

RL6 Submission Staff Reference Manual

The screenshot displays the RL Datix web application interface. At the top left is the RL Datix logo. On the top right, there are navigation links for 'Bookmarks' and 'Help', and a user status indicator 'Logged in as Risk Anonym...'. Below the header is a 'New File' button. The main area is titled 'Icon Wall' and features a search bar labeled 'Find a form' with a text input field. Below the search bar, a message reads: 'Please use the search above to narrow down your event results by using keywords to'. A callout box on the left contains contact information: 'If you have RL6 Risk questions, please contact: RL_Support@wrha.mb.ca Or (204) 926-1070'. The 'Icon Wall' itself consists of a grid of 12 colorful icons, each with a label below it: COVID-19 (red square with white plus), Adverse Drug (red square with white pill), Airway Manage... (blue square with white person and airway), Blood Product (red square with white blood drop), Diagnosi... (red square with white graph), Diagnostic Imaging (purple square with white person and scan), Equipme... Devices (blue square with white bed), Facilities/... (blue square with white building), and three partially visible icons at the bottom: a yellow square with a white person falling, a blue square with white hands, and a yellow square with a white syringe.

GETTING STARTED WITH RL6 RISK

Submitting an Incident

Use RL6 to report patient safety events such as; occurrences and critical incidents online. Your form needs to be completed and sent during one sitting. You cannot save it and come back to it for re-entry. If you have more information to add after submitting your file, talk with your manager.

The Icon Wall contains links to the submission forms. Submissions of patient safety events should be reported using the RL Submission icon located on the computer Desktop. The only submissions used via the Icon Wall, from your Manager accounts, should be Feedback, Media, Privacy and OESH.

Note: *RL is to be used strictly for patient events; the only expectation is the safety/security form when the person affected could be someone else.*

If you are submitting a risk related event such as an occurrence or critical incident (CI), then use the RL6 Submission icon (otherwise you will be the owner of this file).



If you are submitting feedback, media, privacy or OESH related incidents, use the RL6 Management Icon (refer to page 12) and login with the same user name and password as you do with your computer login.



1. Double-click on the RL6 Submission icon on the Desktop
You do not need to login

You should see on the top-right "Logged in as Anonymous".

Icon Wall

RLDatix™

Bookmarks Help

Logged in as Risk Anonym...

New File

Icon Wall

Find a form

Please use the search above to narrow down your event results by using keywords to describe the event that you're looking for.

Search keywords in the Find a form

COVID-19 Adverse Drug Airway Management Blood Product

Diagnostic Imaging Diagnostic Equipment Facilities

Use the scroll bar to move down to view more icons

Search using Keywords

If you don't know which form to use type in a keyword in the **Find a form** box and applicable forms matching your criteria will appear in the right-hand window.

eg. Type "ulcer" in the *Find a form* box and the skin tissue form will display.

Icon Wall

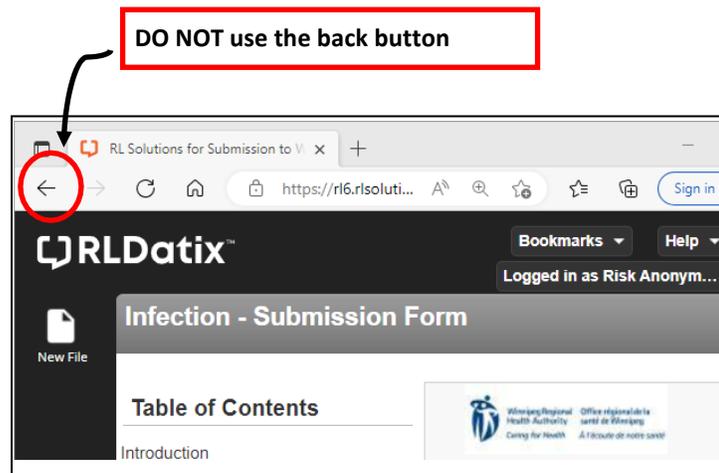
Find a form

fall

Please use the search above to narrow down your event results by using keywords to describe the event that you're looking for.

