

BHIP RISK MANAGEMENT QUARTERLY REPORT QUARTER 3

Occurrence Category CY22	Q3	%
Patient Care Issues	257	47%
Security	158	29%
Delay	23	4%
Fall	23	4%
Surgery	21	4%
Medication	19	3%
Safety	14	3%
Skin Wound	8	1%
Lab	6	1%
ADR	6	1%
Infection Control	6	1%
HIPAAAPHI	5	1%
PPID	2	0%
Patient Rights	3	1%
Grand Total	551	100%

OCURRENCE CATEGORY CY22:

Occurrences have increased **2.2%** from quarter 2 2022. There were 551 occurrences in total. 392 level I occurrences, 128 level II, 31 level III. Risk Management attends nursing huddles to promote patient safety and proactively respond to questions staff may have.

Inpatient Falls by Category CY22	Q3
Found on floor	6
From Bed	2
From Bedside Commode	1
From Toilet	1
Patient States	1
While ambulating	1
Grand Total	12

INPATIENT FALLS BY CATEGORY CY22:

There were 12 inpatient falls. 6 of those falls were Level III Falls. Fall injuries consisted with abrasions, lacerations or skin tears. CT scans were ordered and sitters were applied when applicable.

HAPIs CY22	Q3
Pressure Injury - Acquired	4
Pressure Injury - On Transfer	1
Skin/Wound - Acquired	3
Grand Total	8

HAPIS CY22:

HAPI's increased by 5 during QTR 3.

MEDICATION VARIANCES CY22	Q3
Control Drug Discrepancy-count	1
Delayed dose	1
Extra Dose	1
Other	5
Scan Failed	1
Unordered Drug	1
Wrong dose	5
Wrong patient	1
Wrong time	3
Grand Total	19

MEDICATION VARIANCES CY22:

All Med variances were Level I or II. There were no harm to patients. NM followed up with staff regarding the medication discrepancies and Pharmacy reviewed and investigated all incidents and provided follow up regarding their findings.

ADR CY22	Q3
Allergy	4
Dermatological	1
Miscellaneous	1
Grand Total	6

ADR CY22: ADR reports have increased this quarter from previous 2 quarters. Allergy symptoms identified were eye swelling, itching, rash and hives and shortness of breath were identified.

Medications were stopped, MD were notified and allergy was added to chart. There was no further harm to patients.

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SURGERY RELATED ISSUES CY22	Q3
Anesthesia Complication	1
Consent Issues	1
Positioning Issues	1
Puncture or Laceration	1
Retained Foreign Body	1
Sponge/Needle/Instrument Issues	1
Surgical Count	1
Surgery Delay	1
Surgery/Procedure Cancelled	7
Surgical Complication	2
Tooth Damaged/Dislodged	1
Unplanned Return to OR	3
Grand Total	21

SURGERY RELATED ISSUES CY22:

Surgery related issues decreased by 12.8% during Q3. There was 2- Level III events: **1.** Patient had a splint applied to their fractured left ankle in the ER, in the Or MD removed splint and blisters were seen. There was no padding placed btwn the splint material and patients skin. **2.** Patient had bowel re-section surgery on 9/1 and returned 9/4 due to distended abdomen and incision site stool leakage. Case taken to peer review.

SECURITY CY22	Q3
Access control/Lockdown	1
Aggressive behavior	17
Assault/Battery	1
Code Bert	8
Code Elopement	1
Contraband	4
Elopement -Voluntary admit (persons admitted on their own accord/will; non-vulnerable individuals)	4
Property Damaged/Missing	7
Security Assistance	18
Security Presence Requested	95
Threat of violence	3
Grand Total	159

SECURITY CY22:

During 3rd quarter we the facility was locked down for almost 48 hours. A BHU patient's boyfriend kept calling and threaten to kill staff because the patient was refusing to speak with him. Fort Lauderdale police was called and they conducted an investigation. After speaking with the boyfriend PD concluded their investigation and reported no further threat to staff or patients. Hospital released the lockdown.

