

Enhancing our Practice of Respect after Loss

Standardizing Communication of Autopsy Results to Families & Loved Ones

Our Challenge

BIDMC’s current post-death process is prone to errors that cause harm to families and contribute to suboptimal workflows for BIDMC staff and health care professionals. Not surprisingly, because of this complexity, the process is unreliable, and not infrequently, these errors impact bereaved family members, and fail to meet our standards of respect and dignity. A Failure Modes and Effects Analysis (FMEA) revealed that initiating a process for communication of autopsy results was a high priority opportunity.

Our Goal

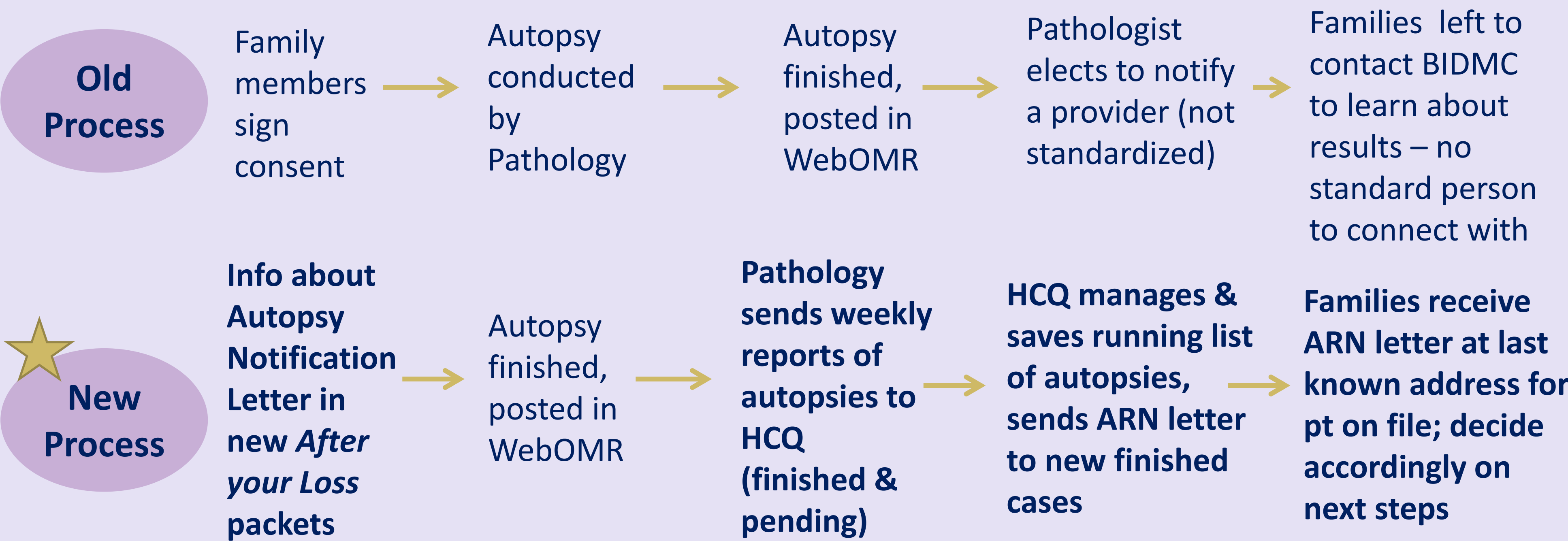
Initiate an Autopsy Results Management System that standardizes notification of autopsy results to family members once reports are finalized.

Our Team

- Andrea J. Branchaud, MPH | Healthcare Quality
- Patricia Folcarelli, RN, PhD | Healthcare Quality
- Jonathan Hecht, MD | Pathology
- Patient Relations Department
- Debbie Ribaya | Pathology
- Lauge Sokol-Hessner, MD | Healthcare Quality
- Julius Yang, MD, PhD | Healthcare Quality, Medicine

