$\mathbf{B}\mathbf{y}$ the Committees on Appropriations; and Health, Aging, and Long-Term Care

309-2387-04

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A bill to be entitled An act relating to patient safety; creating s. 381.0271, F.S.; providing definitions; creating the Florida Patient Safety Corporation, which shall be registered, incorporated, organized, and operated in compliance with ch. 617, F.S.; authorizing the corporation to create not-for-profit subsidiaries; specifying that the corporation is not an agency within the meaning of s. 20.03(11), F.S.; requiring the corporation to be subject to public meetings and records requirements; specifying that the corporation is not subject to the provisions of ch. 297, F.S., relating to procurement of personal property and services; providing a purpose for the corporation; establishing the membership of the board of directors of the corporation; requiring the formation of certain advisory committees for the corporation; requiring the Agency for Health Care Administration to provide assistance in establishing the corporation; specifying the powers and duties of the corporation; requiring annual reports; requiring the Office of Program Policy Analysis and Government Accountability, in consultation with the Agency for Health Care Administration and the Department of Health, to develop performance measures for the corporation; requiring a performance audit; requiring a report to the Governor and the Legislature; requiring the Patient Safety

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Center at the Florida State University College of Medicine to study the return on investment by hospitals from implementing computerized physician order entry and other information technologies related to patient safety; providing requirements for the study; requiring a report to the Governor and the Legislature; amending s. 395.1012, F.S.; providing additional duties of the patient safety committee at hospitals and other licensed facilities; requiring such facilities to adopt a plan to reduce medication errors and adverse drug events, including the use of computerized physician order entry and other information technologies; repealing s. 766.1016(3), F.S., which requires a patient safety organization to promptly remove patient-identifying information from patient safety data reported to the organization and requires such organization to maintain the confidentiality of patient-identifying information; providing appropriations; providing an effective date. Be It Enacted by the Legislature of the State of Florida: Section 1. Section 381.0271, Florida Statutes, is created to read: 381.0271 Florida Patient Safety Corporation. --DEFINITIONS.--As used in this section, the term: (1)"Adverse incident" has the same meanings as

provided in ss. 395.0197, 458.351, and 459.026.

- (b) "Corporation" means the Florida Patient Safety Corporation created in this section.
- $\underline{\text{(c)}}$ "Patient safety data" has the same meaning as provided in s. 766.1016.
 - (2) CREATION. --
- (a) There is created a not-for-profit corporation to be known as the Florida Patient Safety Corporation, which shall be registered, incorporated, organized, and operated in compliance with chapter 617. Upon the prior approval of the board of directors, the corporation may create not-for-profit corporate subsidiaries, organized under the provisions of chapter 617, as necessary to fulfill the mission of the corporation.
- (b) The corporation or any authorized and approved subsidiary is not an agency within the meaning of s. 20.03(11).
- (c) The corporation and its authorized and approved subsidiaries are subject to the public meetings and records requirements of s. 24, Art I of the State Constitution, chapter 119, and s. 286.011.
- (d) The corporation and its authorized and approved subsidiaries are not subject to the provisions of chapter 287.
- (e) The corporation is a patient safety organization for purposes of s. 766.1016.
 - (3) PURPOSE.--
- (a) The purpose of the Florida Patient Safety

 Corporation is to serve as a learning organization dedicated to assisting health care providers in the state to improve the quality and safety of health care rendered and to reduce harm to patients. The corporation shall promote the development of a culture of patient safety in the health care system in the

state. The corporation may not regulate health care providers in this state.

- (b) In the fulfillment of its purpose, the corporation shall work with a consortium of patient safety centers and other patient safety programs within the universities in this state.
- (4) BOARD OF DIRECTORS; MEMBERSHIP.--The corporation shall be governed by a board of directors. The board of directors shall consist of:
- (a) The chairperson of the Council of Medical School Deans.
- (b) The person responsible for patient safety issues for the authorized health insurer with the largest market share as measured by premiums written in the state for the most recent calendar year, appointed by such insurer.
- (c) A representative of the authorized medical malpractice insurer with the largest market share as measured by premiums written in the state for the most recent calendar year, appointed by such insurer.
- $\underline{\text{(d)}\quad \text{The president of the Florida Health Care}}$ Coalition.
- (e) A representative of a hospital in the state that is implementing innovative patient safety initiatives, appointed by the Florida Hospital Association.
- (f) A physician with expertise in patient safety, appointed by the Florida Medical Association.
- (g) A physician with expertise in patient safety, appointed by the Florida Osteopathic Medical Association.
- (h) A nurse with expertise in patient safety,
 appointed by the Florida Nurses Association.

