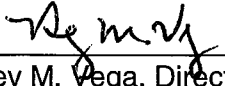


GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER		
TITLE: Risk Management Plan	POLICY NO: AD-RM-1	Page 1 of 4
RESPONSIBILITY:		
APPROVED BY:  Rey M. Vega, Director	EFFECTIVE: 3/27/17	
	LAST REVIEWED/REVISED:	

PURPOSE:

- A. To provide a Risk Management Plan that is designed to manage risk and reduce the severity of a loss if one were to occur.

POLICY:

- A. Guam Behavioral Health and Wellness Center shall provide an ongoing, comprehensive, and systematic approach to reducing risk exposures.
- B. GBHWC shall implement a proactive risk management in compliance with provisions of federal, state, and local statute, applicable scope of practice and regulation.
- C. In order to approach the process of Risk Management systematically, GBHWC shall utilize the following four step model for Risk Management such as;
 - a. The identification of risks
 - b. The analysis of risk identified
 - c. The treatment of risks
 - d. The evaluation of risk treatment strategies.
- D. As a line agency of the Government of Guam, GBHWC is covered by the Government Claims Act (Public Law 17-29). This law authorizes the Government of Guam to purchase liability insurance, to cover the liabilities incurred by it. Such insurance covers the government as a whole, or any part, department, line agency such as GBHWC. This is also to provide additional protection for Government Health Professionals and employees that act within the scope of his/her employment.
- E. The risk management program shall be formally addressed through the quality performance improvement committee and executive management committee.

RESPONSIBILITY:

Health and Safety/Risk Management Officer:

1. Shall be responsible for developing, implementing, and evaluating the outcome of the risk management plan.
2. Shall conduct risk assessment at least annually or as needed.
3. Shall be responsible for coordinating the investigation of significant incidents including, but not limited to, review of the medical record, interviews of any knowledgeable personnel, review of pertinent policies and or procedures, and referral of the occurrences as necessary to the quality improvement committee and the executive management committee or the Director.
4. Shall be responsible for loss prevention and reduction (clinical and non-clinical), claims management, risk financing, patient safety, regulatory compliance.

5. Shall provide or facilitate orientation programs for all new employees and contracted staff on critical incidents reporting, focus awareness of risk exposures and current risk prevention activities.
6. Shall provide periodic quarterly reports and annual analysis to the Quality Improvement Committee and or the Director.
7. Shall review and evaluate the risk management plan annually, and make recommendations for enhancements prior to final approval of the director.

Quality Improvement Committee

1. Shall provide a timely review of significant incident reports, a means of following significant incident trends, and a means of determining and recommending the most appropriate correction for problems with no obvious solution.

PLAN:

STRUCTURE OF THE RISK MANAGEMENT PROCESS

- A. Risk Identification – is the process through which the clinic staff becomes aware of risks in the health care environment that constitute potential loss exposures for GBHWC. The staff and the Risk Manager will utilize the following information services to identify potential risks but are not limited to the following;
 1. Identification of risk through the critical incident reporting system (refer to Critical and non critical incident reporting policy)
 2. Sentinel event tracking
 3. Patient Complaints
 4. Peer Review Activities
 5. Informal discussions with management and staff members
 6. Occurrence reporting and screening
 7. Personal inspection
 8. Medical Records
- B. Risk Analysis – is the process of determining the potential severity of the loss associated with an identified risk and the probability that such a loss will occur. These factors establish the seriousness of a risk and will guide management in the selection of an appropriate risk treatment strategy.
- C. Risk Treatment – refers to the range of choices available to management in handling a given risk. Risk treatment strategies that GBHWC implements include the following;
 1. Risk Control
 - i. Risk Acceptance – involves assuming the potential loss associated with a given risk and making plans to cover any financial consequences of such losses.
 - ii. Risk avoidance – a strategy utilized when a given risk poses a particular serious threat that cannot be effectively reduced, and the conduct or service giving rise to the risk may perhaps be avoided.
 - iii. Risk Prevention - techniques focus on methods to prevent a peril from occurring.
 - iv. Risk reduction or minimization - involves various loss control strategies aimed at limiting the potential consequences or frequency of a given risk without totally accepting or avoiding the risk. Strategies may include staff education, policy and procedure revision and other interventions aimed at

controlling adverse occurrence without completely eliminating risk activities.

- v. Risk Transfer – involves the concept that the financial and/or legal liabilities associated with an identified risk can be shifted to an outside organization. This transfer of risk is normally accomplished through a contract.

- 2. Risk Financing - as a line agency of the Government of Guam, GBHWC is covered by the Government Claims Act (Public Law 17-29). This law authorizes the Government of Guam to purchase liability insurance, to cover the liabilities incurred by it. Such insurance covers the government as a whole, or any part, department, line agency such as GBHWC.

- D. Risk Management Evaluation- the final step in the Risk management process , whereby the effectiveness of the techniques employed to identify, analyze and treat risks are assessed and further action taken when warranted. If improvement and/or resolution of the risks are evident, additional follow- up will be done at predetermined intervals to evaluate continued improvement.

RISK MANAGEMENT PLAN ELEMENTS.

The GBHWC Risk Management program is concerned with a variety of issues and situations that hold the potential for liability or losses in the Department. It addresses the following categories of risk.

- A. Patient-Related Risks

- 1. Confidentiality and appropriate release of patient medical information.
- 2. Critical Incidents/Sentinel Events.

- B. Medical Staff, Direct Service Provider-Related Risks

- 1. Medical Staff and other providers' peer review and quality performance improvement activities.
- 2. Medical Errors, Seclusion and Restraints

- C. Employee – Related Risks

- 1. Maintaining a safe work environment
- 2. Reduction of risk of occupational illness and injury
- 3. Provision for the treatment and compensation of workers who suffer on the job injuries and work related illness
- 4. Ensuring nondiscrimination in recruitment, hiring and promotion of employees

- D. Other Risk

- 1. Ensuring mechanisms to prevent and reduce the risk of losses associated with fire, flood, severe weather and utilities malfunction.
- 2. Ensuring the development and implementation of emergency preparedness plans
- 3. Ensuring that appropriate protocols are in place for hazardous materials/waste management.
- 4. Maintaining a safe environment for consumers and visitors
- 5. Assisting Quality performance Improvement efforts to identify those areas which represent an opportunity to improve patient care and reduce risk.

ANNUAL REVIEW AND MONITORING

As part of the Risk Management program, the scope, organization and effectiveness of Risk Management activities will be reviewed annually. Program revisions will be recommended, approved and implemented as necessary

REFERENCES:

RELATED POLICY(IES):

SUPERSEDES:

- A. Title; Policy No.; Effective date/signature date; Approving individual's name

ATTACHMENTS

- I. Risk Assessment Grid 2017*

Guam Behavioral Health and Wellness Center
Risk Assessment 2017

The Risk Management Plan is designed to support the mission and vision of GBHWC as it pertains to clinical risk and patient safety as well as visitor, volunteer, and employee safety and potential business, operational, and property risks. The first stage in creating a quality service is making that service safe and managing risk appropriately. An effective risk management, which is an integral component of good organizational management, minimizes negative outcomes and identifies opportunities for quality improvement. Through the systemic application of risk management, Guam Behavioral Health and Wellness Center will demonstrate its commitment to the vision outlined above thus providing assurance to both staff and consumers.

I. Property Losses				
Identification of Exposure/Risk	Strategies to Minimize Risk	Action Plan	Responsibility of	Timelines
Damaged or destroyed property	<ol style="list-style-type: none"> 1. Guard hourly patrol. 2. Monthly Facility and Maintenance inspections. 3. Proper procedures for reporting of property damage 4. Regular maintenance of equipment/ vehicles etc 5. Budget appropriation for major repairs or procurement of new equipment vehicle etc 6. Survey and Regulatory reports 7. Insurance coverage. 	<ol style="list-style-type: none"> 1. Early Risk Identification. 2. Provide checklist for monthly monitoring 3. Maintenance section to make repairs if applicable. 4. Change equipment if necessary. 5. Keep all necessary insurance current 6. Registration of all vehicles keeping insurance coverage current 7. Proper record keeping. 	<ol style="list-style-type: none"> 1. Facilities/Maintenance Operation Supervisor 2. Safety Officer 3. All employees 	<ol style="list-style-type: none"> 1. Regular monthly audit. 2. Annual renewal of insurance.

