


<p><b>Name of Policy:</b> <u>Standard of Care Committee.</u></p> <p><b>Policy Number:</b> 3364-10-03</p> <p><b>Approving Officer:</b> President</p> <p><b>Responsible Agent:</b> Office of Legal Affairs</p> <p><b>Scope:</b> The University of Toledo</p>	 <p><b>Revised date:</b></p> <p><b>Original effective date:</b> July 1, 2008</p>
<p><input type="checkbox"/> New policy proposal</p> <p><input checked="" type="checkbox"/> Major revision of existing policy</p>	<p><input type="checkbox"/> Minor/technical revision of existing policy</p> <p><input type="checkbox"/> Reaffirmation of existing policy</p>

~~(A)~~ ~~(A)~~ **Policy statement**

The University of Toledo (“UT”) ~~will create~~created and maintains a Standard of Care Committee (“Committee”) as part of its litigation management process that ~~will review~~s standard of care issues that ~~allegedly resulted~~ in alleged claims against UT and any of its insureds participating in the university’s insurance program, UTMAC. In order to improve patient safety and reduce future risk exposures to UT, UTMC medical staff and UT’s employees, including residents and training and the University of Toledo Physicians, LLC (“UTP”), the Committee will communicate any standard of care or patient safety concerns to the Medical Staff Peer Review Committee.

~~(B)~~(A) **Purpose of policy**

The Committee supports legal defense by evaluating the care provided in ~~litigation~~Claims or Potential Claims (defined below) and determining if there were any standard of care issues. -The Committee improves patient safety and reduces future risk by referring any standard of care or patient safety concerns to the Medical Staff Peer Review Committee.

**(B) Scope**

The scope of this policy is The University of Toledo and all of its insureds participating in the university’s insurance program as well as any providers on the UTMAC medical staff, and providers practicing at UTMAC and its clinics or other UToledo Health healthcare delivery sites. ;

**(C) Definitions**

(1) Claims mean any of the following against any person or entity insured by the university insurance program:

(a) ~~(1)~~—Lawsuits – Summons and complaints served, regardless of which court the ~~—~~action ~~—~~was filed.

(b) ~~(2)~~—180 day letters (Ohio) or notices of intent (Michigan) that give notice of consideration of suing or requests from an attorney or patient for

medical records where the request form indicates that the party is considering filing a lawsuit.

(c) ~~(3)~~—Any written demands for compensation by patient, family or legal representative.

(2) Potential ~~C~~elaim means any procedure or treatment which may have contributed to:

(1) An event that has resulted in an unanticipated death or major permanent loss of function, not related to the natural course of the patient's illness or underlying condition, including but not limited to Unexpected deaths or unexpected outcomes of a serious nature:

(a) ~~(a)~~—Unanticipated neurological, sensory or systemic deficits: including but not limited to brain damage, spinal cord injury, paralysis or nerve injury, organ failure or sepsis;

(b) ~~(b)~~—Severe burns, including but not limited to thermal, chemical, radiological or electrical, resulting in extensive hospitalization and/or skin grafting;

(c) ~~(c)~~—Severe internal injuries, lacerations, infectious processes, foreign body retentions, or sensory or reproductive organ injuries; or

(d) ~~(d)~~—Substantial disabilities, including fractures, amputations or disfigurements.

(2) Any outcome that is classified as a Sentinel Event (per ~~UTMC Medical Center~~ Policy # 3364-100-50-38 (Sentinel Events/Adverse Events)) and requires a Root Cause Analysis to be performed.

### ~~(C)~~(D) Committee functions

(1) Case reviews will be done by the Office of Legal Affairs on all lawsuits filed against UT and any of its insureds participating in the university insurance program, UTP, affiliated practitioners who participate in the university insurance program, including residents, students or employees of UT as well as non-employed UTMC medical staff members, and leased physicians that may create liability for UT. One Hundred Eighty-day letters180-day letters and Ppotential eClaims will abere reviewed as appropriate in accordance to the Professional Liability Claims Reporting and Management policy (3364-10-16).

(2) The Committee will discuss each case presented to determine whether:

(a) the standard of care was met;

(b) the standard of care was met, but there are concerns; or

(c) the standard of care was not met.

