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Responsible Party: Rebecca Merkel: Admin Dir

Compliance

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Applicability: Franciscan Health

Indianapolis
Franciscan Health
Indianapolis at Carmel
Franciscan Health

Mooresville

Incident Reporting Policy

9/12/16 Franciscan Alliance hospital facility names were changed. See Hospital Listing document for new name changes and previous names.

Policy Number: 950.04

Policy:

Staff are required to document in an accurate, complete and timely manner, incidents occurring at or involving FSFH property. This process is used to identify and minimize hazards to employees, patients, and visitors by evaluation and analysis of all incidents. The hospital recognizes that some of the events described in the incident report may involve matters that require further investigation in anticipation of and in preparation for litigation.

Definitions:

A reportable incident is:

A. An undesirable event that is inconsistent with the routine care of the patient.

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- B. An event that has the potential for injury or causes injury to a patient, visitor, workforce or medical staff.
- C. Any identified or reported violation of HIPAA policy and procedures in the facility related to the use and disclosure of protected health information (PHI).
- D. A situation or disturbance that is likely to disrupt the facility's functions, damage property or cause damage to the healthcare facility's reputation.
- E. Any event that reasonably suggests the probability that a medical device has caused or contributed to the death, serious injury or serious illness of a patient.
- F. All thefts, missing items or damage to personal or facility property.
- G. All medication-related events.

The Incident Report is the electronic or written documentation authorized by Franciscan Alliance (FA) for its facilities' use.

Procedures:

- An incident report shall be completed by the member of the workforce or medical staff who: is most directly involved in the incident, who first observed the incident or who first became aware of the incident. For incidents involving a visitor, the general public or property, contact the Security Department who will complete the report.
- 2. In all cases where an injury is sustained, treatment of the injury takes precedence over the completion of the Incident Report. An Incident Report must be completed after treatment of the injury. The report shall be completed as soon as practical, but no later than the end of the shift on which the incident occurred.
- 3. The appropriate healthcare provider will notify the attending physician for patient care incidents and document physician notification in Risk Monitor Pro.
- 4. The facts surrounding the incident must be documented in the medical record to assure the continuum of care. Note: Do not refer to the incident report in the medical record.

Event Investigation Documentation:

When an event occurs that required an incident report and the Risk Manager determines that there is need for additional investigation in anticipation of preparation for litigation, he or she shall be responsible to fill in the additional "Review/Resolution" sections in Risk Pro Monitor which shall be separate from the incident report and shall be utilized solely in anticipation of and preparation for litigation.

PROCESS:

All incident reports will be completed on CROSS using Risk Monitor Pro incident reporting program.

- Patient Incident: In the event of an incident involving a patient (including medication, treatment and/or
 procedure) after appropriate intervention, the attending physician or his specified alternate is to be notified
 in a timely manner. Physician notification including the time notified must be documented in the Incident
 Report.
- 2. Employee Incident: Employees who incur an injury are to report to the Occupational/Employee Health Department when open. At all other times and/or for serious injuries, the employee should be escorted to the ER.
 - A. The supervisor/designee must investigate the reasons for the incident and complete any forms required.
 - B. An employee can refuse treatment.
- 3. Visitor Incident: An incident report must be completed for any visitor who is injured while on a FSFH property. The Security Department will be contacted to complete the report. The visitor will be assisted to the Emergency Department if they wish to seek medical treatment. Until an investigation is completed, no promises of payment for the bills incurred will be made.
- 4. Exposures: Employees or Visitors with a potential exposure to blood and/or body fluids will report to the Occupational/Employee Health Department or the Emergency Department. The injured employee (or the employee having firsthand knowledge of the incident) will complete a report in Risk Monitor Pro.
 - A. Report should denote site of injury/exposure (i.e., left, right, finger, thumb)
 - B. Report should identify the source (i.e., patient's name)
- 5. Property Damage, Loss or Theft: The Security Lead Officer on duty must investigate the occurrence and

complete the incident report by the end of the shift on which it occurred.

