

SUBJECT: **INCIDENT REPORTING**
APPROVED BY: Chief Executive Officer _____
EFFECTIVE DATE: 2007 06
REVISED DATE:
REVIEW DATE:

Purpose

- To ensure that any incident is promptly reported and investigated, and that measures are taken to prevent reoccurrence.
- To enhance the quality of client care through assisting in the provision of a safe (risk reduced) environment.
- To allow prompt response and follow-up by the Employee Development, Training & Health Department to employee incidents and safety concerns.
- To target problem areas through trend analysis.
- To promote open channels of communication throughout all levels within the organization on an as needed basis.
- To allow prompt response by the Patient Safety & Quality Department to potential liability exposure.

Policy/Standard

It is the policy of Labrador Grenfell Health to document and report immediately all near misses and incidents as defined in the guidelines set forth in this policy.

Materials Required

- Client Incident Report: Form # PSQ-5-20-1 (Blue)
- Medication Incident Report: Form # PSQ-5-20-2 (Yellow)
- Employee Incident/Accident Report: Form # EDTH-7-10-1 (Orange)
- Safety Concern Form: Form # OHS-1-10-1 (Green)
- Client Record

Definitions

Incidents:

Events that are unusual, unexpected, may have an element of risk, or that may have a negative effect on clients, groups, employees or the organization.¹

Near Miss:

An event or situation that could have resulted in an accident, injury or illness, but did not, either by chance or through timely intervention.¹

- All near misses are to be reported using the appropriate Incident Report Form.

Adverse Event:

An adverse event can be defined in one of three ways: 1. An unexpected and undesirable incident directly associated with care or services provided to the patient. 2. An incident that occurs during the process of providing health care and results in patient injury or death. 3. An adverse outcome for a patient, including an injury or complication.¹

Sentinel Event:

An unexpected incident related to system or process deficiencies, which leads to death or major and enduring loss of function for a recipient of health care services. Major and enduring loss of function refers to sensory, motor, physiological or psychological impairment not present at the time services were sought or began. The impairment lasts for a minimum of two weeks and is not related to an underlying condition.¹

- A Safety Concern Form must be completed for any OH&S issues.

Procedure

A. Client Incidents (Form # PSQ-5-20-1 / Blue)

The **Person Discovering the Incident** shall:

- Report the incident to the immediate supervisor at once.
- Complete an Incident Report at the earliest possible time ensuring client's condition after the incident is indicated and submit the form to the immediate supervisor.
- Document only the facts of the incident on the client chart. No mention should be made on the client chart of the incident report.
- Encourage outpatients and visitors to be seen in the ER/Outpatient Department.
- Document on the Incident Report Form, if the individual refuses to be seen by a physician or nurse.

The **Immediate Supervisor** shall:

- Initiate any action and as soon as possible, notify the attending physician or doctor-on-call of the incident (as applicable).
- Investigate and implement corrective action **immediately** following the incident.

¹ All definitions are taken from: Canadian Council on Health Services Accreditation, Glossary (6th ed. 2007)

- Contact the Risk Manager via telephone about all incidents indicated as serious. Risk Managers located at CWJ, LHC and Curtis Memorial (after hours contact Nursing Site Coordinator / Supervisor).
- Notify his/her immediate supervisor.
- Ensure that the completed Incident Report Form is forwarded to the Risk Manager within 24 to 48 hours following the incident.

B. Employee / Volunteer Incidents (Form # EDTH-7-10-1 / Orange)

The **Injured Employee / Volunteer** shall:

- Immediately report the injury to his/her immediate supervisor or designate.
- Provide the supervisor with details regarding; how, when, where the injury occurred and the names of any witnesses.²
- Complete an Employee Incident/Accident Report as soon as possible and submit to the immediate supervisor or designate.
- Seek timely medical treatment and advise the physician that you were injured on the job.
- Complete WHSCC Form 6 “Worker’s Report of Injury” within 72 hours of injury. Part 1 to be completed in all cases involving wage loss and/or a visit to physician. Part 2 to be completed in all cases involving loss time greater than the day of the injury.

The **Supervisor** shall:

- Ensure that employee gets first aid or medical treatment if necessary.
- Complete the Immediate Supervisor’s Report of investigation and action taken section of the Employee Health Incident/Accident Form and forward to the Employee Health Nurse.
- Investigate the occurrence and implement any corrective action(s) to prevent reoccurrence of the occurrence.
- Ensure WHSCC Form 6 “Worker’s Report of Injury” is available to employee.
- Complete WHSCC Form 7 “Employer’s Report of Injury” and forward to Human Resources within 72 hours of the injury. Part 1 to be completed in all cases involving wage loss and/or visit to physician. Part 2 to be completed in all cases involving loss time greater than the day of the injury.

