



**BUREAU OF FACILITIES & LICENSING  
HEALTH FACILITIES PROGRAM**

**Healthcare Facility Risk Management Plan Checklist**

Facility Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ KS Zip: \_\_\_\_\_

Risk Manager and Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

License Renewal Month: \_\_\_\_\_

Risk Management Plan Year: \_\_\_\_\_

**For KDHE use only**

Date Received: \_\_\_\_\_ Revision Requested: \_\_\_\_\_ Date Revision Received: \_\_\_\_\_

Date Approved: \_\_\_\_\_ Approved by: \_\_\_\_\_

The healthcare facility Risk Manager must complete all elements of the Risk Management Checklist and attach it to the front of the completed Risk Management Plan (RMP). The RMP covers all required elements for Kansas Statutes and Regulations KSA 65-4922 and KAR 28-52-1. The complete RMP must be submitted to KDHE annually at a minimum of 60 days prior to the license renewal date of the healthcare facility. It is recommended to submit the RMP 90 days prior to the Kansas Department of Health and Environment (KDHE) license renewal date to avoid any licensing delays.

A letter will be sent to the facility indicating whether the RMP was approved or not approved. If the RMP was not approved a copy of the checklist will be sent with the notification letter indicating areas to be corrected. The facility must make the necessary changes or additions to the RMP and re-submit the RMP in its entirety for review. Attach a copy of the checklist with the KDHE reviewer notes to the front of the revised RMP and note that this is a revised RMP at the top of the form. The RMP must be approved before KDHE can issue a license renewal for the facility.

**Submit completed checklist and Risk Management Plan via email to:**

kdhe.riskmanagement@ks.gov (preferred)

**or by fax to:**

785-559-4285

<b>RISK MANAGEMENT PLAN ELEMENTS</b>		<b>PAGE</b>	<b>For KDHE use only</b>	
			<b>MET</b>	<b>NOT MET</b>
All Risk Management Plans must include the following elements:				
1	The healthcare facility has a current Risk Management Plan (RMP) submitted to KDHE. Failure to submit such a plan shall result in denial of the renewal of the facility's license. KSA 65-4922; KSA 65-4921(a); KAR 28-52-1(a)			
2	Name and address of the healthcare facility licensed by KDHE. KAR 28-52-1(e)(4)(A)			
3	Reportable Incidents as defined per regulation. KSA 65-4921(f); KAR 28-52-4			
4	Description of the reporting system that is based on the requirement of the duty of all health care providers, staff, agents and employees of the facility that are directly involved in the delivery of health care services to report reportable incidents. KSA 65-4922(a)(3); KAR 28-52-1(e)(3)			
5	Identified written form on which employees and health care providers shall report clinical care concerns. KAR 28-52-2(a)			
6	Description of the process where incidents are acknowledged and logged or tracked by the Risk Manager. KAR 28-52-2(b)			
7	Description of the process that discusses the impaired practitioner and the duty to report, if identified. KSA 65-4924(a)			
8	Description of the process for a reportable incident where each incident is assigned an appropriate SOC. KAR 28-52-4(a)(1)-(4); KAR 28-52-4(b)			
9	Description of the process where a separate SOC determination is made for each involved provider/person and each clinical issue reasonably presented by the facts for each reportable incident. KAR 28-52-4(b)			
10	Description of the process where each standard-of-care determination shall be dated and signed by an appropriately credentialed clinician authorized to review patient care incidents on behalf of the designated committee. KSA 65-4922; KAR 28-52-4(c)			
11	Description of the process where each final SOC determination is approved by the RM Committee. KSA 65-4923; KAR 28-52-3(b); KAR 28-52-4(c)			
12	Description of the involvement of the medical staff in RM processes. KAR 28-52-1(e)(4)(C)			
13	Frequency of the meetings where the RM committee meets at least quarterly. KAR 28-52-3(b)			
14	Description of the review and evaluation of all patient services whether provided by the facility employees and staff or outside contractors or consultants. KAR 28-52-1(e)(3); KAR 28-52-1(d)			
15	Description of the process that the Risk Manager submits accurate quarterly reports with statistical data to KDHE. KSA 65-4923(d); KAR 28-52-1(e)(4)(E); KAR-28-52-4(b)			
16	Name of regulating agency the facility is required to report to. KSA 65-4921(a); KSA 65-4923(b); KAR 28-52-1(e)(4)(E)			
17	Description of the procedures for reporting and documenting findings, conclusions, recommendations, actions taken, and the results of actions taken. KAR 28-52-1(c)			
18	Standard of Care (SOC) as defined per regulation. KSA 65-4921; KAR 28-52-4			
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19	Description of the process where the Risk Manager submits individual incident reports (IIR)s with SOC III and SOC IV final determinations to the appropriate regulating agency or to KDHE as appropriate (with individual information redacted). KSA 65-4923; KAR 28-52-4(b)			
20	Process of the publication and education of the RMP to hospital or agency personnel. KAR 28-52-1(i)			
21	Description of the system and process for the investigation and root cause analysis of each incident. KSA 65-4922(a); KAR 28-52-1(c); KAR 28-52-1(e)(1)			
22	Description of the investigation and analysis of the frequency and causes of reportable incidents. KSA 65-4922(a); KAR 28-52-1(c); KAR 28-52-1(e)(1)			
23	Description of the process to minimize through mitigation and/or remediation the occurrences of reportable incidents and injuries within the healthcare facility. KSA 65-4922(a)(2); KAR 28-52-1(e)(2)			
24	Description of the governing body that reviews and approves the RMP on an annual basis. KAR 28-52-1(b)			
25	Description of confidentiality provisions and when used. (This includes anything not provided due to a conflict with KORA, et al.) KSA 65-4922(g)			
26	Provision for no retaliation or retribution including discharge or discrimination against any employee making a report in good faith. KSA 65-4922(g); KSA 65-4923(a); KSA 65-4928			
27	Provision for reports, investigation tools, minutes and other documentation retention for a period of 12 months after the completion of the investigation. KSA 65-4922(a); KAR 28-52-1(c); KAR 28-52-2(c)			
28	Description of the resources dedicated to implementation of the RMP. KAR 28-52-1(e)(5)			
29	The current designated risk manager is named in the RMP. KAR 28-52-1(e)(4)(B)			
30	Name and title of staff involved in the risk management process including the names and titles of the Medical Staff Members. K.S.A. 65-4923 and L. 1986, Ch. 229, New Section 4(a)(2); KAR 28-52-1(e)(4)(C); KAR 28-52-3(a)			
31	Documentation that the governing body completed the annual review and approved the document and the date approved. KAR 28-52-1(b); KAR 28-52-1(e)(6)			
32	Organization chart indicating the positions of the Risk Management Committee. (May be redacted information) KAR 28-52-1(e)(4)(D)			

*PRIVACY AND CONFIDENTIALITY NOTICE: This privileged communication is part of Risk Management Program and is protected information and non-disclosable or discoverable. This is including any attachments that may contain confidential information and is intended only for the individual or entity to which it is addressed as part of the Risk Management Program. Any review, dissemination, or copying of this communication by anyone other than the intended recipient is strictly prohibited.*

As the Risk Manager of the health care facility, I hereby attest that the risk management plan and checklist submitted to the Kansas Department of Health and Environment are true, complete and accurate to the best of my knowledge without known errors or omissions.

Printed Name and Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_