CHICAGO BREAST CANCER QUALITY CONSORTIUM
COMPONENT PATIENT SAFETY ORGANIZATION
PATIENT SAFETY WORK PRODUCT POLICIES AND PROCEDURES

TITLE: CONSORTIUM-PSO Patient Safety Work Product Policies and Procedures

EFFECTIVE DATE: September 1, 2009 and revised September 1, 2010

Purpose:

To create a process for the collection and analysis of patient safety work product ("PSWP") by the Consortium-PSO to encourage a culture of safety, to provide feedback, and to provide assistance to effectively minimize patient risk.

Policy:

The Consortium-PSO shall, in collaboration with participating healthcare providers and in accordance with its Confidentiality and Privilege of PSWP Policy, identify the information within a patient safety evaluation system ("PSES") which shall be reported to and from the Consortium-PSO. The Consortium-PSO shall not generally receive individually identifiable health information from participating healthcare providers. To the extent practical and appropriate, the Consortium-PSO and its contractors/subcontractors shall collect PSWP from participating healthcare providers in a standardized manner that permits valid comparisons of similar cases among similar providers.

Procedures:

(1) The Consortium-PSO and its contractors/subcontractors shall work with participating healthcare providers to determine which PSWP, both identifiable and nonidentifiable, shall be reported to and from the Consortium-PSO. At this time, the PSWP will include aggregated data from years 2006-2012 relating to breast cancer screening and treatment information. The data collection tools have been developed by the Consortium-PSO in collaboration with its Mammography Measures Advisory Board and Treatment Measures Advisory Board. A description of these tools is included in the Data Sharing Agreement. Additionally, starting in 2010 the Consortium in collaboration with a contracted process engineering firm will perform an environmental scan of business processes at a subset of participating providers and such data will be considered PSWP.

(2) The Consortium-PSO shall utilize PSWP for the purpose of providing direct feedback and assistance to participating healthcare providers to effectively minimize patient risk and improve patient care. Each participating healthcare provider will be provided a report by the Consortium-PSO outlining how their data compares to providers generally and those participating in the environmental scanning project will be provided with a report on how they can improve with respect to breast cancer screening and/or treatment.
(3) PSWP reported by a participating healthcare provider to the Consortium-PSO shall remain privileged and confidential in accordance with the Consortium-PSO Confidentiality and Privilege of PSWP Policy and the Patient Safety Act and as laid out in the Data Sharing Agreement.

() PSWP collected by a contractor/subcontractor in the environmental scanning project shall remain privileged and confidential in accordance with the Consortium-PSO Confidentiality and Privilege of PSWP Policy and the Patient Safety Act and as laid out in the Data Sharing Agreement.

(5) The Consortium-PSO shall maintain PSWP separately from the rest of the Task Force and establish appropriate security measures to maintain the confidentiality of the PSWP. Each participating healthcare provider’s data shall be submitted via the Illinois Hospital Associations’ (IHA) web portal for this project. The PSWP collected in this manner will be maintained in electronic form by IHA and will only be accessible by designated Consortium-PSO staff and the Chair of the Mammography Advisory Board and Treatment Advisory Board. Data collected by contractors or subcontractors for the environmental scanning project will also be collected and maintained in a manner consistent with the Patient Safety Act.

(5) All PSWP files will be stored on the IHA provided server. Consortium-PSO staff may not save PSWP files to the Task Force servers or other computers. PSWP files must be accessed at the Consortium-PSO offices using the Consortium-PSO computers. This is to minimize the risk of inadvertently storing any electronic PSWP in a location other than the IHA provided server. RUMC IT will analyze Consortium-PSO computers to see if temporary files need to be wiped from each when utilizing PSWP accessed from the IHA server.

(6) Access to the IHA provided server will be password protected and will have an audit trail in compliance with the data security requirements of the Patient Safety Act.

(7) The Consortium-PSO shall maintain a separate PSWP printer that is used solely by Consortium-PSO staff and is located in the offices in a separate location from the general Task Force printer. This printer will be located at the end of the office closest to the Consortium-PSO staff managing data. In general, Consortium-PSO staff will avoid printing PSWP but in such instances, where printing is necessary, the Consortium-PSO printer will be used and the printed copy of PSWP will be shredded as soon as possible.

(8) Paper copies of PSWP will be stored at the Consortium-PSO offices in a designated and secure file cabinet.

(9) When it is necessary to share PSWP with Consortium Advisory Board Chairs for analysis, these files will be kept under lock at the offices of each Board Chair.

(9) When possible and practical, paper PSWP will be scanned and stored electronically and the paper copy of PSWP will be shredded.
(11) The configuration of work cubicles for Consortium-PSO staff will be designed to maximize separation between the Task Force and the Consortium-PSO as recommended by the Patient Safety Act and its regulations. However, we recognize that there will be some overlap due to certain Consortium-PSO staff working on a part-time basis and their work station being shared.

(12) The Consortium-PSO will require that its workforce (including volunteers) and any other contractor staff shall not make unauthorized disclosures of PSWP to the rest of the Task Force. The Consortium-PSO workforce with access to identifiable PSWP will be required to sign confidentiality agreements. Disclosure of identifiable PSWP will be a dismissible offense.

(13) To the extent practical and appropriate, the Consortium-PSO shall collect PSWP from participating healthcare providers in a standardized manner that permits valid comparisons of similar cases among similar providers.