PSN 4-1-1
With Julia Settles, MD, JD

When documenting an unexpected outcome, near miss, or potential harm event, remember where you are! In the patient’s EMR, document any information relevant to the patient’s care. In the PSN, include any additional information that would be helpful in investigating, preventing, and correcting potentially unsafe or harmful conditions and situations. Remember that the PSN is our internal tool for improving the quality and safety of the care we deliver.

Mentioning the patient safety report in the EMR or to the patient and family can compromise the protected status of our reports. If our reports lose their protected status, they are less likely to be completed and are less useful in meeting our quality and safety goals. Protect our PSN reports by being aware of their purpose and documenting accordingly. For questions or clarification, email Julia Settles at settlesja@health.missouri.edu

Identified sources of harm for patients/staff from clinical areas across MU Health:

- Do not place sharps or other biohazard material on a patient’s food tray to be returned to the kitchen.
- SCAN medications prior to administration, not after.
- Do not “pre-document” care including medications administered, therapies provided or provider notified.
- Double check emergency supplies for patients to ensure the correct equipment is available when needed.
- Evaluate your patients skin on admission, every shift and with any changes.
- Document abnormal findings.

Dear Safety Sue:

Last week I witnessed a safety event in my department. Thankfully the patient was not hurt but I don’t know if anyone ever told the Manager or reported in the PSN. It wasn’t my patient and the nurse taking care of the patient said that it took too much time to enter a patient safety report. What should I do?

Signed, Daisy R-N

Dear Daisy,

Thanks so much for sending in your question. Our policy states that “Any person who believes a patient safety hazard exists or is impending (close calls), has the obligation to report. No report should be suppressed for any reason.” Talk with your co-worker and let them know the importance of submitting a report. Entering a report takes only a few minutes. You can also remind them that they can call the PSN Hotline (884-1PSN) as well and leave a detailed message of what happened. These reports are reviewed by managers and other organizational leaders and provide a systematic approach to identifying, communicating, investigating, resolving and disseminating organization learning from actual and potential patient safety hazards.

Safety First! Safety Sue

If you have a question that you would like to submit to Safety Sue please email Staci at the address below and she will forward all questions.

PCPI Newsletter Contacts: Staci Walters in the Office of Clinical Effectiveness (OCE) walterss@health.missouri.edu

ECRI Institute

ECRI Institute is an organization that is dedicated to scientific research to discover which medical procedures, devices, drugs, and processes are best to improve patient care. Each year they identify patient safety concerns.

2016 Top 10 Patient Safety Concerns

1. Health IT configurations and organization workflow that do not support each other.
2. Patient identification errors.
4. Inadequate cleaning and disinfection of flexible endoscopes.
5. Inadequate test-result reporting and follow-up.
6. Inadequate monitoring for respiratory depression in patients prescribed opioids.
7. Medication errors related to pounds and kilograms.
8. Unintentionally retained objects despite correct count.
9. Inadequate antimicrobial stewardship.
10. Failure to embrace a culture of safety.

Which of these safety concerns apply to your area? Have you had worries that patient outcomes might be affected by these errors? The bad news is that some of the same concerns exist at University Healthcare. The good news is that we are not alone. Healthcare systems nation wide are facing the same challenges. Leaders and staff at UMHC are hard at work every day to overcome these issues and ensure safe patient care is provided.

From the Patient Safety Office, we ask that you document these concerns in the Patient Safety Network so that we may work with you and your teams to provide SAFE patient care!

forYOU team

The forYOU team is a peer-support team developed to address the needs of staff when they have been involved in a difficult case which impacts them emotionally. The event does not have to be related to a medical error. This could be a case in which staff relates to the patient on a personal level and there is an unexpected patient outcome or it is just difficult to understand the outcome. Most departments/units have a local team member to contact, but feel free to reach us by phone (884-2373) or email (forYOU@health.missouri.edu).

STEPS TO TAKE IF A VISITOR FALLS

1. Offer assistance, call “Person Down” if necessary.
2. Escort individual to the ER if appropriate or individual requests.
3. Notify Risk Management ASAP if significant injuries noted.
4. Complete a Student or General Public Injury and Property Damage Report, also known as a “Form 200.”
5. Complete and submit form to Guest Services within 48 hours.

Go to Incident & Property Damage Report for Visitors or Members of the General Public - Policy for further detail.