# Characterising the nature of primary care patient safety incident reports in the England and Wales National Reporting and Learning System: a mixed-methods agenda-setting study for general practice

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**Declared competing interests of authors:** Sir Liam Donaldson was the chairperson of the National Patient Safety Agency (NPSA) (2010–12) and is currently involved in the programme of research associated with the National Reporting and Learning System (NRLS). He is also the World Health Organization's patient safety envoy. Sukhmeet Panesar is a former clinical adviser at the National Patient Safety Agency (2008–10), a former special adviser to Sir Liam Donaldson (2010–12) and a former academic clinical fellow at Imperial College London working for the NRLS research programme. Peter Hibbert has undertaken paid consultancy with Power Health Solutions (PHS), St Vincent's Health Australia and for the Australian Commission on Safety and Quality in Health Care, all regarding incident reporting. Amy Butlin obtained a Cardiff University Research Opportunities (CUROP) scholarship to undertake this work. Gareth Parry received funding to attend the Advisory Group Meetings.

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# **Plain English summary**

### Characterising patient safety incident reports

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# **Plain English summary**

Unsafe health care can result in harm to patients. Despite the fact that the majority of health-care interactions occur in community settings, most research has been in hospital settings; therefore, very little is known about patient safety in primary care. In 2003, a database called the National Reporting and Learning System was established to generate learning from safety incidents and it now contains over 40,000 reports from general practice that have never been analysed.

We developed methods to identify the most frequent and most harmful patient safety incidents, from all reports describing severe harm or death outcomes (n = 1199) and a random sample of 12,500 non-fatal reports. Four doctors and one nurse read the free-text descriptions in each report and described the incident type, potential contributory factors, level of harm severity and incident outcomes.

Communication-related errors were the most frequently reported safety incidents, and failures of diagnosis and assessment contained the highest proportion of reported serious harms. We recommend four areas of work to support safer health-care delivery for patients (1) supporting health-care professionals (HCPs) to improve the content of future reports for local and national learning purposes; (2) developing information technology systems to enable better communication between HCPs within and between care settings; (3) supporting HCPs to explore ways of identifying vulnerable patients at risk of deterioration in the community; and (4) realising how patients can work with HCPs to help prevent future safety incidents.

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