

Harm (adverse) event submission portal user guide 2025



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Contact for enquiries: <u>harm.event@hqsc.govt.nz</u>

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Te Kāwanatanga o Aotearoa New Zealand Government

Introduction

This user guide provides instructions on navigating and using the portal for tasks relating to harm (adverse) events. It is designed for users who need to enter, update, and review event-related data within the portal.

Support

For assistance, please contact <u>harm.event@hqsc.govt.nz</u>

Guidance for applying the Healing, Learning and Improving from Harm Policy is available through the <u>Harm (adverse) event submission portal landing page.</u>

Accessing the Portal

If it is your first time accessing the portal, please follow the registration guide available through our <u>harm (adverse) events submission portal</u> landing page.

If you have already set up your account, then please proceed with the instructions below.

- Go to https://harmevent.hqsc.govt.nz/SignIn
- Log in by clicking on the Microsoft Entra ID button.

👻 🔇 Sign in	× +		
\leftrightarrow) C \widehat{m}	•• harmevents.powerappsportals.com/Si	gnIn?ReturnUrl=%2F	
	To Table Housers	Te Tāhū Hauora Health Quality & Safety Commission	Submit Harm Event Harm Event List
	→J sign in Sign in with a	an external account	
	Microsoft Entra	D	

Navigating the Portal

After logging in, you will be directed to the main page.

Note: Fields marked with an asterisk (*) are mandatory fields and you will not be able to submi	t
the form until they are completed.	

Te Tāhū Hauora Health Quality & Safety Commis	Submit Harm Event Harm Event List SION
be uploaded to the Te Tāhū Hauora website within 30 working days from the date the ease note the information you are entering for the harm (adverse) event has been agreed to by your organisation.	event is notified to the provider
Provider *	
Provider * Counties Manukau	
Counties Manukau	
Counties Manukau Provider type *	

Key Sections:

In the **top right corner of the screen**, you will see the following two tabs alongside your username:

- Submit Harm Event
- Harm Event List



To be uploaded to the Te Tāhū Hauora website within 30 working days from the date the event is notified to the provider Please note the information you are entering for the harm (adverse) event has been agreed to by your organisation.

User guide

Provider * Capital, Coast and Hutt Valley

Provider type * Hospital and Specialist Services

Submitting a new harm event

Click the Submit Harm Event tab to submit the events.



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To be uploaded to the Te Tāhū Hauora website within 30 working days from the date the event is notified to the provider Please note the information you are entering for the harm (adverse) event has been agreed to by your organisation.

<u>User guide</u>

Provider * Capital, Coast and Hutt Valley

Provider type *

Hospital and Specialist Services

Provider Information

- **Provider:** This field requires no manual entry and is automatically filled.
- Provider type: This field requires no manual entry and is automatically filled.

-	Provider *
	Capital, Coast and Hutt Valley
-	Provider type * Hospital and Specialist Services

Facility Click on the Facility search button to choose the Facility.

Provider *	
Counties Manukau	
Provider type *	
Hospital and Specialist Services	
Facility *	

Choose one record by clicking in the box next to the relevant Facility (or) type the Facility into the Search bar and click on the magnifier. Then, check the relevant box and press the **Select** button.

Te Tâhi Hauora	Lookup records	×
To be uploaded to the Te Tāh	Search	Q
<u>User guide</u>	Choose one record and click Select to continue ✓ Facility ↑	Î
Part A Part B	Accadia Manor Rest Home Ascot Care Home	
Provider *	Ashford Care Home	
BUPA Provider type *	Ballarat Care Home Bethesda Rest Home & Hospital	
Aged Residential Care Services	Cashmere View Rest Home and Hospital	•
Facility *	Select Cancel Remove	e value

OR

	Lookup records	£
be uploaded to the Te Tāl ase note the information you are entering	park Q	2
<u>ser guide</u>	Choose one record and click Select to continue ✓ Facility ↑	i
Provider *	Amberlea Hospital and Rest Home	ш
CHT Care	Beachhaven Care Home	•
Provider type *	Carnarvon Private Hospital	
Aged Residential Care Services	CHT Acacia	
Facility *	CHT Bernadette	
	CHT Glynavon	
Your event reference number		•
	Select Cancel Remove value	ı
Date event occurred *		

I	Look	kup records					×
「āł ring					park		٩
nng	Choose	e one record and click Select to continue					
	\checkmark	Facility ↑					
	\checkmark	Parkhaven Care Home					
es							
							- 1
er						[
			(Select	Cancel	Remove v	alue

Your event reference number: Enter the unique event reference number for this event. This could be the reference number generated by your organisation's incident management system (e.g. Safety First, Datix). If your organisation does not have an incident management system, please create a reference number for the submitted event.

