Office of the Superintendent



Tina Kotek, Governor

September 30, 2024

To all OSH staff,

This Directive modifies and adds to OSH policy 1.003, "Incident Reporting."

To provide additional guidance for staff in response to reportable incidents and to keep the hospital in compliance with The Joint Commission, Centers for Medicaid and Medicare Services and state regulations, it is my directive that, **effective today**, **September 30, 2024:**

In the event of a reportable incident, staff must:

- Respond to the incident based on applicable OSH policies, procedures, and protocols.
 - Staff response must prioritize staff and patient safety.
 - In addition, staff must engage in actions to attempt to prevent future occurrences.
 - If staff do not know which actions to immediately take in response to a reportable incident, staff should contact their on-site management as soon as it is safe to do so for additional guidance and support.
 - o Examples of response expectations are as follows:
 - Found contraband: OSH policy 8.019 "Staff response to contraband and prohibited items"
 - Sexual contact: OSH policy 6.016 "Sexual Activity Involving Patients"
 - Patient Fall: OSH policy 6.046 "Fall Prevention Program"
 - Found Medication: OSH policy 8.044 "Contraband and Prohibited Items" and 8.019 "Staff response to alleged criminal acts and contraband"
 - Wandering Patients: Administrative Directive dated august 21, 2024 for OSH policy 8.018 "Unauthorized Leave Events"

- Staff must take any actions that are in alignment with OSH established processes to support patient and staff safety and prevent the reportable event from reoccurring.
 - Any immediate remediations or actions taken must be documented in the Incident Report (IR) and Incident Review Form (IRF).
 - Immediate actions can include communication, the completion of an incident report, escalation to manager/ management, separation of patients, removal of contraband or prohibited item, gathering information from patients, reporting to security for response, etc.
 - To the extent possible, staff must consider why an incident occurred which will help inform immediate actions. This should also be noted in the narrative section of the IR.
 - For example: A patient is found with a regular pen which is reportable. Immediate response is the pen is removed. Possible reason is that staff dropped their pen. Next immediate action is to do an environmental search to ensure there are no additional pens in patient care areas and to do an education with staff and to place the information in the shift report for manager follow up.

Staff must follow the guidance provided by all policies, procedures and protocols in immediate response to the given reportable incident.

This directive will remain in effect until OSH Policies and Procedures are updated or the directive is otherwise rescinded.

Sincerely,

Sara C. Walker, MD

Interim Superintendent/CMO

