/2013	Connie Connolly
	25/06/2013	Trauma Ward	Trauma Surgery				03/07/2013	GH
	26/06/2013	4 North	General Surgery				03/07/2013	GH
	27/06/2013	Day Surgery Unit CAH	Day Procedure/Surgery			To ensure all staff are made aware of the protocols	23/09/2013	Jeanette Robinson
	28/06/2013	Theatres/DPU STH	Theatres			Stores/Stock changeover in process.	16/07/2013	Brigeen Kelly
	28/06/2013	CEAW	General Surgery				09/07/2013	DS
	28/06/2013	3 South	ENT Surery				09/07/2013	DS
	28/06/2013	4 South	General Surgery				03/07/2013	DS
	29/06/2013	4 South	General Surgery				08/08/2013	GH
	30/06/2013	Male Surgical	General Surgery				08/08/2013	DS
	30/06/2013	ICU CAH	ICU				12/08/2013	Brigeen Kelly
	02/07/2013	ICU CAH	ICU				12/08/2013	Brigeen Kelly
	02/07/2013	ICU CAH	ICU				12/08/2013	Brigeen Kelly
	02/07/2013	Paediatric Ward	ENT Surery				03/07/2013	Bernie McGibbon
	02/07/2013	Paediatric Ward	ENT Surery				03/07/2013	Bernie McGibbon
	02/07/2013	Paediatric Ward	ENT Surery				03/07/2013	Bernie McGibbon
	02/07/2013	ICU CAH	ICU			none	31/12/2013	Mary Lennon
	03/07/2013	ICU CAH	ICU				12/08/2013	Brigeen Kelly
	03/07/2013	Orthopaedic Ward	Orthopaedic Surgery				03/07/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	04/07/2013	4 South	General Surgery	Irrelevant information redacted by the USI			08/08/2013	Tracey McGuigan
	04/07/2013	Trauma Ward	Trauma Surgery				17/07/2013	DS
	04/07/2013	3 South	ENT Surey			D/W staff re audit	15/10/2013	DS
	04/07/2013	3 South	General Surgery				01/08/2013	DS
	04/07/2013	Theatres 1-4 CAH	Theatres			nil	19/03/2014	Brigeen Kelly
	04/07/2013	Trauma Ward	General Surgery				17/07/2013	DS
	05/07/2013	Theatres 1-4 CAH	Anaesthetics			as above	30/12/2013	Brigeen Kelly
	05/07/2013	ICU CAH	ICU				12/08/2013	Brigeen Kelly
	05/07/2013	Trauma Ward	Trauma Surgery				06/08/2013	DS
	05/07/2013	3 South	Urology Surgery				17/07/2013	DS
	05/07/2013	CEAW	Urology Surgery				01/08/2013	DS
	06/07/2013	4 North	General Surgery				28/08/2013	DS
	06/07/2013	4 South	Vasculur Surgery				06/08/2013	DS
	07/07/2013	Trauma Ward	Trauma Surgery			Ds - report faulty equipment immediately as d/w staff	15/10/2013	RB
	08/07/2013	Theatres/DPU STH	Day Procedure/Surgery			No training need identified	23/09/2013	Brigeen Kelly
	08/07/2013	4 North	General Surgery				15/07/2013	Mr Stephen Mahon
	08/07/2013	Day Surgery Unit CAH	General Surgery			Closed by ATIC handed to SEC	15/10/2013	Ushagowri Mavuri

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	08/07/2013	Trauma Ward	Trauma Surgery	Irrelevant information redacted by the USI		Falla pathway completed	15/10/2013	RB
	08/07/2013	Trauma Ward	Trauma Surgery			Shared for learning	15/10/2013	DS
	09/07/2013	CEAW	ENT Surery				08/08/2013	DS
	09/07/2013	4 North	General Surgery				06/08/2013	DS
	09/07/2013	CEAW	ENT Surery				08/08/2013	DS
	09/07/2013	4 North					13/01/2014	David Cardwell
	09/07/2013	Gastroenterology Clinic	Outpatients				29/08/2013	Brigeen Kelly
	09/07/2013	CEAW	General Surgery				06/08/2013	DS
	10/07/2013	Theatres/DPU STH	Day Procedure/Surgery			Batch removed as soon as identified	23/09/2013	Brigeen Kelly
	10/07/2013	Theatres 1-4 CAH	Theatres			As documented	24/12/2013	NR Pamela Johnston
	11/07/2013	Theatres 1-4 CAH	Theatres			As above.	24/04/2014	NR Pamela Johnston
	14/07/2013	ICU CAH	ICU				12/08/2013	Brigeen Kelly
	15/07/2013	Theatres 1-4 CAH	Theatres			None	24/12/2013	Brigeen Kelly
	15/07/2013	3 South	Urology Surgery					DS
	18/07/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Need for communication between wards and relevant information about pt passed on.	07/05/2014	SBU
	18/07/2013	Theatres/DPU STH	Anaesthetics			Nil	27/05/2014	Brigeen Kelly
	18/07/2013	Theatres 1-4 CAH	Theatres			None	24/12/2013	Brigeen Kelly
	18/07/2013	Orthopaedic Ward	Orthopaedic Surgery				08/08/2013	DS
	18/07/2013	Orthopaedic Ward	Orthopaedic Surgery				18/07/2013	DS
	19/07/2013	Theatres 1-4 CAH	Theatres			as documented	24/12/2013	Brigeen Kelly
	20/07/2013	Female Surgical/Gynae	General Surgery				08/08/2013	DS
	20/07/2013	Recovery CAH	General Surgery				08/08/2013	DS
	22/07/2013	4 South	General Surgery			none	06/11/2013	Tracey McGuigan

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/07/2013	Recovery CAH	General Surgery	Irrelevant information redacted by the USI			08/08/2013	DS
	23/07/2013	Theatres/DPU STH	Recovery Unit			one	06/11/2013	Brigeen Kelly
	24/07/2013	Day Surgery Unit CAH	Day Procedure/Surgery			ppropriate checking procedure to be used and highlighted to all teams - safer transfer of atients.	23/09/2013	Brigeen Kelly
	24/07/2013	CEAW	Urology Surgery				06/08/2013	DS
	24/07/2013	CEAW	General Surgery				08/08/2013	DS
	24/07/2013	4 South	General Surgery			one	06/11/2013	Tracey McGuigan
	24/07/2013	CEAW	Urology Surgery				08/08/2013	DS
	25/07/2013	4 North	General Surgery				28/08/2013	DS
	25/07/2013	Home of client	General Surgery				28/08/2013	DS
	25/07/2013	4 South	General Surgery			one	06/11/2013	Tracey McGuigan
	25/07/2013	4 South	General Surgery			taff should check various documentation and cross reference prior to prescription	06/11/2013	Tracey McGuigan
	26/07/2013	CEAW	General Surgery				29/08/2013	GH
	26/07/2013	3 South	Urology Surgery				29/08/2013	DS
	27/07/2013	Theatres/DPU STH	Day Procedure/Surgery			None	23/09/2013	Brigeen Kelly
	27/07/2013	4 South	General Surgery			one	06/11/2013	Tracey McGuigan

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	27/07/2013	Day Surgery Unit CAH	Day Procedure/Surgery	Irrelevant information redacted by the USI		None	23/09/2013	Ushagowri Mavuri
	30/07/2013	Theatres 1-4 CAH	Theatres			nil	20/03/2014	Brigeen Kelly
	30/07/2013	3 South	Urology Surgery				03/09/2013	DS
	31/07/2013	Day Surgery Unit CAH	Day Procedure/Surgery			STAFF MADE AWARE OF NEED TO CARRY OUT ABOVE ACTION	23/09/2013	Ushagowri Mavuri
	31/07/2013	CEAW	Recovery Unit			as stated in investigation	30/12/2013	Brigeen Kelly
	31/07/2013	Male Surgical	General Surgery				03/09/2013	DS
	31/07/2013	Male Surgical	General Surgery				03/09/2013	DS
	31/07/2013	3 South	Urology Surgery				03/09/2013	DS
	01/08/2013	Trauma Ward	Trauma Surgery			none	06/11/2013	RB
	01/08/2013	Theatres 1-4 CAH	General Surgery			good communication and documentation processes to be embedded	06/11/2013	Brigeen Kelly
	01/08/2013	Thorndale Unit	Outpatients				01/08/2013	DS
	02/08/2013	CEAW	Urology Surgery				04/09/2013	DS
	02/08/2013	CEAW	Urology Surgery				06/08/2013	DS
	03/08/2013	Theatres 1-4 CAH	General Surgery			DS - D/w BK . S/N should not have completed IR1 as Consultant should have completed same . Esc to HOS	06/11/2013	Brigeen Kelly



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	04/08/2013	4 North	General Surgery	Irrelevant information redacted by the USI			04/09/2013	DS
	05/08/2013	Male Surgical	General Surgery				04/09/2013	DS
	05/08/2013	Theatres/DPU STH	Day Procedure/Surgery			Nil	28/05/2014	Brigeen Kelly
	05/08/2013	Theatres 1-4 CAH	Theatres			None	24/12/2013	Brigeen Kelly
	06/08/2013	CEAW	General Surgery				04/09/2013	DS
	06/08/2013	CEAW	General Surgery				04/09/2013	DS
	06/08/2013	X-ray Dept (Radiology)	Urology Surgery			none	06/11/2013	Brigeen Kelly
	06/08/2013	Theatres 1-4 CAH	T&O Theatres			Nil	30/12/2013	Laura Murphy
	07/08/2013	Diabetology Clinic	Outpatients				08/08/2013	DS
	07/08/2013	CEAW	Urology Surgery				04/09/2013	DS
	08/08/2013	Theatres/DPU STH	Day Procedure/Surgery			Nil	28/05/2014	Brigeen Kelly
	09/08/2013	CEAW	Urology Surgery				04/09/2013	DS
	09/08/2013	4 North	General Surgery				04/09/2013	DS
	09/08/2013	4 North	General Surgery				04/09/2013	DS
	09/08/2013	General Medicine Clinic	Outpatients			Discuss with staff at measures Boards and team meetings re importance of cross checking patients details	18/09/2013	GH
	09/08/2013	CYP A&E	General Surgery			none	06/11/2013	DS
	10/08/2013	4 North	General Surgery				04/09/2013	DS
	10/08/2013	Theatres/DPU STH	General Surgery			good communication at all times	06/11/2013	Brigeen Kelly
	10/08/2013	ICU CAH	ICU			nil	06/02/2014	Brigeen Kelly
	10/08/2013	Trauma Ward	Trauma Surgery				04/09/2013	DS
	12/08/2013	Stone Treatment Centre	Outpatients			NSAID all fall under one group for allergy satus	18/09/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	12/08/2013	Theatres 5-8 CAH	Anaesthetics	Irrelevant information redacted by the USI		Reviewing the management of patients with pacemakers. Anaesthetic guidelines suggest that if the operative site is more than 15cms from the pacemaker, then there is no need for the pacemaker to be switched off. This has not been confirmed as the cause of the incident, however in future should be considered.	27/05/2014	Brigeen Kelly
	12/08/2013	Orthopaedic Ward	Anaesthetics			The laboratory did not report neutropenia at any time. this was a misinterpretation of the result by the clinical staff. the laboraory report showed showed a percentage of neutrophils which were below the normal range. The absolute count however, which is the percentage multiplied by The total white cell count was normal. There is a need to change to ensure that the correct interpretation is applied to full cblood counts. the Laboratory should review it's reporting of white cell counts.	27/05/2014	Brigeen Kelly
	12/08/2013	4 South	Medical Secs/Ward Clerks General Surgery			Pathway completed	15/10/2013	Tracey McGuigan
	13/08/2013	Recovery Unit	Recovery Unit			Attention to detail - to slow down if under pressure to ensure safety of all concerned.	30/05/2014	Brigeen Kelly
	13/08/2013	Theatres/DPU STH	Theatres			To ensure all drugs & routes checked thoroughly prior to administration.	24/12/2013	Brigeen Kelly
	14/08/2013	4 South	General Surgery			Drug was in patients locker. poor communcation between staff	06/11/2013	Tracey McGuigan
	14/08/2013	4 North	General Surgery				04/09/2013	DS
	14/08/2013	4 North	General Surgery				04/09/2013	DS
	14/08/2013	4 North	General Surgery				04/09/2013	DS
	14/08/2013	Trauma Ward	Trauma Surgery				04/09/2013	DS
	14/08/2013	Day Surgery Unit CAH	Day Procedure/Surgery			none	28/05/2014	Brigeen Kelly
	15/08/2013	Day Procedure Unit DHH	Theatres			Ensure all staff adhere to the policy and checking procedures when handling specimens.		Brigeen Kelly
	15/08/2013	Male Surgical	General Surgery			Staff spoken to and advised of appropriate staffing levels	30/09/2013	AL

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	15/08/2013	Theatres 5-8 CAH	Orthopaedic Surgery	Irrelevant information redacted by the USI			12/09/2013	DS
	15/08/2013	Theatres/DPU STH	General Surgery			good referral criteria to be followed at all times	06/11/2013	Brigeen Kelly
	16/08/2013	Delivery Suite, CAH	Anaesthetics			Check all equipment routinely before each patient.	27/05/2014	Brigeen Kelly
	16/08/2013	Thorndale Unit	Outpatients			All outpatient falls are reviewed by ED	18/09/2013	GH
	16/08/2013	Day Surgery Unit CAH	Day Procedure/Surgery			none	28/05/2014	Ushagowri Mavuri
	16/08/2013	4 North	General Surgery				12/09/2013	GH
	16/08/2013	Theatres 5-8 CAH	T&O Theatres			Importance of head to toe checks reinforced with all staff. This could have been an incident with very serious consequences had it happened with a different patient. However, we are hopeful that any fututre incident similar to this shall be avoided.	30/12/2013	Laura Murphy
	16/08/2013	4 North	General Surgery			good communication and documentation	06/11/2013	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	16/08/2013	Trauma Ward	Trauma Surgery	Irrelevant information redacted by the USI		Shared with other wds re ensuring blood available	17/09/2013	DS
	17/08/2013	General OutpatientsTreatment Room	ENT Surey			complete all documentation at time	06/11/2013	GH
	17/08/2013	Theatres 1-4 CAH	Theatres				28/08/2013	Brigeen Kelly
	17/08/2013	Trauma Ward	Trauma Surgery			Only can do the essential clinical tasks during certain situations	18/09/2013	GH
	18/08/2013	Female Surgical/Gynae	General Surgery			careful handling of sharps at all times	18/09/2013	GH
	19/08/2013	Emergency Department DHH	General Surgery			Ds - Fracture meeting to discuss issues . AMD , AD , HOS involved	23/09/2013	DS
	19/08/2013	Emergency Department DHH	Medical Secs/Ward Clerks - Urology and ENT			DS - D/W wards	23/09/2013	DS
	19/08/2013	Trauma Ward	Trauma Surgery			GP referral	23/09/2013	DS
	20/08/2013	Day Procedure Unit DHH	Day Procedure/Surgery			due to time lapse 17 months and no updated available information , this incident is CLOSED B Kelly 21.01.15	21/01/2015	MW1
	20/08/2013	4 North	General Surgery			Ds - When to D/W staff when to do an IR1 . This is not one !!!!	23/09/2013	DS
	20/08/2013	4 South	General Surgery			ensure all staff are aware of importance of documenting and caring for CVC lines as per protocol	06/11/2013	Tracey McGuigan
	21/08/2013	CEAW	Urology Surgery			For discussion with Junior Drs	25/09/2013	GH
	21/08/2013	Paediatric Ward	General Surgery			Ds - shared with HOS	05/12/2013	Dr David Grier
	21/08/2013	Day Surgery Unit CAH	General Surgery			good communication	06/11/2013	Brigeen Kelly
	22/08/2013	ICU CAH	ICU				23/08/2013	Brigeen Kelly
	22/08/2013	Urology Clinic	Urology Surgery			HOS to D/W consultant involved	25/09/2013	DS
	22/08/2013		Orthopaedic Surgery					Pamela Truesdale
	23/08/2013	Day Surgery Unit CAH	Day Procedure/Surgery			it is imperative that staff dealing with charts/referrals etc file/forward all necessary information/referrals/charts regarding patients onto the appropriate area to ensure patient information is available so that patients can be treated	28/05/2014	Ushagowri Mavuri
	23/08/2013	Urology Clinic	Urology Surgery			DS - Spoke to Consultant	25/09/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	23/08/2013	Theatres 1-4 CAH	Theatres	Irrelevant information redacted by the USI		No further incidents of this nature this this one BK 24.12.13	24/12/2013	Brigeen Kelly
	23/08/2013	4 South	General Surgery			issues to be dealt with at time of incident	06/11/2013	Tracey McGuigan
	23/08/2013	CEAW	Urology Surgery			Ds -D/W HOS	25/09/2013	GH
	24/08/2013	Female Surgical/Gynae	General Surgery			D/W staff at measures board	25/09/2013	DS
	26/08/2013	Male Surgical	General Surgery			none	10/10/2013	AL
	27/08/2013	Theatres 1-4 CAH	Theatres			Careful recording of drugs received into departments and ensure all counts are correct. Highlighted to staff a weekly meeting and documented in newsletter.	24/12/2013	Brigeen Kelly
	27/08/2013	Urology Clinic	Urology Surgery			HOS D/W Cons	25/09/2013	DS
	27/08/2013	Theatres/DPU STH	General Surgery			none	06/11/2013	Brigeen Kelly
	28/08/2013	General OutpatientsTreatment Room	Outpatients				28/08/2013	Connie Connolly
	29/08/2013	4 North	General Surgery			Staff must learn to prioitise workload if very busy	30/09/2013	GH
	29/08/2013	3 South	Urology Surgery			Ds - D/w Wd sisters	02/10/2013	DS
	29/08/2013	3 South	Urology Surgery			none	02/10/2013	GH
	29/08/2013	Female Surgical/Gynae	General Surgery			as above	17/10/2014	Connie Connolly
	30/08/2013	Theatres 1-4 CAH	Anaesthetics			Theatre list to be available prior to commencing theatre list. TMS to be complete and earlier correspondence regarding theatre lists. Theatre lists must be on TMS by 4:30 of the previous day.	24/09/2013	Brigeen Kelly
	30/08/2013	Theatres 1-4 CAH	Theatres			None	14/10/2013	Brigeen Kelly
	30/08/2013	Urology Clinic	Urology Surgery			Ds - CD aware	02/10/2013	DS
	30/08/2013	Male Surgical	General Surgery			none		AL
	30/08/2013	3 South	Urology Surgery			Ds - Shared with falls gp	02/10/2013	DS
	30/08/2013	4 North	General Surgery			staff need to follow transfusion prtocol	02/10/2013	GH
	02/09/2013	Theatres 5-8 CAH	T&O Theatres			Health & Safety at work reinforced to all staff.	30/12/2013	Laura Murphy
	02/09/2013	Theatres/DPU STH	General Surgery			Sharing with sec staff	02/10/2013	DS
	03/09/2013	Theatres/DPU STH	Day Procedure/Surgery			As above	28/05/2014	Brigeen Kelly
	03/09/2013	Theatres 1-4 CAH	Outpatients			as above	08/11/2013	Connie Connolly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	03/09/2013	3 South	Urology Surgery	Irrelevant information redacted by the USI		DS - falls	06/11/2013	DS
	03/09/2013	Male Surgical	General Surgery				03/09/2013	DS
	04/09/2013	ICU CAH	ICU			None	24/09/2013	Brigeen Kelly
	04/09/2013	3 South	ENT Surery			DS - Falls pathway completed	02/10/2013	DS
	04/09/2013	General Outpatients Reception/Waiting Area	Medical Secs/Ward Clerks Outpatients			Shared with HOS to prevent again	04/10/2013	DS
	04/09/2013	3 South	General Surgery			none	03/10/2013	GH
	04/09/2013	Theatres 1-4 CAH	Theatres			To ensure all details required are recorded	20/05/2014	Brigeen Kelly
	05/09/2013	Orthopaedic Ward	Orthopaedic Surgery			150115cc-As agreed by Acute Governance, until medical staff commence regular review of prescribing incidents, CC/PS/JR screened IR1 and agreed information on IR1 did not indicate further review required.	15/01/2015	Maureen Farley
	05/09/2013	Theatres/DPU STH	General Surgery			none	06/11/2013	Brigeen Kelly
	05/09/2013	General OutpatientsTreatment Room	Outpatients			none of note	24/10/2013	Connie Connolly
	06/09/2013	Orthopaedic Ward	Medical Secs/Ward Clerks Trauma and Orthopaedics			none	03/10/2013	GH
	06/09/2013	ICU CAH	ICU			None	24/09/2013	Brigeen Kelly
	06/09/2013	Theatres 1-4 CAH	Theatres			Planning & back up plan for future occurrences - now resolved	24/12/2013	Brigeen Kelly
	07/09/2013	Female Surgical/Gynae	General Surgery			none	03/10/2013	GH
	08/09/2013	ICU CAH	ICU			None	14/10/2013	Brigeen Kelly
	08/09/2013	ICU CAH	ICU			To be completed.	12/05/2014	Brigeen Kelly
	08/09/2013	ICU CAH	ICU			Ongoing bed issue trustwide - bed flow team working to relieve pressures when possible.	24/09/2013	Brigeen Kelly
	09/09/2013	4 North	General Surgery			none	03/10/2013	GH
	09/09/2013	Theatres/DPU STH	Chronic Pain Management			None	14/10/2013	Brigeen Kelly
	09/09/2013	Theatres 1-4 CAH	Anaesthetics			Communication breakdown between surgical & anaesthetic team- improved communication structures to be implemented between teams.	27/05/2014	Brigeen Kelly
	09/09/2013	ICU CAH	ICU			None	05/11/2013	Brigeen Kelly
	09/09/2013	General Outpatients Reception/Waiting Area	Outpatients			none of note	24/10/2013	Connie Connolly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	10/09/2013	Theatres 1-4 CAH	General Surgery	Irrelevant information redacted by the USI		Inappropriate preoperative assessment at ward level. To be investiagted by SEC escalated to Head of service and discussed at sisters meeting	06/11/2013	Brigeen Kelly
	10/09/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Nil	28/05/2014	Ushagowri Mavuri
	10/09/2013	Maternity Ward	Anaesthetics			Obstetric management appears appropriate although missed opportunity to involve anaesthetist prior to first discharge. Forwarded for anaesthetic review	27/05/2014	Brigeen Kelly
	10/09/2013	Female Surgical/Gynae	General Surgery			none	03/10/2013	GH
	10/09/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Nil	28/05/2014	Brigeen Kelly
	11/09/2013	Theatres 1-4 CAH	Theatres			As above, care with accuracy of clerical transcribing of operation details.	24/04/2014	Brigeen Kelly
	11/09/2013	3 South	Urology Surgery			falls pathway completion to be addressed at measures boards meetings	03/10/2013	GH
	11/09/2013	Theatres 1-4 CAH	Theatres			Technical failure	24/12/2013	Brigeen Kelly
	12/09/2013	Theatres 1-4 CAH	Theatres			None	24/12/2013	Brigeen Kelly
	12/09/2013	3 South	Urology Surgery			DS - for sharing with otherwards	04/10/2013	DS
	12/09/2013	Day Surgery Unit CAH	General Surgery			Better communication	04/10/2013	DS
	12/09/2013	Trauma Ward	Trauma Surgery			awareness of medication dosage discussed	06/11/2013	RB
	13/09/2013	ICU CAH	ICU			yes - to be collated with both departments. there are guidelines for such(illicit drugs) pharmacy to be contacted and to receive sample. in this case the substance could not be found	20/12/2013	Helen McGarry
	13/09/2013	Orthopaedic Ward	Orthopaedic Surgery			DS - was esc to HOS in pt flow to help with breaks	04/10/2013	DS
	13/09/2013	Urology Clinic					23/01/2014	David Cardwell
	14/09/2013	Orthopaedic Ward	Orthopaedic Surgery			DS - shared with others for learning	04/10/2013	DS
	14/09/2013	Theatres 5-8 CAH	T&O Theatres			It is imperative that staff from the ward handover the patient status so that they recieve the correct treatment and ensure that infection control policies and procedures are followed.	30/12/2013	Laura Murphy
	14/09/2013	ICU CAH	ICU			recurring problem	23/09/2013	Helen McGarry

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	14/09/2013	Emergency Department CAH	Anaesthetics	Irrelevant information redacted by the USI		none	30/01/2014	Brigeen Kelly
	16/09/2013	Male Surgical	General Surgery			no learning noted	24/09/2013	AL
	16/09/2013	Urology Clinic	Urology Surgery			Actioned by CD	10/10/2013	DS
	16/09/2013	Theatres/DPU STH	Day Procedure/Surgery			None	24/09/2013	Brigeen Kelly
	16/09/2013	4 North	General Surgery			Esc to ED for learning	10/10/2013	DS
	17/09/2013	ICU CAH	ICU			None	24/09/2013	Brigeen Kelly
	17/09/2013	ICU CAH	ICU			none	24/12/2013	Brigeen Kelly
	17/09/2013	CEAW	General Surgery			to be D/w junior Dr for learning	10/10/2013	DS
	18/09/2013	Trauma Ward	Trauma Surgery			DS - all completed	14/10/2013	DS
	19/09/2013	ICU CAH	ICU			none	24/12/2013	Mary Lennon
	19/09/2013	ICU CAH	ICU			none	31/12/2013	Mary Lennon
	19/09/2013	4 South	General Surgery			close patient observation and risk assessment and good documentation	11/11/2013	Tracey McGuigan
	19/09/2013	ICU CAH	ICU			nil	18/03/2014	Brigeen Kelly



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	19/09/2013	Orthopaedic Ward	Orthopaedic Surgery	Irrelevant information redacted by the USI		Share with Junior Dr	14/10/2013	DS
	19/09/2013	ENT Clinic	Outpatients			none of note	31/10/2013	Connie Connolly
	19/09/2013	Theatres/DPU STH	Day Procedure/Surgery			check all liquid containers prior to decanting into cupboards to ensure seals are secure and bottles are intact.	25/10/2013	MW1
	19/09/2013	Urology Clinic	Urology Surgery			Esc to HOS	23/09/2013	DS
	19/09/2013	Orthopaedic Ward	Orthopaedic Surgery			none	11/11/2013	DS
	20/09/2013	CEAW	Urology Surgery			Escalated to be discussed with Junior Doctors	15/10/2013	Nichola McClenaghan
	20/09/2013	CEAW	Urology Surgery			FY1 made aware of incident	15/10/2013	Nichola McClenaghan
	20/09/2013	Urology Clinic	Outpatients				30/10/2013	David Cardwell
	20/09/2013	Trauma Ward	Trauma Surgery			Ds - D/W wards		DS
	20/09/2013	CEAW	Urology Surgery			Escalated to share at Junior Doctors forum	15/10/2013	Nichola McClenaghan
	20/09/2013	4 South	Vasculur Surgery			none	11/11/2013	Tracey McGuigan
	20/09/2013	Trauma Ward	Trauma Surgery			To be shared with staff on wd for learning	23/09/2013	DS
	20/09/2013	Urology Clinic	Urology Surgery			Ds - Hos to speak to Cons	24/10/2013	DS
	21/09/2013	4 North	General Surgery			Dw - D/w staff re falls pathway	24/10/2013	DS
	21/09/2013	Orthopaedic Ward	Orthopaedic Surgery			ds- d/w wards	24/10/2013	GH
	21/09/2013	4 North	General Surgery			Use of ECS	28/10/2013	GH
	21/09/2013	Trauma Ward	Trauma Surgery			Ds - falls pathway followed	05/12/2013	RB
	23/09/2013	CEAW	Urology Surgery			Discussed with Junior medical staff	15/10/2013	Nichola McClenaghan
	23/09/2013	CEAW	Urology Surgery			Discussed with Junior Medical staff	15/10/2013	GH
	24/09/2013	X-ray Dept (Radiology)	Day Procedure/Surgery			Nil - bed pressures	14/11/2013	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	24/09/2013	Theatres 1-4 CAH	ENT Surgery	Irrelevant information redacted by the USI		251114cc-await learning via SAI report	25/11/2014	Martina Corrigan
	24/09/2013	X-ray Dept (Radiology)	Day Procedure/Surgery			Nil	28/05/2014	Ushagowri Mavuri
	24/09/2013	Orthopaedic Ward	Orthopaedic Surgery			none	11/11/2013	DS
	24/09/2013	Emergency Department CAH	Orthopaedic Surgery			Ds - shared for learning	01/11/2013	DS
	25/09/2013	ICU CAH	ICU			None	05/11/2013	Brigeen Kelly
	25/09/2013	Theatres/DPU STH	Theatres			As above	05/11/2013	Brigeen Kelly
	25/09/2013	Theatres 1-4 CAH	Theatres			As above	13/05/2014	Brigeen Kelly
	25/09/2013	Theatres/DPU STH	Day Procedure/Surgery			Personal lesson lto be learned regarding hot fluids.	28/05/2014	MW1
	26/09/2013	Theatres 1-4 CAH	Theatres			As above.	24/04/2014	Brigeen Kelly
	26/09/2013	ICU CAH	ICU			None	05/11/2013	Brigeen Kelly
	26/09/2013	ICU CAH	ICU			none	02/12/2013	Brigeen Kelly
	26/09/2013	ICU CAH	ICU			None	09/01/2014	Brigeen Kelly
	26/09/2013	ICU CAH	ICU			none	05/11/2013	Brigeen Kelly
	26/09/2013	X-ray Dept (Radiology)	Day Procedure/Surgery			As detailed - staff on sickleave - attending OHD	10/10/2013	Ushagowri Mavuri
	27/09/2013	Non Trust premises	General Surgery			sent to HSCB for followup	01/11/2013	GH

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	27/09/2013	Trauma Ward	Orthopaedic Surgery	Irrelevant information redacted by the USI		nsure adherance to medication code	02/01/2014	RB
	28/09/2013	4 North	General Surgery			Good PPP	01/11/2013	DS
	28/09/2013	ICU CAH	ICU			one	31/12/2013	Brigeen Kelly
	28/09/2013	CEAW	Outpatients			s above	23/10/2014	Connie Connolly
	28/09/2013	ICU CAH	ICU			None	05/11/2013	Brigeen Kelly
	29/09/2013	Trauma Ward	Trauma Surgery			N/a	01/11/2013	DS
	29/09/2013	Orthopaedic Ward	Orthopaedic Surgery			hare with other areas re trans of pts and info sharing . SBAR sheet is being updated	05/12/2013	DS
	29/09/2013	4 North	General Surgery			hared with ED	01/11/2013	DS
	29/09/2013	ICU CAH	ICU			ontinued vigilance re medicine management	31/12/2013	Mary Lennon
	30/09/2013	ICU CAH	ICU			None	05/11/2013	Brigeen Kelly
	30/09/2013	Thorndale Unit	Urology Surgery			or d/w HOS	22/10/2013	Martina Corrigan
	30/09/2013	ICU CAH	ICU			None	05/11/2013	Brigeen Kelly
	30/09/2013	Female Surgical/Gynae	General Surgery			Ds - shared for learning		DS
	30/09/2013	CEAW	ENT Surery			hared for learning	05/11/2013	DS
	30/09/2013	4 South	General Surgery			Ds - shared with staff re labelling	05/11/2013	DS
	30/09/2013	Trauma Ward	Trauma Surgery			N/a	01/11/2013	DS
	01/10/2013	Recovery CAH	Recovery Unit			his occurred within the new recovery unit and it highlighted that the bleep system was working well as help arrived immediately. However, it also highlighted that the porters eeded FOB access to the ward and this has been addressed with the portering staff.	30/12/2013	Brigeen Kelly
	01/10/2013	Theatres 1-4 CAH	Theatres			rioritising of lists cannot always occur due to the emergency procedures.	22/11/2013	Brigeen Kelly
	01/10/2013	Theatres 1-4 CAH	Theatres			None	24/12/2013	NR Pamela Johnston

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	01/10/2013	Theatres DHH	Anaesthetics	24 boxes of propofol 20ml amps were ordered on monday 30/09/13.	Pharmacy contacted and supplementary stock ordered.	Information shared with pharmacy staff	06/02/2014	Brigeen Kelly
				Irrelevant information redacted by the USI				
	01/10/2013	3 South	Urology Surgery					
	03/10/2013	Urology Clinic	Urology Surgery					
	03/10/2013	3 South	Urology Surgery					
	04/10/2013	3 South	Urology Surgery					
	04/10/2013	Theatres 5-8 CAH	T&O Theatres					
	04/10/2013	Theatres DHH	Theatres					
	07/10/2013	Theatres 1-4 CAH	Theatres					
	07/10/2013	3 South	General Surgery					
	07/10/2013	3 South	General Surgery					
	08/10/2013	Trauma Ward	Trauma Surgery					
	08/10/2013	Recovery CAH	Recovery Unit					
	08/10/2013	3 South	Urology Surgery					
	08/10/2013	Orthopaedic Ward	Orthopaedic Surgery					
	08/10/2013	Recovery CAH	Recovery Unit					
	08/10/2013	Recovery CAH	Recovery Unit					

