

**Lake County Health Department and Community Health Center
Clinical Risk and Patient Safety Management – Training Plan 2024**

The Lake County Health Department and Community Health Center seeks to provide a culture of safety throughout the organization in which everyone is responsible for helping to create that culture. In order to achieve that goal, it is essential that the organization has a plan to educate all staff in ways to minimize clinical risk. Areas that are addressed as part of this training are based on regulatory requirements, accreditation standards and areas of known risk. While the following areas and staff identified below are part of a standard training, additional training may be added throughout the year, based on areas identified through on-going risk assessment. When this occurs, it would generally be based on areas reported through the incident reporting system, along with any new procedures or equipment being introduced to the agency.

- 1) Upon orientation, new employees will be educated on:
 - a. Individual responsibility in risk management and safety
 - b. Explanation of Federal Tort Claims Act (FTCA) and its role in the Health Center
 - c. Joint Commission National Patient Safety Goals
 - d. HIPAA
 - e. Incident Reporting
 - f. Sentinel events
 - g. Mandated reporting
 - h. Handling of requests for information, including subpoenas or summons for appearance in court
 - i. Policies and procedures
 - j. Role of documentation in minimizing risk
 - k. Equipment and medication management and addressing notifications from the Federal Drug Administration on medication and device alerts or recalls.
 - l. Review of basic infection control, blood borne pathogen, and personal protective equipment.
 - m. Role of the translator
 - n. Clinical Risk and Patient Safety Management Plan – action plan for the current year.
 - o. Workplace violence prevention training for effectively responding to challenging customer and coworker behavior.

- 2) Upon acceptance to the Governing Council, all new members will be educated on:
 - a. The Clinical Risk and Patient Safety plan
 - b. The status of the yearly action/training plan

- 3) Annually staff will review:
 - a. HIPAA
 - b. Mandated reporting
 - c. Safety basics
 - d. Cultural competence
 - e. Infection control
 - f. Joint Commission National Patient Safety Goals
 - g. Provider ECRI Learning or other applicable Clinical Risk management educational course applicable to specialty (minimum of one)
 - h. Cybersecurity trainings (multiple provided throughout the year via NINJIO)

- i. Priority items as identified and determined by assessments to clinical and administrative services.

Focused/Priority 2024 areas to be addressed:

1. Contract Lab Vendor Management and Inclusion
2. Focused HIPAA training
3. De-escalation skills training

4) Tracking of training

Individual training will be tracked in the organizational electronic system (Relias). Group trainings are documented within programmatic agendas and minutes.