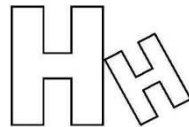


Business Risk Management Plan

Reviewed 3 monthly at Service Review meetings



© Healthcare Help

Business Risk Management Planning

FOREWORD

References:

SNZ HB 8152: 2001 Sentinel Events Workbook. Process for standardized Investigation & Reporting

SAA / SNZ HB 228:2001 Guidelines for Managing Risk in Healthcare

The Ministry of Health [by expecting us to measure up to certain standards] is asking what risks our services face, & how we control for these risks.

This template is designed to help us look at possible risks that our services face today. It also suggests some solutions. However, it can only be a truly robust tool if it is:

1. Customised to your service
2. Updated regularly [perhaps at 3 monthly service review meetings]
3. In response to exception reporting [those incident forms alerting us to what has gone wrong].
4. Acted upon.

Business Risk Management Plan

RISK LOSS CONTRACT	Risk loss computer files	FIRE RISK	RISK THEFTS
LOSS ESSENTIAL SERVICES	Risk Serious Client Complaint	CLIENT HURT	Insufficient Clients
LOSS MANAGER NO RN	RISK PERSONAL GRIEVANCE	Serious Infection Outbreak	Risk Insufficient Staff
Building Equipment Maintenance Risks	Injury Risk / OSH INVEST	OVER BUDGET	NATURAL DISASTER

This is a short DEMO. Only the blue links work. Purchase & customise to your organisation customise from [Resource Library](#).

Risk of Insufficient Clients

Impact on Service

- Nuisance
- **Not good**
- Really bad
- Catastrophic

Good provider

Likelihood

- Unlikely
- **Possible**
- Likely
- Almost certain

Preventative Actions

1. Effectively promoting & marketing our service
 - Brochure of Service available to new prospective clients.
 - Welcome Pack updated: _____
 - Good relationships with NASC assessors
 - Website: _____
 - Person updating with Eldernet / similar is:
2. Good reputation
 - Surveying & meeting clients and prospective clients needs
 - Promotion of the service by the workforce of carers
 - Promotion of the service by satisfied clients
3. Satisfaction Surveys and responding positively to information gathered from same
 - Surveys for information not for endorsement [in 2009 Internal Audit Work Book]
 - a) Survey of Personal Cares
 - b) Satisfaction Survey
 - c) Survey of Menus & Satisfaction with Food [resident] New Standard: Heartbeat Foundation Guidelines
4. High calibre of staff – recruit & retain. Good inductions.
5. An established culture that residents and staff enjoy.

Injury / OSH Investigation

Impact on Service

- Nuisance
- **Not good**
- Really bad
- Catastrophic

Safe environment

Likelihood

- Unlikely
- **Possible**
- Likely
- Almost certain

Preventative Actions

- **Good Health & Safety Management System or ACC Discount Program [Taking all practical steps to keep people safe].**
Level Sought / Attained = Tertiary / Secondary
- Robust Significant Hazard Register [review as part of WSMP process]. Reviewed: _____
- Hazard ID / Building Maintenance Log maintained = **SAFE ENVIRONMENT**

RISK OF RESIDENT / STAFF / VISITOR HURT MINIMISED

1. Good Care Planning assessing each resident's risk & preventing possible harm at entry
2. Includes falls risk assessment
3. Hazard ID [things that might cause harm in the Home] maintained by staff ongoing
4. Monthly walk around scoping out new hazards [2 people].
5. Liaison with other services to provide support & promote safe environment
6. All staff well inducted & trained staff to provide good care
7. Staff participation in Health & Safety encouraged
8. Good understanding of client needs & differences by staff.
9. Adequate staffing levels
10. Help line to RN, Manager or other sufficiently skilled person available 24 / 7

Building Maintenance Problem

Impact on Service

→ **Nuisance**

- Not good
- Really bad
- Catastrophic

Safe Environment

Likelihood

→ **Unlikely**

- Possible
- Likely
- Almost certain

Preventative Actions

- Building owned by: _____
- Building Warrant of Fitness maintained & current. Good liaison with local Council & Fire Department.
- Any alterations / additions have resource consent.
- Alterations of additions are planned with relevant expert input to meet latest standards & guidelines
- Hazard ID / Building Maintenance Log
 - Form to log any hazards & maintenance easily accessed by all staff
 - Staff trained to record hazards
- Monthly walk around to scope out new hazards
- Fire service checks monthly by: _____
 - Functional fire extinguishers
 - Robust First Aid kits
- Plant Listed in audited accounts [replacement criteria]
- Dedicated Maintenance Person / Known contractors for maintenance: _____
- Exits are not blocked [good access & egress]
- Fire exits will open in emergency including power cut. Digital keypads are not applied to Fire exits.

Risk Serious Infection / Outbreak

Impact on Service

- Nuisance
- Not good
- **Really bad**
- Catastrophic

Robust IC Program

Likelihood

- Unlikely
- **Possible**
- Likely
- Almost certain

Preventative & Forward Planning Actions

- All staff trained in Standard & Contact Precautions at Induction
- All staff trained to understand Norovirus risk.
- Avion Flu & H1N1 [Swine Flu] Robust Outbreak Planning – help lines known.
- Ongoing staff education to extend staff knowledge regularly
- Participation in Healthcare Help Nationwide Benchmarking Stats Program
- Staff trained to provide good support for residents needing help with personal hygiene
- This documented in Care Planning & family well informed
- Infection Control Team backed up by sufficiently well trained person
- Regular Quality Reviews of Infection Control Program
- Expanded policy to meet new multi-resistant organisms [01.08.08]
- Careful screening before taking resident from Hospital [risk time for entry of infection].
- Cluster infections inspire emergency IC Meeting
- Support from Diagnostic MedLab or similar
- Constant attention to environmental cleaning
- Changes to the facility require expert consultation & approval to new guidelines / audit tools & resource consent approval prior to start.
- Renovations & extensions are first discussed at Service Review Meetings Agenda Item: Purchasing Safety Review. Thus there is linkage with strategic & quality planning.

Impact on Service

- Nuisance

→ **Not good**

- Really bad
- Catastrophic

Risk of Personal Grievance

Good Employer

Likelihood

- Unlikely

→ **Possible**

- Likely
- Almost certain

Preventative Actions

Robust Employment Agreement

- Clearly states what actions are Professional Misconduct / Serious Misconduct
- Employment Agreements contain 'Process in case of Personal Grievance' & links to advisors to help employees
- Training backs this up at induction & ongoing

Understand Correct Process to follow where Misconduct suspected.

- Have documentation: 'Verbal Warning', 'Written warning', 'Final written warning', 'Suspension Notice', 'Notice of Disciplinary Meeting', 'Dismissal Letter' & 'Personal Grievance Notification'. [Available from EMA & HH.NET].
- If employee is removed pending investigation this is on full pay. Ensure a robust & fair investigation.

Use of Mediators

- Always suggest support person for those under investigation [in writing]
- Use person with HR ability to assist as needed. Nominated person is: EMA representative.

Acting in Timely Fashion

- Investigating incidents as they occur rather than all at one time at a later date
- Resolving issues as they occur rather than letting them build

Staff Meetings a Forum for Suggestion

- By listening to employee suggestion or complaint [as an agenda item]
- Payroll out on time / robust tracking of leave taken & hours worked.
- Understanding Holidays Act & paying accordingly [with good explanation]

Review Log

Date of Review	Reviewed by	Comment