	REGIONAL Applicable to all WRHA governed facilities and Sites (including hospitals and personal care homes), and all funded hospitals and personal care homes. All other funded entities are excluded unless set out within a particular Service Purchase Agreement.		Level **1**
POLICY	Policy Name: **Critical Occurrence Reporting and Management**	Policy Number: 10.50.045	Page: 1 of 4
	Approval Signature: *Original signed by A. Wilgosh*	Section: GENERAL ADMINISTRATION	
	Date: **March 2014**	Supercedes: New	

1.0 **PURPOSE:**

1.1 To provide direction regarding the reporting and management of Critical Occurrences.

1.2 To fulfill the responsibilities as outlined in the Manitoba Health Critical Occurrence Reporting and Management policy.

2.0 **DEFINITIONS**:

2.1 Critical Occurrence: Events within the Winnipeg-Churchill health region, (excluding those such as Critical Incidents #10.50.040 and Occurrences #10.50.045 that result in one or more of the following: (LINK - http://home.wrha.mb.ca/corp/policy/policy.php)

2.1.1 Serious harm to Staff, visitors and other persons associated with the facility;
2.1.2 The potential to significantly and negatively affect public confidence, credibility and trust;
2.1.3 Significant and prolonged disruptions to the delivery of service and programs, when the disruptions are unplanned or unexpected;
2.1.4 An emergency or Disaster, or;
2.1.5 A Significant Event Affecting the Health of the Public.

2.2 Disaster: An event that has the potential to exceed the ability of a local community or facility to cope with the harmful effects and requires extraordinary measures.

2.3 Emergency: Increasingly serious mishaps that involve more people, as victims and as responders, than accidents do, but do not overwhelm a community or facility to the point of being a Disaster.

2.4 Significant Event Affecting the Health of the Public: means any event that may have serious implications to the health and welfare of the public or the delivery of

health care services or programs to the public and includes but is not limited to, outbreaks of infectious diseases, contamination of food or water supplies, events that cause large numbers of morbidity or mortality, and other events expected to significantly affect the health of the public within the Winnipeg-Churchill health region.

2.5 Site: includes funded healthcare facilities in all sectors, Community Areas, programs, departments, and services within the Winnipeg-Churchill health region.

2.6 Staff: all persons employed within the Winnipeg – Churchill health region, including members of the medical staff, physicians, volunteers, board members, students, and other individuals associated through legal contracts.

3.0 POLICY:

3.1 Staff observing or involved in a Critical Occurrence shall follow the procedures for reporting as outlined in this policy and Site operating procedures.

3.2 Individuals (other than Staff) who observe a Critical Occurrence shall be encouraged to report it in the manner outlined in this policy and its procedure.

3.3 With the goal of encouraging a culture of reporting and applied learning, the WRHA shall facilitate Staff, Patients and individuals to report Critical Occurrences.

3.4 Sites shall establish operating procedures to demonstrate compliance with the reporting, review, and follow-up arising from Critical Occurrences, in accordance with the procedures outlined in this policy.

3.5 The Winnipeg-Churchill health region shall report Critical Occurrences to Manitoba Health in accordance with the procedures outlined in this policy.

4.0 PROCEDURE:

4.1 REPORTING CRITICAL OCCURRENCES

4.1.1 Sites will identify a Site designate to report Critical Occurrences to the WRHA Critical Occurrence designate.

4.1.2 During regular business hours, Critical Occurrences are reported immediately to an immediate supervisor or designate who will report to the Site Critical Occurrence designate.

4.1.3 From Monday – Friday, 0830-1630 hours, the Site Critical Occurrence designate (or a Site executive member) shall inform the following WRHA staff via e-mail:

4.1.3.1 if the Critical Occurrence relates to a regional clinical program, the clinical program team (Program, Administrative, Medical Director), and;

4.1.3.2 WRHA VP responsible for the program.

4.1.4 The Site Critical Occurrence designate will report all Critical Occurrences to the WRHA **Critical Occurrences Mailbox (co@wrha.mb.ca)** by the end of the business day. The Critical Occurrence e-mail notification will include:

4.1.4.1 name of the Site;

4.1.4.2 time and date of the Critical Occurrence;

4.1.4.3 brief description of the facts of what occurred and the condition of the Staff and Site;

4.1.4.4 steps taken to mitigate harm, and;

4.1.4.5 the reporter's name, phone number and e-mail address.

4.1.5 Within 24 hours, the WRHA Critical Occurrence designate will provide a Critical Occurrence e-mail notification to Manitoba Health.

4.1.6 If the Critical Occurrence occurs after hours:

4.1.6.1 the Critical Occurrence will be reported to the Site Administrator on Call;

4.1.6.2 the Site Administrator on Call will report the Critical Occurrence to the Site Critical Occurrence designate and the WRHA Administrator on Call;

4.1.6.3 the WRHA Administrator on Call will report the Critical Occurrence to the Manitoba Health on-call service, and;

4.1.6.4 the WRHA Administrator on Call will contact the parties listed in 4.1.3 via e-mail.

4.2 MANAGING CRITICAL OCCURRENCES

4.2.1 An immediate supervisor or Site designate ensures:

4.2.1.1 Staff are provided with guidance through the reporting, review and follow-up process, and access to ongoing support as needed.

4.2.1.2 Patients, Staff and individuals are safeguarded and receive immediate clinical care as needed.

4.2.1.3 the location of the event including pertinent equipment and supplies is secured if possible. This could include but is not limited to ensuring equipment is not removed from the scene or altered in any way, and securing records, including medical records if applicable.

4.2.1.4 follow-up actions and recommendations arising from Critical Occurrence reviews are monitored and analyzed for the purpose of applied learning and system improvements.

4.2.2 Within 28 business days, the Site Critical Occurrence designate will provide a written final report on the Critical Occurrence to the WRHA **Critical Occurrences Mailbox (co@wrha.mb.ca)**. The final report will include:

4.2.2.1 Site name;

4.2.2.2 time and date of Critical Occurrence;

4.2.2.3 details of the Critical Occurrence and an update on the condition of Staff and Site involved, and;

4.2.2.4 findings, recommendations and follow-up actions related to the Critical Occurrence.

If the final report cannot be provided within 28 business days, the Site Critical Occurrence designate will contact the WRHA Critical Occurrence designate to request an extension of up to 60 business days.

4.2.3 The WRHA Critical Occurrence designate will provide all Critical Occurrence final reports to Manitoba Health within 30 business days subject to 4.2.2.

5.0 REFERENCES:

5.1 Manitoba Health. Critical Occurrence (CO) Reporting and Management Policy. July 2012.

5.2 Critical Incident Reporting & Management #10.50.040 http://home.wrha.mb.ca/corp/policy/policy.php

5.3 Occurrence, Near Miss Reporting & Management #10.50.020
http://home.wrha.mb.ca/corp/policy/policy.php

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