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	08/10/2013	ICU CAH	ICU	Irrelevant information redacted by the USI		See attached documents.	30/05/2014	Mary Lennon
	09/10/2013	ICU CAH	Anaesthetics			Delayed discharge ICU.	22/11/2013	Brigeen Kelly
	09/10/2013	Day Surgery Unit CAH	Day Procedure/Surgery			None	22/11/2013	Brigeen Kelly
	09/10/2013	Day Surgery Unit CAH	Day Procedure/Surgery			as detailed in NIAIC closure letter	28/05/2014	Brigeen Kelly
	09/10/2013	Male Surgical	General Surgery			none	10/10/2013	AL
	09/10/2013	Non Trust premises	General Surgery			Careful monitoring	10/10/2013	DS
	09/10/2013	Theatres 1-4 CAH	General Surgery			Ds - as above		Brigeen Kelly
	09/10/2013	Day Surgery Unit CAH	General Surgery			More attention when booking	02/01/2014	Brigeen Kelly
	10/10/2013	Day Surgery Unit CAH	General Surgery			Actioned with wards	03/01/2014	Brigeen Kelly
	10/10/2013	CEAW	ENT Surery			Escalated to be discussed with Junior medical staff	15/10/2013	Nichola McClenaghan
	10/10/2013	CEAW	General Surgery			Discussed with Junior Doctors	02/01/2014	Nichola McClenaghan
	11/10/2013	3 South	Urology Surgery			Ds - Shared with dr for learning	06/11/2013	DS
	11/10/2013	CEAW	ENT Surery			shared for learning	29/11/2013	DS
	11/10/2013	Theatres 5-8 CAH	T&O Theatres			Communication between teams - especially the surgeon to all other staff	30/12/2013	Alison Moan
	11/10/2013	CEAW	General Surgery			Discussed with junior medical staff	15/10/2013	Nichola McClenaghan
	11/10/2013	3 South	Urology Surgery			Ds - shared	06/11/2013	DS
	11/10/2013	Urology Clinic	Urology Surgery			Ds - Esc to CD	06/11/2013	DS
	11/10/2013	Day Surgery Unit CAH	General Surgery			To reiterate with staff booking same	03/01/2014	Brigeen Kelly
	11/10/2013	CEAW	ENT Surery			Escalated and to be discussed with junior doctors	15/10/2013	Nichola McClenaghan
	13/10/2013	4 North	General Surgery			DS - shared with sts re falls pathways	06/11/2013	DS
	14/10/2013	3 South	Urology Surgery			Ds - shared with sisters	06/11/2013	DS
	14/10/2013	3 South	Outpatients			Ds - pt pushed off cover . rare occurence	14/10/2013	DS
	15/10/2013	3 South	Urology Surgery			Ds - Falls pathway discussed with ward sister	06/11/2013	DS
	15/10/2013	Trauma Ward	Trauma Surgery			Ds - shared with staff	06/11/2013	DS
	15/10/2013	Urology Clinic	Urology Surgery			To be d/w consultant	15/10/2013	DS
	15/10/2013	Urology Clinic	Urology Surgery			Ds - Esc to CD	06/11/2013	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	15/10/2013	Orthopaedic Ward	Orthopaedic Surgery	Irrelevant information redacted by the USI		Do not send all scripts straight at once	03/01/2014	Maureen Farley
	16/10/2013	Trauma Ward	Trauma Surgery			Ds - Shared with staff for learning	06/11/2013	DS
	16/10/2013	ICU CAH	ICU			none	17/12/2013	Mary Lennon
	16/10/2013	Orthopaedic Ward	Orthopaedic Surgery			ds - shared with others	06/11/2013	DS
	18/10/2013	Female Surgical/Gynae	Theatres			as documented	20/05/2014	Brigeen Kelly
	18/10/2013	ICU CAH	ICU			ongoing issues with delayed discharges resulting in delayed admission or no ICU bed to facilitate admission of critically ill patient required to find beds outside the Trust.	09/01/2014	Mary Lennon
	18/10/2013	ICU CAH	ICU			on going issue where delayed discharges impact on timely admission of ill patients to ICU	10/01/2014	Mary Lennon
	19/10/2013	Theatres/DPU STH	General Surgery			Shared with admin staff	06/11/2013	DS
	19/10/2013	Rehabilitation Ward	General Surgery			Ds - no issue identified	06/11/2013	DS
	19/10/2013	Delivery Suite, CAH	Anaesthetics			Absolutely none	17/02/2014	Mrs Patricia Kingsnorth
	20/10/2013	Male Surgical	General Surgery			no lessons learned as protocol was followed	24/10/2013	AL
	20/10/2013	4 North	General Surgery			Ds Shared with others	07/11/2013	DS
	20/10/2013	Female Surgical/Gynae	General Surgery			Ds - lessons will be D/W Pressure ulcer team	07/11/2013	DS
	20/10/2013	3 South	Urology Surgery			N/a	06/11/2013	DS
	20/10/2013	4 North	General Surgery			DS - shared	06/11/2013	DS
	20/10/2013	ICU CAH	ICU			NONE	09/01/2014	Mary Lennon
	21/10/2013	CEAW	General Surgery			Shared with Junior Drs	03/12/2013	DS
	21/10/2013	CEAW	General Surgery			To be D/w with Drs for learning	03/12/2013	DS
	21/10/2013	ICU CAH	ICU			none		Brigeen Kelly
	21/10/2013	ICU CAH	ICU			none	24/12/2013	Mary Lennon

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Irrelevant information redacted by the USI	21/10/2013	CEAW	General Surgery	Irrelevant information redacted by the USI		Share with other Dr	03/12/2013	Vivienne Kerr
	22/10/2013	Theatres 1-4 CAH	Theatres			Highlighted to all staff and advised to put additional tape unto end of wire to prevent any future instances.	20/05/2014	Brigeen Kelly
	22/10/2013	Fracture Clinic	Outpatients			feedback to be given to triage nurse and RN that applied cast. issue to be raised at weekly safety briefing ED week commencing 10/11/14	10/11/2014	MR Paul Smyth
	22/10/2013	Trauma Ward	Trauma Surgery			D/w staff	07/11/2013	DS
	23/10/2013	CEAW	General Surgery			ds - shared with others	18/11/2013	GH
	23/10/2013	CEAW	Urology Surgery			Ds - share for learning	11/11/2013	DS
	23/10/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Nil	28/05/2014	Brigeen Kelly
	23/10/2013	ICU CAH	ICU			none	24/12/2013	Mary Lennon
	23/10/2013	Theatres/DPU STH	Day Procedure/Surgery			ensure accurate documentation	28/05/2014	MW1
	23/10/2013	ICU CAH	ICU			none	06/02/2014	Brigeen Kelly
	23/10/2013	CEAW	Urology Surgery			Ds - to be D/w juniors	11/11/2013	DS
	23/10/2013	General Surgery Clinic	Outpatients			as above	31/10/2013	Connie Connolly
	23/10/2013	Theatres 5-8 CAH	T&O Theatres			None	30/12/2013	Laura Murphy
	23/10/2013	Theatres 5-8 CAH	General Surgery			Escalated to HOS and AD . Meeting with Hos and Cd re issue . Spoke to Hos on 27th Jan and informed issue resolved	27/01/2014	Brigeen Kelly
	23/10/2013	4 North	General Surgery			Ds - D/w staff	07/11/2013	DS
	23/10/2013	ICU CAH	ICU			none	31/12/2013	Mary Lennon
	23/10/2013	Theatres 1-4 CAH	General Surgery			ds - Shared	03/01/2014	Brigeen Kelly
	23/10/2013	Male Surgical	General Surgery			Personal Information redacted by USI	29/11/2013	AL
	23/10/2013	Theatres 1-4 CAH	Theatres			None	24/12/2013	Brigeen Kelly

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Irrelevant information redacted by the USI	24/10/2013	Theatres 5-8 CAH	T&O Theatres	Irrelevant information redacted by the USI		Patients legs and arms must be secured with either the "seatbelt" fastening or side props, this should stop any recurrance of this problem, although this seems to have been an isolated incident.	30/12/2013	Laura Murphy
	24/10/2013	Theatres 1-4 CAH	General Surgery			Ds - to be d/w sisters	27/01/2014	Brigeen Kelly
	24/10/2013	CEAW	General Surgery			DS - To be shared with Sec	03/12/2013	GH
	25/10/2013	CEAW	Urology Surgery			To be discussed at junior doctors forum	02/01/2014	Nichola McClenaghan
	25/10/2013	Theatres 1-4 CAH	General Surgery			DS - Issues re Th d/w strs on 16th Jan	27/01/2014	Brigeen Kelly
	26/10/2013	Maternity Ward	Anaesthetics			No obstetric issues, forwarded to anaesthetics for review	19/11/2013	Brigeen Kelly
	26/10/2013	Male Surgical	General Surgery			Pathway not completed . D /w sister	02/01/2014	DS
	27/10/2013	Theatres 1-4 CAH	Theatres			Discussed with porters regarding collecting what is requested on the form , all nursing staff advised to send for 1 unit only - more units in extenuating circumstances only.	20/05/2014	Brigeen Kelly
	28/10/2013	Day Surgery Unit CAH	Day Procedure/Surgery			nil	28/05/2014	Brigeen Kelly
	28/10/2013	4 North	General Surgery			Ds - shared with ward staff	18/11/2013	DS
	29/10/2013	Theatres 1-4 CAH	Theatres			As above. Portering supervisor has spoken to porterng staff so they are familiar with above procedure.	20/05/2014	Brigeen Kelly
	29/10/2013	ICU CAH	ICU			Datix to remain open until full investiagtion is completed. NIAIC closure letter received & attached	30/05/2014	Brigeen Kelly
	29/10/2013	Day Surgery Unit CAH	General Surgery			Ds - esc to OSL	27/01/2014	Brigeen Kelly
	29/10/2013	Theatres 1-4 CAH	Theatres			None	20/05/2014	Brigeen Kelly
	29/10/2013	Theatres 1-4 CAH	Theatres			as documented	20/05/2014	Brigeen Kelly
	29/10/2013	Theatres 1-4 CAH	Theatres			as above	20/05/2014	Brigeen Kelly



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Irrelevant information redacted by the USI	30/10/2013	Theatres/DPU STH	Theatres	Irrelevant information redacted by the USI		theatre staff have been made aware of the incident and the need to be more vigilant when checking theatres each morning.	20/05/2014	Mrs Marti McKenna
	30/10/2013	CEAW	Urology Surgery			to be discussed with junior doctors	15/01/2014	Nichola McClenaghan
	30/10/2013	Theatres 1-4 CAH	Theatres			Communiation between teams	20/05/2014	Brigeen Kelly
	30/10/2013	Trauma Ward	Trauma Surgery			All action taken	27/01/2014	RB
	30/10/2013	ICU CAH	ICU			none	24/12/2013	Mary Lennon
	30/10/2013	Theatres/DPU STH	Chronic Pain Management			ensure equipment is checked by x-ray staff prior to use. ensure service history of x-ray equipment is up to date.	30/05/2014	Brigeen Kelly
	31/10/2013	CEAW	Urology Surgery			for communication	15/01/2014	Nichola McClenaghan
	31/10/2013	Theatres/DPU STH	Day Procedure/Surgery			As documented	28/05/2014	Mrs Marti McKenna
	31/10/2013	Female Surgical/Gynae	General Surgery			Share with wds re falls	03/12/2013	DS
	31/10/2013	Theatres 1-4 CAH	General Surgery			D/w sisters on 16th Jan	27/01/2014	Brigeen Kelly
	31/10/2013	Theatres 1-4 CAH	Theatres			As per policy	22/11/2013	Brigeen Kelly
	31/10/2013	Theatres 1-4 CAH	General Surgery			Ds - D/w wards	27/01/2014	Brigeen Kelly
	01/11/2013	Day Surgery Unit CAH	Anaesthetics			None	01/11/2013	CMA
	02/11/2013	Theatres 1-4 CAH	Theatres			Dr Weir will discuss impact of poor communication with Dr Simoniuk and advise her of protocol of booking a patient into emergency theatre ensuring all relevant parties are informed.	13/05/2014	NR Pamela Johnston
	02/11/2013	Trauma Ward	Trauma Surgery			Ds - D/w sisters	03/12/2013	DS
	02/11/2013	4 South	General Surgery			All checks completed	27/01/2014	Tracey McGuigan
	02/11/2013	4 North	General Surgery			Ds - Falls pathway well completed	03/12/2013	DS
	03/11/2013	3 South	ENT Surery			Ds - lessens re approp trans	05/12/2013	DS

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Irrelevant information redacted by the USI	03/11/2013	Trauma Ward	Trauma Surgery	Irrelevant information redacted by the USI		Controlled drugs to be checked thoroughly	05/12/2013	DS
	04/11/2013	Male Surgical	General Surgery			Ds - staff to be informed of bed rails assessment	05/12/2013	DS
	04/11/2013	General OutpatientsTreatment Room	Outpatients			none of note	08/11/2013	Connie Connolly
	04/11/2013	Urology Clinic	Urology Surgery			Ds - Hos dealing with issue	05/12/2013	DS
	05/11/2013	Female Surgical/Gynae	General Surgery			Ds - D/w Wd sisters on Thurs 7th Nov	11/11/2013	DS
	05/11/2013	Trauma Ward	Trauma Surgery			Ds - Shared	05/12/2013	DS
	05/11/2013	Female Surgical/Gynae	General Surgery			Ds - shared for learning	27/01/2014	Brigeen Kelly
	05/11/2013	CEAW	General Surgery			As above	03/01/2014	Nichola McClenaghan
	05/11/2013	Day Surgery Unit CAH	General Surgery			Ds - Ecs to OSI	27/01/2014	Brigeen Kelly
	06/11/2013	Theatres 1-4 CAH	General Surgery			Ds - D/w Str on 16th Jan	27/01/2014	Brigeen Kelly
	06/11/2013	4 North	General Surgery			Ds - Esc to HOS as increase in unsheathed sharps	05/12/2013	DS
	06/11/2013	Delivery Suite, CAH	Theatres			Patient required abdominal x ray which could have been avoided had proper checks been completed.	20/05/2014	Brigeen Kelly
	06/11/2013	Orthopaedic Ward	Orthopaedic Surgery			Issue raised at he staff weekly meetings. D/w FY1	05/12/2013	DS
	07/11/2013	Theatres 5-8 CAH	T&O Theatres			Ensure once stock that is on back order has arrived into department is put out for use. then dispose of the replacement stock.	30/12/2013	Alison Moan
	07/11/2013	Male Surgical	General Surgery			To share at sisters meeting	11/12/2013	DS
	07/11/2013	Trauma Ward	Trauma Surgery			See above - all action taken	27/01/2014	RB
	07/11/2013	General Outpatients Reception/Waiting Area	Outpatients			as above		Connie Connolly
	08/11/2013	Theatres DHH	Theatres			None	25/11/2013	Brigeen Kelly
	09/11/2013	Trauma Ward	Trauma Surgery			xray revied of patient and same satifactory.	27/01/2014	RB
	10/11/2013	Theatres 1-4 CAH	Theatres			see additional documents	20/05/2014	NR Pamela Johnston
	11/11/2013	Theatres 1-4 CAH	General Surgery			Ds -D/w on 16th Jan	27/01/2014	Brigeen Kelly
	11/11/2013	Theatres 1-4 CAH	General Surgery			Ds - D/w Sisters but if pt is checked out on wd , Is there a safety issue	27/01/2014	Brigeen Kelly

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Irrelevant information redacted by the USI	11/11/2013	Theatres DHH	Theatres	Irrelevant information redacted by the USI		See NIAIC closure letter	30/05/2014	MMA
	11/11/2013	Theatres 1-4 CAH	General Surgery			Ds - to be d/w HOS	27/01/2014	Brigeen Kelly
	11/11/2013	Theatres 1-4 CAH	General Surgery			D/w str 16th Jan	27/01/2014	Brigeen Kelly
	11/11/2013	Theatres 1-4 CAH	Theatres			None	13/05/2014	NR Pamela Johnston
	12/11/2013	Theatres 1-4 CAH	General Surgery			Ds - ti be D/w Drs at Spec meeting	27/01/2014	Brigeen Kelly
	12/11/2013	ICU CAH	ICU			checking site of canula before discharge	05/06/2014	Mary Lennon
	12/11/2013	Ambulance/Patient Service Vehicle	Urology Surgery			ds - shared with other wds	19/12/2013	DS
	12/11/2013	Female Surgical/Gynae	General Surgery			Ds - shared with others re falls pathway	12/12/2013	DS
	12/11/2013	Theatres 1-4 CAH	Urology Surgery			Ds - Esc to HOS for discussion	27/01/2014	Brigeen Kelly
	13/11/2013	Urology Clinic	Urology Surgery			Ds - Esc to Hos	19/12/2013	DS
	13/11/2013	Theatres 1-4 CAH	General Surgery			Ds - D/w Strs on 16th Jan	27/01/2014	Brigeen Kelly
	13/11/2013	Paediatric Ward	ENT Surery			Esc to HOS	27/01/2014	Dr David Grier
	13/11/2013	Pre-operative Assessment Clinic	General Surgery			ESC to HOS	27/01/2014	Brigeen Kelly
	14/11/2013	ICU CAH	ICU			none	09/01/2014	Mary Lennon
	14/11/2013	Theatres 1-4 CAH	Theatres			Communication structures to be set up between Theatres & CSSD - Mrs Wilson to do.	20/05/2014	Brigeen Kelly

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Irrelevant information redacted by the USI	14/11/2013	3 South	ENT Surery	Irrelevant information redacted by the USI		good engagement with family if difficult situation arises	20/12/2013	GH
	14/11/2013	ICU CAH	ICU			appropriate use of clamps	06/02/2014	Mary Lennon
	14/11/2013	Day Surgery Unit CAH	Day Procedure/Surgery			highight to staff importance that all care documented has actually been carried out risk of litigation	28/05/2014	Brigeen Kelly
	14/11/2013	4 South	General Surgery			All action taken but no falls pathway completed	27/01/2014	Tracey McGuigan
	14/11/2013	General OutpatientsTreatment Room	Outpatients			none of note	26/11/2013	Connie Connolly
	15/11/2013	Theatres 1-4 CAH	Theatres			Nil	20/05/2014	CSP
	15/11/2013	4 North	General Surgery			completee all documantation at time of incident	20/12/2013	GH
	16/11/2013	Theatres 1-4 CAH	Theatres			as above	20/05/2014	Brigeen Kelly
	16/11/2013	Male Surgical	General Surgery			timely completion and review of incidents at ward level	20/12/2013	GH
	16/11/2013	Orthopaedic Ward	Trauma Surgery			communication essential between teams / wards	20/12/2013	GH
	16/11/2013	Day Surgery Unit CAH	General Surgery			Ds - sorted	27/01/2014	Brigeen Kelly
	17/11/2013	4 North	General Surgery			careful adherence to medicine code	20/12/2013	GH
	17/11/2013	ICU CAH	ICU			none	03/12/2013	Mary Lennon
	17/11/2013	Orthopaedic Ward	Orthopaedic Surgery			N/a	27/01/2014	DS
	17/11/2013	3 South	General Surgery			Ds - to be shared with drs	27/12/2013	DS
	17/11/2013	4 South	General Surgery			Ds - shared with other wards	27/01/2014	Tracey McGuigan
	18/11/2013	Day Procedure Unit DHH	Day Procedure/Surgery			All staff advised of their professional responsibility to adhere to medicine management policy especially checking procedures for controlled drugs.	05/12/2013	MW1
	18/11/2013	3 South	ENT Surery			Ds - to be d/w other wds	23/01/2014	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	18/11/2013	Theatres 1-4 CAH	Theatres	Irrelevant information redacted by the USI		None that I can advise, but happy to be advised if I have overlooked anything.PM 10/12/13	20/05/2014	Brigeen Kelly
	18/11/2013	Theatres 1-4 CAH	Theatres			As above	20/05/2014	Brigeen Kelly
	19/11/2013	Theatres 5-8 CAH	T&O Theatres			Patient positioning added to WHO checklist	30/12/2013	Laura Murphy
	19/11/2013	4 South	General Surgery			Ds - d/w Dr and nursing staff re rates	27/12/2013	DS
	19/11/2013	Theatres 5-8 CAH	T&O Theatres			None	21/11/2013	Laura Murphy
	19/11/2013	Day Surgery Unit CAH	General Surgery			D/w Dr	27/01/2014	Brigeen Kelly
	19/11/2013	Trauma Ward	Trauma Surgery			Ds - falls info complete	27/12/2013	DS
	20/11/2013	3 South	Urology Surgery			Ds - falls complete	27/12/2013	DS
	20/11/2013	4 North	General Surgery			Ds - Not an IR! . D/w Sister . Staff to be informed as there was no incident	27/12/2013	DS
	20/11/2013	Day Surgery Unit CAH	General Surgery			Esc to OSL	27/01/2014	Brigeen Kelly
	21/11/2013	Theatres 5-8 CAH	Orthopaedic Surgery			as above	27/01/2014	Jenny Edgar
	21/11/2013	Theatres/DPU STH	General Surgery			Ds - Esc to Hos	27/01/2014	Brigeen Kelly
	21/11/2013	Theatres/DPU STH	Day Procedure/Surgery			Nil	28/05/2014	Brigeen Kelly
	22/11/2013	Paediatric Ward	ENT Surery			Ds - Esc to hos	27/01/2014	Dr David Grier
	22/11/2013	Female Surgical/Gynae	General Surgery			FP followed	27/12/2013	DS
	22/11/2013	Urology Clinic	Urology Surgery			Ds - HOS /CD aware	27/12/2013	DS
	22/11/2013	Paediatric Ward	General Surgery			Ds - Should be D/W staff	27/01/2014	Dr David Grier
	22/11/2013	Day Surgery Unit CAH	General Surgery			Ds - no lessons	27/01/2014	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	22/11/2013	Theatres 1-4 CAH	Urology Surgery	Irrelevant information redacted by the USI		ESC to HOS	27/12/2013	DS
	22/11/2013	Theatres 1-4 CAH	Anaesthetics			None	23/12/2013	Brigeen Kelly
	22/11/2013	4 South	General Surgery			Ds - shared with others re disch	27/12/2013	DS
	23/11/2013	Theatres 5-8 CAH	T&O Theatres			Security addressed	26/11/2013	Laura Murphy
	23/11/2013	Theatres 1-4 CAH	Anaesthetics			Sharps awareness	23/12/2013	Brigeen Kelly
	23/11/2013	ICU CAH	ICU			none	09/01/2014	Mary Lennon
	23/11/2013	Theatres 1-4 CAH	Theatres			See documents attached	30/05/2014	Brigeen Kelly
	24/11/2013	Orthopaedic Ward	Orthopaedic Surgery					David Cardwell
	24/11/2013	Theatres 5-8 CAH	Theatres			None	02/01/2014	Brigeen Kelly
	25/11/2013	ICU CAH	ICU			none	17/12/2013	Mary Lennon
	25/11/2013	3 South	Urology Surgery			Nothing	27/12/2013	Martina Corrigan
	26/11/2013	3 South	General Surgery			Ds - Issue d?w Disch Dr	27/12/2013	DS
	26/11/2013	Theatres 1-4 CAH	Anaesthetics			Nil	04/02/2014	Brigeen Kelly
	26/11/2013	Day Surgery Unit CAH	Day Procedure/Surgery			As above - Delay in List	28/05/2014	Ushagowri Mavuri
	27/11/2013	Theatres 1-4 CAH	Theatres			None	29/11/2013	Brigeen Kelly
	27/11/2013	Recovery CAH	Recovery Unit			Eary bed manager involvement - HoS to be contatced if no action from Bed Managers - staff to be called in from home if the department is deemed unsafe. BK 30.12.13	30/12/2013	EmmaJane Kearney
	27/11/2013	Urology Clinic	Urology Surgery			none	27/12/2013	DS
	27/11/2013	Theatres 1-4 CAH	Theatres			None	20/05/2014	Brigeen Kelly
	27/11/2013	4 South	General Surgery			ds - falls pathway followed	27/12/2013	DS
	28/11/2013	Theatres 1-4 CAH	General Surgery			Ds - D/w Drs	27/01/2014	Brigeen Kelly
	28/11/2013	Theatres 1-4 CAH	Theatres			As above	20/05/2014	Brigeen Kelly

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Irrelevant information redacted by the USI	28/11/2013	Day Surgery Unit CAH	Day Procedure/Surgery	Irrelevant information redacted by the USI		Preop planning at ward level insufficient - to be addressed by Sr Mayne 1 South	28/05/2014	Ushagowri Mavuri
	28/11/2013	3 South	ENT Surery			ESc to Th	27/12/2013	DS
	28/11/2013	Male Surgical	ENT Surery			DS - Wd Sister to Complete a medication form and to be used with other staff	05/12/2013	DS
	29/11/2013	Theatres 5-8 CAH	Theatres			none	02/01/2014	Brigeen Kelly
	29/11/2013	Trauma Ward	Trauma Surgery			DS - to check prior to disch all prescriptions	02/12/2013	DS
	29/11/2013	Orthopaedic Ward	Orthopaedic Surgery			Ds - Esc to wd and HOS	27/01/2014	Maureen Farley
	29/11/2013	Male Surgical	General Surgery			Ds - D/w sisters re falls pathway on 19th Dec	27/12/2013	DS
	29/11/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Bed flow issues - Delays inevitable	28/05/2014	Ushagowri Mavuri
	30/11/2013	ENT Clinic	Outpatients			none of note	16/01/2014	Connie Connolly
	30/11/2013	Trauma Ward	Trauma Surgery			Shared	23/01/2014	DS
	30/11/2013	Maternity Ward	Anaesthetics			Readmission for epidural headache managed with effect by anaesthetist.	30/05/2014	Brigeen Kelly
	30/11/2013	Paediatric Ward	General Surgery			Ds - Esc to Hos for learning	27/01/2014	Dr David Grier
	30/11/2013	4 South	General Surgery			D/w sisters on 19th Dec re post falls	27/12/2013	DS
	01/12/2013	Paediatric Ward	General Surgery			Ds - Esc to HOS	27/01/2014	Dr David Grier
	01/12/2013	ICU CAH	ICU			NONE	24/12/2013	Mary Lennon
	02/12/2013	4 North	General Surgery			As above re falls pathway	03/02/2014	DS
	02/12/2013	Paediatric Ward	General Surgery			Ds - O& D med	27/01/2014	Dr David Grier
	02/12/2013		Orthopaedic Surgery					David Cardwell
	02/12/2013	Theatres 1-4 CAH	General Surgery			Ds - ensure pts clerked in	27/01/2014	Brigeen Kelly
	02/12/2013	Firbank House	Orthopaedic Surgery			ESC to HOS	03/02/2014	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	02/12/2013	Theatres 1-4 CAH	T&O Theatres	Irrelevant information redacted by the USI		as above	30/12/2013	Laura Murphy
	03/12/2013	Theatres 1-4 CAH	Theatres			Nil	20/05/2014	NR Pamela Johnston
	03/12/2013	Theatres 1-4 CAH	Theatres			Care needs to be taken with automatic doors. Need to activate door and proceed immediately! PM	20/05/2014	NR Pamela Johnston
	03/12/2013	Theatres 1-4 CAH	General Surgery			DS - Think IR1s like this need challenged	27/01/2014	Brigeen Kelly
	03/12/2013	Theatres 1-4 CAH	Theatres			Nil	20/05/2014	NR Pamela Johnston
	03/12/2013	Theatres 1-4 CAH	Theatres			As above	20/05/2014	NR Pamela Johnston
	03/12/2013	4 South	Vasculur Surgery			Shared with CCS	29/01/2014	Tracey McGuigan
	03/12/2013	Trauma Ward	Trauma Surgery			DS - To share with other wards	03/12/2013	DS
	03/12/2013	4 North	General Surgery			Ds - as above	03/02/2014	DS
	04/12/2013	General Medicine Clinic	Outpatients				16/01/2014	Connie Connolly
	04/12/2013	Theatres 5-8 CAH	T&O Theatres			Communiocation to be improved	30/12/2013	Laura Murphy
	04/12/2013	Theatres 5-8 CAH	T&O Theatres			Duplicated record	30/12/2013	Laura Murphy



ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	04/12/2013	Theatres 5-8 CAH	T&O Theatres	Irrelevant information redacted by the USI		As documented above	30/12/2013	Laura Murphy
	04/12/2013	General OutpatientsTreatment Room	Outpatients			none of note	16/01/2014	Connie Connolly
	04/12/2013	ICU CAH	ICU			none	09/01/2014	Mary Lennon
	05/12/2013	4 South	Vasculur Surgery			Nothing to share . Ref to OH and ortho . still on sick leave	23/01/2014	Tracey McGuigan
	05/12/2013	ICU CAH	ICU			none	24/12/2013	Mary Lennon
	06/12/2013	4 North	General Surgery			A/w RCA	02/01/2014	DS
	06/12/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Discussed with Head of Scheduling for monitoring	28/05/2014	Ushagowri Mavuri
	06/12/2013	3 South	Urology Surgery			Riddor reportable	19/12/2013	DS
	06/12/2013	Trauma Ward	Trauma Surgery			none	30/01/2014	RB
	06/12/2013	Orthopaedic Ward	Orthopaedic Surgery			Ds - To share with staff re learning	03/02/2014	GH
	06/12/2013	Theatres 1-4 CAH	ENT Surery			DS - Esc to HOS	27/01/2014	Brigeen Kelly
	06/12/2013	Theatres 5-8 CAH	Trauma Surgery			none	30/01/2014	GH
	07/12/2013	ICU CAH	ICU			none	24/12/2013	Helen McGarry
	07/12/2013	Trauma Ward	Trauma Surgery			Ds - No fire brigade called	03/02/2014	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	08/12/2013	4 North	General Surgery	Irrelevant information redacted by the USI		No lessons	02/01/2014	DS
	08/12/2013	4 NORTH STOMA CLINIC	General Surgery			No lessons	02/01/2014	DS
	08/12/2013	Female Surgical/Gynae	General Surgery			Ds - Esc to Wd Str re learning	03/02/2014	DS
	08/12/2013	4 North	General Surgery			No lessons	02/01/2014	DS
	09/12/2013	Theatres/DPU STH	Theatres			Communication breakdown	20/05/2014	Brigeen Kelly
	09/12/2013	Recovery Unit	Recovery Unit			as documented	30/12/2013	Brigeen Kelly
	09/12/2013	CEAW	ENT Surery			Copy of incident given to Consultant to share with junior staff	15/01/2014	Nichola McClenaghan
	09/12/2013	Recovery Unit	General Surgery			GH nil else required good communication	03/02/2014	Brigeen Kelly
	09/12/2013	Theatres 5-8 CAH	Orthopaedic Surgery			good documentation pre-op	29/01/2014	Brigeen Kelly
	09/12/2013	Orthopaedic Ward	Orthopaedic Surgery			Clear documentation	29/01/2014	Maureen Farley
	10/12/2013	Theatres 1-4 CAH	Theatres			as documented - breakdown in communication	20/05/2014	NR Pamela Johnston
	10/12/2013	4 South	General Surgery			Encourage completion of all elements at time of incident and risk assessments	29/01/2014	Tracey McGuigan
	10/12/2013	4 South	General Surgery			shared with staff in 4 sth re learning	03/02/2014	DS
	10/12/2013	Day Surgery Unit CAH	Day Procedure/Surgery			SR Morton spoke to and asked to ensure staff complywith specimen protocol	28/05/2014	Brigeen Kelly
	10/12/2013	Female Surgical/Gynae	General Surgery			Ds - All action taken	03/02/2014	DS

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
	10/12/2013	Day Surgery Unit CAH	Day Procedure/Surgery	Irrelevant information redacted by the USI		Nil	28/05/2014	Ushagowri Mavuri
	10/12/2013	Theatres 1-4 CAH	Theatres			a meeting was held regarding the delays around the use of the emergency theatre - regarding consent & preparation of patients	20/05/2014	NR Pamela Johnston
	11/12/2013	General Medicine Clinic	Outpatients				16/01/2014	Connie Connolly
	11/12/2013	Theatres 1-4 CAH	Theatres			alarms tested and found to bbe in working order - Pewter Douglas to address security issue with his staff.	20/05/2014	NR Pamela Johnston
	11/12/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Dr McConville to liaise with Medical Colleagues - preparation for interventional procedures. Protocols must be adhered to therefore ensuring patienst procedures are carried out .	28/05/2014	Ushagowri Mavuri
	11/12/2013	Theatres 1-4 CAH	Theatres			Nil	19/02/2014	Brigeen Kelly
	11/12/2013	Day Surgery Unit CAH	Day Procedure/Surgery			See NIAIC closure letter- design flaw	28/05/2014	Ushagowri Mavuri
	11/12/2013	Theatres 1-4 CAH	Theatres			Meeting date late Feb 2014	20/05/2014	Brigeen Kelly
	11/12/2013	Urology Clinic	Urology Surgery			Ds - shared with HOS	11/12/2013	DS
	11/12/2013	Day Surgery Unit CAH	Day Procedure/Surgery			Patient safety Documentation in Carepathway	28/05/2014	Brigeen Kelly
	12/12/2013	General Surgery Clinic	Outpatients			none of note	16/01/2014	Connie Connolly
	12/12/2013	Female Surgical/Gynae	General Surgery			Ds - Shared with S/n and sister	03/02/2014	DS
	12/12/2013	Day Surgery Unit CAH	Day Procedure/Surgery			insufficient ammount of hysteroscopes requested more on wish list - to be purchased in capital monies 14-15	28/05/2014	Brigeen Kelly
	12/12/2013	Theatres 1-4 CAH	Theatres			Ward learning - G Henry & D sharpe addressing	20/05/2014	NR Pamela Johnston
	12/12/2013	Theatres 1-4 CAH	Theatres			consenting issues raised through THUGS	20/05/2014	NR Pamela Johnston
	12/12/2013	Theatres 1-4 CAH	Theatres			Meeting with SEc to discuss ongoing issue - to be addressed with medical & nursing staff at ward level. Patienst are not to leave th eward unless checked out & ready for theatre.	20/05/2014	NR Pamela Johnston
	12/12/2013	Theatres DHH	Anaesthetics			Nil	11/03/2014	Brigeen Kelly
	12/12/2013	ICU CAH	ICU			Probable unavoidable small ikcident. initial concern about patients 20+ years of Hepatitis B but deemd to be zero risk.	24/12/2013	Helen McGarry
	13/12/2013	4 North	General Surgery			Ds - D/W AD and HOS	16/12/2013	DS
	13/12/2013	ICU CAH	ICU			none	10/01/2014	Mary Lennon
	13/12/2013	Trauma Ward	Trauma Surgery			Ds - As above	03/02/2014	DS
	13/12/2013	Day Procedure Unit DHH	Day Procedure/Surgery			Processors extremely old - new decontamination unit in use.	28/05/2014	PMG

