

Developing a Patient Centred Incident Reporting Medical Device Framework

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BACKGROUND

In Malta, there is a significant rate of under-reporting of medical device related incidents. Implementing an incident reporting (IR) framework that encourages communication and transparency with stakeholders will reduce risk to users and improve the quality of medical devices on the market.

PURPOSE

To develop a patient-centred IR framework that allows for communication and transparency with stakeholders in concluding IR for the benefit of patient safety.

METHOD

The methodology was divided into three phases:

- Phase 1: *Needs assessment*, IR systems of European Member States available on the respective National Competent Authority (NCA) websites were reviewed. Common themes and data fields used were identified and discussed through an expert panel. An IR Form for healthcare professionals and another for patients were developed and validated by the same expert panel.

Table 1: Expert Panel Members*

Clinicians	Pharmacists	Stakeholders**
* 2 members of each group		
**representatives from medical device sector		

- Phase 2: *Development of quality management system supporting the IR framework*, focused on the development of SOPs that related to the receipt and processing of IRs, the liaison with other NCA and notified bodies as necessary. As well as the procedure for discussion through an Incident Action Group consisting of representatives from the national procurement unit of medical devices, the clinicians as end users and the NCA. Economic operators were invited accordingly for their input. The SOPs compiled were reviewed by the same expert panel.
- Phase 3: *Implementation of the IR framework* focused on the pilot implementation of the structure.

RESULTS

Phase 1: Eight themes were included in the IR forms as identified through the expert panel (Table 2). The validated Incident Report Form is shown in Fig 1.

Table 2: Themes included in IR forms

Device and patient data	Device performance and malfunction
Incident details	User error
Adverse events	Follow up actions
Suspected cause	Reporter details

Phase 2: Three SOPs were compiled. All the expert panel agreed that the SOPs were clear, concise, robust and served their intended purpose.

Phase 3: The IRs reported between 2022 and March 2023 were 216, 207 of which were received from Healthcare Professionals with the National Health Service. The IRs were classified during 14 2-hour incident group action meetings, 186 IRs were successfully classified and concluded.

The figure displays two versions of an incident report form. The left version is the original form, and the right version is the adapted form for healthcare professionals. Both forms include sections for reporter details, incident details, and a description of the incident. The adapted form includes a 'Description of Incident' section with a risk classification scale (High, Medium, Low Risk) and a 'Other comments' section.

Figure 1: Adaptation of the Incident Report form developed for Healthcare Professionals

CONCLUSION

The pilot implementation of the framework showed positive results, with a significant number of healthcare professionals reporting incidents, and the Incident Action Group successfully closing most of the reported incidents. The implementation of the patient-centred IR framework can contribute significantly to reducing adverse events, promoting patient safety, and enhancing the quality of healthcare services. Future research should aim to assess the long-term impact of the framework on patient outcomes and its effectiveness in different healthcare settings.