

NH Department of Health and Human Services	Page 1 of 7
SENTINEL EVENT POLICY	Effective Date: September 2010 Revised Date: February 2014
Policy Number:	DHHS Policy: PR 10-01

I. Purpose

The Department of Health and Human Services' (DHHS) Sentinel Event Policy is part of a comprehensive quality assurance program and establishes the reporting and review requirements of sentinel events involving individuals served by the Department. Both community providers and components of DHHS which provide direct care services shall report sentinel events as directed by this policy.

II. Statutory Authority

In support of its commitment to quality in the delivery of health and human services to the citizens of New Hampshire, the Department will review sentinel events as part of its quality assurance activities. Statutory authority for reviews of sentinel events is set forth in NH RSA 126-A:4, IV:

RSA 126-A:4 Department Established.

IV. The department may establish a quality assurance program.

- (a) Any quality assurance program may consist of a comprehensive ongoing system of mechanisms for monitoring and evaluating the appropriateness of services provided to individuals served by the department or any of its contract service providers so that problems or trends in the delivery of services are identified and steps to correct problems can be taken.
- (b) Records of the department's quality assurance program including records of interviews, internal reviews or investigations, reports, statements, minutes, and other documentation except for individual client medical records, shall be confidential and privileged and shall be protected from direct or indirect discovery, subpoena, or admission into evidence in any judicial or administrative proceeding, except as provided in subparagraphs IV (c) or (d).
- (c) In case of legal action brought by the department against a contract service provider or in a proceeding alleging repetitive malicious action and personal injury brought against a contract service provider, the quality assurance program's records may be discoverable.
- (d) The department may refer any evidence of fraudulent or other criminal behavior gathered by the quality assurance program to the appropriate law enforcement authority.
- (e) No employees of the department or employees of a contract service provider or vendor shall be held liable in any action for damages or other relief arising from the providing of information to a quality assurance program or in any judicial or administrative procedure relating to the DHHS' quality assurance program.

III. Goals

The goals of this sentinel event reporting and review policy are:

1. To have a positive impact in improving care and service delivery; and
2. To understand the causes that underlie sentinel events, and make changes to internal and external systems and processes to reduce the probability of such events in the future.

NH Department of Health and Human Services	Page 2 of 7
SENTINEL EVENT POLICY	Effective Date: September 2010 Revised Date: February 2014
Policy Number:	DHHS Policy: PR 10-01

IV. Definition

The Joint Commission defines sentinel event as “an unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof. Serious injury specifically includes loss of limb or function. The phrase ‘or the risk thereof’ includes any process variation for which a recurrence would carry a significant change of a serious adverse outcome.”

Client-centered sentinel events, involving victims and/or perpetrators, include:

1. (a) An unanticipated death, not including homicide or suicide; or
 - (b) permanent loss of function; or
 - (c) risk thereof, not related to the natural course of an individual’s illness or underlying condition, resulting from such causes including, but not limited to:
 - a medication error,
 - an unauthorized departure or abduction from a facility providing care, or
 - a delay or failure to provide services;
2. a. Homicide, i.e., the person is the victim of a homicide;
2. b. Suicide or suicide attempt, i.e., self-injurious behavior with a non-fatal outcome accompanied by evidence (either explicit or implicit) that the person intended to die;
3. Rape or any other sexual assault, i.e., the person is the victim of rape or sexual assault;
4. A serious physical or psychological injury, i.e., one that jeopardizes a person’s health, or risk thereof, that is associated with the planning and delivery of care.

Agency-involved sentinel events:

5. High profile events which may involve media coverage and/or police involvement when the police involvement is related to a crime or suspected crime and not primarily to provide assistance in a potentially unsafe situation

V. Applicability

A. Reportable sentinel events shall be those sentinel events that involve individuals who:

- Are receiving Department funded services¹, as described in B and C below;
- Have received Department funded services within the preceding 30 days;
- Have been evaluated by a service provider within the preceding 30 days; or
- Are the subject of a Child or Adult Protective Services report.

B. The following community providers shall be required to report sentinel events:

- Community Mental Health Centers (Bureau of Behavioral Health);
- Area Agencies (Bureau of Developmental Services); and

¹ For purposes of this policy, enrollment in a medical or cash public assistance program, such as Medicaid, Aid to the Needy Blind, Food Stamps, or Financial Assistance to Needy Families, shall not be considered a department funded service or program.

