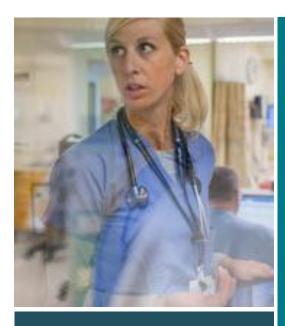


Shifting Patient Safety into High Gear

Boston, MA, November 16, 2012



Shifting Patient Safety into High Gear

CRICO and CBS

Ann Louise Puopolo, BSN, RN | CRICO



CRICO/Risk Management Foundation

Controlled Risk Insurance Company (CRICO)

- Provides professional medical liability coverage to the Harvard institutions
 - 22 hospitals | 100,000 employees (19,000 nurses)
 - 12,000+ physicians (3,700 residents/fellows)
 - \$5M coverage with a maximum of \$10M per year

Risk Management Foundation Administrative arm: claims management, loss prevention, patient safety services

CRICO Strategies

- Provides similar services to organizations outside of Harvard
- Acts as a bridge for share learning in broader pt safety arena

crico

Member Organizations

• Atrius Health

crico

- Boston Children's Hospital
- Cambridge Health Alliance
- CareGroup
 - Beth Israel Deaconess Hospital— Needham Campus
 - Beth Israel Deaconess Hospital—Milton
 - Beth Israel Deaconess Medical Center
 - Mount Auburn Hospital
 - New England Baptist Hospital
- Dana-Farber Cancer Institute
- Presidents & Fellows of Harvard College
 - Harvard Medical School
 - Harvard School of Dental Medicine
 - Harvard School of Public Health
 - Harvard University Health Services

- Joslin Diabetes Center, Inc.
- Judge Baker Children's Center
- Massachusetts Eye & Ear Infirmary
- Massachusetts Institute of Technology
- Partners HealthCare System
 - Brigham and Women's Hospital
 - Brigham and Women's Faulkner Hospital
 - Massachusetts General Hospital
 - McLean Hospital
 - North Shore Medical Center
 - Newton-Wellesley Hospital
 - Spaulding Rehabilitation Hospital

Medical Malpractice Terminology

Malpractice cases	 <i>Claim:</i> a written or oral demand for compensation for damages <i>Suit:</i> a formal malpractice action filed in court 	
Claimant	patient or representative filing the claim or suit	
Allegation	what the claimant states caused the harm	
Assert date	 date that a claim or suit is filed 	
Loss date	 date the event (injury/loss) occurred 	
Total incurred dollars	 money in reserve for open cases, paid on closed cases 	
Frequency	 number of cases 	

Coding Methodology How We Build Our Data

- Clinical coders review medical record & claims files
- Capture 17 clinical dimensions
 - Allegations
 - Location
 - Injury Severity (NAIC)
 - Responsible Service
 - Contributing Factors
 - 3-5 factors causing care to unfold as it did...
 - Individual & systems issues at root of error
 - Capture physician and patient perspective

Malpractice Claims are the Tip of the Iceberg

Lack of updated family history

Lack of adequate assessment

Narrow diagnostic focus

Inadequate communication

Failure to reconcile test results

Failure to follow up with patient

Failure/delay ordering diagnostic test

Lack of accurate documentation

Failure to follow protocol

Failure to close the loop on referrals

Caveats...

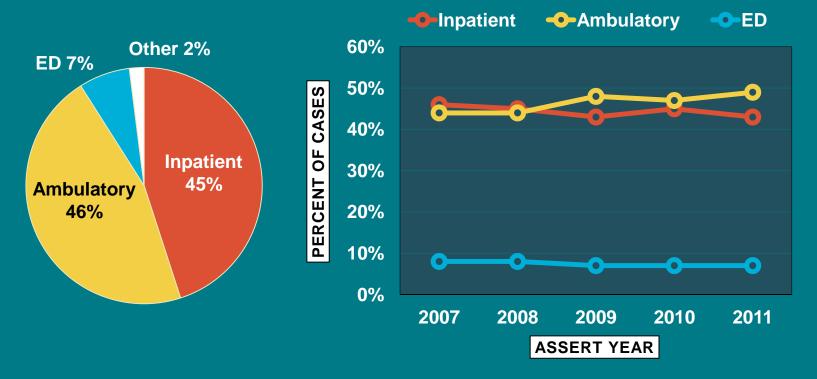
• Malpractice claims...

- are a small "n"
- have age to them
- represent a unique convergence
- no statistical significance

Strengths of the Malpractice Claims

- Yield relatively large numbers of rare events (e.g., retained foreign bodies, wrong site surgery)
- Emphasis on errors that cause the most severe injuries
- Rich information set on events that led to harm
- Alignment of risk management and quality improvement perspectives

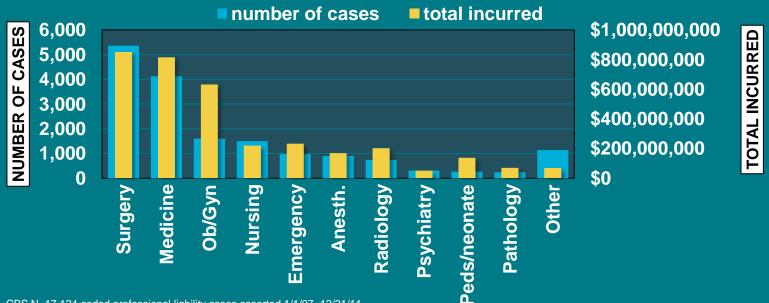
53% of malpractice cases stem from ambulatory/ED care National Landscape: Claimant Type Trends



CBS N=17,124 professional liability cases asserted 1/1/07–12/31/11.

*Other includes class action, employee, visitor, and unclassified cases due to limited availability of information.

Surgical services top the list in malpractice cases. National Landscape: Primary Responsible Services



CBS N=17,124 coded professional liability cases asserted 1/1/07-12/31/11.

Total incurred includes reserves on open cases and payments on closed cases.

Surgery includes: General Surgery, Neurosurgery, Orthopedics, and Surgery Subspecialties (Bariatric Surgery, Colorectal Surgery, Cardiac Surgery, Otorhinolaryngology (with Plastic), Hand Surgery, Ophthalmology, Otolaryngology (No plastic), Plastic (NOC), Pediatric Surgery, Oncology (Surgical), Thoracic Surgery, Urology Surgery, Vascular Surgery, Transplant, Podiatry).

Medicine includes: General Medicine and Medicine Subspecialties (Cardiology, Dermatology, Endocrinology, Gastroenterology, Genetics, Geriatrics, Hematology, Hospitalist, Immunology and Allergy, Infectious Disease, Oncology (Medical), Nephrology, Neurology, Physical Medicine/Rehabilitation, Pulmonary Disease, Rheumatology).

Other includes: Dentistry/Oral Surgery, Allied Health, Non-clinical, and Pharmacy.

Surgery #1 allegation; Diagnosis #1 cost Top Major Allegations

ALLEGATION	NUMBER CASES	TOTAL INCURRED
Surgery-related	4,690	\$772,157,000
Medical Treatment	3,861	\$550,030,000
Diagnosis-related	3,572	\$1,010,475,000
Medication-related	1,131	\$240,733,000
Obstetrics-related	852	\$506,418,000

CBS N=17,124 coded professional liability cases asserted 1/1/07–12/31/11. Total incurred includes reserves on open and payments on closed cases.