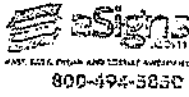
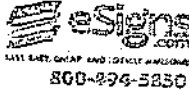


01/19/17

DEPARTMENT OF PUBLIC HEALTH
DIVISION OF HEALTH CARE QUALITY
INTAKE REPORT

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Incident #	Received	Incident Date	Reported By	Disposition
2005-288	12/23/16	12/17/16	Facility	Reviewed and Filed
 				

BAYSTATE FRANKLIN MEDICAL CENTER

<p>Incident #: 2120-153 Received: 07/19/16 Incident Date: 07/15/16 Reported By: Facility Disposition: Reviewed and Filed</p> <p>Type: Mandatory Nurse Overtime Harm:</p> <p>Hospital Emergency - 3 high risk inductions requiring 1:1 nursing, 3 mother/baby couplets, Calls were made for staffing - no nurse available to come in to cover. Nurse Manager on site for back up through this time period. Mandatory time 1 RN 3.5 hrs 3:30p - 7p.</p>
<p>Incident #: 2120-154 Received: 07/19/16 Incident Date: 07/15/16 Reported By: Facility Disposition: Reviewed and Filed</p> <p>Type: Mandatory Nurse Overtime Harm:</p> <p>3 high risk inductions requiring 1:1 nursing, 3 mother/baby couplets. Calls were made for staffing, no nurse available to come in to cover. Nurse Manager on site for back up thru this time period.</p>
<p>Incident #: 2120-156 Received: 08/01/16 Incident Date: 08/01/16 Reported By: Facility Disposition: Reviewed and Filed</p> <p>Type: Mandatory Nurse Overtime Harm:</p> <p>Postpartum couplet finishing recovery. Plus 3M/B couplets Post dates labor induction became active. 1:1 Another labor admitted /epidural at 3am 1:1 Staff called in for 6am to admit pre-op admission</p> <p>1-Took care of 1 labor patient that she had been with 11-3 Nurse worked 7-11p-was on call 11-3a and was requested to cover until safe patient care</p>
<p>Incident #: 2120-157 Received: 08/03/16 Incident Date: 08/01/16 Reported By: Facility Disposition: Reviewed and Filed</p> <p>Type: Mandatory Nurse Overtime Harm:</p> <p>2 high risk active labors with epidurals 1:1 1 high risk induction being monitor 1:1 1 M/B couplet Terahls</p>

08/10/17

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BAYSTATE FRANKLIN MEDICAL CENTER

Requiring 5 staff. Could have had 1 on call but cannot mandate oncall. Nurse requested to be mandated to document their turn?
RN took care of 1 M/B couplet and labor back up

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-158	08/03/16	08/01/16	Facility	Reviewed and Filed

Type: Mandatory Nurse Overtime

Harm:

At change of shift there were 4 labor inductions all 1:1 2 m/b Couplets less than 24 hours. Required total staff 5-6 for patients (to back up labors.) 1 RN (12 hour) finishing charting of discharges from day shift.

Multiple phone calls made to fill sick call and get extra staff. Some response but not enough for safe patient care.

Nurse manager on unit during this time.

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-159	08/11/16	08/04/16	Facility	Reviewed and Filed

Type: Mandatory Nurse Overtime

Harm:

C section (ASAP) was decided for High Risk multiple day induction around change of shift 11p. Baby delivered 11:32 pm. PACU recovery and newborn admit (1:1) and reset of OR. Additional census: 5 M/B couplets - 4 were c-section 48 hrs and less plus early labor patient with ruptured membranes admitted at 10:30p. This patient was 1:1 for immediate evaluation period. 4 nurses on - Nurse mandated was 5th nurse to back up c-section at beginning of shift. This nurse had been caring for the family for the 3-11 shift. On-coming nurse was assigned as primary nurse for the family and mandated nurse was back up. Mandated nurse said she would stay but only if "mandated". She would not have been the mandated nurse in the rotation but the decision was made for continuity of patient care.

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-160	08/11/16	08/06/16	Facility	Reviewed and Filed

Type: Mandatory Nurse Overtime

Harm:

Sick call for night shift came in approximately 9p leaving 3 RN's on until 3am - there was a nurse oncall at 3am. Team leader did not notify supervisor or make calls to replace which is part of their accountability. 3 post-op Csections m/b couplets - 1 was only 5 hrs post op. 1 high risk labor patient, bleeding on continuous monitoring (1:1). 1 Labor patient admitted at 10:53pm active labor (1:1). Back-up was needed for labors/possible delivery/any other labor admits - until nurse on call came in at 3a.