Facility *	
	a
Your event reference number *	
Date event occurred *	
24 June 2025	1

Date event occurred: Click on the calendar icon to open the calendar pop up and select the date the harm event occurred. If the harm occurred over a period of time, select the date at the beginning of this period.

Date event occurred *							¥
09 June 2025							
Internal notification date *	<		Ju	ne 202	25		>
09 June 2025	Su	Мо	Tu	We	Th	Fr	Sa
	1	2	3	4	5	6	7
Provisional SAC rating *	8	9 _	10	11	12	13	14
Select	15	16	17	18	19	20	21
	22	23	24	25	26	27	28
Has the harm experienced by the consumer informed the provisional SAC rating? *	29	30	1	2	3	4	5
Select	6	7	8	9	10	11	12

Internal notification date: Click on the calendar icon to open the calendar pop up and select the date the event was internally reported. This is the date when an incident form was completed, or the harm event was escalated for review.

09 June 2025							í
Internal notification date *							
09 June 2025							
Provisional SAC rating *	<		Ju	ne 202	5		
Select	Su	Мо	Tu	We	Th	Fr	5
Has the harm experienced by the consumer informed the provisional SAC rating? *	8	2	3 10	4 11	5 12	6 13	1
Select	15	16	17	18	19	20	2
Relevant SAC guide for the current harm event *	22	23	24	25	26	27	2
Relevant SAC guide for the current narm event "	29	30	1	2	3	4	
	6	7	8	9	10	11	1

Submitting an Always Report and Review (ARR)

Note: This question is only visible to private hospital and Health New Zealand (Health NZ) submitters. If you are NOT a private hospital or Health NZ submitter, please proceed to the instructions in **Dark blue** Provisional SAC rating.

• On ARR List: Indicate if the event is on the <u>ARR list</u> (Yes/No).

If yes, please follow instructions in teal:

 Provisional Severity Assessment Code (SAC) rating allows a dropdown selection of 1-4.

On ARR list * O No ® Yes Provisional SAC rating *		٦
3	×	
Select		
1		
2		
3		
4		

• Has the harm experienced by the consumer informed the provisional SAC rating? Select Yes or No.

The **ARR category** field becomes mandatory. Click on the magnifier and check the box next to the relevant option.

On ARR list * O No Ves	
Provisional SAC rating *	
Select	~
ARR category *	٩

If it is a seclusion event, you will be asked one further question:

Was the secluded person under the Mental Health (Compulsory Assessment and Treatment) Act 1992?

Select Yes or No from the dropdown.

< '

If the event is not on the ARR list, or you are not submitting a harm event for Health NZ

• **Provisional Severity Assessment Code (SAC) rating** allows a dropdown selection of 1 or 2.

Dn ARR list *	
Nways Report and Review list	
No $^{\circ}$ Yes	
rovisional SAC rating *	
Select	~
Select	
Select	
1	
2	

- Has the harm experienced by the consumer informed the provisional SAC rating? Select Yes or No.
- Relevant SAC guide for the current harm event: Select the SAC guide that is relevant to the harm event you are currently submitting. SAC guides can be found on our website: <u>Severity assessment code (SAC) examples.</u>

	Select	rm experienced by the consumer informed the prov AC guide for the current harm event *	visional SAC rating? *	~ Q
	Look	kup records		×
			Search	٩
	Choose	e one record and click Select to continue		
	~	SAC guide ↑		
v th		Aged residential care		
y th		Healthcare-associated infection		
		Hospice		
t the			Select Cancel Re	emove value

• Harm event from SAC guide: Select the specific event description that relates to the harm event you are submitting. If your harm event does not fit the SAC categories listed, please email <u>harm.event@hqsc.govt.nz</u>.

