

ATTENDEE HANDOUT

POINTING TO SAFETY PANEL SERIES

Panel 2: Risk management for acupuncture clinics



Pointing to Safety Expert Panel Webinar Series

Panel 1: Understanding How Malpractice Claims Happen - May 15th

Panel 2: Risk Management for Acupuncture Clinics - June 12th

Panel 3: Risk Management with Herbal Prescribing - July 24th

For more information and to register for other panels go to

<https://www.miec.com/acusafetypanels/>

Panel 2: Risk Management for Acupuncture Clinics

Strategies for reducing risk and enhancing patient safety

1. Trauma Informed Care (foundational to safety)
2. Professional boundaries
3. Accountability to patients
4. Communication (crucial element!)
5. Informed Consent
6. Documentation
7. Implementing standard clinic processes and procedures
8. Proactive protection/risk mitigation and supporting a legal defense

Checklist for risk management implementation

The following is a general guide for implementing best practices in risk management into your practice. It is recommended these be a normal way of doing business; repetitive such that all patients, treatments, etc are rendered in the same way. It is not an exhaustive list. Use it as a starting point and add to it over time. Better yet, create a mastermind group with your colleagues to create something together.

- Documentation:
 - Always get informed consent, written and discuss verbally. Elicit questions and find out what patient is/is not comfortable with. Refer to Lisa's presentation and notes on Trauma Informed Care)
 - Collect a detailed medical history
 - Clear treatment plan
- Establish customary practice and processes
 - Give handouts to all patients about modalities - cupping, gua sha, moxa, etc (what it is, how applied to body, what to expect, how to contact you afterwards is something isn't right). → Develop standard response plan for how you will deal with these
 - Checking equipment for safety at regular intervals.
 - Practice for checking floor for needles (i.e. after each patient, end of shift, etc)
 - Have a method for patients to reach you while they are left alone during treatment. Teach them what it is, how to use it, and response time to expect.
- Establish practice policies
 - Billing, appointments, response to questions, e-communication
 - Provide in writing to patients at the first visit.
 - Withdrawal from care - must provide date (15-30 days from date of letter), resources where patient can find another provider, how to obtain records. Must mail withdrawal letter by certified mail.
- Communication with patients
 - Ensure all patient questions are answered.
 - Inform patients that they can withdraw or modify consent at any time (i.e. before or during a treatment).
 - Communicate where you will be touching sensitive parts of their body or adjusting clothing. Include that you will be using fabric to drape
 - Document all interactions in real time - treatments, post treatments, incidents/adverse reactions and steps you took, and any ongoing follow up.
 - Avoid texting (often misinterpreted), limit emails, etc.

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LIVE CREDITS ONLY; DISTANCE CREDITS ARE NOT AVAILABLE/APPROVED

Must be present for entire webinar to receive credits

NCCAOM PDAs will be reported directly to them.

California Acupuncture Board CEU certificates will be emailed to you.

ALLOW 2-4 week for processing

Email info@miec.com for assistance.