

Critical Incidents Response – Organizational Gap Analysis

Overview:

This tool was developed by Colorado Hospital Association as a template that hospitals can used to identify and prioritize employee support program gaps regarding personnel needs following a critical incident.

At the end of the process, you will have an overview of your facility's current strengths and gaps. This list can then be used as a starting point for developing a workplan and may be revised as needed (e.g., annually) based on a review and update of the assessment.

Instructions:

For each question, assign a score from a scale of 1 to 5 that aligns with your facility's capability in terms of policy, program and training.

- 1 No knowledge, policy, program or training currently exists
- 2 Inadequate knowledge, policy, program or training, but they exist
- 3 Possibly adequate knowledge, policy, program or training, but have not been evaluated and/or incomplete training
- 4 Adequate knowledge, policy, program and training, requiring minor modifications based on events or other evaluation
- 5 Sustainable knowledge, policy, program or training, strong capability in place, with regular ongoing testing/training

Employee Knowledge

Do you believe your staff is aware of each of the following areas?

Types of incidents (e.g., mass casualties, difficult patients, abuse, employee bullying).					
	5	4	3	2	1
Resour	ces available (e.	g., employee ass	sistance program	ns, rituals, comm	unity resources).
	5	4	3	2	1
Where and how to report an incident.					
	5	4	3	2	1
How to access help.					
	5	4	3	2	1

Resources

How would you rate your facility's access to and use of available resources?

Variety of resources to choose from, based on the incident and employee need (i.e., not one-size fits all).

1

5	Δ	3	2	
5	4	5	Z	



Employee peer support program.						
5	4	3	2	1		
New employee orientation and education.						
5	4	3	2	1		
Community						
Community partners 5	4	3	2	1		
5		0	-	-		
Regional and commu	nity resources (e	.g., community h	ospital partners	, statewide non-profit organizations).		
5	4	3	2	1		
Policies and Proc Rate your facility's av		nnrahansiyanass	of policies and	procedures		
Rule your jucility's uv	unubinty unu con	iprenensiveness	oj policies unu p	Si ocedui es.		
Do you track critical i	ncidents?					
5	4	3	2	1		
Does your culture sup	port or hinder th	e reporting of c	ritical incidents?			
5	4	3	2	1		
Do you have policies	and procedures f	or responding to		owing a critical incident?		
5	4	3	2	1		
Are those policies we	II known through	out the organiza	ation?			
5	4	3	2	1		
Do the policies and procedures cover a broad definition of what constitutes a critical incident?						
Do the policies and p	rocedures cover a	a broad definitio	n of what consti 2	1		
5	-	5	2	1		
Do the policies and p	rocedures includ	e a plan for psyc	hological service	es (beyond EAP)?		
5	4	3	2	1		
Do the policies (precedures include a timeline and action for management of incident related shellonges and						
Do the policies/procedures include a timeline and action for management of incident-related challenges and stressors?						
5	4	3	2	1		
ls your senior team e 5	ngaged? 4	3	2	1		
5	4	5	Z	1		
Do your policies and procedures include plans for a hot wash/debrief following an incident, to allow all						
•	involved parties to be heard and provide feedback on the response?					
5	4	3	2	1		



Do your policies and procedures include plans for:						
	Short-term response for staff care					
	5	4	3	2	1	
	Intermediate-term response for staff care					
	5	4	3	2	1	
	Long-term response for staff care					
	5	4	3	2	1	

<u>Rituals</u>

Rate your facility's use of rituals and customs to assist employees dealing with a critical incident.

Do you have rituals (e.g. customs, traditions, recognition of similar incidents)?						
	5	4	3	2	1	
Is there	a practice for c	reating them?				
	5	4	3	2	1	
Are the	y inclusive for a	ll staff?				
	5	4	3	2	1	
Do you solicit staff ideas for new rituals?						
	5	4	3	2	1	
Does your staff know who/how/when to create and use rituals?						
	5	4	3	2	1	

Long-Term

Rate your facility's long-term approach to critical incidents response.

Is your facility's long-term response to staff support dependent on one person (e.g., CNO, HR Director) or one department (e.g., ED)? Does your facility have a mechanism for following up with employees regularly following a critical incident (e.g., anniversaries)? Please rate your organizational awareness of the effect of retriggering events Do you have resources, rituals and plans for assisting staff through retriggering events?



Critical Incidents Response – Hospital Work Plan

- 1. What is the biggest gap for your organization?
- 2. What are three steps you can take to close that gap?
 - •
 - •
 - •
- 3. Who do you need to engage? What will their roles be?
- 4. What resources are you lacking?
- 5. Are there community partners that can help you close the gap?
- 6. Are there other health care organizations that can help you?
- 7. Define success.