SingHealth

SingHealth Enterprise Risk Management Congress 2019

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Just Another Day At Work…

Categories of SREs

Categories of Serious Reportable Events		
Surgical or Invasive Procedure Events	1	Surgery or other invasive procedure performed on the wrong body site
	2	Surgery or other invasive procedure performed on the wrong patient
	3	Wrong surgical or other invasive procedure performed on a patient
	4	Unintended retention of a foreign object in a patient after surgery or other invasive procedure
	5	Intraoperative or immediately post-operative/post-procedure death in an ASA Class 1 patient
Product or Medical Device Events	6	Patient death or serious injury associated with the use of contaminated drugs, medical devices or biologics provided by the healthcare institution
	7	Patient death or serious injury associated with the use or function of a medical device in patient care in which the device is used or functions other than as intended
	8	Patient death or serious injury associated with intravascular air embolism that occurs while being cared for in a healthcare institution
Patient Protection Events	9	Discharge or release of an infant, a child or any person who lacks capacity, as referred in section 4(1) of the Mental Capacity Act (Cap. 177A), other than an authorised person
	10	Patient death or serious injury associated with patient abscondment (disappearance)
	11	Patient suicide, attempted suicide or self-harm that results in serious injury, while being cared for in a healthcare institution

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Environmental Events	12	Patient death or serious injury associated with an electric shock in the course of a patient care process in a healthcare institution
	13	Any incident in which systems designated for oxygen or other gas to be delivered to a patient contain no gas, the wrong gas or are contaminated by toxic substances
	14	Patient death or serious injury associated with a burn incurred from any source in the course of a patient care process in a healthcare institution
	15	Patient death or serious injury associated with the use of physical restraints or bedrails while being cared for in a healthcare institution
Care Management Events	16	Patient harm, death or serious injury associated with a medication error (corresponding to Category E to I of Appendix 2, e.g. errors involving the wrong drug, wrong dose , wrong patient, wrong time , wrong rate, wrong preparation or wrong route of administration)
	17	Patient death or serious injury or risk thereof associated with unsafe administration of blood or blood products
	18	Transmission of diseases following blood transfusion, organ transplant or transplant of tissues
	19	Maternal death or serious injury associated with pregnancy or delivery
	20	Infant death or serious injury associated with labour or delivery in a low-risk pregnancy
	21	Patient death or serious injury associated with a fall while being cared for in a healthcare institution
	22	Stage 3, Stage 4 and unstageable pressure ulcer acquired after admission/presentation to a healthcare institution
	23	Patient death or serious injury resulting from the irretrievable loss of an irreplaceable biological specimen

Categories of SREs

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Care Management Events	24	Patient death or serious injury resulting from failure to follow up or communicate laboratory, pathology or radiology test results
	25	Unexpected death or serious injury as a result of lack of treatment or delay in treatment which would have been prevented otherwise
	26	Unexpected death or serious injury as a result of medical intervention which would have been prevented otherwise
	27	Any assisted human reproductive procedure which has or, may have, resulted in insemination of wrong gamete or transfer of wrong embryo
Radiological Events	28	Radiological procedure performed (a) on the wrong patient, (b) on a pregnant patient
	29	Radiopharmaceutical administered (a) to the wrong patient, (b) with a wrong type or dose
	30	Radiation therapy delivered (a) to the wrong body site, (b) to the wrong patient, (c) with a wrong dose
	31	Death or serious injury of a patient associated with the introduction of a metallic object into the MRI area

Hepatitis C outbreak: Probe points to lapses at Singapore General Hospital

NDCS contacts patients over use of tools not fully sterilised

The first two steps of the sterilisation process take place in a thermal disinfector, where dental instruments are washed and then thermally disinfected through a process that removes close to 100 per cent of organisms. Thermal disinfection takes place at 90 deg C for five minutes.
PHOTO: NATIONAL DENTAL CENTRE SINGAPORE

72 packs of dental instruments used found to have missed final step of process; centre says risk of infection very low

Salma Khalik
Senior Health Correspondent

The National Dental Centre Singapore (NDCS) is contacting 714 patients who were treated there last Monday and Tuesday after it discovered that 72 packs of instruments used had not been fully sterilised.

But in a statement yesterday, it reassured the patients that the risk of them getting infected as a result is "extremely low".

These packs were part of a batch that had gone through two of the three steps normally used to sterilise equipment that is to be reused, but not the final steam sterilisation to destroy bacterial spores.

The error was discovered last Monday because these packs lacked the markings to show they had gone through full sterilisation.

The centre tried to recall all the instruments in that batch. Although all were recovered, 72 packs had been used, some on Tuesday.

When asked why some were used the day after the discovery was made, the NDCS would say only that "efforts were made to trace and recall all affected dental instruments" and they were not all traced till the next day.

It does not know how many packs were used in its specialist clinics on levels 2, 4 and 6 of its building at the Outram campus last Tuesday.

The NDCS said they had undergone the first two steps – thorough machine washing and thermal disinfection to remove physical debris and "inactive organisms, including viruses" – which would remove "close to 100 per cent of organisms of concern".

It said the final sterilisation would remove bacterial spores, particularly *Clostridium perfringens* which affects the gut, with illness usually lasting a week, and *Clostridium tetani* which causes tetanus, very rare here.

The NDCS is informing the patients who were in the affected clinics on those two days about the slip-up, and reassuring them of their low risk of infection.

Its director, Dr Poon Choy Yoke, said: "Patient safety and well-being are our first priority. We deeply regret this incident and sincerely apologise to our patients for the lapse and any anxiety caused.

"We have taken immediate steps to strengthen our processes and ensure the safety of all patients in our care."

The Ministry of Health (MOH) was informed last Friday.

A spokesman said: "MOH has directed SingHealth and NDCS to conduct a thorough review of the incident and the processes involved, and to report its findings and follow-up actions to MOH.

"MOH will review the report and determine if any regulatory actions are to be taken against NDCS."

She added: "Our priority is the safety and well-being of patients."

Such problems have occurred in other countries. Last year in the United States, a Veterans Affairs dentist did not sterilise his equipment properly. About 600 patients he treated were contacted, warned of possible infection and offered free screening for HIV and hepatitis, and free care should they have caught the diseases.

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Info on 1.5m SingHealth patients stolen in worst cyber attack

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Thank You

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