

CRICO | strategies

Client Case Study

# MedStar Health

MedStar Health, a nationally recognized network of 10 academic and community hospitals in the Baltimore/Washington DC corridor, joined the CRICO Strategies community in 1999. Clinical coding and analysis of their medical professional liability (MPL) cases has led to measurable improvements in Obstetrics and Emergency Medicine.

## The Challenge

After the 1999 IOM Report shone a light on the impact of medical errors in hospitals across the country, MedStar leaders sought to understand specific drivers of vulnerability in their hospitals and develop targeted interventions to improve care in high risk areas. That year, MedStar engaged CRICO Strategies in what has become a long-term partnership that leverages MPL data to improve patient safety. Since then, MedStar has implemented several targeted risk reduction initiatives that have resulted in measurable, quantifiable change.

## Our Approach

CRICO Strategies' team of clinical specialists partnered with MedStar to deeply analyze its MPL claims:

- Clinical experts reviewed legal files and medical records and applied CRICO Strategies' clinical coding taxonomy to capture clinical and system factors driving their losses.
- This enabled MedStar's MPL profile to be analyzed and compared against a group of its peer organizations using CRICO Strategies' analytical tool, the Comparative Benchmarking System (CBS).
- These comparative analyses revealed MedStar's unique challenges and empowered leaders to intervene on key risks.

## Sustaining Change

As a result of these and other data-driven interventions, MedStar has seen measurably improved outcomes and demonstrably safer care for its patients. MedStar continues to analyze its MPL claims in an ongoing manner and these data have continued to inform its patient-centered risk reduction initiatives for more than 15 years.

## Obstetrics

### THE CHALLENGE

MedStar's first comparative analysis in 2001 revealed Obstetrics as a key source of clinical and financial losses. These data showed that harms were driven by clinical judgment and communication challenges in labor and delivery, so, using these data, MedStar set out to develop interventions.

### RESULTS AND ACTION

*OB Task Force:* The first step for MedStar was to form an OB Risk Reduction Task Force (2001) charged with developing specific measurable interventions and coordinating system-wide activities to maximize safe, patient-centered OB care.

*Supporting Safe Clinical Judgment:* Based on the specific clinical judgment vulnerabilities identified in the data, MedStar's OB Task Force recommended system-wide *standardization of OB care practices* and developed *uniform clinical protocols* to support providers' decision making while caring for their laboring patients. These data also positioned MedStar to embed clinical decision support into the electronic health record.

*Improving Communication Among Providers:* Based on the specific communication vulnerabilities identified in the data, MedStar developed an on-site, *simulation-based OB training course* with scenarios specifically developed and continuously adjusted to address MedStar's unique team communication vulnerabilities, and implemented *interdisciplinary huddles* for review of laboring patients.

### SUSTAINING CHANGE

MedStar's OB Task Force—now the *Council for Ideal Obstetrical Care*—continues to seek insights from these data to drive the organization's improvement efforts. As a result of these and many other data-driven interventions since this time, MedStar has seen measurably improved outcomes and demonstrably safer care for its obstetrical patients.

# Emergency Medicine

## THE CHALLENGE

Analysis of 10 years of richly coded claims data revealed misdiagnosed injuries from atraumatic spinal cord compression as a significant driver of clinical harm and financial losses. These data showed that losses were related to diagnostic errors and poor communication resulting in delayed diagnosis and treatment, primarily in patients presenting to MedStar's Emergency Department. Using these data, MedStar initiated a system-wide loss prevention initiative aimed at reducing spinal cord related claims.

## RESULTS & ACTION

*ED Task Force:* Based on findings from their MPL analysis, MedStar formed a multi-specialty clinical task force to further investigate the clinical and systems factors driving these losses and develop solutions to prevent similar future harms.

*Supporting Safe Clinical Judgment:* With data demonstrating the specific source of losses and the significance of its impact, the ED Task Force was positioned to develop targeted solutions to support clinicians' judgment in diagnosing these injuries.

