

Risk Control Self-assessment Checklist for Occupational Therapists

Healthcare Providers Service Organization and our insurance carrier partner CNA are dedicated to educating occupational therapists about risk. This self-assessment checklist was designed to help enhance patient safety and minimize your liability exposure. Use it to review your customs and practice to determine whether you are in compliance with the recommended standards of care.

Scope of practice	Yes	No	Actions needed to reduce risks
<i>I read my practice act at least annually to ensure that I understand the legal scope of practice in my state.</i>			
<i>I regularly attend continuing education courses and know the annual requirements needed to maintain my certification/licensure.</i>			
<i>If a job description, contract, or set of policies and procedures appears to violate my state's laws and regulations, I bring this discrepancy to the organization's attention and refuse to practice in breach of laws and/or regulations.</i>			
<i>I decline to perform any requested service that is outside my legal, professional and personal scope of practice, and immediately notify my supervisor of the situation.</i>			
<i>I contact the supervisor, risk management and/or legal department regarding more complex patient and practice issues, and if that fails, I contact the state or national professional organization and request an interpretation, opinion or position statement on practice issues.</i>			
<i>If necessary, I make use of the chain of command to resolve patient care or safety issues.</i>			
<i>If I work in more than one state, I familiarize myself with and follow applicable practice rules and regulations in every relevant jurisdiction.</i>			

Clinical specialty and competencies	Yes	No	Actions needed to reduce risks
<i>I practice or work in an area that is consistent with my education and experience, and my competencies are aligned with the needs of my patients.</i>			
<i>If my competencies are not suited to a patient's needs, I refer the patient to another healthcare provider.</i>			
<i>When asked to provide coverage for different patient populations, I determine whether I possess the proper competencies and decline the assignment if I do not.</i>			
<i>I receive an orientation or skills check-off whenever I am covering a different patient care area or specialty.</i>			
<i>I obtain continuing education and training to maintain and further my competence and professional development.</i>			

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Documentation	Yes	No	Actions needed to reduce risks
<i>I document every encounter with a patient, whether in person, by telephone, online or via any other communication tool.</i>			
<i>I document no-shows and appointment cancellations.</i>			
<i>I correct any charting errors in compliance with my organization's policy.</i>			
<i>I document concurrently and make a late entry only if it is necessary for the safe continued care of the patient, ensuring that the addition is appropriately dated and labeled as a late entry.</i>			
<i>I refrain from including in the record any inappropriate subjective opinions, conclusions or derogatory statements about patients, colleagues or other members of the patient care team.</i>			
<i>I follow sound documentation practices and check that my notes ...</i>			
<ul style="list-style-type: none"> ▪ Are consistent with the treatment plan. ▪ Justify the services billed. ▪ Reflect billing codes and support coding procedures. ▪ Meet state and local law. ▪ Comply with organizational, professional and ethical guidelines. 			
<i>I contact my manager, risk manager or legal department/counsel for assistance with documentation concerns or questions related to potential liability or regulatory matters.</i>			

Communication	Yes	No	Actions needed to reduce risks
<i>I consider the best means of communication when interacting with practitioners, patients and family members – e.g., written versus spoken, words versus pictures or models, in person versus by telephone.</i>			
<i>I monitor nonverbal cues from patients, such as grimacing, flinching, pallor or diaphoresis.</i>			
<i>I request that patients repeat back or paraphrase important information and demonstrate specific home treatment techniques to ensure comprehension.</i>			
<i>I practice active listening skills and teach-back techniques to ensure that patients understand my instructions.</i>			
<i>I avoid the use of complex medical terminology when speaking with patients.</i>			
<i>Following a patient injury, I inform the referring physician and/or parent or legal guardian and note whether the patient appears to need further clinical treatment.</i>			
<i>I actively solicit feedback from patients and document significant comments and queries in the patient healthcare information record.</i>			
<i>I follow organizational protocols and HIPAA regulations/requirements when communicating with patients and/or transmitting any protected health information via email or social media.</i>			
<i>I obtain the patient's written permission before sharing any protected health information with family members or significant others.</i>			
<i>I am sensitive to language barriers and use an interpreter when necessary, in accordance with organizational protocols.</i>			

