



# Medical Harm: Moving Beyond Deny and Defend

September 9, 2020

*We will get started shortly. Your lines are muted upon entry. This event will be recorded.*

# Welcome!

- Today's event is being recorded
- All participants are muted on entry
- Ask questions using the Q&A Box
- Please fill out satisfaction survey





# About Oregon Health Forum



- Advancing health policy solutions through meaningful community dialogue
- Affiliate organization of The Lund Report
- Nonprofit supported by ticket sales, donors, sponsorships

Event Co-Host:  
Oregon Patient Safety  
Commission

- **Mission to Advance Patient Safety in Oregon**
- Semi-independent state agency created by Oregon Legislature in 2003
- Programs in Patient Safety Reporting and Early Discussion and Resolution



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PATIENT  
SAFETY  
COMMISSION

# GenNext: How Generation Z is Remaking Healthcare

**September 17 | 2 pm**

Learn how the largest and most diverse generation in American history, Gen Z, will reshape the health care market with their distinct preferences and healthcare needs.



# Live Through It: Suicide Risk and Prevention in COVID-19

**September 25 | 10 am**

Young adults, racial and ethnic minorities, essential workers, and unpaid caregivers face a newly elevated risk for suicide in COVID-19. Learn steps to prevent suicide and about individual and community prevention efforts.



# How Will It End: The Promise of A COVID-19 Vaccine

**October 1 | 10 am**

Recent scientific developments put us closer to ending the COVID-19 pandemic. Learn about research efforts and hear from experts about the potential for vaccine success, vaccine acceptance and how the global pandemic may end.



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Hospitals & Clinics

# Today's Program

## Medical Harm: Moving Beyond Deny and Defend

**Moderator: Eric B. Lindauer, JD,** of Eric B. Lindauer, PC

### Panelists

- **Leilani Schweitzer**, Assistant Vice President, Communication & Resolution, Patient Liaison, Stanford Health Care
- **Thomas H. Gallagher, MD, MACP**, Professor and Associate Chair, University of Washington Medicine Center for Scholarship in Patient Care Quality and Service
- **Shannon Alexander, MBA, RN, CPHRM**, Director of Patient Safety and Clinical Risk Management, Providence Health & Services



