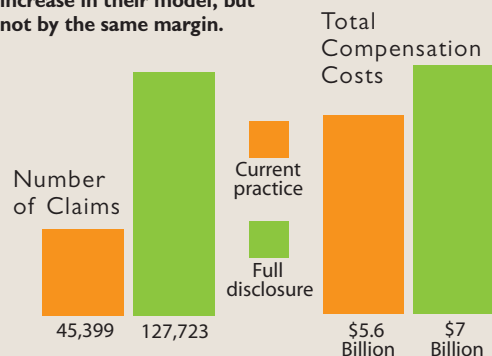


In a recent journal article, Harvard faculty estimated the impact if hospitals nationwide adopted a full-disclosure policy. They projected the number of claims would nearly triple; money spent to compensate patients would also increase in their model, but not by the same margin.



to the next one. Sometimes it's hard to hear the patient say, 'I need someone to talk to about this. This is a terrible outcome for me and my family.'

Brigham and Women's has instituted a Web-based reporting system for adverse events and near misses. Beth Israel now has mandatory reporting forms for adverse events, and recently added a section for recording details of the subsequent conversation. And MGH has added disclosure to the topics covered during the internal discussion that routinely follows each adverse event. Gregg Meyer, MGH's senior vice president for quality and safety, says giving disclosure such official status tells employees, "Not only is disclosure something that's permitted, it's something we expect."

Some proponents of open disclosure believe it will save money: if people find out what happened up front, the argument goes, they are less likely to sue. In one instance, five years after the University of Michigan hospital system adopted an open-disclosure policy, in 2001, the number of malpractice claims filed against the hospital system annually had declined more than 50 percent, and litigation costs decreased accordingly. But whether those results will hold true elsewhere is unclear. In a controversial paper published in *Health Affairs* last year, professors from HMS and HSPH, led by David Studdert, adjunct professor of law and public health, modeled what would happen if hospitals nationwide began practicing full disclosure. Even assuming the average amount paid out after a medical injury fell by 40 percent, they projected that the total spent on compensating patients would rise by about a quarter, from \$5.6 billion to \$7 billion a year, because the number of claims filed would nearly triple as more patients found out that they had been harmed.

That study's conclusions sparked a firestorm, but the people implementing the new policies at Harvard's teaching hospitals say questions of cost are beside the point. "This may save us money—I don't know. It's hard to say," says Hanscom. "We did it because we recognized that we really had to

support the physicians in their ability to do the right thing in their care of patients. We'll see how the money plays out."

As a self-insurance vehicle for teaching hospitals, rather than a commercial insurer, CRICO/RMF is uniquely situated to carry out such an idealistic reform. And the hospitals' teaching status means they, too, are uniquely situated to try something untested. "You have a lot of turnover among trainees, and so you can quickly inculcate a new philosophy," says Ken Sands

of Beth Israel. HMS itself has incorporated adverse-event disclosure into its curriculum: first-year students view Delbanco's documentary, and Leape's papers on error prevention and disclosure are required reading for third-year students.

Leape and others are pushing for even more complete integration. After all, frank conversations aren't just good for patients, they're good for doctors, too: hospitals, including Brigham and Women's, are creating peer-support programs to help staff members cope with stressful experiences. Leape has first-hand knowledge of adverse events' psychic toll. Thirty years ago, when he was a practicing surgeon, an 18-month-old child died while in his care. She had a bleeding ulcer, and Leape says he waited too long to operate. He apologized to the child's parents, but the incident left "an indelible impression." When something like that happens, he says, "you remember it forever."

Doctoral Director

ALLAN M. BRANDT became dean of the Graduate School of Arts and Sciences (GSAS), within the Faculty of Arts and Sciences (FAS), on January 1. A historian of science, Brandt holds a joint appointment as Kass professor of the history of medicine at Harvard Medical School (HMS). The appointment was announced on December 12 (see www.news.harvard.edu/gazette/2007/12.13/99-gsas.html).

Brandt will succeed Theda Skocpol, Thomas professor of government and sociology, who became dean in 2005 but announced her intention to step down last spring. She made her final report to the faculty at an FAS meeting on December 11; in it she highlighted forthcoming increases in financial aid for doctoral students in the social sciences and humanities, and new funds that will allow more graduate students in the sciences and engineering to be admitted across the University. (For details, see "Gains for Graduate Students," page 58, on the financial initiatives, and "Focusing on the Ph.D.," page 64, on Skocpol's tenure.)

Brandt chaired the history of science department during the 2000-2001 through 2005-2006 academic years. That adminis-

trative experience, his dual appointments in FAS and HMS, and the nature of his academic work should serve him well in his new responsibilities. As Skocpol noted, the GSAS deanship is neither organizationally powerful nor equipped with the financial resources available to the deans of Harvard's separate faculties. But it affords access to exciting research, faculty members, and graduate students across the University, because GSAS is the steward of all of Harvard's Ph.D. programs, many crossing disciplinary and even school boundaries (see www.gsas.harvard.edu/programs_of_study/programs_of_study.php for a complete list).

