SANILAC COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE POLICY

NUMBER: BA078

NAME: RISK MANAGEMENT

INITIAL APPROVAL DATE: 07/26/2005 BY: Sanilac CMH Board

(LAST) REVISION DATE: 06/15/2022 BY: Chief Financial Officer

(LAST) REVIEW DATE: 12/12/2024 BY: Policy Committee

DISCONTINUED DATE: N/A REPLACED BY: N/A

I. PURPOSE

To establish a uniform practice relative to the management of potential loss exposures, steps for addressing those exposures, and monitoring the efficacy of actions taken.

II. APPLICATION

Populations: ALL

Programs: **Direct - ALL**

Contracted - ALL

III. POLICY

It is the policy of Sanilac County Community Mental Health Authority (Sanilac CMH) to manage the elements of risk that impact on the safety and health of individuals who receive services, staff, and visitors as well as those risks that impact upon the organization's ability to provide services.

IV. **DEFINITIONS**

Risk means:

- 1. Possibility of loss or injury
- 2. Someone or something that creates or suggests a hazard
- 3. Situations that would negatively impact services

V. **STANDARDS**

A. The Agency will have a Risk Management Plan that will be reviewed and updated quarterly. The Risk Management Plan will identify potential risks (loss exposure) to the Agency, and outlines a measurement for the severity of impact to the Agency (risk level) as well as a measurement of the likelihood of that loss occurring. If the severity of the impact is high the risk level column will indicate "high". If the likelihood of the event happening or the loss occurring is high the likelihood column will indicate "high".

VI. ATTACHMENTS

Sanilac CMH Risk Management Plan

VII. REFERENCES

BA060 Financial Planning and Management Policy PIHP Policy Internal Service Fund PIHP Risk Management Plan Sanilac CMH Final Risk Assessment Report – IS

Sanilac County Community Mental Health Authority

RISK MANAGEMENT PLAN 2024

LOSS EXPOSURE	ASSIGNED TO	RISK LEVEL	EVALUATION OF LOSS EXPOSURES	PROBABILITY	ACTIONS/RESOURCES USED TO CORRECT EXPOSURES	STATUS REPORT
I. Health & Safety Compliance	Health & Safety	High	Adherence to Health & Safety Policies, Compliance to CARF standards, Compliance to Government Standards related to Health & Safety	Moderate	Health & Safety related policies will be reviewed annually, and the review reflected in committee minutes. Compliance to CARF standards will be reviewed monthly and be reflected in committee minutes. Compliance to OSHA, will be reviewed and reflected in committee minutes and in semi-annual internal inspection reports.	
II. Health & Safety Risks	Health & Safety	High	Consumer and employee incidents and accidents, safety concerns within the agency, vehicle safety, etc.	High	Make recommendations of techniques for reduction of Health and Safety Risks. Identify source of risk from compliance issues related to policies and procedures, individual and employee incident and accident reports, "Safety Awareness" reports, Agency vehicle inspections,	

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					and internal and external inspections. Make recommendations for the reduction of Health and Safety risks and document in committee minutes.	
III. Recipient Rights	Recipient Rights	High	Potential for violations that could lead to significant sanctions, loss of staff licensure, and abuse/neglect of individuals served.	High	Document the identification of risk exposure. Document the analysis of risk exposure. Document the actions taken. Initial and annual staff training Policies/Procedures Contractual obligations Annual Reviews Monitoring	
IV. Insurance Coverage	CFO	High	Issues arising from Agency liability, automobile, agency staff, board of directors, administration, Worker's Compensation, etc.		Annual review of insurance coverage done with someone knowledgeable about insurance needs and coverages-such as an experienced broker. They should be aware of the needs, risks, and assets of the Agency. Review should include all insurance coverage needed to adequately protect the Agency in all aspects of the Agency's	

