

Risk Management Survey Entrance Conference Materials Checklist



A survey to determine compliance with section 395.0197, Florida Statutes and Chapter 59A-10, Florida Administrative Code, is being conducted to evaluate the hospital's internal risk management program. The materials that will be reviewed during this survey may include evidence or documentation of the following:

1. Risk Manager's and Risk Manager Designee: Job Description and Governing Body appointment.
2. Billing Requests for last 12 months.
3. Risk Management instruction including new hire orientation, annual updates, and the content of the Risk Management training.
4. Current employee and contracted staff roster with dates of hire and position title.
5. Description of the internal incident reporting system.
6. Documentation of the regular and systematic review of incident reports.
7. Documentation of the investigative and analysis process regarding the frequency and causes of incidents related to patient injury.
8. Documentation of the measures to minimize the risk of injuries to patients.
9. Description of categories of incidents and grievances related to patient care and quality of medical services.
10. Patient grievances or complaints received by the facility during the past 12 months.
11. The agenda and attendance list of the governing body meetings for the past 12 months to verify the inclusion of quarterly Risk Management Summary Reports.
12. The agenda and attendance list of the Risk Management Committee Meetings of all committees of which the Risk Manager has been a member for the past 12 months.
13. All Risk Management Summary reports to the Governing Board for the past 12 months.
14. Facility Organization Chart with key staff & facility contact numbers.
15. QA or QI Committee agendas and attendance lists for the past 12 months.
16. All allegations of sexual abuse/misconduct during last 36 months.
17. Documentation of returns to surgery.
18. Patient Safety Plan and Committee Meeting agendas and attendance lists as well as a committee description and the name of the Non-employee Representative.

Additional information documents, records, or interviews with staff may be requested at the time of the survey. It should be noted that the Agency shall have access to all licensed facility records necessary to carry out the provisions of s. 395.0197, Florida Statutes (F.S.) pursuant to s. 395.0197 (13) and (15), F.S. As mandated in Section 395.0197(14), F.S., the meetings of the committees and governing board of a licensed facility held solely for the purpose of achieving the objectives of risk management shall not be open to the public under the provisions of Chapter 286, F.S. The records of such meetings are confidential and exempt from s. 119.07(1), F.S., except as provided in s. 395.0197(13), F.S.

The information provided may not include documentation maintained in a Patient Safety Evaluation System in conjunction with participation in a federally certified Patient Safety Organization. In that case, the hospital may provide alternate information with sufficient detail to demonstrate compliance with the requirements under review.