



TEXAS PATIENT SAFETY ORGANIZATION PROGRAM

Your Partner In Improving Healthcare Quality



Who's Eligible to Participate?

All Healthcare facilities are eligible to participate in the PSO program. However, **grant funding is available to all rural and community hospitals under 50 licensed beds to access the PSO services at no cost** (except for a one-time \$500 setup fee).

To participate, simply complete the form on the back and fax to the TORCH Foundation at **(512) 873-0046** or e-mail to Quang Ngo at **quang.ngo@torchnet.org**.

Working Together to Build a Safer Healthcare System

About the Texas PSO

The Texas Patient Safety Organization (TXPSO) is one of the first federally certified PSOs in the country approved to serve as an independent, external expert to assist healthcare providers collect, analyze and aggregate patient safety work products locally, regionally and nationally. Learn how the TXPSO can help your risk management effort to reduce the incidence of adverse events.

See application on the back side

Texas Patient Safety Organization (TXPSO) Program

The TORCH Foundation has received a grant from the Texas Department of Rural Affairs (TDRA) to support the Texas Patient Safety Organization (TXPSO) program for rural and community hospitals in Texas. The purpose of the Texas PSO program is to help hospitals and healthcare providers submit and analyze information about incidences in which patients were adversely affected in order to mitigate future adverse events.

The Patient Safety Act of 2005 authorizes the creation of PSOs to improve quality and safety by reducing the incidence of events that adversely affect patients. The law establishes strong Federal confidentiality and privilege protections for information to create a secure environment where healthcare organizations and clinicians can voluntarily report and analyze patient safety data, such as near misses and incidences, to help identify root causes of adverse events, reduce risks, and develop best practices.

Benefits to Hospitals and Providers

The Texas PSO program provides many benefits, including:

- **Strong Federal confidentiality and privilege protections** so that healthcare organizations and clinicians can report, aggregate and analyze patient safety events, medical errors and quality information without fear of legal discovery or additional liability
- **Facility-specific and aggregated analysis of submitted incident reports for comparison and benchmarking** to help hospitals learn from the experiences of others (all reported data is de-identified and strictly confidential and protected)
- **Online access to comparative data and reports** to help improve processes and develop best practices
- **Meaningful aggregation and analysis of data using Common Formats** to collect, track and submit standardized information regarding a range of patient safety events, including incidents, near misses and unsafe conditions for comparative and longitudinal analysis of similar cases among similar providers. Common Formats optimize the opportunity to compare trends and identify patterns underlying the causes of patient safety problems
- **Grant funding** to strengthen a culture of patient safety and risk management without incurring significant out-of-pocket cost



Texas Patient Safety Organization Program



APPLICATION

To Participate

The Texas PSO Program is provided through collaboration between the TORCH Foundation and the Texas Patient Safety Organization. **Grant funding is available to all rural and community hospitals under 50 licensed beds to access the PSO services at no cost** (except for a one-time \$500 setup fee). To participate, complete this form and fax to **(512) 873-0046** or e-mail to **quang.ngo@torchnet.org**.

Annual Participation Fees

Facilities with...	Annual Fee	One-time Setup Fee
<50 beds*	\$0 (grant funded)	\$500
50-100 beds	\$2500	\$1000
101-150 beds	\$3500	\$1500
>150 beds	\$5000	\$2000

*Licensed beds

TORCH Foundation:

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Texas PSO:

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 (713) 654-7477
jbeinart@txpso.com
www.txpso.com

Participant Information

Hospital Name: _____

Address: _____

City: _____ State: ____ Zip: _____

Phone: _____

Fax: _____

Email: _____

Authorized Representative: _____

Title: _____

Signature: _____

Date: _____

Signature confirms that all information provided herein is accurate, that the signor is legally authorized to represent and act on behalf of the above organization, and that the organization understands, accepts, and agrees to the terms and provisions of the Texas PSO Program..

Resources

Patient Safety and Quality Improvement Act – Overview: <http://www.pso.ahrq.gov/regulations/regulations.htm>

PSO – Final Rule: <http://www.pso.ahrq.gov/regulations/finalrule.htm>

Patient Safety Act: <http://www.pso.ahrq.gov/statute/pl109-41.htm>

AHRQ’s Common Formats <http://www.pso.ahrq.gov/formats/commonfmt.htm> or www.psoppc.org

List of AHRQ-Approved PSOs: www.pso.ahrq.gov/listing/psolist.htm