


<b>Name of Policy:</b> Communication: Risk Management and Patient Information Advocate  <b>Policy Number:</b> 3364-103-CCC-02  <b>Approving Officer:</b> Chief Executive Officer, Chief Nursing Officer  <b>Responsible Agent:</b> Service Excellence  <b>Scope:</b> University of Toledo Medical Center		  <b>Effective date:</b> 11/2025  <b>Original effective date:</b> 10/1988	
Key words: Communication, Risk Management, Patient Information Advocate, Notification			
<input type="checkbox"/>	New policy proposal	<input type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input checked="" type="checkbox"/>	Reaffirmation of existing policy

(A) Policy statement

Formal and informal lines of communication exist between Risk Management, Legal and Patient Information Advocate. Communication between these two areas helps to promote patient satisfaction, helps reduce conflict before it arises, and helps resolve unavoidable conflicts that develop.

(B) Purpose of policy

Establish systematic methods of communication between the Risk Management, Legal and the Patient Information Advocate in order to promote high-quality care, to address patient concerns and to identify / reduce risk exposures for the UT Medical Center.

(C) Optional additional section (add as needed E, F, G, etc.)

The UT Medical Center's Risk Management Program, in conjunction with the Patient Information Advocate will operate under the premise that early patient contact will identify special needs and concerns for resolution of problems. The Patient Information Advocate will seek support of the Manager of Risk Management and Legal for the following situations:

- (1) Notification of or involvement with patients who are seriously injured as a result of being a patient at UT Medical Center.
- (2) Notification of or involvement with circumstances resulting in lost / damaged personal belongings of patients.
- (3) Notification of or involvement with events where resolution is not possible and hostile behavior is exhibited by the patients or significant others (Campus Security may also be contacted).
- (4) Notification of or involvement with patient complaints perceived to be potentially compensable events or where there are verbalized threats to file a lawsuit.
- (5) Notification of or resolution of cases where certain circumstances (ex: misdiagnosis) are

communicated initially.

<p>Approved by:</p> <p>/s/</p> <hr/> <p>Daniel Barbee Chief Executive Officer</p> <p>10/27/2025</p> <hr/> <p>Date</p> <p>/s/</p> <hr/> <p>Kurt Kless Chief Nursing Officer</p> <p>10/27/2025</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by: Customer Service Director</i></p>	<p>Superseded policy: N/A</p> <p>Initial effective date: 10/1988</p> <p>All Review/Revision Dates:</p> <p>10/90 10/93 9/96 12/98 2/02 4/04 9/06 8/2008 2/2013 2/2016 11/2019 10/2025</p> <p>Next review date: 11/2028</p>
--	---