# Eric B. Lindauer, JD



# **Leilani Schweitzer**

Patient Liaison at  
Stanford Health Center



# Apology, Compassion & Reconciliation

Leilani Schweitzer

*Stanford Health Care*











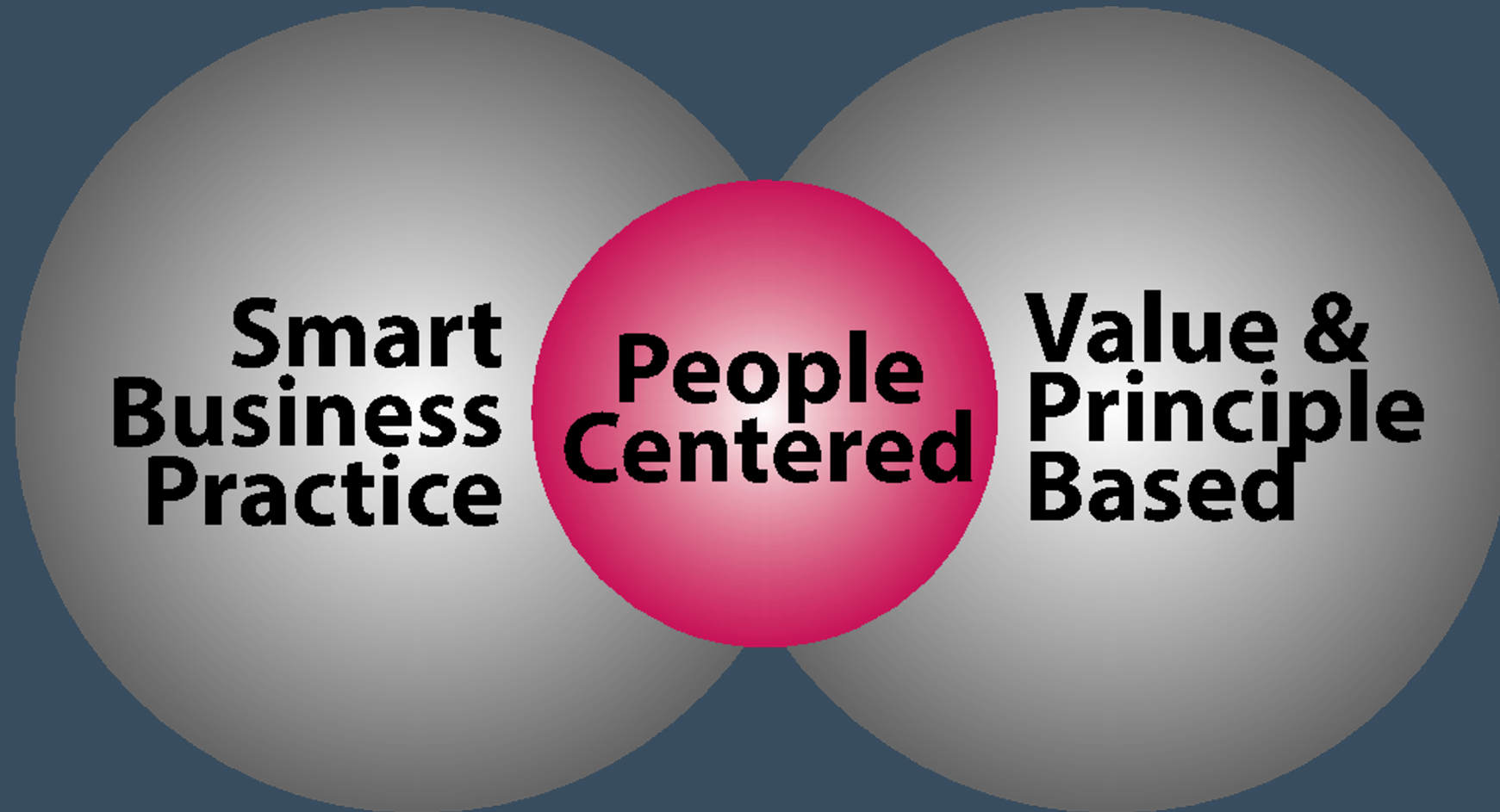






No longer taking care of children.

# PEARL: Stanford Health Care's Communication & Resolution Program



# WHAT IS A PEARL?

- Significant
  - Adverse
  - Unexpected
- Medical Outcome

Early R's:

Early Recognition

Early Response

Early Review

Early Resolution

# PEARL provides:

## **Patients want:**

- Explanation
- Full Apology
  - Recognition
  - Responsibility
  - Amends (Money)
- Improvements

## **Hospitals want:**

- Explanation
- Accountability
- Improvements

Two Questions:



What would you want to happen  
if that child was yours?

It is impossible to do nothing.









Thank you.

Leilani Schweitzer  
*Stanford Health Care*

# **Thomas H. Gallagher, MD, MACP**

Associate Chair for Patient Care Quality,  
Safety, and Value at University of  
Washington Medicine



