The Residents Role in Patient Safety

Jan Manilla
Missy Polito
Objectives

1. Describe the prevalence of errors in healthcare

2. Explain relationship between systems and errors

3. Describe path for event and near miss reporting

4. Describe how residents can get involved in patient safety activities throughout the institution
Definition of Patient Safety

Patient safety is the “absence of preventable harm to a patient during the process of health care.”

Healthcare Can Be Dangerous

- Medical Complexity
- Human Factors
- Weak culture of safety
- System Failures
Patient Safety Vocabulary

- Medical Error
  - The failure of a planned action to be completed as intended or the use of the wrong plan to achieve an aim
- Adverse Event
  - Injury caused by medical care rather than the patient’s underlying disease
- Near miss
  - An error that could have caused harm but did not reach the patient...error intercepted
Why do we care about SAFETY?

- Part of our responsibility as healthcare workers
- Moral obligation
- It is the *right* thing to do.
- If I’m not safe, I may injure myself or others.
- I can get in BIG trouble if I am not safe.
IT SAYS HERE THAT THE RATE OF MEDICAL ERRORS IS STUNNINGLY HIGH.

THAT EXPLAINS MY MYSSTERECTOMY.
To Err is Human

- Published by Institute of Medicine in 1999
- Estimated 44,000-98,000 Americans die
  - More than from breast cancer or motor vehicles
- 7% of patients suffer a medication error
- Lucian Leape: 1.7 mistakes per day in ICU (out of 200 pt-care activities)
  - 1% error rate
Medical errors leading to patient death are much higher than previously thought.

- 210,000 to 400,000 deaths a year.
- Medical errors the 3rd leading cause of death behind heart disease and cancer, according to Centers for Disease Control and Prevention statistics.
Science of Safety

- Safety as science: healthcare processes lacking reliability
- Healthcare as system: parts include people, equipment, environment
- Parts interact to achieve goal
- Every system perfectly designed to achieve the result it gets
- System failures: 85% of time
- People failures: 15% of time
Medication-Use System
The Swiss Cheese Model of Safety

Some holes due to active failures

Other holes due to system design

Layers of Protection

Error Reaches Patient
Single greatest impediment to error prevention is that we punish people for making mistakes

If we find out who made the errors and punish them, will we solve the problem?
Accountability

- Human error: inadvertent action, slip, lapse, mistake
- At-risk behavior: a choice that increases risk where risk is not recognized or believe to be justified….. DRIFT
- Reckless behavior: choice to consciously disregard a substantial and unjustified risk
What happens when there’s an Event?

- Do you report them?
- Do you know how to access our safety reporting system?
**Announcements**

**Clean sweep: WVU Healthcare adding polish with high-level clean-up project**
Project begins Wednesday, May 13, throughout Ruby Memorial Hospital.

**William Petros named interim director of Cancer Center**

**Stairs From Chestnut Ridge to Parking Lot D to temporarily close**
The stairs will be closed from Monday, May 11, through Wednesday, May 13, for resurfacing.

**Sanford Emery named director of surgical services, interim chair of Department of Surgery**

**Tweaks to PI Plan lead to more focused approach**

**New WVU Healthcare primary clinic to open by fall**

**The Wellness Program seeks employee feedback**

**Two more departments headed to ROC 2**
Health Information Management and Release of Information are moving to this location. The campus mailing address, phone numbers and fax numbers will remain the same.

**Celebrate Nursing Services Week May 6-12**
Safety Reports from EPIC
Radiology

Radiology residents learn to use technology in providing imaging services to our patients.

The West Virginia University School of Medicine is fully accredited by the Accreditation Council for Graduate Medical Education (ACGME) and is a participating member of the National Resident Matching Program (NRMP), Postdoctoral Application Support Service, and other advanced residency matching programs.

Approximately 410 residents are enrolled in 20 core programs, 1 combined program, 18 fellowship programs and 8 ERAS programs.

Applicants for post-MD or DDS Positions: applications along with letters of recommendation are sent directly by the standard application services to the program to which you are applying.

International Graduates: All graduates of foreign medical schools must be certified by the Educational Commission
SAFETY REPORTS

We're focused – every day – on ensuring our patients receive the highest possible standard of patient care and clinical effectiveness. The information that you provide via the online safety reports will help us identify unsafe situations and address safety concerns. Your input is critical to helping us provide a safe environment for the patients we serve.

Patient Safety Net (PSN)

This web-based reporting tool captures information about adverse events, near misses and unsafe conditions that involve patients, staff and visitors. If you want to follow up on a report, please contact the manager listed in the auto-response email generated following the report submission.

