Safety Event Submission & Follow-up Tool

INSTITUTIONAL REQUIREMENTS:

- III.B.1. Patient Safety: The Sponsoring Institution must ensure that residents/fellows have:
- III.B.1.a) access to systems for reporting errors, adverse events, unsafe conditions, and near misses in a protected manner that is free from reprisal;
- III.B.1.b) opportunities to contribute to root cause analysis or other similar risk-reduction processes.

COMMON PROGRAM REQUIREMENTS:

- VI.A.1.a).(1) Culture of SafetyVI.A.1.a).(1).(a) The program, its faculty, residents, and fellows must actively participate in patient safety systems and contribute to a culture of safety.
- VI.A.1.a).(2).(a) Residents, fellows, faculty members, and other clinical staff members must:
- VI.A.1.a).(2).(a).(i) know their responsibilities in reporting patient safety events and unsafe conditions at the clinical site, including how to report such events; and,
- VI.A.1.a).(2).(a).(ii) be provided with summary information of their institution's patient safety reports.

GMEC REQUIREMENTS:

• By the end of their first year of training at SIU, all residents must provide de-identified documentation that they have submitted an electronic patient safety event via the official electronic reporting mechanism of SIU HealthCare or Affiliated Hospitals. It will be the responsibility of the program to monitor this.

Report, Report, Report

| ■ Workplace Violence Events* | ☐ Medication errors | Unprofessional Behavior* |
|---|--|---|
| ☐ Verbal Abuse | Adverse drug reactions | Abusive or intimidating behavior |
| Repeated difficult, disruptive behavior | 7 Rights of Medication | Defamatory statements |
| Drug seeking behaviors | ☐ Diagnostic Imaging | Destruction or removal of property |
| ☐ Medical Care and Treatment | ☐ Exam problems (wrong site, order issues, | Clinical practice or prescribing issues |
| ☐ Missed/delayed diagnoses | incorrect patient, incorrect/incomplete study | Sexual misconduct |
| Unexpected/adverse clinical outcomes | Delayed results | Suspected alcohol or substance abuse |
| ☐ Unexpected death | ☐ Radiation exposure | ☐ Employee/Student Injuries |
| ☐ Inadequate evaluation/treatment | ☐ Interpretation issues | ☐ Needlestick/bloodborne pathogen exposure*** |
| ☐ Lab/Specimen | ☐ Infection Control Issues | ☐ Exposure to hazardous materials (chemical spills) |
| ☐ Delays in testing/reporting | Hand hygiene compliance issues | ☐ General Liability |
| ☐ Lost specimens | Sterilization issues | ☐ Falls (patients, visitors, staff) |
| ☐ Labeling issues | Suspected infections | ☐ Equipment issues |
| ☐ Wrong tests | Isolation breaches/cleanliness of facility | • • |
| ☐ Critical values not called | ☐ Patient Privacy** | □ Patient Experience□ Complaints regarding quality of care/treatment |
| ☐ Surgery/Procedure | ☐ HIPAA Violations | Communication difficulties |
| ☐ Surgical complication of care (surgical site infection) | Privacy and/or breach of patient confidentiality | |
| Complications of sedation | Errors in mailing or faxing | ☐ Good Catch |
| ☐ Contamination/breach of infection control practices | □ Obstetrics | * Courte at UD/Convenience monded unique to outpuin |
| ☐ Procedural informed consent | ☐ Prenatal management | * Contact HR/Security as needed prior to enterin ** Contact Compliance for questions |
| ☐ Compliments/Job Well Done | ☐ Obstetrical complications When in | *** Contact Employee Health Nurse immediately |

doubt, report it out



SIU AL FRT

Citrix Gateway Bookmarks

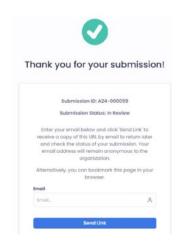
Details

SIU School of Medicine – Springfield

 ALERT (Automated Logging and Event Reporting Tool) – and incident management system. **ALERT Icons**



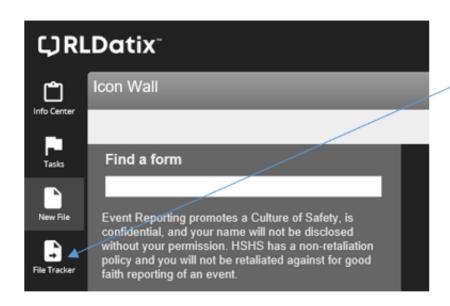
 After submitting a report, you are given an option to receive a link to check the status of a report. This does not give details of follow-up.



