

THE PUBLIC'S VIEWS ON MEDICAL ERROR IN MASSACHUSETTS

Harvard School of Public Health

Commissioned by

Betsy Lehman Center for Patient
Safety and Medical Error Reduction

Health Policy Commission



December 2014

THE PUBLIC'S VIEWS ON MEDICAL ERROR IN MASSACHUSETTS

Introduction

This year marks the twentieth anniversary of the tragic death of Betsy Lehman, a health care reporter for the *Boston Globe*. She died from a medical error during her hospital treatment in Massachusetts. This event, with the resultant public discussion, is seen as one of the galvanizing forces that led both statewide and national groups to examine the issue of patient safety and subsequently to calls for major health professional and public policy actions to reduce the incidence of preventable medical errors. A report by the Institute of Medicine presented evidence of thousands of lives lost each year, the resulting human suffering, and substantial health care costs resulting from these lapses in appropriate patient safety practices.¹

Health professionals, institutional leaders, and public officials deeply concerned with improving patient safety in Massachusetts were aided by substantial media and public concern with the issue.

Two decades later, there have been many changes aimed at improving patient safety, including new professional oversight and training programs, health system information improvements, strengthened guidelines, increased government regulatory activity, and patient education efforts. Yet preventable medical error remains a leading cause of death and injury in Massachusetts and across the nation.

Betsy Lehman Center for Patient Safety and Medical Error Reduction was recently reestablished through legislation aimed at improving healthcare quality and lowering costs in Massachusetts through transparency, efficiency and innovation. In its startup year, the Center has undertaken a program of research aimed at understanding the current state of patient safety in Massachusetts—what has changed in over the past two decades since Betsy Lehman's death, what are today's most critical threats to patient safety, and where are the opportunities for meaningful progress on reducing medical harm in the Commonwealth through policy change and other initiatives.

The Center has commissioned several independent studies to help answer these questions. In partnership with the Health Policy Commission, whose mandate also includes quality improvement and cost reduction, the Center asked us to survey the Massachusetts public to assess its awareness, attitudes, and behaviors related to patient safety. It is important to know how those who live in the Commonwealth feel about these issues because the public's views can be an important element in garnering support for increased health professional and statewide public policy actions.

We examine this issue using poll results from a recent Massachusetts survey focused on six issues. (1) What have been Massachusetts residents' real-life experiences with patient safety/medical error issues over the past five years? (2) Did people who experienced a medical error report the error to someone else, as has been suggested they should do in many expert

¹ Institute of Medicine, Committee on Quality of Health Care; Kohn LT, Corrigan JM, eds., *To Err Is Human: Building a Safer Health System* (Washington DC: National Academy Press, 2000).

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reports? (3) Does the public seek information about patient safety and quality of care performance when choosing a hospital or physician for their care? (4) Do patients pay attention to safety concerns when they make decisions on where they will be hospitalized? (5) What are the public's current attitudes about the seriousness of patient safety/medical error problems in Massachusetts today? (6) Does the public support greater state government activities to improve patient safety and reduce medical errors in the future?

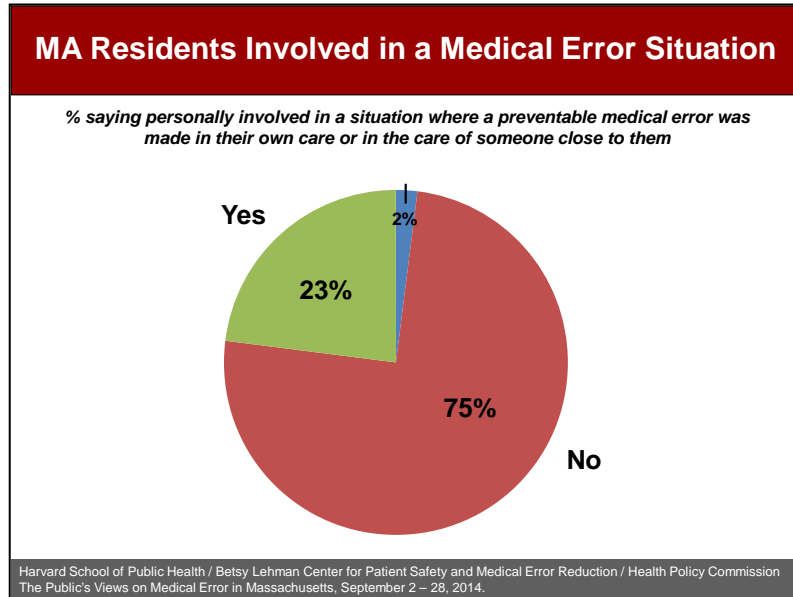
These questions are examined using data from a statewide public opinion poll conducted by telephone (landline and cell phone) September 2 – 28, 2014, with 1,224 Massachusetts adults.

I. What have been Massachusetts residents' real-life experiences with patient safety/medical error issues over the past five years?

In this era of heightened concern about improving patient safety outcomes, the poll finds nearly one in four Massachusetts adults (23%) reporting that they have personally been involved in a medical error situation in the past five years. This includes those who believe that a preventable medical error was made in their own care or in the care of someone close to them where they were very familiar with the care that person was receiving. Findings from previous studies have shown a substantial proportion of patients in Massachusetts who experienced medical errors while hospitalized.²

“Medical errors” were defined to poll respondents:

“Sometimes when people receive medical care, mistakes are made. These mistakes sometimes result in no harm; sometimes, they may result in additional or prolonged treatment, disability, or death. These types of mistakes are called medical errors.”

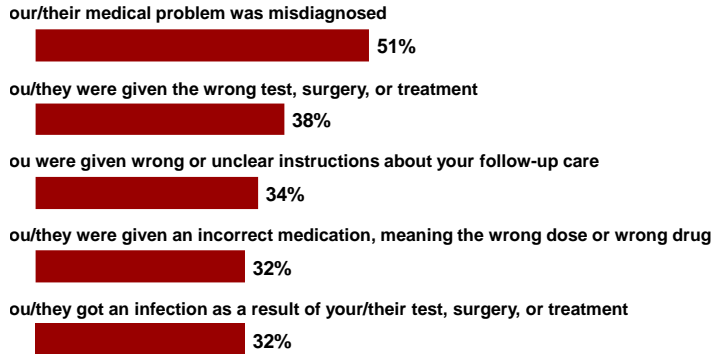


About half of those reporting these experiences (13% of total Massachusetts adults) said the medical error resulted in serious health consequences for the individual. Most of these medical errors (75%) occurred while the affected individuals were being treated at a hospital. Massachusetts residents believe that the more important cause of medical errors is mistakes made by individual physicians and nurses (52%) rather than by hospitals or clinics where they work (33%).

² Weissman JS, Schneider EC, Weingart SN, et al., “Comparing Patient-Reported Hospital Adverse Events with Medical Record Review: Do Patients Know Something That Hospitals Do Not?” *Annals of Internal Medicine* 2008;149(2):100-108.

