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FINAL MINUTES

**MEETING OF:
PATIENT SAFETY AUTHORITY**

ONE HACC DRIVE
WILDWOOD CONFERENCE CENTER
HARRISBURG, PA

TIME: 10:50 a.m.

DATE: November 13, 2007

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PATIENT SAFETY AUTHORITY

Public Meeting

November 13, 2007

Agenda

- I. Call to Order
- II. Approval of October 9, 2007 Meeting Minutes
- III. Report of the Board Chair
- IV. Report of the Board Executive Director
- V. Committee Reports
 - Legislative Committee
- VI. PA-PSRS Update
 - Discussion of Anonymous Report Investigation
- VII. Old Business
 - Initiative Updates - Initiative Champions
 - o HAI Implementation
 - o Nursing Home Information
 - o Education and Training
 - o PASSKEY and Extended Presence
 - o Hospital Board Education
- VIII. New Business
 - Presentation by John Combes, MD - President & Chief Operating Officer, Center for Healthcare Governance
 - 2008 Board Meeting Dates
- IX. Public Comments
- X. Adjournment

1 Patient Safety Authority

2 November 13, 2007

3 Ana Pujols-McKee, M.D., Chair (phone)
4 Stanton Smullens, M.D.
5 Gary Merica, R.Ph.
6 Roosevelt Hairston, Esquire
7 Lorina Marshall-Blake
8 Laurene M. Baker, Communications Director
9 Anita Fuhrman, RN, BS
10 Cliff Rieders, Esquire (phone)
11 William F. Goodrich, Esquire (phone)
12 Joan Garzarelli, RN, MSN
13 Marshall W. Webster, M.D.
14 Mike Doering, Executive Director
15 Barbara Holland, Board Counsel
16 Sharon Hutton, Administrative Assistant

17
18 Also Present:

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20 John Clarke, M.D.
21 John Combes, M.D.

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PATIENT SAFETY AUTHORITY

The regularly scheduled meeting of the Patient Safety Authority was held on Tuesday, November 13, 2007. Stanton Smullens, M.D., Vice-Chair, called the meeting to order at 10:50 a.m.

Approval of Minutes of October 9, 2007, meeting. Dr. Smullens made the first order of business to approve the minutes from the October 9 meeting. They were unanimously approved.

Report of Board Executive Director [Mike Doering reported that he would be giving a presentation to the Central Pennsylvania Association of Health Care Quality in Harrisburg describing the Authority, its work and plans. He stated that he, Bill Marella, and Bonnie Haluska will serve as faculty for a webinar to be conducted on Thursday, November 15. The webinar will be focusing on the importance of near miss reporting. Regarding anonymous reports, in an effort to make sure that anonymous reports are available, Mr. Doering noted that Laurene Baker has updated the anonymous report form and designed a brochure around it. He next reported that the

1 Pennsylvania Department of Insurance asked to meet
2 with PSA. Laurene Baker, Bill Marella, Barbara Holland
3 and he met with the Department of Insurance on
4 November 2. They gave an overview of the Authority,
5 PA-PSRS accomplishments and the Authority's strategic
6 plan. He stated the Insurance Department would like
7 to see if there's a possibility of learning from each
8 other's data and results which was a good idea for
9 potential collaboration. Mr. Doering reported on a
10 PA-PSRS enhancement regarding the Patient Safety
11 Advisory and distribution. He said a system will be
12 put in place that will be able to identify pertinent
13 articles, most notably the Authority's own Advisory
14 articles, that can be sent to patient safety officers
15 based on event type information. He explained that an
16 event is reported to PA-PSRS, the system will go
17 through and match that event with different articles
18 that have already been written on those subjects and
19 will be able to send those articles directly to the
20 PSO in an e-mail within a day after they send in a
21 certain report. Mr. Doering reported that the
22 Department of Health is calculating the hospital
23 assessment and that should go out soon. He noted
24 that the balance of the Patient Safety trust fund at
25 the end of August was approximately \$3.2 million.

1 Some invoices have been put in against that so it's
2 estimated to be down to about \$2.4 million at
3 present.]

4 ***

5 Committee Reports

6 [Roosevelt Hairston reported that at the request of
7 Senator Patrick Browne, there was a meeting held with
8 one of his legislative aides concerning SB-217. This
9 piece of legislation required or made certain changes
10 to set up among other things a hot line that persons
11 could call in for anonymous reporting and that report
12 would have to be investigated. Mr. Hairston stated
13 they gave some feedback on the legislation. The
14 legislation contains some enhanced whistleblower
15 protection provisions, which the Authority fully
16 supports. Mr. Hairston stated the Authority expressed
17 that there were several discussions about the
18 Authority's role as being more educational as opposed
19 to punitive, and that the type of investigation that
20 was being called for in the legislation was more in
21 tune with the regulatory body as opposed to an
22 authority that spends more time on education and
23 enhancing the knowledge of the care providers. He
24 noted that the legislation allows the Authority to
25 make recommendations without DOH approval. Regarding

1 the hotline, Mr. Hairston noted that was a good idea,
2 but the Authority feels that DOH already has a hotline
3 and that DOH was the appropriate place to answer
4 whatever calls might come in. One major component of
5 that has to do with the fact that the Authority's
6 jurisdiction is limited to certain types of
7 facilities. DOH's jurisdiction is much broader and in
8 line with what the legislation charged. He stated that
9 the staff welcomed the comments and marked up the
10 legislation with the additional comments afterwards
11 and sent it for the Authority to review.]

