

# MANAGE YOUR RISK

## Self-Evaluation Liability Checklist

This checklist is intended to be a tool you can use to begin the process of identifying risks in your organization. It is not a complete listing of all risks your organization may face. Risk identification is a continuous and ongoing task that is an important responsibility of senior management in every organization.

### MANAGEMENT/ADMINISTRATION

Item	Yes	No	Not Applicable/Comments
1. Written policy and procedure provides guidelines for contract management.			
2. All agreements are in writing.			
3. There is a process for annual review and evaluation of all contracts.			
4. Certificates of insurance for all contractors are available and updated annually.			
5. Contracts include hold harmless language and requirements to participate in PI and follow organization's policies and procedures.			
6. There is a written incident reporting procedure.			
7. Incidents are reviewed, trended and analyzed.			
8. Patient/Family complaint reports are trended as part of the event reporting process.			

Notes:

**MEDICAL**

Item	Yes	No	Not Applicable/Comments
1. The medical director takes an active role in establishing medical care standards.			
2. The medical director participates in staff training.			
3. The medical director takes an active role in monitoring care quality.			
4. There is a credentialing process in place for all employed and/or contracted physicians that includes: maintenance of current license, DEA number, and certificate of insurance. There is primary source verification of physician education, training and license.			
5. Paper and/or electronic records are kept confidential and secured.			
6. Patient medical records are kept current.			
7. Medical records are maintained in a consistent format and order.			
8. Only approved abbreviations are used in documentation. Entries are dated, timed and signed.			
9. Handwriting on all medical records is legible. Telephone contacts are documented in the medical record.			
10. Approved methods for correcting documentation errors are used.			
11. Patient refusals of treatments and/or services are documented.			
12. There are written policies and procedures on abuse prevention and reporting.			
13. All staff has access to and knows the status of the patient's advance directive.			

## MEDICAL CONTINUED

Item	Yes	No	Not Applicable/Comments
14. A care plan is present for each patient. It includes: <ul style="list-style-type: none"> <li>• Start of care interdisciplinary care plan</li> <li>• Revised and updated interdisciplinary care plans as needed</li> <li>• Review of care plan at IDT meetings</li> </ul>			
15. All staff follows the plan of care.			
16. All staff, paraprofessionals and volunteers provide care that is keeping with training and competency.			
17. Medication is stored appropriately in secured area.			
18. Medication storage areas are inspected on at least a monthly basis.			
19. Only qualified staff administers medications.			
20. Physician orders are obtained for changes in medications, prior to the change.			
21. Verbal orders are validated with physician signature and date within agency policy guidelines.			
22. Staff and volunteers know the patient complaint process and encourage patients who voice complaints to share their concerns with management of the organization.			
23. The quarterly utilization audits provide meaningful information and data.			
24. Pain assessment is conducted and documented at each visit.			
25. If research activities or clinical trials are conducted there is a procedure for research approval and evidence of informed consent.			
Notes:			

## PATIENT HANDLING

Item	Yes	No	Not Applicable/Comments
1. All care staff and volunteers are trained in patient lifting and transfer techniques.			
2. Our organization has a restraint policy and provides restraint education to: <ul style="list-style-type: none"> <li>• Staff</li> <li>• Volunteers</li> <li>• Patients</li> <li>• Family Caregivers</li> </ul>			
3. Families are taught that securing patients in wheelchairs and beds is a form of patient restraint.			
4. A fall prevention plan is in place. Plan includes assessment of risk to fall upon admission.			
5. There is a standard procedure for bed to chair and chair to bed transfers. Patient beds are kept in the low position and bed rails are used.			
6. There is a standard procedure for chair or bed to toilet and toilet to chair or bed transfer. Patients who are confined to bed are provided with a means to summon assistance.			
7. All care staff and volunteers are trained in standard procedures for patient: <ul style="list-style-type: none"> <li>• Transfers</li> <li>• Realignment/repositioning in bed</li> <li>• Walking/ambulation</li> <li>• Climbing stairs</li> </ul>			

Notes:

## EMPLOYEES AND VOLUNTEERS

Item	Yes	No	Not Applicable/Comments
1. Background checks are conducted on: <ul style="list-style-type: none"> <li>• Prospective employees</li> <li>• Prospective volunteers</li> </ul>			
2. Current job descriptions are available for: <ul style="list-style-type: none"> <li>• All staff positions</li> <li>• All volunteer positions</li> </ul>			
3. There is a drug free workplace policy in place.			
4. Job descriptions are reviewed with staff and volunteers at: <ul style="list-style-type: none"> <li>• Time of hire</li> <li>• Time of any revisions</li> <li>• Time of annual performance review</li> </ul>			
5. Supervisors to employee/volunteer ratios are sufficient to assure adequate supervision.			
6. Employees and volunteers understand policies and procedures relevant to their roles.			
7. Annual evaluations are completed on all employees and volunteers.			
8. Written policies address: <ul style="list-style-type: none"> <li>• Progressive discipline</li> <li>• Sexual harassment</li> <li>• Grievance procedures</li> <li>• Sexual abuse prevention</li> </ul>			
9. If temporary or agency staff are utilized there is a process in place or orientation and evaluation.			