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-161	08/16/16	08/10/16	Facility	Reviewed and Filed

Type: Mandatory Nurse Overtime

Harm:

3 m/b couplets - 1 post-op (9 hrs) cesarean 1 to be discharged. 1 high risk induction (1:1). 1 High risk pre-eclampsia induction (1:1). 1 35 wk gest. labor continuous monitoring with decelerations (1:1). 4 RN's scheduled - 5 RN's needed - Calls made to all staff not working/not on vacation and got coverage for second half of shift (7p-11p) and a nurse 3 - 5:50 to do discharge. Nurse would stay "only if you mandate me". Cared for labor induction. Assistant Nurse Manager on unit for back up during this time.

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-162	08/16/16	08/10/16	Facility	Reviewed and Filed

Type: Mandatory Nurse Overtime

Harm:

2 high risk labor induction (each 1:1). Newborn high risk premature in nursery on O2, monitors and IV (1:1) born at 8:24pm. Post Partum - 2 m/b couplets and 1 mother c-section at 8:30pm. 5 staff needed/4 scheduled (sick call 11p-3a other wise would have had 5 nurses available). Calls had been made for extra staff on call no one available. Nurse willing to stay if mandated. Assistant nurse manager had left message with team leader that if extra help was needed to page her. Not call/no page. Cross trained staff available to be floated to OB at 3am.

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-164	09/01/16	08/27/16	Facility	Reviewed and Filed

Type: Mandatory Nurse Overtime

Harm:

The ED had 2 RN sick calls 3p-11p and 3p-3a leaving the evening shift two nurses under core staffing. Calls were made by the supervisor and a blast page was sent to all staff to fill the sick calls but no one was able to come in. Several staff were asked to stay over their scheduled shift and no one volunteered to stay. No nurses to float to the ED for assistance. Unsafe staffing form completed by staff

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BAYSTATE FRANKLIN MEDICAL CENTER

Supervisor made the decision to mandate an ED nurse to stay over her shift

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-165	09/01/16	08/31/16	Facility	Reviewed and Filed

11 Type: Mandatory Nurse Overtime

Harm:

5 Nurses scheduled for day shift. 1 scheduled C/S (requires 2 RNs), 4 labor patients, all 1:1. 2 postpartum mothers and babies, one baby in need of extra observation for feeding issues. 1 nursery baby under observation for NAS. Extra staff called and unable to arrive until 9:00 a.m. All night shift nurses asked regarding availability to stay, none willing to volunteer. 1 night shift nurse mandated 2.25 hrs to cover labor patient.

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-166	09/01/16	08/31/16	Facility	Reviewed and Filed

12 Type: Mandatory Nurse Overtime

Harm:

4 nurses and 1 CCT scheduled for evening shift. 2 postpartum patients, 1 nursery boarder for NAS observation. 5 labor patients. 1 RN mandated to cover labor patient. At 3:45 pm office notified unit of additional labor patient for admission. Second nurse mandated to stay. All staff pages were sent out for additional help with no available responses. All RN's were asked if they were willing to stay, all said no.

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-167	09/14/16	09/10/16	Facility	Reviewed and Filed

13 Type: Mandatory Nurse Overtime

Harm:

Core staffing of 4 RN's scheduled for day shift 9/10/16 - 5 mother baby (2 babies being observed for opiate withdrawal) couplets with 3 scheduled discharges - 1 active labor. labor admitted 2020 evening prior placed on insulin drip - another labor admitted during the night - diagnosed with HELLP syndrome (8am) needing stat C-section and 3rd labor on her way known at 7a. Minimum - 6 nurses needed for safe patient care - all labors 1:1.

CNA floated up from med/surg - Nursing supervisor present on unit - put out emergency page and phone calls for nursing help from staff. Asked for volunteers to stay. 1 nurse from night shift volunteered - 1 nurse had already left for home. 3 nurses would stay only if they were mandated. 2 nurses were mandated. Emergency page and calls resulted in nurse able to come in at 2p. Critical c-section resulted in compromised baby - both were transported to tertiary care center. Baby was 1:1 until team arrived from NICU 8:50a-3p - Mom transferred at 2209 when bed available. Nurses volunteered to come in extra for 3-11 shift as labor and delivery activity continued. 1 RN worked 7a-3p, 1 RN worked 7a - 123p.

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-168	09/19/16	09/17/16	Facility	Reviewed and Filed

14 Type: Mandatory Nurse Overtime

Harm:

3 mother/baby couplets (2 to discharge this day). 1 newborn readmit (NAS and phototherapy) mother with baby. 1 newly delivered m/b not off of recovery, admit of a 30 week pregnant with question pre-term labor at 7:40am. This required the extra nurse. Mandated nurse stayed with her newly delivered mother-baby through recovery and then helped as needed. (This nurse usually stays voluntarily but then does not get "credit" for the mandate). Another active labor patient (high risk) arrived at 10am requiring nurse to stay longer - Nurse manager was updated on situation by team leader at about 10:30am and was told that nurse had been mandated and would have to stay a little longer but that preterm admit was going home. T.L. indicated that if staff had been called but no one was available. It was busy but there were managing. Nurse manager said for T. L. to page her if she was needed. Outpatient lactation consult for high risk newborn scheduled for 10:30. Time could have been changed. Preterm labor discharged at 11:35am. Nurse left at 12:15pm.

