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2024 President's Report: Improving Patient Care in Perioperative Medicine Continues as Our Purpose.

by Dan Cole, MD

Recent data continue to confirm the epidemic of preventable harm in American health care. In 2022, the U.S. Department of Health and Human Services Office of Inspector General released a report titled “Adverse Events in Hospitals: A Quarter of Medicare Patients Experienced Harm in October 2018.”¹ In 2023, the *New England Journal of Medicine* published that, “Adverse events were identified in nearly one in four admissions;” with adverse drug events accounting for 39.0% of all events, and surgical procedural events a close second at 30.4%.² Clearly, we have work to do in the perioperative space.

Not only does preventable harm exact a high human cost, but it exerts a resource and financial stress on our health care system. According to a recent report by the Organisation for Economic Co-operation and Development (OECD), “the direct cost of treating patients who have been harmed during their care approaches 13% of health spending,” with most of these events deemed preventable.³ One final adverse impact of harm is the erosion of trust by patients in health systems. Trust has a clear impact on health and health care outcomes. A recent publication reports that between April 2020 and January 2024, trust in physicians and hospitals decreased from 71.5% to 40.1%.⁴

The Anesthesia Patient Safety Foundation (APSF) approaches the challenge of preventable harm with collaborative relationships, realizing we accomplish more together than in a silo. Since inception, the APSF has included leaders from industry, regulatory agencies, other health care specialties and providers, and medicolegal and insurance companies. This broad union of forces has allowed APSF to serve as a convener of collaborators, each working together to resolve patient safety issues that can have devastating impacts on patients, their families, and their health care providers.

While the APSF has been laser focused on our vision “that no one shall be harmed by anesthesia care,” we understand that, like the strands of a strong rope, we should not unravel safety from quality. The primary goal of quality health care is to ensure that patients receive the best possible care, achieve optimal outcomes, and meet or exceed their personal health goals. Health care and our patients do not get to quality outcomes without safety. Our vision should be entrenched throughout the patient experience during the entire perioperative process, and beyond. In short, we aspire to



Daniel J. Cole, MD, Current APSF President

a system without preventable harm, returning patients to their baseline or an improved state of physical, cognitive, and psychological health.

OUR ACTIVITIES

The APSF serves as a strong advocate for perioperative safety, and we continue to work the levers of action by which we turn ideas into action, and action into results. They include research, education, our *Newsletter*, other communication vehicles (e.g., social media, website), collaboration with other stakeholders in patient safety, and advocacy. With limited resources, we will continue to strategically exercise these levers to make continued progress in the fight against preventable harm. Let me highlight just a few of our many activities.

- *Establishment of perioperative patient safety priorities.* The APSF seeks broad input and has established a list of the top perioperative patient safety priorities. These may be viewed at <https://www.apsf.org/patient-safety-priorities/>. In general, APSF's primary activities and initiatives are focused on these priority issues which include

1. Culture of Safety, Teamwork, and Clinician Safety
2. Clinical Deterioration
3. Nonoperating Room Anesthesia
4. Perioperative Brain Health
5. Opioid-related Harm
6. Medication Safety
7. Infectious Diseases
8. Airway Management

- *Consensus Conferences:* Each year, the APSF hosts a Stoelting Consensus Confer-

ence oriented towards one of the priority issues. These conferences bring together patient safety advocates, anesthesia and surgical professionals, and industry and regulatory leaders to address specific topics. Examples of past conferences can be found at <https://www.apsf.org/past-apsf-consensus-conferences-and-recommendations>. The 2024 conference was titled “*Transforming Anesthetic Care: A Deep Dive into Medication Errors and Opioid Safety.*” Medication errors continue to comprise a high percentage of the total errors in perioperative medicine. The 2024 conference was exceptional and was held in Boston in celebration of the meeting that occurred 40 years ago (<https://www.apsf.org/about-apsf/apsf-history/>) that resulted in the formation of APSF in 1985. The conference was sold out with over 200 individuals signed up for virtual participation. The lectures are available online at <https://www.apsf.org/event/apsf-stoelting-conference-2024/>. A manuscript with recommendations will be submitted for publication.

Next year's conference will be held in Chicago on September 3–4 and will be titled “*Transforming Maternal Care: Innovations and Collaborations to Reduce Mortality.*”

- Our Committee on Technology has created a technology education initiative, which can be accessed at the APSF website. Two learning activities are currently available free-of-charge and include 1) Low-Flow Anesthesia and 2) Quantitative Neuromuscular Monitoring. A course on Manual External Defibrillation, Cardioversion, and Pacing will soon be released.
- There is a new webpage dedicated to preventing and treating surgical fires. This includes a legacy video of about 18 minutes, and a new abbreviated video of 5–6 minutes available in multiple languages. <https://www.apsf.org/videos/preventing-surgical-fires/>
- A new initiative that we have been working on for over two years and was launched late last year regarding patient engagement. According to a 2023 report by the OECD on patient engagement, “*Patients' and citizens' perspectives and their active engagement are critical to make health systems safer and people-centered—and are key for co-designing health services and co-producing good health with health care professionals*”

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The APSF Continues to Focus on Our Vision “That No One Shall Be Harmed By Anesthesia Care”

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and building trust.” Way overdue in American health care is patient engagement in their health care. We have a new website that has been developed with significant patient input and to date has been highly utilized. We envision building out this website with a menu of options, over time, that are specific to patient-specific conditions and risks. <https://www.apsf.org/patient-guide/>

We have a deeply committed group of volunteers who I am confident will rise to the challenges of health care that will occur in the perioperative space over the next decade, and the solutions that improve patient safety and ultimately quality outcomes. We rely on your financial support to achieve our goals,

and we will use our resources wisely to ensure that anesthesiology remains a leader in perioperative safety to the benefit of our patients and providers. We at the APSF will be proactive to continue our work to fulfill our vision “that no one shall be harmed by anesthesia care.” It is indeed a sacred trust that we have with our patients and our goal is to further the foundation of trust on which our specialty has been built.

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