



CONFIDENTIAL QA INFORMATION

Your Name:	Date/Time of Event:
Unit:	Type/Severity of Event:
How was Event Communicated to You?	Brief Description of Event:

Check each section as completed. Document notes as necessary.

Consider Safety Needs

- Call Public Safety for all safety/security concerns Things Done/To Do:
- Ensure patients are safe
- Ensure families are safe
- Ensure staff members are safe
(Call MERT response for any staff/visitor medical emergency)

Consider Staffing Needs

- Examine Patient/Nurse staffing ratio Things Done/To Do:
- Ensure staff is able to carry out assignment
- Allocate time to staff who need to decompress, as appropriate
- In off-hours, call in-house leadership (CRN 478-2648) to assist
- Notify Unit/Departmental leadership
- Consider on-call staffing for further assistance

Consider Patient/ Family Needs

- Change patient location if needed Things Done/To Do:
- Ensure appropriate documentation in patient record and event reporting system (RL Solutions)
- Notify Social Work if necessary
- Service Recovery (e.g. rounding on patients/families, food/coffee vouchers, etc.)

Consider Communication Needs

- Notify Unit/Departmental Leadership Things Done/To Do:
- If necessary, notify:
 - Public Safety
 - HR Business Partner
 - Hospital Administration
 - Office of Counsel

Consider Assistance Needs

- Contact EAP Things Done/To Do:
- Contact Social Work
- Contact Chaplain

□ Staff Support: Immediate, End of Shift, and 48-72 Hours Post Event

****Please invite Residents, Attendings and APPs who were involved and may not currently be on the unit.****

- **Demobilization:** Immediately after the event (5-10 minutes) to assess and address staff's physical and emotional needs, re-establish a sense of safety and security, including what additional resources may be needed, acknowledge and normalize reactions, and regroup to finish the shift. Things done/to do:

- **Defusion:** At the end of the shift (15-20 minutes) to review the facts of the event from each person's perspective. Clarify misperceptions, validate emotional reactions, recognize the teamwork, focus on what went well, reinforce health coping strategies and identify need for further individual or team follow up.

Things done/to do:

- **Debriefing:** For serious incidents such as patient or staff deaths, unanticipated adverse events. Occurs 48-72 hours after event and can include all members of a work team. Facilitated by a trained facilitator to assist staff to get facts as they are known, discuss how the event personally affected them, and provide a supportive interactive process to enhance coping and self-care and bring some closure.

Things done/to do:

Additional Information

Staff Members Impacted:

Additional Notes: