



BRODY SCHOOL OF MEDICINE

OFFICE OF RISK MANAGEMENT

New Employee Orientation

2011



Those principles and techniques that, when proactively applied, will avoid, reduce or control loss and protect assets.*

- * Assets include ECU/BSOM name and reputation, its faculty, staff, students, and patients, as well as all financial assets to insure long term viability.



Risk Management

Vision

Patients, families, visitors, faculty, and staff will be free from accidental harm as a result of services provided or research conducted by the Brody School of Medicine or in any Brody School of Medicine facility. If harm occurs, immediate and appropriate actions will be taken to mitigate further harm and reduce the likelihood of harm to any other patient, family, visitor, faculty, or staff.

Risk Management envisions itself as a major contributor to assist medical students and all learners toward achievement of the established attributes desired for the Brody School of Medicine Graduate—"Professional, Knowledgeable, Skillful, and Good Citizen."



Risk Management

Mission

In support of the organizational vision: "through leadership in education, research and health care services, will continuously improve the health of the people of eastern North Carolina," the Office of Risk Management exists to ensure that risks or exposures to patients, faculty, staff, and the Brody School of Medicine are reduced and/or controlled through timely identification, reporting, analysis and intervention.

Recognizing that risk management is a shared responsibility of all faculty and staff, education is a vital function to garner support and commitment for the program.



Risk Management

Goals

1. Design and implement a robust, proactive risk management program that encompasses each mission of The Brody School of Medicine.
 - + Clinical Care - most mature area of the risk management program at this time.
 - ± Research - maturing to ensure regulatory compliance and safety for all involved (researchers and participants).
 - ± Education - ongoing evaluation of risk management involvement in the education mission.
2. Assess the risk management needs in all non-clinical dimensions of the School of Medicine.

Program Scope and Components

The scope of the program encompasses activities aimed at identifying and analyzing potential risks to the university, school of medicine, patients because of clinical care; examining, selecting, and implementing strategies; and monitoring those strategies to determine effectiveness.

