

Nurse Leadership  
Prep Course for CDONA

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NADONA

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Lesson Nine – Risk Management

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Contact Hour Accreditation

- This CNE activity has been provided by Ohio Nurses Association
- Learners must attend the entire session (live presentation or 11 webinars) and receive a passing post-test with a score of at least 80% in order to receive a certificate of contact hours.
- There is no conflict of interest for anyone with the ability to control content of this activity.
- This nursing continuing professional development activity was approved by the Ohio Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. (OBN-001-91)
- Approval Valid through June 1, 2022

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### Disclosures

- Nancy has no relationships with commercial entities related to the healthcare industry.
- Nancy is the Assistant Director of Education for NADONA

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### Objectives

- The participant will be able to
  - Explain the 5 components of Risk Management
  - Define what is an unusual occurrences
  - List 3 situations which would require an incident report
  - Describe the difference between a living will and a POLST document

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### Risk Management 101

- Risk management is the process of identifying, assessing and controlling threats to an organization's capital and earnings.
- These threats, or risks, could stem from a wide variety of sources, including financial uncertainty, legal liabilities, strategic management errors, accidents and natural disasters.
- **Risk management strategies and processes**
  - **Risk identification.** The company identifies and defines potential risks that may negatively influence a specific company process or project.
  - **Risk analysis.** Once specific types of risk are identified, the company then determines the odds of it occurring, as well as its consequences. The goal of the analysis is to further understand each specific instance of risk, and how it could influence the company's projects and objectives.
  - **Risk assessment and evaluation.** The risk is then further evaluated after determining the risk's overall likelihood of occurrence combined with its overall consequence. The company can then make decisions on whether the risk is acceptable and whether the company is willing to take it on based on its risk appetite.
  - **Risk mitigation.** During this step, companies assess their highest-ranked risks and develop a plan to alleviate them using specific risk controls. These plans include risk mitigation processes, risk prevention tactics and contingency plans in the event the risk comes to fruition.
  - **Risk monitoring.** Part of the mitigation plan includes following up on both the risks and the overall plan to continuously monitor and track new and existing risks. The overall risk management process should also be reviewed and updated accordingly.

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**Risk Management 101 cont.**

7 Risk Management Approaches

- **Risk avoidance.** While the complete elimination of all risk is rarely possible, a risk avoidance strategy is designed to deflect as many threats as possible in order to avoid the costly and disruptive consequences of a damaging event.
- **Risk reduction.** Companies are sometimes able to reduce the amount of effect certain risks can have on company processes. This is achieved by adjusting certain aspects of an overall project plan or company process, or by reducing its scope.
- **Risk sharing.** Sometimes, the consequences of a risk is shared, or distributed among several of the project's participants or business departments. The risk could also be shared with a third party, such as a **vendor** or business partner.
- **Risk retaining.** Sometimes, companies decide a risk is worth it from a business standpoint, and decide to retain the risk and deal with any potential fallout. Companies will often retain a certain level of risk if a project's anticipated profit is greater than the costs of its potential risk.

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**Risk Management**

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- The Nursing Home Industry represents unique risks and liabilities unlike any other industry.
- Residents in nursing homes require around the clock care.
- Typically made up of elderly residents and younger adults with physical or mental disabilities, they have a nursing and aide staff at their disposal 24 hours a day.
- Because of the residents unique needs, the risks they face are highly specific.
- The goal of nursing homes is to provide care for frail and impaired individuals, focusing on not only their individual care but an improved quality of life.
- Here are a few of the risks one must be aware of when working with nursing homes.
  - **Falls.** Slips or tripping by any resident in a nursing home.
  - **Nutrition.** Providing adequate, nutritious food and drink, including monitoring individual needs or clinical condition.
  - **Medical care.** Medication management, and attention to the prevention of drug-related problems including under-prescribing, improper drug selection, and over-dosage.
  - **Employee Liability.** Make sure staff adhere to the correct standards of care for the residents, 24 hours a day, and are vigilant for any signs of abuse or lack of care.
  - **Sanitation.** Maintaining clean and well-groomed facilities, as well as taking measures to prevent, contain, and treat infections within a nursing home facility.
  - **Disaster response.** Having a disaster response plan in place, in the event of an evacuation, natural disaster, or other emergency. Plan should include ways to contact family members, as well as evacuation routes and procedures.

