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Department of Health and Human Services

2020 Sentinel Events Registry Summary Report

Department of Health and Human Services, Office of Analytics
and
Division of Public and Behavioral Health, Office of Public Health Investigations and Epidemiology, Sentinel Event Registry

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Agenda

- Covid-19 impact on the SER
- Sentinel event definition
- SB457 (implementation update)
- Who should report sentinel events?
- Data collection methods
- Data analysis results
- Plans and goals
- Conclusion

Covid-19 Impact on the SER

- The 2019 Novel Coronavirus (COVID-19) pandemic necessitated SER adjustments.
- The SER Registrar was re-deployed to Covid-19 duties. The SER Administrator added Covid-19 data collection tasks to the job role. The SER Supervisor was focused almost entirely on outbreak tracking.
- Subsequently, levels of filing participation and data quality follow up reflect these unusual conditions.
- This year's report data values reflect this state-of-need prioritization.

Definition

Assembly Bill (AB28), effective 10/1/2013

Defined as a serious reportable event included in Appendix A of *"Serious Reportable Events in Healthcare—2011 Update: A Consensus Report."*

- serious, largely preventable, and harmful clinical events that should 'never' happen -

Published by the National Quality Forum (NRS 439.830).

Updated in 2013 to exclude healthcare acquired infections, HAI, reporting. All data included in this report has qualified per the definition of sentinel event in effect for 2017.

Reporting has been conducted in Nevada since 2000, with force of statute since 2011.

Definition Expanded

- Senate Bill (SB457), effective 10/1/2019
- Further defines reportable events to include non natural deaths (UND).
- Expands list of facilities reporting to the definition of Health Care facility.
- 1,772 health care facilities now report to the SER.
- Five additional license types meet reporting definition since SB457 passage (36 total).
- Notices to most non-enrolled health care facilities sent again on 1/2/2021.
- Currently 454 facilities are signed up.

Who Should Report (pre SB457)

- **NRS 439.805 "Medical facility" defined.**

1. A hospital, as that term is defined in NRS 449.012 and 449.0151;

2. An obstetric center, as that term is defined in NRS 449.0151 and 449.0155;

3. A surgical center for ambulatory patients, as that term is defined in NRS 449.0151 and 449.019; and

4. An independent center for emergency medical care, as that term is defined in NRS 449.013 and 449.0151.

Who Should Report (post SB457)

- **NRS 439.803 "Health facility" defined.** "Health facility" means:
- 1. Any facility licensed by the Division pursuant to **chapter 449** of NRS; and
- 2. A home operated by a provider of community-based living arrangement services, as defined in **NRS 449.0026**.
- (Added to NRS by **2019, page 1666**)

Who Should Report (post SB457)

Facility Code	Facility Description Type	Percent SER Enrolled	Count of SER Enrolled	Count of Facility Type
HHA	AGENCY TO PROVIDE NURSING IN THE HOME	16%	30	191
HBR	AGENCY TO PROVIDE NURSING IN THE HOME - BRANCH OFFICE	0%	0	6
HSB	AGENCY TO PROVIDE NURSING IN THE HOME - SUB UNIT	0%	0	2
PCS	AGENCY TO PROVIDE PERSONAL CARE SERVICES IN THE HOME	16%	42	269
BPR	BUSINESS THAT PROVIDES REFERRALS TO RFFG OR OTHER APPLICABLE GROUP HOMES	0%	0	2
CBL	COMMUNITY BASED LIVING ARRANGEMENT SERVICES - RESIDENTIAL CBLA FACILITY	0%	0	106
CBA	COMMUNITY BASED LIVING ARRANGEMENT SERVICES - SERVICE ONLY PROVIDER	0%	0	4
CTC	COMMUNITY TRIAGE CENTER	33%	1	3
HFS	FACILITY FOR HOSPICE CARE	0%	0	3
ICF	FACILITY FOR INTERMEDIATE CARE	50%	2	4
IMR	FACILITY FOR INTERMEDIATE CARE/IID	0%	0	7
MDX	FACILITY FOR MODIFIED MEDICAL DETOXIFICATION	20%	1	5
SNF	FACILITY FOR SKILLED NURSING	29%	16	56
ADC	FACILITY FOR THE CARE OF ADULTS DURING THE DAY	19%	7	36

Who Should Report (post SB457) (continued 2)

Facility Code	Facility Description Type	Percent SER Enrolled	Count of SER Enrolled	Count of Facility Type
ADA	FACILITY FOR THE TREATMENT OF ABUSE OF ALCOHOL OR DRUGS	29%	7	24
ESRD	FACILITY FOR THE TREATMENT OF IRREVERSIBLE RENAL DISEASE	61%	33	54
TLF	FACILITY FOR TRANSITIONAL LIVING OF RELEASED OFFENDERS	17%	1	6
NTC	FACILITY FOR TREATMENT WITH NARCOTICS	0%	0	16
HWH	HALF-WAY HOUSE FOR RECOVERING ALCOHOL AND DRUG ABUSERS	0%	0	7
HIC	HOME FOR INDIVIDUAL RESIDENTIAL CARE	10%	14	142
HPC	HOSPICE CARE - PROGRAM OF CARE	9%	9	105
HOS	HOSPITAL	94%	49	52
ICE	INDEPENDENT CENTER FOR EMERGENCY MEDICAL CARE	100%	1	1
ISO	INTERMEDIARY SERVICE ORGANIZATION	0%	0	2
MED	MEDICATION UNIT	0%	0	3
NSP	NURSING POOL	18%	10	57
OBC	OBSTETRIC CENTER	0%	0	1
OPF	OUTPATIENT FACILITY	23%	10	44
PCO	PERSONAL CARE AGENCY THAT IS ALSO ISO CERTIFIED	18%	3	17