SAFETY CY22	Q3
Code Red	3
Safety Hazard	10
Sharps Exposure	1
Grand Total	14

SAFETY CY22: Safety events for Q3 2022 are down by (1) events. There was one (1) level 3 event which included a EVS worker had a needle stick while cleaning patient's bed in their room. Staff member seen in ED and Employee health notified.

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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.)

Facility Lockdown: 09/26/2022-09/28/2022

Facility was on lockdown due to threat to staff and the hospital from a disgruntle male whose girlfriend was a BHU patient. Fort Lauderdale PD conducted their investigation, located the boyfriend and concluded there was no threat. The hospital released the lockdown. There was no harm to patients.

RCA:

Case Review: 322549288 Date of incident: 9/12/2022 @22:35

46-year-old female presented to the BHIP ED voluntarily with psychiatric problems, suicidal ideation, and depression on Monday 09/12/2022 at 21:12. While she was in the Psych- ED she became agitated and tried to elope from the area. The security officer made several attempts to redirect her, however, she became aggressive towards the officer and the patient was placed in a safety hold in the recliner chair. During the safety hold blood was seen coming from the patient's left eye. The patient was medicated, sent for CT Brain and CT Face. CT Face indicated hemorrhage in the left globe and the lens is not seen. There are no facial fractures. Patient was accepted and transferred to Jackson Memorial hospital for further medical treatment.

Case Review: 322605081 Patient seen in Psych ED: 09/20/2022

On 09/20/2022 at 00:05 39- year-old male was brought into BHIP Emergency Department under a Baker Act by the Broward Sheriff's Office after threatening self-harm. Per the police officer, the patient's girlfriend notified Fort Lauderdale police that the patient sent her a picture of himself sitting at the edge of the roof in the downtown Fort Lauderdale parking garage. Per the Baker Act documents, when the police arrived at his home for questioning, the patient was observed to be heavily intoxicated. When asked about the picture, he stated he was under a lot of stress due to people thinking is a king pin.

While in the ED, the patient was assessed, and labs were drawn. The patient's alcohol level on admission was 243. Patient was placed in the Psych-ED waiting area and observed throughout the night with no distress noted. Patient was evaluated by the Psychiatrist on 09/20/2022 at 15:19. The Psychiatrist noted the patient is now sober and denies any major signs or symptoms of depression mania, or psychosis, denies any auditory or visual hallucinations and denies any suicidal or homicidal ideations. The baker act was lifted, and the patient was discharged with referrals to BARC and Community Mental Health Center.

On 09/22/2022 13:04 BHIP received a call from the patient's family member stating he committed suicide on 09/21/2022.

On 09/23/2022 The report from the Medical Examiner's office was received confirming his death by suicide.

Case Review: 322614071 Date of incident 09/28/2022 @23:25

On Friday 9/23/2022 @15:20, 77-year-old creole speaking male arrived via EMS from Manor Pines as a Baker act due to voicing suicidal thoughts, however, the patient was admitted medically secondary to kidney disease. On 9/24/2022 during his BH Consult patient states he is living without his family in a nursing home and is tired of living alone and doing dialysis. He states, "I do not necessarily want to kill myself, but I just want to die". While on the medical floor, Hemodialysis was performed as scheduled on Saturday 9/24/2022. The patient was medically cleared on 09/24/2022 and transfer to the Behavioral health unit.

During his treatment the patient was seen by a multidisciplinary team to include Nephrology, Podiatry, and Psychiatry. Patient was admitted with an unstageable ulcer on his left heel, which he states he's had for 4 months. Patient has amputation of his right fourth and fifth toe.

On 09/28/2022 23:25 patient had an unwitnessed fall in his room after using the bathroom. Patient reported to BHU staff, "I went to the bathroom and after I finished, I tried to hold onto the curtain, I lost my balance and ended up on the floor. My head hit the floor and my pain has increased." Patient was assessed and CT Scan Face and Brain were ordered. The results revealed patient obtained a right frontal scalp hematoma with associated nondisplaced fracture through the outer table the right frontal sinus. No acute intracranial abnormality seen. Post fall assessment analysis were completed.