Most Common Types of Medical Error Experienced by MA Residents

% saying...
(Among the 23% who said they or a person close to them experienced a medical error)



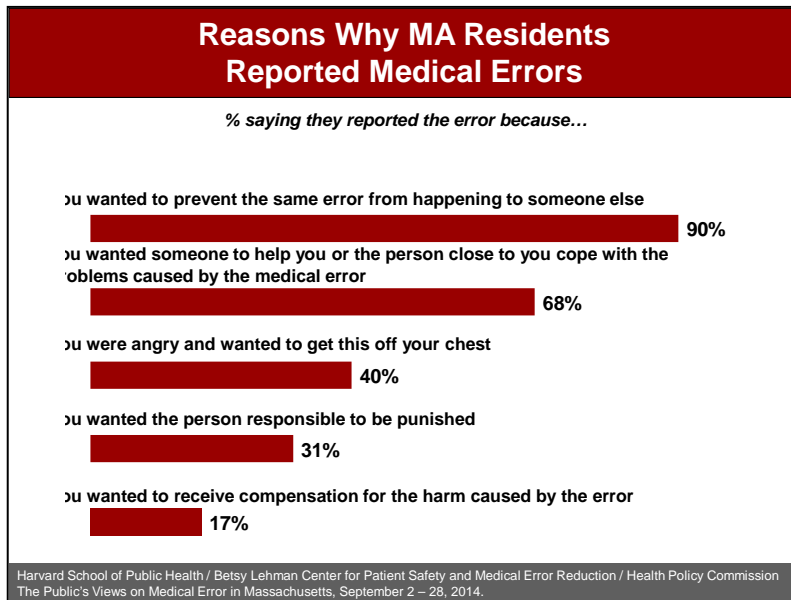
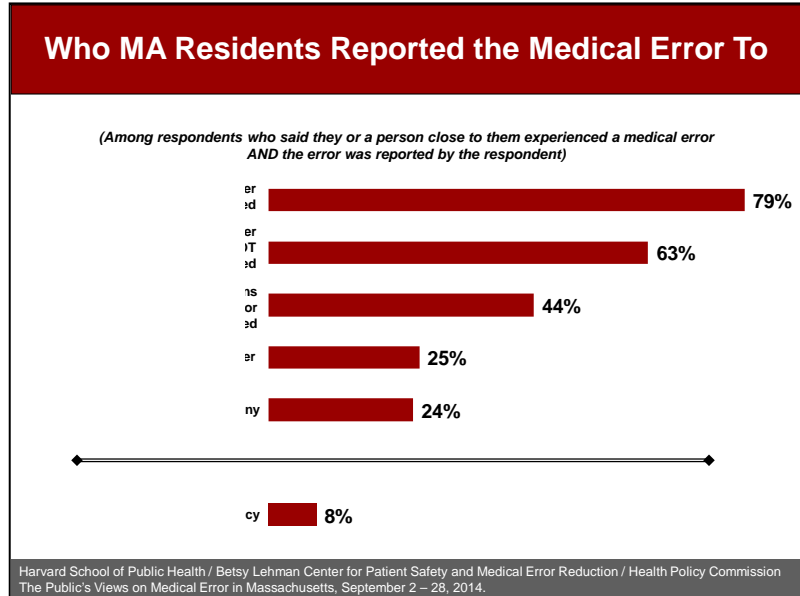
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The Public's Views on Medical Error in Massachusetts, September 2 – 28, 2014.

Women (27%) were more likely than men (19%) to report that they or a person close to them experienced a medical error.

The types of errors varied widely. The most common was a perceived misdiagnosis relating to their medical condition (51%).

II. Did people who experienced a medical error report the error to someone else?

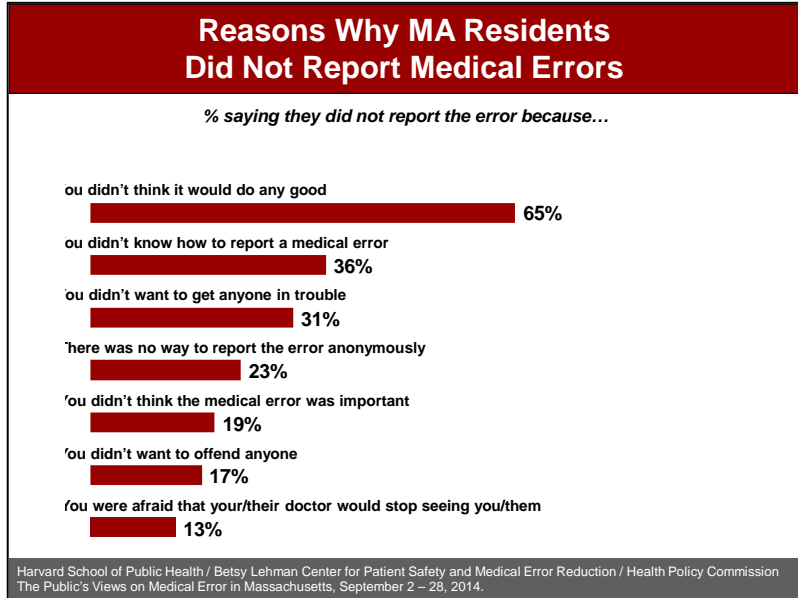
Numerous professional organizations have recommended that patients and/or their caregivers should report medical errors to those in responsible positions. Among those who said that they or a person close to them experienced a medical error in the last five years, 54% acknowledged that they or the person close to them reported the error to someone else, 37% did not, and 9% were not sure. The person or place to which the individual reported the patient safety error varied. The most common person or place was to a health professional where the error occurred (79%). The least frequently mentioned was to a government agency (8%). Individuals could report their concerns to more than one person or place.



An important question is why those with an experience chose to report or not to report the medical error to someone else. Those who said they reported the error offered a mix of reasons behind their decision. The most frequently mentioned was to prevent the same error from happening to someone else (90%). The least frequently mentioned was to receive financial compensation for the harm caused by the error (17%).

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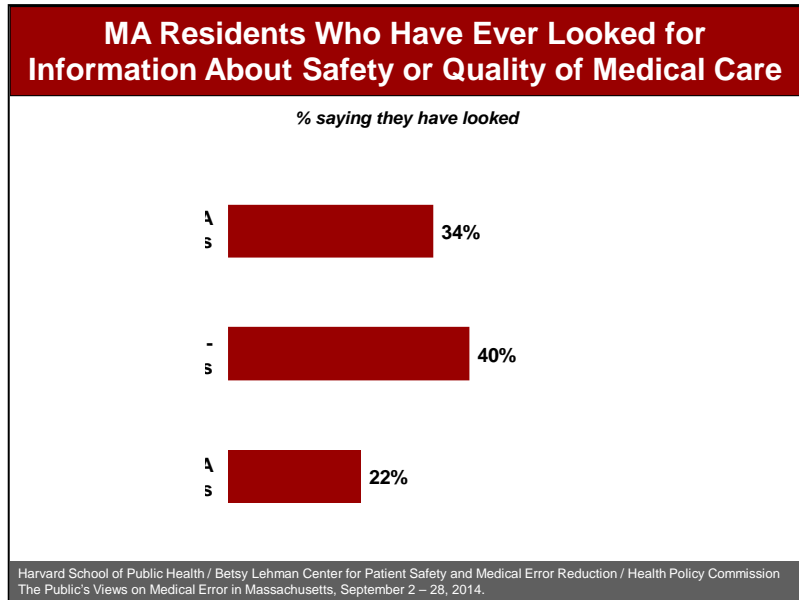
Reasons for not reporting the medical error also varied. The most common reason was they did not believe it would do any good (65%). The least frequently mentioned was fear that their physician would stop seeing them (13%). Of note, more than a third (36%) said they did not report the error because they did not know how to report it.



