

patient safety by reducing the risk of serious adverse events occurring in Oregon's health care system and by encouraging a culture of patient safety.” To accomplish this goal, the commission maintains a confidential, voluntary serious adverse event reporting system in Oregon; establishes quality improvement techniques to reduce system errors; and shares evidence-based prevention practices to improve patient outcomes.

Currently, the commission is staffed by 4 positions, 3.75 FTE's. As a semi-independent agency subject to ORS 182.456 to 182.472, the commission does not receive direct funding (limitation or appropriation) from the state. The commission has a funding account subject to ORS 182.470, and the commission's board adopts budgets on a biennial basis using classifications of expenditures and revenues required by ORS 291.206, but the commission's budget is not subject to review and approval by the Legislative Assembly or to future modification by the Emergency Board or the Legislative Assembly. The commission main revenue source derives from fees assessed on participating entities (hospitals, long-term care facilities, pharmacies, ambulatory surgical centers, outpatient renal dialysis facilities and freestanding birthing centers). In addition, the commission has the authority to apply for grants and foundation support and may compete for contracts consistent with the mission and goals of the commission. For 2007-09, the commission anticipates collecting \$1,044,375 in fees and other income with expenses budgeted at \$1,047,933.

The Department of Administrative services states that this measure will have no fiscal impact because of the minimal workload.

Legislative Fiscal Office anticipates that this measure will have no fiscal impact because of the minimal workload.

Note:

SB 23 amends Chapter 686, Oregon Laws 2003 to establish Oregon Patient Safety Commission as the central agency in Oregon responsible for the collection of data and analyses produced by patient safety organizations; require OPSC to submit to the Oregon Department of Administrative Services a biennial request for General Fund appropriation; authorize the Department of Revenue to assist OPSC in the collection of any delinquent fees; and repeal sunset on Oregon Patient Safety Reporting Program.

SB 14 repeals Section 16, Chapter 686, Oregon Laws 2003 requiring the January 2, 2010 discontinuation (sunset) of the Patient Safety Reporting Program.