PHYSICIANS | CLINICS | HOSPITALS | HEALTH SYSTEMS

Risk Report

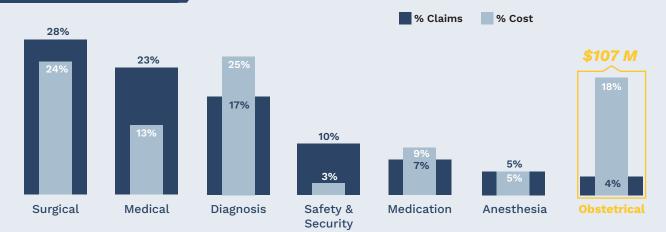
CONSTELLATION IS NOW CURI MMIC® | UMIA® | ARKANSAS MUTUAL | MPIE



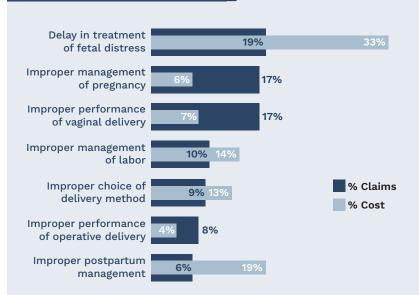
Reducing Obstetrical Harm Events

In an analysis of our medical professional liability (MPL) claims*, obstetric (OB) claims are third in total incurred cost at \$107 million despite representing only 4% of all claims. OB claims involve a mother and/or fetus/newborn and occur during the prenatal period of a pregnancy or after delivery.

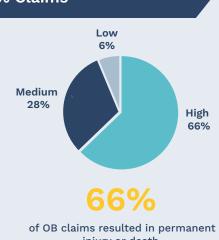
Top Allegations Triggering All Claims



Top Allegations Triggering Obstetrical Claims



Injury Severity % Claims



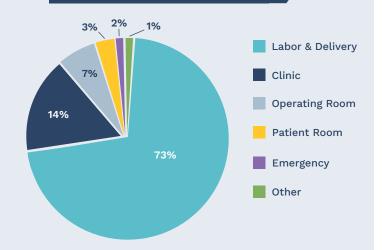
injury or death.

of delay in treatment of fetal distress claims resulted in permanent injury or death.

Top Clinicians Responsible for Care

Obstetrics 37% 70% Family Medicine 20% 42% Nursing 2% 6% Midwifery 1% % Claims % Cost

Top Locations % Claims



Did you know?

45% of OB claims involved a secondary responsible clinician. Almost half of those claims involved nursing and an alleged delay in recognition and treatment of fetal distress. This highlights a gap in fetal monitoring and team communication skills. Our customers have access to teamwork, communication, and fetal monitoring on-demand webinar education at no cost.

Allegations Against **Obstetricians**

Allegations against obstetricians represent

70%

of claims and

37% of **cost** Obstetrician claims
were more about improper
performance of vaginal delivery
and technical skill.

Allegations Against **Family Medicine**

Allegations against family medicine represent

Family medicine claims
were more about recognition
and treatment of fetal distress,
and 55% of these claims involve
the failure/delay in obtaining a
consult/referral.

20%

of claims and

42% of **cost**

Snapshot of Obstetrical Claims



of claims are associated with patient assessment issues



of family medicine OB costs involve a delay in treatment of fetal distress



of claims involve communication breakdowns among the care team and with patients



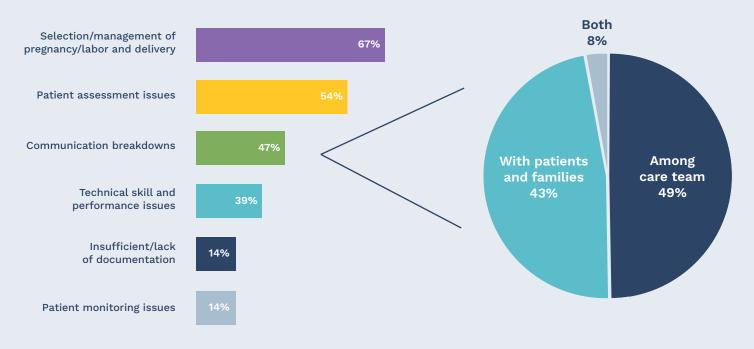
of claims involve high risk pregnancies



of costs involve a failure to recognize and treat fetal distress

Contributing Factors** % Claims

Communication Breakdowns



^{**}These factors contribute to harm/malpractice claims and are amenable to risk mitigation strategies. A single harm event may involve multiple contributing factors.

What You Can Do To Reduce Obstetrical Harm Events

LEARN about the allegations and factors contributing to OB patient harm

ASSESS your organization's risk using our assessment tools

IMPROVE nursing team member assessment and fetal monitoring skills

Optimize communication and teamwork processes among clinicians and nursing teams

IMPLEMENT clinical decision support systems, algorithms and tools to support perinatal care

