



RISKY BUSINESS

A History of WSHRM, part 3 (2001-2007)

Last in a series on the History of WSHRM, with information gathered by Past Presidents Jan Haedt, Kathy Swanson, Cathie Aschenbrenner and Judi Nelson.

2001

Board Members and Officers

Judi Nelson, President
Cathie Aschenbrenner,
President Elect
Denny Thomas, Past President
Jan Haedt, Secretary
Joyce Biehn, Treasurer
Judy Larson, Board Member
Saverna Stemper, Board Member
Pat Gottfredsen, Board Member
Deb Ankowicz, Board Member

Highlights

- WSHRM's Spring Conference "Ergonomics: What Now" was held at the Embassy Suites, Brookfield, WI on May 9, 2001. Content included HIPAA by Kalisa Barratt, JD, and OSHA Ergonomic Standards, Needle Safety and Record-keeping by Larry Caro of Marsh.
- The Annual Fall Conference: "Navigating Rough Waters" was held on September 27-28, 2001 at the Stone Harbor Resort in Sturgeon Bay. Content included patient rights, physician liability, long term care legal and ethical trends, respondeat superior, and an issues and safety forum (HCFA validation survey). Cathie Aschenbrenner requested that the membership take a moment of silence in

remembrance of those lost on September 11, 2001.

- WSHRM membership was 123.
- Judy Larson resigned from the Board and the position was not filled awaiting fall elections.
- Jan Haedt and Deb Ankowicz developed a storyboard presentation of our Chapter activities for ASHRM to be displayed at the ASHRM Annual Conference. The storyboard received Honorable Mention from ASHRM.
- WSHRM developed guidelines to address requests to release the WSHRM membership list.
- A History of WSHRM (1988 to 1992) was written by Nancy Doleys and presented to the membership.
- ASHRM's membership activities included international expansion.
- It was suggested to identify new members at the conferences in order to assist with welcoming new members into the Society.
- It was decided to award membership dues and registration fees for

annual fall WSHRM and ASHRM conferences as door prizes at the WSHRM fall conference.

- A motion was passed to make a contribution of \$1,000 to the Wisconsin Patient Safety Institute.



- The WSHRM Strategic Plan was updated for 2001-2003 to include previous goals with the addition of developing a Code of Ethics, which included a confidentiality agreement for Board of Director members, and promotion of CPHRM certification.

2002

Cathie Aschenbrenner, President
Jim McGinnis, President Elect,
Judi Nelson, Past President
Jan Haedt, Secretary
Joyce Biehn, Treasurer
Lori Gendelman, Board Member
Saverna Stemper, Board Member
Pat Gottfredsen, Board Member
Deb Ankowicz, Board Member

Highlights

- WSHRM membership was 119.
- The WSHRM Spring Conference was held May 8, 2002 at the Com-

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WSHRM History *cont. from p. 1*

fort Suites in Madison, WI. Denny Thomas conducted a CPHRM study session.

- The Annual Fall Conference entitled “Safe Harbor” was held on October 23-25, 2002 at the Stone Harbor Resort in Sturgeon Bay, WI. Content included gifts of a patient advocacy (panel discussion), medical malpractice climate, nursing shortage and impact on patient safety, emergency management from the Joint Commission standards, Wisconsin Patient Safety Collaborative, and risk management benchmarking.
- WSHRM began discussing development of a website for WSHRM and reduction in fees for retired members.
- Jim McGinnis resigned as President-Elect and Jan Haedt assumed responsibilities.
- 2002 was the first year WSHRM membership approved a slate of officers and board members rather than a ballot with election.
- Dues were increased to \$45.
- A WSHRM Code of Ethics was developed and approved at the annual meeting.
- The first fiscal audit by an outside accountant was conducted.
- Discussion initiated regarding a reduction in membership fees for retired members, and providing the newsletter to visually challenged members.

