

PM ATTACHMENT 10.7.2
Sentinel Even Systems Sample Worksheet
(Format not mandatory)

Area for Review (JCAHO FUNCTIONS):	Concerns Identified:	JCAHO Function Area Root Cause Examples:
1. Ethics & Rights:		
When denial of care occurs, the assessed needs of the client are considered regardless of payment	-care plan based on authorized services (third-party payor) rather than assessed needs of client -information about rights is not provided when denial occurs	-staff member had a dual relationship with client -notice of action not provided when client was denied SMI services which made the client ineligible for services
Ethical integrity is maintained	-dual relationships -boundary violations	
Notice of Action	-notice not given at SMI determination	
Client Rights	-denied pastoral services while at the PHF	
2. Provision of Care:		
Screening & Assessing Client Needs	-no assessment update despite major life events -screening tools (nutrition, physical health, etc.) do not result in referrals when indicated	-Behavioral Health Service Plan did not include assessed needs of the client
Risk Assessment	-not completed -no action taken when risk identified	-Re-engagement not done to its fullest extent on high risk client after regularly scheduled appointment missed (no home visit or welfare check)
Planning Care	-no treatment plan	
Safety / Crisis Plan	-not present -not current	
Providing Care	-services not provided for identified needs	
Documenting Care	-late entries -inadequate documentation	
Education	-informed consent not obtained	
Continuum	-engagement and/or re-engagement not done	
Coordinating Care Internally and Externally	-Internally: failure to notify physician of suicide attempt -Externally: no coordination of care with PCP	
3. Medication Management:		
Ordering Medications	-incompatible medications ordered -medication reconciliation not done	-Medication was dispensed to wrong client resulting in hospitalization
Preparing and Dispensing Medications	-medication errors (wrong drug, wrong client, etc.)	
Providing Samples	-medication reconciliation -availability of samples	-High Lithium levels were missed on the lab results and Lithium medications continued to be dispensed resulting in hospitalization
Administering Medications	-medication error (wrong dose, wrong route, wrong time, etc.)	
Monitoring Medication Effectiveness	-no lab testing when required	

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4. Infection Control:		
Healthcare Acquired Infection	-pneumonia acquired in the PHF unit	-Incomplete medical screening did not catch that the client had a communicable disease
Surveillance for Communicable Diseases	-mumps outbreak in the PHF unit	
5. Performance Improvement:		
Data collection	-concerns identified through incident reporting are not mitigated	-lack of re-engagement identified as system problem with no plan of action to resolve problem
Assessing Improvement	-failure to recognize trend of incident report data	
Improving Performance	-large number of discharges due to lack of contact identified as system issue with plan for improvement	-failure to recognize trend in medication errors from Pharmacy
6. Leadership:		
Services by contract or consultation	-services (dentist, registered dietician, lab & x-ray) not available when needed	-Failure to update Safety Management Plan when new services and/or facility added
Policies & Procedures guide the provision of care	-inadequate direction for staff to implement effectively	
Allocation of Resources	-additional prescriber needed to handle increased client population, but no available resources to hire	
Planning and Implementing Safety Management Plan	-Safety Management Plan not updated in a timely manner	
7. Environment of Care:		
Provision of Safe and Secure Environment	-safety or security issues not mitigated	-Wall in seclusion room had breakable wood that was used as weapon in self harm
Educating Staff Members for Emergency Response	-inadequate response to life-threatening emergency	
Monitoring the Environment for Hazards	-failure to recognize a hazard -non-breakaway hardware on inpatient unit	-Wall around court yard at the Inpatient unit not high enough, patient was able to climb over wall and was struck by car in street
8. Human Resources:		
Providing Adequate Staff Resources	-availability of staff appointments -insufficient supervision of staff members	-Staff member did not receive sufficient training to show competence in assessing risk of the client
Orientation and Training of Staff Members	-knowledge of policies, procedures, and practices	
Assessing, Maintaining, and Improving Staff Competence	-failing to maintain CPR and First Aid certification	-New protocol for high risk populations implemented system wide with no training prior to implementation
Credentialing and Privileging of Staff	-performance of procedure when not credentialed or privileged to do so	
9. Information Management:		

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Area for Review (JCAHO FUNCTIONS):	Concerns Identified:	JCAHO Function Area Root Cause Examples:
Timely Access to Information	-Inter-RBHA transfer process -late filing	-failure to do coordination of care with PCP after suicide attempt -misfiling of med sheet led to dispensing of incorrect medication that caused adverse reaction
Documenting Care	-late entries -inadequate documentation	
Safeguarding Data and Information	-loss of information due to system wide computer virus	
10. Other Concerns:		
	Use this area to address concerns that cross several functional areas if unable to reach consensus of primary functional area.	

Worksheet Completed By: _____

Date: _____