

BROWARD HEALTH MEDICAL CENTER - RISK MANAGEMENT QUARTERLY REPORT QUARTER 4

Occurrence Category CY21 (HAS Comparison Report on Occurrence Sub Cat and Date)	Q4	%
ADR	1	0%
DELAY	19	2%
FALL	61	5%
HIPAAAPHI	3	0%
INFECTION	4	0%
LAB	21	2%
MEDICATION	73	6%
OBDELIVER	58	5%
PATCARE	389	31%
PATRIGHT	2	0%
PPID	1	0%
SAFETY	54	4%
SECURITY	538	43%
SKINWOUND	8	1%
SURGERY	25	2%
Grand Total	1257	100%

OCCURRENCE CATEGORY CY21:

Quarter 4 CY2021 totaled 1257 occurrence variance reports as compared to Q3 CY21 which contained a total of 1338.

There were a total of 25 reported near miss occurrences making up 1.9% of all occurrences.

Inpatient Falls by Category CY21 (HAS Comparison Report - Monthly Falls OR HAS Comp Occur Cat and Sub and omit Visit falls)	Q4	%
Eased to floor by employee	4	6.90%
Found on floor	28	48.28%
From Bed	7	12.07%
From chair	5	8.62%
From Toilet	3	5.17%
Patient States	3	5.17%
Slip	1	1.72%
Trip	3	5.17%
While ambulating	4	6.90%
FALL Total	58	100%

INPATIENT FALLS BY CATEGORY CY21:

There were a total of 58 Inpatient Falls for Q4 Highest category for falls were Patients Found on Floor making up 48% of falls.

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

	OB DELIVERY CY21 (HAS Comparison Report Occur Cat, Occur Subcat - OB Occurrences)	Q4	%
BIRTHTRAUM	Birth Trauma	0	0.00%
CPOE	CPOE issue	0	0.00%
CSECTIONASS	C-Section with no first assist	0	0.00%
EMERGCSEC	Emergency C-Section > 30 min	1	1.72%
FETALDISTR	Fetal Distress	2	3.45%
FETALMDEMI	Fetal/Maternal Demise	0	0.00%
INDUCTION	Induction Bishop <6	0	0.00%
INFANTDC	Infant d/c to wrong person	0	0.00%
INSTRINJUR	Instrument Related Injury	0	0.00%
MATERCOMPL	Maternal complications	1	1.72%
MATERTRAN	Maternal Tranfer To Higher Level Of Care	5	8.62%
MECGASPIRA	Meconium Aspiration	0	0.00%
MECONSTAIN	Meconium staining	0	0.00%
NEONADMIBB	Neonatal complications - Admit Mother/Baby	0	0.00%
NEONADMNICU	Neonatal complications - Admit NICU	28	48.28%
NEONAPCARLO	Neonatal complications - Appgar <5 @5 min	1	1.72%
NEONMPSKIN	Neonatal complications - Impaired Skin Integrity	0	0.00%
NOVINFIL	Neonatal complications - IV Infiltrate	1	1.72%
OBALERT	OB Alert	1	1.72%
OTHER	Other	10	17.24%
PSTPARTHEM	Postpartum Hemorrhage	5	8.62%
RETURNLABO	Return To Ldr (Labor Delivery Room)	0	0.00%
RNATTENDED	RN Attended Delivery	1	1.72%
RNUNATTEND	RN Unattended Delivery	0	0.00%
SDYSTOSIA	Shoulder Dystosia	2	3.45%
SPONGEEDI	Sponge/Needle/Instrument Issues	0	0.00%
STERILEBK	Sterile field contaminated	0	0.00%
SURGICOUNT	Surgical Count	0	0.00%
UNPLANNRO	Unplanned Procedure	0	0.00%
TOTAL		58	100.00%

OB DELIVERY CY21:

There were a total of 58 OB Delivery incidents for Q4

Highest category for incidents were related to Neonatal complications which contributed to 48% of OB Delivery related incidents.

HAPIs CY21 SkinWound Skin/Brace Pressure Injury - Acquired	Q4	%
Pressure Injury - Acquired	3	100%

HAPIS CY21:

There were 3 Hospital Acquired Injuries for Q4.

