

COMMUNITY MEDICAL CENTER

Pennsylvania Act 13 Patient Safety Plan

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I. Confidentiality

The confidentiality protection afforded to Community Medical Center (CMC), its employees and medical staff, by “The Medical Care Availability and Reduction of Error Act (ACT 13, March 20, 2002) applies solely to documents, materials, or information prepared or created pursuant to the responsibilities of the Act 13 patient safety committee or governing board of CMC.

Any documents, material, or information prepared or created for the purposes of complying with the patient safety plan, reporting, notification, and investigation which are reviewed by the Act 13 patient safety committee or governing board of the medical facility are confidential and will not be discoverable or admissible as evidence in any civil or administrative action or proceeding.

Persons responsible for or participating in meetings of the Act 13 patient safety committee or governing board will not be required to testify as to any matters within the knowledge gained by the person’s responsibilities or participation on the Act 13 patient safety committee or governing board of CMC. (The confidentiality provisions do not apply to original source documents, i.e. medical records).

II. PURPOSE OF THE PA ACT 13 CMC PATIENT SAFETY PLAN

The purpose of the PA ACT 13 CMC Patient Safety Plan (hereinafter referred to as the “Plan”) is to maintain and improve patient safety within CMC. CMC administration, medical staff, managers and staff support the Plan. The Plan will implement the components of PA ACT 13, as interpreted and put into regulations by the Pennsylvania Department of Health.

III. OBJECTIVES OF THE PLAN

- Designation of a patient safety officer.
- Establishment of an Act 13 patient safety committee.
- Establishment of a system (accessible 24/7) for health care workers to report serious events and incidents.
- Establish non-retaliatory language for healthcare workers who report events or incidents (according to Pennsylvania’s Whistleblower Law).
- Define the process by which written notice of serious events will be provided to patients.

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IV. DESIGNATION, QUALIFICATIONS AND RESPONSIBILITIES OF ACT 13 PATIENT SAFETY OFFICER

The President and CEO of CMC will appoint the Act 13 patient safety officer.

Appropriate qualifications may include experience in hospital administration, hospital compliance officer, hospital safety director, health care clinician, or experience in quality assurance or risk management.

Responsibilities include:

- Member of the Patient Safety Committee.
- Ensuring the investigation of all reports of serious events and incidents.
- Take such action as is immediately necessary to ensure patient safety as a result of any investigation.
- Report to the Patient Safety Committee regarding any action taken to promote patient safety as a result of investigations commenced pursuant to Section 309 of Act 13.

V. DESIGNATION OF ACT 13 PATIENT SAFETY COMMITTEE

The President and CEO of CMC will designate three health care workers (including at least one registered nurse, one medical staff physician and the patient safety officer), plus two community residents who are not employed by CMC. The Act 13 Patient Safety Committee is responsible for:

- Receiving reports from the Act 13 patient safety officer.
- Evaluating investigations and actions of the Act 13 patient safety officer as it relates to the report.
- Reviewing and evaluating the quality of patient safety measures.
- Making recommendations to eliminate future serious events or incidents.
- Reporting to the Board of Directors via The Quality Committee to include the number of serious events and incidents.

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VI REPORTING SYSTEM

CMC employees and medical staff who reasonably believe that a serious event or incident has occurred must report the serious event or incident as follows:

- **Serious Event:** An event, occurrence, or situation involving the clinical care of a patient within CMC that results in death or compromises patient safety and results in unanticipated injury requiring the delivery of additional health care services to the patient.
 - Immediate response to medical/health care errors, including the care of the affected patient(s), containment of risk to others and preservation of factual information will be maintained for subsequent analysis. Primary importance is the immediate care of the patient(s) affected and their family and staff associated with the incident. In addition, the containment of the risk to others must be considered.
 - These **Serious Events** will be coordinated with:
 - (1) the “Sentinel Event Reporting Policy” found in the CMC Administrative Policy and Procedure Manual.
 - (2) the Serious Event must be reported to the Pennsylvania Department of Health in accordance with established Rules and Regulations no later than 24 hours after discovery of the serious event. Notification will be made following consultation with the President and CEO.

- **Incident:** An incident is an event, occurrence, or situation involving the clinical care of a patient which could have injured the patient but did not either cause an unanticipated injury or require the delivery of additional health care services to the patient.
 - Person reporting the incident must complete a “Risk Quality Worksheet” and give to department manager immediately or within 24 hours of incident.