Of immediate relevance, during the fall term, Brandt (although on leave) began participating in the Graduate Policy Committee, which Skocpol established to review GSAS programs, resources, and directions. In that capacity, he worked directly with deans and faculty members in FAS, HMS, and the School of Engineering and Applied Sciences, and with GSAS administrative staff.

A Brandeis graduate who earned a Ph.D. in American history from Columbia in 1983, Brandt taught at Harvard from 1982 to 1990, and then returned in 1992. He has offered a popular undergraduate

Core course, Historical Study A-34, "Medicine and Society in America," and writes on the social and ethical aspects of health, disease, and medical practice, focusing on twentieth-century America. *No Magic Bullet* explores venereal disease. *The Cigarette Century: The Rise, Fall, and Deadly Persistence of the*

Product That Defined America, examines the tobacco industry (see "The Fall of the House of Ashes?" July-August 1996, page 19, on the research then in progress). It won the Albert J. Beveridge Prize of the American Historical Association and the Arthur Visel tear Prize of the American

Public Health Association. On his website for the book, Brandt wrote, "We now confront a worldwide pandemic of tobacco-related diseases as cigarette use has spread....It is my hope that *The Cigarette Century* provides a strong foundation for a critical discussion of new strategies to

Focusing on the Ph.D.

During her tenure as dean of the Graduate School of Arts and Sciences (GSAS), from mid 2005 through last December, Theda Skocpol says, "I got a Ph.D. in what it means to be a university administrator in two and a half years." Recognizing that the graduate-student experience can be far more diverse, isolated, and protracted than the undergraduate experience, Skocpol, who is Thomas professor of government and sociology, focused attention on graduate education as a whole in an effort to better ensure those students' successful preparation for their future role as scholars.

• Time to degree. Early in her deanship, Skocpol recalled during a December conversation, she sought data on each of the

separate Ph.D. programs—in particular, on how long it took students to complete classwork, their general examinations, and the dissertation. Such data had rarely been gathered, and even less frequently shared—despite national statistics indicating that fewer than half of humanities students complete the doctorate within 10 years. (The time to degree is typically longest in the humanities, where students may have to master multiple languages, and shortest in the sciences; social sciences fall in between.)

As of 2003-2004, according to the data, 8.5 percent of Harvard humanities and social-sciences Ph.D. candi-

dates were beyond their eighth year of graduate study—suggesting problems in completing their programs that put at risk their own careers and faculty members' investment in these advisees (plus hundreds of thousands of dollars of Harvard support). Skocpol talks about students getting "lost." Departmental performance—when members of an entering cohort took their generals, for example—varied widely.

In response, GSAS took corrective action. Funding was secured for dissertation fellowships: a year of writing uninterrupted by teaching, provided students have completed chapters in hand by their sixth year (or sooner) and use the funds in their seventh (so the money isn't an incentive to further delay). Near-

ly all applications for such fellowships were funded by the 2006-2007 academic year; only one-third had been funded two years earlier. (For other financial-aid news, see "Gains for Graduate Students," page 58.)

Skocpol added a stick to that carrot: for each five students enrolled in a doctoral program beyond the eighth year, departments would lose an admission slot the next year. The policy was put in place in late 2005, to take effect 18 months later. Sixteen of 24 humanities and social-sciences departments were then at risk of losing 33 slots in total. A year later, 14 departments still faced losing 23 slots.

But in the end, only two departments lost a slot apiece, as faculty members and students found ways to work together to accelerate graduation. Harvard conferred 71 humanities doctorates in 2005, 82 in 2006, and 99 in 2007. In social sciences, the numbers were 95, 98, and 110 in the same years. By her final report to the Faculty of Arts and Sciences (FAS), Skocpol noted that the share of students still working on their degrees past the eighth year had declined to about 4.7 percent.

• Teacher training. Skocpol led an FAS task force that recommended multiple incentives to improve pedagogy—from more rigorous evaluation of teaching during tenure reviews to equal assessments of classroom work and research in professors' salary reviews (see "Toward Top-Tier Teaching," March-April 2007, page 63). Many of the measures await action, but GSAS has implemented those pertaining to teaching fellows. A program now promotes full English competency, during the first graduate year, for students whose native language is not English. Graduate assistants should now have better training, more regular relationships with faculty course heads, and "dossiers" documenting their teaching when they go on the academic job market.