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	13/12/2013	4 North	General Surgery	Irrelevant information redacted by the USI		Ds - Esc to ED HOS	03/02/2014	DS
	13/12/2013	4 North	General Surgery			Ds - share with rest of staff re approp re datix	23/01/2014	DS
	13/12/2013	Trauma Ward	Trauma Surgery			Ds - all action taken	03/02/2014	DS
	14/12/2013	Day Procedure Unit DHH	Day Procedure/Surgery			Old machines -now replaced	28/05/2014	Brigeen Kelly
	14/12/2013	Day Surgery Unit CAH	General Surgery			good planning and communication	29/01/2014	Brigeen Kelly
	14/12/2013	4 North	General Surgery			Ds - Esc to HOS	03/02/2014	DS
	14/12/2013	Orthopaedic Ward	Orthopaedic Surgery			ensure correct completion of incidents	03/02/2014	GH
	14/12/2013	Paediatric Ward	General Surgery			timely intervention	29/01/2014	Dr David Grier
	15/12/2013	Orthopaedic Ward	Orthopaedic Surgery			Ds - no falls pathway followed	16/12/2013	DS
	15/12/2013	Trauma Ward	Trauma Surgery			await	25/09/2014	David Cardwell
	16/12/2013	Theatres 1-4 CAH	Theatres			Issues raised at staff meetings.	20/05/2014	Brigeen Kelly
	16/12/2013	Theatres 5-8 CAH	Trauma Surgery			good team work and realisation of all areas and workloads	29/01/2014	Brigeen Kelly
	16/12/2013	Trauma Ward	Trauma Surgery			adherence to protocols	03/02/2014	GH
	16/12/2013	Firbank House	Ophthalmology			none	30/01/2014	Trudy Reid

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	17/12/2013	ICU CAH	ICU	Irrelevant information redacted by the USI		None	02/01/2014	Brigeen Kelly
	17/12/2013	Theatres 1-4 CAH	Theatres			Communication breakdown - being addressed.	20/05/2014	NR Pamela Johnston
	17/12/2013	Theatres 1-4 CAH	Theatres			See documenst added & closure letter from NIAIC	30/05/2014	Brigeen Kelly
	17/12/2013	4 North	General Surgery			a/w feedback from hos	17/12/2013	DS
	17/12/2013	Day Surgery Unit CAH	Day Procedure/Surgery			as above	28/05/2014	Brigeen Kelly
	17/12/2013	Day Surgery Unit CAH	Day Procedure/Surgery			None	28/05/2014	Brigeen Kelly
	18/12/2013	CEAW	Urology Surgery			Copy of incident given to consultant to share and discuss with Jumior staff	29/01/2014	Nichola McClenaghan
	18/12/2013	Stone Treatment Centre	Urology Surgery			DS - no effects	04/02/2014	DS
	18/12/2013	Theatres 1-4 CAH	General Surgery			thorough pre-op preparation	29/01/2014	Brigeen Kelly
	18/12/2013	Theatres 1-4 CAH	General Surgery			thorough pre-op checking	29/01/2014	Brigeen Kelly
	19/12/2013	Trauma Ward	Trauma Surgery			as above	04/02/2014	GH
	19/12/2013	Trauma Ward	Trauma Surgery			as above	04/02/2014	GH
	20/12/2013	Day Surgery Unit CAH	Day Procedure/Surgery			None - patient self discharged against advice.	23/12/2013	Brigeen Kelly
	20/12/2013	Theatres 1-4 CAH	Theatres			None	20/12/2013	Brigeen Kelly
	20/12/2013	Theatres 1-4 CAH	General Surgery			good communication and thorough pre -op preparation	29/01/2014	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	20/12/2013	ICU CAH	ICU	Irrelevant information redacted by the USI		None	02/01/2014	Brigeen Kelly
	20/12/2013	3 South	Urology Surgery			ensure staff complete falls pathway when patient has history of falls. also need to complete post fall. will inform staff of same at PSB. cc 20/8/14-All staff need to be aware of need to update datix re signifcant developments-info- in this case, once fracture was diagnosed as a direct relation to fall. email sent to H Trouton and M Corrigan for validation and further management. 151014cc-timeline compiled for SAI screening. 201014-timeline completed and attached 121214cc-has been screened as SAI Level 1Will attach learning once report final. Close date.	20/08/2014	Connie Connolly
	21/12/2013	Trauma Ward	Trauma Surgery			escalate situation on a timely bais	23/12/2013	GH
	22/12/2013	Theatres DHH	Anaesthetics			Uncontrolled situation due to adverse weather conditions	23/12/2013	Brigeen Kelly
	22/12/2013	3 South	ENT Surey			all risks minimised	23/12/2013	GH
	23/12/2013	Theatres 5-8 CAH	T&O Theatres			none.	30/12/2013	Alison Moan
	23/12/2013	ICU CAH	ICU			NONE	03/01/2014	Mary Lennon
	23/12/2013	Theatres/DPU STH	General Surgery			good communication	29/01/2014	Brigeen Kelly

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	24/12/2013	ICU CAH	ICU	Irrelevant information redacted by the USI		none	02/01/2014	Brigeen Kelly
	24/12/2013	Paediatric Ward	Orthopaedic Surgery			Good communication between teams Ed and paed	30/01/2014	Dr David Grier
	24/12/2013	Day Surgery Unit CAH	General Surgery			Ensure good timely planning and co-ordinating of notes	29/01/2014	Brigeen Kelly
	24/12/2013	Theatres 5-8 CAH	T&O Theatres			None	30/12/2013	Laura Murphy
	26/12/2013	Trauma Ward	Trauma Surgery			good risk assessment comleted at time of admission	29/01/2014	RB
	27/12/2013	Theatres 1-4 CAH	Theatres			Asculap powerstar scissors not suitable for ENT surgery.PM	20/05/2014	Brigeen Kelly
	27/12/2013	Theatres 1-4 CAH	Theatres			Nil	20/05/2014	Brigeen Kelly
	27/12/2013	Theatres 1-4 CAH	Theatres			update - Image intensifer purchased and in the department . No further incidents of this kind should occur.	20/05/2014	Brigeen Kelly
	27/12/2013	4 South	General Surgery			Ds - As above	03/02/2014	Tracey McGuigan
	27/12/2013	Paediatric Ward	ENT Surey			E-mail sent to Mr Hall and Lead nurse re medication admin	03/02/2014	Bernie McGibbon
	28/12/2013	4 South	General Surgery			to share with staff as above	03/02/2014	Tracey McGuigan
	29/12/2013	ICU CAH	ICU			nil	10/01/2014	Mary Lennon
	30/12/2013	Theatres 1-4 CAH	Theatres			Nil	20/05/2014	Brigeen Kelly
	30/12/2013	Trauma Ward	Trauma Surgery			none	29/01/2014	RB
	30/12/2013	General Outpatients Reception/Waiting Area	Outpatients			none of note. Accidental incident. All fire procedures adhered to	16/01/2014	Connie Connolly
	30/12/2013	Female Surgical/Gynae	General Surgery			none	07/02/2014	GH
	30/12/2013	Trauma Ward	Trauma Surgery			continue awareness at ward level	15/01/2014	RB
	30/12/2013	ICU CAH	ICU			nil	30/01/2014	Mary Lennon
	30/12/2013	Trauma Ward	Trauma Surgery			none	30/01/2014	RB

ID	Incident date	Loc (Exact)	Speciality	Description (Policies)	Action taken (Investigation)	Lessons learned	Closed	Handler
Irrelevant information redacted by the USI	31/12/2013	Theatres 1-4 CAH	Theatres	Irrelevant information redacted by the USI		Nil	20/05/2014	Brigeen Kelly
	31/12/2013	Theatres 1-4 CAH	General Surgery			thorough pre-op investigation	29/01/2014	Brigeen Kelly
	31/12/2013	Theatres 1-4 CAH	General Surgery			E-mail sent to that effect to J Ohagan	03/02/2014	Brigeen Kelly
	31/12/2013	Theatres 1-4 CAH	General Surgery			Ds - as above	03/02/2014	Brigeen Kelly
	31/12/2013	4 South	General Surgery			E-mail sent to s/n and str re GCS obs	03/02/2014	Tracey McGuigan



**Acute Directorate Governance Meeting**

**Action Notes**

for meeting held on Tuesday 30<sup>th</sup> March 2010, 2.00 pm  
in the Meeting Room, Trust HQ, CAH

**Present:-**

Dr Gillian Rankin, Barry Conway, David Cardwell, Heather Trouton, Ronan Carroll, Anita Carroll, Anne McVey, Beatrice Moonan, Colm Robinson

**Apologies:-**

ITEMS DISCUSSED	ACTIONS
<b>Notes of Previous Meeting</b> Taken	
<b>Matters Arising</b>	
<p><b>1. Risk Register</b></p> <p><b>Review of Divisional high level risks</b></p> <p>Each Division's risk register was presented ordered by risk level and an overview given by each AD.</p> <p><b>Divisional/Service mechanisms to identify and mitigate risks</b>            For each high level risk there is to be an action plan. These will be appended to the next meetings report.</p> <p>Heads of Service to link in with Beatrice to manage action plans and continually update the register.</p> <p>Each AD to bring details of each high risk to next one-to-one with Dr Rankin.</p> <p>Each AD should review the circulated divisional risk review methodology from other areas re shared process learning and discuss with HOS at team meetings. Then updated versions forwarded to Dr Rankin in advance of senior governance meeting on 9<sup>th</sup> April 2010.</p> <p><b>Training</b>            Beatrice reported on the rolling programme of training.</p>	<p><b>All ADs</b>  <b>Beatrice Moonan</b></p> <p><b>All ADs</b></p> <p><b>All ADs</b></p>

## 2. Incident Reporting

### Review by Division/Service/Site

Beatrice talked to her monthly report. Dr Rankin highlighted some key trends in each division that needed further investigation and work to resolve.

Tracey explained that the high levels of med incidents in MAU, 3 South Surgery and 1 South due to the Integrated Medicines Management work ongoing there.

For next month's meeting – to bring back headline reports on action taken/risk registers etc.

Senior governance meeting – a single sheet high level report of top 10 incidents across Acute – Beatrice to develop draft for Dr Rankin.

SAI and RCA – Beatrice tabled two reports. We need a running total of RCA completed ongoing and pending RCAs, with information on who is the lead for each. Each AD to update the table and provide the action plans developed to Dr Rankin.

RCAs must be completed within the 12 week target.

Beatrice to circulate paper re levels of investigation for discussion

February incidents – each AD gave a high level update on the action resulting from the February incident reports. Next month each to bring a short written report on incidents or trends being addressed.

**All ADs**

**Beatrice Moonan**

**All Ads**

**Beatrice Moonan**

**All ADs**

## 3. Complaints

Independent reviews – David gave an update on the two current reviews. To be included on future complaints reports.

David gave a review of his previously circulated reports. 74% were responded to within the 20 day period. There were 780 compliments during the period reported. 212 Acute staff have been trained since April 2009. David explained the 'level 1' training and circulated additional dates for management/medical staff.

### Action as a result of a complaint

Action taken column – this is not always being completed and it is important that Trust backs up apologies with action to prevent recurrence.

If an action plan has been prepared – copy to be sent to AD to allow follow up.

Dr Rankin starting to stratify them into different groupings – straightforward, trends and unacceptable standards of care/treatment.

**David Cardwell**

**All ADs**

**All Ads**

**David Cardwell**

<p><b>Medical staff response to complaints</b> Two incidents of medical staff responding directly to patients following a complaint. It is important that this doesn't happen again.</p>	<p><b>All Ads</b></p>
<p><b>4. Patient safety programme report</b></p> <p>Colm gave a verbal report to the meeting on each of the programmes and will provide a written report for next month's meeting.</p> <p>The central line programme is now up to 82% in CAH but there are still issues with anaesthetists completing the yellow form and the nursing team carrying out the daily line review. DHH is achieving 100%.</p>	<p><b>Colm Robinson</b></p> <p><b>Ronan Carroll</b></p>
<p><b>5. NICE/TRIM Guidance</b></p> <p><b>Regional guidance on the treatment of extravasation</b></p> <p>A working group of key medical, nursing and pharmacy staff to be convened, chaired by Ronan.</p>	<p><b>Ronan Carroll</b></p>
<p><b>6. Professional Governance</b></p> <p><b>AHP Governance</b> Request to attend the meeting has been received – Dr Rankin will speak to Carmel Harney regarding the issues that she has raised.</p> <p><b>Nursing supervision/governance</b> Two issues are being managed at the moment. Professional lines to be drawn on charts and given to Emma for updating.</p> <p><b>PGDs</b> Current difficulties discussed – Tracey to organise a meeting under the umbrella of the Medicines Management group to address problems.</p> <p><b>Medicines Governance</b> Jillian Redpath has asked for nominations from the Divisions for the Directorate wide Medication Incident review group, with the aim of holding the first meeting at the end of April.</p>	<p><b>Dr Rankin</b></p> <p><b>All ADs</b></p> <p><b>Tracey Boyce</b></p>
<p><b>7. Specific Governance Issues</b></p> <p><b>MEWS</b></p> <p><b>Fire Training</b> – numbers attending training are still low. Deputy nominated officer identification is well advanced and still working on Nominated Officer identification and training.</p> <p><b>HCAI and dashboards</b> – areas now green may to be taken off action plan – but people need to feed back to Anne as to whether this is</p>	<p><b>Anita Carroll</b></p>

<p>appropriate. Anita to circulate.</p> <p><b>Blood Safety</b></p> <p><b>Hyponatraemia</b> – draft report now available and to be validated. Ronan to review.</p> <p>In addition to the list above , the following areas should be reported on and discussed also:-</p> <p>Food handlers – Anita tabled information re any staff how handle food and their need to report certain illness.</p>	<p><b>Ronan Carroll</b></p>
<p><b>7. Effectiveness and Evaluation programme by Division</b></p> <p>The list of audits is very large – Dr Rankin has a report and will ask Anne Quinn to circulate to ADs</p>	<p><b>Dr Rankin</b></p>
<p><b>8. Enhanced reporting of deaths for information</b></p> <p>Dr Loughran is working on a paper re same and Dr Rankin has met with him.</p> <p>Each Trust Board from now on will have specialties M&amp;M indicators discussed – starting with cardiology, followed by T&amp;O.</p>	
<p><b>9. Any other business</b></p> <p><b>Food handlers</b> – Anita tabled information re any staff how handle food and their need to report certain illness. This needs to be raised with all staff groups.</p> <p><b>Report from Edel Corr</b> needs to be tabled monthly at meeting – Barry to arrange.</p> <p><b>Transport requests from DHH</b> – Process to be set up by ADs – Carol to send through cost centres.</p> <p><b>PAS pressures</b> – proposal for super users to be trained to take this role on. Needs to be addressed as pressures will only increase from now on. E-mail to be circulated for discussion.</p> <p><b>ICT business continuity plan</b> – ADs to respond to Dr Rankin re the people named as responsible for particular systems.</p> <p><b>Learning disability patient working group</b> – Edel Corr has information on the information and help available for this group of patients. Key points need to be disseminated throughout Acute. Barry and Dr Rankin to discuss further.</p> <p><b>Nurse team manager of the Year</b> – Nikki McClenaghan has got through to next round.</p>	<p><b>All ADs</b></p> <p><b>Barry Conway</b></p> <p><b>All ADs</b></p> <p><b>All ADs</b></p> <p><b>Dr Rankin and Barry Conway</b></p>

<p><b>Review of Governance arrangements</b> – Debbie Burns will start the review on the 1<sup>st</sup> April.</p> <p><b>ICNA tool kit</b> – Anita circulated for completion – ADs to meet and come back with a plan.</p> <p><b>Picker work</b> – Barry asked for an update – action plans need to be reviewed again to ensure that they are being implemented.</p> <p><b>Swine flu debrief meeting</b> – Commend everyone as regionally it was recognised the amount of work that the Trust put in.</p>	<p><b>All ADs</b></p> <p><b>All ADs</b></p>
<p><b>10. Date and time of next meeting</b></p> <p>The next meeting will be held on Tuesday 4<sup>th</sup> May 2010.</p>	



## **Acute Services Contingency Plan Meeting**

### **AGENDA**

For meeting to be held on Friday 8<sup>th</sup> January 2010 at **1.00 pm** in the Meeting Room,  
Trust HQs, College of Nursing, Craigavon Area Hospital with video-conferencing facilities  
in the Meeting Room, Clanrye House, Daisy Hill Hospital

1. Apologies
2. Workstream Updates
  - Maximise Theatre Utilisation
    - Future of simulator use Ronan
    - Use of South Tyrone theatres Mary
    - Pre-operative Assessment Heather/Lindsay
    - Scheduling pilots/use of points Heather/Anne
    - Patient Flow Heather/Anne/Ronan
    - Additional in-house sessions – HR issues & costs Heather/Mary/Helen
    - Quantifying private patients by specialty Heather
    - Additional available sessions from additional staff for EWTD Heather/Helen
    - Optimised use of emergency theatre Ronan
    - G&S costs action plan Ronan/Mary
  - Endoscopy – Minimise Use of IS Heather
    - Criteria for Barium Enema/CT Colonography/Colonoscopy
    - Single List
    - Standardise to 12 points
    - Additional sessions through EWTD compliance
    - Cost of additional inhouse activity Heather/Ronan
    - New scopes requirement Mary
  - Rebalancing IS & IHA activity into core baseline activity All
    - Potential by specialty to reduce/eliminate IS Spend
    - Action plan to sustain IH activity by specialty
    - Enhanced Recovery Dr McAllister/Ronan
  - DHH Bed Reconfiguration All
3. Communication Strategy Implementation All
4. Any Other Business
5. Date of Next Meeting  
Friday 15<sup>th</sup> January 2010 at 1.00 pm in the Meeting Room, Trust HQs, College of  
Nursing, Craigavon Area Hospital with video-conferencing facilities in the Meeting Room,  
Clanrye House, Daisy Hill Hospital



## **Acute Services Contingency Plan Meeting**

### **AGENDA**

For meeting to be held on Friday 12<sup>th</sup> February 2010 at **12.30 pm** in the Meeting Room, Trust HQs, College of Nursing, Craigavon Area Hospital with video-conferencing facilities in the Meeting Room, Clanrye House, Daisy Hill Hospital

1. Apologies:
2. Workstream Updates
  - Maximise Theatre Utilisation
    - Future of simulator use Ronan
    - Use of South Tyrone theatres Mary
    - Pre-operative Assessment Heather/Lindsay
    - Scheduling pilots
    - Additional available sessions from additional staff for EWTD Heather/Helen
    - Optimised use of emergency theatre Ronan
    - G&S costs action plan Ronan/Mary
    - Theatre Audit
  - Endoscopy – Minimise Use of IS Heather
    - Criteria for Barium Enema/CT Colonography/Colonoscopy
    - Standardise to 12 points
  - Rebalancing IS & IHA activity into core baseline activity All
    - Action plan to sustain IH activity by specialty
    - Enhanced Recovery Dr McAllister/Ronan
3. Outpatient Review Backlog
4. Communication Strategy Implementation – Update sheet All
5. Any Other Business
6. Date of Next Meeting

Friday 19<sup>th</sup> February 2010 at 12.30 pm in the Meeting Room, Trust HQs, College of Nursing, Craigavon Area Hospital with video-conferencing facilities in the Meeting Room, Clanrye House, Daisy Hill Hospital



## **Acute Services Contingency Plan Meeting**

### **Action notes**

**Friday 5<sup>th</sup> February 2010**

**Present:** Dr Gillian Rankin, Dr Tracey Boyce, Lindsay Stead, Dean Faloon, Mary McGeough, Wendy Clayton, Ronan Carroll, Sarah Tedford, Heather Trouton, Anne McVey, Dr Charles McAllister, Dr Philip Murphy, Lisa McAreavey

**Apologies:** Sharon Glenny, Helen Walker, Anita Carroll, Mr Eamon Mackle, Debbie Burns, Mr Noel Heasley, Paula Clarke, Carol Cassells, Dr Martina Hogan.

### **1. Workstream Updates**

#### **Maximise Theatre Utilisation**

##### Future of simulator use

A meeting was held with QUB to agree finalisation of use in South Tyrone from mid March. Equipment to be stored on site and detail of minor work to be done to be agreed. Date of commencement of use of theatre is 22<sup>nd</sup> March for endoscopy.

Agreement needed to use ventilator belonging to simulator centre until next financial year when new ventilator will be purchased. Need to determine how many scope lists are needed in South Tyrone. **ACTION: Heather and Ronan**

##### Pre-Operative Assessment

Use of questionnaire to be restarted for scopes with streamlined patient information. **ACTION: Heather**

##### Scheduling Pilots

Starting to schedule March, through alignment of schedulers with specific specialties. ENT not yet agreed to be part of scheduling. Process of scheduling now getting bedded in. Use of points discussion with surgeons and Dr Murphy and Dr O'Brien. **ACTION: Dr Rankin**

##### Patient Flow

Discussion today regarding increasing surgical beds marginally in light of additional in-house activity.

##### Additional In-House Sessions

3 additional theatre nurses with potential to start shortly have been identified.



## Additional available sessions

Vasectomy lists starting new financial year as Mr Hughes doing additional surgical lists. Issue around theatre staffing for both local lists. 1 DHH, 1 South Tyrone. Mary to staff 2 lists. **ACTION: Mary McGeough**

## Emergency Theatre

Protocol in development.

## G&S Action Group

List of areas for early wins is being determined.

## Theatre Audit

CAH 2 days results show many issues. Focus group to be held to develop flow chart involving theatre staff, ward staff, porters. DHH audit to be done next week and a separate focus group process.

## Endoscopy

Replacement scheduler required.

### **2. Endoscopy – Minimise Use of IS**

- Points total for afternoon lists to be agreed in discussion arranged with Mr Mackle, Mr Brown, Dr Murphy and Dr O'Brien.
- Audit of people who after barium enema required colonoscopy. The 2 week sample to be extended to 2 months. **ACTION Wendy Clayton.**

### **3. Enhanced Recovery**

Enhanced recovery stated to be part of the solution of current bed pressures with additional in-house activity.

Need to proceed with this approach in surgery in order to release bed time.

**ACTION: Ronan and Heather to discuss**

### **4. Outpatient Review Backlog**

Sarah Tedford will lead on analysis of sessions/actions needed by specialty.

Outline brief to be developed. **ACTION: Wendy Clayton/Lisa McAreavey/Sharon Glenny**

### **5. Communication Strategy Implementation**

To be progressed. Draft to be written/developed on Monday.

### **6. Any Other Business**

Risk to anaesthetic cover in DHH in March. Possibly 19 sessions at risk per week.

### **7. Date of Next Meeting**

Friday 12<sup>th</sup> February 2010 at 12.30 pm in the Meeting Room, Trust HQs, College of Nursing, Craigavon Area Hospital with video-conferencing facilities in the Meeting Room, Clanrye House, Daisy Hill Hospital

**Stinson, Emma M**

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**From:** Rankin, Gillian [Personal Information redacted by USI]  
**Sent:** 29 April 2010 13:46  
**To:** Stinson, Emma M  
**Subject:** FW: Closure report  
**Attachments:** Closure Report Southern Health and Social Care Trust.doc; Covering closure letter to Northern Ireland 29.04.10.doc

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From: Tedford Sarah [Personal Information redacted by USI]  
Sent: Thursday, April 29, 2010 1:45:25 PM  
To: Rankin, Gillian; McAlinden, Mairead  
Subject: Closure report  
Auto forwarded by a Rule

Dear Gillian and Mairead  
Please find attached the final closure report re the NHS IMAS assignment. I have also copied the covering letter I sent to Hugh Kind regards Sarah

Sarah Tedford  
Head of Intensive Support  
Intensive Support Team  
NHS IMAS

E-mail [Personal Information redacted by USI]  
Mob [Personal Information redacted by USI]

# NHS IMAS CLOSURE REPORT: THE SOUTHERN HEALTH AND SOCIAL CARE TRUST



Interim Management and Support

**Background:**

NHS IMAS was approached by Hugh Mullen Director of Performance Delivery - Health Board Northern Ireland to provide support to the Southern Health and Social Care Trust (The Trust). The Trust is facing a number of immediate challenges and needs to deliver a radical and substantial recovery plan both in terms of finance and future service delivery. Specifically the Trust is facing expansion in a number of specialities with limited financial investment. As part of their Best Care Best Value programme there are a number of areas where the Trust has identified potential efficiency gains in the service which would support the reinvestment this expansion requires. NHS IMAS was asked to:-

1. Undertake a review of Urology Services identifying opportunities for expansion and efficiency gains
2. Review the Elective Pathway focussing on outpatient booking processes
3. Consult on The Perfect Operating Theatre project

**Overview of key findings and actions****Urology Services**

- ✚ Lack of implementation of clinical pathways
- ✚ Six weekly re organisation of consultant job plans by consultant body ( creating real operational difficulties for waiting list teams)
- ✚ Long length of stay, poor new to review ratios in Outpatients,
- ✚ A clear management structure was in place but not working fully as appropriate operational arrangements were not in place.

**Elective Pathway**

- ✚ Pre-operative assessment not supported by Anaesthetists
- ✚ Outpatient booking centre working in Isolation of operational teams
- ✚ Duplication of effort re appointing patients for Outpatients, Day Case and Inpatient surgery

**The Perfect Operating Theatre**

- ✚ Late theatre starts and early finishes
- ✚ Delays in patient readiness for theatre
- ✚ Poor utilisation of theatre lists
- ✚ Inefficient stock management

**ACTIONS**

NHS IMAS reviewed each of these areas with the appropriate operational and clinical teams and from these reviews action plans were developed.

## Methodology

- ✚ Review of relevant internal and external information including both quantitative and qualitative data
- ✚ Capacity and Demand Modelling
- ✚ Interviewing staff from various departments and teams
- ✚ Comparing Trust performance with national best practice data
- ✚ Implementing Productive Theatre Programme
- ✚ Arranging external visits to see benefits of best practice
- ✚ Process mapping

## NHS IMAS found that:

The Trust had recently appointed a new Director of Acute Services and therefore a new management team for acute services was being developed. The Team were a very motivated group who recognised the problems they were facing. Due to the immediacy of the problems and size of agenda weekly meetings were held to focus and monitor delivery against an overarching action plan. This integrated and supported the NHS IMAS work in a very structured way, but did mean that the scope of the original project moved as the work developed.

Management Structure – Whilst a management structure was in place individuals were unclear as to their roles and responsibilities.

Elective Services – trust staff had already begun working on the elective pathway and had developed good working practices in some areas; however this work was not embedded across the organisation. The Pre –operative assessment team had mapped their service but did not have anaesthetic support which resulted in patient fitness issues prior to surgery.

Theatres – Delays were experienced in getting patients to theatre, poor theatre utilisation, and late starts and early finishes all resulted in reduced theatre efficiency. Stock management was also an issue with too much stock on the shelves in some instances and chaotic storage solutions.

Urology – services had recently undergone a Northern Ireland review which identified an increase in consultant numbers was required within the Trust but also that some cancer surgery should no longer take place there. The service has a number of issues including long outpatient and inpatient waits. Unclear pathways and not fully functioning administration services were other issues that needed addressing.



## NHS IMAS Actions:

NHS IMAS shared examples of management structures and discussed the pros and cons with the Assistant Directors who then began to develop their teams particularly reflecting on speciality business and governance issues, importantly clarifying roles and responsibilities.

Process mapping was used to map booking services, specifically linking in operational teams to improve service management.

Capacity and demand models were demonstrated to better understand service requirements.

NHS IMAS met with the Anaesthetic clinical lead and operational team to plan how Anaesthetists could integrate more into the Pre assessment process.

NHS IMAS developed a theatre action plan in conjunction with the theatre manager to address all issues raised (see appendix1)  
Urology issues would be addressed through the new team structure and governance meetings.

## Outcomes:

### Management Structure-

- ✚ A new team structure has been agreed for the surgical division. Example agendas were shared incorporating finance, HR, Governance, Performance issues. Job descriptions were also provided for key posts. Details of NHS Elect training programmes and contact details were provided.
- ✚ Urology speciality business to be reviewed as part of the new business meetings arranged to be chaired by Assistant Director

### Elective pathway

- ✚ The booking process was reviewed with weekly meetings set up between the booking supervisor and service managers, chaired initially by NHS IMAS. This resulted in early identification of capacity issues and opportunity for service managers to address these in a variety of ways, not just putting on extra clinics.
- ✚ Key staff were trained in the use of a Capacity and Demand model to help support delivery of waiting time targets and better understand service requirements
- ✚ The Pre-assessment process was reviewed and a meeting between the Anaesthetic Clinical Director and operational team chaired by NHS IMAS was held to agree the way forward. The Trust is currently implementing this

### Productive Theatre

- ✚ An external visit was organised to review the Productive Theatre in place at Shrewsbury Hospital.
- ✚ An action plan was then developed and is currently being implemented, with significant savings opportunities both recurrent and non recurrent.
- ✚ Example documentation was shared re loan equipment, non stock ordering etc.
- ✚ Regional work identified as being necessary to address the lack of regional contracts for expensive theatre equipment and a need for BSO support to address this.

Room 1N16  
1<sup>st</sup> Floor  
Quarry House  
Quarry Hill  
Leeds  
LS1 7UE





DATE: 29/04/10

Dear Hugh

Re: NHS IMAS Assignment – Southern Health and Social Care Trust

Please find attached the closure report following the assignment at the Southern Health and Social Care Trust in Northern Ireland.

The report itself is in a standard format and highlights the key findings and actions taken. It would however be useful to provide you with an overview of some of the key themes which may not be fully captured in the report.

-  To support and reflect internal focus the scope of the assignment changed and developed and the work undertaken was mainly directed at the elective pathway and theatre productivity and to a much lesser extent urology services. It was felt this would be the best use of NHS IMAS time available
-  Under the direction of the newly appointed Director of Acute Services and with the support of NHS IMAS the operational team has absorbed the information, best practice guidance and examples provided during the course of the assignment. This has resulted in the team being more aware of the issues they need to address and being better equipped to tackle them. It is quite apparent that the team are now functioning at a different level leading the internal changes required to deliver sustainable services.
-  Elements of the urology service were reviewed and it was agreed that the work form this would be addressed through the newly established internal business meetings and would include, Performance, HR Issues, Finance etc.
-  There is opportunity across Northern Ireland to build on the outputs from the theatre productivity work stream relating to theatre supplies. Significant recurrent and non recurrent savings could be achieved relating to purchasing, storage and contracting of both theatre equipment and consumables.

This has been a very positive assignment, working with a highly motivated and responsive team who were very keen to learn and make the most of the support available.

I hope you find this helpful

Yours Sincerely

SJ Tedford  
NHS IMAS

**Stinson, Emma M**

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**From:** Tedford Sarah Personal Information redacted by USI  
**Sent:** 29 January 2010 15:48  
**To:** Rankin, Gillian  
**Subject:** Update W/C 25/01/2010  
**Attachments:** Urology Action Plan.doc; Booking Process.doc

Hi Gillian

Not sure that we are going to catch up today so thought I'd drop you a line

#### Urology

I have been through the attached Draft Action Plan for Urology with Martina and she feels it covers the main points that need addressing at this time. It would be useful to talk this through with you so that my approach fits in with what you are doing. This is just a draft and needs sharing with clinicians.

Obviously outpatient appointments need addressing as a matter of urgency. When I discussed this with Mr Young his view was that he was unlikely to see as many as 8 new patients a week and this was a result of not having registrar support available. (Currently running on 1 instead of 4).

I asked what he had done to address this gap and understand there are 2 registrars in the pipeline hopefully to start in February. He also has some paperwork that needs completing and Martina is helping with that.

#### Outpatient processes

Booking process mapped out as advised at contingency meeting. I've attached it for your information.

In Connies' absence Aime and Katherine will kick start the process.

#### Theatre Productivity

Mary is going to arrange a stock take of theatre consumables in the next week, so that we can then start rationalising the stock. I am visiting a Trust on the 12th Feb ( I will be in NI on the 8th and 9th Feb) who have revolutionised their Theatre stock processes and storage. I don't know what your view would be on Mary attending (Its in Shrewsbury) but I think it would be a very good relationship to develop. They have done some very interesting stuff and saved lots of money.

Mary is also identifying band 3 staff who will be responsible for managing supplies. She is talking to Helen in HR as this will be an extension to some individuals roles but well within their banding.

I appreciate how busy you are but if we could chat on the phone on Monday that would be great.

