UNUSAL OCCURANCE POLICY

PURPOSE

To define Unusual Occurrences, differentiate Sentinel Events, Reportable Events, and Non Events, to give direction for reporting and evaluation, and to define the roles of the YEMSA and EMS Service Providers in relation to these events.

AUTHORITY

Health and Safety Code, Division 2.5, Section 1797.204, 1797.220, and 1798.

California Code of Regulations, Title 22, Division 9, Section 100144, 100147, 100167, and 100169.

DEFINITIONS

Unusual Occurrence: Any event deemed to have impact or potential impact on patient care, and/or any practice felt to be outside the norm of acceptable patient care, as defined by YEMSA Policies & Procedures.

Sentinel Event: As defined by the Joint Commission on Accreditation of Healthcare Organizations, is "…an unexpected occurrence involving death or serious physical or psychological injury, or risk thereof." The phrase "or the risk thereof" includes any process variation for which a recurrence would carry a significant chance of a serious adverse outcome

Reportable Event: Any event that falls outside the norms for patient treatment or system operation, but does not result in death, or serious physical or psychological injury to the patient, or risk thereof but does require investigation for the purpose of quality improvement. Events that do not necessarily breach any policies or procedures, but are felt by the individuals involved to be potentially detrimental should also be included in this definition.

Non Event: Any occurrence that is reported but is deemed to have no patient care or system implications and does not require further investigation.

POLICY

Unusual Occurrences will be reported, investigated, and followed up according to the following procedures. YEMSA will determine the review, resolution and tracking of unusual occurrences.

PROCEDURE

A. Initial Reporting:

All personnel directly involved in an unusual occurrence are required to submit a YEMSA Occurrence Report to YEMSA as soon as possible, but no longer than the end of that shift, or within 24 hours of the occurrence, whichever is sooner.

- The YEMSA Occurrence Report may be initiated by any of the following designated agents: BLS or ALS Providers, BLS Provider CQI Coordinator, ALS Provider CQI Coordinator, Base Hospital CQI Coordinator, Emergency Medical Dispatch agencies or YEMSA.
- The reporting service provider, or base hospital, will complete the Occurrence form and

send it to YEMSA. The author will also notify his/her supervisor of the incident.

- The YEMSA Occurrence form is contained within this policy and is available on the YEMSA www.yemsa.org by contacting YEMSA at (530) 666-8671. This form may be emailed, Faxed, or hand delivered. If email or FAX is used "CONFIDENTIAL" must be placed in the subject section. Email should be addressed to: emscqi@yolocounty.org

B. Event Categorization:

Upon receipt and review of the Occurrence Report, the YEMSA Medical Director will preliminarily categorize the incident as follows:

- Non Event: requires no further investigation. Will be monitored for recurrence.

Examples include minor policy violations that do not involve patient care.

- Reportable Event: requires investigation and follow-up. Examples include: noncompliance with treatment protocols or policies without potential for patient harm, and care rendered or ordered outside the scope of practice as defined by Y E M S A Policies and Procedures.

- Sentinel Event: requires investigation and follow-up. May require certificate/license review. Examples include: noncompliance with treatment protocols or policies with actual or potential for patient harm, suspected alcohol or drug abuse with the potential to affect patient care, criminal charges, and immediate threat to public safety as set forth in Health and Safety Code Section 1798.200.

C. Incident Review

YEMSA is responsible for coordinating the incident review.

- Following notification of a sentinel event, YEMSA will assign the case to an appropriate entity for investigation. A BLS or ALS service provider may be assigned investigations that are limited to their own department or company. YEMSA retains the authority to become the primary Investigator of any Sentinel or Reportable Event.

If the investigation entity is YEMSA or a Base Hospital

- Reports may be requested of any involved party. The investigating entity will notify all involved parties by telephone, fax or email. When documents containing protected health information are being transmitted by written or electronic mail, they must be marked "CONFIDENTIAL". The request for reports will be made to the service provider CQI coordinator.
- These reports must be completed by the personnel involved in the incident and returned to the investigating entity within 48 hours for a Sentinel Event and 10 days for a Reportable Event - from the time that the request is made.
- The reports must be written on the YEMSA Unusual Occurrence Form. The report may be submitted as a paper document or emailed.
- Incident investigation may include review of pertinent medical records including the PCR, Base Hospital Report form and recorded tape.
- EMS may require any personnel involved in the incident to attend an interview with YEMSA. Such a request will be made in writing and a copy sent to the CQI coordinator of the involved service provider. This interview will not be considered to be a formal hearing.
- The base hospital report will be submitted to YEMSA within 5 days for a Sentinel Event and 14 days for a reportable event.

If an investigation is assigned to a Service Provider:

a. YEMSA will notify the Service Provider CQI representative.
b. The event evaluation report must be sent to YEMSA within 5 days of the date of the request for a Sentinel Event, and 14 days for a Reportable Event.

YEMSA will conclude its report within 5 days of receipt of the requested report(s) from the involved entity(ies) for a Sentinel Event, and 14 days for a Reportable Event.

D. Incident Resolution:

The YEMSA Medical Director will determine the resolution of all unusual events.

- A copy of the findings, conclusions, and recommendations of the evaluation report will be sent to the CQI coordinators of all involved agencies.
- If necessary, a meeting will be scheduled with representatives of all involved parties, at which the conclusions of YEMSA will be reported and discussed. The report will be confidential and copies will be collected at the end of the meeting and destroyed.
- Within five working days of the receipt of the report from YEMSA, the service provider(s) involved will, if requested by YEMSA, submit their action plan to YEMSA, using the YEMSA Unusual Occurrence Report form.

o If the action plan(s) is/are considered being satisfactory by the YEMSA Medical Director, the case will be closed and a letter of acknowledgement, conclusion, and/or recommendation will be sent to all involved agencies If further documentation is needed, YEMSA will make the request. This documentation must be submitted within 72 hours of receipt for a Sentinel Event and 5 days for a Reportable Event.

YEMSA will return any reports that were provided by provider agencies to the respective agencies involved at the conclusion of the case. No copies of these reports will be kept by YEMSA. All subjective information gathered by YEMSA in the form of written reports or interviews or other means will be destroyed at the conclusion of the case.

YEMSA will retain a record of its objective findings, its recommendations, and the remedial actions taken.