Risk Identification

Risk Analysis

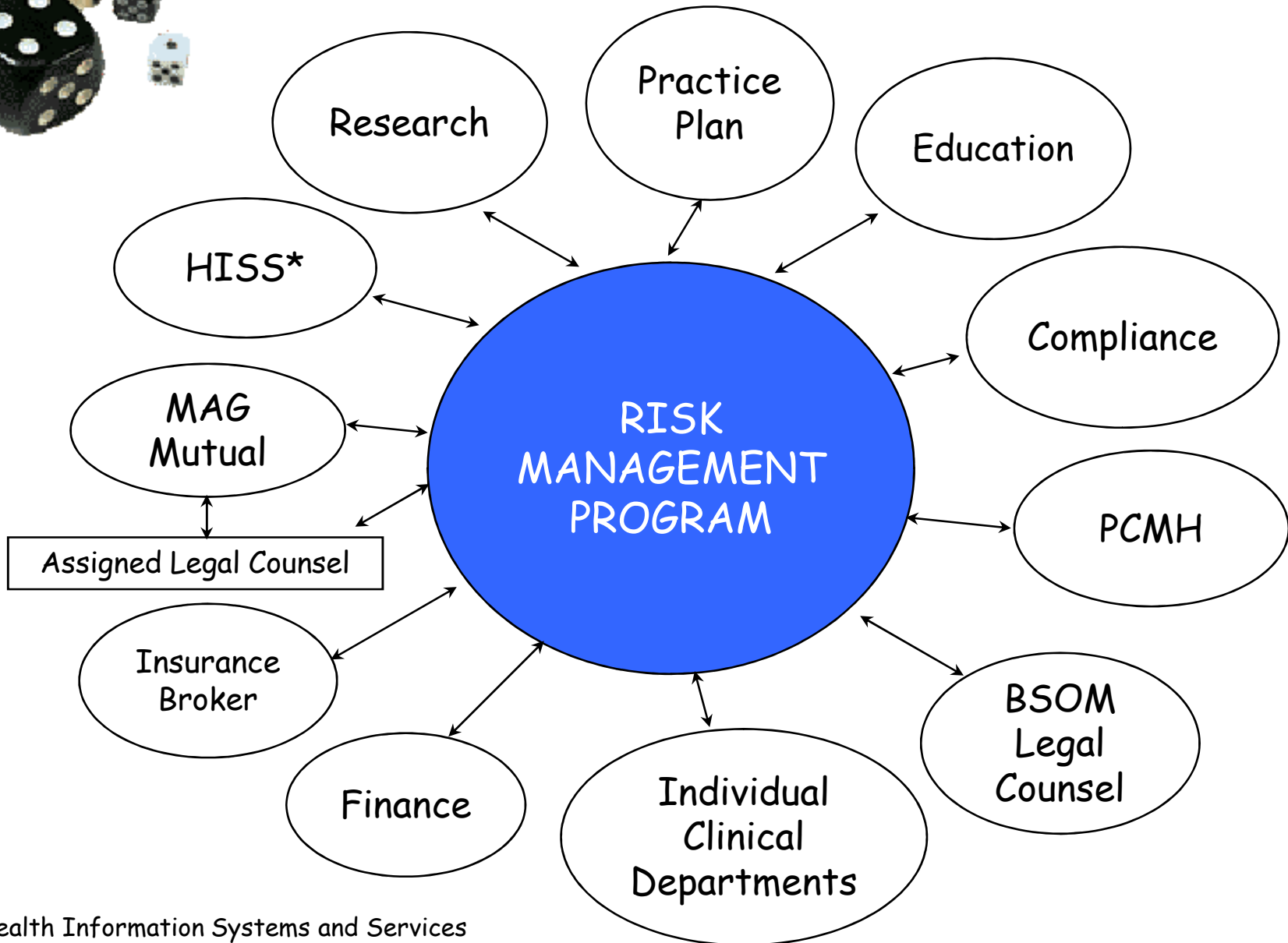
Loss Prevention

Loss Control

Risk Financing

BSOM Name and Reputation
Faculty/Staff/Students/Patients

Linkages



* Health Information Systems and Services



Risk Management

Major Programs Components

- ⊙ Risk Financing - purchasing professional liability insurance coverage for BSOM
- ⊙ Claims Management - managing malpractice claims and lawsuits once filed (Loss Control)
- ⊙ Loss Prevention - attitude, beliefs and behaviors aimed at preventing/minimizing harm in all school aspects: education, research and clinical care



your role in the risk management program

- ◎ EVERYONE'S role is risk identification and prevention
- ◎ When a risk is identified, you may also have the responsibility to contain/control further risk and/or harm.
 - Equipment that may have contributed to or caused the significant event must be (1) removed from operation, (2) tagged inoperable and (3) sequestered under lock and key.
 - It may be necessary to implement interim safeguards to prevent a re-occurrence of the event such as removing entire lot numbers of drugs or products.
 - Staff should be reminded to refrain from open discussions and/or speculations about the unusual occurrence.



Risk Identification

Event Reporting

- ⦿ The variance report is a protected and confidential organizational document and is governed by Policy A12:
 - ⦿ Serves two purposes. (1) puts the company on notice of an adverse event or outcome and (2) part of the performance improvement program.
 - ⦿ Do **NOT**:
 - ❌ copy the completed report;
 - ❌ place the completed report in the medical record;
 - ❌ document that a report was completed in the medical record;
 - ❌ tell the patient or family that a variance report was completed.