Speak soon

Sarah

Sarah Tedford  
Head of Intensive Support  
18 Weeks intensive Support Team  
NHS IMAS



E-mail  
Mob

Personal Information redacted by USI

Personal Information redacted by USI

**UROLOGY SERVICES  
ACTION PLAN  
22/01/2010**

ISSUE	ACTION	LEAD OFFICER	ACTIONED BY	PROGRESS
<ul style="list-style-type: none"> <li>Currently not meeting waiting time targets for IP/DC and OP. Targets to be achieved are 13 week IP/Dc and 9week OP.</li> </ul>	<ul style="list-style-type: none"> <li>Undertake Capacity and Demand modelling for IP, DC and OP including follow ups.</li> <li>Review current booking rules for out patients</li> <li>Develop process for agreeing additionality</li> <li>Review scheduling process</li> <li>Investigate opportunity for pooled waiting list</li> </ul>	ST  KB/CC	22/01/10  28/01/10	Draft modelling undertaken, to be shared with consultant staff on the 28 <sup>th</sup> Jan 2010. ( e-mailed to Mr Young 22/01/2010)
<ul style="list-style-type: none"> <li>Lack of clarity re resources required to deliver necessary activity levels to deliver waiting time targets</li> </ul>	<ul style="list-style-type: none"> <li>Identify bed requirements</li> <li>Identify medical staffing requirements</li> <li>Identify Nursing staff requirements</li> <li>Identify Equipment requirements</li> </ul>			
<ul style="list-style-type: none"> <li>Changing patient flows following Urology review, unnecessary patient movement</li> </ul>	<ul style="list-style-type: none"> <li>Clarify services currently provided</li> <li>Map patient pathways including Elective and Emergency patients from outpatients to</li> <li>Identify any potential gaps in the system</li> <li>Review patient pathway through inpatient ward</li> </ul>			Most pathways already mapped, review still applicable
<ul style="list-style-type: none"> <li>ICATS / Thorndale facilities under utilised</li> </ul>	<ul style="list-style-type: none"> <li>Review room usage and explore opportunity to increase treatments such as               <ul style="list-style-type: none"> <li>- Cystoscopy</li> </ul> </li> </ul>			

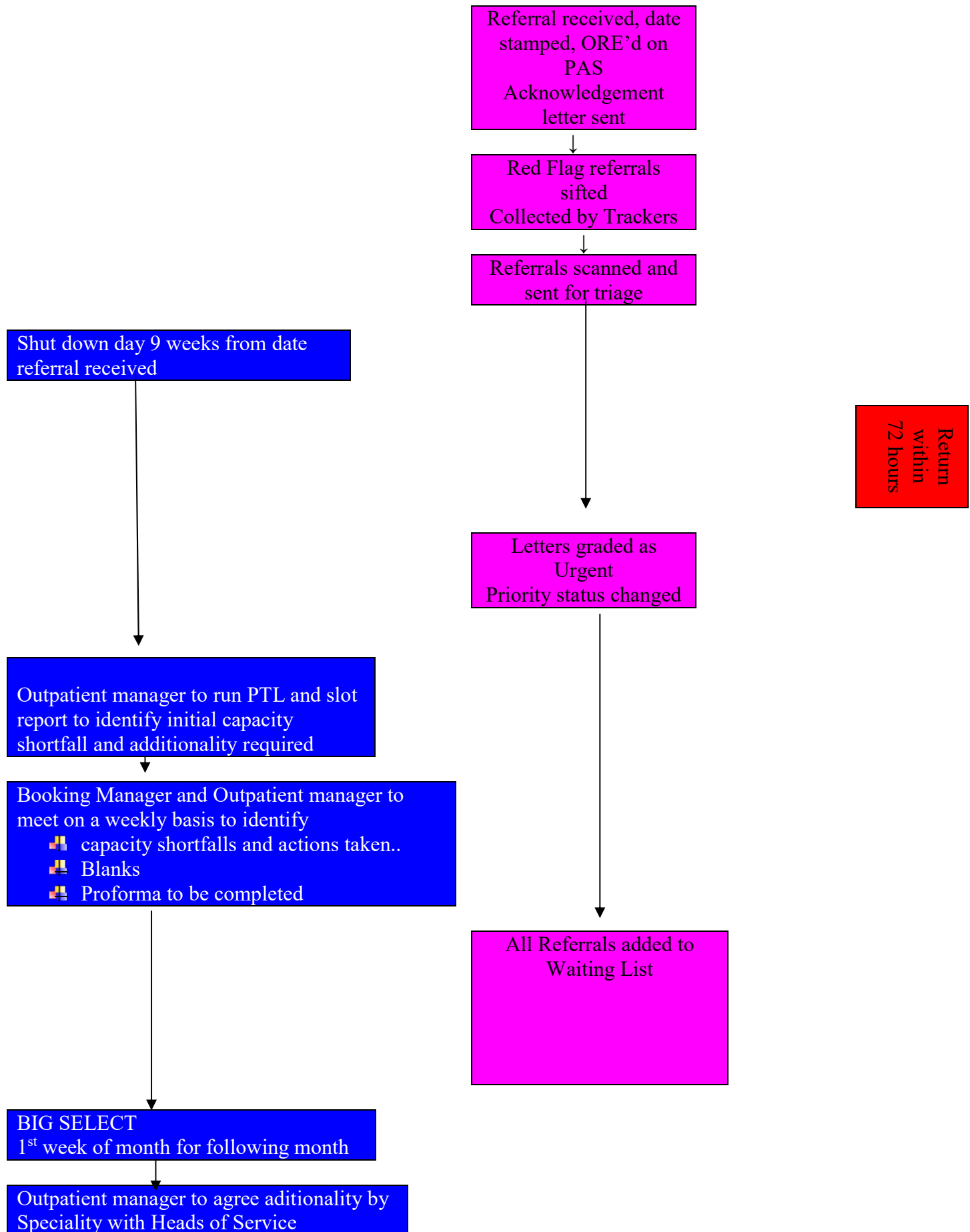
**UROLOGY SERVICES  
ACTION PLAN  
22/01/2010**

	- Opportunity to increase patient types through ICATS see jennys paper			
MDT not currently taking place as per Urology review	Plan reduction in OP clinics to implement MDT on Thursday afternoons			Should have started on 01/01/2010 but not yet in place due to anticipated loss of OP capacity
Internal governance/ management structure not in place	<ul style="list-style-type: none"> <li>Implement weekly management meetings</li> <li>Meetings to have agenda and be minuted</li> <li>Consider things such as               <ul style="list-style-type: none"> <li>- Consent</li> <li>- Clinical processes ( see action plan from OCT pge 13)</li> <li>- Pooling</li> <li>- Medical staffing</li> <li>- IR1s</li> <li>- Complaints Management</li> <li>- Activity</li> <li>- Service Development</li> <li>- Risk register</li> <li>- Rolling replacement programme – Equip</li> <li>- Finance</li> </ul> </li> </ul>			Although team meet weekly this focuses on scheduling. Does not appear to problem solve and action solutipons

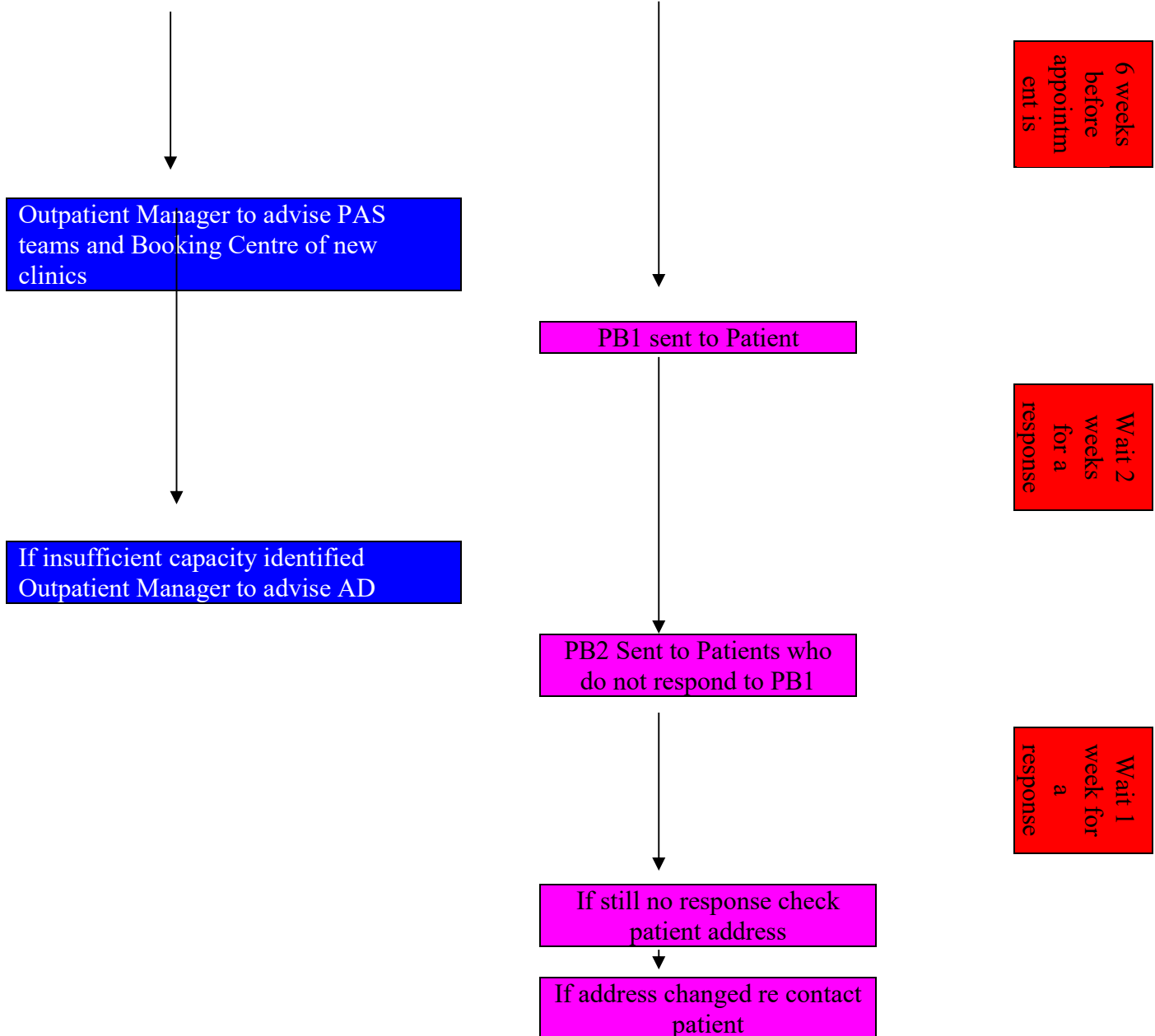
**UROLOGY SERVICES  
ACTION PLAN  
22/01/2010**


DRAFT

**Outpatient Booking Process**  
**Managing Capacity**



**Outpatient Booking Process**  
**Managing Capacity**



## Montgomery, Ruth

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**From:** McAlinden, Mairead [Personal Information redacted by USI]  
**Sent:** 11 September 2010 23:25  
**To:** Loughran, Patrick  
**Cc:** Rankin, Gillian  
**Subject:** Urology letter from Dr Corrigan

Paddy, are you intending to respond to Diane's letter and share with her the review brief agreed with Gillian? If so, would you copy to us both please.

Mairead

## CYSTECTOMY CASES UNDERTAKEN FOR BENIGN URINARY CONDITIONS, SOUTHERN TRUST OF NORTHERN IRELAND.

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MARCUS DRAKE, SENIOR LECTURER, UNIVERSITY OF BRISTOL

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I am currently practicing as a Consultant Surgeon at the Bristol Urological Institute, Southmead Hospital, Bristol, UK. I subspecialise in Female and Reconstructive Urology, Neurourology and Urodynamics. I am Senior Lecturer in Urology at the University of Bristol, and Visiting Professor in Health and Applied Sciences at the University of the West of England. I am Chairman of the International Continence Society Standardisation Committee and of the Urogenital Specialty Group in the UK's Comprehensive Clinical Research Network. I am Editor of the BJU International Website, and a member of several journal Editorial Boards. I undertook my medical training at the Universities of Cambridge and Oxford and was awarded my Doctorate Thesis by the University of Oxford, studying the physiological effects of spinal cord injury on the human bladder. I have written several publications in peer-reviewed journals.

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A brief review of medical records was undertaken to ascertain the key issues relating to the decision processes leading up to cystectomy. This should not be taken as a comprehensive evaluation, in view of the limited time available to me. Below are presented the key features derived from the notes and my opinion relating to management of the patients on whom I was asked to comment

### PATIENT

Personal Information redacted by the USI

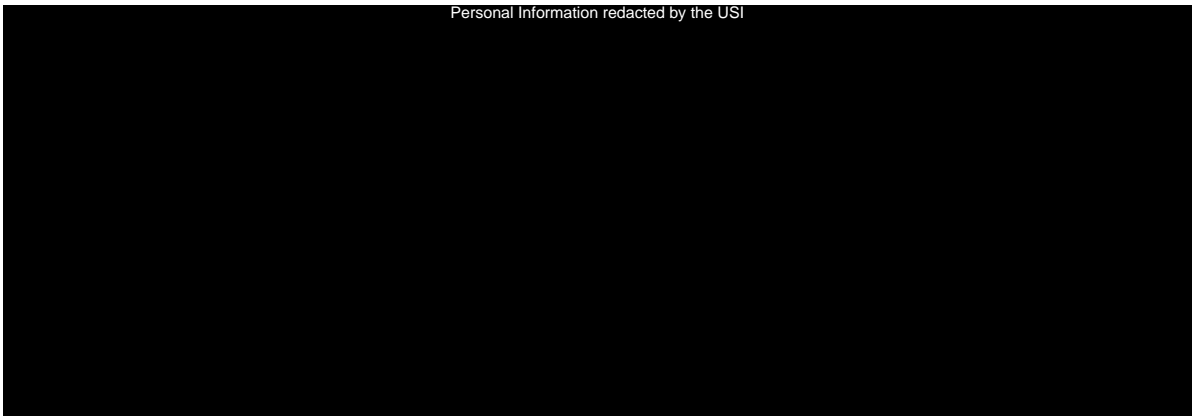
Cystectomy Date: Personal Information redacted by the USI

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### KEY FEATURES FROM NOTES

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Personal Information redacted by the USI





Personal Information redacted by the USI

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### OPINION

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- 1.1 The uncertainty in this lady's case relates to the fact she had seen surgeon in the presence of another patient who previously had had a cystectomy for a somewhat similar presentation. Similar symptoms were described and described as achieving consensus "relating to similarity of symptoms."
- 1.2 Nonetheless, suitable steps were taken in evaluating her; specifically, she was found to have an abnormal response to bladder distension under anaesthetic, oedema and chronic inflammation were found pathologically, and she had undergone review by a mental health professional. These findings do point to a genuine indication for cystectomy in this lady.
- 1.3 Information that I would like to see to finalise a conclusion would be the histology from her cystectomy, a frequency volume chart, and the original trace of the urodynamics. A frequency volume chart would help ascertain whether functional bladder capacity is markedly impaired. Ideally, a pain score should be evaluated in patients of this type.

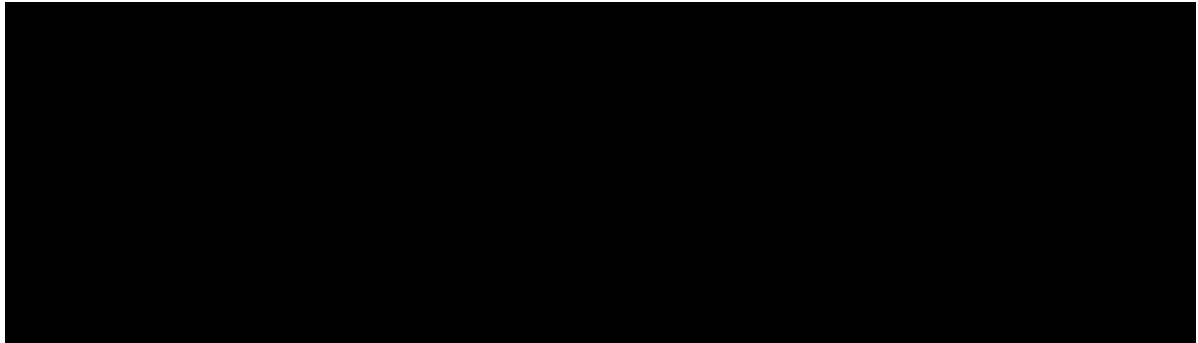
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### KEY FEATURES FROM NOTES

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Personal Information redacted by the USI



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### OPINION

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- 2.1 It is not clear why she had her colostomy and urostomy in the first place – the procedure was done at a different hospital, and the initial indication has yet to be determined.
- 2.2 It is uncertain whether she had a rectal stump– if so an inflamed residual rectal stump could cause suprapubic pain. Assessment of this would have been suitable prior to cystectomy, if applicable. Nonetheless, secondary cystectomy for pain after diversion is necessary in some patients.
- 2.3 Clear documentation that the patient was warned that pain could subsequently persist despite cystectomy would have been appropriate.

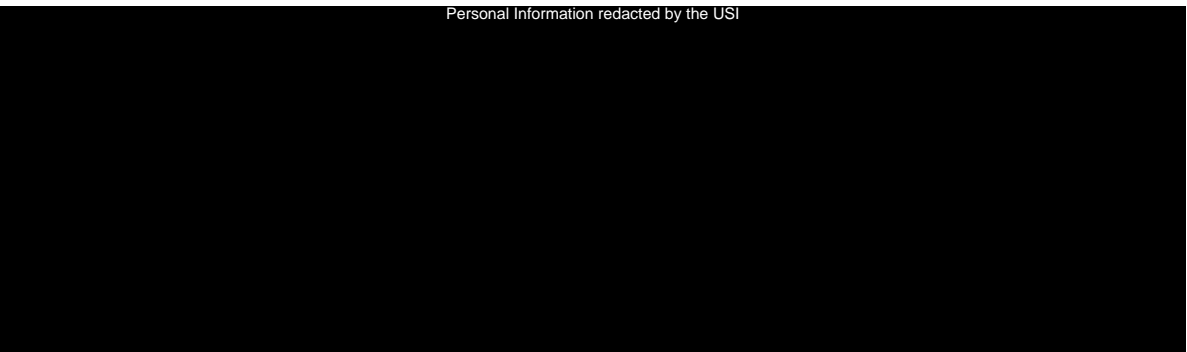
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### KEY FEATURES FROM NOTES

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Personal Information redacted by the USI



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### OPINION

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- 3.1 The urodynamic studies had not reproduced the incontinence symptom and the mechanism was uncertain. It was therefore imperative that some alternative demonstration of urinary incontinence was undertaken such as a pad test. It would have been appropriate to consider repeat urodynamics.

- 3.2 Confirmation of mechanism of leakage and cataloguing of failure of directed therapy (such as high-dose antimuscarinics and self-catheterisation, or botulinum injections into the bladder with self-catheterisation) was needed. Without knowledge of mechanism, we cannot be certain that all measures short of cystectomy were considered.
- 3.3 It is unclear whether she would have been a candidate for learning to self-catheterise intermittently (many patients are unable to do so, and this is relevant in patients with function limited by neurological disease). The need for a suprapubic catheter suggests that maybe she would not have been able to self-catheterise.
- 3.4 An alternative option to cystectomy would have been a bladder neck closure with suprapubic catheter. Thus, documentation of problems related to the suprapubic catheter would have been appropriate to justify the larger procedure of urinary diversion.

Personal Information redacted by USI

Cystectomy: Personal Information redacted by USI

#### KEY FEATURES FROM NOTES

Personal Information redacted by the USI

#### OPINION

- 4.1 There are no issues relating to this case as far as I can see. Severity of problem and alternative options were discussed. The patient elected to proceed with the operation.

Personal Information redacted by USI

#### KEY FEATURES FROM NOTES

Personal Information redacted by the USI

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### OPINION

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- 5.1 She appears to receive botulinum injections prior to training in CISC, which subsequently proved fruitless.
- 5.2 She expressed unwillingness to face the prospect of indwelling catheterisation (including suprapubic catheter). This statement is supported by a letter from Mr Ho, registrar, in a letter dated 6 November 2008. Personal Information redacted by the USI was against any notion of long term urethral or suprapubic catheter.
- 5.3 Botulinum injections into the bladder can have a paralysing effect on ability to pass urine. Consequently, 20% (range 10-40%) of people will need to have alternative means of bladder drainage- either self-catheterising or indwelling catheter.
- 5.4 Using botulinum in a patient who is statedly averse to indwelling catheterisation and has not been shown able to self catheterise is open to criticism.
- 5.5 It will be essential to see documentation as to how the bladder drainage issues were discussed for this lady before finally concluding whether her management was appropriate.

Personal Information redacted by USI

Cystectomy: Personal Information redacted by the USI

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### KEY FEATURES FROM NOTES

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Personal Information redacted by the USI

Personal Information redacted by the USI

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### OPINION

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- 6.1 Severe inflammation was demonstrated; this is compatible with a situation for which cystectomy could be warranted.
- 6.2 I have not seen documentation of pain scores or frequency volume charts. This would help support conclusion 1.

Personal Information redacted by the USI

Underwent cystectomy on Personal Information redacted by the USI.

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### KEY FEATURES FROM NOTES

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Personal Information redacted by the USI

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### OPINION

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- 7.1 I was able to undertake only a very brief review of notes
- 7.2 There seems to be a substantial degree of dependence; she continues to require hospitalisation for management of symptoms, which are being dealt with by intravenous antibiotics. This does raise the question of whether an additional psychological or psychiatric element or a dependency state should be considered.
- 7.3 The protocol for admissions for intravenous antibiotics should be reviewed. The evidence base in such patients is weak, and for a urologist to undertake such management mandates consultation with suitable multidisciplinary support. Consultant microbiology expertise should be included in managing this sort of scenario.

Personal information redacted by USI

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## OPINION

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I was unable to undertake a sufficient review of this lady's notes.

- 8.1 Diagnosis of interstitial cystitis needs to have some objective confirmation to describe pain scores, reduced functional bladder capacity (i.e., low maximum void volume on frequency volume chart), and endoscopic procedure in which the bladder was distended to ascertain its maximum anaesthetic bladder capacity- including visualisation to observe the emergence of an ulcer or post-distention glomerulation.

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## CONCLUSIONS

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- 9.1 The majority of cases appear to have been managed with compassion and consideration
- 9.2 The cases in general appear to have been supportable clinical grounds.
- 9.3 The documentation is insufficiently comprehensive, and in order to warrant proceeding to cystectomy, clear description of the following is needed; severe pathology, substantial functional impairment and impact on quality of life, attempts to undertake conservative measures, discussion of risks involved.
- 9.4 More comprehensive review of notes may identify documentation addressing some of the points in 9.3
- 9.5 An issue that stands out is failure to plan for possible voiding dysfunction in a lady receiving bladder botulinum injections who was averse to catheterisation.
- 9.6 Inpatient management of infection as seen in one of the cases should be undertaken in the context of specialist input from a multidisciplinary team including microbiology

Personal information redacted by USI

**Mr Marcus Drake, MA (Cantab), BA, BM, BCh, DM (Oxon), FRCS (Urol).**

Consultant Urological Surgeon, Bristol Urological Institute

HEFCE Senior Lecturer in Urology, University of Bristol

*Visiting Professor, University of West of England.*

**Stinson, Emma M**

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**From:** Stinson, Emma M  
**Sent:** 21 October 2010 14:23  
**To:** Loughran, Patrick  
**Cc:** White, Laura  
**Subject:** Progress with Cohort of Patients  
**Attachments:** Minutes Multidisciplinary Case DiscussionMY.doc; Minutes Multidisciplinary Case Discussion.doc

Dear Dr Loughran

I am responding to your request for information on the progress of case note review of the cohort of patients receiving IV fluids and antibiotics.

I have attached the recorded notes of the meetings to date identifying reviews of 5 patients. Two central/long lines have been removed, the third will be removed on the patient's admission next week.

The remaining patients will be reviewed over the next few weeks once Ms Sloan returns from leave and post op recovery.

I will update you once this has been completed.

Gillian

Dr Gillian Rankin  
Director of Acute Services (Interim)

Emma Stinson  
PA to Dr Gillian Rankin, Director of Acute Services (Interim) Admin Floor Craigavon Area Hospital

Tel: Personal Information redacted by USI  
Fax: Personal Information redacted by USI

Email: Personal Information redacted by USI

**Minutes Multidisciplinary Case Discussion – IV Fluids/IV Antibiotics  
Monday 27 September 2010**

Present: - Ms S Sloan, Mr M Young, Dr N Damani, Martina Corrigan

Mr Young gave a detailed history on each patient and in advance of the meeting Mrs Tedford had provided Urine culture results over the last number of months. After some discussion the following plan of care was agreed,

Personal information redacted by USI

- Recent surgery performed (Cystectomy) which it was hoped would resolve the ongoing problem of recurrent UTI. Currently an inpatient on the ward and has extended ventlon in ankle which will be removed before she is discharged home and it is noted that she has no long term lines in her system.
- She is currently on amikacin

Dr Damani recommended that this lady should be started on nitrofurantoin for 5 days to see if she can tolerate this and to see if this resolves her infection.

On discharge she will be instructed to send Weekly Urine samples to her G.P surgery for 1 month, extending to alternate weeks and then monthly. Shirley will obtain the results of these samples and make weekly contact with Sheila to ascertain how she is feeling and whether she has any symptoms. Shirley will liaise with members of the Multidisciplinary team as per the pathway.

Personal information redacted by USI

This patient had been discussed previously between Dr Damani and Mr Young in relation to him been admitted to hospital the previous week due to him being very unwell. He was admitted to the Urology ward for IV Fluids and 14 day treatment regime of Gentamycin - He remained in hospital for 5 days to receive the IV fluids and the remaining days of IV gentamycin treatment regime were given as an outpatient

It was agreed that instead of being brought in regularly every 6 weeks that every fortnight he will bring a urine sample to Shirley who will check this and have a talk with him to ascertain how he is feeling and if he has any symptoms. Shirley will liaise with members of the Multidisciplinary team as per the pathway.



**Minutes Multidisciplinary Case Discussion – IV Fluids/IV Antibiotics**  
**Tuesday 12<sup>th</sup> October 2010-10-12**  
**Meeting room, Ward 1, Ramone Building**

Present: - Mr Aidan O'Brien, Ms Sam Sloan, Dr. Rajendran, Shirley Tedford

Mr. O'Brien gave a detailed history on each patient including Urine culture results over the last number of months. After some discussion the following opinion and plan of care was agreed,

Personal Information redacted by USI

Recent surgery performed (Cystectomy) hopefully will have dealt with the source of pain and render the patient more Immune Competent, thus eliminating the need for further admissions. She is to be admitted on 24<sup>th</sup>/25<sup>th</sup> October to 3South Urology for the following,

- IV Teicoplanin 10mg/Kg daily
- IV Gentamycin 5mg/Kg Stat dose
- Cystogram
- TROC – Commencement CISC
- Removal PICC Line

On discharge she will be instructed to send Weekly Urine samples to her G.P surgery for 1 month, extending to alternate weeks and then monthly. Shirley will obtain the results of these samples and make weekly contact with the patient to ascertain how she is feeling and whether she has any symptoms of sepsis. Shirley will liaise with members of the Multidisciplinary team as per the pathway.

It was felt that the recurrent E – Coli infections may be secondary to Colonisation when Self Catheterising (Neobladder) as opposed to an Infective process, as she does not present symptomatic of Sepsis. Her repeated episodes of nausea were discussed and the team felt this may not be related to her urinary symptoms. The following plan of care was agreed,

Shirley Tedford will make contact with her and relay the following instructions,

- Antibiotics are to stop immediately, as overuse may be contributing to the overall picture.
- Commence washes with Chlorhexidine to reduce Bacterial Loading
- She will attend the Day Care Unit on alternate Friday's when Shirley Tedford will obtain a Urine sample and assess and record symptoms of pyrexia, nausea/vomiting, pain etc.
- Shirley Tedford will then contact her on the following Monday with the result of the urine sample and any instructions regarding Antibiotics.

Mr. O'Brien will arrange to have a Urea Breath Test carried out to eliminate other causes of the nausea (Helicobacter).

Personal Information redacted by USI

It was felt that the recurrent E – Coli infections may be secondary to Colonisation when Self Catheterising as opposed to an Infective process, although she has had 2 episodes of severe Sepsis over the years. Her repeated episodes of nausea were discussed and the team felt this may not be related to her urinary symptoms. The following plan of care was agreed,

Shirley Tedford will make contact with Personal Information and relay the following instructions,

- Antibiotics are to stop immediately, as overuse may be contributing to the overall picture.
- Commence washes with Chlorhexidine to reduce Bacterial Loading
- She will attend the Day Care Unit on alternate Friday's when Shirley Tedford will obtain a Urine sample and assess and record symptoms of pyrexia, nausea/vomiting, pain etc.
- Shirley Tedford will then contact her on the following Monday with the result of the urine sample and any instructions regarding Antibiotics.

Mr. O'Brien will arrange to have a Urea Breath Test carried out to eliminate other causes of the nausea (Helicobacter).

It was agreed by the group that Shirley must stress to these patients that we are not abandoning them and they have her as a point of contact should they become unwell between the two week interim period. If at any time they become symptomatic with positive urine cultures they will be reviewed and when appropriate admission arranged or attendance at the Day Care Unit to receive IV Fluids /IV antibiotics.

Director of Acute Services  
Craigavon Area Hospital

7<sup>th</sup> September 2011

**Our Ref:**

**Your Ref:**

**Private & Confidential**

Mr Young, Consultant Urologist  
Mr O'Brien, Consultant Urologist  
Mr Ahktar, Consultant Urologist

Dear colleagues,

It has come to my attention that there may not be a clear understanding of the Commissioner's position regarding the procedure of cystectomy for benign pathology. This has been discussed at the Monday evening meetings after the detailed discussion at the Regional Implementation Steering Group.

The Commissioner has required that all cystectomies are undertaken in a single unit in Northern Ireland ie in the Belfast Service. This is on the basis that the numbers in any year are very small in Northern Ireland and patients need to have the assurance that the surgeon is able to maintain the requisite skills.

Please make the necessary referral to Belfast for any patient who in your judgement requires an elective cystectomy as this procedure has not been commissioned as part of the urology service in the Southern Trust.

Yours sincerely

---

**DR GILLIAN RANKIN**  
**Director of Acute Services**

**Cc Mr Eamon Mackle, Associate Medical Director, Surgery & Elective Care**  
**Mrs Heather Trouton, Assistant Director, Surgery & Elective Care**

**Stinson, Emma M**

---

**From:** Rankin, Gillian [Personal Information redacted by USI]  
**Sent:** 27 April 2010 15:37  
**To:** Stinson, Emma M  
**Subject:** FW: Regional Urology Review  
**Attachments:** Urology Activity V2.zip; HM700 - ltr to Trust Dir Acute re Uology Review Implementation.doc

**Importance:** High

---

**From:** Clarke, Paula [Personal Information redacted by the USI]  
**Sent:** Tuesday, April 27, 2010 3:37:21 PM  
**To:** Waddell, Sandra; O'Neill, Helen; Leeman, Lesley; Rankin, Gillian  
**Cc:** Trouton, Heather; Corrigan, Martina  
**Subject:** FW: Regional Urology Review  
**Importance:** High  
**Auto forwarded by a Rule**

Re attached this letter basically follows the need for internal action as requested my email of 17/4 but with target timescale for implementation plans of 11/6.

With respect to access plans note the comment as follows:

"The plan should also include a proposal for the use of the non-recurrent 'slippage' funding available from the teams share of the recurring £2.9m, this should include what additional in-house sessions will be provide to maintain the waiting times as at 31 March 2010 and to deal with any backlog of patients waiting for urological diagnostic investigations or outpatient review"

This implies we go ahead and use the slippage on the anticipated allocation of £1.2m to sustain targets but to my mind is unclear as to whether this is just a plan or we should start this now. I will contact beth to clarify as if we could start to book additional IH sessions asap this would avoid us slipping significantly beyond 17 weeks by the time the plan is submitted and consider in mid june

Thanks

Paula Clarke  
Acting Director Performance and Reform  
[Personal Information redacted by USI]

-----Original Message-----

**From:** Beth Minnis [Personal Information redacted by USI]  
**Sent:** 27 April 2010 14:41  
**To:** Charlotte McArdle; Jennifer Welsh; Lusby, Joe; Rankin, Gillian; Seamus.McGoran setrust; Valerie Jackson  
**Cc:** Hugh Mullen; Compton, John; Paul Cummings; Semple, Jill; Beth Malloy; Michael Bloomfield; Deboys, Iain; Donnelly, Lyn; Cavanagh, Paul; Turley, Paul; Harkin, Bride; Catherine McNicholl; John Simpson; [Martin Sloan's email address]  
Clarke, Paula; Groogan, Sara2; Christine Caulfield; Joyce McCune; [Leslie-Ann Addidle's email address] OKane, Cora2; Radcliffe, Sharon

**Subject:** Regional Urology Review

"This email is covered by the disclaimer found at the end of the message."

Dear All

Please find attached a letter and enclosures sent on behalf of Mr Hugh Mullen, Director of Performance Management and Service Improvement, HSC Board.

Beth Minnis  
PA to Hugh Mullen  
Performance Management and Service Improvement  
HSC Board

HSC Board Headquarters  
12-22 Linenhall Street  
Belfast  
BT2 8BS

Tel: Personal Information redacted by USI  
Fax: Personal Information redacted by USI

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Urgent Heather + Martina 4/5.

Stinson, Emma M

From: Rankin, Gillian  
Sent: 30 April 2010 13:27  
To: Stinson, Emma M  
Subject: FW: Regional Urology Review

Return to me

-----  
From: Beth Malloy [Personal Information redacted by USI]  
Sent: Friday, April 30, 2010 1:25:10 PM  
To: Clarke, Paula  
Cc: Michael Bloomfield; Rankin, Gillian; Dickson, Michael; Groogan, Sara2; Corrigan, Diane; Donnelly, Lyn; McLaughlin, Dan2  
Subject: RE: Regional Urology Review  
Auto forwarded by a Rule

"This email is covered by the disclaimer found at the end of the message."

Dear Paula

As per our telephone conversation, the Trust will need to work with the Western Trust to agree the requirements for the Southern Sector of their Trust which will be part of the Urology Team South - this will need to be funded from the non-recurrent share of the team resources. This will need to consider the team's requirements for the new patients as well as any issues regarding backlogs for urology outpatients and diagnostic investigations.

The total patient pathway needs to be considered in the context of the SBA, the backstop and the potential for an extension of this to deal with the backlog.

As you will appreciate the Team South Project Officer will also be funded from this source.

Please do not hesitate to contact me if you need further clarification.

Regards,

Beth

Mrs Beth Malloy  
Assistant Director Scheduled Services  
Performance Management and Service Improvement Directorate Health and Social Care Board

[Personal Information redacted by USI]

-----Original Message-----

From: Clarke, Paula [Personal Information redacted by USI]  
Sent: 27 April 2010 15:42  
To: Beth Malloy  
Cc: Michael Bloomfield; Rankin, Gillian  
Subject: RE: Regional Urology Review  
Importance: High

Beth thanks for this letter, it is very helpful in setting direction for the review implementation. Re the comment

"The plan should also include a proposal for the use of the non-recurrent 'slippage' funding available from the teams share of the recurring £2.9m, this should include what additional in-house sessions will be provide to maintain the waiting times as at 31 March 2010 and to deal with any backlog of patients waiting for urological diagnostic investigations or outpatient review"

Can you urgently clarify if this is green light for us to go ahead and use the slippage on the anticipated allocation of £1.2m to sustain targets OR is just asking

for a plan for how we would use the slippage. If we wait until a plan is submitted mid june (7 weeks away), we will have seen access times extend significantly beyond 17 weeks. Happy to discuss as required

Thanks

Paula Clarke  
Acting Director Performance and Reform  
02838613945/07739329237

-----Original Message-----

From: Beth Minnis [Personal Information redacted by the USI]  
Sent: 27 April 2010 14:41  
To: Charlotte McArdle; Jennifer Welsh; Lusby, Joe; Rankin, Gillian; Seamus McGoran  
setrust; Valerie Jackson  
Cc: Hugh Mullen; Compton, John; Paul Cummings; Semple, Jill; Beth Malloy; Michael  
Bloomfield; Deboys, Iain; Donnelly, Lyn; Cavanagh, Paul; Turley, Paul; Harkin, Bride;  
Catherine McNicholl; John Simpson; [Martin Sloan's email address] Clarke,  
Paula; Groogan, Sara2; Christine Caulfield; Joyce McCune; [Leslie-Ann Addie's email address]  
OKane, Cora2; Radcliffe, Sharon  
Subject: Regional Urology Review

"This email is covered by the disclaimer found at the end of the message."

Dear All

Please find attached a letter and enclosures sent on behalf of Mr Hugh Mullen,  
Director of Performance Management and Service Improvement, HSC Board.

Beth Minnis  
PA to Hugh Mullen  
Performance Management and Service Improvement HSC Board

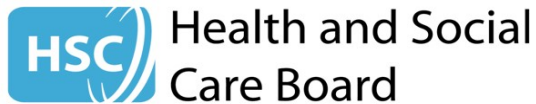
HSC Board Headquarters  
12-22 Linenhall Street  
Belfast  
BT2 8BS

Tel: [Personal Information redacted by USI]  
Fax: [Personal Information redacted by USI]

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*Performance Management and Service  
Improvement Directorate*

Trust Directors of Acute Services

*HSC Board Headquarters  
12-22 Linenhall Street  
Belfast  
BT2 8BS*

*Tel :* [Personal Information redacted by USI]  
*Fax :* [Personal Information redacted by USI]  
*Email:* [Personal Information redacted by USI]

Our Ref: HM670  
Date: 27 April 2010

Dear Colleagues

## **REGIONAL UROLOGY REVIEW**

As you are aware, the Trust was represented on the Regional Urology Review which was completed in March 2009. The final report was presented to the Department in April 2009 and was endorsed by the Minister on 31 March 2010. I am aware an initial meeting of team East was held on 22 March and team North on the 1 April 2010 and team South is planned for the 13 May 2010.

Now that the Minister has endorsed the recommendations from the Review, it is imperative that the Trusts with lead responsibility for the development of the Business Case/Implementation Plan move quickly to develop the team model and agree the activity to be provided from the additional investment.

The Teams should base their implementation plan on each of the relevant Review recommendations; a full list of the recommendations is included in Appendix 1. I am aware that each of the teams has established project management arrangements to develop and agree the implementation plan for each team. It is also anticipated that these teams will agree the patient pathways, complete a baseline assessment of the current service, their current location and the activity available from the existing service model. The teams should aim to have completed the first draft of the Implementation Plan and submit this to the Board by Friday 11 June 2010.

It is planned that an overarching Implementation Project Board will be established comprising the Chair and Clinical Advisor from each of these project Teams, and key HSCB staff; to oversee the implementation of the Review. The first meeting of the Urology Project Implementation Board will be held on Thursday 1 July 2010 at 2.00pm in the Conference Room, Templeton House. The Project Team chair should send the team nominated representatives to [Personal Information redacted by USI] by Friday 7 May 2010. I have asked Beth Malloy, Assistant Director, Scheduled Services, Performance Management and Service Improvement, to chair the Project Implementation Board.

The Review estimated the cost of implementing the recommendations to be £3.5m, of this £637k has already been allocated to Belfast Trust, and the remaining balance of £2.9m is



available. Please see Appendix 2 which has notionally allocated this budget to each of the teams, and it is on this basis the Teams should work collectively across Trusts to develop the Implementation Plans. The plan should also include a proposal for the use of the non-recurrent 'slippage' funding available from the teams share of the recurring £2.9m, this should include what additional in-house sessions will be provide to maintain the waiting times as at 31 March 2010 and to deal with any backlog of patients waiting for urological diagnostic investigations or outpatient review.

As per the details outlined in the Review, the initial assumption regarding the activity associated with each of the additional Consultant appointments is included in Appendix 3. To assist the teams in the further discussion, the figures outlined in the Urology Review have been updated and are attached in Appendix 4.

The Implementation plan, proposed patient pathways and the non-recurrent funding proposal should be sent to Beth Malloy Personal Information redacted by USI by Friday 11 June 2010.

Yours sincerely

Personal Information redacted by USI

**HUGH MULLEN**  
**Director of Performance Management and Service Improvement**

Enc

cc     Trust Directors of Performance  
       John Compton  
       Paul Cummings  
       Beth Malloy  
       Michael Bloomfield  
       Iain Deboys  
       Lyn Donnelly  
       Paul Cavanagh  
       Paul Turley  
       Bride Harkin

## **Appendix 1**

### **1. UROLOGY REVIEW SUMMARY OF RECOMMENDATIONS**

#### **Section 2 – Introduction and Context**

1. Unless Urological procedures (particularly operative 'M' code) constitute a substantial proportion of a surgeon's practice, (s)he should cease undertaking any such procedures. Any Surgeon continuing to provide such Urology services should do so within a formal link to a Urology Unit/Team.
2. Trusts should plan and consider the implications of any impending retirements in General Surgery, particularly with regard to the transfer of "N" Code work and the associated resources to the Urology Team.
3. A separate review of urinary continence services should be undertaken, with a view to developing an integrated service model in line with NICE Guidance.

#### **Section 3 – Current Service Profile**

4. Trusts must review the process for internal Consultant to Consultant referrals to Urology to ensure that there are no undue delays in the system.
5. Northern Ireland Cancer Network (NICaN) Urology Group in conjunction with Urology Teams and Primary Care should develop and implement (by September 2009) agreed referral guidelines and pathways for suspected Urological Cancers.
6. Deployment of new Consultant posts (both vacancies and additional posts arising from this review) should take into account areas of special interest that are deemed to be required in the service configuration model.
7. Urologists, in collaboration with General Surgery and A&E colleagues, should develop and implement clear protocols and care pathways for Urology patients requiring admission to an acute hospital which does not have an acute Urology Unit.
8. Urologists, in collaboration with A&E colleagues, should develop and implement protocols/care pathways for those patients requiring direct transfer and admission to an acute Urology Unit.
9. Trusts should ensure arrangements are in place to proactively manage and provide equitable care to those patients admitted under General Surgery in hospitals without Urology Units (e.g. Antrim, Daisy Hill, Erne). Arrangements should include 7 day week notification of admissions to the appropriate Urology Unit and provision of urology advice/care by telephone, electronically or in person, also 7 days a week.
10. In undertaking the ICATS review, there must be full engagement with secondary care Urology teams, current ICATS teams, as well as General Practitioners and LCGs. In considering areas of Urology suitable for further development they should look towards erectile dysfunction, benign prostatic disease, LUTS and continence services. The review should also take into account developments elsewhere within the UK and in particular developments within PCTs in relation to shifting care closer to home.

**Section 4 – Capacity, Demand and Activity**

11. Trusts (Urology departments) will be required to evidence (in their implementation plans) delivery of the key elements of the Elective Reform Programme.

**Section 5 – Performance Measures**

12. Trust Urology Teams must as a matter of urgency redesign and enhance capacity to provide single visit outpatient and assessment (diagnostic) services for suspected urological cancer patients.
13. Trusts should implement the key elements of the elective reform programme with regard to admission on the day of surgery, pre-operative assessment and increasing day surgery rates.
14. Trusts should participate in a benchmarking exercise of a set number of elective (procedure codes) and non-elective (diagnostic codes) patients by Consultant and by hospital with a view to agreeing a target length of stay for these groups of patients.
15. Trusts will be required to include in their implementation plans, an action plan for increasing the percentage of elective operations undertaken as day surgery, redesigning their day surgery theatre facilities and should work with Urology Team in other Trusts to agree procedures for which day care will be the norm for elective surgery.
16. Trusts should review their outpatient review practice, redesign other methods/staff (telephone follow-up/nurse) where appropriate and subject to casemix/complexity issues reduce new:review ratios to the level of peer colleagues.
17. Trusts must modernise and redesign outpatient clinic templates and admin/booking processes to ensure they maximise their capacity for new and review patients and to prevent backlogs occurring in the future.

**Section 7 – Urological Cancers**

18. The NICaN Group in conjunction with each Trust and Commissioners should develop and implement a clear action plan with timelines for the implementation of the new arrangements/enhanced services in working towards compliance with IOG.
19. By March 2010, at the latest, all radical pelvic surgery should be undertaken on a single site, in BCH, by a specialist team of surgeons. The transfer of this work should be phased to enable BCH to appoint appropriate staff and ensure infrastructure and systems are in place. A phased implementation plan should be agreed with all parties.
20. Trusts should ensure that surgeons carrying out small numbers (<5 per annum) of either radical pelvic operation, make arrangements to pass this work on to more specialised colleagues, as soon as is practicably possible, (whilst a single site service is being established).

**Section 8 – Clinical Workforce Requirements**

21. To deliver the level of activity from 2008/09 and address the issues around casemix and complexity it is recommended that the number of Consultant Urologists is increased to 23 wte.
22. Urology Teams must ensure that current capacity is optimised to deliver the number FCEs by Consultant as per BAUS guidelines (subject to casemix and complexity). This may require access to additional operating sessions up to at least 4 per week (42 weeks per year) and an amendment to job plans.
23. At least 5 Clinical Nurse Specialists (cancer) should be appointed (and trained). The deployment of these staff within particular teams will need to be decided and Trusts will be required to develop detailed job plans with caseload, activity and measurable outcomes agreed prior to implementation. A further review and benchmarking of cancer CNS's should be undertaken in mid 2010.

**Section 9 – Service Configuration Model**

24. Urology services in Northern Ireland should be reconfigured into a 3 team model, to achieve long term stability and viability.
25. Teams North and East (Northern, Western, Belfast and South Eastern Trusts) should ensure that prior to the creation of the new Teams, there are clear, unambiguous and agreed arrangements in place with regard to Consultant on-call and out of hours arrangements.
26. Each Trust must work in partnership with the other Trust/s within the new team structure to determine and agree the new arrangements for service delivery, including inter alia, governance, employment and contractual arrangements for clinical staff, locations, frequency and prioritisation of outreach services, areas of Consultant specialist interest based on capacity and expertise required and catchment populations to be served.

**Appendix 2****Estimated Team Costs for the Implementation of Adult Urology Review Recommendations.**

	Team South	Team North	Team East	Total	No	Unit Cost	Total
<b>Staffing Costs</b>							
Consultant Urologist – additional wte team allocation	2 wte	1 wte	3 wte	6	6		
Consultant Urologists wte	£208,000	£104,000	£312,000	£624,000		£104,000	£624,000
Consultant Anaesthetist @ 0.6 wte per Con. Urologist	£124,800	£62,400	£187,200	£374,400	3.6	£104,000	£374,400
Consultant Radiologist @ 0.3 wte per Con. Urologist	£62,400	£31,200	£93,600	£187,200	1.8	£104,000	£187,200
Band 5 Radiographer @ 6 per wte Con Radiologist	£100,782	£50,391	£151,173	£302,346	10.8	£27,995	£302,346
Band 5 Theatre Nursing @ 1.8 wte per Con. Urologist	£100,782	£50,391	£151,173	£302,346	10.8	£27,995	£302,346
Band 3 Nursing @ 0.46 wte per Con. Urologist	£17,870	£8,935	£26,805	£53,610	2.7	£19,856	£53,611
Band 7 Specialist Nursing *1	£103,605	£0	£103,605	£207,210	5	£41,442	£207,210
Band 5 Nursing @ 0.64 wte (day surgery)	£5,972	£2,986	£8,958	£17,916	0.64	£27,995	£17,917
Band 4 Personal Secretary @ 0.5 wte per consultant urologists	£23,265	£11,633	£34,897	£69,795	3	£23,265	£69,795

Band 3 Admin support to radiologists at 0.5 wte per Radiologist	6,618	3,309	9,927	£19,854	1	£19,856	£19,856
Band 3 Admin Support to Specialist Nurses @ 0.5 wte per Nurse *2	£31,438	£0	£28,129	£59,567	3	£19,856	£59,568
Band 4 Medical Records support 0.5 per unit *3	£11,632	£23,265	£23,265	£58,162	2.5	£23,265	£58,162
Band 7 MLSO – Bio-medical Science *4			£41,442	£41,442	1	£41,442	£41,442
<b>Staffing Costs Sub Total</b>	<b>£797,164</b>	<b>£348,510</b>	<b>£1,172,174</b>	<b>£2,317,848</b>			<b>£2,317,853</b>
<b>Support Costs</b>							
Surgical G&S @ £94,500 per Con. Urologist	189,000	94,500	283,500	£567,000	X 6	£94,500	£567,000
Theatre Goods/Disposables @ £50,000 per Con.Urologist	100,000	50,000	150,000	£300,000	X 6	£50,000	£300,000
Radiology G&S per Con. Urologist	5,000	2,500	7,500	£15,000	X 6	£2,500	£15,000
CSSD @ £32,000 per Con. Urologist	64,000	32,000	96,000	£192,000	X 6	£32,000	£192,000
Outpatients Clinics @ 2 per Con. Urologist	40,000	20,000	60,000	£120,000	X 12	£10,000	£120,000
<b>Support Costs Sub Total</b>	<b>£398,000</b>	<b>£199,000</b>	<b>£597,000</b>	<b>£1,194,000</b>			
<b>Sub Total</b>	<b>£1,195,164</b>	<b>£547,510</b>	<b>£1,769,174</b>	<b>£3,511,848</b>			<b>£3,511,853</b>
<b>Less funding in 2008/09</b>			<b>£637,076</b>	<b>£637,076</b>			<b>-£637,076</b>
<b>FINAL TOTAL</b>	<b>£1,195,164</b>	<b>£547,510</b>	<b>£1,132,098</b>	<b>£2,874,772</b>			<b>£2,874,777</b>

Please note this analysis is based on the team figures included in the Review shown in Appendix 7 page 60.

\*1 – this is based on the existing CNS nurse establishment and the sub specialty consultants within each of the teams. The remaining 1 CNS has been allocated to Team East for the Radical Pelvic Surgery undertaken at the Cancer Centre.

	Existing Establishment	Number of consultants with a sub-specialty interest	Additional CNS
Team South	0	2	2
Team North	2	2	0.5
Team East	2	4	2.5

\*2 – 0.5 allocated to each Team as per the Specialist Nurse

\*3 – 0.5 allocated to each Trust Unit within each Team

\*4 – 1 wte allocated to Belfast – for increased demand for pathology

Please note this is the notional funding for each team and is subject to the agreed Commissioning arrangements of the Board

## **Appendix 3**

The exact details of the additional activity associate with the additional Consultant appointments will require agreement with the Board Commissioning teams. As outlined in the Review, it is assumed that the additional activity will be as follows:

Ref: Review Page 40-41

Outpatients: 1176 – 1680 per Consultant

Inpatient and Daycase FCE: 1000 - 1250 per Consultant

Existing 17 Consultants in post

Outpatients 19,992 to 28,560

IP/DC FCEs – 17,000 to 21,250

New 6 Consultant Appointments

Outpatients 7,056 to 10,080

IP/DC FCEs – 6,000 to 7,500

Regional Total

Outpatients 27,048 to 38,640

IP/DC FCEs – 23,000 to 28,750

Please note:

This analysis does not take into account the improvements expected from the introduction and full implementation of the ICATS for urology, as outlined on page 19 of the Review. The additional activity from the CNS has still to be quantified. In addition, the quantification of the service improvements, to be gained from the implementation of the Review recommendations, still to be agreed with the each Trust (for each of the team) and the Board are not included.



Day Case Rates (Correction of Hydrocele N11) Apr06 to Feb10**Regional**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	36	66	58	42
<b>Elective Admissions</b>	33	33	40	36
<b>Total</b>	<b>69</b>	<b>99</b>	<b>98</b>	<b>78</b>
<b>Daycase Rate</b>	<b>52.17</b>	<b>66.67</b>	<b>59.18</b>	<b>53.85</b>

**Day Case Rates (Correction of Hydrocele N11) Apr06 to Feb10**

		<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	10	23	18	11
	<b>Elective Admissions</b>	24	17	24	15
	<b>Total</b>	<b>34</b>	<b>40</b>	<b>42</b>	<b>26</b>
	<b>DC Rate</b>	<b>29.41</b>	<b>57.5</b>	<b>42.86</b>	<b>42.31</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	0	0	1	0
	<b>Elective Admissions</b>	1	2	4	10
	<b>Total</b>	<b>1</b>	<b>2</b>	<b>5</b>	<b>10</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>20</b>	<b>0</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	23	26	34	25
	<b>Elective Admissions</b>	2	4	6	6
	<b>Total</b>	<b>25</b>	<b>30</b>	<b>40</b>	<b>31</b>
	<b>DC Rate</b>	<b>92</b>	<b>86.67</b>	<b>85</b>	<b>80.65</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	3	16	5	5
	<b>Elective Admissions</b>	0	3	4	2
	<b>Total</b>	<b>3</b>	<b>19</b>	<b>9</b>	<b>7</b>
	<b>DC Rate</b>	<b>100</b>	<b>84.21</b>	<b>55.56</b>	<b>71.43</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	0	1	0	1
	<b>Elective Admissions</b>	6	7	2	3
	<b>Total</b>	<b>6</b>	<b>8</b>	<b>2</b>	<b>4</b>
	<b>DC Rate</b>	<b>0</b>	<b>12.5</b>	<b>0</b>	<b>25</b>

Day Case Rates (Correction of Hydrocele N11) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	0	1	0	1
	Elective Admissions	6	7	2	3
	Total	6	8	2	4
	DC Rate	0	12.5	0	25
BELFAST CITY HOSPITAL	Daycases	10	17	12	8
	Elective Admissions	16	12	13	4
	Total	26	29	25	12
	DC Rate	38.46	58.62	48	66.67
CAUSEWAY HOSPITAL	Daycases	0	0	1	0
	Elective Admissions	1	2	4	10
	Total	1	2	5	10
	DC Rate	0	0	20	0
CRAIGAVON AREA HOSPITAL	Daycases	3	11	2	5
	Elective Admissions	0	3	4	2
	Total	3	14	6	7
	DC Rate	100	78.57	33.33	71.43
DOWNE HOSPITAL	Daycases			6	3
	Elective Admissions			0	0
	Total			6	3
	DC Rate			100	100
LAGAN VALLEY HOSPITAL	Daycases	1	4	3	3
	Elective Admissions	0	0	1	0
	Total	1	4	4	3
	DC Rate	100	100	75	100
MATER HOSPITAL HSS TRUST	Daycases	0	0	1	0
	Elective Admissions	8	5	11	11
	Total	8	5	12	11
	DC Rate	0	0	8.33	0
NEWTOWNARDS HOSPITAL	Daycases	22	22	25	19
	Elective Admissions	0	0	1	1
	Total	22	22	26	20
	DC Rate	100	100	96.15	95
ROYAL VICTORIA HOSPITAL	Daycases		6	5	3
	Elective Admissions		0	0	0
	Total		6	5	3
	DC Rate		100	100	100
SOUTH TYRONE	Daycases		5	3	
	Elective Admissions		0	0	

Day Case Rates (Correction of Hydrocele N11) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
HOSPITAL	Total		5	3	
	DC Rate		100	100	
ULSTER HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	2	4	4	5
	Total	2	4	4	5
	DC Rate	0	0	0	0

**Day Case Rates (Cystostomy and insertion of suprapubic tube into bladder M38.2)**  
**Apr06 to Feb10**

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Day Cases	1	6	2	4
Elective Admissions	9	36	36	54
Total	10	42	38	58
Daycase Rate	10.0	14.3	5.3	6.9

**Day Case Rates (Cystostomy and insertion of suprapubic tube into bladder M38.2)****Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	0	0	0	0
	<b>Elective Admissions</b>	5	32	20	38
	<b>Total</b>	<b>5</b>	<b>32</b>	<b>20</b>	<b>38</b>
	<b>DC Rates</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	0			1
	<b>Elective Admissions</b>	1			6
	<b>Total</b>	<b>1</b>			<b>7</b>
	<b>DC Rates</b>	<b>0</b>			<b>14.29</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	0	1	1	1
	<b>Elective Admissions</b>	0	0	2	1
	<b>Total</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>2</b>
	<b>DC Rates</b>	<b>#DIV/0</b>	<b>100</b>	<b>33.33</b>	<b>50</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	0	1	1	0
	<b>Elective Admissions</b>	2	2	12	8
	<b>Total</b>	<b>2</b>	<b>3</b>	<b>13</b>	<b>8</b>
	<b>DC Rates</b>	<b>0</b>	<b>33.33</b>	<b>7.69</b>	<b>0</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	1	4	0	2
	<b>Elective Admissions</b>	1	2	2	1
	<b>Total</b>	<b>2</b>	<b>6</b>	<b>2</b>	<b>3</b>
	<b>DC Rates</b>	<b>50</b>	<b>66.67</b>	<b>0</b>	<b>66.67</b>

Day Case Rates (Cystostomy and insertion of suprapubic tube into bladder M38.2)Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	1	4	0	2
	Elective Admissions	1	2	2	1
	Total	2	6	2	3
	DC Rate	50	66.67	0	66.67
BELFAST CITY HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	5	32	19	27
	Total	5	32	19	27
	DC Rate	0	0	0	0
CAUSEWAY HOSPITAL	Daycases	0			1
	Elective Admissions	1			6
	Total	1			7
	DC Rate	0			14.29
CRAIGAVON AREA HOSPITAL	Daycases	0	1	1	0
	Elective Admissions	2	2	12	8
	Total	2	3	13	8
	DC Rate	0	33.33	7.69	0
LAGAN VALLEY HOSPITAL	Daycases			1	1
	Elective Admissions			1	0
	Total			2	1
	DC Rate			50	100
MATER HOSPITAL HSS TRUST	Daycases			0	0
	Elective Admissions			1	11
	Total			1	11
	DC Rate			0	0
NEWTOWNARDS HOSPITAL	Daycases		1		
	Elective Admissions		0		
	Total		1		
	DC Rate		100		
ULSTER HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	0	0	1	1
	Total	0	0	1	1
	DC Rate	#DIV/0	#DIV/0	0	0

**Day Case Rates (Diagnostic endoscopic examination of bladder M45) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	6264	7051	7945	6334
<b>Elective Admissions</b>	491	546	566	467
<b>Total</b>	<b>6,755</b>	<b>7,597</b>	<b>8,511</b>	<b>6,801</b>
<b>Daycase Rate</b>	<b>92.7</b>	<b>92.8</b>	<b>93.3</b>	<b>93.1</b>



Day Case Rates (Diagnostic endoscopic examination of bladder M45) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	3238	3339	3566	2741
	<b>Elective Admissions</b>	190	239	171	144
	<b>Total</b>	<b>3,428</b>	<b>3,578</b>	<b>3,737</b>	<b>2,885</b>
	<b>DC Rate</b>	<b>94.46</b>	<b>93.32</b>	<b>95.42</b>	<b>95.01</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	438	871	1094	693
	<b>Elective Admissions</b>	98	128	124	110
	<b>Total</b>	<b>536</b>	<b>999</b>	<b>1,218</b>	<b>803</b>
	<b>DC Rate</b>	<b>81.72</b>	<b>87.19</b>	<b>89.82</b>	<b>86.3</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	1084	1103	1402	1289
	<b>Elective Admissions</b>	28	20	46	35
	<b>Total</b>	<b>1,112</b>	<b>1,123</b>	<b>1,448</b>	<b>1,324</b>
	<b>DC Rate</b>	<b>97.48</b>	<b>98.22</b>	<b>96.82</b>	<b>97.36</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	676	823	868	669
	<b>Elective Admissions</b>	78	67	103	88
	<b>Total</b>	<b>754</b>	<b>890</b>	<b>971</b>	<b>757</b>
	<b>DC Rate</b>	<b>89.66</b>	<b>92.47</b>	<b>89.39</b>	<b>88.38</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	828	915	1015	942
	<b>Elective Admissions</b>	97	92	122	90
	<b>Total</b>	<b>925</b>	<b>1,007</b>	<b>1,137</b>	<b>1,032</b>
	<b>DC Rate</b>	<b>89.51</b>	<b>90.86</b>	<b>89.27</b>	<b>91.28</b>

Day Case Rates (Diagnostic endoscopic examination of bladder M45) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	828	915	1015	942
	Elective Admissions	97	92	122	90
	Total	<b>925</b>	<b>1,007</b>	<b>1,137</b>	<b>1,032</b>
	DC Rate	<b>89.51</b>	<b>90.86</b>	<b>89.27</b>	<b>91.28</b>
BELFAST CITY HOSPITAL	Daycases	2356	2600	2740	2236
	Elective Admissions	137	165	117	83
	Total	<b>2,493</b>	<b>2,765</b>	<b>2,857</b>	<b>2,319</b>
	DC Rate	<b>94.5</b>	<b>94.03</b>	<b>95.9</b>	<b>96.42</b>
CAUSEWAY HOSPITAL	Daycases	438	871	1094	693
	Elective Admissions	98	128	124	110
	Total	<b>536</b>	<b>999</b>	<b>1,218</b>	<b>803</b>
	DC Rate	<b>81.72</b>	<b>87.19</b>	<b>89.82</b>	<b>86.3</b>
CRAIGAVON AREA HOSPITAL	Daycases	557	584	613	534
	Elective Admissions	78	66	102	88
	Total	<b>635</b>	<b>650</b>	<b>715</b>	<b>622</b>
	DC Rate	<b>87.72</b>	<b>89.85</b>	<b>85.73</b>	<b>85.85</b>
DAISY HILL HOSPITAL	Daycases		0		8
	Elective Admissions		1		0
	Total		<b>1</b>		<b>8</b>
	DC Rate		<b>0</b>		<b>100</b>
DOWNE HOSPITAL	Daycases			166	130
	Elective Admissions			1	0
	Total			<b>167</b>	<b>130</b>
	DC Rate			<b>99.4</b>	<b>100</b>
LAGAN VALLEY HOSPITAL	Daycases	279	310	298	312
	Elective Admissions	0	0	0	0
	Total	<b>279</b>	<b>310</b>	<b>298</b>	<b>312</b>
	DC Rate	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
MATER HOSPITAL HSS TRUST	Daycases	754	635	730	424
	Elective Admissions	53	74	54	61
	Total	<b>807</b>	<b>709</b>	<b>784</b>	<b>485</b>
	DC Rate	<b>93.43</b>	<b>89.56</b>	<b>93.11</b>	<b>87.42</b>
NEWTOWNARDS HOSPITAL	Daycases	805	793	938	847
	Elective Admissions	0	0	0	0
	Total	<b>805</b>	<b>793</b>	<b>938</b>	<b>847</b>
	DC Rate	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
ROYAL VICTORIA	Daycases	128	104	96	81
	Elective Admissions	0	0	0	0

Day Case Rates (Diagnostic endoscopic examination of bladder M45) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
HOSPITAL	Total	128	104	96	81
	DC Rate	100	100	100	100
SOUTH TYRONE HOSPITAL	Daycases	119	239	255	127
	Elective Admissions	0	0	1	0
	Total	119	239	256	127
	DC Rate	100	100	99.61	100
ULSTER HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	28	20	45	35
	Total	28	20	45	35
	DC Rate	0	0	0	0

Day Case Rates (Dilation of outlet of female bladder M58.2) Apr06 to Feb10

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Day Cases	2	3	2	2
Elective Admissions	7	2	0	8
Total	9	5	2	10
Daycase Rate	22.2	60.0	100.0	20.0

Day Case Rates (Dilation of outlet of female bladder M58.2) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	1			
	Elective Admissions	1			
	Total	2			
	DC Rate	50			
Northern Health and Social Care Trust	Daycases	0	2	2	1
	Elective Admissions	4	2	0	8
	Total	4	4	2	9
	DC Rate	0	50	100	11.11
Southern Health and Social Care Trust	Daycases	1	1		1
	Elective Admissions	2	0		0
	Total	3	1		1
	DC Rate	33.33	100		100

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>BELFAST CITY HOSPITAL</b>	<b>Daycases</b>	1			
	<b>Elective Admissions</b>	0			
	<b>Total</b>	1			
	<b>DC Rate</b>	100			
<b>CAUSEWAY HOSPITAL</b>	<b>Daycases</b>	0	2	2	1
	<b>Elective Admissions</b>	4	2	0	8
	<b>Total</b>	4	4	2	9
	<b>DC Rate</b>	0	50	100	11.11
<b>CRAIGAVON AREA HOSPITAL</b>	<b>Daycases</b>	1	1		1
	<b>Elective Admissions</b>	2	0		0
	<b>Total</b>	3	1		1
	<b>DC Rate</b>	33.33	100		100
<b>MATER HOSPITAL HSS TRUST</b>	<b>Daycases</b>	0			
	<b>Elective Admissions</b>	1			
	<b>Total</b>	1			
	<b>DC Rate</b>	0			

Day Case Rates (Endoscopic Examination of urethra biopsy M77) Apr06 to Feb10

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Day Cases	9	13	10	20
Elective Admissions	2	4	0	1
<i>Total</i>	<i>11</i>	<i>17</i>	<i>10</i>	<i>21</i>
Daycase Rate	81.8	76.5	100.0	95.2

Day Case Rates (Endoscopic Examination of urethra biopsy M77) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	0	1		1
	<b>Elective Admissions</b>	1	1		1
	<b>Total</b>	<b>1</b>	<b>2</b>		<b>2</b>
	<b>DC Rate</b>	<b>0</b>	<b>50</b>		<b>50</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>		2	3	5
	<b>Elective Admissions</b>		2	0	0
	<b>Total</b>		<b>4</b>	<b>3</b>	<b>5</b>
	<b>DC Rate</b>		<b>50</b>	<b>100</b>	<b>100</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	2	4	4	5
	<b>Elective Admissions</b>	0	0	0	0
	<b>Total</b>	<b>2</b>	<b>4</b>	<b>4</b>	<b>5</b>
	<b>DC Rate</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	2	2	2	5
	<b>Elective Admissions</b>	1	1	0	0
	<b>Total</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>5</b>
	<b>DC Rate</b>	<b>66.67</b>	<b>66.67</b>	<b>100</b>	<b>100</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	5	4	1	4
	<b>Elective Admissions</b>	0	0	0	0
	<b>Total</b>	<b>5</b>	<b>4</b>	<b>1</b>	<b>4</b>
	<b>DC Rate</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>



Day Case Rates (Endoscopic Examination of urethra biopsy M77) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	5	4	1	4
	Elective Admissions	0	0	0	0
	Total	5	4	1	4
	DC Rate	100	100	100	100
BELFAST CITY HOSPITAL	Daycases	0	0		1
	Elective Admissions	1	1		1
	Total	1	1		2
	DC Rate	0	0		50
CAUSEWAY HOSPITAL	Daycases		2	3	5
	Elective Admissions		2	0	0
	Total		4	3	5
	DC Rate		50	100	100
CRAIGAVON AREA HOSPITAL	Daycases	1	2	2	5
	Elective Admissions	1	1	0	0
	Total	2	3	2	5
	DC Rate	50	66.67	100	100
DOWNE HOSPITAL	Daycases			1	
	Elective Admissions			0	
	Total			1	
	DC Rate			100	
LAGAN VALLEY HOSPITAL	Daycases	2	4	3	2
	Elective Admissions	0	0	0	0
	Total	2	4	3	2
	DC Rate	100	100	100	100
MATER HOSPITAL HSS TRUST	Daycases		1		
	Elective Admissions		0		
	Total		1		
	DC Rate		100		
NEWTOWNARDS HOSPITAL	Daycases				3
	Elective Admissions				0
	Total				3
	DC Rate				100
SOUTH TYRONE HOSPITAL	Daycases	1			
	Elective Admissions	0			
	Total	1			
	DC Rate	100			

**Day Case Rates (Endoscopic extraction of calculus of bladder M44.1,44.2) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	7	2	9	4
<b>Elective Admissions</b>	85	89	77	73
<b>Total</b>	<b>92</b>	<b>91</b>	<b>86</b>	<b>77</b>
<b>Daycase Rate</b>	<b>7.6</b>	<b>2.2</b>	<b>10.5</b>	<b>5.2</b>

**Day Case Rates (Endoscopic extraction of calculus of bladder M44.1.44.2) Apr06 to Feb10**

		<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	6	2	2	1
	<b>Elective Admissions</b>	47	53	30	38
	<b>Total</b>	<b>53</b>	<b>55</b>	<b>32</b>	<b>39</b>
	<b>DC Rate</b>	<b>11.32</b>	<b>3.64</b>	<b>6.25</b>	<b>2.56</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	0	0	0	1
	<b>Elective Admissions</b>	6	10	5	8
	<b>Total</b>	<b>6</b>	<b>10</b>	<b>5</b>	<b>9</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>11.11</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	0	0	2	0
	<b>Elective Admissions</b>	4	5	11	5
	<b>Total</b>	<b>4</b>	<b>5</b>	<b>13</b>	<b>5</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>15.38</b>	<b>0</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	0	0	3	0
	<b>Elective Admissions</b>	19	10	17	9
	<b>Total</b>	<b>19</b>	<b>10</b>	<b>20</b>	<b>9</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>15</b>	<b>0</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	1	0	2	2
	<b>Elective Admissions</b>	9	11	14	13
	<b>Total</b>	<b>10</b>	<b>11</b>	<b>16</b>	<b>15</b>
	<b>DC Rate</b>	<b>10</b>	<b>0</b>	<b>12.5</b>	<b>13.33</b>

**Day Case Rates (Endoscopic extraction of calculus of bladder M44.1.44.2) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	1	0	2	2
	Elective Admissions	9	11	14	13
	Total	10	11	16	15
	DC Rate	10	0	12.5	13.33
BELFAST CITY HOSPITAL	Daycases	6	2	2	1
	Elective Admissions	45	52	28	30
	Total	51	54	30	31
	DC Rate	11.76	3.7	6.67	3.23
CAUSEWAY HOSPITAL	Daycases	0	0	0	1
	Elective Admissions	6	10	5	8
	Total	6	10	5	9
	DC Rate	0	0	0	11.11
CRAIGAVON AREA HOSPITAL	Daycases	0	0	2	0
	Elective Admissions	19	10	17	9
	Total	19	10	19	9
	DC Rate	0	0	10.53	0
DOWNE HOSPITAL	Daycases			1	
	Elective Admissions			0	
	Total			1	
	DC Rate			100	
MATER HOSPITAL HSS TRUST	Daycases	0	0	0	0
	Elective Admissions	2	1	2	8
	Total	2	1	2	8
	DC Rate	0	0	0	0
NEWTOWNARDS HOSPITAL	Daycases			1	
	Elective Admissions			0	
	Total			1	
	DC Rate			100	
SOUTH TYRONE HOSPITAL	Daycases			1	
	Elective Admissions			0	
	Total			1	
	DC Rate			100	
ULSTER HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	4	5	11	5
	Total	4	5	11	5
	DC Rate	0	0	0	0

Day Case Rates (Endoscopic Incision of outlet of male bladder M66.2) Apr06 to Feb10

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Day Cases	2	1	0	1
Elective Admissions	41	36	36	27
Total	43	37	36	28
Daycase Rate	4.7	2.7	0.0	3.6

Day Case Rates (Endoscopic Incision of outlet of male bladder M66.2) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	2	0	0	0
	<b>Elective Admissions</b>	15	11	13	12
	<b>Total</b>	<b>17</b>	<b>11</b>	<b>13</b>	<b>12</b>
	<b>DC Rate</b>	<b>11.76</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>			0	0
	<b>Elective Admissions</b>			2	2
	<b>Total</b>			<b>2</b>	<b>2</b>
	<b>DC Rate</b>			<b>0</b>	<b>0</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	0	0	0	0
	<b>Elective Admissions</b>	6	6	9	7
	<b>Total</b>	<b>6</b>	<b>6</b>	<b>9</b>	<b>7</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	0	1	0	1
	<b>Elective Admissions</b>	15	15	7	5
	<b>Total</b>	<b>15</b>	<b>16</b>	<b>7</b>	<b>6</b>
	<b>DC Rate</b>	<b>0</b>	<b>6.25</b>	<b>0</b>	<b>16.67</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	0	0	0	0
	<b>Elective Admissions</b>	5	4	5	1
	<b>Total</b>	<b>5</b>	<b>4</b>	<b>5</b>	<b>1</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Day Case Rates (Endoscopic Incision of outlet of male bladder M66.2) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	5	4	5	1
	Total	<b>5</b>	<b>4</b>	<b>5</b>	<b>1</b>
	DC Rate	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
BELFAST CITY HOSPITAL	Daycases	2	0	0	0
	Elective Admissions	10	7	11	4
	Total	<b>12</b>	<b>7</b>	<b>11</b>	<b>4</b>
	DC Rate	<b>16.67</b>	<b>0</b>	<b>0</b>	<b>0</b>
CAUSEWAY HOSPITAL	Daycases			0	0
	Elective Admissions			2	2
	Total			<b>2</b>	<b>2</b>
	DC Rate			<b>0</b>	<b>0</b>
CRAIGAVON AREA HOSPITAL	Daycases	0	1	0	0
	Elective Admissions	15	15	7	5
	Total	<b>15</b>	<b>16</b>	<b>7</b>	<b>5</b>
	DC Rate	<b>0</b>	<b>6.25</b>	<b>0</b>	<b>0</b>
MATER HOSPITAL HSS TRUST	Daycases	0	0	0	0
	Elective Admissions	5	4	2	8
	Total	<b>5</b>	<b>4</b>	<b>2</b>	<b>8</b>
	DC Rate	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
SOUTH TYRONE HOSPITAL	Daycases				1
	Elective Admissions				0
	Total				<b>1</b>
	DC Rate				<b>100</b>
ULSTER HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	6	6	9	7
	Total	<b>6</b>	<b>6</b>	<b>9</b>	<b>7</b>
	DC Rate	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**Day Case Rates (Endoscopic insertion of prosthesis into ureter M29.2 M29.5) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	4	11	7	7
<b>Elective Admissions</b>	73	78	101	76
<b>Total</b>	<b>77</b>	<b>89</b>	<b>108</b>	<b>83</b>
<b>Daycase Rate</b>	<b>5.2</b>	<b>12.4</b>	<b>6.5</b>	<b>8.4</b>



**Day Case Rates (Endoscopic insertion of prosthesis into ureter M29.2 M29.5) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	2	2	3	5
	<b>Elective Admissions</b>	24	42	36	32
	<b>Total</b>	<b>26</b>	<b>44</b>	<b>39</b>	<b>37</b>
	<b>DC Rate</b>	<b>7.69</b>	<b>4.55</b>	<b>7.69</b>	<b>13.51</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	0	0	0	1
	<b>Elective Admissions</b>	23	13	42	17
	<b>Total</b>	<b>23</b>	<b>13</b>	<b>42</b>	<b>18</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5.56</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	0	1		0
	<b>Elective Admissions</b>	1	1		2
	<b>Total</b>	<b>1</b>	<b>2</b>		<b>2</b>
	<b>DC Rate</b>	<b>0</b>	<b>50</b>		<b>0</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	0	0	0	0
	<b>Elective Admissions</b>	8	4	6	8
	<b>Total</b>	<b>8</b>	<b>4</b>	<b>6</b>	<b>8</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	2	8	4	1
	<b>Elective Admissions</b>	17	18	17	17
	<b>Total</b>	<b>19</b>	<b>26</b>	<b>21</b>	<b>18</b>
	<b>DC Rate</b>	<b>10.53</b>	<b>30.77</b>	<b>19.05</b>	<b>5.56</b>

**Day Case Rates (Endoscopic insertion of prosthesis into ureter M29.2 M29.5) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	2	8	4	1
	Elective Admissions	17	18	17	17
	Total	19	26	21	18
	DC Rate	10.53	30.77	19.05	5.56
BELFAST CITY HOSPITAL	Daycases	2	2	3	5
	Elective Admissions	24	42	36	32
	Total	26	44	39	37
	DC Rate	7.69	4.55	7.69	13.51
CAUSEWAY HOSPITAL	Daycases	0	0	0	1
	Elective Admissions	23	13	42	17
	Total	23	13	42	18
	DC Rate	0	0	0	5.56
CRAIGAVON AREA HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	8	4	6	8
	Total	8	4	6	8
	DC Rate	0	0	0	0
NEWTOWNARDS HOSPITAL	Daycases		1		
	Elective Admissions		0		
	Total		1		
	DC Rate		100		
ULSTER HOSPITAL	Daycases	0	0		0
	Elective Admissions	1	1		2
	Total	1	1		2
	DC Rate	0	0		0

**Day Case Rates (Endoscopic resection/destruction of lesion of bladder M42) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	28	29	46	35
<b>Elective Admissions</b>	574	678	816	599
<b>Total</b>	<b>602</b>	<b>707</b>	<b>862</b>	<b>634</b>
<b>Daycase Rate</b>	<b>4.7</b>	<b>4.1</b>	<b>5.3</b>	<b>5.5</b>

**Day Case Rates (Endoscopic resection/destruction of lesion of bladder M42) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	1	2	5	1
	<b>Elective Admissions</b>	287	333	311	274
	<b>Total</b>	<b>288</b>	<b>335</b>	<b>316</b>	<b>275</b>
	<b>DC Rate</b>	<b>0.35</b>	<b>0.6</b>	<b>1.58</b>	<b>0.36</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	8	3	7	2
	<b>Elective Admissions</b>	57	61	138	99
	<b>Total</b>	<b>65</b>	<b>64</b>	<b>145</b>	<b>101</b>
	<b>DC Rate</b>	<b>12.31</b>	<b>4.69</b>	<b>4.83</b>	<b>1.98</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	3	6	25	24
	<b>Elective Admissions</b>	113	140	158	110
	<b>Total</b>	<b>116</b>	<b>146</b>	<b>183</b>	<b>134</b>
	<b>DC Rate</b>	<b>2.59</b>	<b>4.11</b>	<b>13.66</b>	<b>17.91</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	1	2	3	2
	<b>Elective Admissions</b>	54	79	98	53
	<b>Total</b>	<b>55</b>	<b>81</b>	<b>101</b>	<b>55</b>
	<b>DC Rate</b>	<b>1.82</b>	<b>2.47</b>	<b>2.97</b>	<b>3.64</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	15	16	6	6
	<b>Elective Admissions</b>	63	65	111	63
	<b>Total</b>	<b>78</b>	<b>81</b>	<b>117</b>	<b>69</b>
	<b>DC Rate</b>	<b>19.23</b>	<b>19.75</b>	<b>5.13</b>	<b>8.7</b>

**Day Case Rates (Endoscopic resection/destruction of lesion of bladder M42) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	15	16	6	6
	Elective Admissions	63	65	111	63
	Total	<b>78</b>	<b>81</b>	<b>117</b>	<b>69</b>
	DC Rate	<b>19.23</b>	<b>19.75</b>	<b>5.13</b>	<b>8.7</b>
BELFAST CITY HOSPITAL	Daycases	1	1	3	1
	Elective Admissions	199	215	209	188
	Total	<b>200</b>	<b>216</b>	<b>212</b>	<b>189</b>
	DC Rate	<b>0.5</b>	<b>0.46</b>	<b>1.42</b>	<b>0.53</b>
CAUSEWAY HOSPITAL	Daycases	8	3	7	2
	Elective Admissions	57	61	138	99
	Total	<b>65</b>	<b>64</b>	<b>145</b>	<b>101</b>
	DC Rate	<b>12.31</b>	<b>4.69</b>	<b>4.83</b>	<b>1.98</b>
CRAIGAVON AREA HOSPITAL	Daycases	1	2	0	2
	Elective Admissions	54	79	98	53
	Total	<b>55</b>	<b>81</b>	<b>98</b>	<b>55</b>
	DC Rate	<b>1.82</b>	<b>2.47</b>	<b>0</b>	<b>3.64</b>
DOWNE HOSPITAL	Daycases			13	9
	Elective Admissions			0	0
	Total			<b>13</b>	<b>9</b>
	DC Rate			<b>100</b>	<b>100</b>
MATER HOSPITAL HSS TRUST	Daycases	0	1	2	0
	Elective Admissions	88	118	102	86
	Total	<b>88</b>	<b>119</b>	<b>104</b>	<b>86</b>
	DC Rate	<b>0</b>	<b>0.84</b>	<b>1.92</b>	<b>0</b>
NEWTOWNARDS HOSPITAL	Daycases	3	6	12	15
	Elective Admissions	0	0	0	0
	Total	<b>3</b>	<b>6</b>	<b>12</b>	<b>15</b>
	DC Rate	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
SOUTH TYRONE HOSPITAL	Daycases			3	
	Elective Admissions			0	
	Total			<b>3</b>	
	DC Rate			<b>100</b>	
ULSTER HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	113	140	158	110
	Total	<b>113</b>	<b>140</b>	<b>158</b>	<b>110</b>
	DC Rate	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**Day Case Rates (Endoscopic resection of prostate M65.1, 65.2, 65.3, 65.8) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	1	4	0	7
<b>Elective Admissions</b>	498	463	486	426
<b>Total</b>	<b>499</b>	<b>467</b>	<b>486</b>	<b>433</b>
<b>Daycase Rate</b>	<b>0.2</b>	<b>0.9</b>	<b>0.0</b>	<b>1.6</b>

**Day Case Rates (Endoscopic resection of prostate M65.1, 65.2, 65.3, 65.8) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	1	0	0	0
	<b>Elective Admissions</b>	199	162	134	132
	<b>Total</b>	<b>200</b>	<b>162</b>	<b>134</b>	<b>132</b>
	<b>DC Rate</b>	<b>0.5</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	0	1	0	7
	<b>Elective Admissions</b>	77	62	74	78
	<b>Total</b>	<b>77</b>	<b>63</b>	<b>74</b>	<b>85</b>
	<b>DC Rate</b>	<b>0</b>	<b>1.59</b>	<b>0</b>	<b>8.24</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	0	1	0	0
	<b>Elective Admissions</b>	73	86	94	98
	<b>Total</b>	<b>73</b>	<b>87</b>	<b>94</b>	<b>98</b>
	<b>DC Rate</b>	<b>0</b>	<b>1.15</b>	<b>0</b>	<b>0</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	0	2	0	0
	<b>Elective Admissions</b>	99	96	134	79
	<b>Total</b>	<b>99</b>	<b>98</b>	<b>134</b>	<b>79</b>
	<b>DC Rate</b>	<b>0</b>	<b>2.04</b>	<b>0</b>	<b>0</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	0	0	0	0
	<b>Elective Admissions</b>	50	57	50	39
	<b>Total</b>	<b>50</b>	<b>57</b>	<b>50</b>	<b>39</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**Day Case Rates (Endoscopic resection of prostate M65.1, 65.2, 65.3, 65.8) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	50	57	50	39
	Total	<b>50</b>	<b>57</b>	<b>50</b>	<b>39</b>
	DC Rate	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
BELFAST CITY HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	160	122	86	67
	Total	<b>160</b>	<b>122</b>	<b>86</b>	<b>67</b>
	DC Rate	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
CAUSEWAY HOSPITAL	Daycases	0	1	0	7
	Elective Admissions	77	62	74	78
	Total	<b>77</b>	<b>63</b>	<b>74</b>	<b>85</b>
	DC Rate	<b>0</b>	<b>1.59</b>	<b>0</b>	<b>8.24</b>
CRAIGAVON AREA HOSPITAL	Daycases	0	2	0	0
	Elective Admissions	99	96	134	78
	Total	<b>99</b>	<b>98</b>	<b>134</b>	<b>78</b>
	DC Rate	<b>0</b>	<b>2.04</b>	<b>0</b>	<b>0</b>
DAISY HILL HOSPITAL	Daycases				0
	Elective Admissions				1
	Total				<b>1</b>
	DC Rate				<b>0</b>
MATER HOSPITAL HSS TRUST	Daycases	1	0	0	0
	Elective Admissions	39	40	48	65
	Total	<b>40</b>	<b>40</b>	<b>48</b>	<b>65</b>
	DC Rate	<b>2.5</b>	<b>0</b>	<b>0</b>	<b>0</b>
NEWTOWNARDS HOSPITAL	Daycases		1		
	Elective Admissions		0		
	Total		<b>1</b>		
	DC Rate		<b>100</b>		
ULSTER HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	73	86	94	98
	Total	<b>73</b>	<b>86</b>	<b>94</b>	<b>98</b>
	DC Rate	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



Day Case Rates (Endoscopic retrograde pyelography M30.1) Apr06 to Feb10

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Day Cases	18	17	11	7
Elective Admissions	40	34	50	28
Total	58	51	61	35
Daycase Rate	31.0	33.3	18.0	20.0

Day Case Rates (Endoscopic retrograde pyelography M30.1) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	17	14	9	6
	Elective Admissions	8	12	9	8
	Total	25	26	18	14
	DC Rate	68	53.85	50	42.86
Northern Health and Social Care Trust	Daycases	0	0	0	0
	Elective Admissions	8	7	10	3
	Total	8	7	10	3
	DC Rate	0	0	0	0
South Eastern Health and Social Care Trust	Daycases		1		0
	Elective Admissions		0		0
	Total		1		0
	DC Rate		100		#DIV/0
Southern Health and Social Care Trust	Daycases	0	0	1	0
	Elective Admissions	12	8	18	13
	Total	12	8	19	13
	DC Rate	0	0	5.26	0
Western Health and Social Care Trust	Daycases	1	2	1	1
	Elective Admissions	12	7	13	4
	Total	13	9	14	5
	DC Rate	7.69	22.22	7.14	20

**Day Case Rates (Endoscopic retrograde pyelography M30.1) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>ALTNAGELVIN HOSPITAL</b>	<b>Daycases</b>	1	2	1	1
	<b>Elective Admissions</b>	12	7	13	4
	<b>Total</b>	<b>13</b>	<b>9</b>	<b>14</b>	<b>5</b>
	<b>DC Rate</b>	<b>7.69</b>	<b>22.22</b>	<b>7.14</b>	<b>20</b>
<b>BELFAST CITY HOSPITAL</b>	<b>Daycases</b>	17	14	9	6
	<b>Elective Admissions</b>	8	12	9	8
	<b>Total</b>	<b>25</b>	<b>26</b>	<b>18</b>	<b>14</b>
	<b>DC Rate</b>	<b>68</b>	<b>53.85</b>	<b>50</b>	<b>42.86</b>
<b>CAUSEWAY HOSPITAL</b>	<b>Daycases</b>	0	0	0	0
	<b>Elective Admissions</b>	8	7	10	3
	<b>Total</b>	<b>8</b>	<b>7</b>	<b>10</b>	<b>3</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>CRAIGAVON AREA HOSPITAL</b>	<b>Daycases</b>	0	0	0	0
	<b>Elective Admissions</b>	12	8	18	13
	<b>Total</b>	<b>12</b>	<b>8</b>	<b>18</b>	<b>13</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>NEWTOWNARDS HOSPITAL</b>	<b>Daycases</b>		1		
	<b>Elective Admissions</b>		0		
	<b>Total</b>		<b>1</b>		
	<b>DC Rate</b>		<b>100</b>		
<b>SOUTH TYRONE HOSPITAL</b>	<b>Daycases</b>			1	
	<b>Elective Admissions</b>			0	
	<b>Total</b>			<b>1</b>	
	<b>DC Rate</b>			<b>100</b>	
<b>ULSTER HOSPITAL</b>	<b>Daycases</b>				0
	<b>Elective Admissions</b>				0
	<b>Total</b>				<b>0</b>
	<b>DC Rate</b>				<b>#DIV/0</b>

**Day Case Rates (Excision of epididymal lesion N15) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	21	30	21	25
<b>Elective Admissions</b>	17	28	16	10
<b>Total</b>	<b>38</b>	<b>58</b>	<b>37</b>	<b>35</b>
<b>Daycase Rate</b>	<b>55.3</b>	<b>51.7</b>	<b>56.8</b>	<b>71.4</b>

Day Case Rates (Excision of epididymal lesion N15) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	2	8	2	3
	<b>Elective Admissions</b>	10	13	6	5
	<b>Total</b>	<b>12</b>	<b>21</b>	<b>8</b>	<b>8</b>
	<b>DC Rate</b>	<b>16.67</b>	<b>38.1</b>	<b>25</b>	<b>37.5</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>		2	0	2
	<b>Elective Admissions</b>		2	3	4
	<b>Total</b>		<b>4</b>	<b>3</b>	<b>6</b>
	<b>DC Rate</b>		<b>50</b>	<b>0</b>	<b>33.33</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	16	15	15	10
	<b>Elective Admissions</b>	1	3	3	0
	<b>Total</b>	<b>17</b>	<b>18</b>	<b>18</b>	<b>10</b>
	<b>DC Rate</b>	<b>94.12</b>	<b>83.33</b>	<b>83.33</b>	<b>100</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	2	4	3	8
	<b>Elective Admissions</b>	4	6	1	1
	<b>Total</b>	<b>6</b>	<b>10</b>	<b>4</b>	<b>9</b>
	<b>DC Rate</b>	<b>33.33</b>	<b>40</b>	<b>75</b>	<b>88.89</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	1	1	1	2
	<b>Elective Admissions</b>	2	4	3	0
	<b>Total</b>	<b>3</b>	<b>5</b>	<b>4</b>	<b>2</b>
	<b>DC Rate</b>	<b>33.33</b>	<b>20</b>	<b>25</b>	<b>100</b>

Day Case Rates (Excision of epididymal lesion N15) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	1	1	1	2
	Elective Admissions	2	4	3	0
	Total	3	5	4	2
	DC Rate	33.33	20	25	100
BELFAST CITY HOSPITAL	Daycases	2	8	1	1
	Elective Admissions	6	9	0	0
	Total	8	17	1	1
	DC Rate	25	47.06	100	100
CAUSEWAY HOSPITAL	Daycases		2	0	2
	Elective Admissions		2	3	4
	Total		4	3	6
	DC Rate		50	0	33.33
CRAIGAVON AREA HOSPITAL	Daycases	2	4	2	6
	Elective Admissions	4	6	1	1
	Total	6	10	3	7
	DC Rate	33.33	40	66.67	85.71
DOWNE HOSPITAL	Daycases			1	
	Elective Admissions			0	
	Total			1	
	DC Rate			100	
LAGAN VALLEY HOSPITAL	Daycases	2	1	2	3
	Elective Admissions	0	0	0	0
	Total	2	1	2	3
	DC Rate	100	100	100	100
MATER HOSPITAL HSS TRUST	Daycases	0	0	0	1
	Elective Admissions	4	4	6	5
	Total	4	4	6	6
	DC Rate	0	0	0	16.67
NEWTOWNARDS HOSPITAL	Daycases	14	14	12	7
	Elective Admissions	0	0	0	0
	Total	14	14	12	7
	DC Rate	100	100	100	100
ROYAL VICTORIA HOSPITAL	Daycases			1	1
	Elective Admissions			0	0
	Total			1	1
	DC Rate			100	100
	Daycases			1	2

Day Case Rates (Excision of epididymal lesion N15) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
SOUTH TYRONE HOSPITAL	Elective Admissions			0	0
	Total			1	2
	DC Rate			100	100
ULSTER HOSPITAL	Daycases	0	0	0	
	Elective Admissions	1	3	3	
	Total	1	3	3	
	DC Rate	0	0	0	

**Day Case Rates (Excision of lesion of penis N27) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	7	9	11	8
<b>Elective Admissions</b>	14	10	12	7
<b>Total</b>	<b>21</b>	<b>19</b>	<b>23</b>	<b>15</b>
<b>Daycase Rate</b>	<b>33.3</b>	<b>47.4</b>	<b>47.8</b>	<b>53.3</b>



Day Case Rates (Excision of lesion of penis N27) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	1	0	2	2
	<b>Elective Admissions</b>	4	3	5	2
	<b>Total</b>	<b>5</b>	<b>3</b>	<b>7</b>	<b>4</b>
	<b>DC Rate</b>	<b>20</b>	<b>0</b>	<b>28.57</b>	<b>50</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	0	0	0	
	<b>Elective Admissions</b>	4	1	4	
	<b>Total</b>	<b>4</b>	<b>1</b>	<b>4</b>	
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	5	8	6	4
	<b>Elective Admissions</b>	1	1	1	2
	<b>Total</b>	<b>6</b>	<b>9</b>	<b>7</b>	<b>6</b>
	<b>DC Rate</b>	<b>83.33</b>	<b>88.89</b>	<b>85.71</b>	<b>66.67</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	1	1	3	1
	<b>Elective Admissions</b>	2	2	1	0
	<b>Total</b>	<b>3</b>	<b>3</b>	<b>4</b>	<b>1</b>
	<b>DC Rate</b>	<b>33.33</b>	<b>33.33</b>	<b>75</b>	<b>100</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	0	0	0	1
	<b>Elective Admissions</b>	3	3	1	3
	<b>Total</b>	<b>3</b>	<b>3</b>	<b>1</b>	<b>4</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>25</b>

Day Case Rates (Excision of lesion of penis N27) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	0	0	0	1
	Elective Admissions	3	3	1	3
	Total	3	3	1	4
	DC Rate	0	0	0	25
BELFAST CITY HOSPITAL	Daycases	1	0	2	2
	Elective Admissions	3	3	2	1
	Total	4	3	4	3
	DC Rate	25	0	50	66.67
CAUSEWAY HOSPITAL	Daycases	0	0	0	
	Elective Admissions	4	1	4	
	Total	4	1	4	
	DC Rate	0	0	0	
CRAIGAVON AREA HOSPITAL	Daycases	1	1	2	1
	Elective Admissions	2	2	1	0
	Total	3	3	3	1
	DC Rate	33.33	33.33	66.67	100
DOWNE HOSPITAL	Daycases			1	
	Elective Admissions			0	
	Total			1	
	DC Rate			100	
LAGAN VALLEY HOSPITAL	Daycases	1	3	1	
	Elective Admissions	0	0	0	
	Total	1	3	1	
	DC Rate	100	100	100	
MATER HOSPITAL HSS TRUST	Daycases	0		0	0
	Elective Admissions	1		3	1
	Total	1		3	1
	DC Rate	0		0	0
NEWTOWNARDS HOSPITAL	Daycases	4	5	4	4
	Elective Admissions	0	0	0	0
	Total	4	5	4	4
	DC Rate	100	100	100	100
SOUTH TYRONE HOSPITAL	Daycases			1	
	Elective Admissions			0	
	Total			1	
	DC Rate			100	
HILTON HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	1	1	1	2

**Day Case Rates (Excision of lesion of penis N27) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ULSTER HOSPITAL	Total	1	1	1	2
	DC Rate	0	0	0	0

Day Case Rates (Excision of lesion of testis N06.4, N07) Apr06 to Feb10

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Day Cases	1	1	2	0
Elective Admissions	0	1	0	2
Total	1	2	2	2
Daycase Rate	100.0	50.0	100.0	0.0

Day Case Rates (Excision of lesion of testis N06.4, N07) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	1	0		0
	<b>Elective Admissions</b>	0	1		1
	<b>Total</b>	1	1		1
	<b>DC Rate</b>	100	0		0
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>		1	0	0
	<b>Elective Admissions</b>		0	0	0
	<b>Total</b>		1	0	0
	<b>DC Rate</b>		100	#DIV/0	#DIV/0
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>			2	0
	<b>Elective Admissions</b>			0	0
	<b>Total</b>			2	0
	<b>DC Rate</b>			100	#DIV/0
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>				0
	<b>Elective Admissions</b>				1
	<b>Total</b>				1
	<b>DC Rate</b>				0

Day Case Rates (Excision of lesion of testis N06.4, N07) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases				0
	Elective Admissions				1
	Total				1
	DC Rate				0
BELFAST CITY HOSPITAL	Daycases	0	0		0
	Elective Admissions	0	0		0
	Total	0	0		0
	DC Rate	#DIV/0	#DIV/0		#DIV/0
CRAIGAVON AREA HOSPITAL	Daycases			2	0
	Elective Admissions			0	0
	Total			2	0
	DC Rate			100	#DIV/0
MATER HOSPITAL HSS TRUST	Daycases		0		0
	Elective Admissions		1		1
	Total		1		1
	DC Rate		0		0
NEWTOWNARDS HOSPITAL	Daycases		1		
	Elective Admissions		0		
	Total		1		
	DC Rate		100		
ROYAL VICTORIA HOSPITAL	Daycases	1			
	Elective Admissions	0			
	Total	1			
	DC Rate	100			
ULSTER HOSPITAL	Daycases		0	0	0
	Elective Admissions		0	0	0
	Total		0	0	0
	DC Rate		#DIV/0	#DIV/0	#DIV/0

**Day Case Rates (Frenuloplasty of penis N28.4) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	30	23	26	32
<b>Elective Admissions</b>	4	2	3	3
<b>Total</b>	<b>34</b>	<b>25</b>	<b>29</b>	<b>35</b>
<b>Daycase Rate</b>	<b>88.2</b>	<b>92.0</b>	<b>89.7</b>	<b>91.4</b>

Day Case Rates (Frenuloplasty of penis N28.4) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	10	12	12	12
	Elective Admissions	4	1	0	3
	Total	14	13	12	15
	DC Rate	71.43	92.31	100	80
Northern Health and Social Care Trust	Daycases		1	0	
	Elective Admissions		0	1	
	Total		1	1	
	DC Rate		100	0	
South Eastern Health and Social Care Trust	Daycases	15	8	9	14
	Elective Admissions	0	1	0	0
	Total	15	9	9	14
	DC Rate	100	88.89	100	100
Southern Health and Social Care Trust	Daycases	3	2	2	5
	Elective Admissions	0	0	1	0
	Total	3	2	3	5
	DC Rate	100	100	66.67	100
Western Health and Social Care Trust	Daycases	2		3	1
	Elective Admissions	0		1	0
	Total	2		4	1
	DC Rate	100		75	100



Day Case Rates (Frenuloplasty of penis N28.4) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	2		3	1
	Elective Admissions	0		1	0
	Total	2		4	1
	DC Rate	100		75	100
BELFAST CITY HOSPITAL	Daycases	6	8	8	9
	Elective Admissions	3	1	0	1
	Total	9	9	8	10
	DC Rate	66.67	88.89	100	90
CAUSEWAY HOSPITAL	Daycases		1	0	
	Elective Admissions		0	1	
	Total		1	1	
	DC Rate		100	0	
CRAIGAVON AREA HOSPITAL	Daycases	3	2	2	4
	Elective Admissions	0	0	1	0
	Total	3	2	3	4
	DC Rate	100	100	66.67	100
DOWNE HOSPITAL	Daycases				1
	Elective Admissions				0
	Total				1
	DC Rate				100
LAGAN VALLEY HOSPITAL	Daycases	4	2	3	
	Elective Admissions	0	0	0	
	Total	4	2	3	
	DC Rate	100	100	100	
MATER HOSPITAL HSS TRUST	Daycases	0	1		0
	Elective Admissions	1	0		2
	Total	1	1		2
	DC Rate	0	100		0
NEWTOWNARDS HOSPITAL	Daycases	11	6	6	13
	Elective Admissions	0	0	0	0
	Total	11	6	6	13
	DC Rate	100	100	100	100
ROYAL VICTORIA HOSPITAL	Daycases	4	3	4	3
	Elective Admissions	0	0	0	0
	Total	4	3	4	3
	DC Rate	100	100	100	100
SOUTH TYRONE	Daycases				1
	Elective Admissions				0

Day Case Rates (Frenuloplasty of penis N28.4) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
HOSPITAL	Total				1
	DC Rate				100
ULSTER HOSPITAL	Daycases		0		
	Elective Admissions		1		
	Total		1		
	DC Rate		0		

**Day Case Rates (Laparoscopic Nephrectomy) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	0	0	0	0
<b>Elective Admissions</b>	61	115	150	103
<b>Total</b>	<b>61</b>	<b>115</b>	<b>150</b>	<b>103</b>
<b>Daycase Rate</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

Day Case Rates (Laparoscopic Nephrectomy) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	0	0	0	0
	Elective Admissions	51	95	107	62
	Total	51	95	107	62
	DC Rate	0	0	0	0
Northern Health and Social Care Trust	Daycases	0	0	0	0
	Elective Admissions	3	6	5	3
	Total	3	6	5	3
	DC Rate	0	0	0	0
South Eastern Health and Social Care Trust	Daycases			0	0
	Elective Admissions			4	12
	Total			4	12
	DC Rate			0	0
Southern Health and Social Care Trust	Daycases		0	0	0
	Elective Admissions		4	17	6
	Total		4	17	6
	DC Rate		0	0	0
Western Health and Social Care Trust	Daycases	0	0	0	0
	Elective Admissions	7	10	17	20
	Total	7	10	17	20
	DC Rate	0	0	0	0

