ECRI's Strategic Insights for Ambulatory Care newsletter is being offered to CAPIC insureds at no cost. If you are interested in visiting any of the links in this edition, please contact Brad Dunkin, Assistant Vice President, at BDunkin@CAPphysicians.com.

Patient Safety
Strategic Insights for Ambulatory Care

◆ ECRI

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Strategic Insights for Ambulatory Care is a biweekly service provided by ECRI and the Cooperative of American Physicians (CAP). We welcome your comments; please send them to **AmbulatoryCareRM@ecri.org**.

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What's New?

- Webinar Recording: Medical Device Usability Challenges for Home Users—ECRI's #1 Health Technology Hazard for 2024 **watch now**

New Resource! Legal Case Scenarios

For decades, Ambulatory Care Risk Management has included summaries of legal cases that offer risk management lessons learned. Starting this week, we're transitioning to presenting case scenarios that risk managers and others can use to engage staff and emphasize those lessons. Complete with discussion questions and staff handouts, case scenarios give you a new tool to take action and build a learning organization.

Read the Case Scenario: Macrosomia Management

Spotlight on Patient Safety Awareness Week

Safer Together—the theme of Patient Safety Awareness Week (March 10–March 16)—emphasizes the role of the entire care team in promoting patient safety. In addition to implementing the guidance provided in ECRI's Top 10 Patient Safety Concerns 2024, the following resources are available to promote collaboration among the care team:

- Taking Action: Effective Provider-Patient Communication
- Person-Centered Care
- Culturally and Linguistically Competent Care

Resource Collection: Patient and Public Relations

Patient Safety & Relations

Study: Transgender Individuals Who Reach Amenorrhea May Still Become Pregnant

What's the news. Transmasculine individuals who reach amenorrhea, typically after six months of adequate testosterone treatment, may still ovulate and become pregnant, according to a **study published February 22, 2024, in Cell Reports Medicine**. The authors examined the ovaries of 52 individuals who had received testosterone treatment for at least six months and found that 17 (33%) showed histological signs of recent ovulatory activity. The duration of testosterone therapy was not related to the likelihood of continued ovulation.

Why it matters. Patients who achieve amenorrhea may believe that they can no longer become pregnant and may stop contraception; this study shows that this assumption may not be true, and these patients should be counseled appropriately.

How ECRI can help. The guidance article **Are LGBT-Inclusive Approaches for Patients and Staff on Your Radar Screen?** Highlights strategies for ensuring that practices support appropriate patient care in a welcoming environment.

Nurse Discharge Readiness Assessment Is Predictive of Readmission Risk

What's the news. Nurse assessments of patient readiness for discharge from the hospital were good measures of the likelihood of readmission, according to a **study published in the March 2024 issue of Medical Care**. The authors reviewed nurse assessments for more than 188,000 patients who were discharged after inpatient surgery from 424 hospitals. Overall, fewer than 50% of nurses indicated confidence that patients were ready for discharge. With each 10% increase in nurse assessment of discharge readiness, the likelihood of 30-day readmission decreased by 2% to 3%, depending on the patient's chronic conditions.

Why it matters. Reduction of unplanned readmission to the hospital requires close coordination among inpatient and post-acute care providers; understanding the patient's status at discharge and risk factors for readmission is key to planning care.

How ECRI can help. The guidance article **Care Coordination and Transitions** discusses common barriers to effective care coordination in the ambulatory care setting and provides a framework for healthcare organizations to develop policies and procedures related to care coordination.

Dental Antibiotic Prescriptions Frequently Unnecessary

What's the news. Approximately 64% of antibiotic prescriptions met nonconsensus guidelines for appropriate antibiotic use, and only 17.5% met consensus guidelines, according to a **study published February 20, 2024, in Infection Control & Hospital Epidemiology**. In the review of 88,539 dental visits, more than 92,000 antibiotic prescriptions were written, most often for prophylaxis against complications (31%), prevention of postsurgical complications (20%), and infective endocarditis (18%). Amoxicillin was most frequently prescribed, representing 63% of prescriptions, with a mean supply of 8 days.

Why it matters. The 2020 **National Action Plan for Combating Antibiotic-Resistant Bacteria** established an objective of reducing unnecessary outpatient antibiotic usage; this study identifies a key opportunity for doing so.

How ECRI can help. Evidence-based recommendations for antimicrobial stewardship are covered in **Top 10 Patient Safety Concerns for 2020: Antimicrobial Stewardship**.

Worker & Environmental Safety

States Move to Protect Confidentiality of Healthcare Workers' Mental Health Treatment

What's the news. More states are limiting the ways that healthcare providers' mental health treatment can influence their licenses or ability to practice, according to a **February 22, 2024, KFF Health News article**, which cites fear about adverse licensing effects as a reason providers may delay or avoid seeking needed treatment.

Licensing boards may perceive providers' mental health concerns as a threat to patient safety and take corresponding steps to suspend or revoke licenses. Faced with this, according to the article, providers may intentionally fail to disclose mental health concerns or delay or avoid treatment. Steps that states have taken include establishing 24-hour call lines where providers can access peer coaching and counseling, and creating "safe haven" programs that encourage self-reporting before practice is impaired.

Why it matters. Across care settings, medical disciplines, and roles, healthcare workers are at increased risk of experiencing occupational burnout and workplace violence that affect their physical, emotional, and psychosocial well-being. Organizations should help their providers understand and access the resources that are available to them in their states to promote safety and wellness.

How ECRI can help. The infographic **Taking Action to Address Clinician Burnout** describes specific risk factors that can lead to burnout, along with strategies for combating them.

Legal & Regulatory

Family Medicine among Specialties with Claims Most Likely to Close with Payment

What's the news. More than one-third of claims involving family medicine are likely to close with payment, with average indemnity of more than $300,000, according to a **review of more than 32,000 closed claims** by the Medical Professional Liability Association. Family medicine was the second most likely specialty to have claims closed with payment, at 33.9%, trailing only orthopedic surgery (34.3%) and ahead of obstetric/gynecologic surgery (33.8%), otorhinolaryngology (32.5%), and dentistry (31.6%). With an average indemnity payment of $328,416, family medicine fell near the median of the 28 specialties reviewed and was not included among the 10 specialties with the highest average defense cost. For all claims reviewed, the average cost to defend was $47,914.

Why it matters. Understanding the average cost to defend and pay claims and recognizing specialties with the highest risks can help risk managers and organizational leadership prioritize risk management and quality improvement activities.

How ECRI can help. The self-assessment **Managing Risks in Physician Practices: Clinical Management** can help risk managers identify and plan for opportunities to reduce risk-prone areas in their organizations.

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