

**BHCS RISK MANAGEMENT QUARTERLY REPORT QUARTER 1 CY22**

Occurrence Category CY23	Q1	%
ADR	0	0%
DELAY	13	4%
FALL	30	9%
HIPAAAPHI	10	3%
INFECTION	0	0%
LAB	49	15%
MEDICATION	37	11%
OB DELIVERY	4	1%
PATCARE	81	25%
PATRIGHT	1	0%
PPID	2	1%
SAFETY	15	5%
SECURITY	57	18%
SKINWOUND	5	2%
SURGERY	19	6%
GRAND TOTAL	323	100%

**OCCURRENCE CATEGORY CY23:**

During the 1st Quarter CY 2023, there were a total of 323 Occurrence Variance Reports, compared to 274 for the 4th Quarter CY 2022.

This reflects an increase of 49 or 8.2% for Q1 CY 2023.

Inpatient Falls by Category CY23	Q1
BABY/CHILD DROP	0
EASED TO FLOOR BY EMPLOYEE	4
FOUND ON FLOOR	7
FROM BED	0
FROM BEDSIDE COMMODE	0
FROM CHAIR	0
FROM TOILET	0
PATIENT STATES	2
SIDEWALK	0
SLIP	1
TRIP	0
WHILE AMBULATING	1
GRAND TOTAL	15

**INPATIENT FALLS BY CATEGORY CY23:**

During the 1st Quarter CY 2023, there were 15 Inpatient Falls. This reflects an increase of 2 or 7.14% from 13 reported in Q4 CY 2022.

There was 1 MAJOR injury, 1 MINOR injury and 13 with NO injuries.

OB DELIVERY CY23	Q1
FETAL/MATERNAL DEMISE	0
MATERNAL COMPLICATIONS	0
NEONATAL COMPLICATIONS - Apgar <5 @5 min	0
OTHER	0
POSTPARTHUM HEMORRHAGE	0
RN ATTENDED DELIVERY (1 event >30 mins Delay)	2
SHOULDER DYSTOSIA	2
GRAND TOTAL	4

**OB DELIVERY CY23:**

During the 1st Quarter CY 2023, there were 4 reported occurrences, which reflects a decrease of 4 or 33.34% from Q4 CY 2022, which reported 8.

For delays greater than 30 minutes, a referral is sent to Quality for any Quality of Care concerns.

Maternal Complications are referred and reviewed by Quality Management/Peer Review for Quality of Care Concerns.

HAPIs CY23	Q1
PRESSURE INJURY-ACQUIRED	2
GRAND TOTAL	2

**HAPIS CY23:**

During the 1st Quarter CY 2023, there was 2 HAPIs reported, which reflects an increase by 2 from Q4 CY2022, which reported 0. 1- Decubiti Stage II (sacrum) and 1 - Pressure injury-Stage 3 (under trach and Unstageable -sacral region)

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MEDICATION VARIANCES CY23	Q1
CONTRAINDICATION	2
CONTROL DRUG CHARTING	0
CONTROL DRUG DISCREPANCY INVESTIGATION	0
CONTROL DRUG DISCREPANCY-COUNT	1
CONTROL DRUG DIVERSION/SUSPICION	1
CPOE ISUUE	3
DELAYED DOSE	1
eMAR - TRANSCRIPTION/PROCEDURE	1
EXTRA DOSE	2
IMPROPER MONITORING	4
LABELING ERROR	0
MISSING/LOST MEDICATION	1
OMITTED DOSE	2
OTHER	2
PRESCRIBER ERROR	1
PYXIS MISS FILL	3
SELF-MEDICATING	4
UNSECURED MEDICATION	3
WRONG DOSAGE FORM	0
WRONG DOSE	0
WRONG DRUG OR IV FLUID	2
WRONG FREQUENCY OR RATE	2
WRONG PATIENT	1
WRONG TIME	1
GRAND TOTAL	37

**MEDICATION VARIANCES CY23:**

During the 1st Quarter CY 2023, there were 37 Medication occurrences reported, which reflects an increase by 6 or 8.82% from Q4 CY 2022, which reported 31.

There were 13 Near Misses that were Medication-related.

Medication Variances are reviewed at the Medication Safety and P&T Committees.

The Committees review for quality improvement opportunities and recommendations are addressed collectively by all Regions.

ADR CY23	Q1
ALLERGY	1
CARDIOPULMONARY	0
GRAND TOTAL	1

**ADR CY23:**

During the 1st Quarter CY 2023, there was 1 ADR reported, which neither reflects a decrease nor an increase from Q4 CY 2022, which also reported 1.

SURGERY RELATED ISSUES CY23	Q1
CONSENT ISSUES	2
EXTUBATION/INTUBATION	0
PUNCTURE OR LACERATION	1
RETAINED FOREIGN BODY	0
SPONGE/NEEDLE/INSTRUMENT ISSUES	3
STERILE FIELD CONTAMINATED	1
SURGERY DELAY	5
SURGERY/PROCEDURE CANCELLED	5
SURGICAL COMPLICATION	0
TOOTH DAMAGED/DISLODGED	0
UNPLANNED RETURN TO OR	2
UNPLANNED SURGERY	0
GRAND TOTAL	19

**SURGERY RELATED ISSUES CY23:**

During the 1st Quarter CY 2023, there were 19 Surgery related occurrences, which reflects an increase by 3 or 8.58% from Q4 CY 2022, which reported 16.

Surgery/Procedures cancelled are tracked and trended.

SECURITY CY23	Q1
ACCESS CONTROL	0
AGGRESSIVE BEHAVIOR	11
ARREST	0
ASSAULT/BATTERY	2
CODE ASSIST	14
CODE ELOPEMENT	0
CONTRABAND	9
CRIMINAL EVENT	1
ELOPEMENT-INVOLUNTARY ADMIT (BA, vulnerable adults etc.)	0
ELOPEMENT-VOLUNTARY ADMIT (NON-VULNERABLE)	1
PROPERTY DAMAGED/MISSING	14
SECURITY PRESENCE REQUESTED	1
SMOKING ISSUES	1
THREAT OF VIOLENCE	2
TRESPASS	0
VERBAL ABUSE	1
GRAND TOTAL	57

**SECURITY CY23:**

During the 1st Quarter CY 2022, there were 57 Security related occurrences, which reflects an increase by 11 or 10.68% from 46 reported in Q4 CY 2022.

There were 14 Code Assist events, in Q1 CY 2023, which reflects a decrease by 1 or 3.44% from Q4 CY 2022, which reported 15.

Property Damaged/Missing is 14 in Q1 CY 2023, which reflects an increase by 3 or 12% from Q4 CY 2022, which reported 11.

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<b>SAFETY CY23</b>	<b>Q1</b>
BIOHAZARD EXPOSURE	0
CODE SPILL - CHEMICAL	1
ELEVATOR ENTRAPMENT	1
SAFETY HAZARD	10
SHARPS EXPOSURE	3
<b>GRAND TOTAL</b>	<b>15</b>

**SAFETY CY23:**

During Q1 CY 2023, there were 15 Safety events reported, which reflects an increase by 1 or 3.44% from Q4 CY 2022, which reported 14.

Occurrences which involve employees and LIPs are referred to Employee Health for review.

**REGIONAL RISK MANAGEMENT SECTION : (MAY INCLUDE PERFORMANCE IMPROVEMENT INITIATIVES , SERIOUS INCIDENTS, AHCA ANNUAL REPORTABLE EVENTS, CODE 15 REPORTS, AND/OR INTENSE ANALYSIS/RCA's COMPLETED, ETC.)**

**BHCS Falls Safety Measures:**

Our falls drill down showed most falls being bathroom related. Staff are encouraged to ensure this is addressed during their purposeful rounding. Reinforce with staff that patient's should not be left unattended on the bedside commode. Continue to encourage and reinforce the need for purposeful rounding. Continue to educate on the Morse Fall Risk Scale Score. Continue to reinforce the need for thorough and proper patient assessment and handoff. Safety Huddles every shift with staff (to review any fall risk patients and any other safety concerns). Reinforce the need for bedside shift report. Medications review by decentralized pharmacists post-fall, feedback provided and medication(s) adjusted accordingly. All patient's receiving sedatives prior to a procedure, should be transported via stretcher, not wheelchair. Safety sitters are assigned to non compliant patients with high risk for falls. I-Care rounding should also include ensuring Fall preventative measures are in place(functional bed alarm, bed plugged in, non-skid socks, yellow bracelet, environment clutter free and no environmental hazards). More front line staff encouraged to attend falls meeting, multidisciplinary approach. Falls Road Show- Risk & Quality round on units/departments throughout the hospital with a Spin Wheel created just for Falls. Staff are quizzed on fall related questions and are rewarded with snacks. IA/RCA for each fall with a severity level >3. Use of standardized Intense falls analysis form - this allows the staff the opportunity to provide a more detailed drill down of the event.

**ACHA ANNUAL REPORTABLE EVENTS:**

There were 4 ACHA Annual Reportable Events in the 1st Quarter CY2023:

**1 - Puncture/Laceration (Surgery):**

66 yr. old female, had scheduled hysteroscopy surgery. During the procedure the surgeon noted that once they were able to get visualization of the patient's cervix, and upon placing the hysteroscope, there were landmarks that were fatty that were suspicious for bowel. Therefore the hysteroscope was removed and the procedure was terminated. The uterine cavity was never clearly visualized secondary to perforation per surgeon notes. This was sent to Quality for review.

**1 - Procedure Complication (Surgery):**

This is a 61-year-old male, with a history of metastatic bladder cancer and had an obstruction with his nephrostomy tube. On 01/30/2023 patient presented to the hospital for *elective left Radical Nephrectomy*. Patient was positioned in the left flank position on a bean bag with proper padding and an axillary roll. During the open nephrectomy surgery the patient had an artery bleed and was given blood. Estimated blood loss was 1800cc. The surgery took an extended period (approximately 6 hrs.) .The patient was placed on Levophed drip throughout the procedure and was transferred to ICU after surgery. The patient subsequently developed swelling, discoloration, and coolness of the right hand, and returned to the OR on 01/31/2023 for *right forearm and hand compartment syndrome release fasciotomy, right hand fasciotomy and right carpal tunnel release*. 02/28/2023 - Patient was seen at NBMC for gangrene of the right hand, complex open wound of the right forearm, hand volar and dorsal aspect. Per physician notes "We are waiting for the gangrene to settle down and complete the demarcation at which time he would require surgery for amputation of the fingers and in the future when the swelling and tension goes down patient will require closure of the wounds and possibly skin grafting."

**1 - Hip Fracture (Accidental fall):**

This is a 73 -year old female, with history of PE and pneumonia. On 02/02/2023 patient came to ER with complaints of fever for 2 days, status post thrombectomy. While in the hospital on 02/11/2023, patient had an accidental fall. The PCA, placed the patient on the bedside commode, gave the patient the call bell and instructed her to call for assistance when she was finished; the PCA then left the room to provide privacy to the patient. Patient stated that "she fell on her left hip and denied hitting her head, stated she wanted to see how well she could ambulate and was trying to sit in a chair that was over to the right of the bed." Patient complained of left hip pain, the physician was notified, and ordered diagnostic tests- *X-ray of the left hip showed a femur fracture*. Daughter was notified of the fall. On 02/12/2023, patient was taken to surgery and had a *Closed Reduction Internal Fixation of the left hip*. Patient was discharged with HHC on 02/15/2023.

**1- Pressure Injury -PI (Stage 3-under trach and Unstageable PI-sacral region)**

This is a 77-year-old male who was brought in by EMS on 01/05/2023 -presents with weakness and fatigue. Patient has a history of ALS, HTN, CAD, DM, Covid pneumonia and has been chronically deconditioned over the last 6 months. Patient was subsequently admitted to the ICU and intubated due to respiratory failure. The patient failed weaning from the ventilator, and on 02/02/2023, a tracheostomy was done. During skin assessment, a PI was noted adjacent to the tracheostomy tube. Patient also developed an unstageable PI to the sacral region. Wound care consult was initiated, patient was seen by the physician who evaluated the PIs and ordered treatment.

**CODE 15 & RCAs:**

There was 2 Code 15 reported in the 1st Quarter CY 2023.

There was 2 RCAs in the 1st Quarter CY 2023

- 1- Pediatric Expiration
- 1- Telemetry Event

**INTENSE ANALYSIS/DISCUSSION:**

There were 3 Intense Analysis/Discussion in the 1st Quarter CY 2023:

- 1- Code Blue Event
- 1 - Transportation Issue
- 1 - Sterility of Instrument

Opportunities identified and implemented accordingly.

**REGULATORY VISITS:**

- AHCA: 1 - Pulse Ox event - Pediatrics
- DCF Complaint: 1- Medication event-(morphine-hospice patient) this event occurred back in 2020-the case was closed -unsubstantiated