


<b>Name of Policy:</b>	<u>Reporting of Errors</u>	 <b>THE UNIVERSITY OF TOLEDO MEDICAL CENTER</b>
<b>Policy Number:</b>	3364-134-23	
<b>Department:</b>	Radiation Oncology	
<b>Approving Officer:</b>	Chief Executive Officer - UTMC Professor & Chairman, Radiation Oncology	
<b>Responsible Agent:</b>	Technical Manager, Radiation Oncology	
<b>Scope:</b>	Radiation Oncology	
		<b>Effective Date:</b> 2/1/2018
		Initial Effective Date: 8/20/2003
<input type="checkbox"/> New policy proposal <input checked="" type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Major revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy		

**A. Policy Statement:**

To improve patient quality and safety, the University of Toledo Medical center (UTMC) has an incident reporting process for verbally and electronically reporting events in order to monitor, evaluate and trend incidents or unsafe conditions' involving the safety of patients or visitors. UTMC's goal is to encourage blame free reporting.

**B. Purpose:**

Incident reporting is important for ensuring the right persons are involved with respect to responding to an event. To facilitate a culture of safety, staff is encouraged to timely reporting of incidents with no reprisal for reporting such events. The purpose is to evaluate the processes, systems and functions for documentation, evaluation and trending of events with the aim to facilitate safe conditions and improve patient care.

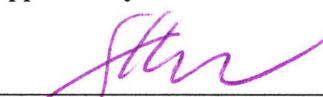

**C. Procedure:**

In the event of a patient safety event or near miss, Staff will:

1. Follow hospital policy: 3364-100-39 Patient Safety Event and Occurrence reporting
2. Fill out the radiation oncology internal occurrence reporting document
3. Physics and the physician will be notified of event/near miss
4. Physics will determine if the occurrence is reportable to the state based on our defined levels of deviation and the appropriate action
5. The radiation oncology department will comply with institutional, state, local and national requirements for reporting safety incidents
6. Physics will report on incident at our department QA meeting, with feedback, all staff will receive proper notification of event and conclusion.
7. Physics will report to RO-ILs (Radiation Oncology incident learning system)

8. Patients have the right to report safety concerns to management and if their concern is not resolved they have the right to call :

- Customer Care Center at 419.383.3606
- Ohio Department of Health Complaint Hotline at 800.342.0553
- Quality Improvement Organization for Medicare – State of Ohio (Medicare patients only) 855.408.8557
- Joint Commission Complaint Line 800.994.6610.

<p><b>Approved by:</b></p> <div style="text-align: center; margin-top: 20px;">   <hr style="width: 80%; margin: 0 auto;"/> </div> <p style="text-align: center;">Changhu Chen, MD      Professor &amp; Chairman, Radiation Oncology</p> <div style="text-align: center; margin-top: 20px;">   <hr style="width: 80%; margin: 0 auto;"/> </div> <p style="text-align: center;">Daniel Barbee, RN, BSN, MBA      Chief Executive Officer</p> <p style="margin-top: 20px;"><i>Review/Revision Completed By:</i>      Michelle Giovanoli</p>	<p><b>Review/Revision Date:</b></p> <p>8/20/2007        5/2008        7/1/2011        5/1/2016        10/1/2017        12/1/2017        2/1/2018</p> <hr style="margin-top: 20px;"/> <p><b>Next Review Date:</b> 2/1/2021</p>
<p><b>Policies Superseded by This Policy:</b> 38-95</p>	