Critical Incident and Serious Issues Notification Policy

1. Purpose

This Policy outlines the obligations of RVTS in reporting critical incidents and adverse events to the Australian College of Rural and Remote Medicine (ACRRM) and/or the Royal Australian College of General Practitioners (RACGP) (collectively referred to as 'the Colleges').

Its purpose is to ensure compliance with relevant accreditation and training standards and reporting obligations and to provide consistency, transparency and accountability regarding the:

- identification
- management
- reporting
- monitoring of critical incidents and adverse events

relating to the RVTS education program.

2. Application and Scope

This policy applies to all activities involving training locations (practices), and all registrars training with RVTS under the program; all RVTS supervisors who are responsible for the supervision of those registrars; and all RVTS employees, including members of the Board.

Medical practitioners working in Australia have responsibilities for managing adverse events, critical incidents, near misses, and 'serious issues'. These responsibilities include appropriate reporting and the review of what occurred in relation to these events.

Medical practitioner responsibilities extend to complying with statutory reporting requirements, which includes the mandatory reporting requirements under the Health Practitioner Regulation National Law Act 2009.

3. General principles

3.1 RVTS seeks to develop a transparent, fair, and supportive culture whereby the integrity of the organisation and its accredited training posts is preserved, and incidents are responded to in a thoughtful and supportive manner.

3.2 All parties must comply with the Health Practitioner Regulation National Law Act 2009 which aims to protect the public from harm. Conduct which has the potential to cause harm to patients should be treated as notifiable to the Australian Health Practitioner Regulation Agency (AHPRA). Guidelines for mandatory notifications came into effect on 1 March 2020[1]

3.3 RVTS is required to report critical incidents or serious issues (as defined by the respective Colleges) to the Colleges as they occur and has some additional annual reporting requirements in relation to the RACGP.

[1] AHPRA Guidelines for Mandatory Notification as published and accessed 25 May 2021 at https://www.ahpra.gov.au/Notifications/mandatorynotifications/Mandatory-notifications.aspx

3.4 There is an expectation that:

3.4.1 all training locations have internal policies and procedures to deal with 'near misses', 'adverse events', 'critical incidents' and 'serious issues' and that these will be adhered to, along with reporting of relevant incidents to RVTS.

3.4.2 RVTS training locations enter a memorandum of understanding with RVTS, which requires them to maintain recognised general practice accreditation, which would include the maintenance of a clinical risk management system.

3.5 There is also an expectation that all RVTS registrars, supervisors, staff and Board are conversant with their responsibilities (as outlined in this policy and procedure) and the processes to progress, address and where possible, resolve the issues, either individually or collectively.

3.6 RVTS encourages all registrars and supervisors to be proactive in identifying potential problems as early as possible during training to enable early intervention. This includes an awareness of the triggers for common problems that may lead to critical incidents, which are discussed during orientation and with supervisors during supervisor training.

3.7 Reports can be made anonymously, however must contain a level of detail to provide RVTS with adequate information to consider and investigate matters. RVTS is committed to ensuring confidentiality in respect of all matters raised under this Policy, and that those who make a report are treated fairly and do not suffer detriment as a result of making a report.

3.8 RVTS continually monitors and evaluates the effectiveness of actions taken to resolve issues to inform further quality improvements to the model of supervision, training, or training location.

3.9 RVTS personnel must adhere to the terms of the RVTS Privacy Policy.

4. RVTS Definitions

Adverse event

An adverse event is any disruptive event that causes, or risks causing, significant harm to patients, registrars, supervisors, practice staff, RVTS staff, or the associated organisations involved in program delivery.

These may include events or circumstances including, but not limited to where RVTS:

- undertakes an action to address a registrar deemed at risk
- receives and responds to a complaint or notice of concern related to a program
- has a negative stakeholder relationship experience
- is aware of difficulties in the functioning of its program, particularly in its capacity to meet the program intent and/or requirements (staffing, systems, processes, etc.); and
- has difficulty in resolving a grievance, a dispute, an appeal or a request for reconsideration.

An adverse event does not have to be reported to either RACGP or ACRRM, unless it is construed to be a critical incident (refer below).

Critical Incident

A critical incident is any adverse event which has resulted in a serious negative outcome for a patient, registrar, supervisor, practice staff members, RVTS and or its staff, either RACGP or ACRRM and or their staff, program reputation or any combination of these. Critical incidents must be reported in accordance with College guidelines.

i. **RACGP Definitions**

Adverse event	Any event which creates disruption and/or significant danger or risk, resulting in negative consequences, injury or undesired outcome: or where registrars, supervisors, practice or RVTS staff or patients feel unsafe, vulnerable and/or under stress.
Critical Incident	An adverse event which has resulted in serious harm to the patient, registrars, practice or RVTS staff, needing immediate response and investigation.
Critical Incident Reporting	Identifying preventable incidents reported by staff and supervisors directly involved in the process at the time the event occurred or was discovered.

ii. **ACRRM Definitions**

Serious issue	a. An error by a registrar or supervisor that is suspected to have caused death or significant injury to a patient b. Criminal activity or suspected criminal activity by a registrar, supervisor or teaching post c. An event (including illness) that significantly affects a registrar's ability to train d. Any actions by a registrar, supervisor, or employee of a training organisation likely to bring the College into disrepute e. Any material change with the training organisation that has the capacity to affect the delivery of ACRRM training in accordance with standards.

Reasonable belief	A term commonly used in regulatory legislation to denote the threshold test for action, such as an obligation to report. A reasonable belief is formed by an objective consideration of all relevant matters (including matters of opinion).

