



Health Center FTCA Program CY 2021 and 2022 Deeming and Re-Deeming Application – Risk Management Webinar

March 18, 2021

**Office of Quality Improvement
Federal Tort Claims Act (FTCA)
Bureau of Primary Health Care (BPHC)
Health Resources and Services Administration (HRSA)**



Learning Objective

Provide detail technical assistance for the Risk Management section of the FTCA application



Risk Management Technical Assistance



What is a Risk Management Program?

- It is a program designed to:
 - Identify potential events that may affect the health center
 - Protect and minimize risks to patients, services, and employees
 - Ensure the continuity of safe operations
 - Mitigate legal, medical liability, and higher litigation costs
 - Comply with applicable laws and regulations

Risk Management Program Benefits

- **Your health center can:**
 - Secure organizational commitment to improvement
 - Review patient injuries and near misses to minimize future occurrence
 - Promote system improvement and liability reduction
 - Encourage open communication regarding patient adverse outcomes
 - Improve the reliability of patient care processes
 - Establish a culture of safety, one that is fair-minded but holds individuals accountable



What Are the Key Components of a Risk Management Plan? (1/2)

- Claims and insurance management
- Complaint resolution
- Confidentiality and release of information
- Compliance efforts
- Safe and secure use of technology
- Event investigation, root-cause analysis, and follow-up
- Proactive analysis
- Provider and staff education
- Competency validation
- Credentialing and privileging requirements
- Systems for monitoring and tracking referrals
- Reporting and management of adverse events and near misses
- Trend analysis
- Performance improvement strategies



What Are the Key Components of a Risk Management Plan? (2/2)

- Incident report summaries
- Reports and trends of adverse events or unsafe conditions
- Medical record review/peer reviews
- Patient satisfaction surveys
- Patient complaints
- Patient safety alerts
- Policy/procedure development



Risk Management Training Program

- **The main goals of a training plan are to create a culture of safety:**
 - Promote safe and effective patient care practices
 - Minimize errors, events, and system breakdowns
 - Minimize effects of adverse events when they occur
 - Minimize losses to the health center by being proactive
 - Maintain a safe working environment
 - Facilitate compliance with regulatory, legal, and accrediting agencies
 - Protect the health center's financial resources
 - Protect human and intangible resources



Risk Management Training Program Elements

- Outline the process for selection of training requirements
- Outline a process for tracking training attendance and completion
- Show how training is connected back to performance reviews and credentialing and privileging
- Include process for addressing non-compliance with training requirements
- Include sources of training



Who Needs Risk Management Training?

- **Risk management is everyone's responsibility:**
 - Providers
 - Clinicians
 - Managers
 - Volunteers
 - Staff

- **Risk management spans the entire operation and most functional areas**

- **Risk management program is administered through the risk manager**



Where to Start

- **Write a plan**
 - What topics will be covered?
 - Which staff will complete training?
 - Which training programs will be used?
 - How many training programs will be required?
- **Specialized training**
 - Based on position or specialty
- **Include source of training and mode of delivery**
- **For planning assistance see ECRI's [website](#)**



Risk Management Training Documentation

- Documentation of the training plan includes the following:
 - Staff name, title, type of training
 - Process for tracking training attendance and completion
 - Process for dealing with non-compliance with training requirement

Staff Name	Staff ID Number	[Name of Training Program]			[Name of Training Program]		
		Date Completed	CEUs Earned	Retraining Due	Date Completed	CEUs Earned	Retraining Due
Clinical Providers (Family Practice)							
Great Provider, MD		5/2/2015	1	5/2/2018			
Tracy Practitioner, CRNP							
[Staff member name, designation]							
Nursing							
Pat Smith, RN							
Maria White, LPN							
[Staff member name, designation]							
Administration							
[Staff member name, designation]							
Behavioral Health							
[Staff member name, designation]							



Staff Training Completion and Monitoring

Staff Name	Staff ID Number	[Name of Training Program]			[Name of Training Program]		
		Date Completed	CEUs Earned	Retraining Due	Date Completed	CEUs Earned	Retraining Due
Clinical Providers (Family Practice)							
Great Provider, MD		5/2/2015	1	5/2/2018			
Tracy Practitioner, CRNP							
[Staff member name, designation]							
Nursing							
Pat Smith, RN							
Maria White, LPN							
[Staff member name, designation]							
Administration							
[Staff member name, designation]							
Behavioral Health							
[Staff member name, designation]							



