OPSC OREGON PATIENT SAFETY COMMISSION

Task Force on Resolution of Adverse Healthcare Incidents Meeting Agenda

December 14, 2022, | 2:30 – 4:15 p.m. | Virtual Meeting

2:30 5min	Welcome and Introductions	Tina Stupasky, Co-Chair
2:35 5 min	Review Agenda and Approve Minutes • September 14, 2022	Tina Stupasky
2:40 5min	Report from the Executive Director	Valerie Harmon
2:45 40 min	EDR 2022 Annual Report Discussion and Approval • Receive Feedback from OPSC Board • Discuss and Approve Report	Tina Stupasky and Beth Kaye
3:25 45min	EDR Logic Model Overview and Feedback	Claire Devine and Kristen Lacijan, Center for Outcomes Research and Education (CORE)
4:10 5 min	Public Comment*	
4:15	Upcoming Task Force Meetings, Evaluation Reminder† and Adjourn	Tina Stupasky

* Public comment must be submitted in advance of the meeting. Details are available on Our Governance page of the Oregon Patient Safety Commission website.

† Task Force members will receive a meeting evaluation via email.

OPSC OREGON PATIENT SAFETY COMMISSION

Task Force on Resolution of Adverse Healthcare Incidents Meeting Minutes

September 14, 2022 | 2:30 – 4:00 p.m. | Virtual Meeting

Attendees

		Present	Virtual	Absent
Task Force Members	Chandra Basham (Trial Lawyer)	☐	☐	☒
	Jeff Goldenberg (Advocate for Patient Safety)	☒	☐	☐
	Anthony Jackson (At Large Member)	☒	☐	☐
	Robert Joondeph (Public Member)	☒	☐	☐
	John Moorhead (Practicing Physician)	☒	☐	☐
	Rep. Ron Noble (Republican Representative)	☐	☐	☒
	Cameron Padilla (Hospital Representative)	☒	☐	☐
	Rep. Rachel Prusak (Democratic Representative)	☒	☐	☐
	Margaret Mikula (Practicing Physician)	☒	☐	☐
	Tina Stupasky (Trial Lawyer)	☒	☐	☐
OPSC Staff	Valerie Harmon (Executive Director) Beth Kaye (EDR Program Director) Sydney Edlund (Director of Analytics and Research) Stephanie Warren (Program Assistant)			
Guests	Thomas Gallagher (Collaborative for Accountability and Improvement) Lisa Angus (Center for Outcomes Research and Education) Claire Devine (Center for Outcomes Research and Education) Natalie Kenton (Center for Outcomes Research and Education) Maggie Weller (Center for Outcomes Research and Education) Bryan Boehringer (Oregon Medical Association) Mark Bonanno (Oregon Medical Association) Courtni Dresser (Oregon Medical Association) Rhett Fraser Richard Lane Meghan Slotemaker (Oregon Association of Hospitals and Health Systems) Kimberly Goddard (Chief of Staff, Office of Rep. Prusak) Peter Wedlake (Chief of Staff, Office of Rep. Dexter)			

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Agenda Items	
Welcome and Introductions	This meeting of the Task Force on Resolution of Adverse Healthcare Incidents (Task Force) was called to order by John Moorhead at 2:32 p.m. John welcomed members of the public and Beth Kaye took the attendance of Task Force members.
Review and Approve Minutes	John Moorhead requested that the Task Force review the agenda and approve the June 8, 2022, Task Force meeting minutes. **Action Item: Approve Minutes** • **Motion:** Jeff Goldenberg moved to approve the June 8, 2022, Task Force meeting minutes. Margaret Mikula seconded. • **Vote:** John Moorhead called for a vote to approve the June 8, 2022, Task Force meeting minutes and Beth Kaye conducted a roll call vote. Jeff Goldenberg, Anthony Jackson, Bob Joondeph, Margaret Mikula, John Moorhead, Cameron Padilla, and Tina Stupasky voted in favor. The motion passed.
Report from the Executive Director	Valerie Harmon provided an update on Early Discussion and Resolution (EDR) operations. **Leadership Appointment Formalized** • OPSC Board formalized the appointment of Valerie Harmon as Executive Director in June. With this certainty, OPSC is able to move forward with future planning. **Future Organizational Planning** • Evaluating resource needs, including staffing • Refining plans for upcoming project work • Reaching out to our networks to draw on their expertise and to identify opportunities for collaboration **Potential 2023 Legislative Agenda** • The 2023 legislative session presents an opportunity to modernize OPSC's founding statute. Revisions will allow OPSC to adapt and respond to new knowledge and insights, making the program more relevant to a healthcare system that will continue to evolve. The proposed revisions also codify health equity as an essential part of the program's data collection and analysis.
EDR Data Process Evaluation Update	Valerie Harmon provided an update on the EDR data process evaluation and introduced Claire Devine, Research Associate from the Center for Outcomes Research and Education (CORE). Claire presented an overview of CORE's planned approach to the EDR data process evaluation. Work will begin in October 2022, with a projected March 2023 completion date. CORE will be contacting Task Force members in the coming months about their goals and key questions. **Task Force Feedback**