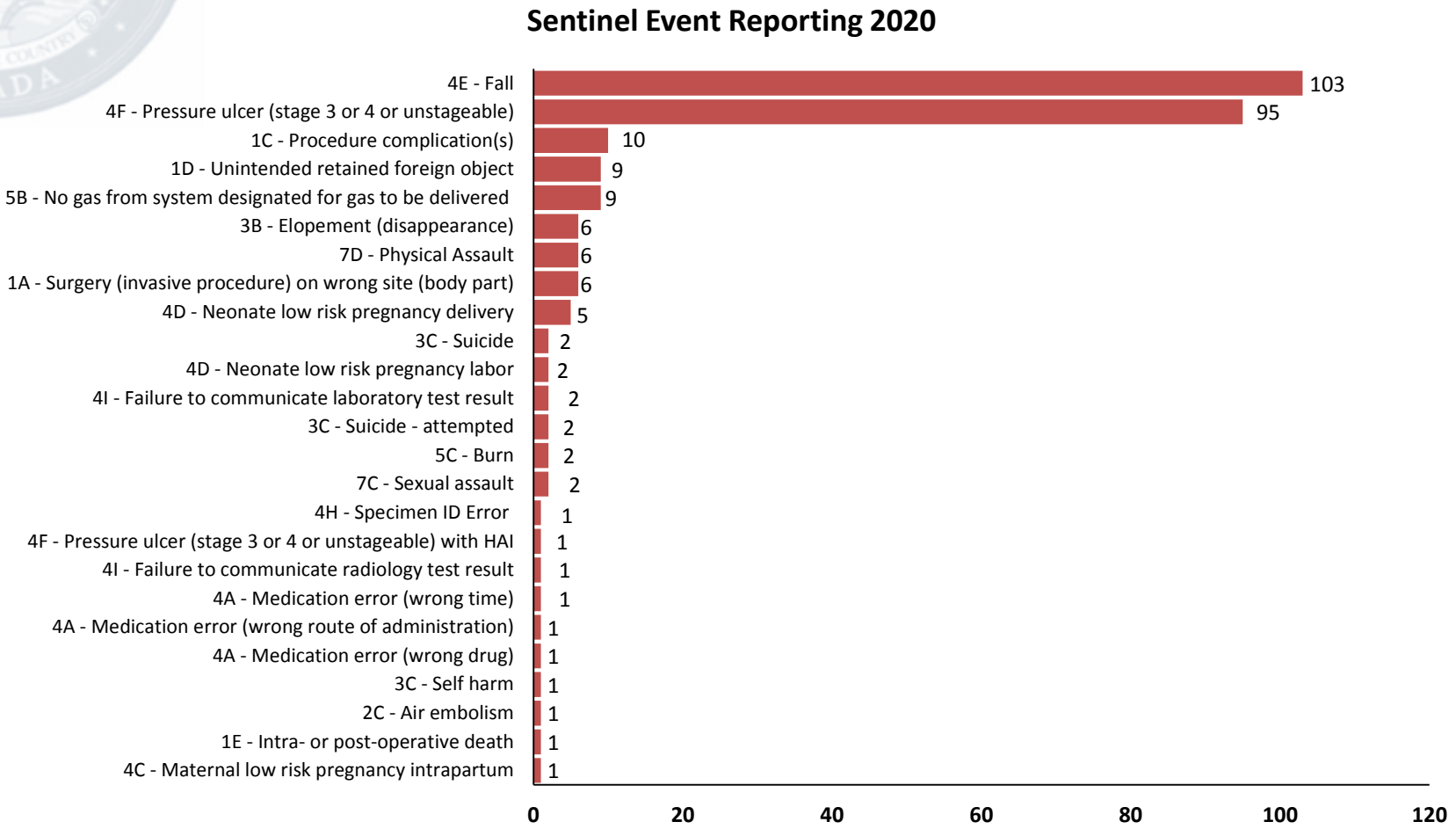
Who Should Report (post SB457) (continued 3)

Facility Code	Facility Description Type	Percent SER Enrolled	Count of SER Enrolled	Count of Facility Type
DVP	PROGRAM FOR TREATMENT OF PERSONS WHO COMMIT DOMESTIC VIOLENCE	0%	0	30
PRT	PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY	0%	0	12
AGC	RESIDENTIAL FACILITY FOR GROUPS	25%	95	384
RHC	RURAL CLINIC	0%	0	18
RUH	RURAL HOSPITAL	100%	14	14
SFD	SKILLED NURSING FACILITY DISTINCT PART OF HOSPITAL	0%	0	8
ASC	SURGICAL CENTER FOR AMBULATORY PATIENTS	89%	71	80

