

1 AN ACT relating to patient safety by requiring Kentucky hospitals to annually  
2 survey employees regarding patient safety culture and practices with the results to be  
3 publicly reported on a Web site maintained by the Cabinet for Health and Family  
4 Services.

5 WHEREAS, the Joint Commission is an independent, not-for-profit organization  
6 that accredits and certifies over 22,000 health care organizations and programs in the  
7 United States; and

8 WHEREAS, the Joint Commission publishes accreditation standards for hospitals;  
9 and

10 WHEREAS, Joint Commission Standard LD.03.01.01 for hospital standards states  
11 that leaders should "create and maintain a culture of safety and quality throughout the  
12 hospitals" and "regularly evaluate the culture of safety and quality using valid and reliable  
13 tools"; and

14 WHEREAS, the Agency for Healthcare Research and Quality (AHRQ) is the lead  
15 federal agency charged with improving the safety and quality of America's health care  
16 system; and

17 WHEREAS, 630 hospitals in the United States submitted results to AHRQ's 2018  
18 Survey on Patient Safety Culture, representing nearly ten percent of all hospitals in the  
19 United States; and

20 WHEREAS, a 2019 study by Dr. Jacob Sunshine and others, titled "Association of  
21 Adverse Effects of Medical Treatment in the United States: A Secondary Analysis of the  
22 Global Burden of Diseases, Injuries and Risk Factors Study," ranked Kentucky 47th out of  
23 50 states in adverse medical events and showed Kentucky's ranking as little improved  
24 since 1990; and

25 WHEREAS, a hospital that develops a robust safety culture among its employees,  
26 physicians, administrators, and patients is less likely to have an adverse medical event;

27 NOW, THEREFORE,

1 *Be it enacted by the General Assembly of the Commonwealth of Kentucky:*

2       ➔SECTION 1.     A NEW SECTION OF KRS 216.2920 TO 216.2929 IS  
3 CREATED TO READ AS FOLLOWS:

4 *(1) All Kentucky hospitals shall annually survey employees regarding patient safety*  
5 *culture within the hospital. The Cabinet for Health and Family Services shall*  
6 *design, administer, and analyze the results of the surveys.*

7 *(2) In designing the patient safety climate survey the cabinet shall:*

8 *(a) Utilize best practices from peer-reviewed academic research;*

9 *(b) Consult with individuals with expertise in the development and utilization of*  
10 *patient safety climate surveys within hospital settings;*

11 *(c) Review patient safety culture surveys which have been developed and*  
12 *previously utilized in hospital settings such as those developed by the*  
13 *Agency for Healthcare Research and Quality;*

14 *(d) Consult with hospital administrators, physicians, nurses, other hospital*  
15 *employees, and the victims of those who have experienced an adverse*  
16 *medical event and their families regarding the adequacy and*  
17 *appropriateness of the proposed content items;*

18 *(e) Consult with other individuals and institutions that design surveys to*  
19 *optimize the effectiveness of the survey;*

20 *(f) Consider the role of patient demographic characteristics including age,*  
21 *gender, race, and poverty in the safe delivery of healthcare services; and*

22 *(g) Consider the availability of historical data from established surveys in*  
23 *benchmarking and comparing Kentucky hospital performance to other*  
24 *hospitals in the United States.*

25 *(3) The patient safety culture survey shall be designed to measure aspects of patient-*  
26 *safety culture and include questions regarding:*

27 *(a) How and to whom hospital medical errors are reported;*

- 1        (b) How and to whom events that threaten patient safety are reported;
- 2        (c) How the hospital responds to medical errors and threats to patient safety;
- 3        (d) The extent to which there is open communication among hospital medical
- 4                staff regarding patient care;
- 5        (e) How and what information about patient care is exchanged among hospital
- 6                staff when responsibility for a patient's care is changed;
- 7        (f) The extent to which hospital management supports policies and procedures
- 8                for patient safety;
- 9        (g) How the hospital supports learning and continuous improvement of policies
- 10                and procedures;
- 11        (h) The extent to which supervisors support policies and procedures for patient
- 12                safety;
- 13        (i) How the hospital is staffed and the pace of the work for staff; and
- 14        (j) The extent to which there is teamwork by hospital staff.
- 15        (4) All hospitals shall provide for surveys to be completed and submitted with
- 16                anonymity while eliminating the possibility of duplicate submissions.
- 17        (5) Any hospital that fails to report a statistically valid sample or none at all shall be
- 18                classified for purposes of the cabinet's Web site composite score as "patient safety
- 19                culture unknown."
- 20        (6) The patient safety culture survey shall be designed by October 30, 2020, and
- 21                distributed for submission to hospitals within ninety (90) days thereafter.
- 22        (7) Survey results shall be reported with a composite score for patient safety culture
- 23                at the hospital level on a Web page maintained by the cabinet and submitted to
- 24                the Interim Joint Committee on Health, Welfare, and Family Services by June
- 25                30, 2021, and annually thereafter.
- 26        (8) The cabinet may promulgate administrative regulations to implement the
- 27                provisions of this section.