- 1 <u>(i) An institutional pharmacist, appointed by the</u>
 2 Florida Society of Health System Pharmacists, Inc.
 - (j) A representative of Florida AARP, appointed by the state director of the Florida AARP.
 - (k) An independent consultant on health care information systems, appointed jointly by the Central Florida Chapter and the South Florida Chapter of the Healthcare Information and Management Systems Society.
 - (5) ADVISORY COMMITTEES.--In addition to any committees that the corporation may establish, the corporation shall establish the following advisory committees:
 - (a) A scientific research advisory committee that includes, at a minimum, a representative from each patient safety center or other patient safety program in the universities of this state who is a physician licensed under chapter 458 or chapter 459, with experience in patient safety and evidence-based medicine.
 - (b) A technology advisory committee that includes, at a minimum, a representative of a hospital that has implemented a computerized physician order entry system and a health care provider that has implemented an electronic medical records system.
 - (c) A health care provider advisory committee that includes, at a minimum, representatives of hospitals, ambulatory surgical centers, physicians, nurses, and pharmacists licensed in this state and a representative of the Veterans Integrated Service Network 8 VA Patient Safety Center.
 - (d) A health care consumer advisory committee that includes, at a minimum, representatives of businesses that

provide health insurance coverage to their employees, consumer advocacy groups, and representatives of patient organizations.

- (e) A state agency advisory committee that includes, at a minimum, a representative from each state agency that has regulatory responsibilities related to patient safety.
- (f) A litigation alternatives advisory committee that includes, at a minimum, representatives of attorneys who represent plaintiffs and defendants in medical malpractice cases and a representative of each law school in the state.
- (g) An education advisory committee that includes, at a minimum, the associate dean for education, or the equivalent position, as a representative from each school of medicine, nursing, public health, or allied health to provide advice on the development, implementation, and measurement of core competencies for patient safety to be considered for incorporation in the educational programs of the universities of this state.
 - (6) ORGANIZATION; MEETINGS.--
- (a) The Agency for Health Care Administration shall assist the corporation in its organizational activities required under chapter 617, including, but not limited to:
- 1. Eliciting appointments for the initial board of directors.
- 2. Convening the first meeting of the board of directors and assisting with other meetings of the board of directors, upon the request of the board of directors, during the first year of operation of the corporation.
- 3. Drafting articles of incorporation for the board of directors and, upon the request of the board of directors, delivering articles of incorporation to the Department of State for filing.

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- 4. Drafting proposed bylaws for the corporation.
 - 5. Paying fees related to incorporation.
 - 6. Providing office space and administrative support, at the request of the board of directors, but not beyond July 1, 2005.
 - (b) The board of directors must conduct its first meeting no later than August 1, 2004, and shall meet thereafter as frequently as necessary to carry out the duties of the corporation.
 - (7) POWERS AND DUTIES.--In addition to the powers and duties prescribed in chapter 617 and the articles and bylaws adopted under that chapter, the corporation shall directly or through contract:
 - (a) Secure staff necessary to properly administer the corporation.
- (b) Collect, analyze, and evaluate patient safety data, quality and patient safety indicators, medical malpractice closed claims, and adverse incidents reported to the Agency for Health Care Administration and the Department of Health for the purpose of recommending changes in practices and procedures which may be implemented by health care practitioners and health care facilities to improve the quality of health care and to prevent future adverse incidents. Notwithstanding any other law, the Agency for Health Care Administration and the Department of Health shall make available to the corporation any adverse incident report submitted under s. 395.0197, s. 458.351, or s. 459.026. To the extent that adverse incident reports submitted under s. 395.0197 are confidential and exempt from disclosure, the confidential and exempt status of such reports must be maintained by the corporation.

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- (c) Maintain an active library of best practices relating to patient safety and patient safety literature, along with the emerging evidence supporting the retention or modification of such practices, and make this information available to health care practitioners, health care facilities, and the public.
- (d) Foster the development of a statewide electronic infrastructure that may be implemented in phases over a multiyear period and that is designed to improve patient care and the delivery and quality of health care services by health care facilities and health care practitioners.
- (e) Assess the patient safety culture at volunteering hospitals and recommend methods to improve the working environment related to patient safety at these hospitals.
- (f) Inventory the information technology capabilities related to patient safety of health care facilities and health care practitioners and recommend a plan for expediting implementation of safety technologies statewide.
- relevant to patient safety which can be made available to be considered for incorporation into the undergraduate and graduate curriculums in schools of medicine, nursing, and allied health in this state.
- (h) Facilitate continuing professional education regarding patient safety for practicing health care practitioners.
- (i) Study and facilitate the testing of alternative systems of encouraging the implementation of effective risk management strategies and clinical best practices, and of compensating injured patients as a means of reducing and preventing medical errors and promoting patient safety.

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Representatives.

1	(j) Develop programs to educate the public about the
2	role of health care consumers in promoting patient safety.
3	(k) Provide interagency coordination of patient safety
4	efforts in this state.
5	(1) Conduct other activities identified by the board
6	of directors to promote patient safety in this state.
7	(8) ANNUAL REPORT By December 1, 2004, the
8	corporation shall prepare a report on the start-up activities
9	of the corporation and any proposals for legislative action
10	needed to enable the corporation to fulfill its purposes under
11	this section. By December 1 of each year thereafter, the
12	corporation shall prepare a report for the preceding fiscal
13	year. The report, at a minimum, must include:
14	(a) A description of the activities of the corporation
15	under this section.
16	(b) Progress made in improving patient safety and
17	reducing medical errors.
18	(c) A compliance and financial audit of the accounts
19	and records of the corporation at the end of the preceding
20	fiscal year conducted by an independent certified public
21	accountant.
22	(d) An assessment of the ability of the corporation to
23	fulfill the duties specified in subsection (7) and the
24	appropriateness of those duties for the corporation.
25	(e) Recommendations for legislative action needed to
26	improve patient safety in this state.
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28	The corporation shall submit the report to the Governor, the
29	President of the Senate, and the Speaker of the House of

1 (9) PERFORMANCE EXPECTATIONS. -- The Office of Program Policy Analysis and Government Accountability, in consultation 2 3 with the Agency for Health Care Administration, the Department of Health, and the corporation, shall develop performance 4 5 standards by which to measure the success of the corporation 6 in organizing to fulfill and beginning to implement the purposes and duties established in this section. The Office of 7 8 Program Policy Analysis and Government Accountability shall conduct a performance audit of the corporation during 2006, 9 10 using the performance standards, and shall submit a report to 11 the Governor, the President of the Senate, and the Speaker of the House of Representatives by January 1, 2007. 12 The Patient Safety Center at the Florida 13 Section 2. State University College of Medicine, in collaboration with 14 researchers at other state universities, shall conduct a study 15 to analyze the return on investment that hospitals in this 16 17 state could realize from implementing computerized physician order entry and other information technologies related to 18 19 patient safety. For the purposes of this analysis, the return on investment shall include both financial results and 20 benefits relating to quality of care and patient safety. The 21 study must include a representative sample of large and small 22 hospitals, located in urban and rural areas, in the north, 23 24 central, and southern regions of the state. By February 1, 25 2005, the Patient Safety Center at the Florida State University College of Medicine must submit a report to the 26 27 Governor, the President of the Senate, and the Speaker of the 28 House of Representatives concerning the results of the study. 29 Section 3. Section 395.1012, Florida Statutes, is 30 amended to read: 31 395.1012 Patient safety.--

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- (1) Each licensed facility must adopt a patient safety plan. A plan adopted to implement the requirements of 42 C.F.R. part 482.21 shall be deemed to comply with this requirement.
- (2) Each licensed facility shall appoint a patient safety officer and a patient safety committee, which shall include at least one person who is neither employed by nor practicing in the facility, for the purpose of promoting the health and safety of patients, reviewing and evaluating the quality of patient safety measures used by the facility, recommending improvements in the patient safety measures used by the facility, and assisting in the implementation of the facility patient safety plan.
- (3) Each licensed facility shall adopt a plan to reduce medication errors and adverse drug events, which must consider the use of computerized physician order entry and other information technologies related to patient safety.

Section 4. Subsection (3) of section 766.1016, Florida Statutes, is repealed.

Section 5. The sum of \$350,000 in nonrecurring general revenue funds is appropriated to the Agency for Health Care Administration to support the establishment of and to contract with the Florida Patient Safety Corporation to implement the provisions of section 1 of this act during the 2004-2005 fiscal year.

Section 6. The sum of \$113,500 in nonrecurring general revenue funds is appropriated to the Florida State University College of Medicine for the purpose of conducting the study required in section 2 of this act during the 2004-2005 fiscal year.

1	Section 7. This act shall take effect upon becoming a
2	law.
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4	STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
5	COMMITTEE SUBSTITUTE FOR CS/SB 1464
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7	Provides that scientific advisory committee representatives in
8	the universities are licensed physicians with experience in patient safety and evidence-based medicine.
9	Provides an appropriation of \$350,000 in general revenue funds to support the establishment of and a contract with the Florida Patient Safety Corporation.
10	Florida Patient Safety Corporation.
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