FTCA Application Procedural Demonstration of Compliance Tool:

Risk Management—Annual Report to Board Edition

Purpose

Use this document to record the risk management data, information, and activities that must be reported to the health center board on an annual basis. This tool allows for the documentation and analysis of risk management program activities that have occurred over the year. This document can be submitted with other required documents that appear on the annual FTCA deeming and redeeming applications for this programmatic area. The Health Resources and Services Administration (HRSA) does not require health centers to use this document when submitting their FTCA application. However, health centers are encouraged to complete this user-friendly tool to make documentation and demonstration of requirements related to reporting to the board clear and easy to understand.

Health centers can work within the format of this report to input their own data and information. The dashboards and SWOT (Strengths, Weaknesses, Opportunities, Threats) analyses referenced in this tool are examples of ways to present the information; however, health centers may choose other formats (e.g., graphs, charts, narrative) depending on their needs and preferences. The information provided within this tool is not all-inclusive; health centers should provide specific information that is both accurate and sufficient to inform the board and key management staff on all health care risk management activities and progress related to follow-up actions that have been implemented as well as next steps.

For specific examples of content for the report to the board, see [Risk Management Report to the Board: Sample Report and Dashboard](https://www.ecri.org/components/HRSA/Documents/SPT/PSRM/RMSamplereportdashboard.pdf). Health centers should refer to [Chapter 21: Federal Tort Claims Act (FTCA) Deeming Requirements](https://bphc.hrsa.gov/programrequirements/compliancemanual/chapter-21.html#titletop) and [Chapter 10: Quality Improvement/Assurance](https://bphc.hrsa.gov/programrequirements/compliancemanual/chapter-10.html#titletop) in the [Health Center Program Compliance Manual](https://bphc.hrsa.gov/programrequirements/compliancemanual/introduction.html) for standards that must be met in order to meet FTCA deeming requirements related to risk management.

DISCLAIMER

**Information provided by ECRI is not intended to be viewed as required by ECRI or the Health Resources and Services Administration, nor should these materials be viewed as reflecting the legal standard of care. Further, these materials should not be construed as dictating an exclusive course of treatment or procedure. Practice by providers varies, including based on the needs of the individual patient and limitations unique to the institution or type of practice. All organizations should consult with their clinical staff and other experts for specific guidance and with their legal counsel, as circumstances warrant.**

*This model plan is intended as guidance to be adapted consistent with the internal needs of your organization. This plan is not to be viewed as required by ECRI or the Health Resources and Services Administration. All policies, procedures, and forms reprinted are intended not as models, but rather as samples submitted by ECRI member and nonmember institutions for illustration purposes only. ECRI is not responsible for the content of any reprinted materials. Healthcare laws, standards, and requirements change at a rapid pace, and thus, the sample policies may not meet current requirements. ECRI urges all members to consult with their legal counsel regarding the adequacy of policies, procedures, and forms.*

**Title:** [YEAR] Annual Risk Management Report to the [Name of Health Center] Governance Board

**Date:** January 1, [YEAR] to December 31, [YEAR]

**Submitted by:**

**Reviewed/approved by:**

**Date submitted to the board:**

**Date recorded in the board minutes:**

Introduction

The purpose of this report is to provide an account of [Name of Health Center’s] annual performance relative to the risk management plan and evaluate the effectiveness of risk management activities aimed to mitigate risks and respond to identified areas of high risk. Topics presented include high-risk and quarterly risk assessments, adverse event reporting, risk management training, risk and patient safety activities, and claims management. Each topic includes:

* An introduction to explain the relevance of the topic
* A data summary to highlight performance relative to established goals
* A SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis to identify additional factors related to performance
* Follow-up actions to note activities aimed to maintain or improve performance throughout the year
* A conclusion to summarize findings at year-end
* Proposed future activities to respond to identified areas of high organizational risk

See the attached Risk Management Dashboard for a complete data summary of all topics presented.