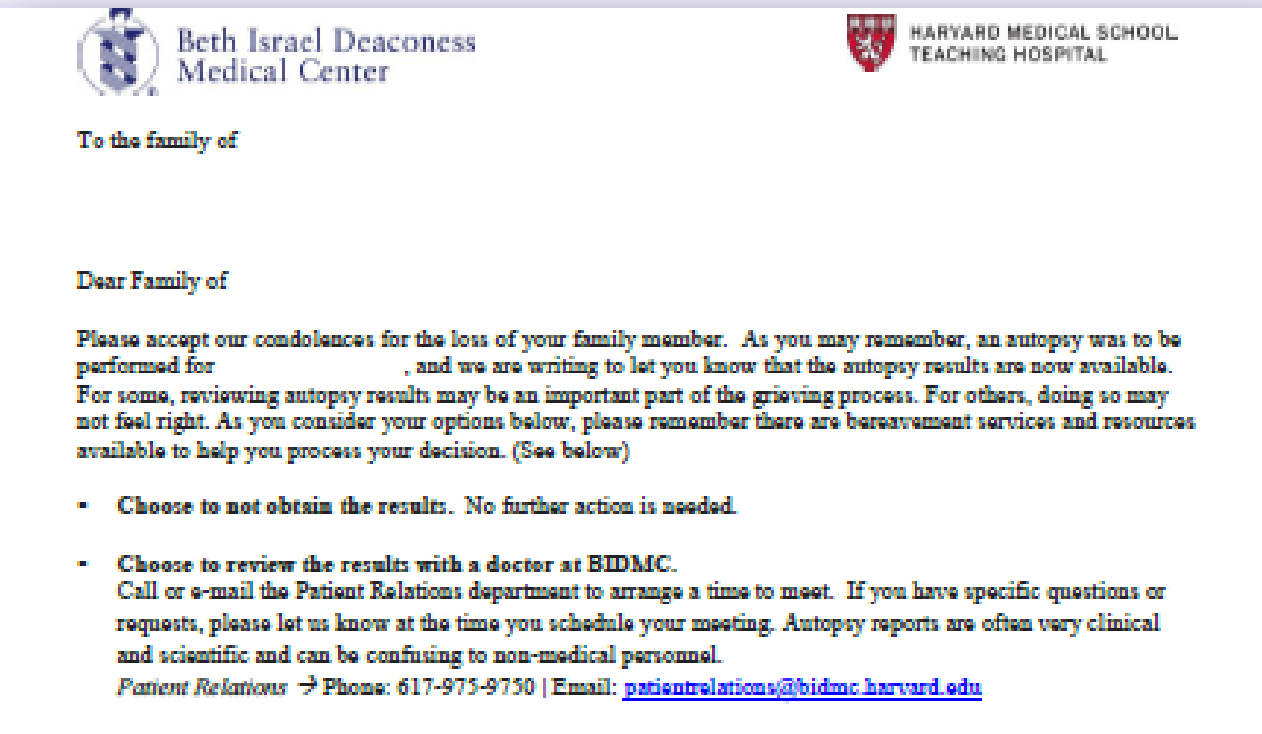
Our Intervention

Enhancing the Quality of our Process

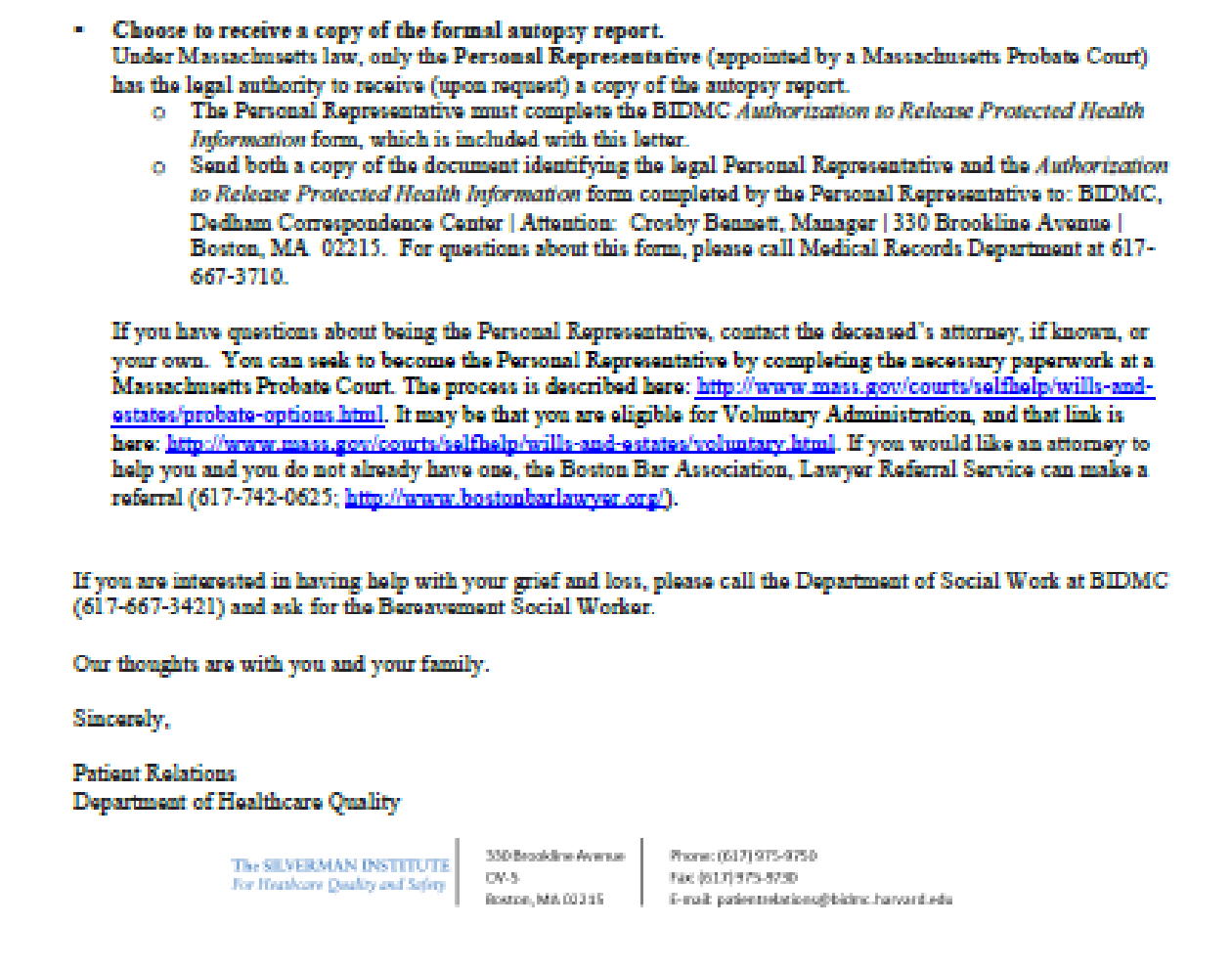


Our Intervention, cont’d

Letter to Family Member notifying results are ready, sent “to the family of” patient’s name



Reinforces options for learning results (including to do nothing at all), includes contact information for grief support, resources available for various questions after autopsy



Progress and Learning

Project Start Date - all completions as of: 4/3/17		Data up to 2/5/18	
Total # of Cases in Project Window to Date			
	85		
	#	%	Notes
Adult Autopsies	71		
> Adult Autopsies - Pending	9	13%	
> Adult Autopsies - Completed	62	87%	
Adult Autopsies - Letters Sent	53	85%	
Letters Returned	7	13%	
Comments Received (Patient Relations, other)	4	8%	Family members calling patient relations communicate they appreciated receiving a letter and found information helpful; PR coordinating meetings and needed information about date letter sent
Adult Autopsies - Letters Not Sent	9	15%	
Reason 1	8	89%	Note in OMR that provider/pr already had conversation with family re: results.
Reason #2: No address on file	1	11%	Transfer from Needham, no information in OMR.
IUFD/Neonate Autopsies	14		
> IUFD Autopsies - Pending	4	29%	
> IUFD Autopsies - Completed	10	71%	
IUFD Autopsies - Letters Sent	0		
IUFD Autopsies - Letters Not Sent	10	100%	Letters intentionally not sent until requested by ObGyn/NICU Department team members.

Next Steps

- Continue sending letters; Review system for measuring impact; determine efficient way for Patient Relations & Care Providers to be aware if/when letters sent

For more information, contact Andrea Branchaud: abrancha@bidmc.harvard.edu