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					operations, protect and defend persons, such as personnel and board members, volunteers and persons served against reasonable claims due to adverse events for which the organization is liable. Coverages should include the following: vehicles, worker's compensation, directors' and officers' liability, errors and omissions, property and casualty, and malpractice insurance.	
V. Funding	CFO	High	Grants ending; Medicaid and State Funds (GF) reduction	Moderate	Review funding source changes. Review funding level changes. Review growing populations potentially requiring services as well as changes in the existing population that could require a change in service levels in the future, such as, aging populations through DEG files, patterns in service usage etc. Actions based on results of reviews include funding to cover short-term cost fluctuations from changes, such as those outlined above	

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					or other unforeseen circumstances will be managed through the ISF established by the PIHP and Sanilac CMH Local Fund Balance; Long-Term Cost reductions will be implemented as soon as possible if the need to access reserves to cover a cost overrun occurs. Comparison of actual service levels as well as spending levels will occur periodically as part of the preparation and review of the FSR report sent to MDHHS. Budget monitoring occurs on a smaller scale monthly. Individual consumer budgets are monitored for activity levels versus authorized services on an ongoing basis. Increased service requirements must be authorized by the supervisor of the primary case holder and any disputes in service levels must be resolved at the divisions' Chief Officer Level or Program Association Chief Officer Level.	

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VI. Practitioner Safety	Human Resources Health and Safety Training	High	Potential safety issues for staff serving individuals in high-risk areas	Moderate	 Human Resources Supervisor Orientation Sheet addresses door bars, work comp policy, COVID policy, weapons and illegal substances policy, employee expectations policy (required reporter). Follow all Agency policies to ensure that staff are safe. Health & Safety Trainings on safety, including safety drills, newsletters, safety manual, vehicle safety checks Emergency Procedure Handbook Trainings Mandatory trainings – 	
					initial, annual and bi- annual.	
VII. Documentation Audits Plans of Correction EMR Informed Consent	CIO	Moderate	Internal audits revealed problems with compliance. STATE makes site visits to review charts Assurance that all measures are taken to	High	 EMR Logic Internal Audits External Audits Trainings Policies/ Procedures Password protection Web Based – vendor has robust security and backup systems. 	

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			obtain authorization to provide services on the day of admission and that all individuals are informed of scope of services and their expectations.			
VIII. Confidentiality	CIO	High	HIPAA compliance with all practices Compliance Security	High	 Education Policies/ Procedures Tools (encryption, passwords, etc.) Corporate Compliance Program Internal and External Audits IT and EMR security protocols and system logic 	
IX. Professional relationships	Human Resources Training	Moderate	A. Importance of employees maintaining professional boundaries with individuals B. Importance of employees maintaining professional	Moderate	 Code of Ethics policy Employee Expectation Policy Staff are required to read policies upon hire. Trainings 	

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			boundaries with one another			
X. Individuals transported in approved vehicles	Human Resources	High	Potential for liability in case of automobile accident	Low	 Agency vehicle policy adhered to. Staff are required to report driving infractions. DMV checks on staff annually. Chauffer's license required when staff transport individuals. 	
XI. Data Breach	IT	High	Review of technology and software, security levels, replacement plan, industry standards reviewed and followed, monitoring and disaster recovery processes followed.	High	 Firewalls Insurance IT security protocols Policies/Procedures Testing of IT security 	

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A. Compliance B. Background checks and licensure/certification verification C. Retention and Recruiting	Human Resources		A. First Aid and CPR B. Both completed on all incoming personnel (licensure and certification when applicable) before service delivery and throughout employment. C. Retention and Recruiting	Moderate	 Background checks and license verifications are completed prior to hire and upon expiration. LARA checks are completed annually. Sex offender checks are completed annually for all children's staff. Criminal background checks are completed annually for all staff. CPR/First Aid Training Track generic feedback from staff as well as from Exit and Orientation events. Enhance visibility of Agency at local and regional educational entities to enhance our employee candidate pool. 	