RISK MANAGEMENT QUARTERLY REPORT QUARTER 2

Occurrence Category CY21	Q2	%
ADR	2	1%
DELAY	19	5%
FALL	48	13%
HIPAAPHI	5	1%
INFECTION	2	1%
LAB	49	13%
MEDICATION	48	13%
OB DELIVERY	11	3%
PATCARE	86	24%
PPID	0	0%
SAFETY	14	4%
SECURITY	54	15%
SKINWOUND	14	4%
SURGERY	12	3%
GRAND TOTAL	364	100%

OCCURRENCE CATEGORY CY21:

During the 2nd Quarter CY 2021, there were a total of 364 Occurrence V
Reports, compared to 350 for the 1st Quarter CY2021 (there were 3 late
added for QTR 1 CY2021).

This reflects an increase of 14 or 1.96% for Q2 CY 2021

Inpatient Falls by Category CY21	Q2
EASED TO FLOOR BY EMPLOYEE	3
EASED TO FLOOR BY NON EMPLOYEE	0
FOUND ON FLOOR	20
FROM BED	2
FROM BEDSIDE COMMODE	0
FROM CHAIR	0
FROM TOILET	0
PATIENT STATES	7
SLIP	0
TRIP	1
WHILE AMBULATING	1
GRAND TOTAL	34

INPATIENT FALLS BY CATEGORY CY21:

During the 2nd Quarter CY 2021, there were 34 Inpatient Falls. This refle
or 3.52% from 40 reported in Q1 CY 2021.

There were 2 *MAJOR* injuries (*Right Parietal Subdural Hematoma and a*

OB DELIVERY CY21	Q2
FETAL DISTRESS	1
MATERNAL COMPLICATIONS	1
POSTPARTUM HEMORRHAGE	2
RN ATTEND DELIVERY (0 event > 30 minutes delay)	5
SHOULDER DYSTOCIA	2
GRAND TOTAL	11

OB DELIVERY CY21:

During the 2nd Quarter CY 2021, there were 11 reported occurrences, w
increase by 5 or 29.42% from Q1 CY 2021, which reported 6.

For *delays greater than 30 minutes*, a referral is sent to Quality for any (
concerns.

Maternal Complications are referred and reviewed by Quality Managen
Quality of Care Concerns.

HAPIs CY21	Q2
PRESSURE INJURY- ACQUIRED	6
GRAND TOTAL	6

HAPIs CY21:

During the 2nd Quarter CY 2021, there were 6 HAPIs reported, which r
4 or 71.42% from Q1 CY2021, which reported 2.

In June, there was 1 Unstageable pressure injury to sacrum.

MEDICATION VARIANCES CY21	Q2
CONTROL DRUG CHARTING	10
CONTROL DRUG DISCREPANCY- COUNT	2
CONTROL DRUG DIVERSION/SUSPICION	1
CPOE ISSUE	1
DELAYED DOSE	3
IMPROPER MONITORING	6
MISSING/LOST MEDICATION	2
OMITTED DOSE	10
OTHER	4
PYXIS COUNT DISCREPANCY	0
PYXIS MISS FILL	1
RETURN BIN PROCESS ERROR	0
SCAN FAILED	0
UNSECURED MEDICATION	1
WRONG CONCENTRATION	1
WRONG DOSE	3
WRONG DRUG OR IV FLUID	3
WRONG TIME	0
GRAND TOTAL	48

MEDICATION VARIANCES CY21:

During the 2nd Quarter CY 2021, there were 48 Medication Occurrences, increase of 15 or 18.52% from 33 reported in Q1 CY 2021.

There were 9 Near Misses that were Medication-related.

Medication Variances are reviewed at the Medication Safety and P&T Cc

The Committees review for quality improvement opportunities and reco addressed collectively by all Regions.

ADR CY21	Q2
ALLERGY	2
GRAND TOTAL	2

ADR CY21:

During the 2nd Quarter CY 2021,there were 2 ADRs reported, which refl from Q1 CY 2021, which reported 0

SURGERY RELATED ISSUES CY21	Q2
ANESTHESIA COMPLICATION	0
CONSENT ISSUES	2
POSITIONING ISSUES	1
SPONGE/NEEDLE/INSTRUMENT ISSUES	0
STERILE FIELD CONTAMINATED	1
SURGICAL COUNT	1
SURGERY DELAY	1
SURGERY/PROCEDURE CANCELLED	4
SURGICAL COMPLICATION	1
UNPLANNED SURGERY	1
GRAND TOTAL	12

SURGERY RELATED ISSUES CY21:

During Q2 CY 2021, there were 12 Surgery related events, which reflect decrease by 15 or 38.46% from Q1 CY 2021, which was 27

Surgery/Procedure Cancelled **are tracked and trended.**

SECURITY CY21	Q2
AGGRESSIVE BEHAVIOR	2
ASSAULT/BATTERY	2
CODE ASSIST	20
CONTRABAND	9
ELOPEMENT -INVOLUNTARY ADMIT (BA, patient's under police custody, vulnerable adults etc.)	1
PROPERTY DAMAGED/MISSING	15
SECURITY PRESENCE REQUESTED	3
THREAT OF VIOLENCE	0
VERBAL ABUSE	2
GRAND TOTAL	54

SECURITY CY21:

During Q2 CY 2021, there were 54 Security related occurrences, which r or 6.08% from 61 reported in Q1 CY 2021.

