



Risk Management SNAPSHOT

Current issues and hot topics
in healthcare risk management.



Introducing Enterprise Risk Management



Medical Mutual Insurance Company of Maine is adopting the Enterprise Risk Management (ERM) framework in alignment with the American Society for Health Care Risk Management (ASHRM). Over the coming months, you will begin to see some changes to our website and other risk management resources as we progress in this direction. You may be asking what ERM is and how it affects an organization.

It is a framework for achieving safe, reliable health care and is a key ASHRM initiative in its mission to help promote safe and trusted health care. ASHRM has developed an [Enterprise Risk Management](#) tool to understand the framework, the principles, and the domains.

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ASHRM has [ERM Resources](#) available as well as an [ERM Readiness Assessment Questionnaire](#) you can take to see where your organization falls around the implementation of ERM.

Critical Care Guideline Changes from the Society of Critical Care Medicine

The Society of Critical Care Medicine's (SCCM) 2024 Critical Care Congress met in January 2024 and presented some updated guidelines "regarding the use of corticosteroids and glycemic control in critical illness along with a new guideline on recognizing and responding to clinical deterioration outside the intensive care unit (ICU)." Hospitals are strongly encouraged to review the updated guidelines and consider revising their own policies, protocols, and practices if indicated.

In this article, [Critical Care Guideline Changes Boost Corticosteroid Uses, Role of Families](#), Medscape provides a summary review of the changes.



Use of Corticosteroids

The [focused update](#) to guidelines for corticosteroids in sepsis, acute respi-

ratory distress syndrome (ARDS), and community-acquired pneumonia (CAP) changed several recommendations from the 2017 iteration based on more recent evidence.

Glycemic Control in the ICU

An update to the [glycemic control guidelines](#) for critically ill adults and children, last revised in 2012, changed the insulin infusion recommendations and gave endorsement to explicit decision support tools.

Clinical Deterioration Outside the ICU

SCCM issued a new guideline for recognizing and responding to clinical deterioration outside the ICU.

In it, the society encouraged the incorporation of families into care practices, suggesting that family and partner concerns be utilized as part of hospital early warning systems, as these individuals should be able to recognize the differences in a patient's clinical status that may indicate deterioration, and then alert care staff.

This article falls under **CLINICAL/PATIENT SAFETY** in the Enterprise Risk Management (ERM) risk domains.

Risks associated with the delivery of care to patients, residents, and other health care customers. Clinical risks include failure to follow evidence-based practice, medication errors, hospital acquired conditions (HAC), serious safety events (SSE), health care equity, opportunities to improve safety within the care environments, and others.

Blocking Information in Your EHR Might Cost You

The U.S. Department of Health and Human Services (HHS) who oversees the federal law known as the Health Insurance Portability and Accountability Act (HIPAA) has proposed a new rule that would cost healthcare providers and facilities significant financial penalties for improper information blocking. This new rule could be very costly for providers and organizations who are not caught up with regulations or not auditing appropriately to mitigate issues as they occur.

Information blocking, which is defined as preventing or materially discouraging access, exchange, or use of electronic health information, is a violation the HHS takes very seriously. Although this new rule is still within the public comment phase, it is predicted to move forward quickly. The proposed financial penalties are being tied to eligibility status and reimbursement rates under the Centers for Medicare and Medicaid Services programs. A recent article published by Healthcare IT News, [Info blocking exceptions need special attention from providers](#), highlights the details known so far.



This article falls under **LEGAL/REGULATORY** in the Enterprise Risk Management (ERM) risk domains.

Risk within this domain incorporates the failure to identify, manage, and monitor legal, regulatory, and statutory mandates on a local, state, and federal level. Such risks are generally associated with fraud and abuse, licensure, accreditation, product liability, management liability, Centers for Medicare and Medicaid Services (CMS) Conditions of Participation (CoPs) and Conditions for Coverage (CfCs), as well as issues related to intellectual property.

The American Heart Association and American Academy of Pediatrics Update Neonatal Resuscitation Guidelines

The American Heart Association (AHA) and American Academy of Pediatrics (AAP) have issued a focused update to the 2020 neonatal resuscitation guidelines. Hospitals are strongly encouraged to review the updated guidelines and consider revising their own policies, protocols, and practices if indicated.

A recent article by Medscape, [AHA, AAP Update Neonatal Resuscitation Guidelines](#) outlines the additional recommendations to the guidelines. The recommendations provide new guidance on the use of intact umbilical cord milking, device selection for administering positive-pressure ventilation, and an additional primary interface for administering positive-pressure ventilation.



The full article can be found on the AHA journal website 2023 American Heart Association and American Academy of Pediatrics Focused Update on Neonatal Resuscitation: An Update to the American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care.

This article falls under **CLINICAL/PATIENT SAFETY** in the Enterprise Risk Management (ERM) risk domains.

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