



Data Guidance for Patient Safety

The Work of the IOM

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Appropriation Language

- AHRQ to support the development of guidance on the collection of uniform data related to patient safety.
 - How providers are to report.
 - How State may collect data
 - How to analyze and disseminate data



Congressional Action

- AHRQ designated as lead agency for patient safety research
- Congress appropriates \$50 million in FY 01 \$55 million in FY 02 and \$55 million FY 03 for patient safety research and development \$84 million proposed for FY 04



It is an International Issue

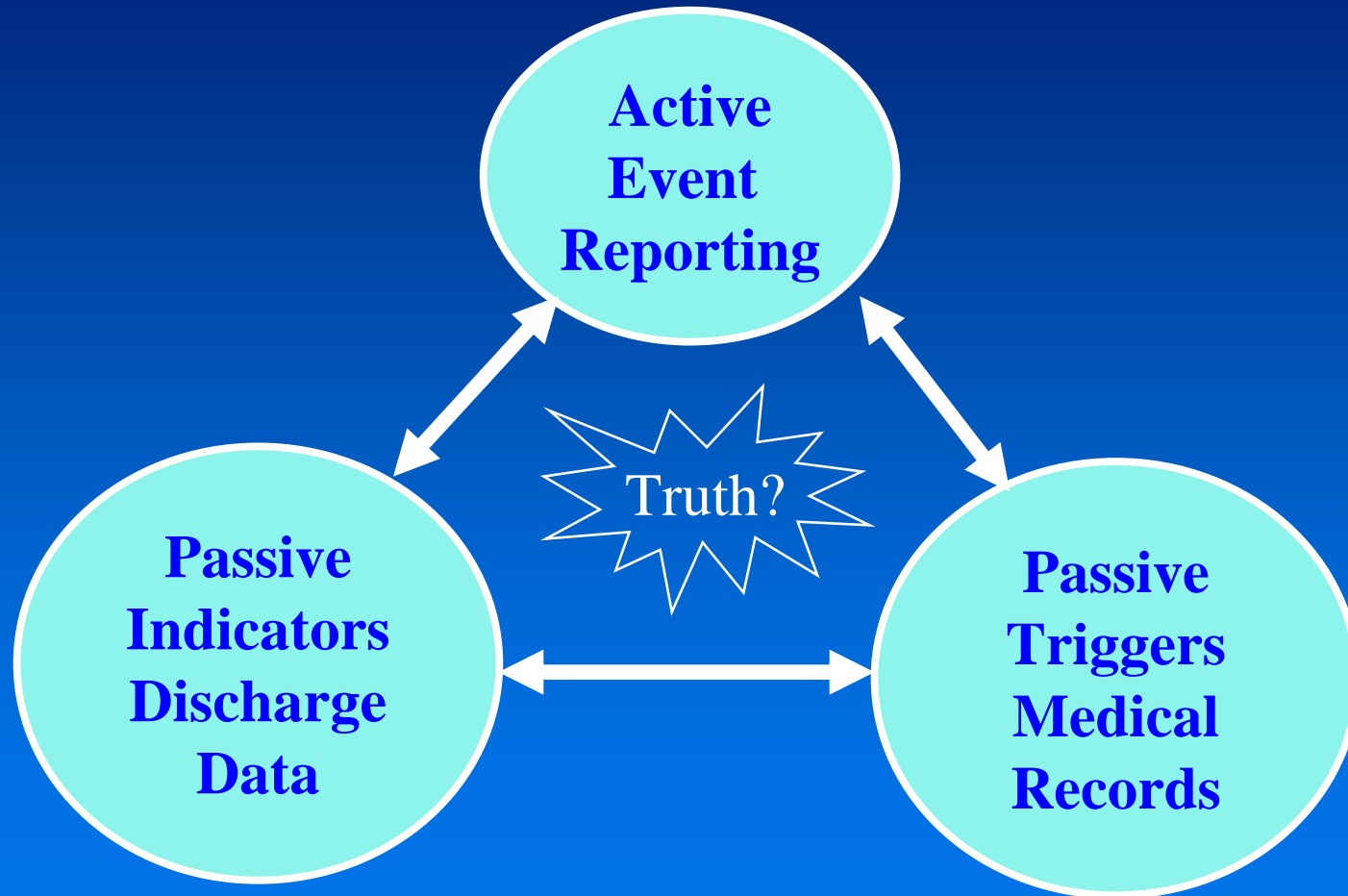


- The US is not alone in facing the issue of patient safety
- Great Britain
- Australia
- Europe
- Japan

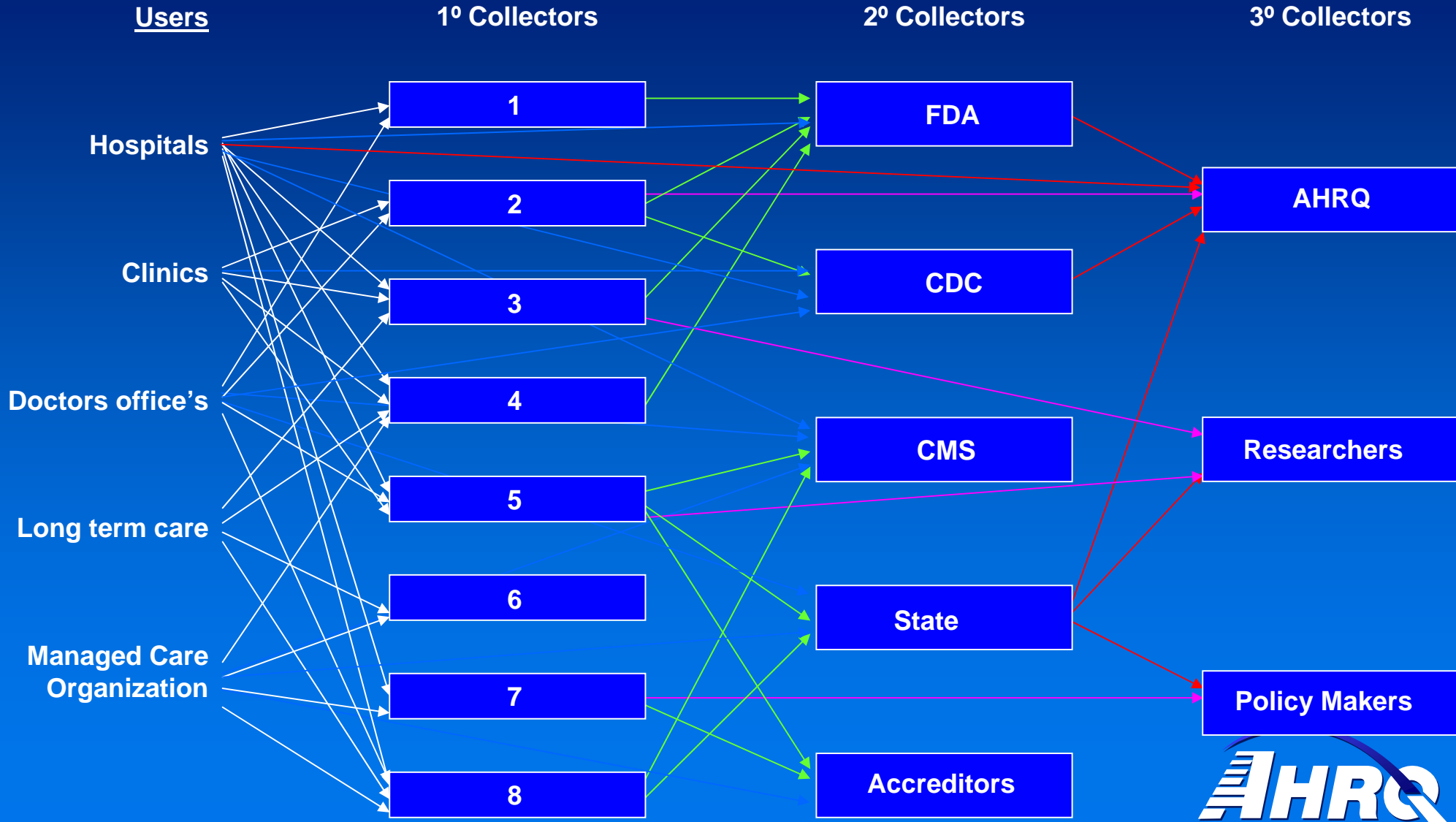
Iceberg Model of Accidents and Errors



Looking for Harm



Current Patient Safety Data Flow



IT Tower of Babel



Avoiding the Electronic Graveyard



IOM Charge

- The project is to produce a detailed plan to facilitate the development of set standards applicable to the collection, coding and classification of safety information. The plan will apply to both adverse event data and errors data.

Data Standards Committee

- Paul C. Tang, M.D. Chair
- Molly Joel Coye, MD, MPH Vice Chair
- Suzanne Bakken, RN, DNSC
- E. Andrew Bales, MD, PhD
- David W. Bates, MD, MSc
- John R. Clarke, MD
- David C. Classen, MD MS
- Simon P. Cohn, MD, MPH
- Carol Cronin, MSW, MS
- Jonathan Seth Einbinder, MD, MPH
- Larry D. Grandia, ME
- W. Ed Hammond, PhD
- Brent C. James, MS, MStat
- Kevin Johnson, MD, MS
- Jill Rosenthal, MPH
- Tjerk W. van der Schaaf, PhD
- IOM Staff:
 - Janet Corrigan
 - Philip Aspden
 - Julie Wolcott



Committee Meetings

1. May 6, 2002
2. September 23, 2002
3. November 25, 2002
4. January 23, 2003
5. February 10, 2003
6. April 1, 2003
7. June 9, 2003



Additional Charge to IOM Committee

Provide Guidance on the key care delivery-related capabilities of an electronic health record (EHR) system to include:

1. Longitudinal collection of electronic health information for and about persons
2. Immediate electronic access to person- and population-level information by authorized and only authorized users
3. Provision of knowledge and decision-support that enhance the quality, safety, and efficiency of patient care
4. Support of efficient processes of health care delivery



Core Functions for an Electronic Health Record System

- Health information and data
- Results management
- Order entry/management
- Decision support
- Electronic communication and connectivity
- Patient support
- Administrative processes
- Reporting & population health management



Timeline for an EHR System

