Risk Management Issues in Postmenopausal Health Care

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RISK MANAGEMENT ISSUES IN POSTMENOPAUSAL HEALTH CARE
Outline

• Risk management (RM)
• Postmenopausal health care (PMHC)
• RM in PMHC:
  What could go wrong in PMHC?
  How can risk be reduced?
Risk Management (RM)
Background

• Preventable errors in medical practice are frequent:
  Much patient harm
  Cost a tremendous amount of money.
• How:
  To protect doctors & hospitals from claims?
  To improve quality of care?
Managing Risk

**Definition**

- A process for improving the safety & quality of care through reporting, analyzing & learning from adverse incidents involving patients.
Misconceptions

I. RM is not primarily about avoiding or mitigating claims. It is a tool for improving the quality of care.

II. RM is not simply the reporting of patient safety incidents. Incident reporting is on the reactive side of RM. Minimizing the occurrence of patient safety incidents is the proactive side, e.g. instead of ‘fire fighting’ after things have gone wrong, a scenario training (‘fire drill’)

III. RM is not the business of service managers. It is the business of all stakeholders in the organization, clinicians & non clinicians.
Basic Questions

I. Risk Identification: What could go wrong?

II. Risk Analysis: What are the chances of going wrong and what would be the impact?

III. Risk Treatment: What can we do to minimize chances of happening or mitigate damage when it has gone wrong?

IV. Risk Control, sharing & learning: What can we learn from things that have gone wrong?
Application
At any level of an organization
• Hospital, unit, department or Process.
• Investigation, Treatment, Surgery
Requirements for implementing a departmental RM program

✔ Leadership:

✔ Team:
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