

# ***Nebraska Coalition for Patient Safety***

## ***Meeting Minutes***

Wednesday, August 01, 2007

### **I. Call to order**

**Stephen Smith, MD** called to order the regular teleconference meeting of the **Nebraska Coalition for Patient Safety (NCPS)** at **11:00 am** on **Wednesday, August 01, 2007**.

### **II. Roll call**

S. Smith conducted a roll call. The following persons were present: D. Brown, E. DeSimone, C. Kampschnieder, M. Seeland, R. McQuillan, S. Smith, P. Scholting, and A. Svoboda. Absent: M. Horn, R. Driewer, K. Jones, E. Olson, and C. Mlady.

### **III. Approval of minutes from last meeting**

Members of the BOD reviewed the minutes from the last meeting. The minutes were approved as read.

### **IV. Open issues**

- a) **Finance Committee Report.** Ed DeSimone, RPh, PhD
  1. Treasurer's report. For the period ending July 31, 2007. Balance of \$57,668.33. No income. No expenses. Balance of July 31, 2007 of \$57,668.33.
  2. 501(c)(3) status. Granted through the IRS in July.
  3. Grant writing. Moving forward with grant writing. Upcoming deadline is October 15, 2007.
- b) **Education Committee Report.** Robert McQuillan, MD
  1. TeamSTEPPS Train the Trainer program. The Education Committee held a recent teleconference meeting to discuss this proposed program set for October 18, 19, 2007 to take place at the Creighton University Hospital. Target audience would be smaller hospitals. This program would include training as well as local support. The Creighton Continuing Education department will develop the program to include CME/CEU hours for participants. There is a 200-participant capacity at the facility. R. McQuillan suggested the NCPS co-sponsor the program which would include financial backing. It was suggested the NCPS committed \$5000.00 to the program. The current 2007 NCPS budget has committed \$15,000.00 toward education in patient safety and related programs. Various grant options were discussed which could be used to finance this program. A motion was made to have the BOD vote on whether \$5000.00 of the 2007 NCPS budget for education should be directed toward co-sponsoring the TeamSTEPPS training

program. The vote was 5 to 2 in favor of such funding. In return the brochure will include the NCPS name and logo in its publications.

2. Association annual meeting presentations. R. McQuillan requested of the board dates in which their respected associations will hold their annual meetings. Arrangements will be made to present to the associations an update on the progress of the NCPS.

**c) Reporting Committee Report.** Steve Smith, MD

1. Update-pilot reporting project. Refer to following meeting minutes.

**Nebraska Coalition for Patient Safety  
Reporting Committee Meeting Minutes  
July 31, 2007**

*Present: Steve Smith, M.D., Ed DeSimone, R.Ph., Ph.D., Monica Seeland, Greg Schieke, Sam Augustine, Pharm.D., Katherine Jones, Ph.D, Myrna Newland, M.D., Angie Svoboda, Pharm D., R.Ph.*

*Confidentiality Statements for non board members were circulated and signed.*

*The committee reviewed the reports, which had been received as part of our pilot project. For confidentiality reasons, discussion regarding these cases will not be posted in the minutes, which are circulated to the Association Board Members and posted on our public website.*

*The committee agreed that this was very valuable information and although the number of reports might not be as many as we had originally hoped, there was rich information on those we received. Looking at the themes, it is obvious that most if not all of this information would be applicable to any hospital in this state, be it critical care or a major medical center.*

*We discussed the quality of the root cause analyses and these were quite variable. 18 were simply a list from a medication log without any analysis or risk adjustment, several had root cause analysis information attached which was less than optimal, and some were exemplary. It is obvious we have a lot of work to do with education. Common themes noticed were:*

1. *The action plan did not necessarily relate to the identified root cause analysis*
2. *That accountability for resolution of an identified causal factor was not necessarily assigned*
3. *That a date for resolution was not assigned*
4. *On several of the reports, the action plan listed more ideas than true action steps. Words such as "might" or "could" were used instead of "will" and addressing resolution of an issue.*

*We discussed the formatting of these reports and decided that there are certain things that we absolutely must have including an assessment of the risk scoring and the narrative summary of the case but that any hospital who wanted to use their own format could do so. We felt if we mandated a format, it might prohibit organizations from participating. A particular process titled Taproot was used by one discussed focusing on near miss issues as opposed to actual events. While we all understand that the near miss issues are rich with data as well, we do not feel we are ready to move to that step yet. The committee agreed that we should start with institution and provides an easy summary of the report and finding information was quite easy to do.*

*We will explore whether or not this software program, which comes from the Department of Defense, is available to other institutions at no charge.*

*We reports of actual incidences and as we develop our processes for review and reporting of these, we could expand to near miss at some point in the near future. This is the same track that the States of Oregon and Minnesota have taken.*

*Lastly, we felt the time was correct now to begin to share this information with hospitals as we begin to recruit membership to our coalition.*

*The submitted reports were collected by Monica for shredding.*

*Stephen B. Smith, M.D.*

2. The BOD reviewed and discussed the minutes of the Reporting Committee. It was recommended that a conference call be scheduled with each of the participating hospitals to review the results of this pilot program.
- d) **Communications Committee Report.** Steve Smith, MD
  1. Nebraska Health Information Management Association, September 20, 2007. S. Smith is scheduled to present information regarding the NCPS.

## **V. Other**

- a) Patient Safety Improvement Corps (PSIC) grant application has been submitted for assistance in funding the NCPS.
- b) Consumer member. Doug Elting has expressed interest as becoming the consumer member of the BOD. Mr. Elting has been designing and planning health care facilities for the last 30 years. He has an interest in patient safety in regards to the architecture of a health care facility. A motion was made to consider Doug Elting as a consumer member of the board of directors for the NCPS. The vote passed unanimously.
- c) Next meeting. This will be scheduled in late September or early October for a live meeting.

**VI. Adjournment**

**S. Smith** adjourned the meeting at **12:10 pm**.

Minutes submitted by: P. Scholting, PA-C, secretary NCPS

Minutes approved by: