

Resource Document and may not be all inclusive: This is a document that can be utilized in the event a client wants to evaluate their current status of their Loss Control/Risk Management Programs and not a required document.

Loss Control/Risk Management Program Self Evaluation

Identify the areas that may be included in the facility's Loss Control/Risk Management Program/Plan:

Yes	No	Need to Develop	
___	___	___	Risk Management Plan or Facility/Company's Commitment to Risk Management
___	___	___	Abuse, Neglect, Exploitation and Misappropriation policy and staff training
___	___	___	Incident Reporting, Investigation and Root Cause Analysis Program
___	___	___	Resident Admission program/Age Related Risk
___	___	___	Quality Assurance and Performance Improvement
___	___	___	Grievance/complaint policy and procedure
___	___	___	HIPAA/Confidentiality policy/training–Release of information policy
___	___	___	Claims Management – process to identify potential legal issues- use of Arbitration Agreements
___	___	___	Staff Recruitment, selection and retention programs
___	___	___	Staff orientation/development/Competency Programs
___	___	___	Medical Staff Credentialing Policy/Medical Director
___	___	___	Professional Contract Review process
___	___	___	Public Relations program
___	___	___	Crisis Management Plan
___	___	___	Employee/Resident/Family Satisfaction Surveys

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Yes	No	Need to Develop	
___	___	___	Customer Service program/training - Commitment Statement - Hot Line # - Family Night
___	___	___	Facility Assessment
___	___	___	Water Management Program/Legionella
___	___	___	Smoking Policy/Smoking Assessment
___	___	___	High Risk Resident monitoring system
___	___	___	Fall Prevention/Management Program
___	___	___	Wound/Skin Program
___	___	___	Sitter Policy
___	___	___	Volunteer Policy
___	___	___	Safety program/Safety compliance rounds/Safety Committee
___	___	___	Safety/Fire/Emergency Disaster/Evacuation Plans
___	___	___	Emergency Preparedness Plan
___	___	___	Workplace Violence Policy and training
___	___	___	Active Shooter Policy and training
___	___	___	Resident and Family Councils
___	___	___	Defensive documentation training
___	___	___	Advanced Directives guidelines
___	___	___	Compliance rounds/ Environmental Checklist
___	___	___	Missing Resident/Elopement procedures
___	___	___	Standardized Procedure approval/audit process

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Yes	No	Need to Develop	
___	___	___	Health Information Management Policies and Procedures
___	___	___	Care planning communication and monitoring program for residents and families
___	___	___	Medical Director/Physician involvement processes
___	___	___	Emergency Phone Contacts
___	___	___	Refusal of Treatment/Negotiated Risk Agreements
___	___	___	Safe Medical Device Act
___	___	___	Photography Policy/Consent to Photograph
___	___	___	Vehicle Safety Program
___	___	___	Pet Policy
___	___	___	Record Retention Policy
___	___	___	Barber/Beauty Shop Guidelines
___	___	___	Exposure Control Plan
___	___	___	Hazardous Materials & Waste Plan
___	___	___	Corporate Compliance Program
___	___	___	Infection Control Program/ Antibiotic Stewardship
___	___	___	COVID Policies, vaccinations, testing, reporting, etc.

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