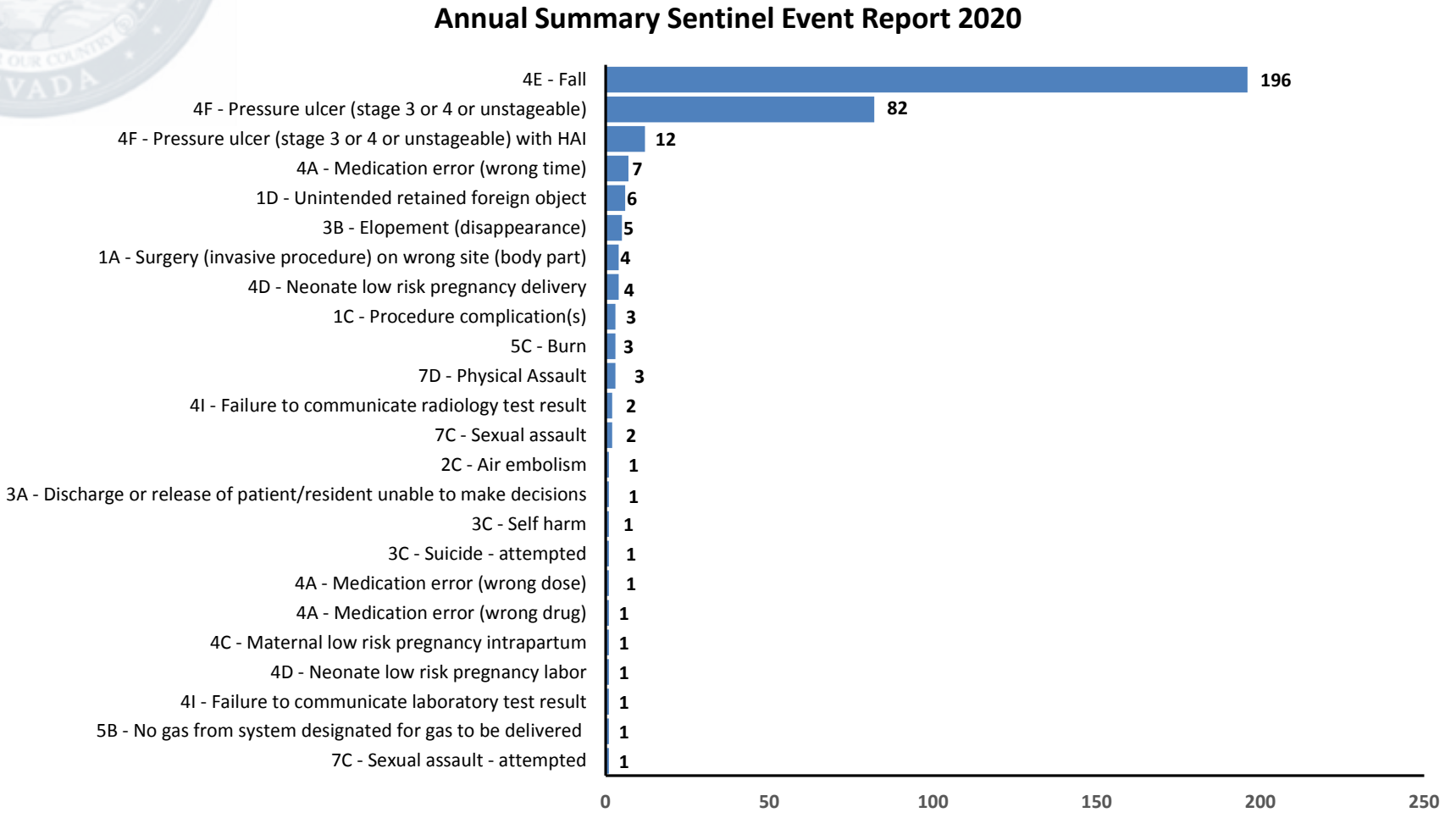
Data Collection Methods

- Event Report forms:
  - Part 1 Initial report to sentinel events registry and
  - Part 2 Root Cause Analysis results
- Summary Annual Report forms: Sentinel event report summary forms and patient safety committee forms were due on March 1, 2021. (All reporting facilities required to file)
- Standardized list of reportable events including NQF reference and greater specificity, while including a broader category grouping.