# COMMUNICATION AND RESOLUTION PROGRAMS

## THE NATIONAL PERSPECTIVE

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Thomas H. Gallagher, MD

*Professor and Associate Chair, Department of Medicine*

*University of Washington*

*Executive Director, Collaborative for Accountability and Improvement*



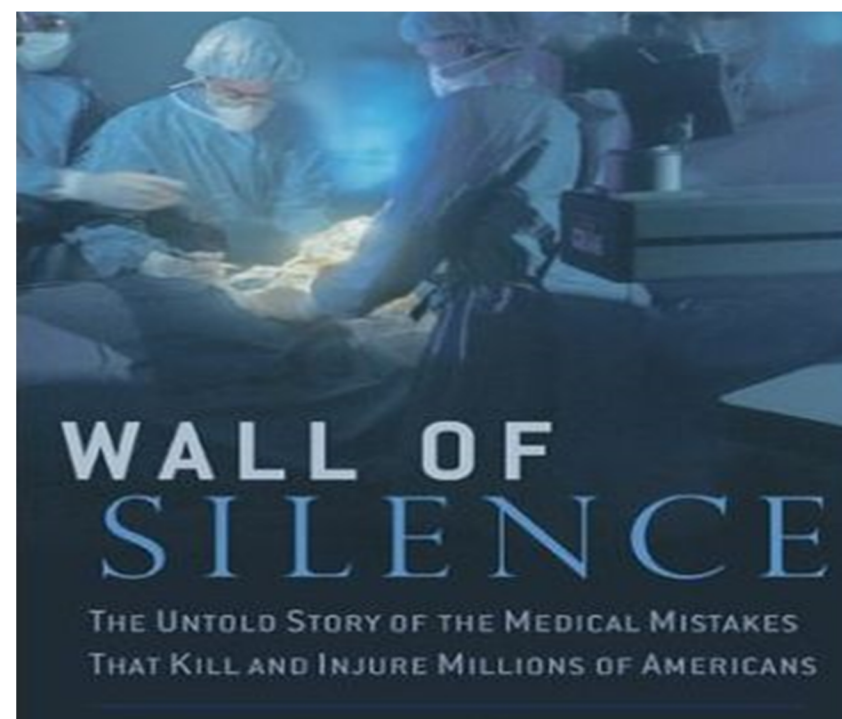
# Following Harm: Not Always Transparent, Not Always Learning

## HealthAffairs

- February 2012

**Survey Shows That At Least Some  
Physicians Are Not Always Open Or Honest  
With Patients** [Expand](#)

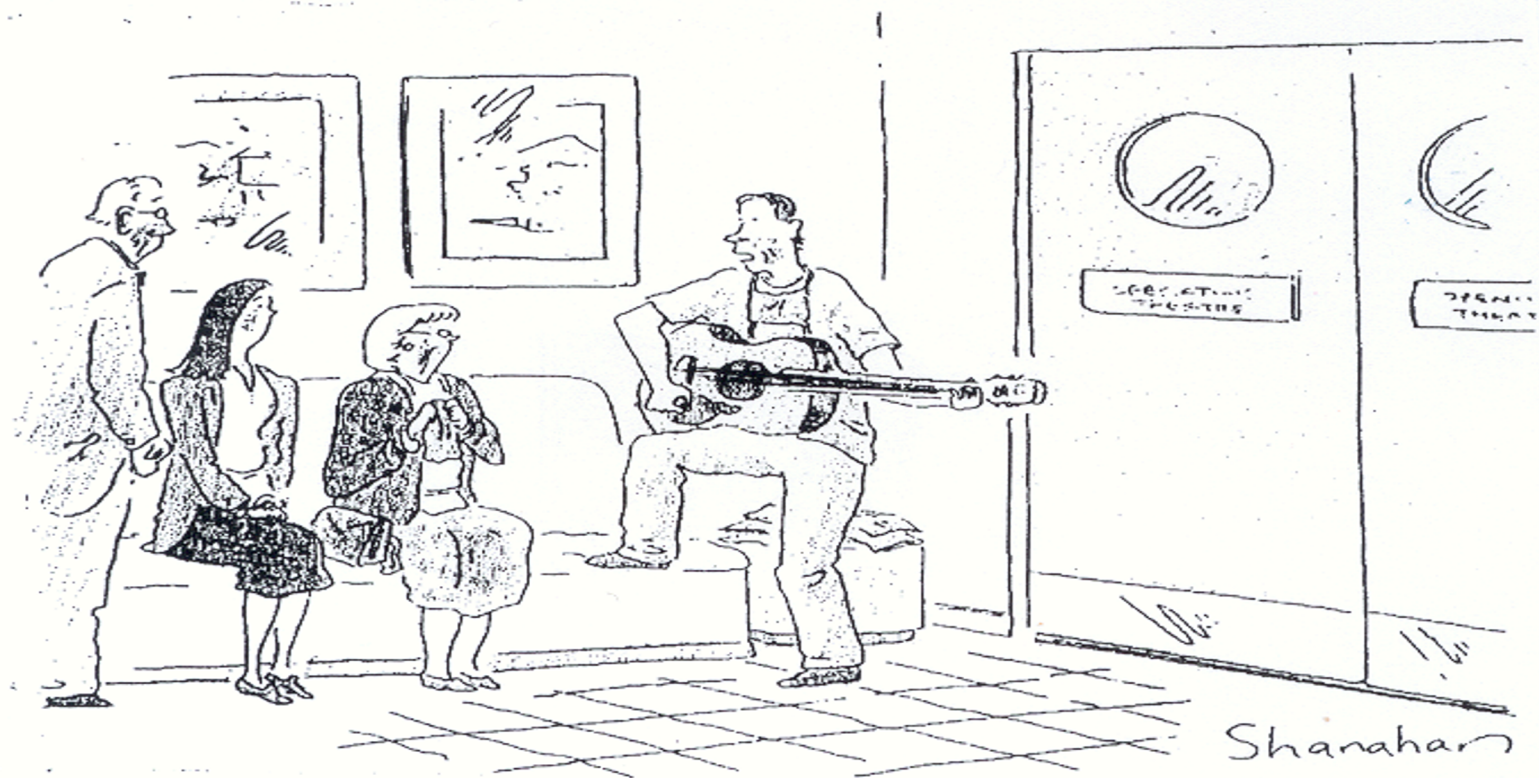
Lisa I. Iezzoni<sup>1,\*</sup>, Sowmya R. Rao<sup>2</sup>, Catherine M. DesRoches<sup>3</sup>,  
Christine Vogeli<sup>4</sup> and Eric G. Campbell<sup>5</sup>



