

Karen Wolk Feinstein: We need a National Patient Safety Board

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Within hours of the catastrophic Fern Hollow bridge collapse in Pittsburgh, the National Transportation Safety Board was on the scene, finding answers to "Why?" and "How can we keep this from ever happening again?" What could be more obvious than the value of having a team of experts on the alert — and empowered with the authority — to provide promising solutions to dangerous situations?

Transportation industries embrace NTSB recommendations because they know what its corporate mission and obligation to the public is: to get people from place to place as efficiently and safely as possible.

Sadly, we cannot say the same for health care.

We have no single federal agency entrusted with a sole mission: to make health care as safe as possible by investigating solutions to major threats. Therefore, we have made comparatively little progress to protect patients from medical mistakes. We don't understand well enough the preconditions and root causes of adverse events, making it difficult to prevent harm before it happens; we haven't deployed the safety technology and analytics we have available; and we often don't share existing lessons learned or actionable solutions.

The idea of translating the NTSB model to health care has come up repeatedly. For over three decades, responsible organizations have called for such an entity. The pandemic has only underscored the need for a central entity that can respond rapidly, efficiently and intelligently with solutions in a crisis.

Our current hodgepodge of federal agencies, each with a fraction of the responsibility for patient and health care worker safety, did not serve us well during this pandemic and will not suffice once the pandemic has diminished.

Preventable medical error continues to be a significant cause of death in the U.S., with estimates in the hundreds of thousands each year. Early reports suggest that COVID-19 has made safety even worse.

That's why a coalition of experts, including leaders from hospitals, insurers, patient safety groups, consumer advocates, foundations, universities, technology companies and employers has formed to promote the establishment of an independent, nonpunitive federal agency dedicated to finding data-driven solutions to the problem of medical error. A National Patient Safety Board, modeled after the NTSB, would identify patient safety events, study the root causes of these events and issue recommendations to prevent future lapses.

More than 80% of the NTSB's recommendations are acted upon. Imagine if this occurred in health care: How many lives could be saved? How much needless suffering could be prevented?

It's fitting that the effort to create an NPSB is being led by voices in Pittsburgh. After all, this would not be our region's first effort to assemble stakeholders to improve health care safety. The Jewish Healthcare Foundation created the Pittsburgh Regional Health Initiative in 1998 as the first multi-stakeholder collaborative aimed at addressing medical errors.

But, over time, we recognized that our interventions put much of the burden of safety on the frontline of care. The NTSB doesn't focus primarily on changing the behavior of pilots, operators and drivers but rather on building a better airplane, better brakes, better airbags and better autopilot.

A National Patient Safety Board, likewise, could develop new technologies and autonomous interventions to assist clinicians in making health care safer.

Our region has the potential to be a global center for patient safety technology and research. Pittsburgh is an epicenter of innovation in autonomous transportation systems, and we could harness the vast resources in artificial intelligence and machine learning, advanced informatics, predictive analytics, clinical care and life sciences innovation to become a global leader in autonomous health care safety technology.

Like the many players in the transportation industry did decades ago, health care stakeholders should rally now — with the growing morale and mistrust issues among workers and patients — to promote a missing link in our health care safety landscape: a National Patient Safety Board. We can and should be responding to repeated health care safety tragedies with the speed and urgency of the NTSB when the Fern Hollow Bridge collapsed.

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