Tracking Procedures Overview

- Documentation and implementation of the following tracking procedures are aspects of risk management that demonstrates how the health center mitigates risk:
 - Referral tracking
 - Hospitalization tracking
 - Diagnostic tracking



Referral Tracking System Elements

- **Tracking system**
 - Referral origin
 - Monitoring status
 - Administrative and clinical details

- **Timely provider follow-up**
 - Specific process and time frames for transmission and receipt of results
 - Specific process and time frames for follow-up of untimely receipt of results

Referral Tracking Procedure Elements (1/3)

- Procedure purpose
- Defining referral types
- Initiation
 - By whom
 - Process
- Referral tracking
 - Frequency
 - Responsible party
 - Documentation
 - Patient follow-up
 - Status reports
- Documentation
- Patient compliance



Referral Tracking Procedure Elements (2/3)

- **Tracking system may include:**
 - Referral origin
 - Monitoring status
 - Administrative and clinical details
- **Timely provider follow-up to include:**
 - Specific process and time frames for transmission and receipt of results
 - Specific process and time frames for follow-up of untimely receipt of results
- **Staff knowledge of processes**
 - Ensure that all staff know the procedure and it is available in accessible place
 - Ensure that all staff are fully implementing procedure via audits



Referral Tracking Procedure Elements (3/3)

- **Documentation may include:**
 - Use of medical records/EHR
 - Follow-up efforts
 - Missed referral appointments
 - Frequency of attempts
 - Attempt methods

Hospitalization Tracking Elements (1/2)

- **Tracking and monitoring system for receiving information regarding hospital or emergency department (ED) admissions. At a minimum the tracking system must include:**
 - Patient information
 - Date of admission or visit
 - Date of notification
 - Reason for visit, if known
 - Documentation received
 - Documentation requested (includes date requested)
- **Documentation of follow-up initiated with hospital and/or patient (includes date initiated)**

Hospitalization Tracking Elements

(2/2)

- **The health center has identified:**
 - Staff members responsible for receiving ED and hospital admission information
 - A monitoring mechanism for receiving hospital and ED admission information
 - A mechanism to follow up with the patient, provider, or outside facility to request pertinent medical information



Diagnostic Test Tracking Procedures (1/5)

- Specific test result time frames
- Communication of test results
- Contingency plans
- Follow-up system
- Accountability
- Addressing patient compliance
- Documentation



Diagnostic Test Tracking Procedures (2/5)

- **Diagnostic procedures elements may include:**
 - Patient information
 - Date test ordered
 - Ordering provider
 - List of test orders
 - Date test results received
 - Provider who reviewed results
 - Follow-up recommended by provider
 - Communication of results to patient



Diagnostic Test Tracking Procedures

(3/5)

- For normal results, the elements reviewed include:
 - Communication to the provider
 - Verification that results are within therapeutic range
 - Communication to patient through established processes for routine results
 - Patient contact efforts to include date, time, method, and person contacted
 - Documentation of successful & unsuccessful attempts
 - Other clinical information as appropriate



Diagnostic Test Tracking Procedures (4/5)

- For abnormal results, the elements reviewed include:
 - Communication to the provider
 - Time frame of communication to patient
 - Patient contact efforts to include date, time, method, and individual contacted
 - Documentation of successful & unsuccessful attempts
 - Other clinical information as appropriate
- **Differentiating abnormal versus critical results is key**



Diagnostic Test Tracking Procedures (5/5)

- For critical values, the following elements should be present:
 - Time frame to communicate to patient
 - Acceptable means to communicate to provider
 - Procedures to contact back-up provider
 - Measures to contact patient
 - Documentation of patient contact attempts
 - Other clinical information as appropriate
 - Tracking and monitoring of critical values
 - Audit reports to QI/QA



ECRI: Clinical Risk Management Services

- Risk management services provided on behalf of HRSA
- Services are provided at no cost to health centers, free clinics, and look-alikes
- Log in to the website to access:
 - Assessment checklists
 - Guidance
 - Toolkits
 - Archived webinars, National Speaker Series programs, and Virtual Conference
 - Courses for CME/CNE credit
 - Infographics
- Resources cover risk management, tracking tools, credentialing and privileging, online electronic fetal monitoring training, infection control, claims management, quality improvement, diabetes, and various procedure templates and tools



