# Significant Event Analysis Report Form

*For step by step guidance on completing this form please see Section 2, Step 4: “Analysis of the significant event”*

**Date of significant event:**

**Date of significant event meeting:**

**Date report compiled:**

**Author:**

### What happened?

Describe what actually happened in detail. Consider, how it happened, where it happened, who was involved and what the impact or potential impact was on the patient, the team, organisation and/or others.

### Why did it happen?

Describe the main and underlying reasons – both positive and negative – contributing to why the event happened. Consider, the professionalism of the team, the lack of a system or a failing in a system, lack of knowledge or the complexity and uncertainty associated with the event.

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### What have you learned?

Demonstrate that reflection and learning have taken place on an individual or team basis and that relevant team members have been involved in the analysis of the event. Consider a lack of education & training; the need to follow systems or procedures; the vital importance of team working or effective communication.

### What have you changed or plan to change?

Outline the action(s) agreed and implemented, where this is relevant or feasible. Consider if a protocol has been amended, updated or introduced; how was this done and who was involved; how will this change be monitored. It is also good practice to attach any documentary evidence of change e.g. a letter of apology to a patient ora new protocol.

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| Review date for actions: |

**Please complete and please email a copy of completed form to** [**audit@safetyinpractice.co.nz**](mailto:audit@safetyinpractice.co.nz)