2003

Board Members and Officers:

Jan Haedt, President
Sue Engler, President Elect,
Cathie Aschenbrenner, Past President
Cindy Theys, Secretary
Joyce Biehn, Treasurer
Lori Gendelman, Board Member

Saverna Stemper, Board Member
Kathy Lensen, Board Member
Deb Ankowicz, Board Member

Highlights

- WSHRM membership was 120.
- The Spring Conference was held May 14, 2003 with featured speaker, Gerald Hickson, discussing the relationship of patient complaints and malpractice litigation.
- The Annual Fall Conference entitled “Managing the Tides of Change” was held October 23-24, 2003 at Stone Harbor Resort in Sturgeon Bay.
- Lori Gendelman and Jan Haedt met with WHA to discuss concerns regarding peer review statutory protections as representatives of WSHRM. A task force was formed by WHA to explore and draft legislative language to clarify and expand peer review protections to include quality data in Wisconsin and Jan Haedt sat on the task force as a WSHRM representative.
- An ad hoc committee was created to continue investigation of the website.
- WSHRM opened an account at Kinko’s for printing WSHRM materials.

2004

Board Members and Officers:

Sue Engler, President
Cindy Lusignan, President Elect,
Jan Haedt, Past President
Mary Mueller, Secretary
Mary Viergutz, Treasurer
Lori Gendelman, Board Member
Joanne Mercer, Board Member
Kathy Lensen, Board Member
Deb Ankowicz, Board Member

Highlights

- WSHRM membership was 114.

- The Spring Conference was held April 22, 2004 which included a half day session on basic risk management for those members new to the risk management field.
- The Annual Fall Conference entitled “The Spirit of Best Practices” was held October 1-2, 2004 at the Osthoff Resort in Elkhart Lake, WI. Content included how to self-manage claims, insurance basics, the effects of risk management on malpractice, working with law enforcement, JCAHO tracer methodology and the future of genetic research.
- A website master, Jason Frew, was selected to assist with development of the website platform.
- 2004 was the first year that program announcements were sent by e-mail to the membership.
- ASHRM audioconferences were offered at 4 sites throughout Wisconsin and paid for by WSHRM for members.

2005

Board Members and Officers:

Cindy Lusignan, President
Kathie Lensen, President Elect
Sue Engler, Past President
Mary Viergutz, Treasurer
Mary Mueller, Secretary
Patti Vail, Board Member
Colleen O’Connor Patzer,
Board Member
Betty Hove, Board Member
Joanne Mercer, Board Member

Highlights:

- WSHRM membership was 112.
- The Spring Conference entitled “Improving Your Compliance: What Every Practice Needs to Know” was held April 22, 2005 at the Kalahari Resort in Wisconsin

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Dells. Content included accreditation and licensure with speakers from the State of Wisconsin Bureau of Quality Assurance and CMS Region V.

- The Annual Fall Conference “Plan for the Future” was held September 22-23, 2005 at the Osthoff Resort in Elkhart Lake. Topics covered included criminal background checks, insurance and retention, transforming meaningful events and errors into meaningful action, and the Terri Schiavo case.
- A draft of a master meeting calendar was presented to the Board to identify the timeline for routine Board activities (e.g. timeline for updates of documents) and identify accountabilities.
- The WSHRM membership brochure was updated.
- The WSHRM laptop was found to be outdated for our purposes and the Board elected to donate it to Boys/Girls Club in Milwaukee.
- The WSHRM Mission/Vision/Goals were updated for 2005-2006 with added goals of continued affiliation expansion and plan to implement website.

2006

Board Members and Officers:

Kathie Lensen, President
Colleen O’Connor Patzer, President Elect
Cindy Lusignan, Past President
Mary Viergutz, Treasurer
Denise Fitzpatrick, Secretary
Barbara Connelly, Board Member
Patty Pate, Board Member

Patti Vail, Board Member
Betty Hove, Board Member

Highlights

- WSHRM membership was 120.
- The Spring Conference entitled “Disaster Preparedness and Beyond” was held at the Country Springs Hotel in Pewaukee. Content included refresher on risk management concepts, tools and techniques as well as a panel of experts discussing hospital disaster preparedness.
- The Annual Fall Conference entitled “Riding the Claim Wave” was held on October 5-6, 2006 at the Ostoff Resort in Elkhart Lake. Content included a report from the Wisconsin Patient Compensation Fund.
- WSHRM began researching tax exempt status and corporation status.
- The Board approved a motion to offer a 50% reduction in membership fees to retired members.
- Matt Wahoske was appointed and accepted the role as WSHRM’s webmaster.