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	• In response to a question, Claire shared that she expects the meaning of "equitable" for the project will be defined broadly to include several key categories (e.g., race, ethnicity, and gender).

EDR Outreach Activities Update	Beth Kaye provided an update on OPSC outreach activities.
	
	Short-term Projects
	• Provide actionable information about EDR to sources patients and families look to for help following a harm event.
	  ○ 211info listing
	  ○ Oregon Health Authority (OHA) Ombudsmen listing
	  ○ Oregon Medical Association (OMA) June 2022 newsletter
	  ○ Oregon Trial Lawyer Association (OTLA) mid-July 2022 newsletter
	  ○ OTLA's quarterly *Trial Lawyer* magazine, beginning in Fall 2022
	  ○ Optimize EDR visibility on internet search engines
	• Outreach to physicians to increase EDR participation
	
	Long-term Planning
	• Develop and implement a strategic communications plan in consultation with a communications firm
	  ○ **Progress:** Identified potential firms and began initial conversations
	  ○ **Next steps:** Request and review proposals

Guest Speaker: Tom Gallagher, MD	John Moorhead introduced Thomas H. Gallagher, MD, MACP, to discuss Communication and Resolution Programs (CRPs) – a principled, comprehensive, and systematic approach to responding to patients who have experienced medical harm. **Key Points** • Healthcare organizations need robust infrastructure for responding consistently when care does not go as planned—a communication and resolution program (CRP)— to help everyone move forward and to improve patient safety. • Healthcare organization may need support to implement this type of infrastructure. • Hospitals and clinicians have an ethical responsibility to share information with patients about harm events; the responsibility should not fall on the patient. ○ 90% of EDR requests for conversation have been initiated by patients, but only 45% of these EDR requests for conversation have been accepted. • The Task Force and OPSC have an opportunity to explore ways to support healthcare organizations be more proactive in their responses to patient harm events.

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	• Nationally, there has been exponential growth in the number of hospitals with CRPs. However, we are learning that hospitals need more support to implement highly reliable CRPs, which are:
	  ○ **Comprehensive:** The CRP includes all the elements of a robust CRP, from establishing a culture of safety to providing peer support for clinicians and staff. A CRP that uses only select elements will be ineffective.
	  ○ **Systematic:** The CRP components are intended to work together (e.g., the staff that are communicating with the patient know about the event investigation and analysis).
	  ○ **Principled:** The CRP process is used every time a patient is harmed to be effective.
	• Ideally, healthcare organizations would implement CRPs in a highly reliable way, so they proactively initiate EDR to talk with patients about harm events are would also be ready to respond to EDR requests from patients.
	• Measurements are essential to ensure accountability and drive continuous improvement.
	• In Oregon, EDR is an important tool to help encourage a proactive, transparent response to patient harm and potentially the adoption of CRPs.
	
	Task Force Discussion
	• Several Task Force members highlighted the importance of organizational engagement with patients and families.
	  ○ Transparency drives ownership and engagement across all areas.
	  ○ Highly reliable organizations commonly defer to experts. Patients and families are the experts in how a healthcare organization should respond when a patient is harmed.
	• It is important to obtain support from liability insurers.
	• Change will require resources and structure.
	• Dr. Thomas H. Gallagher agreed that it might be helpful to have a statewide learning community about CRP.
	  ○ Suggested that an evaluation of Oregon's legal landscape could be helpful. In time, it might be appropriate to recognize and reward organizations that are doing this work well.
	• Rep. Prusak noted that, as her term draws to a close, she hopes that Rep. Dexter will take her place.