Fall

NAVIGATING



2. Complete the event ensuring all mandatory fields are entered (fields with a green *); and providing as much information as possible in non-mandatory fields.

Form Name

Collapse/expand Icon: Allows you to collapse sections of the form

Drop-Down Lists

Mandatory Field

Action Links

Refer to page 9 for information on the Form Panel

Indicates how many total fields and mandatory fields are completed

Scroll bar

Infection - Submission Form

Table of Contents

Introduction

When and Where the Event ...

Infection

Infection Details

File Status

Elapsed time: 01:31

1 of 37 total fields completed.

1 of 18 mandatory fields completed.

General information about the Infection event

Specific Event Type *

Type of Person Affected *

Severity Level *

Did the event require an unplanned or extended hospitalization?

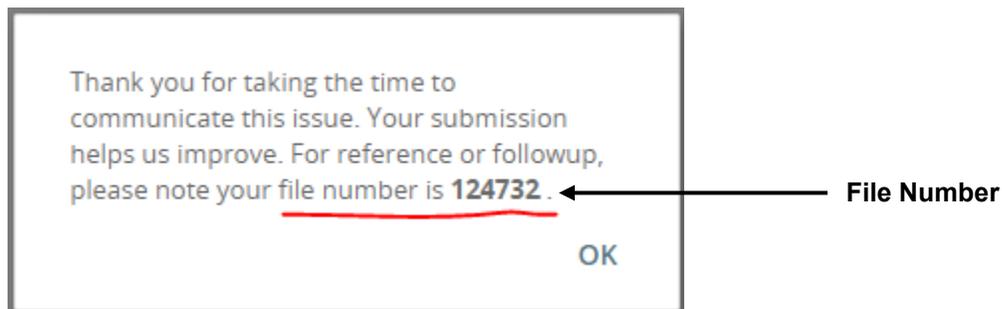
Contributing Factors *

Immediate Actions

Delete Exit More Actions - Submit

3. Click the  button.

Once the form is submitted the file reference number appears on the screen. After the file is submitted you cannot add additional information to it. If you want to follow-up on the form or add additional information you can reference the file number with your manager.



What Next?

Once the form is submitted, the appropriate manager(s) will be notified by email.

If you believe this was a **critical incident**, there is a section to declare that on the form. The submission will then be automatically sent to the WRHA Patient Safety Department (not on-site management). This process does not replace established communication processes for CI's.

Please ensure you communicate incidents to your manager/patient care manager.

Note: Within the submission form the “*Reported By Name*” field is **mandatory**. However, because the intent is to learn from the events not to instill blame the option to put “N/A” or “**Anonymous**” can also be used.