High-Risk and Quarterly Risk Assessments

Introduction

[Introduce the topic here, or use the following text] The [Health Center Program Compliance Manual](https://bphc.hrsa.gov/programrequirements/compliancemanual/chapter-21.html) requires quarterly risk assessments focused on patient safety. A risk assessment is a structured process used to identify potential hazards within the organization's operations, departments, and services. Risk assessment tools include self-assessment questionnaires, FMEA, and safety walkrounds—in which members of leadership walk around the building and ask employees about potential risks and concerns while observing processes in action. Collecting data onpractices, policies, and safety cultures in various areas generates information that can be used to proactively target patient safety activities and prioritize risk prevention and reduction strategies.

| **Risk Activity Focus Area/Measure** | **Summary Description of Assessment/Methodology/Indicators** |
| --- | --- |
| [Insert the focus area or measure name] | [Include details such as inclusion/exclusion criteria and rationale for the health center’s threshold/goal.] |
| [Insert the focus area or measure name] | [Include details such as inclusion/exclusion criteria and rationale for the health center’s threshold/goal.] |
| [Insert the focus area or measure name] | [Include details such as inclusion/exclusion criteria and rationale for the health center’s threshold/goal.] |

Data Summary

See the dashboard below for completed risk management activities and status of the health center’s performance relative to established risk management goals.

| **Person responsible** | **Measure/Key Performance Indicator** | **Threshold/ Goal** | **Q1** | **Q2** | **Q3** | **Q4** | **Annual Total** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| [Insert department or role] | [Match entry to Risk Activity Focus Area/Measure from table above] | [Use N/A if no threshold or goal] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] |
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SWOT Analysis

| **Strengths** | **Weaknesses** | **Opportunities** | **Threats** |
| --- | --- | --- | --- |
| [Enter tasks and activities that your health center is doing well on in relation to the data presented] | [Enter tasks and activities that your health center could improve on in relation to the data presented] | [Enter external situations that could benefit the health center in relation to the data presented] | [Enter external situations that could negatively impact the health center in relation to the data presented] |

Follow-up Actions

[QUARTER, YEAR]: [List any follow-up actions taken to secure identified strengths and opportunities or to mitigate weaknesses and threats throughout the year.]

[QUARTER, YEAR]:

[QUARTER, YEAR]:

[QUARTER, YEAR]:

Conclusion

[Summarize your findings for the board in a short narrative here]

Proposed Future Activities

[Enter what tasks and activities should be continued, started, or stopped in order to address this topic next year.]

Adverse Event Reporting

Introduction

[Introduce the topic here, or use the following text] Event reporting is an essential component of the risk management program and is considered part of the performance and quality improvement process. Each provider, employee, or volunteer is responsible to report all adverse events, including sentinel events, incidents, and near misses at the time they are discovered to his or her immediate supervisor and/or the risk manager. The risk manager, in conjunction with the manager of the service (as applicable), is responsible for conducting follow-up investigations. The manager's investigation is a form of self-critical analysis to determine the cause of the incident, analyze the process, and make improvements.

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[QUARTER, YEAR]:

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Conclusion

[Summarize your findings for the board in a short narrative here]

Proposed Future Activities

[Enter what tasks and activities should be continued, started, or stopped in order to address this topic next year.]

Risk Management Training

Introduction

[Introduce the topic here, or use the following text] The [Health Center Program Compliance Manual](https://bphc.hrsa.gov/programrequirements/compliancemanual/chapter-21.html#titletop) requires risk management training for all staff members and documentation that all appropriate staff complete training at least annually. Risk management education and training are critical for clinical and nonclinical staff to improve safety and mitigate risk related to patient care. The risk manager identifies areas of highest risk within the context of the health center's risk management plan and selects risk management training topics.

