

OREGON STATE HOSPITAL

POLICIES AND PROCEDURES

SECTION 1: Administration

POLICY: 1.003

SUBJECT: Incident Reporting

**POINT
PERSON:** HOSPITAL SYSTEMS ANALYSIS AND
MANAGEMENT DIRECTOR

APPROVED: GREGORY P. ROBERTS
SUPERINTENDENT

DATE: MARCH 27, 2017

I. POLICY

- A. Oregon State Hospital (OSH) health care personnel (HCP) must accurately report incidents in accordance with this policy. In response, OSH must conduct thorough investigations, prepare reports showing the tracking and trending of data, and implement and monitor corrective or preventive actions.
- B. Every HCP who witnesses a reportable incident as defined in this policy must promptly report the incident in the OSH incident reporting system when possible.
- C. A reported incident which falls within established criteria will be investigated by the Critical Incident Review Panel as indicated in the committee charter.
- D. HCP should not report the incidents indicated below in the OSH incident reporting system. These incidents must be reported in accordance with applicable policies and procedures.
 - 1. A seclusion or restraint incident must be reported in accordance with OSH Policy and Procedure 6.003, "Seclusion or Restraint Processes".
 - 2. An incident of alleged patient abuse must be reported in accordance with OSH Policy and Procedure 7.008, "Patient Abuse Allegation Reporting".
 - 3. A HCP injury not related to a patient incident must be reported on "Employee Accident Report" forms in accordance with OSH Policy and Procedure 5.012, "Reporting of Injuries and Illnesses".
 - 4. An incident involving patient protected health information must be reported in accordance with Oregon Health Authority policy 100-014, "Report and Response to Privacy and Security Incidents".

II. DEFINITIONS

- A. "Attempted unauthorized leave" in this policy means any attempted but unsuccessful unauthorized leave.

- B. "Health care personnel (HCP)" for the purposes of this policy means the population of health care workers working in healthcare settings. HCP might include, but is not limited to: physicians, nurses, nursing assistants, therapists, technicians, dental personnel, pharmacists, laboratory personnel, students and volunteers, trainees, contractual staff not employed by the facility, and persons not directly involved in patient care (e.g., clerical, dietary, housekeeping, maintenance).
- C. "Minor injury" in this policy means mild soreness, surface abrasions, small scratches, small bruises, and burns that a typical family would treat by first aid at home.
- D. "Moderate injury" in this policy means major soreness, cuts or large bruises, classes of injuries that typically require treatment in an emergency room or by a physician or other appropriate health care professional, but do not require hospitalization or result in a significant restriction to a person's usual activities.
- E. "Physical aggression" in this policy means any assault or physical behavior that could result in injury, regardless of the severity. This includes incidents where no injury occurs and includes incidents such as spitting or throwing of bodily fluids or objects, even when no injury results.
- F. "Reportable incident" means any occurrence involving:
1. physical aggression on patients, staff members or visitors, regardless of injury;
 2. bodily injury to patients whether the injury is considered minor, moderate, or severe;
 3. patient self-harm, including suicide attempt, with or without injury;
 4. patient falls as defined in OSH Policy and Procedure 6.046, "Fall Prevention Program";
 5. sexual contact between patients or with a patient;
 6. patient choking when attempting to swallow;
 7. unanticipated patient death;
 8. security problems and crime or suspicious events including, but not limited to: property loss or intentional damage, contraband or patient possession of prohibited items, substance abuse by a patient, and unauthorized leave or significant attempt of unauthorized leave;
 9. environment of care issues including, but not limited to the presence of hazardous materials, utility or systems failure, medical equipment failures, emergency preparedness issues and safety issues;
 10. laboratory issues including, but not limited to mislabeled specimens, errors in specimen collection, errors in reporting results, delays in reporting; and

11. medication errors not associated with a patient, including narcotic count variances or medication found outside the medication administration process.

- G. "Severe injury" in this policy means severe lacerations, bone fracture, head injury, or loss of limb or death; a class of injuries that result in hospitalization or prolonged restriction of a person's usual activities, or worse.
- H. "Undetermined injury" in this policy means any injury with a severity that is undeterminable at the time of the report.
- I. "Unauthorized leave" has the same meaning as the definition in OSH Policy and Procedure 8.018, "Unauthorized Leave".

III. REFERENCES

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