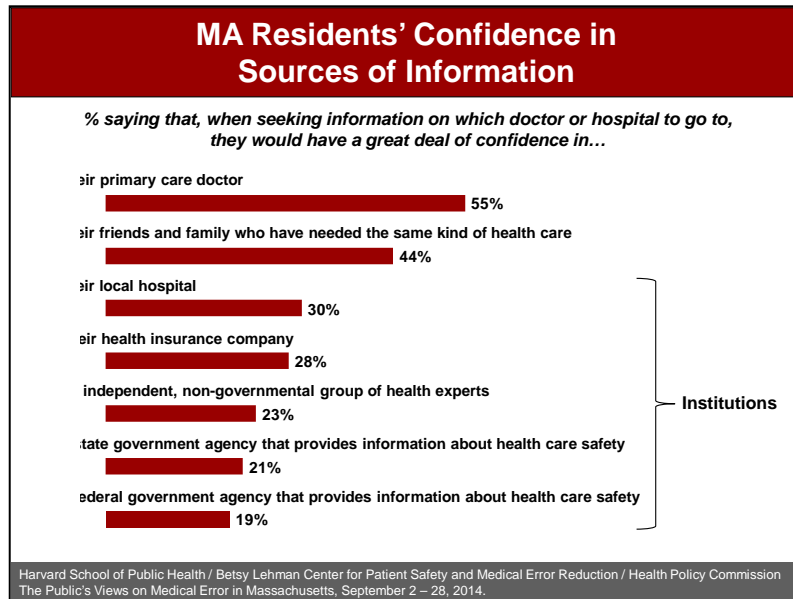
III. Does the public seek information about patient safety when choosing among hospitals or physicians for their care?

The answer is that the majority do not. The poll results show that most Massachusetts adults have never sought information about the safety or quality of medical care provided by physicians or hospitals in Massachusetts. About one-third of Massachusetts adults (34%) report having ever looked for such information, and most of those who have sought information have found it.

As one would expect, hospital-care users were nearly twice as likely as other Massachusetts adults (40% to 22%) to report having sought such information.



Most of those who sought information could find it. Massachusetts adults who had sought information reported the following: 63% said they found the information they were looking for, most of whom (90%) said it was from a source they thought they could trust; 95% said they were able to understand the information; and 87% said the information helped them make a decision about where to go to get health care.



Of those who had not sought information, when asked what they thought would happen if they did look for information, 67% said they thought the information would be difficult to find, and 64% said they thought the information would be difficult to understand.

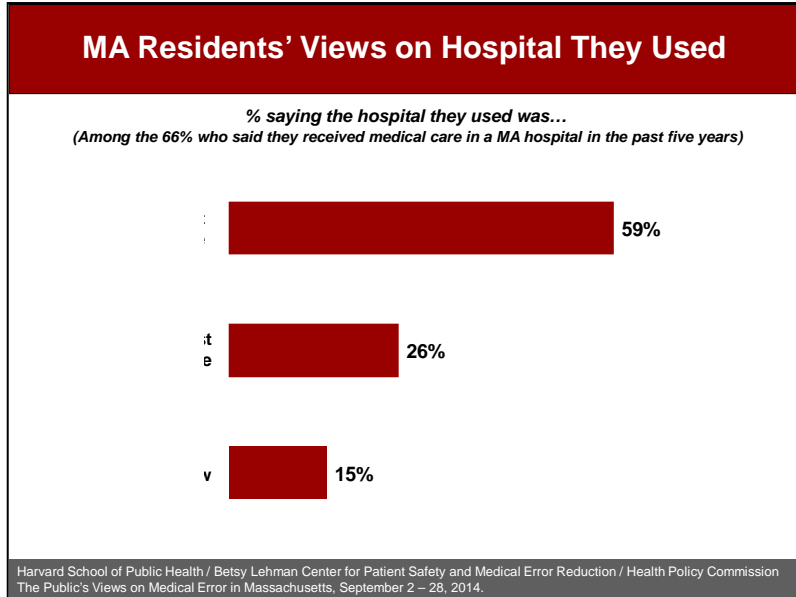
Where patient safety information comes from is important to how people evaluate it. If they were trying to make a decision about

which physician or hospital to go to, Massachusetts adults have more confidence in people they know personally than in institutions as sources of information.

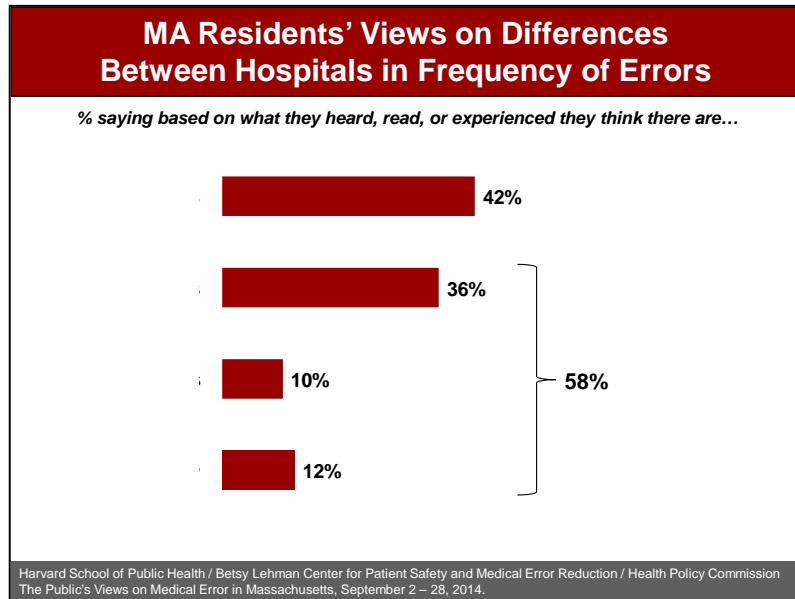
IV. Do patients pay attention to patient safety concerns when they make decisions on where they will be hospitalized?

As mentioned previously, most medical errors in Massachusetts that are recognized by the public occur in hospital settings. Over the past five years, about two-thirds (66%) of Massachusetts adults received care from a hospital either on an in-patient or an out-patient basis.

When it comes to selecting an institution for their care, most view their choice positively. A majority (59%) believe that the hospital they used was one of the best in the state. Only about one in four (26%) believe that it was rated less highly and was not one of the best. About one in seven (15%) were not sure about the hospital's overall quality of care.



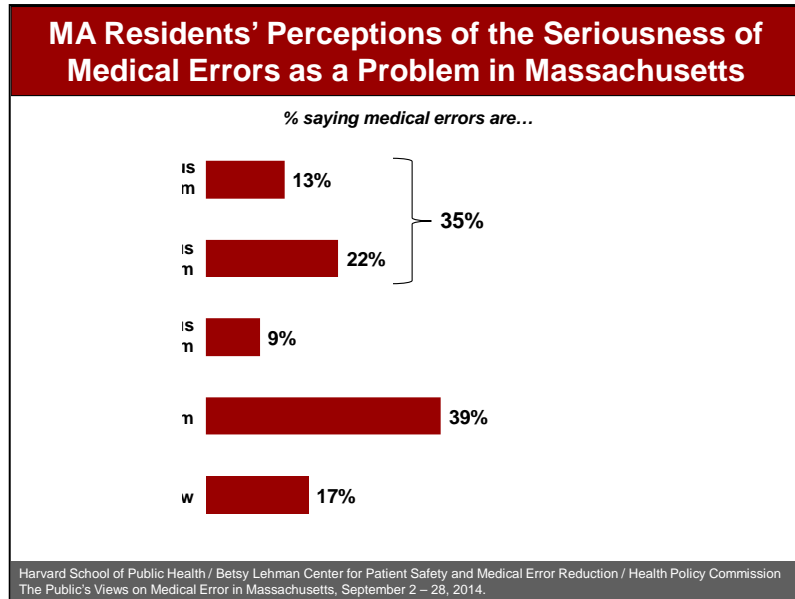
The public is divided over the issue of whether some institutions in Massachusetts make more or fewer errors. About four in ten (42%) residents of Massachusetts, and nearly half (47%) of those



who have received care from a hospital in the last five years, believe there are big differences between hospitals in the state when it comes to the frequency of medical errors. But a majority (58%) of Massachusetts residents see little or no difference between hospitals in the likelihood of medical errors occurring or are not sure if there are differences. Taken together, we see a mixed picture of whether the public sees variation in institutional behavior when it comes to protecting patients against medical errors. Some see