- (3) The Committee will assess responsibility of any standard of care issues and allocate the portion of responsibility amongst the parties.
- (4) The Office of Legal Affairs-HSC will direct the Committee's determination to the proper channels, including the Claims Management Committee.
- (5) All issues with regard to a finding that the standard of care was not met will be provided to the Medical Staff Peer Review Committee. -Action will be taken as appropriate by the Medical Staff Peer Review Committee to educate and improve patient safety and quality of care.

~~(D)~~ ~~(D)~~ **Committee membership**

- (1) Members of the Standard of Care Committee ~~will be~~:
  - (a) Executive Vice President for ~~Clinical-Health~~ Affairs- (Chair);
  - ~~(b)~~ UTP President~~Chief Physician Executive (Vice-Chair);~~
  - ~~(b)~~ ~~UTP Vice President;~~
  - (c) UTMC Chief Executive Officer;
  - (d) Chief of UTMC Medical Staff;
  - ~~(e)~~ ~~Vice Chief of~~ UTMC Medical Staff;
  - ~~(e)~~ \_\_\_\_\_
  - ~~(f)~~ UTMC -Chief Medical Officer;
  - ~~(g)~~ Dean of the College of Medicine and Life Sciences;
  - ~~(f)~~~~(h)~~ Designated Institutional Official for Graduate Medical Education;
  - ~~(g)~~~~(i)~~ A minimum of six hospital medical staff members representative of the clinical services offered by UTMC (appointed by the Committee Chair);
  - ~~(h)~~~~(j)~~ Senior Hospital Administrator~~Chief Administrative Officer for Quality and Patient Safety;~~
  - ~~(k)~~ Chief Nursing Officer; and
  - ~~(i)~~ ~~Associate Vice President~~ Chief Assurance Officer.
- (2) The following individuals will attend as advisors to the Committee without a vote:
  - ~~(a)~~ Deputy Attorney from the Office of Legal Affairs-HSC~~General Counsel\*;~~
  - ~~(a)~~~~(b)~~ Legal Nurse Specialist; and
  - ~~(b)~~ ~~Risk Management~~Defense Counsel\*.

~~\* Non-voting members~~

**(E) Meetings**

- (1) The Committee will meet monthly or as often as necessary. -Attendance of nine members, with a minimum of five (5) attending physicians constitutes a quorum.
- (2) The ~~UTP President~~UTP Chief Physician Executive will serve as Committee Chair in the absence of the Executive Vice President for ~~Clinical Health~~ Affairs. The UTMC Chief Medical Officer will serve as Committee Chair in the absence of both the Executive Vice President for Health Affairs and UTP Chief Physician Executive.

**(F) Protected information**

The Committee performs quality assurance activities and is an integral part of university's peer review and quality assurance process.- Those sections of the Ohio Revised Code pertaining to immunity and confidentiality of peer review and quality assurance committees apply to the Committee. The Committee also supports legal counsel in litigation preparation, defense, and resolution decisions. -The activities of this Committee, including any information, data, reports, or records are part of peer review records as well as attorney-client privileged/work product, and are protected from disclosure.

~~(G) Definitions~~

~~Claims mean any of the following against any person or entity insured by the university insurance program:~~

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- ~~(2) 180 day letters (Ohio) or notices of intent (Michigan) that give notice of consideration of suing or requests from an attorney or patient for medical records where the request form indicates that the party is considering filing a lawsuit.~~
- ~~(3) Any written demands for compensation by patient, family or legal representative.~~

~~Potential claim means any procedure or treatment which may have contributed to:~~

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~~(d) Substantial disabilities, including fractures, amputations or disfigurements;~~

~~(2) Any outcome that is classified as a Sentinel Event (per UT Medical Center Policy # 3364-100-50-38 (Sentinel Events/Adverse Events)) and requires a Root Cause Analysis to be performed.~~

<p>Approved by:</p> <p><u>/s/</u>  Gregory C. Postel, MD  President  Date</p> <p><i>Review/Revision Completed by:  Office of Legal Affairs - HSC, SLT</i></p>	<p>Policies Superseded by This Policy:  01-087</p> <p>Review/Revision Date:  8/19/05 - New  7/1/08 – Revised/Initial effective date of this policy number  4/1/10 – Reviewed  7/1/11 – Revised  10/10/13 – Revised  5/1/16 – Revised  11/2019 – Revised  1/2020 – Revised</p> <p><b>Next Review date:</b></p>
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