

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.



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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.



Spotlight: National Immunization Awareness Month

August is National Immunization Awareness Month, an annual observance to highlight the importance of vaccination for people of all ages, according to the [Centers for Disease Control and Prevention](#). For healthcare organizations, vaccination is both a worker safety issue and a patient safety issue. ECRI's resources are here to help organizations address the immunization of healthcare personnel, vaccine coverage gaps, vaccine errors, and more.

- [Vaccination Safety](#)
- [Educate Parents: Childhood Vaccinations Are as Important as Ever](#)



Infection Control Resource Center

What's New?

- AI-powered analytics and insights bring transparency to primary hip and knee orthopedic surgery costs [read now](#)
- ECRI Blog: How American Emergency Departments Are Missing Older Adult Abuse [read now](#)

Patient Safety & Relations

Percentage of Patients with STD Diagnoses Increased from 2020 to 2023

What's the news. From 2020 to 2023, the percentage of patients with STD diagnoses increased 4.8%, with the greatest increases seen in syphilis (29.4%), gonorrhea (16.8%), and HIV and AIDS (14.1%), according to a [July 2024 infographic from FAIR Health](#). Adults aged 65 years and older experienced the greatest increase in STD diagnosis at 23.8%, followed by 16.2% in those aged 55 to 64.

Why it matters. This increase highlights the need for conversations regarding the risks of STDs, particularly among older adults.

How ECRI can help. Organizations can implement the strategies provided in [Taking Action: Strategies to Combat the Congenital Syphilis Epidemic](#) to address and combat this growing epidemic.

Infections Caused by Antimicrobial-Resistant Pathogens Increased during COVID-19

What's the news. Bacterial hospital-onset infections caused by antimicrobial-resistant pathogens—including *Candida auris*, Methicillin-resistant *Staphylococcus aureus*, and multidrug-resistant *Pseudomonas aeruginosa*—increased by a combined 20% during the COVID-19 pandemic, peaking in 2021 and remaining above prepandemic levels in 2022, according to a [July 2024 infographic from the Centers for Disease Control and Protection](#) (CDC). Reported *C. auris* cases increased nearly fivefold from 2019 to 2022.

Why it matters. The increase of antibiotic resistance emphasizes the importance of implementing preventive actions, including appropriate antibiotic and antifungal use, accurate laboratory detection, and effective infection prevention and control.

How ECRI can help. The guidance article [Infection Prevention and Control](#) provides an overview of infection prevention and control in the office setting.

Over Half of Youth Who Died by Suicide Had No Previous Mental Health Diagnosis

What's the news. Among over 40,000 young suicide decedents, 59.6% had no previously documented mental health diagnosis, and 46.8% died by firearm suicide,

according to a [study published July 30, 2024, in JAMA Network Open](#). The odds of having a prior diagnosis were lower among racially and ethnically minoritized youths compared with White youths, and among youths who used firearms compared with poisonings; hanging, strangulation, or suffocation; or other mechanisms.

Why it matters. Study findings highlight the need for comprehensive suicide prevention strategies, including early identification of mental health concerns, equitable access to mental health services, and universal lethal means counseling, according to the study authors.

How ECRI can help. The [Essentials: Behavioral Health](#) collection provides action recommendations and resources to support organizations' efforts to address patients' behavioral health, including suicide risk.

Legal & Regulatory

An AI Model Can Diagnose with High Accuracy, But Can It Explain How It Got There?

What's the news. An artificial intelligence (AI) model was able to solve medical quiz questions with high accuracy, but physician-graders found that the AI model made mistakes when describing images and explaining how its decision-making led to the correct answer, according to a [study published July 23, 2024, in npj Digital Medicine](#). Researchers tested the AI model using the *New England Journal of Medicine* Image Challenges, an imaging quiz designed to test the knowledge and diagnostic capabilities of medical professionals, in which it outperformed human physicians regarding multi-choice accuracy (81.6% versus 77.8%) and performed well in cases where physicians incorrectly answer, with over 78% accuracy. However, given its inconsistent ability to present correct rationales, further evaluations are needed before integration into clinical workflows.

Why it matters. Diagnosis is more than just a correct answer; providers must be able to clinically justify and explain to the patient how they arrived at a diagnosis—that rationale is a vital part of the diagnostic process. Further, clinical justification of diagnoses is necessary to ensure effective patient documentation.

How ECRI can help. ECRI named [Insufficient Governance of AI Used in Medical Technologies Risks Inappropriate Care Decisions](#) among the top 10 health technology concerns of 2024.

Less than Half of Patient Safety Pros Report Data to a Publicly Available PSO

What's the news. Only 44.4% of patient safety professionals at healthcare facilities and patient safety organizations (PSOs) interviewed report data to publicly available patient safety databases, such as ECRI, according to a [study in the August 2024 issue of the Journal of Patient Safety](#). Researchers say the majority of patient safety professionals report evaluating the effectiveness of patient safety interventions,

some using methods that are less rigorous, including audits, self-reporting, and subjective judgment.

Why it matters. By participating in a PSO, providers may voluntarily and confidentially report their patient safety and quality information for aggregation and analysis and in return receive recommendations, protocols, best practices, expert assistance, and feedback from the PSO to improve the provider's patient safety activities. PSO participants benefit from a broad federal legal privilege that protects "patient safety work product" from subpoena, discovery, and use in civil and criminal litigation against the provider in any state or federal court and other tribunals, subject to a few narrow exceptions.

How ECRI can help. Read more about PSOs and how ECRI can provide solutions for your organizations at our page [Patient Safety Organization \(PSO\)](#).



ECRI and ISMP Headquarters, 5200 Butler Pike, Plymouth Meeting, PA 19462, 610.825.6000