Day Case Rates (Laparoscopic Nephrectomy) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	7	10	17	20
	Total	7	10	17	20
	DC Rate	0	0	0	0
BELFAST CITY HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	51	95	107	62
	Total	51	95	107	62
	DC Rate	0	0	0	0
CAUSEWAY HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	3	6	5	3
	Total	3	6	5	3
	DC Rate	0	0	0	0
CRAIGAVON AREA HOSPITAL	Daycases		0	0	0
	Elective Admissions		4	17	6
	Total		4	17	6
	DC Rate		0	0	0
ULSTER HOSPITAL	Daycases			0	0
	Elective Admissions			4	12
	Total			4	12
	DC Rate			0	0

**Day Case Rates (Laparoscopic Pyeloplasty) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	0	0	0	0
<b>Elective Admissions</b>	1	3	1	6
<b>Total</b>	<b>1</b>	<b>3</b>	<b>1</b>	<b>6</b>
<b>Daycase Rate</b>	<i>0.0</i>	<i>0.0</i>	<i>0.0</i>	<i>0.0</i>

**Day Case Rates (Laparoscopic Pyeloplasty) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	0	0	0	0
	<b>Elective Admissions</b>	1	2	1	6
	<b>Total</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>6</b>
	<b>DC Rate</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>		0		
	<b>Elective Admissions</b>		1		
	<b>Total</b>		<b>1</b>		
	<b>DC Rate</b>		<b>0</b>		

Day Case Rates (Laparoscopic Pyeloplasty) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
BELFAST CITY HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	1	2	1	6
	Total	1	2	1	6
	DC Rate	0	0	0	0
CRAIGAVON AREA HOSPITAL	Daycases		0		
	Elective Admissions		1		
	Total		1		
	DC Rate		0		



Day Case Rates (Laparoscopic Radical Prostatectomy) Apr06 to Feb10

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Day Cases	0	0	0	0
Elective Admissions	4	4	24	19
Total	4	4	24	19
Daycase Rate	0.0	0.0	0.0	0.0

Day Case Rates (Laparoscopic Radical Prostatectomy) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	0	0	0	0
	Elective Admissions	4	4	24	19
	Total	4	4	24	19
	DC Rate	0	0	0	0

Day Case Rates (Laparoscopic Radical Prostatectomy) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
BELFAST CITY HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	4	4	24	19
	Total	4	4	24	19
	DC Rate	0	0	0	0

**Day Case Rates (Operation on Varicocele N19) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	26	7	4	7
<b>Elective Admissions</b>	19	8	14	8
<b>Total</b>	<b>45</b>	<b>15</b>	<b>18</b>	<b>15</b>
<b>Daycase Rate</b>	<b>57.8</b>	<b>46.7</b>	<b>22.2</b>	<b>46.7</b>

Day Case Rates (Operation on Varicocele N19) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	22	0	0	1
	<b>Elective Admissions</b>	13	3	11	4
	<b>Total</b>	35	3	11	5
	<b>DC Rate</b>	62.86	0	0	20
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>			0	
	<b>Elective Admissions</b>			1	
	<b>Total</b>			1	
	<b>DC Rate</b>			0	
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>		1	1	
	<b>Elective Admissions</b>		2	1	
	<b>Total</b>		3	2	
	<b>DC Rate</b>		33.33	50	
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	4	3	3	6
	<b>Elective Admissions</b>	2	1	1	4
	<b>Total</b>	6	4	4	10
	<b>DC Rate</b>	66.67	75	75	60
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	0	3		
	<b>Elective Admissions</b>	4	2		
	<b>Total</b>	4	5		
	<b>DC Rate</b>	0	60		

Day Case Rates (Operation on Varicocele N19) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	0	3		
	Elective Admissions	4	2		
	Total	4	5		
	DC Rate	0	60		
BELFAST CITY HOSPITAL	Daycases	22	0	0	1
	Elective Admissions	13	3	10	1
	Total	35	3	10	2
	DC Rate	62.86	0	0	50
CAUSEWAY HOSPITAL	Daycases			0	
	Elective Admissions			1	
	Total			1	
	DC Rate			0	
CRAIGAVON AREA HOSPITAL	Daycases	4	2	3	6
	Elective Admissions	2	1	1	4
	Total	6	3	4	10
	DC Rate	66.67	66.67	75	60
MATER HOSPITAL HSS TRUST	Daycases			0	0
	Elective Admissions			1	3
	Total			1	3
	DC Rate			0	0
NEWTOWNARDS HOSPITAL	Daycases		1	1	
	Elective Admissions		0	1	
	Total		1	2	
	DC Rate		100	50	
SOUTH TYRONE HOSPITAL	Daycases		1		
	Elective Admissions		0		
	Total		1		
	DC Rate		100		
ULSTER HOSPITAL	Daycases		0		
	Elective Admissions		2		
	Total		2		
	DC Rate		0		

**Day Case Rates (Operations on Foreskin N30) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	187	225	294	218
<b>Elective Admissions</b>	54	93	104	119
<b>Total</b>	<b>241</b>	<b>318</b>	<b>398</b>	<b>337</b>
<b>Daycase Rate</b>	<b>77.6</b>	<b>70.8</b>	<b>73.9</b>	<b>64.7</b>

Day Case Rates (Operations on Foreskin N30) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	68	88	113	58
	Elective Admissions	26	56	54	62
	Total	<b>94</b>	<b>144</b>	<b>167</b>	<b>120</b>
	DC Rate	<b>72.34</b>	<b>61.11</b>	<b>67.66</b>	<b>48.33</b>
Northern Health and Social Care Trust	Daycases	3	3	3	5
	Elective Admissions	9	11	17	17
	Total	<b>12</b>	<b>14</b>	<b>20</b>	<b>22</b>
	DC Rate	<b>25</b>	<b>21.43</b>	<b>15</b>	<b>22.73</b>
South Eastern Health and Social Care Trust	Daycases	84	90	126	111
	Elective Admissions	7	6	6	7
	Total	<b>91</b>	<b>96</b>	<b>132</b>	<b>118</b>
	DC Rate	<b>92.31</b>	<b>93.75</b>	<b>95.45</b>	<b>94.07</b>
Southern Health and Social Care Trust	Daycases	19	28	42	34
	Elective Admissions	6	14	20	24
	Total	<b>25</b>	<b>42</b>	<b>62</b>	<b>58</b>
	DC Rate	<b>76</b>	<b>66.67</b>	<b>67.74</b>	<b>58.62</b>
Western Health and Social Care Trust	Daycases	13	16	10	10
	Elective Admissions	6	6	7	9
	Total	<b>19</b>	<b>22</b>	<b>17</b>	<b>19</b>
	DC Rate	<b>68.42</b>	<b>72.73</b>	<b>58.82</b>	<b>52.63</b>



Day Case Rates (Operations on Foreskin N30) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	13	16	10	10
	Elective Admissions	6	6	7	9
	Total	19	22	17	19
	DC Rate	68.42	72.73	58.82	52.63
BELFAST CITY HOSPITAL	Daycases	58	68	84	41
	Elective Admissions	13	19	17	5
	Total	71	87	101	46
	DC Rate	81.69	78.16	83.17	89.13
CAUSEWAY HOSPITAL	Daycases	3	3	3	5
	Elective Admissions	9	11	17	17
	Total	12	14	20	22
	DC Rate	25	21.43	15	22.73
CRAIGAVON AREA HOSPITAL	Daycases	14	18	31	26
	Elective Admissions	6	14	20	24
	Total	20	32	51	50
	DC Rate	70	56.25	60.78	52
DOWNE HOSPITAL	Daycases			16	11
	Elective Admissions			0	0
	Total			16	11
	DC Rate			100	100
LAGAN VALLEY HOSPITAL	Daycases	16	18	33	23
	Elective Admissions	0	0	0	1
	Total	16	18	33	24
	DC Rate	100	100	100	95.83
MATER HOSPITAL HSS TRUST	Daycases	1	2	5	0
	Elective Admissions	13	37	37	57
	Total	14	39	42	57
	DC Rate	7.14	5.13	11.9	0
NEWTOWNARDS HOSPITAL	Daycases	68	71	77	77
	Elective Admissions	2	0	0	0
	Total	70	71	77	77
	DC Rate	97.14	100	100	100
ROYAL VICTORIA HOSPITAL	Daycases	9	18	24	17
	Elective Admissions	0	0	0	0
	Total	9	18	24	17
	DC Rate	100	100	100	100
SOUTH TYRONE	Daycases	5	10	11	8
	Elective Admissions	0	0	0	0

Day Case Rates (Operations on Foreskin N30) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
HOSPITAL	Total	5	10	11	8
	DC Rate	100	100	100	100
ULSTER HOSPITAL	Daycases	0	1	0	0
	Elective Admissions	5	6	6	6
	Total	5	7	6	6
	DC Rate	0	14.29	0	0

**Day Case Rates (Operations on urethral orifice M81) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	11	9	22	14
<b>Elective Admissions</b>	13	13	15	12
<b>Total</b>	<b>24</b>	<b>22</b>	<b>37</b>	<b>26</b>
<b>Daycase Rate</b>	<b>45.8</b>	<b>40.9</b>	<b>59.5</b>	<b>53.8</b>

Day Case Rates (Operations on urethral orifice M81) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	2	1	7	4
	Elective Admissions	8	5	13	8
	Total	10	6	20	12
	DC Rate	20	16.67	35	33.33
Northern Health and Social Care Trust	Daycases	0	0	2	1
	Elective Admissions	1	4	2	0
	Total	1	4	4	1
	DC Rate	0	0	50	100
South Eastern Health and Social Care Trust	Daycases	6	4	8	4
	Elective Admissions	1	1	0	1
	Total	7	5	8	5
	DC Rate	85.71	80	100	80
Southern Health and Social Care Trust	Daycases	2	3	4	2
	Elective Admissions	1	2	0	2
	Total	3	5	4	4
	DC Rate	66.67	60	100	50
Western Health and Social Care Trust	Daycases	1	1	1	3
	Elective Admissions	2	1	0	1
	Total	3	2	1	4
	DC Rate	33.33	50	100	75

Day Case Rates (Operations on urethral orifice M81) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	1	1	1	3
	Elective Admissions	2	1	0	1
	Total	3	2	1	4
	DC Rate	33.33	50	100	75
BELFAST CITY HOSPITAL	Daycases	2	1	7	4
	Elective Admissions	3	4	2	4
	Total	5	5	9	8
	DC Rate	40	20	77.78	50
CAUSEWAY HOSPITAL	Daycases	0	0	2	1
	Elective Admissions	1	4	2	0
	Total	1	4	4	1
	DC Rate	0	0	50	100
CRAIGAVON AREA HOSPITAL	Daycases	2	2	3	2
	Elective Admissions	1	2	0	2
	Total	3	4	3	4
	DC Rate	66.67	50	100	50
DOWNE HOSPITAL	Daycases			2	2
	Elective Admissions			0	0
	Total			2	2
	DC Rate			100	100
LAGAN VALLEY HOSPITAL	Daycases	2	2		
	Elective Admissions	0	0		
	Total	2	2		
	DC Rate	100	100		
MATER HOSPITAL HSS TRUST	Daycases	0	0	0	0
	Elective Admissions	5	1	11	4
	Total	5	1	11	4
	DC Rate	0	0	0	0
NEWTOWNARDS HOSPITAL	Daycases	4	2	6	2
	Elective Admissions	0	0	0	0
	Total	4	2	6	2
	DC Rate	100	100	100	100
SOUTH TYRONE HOSPITAL	Daycases		1	1	
	Elective Admissions		0	0	
	Total		1	1	
	DC Rate		100	100	
HILLYARD HOSPITAL	Daycases	0	0		0
	Elective Admissions	1	1		1

Day Case Rates (Operations on urethral orifice M81) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ULSTER HOSPITAL	Total	1	1		1
	DC Rate	0	0		0

**Day Case Rates (Optical Urethrotomy M76.3) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	10	13	12	11
<b>Elective Admissions</b>	84	120	99	89
<b>Total</b>	<b>94</b>	<b>133</b>	<b>111</b>	<b>100</b>
<b>Daycase Rate</b>	<b>10.6</b>	<b>9.8</b>	<b>10.8</b>	<b>11.0</b>

Day Case Rates (Optical Urethrotomy M76.3) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	6	9	5	4
	Elective Admissions	44	49	28	28
	Total	<b>50</b>	<b>58</b>	<b>33</b>	<b>32</b>
	DC Rate	<b>12</b>	<b>15.52</b>	<b>15.15</b>	<b>12.5</b>
Northern Health and Social Care Trust	Daycases	0	0	0	0
	Elective Admissions	12	23	22	13
	Total	<b>12</b>	<b>23</b>	<b>22</b>	<b>13</b>
	DC Rate	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
South Eastern Health and Social Care Trust	Daycases	0	2	1	4
	Elective Admissions	13	21	17	11
	Total	<b>13</b>	<b>23</b>	<b>18</b>	<b>15</b>
	DC Rate	<b>0</b>	<b>8.7</b>	<b>5.56</b>	<b>26.67</b>
Southern Health and Social Care Trust	Daycases	4	2	6	2
	Elective Admissions	4	10	21	22
	Total	<b>8</b>	<b>12</b>	<b>27</b>	<b>24</b>
	DC Rate	<b>50</b>	<b>16.67</b>	<b>22.22</b>	<b>8.33</b>
Western Health and Social Care Trust	Daycases	0	0	0	1
	Elective Admissions	11	17	11	15
	Total	<b>11</b>	<b>17</b>	<b>11</b>	<b>16</b>
	DC Rate	<b>0</b>	<b>0</b>	<b>0</b>	<b>6.25</b>



Day Case Rates (Optical Urethrotomy M76.3) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	0	0	0	1
	Elective Admissions	11	17	11	15
	Total	11	17	11	16
	DC Rate	0	0	0	6.25
BELFAST CITY HOSPITAL	Daycases	5	8	5	4
	Elective Admissions	33	37	23	13
	Total	38	45	28	17
	DC Rate	13.16	17.78	17.86	23.53
CAUSEWAY HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	12	23	22	13
	Total	12	23	22	13
	DC Rate	0	0	0	0
CRAIGAVON AREA HOSPITAL	Daycases	4	2	6	2
	Elective Admissions	4	10	21	22
	Total	8	12	27	24
	DC Rate	50	16.67	22.22	8.33
DOWNE HOSPITAL	Daycases				2
	Elective Admissions				0
	Total				2
	DC Rate				100
MATER HOSPITAL HSS TRUST	Daycases	1	0	0	0
	Elective Admissions	11	12	5	15
	Total	12	12	5	15
	DC Rate	8.33	0	0	0
NEWTOWNARDS HOSPITAL	Daycases		2	1	2
	Elective Admissions		1	0	0
	Total		3	1	2
	DC Rate		66.67	100	100
ROYAL VICTORIA HOSPITAL	Daycases		1		
	Elective Admissions		0		
	Total		1		
	DC Rate		100		
ULSTER HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	13	20	17	11
	Total	13	20	17	11
	DC Rate	0	0	0	0

Day Case Rates (Orchidectomy N05, N06.1, 6.2,6.3,6.8,6.9) Apr06 to Feb10

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Day Cases	5	7	13	10
Elective Admissions	56	50	69	58
Total	61	57	82	68
Daycase Rate	8.2	12.3	15.9	14.7

Day Case Rates (Orchidectomy N05, N06.1, 6.2,6.3,6.8,6.9) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	0	0	3	3
	Elective Admissions	32	27	20	26
	Total	32	27	23	29
	DC Rate	0	0	13.04	10.34
Northern Health and Social Care Trust	Daycases	0	0	0	0
	Elective Admissions	6	3	10	6
	Total	6	3	10	6
	DC Rate	0	0	0	0
South Eastern Health and Social Care Trust	Daycases	2	5	8	4
	Elective Admissions	7	7	7	10
	Total	9	12	15	14
	DC Rate	22.22	41.67	53.33	28.57
Southern Health and Social Care Trust	Daycases	3	2	2	3
	Elective Admissions	7	6	17	4
	Total	10	8	19	7
	DC Rate	30	25	10.53	42.86
Western Health and Social Care Trust	Daycases	0	0	0	0
	Elective Admissions	4	7	15	12
	Total	4	7	15	12
	DC Rate	0	0	0	0

Day Case Rates (Orchidectomy N05, N06.1, 6.2,6.3,6.8,6.9) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	4	7	15	12
	Total	4	7	15	12
	DC Rate	0	0	0	0
BELFAST CITY HOSPITAL	Daycases	0	0	2	3
	Elective Admissions	28	21	13	22
	Total	28	21	15	25
	DC Rate	0	0	13.33	12
CAUSEWAY HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	6	3	10	6
	Total	6	3	10	6
	DC Rate	0	0	0	0
CRAIGAVON AREA HOSPITAL	Daycases	3	1	1	3
	Elective Admissions	7	6	17	4
	Total	10	7	18	7
	DC Rate	30	14.29	5.56	42.86
DOWNE HOSPITAL	Daycases			3	
	Elective Admissions			0	
	Total			3	
	DC Rate			100	
LAGAN VALLEY HOSPITAL	Daycases	1	4	1	2
	Elective Admissions	1	0	0	0
	Total	2	4	1	2
	DC Rate	50	100	100	100
MATER HOSPITAL HSS TRUST	Daycases	0	0	0	0
	Elective Admissions	4	6	7	4
	Total	4	6	7	4
	DC Rate	0	0	0	0
NEWTOWNARDS HOSPITAL	Daycases	1	1	4	2
	Elective Admissions	0	0	0	0
	Total	1	1	4	2
	DC Rate	100	100	100	100
ROYAL VICTORIA HOSPITAL	Daycases			1	
	Elective Admissions			0	
	Total			1	
	DC Rate			100	
SOUTH TYRONE	Daycases		1	1	
	Elective Admissions		0	0	

Day Case Rates (Orchidectomy N05, N06.1, 6.2,6.3,6.8,6.9) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
HOSPITAL	Total		1	1	
	DC Rate		100	100	
ULSTER HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	6	7	7	10
	Total	6	7	7	10
	DC Rate	0	0	0	0

**Day Case Rates (Other Endoscopic procedures on ureter M27,28,29.1,29.4,29.8,29.9)**  
**Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	30	22	17	19
<b>Elective Admissions</b>	313	291	254	222
<b>Total</b>	<b>343</b>	<b>313</b>	<b>271</b>	<b>241</b>
<b>Daycase Rate</b>	<b>8.7</b>	<b>7.0</b>	<b>6.3</b>	<b>7.9</b>

**Day Case Rates (Other Endoscopic procedures on ureter M27,28,29.1,29.4,29.8,29.9)****Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	12	5	5	5
	<b>Elective Admissions</b>	104	124	117	91
	<b>Total</b>	<b>116</b>	<b>129</b>	<b>122</b>	<b>96</b>
	<b>DC Rate</b>	<b>10.34</b>	<b>3.88</b>	<b>4.1</b>	<b>5.21</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	3	3	0	3
	<b>Elective Admissions</b>	48	38	36	39
	<b>Total</b>	<b>51</b>	<b>41</b>	<b>36</b>	<b>42</b>
	<b>DC Rate</b>	<b>5.88</b>	<b>7.32</b>	<b>0</b>	<b>7.14</b>
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>		0	1	
	<b>Elective Admissions</b>		2	0	
	<b>Total</b>		<b>2</b>	<b>1</b>	
	<b>DC Rate</b>		<b>0</b>	<b>100</b>	
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	9	11	9	11
	<b>Elective Admissions</b>	104	83	67	55
	<b>Total</b>	<b>113</b>	<b>94</b>	<b>76</b>	<b>66</b>
	<b>DC Rate</b>	<b>7.96</b>	<b>11.7</b>	<b>11.84</b>	<b>16.67</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	6	3	2	0
	<b>Elective Admissions</b>	57	44	34	37
	<b>Total</b>	<b>63</b>	<b>47</b>	<b>36</b>	<b>37</b>
	<b>DC Rate</b>	<b>9.52</b>	<b>6.38</b>	<b>5.56</b>	<b>0</b>

**Day Case Rates (Other Endoscopic procedures on ureter M27,28,29.1,29.4,29.8,29.9)****Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>ALTNAGELVIN HOSPITAL</b>	<b>Daycases</b>	6	3	2	0
	<b>Elective Admissions</b>	57	44	34	37
	<b>Total</b>	<b>63</b>	<b>47</b>	<b>36</b>	<b>37</b>
	<b>DC Rate</b>	<b>9.52</b>	<b>6.38</b>	<b>5.56</b>	<b>0</b>
<b>BELFAST CITY HOSPITAL</b>	<b>Daycases</b>	12	5	4	5
	<b>Elective Admissions</b>	104	124	117	91
	<b>Total</b>	<b>116</b>	<b>129</b>	<b>121</b>	<b>96</b>
	<b>DC Rate</b>	<b>10.34</b>	<b>3.88</b>	<b>3.31</b>	<b>5.21</b>
<b>CAUSEWAY HOSPITAL</b>	<b>Daycases</b>	3	3	0	3
	<b>Elective Admissions</b>	48	38	36	39
	<b>Total</b>	<b>51</b>	<b>41</b>	<b>36</b>	<b>42</b>
	<b>DC Rate</b>	<b>5.88</b>	<b>7.32</b>	<b>0</b>	<b>7.14</b>
<b>CRAIGAVON AREA HOSPITAL</b>	<b>Daycases</b>	7	11	8	10
	<b>Elective Admissions</b>	104	82	67	55
	<b>Total</b>	<b>111</b>	<b>93</b>	<b>75</b>	<b>65</b>
	<b>DC Rate</b>	<b>6.31</b>	<b>11.83</b>	<b>10.67</b>	<b>15.38</b>
<b>NEWTOWNARDS HOSPITAL</b>	<b>Daycases</b>			1	
	<b>Elective Admissions</b>			0	
	<b>Total</b>			<b>1</b>	
	<b>DC Rate</b>			<b>100</b>	
<b>ROYAL VICTORIA HOSPITAL</b>	<b>Daycases</b>			1	
	<b>Elective Admissions</b>			0	
	<b>Total</b>			<b>1</b>	
	<b>DC Rate</b>			<b>100</b>	
<b>SOUTH TYRONE HOSPITAL</b>	<b>Daycases</b>	2	0	1	1
	<b>Elective Admissions</b>	0	1	0	0
	<b>Total</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>
	<b>DC Rate</b>	<b>100</b>	<b>0</b>	<b>100</b>	<b>100</b>
<b>ULSTER HOSPITAL</b>	<b>Daycases</b>		0		
	<b>Elective Admissions</b>		2		
	<b>Total</b>		<b>2</b>		
	<b>DC Rate</b>		<b>0</b>		



Day Case Rates (Removal of prosthesis from ureter M29.3) Apr06 to Feb10

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Day Cases	113	134	151	143
Elective Admissions	64	74	73	48
Total	177	208	224	191
Daycase Rate	63.8	64.4	67.4	74.9

Day Case Rates (Removal of prosthesis from ureter M29.3) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	47	64	66	71
	Elective Admissions	11	17	9	11
	Total	58	81	75	82
	DC Rate	81.03	79.01	88	86.59
Northern Health and Social Care Trust	Daycases	13	13	26	24
	Elective Admissions	32	25	27	16
	Total	45	38	53	40
	DC Rate	28.89	34.21	49.06	60
South Eastern Health and Social Care Trust	Daycases	0	1	0	1
	Elective Admissions	2	2	1	0
	Total	2	3	1	1
	DC Rate	0	33.33	0	100
Southern Health and Social Care Trust	Daycases	16	15	14	5
	Elective Admissions	12	11	15	10
	Total	28	26	29	15
	DC Rate	57.14	57.69	48.28	33.33
Western Health and Social Care Trust	Daycases	37	41	45	42
	Elective Admissions	7	19	21	11
	Total	44	60	66	53
	DC Rate	84.09	68.33	68.18	79.25

Day Case Rates (Removal of prosthesis from ureter M29.3) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	37	41	45	42
	Elective Admissions	7	19	21	11
	Total	<b>44</b>	<b>60</b>	<b>66</b>	<b>53</b>
	DC Rate	<b>84.09</b>	<b>68.33</b>	<b>68.18</b>	<b>79.25</b>
BELFAST CITY HOSPITAL	Daycases	45	60	59	66
	Elective Admissions	11	16	9	11
	Total	<b>56</b>	<b>76</b>	<b>68</b>	<b>77</b>
	DC Rate	<b>80.36</b>	<b>78.95</b>	<b>86.76</b>	<b>85.71</b>
CAUSEWAY HOSPITAL	Daycases	13	13	26	24
	Elective Admissions	32	25	27	16
	Total	<b>45</b>	<b>38</b>	<b>53</b>	<b>40</b>
	DC Rate	<b>28.89</b>	<b>34.21</b>	<b>49.06</b>	<b>60</b>
CRAIGAVON AREA HOSPITAL	Daycases	14	14	12	5
	Elective Admissions	12	11	15	10
	Total	<b>26</b>	<b>25</b>	<b>27</b>	<b>15</b>
	DC Rate	<b>53.85</b>	<b>56</b>	<b>44.44</b>	<b>33.33</b>
LAGAN VALLEY HOSPITAL	Daycases		1		
	Elective Admissions		0		
	Total		<b>1</b>		
	DC Rate		<b>100</b>		
MATER HOSPITAL HSS TRUST	Daycases	2	4	7	5
	Elective Admissions	0	1	0	0
	Total	<b>2</b>	<b>5</b>	<b>7</b>	<b>5</b>
	DC Rate	<b>100</b>	<b>80</b>	<b>100</b>	<b>100</b>
NEWTOWNARDS HOSPITAL	Daycases				1
	Elective Admissions				0
	Total				<b>1</b>
	DC Rate				<b>100</b>
SOUTH TYRONE HOSPITAL	Daycases	2	1	2	
	Elective Admissions	0	0	0	
	Total	<b>2</b>	<b>1</b>	<b>2</b>	
	DC Rate	<b>100</b>	<b>100</b>	<b>100</b>	
ULSTER HOSPITAL	Daycases	0	0	0	
	Elective Admissions	2	2	1	
	Total	<b>2</b>	<b>2</b>	<b>1</b>	
	DC Rate	<b>0</b>	<b>0</b>	<b>0</b>	

**Day Case Rates (Resection of prostate by laser) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	0	1	1	0
<b>Elective Admissions</b>	16	15	5	3
<b>Total</b>	<b>16</b>	<b>16</b>	<b>6</b>	<b>3</b>
<b>Daycase Rate</b>	<b>0.0</b>	<b>6.3</b>	<b>16.7</b>	<b>0.0</b>

Day Case Rates (Resection of prostate by laser) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Northern Health and Social Care Trust	Daycases	0	0	0	0
	Elective Admissions	7	10	5	1
	Total	7	10	5	1
	DC Rate	0	0	0	0
Southern Health and Social Care Trust	Daycases	0	0		0
	Elective Admissions	9	5		2
	Total	9	5		2
	DC Rate	0	0		0
Western Health and Social Care Trust	Daycases		1	1	
	Elective Admissions		0	0	
	Total		1	1	
	DC Rate		100	100	

Day Case Rates (Resection of prostate by laser) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases		1	1	
	Elective Admissions		0	0	
	Total		1	1	
	DC Rate		100	100	
CAUSEWAY HOSPITAL	Daycases	0	0	0	0
	Elective Admissions	7	10	5	1
	Total	7	10	5	1
	DC Rate	0	0	0	0
CRAIGAVON AREA HOSPITAL	Daycases	0	0		0
	Elective Admissions	9	5		2
	Total	9	5		2
	DC Rate	0	0		0

**Day Case Rates (Ureteroscopic extraction of calculus of ureter M27.1, M27.2, M27.3)**  
**Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	8	8	7	6
<b>Elective Admissions</b>	176	155	147	151
<b>Total</b>	<b>184</b>	<b>163</b>	<b>154</b>	<b>157</b>
<b>Daycase Rate</b>	<b>4.3</b>	<b>4.9</b>	<b>4.5</b>	<b>3.8</b>

**Day Case Rates (Ureteroscopic extraction of calculus of ureter M27.1, M27.2, M27.3)****Apr06 to Feb10**

		<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	2	3	2	5
	<b>Elective Admissions</b>	59	77	86	57
	<b>Total</b>	<b>61</b>	<b>80</b>	<b>88</b>	<b>62</b>
	<b>DC Rate</b>	<b>3.28</b>	<b>3.75</b>	<b>2.27</b>	<b>8.06</b>
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	3	0	0	1
	<b>Elective Admissions</b>	32	8	2	28
	<b>Total</b>	<b>35</b>	<b>8</b>	<b>2</b>	<b>29</b>
	<b>DC Rate</b>	<b>8.57</b>	<b>0</b>	<b>0</b>	<b>3.45</b>
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	3	3	4	0
	<b>Elective Admissions</b>	55	42	32	32
	<b>Total</b>	<b>58</b>	<b>45</b>	<b>36</b>	<b>32</b>
	<b>DC Rate</b>	<b>5.17</b>	<b>6.67</b>	<b>11.11</b>	<b>0</b>
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	0	2	1	0
	<b>Elective Admissions</b>	30	28	27	34
	<b>Total</b>	<b>30</b>	<b>30</b>	<b>28</b>	<b>34</b>
	<b>DC Rate</b>	<b>0</b>	<b>6.67</b>	<b>3.57</b>	<b>0</b>



**Day Case Rates (Ureteroscopic extraction of calculus of ureter M27.1, M27.2, M27.3)**  
**Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	0	2	1	0
	Elective Admissions	30	28	27	34
	Total	<b>30</b>	<b>30</b>	<b>28</b>	<b>34</b>
	DC Rate	<i>0</i>	<i>6.67</i>	<i>3.57</i>	<i>0</i>
BELFAST CITY HOSPITAL	Daycases	2	3	2	5
	Elective Admissions	59	77	86	57
	Total	<b>61</b>	<b>80</b>	<b>88</b>	<b>62</b>
	DC Rate	<i>3.28</i>	<i>3.75</i>	<i>2.27</i>	<i>8.06</i>
CAUSEWAY HOSPITAL	Daycases	3	0	0	1
	Elective Admissions	32	8	2	28
	Total	<b>35</b>	<b>8</b>	<b>2</b>	<b>29</b>
	DC Rate	<i>8.57</i>	<i>0</i>	<i>0</i>	<i>3.45</i>
CRAIGAVON AREA HOSPITAL	Daycases	2	3	4	0
	Elective Admissions	55	42	32	32
	Total	<b>57</b>	<b>45</b>	<b>36</b>	<b>32</b>
	DC Rate	<i>3.51</i>	<i>6.67</i>	<i>11.11</i>	<i>0</i>
SOUTH TYRONE HOSPITAL	Daycases	1			
	Elective Admissions	0			
	Total	<b>1</b>			
	DC Rate	<i>100</i>			

**Day Case Rates (Vasectomy N17) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	475	519	525	477
<b>Elective Admissions</b>	2	6	5	3
<b>Total</b>	<b>477</b>	<b>525</b>	<b>530</b>	<b>480</b>
<b>Daycase Rate</b>	<b>99.6</b>	<b>98.9</b>	<b>99.1</b>	<b>99.4</b>

Day Case Rates (Vasectomy N17) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	Daycases	105	160	212	221
	Elective Admissions	2	5	3	3
	Total	107	165	215	224
	DC Rate	98.13	96.97	98.6	98.66
Northern Health and Social Care Trust	Daycases	1			1
	Elective Admissions	0			0
	Total	1			1
	DC Rate	100			100
South Eastern Health and Social Care Trust	Daycases	367	340	293	235
	Elective Admissions	0	0	1	0
	Total	367	340	294	235
	DC Rate	100	100	99.66	100
Southern Health and Social Care Trust	Daycases	1	15	11	17
	Elective Admissions	0	1	0	0
	Total	1	16	11	17
	DC Rate	100	93.75	100	100
Western Health and Social Care Trust	Daycases	1	4	9	3
	Elective Admissions	0	0	1	0
	Total	1	4	10	3
	DC Rate	100	100	90	100

Day Case Rates (Vasectomy N17) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	1	4	9	3
	Elective Admissions	0	0	1	0
	Total	1	4	10	3
	DC Rate	100	100	90	100
BELFAST CITY HOSPITAL	Daycases	90	133	161	172
	Elective Admissions	2	5	3	3
	Total	92	138	164	175
	DC Rate	97.83	96.38	98.17	98.29
CAUSEWAY HOSPITAL	Daycases	1			1
	Elective Admissions	0			0
	Total	1			1
	DC Rate	100			100
CRAIGAVON AREA HOSPITAL	Daycases	1	7	9	14
	Elective Admissions	0	1	0	0
	Total	1	8	9	14
	DC Rate	100	87.5	100	100
DOWNE HOSPITAL	Daycases				1
	Elective Admissions				0
	Total				1
	DC Rate				100
LAGAN VALLEY HOSPITAL	Daycases	19	53	63	39
	Elective Admissions	0	0	0	0
	Total	19	53	63	39
	DC Rate	100	100	100	100
NEWTOWNARDS HOSPITAL	Daycases	348	286	230	195
	Elective Admissions	0	0	0	0
	Total	348	286	230	195
	DC Rate	100	100	100	100
ROYAL VICTORIA HOSPITAL	Daycases	15	27	51	49
	Elective Admissions	0	0	0	0
	Total	15	27	51	49
	DC Rate	100	100	100	100
SOUTH TYRONE HOSPITAL	Daycases		8	2	3
	Elective Admissions		0	0	0
	Total		8	2	3
	DC Rate		100	100	100
HILSTED HOSPITAL	Daycases		1	0	
	Elective Admissions		0	1	

Day Case Rates (Vasectomy N17) Apr06 to Feb10

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ULSTER HOSPITAL	Total		1	1	
	DC Rate		100	0	

## Notes:

1. **New:Review ratio = Attendances (Followup)/Attendances (New)**  
i.e. For every 1 new attendance the number of review attendances are plotted on the charts
2. **Excludes Local Appointment Types COL, DAN, DAR, FLS, LA, LAS, MO, OGD**
3. **Consultant Led Clinics ONLY**

<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
1.96	2.03	1.79	1.68

**Urology Services - New:Review Ratios 01/04/2006 to 28/02/2010**

	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Belfast Health and Social Care Trust</b>	1.63	2.09	1.77	1.72
<b>Northern Health and Social Care Trust</b>	1.97	1.67	1.31	1.75
<b>South Eastern Health and Social Care Trust</b>	1.15	1.1	1.15	1.25
<b>Southern Health and Social Care Trust</b>	4.04	3.27	3.28	2.09
<b>Western Health and Social Care Trust</b>	2.65	2.32	2.49	1.73



Urology Services - New:Review Ratios 01/04/2006 to 28/02/2010**Belfast Health and Social Care Trust**

	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
BELFAST CITY HOSPITAL	1.84	2.9	2.18	2.03
MATER HOSPITAL HSS TRUST	1.63	1.11	1.38	1.26
ROYAL VICTORIA HOSPITAL	0.47	0.53	0.54	0.71

**Northern Health and Social Care Trust**

	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
CAUSEWAY HOSPITAL	1.97	1.67	1.31	1.75

**South Eastern Health and Social Care Trust**

	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
BANGOR HOSPITAL			0.68	1.45
DOWNE HOSPITAL			1.37	1.3
LAGAN VALLEY HOSPITAL	1.06	1.18	1.15	0.79
NEWTOWNARDS HOSPITAL	1.09	1.02	1.04	1.32
ULSTER HOSPITAL	1.25	1.09	1.23	1.4

**Southern Health and Social Care Trust**

	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
BANBRIDGE HOSPITAL	4.13	6.42	4.97	3.67
CRAIGAVON AREA HOSPITAL	5.29	4.25	4.12	2.29
SOUTH TYRONE HOSPITAL	0.26	0.02	0.43	0.6

**Western Health and Social Care Trust**

	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	4.46	2.84	3.45	2.72
ERNE HOSPITAL			0.35	1.67
ROE VALLEY	0.84	1.39	0.98	0.48
TYRONE COUNTY HOSPITAL	0.02	1.44	1.13	0.46

**Elective**

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Ave LOS Elec	3.7	3.5	3.4	2.9

**Non Elective**

Fiscal Year	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Ave LOS Non Elec	4.8	4.7	4.6	4.4

**Elective**

	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	3.9	3.5	3.5	3.3
Northern Health and Social Care Trust	2.3	2.9	2.4	1.9
South Eastern Health and Social Care Trust	3.8	4.0	3.4	3.2
Southern Health and Social Care Trust	3.7	4.3	3.9	2.7
Western Health and Social Care Trust	3.6	2.9	3.2	2.9

**Non Elective**

	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Belfast Health and Social Care Trust	5.5	4.9	5.4	5.0
Northern Health and Social Care Trust	4.3	5.4	4.9	3.7
South Eastern Health and Social Care Trust	3.9	4.4	3.5	3.8
Southern Health and Social Care Trust	4.5	4.8	4.6	4.7
Western Health and Social Care Trust	3.9	3.8	4.1	3.4

**Elective**

	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Altnagelvin Hospital	3.6	2.9	3.2	2.9
Belfast City Hospital	4.1	3.6	3.7	3.6
Causeway Hospital	2.3	2.9	2.4	1.9
Craigavon Area Hospital	3.7	4.3	3.9	2.7
Daisy Hill Hospital		1.3		3.0
Lagan Valley Hospital	1.0	0.0	0.7	1.0
Mater Hospital Hss Trust	3.2	2.7	2.5	2.4
Newtownards Hospital	0.5	3.0	3.5	1.8
South Tyrone Hospital	#DIV/0	2.0	0.0	#DIV/0
Ulster Hospital	3.8	4.0	3.4	3.3

**Non Elective**

	FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
Altnagelvin Hospital	3.9	3.8	4.1	3.4
Belfast City Hospital	5.5	4.7	5.1	5.0
Causeway Hospital	4.3	5.4	4.9	3.7
Craigavon Area Hospital	4.5	4.8	4.6	4.7
Daisy Hill Hospital		#DIV/0		#DIV/0
Lagan Valley Hospital	0.0	0.0	0.0	#DIV/0
Mater Hospital Hss Trust	5.9	6.4	7.1	6.0
Newtownards Hospital	0.0	0.0	0.0	0.0
South Tyrone Hospital	#DIV/0	#DIV/0	#DIV/0	#DIV/0
Ulster Hospital	4.0	4.4	3.5	3.8

**Regional Day Case Rates (Excludes Prim Op M45 and Not coded procedures) (Prim Op M70.3 and Sec Op 1 Y53.2 also excluded) Apr06 to Feb10**

<b>Fiscal Year</b>	<b>FY2006/2007</b>	<b>FY2007/2008</b>	<b>FY2008/2009</b>	<b>FY2009/2010</b>
<b>Day Cases</b>	3793	3733	4255	3492
<b>Elective Admissions</b>	3780	3963	4293	3710
<b>DCs+ElecAdm</b>	<b>7,573</b>	<b>7,696</b>	<b>8,548</b>	<b>7,202</b>
<b>Daycase Rate</b>	50.1	48.5	49.8	48.5

**Day Case Rates by Trust (Excludes Prim Op M45 and Not coded procedures) (Prim Op M70.3 and Sec Op 1 Y53.2 also excluded) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
<b>Belfast Health and Social Care Trust</b>	<b>Daycases</b>	1737	1584	1896	1615
	<b>Elective Admissions</b>	1938	2092	2015	1873
	<b>Total</b>	<b>3,675</b>	<b>3,676</b>	<b>3,911</b>	<b>3,488</b>
	<b>DC Rates</b>	47.3	43.1	48.5	46.3
<b>Northern Health and Social Care Trust</b>	<b>Daycases</b>	211	209	241	372
	<b>Elective Admissions</b>	465	430	582	448
	<b>Total</b>	<b>676</b>	<b>639</b>	<b>823</b>	<b>820</b>
	<b>DC Rates</b>	31.2	32.7	29.3	45.4
<b>South Eastern Health and Social Care Trust</b>	<b>Daycases</b>	930	912	940	751
	<b>Elective Admissions</b>	257	325	369	328
	<b>Total</b>	<b>1,187</b>	<b>1,237</b>	<b>1,309</b>	<b>1,079</b>
	<b>DC Rates</b>	78.3	73.7	71.8	69.6
<b>Southern Health and Social Care Trust</b>	<b>Daycases</b>	579	576	770	433
	<b>Elective Admissions</b>	742	691	807	650
	<b>Total</b>	<b>1,321</b>	<b>1,267</b>	<b>1,577</b>	<b>1,083</b>
	<b>DC Rates</b>	43.8	45.5	48.8	40.0
<b>Western Health and Social Care Trust</b>	<b>Daycases</b>	336	452	408	321
	<b>Elective Admissions</b>	378	425	520	411
	<b>Total</b>	<b>714</b>	<b>877</b>	<b>928</b>	<b>732</b>
	<b>DC Rates</b>	47.1	51.5	44.0	43.9

**Day Case Rates by Hosp On Adm (Excludes Prim Op M45 and Not coded procedures)**  
**(Prim Op M70.3 and Sec Op 1&2 Y53.2 also excluded) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
ALTNAGELVIN HOSPITAL	Daycases	336	452	408	321
	Elective Admissions	378	425	520	411
	Totals	<b>714</b>	<b>877</b>	<b>928</b>	<b>732</b>
	DC Rates	47.1	51.5	44.0	43.9
BELFAST CITY HOSPITAL	Daycases	1692	1509	1772	1514
	Elective Admissions	1687	1796	1714	1494
	Totals	<b>3,379</b>	<b>3,305</b>	<b>3,486</b>	<b>3,008</b>
	DC Rates	50.1	45.7	50.8	50.3
CAUSEWAY HOSPITAL	Daycases	211	209	241	372
	Elective Admissions	465	430	582	448
	Totals	<b>676</b>	<b>639</b>	<b>823</b>	<b>820</b>
	DC Rates	31.2	32.7	29.3	45.4
CRAIGAVON AREA HOSPITAL	Daycases	568	540	735	408
	Elective Admissions	742	690	807	649
	Totals	<b>1,310</b>	<b>1,230</b>	<b>1,542</b>	<b>1,057</b>
	DC Rates	43.4	43.9	47.7	38.6
DAISY HILL HOSPITAL	Daycases				0
	Elective Admissions				1
	Totals				<b>1</b>
	DC Rates				0.0
DOWNE HOSPITAL	Daycases			77	50
	Elective Admissions			0	0
	Totals			<b>77</b>	<b>50</b>
	DC Rates			100.0	100.0

**Day Case Rates by Hosp On Adm (Excludes Prim Op M45 and Not coded procedures)**  
**(Prim Op M70.3 and Sec Op 1&2 Y53.2 also excluded) Apr06 to Feb10**

		FY2006/2007	FY2007/2008	FY2008/2009	FY2009/2010
LAGAN VALLEY HOSPITAL	Daycases	79	119	128	96
	Elective Admissions	1	0	3	1
	Totals	80	119	131	97
	DC Rates	98.8	100.0	97.7	99.0
MATER HOSPITAL HSS TRUST	Daycases	13	13	24	15
	Elective Admissions	251	296	301	379
	Totals	264	309	325	394
	DC Rates	4.9	4.2	7.4	3.8
NEWTOWNARDS HOSPITAL	Daycases	748	704	662	603
	Elective Admissions	2	1	2	8
	Totals	750	705	664	611
	DC Rates	99.7	99.9	99.7	98.7
ROYAL VICTORIA HOSPITAL	Daycases	32	62	100	86
	Elective Admissions	0	0	0	0
	Totals	32	62	100	86
	DC Rates	100.0	100.0	100.0	100.0
SOUTH TYRONE HOSPITAL	Daycases	11	36	35	25
	Elective Admissions	0	1	0	0
	Totals	11	37	35	25
	DC Rates	100.0	97.3	100.0	100.0
ULSTER HOSPITAL	Daycases	103	89	73	2
	Elective Admissions	254	324	364	319
	Totals	357	413	437	321
	DC Rates	28.9	21.5	16.7	0.6



**Stinson, Emma M**

---

**From:** Stinson, Emma M Personal information redacted by USI  
**Sent:** 21 December 2010 16:45  
**To:** McAlinden, Mairead; Wright, Elaine; Judt, Sandra; Boyce, Tracey  
**Subject:** \*for SMT\* RCA report Patient 95 - retained swab 19-12-10 (5)  
**Attachments:** RCA report Patient 95 - retained swab 19-12-10 (5).doc

Dear All

Please see attached RCA for discussion at tomorrow's SMT meeting.

Apologies for late submission.

Thanks

Emma

Emma Stinson  
PA to Dr Gillian Rankin, Director of Acute Services (Interim) Admin Floor Craigavon Area Hospital

Tel: Personal Information redacted by the USI

Fax: Personal Information redacted by the USI

Email: emmaM.stinson Personal Information redacted by the USI

P Please consider the environment before printing this email



Southern Health & Social Care Trust

**Findings of the Root Cause Analysis –  
Incident Ref -**

Personal information redacted  
by USI

Patient 95

**October 2010**

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**Appendices**

- Appendix 1 - Timeline of Incident
- Appendix 2 - Letter from Medical Director 3.3.08 to Mr A
- Appendix 3 - Operation Notes (1 and 3)

## **1 INTRODUCTION**

The report presents the findings of the Root Cause Analysis (RCA) associated with the care of Patient 95 in Craigavon Area Hospital (CAH) who required an emergency laparotomy for a small bowel obstruction on the 21<sup>st</sup> July 2010. During the laparotomy the cause of the small obstruction was confirmed as being due to a retained medium sized surgical swab.

Patient 95 had elective major urological surgery on the 15<sup>th</sup> July 2009.

This RCA has been commissioned by the Director of Acute Services of the Southern Health and Social Care Trust (SHSCT).

## **2 TEAM MEMBERSHIP**

The investigation team for this RCA is:

- Dr Charles McAllister, AMD, ATICS
- Mr Ronan Carroll, Assistant Director Acute Services, Cancer & Clinical Services, SHSCT
- Mrs Beatrice Moonan, Acute Risk Manager, SHSCT
- Sr Pamela Mulholland, Theatre Manager, CAH

## **3 TERMS OF REFERENCE OF REVIEW TEAM**

Terms of Reference for the investigation into the care provided to Patient 95 by the Southern Health and Social Care Trust are:

- To carry out an investigation surrounding (1) Patient 95's operation on the 15<sup>th</sup> July 2009 and (2) the care and treatment surrounding her admission from the 6<sup>th</sup> July 2010 to the 21<sup>st</sup> July 2010
- To use a team approach to the investigation.
- To identify those factors that may have had an influence or may have contributed to Patient 95's episodes of care and treatment on the dates above.
- To review the outcome of the investigation agreeing recommendations, actions and lessons learned
- To report the findings and recommendations of the investigation to Director of Acute Services.

## 4 SUMMARY OF CASE

### 4.1 Description of Incident

This RCA needs to be divided into separate sections

(1) the episode of care associated with Patient 95's initial urological surgery 15<sup>th</sup> July 2009 and

(2) the admission from the 6<sup>th</sup> July – 21<sup>st</sup> July – ending with Patient 95 requiring a laparotomy on the 21<sup>st</sup> July 2010

#### Episode 1

Patient 95 initially presented electively to CAH for investigation of frank haematuria over the previous 2/3 months. Patient 95 had a cystoscopy on the 14<sup>th</sup> June which revealed a large bladder tumour which was resected. Patient 95 was discharged on the 25<sup>th</sup> June to return on the 13<sup>th</sup> July for planned elective surgery (right nephro-ureterectomy, anterior pelvic exenteration and ileal conduit urinary diversion) on the 15<sup>th</sup> July 2009.

Patient 95 went for surgery on the morning of the 15<sup>th</sup> July 2009. Patient 95 surgery commenced at approximately 10.20hrs and finished at approximately 15.45hrs (over five and a half hours). It is recorded that the operation on the 15<sup>th</sup> July was unremarkable. Blood loss was estimated to be 2 litres. Surgery was performed by Mr 1.

Patient 95 was admitted from theatre electively to ICU where she remained for 5 days. Patient 95 was then transferred to a surgical ward, where her recovery was uneventful and discharged home on the 25<sup>th</sup> July 2009.

Patient 95 attended the histology Outpatient's clinic CAH 5<sup>th</sup> Aug 2009 with a plan to have a surveillance CT in 3 months (undertaken 1<sup>st</sup> October 2009, STH) and review OPD appointment in 4 months **(this appointment never happened).**

#### Episode 2.

Patient 95 attended CAH A&E on the 6<sup>th</sup> July 2010 with a two week history of abdominal pain initially under the care of Dr 1 (consultant gastroenterologist).

7/7/10 - Plain Film abdominal X-ray

8/7/10 - Plain Film abdominal X-ray

9/7/10 - CT scan.

9/7/10 - Patient 95 transferred to care of surgeons

10-12/7/10 Recorded that Patient 95 condition improved over the next couple of days - vomiting stopped and Patient 95 able to mobilise around the ward.

12-7-10 – Patient 95 discharged 14.00hrs

14-7-10 Patient 95 readmitted with abdominal pain to 4N at 18.10hrs

14-7-10 transferred to 1 South @ 23.20 with cough.

16/7/10 (Friday) - Plain Film abdominal X-ray – reviewed Dr 2

19/7/10 (Monday) - Plain Film abdominal X-rays – re-reviewed Dr 2 – first recorded possibility of retained surgical swab.

21/7/10 [Patient 95] had emergency laporatomy, performed by Mr 2, wherein a medium swab was identified and removed.

[Patient 95] was spoken to by Mr 1 and the finding of the laporatomy was explained in full detail to her.

## **4.2 Stakeholders Involved**

The stakeholders involved in this incident are as follows:

S/N 1  
S/N 2  
S/N 3  
S/N 4.

## **4.3 Chronology of Events**

4.4 The chronology of events is documented at 4.1 Description of Incident and by the timeline at Appendix 1 .

## **4.5 Relevant Past History**

Prior to the condition requiring surgery on the 15<sup>th</sup> July 2009 [Patient 95] had no significant past medical history. Hypertension and left cataract surgery 7<sup>th</sup> Jan 2009 were noted in her medical notes.

## **4.6 Outcome, Consequences and Action Taken**

The IR1 form was received by the central reporting department on 27<sup>th</sup> August 2010

A Root Cause Analysis into this incident involving [Patient 95] was subsequently commissioned by the Director of Acute Services SHSCT.

## **5 METHODOLOGY FOR INVESTIGATION**

This investigation is based on the best practice associated with the National Patient Safety Agency "*Seven Steps to Patient Safety*." The processes associated with this approach are documented in the sub-sections follow.

### **5.1 Review of Records**

The RCA team reviewed the following records associated with the case:

- Medical and Nursing Notes covering both episodes of care

### **5.2 Review of Staff Statements**

The following staff statements were reviewed:

1. AMD C&CS (Radiology).
2. AMD Post-Graduate Training
3. Consultant Urologist

### **5.3 Review of Relevant Reports**

The RCA team reviewed [Patient 95]'s medical and nursing notes.

### **5.4 Interviews**

The following staff members were interviewed

- S/N 1
- S/N 2
- S/N 3
- S/N 4.

### **5.5 Carer/User Involvement**

**None**



## 6 ANALYSIS

This section of the report summarises the analysis conducted during this investigation, which has been compiled from a review of the materials generated as a result of the activities outlined in Sections 5.1 to 5.3 of this report. The analysis contained in this report focuses in detail on the immediate postoperative period. The analysis undertaken supports the conclusions reached by the investigation team and the recommendations identified in Section 7 of this report.

The primary issue in this incident is clearly the retention of a swab following surgery. Although the surgeon is ultimately responsible for what happens during surgery the responsibility for ensuring that the swabs are correctly counted prior, during and at the end is delegated to the scrub nurse. The outcome of the inquiry on this occasion highlighted the count was not correct. Because this was a long procedure there was a change of Scrub Nurse and it is unclear from the record which of the scrub nurses was responsible when the error was made. In addition the method of counting the swabs when a swab is left in the patient's cavity was not standardised across all theatres. The method used on that day in that theatre is unclear.

The second issue was the delay in diagnosis; There was a three-month follow up CT Scan of abdomen performed on the 1<sup>st</sup> October 2009. A diagnosis of retained swab was not made on this scan but the reporting consultant radiologist described a mass measuring 6.5cm in the region of the right renal bed. The differential given for this mass included a seroma or local recurrence. The high-density areas within the mass lesion were described as multiple surgical clips.

Although a diagnosis of a retained swab was not made on the CT Scan report a pathological abnormality was described, however this report was not seen by the consultant urologist as it is his routine practice to review Radiological and Laboratory reports when the patient returns for post-operative follow up. The planned four-month follow up never took place due to the waiting times for review at Outpatients.

**Patient 95** subsequently presented and was admitted medically on the 6<sup>th</sup> (discharged on the 12<sup>th</sup> when eating and drinking normally) and again on the 14<sup>th</sup> with symptoms of sub-acute bowel obstruction. A further CT scan of abdomen was performed on the 7<sup>th</sup> July 2010. This was reported by the same consultant radiologist as showing an unusual appearance to a loop of colon within the pelvis that contained faeculent material and intraluminal linear high-density material suggestive of surgical clips. The reporting consultant radiologist and a consultant physician reviewed this scan and the diagnosis was of small bowel loops in the pelvis and a possible adhesion. She was discharged following surgical review and resolution of symptoms on the 12<sup>th</sup> July 2010.

**Patient 95** was readmitted medically on the 14<sup>th</sup> July 2010 with cough and green sputum for 24 hours. On the 16<sup>th</sup> July abdominal x-rays were reviewed by the Surgical SHO on call and noted no obvious obstruction.

She continued to have episodes of vomiting. A further surgical review by Dr 2, a Surgical Core Trainee was undertaken on the 19<sup>th</sup> July at 03.00 again regarding evidence of obstruction. There was no evidence of same initially, but he felt that there was evidence of a foreign body within the pelvis aside from surgical clips

and thought the appearances were consistent with a retained surgical swab within the abdomen and pelvis. Review of previous CT films suggested that there was material thought to be intraluminal and the consultant urologist undertook further review on the 20<sup>th</sup> July 2010. On the 20<sup>th</sup> July surgical care was taken over by a general surgeon (Mr 2). Water-soluble contrast was administered and it was felt the appearances were consistent with a retained swab, which was retrieved at laparotomy on the 21<sup>st</sup> July,

## 6.1 Admission

The admission details and Personal information redacted by USI journey for both admissions have been described in point 4.1.

## 6.2 Treatment

Similar to point 6.1 (admission) the care and treatment received by Personal information had been described throughout this RCA.

## 6.3 Summary of Analysis

The primary issue here is the retention of the swab. On the day in question, when the RCA team spoke with the nursing team, they provided a consistent account of when swabs were checked with the exception of when a swab was retained in the patient's cavity and how this was recorded and checked off.

The secondary issue is the delay in diagnosis. This was caused by a misinterpretation of the radiological findings and in addition, no routine follow up in outpatients.

### 6.3.1 Education and Training

Presentation of case and radiographs to consultants and trainees in Medicine, Surgery and Radiology at Morbidity and Mortality meetings.

All new and existing theatre staff are required to adhere to swab/instrument policy across all theatre departments in the Trust and there must be standardisation of all SOP's in regard to the procedure for checking swabs & instruments across the Trust.

### 6.3.2 Equipment and Resources

This incident did not directly involve equipment although the swabs could be considered to be either a piece of equipment or a resource, but the important point is that there was not fault with the equipment and/or resource.

However since this incident all the Theatre Department has introduced a new swab management system called 'Swabsafe' which consists of a container with 5 individual compartments which enables the nursing team to place a used swab in each compartment. This has two main benefits - one swab goes into five individual compartments and visually this can be seen if subsequent inspection/confirmation is required..

### 6.3.3 Individual

The RCA team met with the all but two (one RN had left the Trust and the other RN was on Maternity leave) of the nursing team who were present in the theatre on the 15<sup>th</sup> July 2009

#### **6.3.4 Working Conditions**

The working conditions in the theatre on the 15<sup>th</sup> July 2009 were satisfactory. The nursing theatre team had a full compliment of staff and the team had a balance of senior and junior theatre nurses.

All the nursing staff interviewed could not remember the operation performed on the 15<sup>th</sup> July 2009, but knowing the surgeon all the nursing staff did not feel under pressure when it came to counting and checking swabs and equipment at the appropriate times.

#### **6.3.5 Task**

The counting of swabs in the operating theatre was a very familiar task performed by all the nurses interviewed on many occasions.

When asked to explain the procedure they used to check the swab all the nurses interviewed described a very similar process of checking swabs at the accepted intervals i.e. at the start of the procedure/operation, closure of cavity and closure of skin.

**Yet the theatre nursing documentation has only one set of signatures for the mandatory swabs counts when there should have been another two sets of signatures at the close of cavity and skin .**

However what became apparent during the interview process was that there was no agreed process for the checking of swabs which which were temporarily placed in the patient's cavity. It was clear that when a swab or swabs were placed in a patient's cavity this was 'marked up' on the white board. When the swab was removed some nurses would strike through the number and leaving it on the white board whilst other would 'rub out' the number on the board when the swab was removed and accounted for.

It would be the recommendation of the RCA team the first process described be the process that is adopted.

#### **6.3.6 Team and Social**

From the interviews with the nursing staff all appeared genuinely distressed that this incident had happened and could provide no explanation at how it did happen.

#### **6.3.7 Communications**

All the nurses interviewed stated that communication was satisfactory within the theatre department and would inform and advise the surgeon if a swab or instrument had not been accounted for.

## 7 Conclusions, recommendations and Learning

The method of recording swabs which were temporarily used in the patient cavity that day in theatre is inconsistent. A standardised protocol for the counting and recording of all swabs across all theatres needs to be implemented urgently.

The responsible scrub nurse in this case is unclear because there were two scrub nurses. When the scrub nurse hands over to another scrub nurse he/she should sign off the current state of swabs in use and used.

The first post-operative scan (1<sup>st</sup> October 2009) was not reviewed at routine follow up because there was no follow up for 12 months due to the length of the urology outpatient waiting list. The urology waiting list for post-operative follow up needs to be cleared.

Several abdominal x-rays were performed on [Personal Information redacted by USI] readmission but the swab was missed by several doctors. This is presumably because they have never seen a retained swab on a radiograph previously. This case should be presented, with the radiographs, at Surgical and Medical Morbidity and Mortality meetings to demonstrate the appearance of a retained swab.

### 7.1 Local Recommendations

The local recommendations are set out in table 1

### 7.2 Regional Recommendations

No regional recommendations are deemed necessary.

### 7.3 Action Planning

The action plan below sets out the proposed lead individuals and completion dates for the recommendations contained in this investigation.

**Table 1 local recommendations**

Recommendation	Evidence of Action	Lead Individual	Completion	Completion Date
All swab and instrument counts must be interruption free and where possible the same circulating nurse completes count –	Write SOP for all Theatre within Trust	Lead Nurse ATIC AMD's Surgery & Gynaecology	Jan 11	
Swabs that are temporarily used in a patients cavity must be recorded on the white board and struck through when removed until operation complete – the record must not be 'rubbed out'	Incorporate new SOP for all Theatres within Trust	Lead Nurse ATICs	Jan 11	
As far as is operationally possible the same nurse should remain as the scrub nurse for the entire operation.	Each month five patients charts will be reviewed to ensure all	Lead Nurse ATICs	Jan 11	

Signing off of swab status must take place by the Scrub Nurse if there is a changeover.	necessary documentation is complete			
It needs to be recognised and reaffirmed that time is required at the end of the operation to the scrub nurse to ensure that all swabs, instruments and equipment are accounted for.	This will be incorporated in WHO' Patient Safety Checklist'	Lead Nurse ATICs	Feb 11	
Where possible and practical there should be a 'surgical pause' before wound closure.	This will be incorporated in WHO' Patient Safety Checklist'	AMD's Surgery & Gynaecology	Feb 11	
Findings of the RCA will be presented at the next radiology peer review discrepancy meeting		Dr Hall	18 <sup>th</sup> January	
Presentation of case with radiographs at Radiology, Surgical and Medical M&M.		AMD Radiology Dr S Hall AMD Surgery Mr E Mackle AMD Medicine Dr P Murphy	18 <sup>th</sup> January	
Reduction of Urological Out-Patient follow up waiting times		Heather Trouton, AD SEC		

## Time line of events beginning 15.07.09

Re Personal information Unit Number Personal information  
 Datix Incident Number Personal information

This timeline is subject to further revision as information is gathered during the review process.

Date	Time	Event	Comments
23.06.09 Tuesday		Had <b>pre-op CT scan abdomen</b> done	
15.07.09 Wednesday	08.55	Elective Right Nephroureterectomy radical cystectomy & ileal conduit for bladder cancer	Anaesthetics Dr 4 – no anaesthetic issued identified on chart review Surgeon Mr 1  All swabs accounted for on 'SWAB COUNT' list **Instrument check section NOT signed at 'cavity closure' or 'Prior to closure'.**
15.07.09	12.45	1 <sup>st</sup> unit packed cell erected	
15.07.09	12.55	2 <sup>nd</sup> unit packed cell erected	
15.07.09	15.00	3 <sup>rd</sup> unit packed cells erected	Operation was scheduled for 9am – 12.30 but <span style="background-color: black; color: black;">Personal information</span> was In theatre until 15.40 > 6 hours with estimated blood loss 2000 mls
19.07.09 Sunday		Discharged from ICU	
24.07.09 9 <sup>th</sup> day post - op Friday		Discharged home	
05.08.09 Wednesday		Histology Clinic	
01.10.09 Thursday		<b>Had CT scan abdomen in STH</b>	Dr 3 (consultant radiologist)
06.07.10 Tuesday		Attended A&E C/O abdominal pain & vomiting for 2weeks and diahorrea for 2 days	
06.07.10	11.50	Admitted to MAU under Dr 1 (physician)	
07.07.10 Wednesday		<b>Had abdominal x-ray</b>	
08.07.10		<b>Had abdominal x-ray</b>	

09.07.10 Friday		Transferred to surgery	
09.07.10		<b>Had CT scan abdomen</b>	Reporter – Dr 3 (consultant radiologist) who compared this scan to <span>Personal information</span> pre-op scan of 23.06.10 **** Small Bowel Obstruction likely due to adhesions
12.07.10 Monday (Bank holiday)		Seen by Mr 3 - Discharged 2pm	
14.07.10	18.10	Readmitted with 4N abdominal pain	
14.07.10		<b>Had abdominal x-ray</b>	
14.07.10	23.20	Transferred to 1 South with cough	
16.07.10 Friday		<b>Had abdominal x-ray</b>	
19.07.10 Monday	03.00	Dr 2 (SHO) reviewed abdominal x-ray flag raised	
19.07.10		Ward round Dr 4 – discussed abdominal x-ray with radiologists	
20.07.10 Tuesday		<b>Had abdominal x-ray</b>	
21.07.10 Wednesday		CT R/V Dr 5 & Mr 2	
21.07.10		To theatre for laparotomy - medium sized swab found	
21.07.10	IR1 form completed by Sr 1		
27.08.10 Tuesday	IR1 form received in central reporting point		

**KEY TO STAKEHOLDER NAMES CAH– (patients name or identifier)  
REPORT**

Identifier	Name of Stakeholder
Mr 1	Mr A O Brien
Mr 2	Mr Eman
Mr 3	Mr C Weir
Dr 1	Dr P Murphy
Dr 2	Dr Lloyd
Dr 3	Dr M McClure
Dr 4	Dr N Ligget
Dr 5	Dr P Rice



**Stinson, Emma M**

---

**From:** Stinson, Emma M  
**Sent:** 25 January 2010 15:13  
**To:** Loughran, Patrick  
**Cc:** White, Laura  
**Subject:** Letter to Consultant Urologists  
**Attachments:** Letter to Urology Consultants 20 1 10.pdf

Dear Dr Loughran

Please see attached a copy of the letter sent to Mr Akhtar, Mr Young and Mr O'Brien.

Kind Regards

Emma

Emma Stinson

Administrative Assistant to Dr Gillian Rankin, Interim Director of Acute Services

Admin Floor

Craigavon Area Hospital

Tel: Personal Information redacted by the USI

Fax: Personal Information redacted by the USI

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**Southern Health  
and Social Care Trust**

Interim Director of Acute Services  
Administration Floor  
Craigavon Area Hospital

Mr M Young, Consultant Urologist  
Mr A O'Brien, Consultant Urologist  
Mr M Akhtar, Consultant Urologist

20<sup>th</sup> January 2010

**Our Ref:** GR/PL/es **Your Ref:**

Dear Mr Akhtar, Mr Young and Mr O'Brien,

Thank you for your letter of 18<sup>th</sup> January 2010 in which you outline your concerns regarding the appointment of a locum consultant urologist. These concerns were fully discussed at the meeting with yourselves on 18<sup>th</sup> January. It was agreed that each consultant with the Head of Service would determine the operating hours required to address the urgent list of patients awaiting surgery in order to ensure that no patient would be waiting longer than 16 weeks at the end of March. Additionally each surgeon would identify additional operating time through extended day, evening, Saturday or Sunday lists.

This would be achieved by Thursday lunchtime (21<sup>st</sup> January). Two surgeons agreed to patients requiring flexible cystoscopy being moved to lists operated by Mr Brown or Mr Hughes both in Daisy Hill Hospital.

It was also agreed that if further operating time was required over and above what all surgeons could commit, some sharing/pooling across surgeons would be considered. Equally an approach to Mr Kernohan was suggested to undertake additional lists in Craigavon Area Hospital.

Trust managers agreed to assure other resources required ie. POA, theatre time, beds in order to support additional patients/lists.

In light of the above and if it is clear that agreements are in place to address urgently waiting patients to 16 weeks, the Trust will cancel the locum appointment.

The last paragraph in your letter identifies compromised inpatient care and safety as a result of the recent ward reconfiguration. This is a significant statement which requires to be addressed. As you are aware Dr Loughran has recently written outlining the Trust's process of clinical incident reporting and the need to identify concerns over safety in this matter. We would entirely endorse this course of action and request you to immediately report any cases whereby patient safety was compromised so that urgent action can be taken. We would further appreciate if you could let Dr Rankin know when you have submitted the required forms so the she can ensure a speedy process.

The Regional Review of Urological Services recognises the Craigavon Unit as one of three in Northern Ireland and is proposing increased capacity to service a larger population. This should be regarded as a mark of success for the Urology Department in CAH and it is the Trust's objective to expand the service with your leadership and commitment and along with all other specialties to be in a position to recruit suitable staff who wish to work in the Southern Trust.

Yours Sincerely

Personal Information redacted by USI

---

**Dr Gillian Rankin**  
**Interim Director of Acute Services**

Personal Information redacted by USI

**Mr Eamon Mackle**  
**Associate Medical Director**