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MEDICATION VARIANCES CY21 <small>HAS Browse - BHMC MedVariance (remove duplicate occurrence) OR OR HAS Comparison and add Occur Cat= Medication and Sub Cat= all medication types</small>	Q4	%
Contraindication	1	1.37%
Control Drug Charting	1	1.37%
Control Drug Discrepancy Investigation	1	1.37%
Delayed Dose	7	9.59%
eMar - Transcription/Procedure	1	1.37%
Expired Medication	0	0.00%
Extra Dose	4	5.48%
Improper Monitoring	2	2.74%
Labeling Error	1	1.37%
Missing/Lost Medication	3	4.11%
Omitted Dose	7	9.59%
Other	15	20.55%
Prescriber Error	5	6.85%
Pyxis Count Discrepancy	0	0.00%
Pyxis Miss Fill	0	0.00%
Reconciliation	1	1.37%
Scan Failed	1	1.37%
Self-Medicating	0	0.00%
Unordered Drug	0	0.00%
Unsecured Medication	1	1.37%
Wrong Coconcentration	3	4.11%
Wrong Dosage Form	3	4.11%
Wrong Dose	4	5.48%
Wrong Drug or IV Fluid	9	12.33%
Wrong Frequency or Rate	0	0.00%
Wrong Patient	2	2.74%
Wrong Route	1	1.37%
MEDICATION Total	73	100.00%

MEDICATION VARIANCES CY21:

There was a total of 73 medication variances for Q4.

Highest med variance category was due to other, which contributed to 21% of total variances.

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 CY21	Q4	%
Miscellaneous	1	100.00%
ADR Total	1	100.00%

ADR CY21:

Total of 1 ADR in Q4 2021.

	SURGERY RELATED ISSUES CY21	Q4	%
ANESTHCOMP	Anesthesia Complication	1	4.00%
CPOE	CPOE issue	0	0.00%
DELAY	Surgery Delay	1	4.00%
EXTUBINTUB	Extubation/Intubation	1	4.00%
PUNLACERAT	Puncture or Laceration	0	0.00%
RETAINBODY	Retained Foreign Body	1	4.00%
SCONSENT	Consent Issues	1	4.00%
SPCANCEL	Surgery/Procedure Cancelled	2	8.00%
SPCOMPLIC	Surgical Complication	5	20.00%
SPONEEDN	Sponge/Needle/Instrument Issues	5	20.00%
STERILECN	Sterile field contaminated	1	4.00%
SUGCOUNT	Surgical Count	4	16.00%
SURINFO	Incorrect information on patient's chart	0	0.00%
SURPOST	Positioning Issues	0	0.00%
SURSITE	Surgical site marked incorrectly	0	0.00%
TOOTHDM	Tooth Damaged/Dislodged	1	4.00%
UNPLANNED	Unplanned Surgery	1	4.00%
URRETURNOR	Unplanned Return to OR	1	4.00%
WRPAT	Wrong Patient	0	0.00%
WRPROCED	Wrong Procedure	0	0.00%
WRSITE	Wrong Site	0	0.00%
	SURGERY TOTAL	25	100.00%

SURGERY RELATED ISSUES CY21:

There was a total of 25 surgery related issues for Q4.

Surgical complication and sponge/needle/instrument related issues contributed to 40% of surgery related issues.

	SECURITY CY21	Q4	%
ABDUCTION	Abduction	0	0.00%
ACCESSCONT	Access control	1	0.19%
ACTVSHOOT	Active Shooter	0	0.00%
AGRESBEHAV	Aggressive behavior	18	3.35%
ARREST	Arrest	0	0.00%
ASSAULTBAT	Assault/Battery	8	1.49%
BREAKIN	Break-in	0	0.00%
CBASSIST	Code Assist	148	27.51%
CBBLACK	Code Black	0	0.00%
CELOPE	Code Elopement	12	2.23%
CDGREEN	Code Green	0	0.00%
CDSTORK	Code Stork	0	0.00%
CDSTRONG	Code Strong	1	0.19%
CONTRABAND	Contraband	19	3.53%
CRIMEVENT	Criminal Event	1	0.19%
ELOPINVOL	Elopement -Involuntary admit (BA, patient's under police custody, vulnerable adults etc.)	4	0.74%
ELOPVOLIN	Elopement -Voluntary admit (persons admitted on their own accord/will; non-vulnerable individuals)	0	0.00%
PROPDMMS	Property Damaged/Missing	20	3.72%
RAPIDRESP	Rapid Response Team - Visitor	0	0.00%
SECREQ	Security Presence Requested	302	56.13%
SMOKINGSIS	Smoking Issues	0	0.00%
TRANSPORT	Security Transport	0	0.00%
TREATVOL	Threat of violence	1	0.19%
TRESPASS	Trespass	1	#DIV/0!
VEHICLEACC	Vehicle Accident	0	0.00%
VERBABUSE	Verbal Abuse	2	0.37%
	SECURITY TOTAL	538	100.00%

