| **1. Tracking Number** | **2. Date Identified** | **3. EC Discipline** | **4. Determined to be:** | **5. Risk Assessment**  |
| --- | --- | --- | --- | --- |
| **6. Concern or Problem** |  **7. TJC Standard and References** | **8. Scoring** Scoring Category: Criticality: Documentation: Measure of Success: |
| **9. Corrective Action Plan** | **10. Root Cause(s)**  | **11. Department(s) Affected** |
| **Validation Plan** |
| **12. Assigned Point of Contact** | **13. Assigned Deadline Date** | **14. Reporting Actions**Committee: Frequency:  | **15. Plan Approval**Name: Date: |
| **16. Effectiveness Evaluation Criteria and Results** | **17. Additional follow-up** | **18. Actual Closure Date** |

**DEFINITIONS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **4. Extent/Scope*** **Isolated**

Non compliant in one or two locations/or same location 1 or 2 shifts* **Systemic**

Non compliant in three or more locations/shifts | **5. Risk assessment** See Risk Assessment Matrix* High
* Serious
* Medium
* Low
 | **8. Scoring category** * A policy or procedure
* C number of times non compliant
 | **Documentation** Yes or No  | **Criticality*** 2 Situational Decision Rules Apply
* 3 Direct Impact
* 4 Indirect Impact
 | **Measure of success** Yes or No |
| **10. Human Performance** | **Leadership** | * No visible emphasis/involvement in safety
* Safety not integrated into all systems and processes within the physical environment
 | * Authority not provided
* Responsibility not assigned
* Staff involvement not required
* Individuals not held accountable
 | * Resources not available
* Resources not provided
 |
| **Policies,****Procedures,** **Standards,** **Administrative** **Controls** | Not followed* No procedures
* Verbal versus written
* Not available/inconvenient to use
* Use not required
* Use required but not enforced
 | Wrong* Technical errors, wrong sequence
* Situation not covered
* Incomplete information
* No procedures to review/update
* Used wrong document/version
 | Followed incorrectly* Format
* Readability
* Too generic (not equipment- or task-specific)
* Too much detail
 |
| **Training** | No training* Requirement not identified
* Not conducted
* Not attended
 | Ineffective training* Course objectives, content
* Training method
* No refresher training
* Language barrier
 | Supervision * Competency not assessed
* Attendance not enforced
 |
| **Quality Control** | No inspection, test, maintenance* Requirement not identified
* Not required
* No process to monitor/document
* Insufficient resources
 | Ineffective inspections, tests, maintenance* Instructions need improvement
* Inspection techniques need improvement
* Not conducted within prescribed timeframes
* Retests delayed
* No process to prevent noncompliant equipment from being used
 | Quality verification checks * Not required
* Required but not performed
* Improper sampling, measurement, inspection techniques
 |
| **Communication** | No communication or not timely* No process to communicate between individuals, programs, services, or organizations or process ineffective
* Process needs improvement
* Communicated too late
 | Turnover * No process to communicate between hiring gaps/shift changes
* Process not used
 | Misunderstood* Inadequate information exchange (face-to-face vs. telephone)
* Terminology
* Language barrier
 |
| **Risk Management** **System** | Audits/Design Reviews/Purchase Reviews* Not conducted
* Not conducted within prescribed timeframes
* Not comprehensive (all locations, shifts, equipment, etc.)
* Relevant laws, regulations, standards not considered
* Not conducted by qualified individuals
* Risks not recognized
* Risks not defined
* Risks not quantified
* Root cause(s) not identified
* Risks not prioritized
 | Corrective Actions * Corrective actions not developed
* No correlation between the risk and corrective actions
* No input from affected staff when developing/implementing corrective actions
* Corrective action not implemented
* Corrective actions not tracked to closure
* Effectiveness of corrective actions not evaluated
 | Controls* Level of risk acceptance inappropriate
* No controls to eliminate hazards/manage risk
* Hierarchy of controls not considered during risk reduction activities
* Problem, failure, or use error data not reported, timely, accurate, available, analyzed, disseminated
* Emergency plans not developed, tested, evaluated, updated
* Documentation not available
* Documentation incomplete/inaccurate
 |
| **Work Environment/Equipment Performance** | * Design or construction
* Housekeeping
* Temperature
 | * Ventilation
* Noise
* Lighting
 | * Space
* Equipment
* Contamination
 |
| **14. Committee*** Safety/EC Committee
* Executive Committee
* Performance Improvement Committee
 | * Infection Prevention and Control Committee
* Patient Safety Committee
* Radiation Safety Committee
 | **Frequency** * Bimonthly
* Quarterly
 | * Semi-annually
* Annually
 |