Innovative Mass. Alliance Initiative Is a “CARe”ing Way to Respond to Medical Errors

By Jennifer J. Salopek

“Suing is a patient’s last resort when they don’t get the attention they deserve, but it also doesn’t really get them what they want in the event of a medical error,” says Evan Benjamin, MD. “Doctors can’t help getting defensive, and the current malpractice system makes it hard to find answers about how errors occur.”

Benjamin, senior vice president and chief quality officer at Baystate Health, as well as associate professor at Tufts University, wants to change all that. As multiple forces, including the patient safety movement and an increased emphasis on transparency and communication in health care, converge, nine Massachusetts organizations have joined together to form the Massachusetts Alliance for Communication and Resolution following Medical Injury (MACRMI). Its flagship initiative, Communication, Apology, and Resolution (CARe), represents a new way of responding to medical errors that puts patient needs first. Its goals are to

- Improve communication between health care providers and their patients
- Determine what went wrong, and if possible, prevent it from happening again
- Offer an apology and, if appropriate, offer the patient compensation.

“The link to liability and early compensation is our next step in the journey of creating a culture of safety,” Benjamin says.

The initiative is similar to one that’s been in place at the University of Michigan for several years; Benjamin and counterparts spent time in Ann Arbor watching that system in action.

“At UM, they have brought about a fundamental change in how they think about medical error, and work through their system to help patients and families,” he says.

Where UM has committees, however, Massachusetts has MACRMI, an innovative alliance that brings together hospitals, health systems, and professional associations with funding by insurers. “We realized that other types of organizations needed to be involved in order for us to be successful. We needed to join together for a unified approach and a stronger voice. MACRMI is sponsored by payers and we are stronger through that partnership,” Benjamin says.

The group has lobbied the state legislature during its consideration of malpractice reform, specifically for the inclusion of a six-month waiting period after an error before a suit can be filed. “That cooling-off period gives the health system time to follow through with the CARe protocol,” Benjamin explains. They also seek protection for the “apology” provision of CARe that will make it inadmissible in court. “That provides comfort and reassurance for doctors,” says Benjamin.

Traditional physician discomfort with communicating and apologizing can be overcome with education and
training, Benjamin says. MACRMI offers real-time training to raise awareness and teach the relevant skills in hospital pilot sites that include two Baystate facilities and three Beth Israel Deaconess locations.

Even plaintiffs’ attorneys in Michigan have come to appreciate the program there: “It’s an honest approach to care that they prefer to the adversarial,” says Benjamin.

“Demonstrating impact may take years, but this is an important first step in something that really makes sense.”

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