

**Lake County Health Department and Community Health Center**  
**Clinical Risk and Patient Safety Committee**  
**Report to Governing Council**  
**May 9, 2019**

As delineated in the Clinical Risk and Patient Safety Management (CRPSM) Plan, the CRPSM Program is administered through the CRPSM Manager who chairs the CRPSM Committee. The composition of this Committee is designed to facilitate the sharing of clinical risk management and safety knowledge processes across multiple disciplines and programs. This Committee is enabled to optimize key findings from risk management activities and make recommendations and decisions to reduce the overall likelihood of similar adverse events and improve patient safety. The Program and Committee activities focus on the following goals:

- Continuously improving patient safety and minimizing or preventing the occurrence of errors, events, and system breakdowns leading to harm of patients, staff, volunteers, visitors, and others through proactive risk management and patient safety activities.
- Minimizing adverse effects of errors, events, and system breakdowns
- Minimizing losses to the organization overall by proactively identifying, analyzing, preventing, and controlling potential clinical, business, financial, and operational risks.
- Facilitating compliance with regulatory, legal, and accrediting agency requirements (e.g., Patient-Centered Medical Home, The Joint Commission)
- Protecting human and intangible resources (e.g., reputation)

To address the CRPSM goals, the following activities took place and are being reported on for the period of April 1, 2018 – March 31, 2019. These activities focus on providing staff education, assessing risk, validating appropriate follow-up has occurred.

**General Risk Assessment**

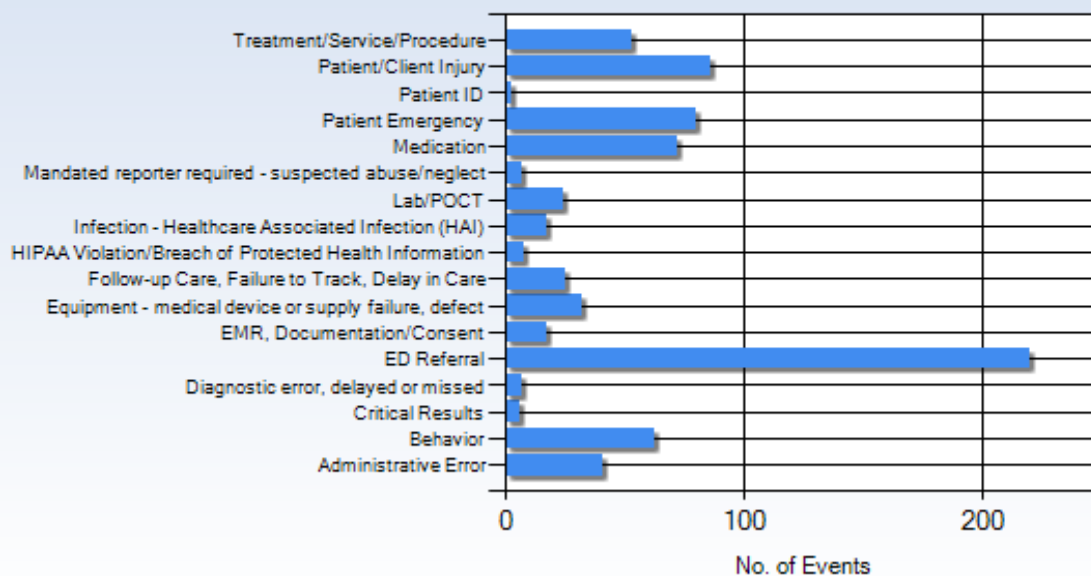
Risk assessments continued through a cross functional team (which included the Clinical Operations Director, the Business Operations Director, Human Resources Director, Medical Director, Associate Directors, Information Technologies Director, Clinical Compliance Manager, Quality Improvement Coordinator, Regulatory and Accreditation Specialist and Clinical Operations Audit team). This team met minimally twice a month to risks identified through the Joint Commission surveys, related to Infection Control, Medication Management, Patient Care and Human Resources standards. Additional monthly Risk Assessment was also completed through the use of the risk incident management system (RIMS), HealthCare Safety Zone<sup>®</sup>.