EDR 2022 Annual Report Discussion and Feedback	John Moorhead described the EDR annual report development and adoption process. Beth Kaye provided an update about the EDR 2022 Annual Report and requested Task Force feedback. Reflecting the input provided by the Task Force at its June 8, 2022, meeting, the main section of the report encompasses three points:

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	1. **The opportunity:** Oregon can increase resiliency and safety by investing in patient-centered infrastructure. 2. **What we need to do to get there:** We need a collaborative approach to develop a strategy for progress. 3. **Our progress so far and plan for 2023:** How OPSC is strengthening its capacity to support systemic change and equitably serve Oregonians. (This section will focus on the progress made towards the improvement goals identified by the Task Force in last year's report.) Task Force members expressed support for this approach. Members are encouraged to send any suggestions for the EDR 2022 Annual Report to Beth Kaye.
Public Comment	No public comments were submitted prior to the meeting and the guests declined an opportunity to comment.
Upcoming Task Force Meeting	The next Task Force meeting is scheduled for December 14, 2022. The meeting schedule and packet will be available on the Our Governance page of the OPSC website. Task Force members are invited to contact OPSC staff or the co-chairs if they would like to give the Patient at the Center story or suggest items for an upcoming Task Force agenda. Suggested agenda items for the December 14, 2022, meeting include: • EDR Annual Report: Task Force receives OPSC Board feedback and approves draft report, subject to changes requested by Task Force • EDR Data Evaluation Update • EDR Outreach Activities Update • Membership and Leadership Update
Evaluation Reminder and Adjourn	The meeting was adjourned at 4:00 p.m. Task Force members will receive an email with the link to take an electronic meeting evaluation.

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OREGON PATIENT SAFETY COMMISSION

Task Force on Resolution of Adverse Healthcare Incidents

December 14, 2022| Virtual Meeting

Tips for Participating in the Meeting

Please remain muted when not speaking

- Microsoft Teams: Use the microphone icon to mute/unmute
- Phone: Use *6 to mute/unmute

When possible, use the "raise hand" function in Microsoft Teams to:

- Be recognized prior to speaking

State your name prior to speaking

- This ensures all listeners can follow the conversation.

BUILDING A CULTURE OF SAFER CARE—TOGETHER

1

Welcome and Introductions

Tina Stupasky, Co-Chair

2

Review Agenda and Approve Minutes

Tina Stupasky, Co-Chair

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Today's Agenda

2:30	Welcome and Introductions	Tina Stupasky, Co-Chair
2:35	Review Agenda and Approve Minutes	Tina Stupasky
2:40	Report from the Executive Director	Valerie Harmon
2:45	EDR 2022 Annual Report Discussion and Approval	Tina Stupasky and Beth Kaye
3:25	EDR Logic Model Overview and Feedback	Claire Devine and Kristen Lacijan, Center for Outcomes Research and Education (CORE)
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4

Action Item: Approve Minutes

- September 14, 2022 Task Force Meeting

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Report from the Executive Director

Valerie Harmon, Executive Director

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EDR 2022 Annual Report Discussion and Approval

Tina Stupasky, Co-Chair

Beth Kaye, EDR Program Director

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Draft 2022 EDR Report Overview

- Background
- Audience: Legislature
- Purpose
  - Fulfill Task Force mandate (ORS 31.280 (2))
  - Share EDR data from program inception (July 2014 – June 2022)
    - Included in Appendix
  - Clearly describe:
    - Oregon's opportunity to leverage EDR to build statewide capacity to respond to and learn from harm events
    - How CRPs can help healthcare organizations respond to medical harm events and contribute to statewide learning
    - The need for a collaborative, statewide approach to develop a strategy for change
    - A starting point for this important work
    - OPSC's progress on data process and outreach strategy goals

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Discussion Questions

Does the report clearly describe:

- Oregon's opportunity to leverage EDR to build statewide capacity to respond to and learn from harm events
- How CRPs can help healthcare organizations respond to medical harm events and contribute to statewide learning
- The need for a collaborative, statewide approach to develop a strategy for change
- A starting point for this important work
- OPSC's progress on data process and outreach strategy goals

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Additional Discussion Questions

- Does the report's message resonate with you personally and professionally?
- Does the report contain anything that may be perceived as inflammatory by a segment of our audience and would prevent that audience from being receptive to the overall message?
- What other guidance do you have for staff?

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2022 EDR Report: Action Needed and Next Steps

	Tasks	Status
Sept 14, 2022	Task Force provides guidance to OPSC staff on draft repot structure and themes	Complete
Early Dec 2022	OPSC circulates draft report to Task Force and OPSC Board	Complete
Dec 13, 2022	OPSC Board of Directors reviews Draft Report (recommendations are subject to final approval by Task Force)	Complete
Dec 14, 2022	Task Force reviews draft report and approves subject to: • OPSC making the requested changes • Final review and approval by the co-chairs	**Action Item**
	OPSC makes final edits	Not started
	Task Force co-chairs review updated report to confirm it reflects requested changes and approves	Not started
	OPSC submits final report to Legislature on behalf of Task Force	Not started
No later than Dec 23, 2022	OPSC disseminates the report to stakeholders and public	Not started

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EDR Logic Model Overview and Feedback

Claire Devine and Kristen Lacijan, Center for Outcomes Research and Education (CORE)

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CORE | Center for Outcomes Research and Education

EDR Program Logic Model Development

12/13/2022

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Overview

1. Review where we are in the process
2. Review development of the logic model
3. Present draft EDR logic model
4. Feedback and discussion

CORE

Evidence *for* Change

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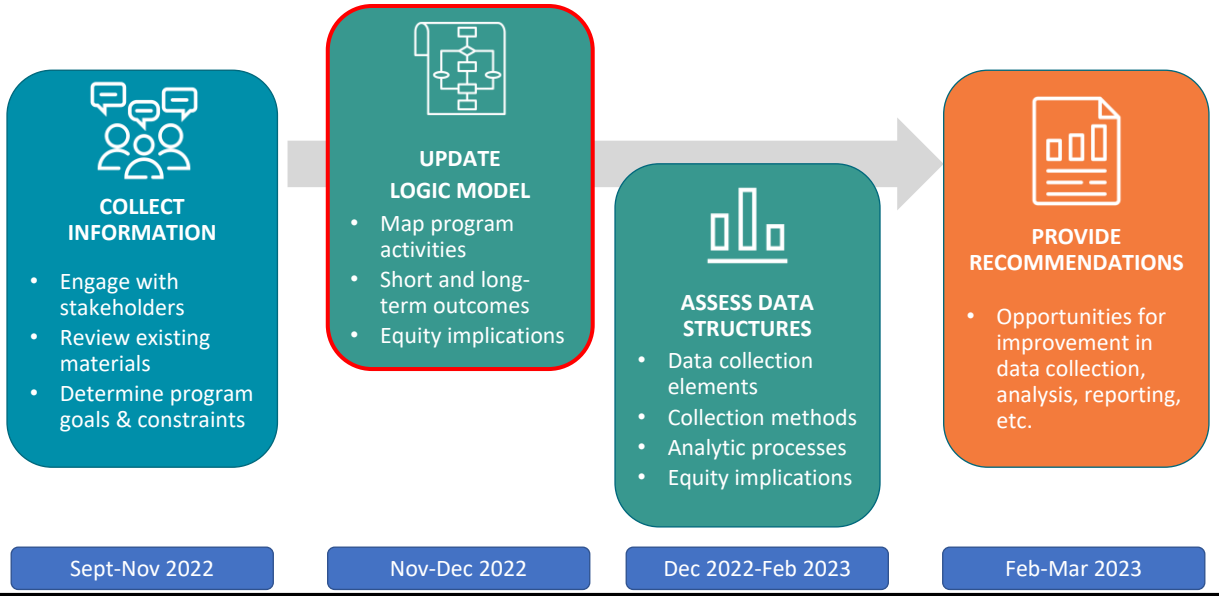
Overall Approach



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How did we develop the logic model?

What have we done so far:

- Reviewed **EDR documentation** and **related literature**, conducted separate **interviews with EDR staff**
- Developed draft logic model
- Conversations and feedback about logic model with program staff to refine draft

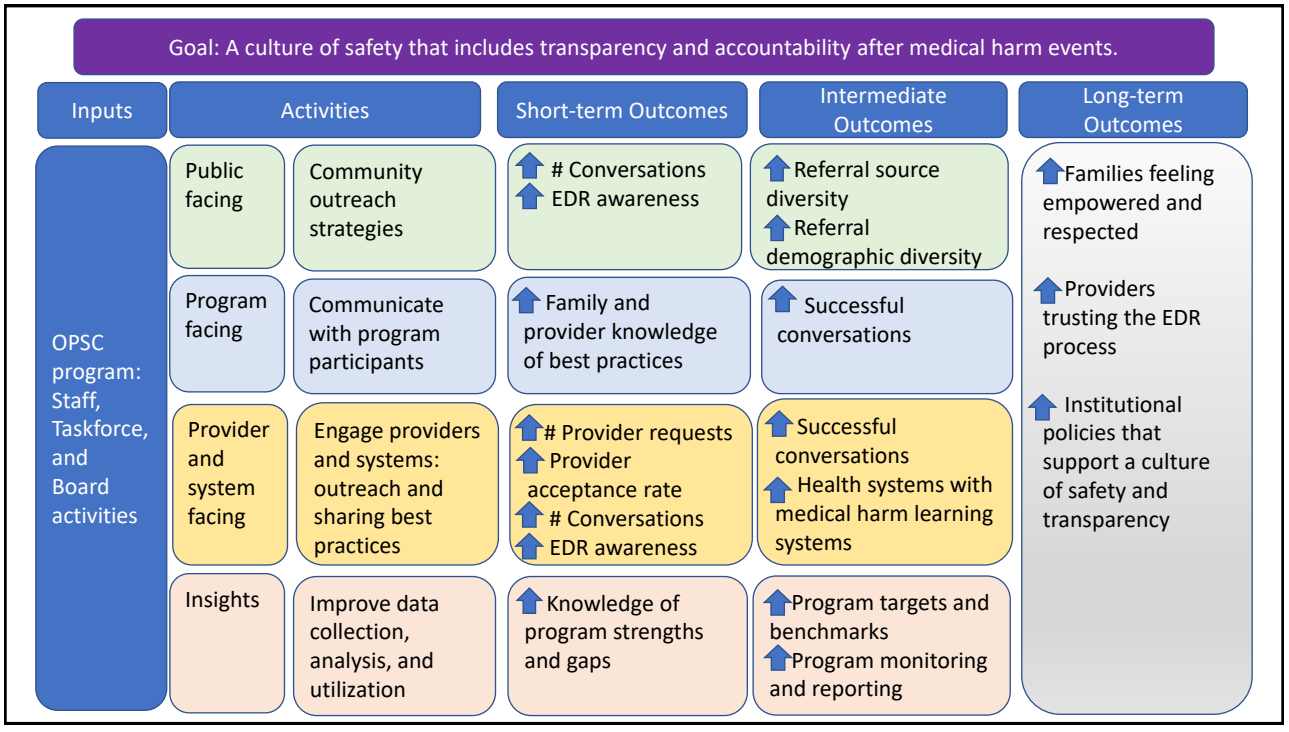
For today:

- Present the current draft of the logic model
- **What are your reactions and thoughts? Do you have any feedback to share?**

CORE

Evidence *for* Change

16


Goal: A culture of safety that includes transparency and accountability after medical harm events.
Inputs
Activities
Short-term Outcomes
Intermediate Outcomes
Long-term Outcomes
OPSC program: Staff, Taskforce, and Board activities
Public facing
Community outreach strategies
Conversations
EDR awareness
Referral source diversity
Referral demographic diversity
Families feeling empowered and respected
Program facing
Communicate with program participants
Family and provider knowledge of best practices
Successful conversations
Providers trusting the EDR process
Provider and system facing
Engage providers and systems: outreach and sharing best practices
Provider requests
Provider acceptance rate
Conversations
EDR awareness
Successful conversations
Health systems with medical harm learning systems
Institutional policies that support a culture of safety and transparency
Insights
Improve data collection, analysis, and utilization
Knowledge of program strengths and gaps
Program targets and benchmarks
Program monitoring and reporting