Gibson , Rosemary & J. P. Singh, Wall of Silence, 2003.

# Benefits of CRP

- Preserve trust and meet expectations of patients and families
- Reduce distress of clinicians
- Reduce likelihood of litigation
- Promote learning within and across institutions
- Strengthen institutional culture/climate
- Lower likelihood of disciplinary action by regulators
- Increase public trust in healthcare



*"Listen up, my fine people, and I'll sing you a song 'bout a brave neurosurgeon who done something wrong."*

# CRPs: National developments

- Widespread but inconsistent CRP implementation
- Making CRPs “Mission-critical”
  - Engaging more closely with injured patients and families
  - Coupling CRP training with robust tools to promote highly reliable processes
    - Standard work
    - Process mapping
    - Metrics
    - Certification/validation
- Responding to the hardening medical professional liability market

# CAI programs

- Identification and dissemination of best practices
- Forthcoming: CRP Action Network (with IHI and Ariadne Labs)
- CRP Attorney Alliance
- Best practices for CRP cases involving multiple insurers
- Additional priority areas
  - CRP/vulnerable patients
  - CRP/delayed diagnosis
  - CRP/Children's Hospitals
  - Peer review/late care practitioners

## Essential Elements to Promote Reliability & Accountability



### PEOPLE

- Committed Leadership
- Project Champions
- Implementation Teams



### PROCESS

- Clear Goals and Values
- Policies and Procedures
- Sufficient Resources
- Tiered Intervention Models



