ECRI Institute PSO

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PSO Monthly Brief

January 2010

Welcome to the 1st edition of PSO Monthly Brief. Each month you will receive a brief article to help you keep informed about PSOs or to provide you with materials to use with your peers. A wealth of information is available in each issue using the links at left. We are sending this to you because you recently opted-in for the PSO Monthly Brief, previously clicked the "Keep Me Informed" button on ECRI Institute PSO's web site, or signed up for a PSO webinar. You can unsubscribe below if you prefer not to receive this free communication.

PSOs--It's not just the data protections.

PSOs have been created to facilitate adverse event data aggregation and analysis, and development of recommendations so your efforts to implement patient safety improvements will result in protecting your patients, your staff, and your organization's reputation—and reducing the costs of preventable claims.

So what have we been hearing in early PSO discussions? Because the new federal legal protections are a key enabling element of the newly implemented Patient Safety and Quality Improvement Act of 2005, it is only natural that there has been special interest in the federal protections themselves and the differences between federal and state protections. That, and the practical details related to submitting adverse event data to PSOs without duplicating effort with other reporting requirements. Mapping existing adverse event systems to PSO systems is a hot topic and in future editions the PSO Monthly Brief will discuss both the protections and mapping issues.

But for this 1st edition of the Brief we want to maintain focus squarely on getting to the best outcomes.

- Does your organization or your PSO have a plan to use the protections to survey your staff to identify the greatest risk areas and prioritize the best opportunities for improvement?
- Do you intend to supplement your staff with the PSO's experts to help with analysis and recommendations?
- When it's time to implement improvements, do you have access to time-savings resources like patient safety CME courses for clinical staff, prewritten policies and procedures, PowerPoints to use in meetings, and tool kits to work on issues such as falls, wrong-site surgery, pressure ulcers or central line infections?
- Will you have dashboards and reports to help you monitor the progress of your patient safety initiatives?

Tapping into the PSO's full potential is what it's really about. So again, it's not just legal protections or ease of entering data into a PSO, it's the support you get from the PSO to learn from and implement improvements that make participation in a PSO worthwhile.