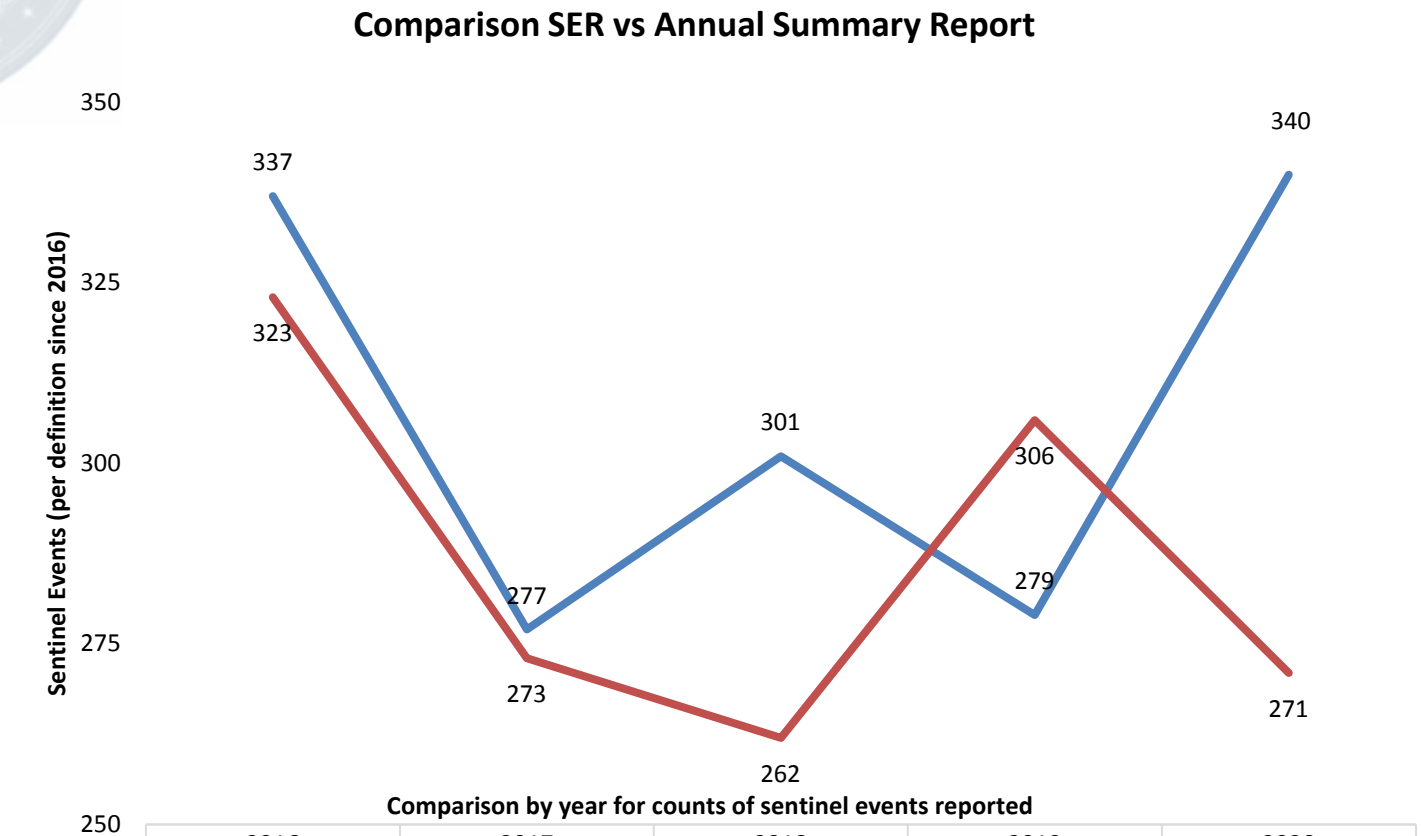
Sentinel Events by Type-Totals



Annual Summary Event Type-Totals



Sentinel Events Reporting Comparison



	2016	2017	2018	2019	2020
ARSER	337	277	301	279	340
SER	323	273	262	306	271

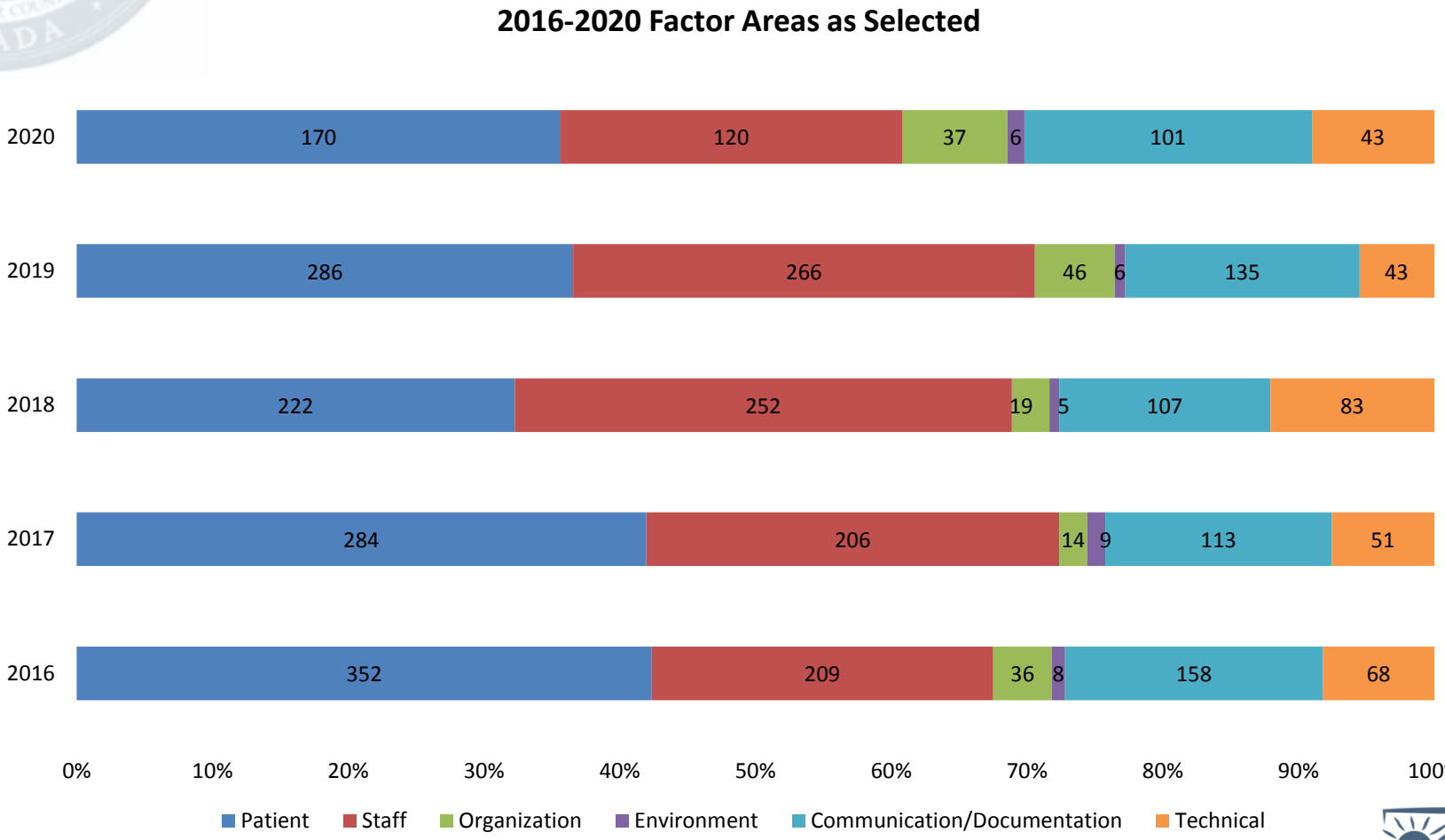
Primary Contributing Factor Areas

(can select up to 4 specific factors)

Factor Area	2016 count	2016 %	2017 count	2017 %	2018 count	2018 %	2019 count	2019 %	2020 count	2020 %
Patient	352	42.4%	284	41.9%	222	32.3%	286	36.6%	170	38.3%
Staff	209	25.2%	206	29.8%	252	36.6%	266	34%	120	27%
Organization	36	4.3%	14	2.1%	19	2.8%	46	5.9%	37	8.3%
Environment	8	1.0%	9	1.3%	5	0.7%	6	0.8%	6	1.4%
Communication /Documentation	158	19%	113	16.9%	107	15.6%	135	17.3%	101	22.7%
Technical	68	8.2%	51	5%	83	12.1%	43	5.5%	43	2.3%
SUM	831		677		688		782	100.0	477	100%

The single most often cited contributing factor for 2020 was “Staff - Failure to follow policy and/or procedure”

Primary Contributing Factor Areas (A relative comparison)

