QM.15.4 The hospital forms a team to complete the root cause analysis along with an action plan for all sentinel events. The team should bring together those who have an intimate knowledge of the normal process.

QM.15.5 The root cause analysis and risk reduction plan are sent to CBAHI within thirty working days from the date of the internal notification of the event.

QM.15.6 Reportable sentinel events are reported as required to other relevant authorities.

Standard Intent:

The hospital must also be able to identify significant unexpected or adverse events and intensively analyze them to understand their underlying causes and, as a result, make the necessary improvement interventions.

To be able to effectively improve quality and safety of care and reduce risks, the hospital must constantly use indicators to measure its performance and use the resulting information to identify processes which can be improved.

QM.16 The hospital develops and maintains a patient safety program.

QM.16.1 Hospital leaders adopt a just culture that promotes both professional accountability and reporting of adverse events/near misses.

QM.16.2 Hospital leaders provide direction and resources to support the patient safety program.

QM.16.3 The hospital assigns a qualified individual to provide coordination and supervision of the organization-wide patient safety program.

QM.16.4 Hospital leaders establish a multidisciplinary patient safety committee (can be integrated with quality improvement committee) to provide direction and oversight of the patient safety program.

QM.16.5 Hospital leaders conduct patient safety culture assessment at least once annually. Data are analyzed and improvements are made accordingly.

QM.16.6 Hospital leaders conduct regular leadership patient safety rounds in patient care services to encourage reporting of incidents/near misses and to identify potential risks and hazards.

QM.16.7 The hospital adopts safe practices that have been proven to improve patient safety and reduce harm to patients such as those from the World Health Organization (WHO) and other national and international organizations concerned with patient safety.

QM.16.7.1 The hospital develops and implements policies, procedures, protocols, and guidelines for implementation of the patient safety practices.

QM.16.7.2 The hospital provides equipment/devices with technological features proven to reduce errors and improve safety.