

Bill No. CS for CS for CS for SB 2910

Amendment No. ____ Barcode 841716

CHAMBER ACTION

Senate

House

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Senator Peaden moved the following amendment:

Senate Amendment (with title amendment)

On page 49, line 22, through
page 57, line 22, delete those lines

and insert:

(4) BOARD OF DIRECTORS; MEMBERSHIP.--The corporation shall be governed by a board of directors. The board of directors shall consist of:

(a) The chair of the Florida Council of Medical School Deans.

(b) Two representatives with expertise in patient safety issues for the authorized health insurer and authorized health maintenance organization with the largest market shares, respectively, as measured by premiums written in the state for the most recent calendar year, appointed by such insurer.

(c) A representative of an authorized medical malpractice insurer appointed by the Florida Insurance Council.

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1 (d) The president of the Central Florida Health Care
2 Coalition.

3 (e) Two representatives of a hospital in this state
4 that is implementing innovative patient safety initiatives,
5 appointed by the Florida Hospital Association.

6 (f) A physician with expertise in patient safety,
7 appointed by the Florida Medical Association.

8 (g) A physician with expertise in patient safety,
9 appointed by the Florida Osteopathic Medical Association.

10 (h) A physician with expertise in patient safety,
11 appointed by the Florida Podiatric Medical Association.

12 (i) A physician with expertise in patient safety,
13 appointed by the Florida Chiropractic Association.

14 (j) A dentist with expertise in patient safety,
15 appointed by the Florida Dental Association.

16 (k) A nurse with expertise in patient safety,
17 appointed by the Florida Nurses Association.

18 (l) An institutional pharmacist, appointed by the
19 Florida Society of Health-System Pharmacists.

20 (m) A representative of Florida AARP, appointed by the
21 state director of Florida AARP.

22 (5) ADVISORY COMMITTEES.--In addition to any
23 committees that the corporation may establish, the corporation
24 shall establish the following advisory committees:

25 (a) A scientific research advisory committee that
26 includes, at a minimum, a representative from each patient
27 safety center or other patient safety program in the
28 universities of the state who are physicians licensed pursuant
29 to chapter 458 or chapter 459, with experience in patient
30 safety and evidenced-based medicine. The duties of the
31 advisory committee shall include, but not be limited to, the

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1 analysis of existing data and research to improve patient
2 safety and encourage evidence-based medicine.

3 (b) A technology advisory committee that includes, at
4 a minimum, a representative of a hospital that has implemented
5 a computerized physician order entry system and a health care
6 provider that has implemented an electronic medical records
7 system. The duties of the advisory committee shall include,
8 but not be limited to, implementation of new technologies,
9 including electronic medical records.

10 (c) A health care provider advisory committee that
11 includes, at a minimum, representatives of hospitals,
12 ambulatory surgical centers, physicians, nurses, and
13 pharmacists licensed in this state and a representative of the
14 Veterans Integrated Service Network 8, Virginia Patient Safety
15 Center. The duties of the advisory committee shall include,
16 but not be limited to, promotion of a culture of patient
17 safety that reduces errors.

18 (d) A health care consumer advisory committee that
19 includes, at a minimum, representatives of businesses that
20 provide health insurance coverage to their employees, consumer
21 advocacy groups, and representatives of patient safety
22 organizations. The duties of the advisory committee shall
23 include, but not be limited to, incentives to encourage
24 patient safety and the efficiency and quality of care.

25 (e) A state agency advisory committee that includes,
26 at a minimum, a representative from each state agency that has
27 regulatory responsibilities related to patient safety. The
28 duties of the advisory committee shall include, but not be
29 limited to, interagency coordination of patient safety
30 efforts.

31 (f) A litigation alternatives advisory committee that

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1 includes, at a minimum, representatives of medical malpractice
2 attorneys for plaintiffs and defendants and a representative
3 of each law school in the state. The duties of the advisory
4 committee shall include, but not be limited to, alternatives
5 systems to compensate for injuries.

6 (g) An education advisory committee that includes, at
7 a minimum, the associate dean for education, or the equivalent
8 position, as a representative from each medicine, nursing,
9 public health, or allied health service to provide advice on
10 the development, implementation, and measurement of core
11 competencies for patient safety to be considered for
12 incorporation in the educational programs of the universities
13 and colleges of this state.

