

Risk-Management and Patient Safety

Implementation Guide

GL - 25 Jan 2013



Difference between risk management & patient safety

What's the difference between risk management and patient safety?

In recent years, risk management has been influenced by the growing awareness of the number of errors, incidents and near-misses that happen in healthcare and the effect on the safety of patients. Traditionally, risk management has been about professional and organisational performance and systems - the financial or corporate cost of making mistakes. John Hickley, writing in *Clinical Risk Management in Primary Care* (2005) identified the following change in emphasis in risk management:

Risk Management and Patient Safety

Past	Present
Clinical risk management	Patient safety
Competence	Performance
Individual oriented	Team and systems oriented
Voluntary code	Regulatory framework
Clinician centred	Patient centred

How does risk management link with clinical governance?

How risk is managed has an impact on the operation of AVA Peter treatments. Good governance in healthcare covers corporate, staff and clinical governance, all areas of potential risk.

Clinical risks can have financial implications such as an increase in readmissions after surgery and financial decisions such as a freeze on staff recruitment can have a clinical impact as patients wait longer for treatment.

Managing risk effectively also involves identifying and minimising the opportunity for risks to occur.

Clinical errors and incidents that are reported can be assessed and used as a basis for improving the quality of treatments, services and premises. Reporting of incidents also provides an opportunity for other teams and departments to learn and make changes to their practice.

The reporting system should start paper based and may be developed as an electronic web-based system (incident reporting system - we have discussed 2 years ago).

Risks that impact on patient care can be monitored, managed and reported via the risk management process (to be developed) and linked to professional and organisation learning through the future clinical governance structure.

How do I identify risk?

Some hazards and risks are easy to identify; faulty electrical sockets, unsafe flooring etc. Others risks are more difficult to recognise; contaminated surfaces, a mistake during a rushed staff handover, medication allergies, or common practice to make something quicker or easier that raises the risk of something going wrong. You want it to be routine for staff to know how to identify and report clinical risk, poor practice or faulty machinery.

If you are trying to identify risks it is important to think about how things happen in your work area. You need to use up-to-date, accurate information about how your service works, if possible from both staff and patients. This could be recent incidents, audits, questionnaires, complaints or the views of those who visit your work area.

Identifying risks is about asking:

1what could happen?

2when and where could it happen?

3how and why could it happen?

4how can we prevent or minimise risk of this happening?

How you identify risks and who you involve will depend on whether you are looking at a specific ward/team area or at a more strategic, organisational level. Its useful to involve others in identifying risk as this gives you different perspectives on the same situation.

Approaches to identify risk can include:

1brainstorming on possible risks in a facilitated session

2mapping out the processes and procedures of the ward or the patient journey on a wall chart and ask staff to identify risks at each stage

3drawing up a checklist of risks and asking for feedback.

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What is Health and Safety?

Health and safety is part of risk management and is a statutory requirement on all employers, employees and self employed contractors.

It involves preventing people from being harmed or becoming ill as a result of work activities by:

- minimising risks to health
- taking the right precautions
- providing a satisfactory working environment.

The Health and Safety at Work Act (Russian Act?) placed general duties on all employers to protect the health and safety of their employees and those affected by their work activities.

Health and safety training is included in the staff induction and aims to minimise incidents and injuries to staff, patients and the public. If you are injured at work, information on what happened to you will need to be collected by your manager and employer, particularly if you are unable to work as a result.

Example



How do I assess or analyse risk?

Some hazards and risks are easy to identify; faulty electrical sockets, unsafe flooring or in-patients not having name bracelets. Others risks are more difficult to recognise; contaminated surfaces, a mistake during a rushed staff handover, medication allergies, or common practice to make something quicker or easier that raises the risk of something going wrong.

You want it to be routine for staff to know how to identify and report clinical risk, poor practice or faulty medical devices or machinery.

Looking closely at what causes risks to happen helps us understand and manage why they occur. Analysis of risks can take place at a number of levels; it can be about a particular clinical process such as minor surgery, the storage of hazardous materials in a health centre or the financial status of an organisation. Risks can also be analysed at different stages in a process, such as before and during treatment.

Risk assessment involves understanding and knowing what to do if the risk occurs by:

- Identifying in advance potential hazards and risks
- Deciding who or what might be harmed and how
- Evaluating the risks and deciding whether the existing precautions are adequate or whether more should be done
- Recording your findings and implementing them
- Reviewing your assessment and revising it if necessary.
- describes risk assessment as:

How do I assess or analyse risk (continued)?

Risk assessment is described as:

simply a careful examination of what, in your work, could cause harm to people, so that you can weigh up whether you have taken enough precautions or should do more to prevent harm

Analysing risks will involve looking at:

- what controls do we have in place to prevent a risk occurring?
- what is the consequence of a risk occurring?
- what is the likelihood of a risk occurring?
- what is the level of risk in light of these considerations?

Weighing up the likelihood and consequences of a risk happening involves categorising risks into a scale or matrix that gives you a guide to assess what should be dealt with immediately and what can be tackled later.

The level of information required and complexity of the analysis may vary depending on the circumstance or setting.