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| --- | --- |
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| [Insert department or role] | [Match entry to Risk Activity Focus Area/Measure from table above] | [Use N/A if no threshold or goal] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] |
| [Insert department or role] | [Match entry to Risk Activity Focus Area/Measure from table above] | [Use N/A if no threshold or goal] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] |
| [Insert department or role] | [Match entry to Risk Activity Focus Area/Measure from table above] | [Use N/A if no threshold or goal] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] |

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[QUARTER, YEAR]:

[QUARTER, YEAR]:

[QUARTER, YEAR]:

Conclusion

[Summarize your findings for the board in a short narrative here]

Proposed Future Activities

[Enter what tasks and activities should be continued, started, or stopped in order to address this topic next year.]

Risk and Patient Safety Activities

Introduction

[Introduce the topic here, or use the following text] The objective of the health center’s patient safety and risk management program is to continuously improve patient safety and minimize and/or prevent the occurrence of errors, events, and system breakdowns leading to harm to patients, staff, volunteers, visitors, and others through proactive risk management and patient safety activities.

| **Risk Activity Focus Area/Measure** | **Summary Description of Assessment/Methodology/Indicators** |
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| --- | --- | --- | --- | --- | --- | --- | --- |
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| [Insert department or role] | [Match entry to Risk Activity Focus Area/Measure from table above] | [Use N/A if no threshold or goal] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] |

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[QUARTER, YEAR]:

[QUARTER, YEAR]:

[QUARTER, YEAR]:

Conclusion

[Summarize your findings for the board in a short narrative here]

Proposed Future Activities

[Enter what tasks and activities should be continued, started, or stopped in order to address this topic next year.]

Claims Management

Introduction

[Introduce the topic here, or use the following text] The [Health Center Program Compliance Manual](https://bphc.hrsa.gov/programrequirements/compliancemanual/chapter-21.html#titletop) requires health centers to have a claims management process for addressing any potential or actual health or health-related claims. The health center identifies risk areas most likely to lead to claims based on previous claims activity, claims prevention guidance from professional organizations, and published research.

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| --- | --- |
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| --- | --- | --- | --- | --- | --- | --- | --- |
| [Insert department or role] | [Match entry to Risk Activity Focus Area/Measure from table above] | [Use N/A if no threshold or goal] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] |
| [Insert department or role] | [Match entry to Risk Activity Focus Area/Measure from table above] | [Use N/A if no threshold or goal] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] |
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SWOT Analysis

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Follow-up Actions

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[QUARTER, YEAR]:

[QUARTER, YEAR]:

[QUARTER, YEAR]:

Conclusion

[Summarize your findings for the board in a short narrative here]

Proposed Future Activities

[Enter what tasks and activities should be continued, started, or stopped in order to address this topic next year.]

Report Submission

The [YEAR] Annual Risk Management Report to the [Name of Health Center's] Governance Board is respectfully submitted to demonstrate the ongoing risk management program to reduce the risk of adverse outcomes and provide safe, efficient, and effective care and services.

Risk Management Dashboard

[Use the following dashboard to summarize the measures presented in the report above. ]

| **Person responsible** | **Measure/ Key Performance Indicator** | **Threshold** | **Q1** | **Q2** | **Q3** | **Q4** | **Annual Total** |
| --- | --- | --- | --- | --- | --- | --- | --- |
|   | **Risk Assessments** |   |   |   |   |   |   |
| [Insert department or role] | [Match entry to Risk Activity Focus Area/Measure from report above] | [Use N/A if no threshold or goal] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here] | [Enter data here and fill background color according to threshold/goal – see key below] |
|  |  |  |  |  |  |  |  |
|  | **Adverse Events/ Incident Reports** |  |  |  |  |  |  |
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|   | **Training and Education** |  |  |  |  |  |  |
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|  | **Risk and Patient Safety Activities** |  |  |  |  |  |  |
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|  | **Claims Management** |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |
|  | ***Dashboard Key – Performance Threshold*** |   |  |  |  |  |  |
|  | *Improved/exceeded expectations (green shading or \*)* |  |  |  |  |  |  |
|  | *Acceptable/needs improvement (yellow shading or \*\*)* |  |  |  |  |  |  |
|  | *Not meeting target, action needed (red shading or \*\*\*)* |  |  |  |  |  |  |