


**GUAM MEMORIAL HOSPITAL AUTHORITY
ADMINISTRATIVE MANUAL**

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| APPROVED BY:  Peter John D. Camacho, MPH Hospital Administrator/CEO | RESPONSIBILITY: Risk Management | EFFECTIVE DATE: February 21, 2018 | POLICY NO.: A-LD1100 | PAGE: 1 of 3 |
| TITLE: IDENTIFICATION AND DISPOSITION OF POTENTIALLY LITIGIOUS CASES | | | | |
| LAST REVIEWED/REVISED: 10/2017 | | | | |
| ENDORSED: EMC 12/2017 | | | | |

PURPOSE:

Identification of potentially litigious cases will initiate the process of thorough investigation in preparation for a possible litigation and referral to appropriate departments/individuals whereby appropriate steps will be taken. These actions will be taken to minimize the risks that may arise from untoward results or have the potential to adversely affect patients, visitors, employees, and Guam Memorial Hospital Authority (GMHA).

POLICY:

The Hospital's Risk Management Program is responsible for the identification of potentially litigious cases involving patients, visitors, and employees.

RESPONSIBILITY:

Hospital Risk Management Program Officer.

PROCEDURE:

I. Request for Subpoena of Records

- A. The Hospital Risk Management Program Officer will be immediately informed of any subpoena or request for records by lawyers, law enforcement agencies, or courts of law (GMHA Policy Circular No.: 89-46).
- B. The Hospital Risk Management Program Officer shall ensure that a proper release of information is completed by the patient or his legal representative.
- C. The Hospital Risk Management Program Officer shall review the medical records and prepare a brief summary of the case and the nature of the request for the Hospital Administrator's approval (GMHA Policy Circular No.: 89-46).
- D. The Hospital Risk Management Program Officer shall apprise the Associate Administrator of Medical Services of any potentially litigious case involving patient care.
 1. The Associate Administrator of Medical Services shall discuss the case with the Hospital Administrator.

2. The Hospital Risk Management Program Officer, upon the direction of the Associate Administrator of Medical Services, shall refer the case to the appropriate departments for review and if necessary, develop and implement corrective action.
- E. The Hospital Risk Management Program Officer shall inform the Medical Records Department to keep the patient's medical records in the litigation file.
- F. The Hospital Risk Management Program Officer shall maintain a photocopy of the patient's medical records.
- G. The Hospital Risk Management Program Officer shall inform the Hospital Administrator of the status of all potentially litigious cases.

II. Patient/Visitor Complaint

Voicing a complaint does not compromise a patient's future access to care at GMHA.

- A. The Hospital Risk Management Program Officer will be immediately informed of any patient or visitor complaint by appropriate hospital personnel.
- B. The Hospital Risk Management Program Officer shall make a thorough investigation of the complaint.
- C. The Hospital Risk Management Program Officer shall seek the advice of the GMHA legal counsel if necessary.
- D. The Hospital Risk Management Program Officer shall discuss with the Associate Administrator of Medical Services any complaints involving the clinical aspects of patient care.
- E. The Hospital Risk Management Program Officer shall discuss with appropriate department heads any complaints involving their respective departments.
- F. The Hospital Risk Management Program Officer shall prepare a case summary for the Hospital Administrator and Associate Administrator of Medical Services in their deliberation for disposition of the complaint.
- G. The Hospital Risk Management Program Officer, upon the direction of the Associate administrator of Medical Services or the Hospital Administrator, shall refer the complaint to appropriate departments and if necessary, develop and implement corrective action
- H. The Hospital Risk Management Program Officer shall prepare for the Hospital Administrator, a response to the complainant in a manner that substantially addresses the significant complaint.
- I. The Hospital Risk Management Program Officer shall secure completion of the appropriate claim and release of liability if the complaint results in writing off the medical bills for services rendered to the patient or visitor.
- J. The Hospital Risk Management Program Officer shall inform the Hospital Administrator of the status of all patient/visitor complaints.

- K. The Hospital Risk Management Program Officer shall maintain a current file of all patient/visitor complaints.

III. VISITOR/EMPLOYEE INJURY

- A. The Hospital Risk Management Program Officer will be immediately notified of all visitor and employee injuries sustained within the hospital premises through the Occurrence Summary and employee accident reports respectively.
 - 1. The Hospital Risk Management Program Officer will be paged and verbally informed during regular office hours by Patient Registration Office of all visitors seeking medical care at the Emergency Room for injuries sustained within the hospital premises.
 - 2. The Hospital Risk Management Program Officer will return to the hospital after office hours if the intensity and severity of the injury warrants this.
- B. The Hospital Risk Management Program Officer shall conduct a thorough investigation of the situation involving the injury.
- C. The Hospital Risk Management Program Officer shall seek the advice of the GMHA legal counsel, if necessary.
- D. The Hospital Risk Management Program Officer shall report to the Hospital Administrator the result of the investigation
- E. The Hospital Risk Management Program Officer shall coordinate with the Safety Officer and the appropriate department to develop and implement corrective action if necessary.
- F. The Hospital Risk Management Program Officer shall secure completion of the appropriate claim and release of liability if a decision is made by the Hospital Administrator to write off the medical bills for services rendered to the visitor or employee.

RESCISSION:

Policy No. 6180-3, Identification and Disposition of Potentially Litigious Cases, of the Administrative Manual made effective June 1989.