



# Reflection on Serious Incident's Preview

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Fields marked with ★ are required.

## Section 1

You must not include any patient identifiable information on this form.

**Title of reflection: ★**

**Date of incident: ★**

**Description of case including adverse events: ★**

**Root causes of events: ★**

*What have been the key factors that led to this event? Think about the patient, the illness, the team, the task, the environment, the culture, the organisation.*

**Contributing factors: ★**

*What else was occurring at the time? – were there distractions, problems with equipment, task overload, difficulty in getting help.*

**What are the learning points from this case?: ★**

*You should consider: How have your knowledge, skills and attitudes changed? Have you identified any skills, attitude and knowledge gaps? How will this activity improve patient care or safety? How will your current practice change as a consequence of your learning from this activity? What aspects of your current practice were reinforced by this activity?*

**Further action required: ★**

*Outline any further learning or development needs highlighted by the incident. How do you intend to address these? You should put any significant action you need to take in your personal development plan.*