Reporter

To report anonymously, enter Anonymous

Reported By Name *

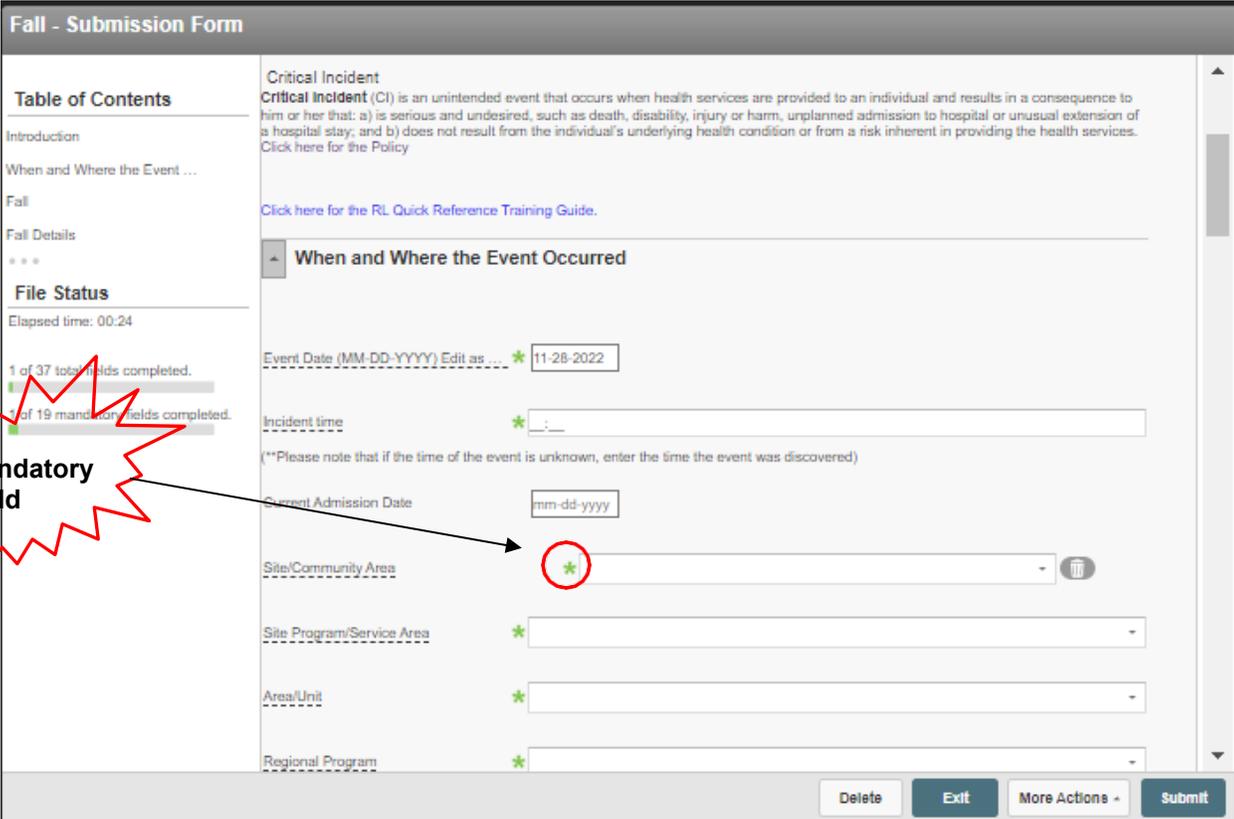
Position

Phone

FALLS EVENT FORM

(Instructor Demo)

- Double-click the **Fall**  form on the *Icon Wall*.
- Complete the *Fall-Submission Form* ensuring to fill in all mandatory fields.



Fall - Submission Form

Table of Contents

- Introduction
- When and Where the Event ...
- Fall
- Fall Details
- ...
- File Status**

Elapsed time: 00:24

1 of 37 total fields completed.

4 of 19 mandatory fields completed.

Mandatory Field

Critical Incident
Critical Incident (CI) is an unintended event that occurs when health services are provided to an individual and results in a consequence to him or her that: a) is serious and undesired, such as death, disability, injury or harm, unplanned admission to hospital or unusual extension of a hospital stay; and b) does not result from the individual's underlying health condition or from a risk inherent in providing the health services. Click here for the Policy

Click here for the RL Quick Reference Training Guide.

When and Where the Event Occurred

Event Date (MM-DD-YYYY) Edit as ... * 11-28-2022

Incident time * :.:

(*Please note that if the time of the event is unknown, enter the time the event was discovered)

Current Admission Date mm-dd-yyyy

Site/Community Area * *

Site Program/Service Area *

Area/Unit *

Regional Program *

Delete Exit More Actions - Submit

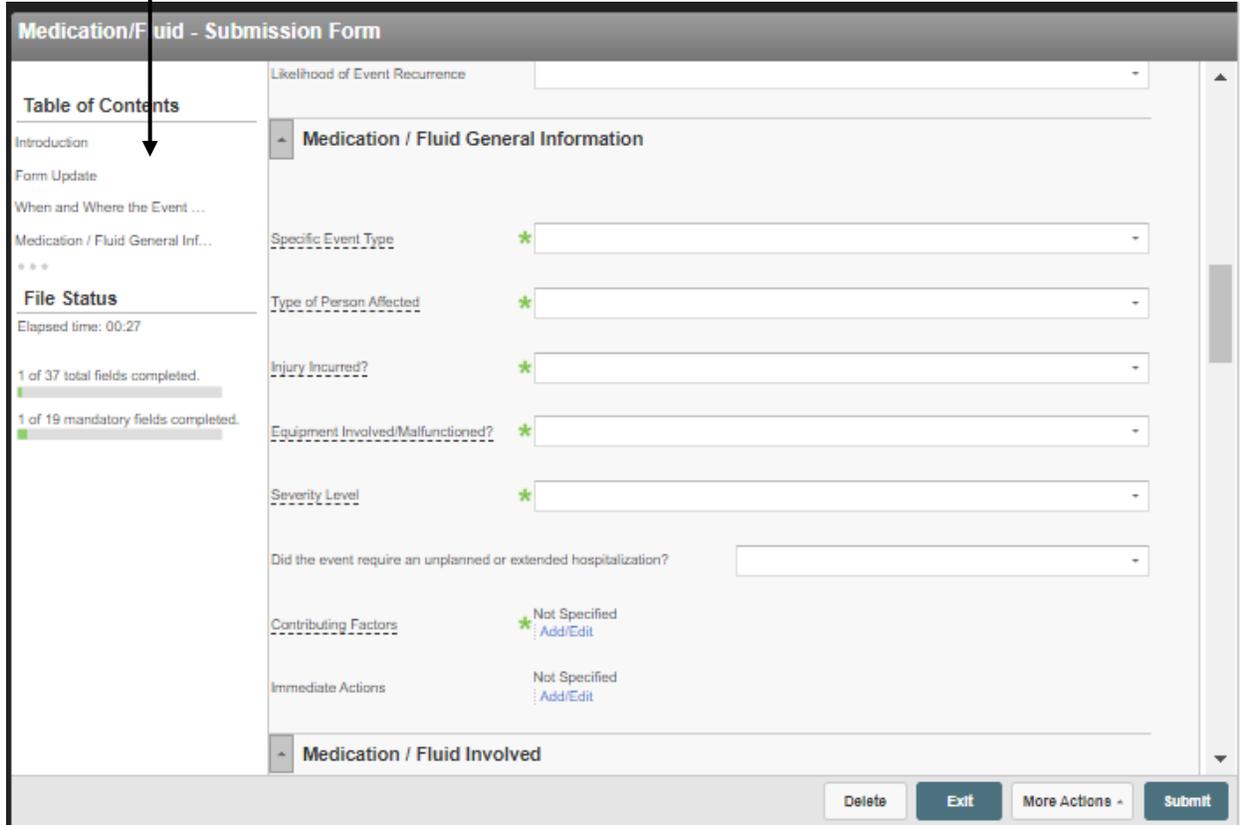
- Click the  button

MEDICATION/FLUID FORM

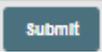
(Instructor & Class work through example together)

1. Double-click the **Medication/Fluid**  form on the *Icon Wall*.

Click on the section of the form you want to go to



2. Complete the *Medication/Fluid – Submission Form* ensuring to fill in all mandatory fields.

3. Click the  button.

Case Study #1 – Fall



On February 1, 2014 at 2130, Fran Walker (in patient) born August 8, 1949, fell in her room from her bedside sleeping chair. This took place at Victoria General Hospital, Medicine, in Unit 5 South.

Her injury was moderate. She suffered a fractured left arm and bruising. Two hours prior to her fall she received sedation medication.

After the fall Fran, was seen by a doctor, and at the time her care plan was reviewed and revised. The standard of care code was met.

