

**GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2003**

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**SENATE JOINT RESOLUTION DRSJ65175-LN-35 (2/11)**

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Sponsors:    Senator Forrester.

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Referred to:

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

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

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

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

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

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

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

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

25            **SECTION 1.** The Legislative Research Commission may study the  
26   incidence and causes of medical errors occurring in hospitals, pharmacies, and other  
27   health care settings in this State. In conducting the study, the Commission may consider  
28   actions proposed or taken by other states and at the federal level to reduce medical

1 errors, including mandatory and voluntary medical error reporting requirements. The  
2 Commission may make recommendations on ways to reduce medical errors, including  
3 proposed legislation for consideration by the 2003 General Assembly, Regular Session  
4 2004, and the 2005 General Assembly.

5 **SECTION 2.** The Legislative Research Commission may make an interim  
6 report to the 2003 General Assembly, Regular Session 2004, and shall make its final  
7 report to the 2005 General Assembly upon its convening.

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