

Metrics guidance

COMMUNICATION, APOLOGY AND RESOLUTION (CARe)

As with all quality and safety programs, CARe benefits from measuring progress through metrics and reporting and analyzing those metrics in useful ways. Below are several ways of measuring your CARe program that can support its longevity and effectiveness.

INTERNAL METRICS – TRACKED INTERNALLY IN PATIENT SAFETY/QUALITY

It is suggested that process measures are tracked for individual cases on a regular basis (weekly is a best practice) to ensure that the CARe team is working together to achieve as timely a resolution as possible and that patients and families are kept informed. Having a tracking sheet or database is essential to keeping all case information up-to-date and shareable among team members. See sample [here](#).

Process measures for individual cases

- Demographics
- Dates of occurrence and report
- CARe criteria met
- Disclosure/Initial Communication (including dates if applicable)
- Touchpoints with patient/family (including dates if applicable)
- Bill holds/Service Recovery
- Internal decisions around standard of care and causation
- Patient/family given information regarding attorneys
- Providers given information regarding peer support (internal and/or external services)
- Resolution conversation
 - Date, Outcome, Notes
- Resolution status
 - Algorithm outcomes
 - Cases lost to follow-up
 - Insurer referral
- Other process measures facility chooses to track

Compensation metrics for individual cases

- Amount of bill waiver
- Amount of CARe Support
- Amount of resolution compensation

Involved patient and provider responses

- Patient/family survey post-resolution
- Provider survey post-resolution
- Usage of Peer Support program for adverse events

INTERNAL AGGREGATE METRICS – TRACKED BY PATIENT SAFETY/QUALITY AND REPORTED TO FACILITY BOARD

These metrics can be included in a standardized board report that is presented at a regular interval of your choosing. Using a template of metrics that is updated regularly integrates them into the reporting structure and helps the expectations of the CARe program to be solidified at high levels to encourage the long-term sustainability of CARe.

- Total number of reported events in Patient Safety Reporting System
- Total number of reported complaints/concerns in Patient Feedback Reporting System
- Total number of potential CARe cases (CARe criteria met)
- Total number of cases resolved internally
- Total number of cases resolved referred to insurer
- Total number of cases resolved with CARe Support and/or bill waiver
- Total number of cases resolved with compensation through insurer
- Total number of cases that were resolved with attorney involvement
- Total number of cases that were not able to be resolved through CARe and their outcomes
- Specific cases examples/anecdotes

EXTERNALLY REPORTED METRICS – TO A COLLABORATIVE AND/OR SYSTEM NETWORK FOR EXTERNAL BENCHMARKING

- Total number of potential CARe cases (CARe criteria met)
- Total number of cases resolved internally
- Total number of cases resolved referred to insurer
- Total number of cases resolved with CARe Support and/or bill waiver
- Total number of cases resolved with compensation through insurer
- Total number of cases that were not able to be resolved through CARe and their outcomes