# SLIPPS Learning Event Recording Tool (SLERT)

## Learning event recording tool: SLIPPS project information

Dear student.

The learning event recording tool you are about to access (this survey) is very flexible and may be used :

- As part of your studies or course
- For professional and personal purposes (e.g. as a template for recording placement reflections which can be downloaded and used as part of placement assements or e-portfolios, or revalidation portfolios etc.)
- As many times and as often as you wish

you can also chose to have your 'data' added to SLIPPS a multi-national EU project.

Reflecting on important patient safety learning events from your practice placements can help you to understand your own experiences and learn from events.

#### **About SLIPPS**

The learning event recording tool has been developed as part of the Sharing learning from Practice to improve Patient Safety (SLIPPS) project co-funded by the Erasmus + programme of the European Union. SLIPPS is led by Northumbria University UK, in collaboration with Finland, Spain, Italy and Norway.

Through the following SLIPPS project website you may now, or in the future, also find opportunities to compare your events with other healthcare and/or social care students' experiences (<a href="www.slipps.eu">www.slipps.eu</a>).

The SLIPPS project has obtained ethical approval via your education institution. For



further information see document.

If you agree to your learning event data (descriptions and reflections on important patient safety learning events, which will all be anonymous and you will not be identified in any way) being part of the SLIPPS project it will be used to:

- Develop freely available educational resources;
- As part of national and international research;
- In presentations and publications;
- To assist healthcare organisations and education institutions in improving patient safety education, processes and systems.

It will also become part of the International Patient Safety Education and Research Network (IPSERN) databases and may be used for future research and educational developments.

If you would like further information please <u>click here</u> to see the study information sheet or contact: <u>contact@slipps.eu</u>



## Recording important patient safety learning events and informed consent

### In the following pages you will be asked to complete these sections:

In section A: You are asked to describe the event

In section B: You are asked to think about and reflect on the event, and the learning you took from it

In section C: You are asked to answer some demographic questions

Analysis of the learning event records will summarise and amalgamate the records so that no individuals or clinical areas can be identified.

You can complete the patient safety learning event record more than once.



## Important Patient Safety learning event recording form: Section A

Please tell us about an event that was important for you when learning about patient safety.

Important learning events can be described as significant events in a learners' life:

- something meaningful for you, it does not need to be a major event (e.g. does not need to have caused serious consequences)
- something **you** feel strongly influenced **your** learning

Please recall such learning events related to patient safety that took place during **your** work/clinical placements. Whether or not the event was resolved successfully **does not** matter.

#### The learning event can be:

- 1. A **positive**, satisfactory event
- 2. A **negative**, unsatisfactory event

Please note: Although the learning event may be negative in nature, the learning can be experienced as positive.

### Describe ONE event and tell us as much as you can about:

- What happened (e.g. the event and what led up to it, if you were involved or only witnessed the event, if you had experienced this type of event before)
- Who was involved and what they did (e.g. Patient, relative, mentor, clinical supervisor, nurses, doctors, health care assistant, midwife, social care worker, or other staff or students and their job title or roles). Please note: do not use any names of people or health care organisations
- When it happened (e.g. which semester, which shift: day time or night time)
- Where it happened (e.g.in a patients home, a room, operating theatre)
- What did the person or people do, or not do, that had an effect



•	educator or any other staff, another student, or your teachers)	AI
Pl	lease answer here:	

• What was the outcome or result (at the time or later if you know)



## Important Patient Safety learning event recording form: Section B

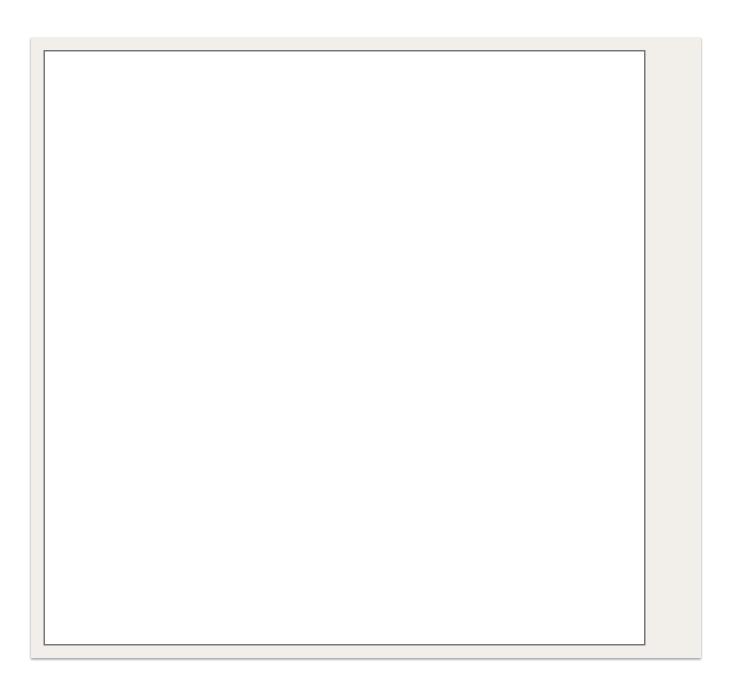
Thinking of the event described in Section A, please say why that event was an important patient safety learning event for **you**. Tell us what you learnt and how **you** felt about the event afterwards:

- Please also describe the feelings before, during and after the event, and/or anything you noticed about emotions expressed by others
- What in your opinion preceded and contributed to the event?
- If you discussed it with someone afterwards, did this discussion help you to learn from this event?
- Why it seemed important and memorable for your learning?
- What you felt you learned or took from the experience?
- Why was the experience significant for you?
- What do you think others could learn from this event?

