Risk Management from Shobi Dobi

Note: This was written in 2000. Things have been changing towards stricter regulations ever since. Ten years later when I am putting this on the website (2010), I am certainly glad I took the risk to walk into the Risk Management Office

I have always said, "We are a round peg fitting into a square hole and we have to be a little more square. We comply to the hospital, we bend for them.

From 2000: When a clown as an entertainer takes a risk, it usually means trying a new routine. If it doesn't work – It's not funny, it's known in the profession as a "Clown Fall." With the hospital clown the risks are in other places. Our focus is not on being funny as much as being fun. It is the connection that is important. There is no clown fall, but there is risk. We hospital clowns take a risk opening our hearts to a child or entering a room of a stranger being vulnerable in our playfulness. But what are the real risks? In Jeff's story he took a risk following his heart. We can take a risk giving a hug. Entering a sick child's room and getting into teddy bear range to offer a smile or blow a bubble. There are no clown falls, but what are the real risks the hospital clown faces.

Hospital Risk Management Departments have most staff in the hospitals these days tiptoeing down the corridors and rightly so. Risk in the hospital is a very serious matter - mistakes can cause death. It is the Risk Management Department's job to keep the hospital safe and to avoid liability and lawsuits.

And tripping ever so lightly down those same corridors is the hospital clown. Germs? Infection control? Confidentiality? Oh my, what has happened to that Yellow Brick Road! We used to walk in so freely - everyone was so happy to see us that we were welcomed with open arms. When I first started hospital clowning, I thought "Someday the hospital is going to look at us through their "liability eyes" and see us as a risk. We'd better be careful." Well, that day has arrived. At least in many major hospitals.

Years ago when I started hospital clowning, I was going from Pediatrics, to Recovery, to ICU, to the lobby, to the pharmacy. I was not a trained health care professional and the volunteer training I had with the rest of the hospital staff didn't cover much about infection control. I observed that most staff stayed in a specific station, floor or desk. It concerned me that I was going all over the hospital in five or six hours, seeing probably a hundred different people in different places. So I took myself and all my props to the Director of Infection Control. No one asked me to, I just wanted to make sure that I wasn't doing anything harmful going room to room.

The Infection Control Manager looked right over all my fuzzy puppets approving of everything except my face painting. "No, no" I protested "the children really need and love this." So we came up with hygienic face painting procedures. After a few years in the hospital and a great deal more knowledge about where the risks were, I realized that my face painting box was so infection control safe that I could take it into isolation in ICU. When I went down to the floor with my infection control approved paint box, the head nurse and the childlife worker commented "You don't need all that. We'll tell you where you need all the precautions." So I get one

message from risk management and another message from the nurses and doctors on the floor.

In the past year I have noticed things changing in the hospital. More and more they are latex free. There are more signs on the patients' doors giving warnings about food, water intake, infection control etc. Patients' names are not as visible, information is tighter as confidentiality becomes more important. The floors are now locked by coded key pads.

Risk Management is a reality in the hospital. If you have any doubts about what you are doing, find your infection control managers. Very often the nurse on the floor doesn't have time to talk to you, so arrange a meeting with your group or club. In talking to everyone it is my sense that we clowns have to start paying very close attention to the risk management and infection control staff. We need to communicate and let staff know we are concerned and aware of infection control and hospital procedures.

The time has passed when the community clown can casually walk into the hospital. Hospitals have become aware of positive effects of humor on health, and along with it they are beginning to look at clowns with their liability eyes. We have to live up to our end and be responsible for our actions. We need to get education and most important we need to slow down and listen. Listen to our hearts, listen to our conscience, and listen to hospital staff.