Establishment of a near miss reporting system in ward
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Introduction
Taking precaution is always preferred than performing necessary cure. The role of nurses as front-line healthcare professionals, providing prompt and flawless patient care, is essential and crucial. In order to achieve and maintain high standards of quality and safety in healthcare as well as putting patient safety as our highest priority, a Near Miss Reporting System was launched in ward 13A of United Christian Hospital since December 2012. The system is established in the ward SharePoint to alert all ward staff about “nearly-happened-but-avoided” medical incidents.

Objectives
By establishing a Near Miss Reporting System, it is expected to: 1 Maintain high standards of quality and safety in ward. 2 Minimize the number of medical incidents in ward. 3 Alert and educate all staff to prevent similar incidents from recurring.

Methodology
First of all, the Near Miss Reporting System was set up at ward SharePoint. All the near miss registries were categorized such as medication, fall, occupational safety and case management for analysis in the future. A brief description of each near miss incident, corresponding immediate actions taken and learning points are recorded under an anonymous basis. No blame culture is stressed. The system was then promoted in ward sharing and through emails. To further enhance the usage of the Near Miss Reporting System, constant encouragement and keeping track of ward staff in utilizing the system are necessary. Sharing of all the entered near miss issues is carried out regularly among all ward staff.

Result
After launching of the Near Miss Reporting System since December 2012, 12 near miss incidents are recorded. The alertness of staff towards the importance of prevention of medical incidents is raised. Staff expressed that the system is a useful tool to improve quality and safety in ward. Moreover, the number of medical incidents is minimized. All patients are able to receive prompt and flawless nursing care during hospitalization.