

**Risk Management and Quality Assurance Program,
400.147 F.S.**

Responsibility of Facility Administrator

Risk Manager
designated person responsible for implementation and oversight

Letter of appointment or job description designating and empowering

Committee
*Risk Manager
Administrator
DON
Medical Director
3 other staff*

Meet Monthly

Letter of appointment or job description

Meeting Minutes for last 3 months indicate participation of required persons?

Incident Reporting
development and implementation

Incidents reported to Risk Manager within 3 business days

Used to develop categories of incidents which identify problem areas

How are incidents investigated, analyzed, and causes identified?

Clear methodology to track and trend for frequency of general categories and specific types?

Review 20% or at least 40 adverse incident reports within past 6 months.

Policies and Procedures
to implement the internal RM/QA program

Must include:
investigation and analysis of the frequency and causes of general categories and specific types of adverse incidents to residents

Assessment of resident care practices; QI Reports review routinely; Incident reports reviewed

Clear policies for investigation of incidents for identification of ANE

Staff will be questioned on each shift: facility reporting method, training received by staff; define adverse incident, reporting timeframes; ever reported?

Appropriate measures
to minimize risk of adverse incidents to residents

Education & Training in risk management and risk prevention for all nonphysician personnel

Initial Orientation	1 hour annually for non-physician staff working in clinical areas & providing resident care
---------------------	---

Analysis of resident grievances
that relate to care & quality of clinical services

How are grievances/incidents quickly included by the Committee?