Rele	evant SAC	guide for the current harm event *
Н	ospital and	specialist services X Q
		rom SAC guide * vent does not fit the SAC categories listed please email harm.event@hqsc.govt.nz for further support.
	Look	up records
l		Search Q
th	Choose	one record and click Select to continue Classification ↑
		Advance directive not accessed and/or not followed, which leads to the delivery of the treatment the person stated they do not want
Im		Death due to suicide or self-harm by resident
		Death or severe harm as a result of a care plan not being followed (eg, choking when resident not given a soft/liquid diet as recommended)
the		Delayed diagnosis resulting in treatment options being limited to a palliative care pathway.
		Delayed recognition of resident's deterioration medical assistance when escalation is required within their goals of care resulting in CPR, severe loss of function of death.
		Select Cancel Remove value

If you are submitting a **pressure injury** event you will see two extra questions:

- **PI stage:** select the stage of the pressure injury from the dropdown.
- Has a wound care specialist been involved in the care: Select yes or no.

PI stage *	
Select	~

Did the consumer die? - select yes or no from the dropdown



• Age, Gender, and Ethnicity 1: Click the search and select the appropriate option from the lookup records

P	® No [©] Yes	-0
	Age * Age Launch lookup modal	
P		9
	Gender*	
Ó	0	Ó

Ethnicity 2 and Ethnicity 3 - These are optional fields

Et	hnicity 1 *
	New Zealand European
Et	hnicity 2
	hnicity 2 Select
Et	hnicity 3
	hnicity 3 Select

Click Submit when all the required fields are completed.



If your submission was successful, you will see the message 'Successfully submitted Part A'.

To be uploaded to the Te Tāhū Hauora website within 30 working days from the date the event is notified to the provider
User guide
Successfully summited Part A X

You will also receive email confirmation that your submission has been received saying: "Thank you! We have received your submission of a new harm (adverse) event."

Submitting a Part B for an existing harm event

Where to enter Part B details

All part B details must be uploaded to the portal within **120 working days** from the date the event was notified to the provider.

If you have previously submitted a Part A and you would like to complete the Part B for this event, go to the **Harm Event List** page.

		Submit Harm Event
Te Tähü Hauora Hadin Qudiya 6 Saley Constitution	Te Tāhū Hauora Health Quality & Safety Commission	Harm Event List Ar

To be uploaded to the Te Tāhū Hauora website within 30 working days from the date the event is notified to the provider Please note the information you are entering for the harm (adverse) event has been agreed to by your organisation.

User guide

Provider * Capital, Coast and Hutt Valley

Look for the reference code of the relevant event. You may need to search or scroll (shown in blue below) to find the event. Then, click the three dots next to the Event Status column (circled in red below).

Te Tāhū Hauora Health Quality & Safety Commission															
↓ Download	Download		≣ List Even		🗏 List Events View 🗸 📿		≣ List Events View $~~$			≣ List Events View ∨ 🗘 Search			🗮 List Events View 🗸 📿 Search		\supset
Event Status \vee	Provider type \smallsetminus	Facility \vee	Your reference code \vee	Date event occur $\downarrow\vee$	Internal notification date $^{\smallsetminus}$	Classification \sim	Provider ~								
Part A submit	Aged Resident	Ashford Car	789	06 June 2025	05 June 2025	Fall in a contin	BUPA								
Part A submit	· Aged Resident	Ashford Car	3	06 June 2025	05 June 2025	Fall resulting i	BUPA								
Part A submit	Aged Resident	Ascot Care	3	06 June 2025	05 June 2025	Death or sever	BUPA								
Part A submit	Aged Resident	Ascot Care	1234	06 June 2025	05 June 2025	Blindness follo	BUPA								
Part A submit	Aged Resident	Ashford Car	134	06 June 2025	05 June 2025	Advance direct	BUPA								
Part A submit	· Aged Resident	Accadia Ma	6	05 June 2025	05 June 2025		BUPA								
Part A submit	Aged Resident	Willowbank	345	05 June 2025	04 June 2025	Stage 3, 4 or u	BUPA								

Then click 'Edit Part B' from the options that drop down.

\downarrow Download							
Event Status \vee	Facility \smallsetminus	Your event reference n $^{\smallsetminus}$	Date event occur \downarrow \checkmark	Internal notification date $^{ imes}$	Date submi $ \lor $	Classification \vee	Provisional SA
Part A submit	··· Accadia Ma	HARM123	24 June 2025	23 June 2025	24 June 2025	Amputation of	1
Complete	 View details Edit Part A 	1234	12 June 2025	14 June 2025	24 June 2025	Stage 3, 4 or u	2
	Edit Part B						

Now you can follow the instructions below to complete the Part B.

