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Applicability: DDSN Central Office, DDSN District Offices, DDSN Regional Centers, DSN Boards and Contract Service Providers

PURPOSE

The purpose of this departmental directive is to establish the Department of Disabilities and Special Needs (DDSN) Risk Management program, which is intended to eliminate, reduce, and/or control DDSN's and its provider network's exposure to risk, loss and injury. This policy also establishes DDSN Risk Management Committees.

A broad-based agency Risk Management program should fulfill the following purposes:

- 1) Improve the safety and quality of life for consumers and employees;
- 2) Conserve financial resources;
- 3) Prevent litigation; and
- 4) Maintain relationships of trust among stakeholders.

GENERAL

DDSN recognizes that every organization, no matter how well run, inherently possesses exposure to risk. It also recognizes that management of risk factors requires a broad-based, coordinated managerial approach in order to mitigate any possible loss; accordingly, DDSN implements this Risk Management program.

DISTRICTI

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DDSN RISK MANAGEMENT PROGRAM

The Risk Management program of DDSN shall include:

- a) Identification of a Risk Manager at each organizational unit;
- b) Establishment of Risk Management Committees at each organizational unit;
- c) A written plan aimed at reducing risk to consumers and employees;
- d) Education and training;
- e) A system for collecting, analyzing, and acting on risk data; and
- f) Correlating risk management activities with Quality Assurance activities.

DDSN CENTRAL OFFICE RISK MANAGEMENT COMMITTEE

The DDSN Central Office Risk Management Committee will be co-chaired by DDSN's Risk Manager and the Director of Quality Management. Membership of the DDSN Central Office Risk Management Committee will be drawn from DDSN Central Office, DDSN District Offices, DDSN Regional Centers and representation from the DSN Boards and other qualified providers. Other staff with special expertise (in health care, nursing, physical plant, law, etc.) may be asked to serve as resources to the DDSN Central Office Risk Management Committee on an as needed basis.

The DDSN Central Office Risk Management Committee will focus on areas that present the greatest amount of risk to people served by DDSN. Areas of focus will include:

- a) Abuse, neglect and exploitation;
- b) Critical incidents:
- c) Medication errors; and
- d) Deaths.

Other areas of review may be added as identified by DDSN's Risk Manager (e.g., use of physical restraints, accidents/injuries, property damage involving consumers, etc.).

The DDSN Central Office Risk Management Committee will establish a formal system for reporting and reviewing risk incidents that occur in each of the above-cited areas, to analyze data for trends, identify problem areas, make recommendations for change/improvement, and follow up on the implementation of recommendations. The Risk Management Committee will communicate information quarterly through on-site meetings, webinars, or through email distribution and/or web-site posting.

The analysis, problem identification, recommendations and feedback loop established by the DDSN Central Office Risk Management Committee shall serve to augment, and not take the place of, the normal supervisory review and follow up that occurs in all good management practices.

Upon the identification of emerging risk trends, the DDSN Central Office Risk Management Committee shall recommend changes in practices, policies, and training that are designed to mitigate these risks in the future.

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The DDSN Central Office Risk Management Committee will maintain contact with other areas within and outside of DDSN that may play a part in identifying trends and implementing solutions (e.g., safety/abuse coordinators, workers compensation staff, training coordinators, mechanisms for investigation/fact finding, etc.).

The DDSN Central Office Risk Management Committee will make reports to DDSN senior staff as to the frequency, severity, loss, and remedial actions taken regarding risk factors.

REGIONAL CENTER RISK MANAGEMENT COMMITTEES

Each DDSN Regional Center will designate a person as that particular Center's Risk Manager and will establish a DDSN Regional Center Risk Management Committee. This important function may be fulfilled by already existing DDSN Regional Center Safety Committees if the Safety Committee membership is broad enough. The DDSN Regional Center Risk Management Committee may address a wider range of health and safety issues than are being considered by the DDSN Central Office Risk Management Committee. The Risk Manager and DDSN Regional Center Risk Management Committee will carry out the same functions at the DDSN Regional Centers that are performed by the DDSN Central Office Risk Management Committee for DDSN system-wide. Each DDSN Regional Center's Risk Manager is a member of the DDSN Central Office Risk Management Committee.

The DDSN Regional Center Risk Management Committee shall meet at least on a quarterly basis to review data on risk events that have occurred at each respective DDSN Regional Center, analyze these for trends, make recommendations for corrective action, and follow up on actions taken.

The DDSN Regional Center's Risk Manager will be responsible for ensuring that reports and data requested by the DDSN Central Office Risk Management Committee within the areas of special risk concern are forwarded to the DDSN Central Office Risk Management Committee in a timely fashion.

The DDSN Central Office Risk Management Committee will maintain contact with each DDSN Regional Center Risk Management Committee through the DDSN Regional Center's Risk Manager, who is also a member of the DDSN Central Office Risk Management Committee, in order to receive data/reports, communicate identified trends, inform of recommended actions, and receive back reports on corrective actions taken.

DSN BOARD/QUALIFIED PROVIDERS RISK MANAGER AND/OR COMMITTEE

Each DSN Board or other qualified provider receiving funds from the DDSN will designate a person as the Provider's Risk Manager and establish a Provider Risk Management Committee to assist the Provider Risk Manager. If the board or qualified provider already has an existing Safety Committee in operation, they may use this same committee to fulfill the risk management oversight function if the committee membership is broad enough.

The Provider Risk Management Committee will carry out the same functions on the DSN board/qualified provider level that are performed by the DDSN Central Office Risk Management Committee for DDSN system-wide and the DDSN Regional Center Risk Management

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Committee at each DDSN Regional Center. At the provider level, the Risk Management Committee will review documentation related to reporting trends including falls, choking events, sepsis, aspiration, and bowel obstruction. Other trends for injuries and illness will also be reviewed to determine appropriate individual and systemic responses. The DSN Board/Provider Risk Management Committee will review this data at least quarterly.

DDSN staff serving on the DDSN Central Office Risk Management Committee will maintain contact with the Provider Risk Manager and/or Provider Risk Management Committee in order to receive data/reports, communicate regarding trends that appear to be occurring system-wide, make recommendations, and be available for technical assistance.

ADDITIONAL COMPONENTS OF RISK MANAGEMENT PROGRAM

The Risk Managers and Risk Management Committees at each of the three (3) levels of DDSN (i.e., Central Office, Regional Centers, and DSN Boards/qualified providers) will develop a brief written Risk Management Program for their respective organizations to include education and training activities, data collection and utilization, and the correlation between risk management and quality assurance activities.

RISK MANAGEMENT TOOLS:

In order for an agency's Risk Management Program to be effective, the following "tools" need to be available:

GATHERING INFORMATION - knowledge, expertise, and commitment of employees; sound policies and procedures; risk incident reporting systems; computerized databases; correction and feedback loops.

ADMINISTRATIVE SUPPORTS - agency organization; well-developed infrastructure; committees of reference; systems of communication, decision making and follow up; agency mission, vision, and values.

TRAINING PROGRAMS - pre-service training; in-service training; specialty training in consumer rights, behavioral support planning, critical incident reporting, medication administration, driver safety, etc.

QUALITY ASSURANCE/IMPROVEMENT PROGRAMS - consumer satisfaction; personal outcomes; continuous quality improvement, quality enhancement programs; etc.

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State Director

Related Directives: 100-09-DD, 534-02-DD, 505-02-DD