

SUBJECT: RELEASE OF PATIENT INFORMATION TO NEWS MEDIA	REFERENCE #2006
DEPARTMENT: HOSPITALWIDE	PAGE: 1 OF: 3
APPROVED BY:	EFFECTIVE: REVISED:

POLICY:

The Hospital shall seek to maintain a cooperative relationship with the news media which balances the public need for information with the responsibility to safeguard the patient's right for privacy.

PROCEDURE:

- Media inquiries other than condition reports may only be answered by:
 - Director of Community Relations
 - Media Coordinator
 - Administrative Staff
 - Chief Executive Officer
 - Chairman of the Board of Directors
- In the event that the above individuals cannot be reached, the Nurse Executive or Nursing Supervisor in charge may be designated to release information.
- If other personnel are contacted by the media the following procedure will be followed:
 - Media members are referred to Director of Community Relations.
 - Only those authorized above may release information about the Hospital or it's patients.
- All media interviews initiated by the Hospital will be coordinated by Community Relations Department.
- Condition reports, stating the patient's condition only, will be authorized by Nursing Administration. This condition information will be made available to information desk, Nursing Managers and Nursing Supervisor. The information on condition is limited to the following:
 - Good - The patient is conscious, vital signs are stable and within normal limits and the outlook for recovery is excellent.
 - Satisfactory - The patient is conscious but may be uncomfortable, vital signs are stable and within the normal limits, patient is making satisfactory progress in relation to his/her diagnosis, outlook for recovery is favorable.

RISK MANAGEMENT COMPONENTS

- Identification of Risks:
 - Risk identification is the first step in any Risk Management Program.
 - Occurrence Reports are the most common method of risk identification used. These are confidential and copies should not be made since one may surface when least expected voiding the "attorney-client privilege" by which the incident report is protected. Incident or Occurrence Reports should be filled out for any potentially compensable event. They should be easy to complete and to analyze with clear guidelines for use.
 - Statement of Concerns are frequently utilized to identify potential risks to patients, employees or visitors. These also should be marked "confidential".
 - Other methods of risk identification are: employee injuries, workers' compensation cases, Safety Committee reports, hazardous detection surveys, patient complaints and patient satisfaction surveys. The Quality Management mechanism is an excellent source for identifying high risk situations, i.e., returns to the OR, returns to the Critical Care Unit within 48 hours of transfer to floor care and return to the ED within 72 hours with a similar diagnosis.
- Risk Analysis:
 - Monitoring and trending of risk management concerns over a period of time will show patterns and/or areas of weakness which will need improvement to protect the organization from unnecessary liability.
 - Whereas closed claims analysis shows areas of highest financial loss, the analysis of risks can decrease the loss by preventing the occurrence.
 - Trending may be accomplished on a departmental as well as organizationwide level.
 - High risk areas: Labor and Delivery, Emergency Department/Urgent Care, Anesthesia.
 - When trending identifies an area of concern, the information must be communicated to appropriate committees, i.e., Safety Committee, ED Committee, Infection Control Committee. In every instance, the Quality Management Director, if separate from the Risk Manager, should be informed since monitoring the resolution and improvement must be integrated and the quality review mechanism of the organization.

SUBJECT: SENTINEL EVENTS	REFERENCE #6003
DEPARTMENT: HOSPITALWIDE	PAGE: 1 OF: 3
APPROVED BY:	EFFECTIVE: REVISED:

POLICY:

- Events, meeting indications for intensive assessment, are to be reported to Quality Management, who will be responsible for coordinating the intensive assessment process. In rare instances the CEO and Chief of Staff may determine that the event does not require intensive assessment and refer the event for prompt review (for example, if the event involves a single individual).

- Definitions:
 - Sentinel Event:
 - Is an unexpected event occurrence involving death or serious physical or psychological injury or the risk thereof. It is an adverse event of a severe and urgent nature. Such events are often red flags for potential litigation, associated with drastic physical or psychological injury to a patient, and are often indicators of system and/or personnel problems that pose a threat to future patients.
 - Examples include:
 - ◆ Major transfusion reaction;
 - ◆ Significant adverse drug reaction;
 - ◆ Major discrepancy between preoperative and postoperative diagnosis;
 - ◆ Significant adverse anesthesia reaction;
 - ◆ Significant deviation from a historical statistical norm.
 - ◆ Event associated with a lawsuit or the threat of a lawsuit;
 - ◆ Event associated with open interpersonal conflict or disruptive behavior affecting patient care.

 - Reviewable Sentinel Events
 - Results in an unanticipated death or permanent loss of function, not related to the patient's illness or injury;

CRISIS INTERVENTION

- Developing a Crisis Plan:
 - As healthcare changes and expands to include more services and partnerships with large teaching facilities and managed care organizations, it is becoming increasingly important for organizations to think in terms of limiting exposure. One of the ways of doing this is to have a Crisis Intervention Team/Crisis Communication Plan in place. This plan must also include a team of members who interact with federal investigators and the news media.
 - How the organization responds to the first few critical days and hours will make a difference.
 - Information and decisions about your objectives, target audiences, program and message elements, and strategies must come together in an action plan that serves as a blueprint for the intervention. This plan should specify tasks, who is responsible for them and when they will occur. In short, who will do:
 - What
 - When
 - Where
 - The Crisis Communication Plan:
 - Identifies warning signs of potential crisis;
 - Reduces organization liabilities;
 - Prioritizes outcomes;
 - Is a tool for reputation/image damage control;
 - Enhances issue management; and
 - Has a vital public relations role.
- Planning
 - In order to gauge an organization's readiness to deal with these crises, the following actions should occur on a regular basis:
 - Executive staff and other key staff should have media training.
 - Regularly-scheduled employee training sessions on patient and organizational confidentiality.

DEPARTMENTAL SECURITY RISK ASSESSMENT

Department: _____

Yes	No	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does your department have any outside openings (i.e., doors, windows)?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is your department located in a high traffic area?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does your department have any security alarms such as panic buttons or door alarms?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does your department have a waiting area/room?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does your department have cash on hand?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does your department carry pilferable supplies?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does your department have any high-value items/equipment?

How many employees are on duty at any given time during each shift?

Day Shift: _____ Evening Shift: _____ Night Shift: _____

Please describe any losses due to theft or vandalism that has occurred in the last year:

What is the estimated value of lost items? _____

How many employees have access to the department's key? _____

Has your department had any disturbances (such as disorderly conduct, assaults) in the past year?

Yes No If yes, how many? _____

Does your department have vulnerabilities that the Security Department should be aware of? Please explain:

Please rate our Security Management Program by rating the following statements:

Exc	Good	Fair	Poor	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security of the physical plant
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Protection policies and standards
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedures to detect policy violations, improper procedures, etc.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inspections of conditions/procedures that cause problems (i.e., vandalism, property losses)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Access control
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Use of security equipment (i.e., alarms, cameras)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compliance of personnel to security standards