<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-170	10/03/16	09/22/16	Facility	Reviewed and Filed

15 Type: Mandatory Nurse Overtime

Harm:

4RN's plus 1 RN orientee scheduled - all staff called prior to shift to assess availability. 2 mother/baby couplets, 1 postpartum with demise. 2 newborns (1 feeding issue and 1 NAS) boarding with moms. 2 pitocin inductions with notification that an active labor was coming in. Active labor arrived, delivered and hemorrhaged before the evening shift was off. Need for another RN at that point. Nurse would stay if mandated. Intent was to release RN as soon as unit was stable. Another labor patient arrived extending the time for the nurse.

01/18/17

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<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-172	10/20/16	10/15/16	Facility	Reviewed and Filed
16 Type: Mandatory Nurse Overtime Harm:				
The emergency room had 7 inpatient boarders and all units were full. All available staff were called to come in and assist but not able to get enough staff to work. One RN mandated to ensure safe care on inpatient unit				
<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-177	11/02/16	10/29/16	Facility	Reviewed and Filed
17 Type: Mandatory Nurse Overtime Harm:				
Census 3 M/B couplets = 1 labor induction at risk for cesarean, 1 NB NAS on meds, 4 nurses scheduled for 3p-11p shift. At change of shift 2 labor evals arrived, 1 preterm (35 weeks) the other one tested positive for multi drug use requiring another nurse. Calls were then made to obtain extra staff with most not returning calls. No one would stay without being mandated. Least senior nurse refused mandate because she had plans. Next least senior nurse took the patient assignment - 2 m/b couplets and newborn (whose mother was boarding and doing care). Nurse came in at 7p and mandated nurse was released.				
<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-179	11/17/16	11/06/16	Facility	Reviewed and Filed
18 Type: Mandatory Nurse Overtime Harm:				
There was a RN no call/no show, everyone was asked to stay until it was resolved. No one was willing to stay.				
<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-181	12/05/16	11/21/16	Facility	Reviewed and Filed
19 Type: Mandatory Nurse Overtime Harm:				
Need for additional staffing. Birth at 6:38am - infant in need of resuscitation brought to nursery. Busing unit - 4 mother/baby couplets, new delivery, 2 babies in nursery for NAS observation and sick baby in warmer needed O2, 1 induction. Census required 5 RN's 4 scheduled. All staff called, none available to respond until 10am				

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DIVISION OF HEALTH CARE QUALITY
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<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-186	02/16/17	02/14/17	Facility	Reviewed and Filed
Type: Mandatory Nurse Overtime		Harm:		
2 RN's scheduled for a total of 16 patients. 1 RN called out sick for 11p-7a leaving only one RN total for the unit. Calls made to all staff by supervisor and unit clerk to cover shift. Unable to find RN to work. Supervisor mandated 1 RN for 4 hrs.				
<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-187	02/16/17	02/05/17	Facility	Reviewed and Filed
Type: Mandatory Nurse Overtime		Harm:		
Staff injured, unable to work, needed to mandate to maintain safe staffing level				
<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-188	02/23/17	02/22/17	Facility	Reviewed and Filed
Type: Mandatory Nurse Overtime		Harm:		
Staff sick call, CRN needed to be pulled into count so unable to take RN's assignment at 3:30am as planned.				
<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-189	02/27/17	02/25/17	Facility	Reviewed and Filed
Type: Mandatory Nurse Overtime		Harm:		
A sick call resulted in a short staffing situation. A blast page sent at 0530. Calls placed by supervisor to individuals not included in blast page. All overnight staff declined working extra.				
<u>Incident #:</u>	<u>Received:</u>	<u>Incident Date:</u>	<u>Reported By:</u>	<u>Disposition:</u>
2120-191	03/15/17	03/12/17	Facility	Reviewed and Filed
Type: Mandatory Nurse Overtime		Harm:		
4 nurses scheduled-1 call out because her mother died overnight Night shift indicated that day shift would be OK 5 Mother/baby couplets with 1 Newborn in nursery on O2 and observation-2nd newborn brought to nursery for close observation due to change in condition 1 pre-term patient not in labor 6:55am call to supervisor asking for staff ?none available-indicated that no one was willing to stay voluntarily so there would need to be a mandate. Calls had been made and a blast page for help. Least senior nurse was mandated until staff could get in Assignment of 2 mother/baby couplets (she had 1 couplet on night shift)				