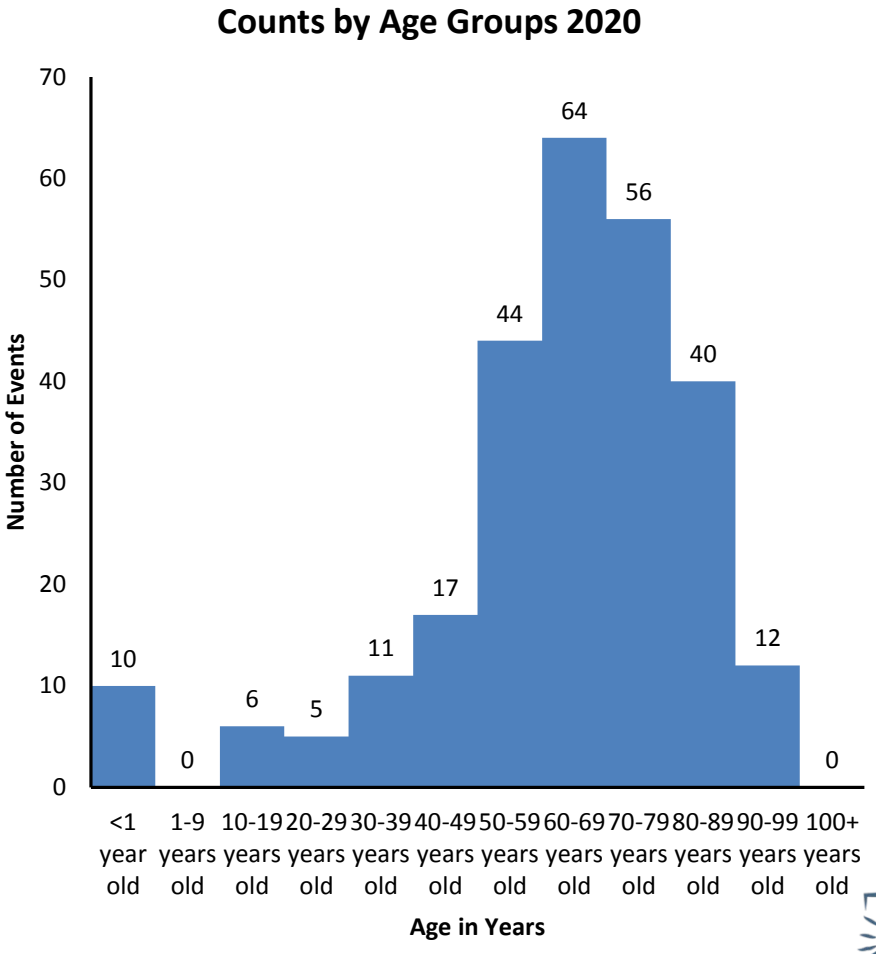


Sentinel Event Counts by Facility Type Enrolled in 2020

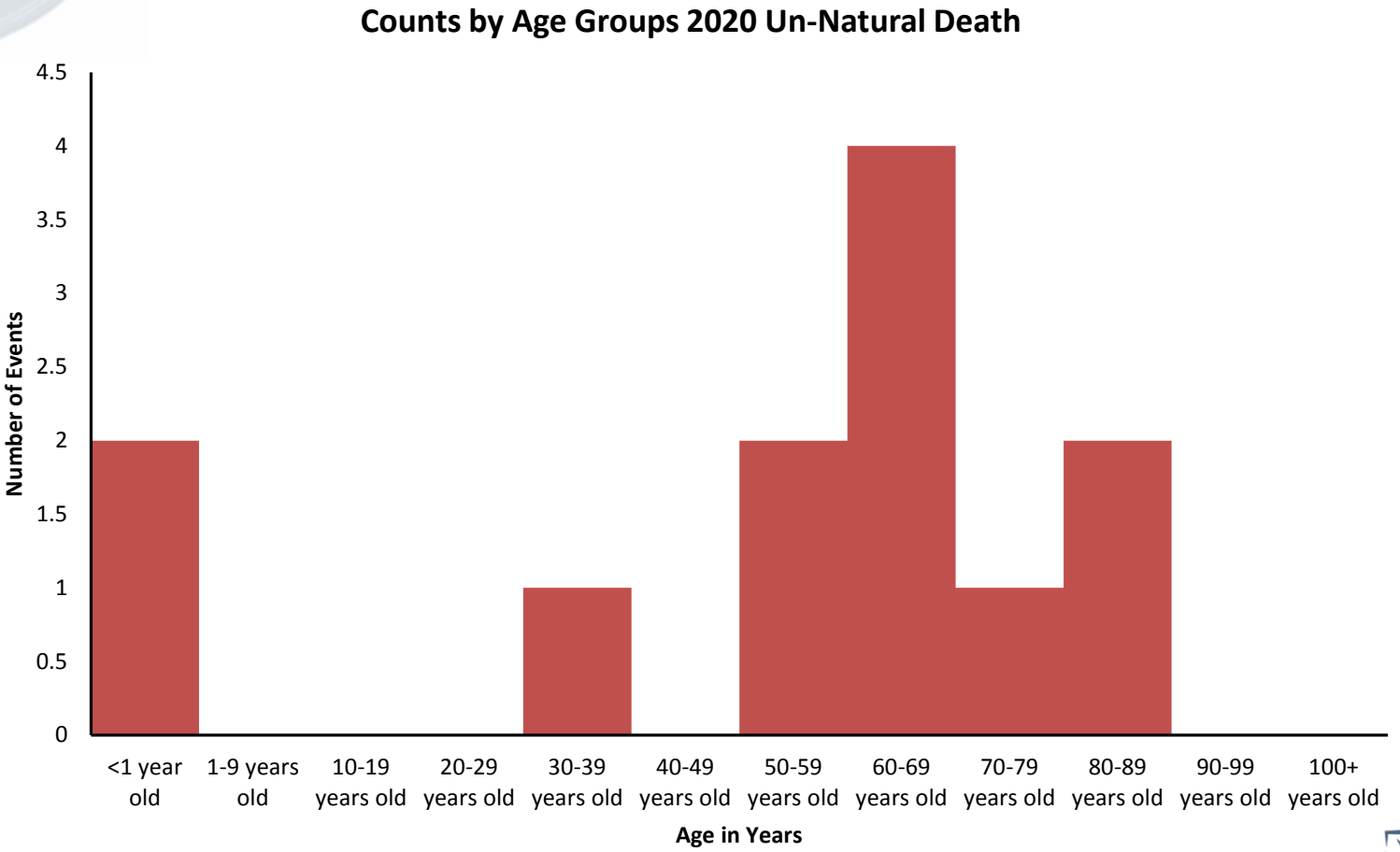
Facility Code	Total Enrolled	Did Not Report	0	1	2	3	4	5	6-9	10-30	>30
ADA	7	7									
ADC	8	8									
AGC	111	97	8	1	1		1			2	1
ASC	72	53	13	3	1	1	1				
CTC	1	1									
ESRD	33	33									
HFS	1	1									
HHA	31	29	2								
HIC	18	17		1							
HOS	55	25	7	2	2	3	1	1	5	9	
HPC	10	9	1								
ICE	1	1									
ICF	2	2									
MDX	2	1	1								
NSP	11	10	1								
OPF	11	8	1	2							
PCO	3	2					1				
PCS	47	45	1							1	
RUH	13	6	2		3	1	1				
SNF	16	15	1								
TLF	1	1									
Total	454	371	38	9	7	5	5	1	5	12	1

