

2023 Regular Session Legislative Testimony

Date	April 17, 2023
To	Representative Rob Nosse, Chair House Committee on Behavioral Health and Health Care
From	Valerie Harmon, Executive Director Oregon Patient Safety Commission
Subject	Senate Bill 229: Modernize Outdated Language and Specifications in Oregon's Patient Safety Reporting Program to Keep Pace with Oregon's Evolving Healthcare System

Chair Nosse, Vice-Chair Goodwin, Vice-Chair Nelson, and members of the Committee,

I am Valerie Harmon, the executive director at the Oregon Patient Safety Commission. I am also joined today by Sydney Edlund, our director of research and analytics, to help respond to questions. We are here representing the Patient Safety Commission—a non-regulatory, semi-independent state agency.

Adverse events happen far too often in healthcare. A [recent study](#) in the New England Journal of Medicine found that 24% of hospital admissions had at least one adverse event.¹ The Oregon Legislature created the Patient Safety Commission in 2003 to reduce the risk of serious adverse events in our state as an independent voice for patient safety. The Commission operates the Patient Safety Reporting Program, which grew out of recommendations from a workgroup representing medical providers, insurers, purchasers, and consumers. The workgroup believed that the work of improving patient safety never ends and should not be done in isolation. Twenty years later, these founding principles remain relevant; however, some of the elements in our statute are holding us back from being responsive to new knowledge and insights.

While healthcare has been in a constant state of change since the reporting program was created, the program and its statute (ORS 442.819 to 442.851) have remained largely unchanged. In 2021, we sought input from members of Oregon's healthcare community to understand their current patient safety priorities and practices. Their input, in conjunction with an analysis of advances in patient safety, has shaped the revisions proposed in Senate Bill 229 that will strengthen the reporting program without creating new mandates or additional reporting burden. The bill aims to:

- **Broaden and revise overly specific or outdated language** to allow the statute to remain relevant over time.
- **Revise elements of the reporting program to support current patient safety knowledge and practice** by focusing on the systems organizations have in place to respond to and learn from adverse events, rather than on the specifics of individual adverse events.
- **Standardize the nomination process for the Commission's board of directors to match other boards and commissions.** Our board of directors is essential to our agency's operations, and additional steps in our process have caused delays in appointments.
- **Codify health equity as an essential part of reporting program data collection and analysis** because we know that inequitable care cannot be safe care. While revising our statute cannot change the inequities inherent in American healthcare, it would encourage Oregon's healthcare organizations to understand and address health inequity head on.

We all have a role to play to advance patient safety. At the Patient Safety Commission, we work with organizations across the healthcare system to support learning and collaboration. We offer insight into the efficacy of the processes and systems organizations use to make care safer following patient harm events. Individual healthcare organizations have the internal expertise to best understand and investigate the vast breadth of clinical and technical issues that comprise their patient safety work. This bill recognizes these unique, yet interdependent roles.

Finally, while this bill does not have a fiscal impact, it will have a significant operational impact by allowing the Commission to modernize the services it already provides. Senate Bill 229 will ensure that the reporting program can continue to support the rapidly changing healthcare environment, build on the work organizations are already doing, and provide meaningful shared learning in service to our mission.

We are asking for you to support Senate Bill 229.

Thank you for your time, and we are happy to answer any questions.

ⁱ Bates, David W., David M. Levine, Hojjat Salmasian, Ania Syrowatka, David M. Shahian, Stuart Lipsitz, Jonathan P. Zebrowski et al. "The Safety of Inpatient Health Care." *New England Journal of Medicine* 388, no. 2 (2023): 142-153. Available at <https://www.nejm.org/doi/full/10.1056/NEJMsa2206117>. (A free summary of the article is available from AHRQ at <https://psnet.ahrq.gov/issue/safety-inpatient-health-care>.)