How do evaluate risk?

Once risk have been identified in the area and assessed the possible impact, you need to decide what you will do next. Evaluating risks helps you identify what risks need treatment as a matter of priority. If you have identified a number of risks then you need to evaluate priorities dependent on your initial criteria for judging the likelihood and consequences of risk.

Often, due to lack of resources, it is not possible to deal with all the causes of risk. Decisions then have to be made about which risks are dealt with immediately and what risks can be tolerated.

The Australia/New Zealand standards suggest that it can be useful to divide risk into three bands:

- An upper band where action has to be taken to reduce risks because the risk is not acceptable or tolerable
- A middle band where the costs and benefits of the risk are balanced against the potential of something going wrong
- A lower band where positive or negative risks are so small that no action needs to be taken.

Risks and their level can change over time with developments in technology, clinical treatment and what is considered acceptable practice.

Regular re-evaluation of risks is needed to make sure that changes that reduce or increase the risk are identified and addressed.

Risk Tools and techniques

Audits

inspections

Complaints analysis

Task analysis

Checklists

Brainstorming

Examination of/by internal or external experience

Flow charting

Root cause analysis

System design review

Systems analysis

Incident monitoring systems

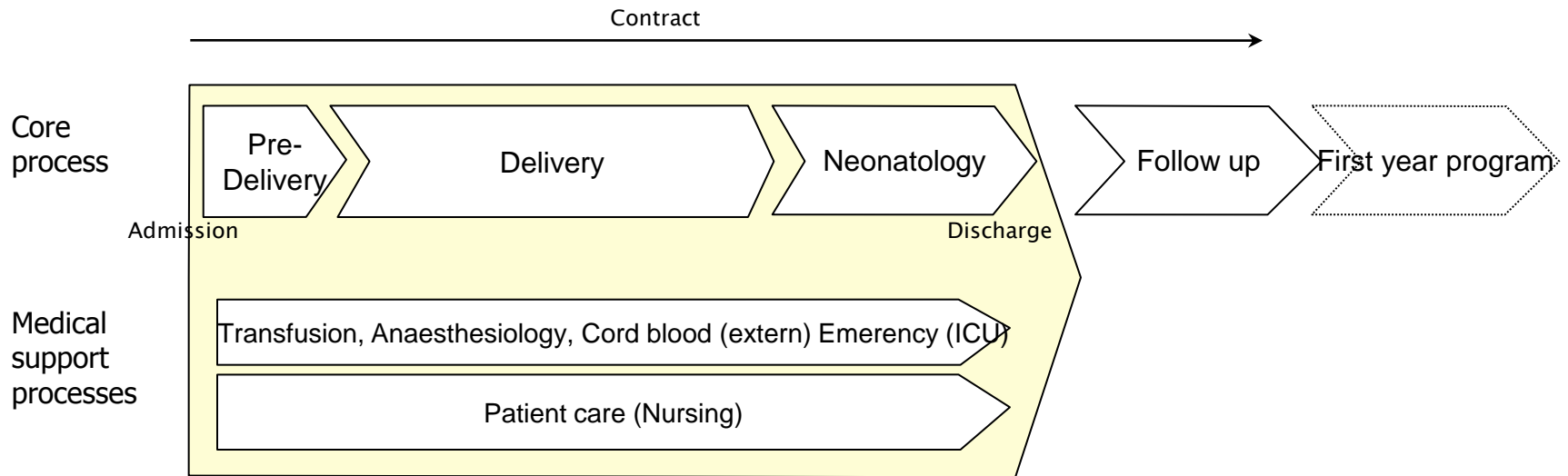
History of failure analysis

Interview / focus groups

Scenario analysis

Step 1: Collection of Risk areas

Systems analysis - conceptual chart



Infrastructure	Beds, Medical devices,
Health & Safety	Cabling, sockets,
Medical supply	

Risk register

Function/Activity:		Compiled by:		Date:	
Date of risk review:		Reviewed by:		Date:	

Reference	The risk	What can happen? (event)	How it can happen?	What can happen? (consequences)	Identifying existing control	Effectiveness and implementation of existing controls	Analysis			Risk priority	Treat risk Y/N	Further action
							Likelihood	Consequences	Level of risk			

Risk action plan

Function/Activity:			
Risk:		Ref:	
Summary: Recommend response and impact			
Action plan			
1. Proposed actions			
1. Resource requirement			
1. Responsibility			
1. Timing			
1. Reporting and monitoring required			
Compiled by:	Date:	Reviewed by:	Date:

Reducing Risk and Increasing Safety of Patients in Peri Operational Management

By Svetlana R. Krutetskaya

World Health Organization SURGICAL SAFETY CHECKLIST (FIRST EDITION)		
Before induction of anaesthesia	Before skin incision	Before patient leaves operating room
SIGN IN <ul style="list-style-type: none"><input type="checkbox"/> PATIENT HAS CONFIRMED<ul style="list-style-type: none">• IDENTITY• SITE• PROCEDURE• CONSENT<input type="checkbox"/> SITE MARKED/NOT APPLICABLE<input type="checkbox"/> ANAESTHESIA SAFETY CHECK COMPLETED<input type="checkbox"/> PULSE OXIMETER ON PATIENT AND FUNCTIONING <p>DOES PATIENT HAVE A:</p> <p>KNOWN ALLERGY?</p> <p><input type="checkbox"/> NO</p> <p><input type="checkbox"/> YES</p> <p>DIFFICULT AIRWAY/ASPIRATION RISK?</p> <p><input type="checkbox"/> NO</p> <p><input type="checkbox"/> YES, AND EQUIPMENT/ASSISTANCE AVAILABLE</p> <p>RISK OF >500ML BLOOD LOSS (7ML/KG IN CHILDREN)?</p> <p><input type="checkbox"/> NO</p> <p><input type="checkbox"/> YES, AND ADEQUATE INTRAVENOUS ACCESS AND FLUIDS PLANNED</p>	TIME OUT <ul style="list-style-type: none"><input type="checkbox"/> CONFIRM ALL TEAM MEMBERS HAVE INTRODUCED THEMSELVES BY NAME AND ROLE<input type="checkbox"/> SURGEON, ANAESTHESIA PROFESSIONAL AND NURSE VERBALLY CONFIRM<ul style="list-style-type: none">• PATIENT• SITE• PROCEDURE <p>ANTICIPATED CRITICAL EVENTS</p> <p><input type="checkbox"/> SURGEON REVIEWS: WHAT ARE THE CRITICAL OR UNEXPECTED STEPS, OPERATIVE DURATION, ANTICIPATED BLOOD LOSS?</p> <p><input type="checkbox"/> ANAESTHESIA TEAM REVIEWS: ARE THERE ANY PATIENT-SPECIFIC CONCERNS?</p> <p><input type="checkbox"/> NURSING TEAM REVIEWS: HAS STERILITY (INCLUDING INDICATOR RESULTS) BEEN CONFIRMED? ARE THERE EQUIPMENT ISSUES OR ANY CONCERNS?</p> <p>HAS ANTIBIOTIC PROPHYLAXIS BEEN GIVEN WITHIN THE LAST 60 MINUTES?</p> <p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NOT APPLICABLE</p> <p>IS ESSENTIAL IMAGING DISPLAYED?</p> <p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NOT APPLICABLE</p>	SIGN OUT <p>NURSE VERBALLY CONFIRMS WITH THE TEAM:</p> <ul style="list-style-type: none"><input type="checkbox"/> THE NAME OF THE PROCEDURE RECORDED<input type="checkbox"/> THAT INSTRUMENT, SPONGE AND NEEDLE

Surgical Safety Checklist		
World Health Organization Patient Safety <small>A World Alliance for Safer Health Care</small>		
Before induction of anaesthesia (with at least nurse and anaesthetist)	Before skin incision (with nurse, anaesthetist and surgeon)	Before patient leaves operating room (with nurse, anaesthetist and surgeon)
<p>Has the patient confirmed his/her identity, site, procedure, and consent?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Not applicable</p> <p>Is the site marked?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Not applicable</p> <p>Is the anaesthesia machine and medication check complete?</p> <p><input type="checkbox"/> Yes</p> <p>Is the pulse oximeter on the patient and functioning?</p> <p><input type="checkbox"/> Yes</p> <p>Does the patient have a:</p> <p>Known allergy?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Difficult airway or aspiration risk?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, and equipment/assistance available</p> <p>Risk of >500ml blood loss (7ml/kg in children)?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, and two IVs/central access and fluids planned</p>	<p><input type="checkbox"/> Confirm all team members have introduced themselves by name and role.</p> <p><input type="checkbox"/> Confirm the patient's name, procedure, and where the incision will be made.</p> <p>Has antibiotic prophylaxis been given within the last 60 minutes?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Not applicable</p> <p>Anticipated Critical Events</p> <p>To Surgeon:</p> <ul style="list-style-type: none"><input type="checkbox"/> What are the critical or non-routine steps?<input type="checkbox"/> How long will the case take?<input type="checkbox"/> What is the anticipated blood loss? <p>To Anaesthetist:</p> <ul style="list-style-type: none"><input type="checkbox"/> Are there any patient-specific concerns? <p>To Nursing Team:</p> <ul style="list-style-type: none"><input type="checkbox"/> Has sterility (including indicator results) been confirmed?<input type="checkbox"/> Are there equipment issues or any concerns? <p>Is essential imaging displayed?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Not applicable</p>	<p>Nurse Verbally Confirms:</p> <ul style="list-style-type: none"><input type="checkbox"/> The name of the procedure<input type="checkbox"/> Completion of instrument, sponge and needle counts<input type="checkbox"/> Specimen labelling (read specimen labels aloud, including patient name)<input type="checkbox"/> Whether there are any equipment problems to be addressed <p>To Surgeon, Anaesthetist and Nurse:</p> <ul style="list-style-type: none"><input type="checkbox"/> What are the key concerns for recovery and management of this patient?

This checklist is not intended to be comprehensive. Additions and modifications to fit local practice are encouraged.

Revised 1 / 2009

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