

Accreditation & Risk Management Office ANNUAL REPORT

Date: Sept 2009

This report is prepared by the Accreditation and Risk Management Office at AUBMC on the activities and achievements during 2008-2009.

A. Accreditation

A.1. Policies and Procedures:

| Sr. No. | ACTIVITY | VOLUME |
|---------|--|--------|
| 1 | Drafted, prepared, edited, formatted, modified and coordinated reviews by concerned committees and individuals, obtained approvals, duplicated, Coordinated the reviews of new policies and 2 nd and 3 rd editions of policies and procedures, obtained approvals, and replaced the 2 nd editions in the policy and procedure manuals | 61 |
| 2 | Distributed AUBMC policies and procedures, and placed the hard copies in the 216 AUBMC policy and procedure manuals located in all departments / sections / units throughout the entire Medical Center and satellite locations. | 21 |
| 3 | Coordinated the development and maintained copies of the updated departmental policy and procedure manuals. | 56 |
| 4 | Circulated the soft copies and summaries of newly developed and modified policies and procedures. | 57 |
| 5 | Accreditation Correspondence etc | 543 |
| 6 | Forms | 3 |

A.2. Newsletter:

| Sr. No. | ACTIVITY | VOLUME |
|---------|--|--------|
| 1 | Prepared, designed, edited, obtained articles, duplicated, and distributed 500 copies of the Performance Improvement and Accreditation Newsletter throughout the Medical Center. | 5 |
| 2 | Posted the soft copies of the Performance Improvement and Accreditation Newsletter on the Accreditation and Risk Management website. | 5 |

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. | 3,000 |
| 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. | 892 |
| 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 | 57 |
| 2 | Folders | 9 |
| 3 | Newsletters | 5 |
| 4 | Posters, reminders and announcements | 10 |
| 5 | Reports, Forms and Presentations | 5 |
| 6 | Standards | 80 |
| 7 | Useful links | 18 |
| 8 | Tips of the Week | 47 |

A.5. Reviews / Studies / Data Analysis:

| Sr. No. | ACTIVITY | VOLUME |
|---------|--|--------|
| 1 | Presence of Admission & Progress Notes by Attending Physicians | 20 |
| 2 | Patient assessment in PC Medicine | 296 |
| 3 | Pre-operative/Pre-procedure verification (TIME OUT process) | 219 |
| 4 | Informed Consent | 322 |
| 5 | Pre-operative Note Form | 207 |
| 6 | Discharge Instructions | 213 |
| 7 | Central Line Insertion | 215 |
| 8 | Skin Marking Pre-operatively | 189 |
| 9 | Informed Consent - Anesthesia | 95 |
| 10 | Hospital-Wide Indicators | 768 |
| 11 | Confidentiality of Patient Information | 5 |
| 12 | Resuscitative Training | 161 |
| 13 | Follow-up on Accreditation Survey Findings | 6 |

A.6. Committee Participation:

| Sr. No. | ACTIVITY | VOLUME |
|---------|---|--------|
| 1 | Participation in the BOT-Performance Improvement Committee | 11 |
| 2 | Preparation of hand-outs for the BOT Committee | 11 |
| 3 | Sharps Injuries Prevention Initiative | 36 |
| 4 | Facility Management and Safety Committee | 11 |
| 5 | Performance Improvement Committee | 11 |
| 6 | Department Heads meetings | 11 |
| 7 | Blood Utilization Committee | 10 |
| 8 | Task Force meetings (Barcode, Infant Identification, National Indicators) | 19 |

A.7. Staff Education / Educational Materials / Publications:

| Sr. No. | ACTIVITY | VOLUME |
|---------|--|--------|
| 1 | Lectures presented to AUBMC staff | 16 |
| 2 | Lectures / workshops outside AUBMC (presented & attended) | 9 |
| 3 | Skin Marking poster | 90 |
| 4 | Skin Marking pocket calendars | 300 |
| 5 | Skin Marking pamphlets | 200 |
| 6 | Weekly tips | 47 |
| 7 | Journal publications (both in Human & Health) | 2 |
| 8 | Booklets (Keeping Up with Accreditation Standards & Consulting Services) | 2 |

A.8. Accreditation Surveys

| Sr. No. | ACTIVITY | VOLUME |
|---------|--|--------|
| 1 | Correspondence with accreditation agencies and follow-up actions | 53 |
| 2 | Scheduled Mock surveys | 4 |
| 3 | Scheduled Debriefing sessions | 4 |
| 4 | Documentation preparation for Accreditation Survey | 18 |

B. Risk Management

| Sr. No. | ACTIVITY | VOLUME |
|---------|---|--------|
| 1 | Received, analyzed, recorded, and investigated patient-related incident reports | 179 |
| 2 | Reviewed patient records for potential medico-legal cases and major incidents | 52 |
| 3 | Participated in performing root cause analysis for sentinel events | 2 |
| 4 | Recorded the minutes of Risk Management Committee meetings | 47 |
| 5 | Received and forwarded the ECRI alerts on weekly basis | 52 |
| 6 | Annual statistical report on patient-related incidents | 1 |
| 7 | Provided risk management education to medical / nursing staff | 6 |
| 8 | Response to enquiries regarding the informed consents | 17 |