Physician Practice Risk Management

What Can Happen in the Office?
Why do Patients Sue

- Anger/Surprise
- Distrust
  - Risk of litigation may increase when the provider does not communicate outcomes of care, including errors
- Documentation
  - Incorrect
  - Inadequate
  - Informed consent
- Handling of
  - Emergencies
  - Follow up
  - Pain
- Patient termination
- Poor communication
  - Delayed response
  - Provider-to-provider
National Healthcare Risk Trends

Data from CRICO Strategies’ Comprehensive Risk Intelligence Tool, as of 9/30/2017.
Practice Based Claims

• Top Related Allegations
  – Diagnosis 52%
  – Medication 13%
  – Medical treatment 4%
  – Communication 4%
  – Surgery 3%
Practice Based Claims

Top 5 Risk Management Issues

1. Failure/delay in ordering a diagnostic test
2. Inadequate communication of patient information among providers
3. Narrow diagnostic focus
4. Insufficient patient education regarding medications
5. Failure to obtain a consult or referral
Mitigation Strategies

1. Failure/delay in ordering a diagnostic test
   - Follow clinical guidelines and protocols (e.g., colorectal cancer screening algorithm).
   - Document patient assessment, differential diagnosis, diagnostic tests and findings.
   - Maintain access to current medical literature (e.g., computerized decision support, other technologies).
Mitigation Strategies

2. Inadequate communication of patient information among providers
   • Use electronic health records.
   • Improve handoff communications (e.g., discharge summaries, specialty consults/referrals).
     – Pending diagnostics
   • Improve provider-to-provider communication prior to on-call coverage.
Mitigation Strategies

3. Narrow diagnostic focus

- Complete an appropriate history & physical exam.
- Use templates (paper or electronic) to guide documentation of assessment and clinical rationale for diagnosis and treatment plan.
- Use a current problem list.
- Maintain access to current medical literature (e.g., computerized decision support, other technologies).
Mitigation Strategies

4. Insufficient patient education regarding medications
   • Maintain a current medication list.
   • Reconcile the patient’s medication list at transitions of care and whenever a new medication is ordered.
   • Use the teach-back method when educating patients about medications.
     – Document
   • Educate at patient’s literacy level.
     – Level
     – Language
5. Failure to obtain a consult or referral

   • Use a referral management system.
     – Track pending referrals
     – Visit Summaries
   • Document patient informed refusal to obtain consultation.
   • Document referral delays or denials by health plans.
   • Exhaust all appeal mechanisms for coverage disputes
Risk Assessment Trends

1. Medication Safety
2. Patient Safety and Event Reporting
3. Patient Communication and Disclosure
4. Administrative Risks
5. Patient Care Issues
References

• Educational materials from ECRI Institute, (610) 825-6000.
• CNA Risk Management Strategies for the Physician Office
• American College of Physicians 2017 Patient Safety in the Office-Based Practice Setting