

BHMC

Occurrence Category CY23 <small>(Patient Occurrences Comparison Report from OVR Stats page)</small>	Q2
ADR	1
DELAY	35
FALL	75
HIPAAAPHI	11
INFECTION	7
LAB	28
MEDICATION	85
OBDELIVER	59
PATCARE	457
PATRIGHT	-
PPID	8
SAFETY	52
SECURITY	371
SKINWOUND	100
SURGERY	40
Grand Total	1329

**OCCURRENCE CATEGORY CY23:**

During CY23 Q2 totaled 1329 patient occurrences as compared to Q1 which totaled 1365 patient occurrences reflecting a 2.64% decrease in overall occurrences from Q1 to Q2.

There were a total of 22 reported near miss occurrences making up 1.6% of all occurrences.

Inpatient Falls by Category CY23 <small>*(Comparison-binoculars- BHMC Inp Falls by Subcat -change date needed)</small>	Q2
Child Developmental	
Child fall during play	
Eased to floor by non employee	
Found on floor	33
From Bed	4
From Bedside Commode	
From Chair	3
From Equipment, i.e stretcher, table, etc.	
From Toilet	2
Patient States	8
Slip	2
Trip	
Visitor Fall While Ambulating	
Visitor States	1
While ambulating	5
FALL Total	58

**INPATIENT FALLS BY CATEGORY CY23:**

There were a total of 58 Inpatient Falls for Q2

There was 14 falls with injuries reported during Q2 - 13 were minor and 1 was major:

- (3) Abrasion
- (1) Bruise/Contusion/Crushing
- (1) Fracture
- (2) Laceration
- (5) Pain
- (1) Sutures/Staples/Steristrips
- (1) Swelling

Falls are discussed and reviewed for lessons and opportunities at weekly HAC meeting facilitated by BHMC Patient Safety Officer.

OB DELIVERY CY23 <small>(Patient Occurrences Comparison Report from OVR Stats page)</small>	Q2
C-Section with no first assist	1
Fetal/Maternal Demise	2
Maternal complications	3
Maternal Transfer To Higher Level Of Care	4
Neonatal complications - Admit NICU	22
Neonatal complications - Apgar <5 @5 min	1
Neonatal complications - IV Infiltrate	1
OB Alert	1
Other	7
Postpartum Hemorrhage	12
Return To Ldr (Labor Delivery Room)	1
Shoulder Dystosia	3
Surgical Count	1
TOTAL	59

**OB DELIVERY CY23:**

There were a total of 59 OB Delivery incidents for Q2 with a 21% decrease from Q1.

Both fetal demise were unrelated to any adverse incident - patient arrived to the hospital with intrauterine death

All shoulder dystocia and postpartum hemorrhage > 1000 cases are sent to Quality for further review. No trends identified.

HAPIs CY23 <small>(Report Listing by Category and look for TRUE HAPI's in SkinWound SkinBraqq Pressure Injury - Acquired)</small>	Q2
Pressure Injury - Acquired	17

**HAPIS CY23:**

There were 17 Hospital Acquired Injuries for Q2.

Of those 10 are reportable - we have seen a positive decrease in reportable wounds since new initiatives were implemented.

We have increase awareness in house regarding skin and wound. Additional initiatives include monthly Skin and Wound Work group, weekly Wound Flyers and promoting unit Wound Care champions.

BHMC RISK MANAGEMENT QUARTERLY REPORT QUARTER 2 CY23

MEDICATION VARIANCES (Patient Occurrences Comparison Report on OVR Stats page)	Q2
Contraindication	2
Control Drug Discrepancy Investigation	-
Control Drug Charting	1
Control Drug Discrepancy-count	2
Control Drug Diversion/Suspicion	-
CPOE issue	1
Delayed dose	9
eMAR - Transcription/Procedure	-
Expired Medication	5
Extra Dose	5
Hoarding Medications For Later Use	-
Illegible Order	-
Improper Monitoring	4
Labeling Error	4
Missing/Lost Medication	2
Omitted dose	2
Other	15
Prescriber Error	3
Pyxis Count Discrepancy	-
Pyxis False Stackout	-
Pyxis Miss Fill	2
Reconciliation	-
Return Bin Process Error	-
Scan Failed	1
Self-Medicating	-
Unordered Drug	-
Unsecured Medication	-
Wrong Concentration	4
Wrong dosage form	3
Wrong dose	2
Wrong Drug or IV Fluid	6
Wrong frequency or rate	5
Wrong patient	1
Wrong Route	2
Wrong time	4
Totals	85

**MEDICATION VARIANCES CY23:**

There was a total of 85 medication variances for Q2 with an increase of 5% from Q1.

