Smith K et al, 2023 Improving Diagnostic Safety through Integrated Care. *International Journal of Integrated Care* 23(S1):534 DOI: doi.org/10.5335/ijic.ICIC23534

POSTER ABSTRACT

Improving Diagnostic Safety through Integrated Care

23rd International Conference on Integrated Care, Antwerp, Flanders, 22-24 May 2023

Kelly Smith[1], Helen Haskell[3], Traber Davis Giardina[4], Mary Hill[1], Christopher Washington[5], Kristen E. Miller[5]

1: Michael Garron Hospital, Toronto, Ontario, Canada
2: University of Toronto, Toronto, Ontario, Canada
3: Mothers Against Medical Errors, United States of America
4: Baylor College of MedicineHouston, Texas, United States of America
5: MedStar National Center for Human Factors in Healthcare, Hyattsville, Maryland, United States of America

Introduction: Diagnostic errors in care are a global public health challenge. Published rates of diagnostic errors range from approximately 5% in ambulatory care settings up to about 10% of in-hospital stays and it is estimated that every person in their lifetime will experience a diagnostic error. The wicked problem of diagnostic errors is multifactorial with failures occurring at every point of entry to the system. Integrated systems of care provide an important opportunity for studying and codesigning solutions to diagnostic errors and are uniquely positioned to address the gaps in access and care delivery that lead to diagnostic errors.

In this workshop, we will explore the challenges of diagnostic error and the promise of diagnostic safety solutions along the nine pillars of integrated care.

Audience: Patients, patient advocates, caregivers, clinicians, health systems leaders, policymakers, and payers.

Learning Objectives: By the end of the workshop, participants will be able to:

1.Describe diagnostic errors within the context of an integrated healthcare system.

2.Discuss unique opportunities for integrated healthcare systems to mitigate diagnostic errors and promote diagnostic safety.

3.Align opportunities to improve diagnostic safety along each of the nine pillars of integrated care.

Workshop Approach: The workshop will include a mix of short theory bursts and small working groups. Theory bursts will level-set on the current state of the science of diagnostic errors and strategies to improve diagnosis while working groups have the goal of ascribing challenges and opportunities for improving diagnostic safety along the diagnostic continuum. The workshop will employ engagement and learning strategies including interactive polls, briefing and debriefing, hands-on deliberative practice, and small group facilitation. Information co-created by workshop participants will be captured using web-enabled and live brainstorming tools.

Workshop Agenda:

1.10 minutes: Introduction and review agenda; Online interactive session of who is in the room.

2.10 minutes: Theory Burst – What we know about diagnostic errors and an introduction to the diagnostic error sociotechnical system.

3.5 minutes: Introduction to the brainstorming approaches and technology

4.45 Minutes: Small Group Break Outs (each group will address one pillar in each session)

a.Session 1: Pillars 1-3

b.Session 2: Pillars 4-6

c.Session 3: Pillars 7-9

5.15-Minute Debrief: Review of information generated by different small groups along the nine principles of integrated care; Opportunity for participants from other groups to contribute to the other session's responses

6.5 minutes: wrap up and next steps

Lessons Learned: Take-home messages will be summarized by expert faculty using online polling and word cloud codesign by participants and through the co-created brainstorming outcomes. Participants will be invited to contribute to a white paper from the workshop.