Notes:

## DRIVING

Item	Yes	No	Not Applicable/Comments
1. State motor vehicle department checks are routinely run on: <ul style="list-style-type: none"><li>• Prospective employees</li><li>• Prospective volunteers</li></ul>			
2. Individuals with poor driving records found during state motor vehicle department checks are neither hired nor accepted as a volunteer in positions where driving is a requirement.			
3. State motor vehicle department record checks are run annually on: <ul style="list-style-type: none"><li>• Employees</li><li>• Volunteers</li></ul>			
4. Employees and volunteers are discouraged from: <ul style="list-style-type: none"><li>• Transporting patients</li><li>• Using cell phones while driving</li></ul>			
5. Employees and volunteers are instructed not to drive when taking certain prescription and non-prescription medication.			
6. Employees and volunteers are instructed to always wear seatbelts when traveling in a motor vehicle.			
7. Verify that employees and volunteers who drive their personal vehicles while performing duties on your behalf have personal auto insurance (of at least \$100,000 CSL).			
8. Employees and volunteers are trained in safe driving techniques at least annually.			
Notes:			

## SAFETY

Item	Yes	No	Not Applicable/Comments
1. There is a designated Safety Officer and an active Safety Committee.			
2. Office spaces are free of electrical cords and trip hazards, as well as clutter.			
3. File cabinet doors are opened one at a time and closed when work is finished.			
4. Exits are: <ul style="list-style-type: none"><li>• Clear of obstacles</li><li>• Well lit</li><li>• Unlocked for egress</li></ul>			
5. Visitors are logged in and out.			
6. Walkways and parking areas are: <ul style="list-style-type: none"><li>• Well maintained</li><li>• Kept free from ice and snow where applicable</li><li>• Well lit</li></ul>			
7. Records are maintained of the date/time of ice and snow removal where applicable.			
8. Lighting is adequate.			
9. Hazardous wastes are stored in designated areas.			
10. Environmental Safety rounds are completely on a regular basis and reported to the Safety Committee.			
11. Flammable liquids and cleaning products are stored in fire resistant cabinets.			

**SAFETY CONTINUED**

Item	Yes	No	Not Applicable/Comments
12. Smoke and heat alarms are maintained in working order.			
13. Fire extinguishers are: <ul style="list-style-type: none"><li>• Readily available</li><li>• Inspected regularly</li></ul>			
14. Medical and other confidential records are kept under lock.			
15. Preventive measures are taken to reduce slips and falls on the property.			
16. Written emergency preparedness plans are in place.			
Notes:			



## STANDARDS AND REGULATIONS

Item	Yes	No	Not Applicable/Comments
1. Requirements of licensing bodies with jurisdiction over operations met: <ul style="list-style-type: none"> <li>• Federal</li> <li>• State</li> </ul>			
2. Requirements of regulatory bodies with jurisdiction over operations are met: <ul style="list-style-type: none"> <li>• Federal</li> <li>• State</li> </ul>			
3. A survey by either JCAHO or another accrediting body has been conducted within the past three years.			
4. Recommendations of licensing and accrediting body have been addressed.			
5. OSHA and CDC regulations are integrated into the organization's Safety and Infection Surveillance Programs.			
6. Licensure and credential verification is conducted on all employees whose position requires licensure or specific credentials: <ul style="list-style-type: none"> <li>• Time of hire</li> <li>• Ongoing</li> </ul>			
Notes:			

### For additional information, contact:

#### Betty Norman, BSN, MBA

Risk Control Director

800.233.1957

[bnorman@glatfelters.com](mailto:bnorman@glatfelters.com)

183 Leader Heights Road

York, PA 17402

[glatfelterhealthcarepractice.com](http://glatfelterhealthcarepractice.com)

This is a sample guideline furnished to you by Glatfelter Healthcare Practice. Your organization should review it and make the necessary modifications to meet your organization's needs. The intent of this guideline is to assist you in reducing exposure to the risk of injury, harm, or damage to personnel, property, and the general public. For additional information on this topic, contact your Glatfelter Healthcare Practice Representative at (800) 233-1957