ECRI: Clinical Risk Management Resources

- Sample resources are available through ECRI at the following website: <http://bphc.hrsa.gov/ftca/riskmanagement>
- These resources include:
 - Toolkits
 - Sample policies and tools
 - Education and training tools
 - Self-assessment questionnaires
 - Guidance articles
 - Monthly Get Safe! assessment checklists



Additional Application Resources- Risk Management

- Added to Risk Management Toolkit:
 - FTCA Application Procedural Demonstration of Compliance Tool: Risk Management—Annual Report to Board Edition
(https://www.ecri.org/components/HRSA/Documents/PT/PSRM/508_FTCA_Compliance_Tool_Risk_Management_Annual_Report_Board.docx)
- **FTCA Application Demonstration of Compliance Tool: Risk Management Training Plan Edition**
 - (https://www.ecri.org/components/HRSA/Documents/PT/PSRM/508_FTCA_Compliance_Tool_Risk_Management_Training_Plan.pdf)



Additional Application Resources- Credentialing and Privileging

Added to Credentialing and Privileging Toolkit:

- FTCA Application Procedural Demonstration of Compliance Tool: Credentialing and Privileging Edition
(https://www.ecri.org/components/HRSA/Documents/SPT/PSRM/508_FTCA_Compliance_Tool_Credentialing_Privileging.pdf)
- Credentialing and Privileging Tracking Tool
(https://www.ecri.org/components/HRSA/Documents/SPT/PSRM/508_Credentialing_Privileging_Tool.xlsx)



Sample ECRI Tracking Policies & Toolkits

[Clinical Risk Management Services - Tools](#)

Test Tracking and Follow-Up Toolkit

Published 2/9/2017

Your browsing history 

 SAVE

 PRINT

 DOWNLOAD

Because the processes related to ordering and following up on diagnostic tests are complex and involve multiple individuals—including patients, physicians, other providers, administrative staff, and laboratory personnel—there are many opportunities for errors to occur. Such errors may result in missed or delayed diagnoses or delayed interventions to improve care, thus putting patients at risk for adverse outcomes.

The toolkit contains a sample policy, lists of critical tests, test tracking logs, sample letters to patients about test results, and other tools and resources that health centers and free clinics can download and adapt for their own use.

Toolkit Documents

- [Sample Policy: Reporting Test Results](#)
- [Algorithm for Outpatient Critical Value Reporting Process](#)
- [Algorithm for Outpatient Testing Process](#)
- [Critical Test Value Communication: Adult Blood Gases and Chemistry](#)
- [Critical Test Value Communication: Adult Cardiology](#)
- [Critical Test Value Communication: Adult Radiology](#)
- [Diagnostic Test Tracking and Follow-Up](#)
- [Sample Letter to Patient about Test Results](#)
- [Test Tracking Log for Physician Practices](#)
- [Tracking Hospitalizations: Patient Card and Procedures](#)

RELATED RESOURCES

- [Test Tracking and Follow-Up](#)



Additional Resource Information

Ambulatory Care Risk Management Certificate Program

- **Course topics include the following:**
 - Introduction to risk management and patient safety
 - Risk identification
 - Culture of safety
 - Risk evaluation and analysis
 - Developing and maintaining a patient safety program
 - Engaging staff in patient safety programs
 - Integrating safety into daily operations
 - Measuring and monitoring safety

Contact: email Clinical_RM_Program@ecri.org or call 610-825-6000, ext. 5200



HRSA/FTCA Resources

- **Policy and Application Resources:**

- <https://bphc.hrsa.gov/ftca/about/index.html>

- **Phone:**

- Health Center Program Support
- 1-877-464-4772, option 1
- 8:00 AM to 5:30 PM (ET) M-F (except Federal holidays)

- **Online:**

- Contact form:
<https://bphccommunications.secure.force.com/ContactBPHC/BPHC>Contact Form>



Thank You!

Federal Tort Claims Act (FTCA) Program

Bureau of Primary Health Care (BPHC)

Health Resources and Services Administration (HRSA)



[Health Center Program Support](#)



877.464.4772

bphc.hrsa.gov



Sign up for the *Primary Health Care Digest*





Connect with HRSA

To learn more about our agency, visit

www.HRSA.gov



Sign up for the HRSA *eNews*

FOLLOW US:

