**Background**

Junior doctors are often witness to and responsible for medical error yet rarely report it by official channels. A large UK study that analysed patient case notes and errors reported through the official error reporting system found:

- **5%** of incidents that resulted in actual patient harm were reported by official means

Within Northumbria Healthcare NHS Trust we found:

- **88.9%** of junior doctors have never completed an incident report form
- **0.0%** of staff nurses have never completed an incident report form

**Improving junior doctor reporting rates**

Focus group and interview studies identify multifactorial barriers to reporting, which can be divided into individual, organisational and cultural factors.

**Individual factors** include a lack of knowledge about the reporting system, concern over one’s reputation and fear.

**Organisational factors** include workload, poor feedback and a feeling that reporting was not one’s responsibility.

**Cultural factors** include thinking of errors as an inevitability, anti-bureaucratic sentiment and a reluctance to criticise colleagues.

**References**


Questions/Comments to safer.times@nhct.nhs.uk

**Intervention – ‘Safer Times’**

An educational project to produce a junior doctor written quarterly magazine with the dual aims of exploring serious incidents that have occurred and encouraging increased incident reporting using a combination of:

- **Real life serious incident case studies**
  - Analysis of issues and advice on what to do as the junior doctor in that situation
  - Fully anonymised
  - Aim of encouraging a culture of openness, not apportioning blame
  - Example – case of septic shock not escalated to seniors/ITU

- **Educational Articles**
  - On ward-based patient safety issues that Northumbria has identified as problematic
  - Fact checked by consultants
  - Relevant and interesting to junior doctors
  - Example – ‘The Pitfalls of insulin Prescribing’

- **Encouraging Incident Reporting**
  - Practicalities of how to report incidents
  - Exploration of the individual, organisational and cultural barriers to reporting

- **‘I wish all junior doctors did....’**
  - Consultant led section in which specialists highlight key issues from their fields

**Discussion**

We have published two editions and have a third planned for late June. We have covered:

- Diabetes and safe insulin prescribing
- Sepsis and escalation of care

We email every foundation doctor in Northumbria Healthcare NHS Trust along with all consultants and managers.

We have received fantastic feedback from juniors and seniors alike, and juniors report increased confidence of reporting incidents and dealing with the issues we have dealt with.

A magazine is an easy way to access and encourage many doctors to increase incident reporting – new F1s will also receive copies of back issues in their welcome packs.

**Future Plans**

We will re-survey junior doctors’ confidence and reporting rates after a year and we hope to have contributed to a significant improvement.

Making the project sustainable despite junior doctor turnover is a challenge, so designated consultant involvement and early involvement of F1s as editors is key.

Northumbria Healthcare NHS Trust has no official forum for junior doctors to discuss mistakes - this magazine could pave the way for such meetings and provide stimulus for discussion.