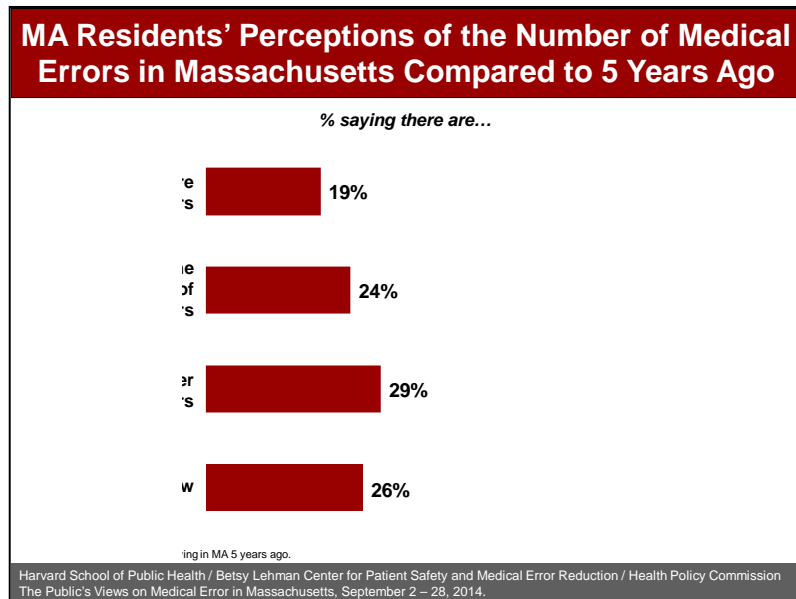
differences and believe they have chosen the better hospitals for care. Others do not see such differences and/or, for various reasons, do not choose the institutions with the strongest quality of care/patient safety record.

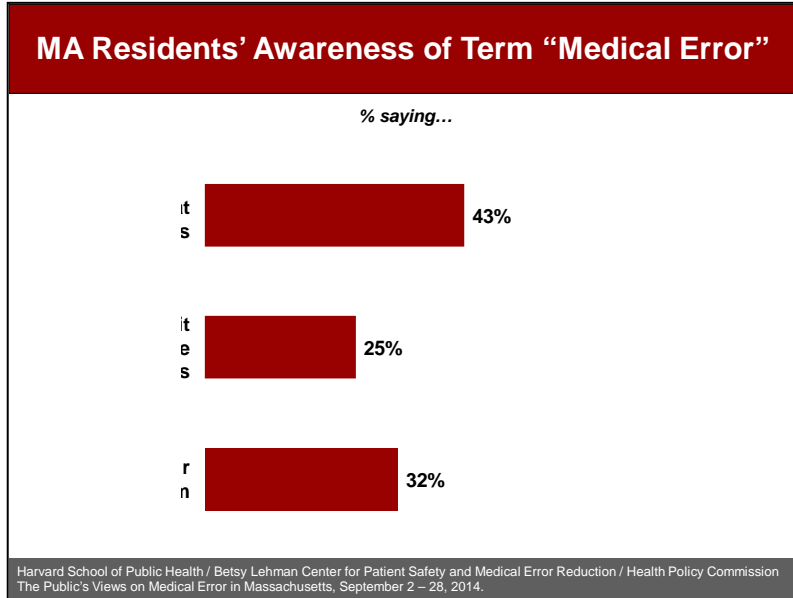
V. What are the public's current attitudes about the seriousness of patient safety/medical error problems in Massachusetts?



About a third of the public (35%) sees this issue as a serious problem today in the state. A majority (65%), however, does not see it as a serious concern or are not sure if it is.

Similarly, the public has no common view about whether the number of medical errors occurring with patients has been increasing or decreasing over the last five years. People's perceptions vary on whether progress has or has not been made on improving the state's patient safety record.



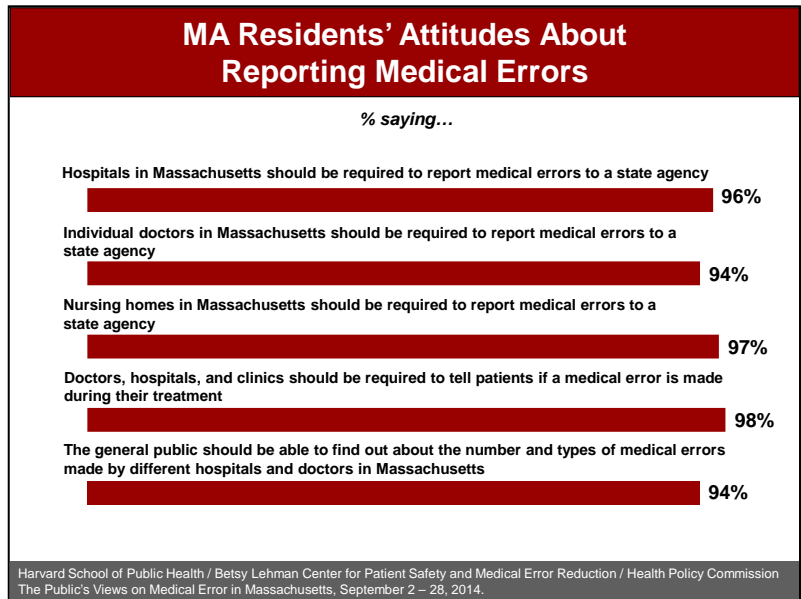


Part of this lack of clarity may relate to the confusion in some people's minds over the meaning of the term "medical error." This term is widely used by health professionals and policy experts, but before the term is defined for them it is not clearly understood by more than half (57%) of the state's population. In this survey, respondents clearly understood this concept when it was described to them. But the data suggest that the public may not be familiar with the term when it is discussed in the media.

VI. Does the public support greater state government activities to improve patient safety and reduce medical errors in the future?

The answer is a qualified "yes." The public overwhelmingly supports the principle of more transparency related to these issues. All aspects of the issue have support from nine out of ten Massachusetts residents. This is not only true for Massachusetts, but national surveys have shown the same level of public support for transparency.³

But the caveat is that this response is weakened by the fact that many Massachusetts residents may not see these policy option changes as very salient because of uncertainty about some of the terms and the seriousness of the problem for patients and for the Commonwealth today.



³ Brodie M, Hamel EC, Deane C, Connolly JM, "Quality of Care and Medical Errors," in Blendon RJ, Brodie M, Benson JM, Altman DE, *American Public Opinion and Health Care* (Washington, DC: CQ Press, 2011), Chapter 9.

Conclusion

Twenty years after the death of Betsy Lehman from a medical error, we find that this problem still exists, at least from the experiences of individual residents of the state. Nearly one in four have had a real-life experience with this issue in the last five years, and half label it as having serious health consequences. A third of the public now sees this issue as a serious problem for the Commonwealth.

But calls for public action remain clouded by a great deal of public uncertainty about terms relating to the issue, the actual aggregate seriousness of the problem, whether or not progress has been made, and even how to report a problem or obtain easy-to-use information to compare hospitals and physicians on a patient safety/quality of care basis.

Research in a number of areas suggests that public opinion plays a significant role in shaping the response of policy-makers on various issues.⁴ Were the general public better informed on these issues, we would likely see more citizen calls for action about this set of problems. If there were such an uptick in public discussion, it would lead to calls for more transparency by hospitals and physicians so individuals could feel better informed about the patient safety precautions taken by the health professionals and institutions from which they seek care. But this will require more public discussion and media attention in the years ahead.