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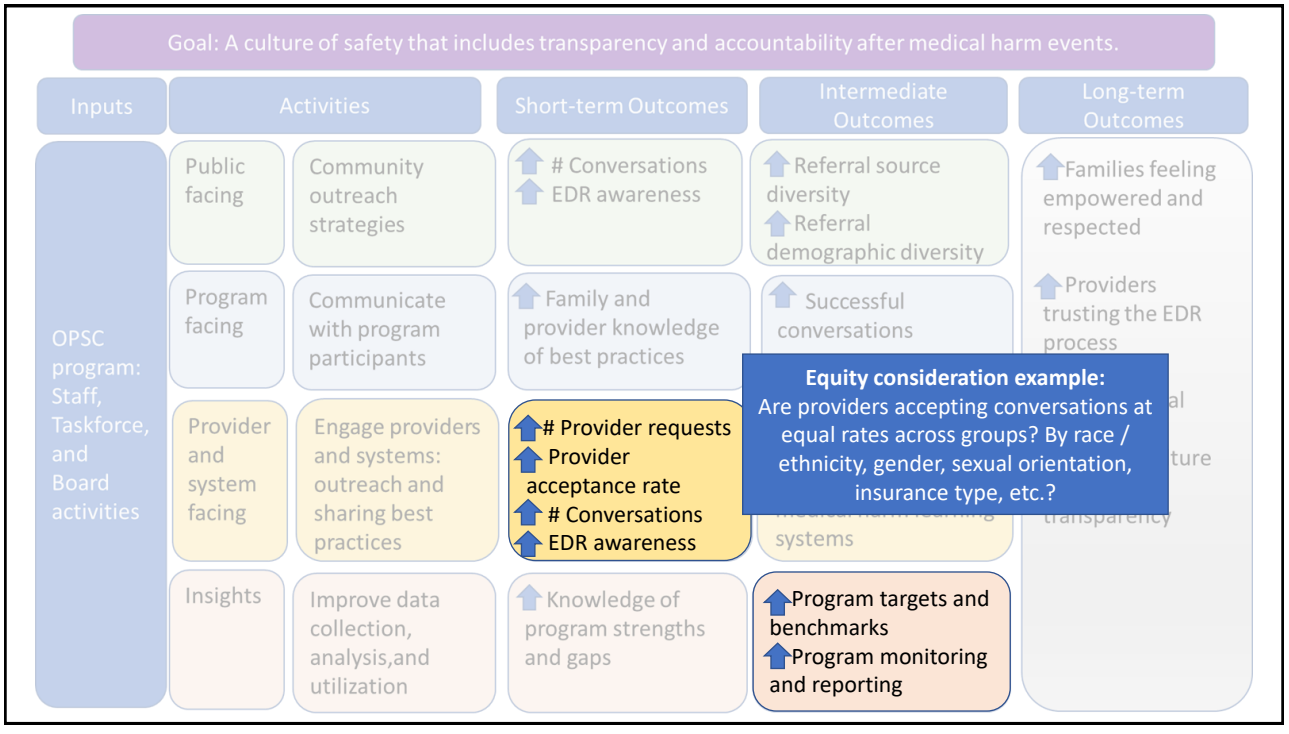
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Equity consideration example:
Are providers accepting conversations at equal rates across groups? By race / ethnicity, gender, sexual orientation, insurance type, etc.?

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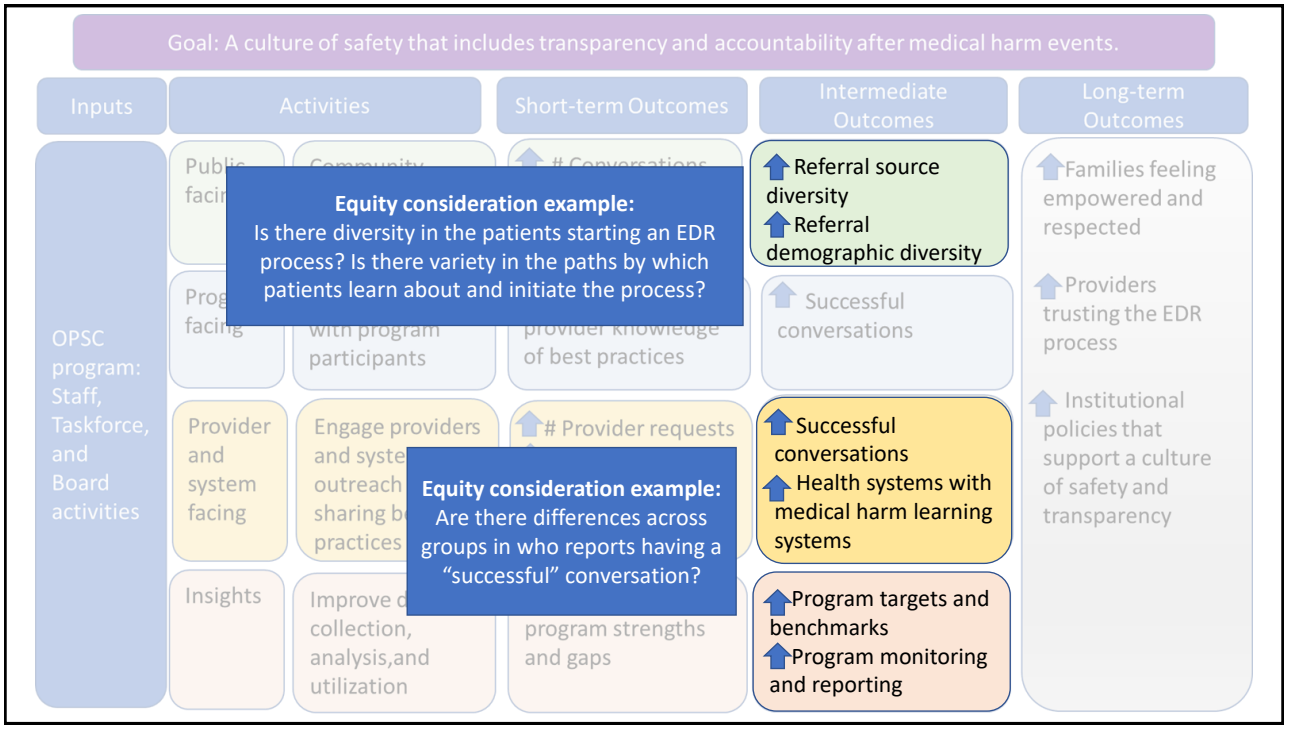
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Program targets and benchmarks
Program monitoring and reporting
Equity consideration example:
Is there diversity in the patients starting an EDR process? Is there variety in the paths by which patients learn about and initiate the process?
Equity consideration example:
Are there differences across groups in who reports having a "successful" conversation?