NH Department of Health and Human Services	Page 3 of 7
SENTINEL EVENT POLICY	Effective Date: September 2010 Revised Date: February 2014
Policy Number:	DHHS Policy: PR 10-01

- Case Management Agencies (Bureau of Elderly and Adult Services)

C. The following DHHS divisions and bureaus which provide direct care services, shall be required to report sentinel events:

1. Division of Community Based Care
 - Bureau of Drug and Alcohol Services;
 - Bureau of Elderly and Adult Services: Adult Protection Program (APSWs); and
 - New Hampshire Hospital
2. Office of Human Services
 - Bureau of Homeless and Housing
3. Division for Children Youth and Families
 - Bureau of Child Protection (CPSWs)
 - Bureau of Juvenile Justice Services
 - a. Juvenile Probation and Parole Services (including all community programs) (JPPOs)
 - b. Sununu Youth Services Center

VI. Notification

A. Immediate Verbal Notification

Upon the discovery of a sentinel event by a community provider or by a DHHS division or bureau (whether by direct report by a provider, other mandatory reporting mechanisms, or a more general discovery) identified in the Applicability section above, that person or entity shall provide immediate verbal notification to the appropriate DHHS Division Director or designee.

Immediate verbal notification shall be provided by direct telephone contact. If direct telephone contact is not possible, a voice-mail or e-mail message shall be left.

The following information shall be provided:

- The reporting individual's name, phone number, and agency/organization;
- Name and date of birth (DOB) of the individual(s) involved in the event;
- Location, date, and time of the event; and
- Description of the event, including what, when, where, how, and other relevant information, as well as the identification of any other individuals involved.

NH Department of Health and Human Services	Page 4 of 7
SENTINEL EVENT POLICY	Effective Date: September 2010 Revised Date: February 2014
Policy Number:	DHHS Policy: PR 10-01

Note: Protected health information shall not be left in a voice-mail or e-mail message.

Internal Process: Upon receiving notification of a sentinel event, the Division Director, or any other Department representative who receives the notification, shall report the event to the Department’s Quality Improvement Director and the appropriate Department’s Associate or Deputy Commissioners either by direct telephone contact, voice-mail or e-mail.

B. Completion of the *Sentinel Event Reporting Form* and E-Studio Notification

Written notification of the sentinel event shall be provided by the reporting person or designated agency staff to the appropriate DHHS Division and/or Bureau Directors within 72 hours of the event. Written notification shall be via a completed “Sentinel Event Reporting Form,” and uploaded to the protected E-Studio application, available at <https://nh.same-page.com>.²

Each section of the *Sentinel Event Reporting Form* must be completed following the form’s instructions, i.e., *Sentinel Event Reporting Form-Instructions*.

Additional information regarding the sentinel event shall be reported as it becomes available and upon Department request and also uploaded to the E-studio application. Such information may include additional details as they are learned, a change in the status of the situation, or links to relevant newspaper articles.

The process for providing additional information is to either:

- Download the original *Sentinel Event Reporting Form* to a computer and edit it by adding the additional information in the Part V. Follow-Up Information section. Rename the revised *Sentinel Event Reporting Form* as follows:
 - SE BBH Riverbend John S 01022012 rev. 01302012
- Or, upload a separate document, such as a newspaper article, which must have a file name to ensure it will be connected to the correct *Sentinel Event Reporting Form*:
 - SE BBH Riverbend John S 01102012 follow up

Internal Process: The Division / Bureau Director’s designee shall review the E-Studio submissions for completeness, accuracy, and whether the reported event meets the criteria of a sentinel event as defined in this policy. Upon determining that a submitted *Sentinel Event Reporting Form* is a complete, accurate, and applicable sentinel event report, the Division / Bureau Director’s designee shall notify the Division / Bureau Director, the Department’s Quality Improvement Director and the appropriate Associate or Deputy Commissioner(s) of a complete report via E-Studio by selecting the appropriate names and “e-team” provided in the E-Studio application

² Users shall be trained on and approved for E-Studio use, per the “E-Studio Training Protocol.”