2007

Board Members and Officers

Colleen O’Connor Patzer, President
Deb Ankowicz, President-Elect
Kathie Lensen, Past President
Mary Viergutz, Treasurer
Judi Nelson, Secretary
Barb Connelly, Board Member
Patty Pate, Board Member
Patti Vail, Board Member
Betty Hove, Board Member

Highlights

- WSHRM membership was 136.
- The Spring Conference entitled “Criminalization of Medical Errors” was held April 27, 2007 at the Crown Plaza Hotel in Madison. Discussion was focused on recent charges brought against a Wisconsin nurse after a medication error and the resulting death of the patient. Speakers included Stephen Hurley, the nurse’s defense attorney, and Jack Zweig, Wisconsin Department of Regulation and Licensing; representatives from WHA and WNA provided a legislative update.
- The Annual Fall Conference entitled “Back to Basics: It’s the Simple Things” was held November 8 & 9, 2007 at Wintergreen Resort in Wisconsin Dells. Content included emergency department claims and communication, disruptive physicians, team building, patient compensation fund update, interpreter services and the professional patient.
- The Board addressed the issues of requests for media presence at WSHRM Educational Conferences, and requests for WSHRM to provide job opportunities to members.
- Board continued work on tax exempt and corporation status with selection of a law firm to perform this work for WSHRM.
- Developed a Bylaws Committee for 2008 to conduct a complete review of WSHRM bylaws to ensure consistency with ASHRM.

Fall Conference Review: The Ripple Effect

By Patti Vail,
WSHRM President Elect

We are looking forward to the Fall Conference at Stone Harbor Resort in Sturgeon Bay on November 5-7. The brochures were sent out via email on September 22nd. Please feel free to forward it on to anyone who may be interested in attending.

We are planning for more networking and vendor time by popular request. We are submitting the program objectives to ASHRM for Continuing Education credits. At this time, we do not have the exact number of credits we will be granted but we can promise that this is an economical conference.

We are starting out Thursday with Rog Bates' presentation "Humor Matters at Work". We all know that, without the release provided by laughter, our lives would be just too tough to take sometimes. Rog is an award-winning stand-up comedian and songwriter who has authored the book *How To Be Funnier, Happier, Healthier & More Successful*. Rog is

the President of Carolina Health & Humor Association which provides ongoing humor programs for Duke and UNC.

The next session will be Mary Wolverton, an attorney with Peterson, Johnson & Murray, presenting on "Never Events" (see article on p. 5). There are risk management concerns that come with CMS changes. Mary will provide insight to dealing with possible litigation related to these "never events". Mary has practiced medical defense law for 30 years and has been a very active member of WSHRM since its inception.

Following lunch and the annual meeting, we will have a session on risk management techniques for CyberRisk presented by Paul E. Gouge, Risk Control Specialist with Austin Risk Control. Paul has a Civil Engineering degree and has been with CNA since 1986. Paul has been responsible for CNA's Technology Loss Prevention Division based in Austin, Texas since 2004 and works with micro-chip fabricators, telecommunications providers, software companies and internet service

providers. Paul's presentation will continue after our afternoon break.

We are looking forward to the networking reception and dinner on Thursday evening. This will be a time to reconnect with our risk management colleagues from across the state.

On Friday morning Diane Batten, Risk Manager with Aurora Sinai, will be speaking on techniques and efforts to recover lost patient items. Diane is a Licensed Health Care Risk Manager and RN who came from Florida to practice risk management in Wisconsin. Her background included risk management for acute care facilities, multi-specialty physician groups and home health. She has worked in Florida's insurance claim industry and briefly as a nurse paralegal for a medical malpractice plaintiff firm. She has also taught in a university-based risk management program.