- 6. Lost/Stolen Computer Equipment & Media: For the event of lost/damaged/theft of equipment and/or media, the process will be:
 - Person who determines missing device\media (from premise or off premise) will contact Security (always, regardless of whether PHI was present or not)
 - Security will complete the incident report
 - Privacy Officer will be notified via Risk Monitor Pro task or follow-up
 - The Information Security Officer will be notified by the Privacy Officer
 - FA Information Security Officer will contact facility MIS Technical Service Manager and they will
 provide model and serial # of device(s), if applicable, and add as a follow-up to Risk Monitor Pro
 - If appropriate, Facility MIS Technical Service Manager will update their hardware inventory to reflect that a device is missing
 - FA Information Security Officer will provide Security the model and serial #'s for the police report via follow-up in Risk Monitor Pro
 - FA Information Security Officer will determine whether encryption software and lojack software are installed. If yes, then FA Information Security Officer will forward police report for data deletion or recovery of hardware
 - The Privacy Officer will get signed statement from owner, as to what data was stored on the device or media, and scan the document in to Risk Monitor Pro as a follow-up.
 - Security will acquire Police Report (must have model # and serial #, if applicable), and scan the document in to Risk Monitor Pro as a follow-up.
 - The Privacy Officer will add incident to HIPAA Log and determine corrective action (disciplinary actions and\or preventative measures, etc.) when appropriate. If corrective action is appropriate the Privacy Officer will include a Human Resource representative.
 - If appropriate to notify public of data disclosure, the Privacy Officer and FA Information Security
 Officer will notify executive management and legal counsel.
 - Once all of the appropriate steps have been documented in Risk Monitor Pro, the incident will be closed.
- 7. HIPAA: Any incidents that result in or potentially result in the inappropriate use or disclosure of protected health information (PHI) must be reported utilizing the Risk Monitor Incident Reporting System. The privacy officer will follow up on all reports. Incident types can include password violation, improper disposal of PHI, inappropriate internet use/email, login discrepancies, improper electronic transmission of PHI, improper disclosure or use of PHI, intentional or by accident. Any computer or device containing PHI that is missing/stolen must have a police report completed by Security. The incident Report will be completed in Risk Monitor Pro and the Privacy Offer must be immediately notified of any HIPAA related incident.
- 8. Treatment Refused: Should any person injured on a FSFH property refuse treatment, the person preparing the Incident Report will have that witnessed by another employee and shall document such refusal in the "Brief Factual Description" section of the report.
- 9. Follow Up: All managers or the designees are to review all incident reports involving their departments in a timely manner and complete the follow up section in Risk Monitor Pro. Any patient safety issues or

significant findings during the manager's review will be immediately reported to the Risk Management Department.

RISK MANAGEMENT ACTIVITIES:

- 1. Risk Management or other designated personnel will review all incident reports.
- 2. Risk Management will report potentially compensable events to the hospital's insurance companies and President/CEO as indicated and necessary.
- 3. Risk Management will direct reports needing further investigation and follow-up to the appropriate department.
 - A. Incident Reports involving the evaluation of patient care, the professional qualifications or conduct of a medical staff member or a hospital care giver shall be maintained in a confidential manner.
 - B. Incidents Reports involving the evaluation of patient care, or the professional qualifications or conduct of a medical staff member shall be communicated to the Chief Medical Officer or Medical Staff Office for possible peer review or other hospital committee review.
 - C. Incident Reports involving the evaluation of patient care, the professional qualifications or conduct of a hospital care giver shall be communicated to the appropriate hospital committee responsible for the peer review function of the hospital services or areas involved.
- 4. Risk Management will monitor the data contained in the Incident Reports for quality improvement activities so that care being provided can be evaluated.

If this policy does not yet have an electronic signature, please refer to the policy archives for a signed PDF version.

Attachments:

Approval Signatures

Step Description	Approver	Date
	James Callaghan: Chief Executive Officer CIR [DP]	10/21/2015
Administrative Policy Committee	Stephanie Zirkelbach: Administrative Assistant	10/12/2015
	Rebecca Merkel: Admin Dir Compliance	9/23/2015

Applicability

Franciscan Health Indianapolis, Franciscan Health Indianapolis at Carmel, Franciscan Health Mooresville