

Access to Nursing Home Care is Worsening

The American Health Care Association and National Center for Assisted Living (AHCA/NCAL) represent more than 14,000 nursing homes and other long-term care facilities nationwide that provide care to approximately five million people annually. Recently released data demonstrates worsening access to care for seniors and individuals with disabilities in need of long-term and post-acute care.



A press report that the AHCA/NCAL released Access to Nursing Home Care is Worsening has highlighted three areas that have challenged and impacted access to skilled care in nursing homes or post-acute care facilities. These areas are limiting admissions, downsizing, and closures. Despite a rapidly aging population and increased demand for long-term and post-acute care, the annual number of new nursing homes continues to decline, and very few facilities are opening. Another huge impact is being seen in the emergency departments and inpatient units with longer stays or boarding due to fewer resources. With a nursing home minimum staffing rule announced, how will this impact the declining number of facilities? Will we continue to see them close? The full report can be found here AHCA Access to Care Report August 2024

This article falls under Operational in the Enterprise Risk Management (ERM) risk domains.

The business of health care is the delivery of care that is safe, timely, effective, efficient, and patient-centered within diverse populations. Operational risks relate to those risks resulting from inadequate or failed internal processes, or systems that affect business operations. Examples include risks related to: adverse event management, credentialing and staffing, documentation, chain of command, lack of internal controls, supply chain and identification of existing opportunities within management oversight.



Importance of Covid Immunization, Even During Pregnancy



Autumn is the time to make sure your immunizations are up to date for COVID-19 (and other respiratory illnesses).

Nearly 90% of babies who had to be hospitalized with COVID-19 had mothers who didn't get the vaccine while they were pregnant, according to new data released by the Centers for Disease Control and Prevention. Babies too young to be vaccinated had the highest COVID hospitalization rate of any age group except people over 75. Vaccine misinformation and skepticism are likely barriers to protecting vulnerable infants.

CDC recommendations and high-risk groups have been updated for 2024.

"Babies can't get the COVID vaccination until they are at least 6 months old.... Vaccinating pregnant women so they pass the antibodies on to their newborns is an effective way of protecting babies during that time. Vaccination during pregnancy also protects pregnant people from severe disease." The case for vaccinating pregnant women is presented in this Medscape article Why Getting a COVID Shot During Pregnancy is Important.

The <u>CDC recommends the vaccine</u> for everyone over 6 months of age, with particular emphasis on certain high-risk groups.

Healthcare workers are also at high risk due to workplace exposure. In addition, unimmunized healthcare workers can pass on the virus to vulnerable patients.

Check with your healthcare provider or local pharmacy for vaccine availability in your area.

This article falls under Clinical/Patient Safety in the Enterprise Risk Management (ERM) risk domains.

Risks associated with the delivery of care to patients, residents and other health care customers. Clinical risks include: failure to follow evidence based practice, medication errors, hospital acquired conditions (HAC), serious safety events (SSE), health care equity, opportunities to improve safety within the care environments, and others.

Ambulatory Patient Safety

A recent study led by a research team at a large health system in Boston found that patient harm events in ambulatory settings were common and often preventable. What do you think was the most common adverse event identified?

The findings highlighted that 7% of patients experienced adverse events, with 17.4% being serious. Medication-related issues accounted for the most—64% of events, while diagnostic errors are likely underreported. The study emphasizes the need for better measurement tools and interventions to improve outpatient safety. Researchers highlight the potential of automated surveillance to enhance safety monitoring. You can read more here: Boston-based researchers find outpatient adverse events are numerous, serious and understudied, Betsy Lehman Center for Patient Safety.



To read the study yourself, here is the full citation for the research article: Levine, D.M., et al. (2024, May). The Safety of Outpatient Health Care: Review of Electronic Health Records. Annals of Internal Medicine, Volume 177(6), DOI: 10.7326/M23-2063

Medical Mutual has a practice tip for Medication Safety in the Office Practice to help you. Please don't hesitate to reach out to your assigned risk manager for further assistance or call the Medical Mutual Risk Department directly at 1-800-942-2791.

This article falls under **CLINICAL/PATIENT SAFETY** in the Enterprise Risk Management (ERM) risk domains.

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Social Inflation and Health Care Risk Management

The Journal of Healthcare Risk Management published a research article in June of 2024 that examines the concept of social inflation and its effects on medical malpractice insurance claims and how this is an essential topic for medical risk management.

The published article is an open-access research paper. You can find the article here: Social Inflation and Health Care Risk Management. The article looks at some of the analyses and data related to claims. There are important takeaways that are beneficial for risk professionals to consider when

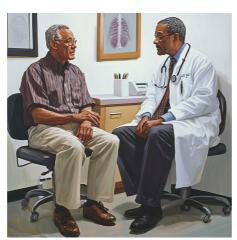


looking at potential impacts around social inflation and claim management.

This article falls under Financial in the Enterprise Risk Management (ERM) risk domains.

Decisions that affect the financial sustainability of the organization, access to capital or external financial ratings through business relationships or the timing and recognition of revenue and expenses make up this domain. Risks might include: capital structure, credit and interest rate fluctuations, foreign exchange, growth in programs and facilities, capital equipment, regulatory fines and penalties, budgetary performance, accounts receivable, days of cash on hand, capitation contracts, reimbursement rates, managed care contracts, revenue cycle/billing and collection.

Tips to Avoid Diagnostic Errors



Diagnostic errors continue to be a leading contributor to patient harm and malpractice claims. Some simple strategies can help reduce this risk.

Approaching patient care with an open and questioning mind, along with tools such as checklists and patient engagement, can improve diagnostic accuracy. This Medscape article, Three Tips to Avoid Common Diagnostic Errors in Primary Care explores ways to incorporate these techniques into your practice.

Medical Mutual offers practice tips for <u>Results Management:</u> <u>Tracking Diagnostic Tests and Referrals and Strategies for Effective Communication.</u>

This article falls under Clinical/Patient Safety in the Enterprise Risk Management (ERM) risk domains.

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Use of Artificial Intelligence (AI) in Healthcare, What Do I Need to Know?

Artificial Intelligence (AI) has now firmly entered the healthcare field. Some organizations have welcomed the technology, while others are taking a slower approach. As AI use increases, it is essential to be

aware of how this technology is influencing the care you are delivering so you can better assess what risks may be involved.

In a recent viewpoint article published in the JAMA Health Forum, Artificial Intelligence Can Be Regulated Using Current Patient Safety Procedures and Infrastructure in Hospitals, the



authors explore how existing patient safety protocols can be adapted to regulate AI in healthcare. While AI has potential benefits, such as improving diagnosis and treatment options, it also introduces risks, particularly when used with populations not included in its original training. Hospitals, under current Centers for Medicare & Medicaid Services (CMS) requirements, can leverage quality assessment processes to address these risks. The Biden administration's executive order supports developing national standards for AI use, ensuring transparency, safety, and accountability.

Medical Mutual has recently published a new practice tip to help get you started: Artificial Intelligence in Healthcare.

This article falls under **Technology** in the Enterprise Risk Management (ERM) risk domains.

This domain covers machines, hardware, equipment, devices, wearable technologies and tools, but can also include techniques, systems and methods of organization. Health care has seen an escalation in the use of technology for clinical diagnosis and treatment, training and education, information storage and retrieval, and asset preservation. Examples also include Electronic Health Records (EHR) and Meaningful Use, financial and billing systems, social media and cyber security; cyber risks can be significant.