HSHS St. John's Hospital

St. John's

After you have logged into the IRIS system and completed a file, choose the File Tracker icon on the lower left:

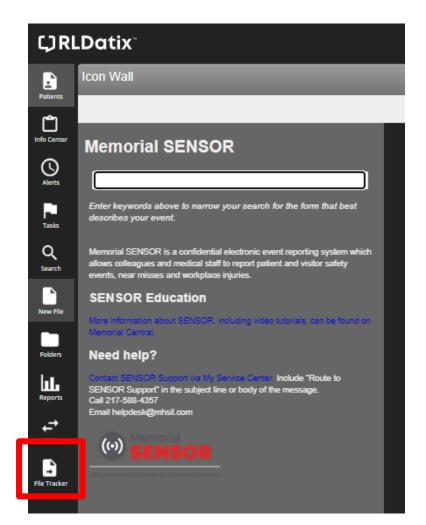


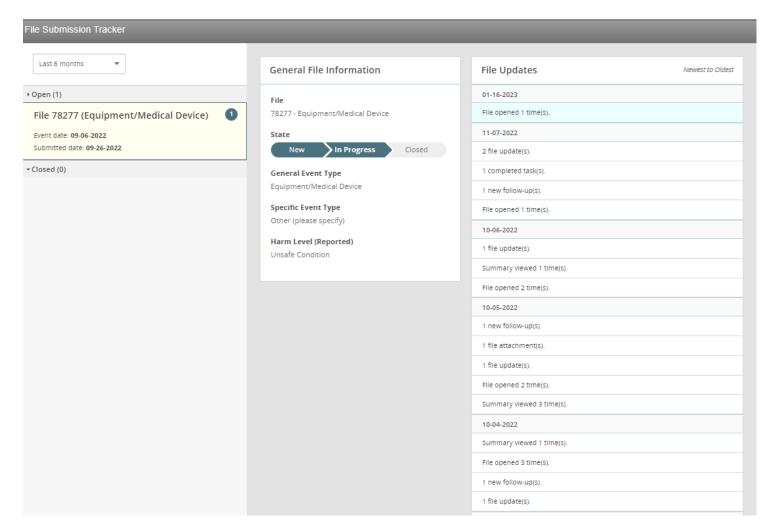
Take a screen capture of your *File Tracker* by pressing the *Print Screen (PrtScr)* button on your keyboard. Open a word document and paste the screen print. Print the word document or send it as an email attachment to the program director. Do not paste the screen captures directly into an email.

Make sure there is not any confidential or personal health information on the screen captures.

Springfield Memorial Hospital Decatur Memorial Hospital

SMH & SIU will provide quarterly reports directly to the GME office, who will enter this information into New Innovations. You do not have to provide anything to your program for submissions made into SMH SENSOR or SIU ALERT systems.

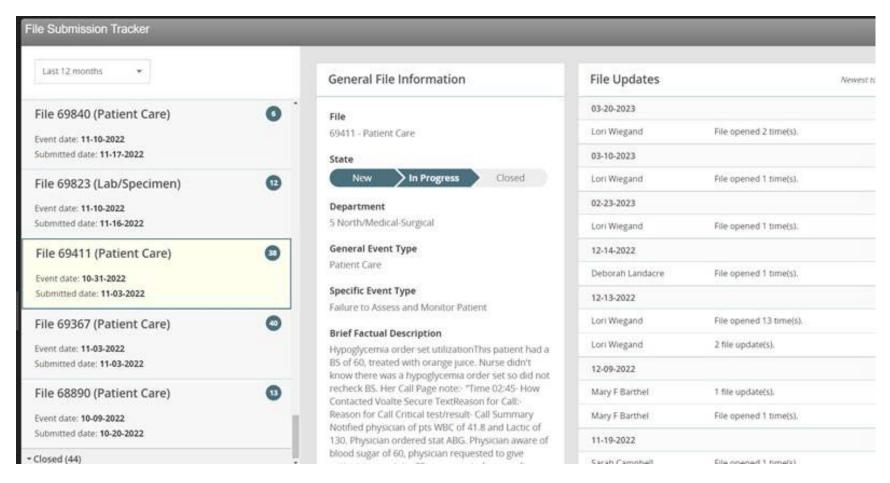




<u>Alton Memorial Hospital</u>

- Follow-up is given to the nurse managers who follow-up with resident/fellow.
- Future plans to have a "Follow-up" icon for resident/fellow to look up submission action.
- Program Coordinators, have your residents take a screen shot to show you their submission (without Patient Information). This way you can enter it into New Innovations and forward to OGME. This will ensure your program will be in compliance with ACGME & GMEC requirements.

Blessing Hospital - Quincy



Program Coordinators, have your residents take a screen shot to show you their submission (without Patient Information). This way you can enter it into New Innovations and forward to OGME. This will ensure your program will be in compliance with ACGME & GMEC requirements.

Southern Illinois Healthcare Carbondale

- The Midas program does not have the ability for providers to view data entered or outcomes.
- Patient Relations team does however share a high-level review of the numbers of patient safety reports that get entered with the resident groups annually at Memorial.
- Program Coordinators, have your residents take a screen shot to show you their submission (without Patient Information). This way you can enter it into New Innovations and forward to OGME. This will ensure your program will be in compliance with ACGME & GMEC requirements.