

RISK MANAGEMENT

Risk Management Defined

Risk Management is a common sense, systematic approach to managing the unexpected results or adverse effects of the many and varied risks associated with providing patient care in an office practice setting. The purpose of a risk management program is to establish and maintain processes that identify, help correct and prevent conditions that could result in injury (to patients, visitors, doctors and/or employees) or financial loss to the practice.



A Risk Management Plan

A written protocol for risk factors is essential to provide a structure for procedures that support:

- Timely identification and evaluation of risk issues
- Formulation of corrective and preventive actions to eliminate or reduce the identified risks
- Follow-up of the effectiveness of corrective actions

An effective risk management plan for our office can help improve or enhance our clinical patient care and reduce our liability exposure. The commitment and efforts of all of our physicians and staff to quality patient care and patient satisfaction is essential.



RISK
MANAGEMENT



Risk Areas in a Physician Office

Risk Management in the physician office focuses on effective communication, direct patient care activities with the potential for liability for inappropriate or incorrectly performed care and office policies and procedures which, when not established or not followed, can result in patient dissatisfaction or an adverse or unanticipated outcome, or experience a preventable injury due to a physical accident.



The following are some of the categories of risks that are typically addressed in a risk management program for a physician practice:

- Patient care
- Medical and other licensed staff credentialing
- Human resources
- Office safety
- Communication/information management
- Financial risks





Effective Risk Management

An effective risk management program is guided by ongoing, meaningful, and measurable goals and objectives. Goals for a risk management program typically support the following efforts:

- Provide for the safe delivery of health care within reasonable financial and resource limits
- Facilitate the timely identification and resolution of risks in an effort to reduce or prevent the potential for injury or loss
- Foster effective communication for patient care and safety
- Continually improve the ongoing delivery of healthcare services
- Utilize internal controls to reduce financial losses associated with professional and general liability claims, and decrease the frequency and severity of those claims

COMMUNICATING WITH PATIENTS AND OTHER PROVIDERS

Patient dissatisfaction with the physician-patient relationship is frequently part of the issues that lead to claims. Some of the underlying issues that contribute to patient dissatisfaction are:

- Situations in which patients are confused by information and instructions for treatment
- Unmet expectations for treatment outcome
- How they were treated by the physician and office staff

All of these factors closely relate to the patient's perception of the quality of the service they receive in a physician's office, and they all involve communication. Other communication-related claims develop out of inadequate, or lack of communication between care providers.

A majority of all claims against a medical office involve one or more component/s of inadequate or absent communication.

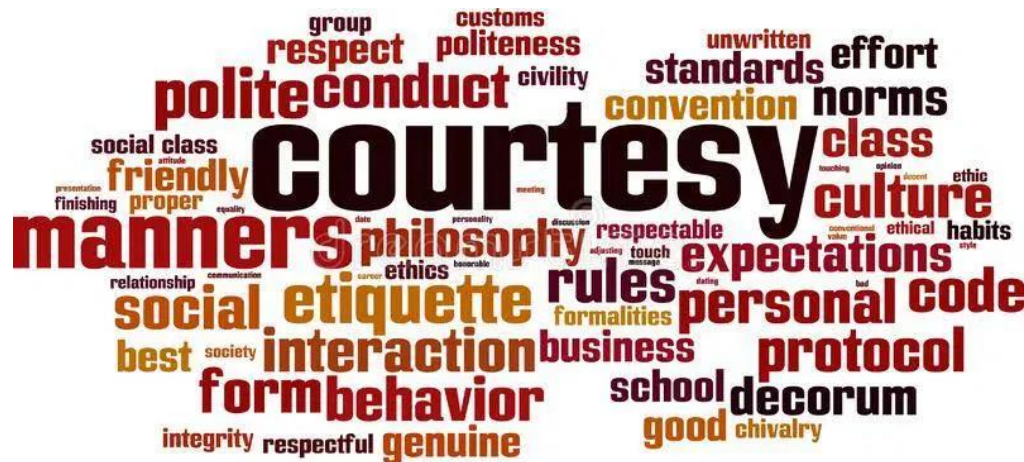


These are just a few of the things that shape your patient's first impressions; and they are made even before the patient meets with the physician.



Remember Common Courtesies

- Be certain that your front desk greets your patients in a friendly manner upon entering your office
- Require anyone answering the phone to follow the same rules of courtesy
- Knock before entering an exam room
- Make immediate eye contact
- Greet the patient and introduce yourself
- Address patients by their title (e.g., Mr., Ms., and Mrs.) and last name, unless given permission by patients to call them by their first name





Listen

- Listen to your patients and let them speak without interrupting them
- Repeat key information back to the patient after they have concluded their description of their chief complaint or reason for the visit
- Determine what the patient hopes to get from the conversation
- Be considerate – restate information as needed
- Use simple words and explain medical terms they may not understand
- Allow time for questions
- Ensure that the dialogue is comprehensive enough to give patients a full understanding
- Pose open-ended questions to ascertain whether the patient understands
- Ask the patient to explain their understanding of the conversation to you so that you can be sure they are comprehending the dialog
- Consider cultural beliefs and practices that may influence your conversation





Patient Complaints

In spite of efforts at prevention, our office, or individuals in it, may receive complaints. As staff and providers, we can:

- Know the protocol which details how the office will respond to a complaint
- Make sure all staff and providers are familiar with the protocol
- Listen carefully and respectfully to each complaint
- Ask for clarification, if necessary, only after the complainant has finished their initial complaint
- Only apologize for the inconvenience or experience they had; perception is truth to the patient
- Offer a workable solution (as directed by leadership, if needed)
- Commit that the office will take a close look at the concern to identify possible solutions
- Thank the complainant for taking the time, and making the effort to share this with the practice

RISK MANAGEMENT IS THE RESPONSIBILITY OF ALL EMPLOYEES