

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](mailto: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](mailto:AmbulatoryCareRM@ecri.org).



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## What's New?

- ECRI Blog: World Patient Safety Day [read now](#)

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## Spotlight on Documentation

Communication is an integral part of caring for a patient. It does not matter how clinically proficient providers are if they document or act on inaccurate, incomplete, untimely, or unintelligible information. The medical record contains the story of the patient's care; if it does not tell the story coherently and succinctly, it is not doing its job. ECRI's resources are here to help your healthcare organization ensure effective medical documentation.



- [Documentation: A Primer on Charting in the Medical Record](#)
  - [Resource Center: Medical Records and Documentation](#)
  - [Resource Center: Health Information Technology](#)
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## Patient Safety & Relations

### Enforcement of FDA Final Rule Amending MQSA Began September 10

**What's the news.** Enforcement of the U.S. Food and Drug Administration's (FDA) final rule to amend the Mammography Quality Standards Act (MQSA) began on September 10, 2024. MQSA regulations now have additional requirements related to mammography reports, including an overall assessment of breast density; patient lay summaries; communication of results; and medical outcomes audit, according to a [September 10, 2024, update from FDA](#).

**Why it matters.** Organizations must comply with MQSA regulations, and during annual inspections, inspectors will determine whether facilities are meeting all requirements.

**How ECRI can help.** Organizations can implement the strategies in [Taking Action: Erasing Race-Based Disparities in Breast Cancer Care](#) to help identify and address disparities in breast cancer care.

### Behavioral Insights Can Supplement Quality Improvement Initiatives

**What's the news.** Behavioral insights—an approach that utilizes knowledge and tools from a range of scientific disciplines, including neuroscience and behavioral psychology, to support behavior change—can supplement quality improvement initiatives by focusing on changes in staff behavior to promote actions more aligned to best practice, according to a [study published August 2024 in the Journal of Patient Safety](#). In an analysis of behavioral insight methods at a Denmark hospital, psychological barriers identified included default inertia, decision complexity, risk aversion, and bias.

**Why it matters.** Organizations may consider integrating behavioral insights with quality improvement initiatives to guide and support behavior change.

**How ECRI can help.** The guidance article [Culture of Safety: An Overview](#) describes the elements of a safety culture and provides recommendations on how an organization can approach each element.

### Updated Recommendations for the RSV Vaccine

**What's the news.** The Advisory Committee on Immunization Practices updated its recommendations to state that all adults 75 years or older and adults aged 60 to 74

years who are at increased risk for severe respiratory syncytial virus (RSV) should receive a single dose of RSV vaccine, according to an [August 15, 2024, Morbidity and Mortality Weekly Report](#).

**Why it matters.** Updated recommendations are intended to maximize RSV vaccination coverage among individuals most likely to benefit. Vaccine gaps and errors may harm patients or provide inadequate protection against serious diseases.

**How ECRI can help.** The guidance article [Vaccination Safety](#) reviews vaccination practices that support informed patients and vaccine safety.

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## Legal & Regulatory

### Reducing Liability Claims Related to Noninvasive Stress Testing

**What's the news.** To reduce related medical professional liability claims, cardiologists ordering, supervising, and interpreting noninvasive stress testing (NIST) should follow consensus guidelines, according to a [recent study by the American College of Cardiology](#). Further, they should evaluate patients before NIST, determine whether NIST is indicated and which modality is suitable, inform patients and appropriately supervise NIST, establish escalation protocols, and properly interpret, communicate, and follow results. Researchers found NIST-related claims primarily involved allegations about treadmill injuries, adenosine, or follow-up and management.

**Why it matters.** Medical professional liability claims can have significant consequences for both providers and patients, including financial impacts, emotional and professional stress, reputational harm, and legal and administrative burdens.

**How ECRI can help.** The guidance article [Event Reporting in Ambulatory Care](#) discusses the value of robust analysis and effective follow-up after a patient safety event.

### Study: Investigation Reports after Serious Incidents Frequently Lead to Weak Response

**What's the news.** Fifteen percent of factors identified in investigation reports as contributing to serious incidents were not addressed by identifiable risk controls (i.e., strategies and interventions to address identified contributory factors), according to a [study in the September 2024 issue](#) of the *Journal of Patient Safety*. Of the proposed risk controls in action plans, 74% were assessed as weak, typically focusing on individual interventions even when problems were organizational or systemic, researchers say.

**Why it matters.** Study findings indicate that there are significant gaps in translating incident investigations into meaningful systemic improvements, according to the study authors.

**How ECRI can help.** The guidance article [Event Reporting in Ambulatory Care](#) discusses the value of robust analysis and effective follow-up after a patient safety

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