

Wisconsin rates a C- for emergency care, report says

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A national report ranks Wisconsin as average for its support of emergency medicine in the state.

But Wisconsin experts contend that the report's categories and data are misleading — and in some cases wrong — and the study doesn't accurately portray what's happening in the state.

"The report does not mean that emergency physicians are doing a bad job, and it does not say that hospitals are dangerous or providing substandard care," said Howard Croft, an emergency physician at Columbia St. Mary's, Milwaukee Campus, and former president of the Wisconsin chapter of the emergency physicians group that released the report.

The report, released Tuesday by the American College of Emergency Physicians, gave Wisconsin an overall grade of

C-, saying the state could easily slip from its 29th-place ranking without major improvements.

That's the same grade given to the nation, whose emergency care system is increasingly characterized by crowding, declining access to care, soaring liability costs and a poor capacity, the agency says.

"We all believe that if something happens to us, we'll all be able to be taken to an emergency room and get the care we need," said Frederick C. Blum, president of the emergency physicians group. "But that is an assumption that can no longer be made."

Wisconsin received its best mark — B+ — for access to emergency medicine because of its high number of emergency departments per 1 million people, the annual contribution to the State Children's Health Insurance Program, and the number of registered nurses per 1,000 people.

However, the state got a D+ for quality

and patient safety because of its limited number of medical residents and medical residency programs; a D for its medical liability environment because there is no cap on non-economic damages; and a D+ for public health and injury prevention because there is no primary seat belt law enforcement, nor is there a requirement for motorcyclists to wear helmets.

"The report has some good intentions and highlights some good areas for us to improve," said Stephen W. Hargarten, chief of emergency medicine at Froedtert Memorial Lutheran Hospital in Wauwatosa.

But the report incorrectly stated that Wisconsin lacked unintentional-injury prevention programs such as fall prevention programs and child safety seat programs, said Hargarten, who also serves as the director of the Firearm Injury Center and the Injury Research Center at the Medical College of Wisconsin.

1-11-06 MJS