

The Importance of Communication and Documentation in Chronic Disease Management

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Presenter Disclosure

- Conflict of Interest – I have no financial or professional affiliation with any organization that can be perceived as a conflict of interest in the context of this presentation.
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About us

■ Provides:

- medical liability protection to Canadian physicians
- compensation to patients proven to have been harmed through negligent care

■ Mission

- protect the professional integrity of physicians
- promote Canadian safe medical care



- Leveraging the CMPA's knowledge & expertise to:
 - reduce avoidable harm from medical care
 - advance healthcare system-level enhancements

- How do we do it?
 - in-depth medico-legal database
 - evidence-based continuing medical education
 - systems approach

Background

- **WHO: chronic disease= epidemic**
 - large economic impact
- **Patients with chronic diseases**
 - higher users of healthcare
 - risk factor for hospital admission & readmissions
- **CMPA: communication & documentation**
 - often linked to factors involved in patient safety incidents

Joe

- 65 y/o male
 - type 2 diabetes, hypertension & obesity
 - slips and fractures his right 5th toe
 - develops persistent pain & swelling
- FP orders a fiberglass cast applied at the hospital

** Some details of the case have been modified to preserve confidentiality*



- 4 days later
 - presents to ED with persistent foot pain
- 2 days later
 - cast is removed - blister noted on sole R foot
- Diagnosed with infected ulcer
 - despite long antibiotic course, infection worsens
- Joe undergoes amputation of 2nd to 5th toes

Medico-legal findings

The family physician should have:

- considered an air cast
- communicated with:
 - **Joe:** risks & complications of fiberglass in light of his diabetes
 - **the orthopaedic technician:** specific instructions for application including appropriate padding

ED nurse should have:

- given appropriate consideration to Joe's pain
- communicated this to the ED physician



Objectives

- To provide evidence-based information from the CMPA's data on the importance of communication, including documentation in chronic disease management.

CMPA's medico-legal data

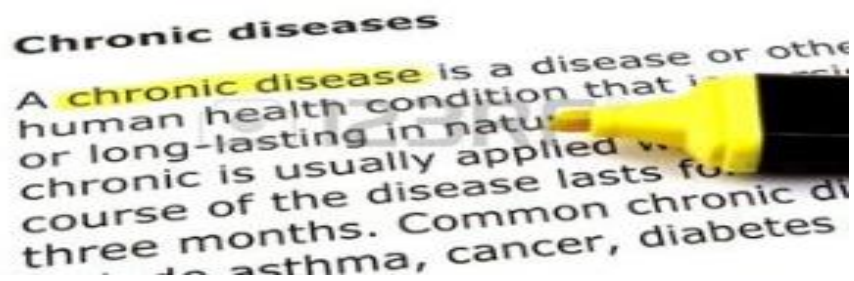
- **CMPA collects data on:**
 - legal action
 - medical regulatory authority complaints (College)
 - hospital complaints
- **Data sources:**
 - legal documents
 - medical records
 - peer expert opinions
 - College & hospital decisions



CMPA's medico-legal data

- Data capture using:
 - ICD-10-CA: Disease and Health problems
 - CCI: Health Interventions
- In-house coding system capturing:
 - medico-legal risk areas
 - contributing factors to patient safety incidents

Approach



Chronic diseases
A **chronic disease** is a disease or other human health condition that is long-lasting or long-lasting in nature. The term chronic is usually applied to a disease whose course of the disease lasts for three months. Common chronic diseases include asthma, cancer, diabetes

- Literature search and review
 - guide selection of chronic diseases to study
- Criteria
 - chronic cardiovascular conditions (e.g. stroke hypertension)
 - respiratory conditions (e.g. COPD, asthma)
 - diabetes

Approach

- Nurses reviewed cases to identify:
 - areas of medico-legal risk
 - factors contributing to patient safety incidents
- Analyzed factors impacting chronic care management
- Data were analyzed using descriptive statistics

Results

- Identified 1140 closed cases 2010-2014
- Analysis focused on:
 - 718 (63%) cases with peer expert criticism