Risk, nursing, and administration collaborate to discuss medication variances and trends.

Medication variances are also reviewed at Patient Care Key Group / RQC meeting and by Pharmacy staff.

ADR CY23 (Patient Occurrences Comparison Report from OVR Stats page)	Q2
Neuro	1
ADR Total	1

**ADR CY23:**

Total of 1 ADR in Q2 2023.

No adverse outcome to the patient.

SURGERY RELATED ISSUES CY23 (Patient Occurrences Comparison Report from OVR Stats page)	Q2
Consent Issues	6
Surgery Delay	2
Retained Foreign Body	1
Surgery/Procedure Cancelled	5
Surgical Complication	6
Sponge/Needle/Instrument Issues	4
Sterile field contaminated	4
Surgical Count	7
Tooth Damaged/Dislodged	1
Unplanned Surgery	2
Unplanned Return to OR	2
SURGERY TOTAL	40

**SURGERY RELATED ISSUES CY23:**

There was a total of 40 surgery related issues or Q2 with a 29% decrease from Q1.

All surgical counts came back negative for retained foreign body.

Additional information on Retained Foreign Body below.

SECURITY CY23 (Patient Occurrences Comparison Report from OVR Stats page)	Q2
Access control	1
Aggressive behavior	18
Arrest	1
Assault/Battery	17
Code Elopement	5
Contraband	9
Elopement -Voluntary admit	3
Property Damaged/Missing	31
Rapid Response Team - Visitor	1
Security Assistance *new August 2022	68
Security Presence Requested	204
Smoking Issues	1
Threat of violence	5
Trespass	1
Vehicle Accident	1
Verbal Abuse	5
Totals	371

**SECURITY CY23:**

There was a total of 371 security incidents for Q2 with a 24% decrease in security occurrences from Q1.

181 (49%) of security incidents were related to BH and Psych ED patients.

SAFETY CY23 <i>(Patient Occurrences Comparison Report from OVR Stats page)</i>	Q2
<b>Biohazard Exposure</b>	<b>2</b>
<b>Code Red</b>	<b>16</b>
<b>Fire/Smoke/Drill</b>	<b>1</b>
<b>Safety Hazard</b>	<b>22</b>
<b>Sharps Exposure</b>	<b>11</b>
<b>SAFETY Total</b>	<b>52</b>

**SAFETY CY23:**

There was a total of 52 Safety incidents for Q2 with a 9% decrease in safety occurrences from Q1.

Highest incidents reported were related to Safety Hazard which was 42% of total incidents.

No Trends identified.

**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.)**

**Code 15 - Retained Foreign Object:**

On 4/24/2022 at 23:24, this 28 y/o M presented 4/24/23 to the ER via EMS from BARC. Patient has a past medical history of HTN, ADHD, anxiety, depression, OCD. Chief complaints in the ER was worsening abdominal pain and fevers chills nausea vomiting, inability to tolerate oral intake. Patient had a complicated hospital course including sepsis, severe pancreatitis and required intubation on 4/25. On 5/28, Dr. El Gazazz was consulted for further management of acute necrotizing pancreatitis, Patient taken to the OR for further pancreatic necrectomy, washout and total pancreatectomy on 6/1. No complications noted and all surgical counts marked as correct.

On 6/6 patient pulled pancreatic drain 15 cm out of his abdomen. Chest x-ray ordered and showed an object on the right side of the abdomen. X-ray finding reviewed and discussed with patient and family member. Patient taken back to the OR for washout and evaluation of upper quadrant for foreign material. Surgical finding of pancreatic bed abscess and retained foreign body. The patient remains admitted to the hospital due to his medical condition, not as a result of the retained foreign object.

**Corrective actions:**

1. Usage of blue surgical towels will be reviewed and reinforced with all full and part-time staff in the OR, evidenced by sign-in sheets validating completion.
2. Usage of blue surgical towels will be reviewed and reinforced with all agency staff, working in the OR, on orientation to hospital/department. Acknowledgement of completion will be kept in the agency staff's file on site.
3. Usage of blue surgical towels will be reviewed and reinforced with all surgeons, evidenced by department of surgery attendance sheets validating completion
4. Explore alternative radiopaque towels that can be used during surgical procedures.
5. X-rays will be conducted after every liver procedure. Chart audit will be done for 3 months to validate correct process followed, with a goal of 100% compliance.

**Wound Care Prevention Initiative**

BHMC new initiatives is on Wound Prevention. Additional initiatives include monthly Skin and Wound Work group, weekly Wound Flyers and promoting unit Wound Care champions. We have seen an increase awareness from our nursing staff and will continue to work with out SWAT