

BHCS RISK MANAGEMENT QUARTERLY REPORT QUARTER 2 CY23

Occurrence Category CY23	Q2	%
ADR	0	0%
DELAY	13	5%
FALL	36	14%
HIPAAAPHI	2	1%
INFECTION	0	0%
LAB	37	14%
MEDICATION	21	8%
OB DELIVERY	10	4%
PATCARE	50	19%
PPID	6	2%
SAFETY	13	5%
SECURITY	58	22%
SKINWOUND	7	3%
SURGERY	9	3%
GRAND TOTAL	262	100%

OCCURRENCE CATEGORY CY23:

During the 2nd Quarter CY 2023, there were a total of 262 Occurrence Variance Reports, compared to 324 for the 1st Quarter CY 2023.

This reflects a decrease of 62 or 10.58% for Q2 CY 2023.

Inpatient Falls by Category CY23	Q2
BABY/CHILD DROP	0
EASED TO FLOOR BY EMPLOYEE	0
EASED TO FLOOR BY NON EMPLOYEE	0
FOUND ON FLOOR	11
FROM BED	0
FROM BEDSIDE COMMODOE	0
FROM CHAIR	0
FROM TOILET	0
PATIENT STATES	2
TRIP	0
VISITOR STATES	2
WHILE AMBULATING	2
GRAND TOTAL	17

INPATIENT FALLS BY CATEGORY CY23:

During the 2nd Quarter CY 2023, there were 17 Inpatient Falls. This reflects an increase of 2 or 6.25% from 15 reported in Q1 CY 2023.

There was 0 MAJOR injury, 6 MINOR injury and 11 with NO injuries.

OB DELIVERY CY23	Q2
BIRTH TRAUMA	1
CPOE ISSUE	1
EMERGENCY C-SECTION >30 MIN	0
FETAL DISTRESS	0
FETAL/MATERNAL DEMISE	1
MATERNAL COMPLICATIONS	0
NEONATAL COMPLICATIONS - Apgar <5 @5 min	0
OTHER	1
POSTPARTHUM HEMORRHAGE	2
RN ATTENDED DELIVERY (0 event >30 mins Delay)	3
SHOULDER DYSTOSIA	1
GRAND TOTAL	10

OB DELIVERY CY23:

During the 2nd Quarter CY 2023, there were 10 reported occurrences, which reflects an increase of 6 or 42.86% from Q1 CY 2023, which reported 4.

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	Q2
PRESSURE INJURY-ACQUIRED	0
GRAND TOTAL	0

HAPI's CY23:

During the 2nd Quarter CY 2023, there was 0 HAPI reported, which reflects a decrease by 2 from Q1 CY 2023, which reported 2.

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MEDICATION VARIANCES CY23	Q2
CONTROL DRUG CHARTING	0
CONTROL DRUG DISCREPANCY INVESTIGATION	0
CONTROL DRUG DISCREPANCY-COUNT	0
CPOE ISUUE	1
DELAYED DOSE	1
eMAR - TRANSCRIPTION/PROCEDURE	1
EXPIRED MEDICATION	1
EXTRA DOSE	1
IMPROPER MONITORING	2
LABELING ERROR	0
MISSING/LOST MEDICATION	0
OMITTED DOSE	2
OTHER	2
PRESCRIBER ERROR	1
PYXIS COUNT DISCREPANCY	1
PYXIS MISS FILL	0
RECONCILIATION	2
RETURN BIN PROCESS ERROR	1
SELF-MEDICATING	0
UNSECURED MEDICATION	0
WRONG DOSAGE FORM	0
WRONG DOSE	2
WRONG DRUG OR IV FLUID	2
WRONG FREQUENCY OR RATE	0
WRONG PATIENT	0
WRONG ROUTE	1
WRONG TIME	0
GRAND TOTAL	21

MEDICATION VARIANCES CY23:

During the 2nd Quarter CY 2023, there were 21 Medication occurrences reported, which reflects a decrease by 16 or 27.58% from Q1 CY 2023, which reported 37.

There were 4 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	Q2
ALLERGY	0
HEMATOLOGICAL/BLOOD DISORDER	0
CARDIOPULMONARY	0
GRAND TOTAL	0

ADR CY23:

During the 2nd Quarter CY 2023, there was 0 ADR reported, which reflects a decrease from Q1 CY 2023, which reported 1.

SURGERY RELATED ISSUES CY23	Q2
CONSENT ISSUES	0
EXTUBATION/INTUBATION	0
POSITIONING ISSUES	0
RETAINED FOREIGN BODY	0
SPONGE/NEEDLE/INSTRUMENT ISSUES	0
STERILE FIELD CONTAMINATED	0
SURGERY DELAY	0
SURGERY/PROCEDURE CANCELLED	3
SURGICAL COMPLICATION	1
SURGICAL COUNT	1
TOOTH DAMAGED/DISLODGED	2
UNPLANNED RETURN TO OR	0
UNPLANNED SURGERY	2
GRAND TOTAL	9

SURGERY RELATED ISSUES CY23:

During the 2nd Quarter CY 2023, there were 9 Surgery related occurrences, which reflects a decrease by 10 or 35.72% from Q1 CY 2023, which reported 19.

