



Incident Reporting and Learning Policy

Report everything, blame no one, change something

Facility	
Policy owner (role) · approved by · date · review date	

Scope

Any event that harmed a patient, visitor or staff member, or could have (near miss). All types. Reporting is expected of every staff member and is protected.

How

The incident form (Toolkit 8) — paper box on every ward or online — within 24 hours; anonymous allowed. Immediate danger is escalated verbally at once.

Response

Every report reviewed within 72 hours by the safety lead. Severity scored on the matrix (Toolkit 8 Tool 2). Low: local review. Moderate: simple analysis. High and extreme: root cause analysis within 45 days, open disclosure to the patient (Toolkit 9), and, for sentinel events, the ASF Sentinel Event Policy.

Just culture

The Just Culture decision guide is applied before any judgement about an individual. Honest reporting of an error is never grounds for discipline. Reckless or deliberate harm is dealt with under HR procedures.

Learning

A monthly Safety Learning Bulletin shares anonymised incidents, what was learned and what changed. Actions are tracked to closure at the safety committee.

Measures

Reports per 100 beds per month (rising is good), proportion of near misses (rising is good), time to review, actions closed.

Approved by (name, role)	Signature	Date

Template from the ASF Policy Starter Pack. Adapt to national law; keep the ASF block; note what you changed.

ASF standards: Governance — incident management; Sentinel Event Policy