Sentinel Events by Age in 2020

Patient's Age	Count	Percent
<1 year old	10	3.8%
1-9 years old	0	0.0%
10-19 years old	6	2.3%
20-29 years old	5	1.9%
30-39 years old	11	4.2%
40-49 years old	17	6.4%
50-59 years old	44	16.6%
60-69 years old	64	24.2%
70-79 years old	56	21.1%
80-89 years old	40	15.1%
90-99 years old	12	4.5%
100+ years old	0	0.0%
Total (excludes bad data)	265	(May not equal 100% due to rounding.) 100%



Counts by Age Groups Un-Natural Deaths 2020



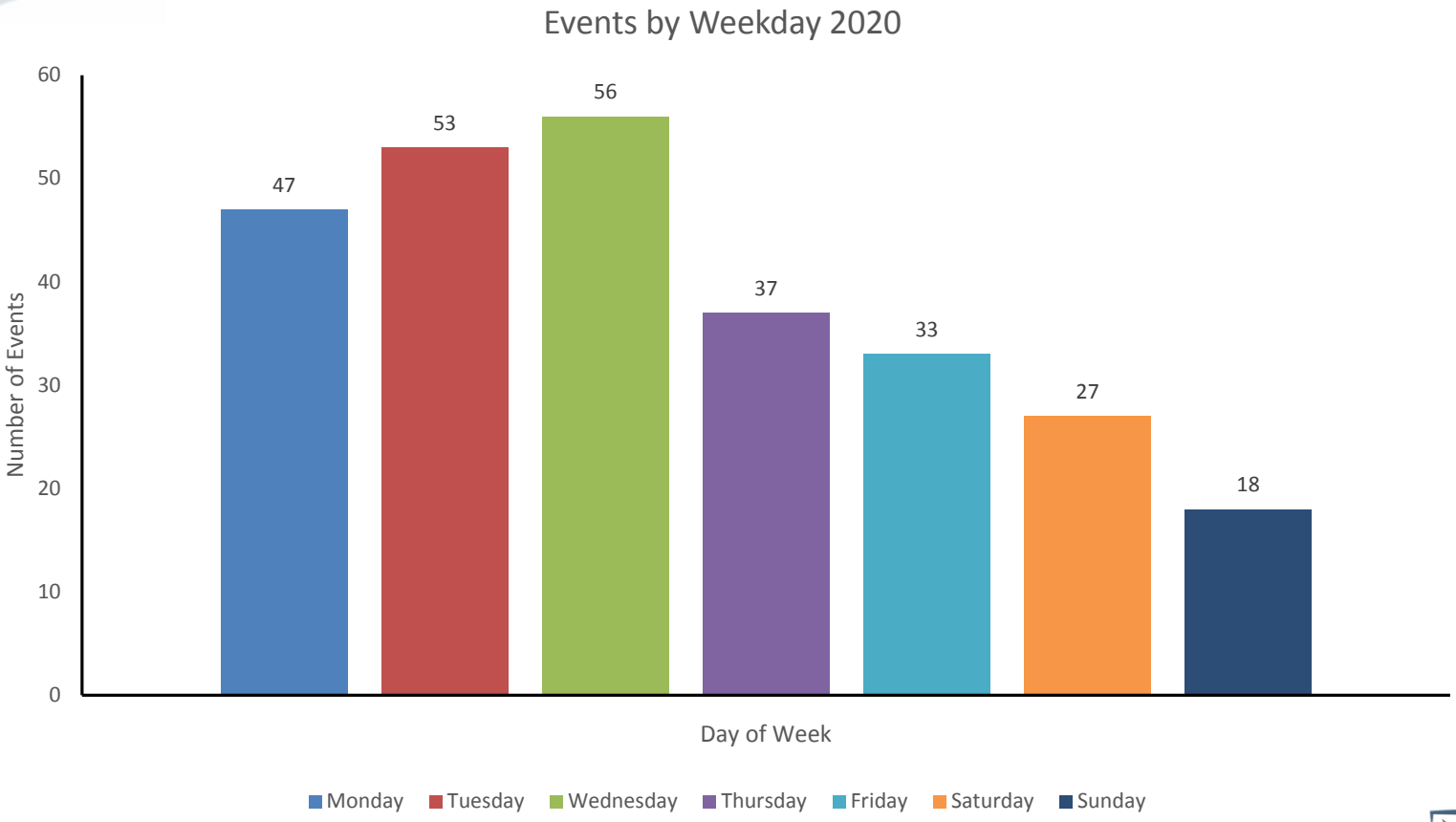
Duration in Days between Event Aware and the Patient Notification Date

Duration	Events (2016)	Events (2017)	Events (2018)	Events (2019)	Events (2020)	Percent (2020)
0-14 days	275	213	196	285	226	83.7%
15-30 days	28	29	33	1	31	11.5%
31-60 days	9	20	13	0	9	3.3%
61-90 days	6	9	5	0	3	1.1%
91-120 days	3	2	7	0	0	0.0%
120+ days	1	4	8	0	1	0.4%
Bad Data (not included in totals)				22	1	
Total	322	277	262	286	270*	100%

