

Risk Management Plan May 2010
Approved May 18, 2010 Physician Council

I. Policy:

It is the policy of (name of clinic) to administer a Risk Management Plan that reduces overall risk to the organization. Risk management supports the (name of clinic) philosophy that patient safety and management is everyone's responsibility. Emphasis is on evidence-based best practices, learning from error analysis, and providing constructive feedback, rather than blame.

II. Purpose/Goal:

The purpose of the Risk Management Program is to:

- A. Reduce the risk of injury or adverse medical outcomes.
- B. Reduce the risk of injury to clinic staff, patients and visitors.

III. Responsibility:

- A. The Board of Directors possesses the ultimate responsibility for establishing the clinic policies.
- B. The Board of Directors is not involved in the day-to-day administration of the adopted policies. This function is delegated to the Chief Executive.
- C. A clinic staff person is designated as a point person for risk management issues.

IV. Goals and Objectives

- A. Continuously improve patient safety and minimize and/or prevent the occurrence of errors, events, and system issues leading to harm to patients, staff, volunteers, visitors and others through proactive risk management and patient safety activities.
- B. Minimize adverse effects or errors, events, and system breakdowns when they do occur.
- C. Minimize losses to the organization overall by proactively identifying, analyzing, preventing, and controlling potential clinical, business and operational risks.
- D. Facilitate compliance with regulatory requirements.
- E. Develop systems for reporting of adverse events, near misses and potentially unsafe conditions.
- F. Facilitating and ensuring the implementation of patient safety initiatives such as improved tracking systems for preventive screenings and diagnostic tests as well as medication safety systems.
- G. Establishing an ongoing patient quality improvement/safety/ risk management committee composed of key clinical and administrative departments and services.

V. Structure of the Program

The Patient Safety and Risk Management Program is administered through the (name of clinic) Quality Management Committee. The committee meets regularly and includes representatives from key clinical and administrative services. Risk management activities are reported at least quarterly. The event report summaries and trends activities include but are not limited to (1) complaints, (2) unusual occurrences, (3) patient satisfaction, (4) referrals and (5) workers compensation. Quality improvement findings are used to modify policies and procedures in order to improve outcomes.

- A. There are specific focal areas for analysis of risk management concerns. These are prioritized based upon the likelihood of serious problems in the area as well as the human and economic consequences of the risks:
 - 1. Services and Human Resources
 - a. Quality Improvement
 - b. Informed consent procedures
 - c. Credential verification for licensed practitioners.
 - d. Supervision and backup of clinical staff
 - 2. Facility
 - a. Equipment (including level of technology)
 - b. Security

VI. Reporting

- A. There is a designated staff person assigned to collect, trend and report complaints and unusual occurrences.
- B. All staff are educated on reporting risk issues.
- C. Department safety issues are a regular agenda item on the Safety or QI Committee.

VII. Risks and Strategies for Risk Management

Risk - Injury to patients and potential for malpractice liability.

- A. Strategy: Ensure well-qualified professionals for all patient care positions within the clinic. The (name of clinic) will:
 - 1. Credential all health care personnel involved in direct patient care at least every two years (Licensed practitioners and certified practitioners).
 - 2. Solicit input into the hiring decision by the Chief Medical Officer, staff clinicians, and or other professionals with whom the new clinician will be working closely.
 - 3. Establish a system of professional performance evaluations of each clinician, conducted by professionals within the clinician's own field.
 - 4. Provide a format for clinicians to continue their education in furtherance of enhancing skills in areas relevant to the Center's patients.
 - 5. Develop policies and procedures on backup for clinicians.

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B. Strategy: Ensure safe, appropriate and effective patient care management.

(Name of clinic) will:

1. Establish clinical protocols for a number of the most commonly performed procedures and/or treatment regimens for the most common diagnoses.
2. Maintain a medical record for every patient receiving care at the Clinic.
3. Perform peer review to assure adherence to the established protocols and for completeness of documentation and legibility within the patient's medical record.
4. Ensure that remedial plans are developed and implemented for those cases where deficiencies are found in medical documentation.
5. Develop appropriate patient education materials and programs in order to assist patients to participate in their own healthy lifestyle decisions.
6. Develop procedure manuals in order to establish appropriate quality controls and monitoring systems for the ancillary services offered by the Clinic (i.e., lab, x-ray, and pharmacy).
7. Develop policies and procedures to protect the confidentiality of patient and employee files from unauthorized or unnecessary use or access.

