

## Incident Reporting System Policy

### 1. SCOPE

- 1.1. System-wide
  - Incidents involving employee health and safety are outside the scope of this policy.
- 1.2. Facilities and departments included in the scope listed above are further defined in the [Scope Definition Resource Guide](#) if not specifically outlined above.

### 2. DEFINITIONS & EXPLANATIONS OF TERMS

- 2.1. Abbreviations
  - MCHS: Marshfield Clinic Health System
- 2.2. Definitions
  - Reportable Incident: An occurrence or event requiring documentation in the Incident Reporting System.
  - Patient Safety Event: An event, incident, or condition that could have resulted or did result in harm to a patient. These can include, but are not limited to :
    - ◇ Adverse event : Event that resulted in harm to a patient
    - ◇ No-harm event: Event that reaches the patient but does not cause harm
    - ◇ 'Near Miss' or 'Good Catch' event: Event that did not reach the patient
    - ◇ Hazardous Condition: A condition (other than the patient's own disease process or condition) that increases the probability of an adverse event.

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### 3. POLICY BODY

**Purpose Statement:** The purpose of this document is to provide support and expectations for reporting incidents occurring in the Marshfield Clinic Health System. The benefits of prompt reporting include assisting patients and families to resolve concerns; protecting MCHS, providers, and employees; and providing involved professionals with support and feedback.

- 3.1. All reportable incidents and patient safety events shall be reported in the Incident Reporting system.
  - a. If an individual is unsure whether an event requires reporting, they can seek guidance from their manager, or the Risk Management or Patient Safety teams.
    - If the incident is regarding care provided in a non-MCHS facility, enter an incident in the MCHS Incident Reporting System.
  - b. A report should be filed in a timely manner after immediate patient needs are attended to.
  - c. The incident report should be complete and factual, entered by the involved or notified employee, physician, provider, or department manager (or his/her delegated representative) in the area in which the incident occurred.
    - Instructions for submitting incidents are located on the Incident Reporting System intranet page. Incident Reporting System - Home (mfldclin.org)
- 3.2. Documentation in the patient's medical record should not reference incident reporting, legal services, or risk management. The patient's medical record should include factual information about the event.
  - a. Information documented in the patient's medical record may include what happened, how it happened, if there are any changes in the patient's clinical status and what has been done following the incident to meet the patient's clinical needs.
  - b. Care team and provider should follow the normal process for any immediate patient follow-up (e.g. orders or evaluation) required as a result of the event.
- 3.3. All reported incidents are investigated. The incident will be closed in the incident reporting system following the conclusion of the investigation.
  - a. It is the expectation of MCHS that all physicians, providers, and staff will cooperate fully in inquiries and investigations concerning incidents.
  - b. An investigation of an incident does not imply wrong doing.
  - c. Incident investigations are meant to look for systemic and process improvement opportunities as well as opportunities to assist staff members to reflect on practice and behavioral choices.
  - d. Confidentiality of individuals who are reporting or who have been involved in an incident is a high priority. Information included in reports is shared on a need-to-know basis.
  - e. The resolution of an incident may not be communicated to reporters in an effort to protect the confidentiality of those involved.

- f. Incident reports and associated documentation are not shared with patient and families.
- 3.4. It is the policy of Marshfield Clinic Health System that no one will be retaliated against for submitting an incident report based upon an honest perception of the events or for cooperating in good faith in the investigation of an incident.
- a. If an employee believes he or she is being retaliated against for reporting a concern or participating in a related investigation, he or she should report it to their manager or the Human Resources department immediately.
- 3.5. Frequently, employees of Marshfield Clinic Health System are also customers of the health system as well. We want to hear about safety concerns you, a family member, friend or other acquaintance experiences for improvement purposes.
- a. If you experience a safety incident as a customer please contact the Patient Experience, Risk Management or Patient Safety departments to assist you in entering your concern into the incident reporting system for review.
  - b. If your family member, a friend or other acquaintance expresses a safety concern they experienced as a customer that they would like reviewed, please contact, or provide them with contact information for, the Patient Experience department so the event can be entered into the incident reporting system.

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#### 4. ADDITIONAL RESOURCES

- 4.1. References:
  - [Intranet site](#)
- 4.2. Supporting documents available:
  - None

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**5. DOCUMENT HISTORY**

Version No.	Revision Description
1.0	Previously was in Policy Library (policy 4849.0) and was effective on 5/1/12
2.0	Updated to include information on confidentiality and no tolerance for retaliation. Also to move into Document Control System.
3.0	Updated definitions section, 3.2 and 3.4. 1/12/17
4.0	Removed Marshfield Clinic Logo, Updated Quick Part in Header. Added 3.5b.
5.0	Updated Purpose Statement, Section 3.1, 3.2, 3.3, 3.4, 3.5 and 3.6.
6.0	Added section 3.7
7.0	Administrative Override: DCS Checklist; updated file name per DCS titling schematic.
8.0	Administrative Override: Removed <a href="#">Incident Reporting System—Risk Management Incident</a> from section 4.2 with okay from Jessica Bell and Nancy Stueland-Adamski.
9.0	DCS Checklist Per Nancy Stueland-Adamski; updated 3.4b.
10.0	DCS Checklist 5/8/2023: Updates completed based upon revision request submitted by Laura Monday on 5/5/2023. 6/6/2023: Updates completed based upon revision request submitted by Laura Monday on 6/5/2023.

## 6. DOCUMENT PROPERTIES

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