

20 Tips to Help Prevent Medical Errors

This article has been adapted by **Ray Glazier** from a fact sheet produced by the Agency for Healthcare Research and Quality, Rockville, MD. The full text is available online at www.ahrq.gov/consumer/20tips.htm.

Medical errors are one of the Nation's leading causes of death and injury. The Institute of Medicine estimates that as many as 44,000 to 98,000 people die in United States hospitals each year as the result of medical errors, more than from motor vehicle accidents, breast cancer, or AIDS. This article suggests some things you can do to protect yourself.

What are Medical Errors?

Medical errors happen when a treatment plan goes awry, or when the plan itself was wrong. Medical errors can happen anywhere in the health care system, even in routine matters -- for example, when a hospital patient on a salt-free diet is given a high-salt meal.

Most errors result from problems created by today's complex health care system. But errors also happen when doctors and their patients have problems communicating. For example, a recent study found that doctors often do not do enough to help their patients make informed decisions. Less involved and poorly informed patients are less likely to accept and follow through on the doctor's choice of treatment. It is not reasonable to

expect that a doctor is fully aware of the special circumstances involved with having a disability. While fully capable on the medical condition they are treating, they may never have treated someone with your disability. Take that into consideration.

What Can You Do? Be Involved in Your Health Care!

1. The single most important way you can help to prevent errors is to be an active member of your health care team; take part in every decision about your health care. *If you are unable to do this alone, due to your illness or your disability, have someone you trust participate with you in meetings with providers.*

Medicines

2. Make sure that all of your doctors know about everything you are taking, including prescription and over-the-counter medicines, and dietary supplements such as vitamins and herbs. At least once a year, bring all of your medicines and supplements with you to your doctor. "Brown bagging" your medicines can help you and your doctor talk about them and find out if there are any problems.

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Computer Assistance at Home

It is now possible for people with severe disabilities to receive technical assistance with computer-based assistive technology in their own homes.

The Massachusetts Rehabilitation Commission (MRC) Independent Living Program has received state funds for assistive technology devices and training for individuals with severe disabilities.

MRC has contracted with Easter Seals to provide services under this program.

While this program may provide hardware and software, it is also a resource for individuals who need help in making what they already have work for them. Easter Seals says it is willing to use its resources to configure, debug, and upgrade existing equipment and to train consum-

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FROM THE CENTER

FROM OUR READERS

TECHNOLOGY TIPS

Autumn 2000

As a result of the Information Center's activity during nineteen years of responding to questions initiated by individuals living with disability, or others inquiring on their behalf, we have maintained many connections with knowledgeable people, and organizations, locally, throughout the country and around the world. Because these relationships still exist, we continue to receive an abundance of mail, paper and electronic, including helpful information that we try to pass on to as many people as possible through our newsletter.

One of these sources, an organization called Justice for All, has been keeping many people informed daily about current political situations, the philosophy of the candidates and political parties they represent, and particularly regarding efforts to include people with disability, and other differences as fully functioning members of society.

A statement from Justice for All came to us shortly after election day, discussing the unease people might be having because of uncertainty relating to the election chaos. This inspired our addressing the issues and passing along some of the wisdom expressed in the article.

It is apparent to us that when the greater effort is made to provide maximum opportunity for each individual to live as fully as possible, the richer everyone's life becomes. When there is accommodation which will make possible the greatest degree of independence and integration, all kind of people can contribute to and share each other's talents and uniqueness. This concept can be and has been proven to be valid, however, is not as yet universally accepted.

There is difference of opinion between the parties on how to proceed, and concern among many voters that the ADA, IDEA and other programs that have enabled people to prevail will be weakened or eliminated when a new administration takes over.

Regardless of which party holds which office in our government, we must continue to communicate to them and to all Americans the vision of a country in which every citizen is given the tools they require to achieve the American dream.

While one party has adopted a rhetoric that is less supportive of our concerns, it is not without dedicated and knowledgeable disability rights advocates. Throughout the history of the fight for opportunity for people with disability committed people of both parties have always worked together. Now is a time to redouble our efforts, not

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Editor: J. Archer O'Reilly III

Etiquette Toward Persons with Disabilities

There are now a number of companies that offer consulting to business on making accommodations for persons with disabilities. Many of these concentrate on the legal requirements of the Americans with Disabilities Act. The Information Center was pleased to come upon a booklet from a consulting company which considered the etiquette involved in dealing with people with disabilities.

The folks at W. C. Duke Associates, Inc. in Woodford, Virginia have placed an emphasis of their business on teaching not only the necessary physical accommodations but also the proper social etiquette involved in serving members of the public who have a disability. Below are some excerpts from their publication.

"People First" Terminology

Acknowledge the disability, but place the person first. Say "a person with a disability" rather than a "disabled person." "Person who is blind or deaf" or "person who is a wheelchair user" places the individual first with the disability becoming secondary.

Avoid the words "handicapped" and "crippled." "Invalid" implies lack of validity as a person. "Victim," "afflicted with" and "suffering from" carry negative and inaccurate connotations.

Take the time to learn appropriate etiquette for specific disabilities, just as you would for specific business or social encounters.

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National Center on Physical Activity and Disability

The National Center on Accessibility (NCA), a program of Indiana University, has partnered with the University of Illinois at Chicago (UIC) to develop a National Center on Physical Activity and Disability. NCA has a long history of partnering with organizations to promote the inclusion of people with disabilities in all aspects of parks, recreation and tourism. Since its inception in 1992, NCA has provided technical assistance and training to thousands of professionals, in addition to leading research on access to outdoor developed areas, swimming pools, beaches, golf, and other recreation environments. This most recent partnership with UIC further illustrates NCA's commitment to inclusion of youth and adults in all facets of parks, recreation and leisure activities. Recently, UIC received a four year grant from the Center for Disease Control in Atlanta to develop a National Center on Physical Activity and Disability (NCPAD) that will provide a comprehensive database and resource for all aspects of physical activity and disability.

The project collaborates with disability organizations throughout the country to collect and disseminate information to researchers, practitioners, consumers, family members, and the public. This will include establishing a massive database of both published and unpublished material. NCA will contribute expertise in the areas of recreation and parks, while the Rehabilitation Institute of Chicago will provide a similar role in the areas of sports and physical activity related to

disability. The Center will have an extensive web-based information system and will conduct training and provide consultation nationwide.

The National Center on Accessibility has developed several fact sheets and white papers over the spring to serve as resources on recreation and physical activity. The papers are written by professionals with national expertise in each of the represented fields and will be available through NCA's collaborative partnership with NCPAD. Some of the new resources include:

- *Exploring Family Adventure in the Outdoors*, authored by Kathy Scholl of Wilderness Inquiry and University of Minnesota
- *Taking a trip to the Outdoors? What to ask before you go.*
- *Playgrounds for ALL Kids* authored by Cindy Burkhour, inclusive recreation consultant and member of the U.S. Access Board's Regulatory Negotiation Committee on Play Areas.
- *Therapeutic Horseback Riding*, authored by Jennifer Rekers, Arabian horse breeder and former therapeutic riding program volunteer
- *Architectural and Program Access to Educational Settings and Field Trips*, authored by consultant Julee Quarve-Peterson
- *Recreation Access Rights, a Look at How the ADA Applies to Recreation and Some Case Law Studies*, authored by John McGovern, Executive Director of the North Suburban Special Recreation Association

■ *Preferred Natural Environments for People with Disabilities*, a look at the research study performed by the University of Michigan

■ *A Zoo Visit and the Benefits of Zoos*, authored by consultant and former accessibility coordinator for the Brookfield Zoo, Mark Trieglaff

■ *Golf: You can play too!*, authored by Gary Robb, Executive Director of the NCA

■ *Golf Instruction for People with Disabilities*, authored by PGA/LPGA Golf Instructor, Judy Alvarez

■ *Big Game Hunting*, authored by Cameron Brown, NCA Technical Assistance Specialist

■ *Senior Olympics and the Eden Alternative* authored by Project LIFE, University of Missouri

■ *Leisure for children with ADHD* by Project LIFE, University of Missouri

Additional paper topics include: access to swimming pools, trail assessments, canoeing, and kayaking. HTML and PDF formats of the papers are available on the NCA and NCPAD websites: www.ncaonline.org or www.ncpad.org.

A free newsletter, **Access Today** is available by request. Its purpose is to update and inform people in the recreation field of current developments in the area of accessibility. For a subscription, write to NCA at the address that follows.

For more information: National Center on Accessibility, Indiana University, 2805 E. 10th Street, S 190, Bloomington, IN 47408-2698, (812) 856-4422 (v) or (812) 856-4421 (tty). National Center on Physical Activity and Disability, (800) 900-8086 (v/tty).

Massachusetts Home Modification Loan Program

by J. Archer O'Reilly III

The Commonwealth of Massachusetts, through a collaboration between the Massachusetts Rehabilitation Commission (MRC) and the Community Economic Development Assistance Corporation (CEDAC), provides loans for access modifications to the principle residence of elders, adults with disabilities and families with children with disabilities. The intent of this program is to allow people to live independently in their communities.

The program lends money to homeowners to modify their homes to allow access for individuals with disabilities. Any homeowner who has a disability, has a household member with a disability, or rents to an individual with a disability may apply for this loan. Income requirements will be based on the total household income of the homeowner. Any household in a property with less than ten units may be eligible and the owner of the property must be the one who applies.

Based on income eligibility, from \$1,000 up to \$25,000 may be borrowed. There are two forms of loan: A Deferred Payment Loan (DPL), secured by a promissory note and due upon future sale or transfer of the property or; a low-interest Amortized Loan requiring monthly payments but offered at the low interest rate of 3%. Any balance on a Amortized Loan is due if the property is sold or transferred. A DPL is available for homeowners with a total gross household income of up to 100% of "Median Income." (For a family of one this figure is \$42,000 and for a family of 6 it is

\$69,600.) Amortized Loans are available for homeowners whose total household income is between 100% and 200% of "Median Income."

The unit where the modifications are made must be the principal residence of the individual with the disability and the modifications must be necessary to allow the beneficiary to remain in the home.

Where to Apply

There are six agencies across the state that provide the funding and administration for this program. They also may provide technical assistance in choosing and hiring architectural, design, and contracting services and with the solicitation of bids for these services. The provider agency will also provide reasonable accommodations during the application process.

The homeowner is responsible for meeting all local and state building code requirements.

For information or application, contact the Provider Agency nearest you.

Pioneer Valley Planning Commission

26 Central Street
West Springfield, MA 01089
*Paul Lischetti, Laurel Foley,
Janet Cassesse*
413-781-6045(v), 413-781-7168(tty)
plischetti@pvpc.org

Rural Housing Improvement, Inc.

218 Central Street
Winchendon, MA 01475
Lois Plante, Audrey Greenwald
978-297-5300 x214 (v),
978-297-3176 (tty)

kplante@rhircap.org

Community Teamwork, Inc.

167 Dutton Street
Lowell, MA 01852
Connie Beauregard
978-459-0551 x237 (v),
978-686-9334 (tty)
cbeauregard@comteam.org

South Middlesex Opportunity Council, Inc.

300 Howard Street
Framingham, MA 01702
Roland Simoneau
508-620-2682 (v),
800-724-7662 (v & tty)
rolands@smoc.org

South Shore Housing Development Corporation

169 Summer Street
Kingston, MA 02364
Joan Maney
781-585-0683 (v),
781-585-3886 (tty)
jmaney@southshorehousing.org

Metropolitan Boston Housing Partnership

569 Columbus Avenue
Boston, MA 02118
Janet Billane
617-859-0400 x286 (v)
Billane@mbhp.org

From the Center

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only to sustain progress but to preserve the progress which has already been made.

Whichever candidate forms the next administration, he will have virtually no mandate to direct his policy. We must waste no time in making our concerns about equal access and equal opportunity heard loudly in the corridors of power. This is a moment in American history when attention will be paid to those who demand it.

We must **all** work together to demand the attention our issues deserve.

Etiquette

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Basic Rules

In most encounters with persons with a disability you will behave exactly as you would with anyone else. Don't stare. Don't look away as if they don't exist. Talk to the person, not to any companion.

People with disabilities have diverse personalities, just like the rest of us. Some love to be helped and fussed over, others take fierce pride in their independence.

It's never wrong to offer help to persons having disabilities, but if they decline your assistance, never insist. If they accept, ask for specific instructions, and follow them. Talk about a person's disability if it comes up naturally, but don't pry.

Visual Impairments

Introduce yourself and anyone with you when you first approach. Particularly in business settings or large groups, use names with every exchange, so the person with the vision impairment knows who's talking to whom.

Never leave without saying your leaving. The person may think there was simply a pause in the conversation, and start talking to thin air.

Offer to read written material out loud if you do not have it available in large print, braille, or on audiocassette.

If handing over more than one item, describe exactly what's there, what's on top, in the middle, and on the bottom.

To properly escort persons with visual impairments, let them take your arm, rather than

grabbing theirs.

Hearing Impairments

First, get their attention by giving a visual signal such as a wave. If that is not successful, tap them lightly on the shoulder.

Second, position yourself so your facing both the light source and the person your speaking to. Always provide a clear view of your face, and speak at a normal to slow pace.

Never shout. If the person is deaf, it won't do a bit of good. If the person is hard of hearing - especially if she uses a hearing aid - shouting will distort the sound. If necessary, use written communication, but don't talk and write at the same time.

If a signing interpreter is present, speak to and maintain eye contact with the person who is deaf, even though that person will be looking between the interpreter and you.

Mobility Impairments

Shake the hand that's extended to you. If offered the person's prosthesis or hook, that's the hand you should shake. If offered the left hand, you can shake it with your right. If shaking hands isn't an option, touch the person on the shoulder or arm as a sign of greeting and acknowledgment.

A wheelchair is part of a user's personal space. Never lean or hang on it.

When speaking with persons using wheelchairs place yourself at their eye level if the conversation is going to last for more than a few minutes. This is not only more respectful, it's also easier on the person's neck.

Never push a wheelchair without getting the person's permission. The remember that it is not

the same as pushing a grocery cart. Watch out for the foot plates protruding in front...

Assistance Dogs

Most of us are familiar with the image of a guide dog leading a person who is blind. However, there are other types of assistance dogs. Service dogs can conduct business transactions for people in wheelchairs, passing money to a cashier, accepting change and packages.

Persons who are deaf might wake up in the morning to a Corgi or Labrador jumping on their bed.

Never touch hearing, guide, or service dogs unless the person gives you permission, particularly when these animals are working.

Don't call the dog or try to get its attention.

Never feed working dogs. Don't even offer them water without asking first. These animals have feeding schedules, and they have "relieving" schedules. Disturbing their routine could be, at best, an inconvenience. If you sneak these dogs a snack, and they become ill, you could put the dog's person in danger.

More Information

If you would like more information about disability etiquette or are interested in recommending these consulting services to a business of organization, you may contact W. C. Duke Associates at 8049 Ormesby Lane, Woodford, VA 22580: 804-633-6752 (v & tty), 800-673-1224. You may also visit their website at **www.wcduke.com**.

[ed. The Center thanks W. C. Duke Associates for permission to excerpt the copyrighted material included in this article.]

