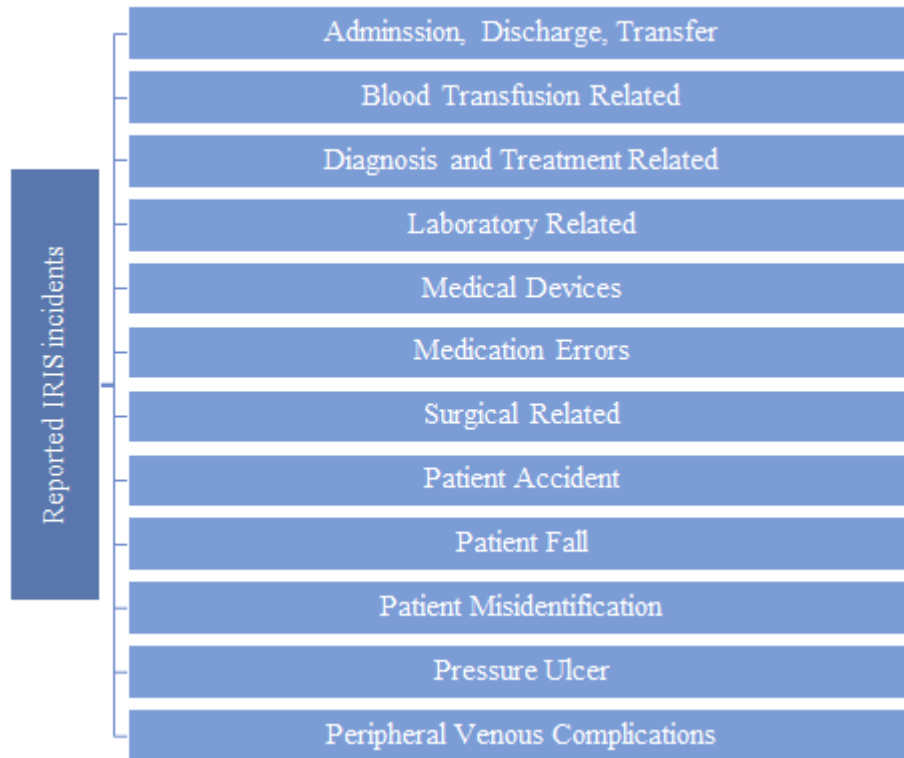


## Appendix A

### IRIS incident types



## Appendix B

### Grade Severity Assessment Code (SAC) score

|              |               | Likelihood     |        |          |          |        |
|--------------|---------------|----------------|--------|----------|----------|--------|
|              |               | Almost Certain | Likely | Possible | Unlikely | Remote |
| Consequences | Extreme       | SAC 1          | SAC 1  | SAC 1    | SAC 1    | SAC 2  |
|              | Major         | SAC 1          | SAC 1  | SAC 2    | SAC 2    | SAC 3  |
|              | Moderate      | SAC 2          | SAC 2  | SAC 2    | SAC 3    | SAC 3  |
|              | Minor         | SAC 3          | SAC 3  | SAC 3    | SAC 4    | SAC 4  |
|              | Insignificant | SAC 3          | SAC 3  | SAC 4    | SAC 4    | SAC 4  |

| Legend   |             |           |              |
|----------|-------------|-----------|--------------|
| Low Risk | Medium Risk | High Risk | Extreme Risk |

#### Consequences:

- Extreme: Death unrelated to the natural course of the illness and differing from the immediate expected outcome.
- Major: Major permanent loss of function (sensory, motor, physiologic or intellectual) unrelated to the natural course of the illness and differing from the expected outcome.
- Moderate: Permanent lessening of bodily functioning (sensory, motor, physiologic, or intellectual) unrelated to the natural course of the illness and differing from the expected outcome.
- Minor: Require increased level of care including Review and evaluation, Additional investigations etc.
- Insignificant: No injury or increased level of care or length of stay, will include near misses.

#### Likelihood:

- Almost Certain: Expected to occur again either immediately or within a short period of time (likely to occur most occur most weeks or months).
- Likely: Will probably occur in most circumstances (several times a year).
- Possible: Possibly will recur - might occur at some time (may happen every 1 to 2 years).
- Unlikely: Possibly will recur - could occur at some time in 2 to 5 years.
- Remote: Unlikely to recur - may occur only in exceptional circumstances (may happen every 5 to 30 years).

## Appendix C

### Definitions of Clinical Risks

|    | <b>Risk</b>   | <b>Definition / Explanation of Risk</b>  |
|----|---|--|
| C1 | Patient Fall  | All falls related to Patients only   |
| C2 | Results not reviewed / Delayed                                  | Patient's critical/abnormal investigation results (e.g., radiological, blood) were not reviewed, and diagnosis and treatment were therefore delayed                                |
| C3 | Non-Compliance to SOP   | Staff did not comply with established protocols/procedures. E.g., Staff did not check for 2 patient identifiers prior to procedure   |
| C4 | Medication related<br>(Wrong dosage/ strength/ frequency/ rate) | All medication related incidents inclusive of all near misses  |
| C5 | Inadequate Skills or Knowledge                                  | Lacks knowledge of operating procedures or principles, or knowledge of available protocols. E.g., Staff does not know how to perform a procedure properly                          |
| C6 | Patient Misidentification                                       | Not conforming to 2 patient identifiers checks, resulting in mismatched of patient's record, scanned wrong patients' label or orders/treatment/procedure rendered to wrong patient |
| C7 | Diagnosis and Treatment-Related                                 | E.g., Misdiagnosis, missed diagnosis, delayed diagnosis, orders/ treatments not carried out  |