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ЕВРОПЕЙСКА АСОЦИАЦИЯ НА СТАРШИТЕ БОЛНИЧНИ ЛЕКАРИ**

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# Human Error, Medical Profession, Accountability

The health professions, mainly medicine and dentistry, are now specially involved with the patient safety in the caring process. The **Culture of Patient Safety** is now a key issue concerning all the procedures that patients undergo.

The FNOMCeO along with the Ordini Provinciali dei Medici e Chirurghi e Odontoiatri, as public ancillary organizations of the Minister of Health, want to tackle with transparency the human error issue in the medical domain and the accountability of the medical profession.

The FNOMCeO is aware of the need to revise the national system in order to cope with the so called medical malpractice and to seek a new way of assisting injured patients.

This new cultural phase is evident in the new Code of Ethic (Codice Deontologia Medica), recently approved (December 2006): article 14 states that all physicians have to collaborate to “disclosure, incident report and assessment of medical errors aiming to improve the quality of care”.

The basic element for consideration is that the culture of error must be a core element of medical profession and one that deserves special education on par with other fields of clinical medicine.

The honest disclosure of errors is a powerful tool to ameliorate the medical profession together with all other component of the Clinical Governance.

The reform process would be made easier by taking the following two steps in consideration:

- 1) a new assessment of professional liability is of primary importance considering not only the responsibility of individual physicians, who are often the person exposed to liability, while ignoring the failures of the entire organization.
- 2) The necessity to collect the appropriate amount of information on medical errors both nationally and in each Italian region with a uniform procedure and with an active role played by Italian doctors.

Italian doctors and dentists believe that health promotion is a fundamental right of important right of citizens and therefore citizens are owed a professional duty to deliver health care on this basis. The FNOMCeO is aware of the vital role the medical profession has to assume in this Patient Safety Campaign and, together with other stakeholders, it intends to propose sound solutions to be reported in a **Decalogue on Patient Safety and Clinical Risk management**.

**The Decalogue** is composed of three parts concerning the organisation (the system), education, and accountability.

## SYSTEM

- 1) to establish, in both the public and private health care institutions a Patient Safety and Clinical Risk Management Unit (PSaCRMU) the aim of which would be to monitor errors and adverse events occurring during hospitalization ( events to be reported by physicians compulsorily), (Incident Reporting, Morbidity Mortality review, Clinical audit). This reports should be periodically presented to the Chief Executive Officer. The

- report will be one of the main indicators in the assessment of medical doctors. The development of patient safety procedure should be a direct responsibility of CEO.
- 2) To arrange the Unit under direct supervision of the CEO.

## **EDUCATION**

- 3) to develop particular courses for undergraduate students in Medical School focusing on medical errors, patient safety, communication and medical ethic assuring to them at least 5 credits. The issue of patient safety and clinical risk management will be a subject of postgraduate education and CME programs.

## **ACCOUNTABILITY AND LIABILITY**

- 4) to promote and to diffuse “Good Medical Practice” in order to :
    - a) motivate medical doctors (health professional) to realise protocols and procedures highlighting the carefulness of the organization toward the patient safety.
    - b) Reduce the use of risky procedures ( with an aim to reduce insurance premiums)
    - c) To improve the doctor-patient relationship by assuring safety and transparency in practice and by endorsing activities to prevent hospital infections, drugs errors and falls in elderly population..
  - 5) demand a law which guarantee the protection of the legal process i.e. the compulsory reporting of errors and near misses by the physicians.
  - 6) request that expert witnesses get a dedicated education certified by a professional regulatory board warranting the proficiency in the legal process.
- In any trial the expert witness must recur to the assistance of other specialists.