DATE

Insert name

Insert facility

Insert address

Insert address

Dear (Insert Name)

Following the reporting of clinical incident [insert incident management system number] in the ims+ Incident Management System, and in accordance with the *Health Administration Act 1982* and the NSW Health Incident Management Policy, the [insert] Local Health District Chief Executive has appointed a serious adverse event review team (“review team”).

The review team will review systems and processes in relation to the incident to determine how the incident occurred; any factors that caused or contributed to the incident; and any procedures, practices or systems that could be reviewed for the purposes of a recommendations report to [*insert a brief description and date of the incident along with the patient’s MRN*].

NSW Health is committed to learning from incidents. Because of your knowledge of this incident, a member of the review team will arrange a suitable time to discuss the incident from your perspective. You may have a support person with you during the interview if you wish. Prior to your meeting you may review the medical record and any local policies, procedures and guidelines.

The *Health Administration Act 1982* outlines specific responsibilities and restrictions on review teams. These include:

# Maintaining confidentiality

This meeting is confidential.

The review team is interested in hearing your perspective on the incident with a view to determining whether any system changes need to be made to improve patient safety. Although you may talk to your manager or Employee Assistance Program about the incident itself or how the interview made you feel, you must not discuss the contents of the meeting or the review with anyone outside the review team.

Members of the review team are required to maintain confidentiality in relation to this review. They must not make their own records or discuss the review with anyone who is not part of the review team. The information you tell the review team is for the purpose of the review team or for the purposes of preparing the reports.

# Privilege

The review team’s internal workings (verbal and written) are privileged*.* This means:

* The review team members cannot give evidence before any court or tribunal about documents or communications made for the dominant purpose of the review
* Any document that you (the interviewee) prepare, or any communication that you make, that is for the dominant purpose of assisting with the conduct of the review cannot be produced in a court or tribunal
* The review team’s findings and/or recommendations reports cannot be adduced or admitted as evidence in any proceedings (including coronial proceedings, or any proceedings in which it is claimed a procedure or practice was careless or inadequate)
* The review team’s findings and/or recommendations reports can, however, be given to the patient, carer or family or any other person.

# Individual clinicians

The review team does not have any authority to review concerns or complaints about an individual clinician. The review team is only looking into systems and processes.

If the review team suspects an incident mayinvolve professional misconduct or unsatisfactory professional conduct or possible impairment issues, they mustnotify the Chief Executive in writing and further actions will progress outside of this review process.

If the review team suspects unsatisfactory professional performance, they can notify the Chief Executive.

Further information is in Part 2A of the *Health Administration Act 1982.*

If you have questions, please contact *insert name, title and contact number.*

Thank you for your participation.

Yours sincerely

Signature

Name

Designation