## GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2007

S SENATE JOINT RESOLUTION 64

Sponsors: Senator Forrester.

1 2

Referred to: Rules and Operations of the Senate.

## February 12, 2007

A JOINT RESOLUTION AUTHORIZING THE LEGISLATIVE RESEARCH COMMISSION TO STUDY THE INCIDENCE OF MEDICAL ERRORS IN HEALTH CARE SETTINGS, THE IMPACT MEDICAL ERRORS HAVE ON PATIENT SAFETY, AND THE BENEFITS OF MANDATORY REPORTING OF MEDICAL ERRORS.

Whereas, according to an Institute of Medicine report, at least 44,000 Americans (and maybe as many as 98,000) die each year in hospitals as a result of medical errors, making medical errors a leading cause of death in the United States; and

Whereas, the number of estimated deaths does not account for deaths that occur from medical errors in settings other than hospitals and also fails to account for the number of people who are injured, but do not die, as a result of medical errors; and

Whereas, the Institute of Medicine report indicated that most errors are the result of multiple contributing factors as opposed to single events or bad people; and

Whereas, the Institute of Medicine has reported that preventable medical errors result in more than seven thousand deaths each year in hospitals alone, and tens of thousands more occur in outpatient facilities; and

Whereas, the Institute of Medicine outlined a four-tiered approach to error reduction, to wit, creating a national focus for enhancing knowledge about safety, identifying and learning from errors through mandatory and voluntary reporting efforts, raising standards for safety improvements through oversight agencies and other professional groups, and implementing safety practices at the delivery level; and

Whereas, a number of states have begun to consider and enact legislation aimed at reducing medical errors; Now, therefore,

Be it resolved by the Senate, the House of Representatives concurring:

**SECTION 1.** The Legislative Research Commission may study the incidence and causes of medical errors occurring in hospitals, pharmacies, and other health care settings in this State. In conducting the study, the Commission may consider actions proposed or taken by other states and at the federal level to reduce medical errors, including mandatory and voluntary medical error reporting requirements. The Commission may make recommendations on ways to reduce medical errors, including

4

5

6

1	proposed legislation for consideration by the 2007 General Assembly, Regular Session
2	2008, and the 2009 General Assembly.
3	SECTION 2. The Legislative Research Commission may make an interim

**SECTION 2.** The Legislative Research Commission may make an interim report to the 2007 General Assembly, Regular Session 2008, and shall make its final report to the 2009 General Assembly upon its convening.

**SECTION 3.** This resolution is effective upon ratification.