

The well-defined pediatric ICU: active surveillance using nonmedical personnel to capture less serious safety events.

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<https://psnet.ahrq.gov/issue/well-defined-pediatric-icu-active-surveillance-using-nonmedical-personnel-capture-less>

[Serious reportable events](#) in hospitals are usually captured, but less serious events and near misses often go undocumented. Such close calls can reveal important [safety hazards](#). This study describes the development and early experience of an active surveillance program in a pediatric intensive care unit (PICU). Under the supervision of an assigned intensive care physician, premedical college graduates served as quality/safety analysts. Two analysts canvassed the PICU each morning, interviewing night nurses, physicians, respiratory therapists, and pharmacists about potential adverse events. Over a 15-month period, 2465 events were recorded, representing 5.4 events per day. Approximately 158 quality and safety improvement projects were initiated during this period. The authors describe the infrastructure, reporting, and unique web application that were developed as a part of this process. These quality/safety analyst interviews essentially created a facilitated, robust [voluntary incident reporting system](#).