14 (6) ORGANIZATION; MEETINGS.--

15 (a) The Agency for Health Care Administration shall
16 assist the corporation in its organizational activities
17 required under chapter 617, including, but not limited to:

18 1. Eliciting appointments for the initial board of
19 directors.

20 2. Convening the first meeting of the board of
21 directors and assisting with other meetings of the board of
22 directors, upon request of the board of directors, during the
23 first year of operation of the corporation.

24 3. Drafting articles of incorporation for the board of
25 directors and, upon request of the board of directors,
26 delivering articles of incorporation to the Department of
27 State for filing.

28 4. Drafting proposed bylaws for the corporation.

29 5. Paying fees related to incorporation.

30 6. Providing office space and administrative support,
31 at the request of the board of directors, but not beyond July

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1 1, 2005.

2 (b) The board of directors must conduct its first
3 meeting no later than August 1, 2004, and shall meet
4 thereafter as frequently as necessary to carry out the duties
5 of the corporation.

6 (7) POWERS AND DUTIES.--

7 (a) In addition to the powers and duties prescribed in
8 chapter 617, and the articles and bylaws adopted under that
9 chapter, the corporation shall, directly or through contract:

10 1. Secure staff necessary to properly administer the
11 corporation.

12 2. Collect, analyze, and evaluate patient safety data
13 and quality and patient safety indicators, medical malpractice
14 closed claims, and adverse incidents reported to the Agency
15 for Health Care Administration and the Department of Health
16 for the purpose of recommending changes in practices and
17 procedures that may be implemented by health care
18 practitioners and health care facilities to improve health
19 care quality and to prevent future adverse incidents.

20 Notwithstanding any other provision of law, the Agency for
21 Health Care Administration and the Department of Health shall
22 make available to the corporation any adverse incident report
23 submitted under ss. 395.0197, 458.351, and 459.026. To the
24 extent that adverse incident reports submitted under s.
25 395.0197 are confidential and exempt, the confidential and
26 exempt status of such reports shall be maintained by the
27 corporation.

28 3. Establish a "near-miss" patient safety reporting
29 system. The purpose of the near-miss reporting system is to:
30 identify potential systemic problems that could lead to
31 adverse incidents; enable publication of systemwide alerts of

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1 potential harm; and facilitate development of both
2 facility-specific and statewide options to avoid adverse
3 incidents and improve patient safety. The reporting system
4 shall record "near misses" submitted by hospitals, birthing
5 centers, and ambulatory surgical centers and other providers.
6 For the purpose of the reporting system:
7 a. The term "near miss" means any potentially harmful
8 event that could have had an adverse result but, through
9 chance or intervention in which, harm was prevented.
10 b. The near-miss reporting system shall be voluntary
11 and anonymous and independent of mandatory reporting systems
12 used for regulatory purposes.
13 c. Near-miss data submitted to the corporation is
14 patient safety data as defined in s. 766.1016.
15 d. Reports of near-miss data shall be published on a
16 regular basis and special alerts shall be published as needed
17 regarding newly identified, significant risks.
18 e. Aggregated data shall be made available publicly.
19 f. The corporation shall report the performance and
20 results of the near-miss project in its annual report.
21 4. Work collaboratively with the appropriate state
22 agencies in the development of electronic health records.
23 5. Provide for access to an active library of
24 evidence-based medicine and patient safety practices, together
25 with the emerging evidence supporting their retention or
26 modification, and make this information available to health
27 care practitioners, health care facilities, and the public.
28 Support for implementation of evidence-based medicine shall
29 include:
30 a. A report to the Governor, the President of the
31 Senate, the Speaker of the House of Representatives, and the

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1 Agency for Health Care Administration by January 1, 2005, on:

2 (I) The ability to join or support efforts for the use
3 of evidence-based medicine already underway, such as those of
4 the Leapfrog Group, the international group Bandolier, and the
5 Healthy Florida Foundation.

6 (II) The means by which to promote research using
7 Medicaid and other data collected by the Agency for Health
8 Care Administration to identify and quantify the most
9 cost-effective treatment and interventions, including disease
10 management and prevention programs.