Phase I 2004-2005

1. Capture of essential patient data already found frequently in electronic form such as lab results
2. Acquisition of limited decision support capabilities for which software is readily available
3. Generation of reports required by external organizations for quality and safety oversight and public health reporting



Phase II 2006-2007

1. Allow for the capture of defined sets of health information
2. Incorporate a core set of decision support functions (e.g. clinical guidelines support, care plan implementation)
3. Support the exchange of basic patient care data and communication (e.g., lab results, med data, discharge summaries) among the care settings (e.g. pharmacies, hospitals, nursing homes, home health agencies, etc.) within a community.



Phase III 2008-2010

- The committee believes that fully functional, comprehensive EHR systems will be available and implemented.
- It may take longer to for providers to use a system that provides for the longitudinal collection of complete health information for an individual; immediate access to patient information by all authorized users, extensive use of knowledge support and decision support systems; and extensive support for applications that fall outside immediate patient care (e.g., homeland security, public health, clinical research)



IOM Committee Conclusion

- The committee hopes its work will be useful to HL7 in its efforts to develop functional statements for an EHR system; to government programs and private purchasers in their efforts to encourage and assist health care providers in deploying EHR systems



Stay Tuned

- The final report of the IOM Committee on Data Standards for Patient Safety is currently in the external review process.
- The final report *Patient Safety: A New Standard of Care* will be released in late October 2003.
- Rumor has it that it is a very good read.





Thank You

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