² 2007, Employee Development, Training & Health Policy and Procedure Manual. Policy 7-10, Employee Incident Reporting & Investigation.

C. Incidents Involving Visitors (Form # PSQ-5-20-1 / Blue)

The **Employee Discovering the Incident** shall:

- Accompany the individual to the Emergency/Outpatient Department (if applicable).
- Contact a nursing staff member to accompany the individual if he/she is in distress.
- Notify the facility charge person of the incident as soon as possible.
- Complete an Incident Report form at the earliest possible time.
- Submit the Incident Report form to the supervisor/manager of the department where it occurred.

D. Medication Incidents (Form # PSQ-5-20-2 / Yellow)

The **Person Discovering the Incident** shall:

- Report the incident to the immediate supervisor **at once**.
- Complete a Medication Incident form and submit to the immediate supervisor at the earliest possible time.

The **Immediate Supervisor** shall:

- Initiate any nursing action required and as soon as possible, notify the attending physician or doctor on call of the incident.
- Interview the person responsible for the incident.
- Notify his/her immediate supervisor.
- Forward the completed Incident Report form to the Risk Manager within 24 to 48 hours following the incident.

E. Other Incidents (Form # PSQ-5-20-1 / Blue)

Any event that is unusual or unexpected is to be reported on the Incident Report form, following the usual process as outlined on the form.

The Incident Reporting process shall apply in reporting any property damage or theft. Upon receipt of the Incident Report form, the Risk Manager will notify the Director of Materials Management & Contract Services for further investigation and insurance reporting purposes.

F. Follow up of Incident Reports

The **Risk Manager** shall:

- Review the incident report to ensure follow up has been completed by the supervisor/manager. If necessary, discuss the incident with the immediate supervisor/manager and recommend any further action to prevent recurrence.

- Meet with or telephone the employee involved in the incident, if deemed necessary.
- Investigate the incident further, as deemed necessary.
- Forward Medication Incident logs to the Pharmacy and Therapeutic Committee / pharmacists for review.
- Review incidents to identify:
 - Major and minor incidents that occur in clusters or develop significance because of trends or groupings.
 - Significant occupational health and safety hazards.
- Develop a monthly summary of the review, including any corrective action already recommended/implemented.
- Correspond on a monthly basis with supervisors / managers regarding incidents / trends occurring in their respective areas.
- Report monthly incident stats to the Regional or Site Occupational Health and Safety Officer / Committee as applicable.
- Report serious/significant incidents to the Regional Director Patient Safety & Quality and the appropriate VP who will bring them to Senior Executive.
- Report serious incidents to the corporation's insurance company and liaise with the corporate lawyer if legal action is anticipated.
- Assist departments, upon request, with the investigation and "loss control" activities of significant incidents. (Adverse Event/Sentinel Event Policy – PSQ-5-30)

The **Employee Health Nurse or Designate** shall:

- Review the incident report to ensure follow up has been completed by the supervisor/manager. If necessary, discuss the incident with the immediate supervisor/manager and recommend any further action to prevent recurrence.
- Meet with or telephone the employee involved in the incident, if deemed necessary.
- Investigate the incident further, as deemed necessary.
- Complete *Employee Health* section of the Employee Incident/Accident Report form.
- Forward form to Risk Management for review.
- Complete a monthly log of Employee Occurrence Report and forward to Regional Director of Employee Development, Training and Health at month end.

The **Regional Director of Patient Safety & Quality** shall:

- Review monthly logs/summaries of incidents on a regional basis to identify trends or areas of concern.
- Report trends/areas of concern to Quality Council, and facilitate the implementation of CQI Process Teams as necessary to address the concern(s).

The **Regional Director of Employee Development, Training & Health** shall:

- Review monthly logs/summaries of employee incidents/accidents on a regional basis to identify trends or areas of concern.
- Forward an overview of employee occurrence(s) to the Patient Safety/Quality Regional Director each month.

The **Senior Executive Committee** shall:

- Review all serious incidents and the corrective measures taken.
- If necessary, make recommendation for further corrective action.

The **Quality Council** shall:

- Make necessary recommendations for further corrective actions in regard to incidents of concern/trends.
- Forward information to the Board through the CEO.

The **Pharmacy and Therapeutic Committee / Pharmacist** shall:

- Review all medication incidents and forward recommendations, if necessary to the Risk Manager.

References

Paul Allen, Risk Management Consultant

Christopher Wilson, Strategies in Health Care Policy

Risk Management Recommendations – Marsh and McLennan

Current Policy and Procedure Manual

Canadian Council on Health Services Accreditation Glossary 6th Edition, 2007

2007, Employee Development, Training & Health Policy and Procedure Manual

NL Association of Healthcare Risk Managers Patient Safety Manual