### SYSTEMS

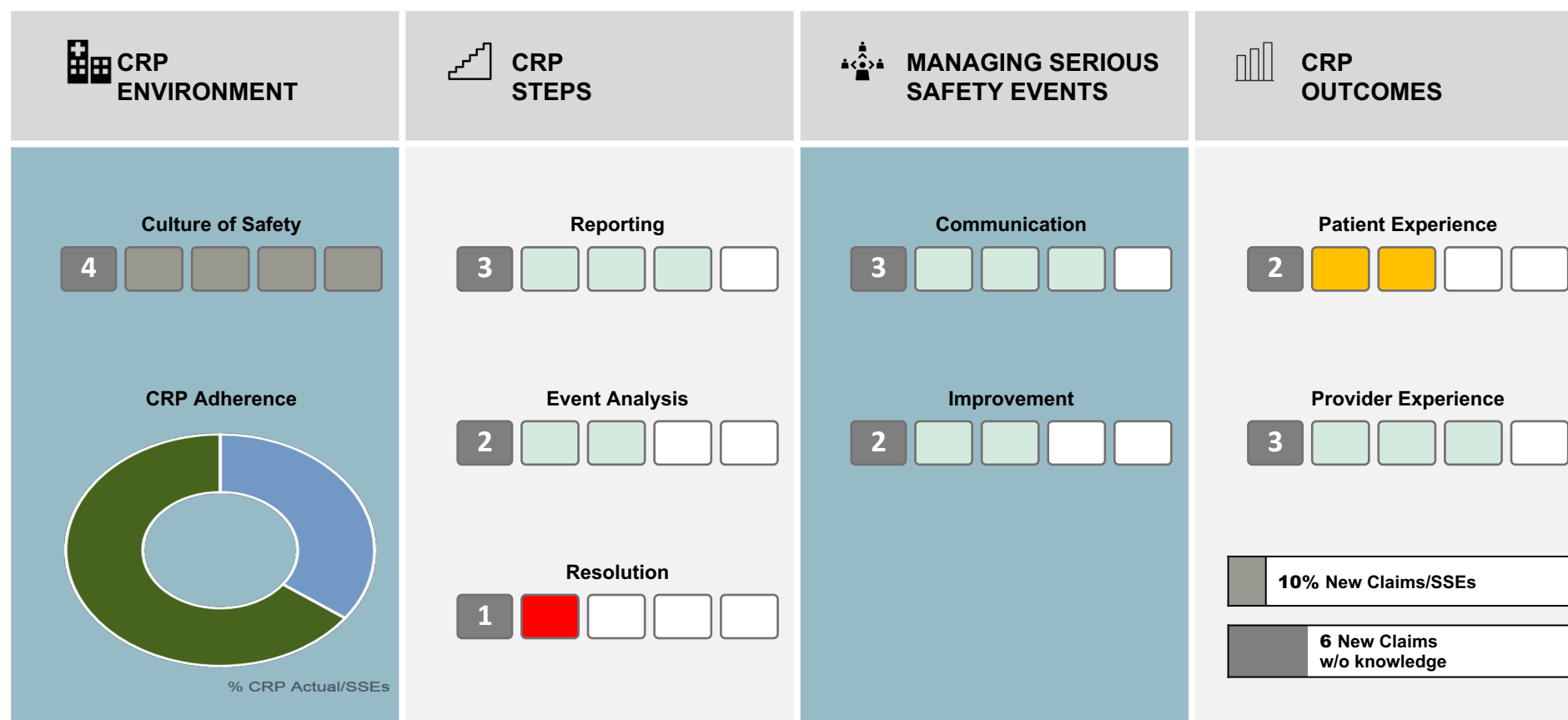
- Tools, Data and Metrics
- Reliable Review Process
- Training







# COMMUNICATION-AND-RESOLUTION PROGRAM PROFILE



# Creating a conversation playbook

## Elements of discussions about care breakdowns that benefit from scripting

- Getting conversation started
- Probing for other party's perspective on what happened
- Sharing key information
- Responding to emotion
- Acknowledging responsibility, when appropriate
- Closing conversation





# Collaborative

## FOR ACCOUNTABILITY AND IMPROVEMENT

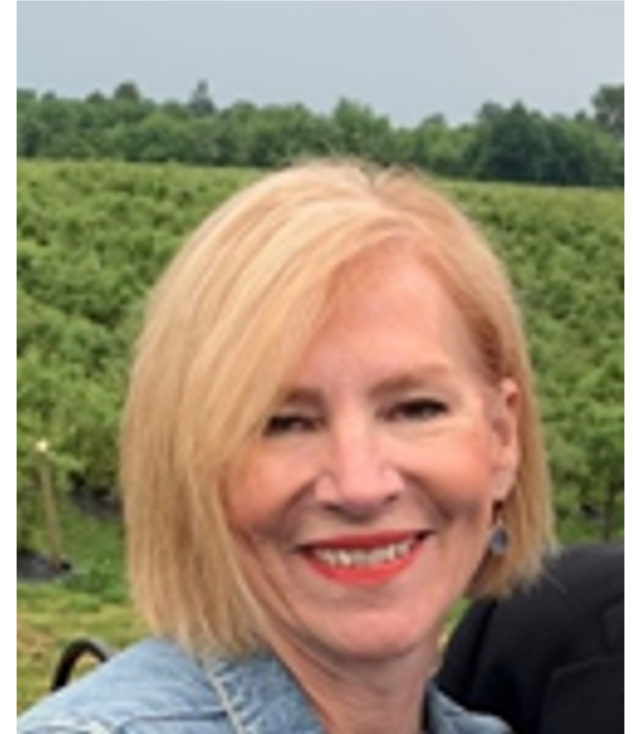
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*Reaching resolution after patient harm*

