



BETSY LEHMAN CENTER

for Patient Safety and Medical Error Reduction

Approved on 9/22/2015

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MINUTES OF THE BETSY LEHMAN CENTER FOR PATIENT SAFETY AND MEDICAL ERROR REDUCTION BOARD

Date of Meeting: Monday, August 31, 2015
Beginning Time: 2:20pm
End Time: 3:34pm

PROCEEDINGS

A regular meeting of the Betsy Lehman Center (BLC) Board of Directors was held on Monday, August 31, 2015, at 501 Boylston Street, 5th fl., Boston, MA.

Board members and designees present: Áron Boros (AB), Marylou Sudders (MS) and John Chapman (JC). Courtney Aladro (CA) represented Maura Healey.

BLC Staff in attendance: Barbara Fain (BF), M.E. Malone (MEM), Brigido Ramirez (BR), Sarah Roberto (SR) and Yvonne Torres (YT)

1. Approval of past meeting minutes

MS made a motion to approve the June 16, 2015 meeting minutes; JC seconded. Minutes were approved by unanimous vote.

2. Executive Director report

Executive Director Barbara Fain provided the Board with brief project updates on the following:

- Patient safety reporting navigation tool
- What MA consumers report to the state
- Cataract surgery adverse event panel
- Patient Safety Organizations

EXECUTIVE DIRECTOR
Barbara Fain

BOARD MEMBERS
Maura Healey
Attorney General

Marylou Sudders
Secretary of Health
and Human Services

John C. Chapman
Undersecretary
of Consumer Affairs
and Business
Regulation

Áron Boros
Executive Director,
Center for Health
Information and Analysis

3. Budget review and process

Establishing BLC's budget process

The board reviewed the Center's current budgeting process, noting that BLC does not receive a separate appropriation but instead has been funded through an allocation in CHIA's budget.

All Board members agreed to the following process for setting the Center's budget going forward: BLC Executive Director will prepare a budget for BLC board deliberation. The BLC Board will make any necessary adjustments and vote to approve. The approved BLC budget will be incorporated in the CHIA budget proposals that are presented to the CHIA Council for approval.

FY2016 Budget

BF overviewed the Center's FY2016 budget, noting an anticipated small growth in staff with the following positions: Research Director; Data Analyst and Communications Interns; and a Publications Director. She expects that many of the Center's projects will be supported by external contractors given BLC's limited staff. The Center's current and planned contractors include:

- Temporary Communications Strategist
- Web developer for new BLC site
- Developer and designer for adverse event reporting online tool
- Research and evaluation support for cataract surgery expert panel

The Center continues to rely on CHIA for operational support.

FY2017 Budget

BF explained that BLC is still in its formative stages and that the lack of budget history makes it difficult to anticipate the actual budgetary needs for FY17. Many of the programs in place now are likely to be concluded by then, and new initiatives will be underway. BLC will submit a maintenance budget in October based on the following major assumptions: BLC will continue to conduct its work with a small core team, supported by interns and contracted experts and consultants; and budget allocations to CHIA will now include both rent (approximately \$40,000) and operations support (approximately \$60,000).

The Center's 2017 budget will be influenced by the scope and significance of BLC's role as it continues to develop. Potential BLC initiatives that might require greater financial backing include: the state's need for systems to aggregate and analyze data; operationalizing a communications and dissemination plan for key patient safety resources; facilitating the development of a secure interagency communications system; and supporting the coordination of Patient Safety Organization efforts in the state.

The Board and Executive Director noted upcoming dates including CHIA's Council meeting in late September and the early October deadline for maintenance budgets to be submitted to Administration and Finance. BF agreed to deliver a proposed FY17 maintenance budget to BLC Board members by late September, indicating that the BLC FY17 maintenance budget will be similar to the FY16 budget with a modest percentage increase to reflect the anticipated growth of staff and programs. BLC is unlikely to have any additional information that could inform the budget before October.

4. Bylaws review and amendments

The Board reviewed the existing BLC bylaws in their entirety. Most of the discussion centered on Section 2.4 which requires BLC's ED to consult with Board members prior to executing contracts with an initial value of more than \$250,000. MS and JC noted that this figure currently reflects a large percentage of BLC's annual budget and that BLC's present contracts are all under that limit. There was a consensus that, for accountability purposes, the figure should be reduced to \$150,000.

The Board then unanimously voted to APPROVE the following two bylaw amendments:

- Reduce value for contracts requiring the BLC Executive Director to consult with Board members from \$250,000 to \$150,000 [section 2.4]
- Change the reference to the “Office of Consumer Affairs and Business Regulations” to the singular “Regulation” [section 2.1]

5. Patient safety organizations: opportunities for statewide coordination

BLC staff introduced the topic of Patient Safety Organizations (PSOs) to the Board, overviewing their intended purpose as national, confidential systems of data gathering on patient safety. BF reviewed relevant federal legislation and the legal protections for data submitted to PSOs. She then reviewed the PSO landscape in Massachusetts, highlighting that the majority of hospitals in the state do not yet contract with a PSO.

The Board and BLC staff then discussed opportunities ahead for PSO coordination in the state in the lead-up to the 2017 provision in the Affordable Care Act which prohibits health plans on exchanges from contracting with hospitals that are not members of a PSO. BF explained that while BLC could itself potentially become a PSO to serve Massachusetts hospitals, it was likely not the most effective option. An alternative option could be for the Center to negotiate “preferred vendor” contracts with reputable PSOs in collaboration with hospitals in the state. She noted that these PSOs would ideally share aggregated data with BLC, offering the state greater information than data received through current mandatory reporting systems.

BF highlighted the Center’s ongoing efforts around Patient Safety Organizations including surveying other states regarding their PSO efforts; meeting with hospital leadership across the state to discuss potential PSO coordination; and outreach with leading national PSOs to gather information and develop relationships. Board members expressed support for BLC’s continued exploration of PSO coordination options for the state, and generally agreed with the preliminary assessment that BLC should not move in the direction of becoming a full service PSO itself.

6. Executive session

No executive session was held. The Board decided to wait until its next meeting to determine the Executive Director’s FY16 salary so that its discussion could be informed by the formula that by then will have been set by Administration and Finance for manager salaries in the Administration.

The next BLC Board meeting will be scheduled for mid-December 2015.