

The Senate Health and Human Services Committee offered the following substitute to SR 22:

A RESOLUTION

1 Creating the Hospital Health Care Standards Commission; and for other purposes.

2 WHEREAS, the U.S. Centers for Disease Control and Prevention estimates that between
3 44,000 to 98,000 Americans die each year from adverse patient events; and

4 WHEREAS, over the past two decades, the hospitalized patient population has become more
5 severely ill and more immuno-compromised and thus at greater risk for hospital acquired
6 infections; and

7 WHEREAS, the responsibilities of infection control departments in hospitals have markedly
8 expanded to include prevention of exposure to bloodborne pathogens and prevention of
9 *Mycobacterium tuberculosis* or multidrug-resistant bacterial transmission; and

10 WHEREAS, there exists a need to conduct infection surveillance systems, determine baseline
11 infection rates for comparison, improve device and antimicrobial drug use, and educate
12 hospital staff about prevention of infectious diseases; and

13 WHEREAS, because of their expertise in epidemiologic methods, infection control personnel
14 can assist in establishing and implementing infection control, quality assurance, and medical
15 error reduction programs in hospital settings; and

16 WHEREAS, patient safety requires a commitment of health care providers to provide open
17 communication, a blame-free environment, and the importance of safety design in preventing
18 future errors; and

19 WHEREAS, acknowledging that success in creating a culture of safety requires the
20 commitment of both organizational leadership and frontline health care workers; and

1 WHEREAS, health care providers, regulators, and the community should work together to
2 ensure quality and safety in healthy communities, and collaboration between providers,
3 community members, and other stakeholders by providing education and data-driven tools
4 is key to facilitating quality improvement; and

5 WHEREAS, hospitals strive to improve the safety and quality of that care and research has
6 shown that certain kinds of information technology – such as computerized physician order
7 entry, computerized decision support systems, and bar coding for medication administration
8 – can limit errors and improve care by ensuring that the right information is available in the
9 right place at the right time to treat patients; and

10 WHEREAS, information technology can also be a tool for improving efficiency and saving
11 costs; and

12 WHEREAS, because the Georgia Partnership for Health and Accountability (PHA) has
13 extensive experience in using data to identify successful strategies, the promotion of best
14 practices, and shared learning to reduce adverse events, PHA can organize and coordinate
15 state-wide programs and activities to reduce hospital acquired infections; and

16 WHEREAS, the state must ensure that, to the greatest extent possible, the rate of hospital
17 acquired infections of patients in hospitals in this state is minimized.

18 NOW, THEREFORE, BE IT RESOLVED BY THE GENERAL ASSEMBLY OF
19 GEORGIA that there is created the Hospital Health Care Standards Commission for
20 Prevention of Hospital Acquired Infections to be composed of 15 members as follows: three
21 members of the House of Representatives to be appointed by the Speaker of the House of
22 Representatives; three members of the Senate to be appointed by the Lieutenant Governor;
23 and the following members to be appointed by the Governor: one hospital administrator
24 representing an urban area, one hospital administrator representing a rural area, one
25 registered nurse in a hospital supervisory or administrative position, one registered nurse
26 practicing infection control, one physician representing the Medical Association of Georgia,
27 one representative from the Georgia Hospital Association, one representative from the
28 Georgia Partnership for Health and Accountability, one representative from the Georgia
29 Alliance for Community Hospitals, and one researcher specializing in infectious diseases.
30 The Georgia Hospital Association, the Medical Association of Georgia, and the Georgia
31 Nurses Association may make recommendations to the Governor with regard to the
32 Governor's appointees. The Speaker of the House of Representatives and the Lieutenant

1 Governor shall each designate a cochairperson from among their respective appointees. The
2 commission shall meet at the call of the cochairpersons.

3 BE IT FURTHER RESOLVED that the commission shall undertake a study of safety
4 standards and best practices in hospitals in this state and rates and causes of hospital acquired
5 infections. The commission may conduct such meetings at such places and at such times as
6 it may deem necessary or convenient to enable it to exercise fully and effectively its powers,
7 perform its duties, and accomplish the objectives and purposes of this resolution. The
8 legislative members of the commission shall receive the allowances authorized for legislative
9 members of interim legislative committees from the funds appropriated to the House of
10 Representatives and the Senate but shall receive the same for not more than five days unless
11 additional days are authorized. Citizen members shall receive a daily expense allowance in
12 the amount specified in subsection (b) of Code Section 45-7-21 of the Official Code of
13 Georgia Annotated as well as the mileage or transportation allowance authorized for state
14 employees. The funds necessary to carry out the provisions of this resolution shall come
15 from funds appropriated to the House of Representatives and the Senate. In the event the
16 commission makes a report of its findings and recommendations, with suggestions for
17 proposed legislation, if any, such report shall be made on or before December 31, 2007. The
18 commission shall stand abolished on December 31, 2007.