



E3 Medical Malpractice Litigation at the Policlinico Hospital of Bari (Southern Italy)

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After attending this presentation, attendees will be introduced to the concept of adverse outcomes and to the evaluation of claims and their consequent economic impact on the Sanitary System.

This presentation will impact the forensic science community by underlining the critical points in the organization of a Sanitary System and their costs and will propose strategies to reduce them.

From January 1, 2008 to December 31, 2009, the Policlinico Hospital of Bari (Southern Italy) received 49 claims for medical injury. During this period the total amount of the requests was 8,417,430 € (\$10,933,147.16), of which 6,080,875 € (\$7,898,266.01) pertained to the year 2008 and only 2,336,555 € (\$3,034,881.15) to 2009, therefore showing a significant decreasing trend. In this study the 49 claims were divided according to clinical areas and specialties; a subsequent internal analysis was performed to determine in each case the existence, or not, of the right to the compensation and at the same time the economic amount was estimated. As a result, against the total requested amount of 8,417,430 €, only 2,580,674 € (\$3,351,959.99) were considered justifiable payments, in detail, 1,336,330 € (\$1,735,718.93) for the year 2008 and 1,244,374 € (\$1,616,280.04) for 2009.

An estimation of claims distribution for each medical branch was also performed. The largest number of claims (seven) was filed against the Department of Ophthalmology; however, in only two cases were medical errors found. The other specialties in which a large number of

claims identified were orthopedics, surgery, and emergency medicine. Even if this data is in agreement with previous studies in this field, comparing them to the national and international results, reveals that, Policlinico Hospital received a smaller number of claims, in relation with the number of provided services and to the weight of Diagnosis Related Group (DRG), but, at the same time, the requested compensation for every single of them was, on the average, higher than what was generally observed in the other reports.

In the light of all obtained results and to reduce risk, the decision was made to find strategies to expedite compensation payments in those cases in which the liability was unequivocal, with particular reference to injuries related to blood or hemoderivate transfusions, in which – according to the current regulations – the doctrine of *res ipsa loquitur* can be applied.

Overall, only a small proportion of the claims (about one-third of the total) were not attributable to a diagnostic or therapeutic error. In some of these cases, in consideration of the Italian normative system, compensation was paid anyway in order to avoid the eventuality of a litigation because of gaps noticed in the compilation of the medical records or in the creation of the informed consent forms. This is the reason why the Policlinico Hospital has put specific training and checking courses into practice. On the other hand, in the specialties in which a higher number of errors were detected, auditing methodology was applied. Audits were conducted with systematic reviews of the diagnostic and therapeutic pathways for each specific clinical area and this has allowed the rationalization of these processes and, at the same time, has guaranteed a better cohesion with standards of quality and excellence in medical practice.

The introduction of these preliminary procedures has resulted in a reduction in insurance premiums.

Medical Professional Liability, Clinical Risk Management, Insurance Aspects