**Introduction**

Section 284(2) of the Injury Prevention, Rehabilitation, and Compensation Act 2001 requires the Accident Compensation Corporation (ACC) to notify the Director- General of Health of events, or series of events, it believes represent a degree of “risk of harm” to the public.

If ACC has assessed this as having a moderate likelihood of recurrence a certified provider will be asked to complete this feedback form.

If you have any questions, please contact the Ministry on 0800 113813 (then press 1).

Please return this form to HealthCERT:

* by email to certification@moh.govt.nz
* by fax to (04) 496 2343, or
* by post to HealthCERT, Ministry of Health, PO Box 5013, Wellington 6145

**Provider and Event Details**

Please identify the provider and premises this report relates to.

|  |  |
| --- | --- |
| Legal Entity Name | Please enter your organisation’s name. |
| Premises Name | Please enter the name of the relevant premises. |

**Review of the Event**

Please enter information about whether you have reviewed the event.

|  |  |
| --- | --- |
| AIMS ID Number: | Please enter the AIMS ID Number from the top of the ACC report. |
| Has the event been reviewed by your organisation? | Please choose an item. |
| If the event has been reviewed, please enter the date on which the review took place | Please enter a date. |

If the event has been reviewed by your organisation, please complete the declaration below and send the first two pages of this form to the Ministry of Health.

If the event has not been reviewed please complete the remainder of the form before submitting for the Ministry of Health.

**Declaration**

|  |  |
| --- | --- |
| I declare that the information provided is true and correct and that I have the designated authority to make this notification on behalf of the organisation named above. | Please choose an item. |

|  |  |
| --- | --- |
| Name | Please enter the name of the person making the report. |
| Occupation | Please enter the occupation of the person making the report. |

**Event Background**

Please provide the following information.

|  |  |
| --- | --- |
| What happened? | Please provide a brief description of the details of the event. |
| When did the event occur? | Please specify when the event occurred. |
| What areas and/or services were impacted? | Please specify the areas and/or services impacted. |

**Proximate Factors**

Please provide information on what were the most proximate factors involved in the event. Please specify why that happened and what systems and processes underlie those proximate factors. Typically these will be “special cause” variations.

Please answer where applicable or state that the factor was not applicable.

| **Proximate Factors** | **Guide questions to ascertain findings** | **Findings** |
| --- | --- | --- |
| Human factors | What human factors were relevant to the outcome?  To what degree were staff properly qualified and currently competent for their responsibilities?  How did staffing compare to ideal levels?  What plans were there for dealing with contingencies that would tend to reduce effective staffing levels?  To what degree is staff performance in the operant process(es) addressed?  How can orientation and in-service training be improved? | Please enter findings or specify not applicable. |
| Leadership issues:- corporate culture | To what degree was the culture conducive to risk identification and reduction?  What are the barriers to communication of potential risk factors?  To what degree was the prevention of adverse outcomes communicated as a high priority? How? | Please enter findings or specify not applicable. |
| Information management issues | To what degree was all necessary information available when needed? Accurate? Complete? Unambiguous?  To what degree was communication among participants adequate? | Please enter findings or specify not applicable. |
| Equipment factors | How did the equipment performance affect the outcome? | Please enter findings or specify not applicable. |
| Controllable environmental factors | What factors directly affected the outcome?  To what degree was the physical environment appropriate for the processes being carried out?  What systems were in place to identify environmental risks? | Please enter findings or specify not applicable. |
| Uncontrollable external factors | Are they truly beyond the organisation’s control?  What emergency and failure mode responses had been planned and tested?  What had been done to protect against the effects of these uncontrollable factors? | Please enter findings or specify not applicable. |
| Other | Are there any other factors that directly influenced this outcome? | Please enter findings or specify not applicable. |

**Risk Reduction Strategies**

Please provide information on the risk reduction strategies you have implemented and how you will measure effectiveness and evaluate the outcomes and risk of recurrence.

|  |  |
| --- | --- |
| **Risk Reduction Strategy** | **Measure of effectiveness/evaluation of outcomes and risk of recurrence** |
| Please describe the strategy. | Please describe measure, evaluation and risk. |
| Please describe the strategy. | Please describe measure, evaluation and risk. |
| Please describe the strategy. | Please describe measure, evaluation and risk. |
| Please describe the strategy. | Please describe measure, evaluation and risk. |
| Please describe the strategy. | Please describe measure, evaluation and risk. |
| Please describe the strategy. | Please describe measure, evaluation and risk. |
| Please describe the strategy. | Please describe measure, evaluation and risk. |
| Please describe the strategy. | Please describe measure, evaluation and risk. |