Filling out the Part B

Event Details

• **Final SAC rating:** Select the final SAC rating from the dropdown list. If, following the review, the harm event no longer meets the criteria for a SAC event select 'Non-SAC' event.

Select	~
Select	
1	
2	
3	
4	

• Would you like to de-notify the event: Indicate whether the harm event should be denotified (*Yes/No*).

Note: De-notification is applicable for Part As that have already been submitted, but on review, it has been confirmed that the event is no longer a SAC 1, 2 or ARR but is now a SAC 3, 4 or non-SAC event. Meaning, it no longer requires notification to Te Tāhū Hauora.

- If Yes Provide the reason for de-notification in the **De-notification reason** box below.
- o If No go to the next question 'Date review completed'

Would you like to de-notify the event?

Date review completed *

24 June 2025

Would you like to de-notify the event ? * No * Yes De-notification reason	
Date review completed *	
07 May 2025	

• **Date review completed:** Click on the calendar icon and select the date the review was finalised within your organisation. Future dates cannot be entered.

Date review completed *

24 June 2025		i
--------------	--	---

• **Review Methodology Used:** Click the magnifying glass to search and then select methodology used from the list. If the methodology used is not listed select 'Other'.

Would you like to de-notify the event ? * No O Yes	
Date review completed *	
07 May 2025	
Review methodology used *	Review methodology used Launch lookup modal
	Q

If you are reporting a seclusion event, you will need to indicate this is a seclusion event then answer four additional questions as seen below.

Note: This question is only visible to private hospital and Health New Zealand (Health NZ) submitters. If you are NOT a private hospital or Health NZ submitter, please proceed to the next instructions – Identifying learning opportunities.

- Is this a seclusion event?: Select the option (Yes/No).
- 1. Was the seclusion event longer than 24 hours cumulative within 28 days?: Select the option from the list (*Yes/No*).
- 2. Did the event comply with the Guidelines for reducing and eliminating seclusion and restraint under the Mental Health (Compulsory Assessment and Treatment) Act 1992?: Select the option from the list (*Yes/No*).
- 3. Did the review include consumer and/or whānau participation?: Select the option from the list (Yes/No).
- 4. What influencing factors contributed to the seclusion event?: Select the option from the list.

Was the seclusion event longer than 24 hours cu	mulative within 28 days? *
Select	~
Did the event comply with the Guidelines for rec Health (Compulsory Assessment and Treatment)	lucing and eliminating seclusion and restraint under the Mental Act 1992? *
Select	`
Did the review include consumer and/or whānau	participation? *
Select	``

Identifying Learning Opportunities

• Up to six learning opportunities can be entered into the six boxes.

Learning opportunities 1
Learning opportunities 2
Learning opportunities 3
Learning opportunities 4
Learning opportunities 5
Learning opportunities 6

• Anonymised Report Submission: Indicate whether the anonymised report has been submitted (Yes/No).

Anonymised report submitted * [®] No ^O Yes

Uploading the Final Review Report

- Attach full anonymised report (PDF only).
- Maximum: 1 file, up to 5MB

Attach full anonymised review report (PDF only)		
You can upload a maximum of 1 file, up to 5MB.		

Like attaching a file to an email, click Upload. Navigate in your files to find your anonymised review report and click Open to upload the file.

Organize	<u>^</u>			≣ • [
> •	Name	Status	Date mo	dified	Туре
- 1		No items match your	search.		
-					
1					
				_	
	File name:		Adobe Acr	robat Document	v
			Open	Car	ncel

The following image shows a successful file upload:

tach full anonymised review report (P u can upload a maximum of 1 file, up to ↑ Upload			
🔒 HQSC L Final.pdf (1.6 MB)	圎		

For the question This harm (adverse) event has been approved for transmission by the organisation's chief executive (or equivalent) or senior delegate who endorses the accuracy and content of the document on their behalf, choose yes or no. If 'yes' is selected the event status will show as 'Complete' in the Harm Event list.

Harm Event List page

View details or edit event details

To view or edit a previously submitted part A or B, navigate to the **Harm Event List** page. You can use the search bar to search the reference code of the event you would like to edit. To edit an event, click on the three dots to the right of the 'Event Status' column.

