

Attachment C

[NAME OF PROGRAM]

SAMPLE ~~~~ RISK REDUCTION PLAN ~~~~ SAMPLE

[YEAR]

SAMPLE Risk Areas	SAMPLE Measure	SAMPLE Threshold for Action	SAMPLE Frequency of Review	Assigned To	SAMPLE Risk Reduction & Mitigation Strategies
Clinical Assessments	Timely completion of annual assessments	< 90% compliance	Quarterly	B. Jones	<ul style="list-style-type: none"> Communicate requirements to all staff. Monitor by individual staff member and provide feedback quarterly.
Individual Services Plans	ISP includes plan for all assessed risks	< 95% compliance	Quarterly	B. Jones	<ul style="list-style-type: none"> Discuss barriers to compliance with staff who do not achieve threshold.
Environmental Safety	Bathroom hot water temperatures do not exceed 110° F	< 100% compliance	Monthly	F. Smith	<ul style="list-style-type: none"> Monitor water temperatures weekly in bathroom sinks and tubs. Contact plumber immediately if temperature exceeds 110° F.
Medication Events	Medication administration error without injury	> 3 Events per quarter	Monthly	J. Allen, RN	<ul style="list-style-type: none"> Conduct Failure Mode & Effect Analysis (FMEA) of medication administration process by October 1, 2015.
	Medication administration error with injury	> 0	Monthly	J. Allen, RN	<ul style="list-style-type: none"> Monitor errors by individual staff member. RN will meet with medication aides who have more than 3 medication errors in a quarter to develop plan for improved performance.
Accidents (DBHDS defined triggers/thresholds)	Choking; no medical attention required	< 3 Events per quarter	Monthly	N. Noll	Supervisors will conduct random checks at mealtime to evaluate compliance with diet plan.
	Choking resulting in the need for medical attention	> 0	Monthly	L. Dodd, RN	<ul style="list-style-type: none"> Individuals at risk of choking are identified ISPs of individuals at risk include choking prevention strategies. RN monitors diets of individuals at risk.
Medical (DBHDS defined triggers/thresholds)	Constipation/bowel obstruction requiring medical attention	> 0	Quarterly	L. Dodd, RN	<ul style="list-style-type: none"> All individuals are assessed for risk of constipation at admission and at least annually. ISPs of individuals at risk of constipation have prevention strategies in place. RN tracks implementation of ISPs of individuals at risk of constipation.

