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Clinical Risk Management - A Management Tool for Hospitals

According to Mr. Gausmann clinical risk management has been around since the 1990s. For around five years, the clinical risk management system has been receiving a stimulus from patients themselves, which is having a long-term effect. Preventative measures in particular are aimed at increasing patient safety.

Indeed, there are many global processes and programmes for recommendations for patient safety. Such programmes include 'Clean Care is Safe Care' which focused on hand disinfection projects, 'Safe Surgery Saves Lives' promoting the surgical safety checklist, 'Patients for Patient Safety' for patient information, and reporting and learning systems (local, national and international).

Meanwhile a whole series of tools and procedures are available for improving patient safety, which interlink to allow a risk management system to be built up. Knowledge about prevention can be generated through retrospective examination of adverse outcomes and complications. Measures supporting this perspective include the morbidity and mortality conference, the retrospective adverse event analysis or an event and risk communication analysis. Seen from this perspective, risks can be identified, weighed and altered in risk audits. The external risk audit has proven to be the tool offering the highest gain in knowledge and the widest potential for the implementation of preventative measures.

So what effect has clinical risk management as a control tool? Gaussman argues that it can improve patient safety and also be used as an economic control tool. Analysing risk can also have a positive effect on public relations and organisational development.

To illustrate the positive effects on patient safety, Gaussman used the example of the surgical safety checklist. The checklist must be completed before, during and after each surgical procedure. He stressed that these checklists must be filled in completely and if done so they decrease the margin for error and confusion.

Mr. Gaussman also mentioned the importance of simulation centres. Here doctors train with animation dolls. This interactive learning experience is extremely beneficial for clinicians. The parameters change during the course of the treatment and it is the instructor who is behind these changes. A highly efficient method of learning, simulation centre experiences also include the analysis of each clinician's performance afterwards.

The presentation was concluded with a quotation from Robert Wachter, from *Understanding Patient Safety*, published in 2008. The quotation emphasised that we still have a long way to go concerning patient safety, stressing that we must not rest until patients can go away without the fear and anxiety over treatment and care.

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