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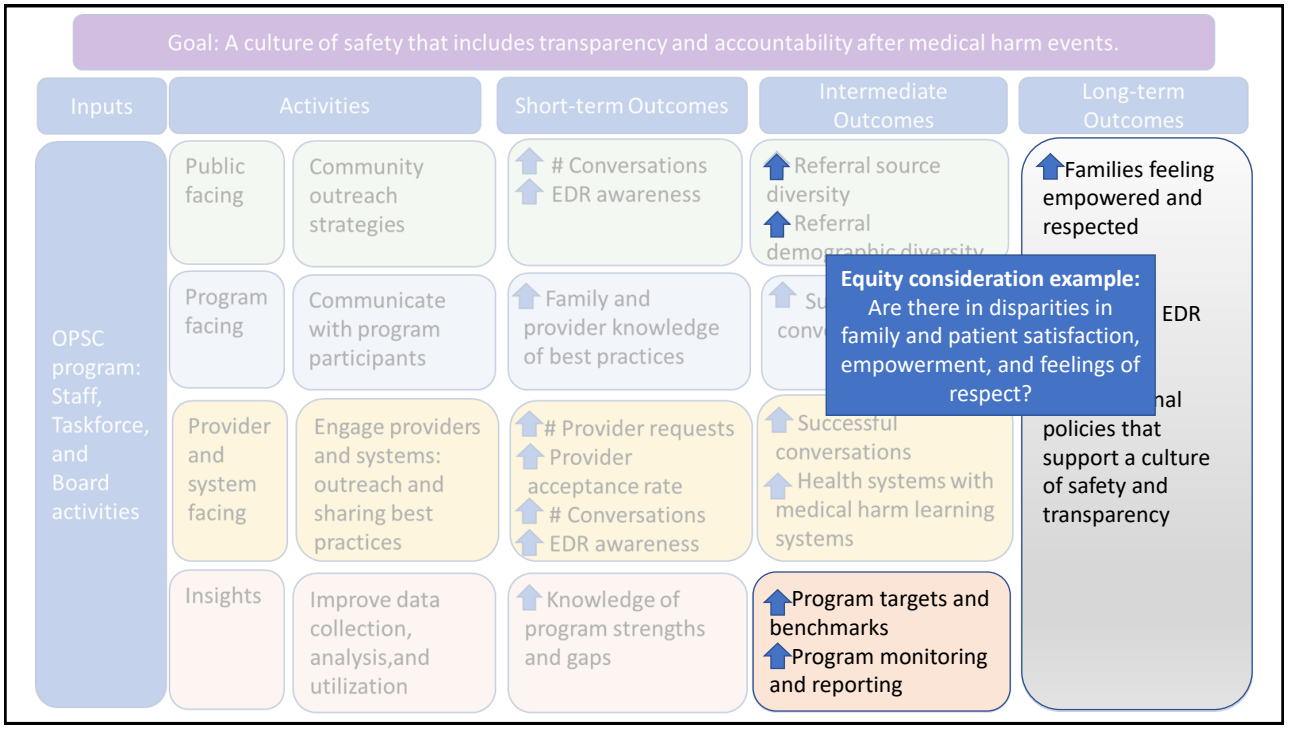
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Program monitoring and reporting
Equity consideration example:
Are there in disparities in family and patient satisfaction, empowerment, and feelings of respect?

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Discussion

Questions?
Initial Thoughts?

In the next two weeks, please send CORE or OPSC any additional feedback you have on the logic model. Thank you!

CORE

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www.providenceoregon.org/CORE

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Public Comment

Tina Stupasky, Co-Chair

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Upcoming Task Force Meeting

Tina Stupasky, Co-Chair

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March 9, 2023 Meeting Agenda

- Nominations for Co-Chairs
- Data process strategy development update
- Outreach strategy development update

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Thank You!

Reminder: Task Force members please complete your meeting evaluation survey (will be sent via email).