Please note: do not use any names of people or healthcare organisations

Please answer here:







## Section C Your profession

Your age

0	Bioanalytics/Biology technician
0	Dietitian/Nutritionist
0	Medicine
0	Midwifery
0	Nursing
0	Nursing (child/paediatrics)
0	Nursing (mental health)
0	Nursing (learning disabilities)
0	Occupational therapy
O	Paramedics
0	Pharmacy
0	Physiotherapy
0	Psychiatric technician
0	Radiographer
0	Social work (children)
0	Social work (adult)
0	Social work
0	Speech and language therapist
0	Other
If yo	u selected Other, please specify:



C 16-20			
C 21-25			
○ 26-30			
○ 31-35			
○ 36-40			
C 41-45			
C 46-50			
○ 51 or over			

### Gender

- Male
- Female
- Other
- Prefer not to answer

### Year in program

0	1st year

- 2nd year
- 3rd year
- 4th year
- 5th year
- 6th year
- 7th year
- Other



The type of clinical/work placement in which the event happened

0	Critical care (including intensive care and A&E)				
0	Community care/home				
0	Elderly care (Geriatric) ward/unit				
0	Healthcare centre				
0	Medical/medicine unit/ward				
0	Children's health (Pediatric) ward/unit				
0	Midwifery ward/unit				
0	Neurological ward/unit				
0	Orthopedic ward/unit				
0	Mental health/Psychiatric ward/unit				
0	Physiotherapy unit				
0	Rehabilitation ward/unit				
0	Respiratory ward/unit				
0	Gynecology/polyclinics				
0	Monitory unit				
0	Outpatients				
0	Social work				
0	Surgery ward/unit/theatre				
0	Other				
If yo	u selected Other, please specify:				
Was the important learning event broadly related to (you can tick multiple boxes):					
	Communication				
	Confidentiality				
	10 / 18				



☐ Checking/Verification
□ Decision making
☐ Food and nutrition
☐ Leadership, guidance and education
☐ Hand over/information transfer
☐ Infection prevention and control
☐ Invasive procedures
☐ Medications
☐ Moving and handling
□ Teamwork
☐ Procedure and / or treatment
☐ Using technology or equipment
□ Violence
□ Other
If you selected Other, please specify:



## Section C, continued

What type of learning event do you feel it was: (e.g. a near miss, etc.)

**Good practice** = It is a successful experience, which you feel deserves to be shared. It may be 'effective caring practice' in which a health/social care professional seems to go further than usual or provide extra special care (SLIPPS)

**Near miss** = an incident that did not reach the patient (WHO)

**Hazard** = a circumstance, agent or action with the potential to cause harm (WHO)

**Adverse event (Harmful incident)** = an incident that resulted in harm to a patient (WHO)

What type of learning event do you feel it was?

○ Good practice		
<ul><li>Near miss</li></ul>		
○ Hazard		
<ul><li>Adverse event</li></ul>		

If the event was a patient safety incident, was it reported through a healthcare reporting system?

© Yes		
C No		
C I don't know		

If you answered no, why not?



If the event was a patient safety incident, was it documented in the patie	ent's files?			
<ul> <li>Yes</li> <li>No</li> <li>I don't know</li> </ul>				
If you answered no, why not?				



## Please note:

If the event you describe makes you worried or concerned about patient or staff safety we recommend you talk to someone in your practice placement and/or education instituiton, and that you follow guidance from them.

If there may be immediate danger to patients, students or staff (e.g. nurses, doctors, physiotherapists or other members of staff in healthcare organisations), then YOU MUST TAKE ACTION to make sure everyone is safe and it may be that project team members in specific countries may also need to take action in accordance to their own rules and regulations.



## Submit to SLIPPS

If you AGREE for this information to be included in the SLIPPS project, please click the box below before progressing to the next page.

C I AGREE for this data to be used as part of SLIPPS

If you do not wish to submit this record to the SLIPPS project please click the box below before progressing to the next page.

O I DO NOT agree for this data to be used as part of SLIPPS



## Download and print record

You can download and save this record for your own personal file once you have clicked finish on the next page.

## Thank you

Thank you for taking the time to complete this record.

Please press 'finish'. This will also allow you to print/download your record.