Recognizing that these rare atraumatic spinal cord compressions are difficult to detect and diagnose, the Task Force developed a *system-wide web-based educational program* to support early detection and management of this condition, which includes a review of the anatomy and pathology of the condition and concrete suggestions for diagnosis and treatment.

The task force also developed a *spinal cord diagnostic algorithm* that is triggered once a preliminary assessment suggests that spinal cord compression could be included within the differential diagnosis.

*Improving Communication Among Providers:* With data pinpointing communication challenges between ordering physicians and the MRI suite as a significant cause of these delays in treatment and diagnosis, the Task Force developed and implemented a *system-wide STAT order sheet* to facilitate sharing of clear, unambiguous information between the ordering physician and the MRI suite.

## SUSTAINING CHANGE

MedStar's ED Task Force—now its new system-wide *Emergency Medicine Leadership Council*—continues to monitor the effectiveness of these changes. Since implementation, MedStar has experienced no reported adverse events involving atraumatic spinal cord compression injuries.

## MedStar Health at a Glance

- 30,000 associates
- 6,000 affiliated physicians
- MedStar Georgetown University Hospital, Washington, DC (400 beds)
- MedStar Washington Hospital Center, Washington DC (900 beds)

### Community Hospitals

- MedStar Franklin Square Medical Center (378 beds)
- MedStar Good Samaritan Hospital (303 beds)
- MedStar Harbor Hospital (192 beds)
- MedStar Montgomery Medical Center (149 beds)
- MedStar St. Mary's Hospital (103 beds)
- MedStar Southern Maryland Hospital Center (262 beds)
- MedStar Union Memorial Hospital (283 beds)

## ABOUT CBS

CRICO Strategies' Comparative Benchmarking System (CBS) delivers the intelligence you need to identify your clinical risks and prioritize your patient safety efforts. Membership in CBS provides unparalleled opportunities for analyzing your organization's individual medical professional liability data, as well as benchmarking against national peers.

CBS includes data from:

- 550 health care entities, including, 400+ hospitals
- 165,000 physicians
- 300,00+ medical professional liability (MPL) cases

A detailed coding taxonomy enables CRICO Strategies to precisely identify the specific contributing factors that drive medical errors. In addition to data from MPL cases asserted against a CRICO-insured individual or organization, we also collect MPL data from across the United States—including academic medical centers, community hospitals, captive and physician insurers. CBS is the most robust (HIPAA-compliant) MPL claims database in the world, containing more than 300,000 open and closed cases (or 30 percent of U.S. MPL claims).



## Providing Solutions. Promoting Safety.

Strategies is a division of the Risk Management Foundation of the Harvard Medical Institutions, a CRICO company. A recognized leader in evidence-based risk management, CRICO is a group of companies serving the Harvard medical community. Its mission of improving patient safety is extended nationally, as Strategies offers risk solutions that deliver the highest degree of insight and data integrity.

Strategies community of peers, representing more than 400 hospitals and 165,000 physicians, share dialogue and comparative analyses of claims data and effective patient safety practices.



### CONTACT US TODAY TO GET STARTED

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## What people are saying about CBS...

*Meaningful and credible information derived from richly coded claims data provides the clarity needed for robust and focused risk mitigating efforts. In today's resource constrained, demanding clinical environment, the ability to accurately target those efforts is needed more than ever.*

**—Tom Snyder**

Vice President, Healthcare Risk Services  
Princeton Insurance, a MedPro/Berkshire Hathaway Company

*It's the leverage that gets the ball rolling. When I take data to physicians, there's a credibility we've never had before. The data are so much more valuable than opinions.*

**—Darrell Ranum**

Regional Vice President, Patient Safety  
The Doctors Company

*Dollar-for-dollar, the CRICO Strategies-Stanford data partnership proves among the highest returns for Stanford's risk management investments.*

**—Jeff Driver**

Chief Executive Officer  
Stanford University Medical Network Risk Authority, LLC

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