Bill Brown will round out the conference on Friday, covering customer service/patient safety. Bill is the Founder and Principal of Interim Healthcare Executive Solutions, Inc. Bill has over 30 years of healthcare experience including acute rehab hospitals, in positions ranging from staff nurse to chief nursing officer. Bill's expertise also includes reorganizing management structure to streamline decision making processes, implementing productivity standards for all professional staff as well as restructured care delivery models. Bill has recently retired from 35 years of active and reserve duty in the Navy at the rank of Captain.

We continue to have generous sponsor support that makes this and all of our conferences possible. Please take the time to thank our sponsors personally during the conference.

**Don't forget to visit our website at
www.wshrm.org and view archived issues
of *Risky Business***

If you need assistance in logging on, please e-mail Matt Wahoske (mwahoske@fincorsolutions.com) to obtain a copy of the "Setting up your WSHRM.org Members Account" instructions.

If your contact information has changed, please go to member's area and click on "Edit Account" and select "Edit Your Contact Details".

You will be asked for your username and password prior to receiving a screen to update your information.

Also, the board would like to give a big thank you to Matt for maintaining and keeping our website up-to-date. Great job, Matt.

What Are “Never Events”?

By Caroline Brill, RN, JD,
Senior Risk Management Consultant

In 2006, Leapfrog partnered with managed health plans and hospitals to request that hospitals not bill for the National Quality Forum’s (NQF) “never events.”¹ This was the beginning of a trend to interconnect health care reimbursement rules with quality and risk management, now reflected in the recent Centers for Medicare and Medicaid Services (CMS) plans to not pay for certain “preventable” adverse events beginning in 2008. These regulatory expectations will have astonishing and predictable effects on patient safety and risk prevention programs in hospitals across the country. Hospital risk managers and patient safety officers can now expect significant growth in their lists of projects designed to pursue performance improvement and patient safety initiatives. The obvious challenge will be to develop proactive processes to avoid occurrence of “never events,” help create a “high reliability organization,” and aggressively respond to “never events” when they occur.

As recognized by the CMS, the NQF identified several incidents as serious reportable “never events,” including the following:

Surgical Events

- Surgery performed on the wrong body part
- Surgery performed on the wrong patient
- Wrong surgical procedure performed on a patient
- Retention of a foreign object in a patient after surgery or other procedure
- Intra-operative or immediately post-operative death in a normal health patient (defined as a Class 1 patient for purposes of the Ameri-

can Society of Anesthesiologists patient safety initiative)

Product or Device Events

- Patient death or serious disability associated with the use of contaminated drugs, devices, or biologics provided by the healthcare facility
- Patient death or serious disability associated with the use or function of a device in patient care in which the device is used for or functions other than is intended
- Patient death or serious disability associated with intravascular air embolism that occurs while being cared for in a healthcare facility

Patient Protection Events

- Infant discharged to the wrong person
- Patient death or serious disability associated with patient elopement (disappearance) for more than four hours
- Patient suicide, or attempted suicide resulting in serious disability, while being cared for in a healthcare facility

Care Management Events

- Patient death or serious disability associated with a medication error (e.g., errors involving the wrong drug, wrong dose, wrong patient, wrong time, wrong rate, wrong preparation, or wrong route of administration)
- Patient death or serious disability associated with a hemolytic reaction due to the administration of ABO-incompatible blood or blood products
- Maternal death or serious disability associated with labor or delivery on a low-risk pregnancy while being cared for in a healthcare facility
- Patient death or serious disability associated with hypoglycemia, the onset of which occurs while the

patient is being cared for in a healthcare facility

- Death or serious disability (kernicterus) associated with failure to identify and treat hyperbilirubinemia in neonates
- Stage 3 or 4 pressure ulcers acquired after admission to a healthcare facility
- Patient death or serious disability due to spinal manipulative therapy

