



Award Application

1	Project Title	Closing the Loop: Empowering Frontline Staff to Enhance Patient Safety through Root Cause Analysis and Mitigation Strategies.		
2	Clinical or Operational Area	Operational		
3	Healthcare System	Baptist Health System		
4	Hospital or Entity Name	Baptist Health Corbin		
5	Applicant Name	Kim Williamson, RN, MSN, CPHRM		
6	Applicant Title	Director of Patient Safety		
7	E-mail Address	Kim.williamson@bhsi.com		
8	Telephone	606 523-8529		
9	Mailing Address, City, State, Zip Code	1 Trillium Way Corbin, KY 40701		
10	Please list the names and titles/roles of the additional members of the project team:			
	Name:		Title/Role:	
	Stacey Roark, MSN, RN, HACP Heather Napier, MSN, RN, CPHQ, HACP Dr. David Worthy, MD, CPE, CPPS		Patient Safety Officer	
			Executive Director of Quality and Outcomes	
			Chief Medical Officer	
11	Name of Senior Risk Management or Corporate Insurance Representative		Lynn Kolokowsky, JD, CPHRM Vice President, Risk Management & Insurance Services	
12	Mailing Address, City, State, Zip Code		1901 Campus Place Louisville, KY 40299	

13. The best practice/improvement submitted for consideration is a: (Check all that apply)

- □ Clinical Policy
- □ Performance Improvement Strategy (Six Sigma, etc.)
- Communication Strategy (Briefing before surgical procedure, senior management rounds, etc.)
- ⊠ Other (*Please specify*)

Reducing safety events through identification of the root cause of the event and teaching staff evidence-based mitigation strategies to reduce that type of event.

14. Can the project be duplicated to support patient safety/risk mitigation strategies at other organizations? ⊠Yes □No

15. Briefly describe the project: (two paragraphs maximum, please attach any supporting documentation)

Our dedicated team engages in comprehensive monthly collaborations with unit leaders, senior leadership, risk management, and quality departments. Together, we meticulously analyze safety events, pinpoint root causes, and equip

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our front-line staff with robust, evidence-based mitigation tools designed to enhance patient safety and reduce incidents. Following the review and identification of root causes, we conduct detailed discussions with our front-line staff to outline these safety events and the specific mitigation strategies that can be implemented. These proactive measures not only aid in preventing similar errors in the future but also contribute significantly to an overall reduction in serious safety events, fostering a safer healthcare environment for all.

See attached data trends.

16. Describe how this project has reduced the potential for liability and improved patient safety. (one paragraph maximum)

We have tracked safety events that have and have not reached patients over the last year. Through data analysis, we have drilled down to the specific taxonomies of the events. Based on the taxonomies, mitigation tools were reviewed to determine what tools would reduce that type of safety event. The tools were rolled out monthly to teach staff how and when to use the tool. Over that month, there was a concerted effort to reinforce that tool. The trends have been that specific taxonomies as well as overall events have gone down.

17. What metric(s) have been used to measure and/or sustain success? (one paragraph maximum)

Through data analysis, we track and trend the numbers and taxonomies of safety events. While the overall trends have been a slightly downward, we have found an added advantage of being able to identify specific events or locations of increased numbers. Specific targeted actions are employed based on that situation. For example, we found an increase in the number of critical thinking on one unit. Through analysis and follow up, we found that the issue was nurses being moved to charge position based on how long they had been working and training of that increased responsibility. We found, even with training, the new role required experience to navigate all of the new exceptions.

See attached model.

18. Are you willing to share this project with other members of AEIX? \square Yes \square No

19. Was this project an original concept created by the project team? \square Yes \square No

20. Was this project based on successful practices evaluated from literature or other healthcare providers? \boxtimes Yes \square No

21. Is this project being implemented in your health system for the first time? \square Yes \square No

22. Do you have plans to publish the project results in a professional publication or networking forum? 🗆 Yes 🛛 No

23. Is there anything else you'd like to share about this project?

This type of data analysis can be facility driven. We are a smaller facility and can review all events. The data is also analyzed by event type for each unit. This cross-section analysis would allow a larger facility to determine where to target mitigation tools and training. That analysis could be done on various timeframes to meet that organization's needs.

Thank you for completing the application. Please follow these next steps.

- Please save this document in Word format and gather your supporting documentation.
- Forward the application and documentation to your senior risk management leader or corporate insurance representative. They will need to complete and sign the Evaluation of Awards Application Form on the final page of the application before submitting it to American Excess Insurance by **Friday August 16, 2024**.

Evaluation of Award Application

The evaluation must be completed and signed by the senior risk manager or corporate insurance representative. Please evaluate the Award Application by indicating the best answer to the question.

1. How will this project improve safety and/or reduce liability?

□ Little effect on safety and liability (1)

 \Box Some improvement but metrics are not defined and/or it is not clear that measurable effect can be sustained (2) \Box Strong effect with clearly defined metrics (3)

2. What is the potential to share this project or practice with other AEIX members?

 \Box Little potential – i.e. implementation requires major budgetary commitment, topic is highly specialized, and/or metrics are not clearly defined (1)

□ Some potential but process may be hard for another organization to implement, and/or its application may be limited - *i.e. major budgetary commitment, topic is highly specialized, and/or metrics are not clearly defined (2)* □ Strong potential for producing best practices (3)

3. What level of impact will this project or practice have on the severity of risk exposure?

□ Little chance of impacting severity of risk but could address other issues (1)

 \Box Some potential to impact risk exposure (2)

□ Strong ability to impact severe malpractice exposure caused by significant risk events (3)

4. What level of innovation best describes this project?

Project/practice is new to this organization and is based primarily on firmly established best practices (1)
Project/practice was created primarily by applicants with some assistance from an outside vendor and contains well-established best practices with additional innovative features (2)

□ Project/practice was created solely by applicants and could be included in established literature or industry best practices (3)

5. Share your comments or recommendations.

Lynn Rikhoff Kolo	kowsky VP, Risk Management & Insurance August 2, 2024		
E-Signature	Title	Date	
502.253.5979 <u>lynn.kolokowsky@bhsi.com</u>			
Phone	Email		

Send the completed application in Word format, supporting documentation, and signed evaluation to <u>lana_taylor@premierinc.com</u> by **Friday August 16, 2024.**

Thank you for your submission. In continued pursuit of our mission and vision to partner with forward-thinking healthcare leaders, inspire innovation, and provide the leading pathway for managing risk, we may share your project with other members of American Excess. However, this project will not be shared outside of the American Excess Insurance membership without your prior consent.