Code Assist **is 20 in Q2 CY 2021, which reflects a 2.56% increase from Q1 a total of 19.**

Property Damaged/Missing **is 15 in Q2 CY 2021, which reflects a 14.28% 2021, which was a total of 20.**

RISK MANAGEMENT QUARTERLY REPORT QUARTER 2

SAFETY CY21	Q2
BIOHAZARD EXPOSURE	5
SMOKE/FIRE/DRILL	0
SAFETY HAZARD	8
SHARPS EXPOSURE	1
GRAND TOTAL	14

SAFETY CY21:

During Q2 CY 2021, there were 14 Safety events reported, which remai...
Q1 CY 2021, which also reported 14.

Occurrences which involve employees and LIPs are referred to Employe...
management.

REGIONAL RISK MANAGEMENT SECTION : (MAY INCLUDE PERFORMANCE IMPROVEMENT INITIATIVES , SERIOUS INCIDENTS, AHCA ANNUAL REPORTABLE EVENTS, CODE 15 REPORTS, AND/OR INTENSE ANALYSIS/RCAs COMPLETED, ETC.)

BHCS Falls Safety Measures:
- 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)
- Use of portable bed alarms on all older model beds.
- 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.

ACHA ANNUAL REPORTABLE EVENTS:
- There were 4 ACHA Annual Events reported for the 2nd Quarter CY2021.

CODE 15 REPORTS:
There was 1 Code 15 Report for the 2nd Quarter CY2021.
- Elderly patient received Dilaudid & Fentanyl intra-op during hip surgery. Post-op in PACU, patient received Narcan. Surgical post-op orders included Dilaudid. Dilaudid and Risperdal administered to patient on unit. Prior to administration of Dilaudid, no pain score documented, no pain assessment, post administration. Patient found unresponsive-RR called. Transferred to ICU, and made DNR by family.

- **Opportunities identified:**
- Respiratory acidosis- combination of Risperdal & Dilaudid (elderly & Opiate naïve patient).
- 1: NM was not aware that a RR was called on her unit. Communication would have led to the prompt investigation of the event.
  2: Pain assessment not documented including reassessment post pain medication administration.
- 3: Patient was heard to be snoring, but prompt follow-up was not done, since the patient had a history of snoring.
- 4: The screening assessment tool (Stop Bang) used by Anesthesia to screen patient at risk for Obstructive sleep apnea (OSA) was not completed on admission.
- 5: Feedback from Pharmacy & Anesthesia, the dose of Dilaudid (1mg Iv q2hrs PRN), was within normal dose range, however lower doses are recommended.

- **Action Plan:**
- 1: Thorough & proper hand-off/change of shift reinforced with staff.
- 2: Stop BANG Assessment
- 3: Assessment of patient prior to pain medication administration.
- 4: Re-assessment of pain- post administration of pain medication.
- 5: Pharmacy to take into consideration dosage strength, to ensure safe and conservative pain management.
- 6: Develop task force to include Pharmacy, Quality, Med staff, Risk mgt., Surgery and nurse leaders.

- **SUMMARY OF PHARMACY ACTION PLAN:**
- Pain Powerplan enhancement:
- Action- Reviewing the Pain Powerplan to include and list lower dose options for Dilaudid in Opioid naïve or tolerant patients
- Currently lists doses of 1mg and 2mg. In process of being updated to 0.5mg dose
- Recommendation to change further to 0.1mg and 0.25mg dose options
- Narcan alert in Cerner- Requesting from Pharmacy IT team
- Exploring option to see whether provider can be alerted if patient received Narcan within current admission
- Recommendation to have pain scores documentation with administration of medication, however was not approved by nursing leadership during meeting.

INTENSE ANALYSIS/RCAs
- There were 2 Intense Analysis in the 2nd Quarter CY2021: 1 for Narcotic Usage In Elderly and Opiate Naive Patients, and 1 regarding Angioedema.
- There was 1 RCA in the 2nd Quarter CY2021, for 2 Falls with Injuries - Right Parietal Subdural Hematoma and Right Hip Fracture.