RSA 126-A:13
Health and Human Services Oversight Committee
September 14, 2018
LOB 205

Members Present: Rep. Frank Kotowski, Rep. James MacKay, Rep. Frank Byron, Rep. Charles McMahon, Senator John Reagan
Absent: Rep. LeBrun, Senator Jeb Bradley, Senator Martha Fuller-Clark

1. Call to Order / Approval of Minutes

Rep. Kotowski called the meeting to order at 10:00 AM. The minutes of the June 8, 2018 meeting were reviewed. Senator Reagan made a motion to approve the minutes, seconded by Rep. James MacKay. The minutes were approved.

2. Rep. Mariellen MacKay; Foster Care Subcommittee

Rep. Mariellen MacKay informed the committee that the foster care subcommittee was meeting regularly and summarized its recent work, as well as providing a written report. The subcommittee will submit a request when the new session begins to renew its work.

Rep. Kotowski asked if there were any pressing legislative issues that needed attention and Rep. Mariellen MacKay answered that legislation may be needed around group home rates and insurance liability.

3. Anne Diefendorf; NH Health Care Quality Assurance Commission Annual Report

Ms. Diefendorf presented a summary of the Commission's annual report. The Commission has worked hard to establish a collaborative relationship around quality and safety issues between hospitals. Currently among the issues being focused on by the committee are antibiotic stewardship and workplace safety / harm prevention.

Rep. Kotowski asked what kind of harm? Ms. Diefendorf explained that there were issues around violence by patients against staff, and by patients against each other, as well as promoting a just culture.

4. Katrina Hansen; Health Care Acquired Infections Annual Report

Ms. Hansen briefly summarized the Healthcare Associated Infections reports on hospitals and ambulatory surgery centers.

Rep. McMahon asked if there were any issues that could be addressed proactively through legislation, if there were additional incentives that might be necessary to increase compliance with best practices? Ms. Hansen explained that a data system through the National Health Safety Network was being put in

place, so that concentrations of preventable infections could be detected at the unit level and interventions could be highly targeted.
Rep. McMahon asked if Ms. Hansen had seen improvement over the past six years. Ms. Hansen replied that rates here similar from year to year, and low relative to the national baselines. She warned that more aggressive surveillance can lead to the discovery of more instances of preventable infections, which can make rates appear to be rising when in fact the actual rate has not appreciably changed. The numbers are very small.

Rep. Byron asked what the State was doing with all the data being collected, how was it being used? Ms. Hansen replied that the published information was shared with facilities and hospital advisory groups, and was used by them for their internal quality efforts. The Department also monitors numbers for increases in rates so that they can target their interventions and education efforts. While there are few calls from patients attempting to assess the quality of care, there are many contacts from providers.

Rep. Byron asked if there were any issues that might require legislation, and Rep. Hansen replied that currently they were working on updating the rules through JLCAR. Additionally, there are discussions about whether legislative modifications to the Department's authority need to be made – it's nice to have more data, but that has to be balanced against the additional resources providers have to expend on collecting and reporting it rather than on providing care.

Rep. Byron asked about flu vaccination rates for healthcare personnel – what was the Department doing to encourage higher vaccination rates? Is there a statute that they must be vaccinated? Ms. Hansen explained that facilities have been working with some success to increase vaccination rates. The Department works with facilities that have particularly low rates to help them increase rates.

Sen Reagan asked if there was any statistical analysis of vaccination rates among the healthcare workforce and flu outbreaks. Ms. Hansen answered that it was difficult to show causal links statistically but they are working on an analysis and hope to be able to assess correlation over time.

5. Michael Fleming and Debra Wyman; Adverse Events Annual Report

Mr. Fleming and Ms. Wyman submitted the annual adverse events annual report and briefly summarized it.

Rep. James MacKay asked why statistics from NH Hospital were not collected and compiled in the same report, and Mr. Fleming replied that because NH Hospital was not licensed under the same statute, it was not included in this format. Rep. MacKay commented that it seemed like a significant oversight. Mr. Fleming explained that reports were collected at the federal level when complaints were made. Rep. MacKay noted that two of the adverse events reported were suicides, and that the suicide reporting subcommittee had been dealing with how providers should report. Ms. Wyman said that she was unsure of the exact instances under which a suicide qualified for reporting as an adverse event.

Rep. Kotowski noted that the report captured numbers of cases, but didn't provide any ratios comparing those cases to number of patients – wouldn't it be more useful to have some kind of percentages? Mr.

Fleming answered that part of the value of the report was in making hospitals collect the numbers and look at their own data. Rep. Byron asked how the average citizen could understand or make use of the numbers since there was no relationship in the report between the number of adverse events and the number of patients seen. Mr. Fleming answered that both numbers were reported in different columns. Ms. Wyman recalled that one year they had listed the number of operations w/ the number of events. Mr. Fleming explained that while they could discuss it, it was not just an issue of relating number of patients or procedures to the number of adverse events – it also had to do with the complexity and difficulty of the cases. Patients are often transferred from one facility to another in order to receive specialty treatment for difficult or complicated cases, so simply looking at the number of patients to adverse events created apples and oranges comparisons between providers.

Rep. McMahon asked if there was any requirement for hospitals to report adverse events, and Ms. Wyman replied that there was a $2000 penalty for not reporting an event. Rep. McMahon noted that some facilities reported no events and Ms. Wyman explained that those hospitals didn't report any events. Rep. Byron commented that if there were no events, they should report zero events rather than not reporting. Mr. Fleming explained that that is not how the statute is written, and that the Department does do some quality assurance and hasn't found any instances of a hospital with unreported events. Senator Reagan asked if there was a requirement from CMS that hospitals report adverse events. Mr. Fleming explained that their positions were 90% funded by CMS, although they were state employees, and that the numbers they compiled were for CMS. Rep. McMahon asked who decided how their work was done, and Mr. Fleming explained that DHHS contracted with CMS, and the work done was defined in that contract. Rep. McMahon commented that hospitals should report zero when there were zero events, rather than not reporting anything, and Mr. Fleming responded that that isn't how the statute is written, that the Department checks in with facilities that aren't reporting anything, and that he didn't feel it was an issue.

Rep. Kotowski asked if there was any legislative action needed, Mr. Fleming answered that he felt that the hospitals had been doing a good job addressing issues, and things were moving in the right direction.

6. Adjournment

Rep. Kotowski explained that the Commissioner was unable to come to the meeting because he was celebrating Rosh Hashanah, but that he would be there at the next meeting. The next meeting will be held on October 19, 2018 at 10 AM.

The meeting adjourned at 11:05 AM.

Respectfully submitted,

Rep. James MacKay