Employee Injury / Exposure Form

This form is to be used when an employee has sustained a potential injury or exposure. If medical care is required, visit Employee Health. Report to the Emergency Department if it's a true emergency.

Patient Compliment / Complaint Form

This form is to be used to record patient feedback. Whether it's positive or negative, we want to hear about it. We're also looking for service recovery details.

Related Policies

- III.040: Safety/Privacy Reporting
- III.041: Sentinel Event

If you have questions about the Safety Reports, please contact Jan Manilla or Melissa Polito.
SAFETY REPORTS

We're focused – every day – on ensuring our patients receive the highest possible standard of patient care and clinical effectiveness. The information that you provide via the online safety reports will help us identify unsafe situations and address safety concerns. Your input is critical to helping us provide a safe environment for the patients we serve.

Patient Safety Net (PSN)

This web-based reporting tool captures information about adverse events, near misses and unsafe conditions that involve patients, staff and visitors. If you want to follow up on a report, please contact the manager listed in the auto-response email generated following the report submission.

Employee Injury / Exposure Form

This form is to be used when an employee has sustained a potential injury or exposure. If medical care is required, visit Employee Health. Report to the Emergency Department if it's a true emergency.

Patient Compliment / Complaint Form

This form is to be used to record patient feedback. Whether it's positive or negative, we want to hear about it. We're also looking for service recovery details.

Related Policies

- III.040: Safety/Privacy Reporting
- III.041: Sentinel Event

If you have questions about the Safety Reports, please contact Jan Manilla or Melissa Polito.
Welcome to the PSN Front Line Reporter Form.

- A ★ indicates a mandatory field.
- Click the ? icon for help with a particular field.
- Click the button to view and select from the list of available options for that field.
- Some fields allow you to select more than one entry. These can be identified by looking for the icon next to the field. Single click each option (highlighted in gray) to add them. Once added, highlight the option and click to remove.

If you have any questions or require assistance with completing this form please contact your on-site administrator.

Start

| ★ Who was affected by the event? |

Event basics

| ★ Event Type | Medication related |
| ★ Event Category |
| ★ Event Subcategory |
| ★ Event discovery date |

Event discovery time

Use the military time format. Leave blank if unknown.

| ★ Event occurrence date (MM/dd/yyyy) |
| Leave blank if unknown |

| ★ Event occurrence time (hh:mm) |
| Use the military time format. Leave blank if unknown. |

Event location
If you hit the drop down box, PSN will attempt to load thousands of medications for you to select from. This will take approximately an hour and will most likely freeze the screen and close out of the report. Please follow instructions.

<table>
<thead>
<tr>
<th>Medication Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>What type of medication or substance was involved?</td>
</tr>
<tr>
<td>If a medication was involved, what type of medication?</td>
</tr>
<tr>
<td>Select the prescribed or intended medication(s) / substance(s) involved in this event</td>
</tr>
</tbody>
</table>

Do not hit the drop down arrow to locate medications. Type in the first few letters of the desired medication and wait for the selections to appear in the drop down box.

<table>
<thead>
<tr>
<th>Medication Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was medication scanned prior to administration?</td>
</tr>
<tr>
<td>Order type</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Given Medication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Select the incorrect medication(s) / substance(s) GIVEN (or almost given) to the patient:</td>
</tr>
</tbody>
</table>

Do not hit the drop down arrow to locate medications. Type in the first few letters of the desired medication and wait for the selections to appear in the drop down box.
After you submit a report, you will receive a notification indicating the person that received your report.

Please contact that person for follow-up, if desired.
Risk Management/Patient Safety Administrators

• Jan Manilla, Director of Risk Management
  • manillaja@wvuhealthcare.com
  • 7-4167

• Missy Polito, Patient Safety Coordinator
  • politom@wvuhealthcare.com
  • 7-5824
PSN Safety Reports

1. Error occurs
2. PSN report filed
3. Manager for location where incident occurred
4. Manager determines if other persons need to review report
5. Risk Management
6. RCA/ Peer Review/ Trend data
7. Action taken to improve system
Contact Risk Management or House Supervisor

Risk Management 7-4182

House Supervisor 7-2207
or Pager # 5353
Morbidity and Mortality Conferences
Committees

- Blood Utilization
- Cancer Review
- Carotid Stenting
- CPR
- Care Management
- Pharmacy, Nutrition, and Therapeutics
- Legal Electronic Health Record
- Infection Control
- Ethics
- Pain Management
- Operating Room
- Practitioner Health
- Quality of Care
- Performance Improvement
Take Home Points