This is a repository copy of Reporting of Clinical Adverse Events Scale: a measure of doctor and nurse attitudes to adverse event reporting.

White Rose Research Online URL for this paper:
http://eprints.whiterose.ac.uk/4929/

**Article:**

https://doi.org/10.1136/qshc.2006.021691

**Reuse**
Items deposited in White Rose Research Online are protected by copyright, with all rights reserved unless indicated otherwise. They may be downloaded and/or printed for private study, or other acts as permitted by national copyright laws. The publisher or other rights holders may allow further reproduction and re-use of the full text version. This is indicated by the licence information on the White Rose Research Online record for the item.

**Takedown**
If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.

eprints@whiterose.ac.uk
https://eprints.whiterose.ac.uk/
This is a questionnaire related to a published paper in *Quality & Safety in Health Care*.

White Rose Research Online URL for this paper: http://eprints.whiterose.ac.uk/4929/

**Published paper**

VIGNETTE AND QUESTIONNAIRE.

Health professional’s views of clinical adverse event reporting: a survey.

Part 1.
Please read the following and answer the question. There is no right or wrong answer; it is your view we are interested in. Your response is anonymous and will be treated in confidence.

Vignette:
Imagine that the following clinical event took place in an average sized acute hospital. Adverse event reporting levels in the hospital are typical of a unit of this size with some events being reported, and others not. Clinical staff believe that if they report adverse events the hospital will not blame them personally for the event.

A patient attends A&E and it is noted they are allergic to penicillin. Following further assessment, the patient is diagnosed as suffering from pneumonia and is transferred to an inpatient bed. They are treated with penicillin by the clinical team on duty at the time. The patient reacts adversely to the penicillin and suffers an allergic reaction. The clinical team deals with the immediate clinical needs of the patient.

If you were part of the clinical team involved in this event, how likely would you be to report it?

Very Unlikely Neither likely Likely Very
Unlikely nor unlikely nor unlikely Likely
0 -------- 1 ------- 2 ------ 3 ----- 4
(circle one number only)

Part 2.
The statements listed below have been used by other professionals to describe their views on clinical adverse event reporting. Please read each statement. Circle the number to the right of each statement that best describes your opinion of the statement. A ‘clinical adverse event’ is any aspect of the healthcare process that may impact negatively on patients, which is not part of the progress of their illness or a result of their own actions.

1 Reporting adverse events helps identify staff who need additional training
   Strongly Agree Agree Disagree Strongly Disagree
   1  2  3  4
2 Whether or not to report an adverse event depends on how many people are aware the error has taken place
   1  2  3  4
3 It is not my responsibility to report adverse events involving colleagues
   1  2  3  4
4 Reporting adverse events protects patients
   1  2  3  4
5 Reporting adverse events lets others check up on me
   1  2  3  4
6 As long as those around me learn from adverse events there is no need to report them

Please turn over
7 The careers of staff who report adverse events suffer
8 The procedures in this hospital are clear on how to report adverse events
9 I am not doing my job properly unless I report adverse events
10 Minor adverse events should not be reported
11 My colleagues expect me to report adverse events
12 Reporting adverse events creates problems for me
13 The procedures in this hospital are clear on what sort of adverse events should be reported
14 Only uncommon adverse events should be reported
15 Writing in a patient's notes that an adverse event has happened is just as good as filling in a separate reporting form
16 Receiving encouragement from senior clinical staff encourages me to report adverse events
17 Having an Adverse Event Monitoring Unit based in the hospital encourages staff to report errors
18 Reporting adverse events lets everyone know I have made a mistake
19 I am not permitted to report adverse events
20 You should only report those adverse events where something can be learned from them
21 Reporting adverse events is a method through which to pinpoint blame
22 Adverse events can't be prevented so there is no point in reporting them
23 Reporting adverse events lets colleagues gossip about my involvement in the event
24 Reporting adverse events makes people accountable for their actions
25 Colleagues seem unconcerned when adverse events occur

26a. Have you ever witnessed, or been involved in, an adverse event? (tick one box): yes □ no □
26b. If yes, have you ever reported an adverse event? (tick one box): yes □ no □
27. How likely are you to report an adverse event in the future?: very unlikely □ unlikely □ neither likely/ nor unlikely □ likely □ very likely □
28. What is your age? ______________
29. Are you: Male □ Female □
30. When did you first receive a clinical qualification? (if applicable) Date:___________________________________
31. What is your profession? (e.g. Nurse/Doctor/Midwife) ______________________________________________
32. What is your staff grade? (e.g. SHO/D grade) (If applicable) _________________________________________
33. What is your specialty? (If applicable) (e.g. Oncology, Psychiatry) _________________________________
34. What type of additional qualifications (if any) do you have? (MD, MSc, diploma, etc) __________________

Thank you for taking the time to complete this questionnaire. Please return it in the envelope provided. If you would like to be entered in the draw, please complete the attached slip. Your name will NOT be entered into the study’s research database.