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Submit Harm Event Harm Event List

Stage 3, 4 or u... 2

24 June 2025

Any harm (adverse) ev More details to follow.	vents data sub	mitted before 1 July 2	025 using the old po	ortal will not show in thi	s event list un	til soon after 1 J	iuly 2025.
⊥ Download				≣ (.ist Events View $ imes $	↓ C Search	
Event Status \checkmark	Facility \vee	Your event reference n $^{\smallsetminus}$	Date event occur \downarrow \vee	Internal notification date $^{\smallsetminus}$	Date submi $ \smallsetminus $	Classification ${}^{\checkmark}$	Provisional SA
Part A submit 💮	Accadia Ma	HARM123	24 June 2025	23 June 2025	24 June 2025	Amputation of	1

14 June 2025

12 June 2025

Click Edit Part A or Edit Part B.

Ascot Care ... 1234

Complete

Part A submit	··· Accadia Ma	HARM123	24 June 2025	23 June 2025	24 June 2025	Amputation of 1	
Complete	 View details Edit Part A 	1234	12 June 2025	14 June 2025	24 June 2025	Stage 3, 4 or u 2	
_	► 🖉 Edit Part B						

A pop up will appear where you can make any changes.

B Hauora	т. т		Submit Harm Even	nt H	larm Eve	ent List
Commission	Edit	record			×	
⊥ Down		Gender *				
nt Status \smallsetminus		Female / Wahine	×	۹		Provider
: A submit.		Ethnicity 1 *				3UPA
		New Zealand European	×	۹		
		Ethnicity 2				
				۹		
		Ethnicity 3				
				۹		
		This harm (adverse) event has been approved for transmission by the organisation's chief ex or senior delegate who endorses the accuracy and content of the document on their behalf O No ® Yes		nt)		
	_					

At the bottom of the page Click **Save** to save your changes.

Download data

To download submitted harm event data, click the **Download** button. This will save as an excel workbook to your computer.

⊥ Download ⊥ List Events View ∨ ↓ ○ Search							
Event Status $ imes$		Provider type $ \smallsetminus $ Facility $ \lor $	Your reference code $ \smallsetminus $	Date event occur $\downarrow{\smallsetminus}$	Internal notification date \vee	Classification \vee	Provider \vee
Part A submit		Hospital and S	lakes456	25 June 2025	26 June 2025		Lakes
Part A submit		Hospital and S	E0789	11 June 2025	05 June 2025		Lakes
Part A submit		Hospital and S	17	06 June 2025	06 June 2025	Fall in an inpat	Lakes
Both submitted		Hospital and S	test916	06 June 2025	05 June 2025	Delay in transf	Lakes

View more columns

Drag the black bar at the bottom of the Harm Event List table to scroll across and view more columns.

↓ Download						Elist Events View \checkmark \checkmark Search			
vent Status $^{\smallsetminus}$		Provider type $\scriptstyle{\searrow}$	Facility \smallsetminus	Your reference code $^{\smallsetminus}$	Date event occur \downarrow \checkmark	Internal notification date $^{\smallsetminus}$	Classification \vee	Provider $^{\vee}$	
Part A submit		Hospital and S		lakes456	25 June 2025	26 June 2025		Lakes	
Part A submit		Hospital and S		E0789	11 June 2025	05 June 2025		Lakes	
Part A submit		Hospital and S		17	06 June 2025	06 June 2025	Fall in an inpat	Lakes	
Both submitted		Hospital and S		test916	06 June 2025	05 June 2025	Delay in transf	Lakes	

Filter or sort the data

To filter or sort the event list, click on the arrow next to the column you would like to sort or filter.

Click the down arrow as shown in the screenshot, sort the events to be ascending or descending, or filter the events. The **Filter by** function uses standard search criteria terms.

Te Table Hausers	Γāhū Hauora	ommission	Submit Harm Event Harm Event List Srinivasan 👻							
Any harm (adverse) events data submitted before 1 July 2025 using the old portal will not show in this event list until soon after 1 July 2025. More details to follow.										
List Events View ∨										
Event Status \vee	Facility \checkmark	Your event reference n \vee	Date event occur $\downarrow \lor$	Internal notification date \vee	Date submi \vee	Classification \vee	Provisional SA			
↑ Sort A to Z	Accadia Ma	HARM123	24 June 2025	23 June 2025	24 June 2025	Amputation of	1			
↓ Sort Z to A	Ascot Care	1234	12 June 2025	14 June 2025	24 June 2025	Stage 3, 4 or u	2			
√ Filter By		-								