Surgery/Procedures cancelled are tracked and trended.

SECURITY CY23	Q2
ACCESS CONTROL	1
AGGRESSIVE BEHAVIOR	1
ARREST	0
ASSAULT/BATTERY	2
CODE ASSIST	14
CODE ELOPEMENT	1
CONTRABAND	5
CRIMINAL EVENT	0
ELOPEMENT-INVOLUNTARY ADMIT (BA, vulnerable adults etc.)	0
ELOPEMENT-VOLUNTARY ADMIT (NON-VULNERABLE)	0
PROPERTY DAMAGED/MISSING	15
SECURITY PRESENCE REQUESTED	15
SMOKING ISSUES	1
THREAT OF VIOLENCE	1
TRESPASS	0
VEHICLE ACCIDENT	1
VERBAL ABUSE	1
GRAND TOTAL	58

SECURITY CY23:

During the 2nd Quarter CY 2023, there were 58 Security related occurrences, which reflects an increase by 1 or 0.86% from 57 reported in Q1 CY 2023.

There were 14 Code Assist events, in Q2 CY 2023, which neither reflects a decrease or increase from Q1 CY 2023, which also reported 14.

Property Damaged/Missing is 15 in Q2 CY 2023, which reflects an increase by 1 or 3.44% from Q1 CY 2023, which reported 14.

Security Presence Requested is 15 in Q2 CY 2023, which reflects an increase by 14 or 87.5% from Q1 CY 2023, which reported 1.

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SAFETY CY23	Q2
BIOHAZARD EXPOSURE	2
CODE RED	0
ELECTRICAL HAZARD	1
ELEVATOR ENTRAPMENT	1
SAFETY HAZARD	5
SHARPS EXPOSURE	4
GRAND TOTAL	13

SAFETY CY23:

During Q2 CY 2023, there were 13 Safety events reported, which reflects a decrease by 2 or 7.14% from Q1 CY 2023, which reported 15.

Occurrences which involve employees and LIPs are

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, nonskid 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 3 ACHA Annual Reportable Events in the 2nd Quarter CY 2023:

1 - Clavicle - Fracture - Birth (Labor and Delivery):

Newborn, assessed by physician who recognized weakness in the left arm with no obvious fracture at time of birth. It was a difficult birth, but no shoulder dystocia was identified. A left non-displaced clavicle fracture was identified on x-ray. Appropriate care and treatment was initiated. This was sent to Quality for review.

1 - Procedure Complication (Surgery - GI/Endo):

Patient is a 57 yr. old female that was scheduled for colonoscopy and EGD for Anemia. On 04/25/2023, during the procedure, some Arteriovenous Malformations (AVMs) were found in the caecum and ascending colon, and they were treated with argon plasma coagulation. The patient had abdominal pain in the recovery room and a KUB was done, which revealed a *Pneumoperitoneum*. Surgery was consulted and patient underwent an emergent laparotomy. Preop Diagnosis: Bowel perforation. Postop Diagnosis: Open right hemicolectomy, abdominal washout. This was sent to Quality for review.

1 - Fetal/Maternal Demise (Labor and Delivery):

On 04/28/2023 - 35 year old female patient arrived and was seen in L&D triage with C/O contractions, but no vaginal bleeding. She received prenatal care at Pompano clinic. Pt is a gravida 2 Para 0, and had a previous C/S. Patient was placed on continuous monitoring and the OBGYN was informed of the patient arrival and complaint of contractions.

An U/s was done and the OBGYN was notified of the results: (BPP 8/8, heart rate of 140 with AFI of 19.3 and with lower segment of the uterus poorly visualized and thin, no sign of free fluid, patient hemodynamically stable). Betamethasone was administered. U/S results discussed with patient.

Orders received from OBGYN for discharge @1707. Patient was discharged to home and education was provided to return next day for dose # 2 of Betamethasone.

04/29/2023, @0545, patient returned to triage via EMS complaining of contractions and spotting. Patient was placed on FM/TOCO; however staff were unable to find any fetal heart tone. An order was placed for a STAT ultrasound and based on the findings a STAT C/S was done.

At the time of the delivery, the infant was handed over to the NICU team for resuscitative measures due to the infant being cyanotic, no spontaneous respiration and no heart rate. The infant was intubated successfully, and CPR continued. Pupils were fixed and dilated and CPR discontinued after no response.

Indications for surgery: non-reassuring fetal wellbeing.

Post op-diagnosis: Uterine rupture with fetal and placental expulsion intra-abdominal

Surgical procedure: Laparotomy with delivery of fetus and placenta with repair of uterine rupture

Blood loss: 821 mls

This case was sent to Quality for review.

CODE 15 & RCAs:

There was no Code 15 reported in the 2nd Quarter CY 2023.

There was 0 RCAs in the 2nd Quarter CY 2023

INTENSE ANALYSIS/DISCUSSION:

There was 0 Intense Analysis/Discussion in the 2nd Quarter CY 2023:

REGULATORY VISITS:

AHCA/CMS: 1 - Code Blue Event and 1 - Emergency Access Complaint

DCF Complaint: 1- Allegations of Stage 4 PI.

DOH: 1 - Subpoena Case