

Guidelines for PDs in Addressing Safety and Learning Reports from UCHealth

There are two main categories of reports generated.

Patient Safety Report (RL, QSRS, Stars, etc.): This is a safety report. These reports are reviewed daily by nursing leadership on a unit-assigned basis (i.e. an RL that happened in the MICU is reviewed by MICU Nurse Manager). If the RL contains a professionalism concern, it is sent to the President of the Medical Staff. If the professionalism concern involves a trainee, they will reach out to you as the PD. You may get an email with a title like “Provider Professional Conduct concern” with the referenced RL number. Otherwise, the report is sent to the Medical Director of the Unit. The Medical Director may contact you if they need your assistance.

Medical Staff Peer Learning: This type of report is part of Medical Staff processes to support continuous improvement and provider success as outlined by the Professional Practice Evaluation (PPE) Policy. GME does not fall within the scope of the PPE Policy, therefore if an event involves a GME provider, the event will be sent to the Program Director for appropriate follow up, if any. **Residents and fellows are learners, so some of the reports identified through the Medical Staff Peer Learning process may be expected events in the context of training.**

If supervision concerns are raised, the Medical Staff Peer Learning Program will review. If in your review of an RL or Peer Learning report, you identify supervision concerns (which are [defined by the ACGME](#)), the Medical Staff Office would like you to let them know of these concerns. Your program has supervision levels defined by event in your [program handbook](#).

It is important to remember that these reports are frequently incomplete, may lack meaningful information, and represent only one person’s perspective of an event. Some reports may be very detailed, others may be challenging to interpret. As a PD, you may receive the same event via multiple routes, i.e. a Medical Director and Peer Learning may both contact you. If you have already triaged and/or addressed the issue appropriately, you just need to respond with an appropriate loop closure statement.

When you receive an RL or Peer Learning Report, you are being asked to:

1. Review the report
2. Triage the report
 - a. This may include gathering additional information from the resident (or not)

- b. CU GME recommends keeping track of these reports in a system consistent with other evaluations for residents, either a spreadsheet or other tracking system, to identify trends in individual residents, sites, or services.
 - c. UHealth does track via spreadsheet, and typically will include prior reports if residents have been involved in prior reports.
3. Address any concerns with the resident as appropriate and provide feedback **as appropriate**. Please see the below grid to evaluate the report using a just culture framework.
- a. Appropriate action may include a spectrum of responses, from review only to remediation.
 - i. Consider including information at CCC
 - ii. Consider referral to CCR if appropriate
 - b. These reports do not **require** any specific action on your part other than loop closure to the UHealth team that you will let them know if a supervision concern is raised. The expectation is you will triage the report appropriately.
 - c. If a supervision concern is raised, you must respond to the Medical Staff Office.

		Substitution Test Could a competent learner with an equivalent level of training have done the same thing?	
		YES	NO
Test of Intention Did the Learner knowingly violate standards of care?	YES	<p>At Risk Behavior Did this happen because of inadequate learner supervision?</p> <p>YES Coach learner AND Report supervision issue</p> <p>NO Coach learner</p>	<p>Reckless Behavior Did this happen because of inadequate learner supervision?</p> <p>YES Remediate learner AND Report supervision issue</p> <p>NO Remediate learner</p>
	NO	<p>Human Error Did this happen because of inadequate learner supervision?</p> <p>YES Console/support learner AND Report supervision issue</p> <p>NO Console/support learner</p>	<p>Question of Competence Did this happen because of inadequate learner supervision?</p> <p>YES Report supervision issue</p> <p>NO Coach learner</p>

Example Process:

Example 1: You receive the below Peer Learning report:

On 7/29, nursing was advocating to transfer patient to stepdown due to high oxygen demands. Pt was using 10l of oxygen via oxy mask with ambulation and 5L oxygen at rest during past 12 hours. Intern placed stepdown orders after speaking with charge RN. Pt was assigned a bed, but then chief resident stated patient is stable and will see how O2 responds to steroid and abx. Looped in CCOR. Pt stayed on floor on 5L O2. On 7/31, patient developed acute hypoxemic respiratory failure requiring 15L of O2 at rest. Transferred to MICU for higher level of care.

Your initial email response:

Thank you for letting me know. I will review the report and address with the involved resident as appropriate. If I identify any supervision concerns or other critical issues, I will follow up with this group.

- 1) You review the report and identify next steps, if any are needed.
 - a. Review the just culture framework.
 - b. Determine if review alone is adequate. If so, your action is complete. In this case, with a patient being actively treated and transferred 2 days later, involving a resident with no other issues, appropriate to triage to review only.
 - c. Probably the concern raised is that the resident's decision was either risky or reckless, however your review may determine no error occurred.

Example 2: You receive the below Peer Learning report:

Medicine R2 was placing central line at bedside. Appropriate time out was not performed in spite of nursing reminding resident at bedside. Faculty not present.

Your initial email response:

Thank you for letting me know. I will review the report and address with the involved resident as appropriate. If I identify any supervision concerns or other critical issues, I will follow up with this group.

- 1) You review the report and identify next steps, if an are needed.
 - a. Review the just culture framework.
 - b. Determine if review alone is adequate. Additional information needed to determine Intention and Substitution Test.
 - c. Discuss with resident. Approach with curiosity and context of previous learner concerns (or lack thereof).
 - d. Consider discussion with faculty based on resident conversation.
 - e. Action based on just culture framework.
 - f. Respond to Medical Staff Office and Peer Learning IF supervision concern identified.