⁴ Jacobs LR, Glynn CJ, Herbst S, O'Keefe GJ, Shapiro RY, Lindeman M, "Public Opinion and Policymaking," in Glynn CJ, Herbst S, O'Keefe GJ, Shapiro RY, Lindeman M, *Public Opinion*, 2nd edition (Boulder, CO: Westview Press: 2004), chapter 9.

Methodology

This survey was conducted by researchers at the Harvard Opinion Research Program (HORP) at the Harvard School of Public Health. The project director was Robert J. Blendon, Professor of Health Policy and Political Analysis and Executive Director of HORP. The research team also included John M. Benson, Research Scientist and Managing Director of HORP, Justin M. Sayde, Administrative and Research Manager, and Kirstin W. Scott, Research Fellow. HORP designed the survey in collaboration with the Betsy Lehman Center and the Health Policy Commission, and HORP was solely responsible for its analysis.

Interviews were conducted via telephone (including both landline and cell phone) by SSRS of Media (PA), September 2 – 28, 2014, among a representative sample of 1,224 Massachusetts adults age 18 and older. The interviews were conducted in English and Spanish. The margin of error for total respondents is +/- 4.0 percentage points at the 95% confidence level.

Possible sources of non-sampling error include non-response bias, as well as question wording and ordering effects. Non-response in telephone surveys produces some known biases in survey-derived estimates because participation tends to vary for different subgroups of the population. To compensate for these known biases and for variations in probability of selection within and across households, sample data are weighted by household size, cell phone/landline use and demographics (sex, age, race/ethnicity, education, and region) to reflect the true population. Other techniques, including random-digit dialing, replicate subsamples, and systematic respondent selection within households, are used to ensure that the sample is representative.

This report was commissioned by the Betsy Lehman Center for Patient Safety and Medical Error Reduction and the Health Policy Commission, both independent Massachusetts state agencies. The views expressed in this report are those of the authors and do not necessarily reflect those of either requesting organization.

HARVARD SCHOOL OF PUBLIC HEALTH

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I. The Problem of Medical Errors and Patient Safety

(Total respondents; n = 1,224)

1. How familiar are you with the term “medical error”? Do you know what this term means; have you heard of it, but are not sure what it means; or have you never heard of the term “medical error” before?

Know what this term means	43
Heard of it, but not sure what it means	25
Never heard of the term	32
Don't know/Refused	*

Sometimes when people receive medical care, mistakes are made. These mistakes sometimes result in no harm; sometimes, they may result in additional or prolonged treatment, disability, or death. These types of mistakes are called medical errors. I'd like to ask some questions about medical errors. If for any of these questions, you feel you haven't heard enough to have an opinion, just say so.

(Total respondents; n = 1,224)

2. How likely do you think it is that a medical error would occur when you receive health care—very likely, somewhat likely, not too likely, or not at all likely?

Very likely	11
Somewhat likely	30
Not too likely	44
Not at all likely	11
Don't know/Refused	4

(Total respondents; n = 1,224)

3. Generally speaking, do you think medical errors are a problem in Massachusetts, or not? (IF YES ASK:) Do you think they are a very serious problem, somewhat serious, or not too serious a problem?

Very serious problem	13
Somewhat serious problem	22
Not too serious problem	9
Not a problem	39
Don't know/Refused	17

(Total respondents; n = 1,224)

4. Do you think there are more, fewer, or about the same number of medical errors in Massachusetts these days as compared to 5 years ago?

More	19
Fewer	29
Same number	24
Wasn't living in Massachusetts 5 years ago (vol)	2
Don't know/Refused	26

(Total respondents; n = 1,224)

5. Which of the following do you think is the MORE important cause of medical errors that result in serious harm? Mistakes made by individual doctors or nurses, or mistakes made by the hospitals or clinics where they work?

Mistakes made by individual doctors or nurses	52
Mistakes made by the hospitals or clinics where they work	33
Don't know/Refused	15

(Total respondents; n = 1,224)

- 5a. Have you heard or read any news reports about the number of medical errors and patient injuries last year in Massachusetts hospitals, or haven't you heard such reports? (IF YES ASK:) Have you heard a lot or a little?

Heard a lot	7
Heard a little	16
Haven't heard reports	75
Don't know/Refused	2

(Total respondents; n = 1,224)

6. Realistically, about how many medical errors do you think can be prevented? All of them, three-quarters of them, half of them, one-quarter of them, or none of them?

All of them	20
Three-quarters of them	34
Half of them	27
One-quarter of them	11
None of them	3
Don't know/Refused	5

II. Contributing Problems/Causes

7. I'm going to read you a list of some things that could CAUSE medical errors. For each one, please indicate whether you think it is a very important cause, somewhat important, not very important, or not important at all as a cause of these medical errors. If for any of these, you feel you haven't heard enough to have an opinion, just say so.

(Sample A respondents; n = 409)

- a. Doctors and nurses who are poorly trained

Very important	74
Somewhat important	11
Not very important	6
Not at all important	6
Don't know	3

(Sample A respondents; n = 409)

- b. Patients not being able to see their own medical records

Very important	51
Somewhat important	32
Not very important	8
Not at all important	6
Don't know	3

(Sample A respondents; n = 409)

- c. Doctors or nurses not listening to patients, or ignoring patients' concerns

Very important	71
Somewhat important	20
Not very important	4
Not at all important	3
Don't know	2

(Sample A respondents; n = 409)

- d. Emergency rooms being overcrowded

Very important	64
Somewhat important	24
Not very important	5
Not at all important	4
Don't know	3

(Sample A respondents; n = 409)

- e. Doctors and medical staff not washing their hands or wearing masks

Very important	70
Somewhat important	16
Not very important	6
Not at all important	5
Don’t know	3

(Sample A respondents; n = 409)

- f. Hospitals or medical offices not being organized well enough to make sure patients don’t get the wrong drug or the wrong dose of a drug

Very important	72
Somewhat important	18
Not very important	4
Not at all important	3
Don’t know	3

(Sample A respondents; n = 409)

- g. Doctors and medical staff not speaking a patient’s language

Very important	57
Somewhat important	31
Not very important	6
Not at all important	3
Don’t know	3

(Sample B respondents; n = 407)

- h. Doctors and nurses who are overworked, stressed, or tired

Very important	79
Somewhat important	18
Not very important	1
Not at all important	*
Don’t know	2

(Sample B respondents; n = 407)

- i. Doctors or nurses who don’t care about their patients

Very important	65
Somewhat important	16
Not very important	10
Not at all important	7
Don’t know	2

(Sample B respondents; n = 407)

- j. Doctors or other staff not knowing about the medical care that a patient received somewhere else

Very important	73
Somewhat important	21
Not very important	3
Not at all important	1
Don't know	2

(Sample B respondents; n = 407)

- k. Patients being given too many tests or drugs they don't need

Very important	47
Somewhat important	34
Not very important	8
Not at all important	3
Don't know	8

(Sample B respondents; n = 407)

- l. Doctors and nurses not discussing treatment choices with patients

Very important	68
Somewhat important	22
Not very important	6
Not at all important	1
Don't know	3

(Sample B respondents; n = 407)

- m. Doctors and nurses not checking in with patients after sending them home

Very important	57
Somewhat important	31
Not very important	7
Not at all important	1
Don't know	4

(Sample C respondents; n = 408)

- n. Doctors and nurses who are careless

Very important	68
Somewhat important	19
Not very important	6
Not at all important	*
Don’t know	7

(Sample C respondents; n = 408)

- o. Medical care being very complicated

Very important	51
Somewhat important	31
Not very important	10
Not at all important	2
Don’t know	6

(Sample C respondents; n = 408)

- p. Patient medical records that are out-of-date or incorrect

Very important	59
Somewhat important	26
Not very important	9
Not at all important	1
Don’t know	5

(Sample C respondents; n = 408)

- q. Doctors and nurses not clearly explaining follow up care instructions to patients

Very important	56
Somewhat important	30
Not very important	8
Not at all important	1
Don’t know	5

(Sample C respondents; n = 408)

- r. Doctors and other staff in a hospital or medical office not working together or communicating well as a team

Very important	75
Somewhat important	17
Not very important	3
Not at all important	*
Don't know	5

(Sample C respondents; n = 408)

- s. Doctors not spending enough time with patients

Very important	64
Somewhat important	28
Not very important	5
Not at all important	2
Don't know	1

III. Attitudes about the Principle of Medical Error Reporting

8. Now I am going to read a series of statements. For each one, tell me whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree.