11 (III) The means by which to encourage development of
12 systems to measure and reward providers who implement
13 evidence-based medical practices.

14 (IV) The review of other state and private initiatives
15 and published literature for promising approaches and the
16 dissemination of information about them to providers.

17 (V) The encouragement of the Florida health care
18 boards under the Department of Health to regularly publish
19 findings related to the cost-effectiveness of
20 disease-specific, evidence-based standards.

21 (VI) Public and private sector initiatives related to
22 evidence-based medicine and communication systems for the
23 sharing of clinical information among caregivers.

24 (VII) Regulatory barriers that interfere with the
25 sharing of clinical information among caregivers.

26 b. An implementation plan reported to the Governor,
27 the President of the Senate, the Speaker of the House of
28 Representatives, and the Agency for Health Care Administration
29 by September 1, 2005, that must include, but need not be
30 limited to: estimated costs and savings, capital investment
31 requirements, recommended investment incentives, initial

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1 committed provider participation by region, standards of
2 functionality and features, a marketing plan, and
3 implementation schedules for key components.

4 6. Develop and recommend core competencies in patient
5 safety that can be incorporated into the undergraduate and
6 graduate curricula in schools of medicine, nursing, and allied
7 health in the state.

8 7. Develop and recommend programs to educate the
9 public about the role of health care consumers in promoting
10 patient safety.

11 8. Provide recommendations for interagency
12 coordination of patient safety efforts in the state.

13 (b) In carrying out its powers and duties, the
14 corporation may also:

15 1. Assess the patient safety culture at volunteering
16 hospitals and recommend methods to improve the working
17 environment related to patient safety at these hospitals.

18 2. Inventory the information technology capabilities
19 related to patient safety of health care facilities and health
20 care practitioners and recommend a plan for expediting the
21 implementation of patient safety technologies statewide.

22 3. Recommend continuing medical education regarding
23 patient safety to practicing health care practitioners.

24 4. Study and facilitate the testing of alternative
25 systems of compensating injured patients as a means of
26 reducing and preventing medical errors and promoting patient
27 safety.

28 5. Conduct other activities identified by the board of
29 directors to promote patient safety in this state.

30 (8) ANNUAL REPORT.--By December 1, 2004, the
31 corporation shall prepare a report on the startup activities

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1 of the corporation and any proposals for legislative action
2 that are needed for the corporation to fulfill its purposes
3 under this section. By December 1 of each year thereafter, the
4 corporation shall prepare a report for the preceding fiscal
5 year. The report, at a minimum, must include:

6 (a) A description of the activities of the corporation
7 under this section.

8 (b) Progress made in improving patient safety and
9 reducing medical errors.

10 (c) Policies and programs that have been implemented
11 and their outcomes.

12 (d) A compliance and financial audit of the accounts
13 and records of the corporation at the end of the preceding
14 fiscal year conducted by an independent certified public
15 accountant.

16 (e) Recommendations for legislative action needed to
17 improve patient safety in the state.

18 (f) An assessment of the ability of the corporation to
19 fulfill the duties specified in this section and the
20 appropriateness of those duties for the corporation.

21
22 The corporation shall submit the report to the Governor, the
23 President of the Senate, and the Speaker of the House of
24 Representatives.

25 (9) FUNDING.--The corporation is required to seek
26 private sector funding and apply for grants to accomplish its
27 goals and duties.

28 (10) PERFORMANCE EXPECTATIONS.--The Office of Program
29 Policy Analysis and Government Accountability, the Agency for
30 Health Care Administration, and the Department of Health shall
31 develop performance standards by which to measure the success

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1 of the corporation in fulfilling the purposes established in
2 this section. Using the performance standards, the Office of
3 Program Policy Analysis and Government Accountability shall
4 conduct a performance audit of the corporation during 2006 and
5 shall submit a report to the Governor, the President of the
6 Senate, and the Speaker of the House of Representatives by
7 January 1, 2007.

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9 (Redesignate subsequent sections.)

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12 ===== T I T L E A M E N D M E N T =====

13 And the title is amended as follows:

14 On page 5, line 25, through
15 page 6, line 9, delete those lines

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17 and insert:

18 Legislature; amending s. 409.91255, F.S.;

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