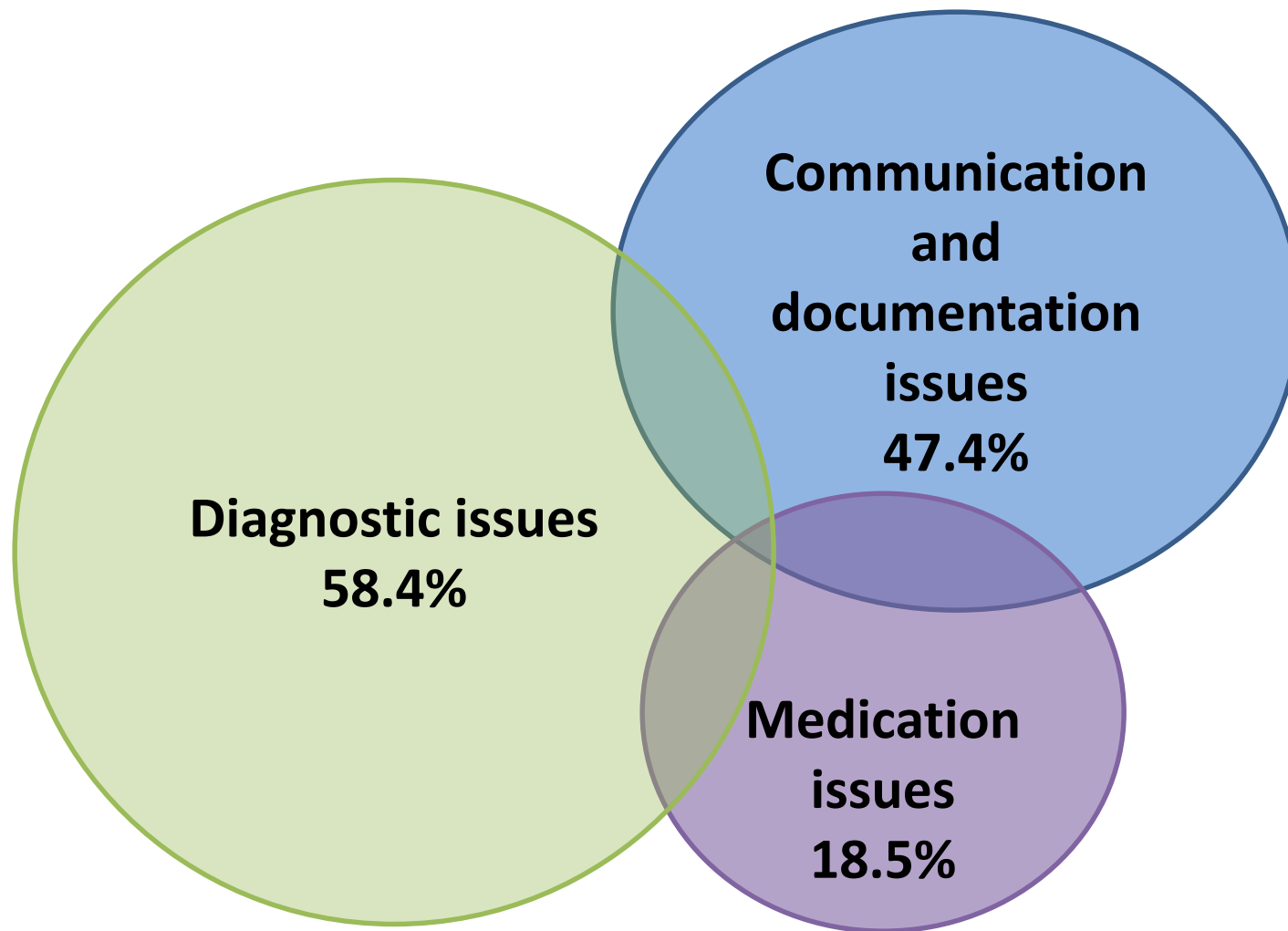
Results - patient characteristics

Comorbidities & severe outcomes by patient age

Patient Age	% of patients (n=747)	Average No. of comorbidities	Severe harm %
Under 40	17.0	2.1	16.3
41-64	43.2	3.4	46.0
≥ 65	28.2	4.2	32.3
Unknown	11.1	3.1	5.4