Environmental Events

- Patient death or serious disability associated with an electric shock while being cared for in a healthcare facility
- Any incident in which a line designated for oxygen or other gas to be delivered to a patient contains the wrong gas or is contaminated by toxic substances
- Patient death or serious disability associated with a burn incurred from any source while being cared for in a healthcare facility
- Patient death associated with a fall while being cared for in a healthcare facility
- Patient death or serious disability associated with the use of restraints or bedrails while being cared for in a healthcare facility

Criminal Events

- Any instance of care ordered by or provided by someone impersonating a physician, nurse, pharmacist, or other licensed healthcare provider
- Abduction of a patient of any age
- Sexual assault on a patient within or on the grounds of a healthcare facility
- Death or significant injury of a patient or staff member resulting from a physical assault (i.e., battery) that occurs within or on the grounds of a healthcare facility²

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Benchmarking

Several hospitals have already instituted comprehensive strategies to prevent an occurrence of the adverse events listed above. For example, Corning Hospital [in New York] developed a **fall prevention program** involving nurses, patients and families.³ Nurses are expected to assess each patient for fall risk by utilizing and acting upon a uniform set of questions.³ Various fall prevention interventions are implemented based on the answers to the questions, using the least restrictive means possible.

Other hospitals implemented a mandatory **“time-out” to prevent wrong site and wrong patient surgeries** according to standards set forth by The Joint Commission.⁴ This standard requires nurses and the surgical team to call a “time-out” in the operating room for a **final safety check** to verify that the correct procedure is done on the correct patient.⁵

Regardless of the type of adverse event and preventive measures taken to eliminate occurrence of clinical errors, mishaps, delays and omissions harmful to patients, the following are highly recommended:

- extensive staff education
- clear policies and standardized protocols
- systematic monitoring of implementation compliance

In addition, a risk management policy that guides the organizational response to the occurrence of a “never event” is indispensable. The policy should mirror the standard for acting in vigorous response to a “never event.” The Leapfrog Group suggests the following:

- Apologize to the patient and/or family affected by the never event
- Report the event to at least one of

the following agencies – The Joint Commission, a state reporting program for medical errors, or a Patient Safety Organization. [*Be sure to check with your state’s agencies for reporting requirements.*]

- Perform a thorough root cause analysis
- Waive all hospital costs directly related to a serious reportable adverse event⁶

For further assistance with this or any other risk management and patient safety needs in your acute care hospital, please contact The RM&PSI.

References:

1. Kevin B. O’Reilly, “Medicare Plans to Stop Paying for 6 Hospital-Acquired Conditions,” *amednews.com*, June 18, 2007, www.ama-assn.org/amednews/2007/06/18/gvsb0618.htm, 8/18/07.
2. U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services (CMS), “Details For: Eliminating Serious, Preventable, and Costly Medical Errors – Never Events,” *Fact Sheets*,

Released May 18, 2006, <http://www.cms.hhs.gov/apps/media/press/factsheet.asp?Counter=1863&intNumPerPage=10&checkDate=&checkKey=&srchType=1&numDays=3500&srchOpt=0&srchData=&keywordType=All&chkNewsType=6&intPage=&showAll=&pYear=&year=&desc=false&cboOrder=date>, 09/0407.

3. Corning Hospital, “Fall Prevention Program,” n.d., www.corninghospital.com/Educate/Fall_Pre.htm, 8/22/07.
4. Robert Davis, “‘Wrong site’ surgery is rare occurrence,” *USA Today*, 4/17/06.
5. The Joint Commission, *Universal Protocol for Preventing Wrong Site, Wrong procedure, Wrong Person Surgery™*, The Joint Commission, Oakbrook Terrace, IL, 2003.
6. The Leapfrog Group, “Leapfrog Group Position Statement on Never Events,” n.d., www.leapfroggroup.org/or_hospitals/leapfrog_hospital_quality_and_safety_survey_copy/never_events, 8/20/07.

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News & Notes

Congratulations to New CPHRMs

The Board of Directors, on behalf of the entire membership, would like to congratulate Patti Vail of Milwaukee, WI on achieving her CPHRM.

