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HOW DO YOU SPELL RECALL RELIEF? R-A-S-M-A-S

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This year I was charged with rewriting our facility's Medical Device Recall policy for the Safety Committee. I had no idea what I was getting into. The policy was old and did not reflect current practice. So, unbeknownst to me, I began this journey to RASMAS with an attempt at the rewrite. Where do you start with a revision of a process? With a flowchart, of course.

I knew that electronic and paper copies of product recalls were coming into the hospital from every direction, but what I actually discovered was unbelievable. There were at least ten information entry points, multiple sources, much duplication, and little to no documentation of the follow-up or corrective actions taken on the recall notices we received. Even if we created a wonderfully written, up-to-date policy reflecting current practice, could we successfully execute the procedure? Based on the flowchart of my findings, the Safety Committee was doubtful.

That was the day I opened an email from Dr. Ches Alper in the HCI Risk Management Department announcing the negotiated contract with Mitretek Systems for its product, RASMAS. I began exploring the company and product immediately, which turned out to be a very wise and fruitful move on my part.

RASMAS (Risk and Safety Management Alert System) is a web-based recall management subscription service developed by Mitretek Systems of Falls Church, VA. RASMAS provides centralized recall oversight from a management perspective for alerts spanning across all hospital/healthcare products. The recall alert is received from many sources, assigned into one of 14 product domains and is directed automatically to the appropriate coordinator/department director in the hospital for processing. The alert is sent via email to the responsible individuals, who then access the web site and review/respond, forward to another individual, or close the alert. Should there be a delay in response, the system escalates that to the facility's "RASMAS System Administrator" (can you guess who that is?!). Reports can be generated from the system to provide updates to appropriate committees on the status of recall notices received since previous meetings.



Getting Approval

This was the most difficult part of the process. The cost, an annual subscription fee, is determined on a per bed basis. We began with the end in mind - the Safety Committee knew what we needed. The Mitretek representative set up a very informative web-based conference call for the Safety Committee members in order to demonstrate the system. Based on the committee's knowledge of our facility's current manual process and what RASMAS could do to make us more efficient with information processing and improving patient safety, the committee approved the "go forward" to administration. I scheduled the meeting with the CEO.

What did I take with me? The flowchart. The review of the current process with the duplications and documentation/accountability failures had him almost there. I also provided product information gained from the webcast. The final step was the data comparison of the number of recall alerts provided via RASMAS versus what was coming into the hospital. There was no comparison - RASMAS provided so many more and there were no duplications. He gave me the "green light" to get the contract process started.

Working with Mitretek

Contract

The sales representative was available to help guide the process with the contract. The standard contract was easy to read and followed an easy, HCA-friendly format. The signing process was smooth and prompt. Once the contract was signed, I had immediate access to the RASMAS website.

Training

A RASMAS implementation team was assigned and information was provided. My job was to assign system domains to hospital staff and determine their roles as coordinators, responders, or both. Typically, the Risk Manager is the system administrator. This was the first step in the training process. Once the staff were identified and entered into the system, a web-based program was provided for training. It included access, computer screen shots, and working with an alert to completion. This training could be done either as a group viewing one screen or at individual computers, but we elected the group training.

Implementation

Company communication was frequent and available as needed during the implementation process. Post-implementation, our account was monitored to ensure there were no issues. A call/email was sent as needed to resolve identified problems.

Policy and Procedure

A template policy was provided from the company that was easily adapted to our facility.

Billing

RASMAS bills HCI which then bills the hospital via the intercompany process.

Quality Monitoring

The Safety Committee asked that I monitor the system to compare what is coming into the hospital via other sources with the alerts provided by RASMAS. Without a doubt, RASMAS is

providing more product alerts. We have not found any alerts that the system did not report to us. We agreed to monitor/report this to Safety Committee for six months.

Reflections Post-Implementation

The system works! We are successfully processing recall alerts daily. The website is easy to access and very user friendly and help from Mitretek is just a phone call or an email away. All of the learning tools are on the web site - new users can be added with ease. Workload for the Risk Manager/system administrator is minimal unless an alert is escalated due to a coordinator/responders failure to process. There are no down-sides to RASMAS.

And....that recall process flowchart went right out the hospital window!

(Editor's Note: If you are interested in learning more about RASMAS, contact Dr. Ches Alper in the HCI Risk Management Department at 615.344.1144 or via Outlook.)

Visit the RASMAS Web Site at <http://rasmass.mitretek.org>

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