

# How to report to the Quality and Patient Safety Division of the Board of Registration in Medicine



**BETSY LEHMAN CENTER**  
for Patient Safety

## Safety & Quality Review (SQR)

Safety & Quality Review (SQR) reports are reports of unexpected patient outcomes, also referred to as major incidents. The Quality and Patient Safety Division (QPSD) accepts these required reports electronically via an on-line reporting portal. The following types of major incidents must be reported by the health care facility to the QPSD:

- a. Maternal deaths that are related to delivery.
- b. Death in the course of, or resulting from, elective ambulatory procedures.
- c. Any invasive diagnostic procedure or surgical intervention performed on the wrong organ, extremity or body part.
- d. All deaths or major or permanent impairments of bodily functions other than those reported in 243 CMR 3.08 (2)(a) through (c) that are not ordinarily expected as a result of the patient's condition on admission.

Health care facilities file major incident reports with the QPSD on a quarterly basis. A tutorial is available on QPSD's website.

## Online reporting

As of September 1, 2023, the Quality and Patient Safety Division accepts required reports electronically via an on-line reporting portal. An account is required to submit a report.

**All accounts are created through the Patient Care Assessment Coordinator for your facility.**

1. Contact your PCA Coordinator, who will contact QPSD
2. You will receive instructions from QPSD to create an account
3. Once authorized, you will have an account with a login in and password to use the portal

## Patient Care Assessment-Quality Assurance (PCA-QA)

Each facility must submit a single, annual Patient Care Assessment Quality Assurance report (PCA-QA Report) that includes the elements below. Note that a single annual PCA-QA report now satisfies previous requirements to submit both an annual and semi-annual report and must be submitted via the portal.

1. A copy of the facility's Patient Care Assessment Plan, which shall be reviewed, updated, and submitted annually. The entire updated PCA Plan is to be included.
2. Patient complaint data.
3. Performance Improvement Activities (Major Tasks Completed).
4. Internal Reporting and Screening Systems:
  - Focused Occurrence Screening Criteria data, analysis, and recommendations.
  - Focused Occurrence Reporting Criteria data, analysis, and recommendations.
  - Internal Incident Reporting System Data
5. Attestation that the following elements are in place and available:
  - Policy/protocol regarding the distribution of detailed written instructions regarding operational procedures relevant to patient care assessment and compliance with 243 CMR 3.00.
  - Policy/protocol regarding the handling of impaired physicians.

Please visit the website for a video tutorial on the required elements of the PCA-QA Report: [mass.gov/doc/patient-care-assessment-quality-assurance-pca-qa-report-video-tutorial/download](https://mass.gov/doc/patient-care-assessment-quality-assurance-pca-qa-report-video-tutorial/download)

## Resources

For more information, see QPSD's website: [mass.gov/patient-care-assessment-program](https://mass.gov/patient-care-assessment-program)

## Contact info

**Quality and Patient Safety Division  
Board of Registration in Medicine**

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