I. PURPOSE: The HHSC Risk Management Program (the RM Program) is designed to protect the human, physical, and financial assets of the organization against the adverse effects of accidental losses and to effectively manage losses that may occur, and to enhance continuous improvement of patient care services in a safe healthcare environment.

II. DEFINITIONS:
Risk Management is the process of creating and implementing strategies directed at minimizing the adverse effects of accidental loss on HHSC’s human, physical, and financial assets through the identification and assessment of loss potential and recommendation of appropriate loss assumption, transfer, prevention and control mechanisms.

III. POLICY: The HHSC Corporate Board, in collaboration with the Regional System Boards, is responsible for the effectiveness of the RM Program. Each board is responsible to provide the necessary resources for risk management activities in their respective facilities. The fulfillment of these responsibilities depends upon regular data, reports and input from the facilities that summarize ongoing and anticipated risks that may result in loss to the organization. The regional and corporate executive management teams, assisted by their respective risk manager(s), will ensure that their respective boards of directors receive the information needed to provide effective oversight of the risk management function.

A. Responsibilities:

1. Corporate Office:
The HHSC corporate office is responsible to provide to the facilities risk management consultative support, legal and claims management advice, insurance program management, and related assistance in achieving these goals. The corporate office is responsible to develop and maintain a Risk Management Plan.
The Corporate Director of Risk Management and General Counsel are empowered by the HHSC Board to assist the facilities in implementing the functions and activities of the RM Program. Other corporate office staff may be involved by providing financial, technical, human resources, or other advice and support in a manner that helps reduce risk to the organization. Periodic risk management reports will be submitted to the Board Quality Improvement & Patient Safety Committee.

2. HHSC Facilities:
All the HHSC facilities, including clinics, are required to establish and implement effective RM Programs consistent with this policy. It is the responsibility of all HHSC employees, volunteers, medical staff, and vendors to participate in and support these risk management efforts by complying with the programs adopted by the facilities and approved by the respective boards of directors.

B. Annual Evaluation of the RM Program.
The facility, regional and corporate risk management programs will be evaluated and approved by the respective boards annually. Recommendations for revisions, enhancements, or both, will be incorporated into the RM Programs prior to final annual approval.

IV. APPLICABILITY: This policy applies to all HHSC facilities.

V. AUTHORITY:

HRS Chapter 323F-7

HRS Chapter 663-1.7

VI. REFERENCES:


VII. ATTACHMENTS: ADM 0027B