(Total respondents; n = 1,224)

- a. The general public should be able to find out about the number and types of medical errors made by different hospitals and doctors in Massachusetts

Strongly agree	74
Somewhat agree	20
Somewhat disagree	2
Strongly disagree	2
Don't know/Refused	2

(Total respondents; n = 1,224)

- b. Hospitals in Massachusetts should be required to report medical errors to a state agency

Strongly agree	85
Somewhat agree	11
Somewhat disagree	2
Strongly disagree	1
Don't know/Refused	1

(Total respondents; n = 1,224)

- c. Individual doctors in Massachusetts should be required to report medical errors to a state agency

Strongly agree	79
Somewhat agree	15
Somewhat disagree	3
Strongly disagree	2
Don't know/Refused	1

(Total respondents; n = 1,224)

- d. Nursing homes in Massachusetts should be required to report medical errors to a state agency

Strongly agree	86
Somewhat agree	11
Somewhat disagree	1
Strongly disagree	1
Don't know/Refused	1

(Total respondents; n = 1,224)

- e. Doctors, hospitals, and clinics should be required to tell patients if a medical error is made during their treatment

Strongly agree	91
Somewhat agree	7
Somewhat disagree	1
Strongly disagree	*
Don't know/Refused	1

(Total respondents; n = 1,224)

9. Do you think the doctors you go to would tell you if they made a medical error in your treatment, or don't you think they would tell you?

Yes, they would tell you	50
No, they would NOT tell you	38
Depends which doctor (vol)	4
Don't know/Refused	8

IV. Information-seeking and Decision-making**(Total respondents; n = 1,224)**

10. Have you ever looked for information about the safety or quality of medical care provided by doctors or hospitals in Massachusetts, or not?

Yes	34
No	65
Don't know/Refused	1

(Respondents who never looked for safety/quality information; n = 767)

- 10a. If you were to look for information about the safety or quality of medical care provided by doctors or hospitals in Massachusetts, do you think it would be easy or difficult to find?

Easy to find	27
Difficult	67
Don't know/Refused	6

(Respondents who never looked for safety/quality information; n = 767)

- 10b. If you were to look for information about the safety or quality of medical care provided by doctors or hospitals in Massachusetts, do you think it would be easy or difficult to understand?

Easy to understand	29
Difficult	64
Don't know/Refused	7

(Respondents who never looked for safety/quality information; n = 767)

- 10c. If you were to look for information about the safety or quality of medical care provided by doctors or hospitals in Massachusetts, do you think you could find a source of information you could trust, or not?

Yes	51
No	34
Don't know/Refused	15

(Respondents who never looked for safety/quality information; n = 767)

10d. If you **were** to look for information about the safety or quality of medical care provided by doctors or hospitals in Massachusetts, do you think it would be useful to you in helping to make a decision about where to get health care, or don’t you think it would be useful?

Useful	90
Not	7
Don’t know/Refused	3

(Respondents who looked for safety/quality information; n = 450)

11. Did you find the information you were looking for, or not?

Yes	63
No	34
Don’t know/Refused	3

(Respondents who looked for safety/quality information and found the information they were looking for; n =298)

11a. Did the information you found come from a source you thought you could trust, or not?

Yes	90
No	4
Don’t know/Refused	6

(Respondents who looked for safety/quality information and found the information they were looking for; n = 298)

12. Were you able to understand the information you found, or not?

Yes	95
No	4
Don’t know/Refused	1

(Respondents who looked for safety/quality information and found the information they were looking for; n = 298)

13. Did the information help you make a decision about where to go to get health care, or not?

Yes	87
No	11
Don't know/Refused	2

16. If you were trying to make a decision about which doctor or hospital to go to in Massachusetts based on the safety of the health care they provide, how much confidence would you have in each of the following sources of information?

(Total respondents; n = 1,224)

- a. A state government agency that provides information about the safety of health care provided by doctors and hospitals

Great deal of confidence	21
A fair amount	48
Only a little	22
None	6
Don't know/Refused	3

(Total respondents; n = 1,224)

- b. A federal government agency that provides information about the safety of health care provided by doctors and hospitals

Great deal of confidence	19
A fair amount	45
Only a little	23
None	10
Don't know/Refused	3

(Total respondents; n = 1,224)

- c. Your primary care doctor

Great deal of confidence	55
A fair amount	33
Only a little	7
None	2
Don't know/Refused	3

(Total respondents; n = 1,224)

d. Your local hospital

Great deal of confidence	30
A fair amount	45
Only a little	17
None	6
Don’t know/Refused	2

(Total respondents; n = 1,224)

e. Your health insurance company

Great deal of confidence	28
A fair amount	37
Only a little	23
None	9
Don’t know/Refused	3

(Total respondents; n = 1,224)

f. Your employer

Great deal of confidence	18
A fair amount	27
Only a little	18
None	13
Don’t know/Refused	24

(Total respondents; n = 1,224)

g. Your friends and family who have needed the same kind of health care

Great deal of confidence	44
A fair amount	37
Only a little	13
None	2
Don’t know/Refused	4

(Total respondents; n = 1,224)

h. An independent, non-governmental group of health experts

Great deal of confidence	23
A fair amount	41
Only a little	21
None	6
Don’t know/Refused	9

(Total respondents; n = 1,224)

17. Based on what you’ve heard, read, or experienced yourself, do you think there are big differences, small differences, or no differences in the frequency of medical errors **between different hospitals in Massachusetts?**

Big difference	42
Small difference	36
No difference	10
Don’t know/Refused	12

(Total respondents; n = 1,224)

18. Based on what you’ve heard, read, or experienced yourself, do you think there are big differences, small differences, or no differences in the frequency of medical errors **between different doctors in Massachusetts?**

Big difference	39
Small difference	36
No difference	9
Don’t know/Refused	16

V. Hospital Care Use**(Total respondents; n = 1,224)**

19. In the past five years, have you received medical care in a Massachusetts hospital, or not?

Yes	66
No	33
Don't know/Refused	1

(Respondents who received medical care in a Massachusetts hospital; n = 850)

20. Which Massachusetts hospital did you use?

*[Data not shown]***(Respondents who received medical care in a Massachusetts hospital; n = 850)**

21. How important were each of the following as reasons you chose to go to that hospital? How about (INSERT ITEM)? Was that a very important reason, somewhat important, not too important, or not at all important?