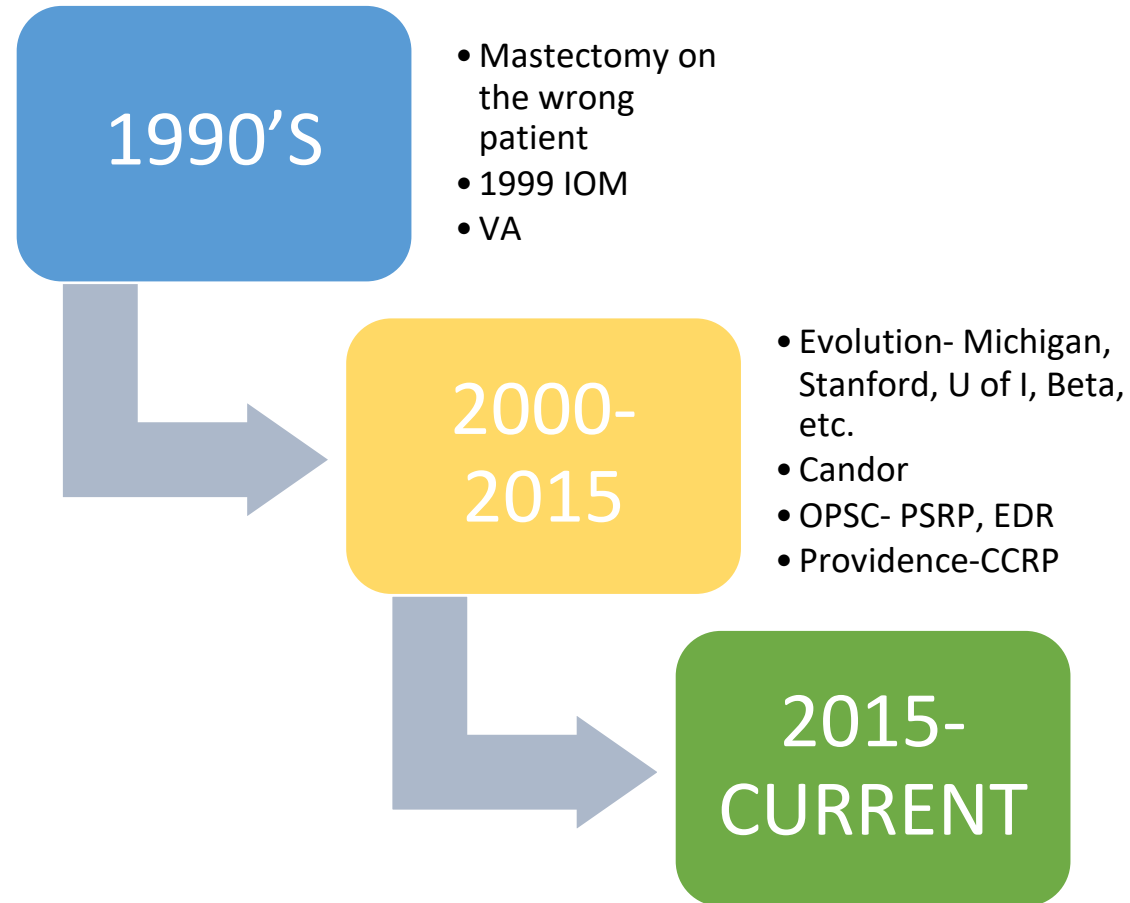
*[www.communicationandresolution.org](http://www.communicationandresolution.org)*

# **Shannon Alexander, MBA, RN, CPHRM**

Director of Patient Safety and  
Clinical Risk Management at  
Providence St. Joseph Health