C. Strategy: Ensure access to care. (Name of clinic) will:

1. Provide support personnel with the information necessary to assist and support the clinician's activities.
2. Develop a telephone, appointment and triage policies to: insure that patients make appointments as needed; minimize no-shows; patients are triaged appropriately; and identify priorities for scheduling of patients.

D. Strategy: Evaluate clinical systems and patient satisfaction. (name of clinic) will:

1. Conduct periodic patient satisfaction surveys that measures the patient's level of satisfaction with the clinicians, support staff, and services performed.
2. Develop a quality improvement system with policies and procedures that prescribe the standards which the Clinic sets for its medical services and a quality improvement committee that meets regularly.
3. Develop and implement tracking in the following areas:
 - a. Lab and x-ray
 - b. Referrals to other area clinicians either for inpatient or outpatient services
 - c. Subspecialty consultation
 - d. Immunization schedules
 - e. Scheduled visits for obstetric patients who will be followed during maternity by the Center's clinicians
 - f. Follow-up for patients with specified chronic conditions that will require ongoing monitoring and evaluation

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Risk - Compliance with the informed consent process

E. Strategy: Develop a consent policy and procedure manual. (Name of clinic) will:

1. Establish appropriate consent practices
2. Educate staff about proper consent practices
3. Facilitate communication of pertinent information between patient and health professional and among health professionals
4. Assure proper documentation of consent

Risk - Losses related to the facility and its contents

F. Strategy: Anticipate potential loss due to illegal entry into the clinic facility and prevent breaking and entry. (Name of clinic) will:

1. Develop basic safety policies which include assessment of door and window security, use of appropriate locks and after hours alarm systems.
2. Obtain security recommendations from contracted survey services.
3. Permanently mark clinic valuables with some kind of identification.
4. Record the serial numbers of office equipment.
5. Engrave equipment with clinic identification codes.
6. Ensure correct labeling, dispersal and re-acquisition of keys.
7. Provide adequate lighting inside and out.

Risk - Potential for fire, smoke or water damage

G. Strategy: Develop policies and procedures to decrease risk of fire and minimize potential for damage if fire or flood occurs. (Name of clinic) will:

1. Exits clearly marked
2. Install smoke detectors and sprinkler systems as required by local/state fire safety code.
3. Have working fire extinguishers placed in locations accessible to employees.
4. Conduct quarterly fire drills.
5. Safety designated staffs who are informed of the gas shutoff location for each site.

Risk - Issues related to medical records

H. Strategy: Develop policies and procedures that insure the completion, integrity, confidentiality and secure storage of medical records. (Name of clinic) will:

1. Ensure secure storage of paper medical records.
2. Retain records as appropriate by statute of limitations.

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3. Obtain direction from its attorney on the legal implications of release of records.
4. Specify in policies and procedures that medical records are the property of the clinic.
5. Ensure access to electronic medical records is limited to job functions.
6. Monitor access of electronic medical records on a regular basis.
7. Promptly disable passwords or user access for employees who leave or are terminated.
8. Ensure physical security of laptops, motion tablets and PDAs.
9. Perform nightly back-ups of all electronic patient data and store back-ups offsite.

Risk - Injury to or loss of employees

- I. Strategy: Develop policies and procedures to select, orient, train and evaluate staff. (Name of clinic) will:
 1. Develop accurate, current and complete job descriptions which clearly set out the organization's expectation with regard to the employee's performance.
 2. Provide thorough initial orientation and training programs to ensure employee safety and acceptable job performance.
 3. Provide periodic in-service on areas of particular interest or related to job responsibilities.
 6. Make available to all affected employees, procedure manuals for properly performing necessary clinic function.
 7. Focus on specific areas of high potential risk for employee injuries and ensure that all possible precautions are taken to protect employees' health.
 8. Conduct exit interviews to frankly and openly discuss work conditions, recruitment and retention issues, risk management issues and other relevant suggestions for improvement