(Respondents who received medical care in a Massachusetts hospital; n = 850)

- a. The hospital was associated with a medical school

Very important reason	29
Somewhat important	20
Not too important	16
Not at all important	28
Not applicable (vol)	4
Don't know/Refused	3

(Respondents who received medical care in a Massachusetts hospital; n = 850)

- b. How close the hospital was to where you live

Very important reason	53
Somewhat important	23
Not too important	11
Not at all important	13
Not applicable (vol)	*
Don't know/Refused	*

(Respondents who received medical care in a Massachusetts hospital; n = 850)

- c. The hospital was recommended by your primary care doctor

Very important reason	51
Somewhat important	21
Not too important	6
Not at all important	14
Not applicable (vol)	6
Don’t know/Refused	2

(Respondents who received medical care in a Massachusetts hospital; n = 850)

- d. The hospital performs a large number of the operation or other medical treatment you needed

Very important reason	67
Somewhat important	15
Not too important	4
Not at all important	10
Not applicable (vol)	2
Don’t know/Refused	2

(Respondents who received medical care in a Massachusetts hospital; n = 850)

- e. The hospital was recommended by your health insurance plan

Very important reason	28
Somewhat important	19
Not too important	11
Not at all important	33
Not applicable (vol)	7
Don’t know/Refused	2

(Respondents who received medical care in a Massachusetts hospital; n = 850)

- f. The hospital had previously been used by your family and friends without any problems

Very important reason	55
Somewhat important	20
Not too important	7
Not at all important	14
Not applicable (vol)	3
Don’t know/Refused	1

(Respondents who received medical care in a Massachusetts hospital; n = 850)

- g. The hospital was rated higher in patient safety than others by experts

Very important reason	48
Somewhat important	17
Not too important	4
Not at all important	18
Not applicable (vol)	2
Don’t know/Refused	11

(Respondents who received medical care in a Massachusetts hospital; n = 850)

- h. The hospital had fewer reported medical errors

Very important reason	41
Somewhat important	15
Not too important	6
Not at all important	19
Not applicable (vol)	7
Don’t know/Refused	12

(Respondents who received medical care in a Massachusetts hospital; n = 850)

- i. Your out of pocket cost of using that hospital was lower

Very important reason	37
Somewhat important	17
Not too important	10
Not at all important	28
Not applicable (vol)	4
Don’t know/Refused	4

(Respondents who received medical care in a Massachusetts hospital; n = 850)

- j. The reputation of that hospital

Very important reason	66
Somewhat important	18
Not too important	3
Not at all important	10
Not applicable (vol)	1
Don’t know/Refused	2

(Respondents who received medical care in a Massachusetts hospital; n = 850)

k. Advertising you had recently seen about that hospital

Very important reason	17
Somewhat important	12
Not too important	15
Not at all important	48
Not applicable (vol)	5
Don’t know/Refused	3

(Respondents who received medical care in a Massachusetts hospital; n = 850)

l. It is the hospital where your doctor admits patients

Very important reason	55
Somewhat important	19
Not too important	5
Not at all important	16
Not applicable (vol)	3
Don’t know/Refused	2

(Respondents who received medical care in a Massachusetts hospital; n = 850)

m. Your health insurance plan would pay the full cost if you went to that hospital

Very important reason	55
Somewhat important	14
Not too important	6
Not at all important	17
Not applicable (vol)	5
Don’t know/Refused	3

(Respondents who received medical care in a Massachusetts hospital; n = 850)

22. Do you think the hospital you used was one of the best in the state for what you were being treated for, or was it not one of the best in the state?

One of the best in the state	59
NOT one of the best in the state	26
Don’t know/Refused	15

VI. Experience with Medical Errors**(Total respondents; n = 1,224)**

23. In the past five years, have you personally been involved in a situation where a preventable medical error was made in YOUR OWN medical care or in the care of someone close to you where you were very familiar with the care they were receiving, or has that not happened?

Yes, personally involved in situation where medical error was made	23
No, this has NOT happened	75
Don't know/Refused	2

(Respondents who were involved in a situation where a medical error was made)

24. Was the error made in your own care, in the care of the person close to you, or both?

Combo Table Q23/Q24**Base: Total Respondents**

Yes, involved in situation where medical error was made	23
Error was made in your own care, including those who said error was made in both	9
Error was made in the care of the person close to you, including those who said error was made in both	17
No, this has NOT happened	75
Don't know/Refused	2

READ: Now, please think about the error that occurred MOST RECENTLY.

If medical errors happened both in the respondent’s own care and in the care of someone close to them where the respondent was very familiar with the care the person was receiving, the following questions were asked about the most recent error.

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

26. Where did this error take place: at a hospital, at a doctor’s office or clinic, a nursing home or somewhere else?

Hospital	75
Doctor’s office or clinic	18
Nursing home	2
Somewhere else	4
Don’t know/Refused	1

Combo Table Q23/Q24/Q25/Q26

Base: Total respondents; n = 1,224

Error was made in own care or in care of person close to them	23
Error took place in hospital	17
Error took place in doctor’s office or clinic	4
Error took place in nursing home	1
Error took place in somewhere else	1
No, this has NOT happened	75
Don’t know/Refused	2

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

27. What happened? For each of the following, please tell whether or not it is the sort of medical error that occurred. How about (INSERT ITEM)? Did that happen, or not?

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

- a. (You/They) got an infection as a result of (your/their) test, surgery, or treatment

Yes, happened	32
No, did not happen	66
Don't know/Refused	2

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error happened in hospital or nursing home; n=218)

- b. (You/They) fell down in the (hospital/nursing home)

Yes, happened	6
No, did not happen	94
Don't know/Refused	*

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error happened in hospital or nursing home; n=218)

- c. (You/They) got a bed sore in the (hospital/nursing home)

Yes, happened	9
No, did not happen	90
Don't know/Refused	1

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

- d. (You were/They were) given an incorrect medication, meaning: the wrong dose or wrong drug

Yes, happened	32
No, did not happen	65
Don't know/Refused	3

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

- e. (You/They) received the wrong prescription from the doctor

Yes, happened	21
No, did not happen	77
Don’t know/Refused	2

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

- f. (You were/They were) given wrong or unclear instructions about (your/their) follow up care

Yes, happened	34
No, did not happen	66
Don’t know/Refused	*

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

- g. (You were/They were) given the wrong test, surgery, or treatment

Yes, happened	38
No, did not happen	59
Don’t know/Refused	3

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

- h. A mistake was made during (your/their) test, surgery, or treatment

Yes, happened	67
No, did not happen	32
Don’t know/Refused	1

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

- i. (Your/Their) test results were lost, or (you/they) did not receive them

Yes, happened	17
No, did not happen	80
Don’t know/Refused	3

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

- j. (Your/Their) medical problem was misdiagnosed

Yes, happened	51
No, did not happen	46
Don’t know/Refused	3

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

28. Still thinking about the error that occurred most recently: Did the error have serious health consequences for (you/them), minor health consequences, or no health consequences at all?

Serious health consequences	59
Minor health consequences	28
No health consequences	12
Don’t know/Refused	1

Combo Table Q23/Q28

Base: Total respondents; n = 1,224

Error was made in own care or in care of person close to them	23
Error had serious health consequences	13
Error had minor health consequences	6
Error had no health consequences	3
Don’t know/Refused	1
No, this has NOT happened	75
Don’t know/Refused	2

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

29. Did anyone inform (you/you or them) that a medical error had been made in (your/their) treatment, or didn't anyone tell (you/you or them)?

Yes, informed of medical error	30
No did NOT inform of medical error	69
Don’t know/Refused	1

VII. Willingness to Report Errors

Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them; n=290)

30. Did (you/you or they) report the medical error to a doctor or nurse, hospital or clinic, or an official agency, or not?

