

GREENE EDUCATIONAL SERVICE CENTER  
MENTAL HEALTH SERVICES

**Risk Management Plan**

**Objective**

The Greene County Educational Service Center - Mental Health Services (GCESC-MHS) Risk Management Plan establishes agency practices and processes that help identify and analyze potential risks, determine activities to implement that mitigate, reduce, or eliminate these risks, and guides the monitoring and reporting on the results of these activities.

**Structure**

The Risk Management Plan is the responsibility of the GCESC-MHS Leadership Team to develop, monitor, review and revise based on potential risks to service delivery and loss exposures. Identification of these is a dynamic and on-going process integrated into:

- data collection and analysis,
- awareness of trends and changes in service delivery and reimbursement,
- staying current on local, state, and federal initiatives, mandates, and laws, as well as
- strong and reciprocal relationships with key stakeholders.

The GCESC-MHS Leadership Team relies heavily on QA/PI Committee's reporting and analysis of agency data and performance on key indicators which are integrated into on-going Performance Measurement and Management activities. This team is composed of the Mental Health Directors, Program Supervisors, as well as the Billing Manager and Records Control Officer.

The GCESC Superintendent, Treasurer and legal counsel are consulted as potential risks dictate. The team ensures the implementation and monitoring of actions, and reporting results back to the QA/PI Committee on the status and outcomes of actions taken.

**Potential Loss Exposures Areas**

Staying abreast of potential risk requires monitoring business practices, facilities maintenance, and functioning around key areas of potential risk for both GCESC-MHS and our GCESC parent organization. Areas of particular focus include but are not limited to:

- Facility risks related to potential property loss/damage, environmental safety & emergency readiness, capital damages, improvements, and replacement.
- Financial risks related to issues such as billing accuracy, denials, contracting, fraud, investments, business interruption, accounting practices, insurance coverage, and loss or changes to funding.
- Human Resources related to workforce stability and recruiting, employment law, injury, Worker's Compensation and OSHA compliance.
- Information technology associated with documentation and reporting, data integrity and security, records retention and storage, hardware requirements, updates and compatibility, system failure, potential data loss and security breaches.
- Abuse of vulnerable populations served due to criminal, unethical or dangerous practices, insufficient training and supervision of staff, and incident reporting.
- Crisis management and emergency response, after hours availability, communication, and recognizing and responding to clinical risks.
- Clinical Care related to accessibility, accuracy of assessment and treatment appropriateness, documentation, cultural inclusivity and sensitivity, ethical and legal situations, continuity of care, and discharge
- Responding to and reporting Major Unusual Incidents (MUI).
- Sufficient organizational and Professional Liability Insurance to address the high risk associated with mental health services to vulnerable populations.

### **Specific Potential Risk Exposures**

The following are specific low incidence/high impact areas of risk also considered that might confront our GCESC-MHS agency. Steps to mitigate risk for each specific risk area are reflected in policies, procedures, and agency activities:

- |                                |  |
|--------------------------------|--|
| ○ Medication                   | ○ Biohazard accidents                              |
| ○ Use of Restraints            | ○ Use or possession of licit or illicit substances |
| ○ Incidents involving injuries | ○ Abuse & neglect                                  |
| ○ Communicable diseases        | ○ Suicide or attempted suicide                     |
| ○ Infection control            | ○ Health & wellness                                |
| ○ Violence or aggression       | ○ Nutrition  |
| ○ Sentinel events              | ○ Personal safety                                  |
| ○ Use or possession of weapons | ○ Environment                                      |
| ○ Elopement                    |  |
| ○ Vehicular accidents          |  |

## **Process & Procedures**

1. *Evaluate* identified loss exposures
  - Nature of each area of risk
  - Likelihood of an adverse event occurring
  - How an adverse event might impact services
  - What areas are at greatest risk
  - What factors cause or contribute to increased risk exposure
2. *Identify* methods to rectify loss exposures
  - Specific actions to mitigate, reduce or eliminate risk
  - Role of staff training staff and guidance
  - Safety and performance improvement initiatives
  - Reporting processes
3. *Implement* actions to reduce risk
  - Identify individuals responsible for implementing action
  - Specify timelines for implementation
  - Train staff on processes and reporting requirements
4. *Monitor* actions to reduce risk
  - Identify indicators of whether risk-reduction actions are effective
  - Track the progress of implementation
  - Identify mechanisms for maintaining awareness of risk & risk-reduction actions
5. *Analyze* risk event and effectiveness of actions taken to reduce risk
  - Determine the frequency, severity, and overall financial burden of potential losses
  - Assess the probability that the risk event may occur in the future
  - Estimate human impact, including but not limited to clients, staff, and visitors
  - Assess property impact, infrastructure
  - Assess operational impact on service delivery, identify methods to ensure normalcy
  - Identify specific positive and negative effects of actions taken
  - Specify potential enhancements to the risk management process
6. *Report* the results of the analysis and risk-reducing actions
  - If actions taken have been effective
  - Identify the positive and negative trends
  - Identify stakeholders and methods for sharing information with them, as appropriate
  - Monitor and modify the implementation of the reporting process as needed

## **Methods for Dealing with Loss Exposures**

*Revised/ Reviewed: 6/08; 6/09; 6/10; 8/11; 12/12; 3/13; 5/14; 3/15; 10/16; 8/17; 6/18; 1/19; TC Reviewed 7/2021- AS; Revised 4/18/22 - AS; Reviewed/Revised QA/PI 10/23; AS Reviewed 11/24; Admin Team Reviewed/Revised 2/2025*

Standard methods for mitigating loss exposures once they have been analyzed include:

- Risk control through *avoidance* of the exposure all together (if possible)
- Risk control through *reducing the probability* of loss
- Risk control through *reducing the severity* of the consequences if the losses were to occur
- Risk control through *transferring the loss* to another organization through a contractual agreement/transfer
- Risk control through *retaining/absorbing* the loss when:
  - Loss is so small that the impact on GCESC-MHS is negligible
  - Loss amounts are within the financial ability of GCESC-MHS to cover the amounts without impact
  - When insurance is not required or available, or only available at prohibitive cost

### **Insurance**

Of special concern and consideration in our service delivery is to ensure adequate insurance for our agency and employees. GCESC purchases comprehensive insurance coverage which is annually reviewed, renewed, or changed based on changes in policy, service provision and costing. The following are areas covered by insurance:

- General Liability Coverage
- Employer's Liability (Ohio Stop Gap)
- Legal Liability Coverage
- Fiduciary Liability Coverage
- Violence Coverage

The GCESC Governing Board and GCESC-MHS Leadership reviews GCESC insurance package, specific to the services provided by our agency, annually. The insurance package is also reviewed in QA/PI committee to assess whether current level of coverage is adequate to current service delivery trends.

### **Professional liability: Documentation Rules & Protections**

GCESC-MHS Leadership will ensure the following documentation protections:

- Case Records are never altered. Corrections are made with date & initials.
- All clinical findings/observations are documented: consultations, assessments, ISP, nature of other health problems, clinical reasoning process, treatments, & responses to treatments.

- All instructions & procedures, as well as risk, are discussed with the person served and documented.
- All missed appointments, non-adherence to treatment, treatment refusal by persons served are documented,
- All phone contacts regarding conversations related to clients, particularly symptoms, are documented.
- All instructions for the person served are written or clearly printed.
- Releases meet legal and ethical requirements.
- Records are kept secure.
- Records reflect high level of care provided
- Electronic records are kept secure and properly backed-up

**Additional Related Policy:**

GCESC Risk Reduction Program Policy 7430