

BHN RISK MANAGEMENT QUARTERLY REPORT QUARTER 3 CY23

Occurrence Category CY23	Q3	%
SECURITY	261	36%
PATCARE	172	24%
SKINWOUND	57	8%
MEDICATION	48	7%
LAB	45	6%
FALL	42	6%
SURGERY	31	4%
DELAY	29	4%
PPID	17	2%
SAFETY	13	2%
HIPAAAPHI	8	1%
ADR	4	0.5%
PATRIGHT	2	0.3%
INFECTION	1	0.1%
Grand Total	730	100%

OCCURRENCE CATEGORY CY23 Q3

Overall reporting has remained consistent throughout the first 3 Quarters. YTD Patient Care and Security remain our top occurrence reports, making up approximately 60% of all reports. Skin/Wound increased from 41 to 57.

Total Reporting:

July - 223
 August - 266
 September - 241
 Average = 243.3

Inpatient Falls by Category CY23	Q3
Found on Floor	19
Patient States	3
While Ambulating	3
Eased to Floor by Employee	3
From Bed	2
From Chair	1
Total	31

INPATIENT FALLS BY CATEGORY CY23 Q3

Total of 31 Inpatient falls which is up from 26 in the 3rd Quarter 2022. In 19 of the 31 falls (61%), the patient was found on the floor. Out of those 19 falls only 7 (36%) had a bed alarm activated, with staff responding to the bed alarm.

Falls with Injury:

Fall w/ Gluteal Abrasion - Antibiotic ointment prescribed
 Fall w/ Small Right Frontal Scalp Hematoma - No treatment required
 Fall w/ Dislocation of Right Shoulder - Closed Reduction of the Shoulder performed; no surgical intervention required

HAPIs CY23	Q3
DTI	8
Unstageable	3
Stage 2	1
Stage 1	1
Total	13

HAPIS CY23 Q3

Total Reporting:

July - 2
 August - 5
 September - 6

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MEDICATION VARIANCES CY23	Q3
Wrong Dose	6
Delayed Dose	4
Extra Dose	4
Improper Monitoring	4
Missing/Lost Medication	3
Wrong Dosage Form	3
Omitted dose	2
Wrong Drug of IV Fluid	4
Wrong Route	2
Drug Control Discrepancy - Count	1
Labeling Error	4
Other	3
Prescriber Error	1
Pyxis Miss Fill	2
Pyxis Count Discrepancy	1
Unsecured Medication	1
Wrong Concentration	1
Wrong Frequency or Rate	1
Wrong Time	1
Total	48

MEDICATION VARIANCES CY23 Q3
 Medication Variances are mostly reported by pharmacy. The majority of wrong doses are caught on verification from pharmacist. There were no harm events related to medications. ER Pyxis remains on override; new Pyxis machines being installed.

ADR CY23	Q3
Allergy	4
Total	4

ADR CY23 Q3
 All ADRs were from unknown or unreported allergies. All reactions were mild/moderate and resolved with treatment

SURGERY RELATED ISSUES CY23	Q3
Surgery/Procedure Cancelled	9
Surgery Delay	8
Consent Issues	3
Surgical Site Marked Incorrectly	4
Sponge/Needle/Instrument Issues	2
Surgical Complication	2
Anesthesia Complication	1
Sterile Field Contaminated	1
Surgical Count	1
Total	31

SURGERY RELATED ISSUES CY23 Q3
 We are continuing to see an increase in surgical related occurrence reporting from 27 reports in Qtr 2 to 31 reports in Qtr 3. We have also seen an increase in reports regarding the Surgical Site not being Marked - this is related to a physician not marking the site prior to the procedures.
Total Reporting:
 July - 8
 August - 11
 September - 12
 Approximately 50% of the reports are related to delays and cancelling of procedures.
 The Surgical Count report occurred during an organ procurement procedure. There was a miss count of the surgical sponges which triggered an X-ray to be completed confirming that no foreign object had been retained. The patient was transported to the morgue following X-ray confirmation.

SECURITY CY23	Q3
Security Presence Requested	104
Code Assist	68
Property Damaged/Missing	22
Contraband	18
Assault/Battery	4
Aggressive behavior	10
Code Elopement	9
Threat of violence	2
Elopement - Voluntary Admit	6
Elopement - Involuntary Admit	1
Verbal Abuse	5
Trespass	1
Rapid Response	1
Vehicle Accident	4
Security Transport	4
Smoking Issues	2
Total	261

SECURITY CY23 Q3
 172 of the 261 reports (65%) are Code Assists and Security Presence Requested.
 There were 4 Assault and Battery reports; one staff member sought treatment in the ED after the patient bit the RNs thumb piercing the skin.
 We are continuing to use the new workplace violence function in HAS for these reports.
 One of the Code Elopements reported was behavioral health related - the BA patient pushed past the safety sitter and was found near the elevator on the unit. No reported harm to the patient or staff.

SAFETY CY23	Q3
Safety Hazard	7
Sharps Exposure	3
Code Red	3
Total	13

SAFETY CY23 Q3
 All 3 Code Red reports were a result of false alarms.
 3 Needle stick injuries reported during Qtr 3.

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.)

**No Code 15 Events to report for Qtr 3
No RCAs completed for Qtr 3**

Intense Analysis Completed for Qtr 3

1. Inpatient Discharge turned Missing Person

The patient was a 74 yo male patient that arrived to the ED from a local group home with a report of frequency and urgency. The patient was discharged back to his group home once stable with the foley catheter in place to a leg bag and instructions to follow up with Urology outpatient for foley removal. On 8/13/2023, the day following his discharge, the inpatient unit received a phone call from the group home informing them that the patient had not made it back to the facility and his whereabouts were unknown. The patient was declared a missing person until it was reported to us that he had returned home on 8/21/2023.

2. Inpatient HAPI (Unstageable to the Nose)

This is a 74 yo male patient who arrived to the BHN outpatient department on 9/13 for a scheduled right inguinal hernia repair surgery. The patient was then admitted to the inpatient unit for closer monitoring due to post op complications. The patient developed an unstageable hospital acquired pressure injury to the nose secondary to BiPAP use.

3. Inpatient HAPI (Unstageable to the Buttocks)

This was a 75 yo male patient that arrived to the BHN emergency department on 7/15/2023 with report of lower extremity pain, however the patient was found to be septic. On 8/7/2023 the patient was found to have developed an unstageable hospital acquired pressure injury to the buttocks that evolved from a DTPI.

4. Inpatient HAPI (Unstageable to the Upper Lip)

This was a 69 yo female patient that was admitted to BHN following a front impact motor vehicle collision with the patient as the driver. On 8/29/2023 the patient was intubated due to hemodynamic instability secondary to septic shock. The patient remained intubated until 9/7/2023 when she was placed on high-low oxygen. The patient developed an unstageable hospital acquired pressure injury to the upper lip secondary to endotracheal tube device. The patient was ultimately made a DNR and Hospice was consulted.

AHCA Annual Reportable Events

1. Inpatient Fall with Right Shoulder Dislocation

This is a 36 yo female patient that fell while using the bathroom, which resulted in a dislocation of the right shoulder on 9/13/2023. It was noted by the MD that the patient has had frequent bilateral dislocations of the shoulder in the past. The staff reported that the patient stated she could ambulate independently so the PCA left the room momentarily to allow for the patient's privacy. Post fall, an Orthopedic MD was consulted and he completed a closed reduction of the right shoulder without complications on 9/14/2023. No surgical intervention was required. The patient was ultimately discharged home on 9/15/2023 with a caregiver.