Yes, reported medical error	54
No, DID NOT report medical error	37
Don't know/Refused	9

(Respondents who were involved in a situation where a medical error was made in the care of person close to them AND error was reported; n=95)

31. Was it you or the person close to you that reported the medical error?

You reported the error	41
Person close to you reported the error	51
Don't know/Refused	8

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported; n=143)

32. Did (you/they) report it in person or in writing?

In person	75
In writing	9
Both	9
Don't know/Refused	7

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

Q33. Did you report it (INSERT ITEM), or not?

(IF NECESSARY: Who did you report the medical error to?)

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

a. To a doctor, nurse, or social worker working where the error happened

Yes	79
No	19
Don't know/Refused	2

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

b. To the patient-relations department or administrator where the error happened

Yes	44
No	55
Don't know/Refused	1

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

c. On a patient satisfaction questionnaire where the error happened

Yes	20
No	77
Don't know/Refused	3

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

d. To a doctor, nurse, or other healthcare professional NOT where the error happened

Yes	63
No	35
Don't know/Refused	2

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

e. To an organization that helps healthcare consumers

Yes	16
No	81
Don't know/Refused	3

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

f. To your health insurance company

Yes	24
No	74
Don't know/Refused	2

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

g. To a lawyer

Yes	25
No	75
Don't know/Refused	-

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

h. To a government agency

Yes	8
No	92
Don't know/Refused	-

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

34. Which of the following were reasons why you reported the medical error? How about (INSERT ITEM)? Was that a reason you reported the medical error, or not?

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

- a. You wanted the person responsible to be punished

Yes, was a reason	31
No, was NOT a reason	67
Don't know/Refused	2

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

- b. You wanted to prevent the same error from happening to someone else

Yes, was a reason	90
No, was NOT a reason	9
Don't know/Refused	1

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

- c. You were angry and wanted to get this off your chest

Yes, was a reason	40
No, was NOT a reason	60
Don't know/Refused	-

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

- d. You wanted someone to help (you/the person close to you) cope with the problems caused by the medical error

Yes, was a reason	68
No, was NOT a reason	32
Don't know/Refused	-

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them AND error was reported by respondent; n=96)

- e. You wanted (the person close to you) to receive compensation for the harm caused by the error

Yes, was a reason	17
No, was NOT a reason	83
Don't know/Refused	-

(Respondents who were involved in a situation where a medical error was made IN THE CARE OF PERSON CLOSE TO THEM AND error was reported by respondent; n=42)

- f. You thought the medical error should be reported and the person it happened to was unable to report it

Not enough cases for analysis (n<50)

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them and error was NOT reported by respondent; n=114)

35. Which of the following were reasons why you did not report the medical error? How about (INSERT ITEM)? Was that a reason you did not report the medical error, or not?

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them and error was NOT reported by respondent; n=114)

- a. You didn’t know how to report a medical error

Yes, was a reason	36
No, was NOT a reason	63
Don’t know/Refused	1

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them and error was NOT reported by respondent; n=114)

- b. You were afraid that (your/their) doctor would stop seeing (you/them)

Yes, was a reason	13
No, was NOT a reason	87
Don’t know/Refused	*

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them and error was NOT reported by respondent; n=114)

- c. You didn’t want to offend anyone

Yes, was a reason	17
No, was NOT a reason	82
Don’t know/Refused	1

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them and error was NOT reported by respondent; n=114)

- d. There was no way to report the error anonymously

Yes, was a reason	23
No, was NOT a reason	71
Don't know/Refused	6

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them and error was NOT reported by respondent; n=114)

- e. You didn't think it would do any good

Yes, was a reason	65
No, was NOT a reason	34
Don't know/Refused	1

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them and error was NOT reported by respondent; n=114)

- f. You didn't think the medical error was important

Yes, was a reason	19
No, was NOT a reason	79
Don't know/Refused	2

(Respondents who were involved in a situation where a medical error was made either in own care or in the care of person close to them and error was NOT reported by respondent; n=114)

- g. You didn't want to get anyone in trouble

Yes, was a reason	31
No, was NOT a reason	66
Don't know/Refused	3

(Respondents who were involved in a situation where a medical error was made IN THE CARE OF PERSON CLOSE TO THEM AND ERROR WAS NOT reported; n=72)

- h. You didn't think you could report an error in someone else's medical care

Yes, was a reason	26
No, was NOT a reason	65
Don't know/Refused	9

(Total respondents; n = 1,224)

36. Some people think they have control over what happens to their health, others do not. How about you? In general, do you think you have control over what happens to your health, or do you think what happens to your health is something beyond your control?

Have control over what happens to your health	73
What happens to your health is beyond your control	21
Don't know/Refused	6

VIII. Demographics**(Total respondents; n = 1,224)**

Male	47
Female	53

(Total respondents; n = 1,224)

Y1. How many adults, age 18 or older, live in your household? Please be sure to include yourself.

1	16
2	50
3	19
4	10
5	3
6+	*
Refused	2

(Total respondents; n = 1,224)

D14. What is your age?/Could you please tell me if you are...?

18-29	19
30-49	35
50-64	27
65 or older	18
Refused	1

(Total respondents; n = 1,224)

Y4. Are you currently married, living with a partner, divorced, separated, widowed or have you never been married?

Married	50
Living with a partner	7
Divorced	7
Separated	2
Widowed	6
Never been married	26
Refused	2

(Total respondents; n = 1,224)

D15. What is the last grade or class that you completed in school?

High school graduate or less (Net)	39
Less than high school graduate (Subnet)	9
None or grade 1-8	3
High school incomplete	6
High school graduate+ (Subnet)	30
High school graduate	26
Business, tech/vocational school	4
Some college or more (Net)	59
Some college, no 4-yr degree	22
College graduate + (Subnet)	38
College graduate	20
Post-graduate training	18
Don't know/Refused	2

(Total respondents; n = 1,224)

D19. Are you, yourself, of Hispanic or Latino background. [IF NECESSARY: such as Mexican, Puerto Rican, Cuban, or other Latin American background?]

(Respondents who are Hispanic)

D20. Are you White Hispanic or Black Hispanic?

(Respondents who are non-Hispanics)

D21. Do you consider yourself to be white, black or African-American, Asian American, or some other race?

RACE SUMMARY TABLE

Base: Total respondents; n = 1,224

White	75
Black or African American	6
Asian American	5
Hispanic (NET)	9
White Hispanic	7
Black Hispanic	1
Hispanic unspecified	1
Some other race	4
Don't know	*
Refused	2

(Total respondents; n = 1,224)

D23a. Is your total annual household income from all sources, and before taxes:

D23b. Is your total annual household income from all sources and before taxes less than \$50,000, \$50,000 but less than \$100,000, or over \$100,000?

D23c. Is that 100 but less than 150 thousand, 150 but less than 200 thousand, 200 but less than 250 thousand, or 250 thousand and over?

Less than \$50,000 (NET)	41
Less than \$15,000	12
\$15,000 but less than \$25,000	8
\$25,000 but less than \$30,000	6
\$30,000 but less than \$40,000	7
\$40,000 but less than \$50,000	7
Less than \$50,000 (unspecified)	2
\$50,000 but less than \$100,000 (NET)	20
\$50,000 but less than \$100,000 (unspecified)	1
\$50,000 but less than \$75,000	11
\$75,000 but less than \$100,000	8
\$100,000 and over (NET)	22
\$100,000 and over (unspecified)	3
\$100,000 but less than \$150,000	10
\$150,000 but less than \$200,000	5
\$200,000 but less than \$250,000	1
\$250,000 and over	3
Don't know	5
Refused	12

(Total respondents; n = 1,224)

37. What language do you mainly speak at home?

English	87
Spanish	5
Portuguese	1
Chinese/Mandarin/Cantonese	1
Other	5
Don't know/Refused	1