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- Notification must be completed by sending the “Risk Quality Worksheet” to the Clinical Risk Manager who in turn will forward it to the Risk Manager.
- If, through investigation, the event meets the definition of a serious event, the procedure for serious event reporting will be followed.
- **Infrastructure Failures:** An undesirable or unintended event, occurrence, or situation involving the infrastructure of CMC or the discontinuation or significant disruption of a service which could seriously compromise patient safety
Infrastructure failures must be reported to the Pennsylvania Department of Health in accordance with established Rules and Regulations no later than 24 hours after discovery of such a failure. Notification will be made following consultation with the President & CEO.
- Reporting serious events or incidents may be anonymous. Reporting by a CMC staff member or a member of the medical staff can be accomplished via any of the following means;
 - Patient Safety/Compliance report “hot-line” at 969-7000.
 - Patient Safety “drop-box” located outside the entrance to the CMC cafeteria.
 - Reporting directly to the Patient Safety Authority. Under Act 13, healthcare workers may submit anonymous reports if they have previously reported in compliance with the CMC Patient Safety Plan. See Appendix 1.

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VII. NON-RETALITORY POLICY

To maximize reporting of serious events and incidents, it is important that a non-punitive reporting environment be established and maintained. It has been demonstrated that many errors are directly related to system and process failures and less are people originated. CMC encourages and supports a non-punitive reporting environment and system.

CMC employees who report a serious event or incident as prescribed in this Plan cannot be subject to any retaliatory action for reporting the serious event or incident and have protections afforded under Pennsylvania's Whistleblower Law. Please see applicable CMC Human Resource Policy for additional information, as well as CMC Medical Staff Rules and Regulations.

VIII. NOTICE TO PATIENTS OF SERIOUS EVENTS

CMC will provide written notice of serious events to the patient or an adult family member within seven days of the occurrence or discovery of the occurrence of a serious event. See Appendix 2 and 3.

Approved:

John Nilsson
Interim President & CEO

Date

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APPENDIX 1

**BLANK PATIENT SAFETY AUTHORITY
REPORTING FORM**

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APPENDIX 2

DISCLOSURE AND WRITTEN NOTIFICATION POLICY

Policy: The Act 13 Patient Safety Plan requires that disclosure of the unanticipated event and written notification be provided to a patient and/or their families when affected by a serious event. Disclosure and written notification must be made within seven days of the occurrence or discovery of a serious event.

Purpose: The purpose of this policy is to provide guidelines for disclosure and written notification to patients and/or families who have been affected by a serious event.

Procedures: The following procedures provide specific guidelines for disclosing information and written notification to a patient and/or their families regarding a serious event.

1. Upon occurrence or discovery of occurrence of a serious event, the health care worker shall report the serious event as defined in the Act 13 Safety Plan.
2. Unless in attendance, the attending physician will be notified.
3. Immediate measures will be taken to provide the appropriate level of care to the patient (s).
4. Written notification will be provided to the patient affected by the serious event or to an available family member or designee within seven days of the occurrence or discovery of a serious event.
5. The forms found in Appendix 3 as appropriate will be used as written notice of the serious event.

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APPENDIX 3

Written Notification Form

Community Medical Center is committed to providing quality medical care to its patients and the communities it serves. Despite consistent and committed efforts to provide and improve patient care, adverse events sometimes occur.

Community Medical Center is committed to respecting the rights of patients and their families to be informed about the occurrence of events, and to analyze such events to improve patient care and prevent recurrence. This notification provides information concerning the occurrence of an event.

Patient's Name: _____

Date of Event Occurred: _____

Date Information Notice Mailed to Patient/Family: _____

If you have any further questions or concerns please feel free to contact the Risk Management Department at (570) 969-8182.

I hereby attest that disclosure of this event was mailed to the patient/family

Gina McCabe – Director of Patient Safety CMCHS

Date:

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Date: _____

Dear _____,

Community Medical Center is committed to providing quality medical care to our patients and the communities we serve. Despite constant and committed efforts, sometimes patients acquire an infection during their hospital stay.

Community Medical Center is committed to respecting the rights of patients and their families to be informed about the occurrence of an infection during their stay. This notification is to inform you that we are aware of the infection treated during your recent stay, and to advise you that the occurrence of the infection was reported to the Center's for Disease Control and Preventions National Health Care Safety Network, in accordance with Pennsylvania law (Act 52 of 2007). It is important to note that such reports are confidential under both state and federal law and will allow us to analyze, monitor, and improve patient care, and prevent the incidence of infections within our facility.

Below is relevant information concerning the occurrence of infection:

Date infection confirmed¹: _____

Date Patient/Family informed²: _____

Should you have further questions please contact Community Medical Center's Risk Manager at 570-969-8182.

Sincerely,

Gina McCabe
Director of Patient Safety CMCHS

¹ Date confirmed may be post discharge date due to clinical diagnostic results obtained after hospital stay.

² Date patient informed may be post discharge date due to clinical diagnostic results obtained after hospital stay.