

WAC 246-840-513 Reporting and recordkeeping requirements for nursing education programs. (1) Within two business days, nursing education programs shall report to the commission, on forms provided by the commission, events involving a student or faculty member that the program has reason to believe resulted in patient harm, an unreasonable risk of patient harm, or diversion of legend drugs or controlled substances.

(2) The nursing education program shall keep a log of all events reported by a patient, family member, student, faculty or a health care provider resulting in patient harm, an unreasonable risk of patient harm, or allegations of diversion, and medication errors. The log must include:

(a) The date and nature of the event;

(b) The name of the student or faculty member involved;

(c) The name of the clinical faculty member responsible for the student's clinical experience;

(d) Assessment of findings and suspected causes related to the incident or root cause analysis;

(e) Nursing education program corrective action; and

(f) Remediation plan, if applicable.

(3) The nursing education program shall use the principles of just culture, fairness, and accountability in the implementation and use of all incident reporting logs with the intent of:

(a) Determining the cause and contributing factors of the incident;

(b) Preventing future occurrences;

(c) Facilitating student learning; and

(d) Using the results of incident assessments for on-going program improvement.

[Statutory Authority: RCW 18.79.010, 18.79.110, 18.79.150, 18.79.190, and 18.79.240. WSR 16-17-082, § 246-840-513, filed 8/17/16, effective 9/17/16.]