NH Department of Health and Human Services	Page 5 of 7
SENTINEL EVENT POLICY	Effective Date: September 2010 Revised Date: February 2014
Policy Number:	DHHS Policy: PR 10-01

C. Confidentiality

Both community providers and Department components that report sentinel events shall comply with applicable confidentiality laws, HIPAA requirements, and their own policies and procedures regarding the reporting of confidential information and protected health information.

VII. Mandatory Reporting

Reporting sentinel events under the provisions of this policy shall not replace the mandatory reporting requirements of RSA 161-F:42-57 and RSA 169-C:29 with regard to abuse, neglect, self-neglect, or exploitation.

VIII. Sentinel Event Review

Each agency is expected to complete its own review of a reportable sentinel event consistent with the applicable DHHS administrative rules and its agency policies regarding incidents and events that are consistent with this policy's definition of a sentinel event and that involve individuals that are receiving, or who have recently received, Department funded services, i.e., within the previous 30 days, as described in this policy (section V).

A. Authority

The Commissioner, Deputy Commissioner, Associate Commissioner, or their designees, shall assign responsibility to the DHHS Quality Improvement Director to conduct reviews of selected sentinel events. The DHHS Quality Improvement Director shall select a qualified staff person to conduct sentinel event reviews when the Quality Improvement Director is unavailable.

Sentinel events to be reviewed include those:

1. Requested by the Office of the Commissioner, a Division or Bureau Director, or the DHHS Quality Improvement Director; or
2. That, given the available information, the DCBCS Quality Leadership Team identifies those sentinel events in which more than one agency/system was involved with the individual's care and, in which there is preliminary evidence of potentially one or more problematic systemic issues.

B. Notice

The DHHS Quality Improvement Director or designee shall inform the appropriate division's Bureau Administrator and the DCBCS Bureau's Quality Leadership Team Representative, when applicable, via e-mail that a Sentinel Event Review is being scheduled. For sentinel event

NH Department of Health and Human Services	Page 6 of 7
SENTINEL EVENT POLICY	Effective Date: September 2010 Revised Date: February 2014
Policy Number:	DHHS Policy: PR 10-01

reviews involving one or more DCBCS bureaus, the DCBCS Quality Leadership Team is responsible for the following:

1. Invitation to the Sentinel Event Review, indicating the date, time, and location of the review;
2. The Department participants who are required to attend the review;
3. Information about the sentinel event, including who the event involves and the reason for the review;
4. The agencies or providers involved, e.g., community providers and/or Department divisions and bureaus, and who should be invited to attend; and
5. Instructions on how to prepare for the review, as follows:
 - Identify and invite other Department and provider-level participants;
 - Identify who among the invitees shall be the presenter(s);
 - Gather information, as applicable from sources such as site visits, interviews with presenters, as applicable, and clinical record reviews;
 - Provide relevant documentation, such as Division, facility, and service provider reports, notes, correspondence, policies, and Individual Service Plans and/or Support Plans. This shall be the responsibility of the individual or entity who actually has the documentation. Documentation shall be brought to the review for reference, but shall not be copied, distributed, or otherwise maintained by the review process.

C. Sentinel Event Review

1. The review shall include:
 - Case presentation(s);
 - Review of the event (including a review of relevant documentation); and
 - Identification of systemic factors, opportunities for improvement and recommendations for follow-up activity, as applicable.
2. The case presentation shall include: demographic information, description of the precipitating event, a clinical description of the individual involved, the immediate action taken by the agency when the incident occurred, any other administrative/operational issues relevant to the event, and a description of any identified opportunities for improvement. (See “Sentinel Event Review Presentation”.)
2. The review of the event shall identify recommendations for follow-up activity to address identified systemic issues, if any.
3. No minutes of the review proceedings shall be taken, maintained or distributed.
4. Records of the identification of systemic factors, and opportunities for improvement and recommendations for follow-up activity(ies) will be kept without the identification of individuals or specific community agencies.

NH Department of Health and Human Services	Page 7 of 7
SENTINEL EVENT POLICY	Effective Date: September 2010 Revised Date: February 2014
Policy Number:	DHHS Policy: PR 10-01

E. Confidentiality

Pursuant to RSA 126-A:4, IV, any and all records of or prepared solely for the Sentinel Event Review shall be confidential and privileged