HENDRICK HEALTH SYSTEM

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| **Origination:** | *3/18/2016* |
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| **Next Review:** | *3/18/2019* |
| **Owner:** | *Adalia Provance: Contract Manager* |
| **Policy Area:** | *Administrative* |
| **References:** | |

# Event Reporting, 1.1004

## PURPOSE:

An event report (**"First Report"**) will be completed on any Sentinel Event, Adverse Event or Medication Event, which involves patients, visitors, volunteers, students, employees, or medical and ancillary staff members. It is the responsibility of individuals who are employed by or affiliated with Hendrick Medical Center and its affiliates (**"Hendrick"**) to report events. It is recognized that patients may have undesired outcomes even when receiving routine, expected and appropriate care. Such outcomes are not within the reporting requirements of this Policy.

To identify those events where actions may or could be taken to improve outcomes, modify policies and/or procedures; or provide education that will foster improved safety for patients, visitors, volunteers, students, employees, medical and ancillary staff members; and to facilitate timely identification and resolution of risks in an effort to reduce or prevent the potential for injury or loss.



## DEFINITIONS:

1. **SENTINEL EVENTS** – All events involving death or serious (life threatening) physical or psychological injury, or the risk thereof.
2. **ADVERSE EVENTS** – Any event, which is not consistent with the routine operation of Hendrick or the routine, expected and appropriate care of a particular patient, including unexpected events, which has caused or which has the potential to cause harm or injury to patients, visitors, volunteers, students, employees or medical and ancillary staff members. **Note: For the purposes of the Texas Department of State Health Services, a patient-related adverse event may also be referred to as a medical error.**
3. **MEDICATION EVENT** – Any event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the health care professional, patient, or consumer. Such events may be related to professional practice, health care products, procedures, and systems, including prescribing, order communication, product labeling, packaging, nomenclature, compounding, dispensing, distribution, education, monitoring and use.

## POLICY:

1. Employees who observe, become aware of, or learn of an unplanned or unexpected event will report the event through the Event Management System as soon as possible, but generally within twenty-four (24) hours of the event occurring.

2. All SENTINEL EVENTS will be reported to Patient Safety Office as soon as possible. SENTINEL EVENTS occurring after hours and on weekends will be reported to the department director, manager, or designee and the House Supervisor. The House Supervisor will report the event to the Administrator on-call. The department supervisor will report the event to Risk Management the next business day.
3. The Director of Performance Improvement or Patient Safety Officer will notify the appropriate administrators of SENTINEL EVENTS. The Patient Safety Officer, on behalf of the Patient Safety Committee, and pursuant to committee privilege, will begin an investigation on all SENTINEL EVENTS.
4. A Root Cause Analysis (RCA) will be performed on all SENTINEL EVENTS utilizing The Joint Commission RCA tool.
5. Events will be reviewed and evaluated by the Patient Safety Officer, or designee on behalf of the Patient Safety Committee, and/or Medical Executive Commitee. A determination will be made as to whether an event appears to be a SENTINEL EVENT and needs further immediate review.
6. Opportunities for performance improvement activities will be forwarded to the Patient Safety Committee and/or the Medical Staff Performance Improvement Committee and/or Medical Staff Performance Review Commitee for consideration
7. For non-sentinel events, employees will report observed events to the appropriate supervisor and, if applicable, the patient and physician. The supervisor will initiate corrective action, if indicated, as well as document actions taken in the Event Management System within four (4) business days of the event.
8. Employee-related events will be reported in accordance with Policy entitled "On-the-Job Injury and Illness and Modified Duty Positions."
9. In the event Risk Management or the supervisor become aware of a SENTINEL, ADVERSE or MEDICATION EVENT, which has not been reported, further investigation will be conducted and a report submitted through the Event Management System.
10. All members of the Medical and Ancillary Staffs who observe an event should complete a First Report through the Event Management System as soon as possible or report the event via the Medical Staff Hotline (See Medical Staff PI/PR Manual). Staff who observe an event but do not have access to the Event Management System should document the event in writing and submit the report to their director, manager, or designee to complete a First Report through the Event Management System.
11. Volunteers will report events to the Manager of Volunteer Services as soon as possible. The Manager of Volunteer Services will complete a First Report through the Event Management System.
12. Events involving visitors should be reported as soon as possible to the employee's department director, manager or their designee. The department director, manager or designee will complete a First Report through the Event Management System.
13. Events involving physicians will be reported to the department director of the area where the event occurred. The department director will complete an Event Report through the Event Management System.
14. All First Reports are strictly confidential and privileged, and should not be copied or distributed except as authorized by the Patient Safety Officer or Director of Performace Improvement.
15. In no instance will the First Report become a part of the Medical Record.

## Attachments:

No Attachments