

Better patient safety linked to fewer medical malpractice claims in California

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Reducing the number of preventable patient injuries in California hospitals from 2001 to 2005 was associated with a corresponding drop in malpractice claims against physicians, according to a study issued today by the RAND Corporation.

Researchers studied both medical malpractice claims and adverse events such as post-surgical infections across California counties and found that changes in the frequency of adverse events were strongly correlated with corresponding changes in the volume of medical malpractice claims.

"These findings suggest that putting a greater focus on improving safety performance in [health care](#) settings could benefit medical providers as well as patients," said Michael Greenberg, the study's lead author and a behavioral scientist with RAND, a nonprofit research organization.

The link between safety performance among [health care providers](#) and malpractice suits has been of central interest to policymakers in the ongoing debate over [health care reform](#). The RAND study is the first to demonstrate a link between improving performance on 20 well-established indicators of medical safety outcomes and lower [medical malpractice](#) claims.

Researchers analyzed information for approximately 365,000 adverse safety events, such as post-surgical problems and hospital-acquired infections, and for approximately 27,000 malpractice claims, all of which occurred during 2001-2005. The researchers found considerable

variation among California's counties, in both the frequency of adverse events and of malpractice claims.

More important, the study found a significant connection between the annual frequency of adverse events in each county, and the number of malpractice claims made. For example, under the model created by researchers, a county that experienced 10 fewer safety events in a given year would also expect to see a reduction of 3.7 malpractice claims during the same year, said study co-author Amelia Haviland, a RAND statistician.

Researchers say the link between safety performance and malpractice litigation is an important offshoot of national patient safety efforts, which for the past decade have tried to reduce medical errors and to avert preventable injuries.

"The patient safety movement suggests that patient injuries sometimes occur as a result of the failure of complex systems rather than negligence, and that efforts to identify the root causes of these failures are an important tool for protecting patients and for reducing injury rates," Greenberg said.

Evidence that safety performance has a direct tie to malpractice claims suggests that policy interventions designed to boost safety also might have the effect of improving the malpractice litigation climate. A recently announced federal initiative on medical liability reform and patient safety is aimed at investigating and expanding such policy interventions.

California is a particularly important state for examining the safety-malpractice relationship because of its size and diversity. The state also adopted statutory reforms 35 years ago to discourage malpractice lawsuits, so any recently observed changes in the volume of malpractice

litigation in California are unlikely to be attributable to the impact of tort reform.

More information: The study, "Is Better Patient Safety Associated with Less Malpractice Activity? Evidence from California," can be found at www.rand.org

Provided by RAND Corporation

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