10 years after
On eve of To Err's anniversary, changing healthcare world becomes priority

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It's funny how a big anniversary coming up can motivate people to do the right thing. Nov. 1 will mark the 10-year anniversary of the release of the Institute of Medicine's *To Err is Human: Building a Safer Health System* report. The report's conclusion that an estimated 98,000 people die each year from medical mistakes by healthcare providers thrust the industry's well-kept secret onto the public stage and launched the modern patient-safety movement.

With the debate over healthcare reform raging since the start of the 2008 presidential campaign nearly two years ago, the patient-safety movement was thrown into neutral as the issues of access and cost raced ahead. But with the IOM report's anniversary looming, the attention paid to patient safety seems to have gone into overdrive. Over the past four months alone:

- Last week, the White House announced that HHS would award grants of up to $3 million to states and health systems that carry out and evaluate patient safety and medical liability demonstrations.

- The Joint Commission launched its new Center for Transforming Healthcare to educate hospitals and other providers about more effective patient-safety techniques and strategies, including making senior executives more accountable for patient safety.

- The state of California fined 12 hospitals $25,000 each for what it deemed serious patient-care lapses.

- The National Quality Forum said it's reviewing and possibly adding to its list of 28 “never events.”

- The state of New Jersey passed a new law that mandates public reporting of 14 adverse hospital patient-safety events.

- Health insurance giant Aetna put in place a nonpayment policy for three never events and tougher reimbursement policies for 25 others.
Hospitals in Rhode Island voluntarily adopted new surgical-safety protocols aimed at preventing wrong-site and wrong-patient surgeries.

Hospitals in three states—Massachusetts, Michigan and Washington—agreed to collaborate on a four-year program to reduce readmission rates.

And the state of Maryland put in place a new reimbursement system that links payments to reduced incidents of 52 potentially avoidable medical errors.

We applaud all of these new efforts—all since June—and more that we don't have the space to print. But the question is: Why did all of the providers, payers and regulators involved wait 10 years to do it?

It reminds us of the promise that the first “gang of six” in the reform milieu—AdvaMed, America's Health Insurance Plans, the American Hospital Association, the American Medical Association, the Pharmaceutical Research and Manufacturers of America and the Service Employees International Union—made back in June. They vowed to reduce national healthcare spending by $2 trillion over the next 10 years by essentially doing all the things they should have been doing over the past 10 years.

Maybe the healthcare industry is so big and so entrenched it suffers from the same inertia that has plagued other industries like automotive and energy, which have been slow to adapt. It took virtual meltdowns in those industries to get them headed in the right direction. For the healthcare industry, it has been the fear of sweeping healthcare reform—and reform's potential adverse business impact—to get each segment of the industry headed in the right direction.

Like some forgotten book of magic spells pulled from a dusty bookshelf, the power of the IOM report to change behavior has never waned. Just the thought of the report's 10-year anniversary seemingly has reinvigorated the patient-safety movement with the thanks of thousands of patients who will go home healthier than when they went in.

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