## My Experience



## Thinking about adopting? Lessons Learned

Leadership support is paramount

It is a process

Patient Safety and Risk MUST work together

Just Culture is critical

## Thinking about adopting? Lessons Learned

Communication with UNEXPECTED outcomes- is essential- with or **without** error

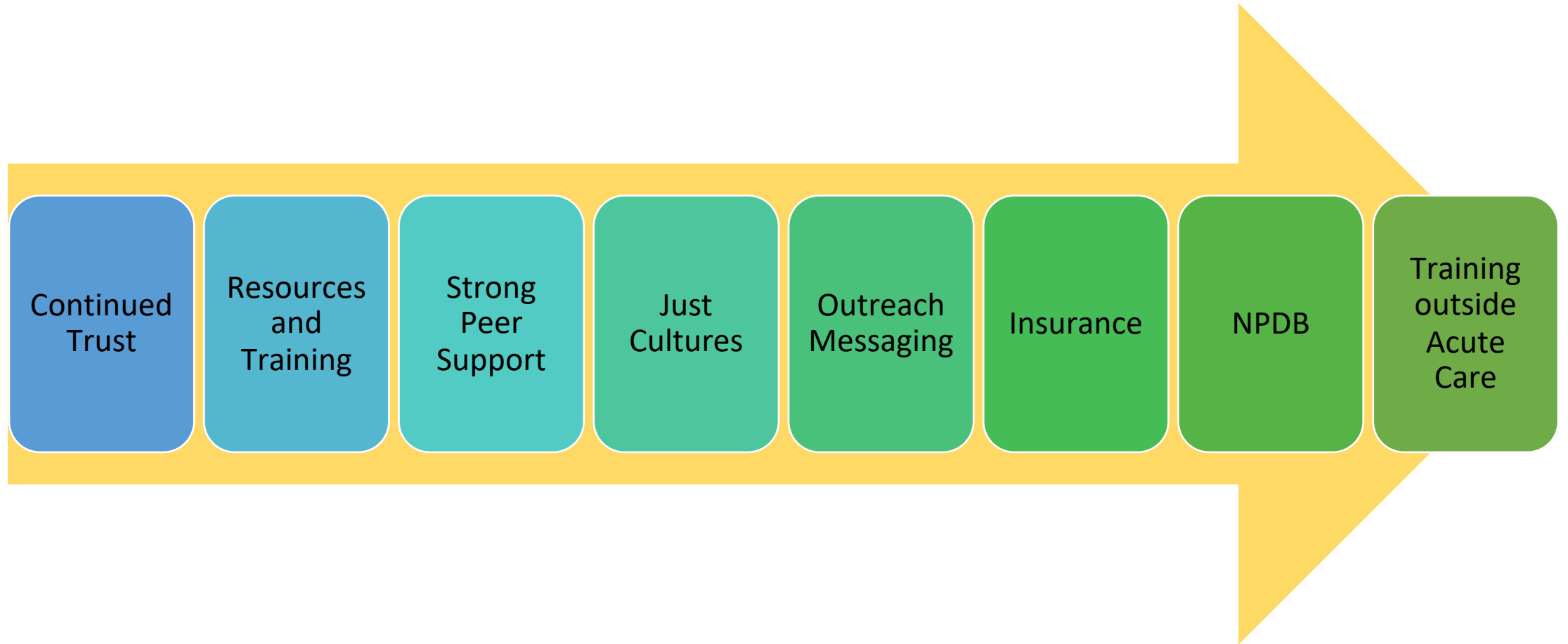
Not everyone can nor should lead/participate in CRP