12 ***

13 PA-PSRS Update

14 [Dr. John Clarke reported on a follow-up to an
15 anonymous report about a romantic relationship between
16 a parent of a patient and a worker in an institution
17 where the institution indicated that they felt there
18 was no harm to the patient. He reported that a PA-
19 PSRS analyst went to the institution and reviewed the
20 documents from the inpatient medical record, the
21 outpatient medical record, and the human resources
22 department. Review supported the fact that there was
23 no documentation in the records indicating any
24 emotional stress either during the child's inpatient
25 or outpatient care relative to the relationship. Dr.

1 Clarke stated the record supported the facility's
2 conclusion and that the Authority's original
3 recommendation that there was no harm and therefore
4 nothing for the Board to address is an appropriate
5 one. The Board voted unanimously not to send the
6 report to the Department of Health for review since it
7 was determined there was no harm to the patient and
8 therefore not a Serious Event.]

9 ***

10 Old Business

11 [Dr. Stanton Smullens reported on the Healthcare
12 Associated Infection Act 52 implementation. He stated
13 that a major part of the Act 52 legislation states
14 that by February 14, 2008, all the hospitals must
15 report health care associated infection data to the
16 CDC's National Healthcare Safety Network, and that the
17 hospitals authorize permanent access to the data to
18 the Department of Health, PHC-4, and to the Patient
19 Safety Authority. There is an attempt by the Hospital
20 and Healthsystem Association of Pennsylvania (HAP) to
21 have all hospitals reporting by January 1, 2008. All
22 health care associated infections reported to the NHSN
23 will automatically be considered a serious event and
24 must be recorded as such to the Patient Safety
25 Authority and the Department of Health within 24 hours

1 after discovery and also a written notice must be
2 given to the patient and/or the patient's family. Dr.
3 Smullens noted that as part of the law an infectious
4 disease advisory panel had to be established by the
5 Patient Safety Authority. The first advisory panel
6 meeting occurred on October 15. It was well attended
7 by all the various groups. Dr. Smullens acknowledged
8 there are still many questions that need to be
9 answered regarding the reporting requirements
10 particularly in regard to surgical site infections.
11 Mike Doering and Bill Marella are working with DOH and
12 NHSN to determine how fields will be customized for
13 facilities so facilities are not burdened with
14 duplicate reporting. Also, getting the nursing homes
15 on board will be a huge undertaking that will be
16 discussed by Joan Garzarelli later in the meeting.

17 ***

18 [Joan Garzarelli reported on the nursing home
19 initiative. She stated the advisory panel has
20 identified a couple of logistical issues with
21 implementation of Act 52 as it applies to long-term
22 care. Currently nursing homes do report to the
23 Department of Health using an electronic reporting
24 system but it's not in any way similar to PA-PSRS.
25 She stated the advisory panel is convening a

1 subcommittee of people to look specifically at the
2 definitions of the reportable infections in nursing
3 homes. The nursing homes will not be reporting
4 infections as soon as hospitals, but probably in the
5 Summer 2008.]

6

7 [Lorina Marshall-Blake reported that the new user
8 training webinar materials are developed and are ready
9 for presentation. She stated a webinar is scheduled
10 for December 14, and also a project is being developed
11 to introduce patient safety into the curriculum of
12 medical, nursing, and pharmacy schools. Ms. Blake
13 also noted the web site is being updated and
14 modernized. Ms. Blake also mentioned the need for the
15 Authority to hire more staff to help implement the
16 initiatives in the Authority's strategic plan. Mr.
17 Reiders expressed an interest in becoming involved
18 with the Authority's educational initiatives to help
19 educate facilities about issues, particularly in
20 regard to the Serious Event notification letter.]

21

22 [Gary Merica reported on the extended presence and the
23 Patient Safety Knowledge Exchange project
24 (PASSKEY) initiatives. He stated the extended presence
25 initiative grew out of focus groups of patient safety

1 officers from across the state who felt strongly that
2 they needed more direct interaction with the Authority
3 or representatives from the Authority. He stated a
4 program has been developed whereby staff would have
5 the title of patient safety liaison, and they would be
6 involved in sharing information between facilities,
7 implementing a program to promote disclosure,
8 organizing and supporting PSO work groups and
9 supporting the knowledge exchange. Mr. Merica stated
10 the Patient Safety Knowledge Exchange initiative is to
11 develop a secure information sharing site for patient
12 safety officers and ties directly with revising the
13 PA-PSRS web site to allow it to be a more interactive,
14 more useful, and more functional site for patient
15 safety officers where they could go and obtain
16 information. Mr. Merica said a group of patient safety
17 officers would be meeting at the Authority later this
18 week to begin site design. Mr. Merica also reiterated
19 the need for the Authority to be able to hire staff to
20 implement the program.]

21 ***

22 New Business

23 [Dr. John Combes, President & Chief Operating Officer
24 of the Center for Healthcare Governance, gave a
25 presentation on hospital board education. He stated

1 the Center works exclusively with boards around the
2 country to develop their governance skills and to
3 bring new products and services to them. He went on
4 to discuss the curriculum which consists of six levels
5 of quality that trustees have. They include: the
6 organization's mission, organizational performance,
7 culture, organizational leadership, strategy and
8 resource allocation, Dr. Combes played a video clip
9 that sets the stage of the opening part of the
10 program. The Authority Board instructed the Executive
11 Director to participate in a work group established by
12 HAP. The work group will determine how the program
13 could be implemented in Pennsylvania. Dr. Smullens and
14 Mr. Merica volunteered to be part of the work group.

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17 [The meeting adjourned at 12:15 p.m.]

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