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## PROFESSION

### Disclosing errors good for reputation but won't reduce lawsuits

Patients still may sue after being told of mistakes, but they are more likely to recommend hospitals opting for transparency, a new study says.

By KEVIN B. O'REILLY, amednews staff. Posted Dec. 15, 2010.

Patients who are told about medical errors in their care are not more likely or less likely to file medical liability lawsuits.

Yet they appear twice as likely to recommend the institution where the error occurred than they would be if the error had not been disclosed.

A 2008 poll of 1,018 adults in Illinois found that 27% said they would still sue after being told of an error and offered compensation, according to a study in the November issue of the journal *Medical Care*. Nearly 40% of patients said they still would recommend the hospital after an error, if the hospital disclosed the mistake and offered a financial settlement.

"If you disclose a medical error to patients, you convey two pieces of information," said Lorens A. Helmchen, PhD, lead author of the study and associate professor of health administration and policy at George Mason University in Virginia. "One is that you just made a mistake, and the other is that you are prepared to disclose it to the patient. The fear is that this will lead to more lawsuits, and we did not find any evidence that patients would be any more likely to sue if this was disclosed to them.

"What we did find is that survey respondents would be more likely to recommend their provider if they were confident that the provider had a policy in place to routinely disclose medical errors," Helmchen said. "[Disclosure] might improve the overall perception of the quality of the provider."

Helmchen is co-investigator of a three-year, \$3 million Agency for Healthcare Research and Quality demonstration grant to help evaluate whether a disclosure-and-compensation model used at the University of Illinois Medical Center in Chicago can work at other area hospitals. A study in the Aug. 17 *Annals of Internal Medicine* documented the University of Michigan Health System's nine-year experience with a disclosure-and-compensation policy and found that liability costs fell and cases were resolved more quickly ([www.ncbi.nlm.nih.gov/pubmed/20713789/](http://www.ncbi.nlm.nih.gov/pubmed/20713789/)).

#### Reputational advantages

Only 10% of the patients surveyed said their physicians would be "very likely" to disclose a medical error, the *Medical Care* study said. Patients who actually experienced a medical error were more willing to sue despite disclosure, with 44% saying they were "very likely" to do so ([www.ncbi.nlm.nih.gov/pubmed/20829723/](http://www.ncbi.nlm.nih.gov/pubmed/20829723/)).

The study does not definitively answer the question of whether routine disclosure and compensation for medical errors make financial sense, Helmchen said.

"The only conclusion we can draw from this study," he said, "is that if you're going to disclose errors, disclose them all, so that you establish a reputation that you're a transparent hospital that aggressively addresses patient injuries."

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