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**Risk Assessment Tool**

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- Contains audit evaluation methods to make sure that documentation & a hands on approach are used.
  - Some methods are:
    - Identification of specific medical problems that increases the risk for residents or staff
    - Ability to adjust the tool for the population being assessed
    - Means to clarify for nurses, nurse aides and family regarding a resident status ( SBAR)
  - Samples of Assessment Tools
    - Facility Assessment
    - Return to Hospitalization
    - SBAR

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13 Incident Reports

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14 Unusual Occurrence

- Outbreak of any communicable disease
- Poisoning
- Death of a resident, employee or visitor because of unnatural cause
- Threatened or actual employee walkout
- Inoperable emergency system-call light, fire alarm

Strange Stories & Odd Encounters

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15 Incidents/Accidents

- Allegation of Abuse, physical or verbal
- Allegation of Neglect
- Allegation of Misappropriation of Funds
- Elopement
- Medication Errors
- Fall, Burn, Injury of Unknown Origin
- Theft
- Sexual allegation
- Resident to Resident, verbal or physical
- Others

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## Reporting

- All Incidents and Accidents must be immediately reported to the Administrator and DON.
- Not all are State Reportable
- Teach your staff to Report to YOU and YOU and the Administrator will decide if it is Reportable. (many times Incidents/Accidents are not reported timely because the Supervisor or Charge Nurse did not think it was Reportable to State.)

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## Examples

- Coffee Burn
- Cigarette Burn
- Elopement
- Resident to Resident multiple physical hits to different residents
- Sexual allegation and Resident moved to Dementia Unit
- Coumadin Medication Error
- Left on bedpan
- Thumped Resident on top of head

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## DON Role in Risk Management

- DON Responsibility in Risk Reduction
  - Establish Policies & Procedures for nursing staff
    - Notifying physicians of change in conditions such as
      - Abnormal lab values
      - Fluid imbalances
    - Prevention of resident complications through critical thinking
  - Ensuring staff development programs have trainings of
    - Good Communication
    - Customer Relations
- Must monitor, Investigate and analyze all Incidents
- Must ensure that the documentation of Incidents is complete and accurate.
- Validate that the care plan has been modified according to the interventions needed following an incident

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**19** DON Documentation

- Have file for each unusual occurrence
  - Detail a report of the incident and actions you have taken
    - Complete investigation
    - Witness reports ( Signed and dated by witnesses)
    - Drawing if appropriate of incident
    - State report
    - Information related of notifying administrator of event
- Track all events in some manner
  - Looking for trends / patterns
    - Calculate and compare the rates of events over a specific period of time
- Determine what is the root cause
  - Asking Why, Why, Why
  - What happened

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**20** DON Documentation cont.

- Root Cause cont.
  - When did it happen
  - Why did it happen
  - Who was involved
  - How did it happen
- Identify Interventions taken
- Outcome of Interventions
- Copies of care plan changes ( if appropriate)
- Report at QAPI on tracking and specific serious events
- Present approaches and action plans to be implemented if certain systems require modification
- Record recommendations by committee

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**21** Incident Reports

- What Requires an Incident Reports
  - Any unusual event or occurrence or situation
- When should it be filled out
  - Immediately
  - Or as soon as it is found or discovered
- What is a reportable event
  - Each state has a different interpretation
  - Any injury
  - Any situation that requires medical attention ( ER)
- When does it need to be reported?
  - Within 2 hours
  - Error on the side of caution and report

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Other Questions

| QAPI Number |
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### AD HOC QAPI BENEFITS

- Showed you gathered a Team to quickly discern what happened and what to do about it.
- Shows you are initiating immediate Action to prevent recurrence.
- Shows you Take Incidents and Accidents seriously.
- Likely to get you a Past Non-Compliance Flag. Definition of Past Non-Compliance: 1. Your facility was in substantial Compliance before the Incident occurred. (From either a standard or complaint Survey). 2. Occurred before Surveyors were in the building. 3. Was corrected before Surveyors in your Building. (You don't have much time if the Incident was serious).
- Past Non-Compliance does not require a Plan of Correction.
- Penalties are usually less as correction was immediate.

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### Legal Implications

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**31** Advance Directives

- Definition
  - is a legal document in which a person specifies what actions should be taken for their health if they are no longer able to make decisions for themselves because of illness or incapacity.
  - In the U.S. it has a legal status in itself, whereas in some countries it is legally persuasive without being a legal document.
- Types of Advance Directives
  - Living Will
    - is a legal document used to state certain future health care decisions only when a person becomes unable to make the decisions and choices on their own
    - only used at the end of life if a person is terminally ill (can't be cured) or permanently unconscious.
    - describes the type of medical treatment the person would want or not want to receive in these situations.
    - It can describe under what conditions an attempt to prolong life should be started or stopped.
      - This applies to treatments including, but not limited to dialysis, tube feedings, or actual life support (such as the use of breathing machines).
    - 2 physicians must confirm that you are unable to make your own medical decisions and you are in a medical condition that is specified by your state law as terminal illness or permanent unconsciousness.

