Status Report:
Texas Disclosure and Compensation Study

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Grant Award

- AHRQ Grantee: 1R18HS0-19561-01
- $1,796,575
- Budget period: 07/01/2010 – 06/30/2013
  No-cost extension thru 6/30/2014

PI: Eric Thomas, MD, MPH, UT Health (Houston)

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Study Goal

Designing a "communication and resolution" process that will not only serve the needs of individual patients and families, but that will also use the patient's and family's experiences to make care safer and better for subsequent patients.

Study Progress

Phase 1 ✔
- Baseline measurement of safety/teamwork/ error disclosure culture before Disclosure Training

Phase 2 ✔
- Interviews of Key stakeholders on best practices of disclosure/compensation practices

Phase 3 ✔
- Conference of national experts to identify best practices to involve patients/families in post-event learning

Phase 4
- Interviews with patients/families to determine what they can contribute to post-event learning
- Completed 58 out of 124 interviews, participants across US

Phase 5
- Examination of closed claim files involving UT health institutions
- Reviewed 10 years of closed claims and collected 5 years of comprehensive data (approx. 800 cases)

Phase 2 Methodology

- Sept. 2010 – Oct. 2011
  - Developed interview questions about current practice and ideal practice concerning:
    - Error disclosure
    - Event analysis
    - Compensation
  - Two sets of interview questions based on the interviewee
    - Patient/family
    - Administrator/caregiver
  - Qualitative methods expert trained two interviewers
  - 28 interviews conducted
    - 13 Administrators (physicians/nurses/risk managers)
    - 6 Caregivers (nurses/physicians)
    - 5 Patients
    - 4 Family members

Phase 3 Conference: Stakeholder Needs
Involving Patients in Post-event Learning

- Caregivers need:
  - Safe environment to discuss error
  - Time/training to communicate with patients & families
  - Emotional support

- Patient/families need:
  - Time to process and heal
  - Ability to talk freely & ask questions
  - Hear an apology

- Organization context for inclusion of patient/family
  - Supportive leadership
  - Severity of event impacts actions
  - Culture of transparency with patients

Phase 4: Patients as Partners

Specific Aims

1.Evaluate the proportion of patients/families that can identify at least one contributing factor as a cause for their event.

2.Compare and contrast adverse event information gathered from patients/family to information obtained by the root cause analysis in the hospital.

3.Evaluate the willingness and ability of patients/family to provide information related to their adverse event in the hospital.

Phase 5: Influences of Tort Reform and Disclosure on Claims, Compensation, and Safety

Specific Aims

1.To compare the incidence of disclosure across UT system before and after the implementation of Texas tort reform in 2003, and before and after the adoption of disclosure policies and implementation of disclosure training within the UT System beginning in 2010.

2.To describe the impact on litigation of tort reform and of disclosure policies and training.

3.To describe the impact on safety of disclosure policies and training through review of "remedial measures" taken in selected cases.

4.To evaluate trends in the designation of "early negotiation" cases before and after tort reform and disclosure policies and training.

Thank You!