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Professional conduct	Yes	No	Actions needed to reduce risks
<i>I speak to patients, families and staff in a courteous and professional manner, honoring their dignity and feelings.</i>			
<i>I respect patients' rights throughout the episode of care and am attentive to their wishes and preferences.</i>			
<i>I use a gentle touch and language when working with patients.</i>			
<i>I desist from using inappropriate or potentially insulting humor, sarcasm or idiomatic expressions (e.g., "No pain, no gain") that may impede communication and lead to reckless behavior.</i>			
<i>I am respectful of others' beliefs and values and am aware of my own cultural assumptions and the possibility of bias.</i>			
<i>I fully explain procedures and treatments to patients; describe any touching or discomfort they can anticipate during the assessment, monitoring and treatment process; and obtain their permission before proceeding.</i>			
<i>I treat the patient as a partner when developing a plan of care and throughout the course of treatment.</i>			
<i>I avoid inappropriate interactions and/or personal relationships with patients and family members.</i>			
<i>I offer patients the option of having a chaperone during treatment and utilize one if the patient requires treatment in sensitive areas, has expressed embarrassment or fear, or has displayed unusual behaviors.</i>			
<i>I do not hold sidebar conversations with other staff members when I am with a patient.</i>			
<i>I do not make or respond to personal telephone calls or text messages when I am with a patient.</i>			
<i>I refrain from discussing patient matters in public areas, such as hallways or elevators, as well as on social media sites.</i>			

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Patient Safety: Falls	Yes	No	Actions needed to reduce risks
<i>I evaluate every patient for risk of falling, utilizing a fall-assessment tool that considers the following factors, among others:</i>			
<ul style="list-style-type: none"> - Previous fall history and associated injuries. 			
<ul style="list-style-type: none"> - Gait and balance disturbances. 			
<ul style="list-style-type: none"> - Foot and leg problems. 			
<ul style="list-style-type: none"> - Reduced vision. 			
<ul style="list-style-type: none"> - Medical conditions and disabilities. 			
<ul style="list-style-type: none"> - Cognitive impairment. 			
<ul style="list-style-type: none"> - Bowel and bladder dysfunction. 			
<ul style="list-style-type: none"> - Special toileting requirements. 			
<ul style="list-style-type: none"> - Use of both prescription and over-the-counter medications. 			
<ul style="list-style-type: none"> - Need for mechanical and/or human assistance. 			
<ul style="list-style-type: none"> - Environmental hazards. 			
<i>I identify higher-risk patients, including those who have experienced recurrent falls or have multiple risk factors.</i>			
<i>I conduct a home safety check prior to commencement of services for home health/hospice patients.</i>			
<i>If I detect safety problems in the home, I recommend corrective actions and include these safety measures in the patient service agreement.</i>			
<i>I regularly assess patients and modify the healthcare record in response to changes in their condition.</i>			
<i>I inform patients and families of salient risk factors and basic safety strategies.</i>			
<i>I document all assessment findings and incorporate them into the patient service plan.</i>			
<i>I document the patient's condition at each visit, and I also ...</i>			
<ul style="list-style-type: none"> - Review previous fall history and associated injuries. 			
<ul style="list-style-type: none"> - Check for gait and balance disturbances. 			
<ul style="list-style-type: none"> - Report any changes to the physician and family in a clear and timely manner. 			
<ul style="list-style-type: none"> - Perform frequent home safety checks, if applicable. 			
<ul style="list-style-type: none"> - Reinforce fall-reduction tactics with patients and family. 			
<ul style="list-style-type: none"> - Encourage patients to ask for assistance with risky tasks. 			
<ul style="list-style-type: none"> - Keep accurate, detailed records of patient encounters. 			
<i>After a fall, I offer emotional support to the patient and caregiver.</i>			
<i>I perform post-fall analysis, describing the circumstances of the fall and also ...</i>			
<ul style="list-style-type: none"> - Identifying major causal factors, both personal and environmental. 			
<ul style="list-style-type: none"> - Indicating the patient's functional status before and after the fall. 			
<ul style="list-style-type: none"> - Noting medical comorbidities. 			
<ul style="list-style-type: none"> - Listing witnesses to the fall. 			
<ul style="list-style-type: none"> - Intervening to prevent or mitigate future falls. 			
<i>I conduct a thorough post-fall analysis and incorporate findings into quality assurance and/or incident reporting programs.</i>			

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Environment of care	Yes	No	Actions needed to reduce risks
<i>I monitor the environment of care to prevent accidents, being careful to ...</i>			
<ul style="list-style-type: none"> - Secure entrances and exits. 			
<ul style="list-style-type: none"> - Maintain unobstructed hallways and treatment areas. 			
<ul style="list-style-type: none"> - Restrict access to hazardous substances and areas not used for patient care. 			
<ul style="list-style-type: none"> - Conduct preventive maintenance and periodic safety checks on all equipment, per manufacturer guidelines and organizational policy. 			
<ul style="list-style-type: none"> - Ensure that equipment needed for each patient is readily available and checked before each use, and to remove any equipment that appears to be broken, unreliable or unsafe. 			
<ul style="list-style-type: none"> - Train patients in how to use equipment appropriately, and inform them of the risks of improper operation. 			
<ul style="list-style-type: none"> - Sequester any equipment that is involved in a patient injury. 			

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I monitor the
environment of care
to prevent accidents.



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