**Risk Incident Management System - Adverse Event Reporting and Patient Complaints**

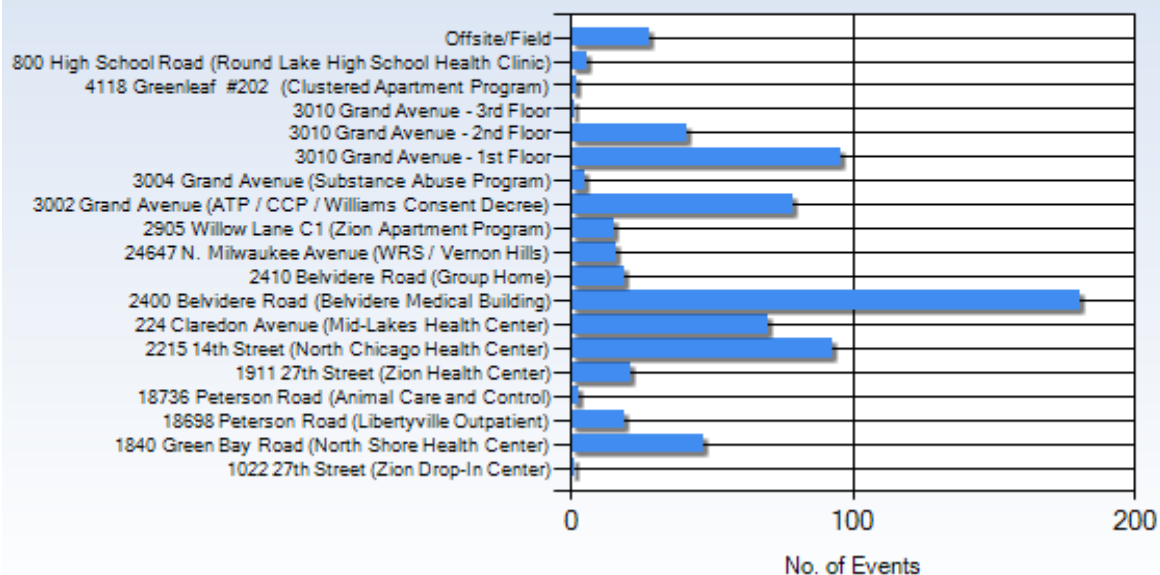
RIMS allow staff to be able to immediately and voluntarily report via a secured web portal any unusual occurrences/incidents or near-misses that are related to an employee accident or patient issue. It also serves as a repository for patient complaints as received, including those placed on social media. The information gathered via this system was evaluated by the CRPSM Committee on a monthly basis to

begin to look for trends and confirm that appropriate follow-up occurred with the patient and/or staff member as applicable. For the time period of March 2018-March 2019, 759 adverse effects/near misses were reported.

### Event Summary 4/1/18-3/31/19



### Program Location Summary 4/1/18-3/31/19



Based on both incident reporting and patient comments, the CRPSM Committee focused on addressing and/or monitoring other organizational efforts to address/improve the following areas:

- Modification of emergency equipment availability and evaluation of the addition of ambu-bags
- Lab ordering process
- Duress button locations and communications process, particularly at Grand Avenue.
- Vaccine Management
- Patient appointment time availability
- Patient Wait time

### **Provider Risk Management Training**

All medical and dental providers have been instructed and have established an account within the e-learn system of the ECRI Institute. All providers were instructed to complete the course Clinical Risk Management Basics (code HRSA\_CRMBasics\_04-2018) and submit the completion certificate to Clinical Operations Administration. ECRI is a nonprofit organization dedicated to bringing the discipline of applied scientific research to discover which medical procedures, devices, drugs and processes are best to help improve patient care and its services are provided free to federally qualified health centers through the Health Resources Services Administration (HRSA). Additional courses related to risk are available to providers based on interest.

### **Staff Risk Management Training**

All staff continue to receive risk management training as described within the LCHD/CHC Clinical Risk and Patient Safety Management Training Plan. Additionally, all staff who have the responsibility for dental/medical equipment disinfection and sterilization were trained and had competency testing for the series of tasks that are associated with this process. Several other trainings were offered as related to risk areas identified through the accreditation process. These included several areas of medication management, PCMH concepts related to continuity of care and self-management goals., as well as other standard infection control areas.

### **Claims and Lawsuits**

No claims or lawsuits were filed. The LCHDCHC has on-going communications with the Lake County Risk Management Department, which holds the primary responsibility for notification to the United States Department of Health and Human Services Federal Tort Claims Act (FTCA) unit, to assure readiness for appropriate reporting should the need arise.

*All documents and records that are part of the risk and safety management process shall be privileged and confidential to the extent provided by state and federal law. Confidentiality protections may include attorney/client privilege, attorney work product, Patient Safety Organization, and peer review protections.*