Why nursing needs to be sensitive or interested in the topic?

There is greater exposure to the liability risk in nursing profession because of the changes in the delivery of health care, our society is more litigious that lead to increasing responsibility and accountability for nurses

Nurses are always the frontline for the patients. They work as their patients advocate which makes nurses the ideal person in playing a crucial role in risk management in health care field.

A large part of patient’s care is focused on Nurses work where they apply skills, knowledge and also experience to take of patients and their changing needs. When the care they provided falls short of standards because of several reasons such as lack of adequate staff, lack of resource and lack of essential medical equipment then nurses has to carry more responsibilities then before. During this kind of situation if any kind of incident occur that places the patient at risk, risk manager team will do their investigation to find out what went wrong and why. After analyzing the problem risk management nurses can recommend steps that improve the procedure and reduces the likelihood of occurrence.

There is risk on a daily basis for nurses and this can lead to serious consequences.

Importance of risk management in nursing

I was a new nurse at that time when I first started working as a nurse in the hospital. I was doing night shift and I was assigned to a patient who was on one to one observation for safety because he was at risk for fall. Around 1 am in the morning the person who was doing one to one observation call me for help because she took the patient to the bathroom and was trying to put him back to his bed but was unable to do by herself. I went to help her and we put the patient back in the bed and made him comfortable in the bed. 10 or 15 minutes later she called for help again and me along with my senior nurse went to the room and we found the patient was lying at the edge of his bed and he had no respiration and no pulse. I start doing CPR and the other nurse call code 99. The code team responded and the code lasted for almost two hours but unfortunately we were not able to save the patient and he died. Approximately 1 month later I was called into my ADNs office and she asked me if Mr X fall before code because the doctors note says Patient fall prior to the code and she also asked me why didn’t I write a occurance report if patient fall. She looked into my nurses note that says Patient was assisted back to his bed. She asked me if I assist the patient from the floor to the bed or