

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 Yvette Ervin, Vice President, CAPIC Risk Management, at YErvin@CAPphysicians.com.



Strategic Insights for Ambulatory Care

January 13, 2025

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.



Request for Reviewers and Sample Job Descriptions

ECRI has a draft revision of the guidance article, *The Role of the Risk Manager: A Primer*, and we are looking for volunteers to review and provide input.

We are also looking for sample job descriptions for a healthcare risk manager that we can post to our website for other members to reference.

Are you available to review our draft document or would you have a job description you are willing to share with us? Let us know by email:

HealthSystemRM@ecri.org by January 21.



Spotlight: Health Literacy and Medical Misinformation

Medical misinformation is health information that is false, inaccurate, or misleading, based on current available evidence. Misinformation is widely available and dispersed further and faster through social media and online channels. If viral misinformation is the disease, health literacy is part of the cure. ECRI named **The Wide Availability**

and Viral Spread of Medical Misinformation: Empowering Patients through Health Literacy a top patient safety concern in 2025. Our resources are here to help your organization improve health literacy, communicate with patients, and manage related risks.

ECRI Resources:

- Health Literacy
- Health Literacy: Handout for In-Person Communication
- Culturally and Linguistically Competent Care



What's New?

- Ask ECRI: Determining Which Lift and Transfer Equipment to Purchase [read now](#)

Patient Safety & Relations

Nearly 57 Million People Were Affected by Healthcare Data Breaches in 2025

What's the news. Almost 57 million people are known to have been affected by healthcare data breaches in 2025, according to a **January 2, 2026, article in *The HIPAA Journal*** breaking down the largest healthcare data breaches during the year. Nationwide, there were over 640 data breaches affecting 500 or more people.

Why it matters. Cybersecurity is a pressing concern for healthcare organizations. Attacks can lead to adverse effects in patient care, such as poor outcomes because of delayed testing and procedures, longer lengths of stay, more complications from medical procedures, additional patient transfers, and even higher mortality in some cases.

How ECRI can help. The guidance article **Cybersecurity in Ambulatory Care** can be used to better understand an organization's current approaches, identify opportunities for improvement, and clearly define roles in cybersecurity within the organization.

LLMs Inconsistently Interpret Verbal Probability Terms, May Lead to Misunderstandings

What's the news. Large language model (LLM) chatbots inconsistently interpret verbal probability terms (e.g., rare, common) that are used to communicate medical risks, aligning closer to lay interpretations of such terms than clinical guidelines, which may increase patient misunderstandings if they seek online health information, according to a **research letter published December 17, 2025, in *JAMA Network Open***.

Why it matters. Generative AI chatbots are increasingly used as sources of health information, and it is important to understand their interpretation of medical terms to determine how they might affect patient understanding.

How ECRI can help. ECRI named **Insufficient Governance of Artificial Intelligence in Healthcare** among its top 10 patient safety concerns in 2025.

HHS Seeks Public Input on Swiftly Integrating AI into Clinical Use

The US Department of Health and Human Services (HHS) is **seeking public input** on how the agency can speed up the adoption and use of artificial intelligence (AI) in clinical care, according to a **December 19, 2025, release**. Comments are due by February 23, 2026.

Why it matters. Integration of AI into clinical care should be done cautiously and ethically. While AI has demonstrated usefulness in certain areas of healthcare, continued robust oversight is needed to ensure patient safety.

How ECRI can help. ECRI named **Insufficient Governance of Artificial Intelligence in Healthcare** among its top 10 patient safety concerns in 2025.

Chronic Pain More Prevalent Among Rural Than Urban Cancer Survivors

What's the news. National survey data of more than 5,500 adult cancer survivors found that chronic pain was more prevalent among rural residents (43.0%) compared to urban residents (33.5%), according to a **research letter published December 17, 2025, in *JAMA Network Open***. Reasons for this disparity may include reduced availability of pain management resources and insurance challenges in rural areas.

Why it matters. Healthcare organizations should implement strategies to better meet the needs of rural cancer survivors with chronic pain by increasing the availability of survivorship resources, access to pain specialists, and innovative payment models.

How ECRI can help. The guidance article **Navigating Challenges in Rural Healthcare** discusses the significant and pervasive challenges in rural healthcare, including health disparities, patient access to care, staffing, and financial viability; and provides strategies to explore for improvement and sustainability.

"Patient Safety Passport" Researchers Envision Tool Could Be Used Across Care Settings

What's the news. To further the development of a "patient safety passport," researchers have used a human factors engineering approach to identify the key

conceptual guidelines and design requirements it would need to improve the quality and safety of care transitions, according to a **study in the December 2025 issue of the *Journal of Patient Safety***. Researchers mapped the care transition process of older adult patients transitioning into and out of an emergency department; they believe a patient safety passport would apply to care transitions across a variety of domains.

Why it matters. Coordinating patient care across care settings is a huge challenge. Historically, the patient's primary care provider followed the patient's care from the hospital to the home or to other healthcare settings. In many instances, this no longer occurs. Hospitalists, for example, now typically oversee patient care in the hospital setting. Outside the hospital, patients may have multiple specialty providers in addition to their primary care provider.

How ECRI can help. The guidance article **Care Coordination and Transitions** discusses common barriers to effective care coordination in the ambulatory care setting; provides a framework for healthcare organizations to develop policies and procedures related to care coordination; and describes current industry efforts to implement established best practices that improve care coordination, reduce patient harm, and promote continuity of care.



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