SECURITY CY21:

There was a total of 538 security incidents for Q4.

Highest incidents reported were related to Security Presence Requested which was 56% of total incidents.

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	SAFETY CY21	Q4	%
BIOHAZEXP	Biohazard Exposure	1	1.85%
CODED	Code Red	9	16.67%
CODEP/CHEM	Code Spill - Chemical	0	0.00%
CODEP/CHEMO	Code Spill - Chemo	2	3.70%
ELECTRHAZ	Electrical Hazard	0	0.00%
ELEVATOR	Elevator entrapment	0	0.00%
FALSEALARM	False Alarm	0	0.00%
FIREDRILL	Fire/Smoke/Drill	0	0.00%
GASVAPOR	Gas/Vapor Exposure	0	0.00%
SAFETYHAZ	Safety Hazard	35	64.81%
SHARPEXPOS	Sharps Exposure	7	12.96%
	SAFETY Total	54	100.00%

SAFETY CY21:

There was a total of 54 Safety incidents for Q3.

Highest incidents reported were related to Safety Hazard which was 65% of total incidents.

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.)

12.1.21 - This event involved a 75 y/o male with an extensive past medical history including left hand/arm weakness, CHF, GERD, heart disease, hyperlipidemia, hypertension, as well as a history of myocardial infarction who presented to our emergency department on 8/16/2021 with complaints of shortness of breath and a cough. Initial chest x-ray showed extensive bilateral patchy and consolidative airspace opacities. COVID-19 test was positive. The patient had a long complicated course but was ultimately discharged to Kindred Acute Rehab in Fort Lauderdale on 9/29/2021. While a patient at Kindred, on 11/30/2021, a chest x-ray was performed there and a piece of catheter believed to be from a previous peripherally-inserted central catheter (PICC) was discovered incidentally extending from his right arm toward the location of his right atrium. A review of the patient's previous admission at Broward Health Medical Center (BHMC) noted that a PICC was inserted on 9/27/2021, and discontinued on 9/29/2021. The patient was readmitted to BHMC on 11/30/2021, and on 12/1/2021, the patient was brought to interventional radiology where he underwent an endovascular removal of the PICC fragment. The patient tolerated the procedure well, without complication, and was discharged back to Kindred Acute Rehab on 12/2/2021.

11.21.21 - This event involved 65-year-old female who presented to BHMC on 11/21/21 at 0216hrs after she was found in the middle of the road, flaccid and unresponsive with acute hypotension. She was found initially by police who called fire rescue for the transport. The concern by PD was possible suicide. She was given Narcan and ammonia inhalants with no response. A brain attack was called but cancelled by the ER attending physician after assessment. Patient's mental status was altered throughout her stay in the ER. Patient did have some abrasions on her face but made no mention to anyone in the ER of a traumatic injury. It was documented by both physician and nurses in the ER that the patient had movement in all extremities during her stay there. Patient remained hypotensive and bradycardic during their time in the ER and a cardiology consult was placed. The patient had a central line placed and was started on levophed. The ICU intensivist came down and assessed and accepted the patient to CVICU. The patient had a CT scan done to rule out a PE secondary to an elevated D-Dimer at 0738. The patient was transferred to CVICU after the scan approximately 0900. It was then the patient first reported being hit by a car, and that she didn't have movement in her legs.

At 10:30, cardiology assessed the patient. He read the CT scan, took the history of the patient, and realized the hypotension and bradycardia was secondary to spinal shock. He called the trauma service and the patient was transferred to AICU. Neuro surgery was consulted. The patient was operated on 11/23/21 for posterior thoracic