Understand the differences in apologies

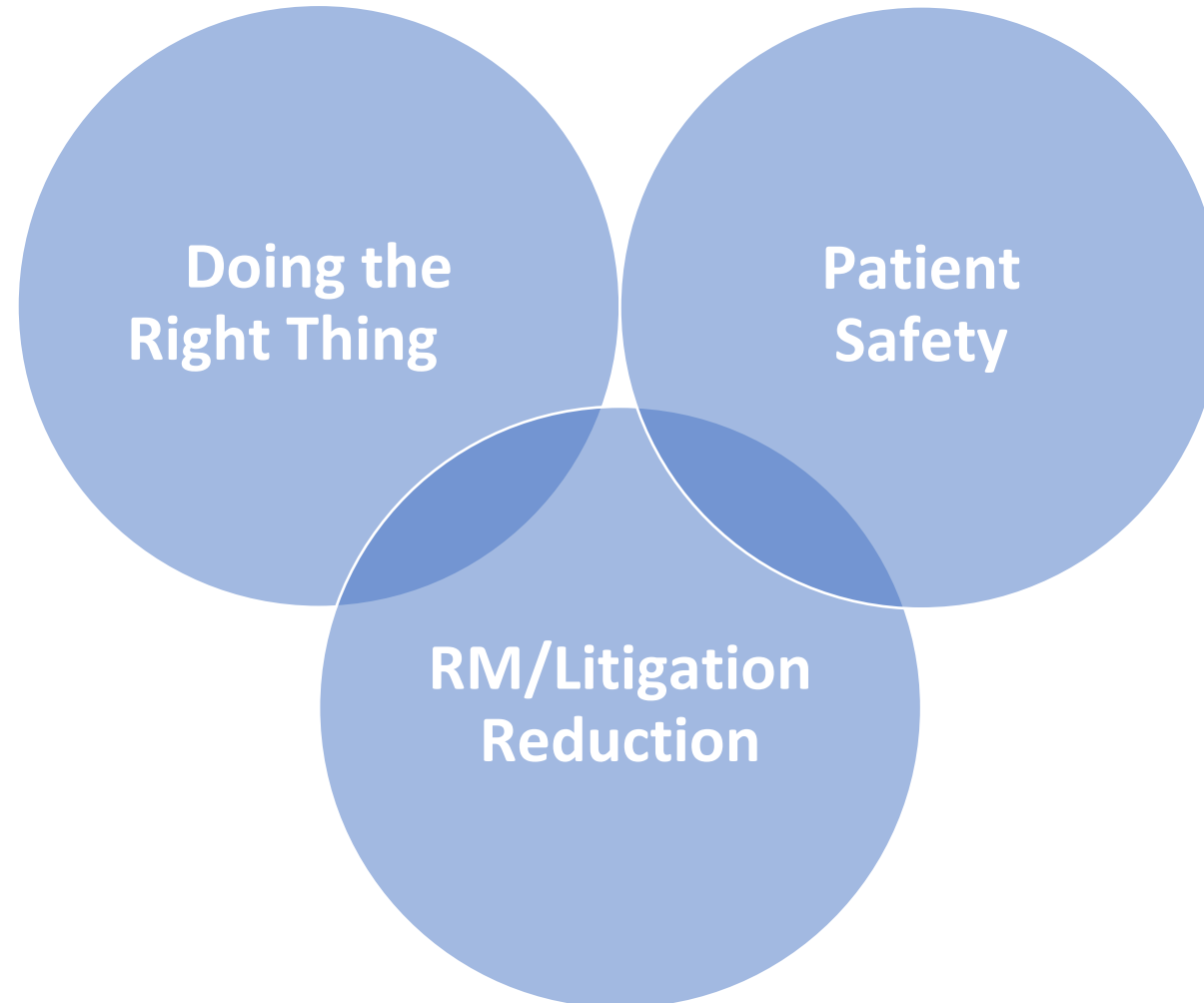
Discuss compensation early- when warranted



## Challenges/Barriers



## WHY CRP?



**Question and Answer:**  
**Please enter your question into the**  
**Q&A Box**

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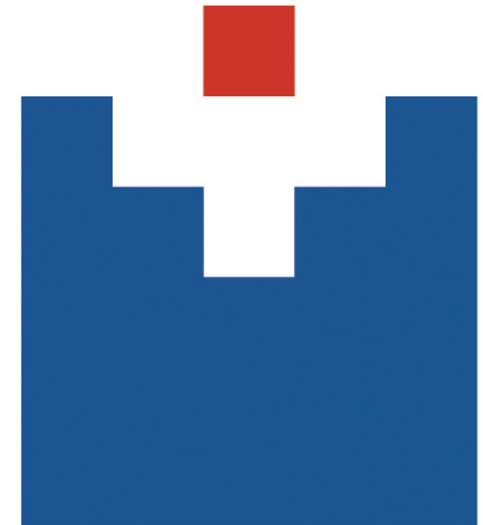
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# Additional Q&A Opportunity



# Thank you!