

HOW TO COMPLETE THE RISK MANAGEMENT QUARTERLY REPORT

**Note: All quarterly reports should be sent to KDHE within 30 days of the end of the report quarter.
COVER PAGE MUST BE COMPLETED AND RETURNED WITH THE REPORT**

Cover Page: Please complete with the name and address on facility license. Do not use initials.

1. Type of facility: If you are a general hospital with a psychiatric unit, please check Hospital only.
2. Year: Make sure you document the year and the quarter that is listed.
First Quarter = January, February and March
Second Quarter = April, May and June
Third Quarter = July, August and September
Fourth Quarter = October, November and December
3. Total number of incidents reported:
This is the total number of incidents that your risk management department has received in the quarter. It has nothing to do with the number of standard of care determinations listed under number 4 and they do not all have to go through committee prior to sending in the report.
4. Final standard of care determinations:
These are the final standard of care determinations made during the quarter. These numbers probably will not match the total under #3 as some of your incidents may have multiple providers/clinical issue involved and each provider/clinical issue must be given an individual standard of care determination.
5. Specify the number of reports sent to licensing agencies:
This total should equal the number under #4c and #4d (your standard of care IIIs and IVs). Any reportable incident that does not fit under one of the licensing agency categories should be reported to KDHE prior to or along with your quarterly report.

The final portion of #5 applies only to standard of care III and IV determinations. Document the general type(s) of clinical issue(s) for each adverse event.
6. Self explanatory:
7. & 8. **(NOTE: Completion of these two items is optional)** Please complete items 7 and 8. If you have information to share with other facilities or KDHE concerning any quality improvement your facility has implemented in order to minimize the occurrences of adverse incident reports.

If you have any questions concerning this quarterly form, please feel free to contact KDHE.

Risk Management Specialist
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