[Name of Your Organization Here] Investigation Guidelines for Medication Errors: Skilled Nursing and Assisted Living/Personal

1. Assess for injury.
2. Define Severity Level 0-4.
3. Classification of Person Affected can either be Resident/Client/Member or Location/Person Not Applicable (i.e., inappropriate disposal of medication or narcotic count error).
4. Complete Event report in PEER. For Severity levels 0-3, be sure to include the following:
    a. For all medication errors, irrespective of Severity Level, including Severity Level 0, immediately begin to identify the Root Cause.
    b. If the Root Cause is an employee issue, perform follow-up with employee and document.
    c. If the Root Cause is a pharmacy issue, perform follow-up with pharmacy and document.
    d. If the Root Cause is a process issue: perform follow-up with employees and pharmacy and document.
    e. For Severity Levels 0-2, follow-up documentation is to be completed within 14 days [or modify as appropriate, but in no event should this be longer than 30 days]
    f. For Severity Level 3, follow-up documentation is to be completed within 21 days [or modify as appropriate, but in no event, should be no longer than 30 days].
    g. For Severity Level 3, document the items below in Follow-up Actions if not documented on initial Event report:
        1) Notification of the applicable state licensing agency .
        2) Notification of physician; obtain orders as necessary.
        3) Notification of family/POA.
        4) Notification of insurance carrier, as necessary.
5. The employee responsible for documenting Follow-Up Actions in the Event report is [Insert Title Here].
6. Follow-up is dependent upon the investigation outcome and may include:
    a. Medication Pass competency.
    b. Action Plan request directed at pharmacy.
    c. Verbal report from pharmacy.
    d. In servicing for employee.
    e. Changes in policies/procedures.
    f. Counseling of employee/pharmacy.

7. For Severity Level 4 (Death):
   a. Notify DON and Administrator.
   b. Notify Risk Management Coordinator.
   a. Notify PCCP Risk Management Team.
   c. Notify physician.
   d. Notify family/POA.
   e. Notify coroner.
   f. Send report to the applicable state agency (may require a phone call as well – check regulations).

8. Before closing file, review the following recommendations and document in Follow-up Action→Work Done on File, as indicated:
   a. Ascertain whether employee in-servicing is beneficial or necessary, and if so, conduct in-servicing.
   b. Ascertain whether any policy/procedure changes need to be made; if so, make such changes or additions.
   c. Ensure that event was reported to the appropriate government agency, if necessary.
   d. Ensure that event was reported to the insurance carrier, if necessary.
   e. Ensure that all corrective actions and contributing factors are documented.
      f. Ensure you have documented at least one intervention to prevent a reoccurrence.
9. Risk Manager should summarize findings and corrective actions in Resolution/Outcome section under Risk Manager Review prior to closing file.
10. File closure can take place once the established sign-off procedure, based on facility policy, is completed, Risk Manager has completed his/her Risk Manager Review, and Follow-up Actions are documented in Event file.
    1. A File Manager with Closure may close the file if the following conditions apply [include if organization allows file managers to close events; remove if not permitted]:
    a. Level of Severity is 0-2.
    b. Risk Manager has signed off under Follow-up Action→Review or Sign-off.
11. General file closure guidelines are as follows:
    a. Severity 0-2, no longer than 2 weeks [or modify as appropriate; in no event should this be longer than 4 weeks].
    b. Severity 3 and above, no longer than 4 weeks [or modify as appropriate; in no event should this be longer than 6 weeks unless there is still ongoing activity on the file].

Note: Event files are available for review after closure and are easily found/recoverable in RL6. Do not delay closure due to concern that the event will no longer be accessible.