



Legislation Text

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Proposed Res. No. 1087-A

Resolution calling on the New York State Department of Health to conduct regular reviews of NYPORTS data, and to require hospitals to retroactively fill in missing data

By Council Members Schulman, Gutiérrez, Narcisse and Louis

Whereas, In hospital settings, an adverse event or patient occurrence refers to an unintended and undesirable development in an individual patient's condition that was not caused by the natural course of illness, disease, or proper treatment; and

Whereas, A study on patient safety conducted by Harvard on patients admitted to Massachusetts hospitals in 2018 found that preventable adverse events occurred in 6.8 percent of all hospital admissions; and

Whereas, An analysis done by the U.S. Department of Health and Human Services on a sample of Medicare patients in 2018 found that a quarter of Medicare patients experience adverse events during their hospital stays, and 43 percent of these events were preventable; and

Whereas, In 1998, the New York State Department of Health (DOH) developed a system for reporting and tracking adverse medical events that occur in hospitals or diagnostic and treatment centers known as the New York Patient Occurrence and Tracking System (NYPORTS); and

Whereas, DOH, in a 2001 report, described widespread NYPORTS reporting disparities, particularly in the New York City area, and they concluded that it was due to an enormous underreporting of adverse events at the individual hospital level; and

Whereas, In 2006, New York City hospitals reported only 38.9 adverse occurrences per 10,000 discharges compared to 69.6 and 63.7 adverse occurrences per 10,000 reported north of the city and on Long Island respectively; and

Whereas, A 2009 audit by the New York State Comptroller's Office of NYPORTS found that 84 percent of the deaths and more serious occurrences that were supposed to be reported within 24 hours were reported late, contributing to the incompleteness of the data; and

Whereas, The 2009 audit also found that errors relating to the administration of medication are particularly underreported by New York City hospitals; and

Whereas, In the absence of complete reporting, local hospital performance cannot be accurately evaluated along the lines of patient safety which, in turn, makes determining shortcomings and improving hospital quality more difficult; and

Whereas, Adverse events in hospitals result in high financial costs, with the exact amount being difficult to estimate in the aggregate without accurate reporting; and

Whereas, An audit or review of, or a report on NYPORTS data for which findings are publicly available has not been conducted since the 2009 New York State Comptroller's audit; and

Whereas, Requiring DOH to conduct regular reviews would help identify underreporting facilities and underreported incident types; now, therefore, be it

Resolved, That the Council of the City of New York calls upon the New York State Department of Health to conduct regular reviews of NYPORTS data, and to require hospitals to retroactively fill in missing data.

JC/JN
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