

eSafe – Occurrence/Safety Event and Complaint Reporting

What is it? Guide for identifying and reporting an occurrence/safety event or complaint in a fair and just safety culture.

Goal: While safety events may not be completely eliminated, harm can be reduced, and the goal is always zero harm by focusing on eliminating systems failures and human errors through safety event reporting, analysis, development and implementation of corrective action plans, and/or opportunities for improvement.

Important Definitions:

Complaint

See Complaint Resolution Policy #8316.009 for additional information.

- A criticism presented verbally by a patient or his/her representative that is resolved during the hospital stay.
- Information obtained with patient satisfaction surveys, unless the patient requests that their concern be treated as a formal complaint, which then would become a grievance.
- Billing issues.

Grievance

See Complaint Resolution Policy #8316.009 for additional information.

- A patient or family complaint made in writing or that is unresolved at the time of discharge.

Occurrence

See Occurrence Reporting Policy #8316.074 for additional information.

- Any unplanned instance or event that has caused, or has the potential to cause, harm or loss.

Patient Safety Event

See Occurrence Reporting Policy #8316.074 for additional information.

- Any unplanned instance or event that could have resulted or did result in harm to a patient.

Who Can Report an Occurrence/Safety Event or Complaint?

An occurrence/safety event or complaint can be reported by any EHS employee or Provider most closely involved in the situation or who witnessed the incident. Safety examples but not limited to the following:

Adverse Drug Events (ADE's)	Environment of Care
Airway Management	Falls
Care Coordination	Infection Control
Diagnostic Testing	Medication/Fluid
Elopement – Safety/Security/Property/Conduct	Surgery – complications

As part of the Hospital's non-punitive environment, or "just culture", the Reporter and/or involved staff may maintain anonymity unless the event is the result of the following:

- a criminal act
- a purposefully unsafe act
- an act related to substance abuse by provider/staff
- events involving suspected patient abuse of any kind

Complaint Definitions:

- **Complaints** received during the time of service while either an inpatient or outpatient should be addressed immediately by an employee or the Department Manager or the senior level administrator of the involved department(s) should be notified if assistance is needed. If the Administrator or Manager is not available, the hospital operator to contact the Patient Flow Manager for assistance. Resolved concerns/complaints are not required to be entered into the occurrence/complaint reporting system.
- **Grievances:** - Unresolved complaints, requests to file a formal complaint, written/emailed complaints, all post-discharge complaints, complaints involving patient injury, threat of legal action, potential abuse/neglect, and hospital compliance with CMS requirements must be entered into the electronic eSafe - Occurrence/Complaint Reporting system by any EHS employee or Provider with information regarding the complaint.

These complaints are considered a grievance and must be reviewed, investigated, and resolved within a reasonable time frame, to include written letters back to the complainant. See Complaint Resolution Policy #8316.009 for additional information.

How to locate the electronic eSafe - Occurrence/Complaint Reporting System http://ehs-msasrlsp1.main.erlanger.org/RL6_Prod/Homecenter/Client/Login.aspx?ReturnUrl=%2fRL6_Prod%2f

Quick Guide to Data Entry

1. Open EHS Intranet Home Page
2. Locate Applications/Links – right side of main page
3. Select **eSafe - Occurrence/Complaint Reporting** - listed in alpha order.
4. User Name = Network ID and Password = Network ID Password- this is the same ID/password used every day for EHS computer and email access OR select the '**Anonymous**' button if a network ID hasn't been issued/you wish to report with anonymity.
5. Select **Find a Form** – begin typing basic information related to the event that occurred. This will narrow your category search with the new internal search engine. Examples include: **Fall, Medication, Exposure, Lost Property** OR simply single click on a category icon picture to begin data entry. **NOTE: Quick Submission** should not be used for very detailed events and isn't available to report a **Complaint**.
6. Answer all of the mandatory fields with the green asterisk regarding the event on the new scrollable form.
7. Select **Submit** in the bottom right corner when you have completed data entry.

TIPS During Data Entry:

- **Patient Search** is available to auto-populate patient demographics. Locate and select the magnifying glass icon in the **Person Affected** section beside the **MRNO** field, enter any identifier and select patient search. Locate the patient visit and select accept.
- All fields with a green asterisk * are required.
- **Locations:** Don't forget to include the correct areas/departments in the event. This will ensure the proper management/staff receive automatic email notices and can perform review and follow-up.

Occurrence/Safety Events require a Severity/Harm Level Assignment

Severity/Harm Definitions

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| A: Event has capacity for harm; near miss. | G: Event reached subject; permanent harm. |
| B: Event did not reach subject; near miss. | H: Event reached subject; intervention to sustain life. |
| C: Event reached subject; no harm. | I: Event reached subject; may have contributed to/resulted in death. |
| D: Event reached subject; monitor to rule out harm. | J: Harm or death; no practice deviation/error. |
| E: Event reached subject; temporary harm/intervention. | K: Severity pending |
| F: Event reached subject; temporary harm with increased LOS or level of care. | |

QUESTIONS or CONCERNS?

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