Risk Management for Residents Transitioning into Practice

THE RISK AUTHORITY
Tomorrow’s Risk Management Today
Introductions

Abdul Hamamsy, Esquire, Senior Litigation Specialist
Dana Orquiza, BSN, RN, JD, Director
Leilani Schweitzer, Patient Liaison
Dana Welle, DO, JD, FACOG, FACS, Physician Risk Consultant
What Does this Patient Want?

A video was presented here:

https://www.youtube.com/watch?feature=player_embedded&v=UgxXPhb9zjI
1. Risk Management Tip Sheet
2. Unanticipated / Unexpected Clinical Outcomes
3. Caring Conversations Simulation & Debrief
I. Risk Management Tip Sheet

1. Quick reference
2. Basic risk management information
### Inappropriate Documentation

<table>
<thead>
<tr>
<th>Physician Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Discipline Name</td>
<td>Guest Services/Pt relations.</td>
</tr>
<tr>
<td>Communication Reason</td>
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<tr>
<td>Test Name</td>
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<tr>
<td>Will come today or tomorrow.</td>
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<tr>
<td>Physician Response</td>
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<tr>
<td>Will speak to Dr. Likely Pt will be DC on Sat but might be DC tomorrow. Urine culture pending.</td>
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<tr>
<td>Will speak to RSN. Spoke w RSN and PA. Lee will speak to Dr.</td>
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<tr>
<td>Risk Management [1] Dana Groza</td>
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- Is Pt going to be DC? Pt requires advanced notice to get ride back to rupture perioperatively. She was told Risk Management woulld come and speak with her. She would like to know when someone will stop by? Pls call back. Than-

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ERROR REPORT:

On Thursday, November 18th, the patient received her second planned radiation treatment. During the treatment process, the therapist took images of the posterior thoracic spine, and advanced to treat the anterior thoracic spine. Through human error, the treatment field prescribed for the anterior lumbar spine and treated. The center of the field was 46 cm above the prescribed level and was centered in the neck, at the junction point between half-blocked lateral blocked thoracic spine fields. As a result, 20 cm of tissue superior to the planned superior border of the thoracic spine field was inadvertently irradiated.
II. Unanticipated / Unexpected Clinical Outcomes

Immediate Actions:

• Stabilize patient
• Notify attending MD
• Document clinical facts
• Incident report
• Risk Management / Insurance representative
What Happened?

Complication vs. Medical Error?
Medical Error Determined

What Happens Next?
III. Caring Conversations

Simulation & Debrief
1. Simulation
   • Discussion points/goals
   • Methods for achieving resolution
   • Determine additional resources to assist

2. Debrief
   • What went well?
   • What didn’t?
   • What did you learn?
Unexpected Death

- 2 year-old admitted for hydrocephalus
- RN decreases monitor alarm “volume”
- Code blue called; shunt placed
- Scan shows herniation
- CPR unsuccessful
Unexpected Death: Immediate Discussion

• You are the attending MD
• You discover the monitor was turned “off”
• Parents ask “What happened? Why?”

What will you discuss with the parents initially?

sorry
Debrief on Simulation #1

Group Discussion

1. What worked?
2. What didn’t work?
3. What did you learn?
Unexpected Death: Final Discussion

Full Review Completed:
1. Human factors – unintentionally turned “off”
2. Design error – no device fail safe

What will you discuss with the parents now?
What happened? Why did he die?
What improvements will you be making?
Debrief on Simulation #2

Group Discussion

1. What worked?
2. What didn’t work?
3. What did you learn?
Simulation #3

Surgical Error?

• 65 year-old female; retired tennis pro
• Consents for right medial (Golf elbow)
• Right lateral surgery completed (Tennis elbow)
• Lateral & medial surgery completed

What do you do now?
What do you tell the patient?
Debrief on Simulation #3

Group Discussion

1. What worked?
2. What didn’t work?
3. What did you learn?
I’ve learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.

Maya Angelou