

**PSO? PSES? PSWP? You Have Questions, We Have Questions – Webinar Series**

**Question & Answer Follow-up**

**September 12, 2013**

QUESTION	ANSWER
<b><i>Q: Do documents created in the PSES become PSWP only when they are submitted?</i></b>	Documents that are developed within the PSES, defined as Patient Safety Work Product, receive protection at the time they are developed. "Deliberations and analysis" that occur within the PSES are protected at the time they occur. The facility's non-PSWP and PSWP may be submitted to a PSO (Non-PSWP IS NOT protected at the facility level, PSWP IS protected at the facility level). All data and information submitted to the PSO is protected as PSWP at the PSO level.
<b><i>Q: Does PSQIA apply only to hospitals, or can other settings such as ambulatory care centers utilize PSO protections?</i></b>	The PSQIA applies to any healthcare provider that is licensed by a respective state. Therefore, any state licensed facility or healthcare professional can work with a PSO and obtain the respective protections available through the PSQIA.
<b><i>Q: Can you give an example of how the PSO protections can allow greater sharing of safety work internally in a hospital?</i></b>	PSWP can be shared within an organization's workforce, which can include employees, contractors, volunteers, medical staff and others, as long as they are under the control of the facility for purposes of handling the information. The organization needs to maintain the confidentiality of the information, so sharing it beyond a group with the reasonable need to know is risky. The statute allows broader sharing than attorney client privilege or peer review protections, while providing legal and confidentiality protection of broad-based quality and safety activities (such as the work of tracer committees), provided that these activities are defined within their respective policies. In a health system setting, hospitals can share their lessons learned from quality improvement activities across the system within the protections of the PSQIA, again, provided that it is defined within their respective policies.
<b><i>Q: We are licensed for 58 beds, however on our cost report we list as 46 acute care beds and 12 geropsych beds. Do we meet requirements for participation?</i></b>	The regulations for Section 1311(h) of the Affordable Care Act have not yet been completed. The assumption is the provision would be based upon total licensed beds; however, the final regulation from the Centers for Medicare & Medicaid Services should clarify this.
<b><i>Q: If an electronic event reporting system is used to capture all incidents directly from staff, can it be part of the PSES (since those events that will move on to litigation or outside regulatory reporting will be included)?</i></b>	Yes, the event reporting system, whether electronic or non-electronic, can be defined as being within the PSES. However, this is something that should be discussed internally with your claims and legal counsel to determine whether your organization desires to receive protection for any, some, or all of the events reported through your event reporting system.
<b><i>Q: How does a facility balance the PSQIA protection and confidentiality with the desire to be transparent?</i></b>	PSO participation and transparency go hand-in-glove. We believe that PSO participation helps to establish a culture that encourages more open reporting of adverse events, near misses and unsafe conditions so that staff are more aware and proactively address vulnerabilities that can lead to mistakes. Facts of a case that are documented in the medical record or

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<b>CONTINUED</b>	other original source document as well as actions taken in response to an adverse event are elements that cannot be protected as PSWP and, therefore, can be shared. The PSQIA also provides other ways in which full disclosure can take place if certain steps are followed.
<b>Q: Do most organizations actively involved in PSO activities define all events in their event reporting system as PSWP or do they maintain parallel systems i.e. define and submit selected items from their event reporting system as PSWP?</b>	Organizations have varying policies regarding the designation of some, all or none of their events as PSWP. Those desiring more extensive protection can include their entire event reporting system in their PSES; some choose to define only the events that reach the level of potential claims as PSWP, and some choose to not include their event reporting system within their PSES. This decision should be made in consultation with your claims department and legal counsel based upon your organization's desire for protections that are available through participation with a PSO.
<b>Q: How does an organization join or become a part of the PSO?</b>	The first step is to determine if your organization would benefit from the protections, sharing and learning available through PSO participation. Then determine what type of PSO would meet your organization's needs (the AHRQ has a tool at <a href="http://www.pso.ahrq.gov">www.pso.ahrq.gov</a> with questions to ask). Once you identify a PSO that best meets your needs, contact the PSO (URLs are also available at the AHRQ Website, or go directly to the PSO). The Center for Patient Safety also has information available at <a href="http://www.centerforpatientsafety.org">www.centerforpatientsafety.org</a> or you can request additional information from us by email, calling or completing an Information Request form <a href="http://www.cvent.com/Surveys/Questions/SurveyMain.aspx?r=3a3b0931-86d5-4284-bec1-497287653579&amp;ma=0">http://www.cvent.com/Surveys/Questions/SurveyMain.aspx?r=3a3b0931-86d5-4284-bec1-497287653579&amp;ma=0</a> .
<b>Q: Are incident/event reports considered PSWP?</b>	Incident reports can or cannot be defined as PSWP depending upon your organization's desire to obtain the PSQIA federal protections for those reports. Some facilities desire protection for all, some or none of their event reports based upon recommendation from their claims department and legal counsel.
<b>Q. Is sharing of Root Cause Analysis understanding outside of RCA meetings or M&amp;M forums protected?</b>	Sharing of RCA "understanding" (the causal factors and issues identified during the RCA) may be defined within your PSES and receive available protections as long as the information is only shared with members of your defined workforce who have signed appropriate confidentiality agreements and understand such information may not otherwise be disclosed. One example is a health system process to share "lessons learned" each month from RCA "understandings" that are discussed among system facilities along with recommended actions to mitigate or prevent recurrence. The actions taken as a result of RCA "understanding" to correct a deficiency identified in the RCA itself cannot be protected and may be (and should be) broadly shared with staff, regulators and others interested in actions the organization is taking to reduce error.

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