Medical Errors

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3. Make sure your doctor knows about any allergies and adverse reactions you have had. This can help you avoid getting a medicine that can harm you.
4. When your doctor writes you a prescription, make sure you can read it. If you can't, your pharmacist might not be able to either.
5. Ask for information about your medicines in terms you can understand both when your medicines are prescribed and when you receive them. What is it for? How do I take it, when, how long? What can the side effects be and what to do? Is this medicine safe to take with other medicines or supplements I am taking? What food, drink, or activities should I avoid?
6. When you pick up your medicine from the pharmacy, ask if it is what your doctor prescribed. A study by the Massachusetts College of Pharmacy and Allied Health Sciences found that 88 percent of medicine errors involved the wrong drug or the wrong dose.
7. If you have any questions about the directions on your medicine labels, ask.
8. Ask your pharmacist for the best device to measure your liquid medicine and how to use it. Research shows that many people do not understand the right way to measure liquid medicines and may use a household teaspoon instead of a measuring spoon, for example.
9. Ask for written information about the side effects your medicine could cause.

Hospital Stays

10. If possible, choose a hospital at which many patients with your problem are treated, or have the procedure or surgery you need. Experience is the best teacher!
11. If you are in a hospital, consider asking all health care workers who have direct contact with you whether they have washed their hands. Hand-washing is an important and often ignored way to prevent the spread of infections in hospitals. A recent study found that when patients checked whether health care workers washed their hands, the workers washed their hands more often and used more soap.
12. When you are being discharged from the hospital, ask your doctor to explain the treatment plan you will use at home. Research shows that at discharge time, doctors think their patients understand more than they really do about what they should or should not do when they return home. It may be necessary to modify this plan to accommodate a disability.

Surgery

13. If you are having surgery, make sure that you, your doctor, and your surgeon all agree and are clear on exactly what will be done. Doing surgery at the wrong site (for example, the wrong leg) is rare, but once is too often if it's you!

Other Steps You Can Take

14. Speak up if you have questions or concerns. You have every right.
15. Make sure that someone you trust and who knows you and your disabilities, such as your

personal doctor, is in charge of your care. Ask the specialist treating you to consult with the doctor who treats your disability so that he/she knows any special considerations that may apply. [*ed. We have found that most doctors are not very familiar with disability and need to be reminded to take it into consideration.*]

16. Make sure that all health professionals involved know your particular situation.
17. Ask a family member or friend to be there with you and to be your advocate. Even if you think you don't need help now, you might need it later. Many medical treatments are disorienting and may, temporarily reduce your decision making capacity.
18. Know that "more" is not always better. Ask why a test or treatment is needed and how it can help you. You might be better off without it.
19. If you have a test, don't assume that no news is good news. Ask about the results. "We didn't find anything" is not an answer. Don't stop looking until the doctor has an explanation for your condition.

20. Learn about your condition and treatments by asking your doctor and nurse, or reading up on it. For example, treatment recommendations based on the latest scientific evidence are available from the National Guidelines Clearinghouse at <http://www.guideline.gov>.

More Information

A Federal report on medical errors can be accessed online, and a print copy [Publication No. OM 00-0004] is available free from the AHRQ Publications Clearinghouse (1-800-358-9295).

Resources

Web Links

The Information Center's web site, www.disability.net, is growing somewhat more slowly than we hoped. Nevertheless, it is a useful source for current and past issues of *Disability Issues* organized for easy access to past articles of interest.

The Center intends to start linking our site to other useful sites for disability related information and services. If you use the internet as a resource in dealing with disability, you can assist us, and others, by telling us about sites which you have found useful. We need not only the address of the site but a description of what it contains and how it has proved useful to you. Your participation in suggesting and reviewing sites would be greatly appreciated.

If you have a web site and want to be sure it is accessible to everyone, there are, at least, two resources to help.

The Web Accessibility initiative can be found on-line at www.W3.org/WAI where you can find complete guidelines and checklists for accessible web design.

Among their "quick tips" are:

Images & animations. Use the alt attribute to describe the functions of all visuals.

Image maps. Use client-side MAP and text for hotspots.

Multimedia. Provide captioning and transcripts of audio, descriptions of video, and accessible versions in case inaccessible formats are used.

Hypertext links. Use text that makes sense when read out of context. For instance, do not use "click here."

Page organization. Use headings, lists, and consistent structure. Use CSS for layout and style where possible.

Graphs & charts. Summarize or use the **longdesc** attribute.

Frames. Label with the **title** or **name** attribute.

Check your work. Validate the HTML. Use evaluation tools and text-only browsers to verify accessibility.

The Center for Applied Special Technology offers a free web-based service called Bobby that analyzes web pages for accessibility.

You may go to <http://cgi.zdnet.comslink?16834:5324518> and enter the URL of the page you want evaluated.

Life Center

Living Independently for Equality, Inc. (LIFE) is a nonprofit organization for physically disabled adults to come together for socialization and friendship. The Life Center is located in the National Guard Armory at 98 Montauk Road, Brockton, MA. It is open Tuesdays thru Thursdays from 10 am to 4 pm.

The Center offers a wide variety of programs: arts & crafts, exercise, ceramics, bingo, cards, plus free snacks and lunches. Every other Monday they have wheelchair bowling. From April thru December there are monthly trips to theaters, luncheons with entertainment, day cruises, museums, and cookouts with swimming in an accessible pool. Transportation on trips is provided.

Every Wednesday night the Center hosts dinner and bingo in a Brockton restaurant. All this for an annual membership fee of just \$25.00.

If you are in the Greater Brockton area and are interested in meeting friends and having fun, give the Life Center a call at 508-586-5759 or 508-587-4651. Life Center, P.O. Box 2356, Brockton, MA 02303

Subscriptions to *Disability Issues* are available to all who find this publication useful and interesting. There is no fee, however, contributions to help defray the cost ensure the future of our efforts. Your tax-deductible donation, in whatever amount you can manage, will be greatly appreciated, and put to good use.

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Computer Assistance

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ers to improve the effectiveness of the equipment they are now using. Since most of the resources you can actually get to come to your home are ignorant of the special circumstances of computer applications related to living independently, this is a welcome and needed service.

The Easter Seals Assistive Technology Center in Worcester, MA is one of the best and most comprehensive of its kind. That they are now able to bring their expertise right into the homes of those they serve is a significant step forward.

The goal of this pilot program is to deliver assistive technology services that will improve the individual's ability to function, continue functioning, or move towards functioning independently in the family or community. An important aspect of the program will be the individual's motivation to achieve these goals

through the training and use of assistive technology and by the presence of support (family, friends, aides, etc) available to the individual both during and after training .

This program is generally not targeted towards individuals whose goals and abilities are vocationally oriented. These clients should seek out existing programs within appropriate State agencies such as the Massachusetts Commission for the Blind, Massachusetts Rehabilitation Commission, etc.

Referrals to the Easter Seals pilot program will be taken through a centralized intake system. Individual consumers, parents or independent living counselors may call the toll free number below. After the screening form is completed, Easter Seals will conduct an initial review and schedule a home screening visit for appropriate candidates. Candidates who are not suitable for this program will be notified, and if appropriate, referred to other agencies or

other pertinent programs within Easter Seals. You can expect a backlog to quickly develop, however, it should be well worth the wait.

An assistive technology specialist will schedule a home evaluation visit for qualified candidates. This visit may be conducted in conjunction with the initial screening visit, or scheduled separately. Once client needs are determined, Easter Seals will obtain the assistive technology required (if any), configure as necessary for the individual client, and deliver to the client's home. Training will be adjusted to individual skill level and needs.

All questions and/or referrals to this program should be sent to:

Easter Seals

Attn: Bob Orsini

484 Main Street, 6th floor

Worcester, MA 01608

Phone: 508-751-6431(v), 800-922-8290 x431(v), 800-564-9700(tty), 508-831-9768(fax)