Guam Behavioral Health and Wellness Center
Risk Assessment 2017

II. Liability Losses Consumer Related					
Identification of Exposure/Risk	Strategies to Minimize Risk	Action Plan	Responsibility of	Timelines	
1. Medical Errors a. Errors of prescribing b. Errors of dispensing c. Errors in administering	1. Staff training and support in continuing medical education 2. Physiologically sound working and staffing hours 3. Proper Medication labeling and storage 4. Using Best practiced principle or evidence based guideline	1. Early Risk Identification 2. Incident reporting 3. Occurrence reporting and screening 4. Sentinel event tracking 5. Revise and update medication policy 6. Upkeep of certifications.	1. Medical Director 2. Nursing Administrator 3. Pharmacist	Monthly Audit and Reporting	
2. Adverse Drug Reaction	1. Training on Drug- Drug Interactions 2. Reporting of Adverse Drug Reaction 3. Documenting Consumer history of Drug allergy	1. Early Risk Identification 2. Incident reporting 3. Occurrence reporting and screening 4. Sentinel event tracking 5. Training on medication handling.	1. Medical Director 2. Nursing Administrator 3. Pharmacist 4. Direct Service Personnel	Monthly Audit and Reporting	
3. Behavioral Problem (assault, elopement etc) a. suicide/self-harm b. sentinel events c. Risk of Violence	1. PCM training 2. Clinical Risk Assessment of Consumers 3. Safety Plan for consumers at risk	1. security reports 2. Regular Reporting of the Data risk assessment and safety plans in place	1. Clinical Program Division Heads 2. Direct Service Personnel	1. Monthly Audit and Reporting 2. Annual PCMA Training 3. Annual Policy review and updating	

Guam Behavioral Health and Wellness Center
Risk Assessment 2017

Identification of Exposure/Risk	Strategies to Minimize Risk	Action Plan	Responsibility of	Timelines
4. Sentinel Events	<ol style="list-style-type: none"> 1. Early Incident Reporting 2. Training on Health and Safety 3. Provide Safety Plan for High Risk Consumers. 	Training on Critical Incident Reporting Policy. Critical Incident Tracking	<ol style="list-style-type: none"> 1. Division Head 2. Supervisor 3. Risk Manager 4. Nurse Administrator 5. Direct Service Personnel 	<ol style="list-style-type: none"> 1. Monthly tracking and audit and quarterly reporting and review by Director 2. Annual Training on policy 3. Annual Policy review and updating
5. Unsafe conditions with potential for harm	<ol style="list-style-type: none"> 1 Regular facility and maintenance reporting 2.Using of hazard signs for slippery and wet areas 3. ADA compliant environment 	<ol style="list-style-type: none"> 1. Using a checklist in monitoring 2. Continuous improvement of work environment 3. ADA compliance inspections 4. Safety inspections 	<ol style="list-style-type: none"> 1. Facility Operations Supervisor 2. Safety Officer 3. ADA Compliance Officer 4. Risk Manager 5. ALL employees 	<ol style="list-style-type: none"> 1. Monthly safety and ADA inspections 2. Annual Training on policy
6. Abuse and neglect of Consumers	<ol style="list-style-type: none"> 1. Staff Training with Adult/children Protective Services (APS, CPS) 2. Review and training on Incident Reporting Policy 	<ol style="list-style-type: none"> 1. Develop/enhance the Complaints Process 2. Regular medical checkup of consumers 	All employees <ol style="list-style-type: none"> 1. Division Head 2. Clinical Supervisor 3. Risk Manager 4. Direct Service Personnel 	<ol style="list-style-type: none"> 1 Monthly review and evaluation of incidents reports 2. Annual Training on policy


