FEB 13 2002
HUMAN RESOURCES

HOUSE FILE 2295
BY FORD

Passed House, Date ____________ Passed Senate, Date ____________
Vote: Ayes ______ Nays _______ Vote: Ayes ______ Nays ________
Approved ______________________________

A BILL FOR

1 An Act relating to a research initiative to address medical
2 errors.
3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
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1 Section 1. PATIENT SAFETY INITIATIVE -- MEDICAL ERRORS.
2 1. If federal funding is received, the Iowa department of
3 public health shall establish an initiative to address patient
4 safety through the identification of medical errors.
5 2. The focus of the initiative shall be the development of
6 a medical error reporting system that motivates health care
7 providers to report medical errors and that maintains
8 information reported in a systematic way that is useful to
9 health care providers. The reporting system should provide
10 that data collected is used to identify and address the
11 underlying systemic causes of medical errors, detect system
12 weaknesses, and prevent the occurrence of future errors.
13 3. The initiative shall emphasize the use of reported
14 medical errors not as a basis for blame and liability, but as
15 a basis for system improvement and prevention of future
16 errors. The system should encourage health care providers to
17 equate the reporting of medical errors with the protection of
18 patient safety through prevention of avoidable error, rather
19 than encourage nonreporting as a means of avoiding legal
20 liability. The initiative may utilize exclusive enterprise
21 liability, no-fault compensation, no-fault liability, or
22 liability limitations to protect health care providers who
23 report medical errors that result only in a no-harm event or a
24 near miss as means of eliminating the adversarial quality of
25 the current liability system. The initiative shall not apply
26 to medical errors that involve actions or omissions that
27 constitute negligence, recklessness, or intentional
28 misconduct.
29 4. For the purpose of this Act:
30 a. "Medical error" means a failure of a planned action to
31 be completed as intended or the use of a wrong action to
32 achieve an aim. "Medical error" may include a problem in
33 practice, products, procedures, or systems.
34 b. "Near miss" means an event in which the unwanted
35 consequences were prevented through recovery by identification

1 and correction of the failure.
2 c. "No-harm event" means an event that has occurred but
3 resulted in no actual harm although the potential for harm may
4 be present.
5 EXPLANATION
6 This bill directs the Iowa department of public health to
7 establish an initiative to address patient safety through the
8 identification of medical errors if federal funding is
9 received. The focus of the initiative is the development of a
10 medical error reporting system that motivates health care
11 providers to report medical errors and that maintains
12 information reported in a systematic way that is useful to
13 health care providers. The reporting system should provide
14 that data collected is used to identify and address the
15 underlying systemic causes of medical errors, detect system
16 weaknesses, and prevent the occurrence of future errors. The
17 emphasis of the initiative is the use of reported medical
18 errors not as a basis for blame and liability, but as a basis
19 for system improvement and prevention of future errors. The
20 bill provides that the initiative may utilize exclusive
21 enterprise liability, no-fault compensation, no-fault
22 liability, or liability limitations to protect health care
23 providers who report medical errors that result in a no-harm
24 event or a near miss as means of eliminating the adversarial
25 quality of the current liability system. The initiative is
26 not to apply to medical errors that involve actions or
27 omissions that constitute negligence, recklessness, or
28 intentional misconduct.
29 The bill defines "medical error", "near miss", and "no-harm
30 event".
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