Method of Notification to the Patient

Notification methods	Events	Percent
Told in Person	116	42.8%
Telephone	58	21.4%
Not Notified	39	14.4%
Email / US Mail	1	0.4%
Hand-Delivered Message	0	0.0%
No Data or No Next of Kin	57	21.0%
Total	271	100%

Sentinel Events by Day of Week in 2020



Department/Location Where Sentinel Events Occurred in 2020

Department/Location	Count	Percent
Medical/surgical	70	28.2%
Intensive/critical care	52	21%
Intermediate care	23	9.3%
Emergency department	12	4.8%
Inpatient surgery	11	4.4%
Imaging	10	4%
Labor/delivery	10	4%
Inpatient rehabilitation unit	9	3.6%
Long term care	8	3.2%
Outpatient/ambulatory surgery	8	3.2%
Pulmonary/respiratory	8	3.2%
Psychiatry/behavioral health/geropsychiatry	6	2.4%
Neonatal unit (level 2)	3	1.2%
Anesthesia/PACU	2	0.8%
Laboratory	2	0.8%
Neonatal unit (level 3)	2	0.8%
Observational/clinical decision unit	2	0.8%
Outpatient/ambulatory care	2	0.8%
Pediatric intensive/critical care	2	0.8%
Ancillary_other	2	0.8%
Endoscopy	1	0.4%
Newborn nursery (level 1)	1	0.4%
Nursing/skilled nursing	1	0.4%
Pediatrics	1	0.4%
Total	248	100%

Compliance with Mandated Meeting Periodicity - 2020

Facilities Having 25 or More Employees and Contractors (2019)			Facilities Having Fewer Than 25 Employees and Contractors (2019)		
Monthly Meetings	Total Facilities	Percentage	Quarterly Meetings	Total Facilities	Percentage
Yes	36	73.5%	Yes	26	76.5%
No	7	14.3%	No	3	8.8%
Did Not Report	7	14.3%	Did Not Report	5	14.7%
Total	49	100%	Total	34	100%

Compliance with Mandated Staff Attendance - Safety Meetings

Facilities Having 25 or More Employees and Contractors (2020)			Facilities Having Fewer Than 25 Employees and Contractors (2020)		
Mandatory Staff	Total Facilities	Percentage	Mandatory Staff	Total Facilities	Percentage
Yes	32	41.6%	Yes	19	39.6%
No	13	16.9%	No	11	22.9%
Did Not Report	4	5.2%	Did Not Report	4	8.3%
Total (may not equal exactly 100 due to rounding)	49	100%	Total	34	100%

A few selected excerpts from the form field “Lessons Learned”

“…lack of team work between staff…”

“…documentation lacking… … do not use illegible abbreviations…”

“…patient bed alarm was not used…”

“…during shift change huddle abnormal observations where not passed on…”

“In a fast paced, repetitive service line, it's imperative to provide recurring training on distraction free activities. Secondly, the need to provide training for all staff ... to include the professional staff on the responsibilities of critical tasks.”

“…evaluate medication reactions sooner and more often…”

“…Failure to adhere to policy/procedure. Failure to communicate appropriately among staff members. …”

REDCap - Research Electronic Data Capture Application

https://projectredcap.org/ Link to the REDCap Project

Developed by Vanderbilt University with assistance from a CDC grant. Over 5115 institutions in 141 countries.

Grant : X10MC29489

Web based data input in fifth year.

Mostly Positive Implementation.

Wide range of Reporter skills and experience.

Application Best-Practice Provided 1-to-1.

Plans and Goals

- Provide technical assistance and develop improvements to the REDCap Database Reporting System.
- Research actionable insight around patient safety
- Turn the FAQ into additional media formats
- Study ways to better engage facilities around patient safety and sentinel events.

Conclusion

- Patient Safety continues to be influenced by the same factors as in the past.
- Research for passive, low effort – high improvement steps to improve patient safety continues.
- At least 25% of the facilities appear to have followed the procedures and requirements to submit the specific-event and annual summary reports.
- Most had internal patient safety plans.
- Nevada State Sentinel Events Registry continues to look for ways to improve the safety of patients within the licensed healthcare system.
- Consider a formal USPS mailed SER SB457 changes notification, that mentions the NRS financial penalties for failure to participate in the SER, and why participation is good for patient safety and outcomes.

Resources

- The Sentinel Events Registry main page is located at: http://dpbh.nv.gov/Programs/SER/Sentinel_Events_Registry_(SER)-Home/
- **State of Nevada Sentinel Events Registry Website**
- REDCap is located at: http://dpbh.nv.gov/redcap/
- State of Nevada REDCap Website

- SER FAQ at: http://dpbh.nv.gov/Programs/SER/Docs/SER_FAQ_2020_V08
- PSQU Patient Safety Checklist: https://www.psqh.com/marapr05/pschecklist.pdf
- PSQH Patient Saftey Checklist

Thank You from the team!

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Questions?