• Setting policy. Skocpol created the Graduate Policy Committee (GPC) to advise the GSAS dean on policies and financial resources, and to review each doctoral program (as is routinely done for undergraduate concentrations). The committee stimulates faculty involvement from all the schools participating in Ph.D. programs; informally, its members have become peer advisers on best practices from across the University. Under the GPC's aegis, the joint Ph.D. in science, technology, and management has been overhauled; FAS is about to approve a program in film and visual studies; and doctoral students, like undergraduates, now can pursue "secondary fields"—increasingly important as disciplines evolve.

In all, said Skocpol, despite fears that faculty colleagues could not cooperate or commit to innovations in graduate education, "That's not what I found."



Theda Skocpol



avert a potential global health disaster.”

As a scholar, Brandt has been involved in graduate training at the master's and doctoral level within both FAS and HMS; the latter's Ph.D. programs are offered through FAS's departments of anthropology and history of science. In 2005, he was appointed director of a new social-sciences track in the joint M.D.-Ph.D. program, combining work in anthropology, health policy, government, or psychology with clinical medicine (www.hms.harvard.edu/md_phd/program/sstrack.htm). In earlier FAS discussions concerning revision of the undergraduate curriculum, Brandt urged broad perspectives on how faculties from other Harvard schools

might be further involved in education in the College, and advocated a holistic assessment of students' coursework, extracurricular activities, and study abroad. He has also served as the director of the Collection of Historical Scientific Instruments (see “Telltale Apparatus,” March-April 2006, page 42).

In the official announcement, FAS dean Michael D. Smith noted, “Allan is an exceptional scholar and teacher who will bring to the position a deep understanding of the complex issues facing the graduate school.... [H]is service on committees, experience as a department chair, and his service as the director of the social-sciences track of the M.D.-Ph.D. pro-

gram give him a unique background on which to draw when looking broadly at our graduate programs.... With creative energy, enthusiasm, and a collaborative spirit, Allan will continue to move us forward in the areas of teaching, training, and funding for graduate students....”

THE UNDERGRADUATE

Off Harvard Time

by SAMUEL BJORK '09

MANY Harvard undergraduates give personal happiness and reflective decision-making short shrift in the race for academic accolades and pre-professional success: focusing on the seminar papers and section preparations, the problem sets and practice tests, the paperwork of fellowship applications, even the intensity of high-powered extracurricular commitments. At least, as the four semesters between my first ill-fated math set freshman year and the caffeine-fueled completion of my final sophomore essay flew by, that was the case for me.

Unsure of what I wanted to do with the second half of my undergraduate career, and still a bit startled by the first, I took time off for a bit of service and self-reflection, seeking an antidote to Harvard time in the languor of African time. Since September, I've made my home in Gaborone, the capital of Botswana, a dusty, sunny, and rather quiet country of bleating goats, braying donkeys, and the second-highest prevalence of HIV in the world. I've come, appropriately enough, to work on a public-health project aimed at assisting pri-

mary- and secondary-school teachers in the fight against the HIV and AIDS epidemic in their classrooms.

At least, that was the plan. In reality, the first few months in-country found my stomach too often in my mouth for self-reflection, and whatever “service” I hoped to render seemed an exercise in futility: my poor command of the local language severely handicapped me; the grossly overworked government officials involved with the project had limited time and resources to offer; and what few results I did get left much to be desired. My enthusiasm for my work waned. I raided libraries to justify my growing cynicism and found, through an unfair fixation on the critical parts of otherwise nuanced books, enough validation to have me washing my hands of global do-gooding for life.

I should have taken a bus instead. “When does this leave?” I impatiently asked the driver the first time I did, leaning over the tightly bound and blinking chicken with which I shared my seat. “When it is full,” he replied with a leisurely smile. Some minutes later, a respectable-looking man sat down opposite

the chicken, looked with amusement at my fingers drumming on the seat-back, and pointedly closed his eyes, falling into the endemic African trance-like state of endless patience. Two hours later, the bus was full, and my own impatience had turned to embarrassment. I realized that I had never really left Cambridge, never really left the world of deadlines and timetables, of problem sets to be solved and turned in on time. I had a lot to learn, and Widener couldn't help me.

I SOON FOUND other ways to be a student. Not long after the bus incident, I traveled with a team of community workers to villages outside Gaborone to test at-risk inhabitants for HIV infection. We drove past sun-burnt fields, worked by stooping women with babies strapped to their backs; past the spreading acacia trees where their husbands gulped cheap *chibuku* by the liter. Some trips to village health centers brought empty rooms and disheartening facilities; at other times, with a bullhorn declaring our presence and purpose for all to hear, our car was surrounded by eager subjects. Back in Gaborone, Western doctors working on the hospital wards introduced me to the maddening unpredictability—the needless deaths, the spectacular recoveries—of Third World medicine. For every excuse to doubt the future of this embattled country, I learned there was a reason to hope.

I had also hoped to teach. Gradually, the team of medical officers and social