



## RISK MANAGEMENT STEPS AFTER AN ADVERSE EVENT

*(PLEASE USE THE COMPANION CHECKLIST  
TO ENSURE ALL STEPS ARE COMPLETED.)*

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The actions to consider after an event will depend on the seriousness of the event. This checklist can be used to assist your risk management and leadership team in determining what actions are necessary and in what order.

1. Ensure the patient's medical needs are being met. This may include consulting with specialists to meet the patient's needs as a result of the event.
2. Communicate with the patient and family as soon as possible. All discussions with family should be in compliance with HIPAA privacy rules. Complete a pre-disclosure meeting with attending/nurse manager/risk management/leadership on who will talk with patient and/or family and discussion points. Follow your hospital policy on disclosure with the patient/family.
  - a. Help them understand the situation and implications for further activity.
  - b. Answer their questions and offer emotional support.
  - c. Do not immediately offer an explanation (which may not be known until the investigation is complete). Do not speculate.
  - d. Do not point fingers or blame any individuals.
  - e. Offer to keep them in the loop as you find out more information.
  - f. Offer an appropriate apology in which you express empathy with the patient's situation, but do not accept blame or liability.
  - g. Describe what will be done next.
  - h. Avoid vague statements like "we will take care of it" or "we will make it right", which are subject to inconsistent interpretation.
  - i. Provide them with the name and number of a contact person in the organization.
  - j. Document the discussion with patient/family in the medical record.
3. Ensure an event report is completed. Notify appropriate unit and hospital leadership for awareness of the event.
4. Secure all documents (in other departments, if necessary) related to the event. Follow the process for "litigation hold" of documents (to prevent destruction of any documents, photos, video recordings, audio records or electronic information). Special consideration should be given to electronic information, such as text messages and emails.

- a. If equipment failure or malfunction is suspected, secure and send to biomed for evaluation/retention. (Follow your policy for retaining all tubing and equipment attached to the device at the time of the incident.) Maintain the chain of custody.
  - b. Review and note any possible environmental factors that may have contributed to the situation.
  - c. Collect relevant staffing and shift schedules, if necessary.
5. Review the medical record.
- a. Ensure documentation of the event in the record is complete. Instruct those involved how to appropriately complete late entries or amendments to the record if they feel it is necessary. Your insurer is a valuable resource for discussing whether a late entry or amendment to the record is necessary. (make sure to follow your policy)
  - b. Develop a timeline leading up to the event if appropriate.
6. Interview everyone involved in the event to get their understanding of what occurred.
- a. Schedule the interview in a non-threatening, private place, and in-person, when possible.
  - b. Share the importance of open communication regarding their experience in the event.
  - c. Create a fair and just culture that will focus on prevention and improvement to achieve overall learning for the organization.
  - d. Remind individuals involved in an event NOT to talk with others about it, especially outside the workplace (this includes social media). Do not generate any written or signed statements unless directed by risk management, insurance carrier or defense counsel.
  - e. Advise individuals involved not to review the patient's medical records in the EMR, as any such access will be recorded on the audit log.
  - f. Interview Process
    - i. Allow the individual to share their narrative description of the event first.
      - a. Ask them to describe the event in their own words.
      - b. Ask them to tell you what happened from beginning to end.
    - ii. Next, use interview questions to help you understand the situation. Avoid any leading or accusatory statements.
      - a. Identify the topics you need to cover and the objectives of the interview.
      - b. The “who, what, where, when, why, and how” of the event.
      - c. What issues need to be clarified about the event?
7. Place bills on hold. Discuss with physicians involved in care at time of event and those being consulted as a result to coordinate billing activities. Hold surveys and patient satisfaction evaluations from being sent, especially if it is a high-harm event.
8. Evaluate for staff needing second victim support. Healthcare providers and staff who are involved in unanticipated outcomes may experience an emotional impact or traumatic effect. Contact HSG for HEALS (Healthcare Event Assistance & Lending Support) Program at 1-573-893-5300.

9. Determine if a root cause analysis should be performed. If yes, please follow your root cause analysis policy or reach out to HSG Risk Management for additional guidance.
10. Determine whether a report to any public or private entity or agency is needed (e.g., PSO, CMS, Children's Division, Joint Commission, etc.).
11. Notify HSG of high harm event with potential litigation.

ADVERSE EVENT: CHECKLIST

<b>Checklist: RM Steps after an Adverse Event</b> (see Risk Management Steps after an Adverse Event)			
Steps 1-4 to be completed as soon as possible following the event:			
	Date complete:	Responsible Person(s):	Follow-up:
1. Ensure the patient's medical needs are being met.			
Notes:			
	Date complete:	Responsible Person(s):	Follow-up:
2. Communicate with the patient and family as soon as possible.			
Notes:			
	Date complete:	Responsible Person(s):	Follow-up:
3. Ensure an event report is completed, and hospital leadership is notified.			
Notes:			
	Date complete:	Responsible Person(s):	Follow-up:
4. Secure all documents related to the event. (Secure equipment if failure/malfunction is suspected.)			
Notes:			
Steps 5-8 to be completed/initiated within 24 hours:			
	Date complete:	Responsible Person(s):	Follow-up:
5. Review the medical record and develop timeline.			
Notes:			
	Date complete:	Responsible Person(s):	Follow-up:
6. Interview all staff involved in the event to understand what occurred.			
Notes:			
	Date complete:	Responsible Person(s):	Follow-up:
7. Put bills and mailings on hold.			
Notes:			

ADVERSE EVENT: CHECKLIST

	Date complete:	Responsible Person(s):	Follow-up:
8. Evaluate for potential staff needing second victim support.			
Notes:			
Steps 9-11 to be completed/initiated within 48-72 hours:			
	Date complete:	Responsible Person(s):	Follow-up:
9. Determine if a root cause analysis should be performed.			
Notes:			
	Date complete:	Responsible Person(s):	Follow-up:
10. Determine if need for regulatory reporting.			
Notes:			
	Date complete:	Responsible Person(s):	Follow-up:
11. Notify HSG.			
Notes:			