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KATHARINE LONDON
Executive Director

Patient Safety Committee

Meeting Minutes

Wednesday, October 1, 2008
11:00 AM – 12:30 PM
One Ashburton Place, 21st Floor, Boston MA

Council Members Present: Beth Capstick (Chair), Louis Freedman representing Dolores Mitchell, and Katharine London.

Meeting called to order at 11:02 AM.

I. Review and Approval of Minutes from September 8, 2008 Meeting.

Jessica Ross informed the group that the draft minutes had been slightly revised to indicate that the need to focus on care transitions had been identified by the Massachusetts Coalition for the Prevention of Medical Errors. The Committee approved the minutes as amended.

II. Update on FY08 Goals on SREs and HAIs

Paul Dreyer, Director of the Bureau of Health Care Safety and Quality at the Massachusetts Department of Public Health, updated the group on the current effort to catalogue and report the number of serious reportable events (SREs) and hospital-associated infections (HAIs) in the state. He noted that the report on SREs occurring during the first half of 2008 is due later in the month. Paul estimates there were approximately 200 SREs during this time, with falls accounting for 150 of them. DPH plans to report number of SREs by hospital in March/April of 2009; these numbers will be posted on the HCQCC website. Paul also told the group that all state hospitals have signed up to report HAIs to the Department of Public Health, and those reports were due on September 30th, 2008.

Katharine London, Executive Director of the HCQCC, reminded participants that Kate Nordahl, Assistant Commissioner of the Division of Health Care Finance and Policy, is leading the effort to identify an appropriate hospital-wide all-mortality measure. Kate organized an expert panel and is working to recruit multiple vendors and hospitals as pilot participants. Nancy Ridley of the Betsy Lehman Center/Department of Public Health noted that NQF is very interested in developing an all-DRG, all-hospital measure, and is following this effort with interest.

III. Development of the Committee's FY09 Agenda and Workplan

Beth Capstick updated the group on her recent conversations with Alice Bonner, Paula Griswold and others regarding FY09 Committee priorities. Beth noted that three clear areas of focus have emerged from these discussions:

1. Improving oversight and outcomes during care transitions
2. Establishing standards for and increasing the adoption of patient safety programs across all health care settings
3. Implementing infection prevention measures in settings other than hospitals

In order to move these issues forward, Beth recommended the formation of three workgroups, with the following project leads:

1. Care Transitions Workgroup: Alice Bonner, Executive Director of the Massachusetts Long Term Care Foundation. Contact: abonner@mecf.org

2. Patient Safety Programs Workgroup, led by Jack Evjy, Medical Affairs Advisor to the Massachusetts Medical Society. Contact: jevjy@mms.org

3. Infection Prevention Workgroup, led by Paul Dreyer, Director of the Bureau of Health Care Safety and Quality at the MA Department of Public Health. Contact: paul.dreyer@state.ma.us

Participants agreed that these workgroups would undertake the following tasks:

- Define the issue and scope of the problem
- Identify key stakeholders across the state who should be included in discussions on this topic
- Identify potential interventions
- Estimate potential benefits to patients and dollar savings to the health care system, as well as implementation costs
- Prioritize interventions based on potential benefits and savings
- Identify performance measures and when these should be publicly reported
- Identify performance measurement benchmarks, where available
- Identify sectors responsible for implementing interventions, and methods for holding these entities accountable

Katharine London and Beth Capstick agreed to issue an email describing the formation of these workgroups, and inviting interested parties and stakeholders to participate.

The meeting adjourned at 12:04 PM.