



May Meeting Notes

- Looking towards what we can do in the Summer/Fall
- Everyone is currently distracted by Covid-19
- Biggest concerns are related to finances, patient safety & diagnosis is still a concern, but it is lower on the list as hospitals are figuring out how to survive financially
- One thing that was mentioned around the rapid changes with COVID-19 and patient safety is the use of telemedicine/telehealth
 - How does this affect the experience and relationship between provider and patient and what is the interface during the diagnostic process?
 - What does communication look like during this process, are their mixed messages that can come from these visits?
 - What is possibly missed diagnostically when going to a virtual visit?
 - Can we write or source someone to write a blog post about diagnosis and telehealth?

Next steps

- Io to talk with SIDM workgroup to see if there is any research into or about the diagnostic pitfalls of virtual visits and what can be done to mitigate them
- Kinsey & Steve to research the Patientsafetymovement.org and Washington Post Acute Long-term care website for potential content we can promote
- Set up meeting with RLDatix to discuss integrating diagnostic error categories into their risk management software. Coordinate with SIDM.
- Begin thinking about what we can possibly offer as far as educational content for the Fall (reconnect with KP regarding Surenet?)