



November, 15, 2005

Approved by Commission on January 31, 2006

Present: Nancy Chi, Sandra Douma, Andreas Goldner, Bruce Johnson, Susan King, Gloria Larson, Roy Magnusson, Glenn Rodriguez, David Widen., Administrator: Jim Dameron.

Excused: Susan Allan, David Hartwig, Judith Hibbard, Lewis McCoy, George Miller, Maureen Wright

Issues Heard:

- Approval of Minutes
- Public Comments
- Commissioner Updates
- Strategic planning follow-up
- Review of draft administrative rules for hospital reporting

Call to order: Welcome. Quorum present.

Approval of Minutes: Commissioners reviewed the draft minutes from the August 23, 2005 meeting. Minutes were unanimously approved with no changes.

Public Comment: None

Commissioner Updates: Judy Hibbard sent a letter to the Administrator saying that she had decided to resign her seat because she was unable to attend meetings regularly. "I very much support the work of the Commission and I think you and the Commissioners are doing critically important work that will ultimately improve care for us all." Glenn Rodriguez noted Judy's national reputation in consumer use of quality data and expressed the sadness of the Commission in seeing her leave.

Strategic Planning Follow-up: The Commission reaffirmed the strategic goals it established at the October 4, 2005 meeting.

Review of 100,000 Lives Campaign:

- RRT – concerned about the level of burden to implement in rural hospitals
- RRT -- Heightens awareness that it is OK to call in team. That is important.
- Networking and sharing. That is the most valuable part of IHI.
- Don't be too prescriptive.

Leslie Ray gave a report on IHI participation in Oregon. 26 hospitals participating in one or more interventions. No single hospital has all 6 in place. Most work to be done on RRTs and medication reconciliation.

Review of Administrative Rules for Hospital Reporting:

Key decisions:

- Created the concept of “hospital participant” – a hospital that has volunteered to participate.
- Created the idea of “Reportable Hospital Serious Adverse Event”
- Defined reportable hospital SAE as ‘Appendix A’ (and removed other language from statute).
- Removed the obligation for hospitals to provide the Commission with policies and procedures describing their patient safety practices. Instead these must be made available if the Commission asks to see them.
- Dropped language about sharing the Commission’s logo.
- Dropped the pro-ration of fees. Fees will be paid annually, at the full amount, regardless of when the hospital joins.
- Changed the frequency of the Public health Officer’s certifying function from ‘twice annually’ to ‘annually.’
- Simplified the ‘general’ definition of SAE in Appendix A.

Next Steps

- Staff and legal council were asked to make and review the changes, then publish another draft for continued public comment. The final public hearing is scheduled for January 10, 2006.
- Continue working on Nursing home pilot
- Bring pharmacy advisory group together

Submitted by Jim Dameron (January 27, 2005)