

University of Prince Edward Island	Policy Number: 0002
Policy Title: Clinical Incident Report	Pages:- 3
Authority: Faculty of Nursing	Creation Date: February 2003
Reference: Adapted from Queens University, 2003	Version Date: February, 2018
	Review Date: February, 2023

PURPOSE

1. To document the type and frequency of incidents that occur during student clinical experiences in order to identify, analyse, and take action.
2. To provide documentation about the student's progression in the program.
3. To serve as an educational tool to assist faculty to detect gaps in understanding and direct changes in the educational program.

SCOPE: All students enrolled in the baccalaureate nursing program (2 year program and 4 year program).

RESPONSIBILITY: Faculty of Nursing

Definition:

An incident is defined as any happening which is not in accord with the routine operation of the institution or the routine care of a particular patient/client. It may involve a patient/client, staff member, student, visitor or all four. It could involve as well supplies, equipment, procedures, or particular services or programs.

Clinical Discrepancy: An error has been detected and corrected before an incident happened. This also qualifies as a clinical incident, instead of a medication error.

Reporting Guidelines and Procedures: *(Adapted from Philpott, M. (1985). Legal liability and the nursing process. Toronto: Saunders.)*

The following guidelines are to be followed when completing an incident report:

- a) Documentation about the incident should be objective and contain factual information only. This form does not replace the organization's incident reporting form (Appendix A).
- b) Normally, reports are to be completed by the person directly involved in or present at the time of the incident, i.e., student or Clinical Instructor. When a student is under the supervision of a preceptor/instructor, the Course Coordinator is to be notified of the incident as soon as possible.

- c) The report will be sent to the Course Coordinator, copied to the Dean or designate, and kept in the student's file.

APPENDIX A

UPEI FACULTY OF NURSING CLINICAL INCIDENT REPORT

This form is to be completed by the student.

Course Number		Date and Time of Incident	
---------------	--	---------------------------	--

Name of Student:					
Clinical Instructor:					
Preceptor/Instructor if Designated:					
Institution/Agency:					
Exact Location of Incident:					
Who was notified of the incident?					
Who was involved? Circle	Patient	Student Nurse	Visitor	Staff	Other

Agency Incident Form completed?	
---------------------------------	--

This incident was :	Name	Title
Discovered by:		
Witnessed by:		
Reported to:		

