

Accreditation & Risk Management Office ANNUAL REPORT

Date: Oct 2008

This report is prepared by the Accreditation and Risk Management Office at AUBMC on the activities and achievements during the fiscal year 2007-2008.

A. Accreditation

A.1. Policies and Procedures:

Sr. No.	ACTIVITY	VOLUME
1	Drafted, prepared, edited, formatted, coordinated reviews by concerned committees and individuals, obtained approvals, duplicated, Coordinated the reviews of 2 nd and 3 rd editions of policies and procedures, obtained approvals, and replaced the 2 nd editions in the policy and procedure manuals	68
2	Distributed AUBMC policies and procedures, and placed the hard copies in the 107 AUBMC policy and procedure manuals located in all departments / sections / units throughout the entire Medical Center.	85
3	Coordinated the development and maintained copies of the updated departmental policy and procedure manuals.	4
4	Circulated the soft copies and summaries of newly developed and modified policies and procedures.	53
5	Accreditation Correspondence etc	1099

A.2. Newsletter:

Sr. No.	ACTIVITY	VOLUME
1	Prepared, designed, edited, obtained articles, duplicated, and distributed 300 copies of the Performance Improvement and Accreditation Newsletter throughout the Medical Center.	7
2	Posted the soft copies of the Performance Improvement and Accreditation Newsletter on the Accreditation and Risk Management website.	7

A.3. P I & Accreditation Questionnaire:

Sr. No.	ACTIVITY	VOLUME
1	Prepared the questions to be included in the PI & Accreditation Awareness questionnaires.	60
2	Designed, duplicated, and distributed hard copies of the P I & Accreditation Awareness questionnaires throughout the Medical Center.	3,950
3	Posted the on-line PI & Accreditation Awareness questionnaires on the Accreditation and Risk Management website.	6
4	Received the staff responses to the PI & Accreditation Awareness questionnaires, entered and analyzed the responses, sorted them into staff categories, and identified the staff with correct answers.	932
5	Distributed awards and prizes for the winners.	30

A.4. Web Site Maintenance :

Sr. No.	ACTIVITY	VOLUME
1	New and updated policies and procedures posted to the website	58
2	Folders	12
3	Newsletters	7
4	Posters, reminders and announcements	7
5	Presentations	4
6	Reports and studies	1
7	Useful links	18
8	Tips of the Week	36

A.5. Reviews / Studies / Data Analysis:

Sr. No.	ACTIVITY	VOLUME
1	Conscious Sedation Record in Endoscopy Unit	159
2	Patient assessment in PC Medicine	117
3	Pre-operative/Pre-procedure verification (TIME OUT process)	74
4	Informed Consent	270
5	Patient identification & verification during medication administration	166
6	Discharge Instructions	362
7	Multidisciplinary Patient/Family Education Form	361
8	Patient identification prior to blood transfusion	58
9	Informed Consent - Anesthesia	128
10	Hospital-Wide Indicators	50

A.6. Committee Activities:

Sr. No.	ACTIVITY	VOLUME
1	Participation in the BOT-Performance Improvement Committee	11
2	Preparation of hand-outs for the BOT Committee	11
3	Participation in the Accreditation Core Group	6
4	Recorded the minutes of Accreditation Core Group meetings	6
5	Performance Improvement Committee	11
6	Blood Utilization Committee	11
7	Task Force	6

A.7. Staff Education and Preparation of Educational Materials / Forms:

Sr. No.	ACTIVITY	VOLUME
1	Lectures presented to AUBMC staff	12
2	Lectures / workshops outside AUBMC (presented & attended)	15
3	Time Out poster	45
4	Conscious sedation form (draft)	2
5	Pre-operative note form	1
6	Weekly tips	36

A.8. Accreditation Surveys

Sr. No.	ACTIVITY	VOLUME
1	JCIA survey (October 16-20, 2008)	5
2	Survey visit schedule	5
3	Logistic preparations and arrangements (food, transportation, social activities, etc.)	5
4	Correspondence of follow-up actions	53
5	Mock surveys	2
6	Debriefing sessions	2

B. Risk Management

Sr. No.	ACTIVITY	VOLUME
1	Received, analyzed, recorded, and investigated patient-related incident reports	135
2	Reviewed patient records for potential medico-legal cases and major incidents	26
3	Participated in performing root cause analysis for sentinel events	3
4	Recorded the minutes of Risk Management Committee meetings	46
5	Received and forwarded the ECRI alerts on weekly basis	52
6	Prepared monthly statistical reports on patient-related incidents	12
7	Provided risk management education to medical / nursing staff	7
8	Coordination of the Informed Consents	4