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Task Force on Resolution of Adverse Healthcare Incidents

Member and Recruitment Tracking

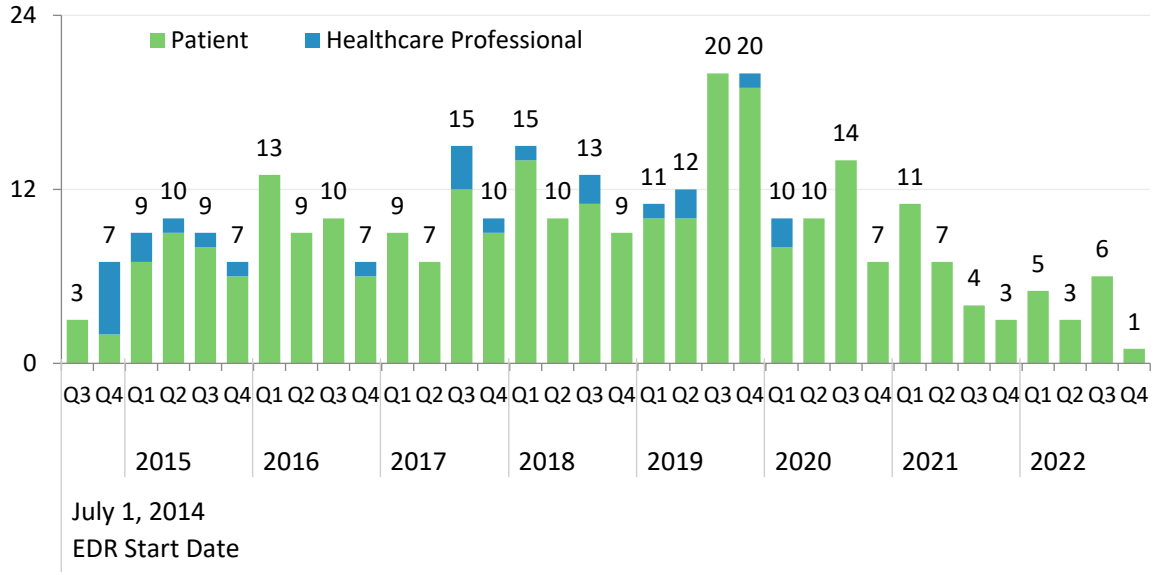
Seat #	Seat Name	Current Member	Officers Start Date	1st Term End Date	2nd Term End Date	Status
1	Trial Lawyer	Tina Stupasky	Co-chair, *7/1/2020*	08/31/2019	08/31/2023	
2	Physician	Margaret Mikula		06/30/2025		
3	Trial Lawyer	**Vacant**				
4	Public Member	Robert (Bob) Joondeph		05/28/2024		
5	Physician	**Vacant**				
6	Trial Lawyer	**Vacant**				
7	Hospital Representative	Cameron Padilla		4/22/2022		
8	Physician	John Moorhead	Co-chair, *7/1/2020*	06/30/2019	06/30/2023	
9	Advocate for Patient Safety	Jeff Goldenberg		05/28/2024		
10	At Large Member (Public Member)	Anthony Jackson		08/31/2019	08/31/2023	
11	Democratic Representative	Rep. Rachel Prusak				
12	Republican Representative	Rep. Ronald H. Noble				
13	Democratic Senator	**Vacant** (*appointed by Senate President*)				
14	Republican Senator	**Vacant** (*appointed by Senate President*)				

Deleted: Robert Beatty-Walters

EDR Data

Timeframe: July 1, 2014—October 31, 2022

Number of Requests for Conversation



Total Requests

316

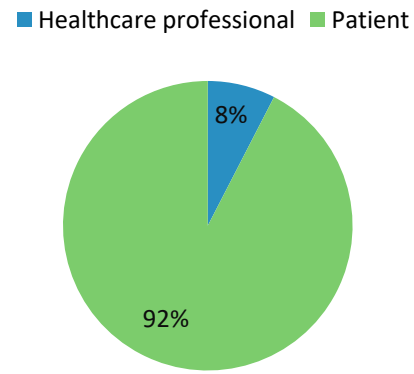
At Least One Resolution Report

227

73% of requests

Requests for Conversation by Requester Type

n=316



Patient Filer Types

n=292

Patient	251	86%
Patient Rep	41	14%
Adult Child	16	5%
Spouse	12	4%
Guardian	7	2%
Parent	6	2%

Healthcare Professional Filer Types

n=24

Facility	14	58%
Employer	7	29%
Provider	3	13%