



# Risk Management 5S Glow Up: Centralize, Organize, Shine!

Beata Zawadzka, MBA, RN-BSN, NE-BC, CPHQ,

Betsy Hannam RN-BSN, MEDSURG-BC, Mimi Coleman, RN-BSN

VA Portland Health Care System



The views expressed are those of the author(s) and do not reflect the official policy of the Veterans Health Administration or the U.S. Government.

## Background

- In the Veterans Health Administration, Risk Management operates separately from Patient Safety and oversees protected peer review, adverse event review, tort and disclosure coordination.
- These processes require secure, confidential documentation and multi-disciplinary collaboration.
- Previously, peer review workflows relied on email and spreadsheets, creating inefficiencies, inconsistent data, and confidentiality risks.
- Peer review within VHA is federally protected, requiring strict confidentiality and controlled access.

## Purpose

To improve workflow efficiency, organization, and standardization of Risk Management activities using 5S methodology and a centralized digital platform (LEAF).

## Intervention or Methods

### 5S Framework Applied:

**Sort:** Eliminated redundant spreadsheets

**Set in Order:** Centralized documentation in LEAF

**Shine:** Standardized electronic forms

**Standardize:** Dashboard tracking & searchable database

**Sustain:** Ongoing monitoring and process refinement

## Measures and Outcomes

### Before



Image created using AI tool ChatGPT with prompt: "Cartoon illustration of stressed healthcare staff reviewing paper occurrence screens, peer reviews, and mortality reviews at a cluttered desk."

- Manual email searching
- Spreadsheet cross-checking
- Risk of missed or inaccurate quarterly reports
- Excess time spent retrieving records (minutes to hours)

### After

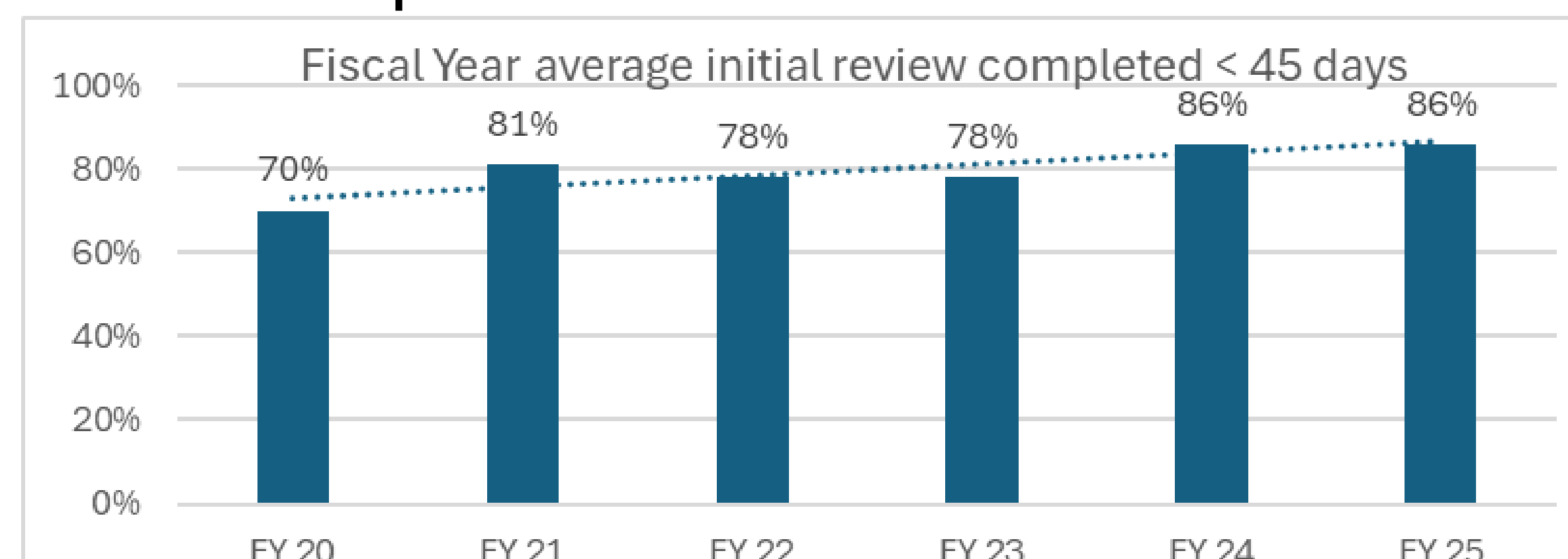


Image created using AI tool ChatGPT with prompt: "Cartoon illustration of happy healthcare staff using a digital system to manage peer reviews, occurrence screens, and tort claims, no clutter on desk."

- Centralized "All Systems Search" function
- Automated dashboard tracking
- Quarterly reports visibility in real time
- Decreased time in case retrieval (seconds)

## Results

- **Time saved per case:** ~50% time reduction (hours → minutes)
- **Paper/cost reduction:** initially approx. 24 pages/meeting x 2 meetings/month x 12 month/yr x 20 committee members = approx. 11,520 pages per year (approx. \$576/yr or >23 reams of paper). Now process is paperless.
- **Engagement:** Improved timeliness of peer review completion.



## Confidentiality and Psychological Safety

- **Pre-implementation:**
  - Email-based peer review
  - Identifiable senders
  - Risk of forwarding or misrouting
- **Post-implementation:**
  - Secure platform submission
  - Anonymous peer review capability
  - Controlled access permissions
  - Auditable documentation trail
- **Impact:**
  - Increased clinician willingness to submit feedback
  - Increased participation rates
  - Strengthened culture of safety
  - Improved perception of psychological safety within peer review process

## Discussion & Next Steps

- Implementation of a structured digital 5S workflow resulted in measurable reductions in administrative processing time and printing waste, improved data accessibility, enhanced confidentiality, and increased clinician engagement.
- Future efforts will focus on expanding digital 5S workflow optimization across other VA facilities in the VISN and eventually nationwide.

References available upon request