

# NATIONAL QUALITY FORUM

## CONFERENCE CALL FOR THE SERIOUS REPORTABLE EVENTS IN HEALTHCARE TECHNICAL ADVISORY PANEL FOR AMBULATORY AND OFFICE-BASED SURGERY CENTERS

**August 12, 2010**

*TAP members present:* Stancel Riley, Jr., MD, MPA, MPH (chairperson); James Bagian, MD; Leigh Hamby, MD, MHA; William Rosenblatt, MD; Gina Throneberry, RN, MBA, CASC, CNOR; Richard Urman, MD, MBA; Deborah Wheeler

*NQF Staff:* Peter Angood, MD; Ann Hammersmith, JD; Melinda Murphy, RN MS; Lindsey Tighe, MS; Eric Colchamiro, MPA

*Others Present:* Rita Munley Gallagher, PhD, RN; Kay Jewell

### **WELCOME AND INTRODUCTIONS**

Dr. Angood welcomed the Technical Advisory Panel (TAP) members and thanked them for their participation. Ms. Hammersmith, general counsel for NQF, then asked the TAP members to provide an oral disclosure of interest. Members noted no conflicts.

### **PROJECT UPDATE**

Dr. Angood provided the TAP members with a brief update of other ongoing NQF projects related to patient safety. He explained that a reporting framework for patient safety events had been drafted, voted upon by National Quality Forum (NQF) membership, and approved by NQF's Consensus Standards Approval Committee. This report provides guidance to issuers of public reports of adverse patient safety events. The report is scheduled to go to the NQF Board for endorsement during Fall 2010. Dr. Angood also noted that Common Formats for reporting of adverse events have been developed by the Agency for Healthcare Research and Quality (AHRQ), and NQF currently convenes an expert panel that provides ongoing guidance and recommendations for refinement to the Common Formats based on comments received through its web-based commenting tool. Dr. Angood informed the TAP that patient safety measures are currently being vetted through NQF's Consensus Development Process, and it is likely that these measures will be complementary to some of the Serious Reportable Events.

### **EVALUATION OF EXISTING SERIOUS REPORTABLE EVENTS**

Dr. Riley led the TAP members in discussion of the current listing of the existing and newly submitted Serious Reportable Events (SREs).

For convenience and succinctness, salient points of the discussion are captured in the spreadsheets attached to the minutes.

- Overall Discussion
  - An SRE list for ambulatory and office-based surgery centers is appropriate and may prove valuable in driving improvement. The latter can be facilitated through tailoring implementation guidance to illuminate issues specific to the environment
  - In general, all the SREs that the TAP viewed as relevant are considered serious and either preventable or largely preventable. Ambiguity is an issue in a number of the events either

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- generally or in the ambulatory and office-based surgery center setting. Where particularly relevant these issues are discussed in the spreadsheet.
- Preventability is discussed in the spreadsheet as the TAP determined appropriate.
  - The question regarding susceptibility to inaccuracies, errors, or unintended consequences was, with rare exception, not explored; where it was discussed, that discussion is included on the spreadsheet.
  - Submitted modifications to the SREs relevant to the ambulatory and office-based surgery center setting were discussed by the TAP; their recommendations are included in the spreadsheet.
- Event-Specific General Discussion
    - Inclusion of invasive procedures in the specifications for the surgical events will lead to improved clarity and reporting for the ambulatory and office-based surgery environment.
    - The TAP stated the need to include radiation events in the listing, both in the implementation of the surgical events (wrong site, wrong patient, wrong procedure), as well as an event category to capture radiation overdoses.
    - Defining the term “end of surgery” will lead to clarification of the surgical events; in particular, retained foreign objects.
    - The criminal events should not be combined, as incidents of each likely stem from different safety failures.

## **EVALUATION OF NEWLY SUBMITTED SERIOUS REPORTABLE EVENTS**

All discussion related to the new submissions is reflected in the spreadsheet.

## **PUBLIC COMMENT**

There were no comments during the public commenting period.

## **NEXT STEPS**

TAP members were informed that a summary of the call would be distributed for their approval in the upcoming week. Dr. Riley would then present the summary to the Steering Committee for the Serious Reportable Events in Healthcare project. The Steering Committee meetings are scheduled for the end of August and beginning of September. If the Steering Committee has any questions for the TAP, the TAP will be notified via e-mail and a conference call may be scheduled.

Once the Steering Committee makes the final decisions regarding recommendation for endorsement of the events, a draft report will be prepared. This draft report will be posted to NQF’s website for NQF Member and public comment.

**Adjourn.**