Rapid Response to Risk

Navigating and Mitigating Risks in Emergency Care

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Presenter

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Objectives

- Gain insight into delegation and scope of practice.
- Understand the role of the Board of Nursing and the licensure investigations process.
- Define defensive documentation and learn techniques to enhance your documentation.
- Explore everyday risk management and patient safety strategies that can enrich and bulletproof your practice.

Scope of Practice

This information is **JURISDICTION SENSITIVE**

Defined by:

Education and Licensure

Acts

Rules

Professional Standards

Competence and Experience

This information is **JURISDICTION SENSITIVE**

Statues = Laws

Laws written and passed by the legislature (NPAs).

Administrative Code = Rules

Written by a state agency under their statutory authority (Rules).

Guidelines, Practice Policies, Position Statements, and Declaratory Rulings

This information is **JURISDICTION SENSITIVE**

The Decision-Making Model

This information is **JURISDICTION SENSITIVE**

Scope of Practice is

Your Personal **Scope of Practice**

Practicing Outside Your Scope of Practice

Patient harm

Professional consequences

Disciplinary action

Malpractice

Delegation

Managing the multidisciplinary team


Delegation Gone
Wrong

Investigations

This information is **JURISDICTION SENSITIVE**

Who reports or files a complaint?

Members of the public

Employers

Other licensees

This information is **JURISDICTION SENSITIVE**

Investigative Process

- Complaint filed
- Review of complaint
- Investigation
- Board proceedings
- Board action
- Reporting and enforcement

This information is **JURISDICTION SENSITIVE**

A Licensing Board Investigation

This information is **JURISDICTION SENSITIVE**

What do they mean by licensing actions and discipline?

Why are nurses disciplined?

- Substance abuse
- Outside of scope
- Negligence or incompetence
- Criminal convictions
- Boundary violations
- HIPAA violations
- Failure to follow nursing standards
- Unprofessional conduct

Protect Yourself From Litigation:
Defensive Documentation

Defensive Documentation vs. Being Defensive

“pt refuses”

- Patient has declined to
- Patient opted to proceed with
- Patient has expressed preference for
- Patient has decided against ___ at this time

“c/o”

- “Complains” is fine!
- Make sure it is pertinent

“pt is non-compliant”

- “Non-adherent to therapy”
- “pt has had difficulty tolerating”

“pt is obese”

- “patient is experiencing obesity”
- “pt is in the obese range”
- Document the BMI

“pt is disheveled”

- “shirt is untucked”

Use your note to provide clarity to the patient, direct it to them

Avoid abbreviations where possible

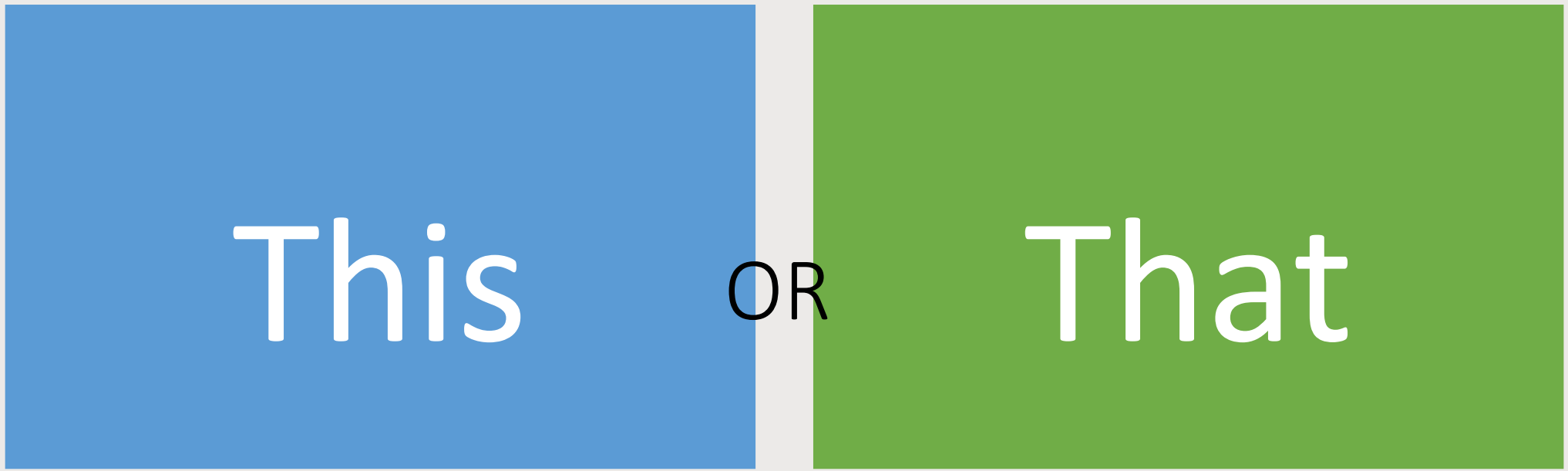
Document in the open

- Turn computer to patient
- Dictate in the room

Encourage communication

- Educate and leverage support persons

More Strategies for Open Notes



More Strategies for Open Notes

Defensive Documentation

- Referrals
- Noncompliance
- Informed Consent
- Informed Declination

Defensive Documentation: Informed Consent and Declination

Document:

Why treatment is needed

Risks, benefits, alternatives

Risks of not having treatment

Possible outcomes

Opportunity to ask questions before any procedures are performed.

Best Practice Recommendation: Utilization of peer review systems and communities for objective second opinions and case reviews

Prevent Lawsuits: Informed Consent and Declination

Implicit or verbal informed consent may apply for low-risk/simple procedures, exams, or assessments (i.e., radiographs and non-invasive diagnostics).

For more extensive treatment, a written informed consent form should be signed.

If a patient declines a treatment, procedure, or referral that is standard of care, the provider should document the informed consent conversations. Document elements of the conversation and witnesses present.

For declinations of care that can precipitate harm or deviate vastly from the standard of care, consider use of an informed declination document signed by the patient and placed in the medical record.

Common Documentation Errors

- Illegible
- Irrelevant
- Subjective
- Incomplete
- Inconsistent

Communication is Key:
Never underestimate the power of rapport

THANK YOU!