

**CCEMS
OPERATIONS POLICY 100-06
UNUSUAL OCCURRENCE REPORTING**

I. PURPOSE:

- 1.1 To ensure quality of service.
- 1.2 To prepare CCEMS for any possible litigation resulting from unusual occurrences.
- 1.3 To ensure all employees report unusual incidents.
- 1.4 To ensure that members of administration follow-up on all unusual occurrences, if needed.


II. POLICY:

- 2.1 Documentation of an unusual incident must be initiated immediately following the incident. This will be completed using the CCEMS official **“Unusual Occurrence Form,” (Attachment A)**
- 2.2 An unusual incident may be an error, omission, accident, situation that could or did result in personal injury, damage to equipment, property and vehicles or a situation that is unusual from normal daily operations.
- 2.3 All employees are required to report unusual incidences as outlined in section 2.2.
- 2.4 All unusual occurrences must be documented, reviewed, investigated and followed-up on by a member of administration, if needed.

III. PROCEDURE:

- 3.1 Any employee who discovers an unusual incident is obligated to carry out the following functions:
 - 3.1.1 Obtain necessary assistance for any injured person(s).
 - 3.1.2 Obtain assistance for correction of a hazardous situation.
 - 3.1.3 If actively involved in a run and situation is contained, complete the run.
 - 3.1.4 Immediately notify the supervisor and/or the Director.
 - 3.1.5 Accurately complete the **“Unusual Occurrence Form” (Attachment A)** and forward it to your supervisor.
 - 3.1.6 DO NOT document in a medical record that an **Unusual Occurrence Form** has been filed.
 - 3.1.7 DO NOT keep a copy of the **Unusual Occurrence Form** in a patient’s file.
- 3.2 The employee who witnesses, discovers, or is involved in the incident must initiate the preparation of the **Unusual Occurrence Form**. All applicable sections of the form must be completed as accurately as possible using all factual information available.
 - 3.2.1 Documentation should be initiated immediately following an incident.
 - 3.2.2 All items in bold type must be completed at initiation.

- 3.2.3 Immediate corrective actions should be documented at initiation of the report.
- 3.2.4 The report should be completed within one (1) working day following the incident.
- 3.2.5 All **Unusual Occurrence Forms** must be forwarded to the supervisor or Director for review and follow-up.
- 3.3 Employees who fail to report unusual incidents, no matter how small it may seem, will be subject to corrective action.
- 3.4 Some unusual occurrences may require immediate action by administration, public safety forces, federal and/or law enforcement agencies. Specific situations may be addressed in specific policies and procedures and these procedures should be accessed when available. In conjunction with documenting an **Unusual Occurrence Form**, the staff member must immediately initiate communication with a supervisor. These occurrences include, but are not limited to:
 - 3.3.1 Any situation that may put an individual in immediate danger.
 - 3.3.2 Any situation that will cause severe damage to equipment or property.
 - 3.3.3 Any situation that potentially could cause harm to a population if left unchanged.
- 3.4 The Director or his delegate should review the incident and document any follow-up activities. To complete the process, the following questions should have been addressed and answers formulated:
 - 3.4.1 Was the incident reflective of a systems/organization error or shortcoming?
 - 3.4.2 Was the incident reflective of human error?
 - 3.4.3 If this was a systems error, what transpired for this event to occur?
 - 3.4.4 What steps have been taken to avoid this situation/problem in the future?

Director: 

Effective: _____

Reviewed: _____

Revised: 10/21/2010