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**32** Advance Directives cont.

- Types of Advanced Directives cont.
  - Durable Power of Attorney for healthcare
    - is a legal document in which you name a person to be a **proxy** (agent) to make all your health care decisions if you become unable to do so
    - A person's physician must certify that the person is unable to make their own medical decisions.
  - POLST (Physician Orders for Life Sustaining Treatment)
    - Helps describe your wishes for health care, but it is not an advance directive.
    - Has a set of specific medical orders that a seriously ill person can fill in and ask their health care provider to sign
    - Has to be signed by a qualified member of your health care team, such as your doctor.
    - Emergency personnel, like paramedics and EMTs (Emergency Medical Technicians) **can't** use an advance directive, but they **can** use a POLST form.
    - Without a POLST form, emergency personnel are **required** to provide every possible treatment to help keep you alive.

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**33** Advance Directives cont.

- Do not resuscitate (DNR) orders**
  - Means that if you stop breathing or your heart stops, nothing will be done to try to keep you alive.

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### Legal Terms cont.

- Deposition
  - The **testimony** of a party or witness in a civil or criminal proceeding taken before trial, usually in an attorney's office.
  - Depositions are a discovery tool. (**Discovery** is the process of assembling the testimonial and documentary evidence in a case before trial.)
  - Persons who are witnesses but not parties to the lawsuit
  - Persons who are witnesses but not parties to the lawsuit must also be served with a subpoena (a command to appear and give testimony, backed by the authority of the court)
- Statute of Limitations
  - A type of federal or state law that restricts the time within which legal proceedings **may** be brought
  - Varies from state to state
  - Varies from law to law

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### Legal Terms cont.

- Respondent Superior
  - A common law doctrine that makes an employer liable for the actions of an employee when the actions take place within the scope of employment
- Plaintiff - a person who brings a legal action
- Defendant - a person or group against whom a criminal or civil action is brought : someone who is being sued or accused of committing a crime
- Mal Practice
  - a dereliction of professional duty or a failure to exercise an ordinary degree of professional skill or learning by one (such as a physical) rendering professional services which results in injury, loss, or damage.
  - an injurious, negligent, or improper practice
- Guardianship
  - Conservatorship is appointed by a judge to manage the financial affairs and/or daily life of another due to physical or mental limitations, or old age
  - Guardian of Property - is a court-appointed person who essentially steps into the shoes of a person that is considered legally incapable (such as a minor or incapacitated person) to make financial decisions and carry out financial transactions on that person's behalf. The Guardian, or Guardians, may pay bills, invest money and make purchases, among other things.
  - Power of Attorney - a legal instrument authorizing one to act as the attorney or agent of the grantor
  - Guardians are more legally appointed to manage the affairs of a person incapable of acting on behalf of him self a minor or a person of unsound mind.
- Beneficence
  - the quality or state of doing or producing good : the quality or state of being **beneficent**
- Battery
  - an offensive touching or use of force on a person without the person's consent

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### Resources

- <https://www.kbunderwriters.com/risk-management-for-nursing-homes-part-1/>
- <https://search.compliance.techtarget.com/definition/risk-management>
- [https://www.aarp.org/caregiving/financial-legal/free-printable-advance-directives/3CM?KNC=DSO&Adobe\\_Google\\_Caregiving\\_AdvancedDirectives\\_Caregiver&\\_kwckid=A1452010173255175294414173255123973147&of\\_id=W-6qQAAEIwYlRGW201907162238253](https://www.aarp.org/caregiving/financial-legal/free-printable-advance-directives/3CM?KNC=DSO&Adobe_Google_Caregiving_AdvancedDirectives_Caregiver&_kwckid=A1452010173255175294414173255123973147&of_id=W-6qQAAEIwYlRGW201907162238253)
- <https://www.cancer.org/treatment/finding-and-paying-for-treatment/understanding-financial-and-legal-matters/advance-directives/types-of-advance-health-care-directives.html>
- <https://legal-dictionary.thefreedictionary.com/deposition>

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40 Questions??????

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