5. Notifiable events and incidents reportable to both RACGP and ACRRM (and other parties as indicated)

Registrars

5.1 Mandatory notification of registrars to the Medical Board of Australia.

5.2 Involuntary withdrawal of a registrar due to clinical competency under the RVTS Withdrawal from Training policy.

5.3 Critical incident of a registrar involving an adverse patient outcome.

5.4 Serious personal illness of a registrar affecting their training progression that is likely to require exceptions to RVTS policies for them to complete training.

5.5 Failure of a registrar to successfully complete remediation.

5.6 Death of a registrar.

Supervisors

i. Mandatory notification of a supervisor to the Medical Board of Australia.
ii. Serious personal illness/death of a supervisor that affects the training progression of a registrar which is likely to require exceptions to RVTS policies for the registrar to remain in training at the practice.
iii. Medical registration – any condition, undertaking, reprimand, investigation or review of medical registration by the Australian Health Practitioner Regulation Agency (AHPRA)

Practices (Training Locations)

i. De-accreditation of an RVTS training location
ii. Removal of a registrar from a training location under the RVTS *Registrar in Difficulty* or similar policy.
iii. Changes to practice arrangements that place a registrar at risk.

General

i. Criminal activity or suspected criminal activity by a registrar, supervisor or training post.
ii. Practice, registrar, or RVTS activity or situation that is likely to bring RVTS and / or a College into disrepute.
iii. RVTS will also report to the relevant College(s) any material changes in RVTS that have the capacity to seriously threaten, or an actual sustained disruption, of the delivery of training in accordance with standards.
iv. Not all adverse events will be reported to the relevant College(s), but some will be in accordance with the relevant College Policy.
v. Critical incidents and unresolved disputes must be reported to the RACGP/ACRRM under the terms of the RACGP/ACRRM's Accreditation management agreements.
vi. A Notifiable Data Breach (NDB) (Australian Government) occurs when personal information held by an organisation is lost or subjected to unauthorised access or disclosure.
vii. The NDB scheme only applies to data breaches involving personal information that are likely to result in serious harm to any individual affected. These are referred to as 'eligible data breaches'.

6. Responsibilities

In the context of RVTS General Practice training, reporting obligations apply to all of the following:

- CEO
- Director of Training (DOT)
- Medical Educators
- Supervisors
- GPs and other health practitioners who are colleagues of the registrar
- GPs who treat registrars as patients
- Entities that employ or contract with registrars to work in general practice.

Each training location is required to incorporate a clinical risk management system as part of general practice accreditation.

When dealing with adverse events, critical incidents, and serious issues, RVTS employees and other parties must adhere to the Australian Privacy Principles and protect the confidentiality of those involved.

7. Reporting process

Reporting of adverse events, critical incidents and serious issues (collectively referred to as 'incidents') made by RVTS are fully documented in:

- Clinical Risk Management System (practice/training location)
- RVTS Critical Incident, Adverse Event and Serious Issues Reporting form
- RVTS Critical Incident Register

and are subject to Root Cause Analysis (RCA) investigation by RVTS as part of its quality improvement process.

The RVTS Critical Incident and Serious Issue Reporting Procedures outline the particular responsibilities of specific RVTS personnel.

Where RVTS enters an agreement for the provision of services outside the delivery of the RVTS education program, such as with the RACGP as provider of the college PEP, reference should be made to the specific reporting and notification requirements under the terms of the individual agreement.

Under the PEP contract schedule, there is a requirement for PEP term reporting of critical incident and adverse events.

8. Management Review and Consideration of Incident Acuity

On receipt of an incident report, immediate review will be undertaken by the CEO, in conjunction with other key staff as required, to assign a level of acuity to incidents, to in the first instance, determine if the incident is notifiable to either or both the RACGP and ACRRM, and to other parties/authorities, including the RVTS Board.

9. Monitoring and review

RVTS continually monitors and evaluates the effectiveness of actions taken to resolve issues to inform further quality improvements to the model of supervision or training, and the training location where applicable.

RVTS employs the methodology of Root Cause Analysis (RCA) to investigate and analyse critical incidents. Its purpose is to clearly define the problem, analyse cause and effect and identify and recommend the best ways of addressing the root causes.

Where an adverse event or incident is of a serious nature, the CEO will convene a team to conduct an RCA investigation, whose scope includes any system, process or other failure that may have contributed to the incident. The RCA report, including recommendations, is submitted to the RVTS Board for consideration and implementation.

10. Relevant documents

1. Australian Health Practitioner Regulations Agency (AHPRA) Guidelines for Mandatory Notification (AHPRA)
2. RVTS Incident Reporting Form
3. RVTS Critical Incident Register
4. Health Practitioner Regulation National Law Act 2009 (the National Law)
5. Medical Board of Australia. (accessed 25/5/2021) Good Medical Practice: A code of conduct for Doctors in Australia
6. RVTS Registrar Agreement – Letter of Offer
7. RVTS Supervisor Agreement
8. RVTS Registrar and Supervisor Code of Conduct
9. RVTS Training Program Handbook
10. ACRRM Serious issues reporting form (electronic)
11. ACRRM Serious issues reporting information (website)
12. RACGP Accreditation Management Agreement
13. RACGP Reporting Adverse Events and Critical Incidents Guidance Document
14. RACGP Critical incident / adverse event report (electronic)
15. RACGP (2021) Standards for general practices (5th Edition)
16. RACGP Standards for general practice training (3rd Edition)
17. World Health Organization. (2009). More than words: Conceptual Framework for the International Classification for Patient Safety Version 1.1 (Final Technical report).

Document control

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