Action Steps

Event Reporting

- ⊙ Do's - What to do when you identify/recognize an event.
 - ✓ complete all applicable boxes, squares;
 - ✓ write only necessary narrative to further explain the event.
 - ✓ assess the patient; take appropriate actions to reduce further harm.
 - ✓ document the event, assessment, and actions in the medical record (if it is within your function); for example:
- ⊙ Consider notification of physician, supervisor/ manager, leader, administrator on-call, **RISK MANAGEMENT**.
- ⊙ Submit completed report to the designated location within your department; you may also mail it directly to Risk Management.



criteria for variance reporting

Patient Care Occurrences, Events, Outcomes

- ✓ Patient/Family demands for monetary compensation, co-pay waivers, additional care at no cost, etc.
- ✓ Delays/errors/omissions of care, medication, treatments, procedures or tests.
- ✓ Unexpected reactions or responses to care, medication, treatments, procedures or tests.
- ✓ Falls, injuries or accidents within the school or school owned location, regardless of cause.
- ✓ Leaving against medical advice (AMA) or without being seen (LWBS).
- ✓ Patient, family or visitor dissatisfaction, verbal confrontations or complaints about access to care and services, care or services rendered or clinical outcomes.



criteria for variance reporting

Patient Care Occurrences, Events, Outcomes

- ✓ Refusal of care.
- ✓ Non-compliance with prescribed plans of care or treatments.
- ✓ Unusual behavior of patients, family, visitors or staff that effect patient care or service.

Examples: aggression, verbal abuse, threats or violent acts against others or self, suicide attempts, fraudulent use of membership card/ benefits/services and drug/narcotic seeking behavior that cannot be clinically managed.

- ✓ Loss or incorrect identification of records, specimens, patients' personal property or valuables.
- ✓ Events that involve equipment/device/product/supplies that malfunction, are misused, or are not available. Reports are made regardless of harm or injury.



criteria for variance reporting

Operational and Systems Issues

- ✓ Loss or damage to organizational property.
- ✓ Information technology, utility or equipment failures or outages related to patient care regardless of outcome.
- ✓ Inadequate service, responses, or conduct of departments or individuals that adversely effect patient care.
- ✓ Known/suspected hazardous environmental conditions for patients, visitors, or staff members.
- ✓ Known/suspected violations of health or safety policies, rules, regulations or laws.
- ✓ Unethical, illegal, or hazardous activities or conduct that have been referred, but not resolved through existing policy and procedures.
- ✓ Injuries, events involving yourself.



Claims and Lawsuits

How Do You Know?

- Claims - demands for monetary compensation from the "harmed" patient, family; could be in writing or given verbally to someone within the institution. May be disguised as request for co-pay waiver or additional services for no charge with no personal or third-party billing.
- Lawsuit (Summons and Complaint) - officially served notice that has been assigned file number by the jurisdiction where the suit was filed



Claims and Lawsuits

What Do You Do?

- Notify Risk Management immediately
- Send Summons and Complaints to Risk Management
 - In turn, it is sent to MAG Mutual for appropriate action
- Do not talk to anyone about the claim or lawsuit with anyone in any environment that does not allow for a privileged conversation; i.e. assigned attorney, risk management.



Confidentiality



- ◆ Constitutional right to privacy
- ◆ State and Federal laws govern confidentiality and release of information
 - ✓ Special conditions for the following:
 - Chemical dependency treatment
 - Alcohol treatment
 - Mental and Behavioral Health treatment
 - Minors without parental authority for special conditions

- ◆ **Breach of Confidentiality Defined**

a disclosure to a third party, without the patient's or legal representative's consent or a court order, of private information that is learned during a healthcare encounter



Confidentiality

- ◆ Opportunities to breach confidentiality
 - ✓ In person - hallway, elevator, dining room, local market
 - ✓ Telephone
 - ✓ Fax
 - ✓ Inappropriately accessing automated data systems
- ◆ Organizational policies and procedures
 - ✓ Compliance is mandatory
 - ✓ Failure to comply leads to disciplinary actions that may include termination
 - ✓ Use of the multiple data systems that contain proprietary and patient information
 - ✓ For any questions, contact manager, supervisor, director and/or risk management



Congratulations

This certifies you as a

*Deputy
Risk Manager*