Conference Sponsorship

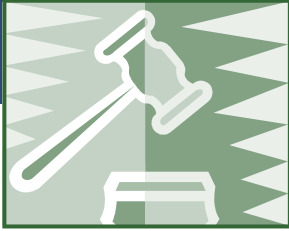
If your facility or organization is interested in being a sponsor or exhibitor at WSHRM’s educational programs please contact Judi Nelson at 715-356-8995 or by e-mail: nelsonj@hyhc.com.

Introduce a Fellow Risk Manager to WSHRM

If you know of a fellow risk manager who is not a member of WSHRM, please feel free to forward a copy of this newsletter and introduce them to this great organization.

Calling all Attorneys

WSHRM is looking to expand our list of attorneys willing to assist us in writing our “Case Law Update” articles. Anyone interested, please contact Patty Pate at 608-250-1084 or by e-mail at patty.pate@deancare.com.



Case Law Update: Court Protects Third Party Evaluators of Patient Care

By Susan Engler JD,
Gonzalez Saggio Harlan LLP

As patient safety takes center stage so does the need for protecting the evaluators of patient care. The Wisconsin Supreme Court further clarified the peer review protections in *Rechsteiner v. Halzelden, Spooner Health System, Board of Directors of Spooner Health Systems, et al.* 2008 WI 78.

A surgeon was involved in a snowmobile accident while on-call. The surgeon was found to have been consuming alcohol. The hospital required that the surgeon undergo an alcohol assessment or submit to an immediate leave of absence. The surgeon's privileges were suspended until the alcohol assessment was completed as well as any recommended treatment. The surgeon agreed to an alcohol assessment and treatment at a private treatment center. The hospital arranged and paid for the assessment.

The hospital administrator, the CEO and members of the Board were contacted by the treatment center requesting information pertaining to the physician's career and alcohol use. The surgeon claimed that the administrator and Board members gave false information to the treatment center resulting in a diagnosis of alcohol dependency. The treatment center recommended a 28 day inpatient treatment program. The treatment center later amended its diagnosis to "alcohol abuse" following subsequent independent assessments. Even with the amended diagnosis, the treatment center stated that the treatment recommendations would have been the same.

The surgeon brought suit against the hospital, CEO and Board of directors alleging defamation and negligent communication of false information to the treatment center as well as against the treatment center for negligent diagnosis.

The court found that the statements made by the hospital representatives to the treatment center were privileged because these communications qualified as part of peer review of medical services and that the hospital representatives were entitled to conditional immunity for their comments because the comments were made in good faith. The court points out the intentionally broad scope of the immunity protections and that it is not limited to "peer" professionals such as physicians and that persons outside the review committee can be an integral part of the overall review

process. The independent treatment center was enlisted by the hospital to assist in the evaluation and therefore entitled to the protections of the Wisconsin peer review statutes including immunity from suit.

The court stated that it would defeat the purpose of the peer review statute if it found that an outside entity participating in the assessment of a provider was not entitled to peer review protections. The court found that the treatment the surgeon received was not negligent even with the change in diagnosis. It explained that a wrong diagnosis is only actionable if it is followed by wrong treatment. The court also found that the treatment center was immune from negligence because it was central to the peer review process and the diagnosis was made in good faith.

Welcome New Members

The Board of Directors, on behalf of the entire membership, extends a warm welcome to our new WSHRM members:

Mary Bahr
Risk Management Consultant
Gundersen Lutheran
Lacrosse, WI
mebahr@gundluth.org

Claire Christensen
Quality Resource Manager
Shawano Medical Center
Shawano, WI
cchristensen@shawanomed.org

Janet Dixon
Director, Corp. Risk Management
Children's Hospital of Wisconsin
Wauwatosa, WI
jdixon@chw.org

Karen W. Miller
*Director of Quality &
Care Management*
Bay Care Health Systems, LLC
Green Bay, WI
kwmiller@baycare.net

Lisa Miller
Senior Underwriter
Medical Protective
Wrightstown, WI
lisa.miller@medpro.com



President's Corner

Deb Ankowicz

Summer is gone, autumn is here, and the WSHRM Fall Conference and Annual Meeting are right around the corner. Your President Elect, Patti Vail, and the Program Committee have put together a fabulous agenda for the Fall Conference and Annual meeting to be held November 5-7, 2008 at Stone Harbor Resort in beautiful Door County. Let's hope for great weather!

I am thrilled to see the number of you who are already registered for the conference and encourage those who have not yet registered to do so as soon as possible. You won't want to miss what looks to be one of our best conferences ever. See Patti's article on page 4 for details.

Our September 19, 2008 Board meeting held at Affinity Health System in Appleton, WI was very productive. The Board and I will fill you in on all we have worked on and achieved on your behalf this past year at our Annual Meeting, where you will also have the chance to approve the slate of dedicated and committed WSHRM members who have graciously agreed to serve you in leadership capacities next year. I encourage you all to become more involved in WSHRM over the next year. The experience is enriching and very rewarding. I guarantee you will be glad you did.

I hope that those of you fortunate enough to attend the ASHRM Annual Conference in Boston in October enjoyed the event. Patti and I attended the ASHRM Leadership Workshop on Thursday, October 1st and connected with other state chapter leaders. I was honored to be a part of a panel presentation on "Revitalizing your Chapter in Challenging Times" where I shared our successful sponsorship program.

Thanks to Judi Nelson for her organization and leadership of the program and thanks to all our generous sponsors for making it possible for us to provide quality programming to our membership year after year. Please take the time to thank our sponsors and visit the vendors at our Fall Conference.

Kudos to our newest CPHRM, Patti Vail! I know that many of you are studying and preparing to take the certification exam. All the best to you and fear not, you will succeed. The value of the credential is growing, as evidenced by the many job descriptions we see advertised on the ASHRM website listing CPHRM as a requirement for the position.

As always, please let your Board know if there are ways that WSHRM can better serve your risk management needs. We welcome your ideas to continue to improve our service to you and to provide leadership in the field of healthcare risk management in Wisconsin. As my term comes to an end, I want to thank you for the opportunity to serve as your President. It has truly been a great honor. Hope to see you all soon in the Door!

Special Thanks

WSHRM would like to thank our generous sponsors of the Fall Conference (November 5-7, 2008):

- Arthur J. Gallagher Risk Management Services, Inc
- CNA Healthpro
- Gonzalez Saggio & Harlan LLP
- Hall, Render, Killian, Heath & Lyman, P.C.
- Johnson Insurance
- Marsh USA
- The Medical Protective Company
- Midwest Medical Insurance Company
- Otjen, Van Ert & Weir, S.C.
- PIC Wisconsin, a ProAssurance Company
- Risk Management & Patient Safety Institute
- rL Solutions
- Sentry Insurance

Without their continued support, we would not have such a strong organization and would not be able to provide two conferences each year.

WSHRM Board of Directors

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Deb Ankowicz

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Membership Chairperson

Board Meeting Schedule

Members are welcome to attend board meetings and encouraged to contact any board member with agenda items. To reserve a spot, contact Deb Ankowicz at 608/263-9202 or dankowicz@uwhealth.org.

- **November 5, 2008**

Afternoon prior to Fall Conference
at Stone Harbor, Door County

Interested in a board position?

Contact Colleen O'Connor Patzer at
414-221-6058 or cpatzer@gcd.com.

Education Events

2008 Education events are scheduled
as follows:

- **November 5-7, 2008**

Annual Meeting & Fall Conference
Stone Harbor, Door County

Risky Business is a publication of the Wisconsin Society for Healthcare Risk Management (WSHRM), a chapter of the American Society of Healthcare Risk Management. It is published on a quarterly basis and distributed to WSHRM members with information pertinent to the field of Risk Management.

Information contained in this publication is obtained from sources considered to be reliable, however accuracy and completeness cannot be guaranteed. Articles cannot be construed as legal advice.

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