

COPIC Tip:

Risk Management 101: Systems and Processes

Acknowledging that practice systems and processes are a big part of managing patient safety, below are some key considerations and guidelines.

Ensure that standardized systems are in place for the following:

- **Patient follow-up**—Alerts a practice as to who must return to the office or see a consulting or referral physician, and by what date this should occur.
- **Test tracking**—Identifies all “essential” diagnostic tests ordered (either done within or outside the office) and alerts the office to missing reports in a timely fashion.
- **Reviewing and signing all reports and correspondence**—Reinforces that nothing gets missed, prior to filing.
- **Notification of test results**—Tracks that patients are properly informed of test results.

Understand the purpose of informed consent

- The **informed consent process** is obtaining consent by a discussion of risks and benefits of a particular procedure or treatment, alternatives, risks of doing nothing, and any special risks for a particular patient. This should be documented in the medical record.
- An **informed consent form** is used to document the informed consent process. The presence of a form does not release the provider from the duty of obtaining consent. It should be completed by the provider (or other clinician) and the patient with signatures stating that the patient understands the risks and benefits.
- Others may assist in the informed consent process, but **the provider must have the final discussion with the patient to answer questions and ensure understanding.**
- **Informed refusal** occurs when a patient refuses a recommended medical treatment based upon an understanding of the facts needed to make a decision. The patient’s refusal should be documented in the medical record.

Maintain the required oversight of allied health professionals (AHPs)

Compliance rules for supervising AHPs varies across different states and by role. **Providers should be familiar with and understand the requirements for their particular state.** Common questions outlined in regulations include:

- What services are AHPs allowed to perform independently and which ones require direct supervision?
- What are the supervisory requirements and who is designated as the supervising physician?
- What qualifications need to be reviewed and how often?
- What documentation or agreements need to be in place and how often do these need to be updated?