There were no witnesses to the fall. Fran was found approximately 10 min after she fell by Mark Jackson from housekeeping.

Fran uses a cane for mobility. Her last fall risk assessment was 22 hours prior to her fall with a score of 40. She doesn't need assistance rising from a chair and has no restraints in place. She has no history of falls in the last month. A bed alarm and call bell are in place for safety precautions.

1. Enter the event details in the appropriate submission form.
2. Submit the completed form.

Case Study #2 – Medication/Fluid Event



On March 14, 2014 at 1345, James Smith was administered metformin in the Emergency department. While being monitored, his blood sugar and blood pressure dropped. He required IV dextrose.

Mr. Smith's medications had been administered as per orders on the physician's order sheet. These were based on the patient's home meds. The wrong information was used and the patient received medication that was not his.

- The patient eventually recovered.
- Mr. Smith's date of birth is May 15, 1955.

Case Study #3 - IV/Vascular Access Device Event



On August 24, 2014 at 0745, Mary Dobbin was administered metformin in the Emergency.

The patient had an intravenous (IV) that went interstitial at 1600 hrs. The IV was infusing heparin. The IV was re-established in the right hand. At 0230 on November 24th, the patient got up and accidentally pulled out this IV. The IV was re-established in the left arm again. At 1330, the left arm was noted to be swollen with a lot of bruising from the top of her arm to her forearm. The patient was experiencing a great deal of pain and had decreased range of motion. The IV was stopped and re-established in the right arm. Compartment syndrome was ruled out.

- The patient has ongoing pain and a limited range of motion.
- Ms. Dobbin's date of birth is August 20, 1946.

Case Study #4 – Skin/Tissue Event



During the course of care the patient Michael Jones fell and fractured a hip, requiring uneventful surgery. On January 19, 2014 (6 days post-surgery) bilateral black heel ulcers were noted on the patient's heels when the support stockings (TED) were removed during morning care. Skin care was immediately put into place and the change was not expected to delay discharge.

- The patient had a blackened heel. This was noticed during a bed bath. A wound care consult is pending. Heel boots are being applied.
- Mr. Jones' date of birth is November 2, 1933.



Case Study #5 – Near Miss/Good Catch

A Near Miss/Good Catch is an event or situation that took place, and could have resulted in an unintended outcome, but was “caught” before reaching the patient and adversely impacting the patient.

We have an opportunity to **“Catch it to Prevent it in the Future”**.

On November 2/2017, you are at a Pyxis machine to perform a refill. You scan your medication bag and a pocket/drawer opens. You check the screen to ensure that the correct medication, metoprolol 50 mg tablets, is prompted as a refill. You check the appropriate pocket to ensure that the medication is metoprolol 50 mg tablets. You find metolozone 5 mg tablets instead. You double check your screen to ensure that the correct pocket/medication has appeared. It is correct. You have found the incorrect medication filled in that pocket.

You remove the incorrect medication and refill with the correct one. You are unsure if any patient(s) received the incorrect medication.

1. Choose the event that was prevented from the icon wall.

eg.. Medication/Fluid Event

Within the Medication/Fluid General Information section, you will find the Severity Level field.

*Select 0. Near Miss/Good Catch

Medication / Fluid General Information	
Specific Event Type	*
Type of Person Affected	*
Injury Incurred?	*
Equipment Involved/Malfunctioned?	*
Severity Level	*

The form displays a dropdown menu for 'Severity Level' with the following options:

- 0. Near Miss/Good Catch
- 1. No Harm
- 2. Minimal Harm
- 3. Moderate Harm
- 4. Severe Harm
- 5. Death

Complete the form ensuring **all mandatory fields are entered** (fields with a green *). Please provide as much information as possible in non-mandatory fields.

2. Click the  button.

Once the form is submitted the file reference number appears on the screen. After the event is submitted you cannot add additional information to it. If you want to follow-up on the form or add additional information you can reference the file number with your manager.