Results

Top areas of medico-legal risk



83.2%

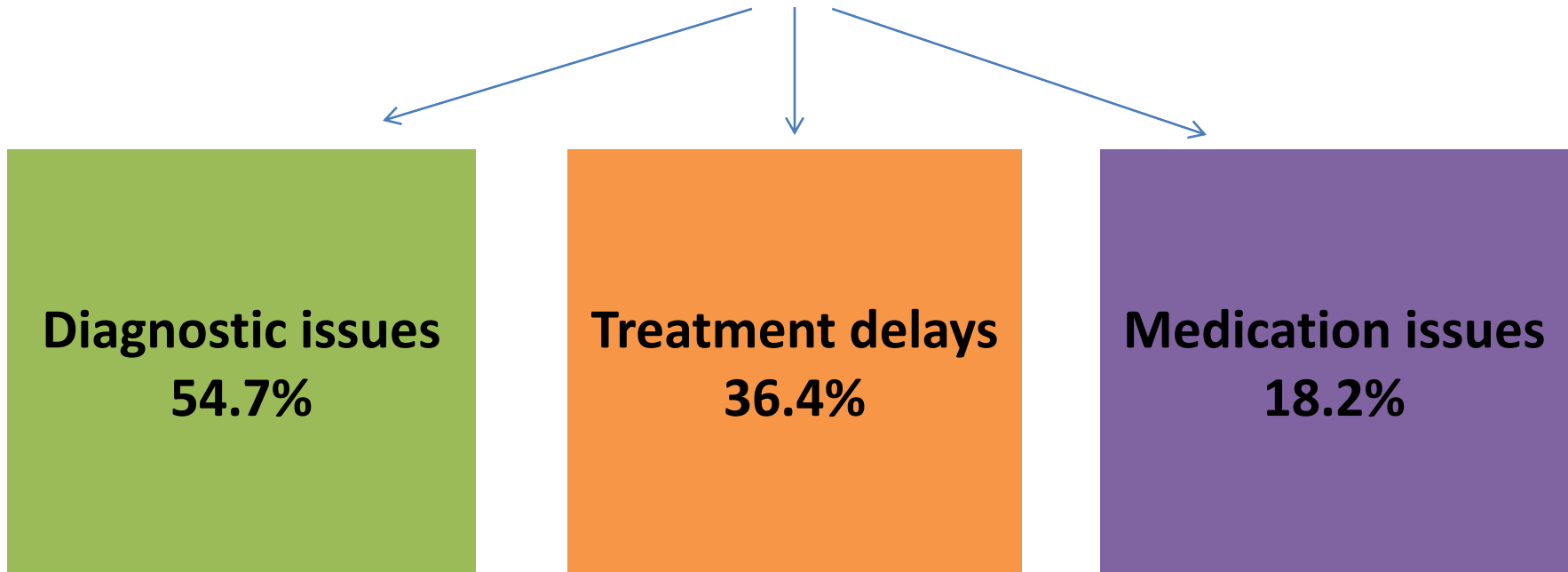
physician-physician most common interaction type

- Patient care team:
 - Family physicians
 - Emergency department physicians
 - Sub-specialties – internal medicine
 - Nurses



Results - Impact

suboptimal team communication



Missed/delays
diagnosis

Modifications to
treatment plan

Medication
reconciliation

Results - communication issues with patients & families

Informed consent

**Important and
timely information**

**Delivery of
information**



Limitations

- Physician members report medico-legal matters at their own discretion.
- Not all medico-legal cases are subject to review and analysis.
- Analysis is limited to the information available in the file; not all medical records were available for review.



Suboptimal communication & documentation was associated with:

- compromised teamwork across the continuum of care
- coordination of care problems
- missed/delay diagnosis and medication issues
- challenges for patients to actively participate in their care as a team member

increased the risk of harm for patients

Key message

Improving communication & documentation in chronic disease management may lead to:

- more integrated care
- reduced avoidable harm to patients
- reduced medico-legal risk for healthcare providers



CMPA educational focus

1. Integrating a truly collaborative care approach
 - clarified roles and responsibilities
 - understood by all team members, including patients
2. Using structured communications processes
 - helps to foster a culture of safety
3. Partnering with patients to make shared decisions
 - information exchange to support decision-making
 - strengthens provider-patient relationship by building trust



Thank you