Guam Behavioral Health and Wellness Center
Risk Assessment 2017

III. Personnel Losses

Identification of Exposure/Risk	Strategies to Minimize Risk	Action Plan	Responsibility of	Timelines
1. Employee turn over 2. Disability 3. Death	1. Continuous improvement of work environment 2. Provide Training opportunities for staff 3. Proactive recruitment process 4. Performance Evaluation for salary increase	1. Tracking retention and turnover rate 2. Exit interview 3. Employee satisfaction survey	Human Resources	Quarterly Reports

Quality Management /Risk Management


 Alfred Garrido
 Health and Safety Officer/Risk Manager


 Rey M. Vega
 GBHWC Director

Date Approved: 3/23/12
 Last Reviewed: _____

**GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER
REVIEW AND ENDORSEMENT CERTIFICATION**


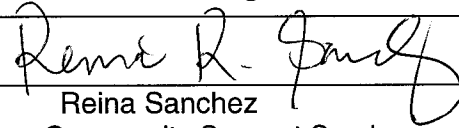
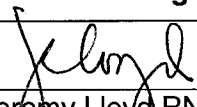
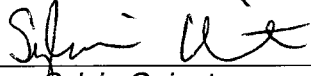
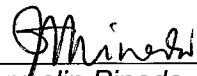
The signatories on this document acknowledge that they have reviewed and approved the following:

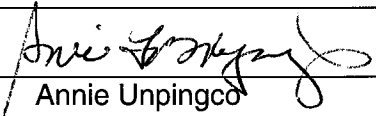
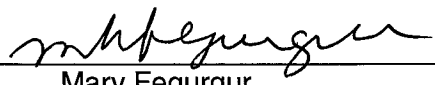
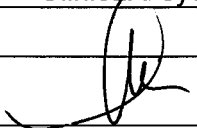

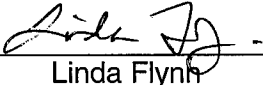
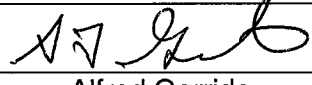

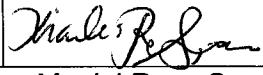
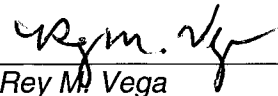
- Policies and Procedure
- Program plan
- Protocol/Form

Submitted by: Quality Management/Risk Management

Policy No: AD- RM- 01

Title: Risk Management Program Plan

Reviewed/Endorsed Title	Date	Signature
	3/20/17	
	Cydsel Toledo Quality Improvement Coordinator	
Reviewed/Endorsed Title	Date	Signature
	3/20/17	
	Reina Sanchez Supervisor Community Support Services	
Reviewed/Endorsed Title	Date	Signature
	Dr. Ariel Ismael Medical Director	
Reviewed/Endorsed Title	Date	Signature
	3/22/17	
	Jeremy Lloyd RN Acting Nurse Administrator	
Reviewed/Endorsed Title	Date	Signature
	3/20/17	
	Sylvia Quinata Adult Counseling Supervisor	
Reviewed/Endorsed Title	Date	Signature
	3/21/17	
	Shermalin Pineda Manager Residential Recovery Program	

Reviewed/Endorsed Title	Date	Signature
	3-20-17	 Annie Unpingco Administrator CASD
Reviewed/Endorsed Title	Date	Signature
		 Mary Fegurgur Clinical Psychologist
Reviewed/Endorsed Title	Date	Signature
	3-20-17	 Athena Duenas Supervisor Drug and Alcohol Program
Reviewed/Endorsed Title	Date	Signature
	03/20/2017	 Maria Teresa Aguon Program Manager Healing Hearts
Reviewed/Endorsed Title	Date	Signature
	3/20/2017	 Linda Flynn Supervisor Prevention and Training Branch
Reviewed/Endorsed Title	Date	Signature
	3/20/2017	 Alfred Garrido Health and Safety Officer/ Risk Manager
Reviewed/Endorsed Title	Date	Signature
	3-20-17	 Edward Palacios Facility Operations Officer
Reviewed/Endorsed Title	Date	Signature
	3/20/2017	 Maelei Rose Sampson Human Resources
Reviewed/Endorsed Title	Date	Signature
	3/27/17	 Rey M. Vega Director