



# Wyoming Healthcare Commission

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September 30, 2005

Joint Labor, Health and Social Services Committee  
Co-Chairs Sen. Charles Scott and Rep. Doug Osborn

Dear Legislators,

The Wyoming Healthcare Commission was directed by the Legislature during the 2004 Special Session in Enrolled Act 2, Section 1, to study the feasibility, costs and benefits of a new system to address and resolve health care errors and health care malpractice. The mandated study was broad based and far reaching, requiring pre-analysis of numerous medical errors studies before formation of recommendations was possible. With assistance from Wyoming Department of Health attorney Fran Cadez and Harvard University's Dr. Michelle Mello, the Commission was able to create a framework for logical and feasible steps toward medical errors redress systematically and effectively in Wyoming. The recommendations from the Commission are detailed in the enclosed executive summary and study report, as required by Enrolled Act 2. In brief, the recommendations are:

- Monitor on-going research in the area of patient safety to ensure Wyoming's reporting system tracks adverse events that are shown by research to significantly impact patient safety. Monitor revisions to the List of Serious Reportable Events to ensure Wyoming's reporting system reflects the most recent changes and information relevant to this system.
- Adopt the National Quality Foundation definitions associated with the List of Serious Reportable Events.
- Continually promote error analysis and corrective action within reporting institutions. Establish distribution of "lessons learned" from error reporting and corrective measures.

- Determine the benefits and burdens encompassed by pursuing certification under the Federal Patient Safety and Quality Improvement Act of 2005.
- Encourage healthcare facilities to adopt prevention initiatives (i.e. the Institute of Healthcare Improvement's 100,000 Lives Campaign). Begin dialogue with licensing boards on error accountability.
- Review Wyoming statutes for discovery protections for error reporting and activities associated with reporting, such as error analysis or remediation measures. To assist in drafting legislation for discovery protection of Wyoming's reporting activities, review statutes and case law of established state adverse event reporting systems to determine court interpretation of discovery protections. Explore sanctions for facilities which fail to report errors under Wyoming's reporting statute, W.S. §35-2-912. Determine the applicability of protections under the Federal Patient Safety and Quality Improvement Act.
- Support the newly formed Wyoming Health Information Organization (WYHIO) in development of a standard medical record keeping system and require adoption by healthcare providers and facilities, being cognizant of national standards that may be developed in this area.
- Make patient safety a priority of Wyoming's healthcare community through state support of education and training of administrators, providers and healthcare workers on patient safety issues.
- Require the Wyoming Board of Medicine and hospital facilities to mandate that providers acquire annual CME in patient safety initiatives, design, application and interdisciplinary training.
- Develop and support awareness campaigns on the elements and protections extended to Wyoming healthcare providers under W.S. §1-1-130(2005). Support the development of provider communication skills in the patient setting.
- Empower an independent commission to support educational efforts to promote the patient's role in the safe delivery of medical care and understanding adverse event data and continuously review evidence-based patient safety interventions to determine clinical effectiveness as well as cost-effectiveness in avoiding adverse events. Following review, the independent commission should promote specific interventions for implementation.
- Determine preferred size, method of appointment and make up of the independent commission by reviewing commissions established in other states and countries. Engage stakeholder participation in the independent commission to collect data on adverse events and recommend practice improvements based on review and

- analysis of data.
- Conduct a survey of healthcare providers and facilities to determine current barriers to implementing patient safety practices. Convene a meeting of healthcare providers and stakeholders to identify methods to overcome barriers and create collaborations to promote patient safety.
  - Investigate healthcare facilities with established business case models promoting patient safety. Empower an independent commission to develop a model business case to assist healthcare facilities to establish this approach to supporting patient safety. Determine and provide the level and extent of assistance needed by Wyoming healthcare facilities to create a business case to support patient safety efforts. Empower an independent commission to work with employers, insurers and consumer groups to support healthcare facilities and providers who demonstrate a commitment to patient safety.
  - Pass legislation enabling entities to develop demonstration or pilot projects to compensate patients for well defined and readily identifiable errors or adverse events.
  - Review and analyze Wyoming Insurance Department claims data to identify medical practice areas experiencing high rates of malpractice claims. Identify and define a discrete set of medical injuries eligible for compensation through an administrative compensation system.
  - Support research to identify the potential costs and benefits of implementing enterprise liability in Wyoming, including direct effects on patient safety.

The Wyoming Healthcare Commission has submitted within its budget request an allocation of funding needed to further medical errors remediation recommendations cited above.

Sincerely,

T. Chris Muirhead  
Chairman