

## **Society for Vascular Surgery Patient Safety Organization Governance Policies**

### **ARTICLE I. Name**

The organization shall be known as the Society for Vascular Surgery Patient Safety Organization, hereinafter referred to as the “SVS PSO.”

### **ARTICLE II. Purpose**

The purpose of the SVS PSO is to support the objective of the Society for Vascular Surgery to improve the prevention, diagnosis and management of patients with vascular disease, and to position SVS as a national leader in quality control efforts referable to vascular interventions.

The SVS PSO is a Patient Safety Organization, as defined by the Patient Safety and Quality Improvement Act of 2005 (Public Law 109-41), implemented to protect the confidentiality of all data and resulting patient safety work product. The SVS PSO engages in patient safety activities focused on vascular and related therapies, including, but not limited to:

- (i) efforts to improve patient safety and the quality of health care delivery;
- (ii) the creation and analysis of patient safety work product (“PSWP”);
- (iii) the development and dissemination of information with respect to improving patient safety, such as recommendations, protocols, or information regarding best practices;
- (iv) the utilization of PSWP for the purposes of encouraging a culture of safety and of providing feedback and assistance to effectively minimize patient risk;
- (v) activities related to the operation of a patient safety evaluation system (“PSES”) and to the provision of feedback to participants in a PSES;
- (vi) compilation of information regarding patients undergoing certain vascular procedures, preparation of anonymous comparisons and other quality reports; and
- (viii) facilitating and providing administrative services in connection with the formation of regional quality groups consisting of three or more PSO contracting entities for the purpose of regional quality improvement by aggregating submitted data on a regional level, and compiling/organizing the results.

### **ARTICLE III. Participation**

Hospitals, physicians or other practice entities contract with the SVS PSO to participate in the quality improvement activities protected under the Patient Safety and Quality Improvement Act. The form of the contract between SVS PSO and the practice entities must be approved by the SVS PSO Governing Council, including the costs for participation. The contract must affirm the practice entities’ adherence to the SVS PSO policies and procedures. **See Exhibit A.**

Regional quality groups comprised of at least three practice entities that participate in the PSO may be accredited by the SVS PSO and afforded status as an SVS PSO regional vascular quality group with representation on the Governing Council. Individual physicians or practice entities not part of a regional study group may also participate. The bylaws of each accredited regional quality group must be approved by the SVS PSO Governing Council. These must contain a purpose consistent with the SVS PSO, a mechanism for regional quality improvement such as semi-annual meetings, and a review process for quality research if any is conducted with non-identifiable data derived from the SVS PSO.

#### **ARTICLE IV. Governing Council**

The Governing Council conducts the business of the PSO and makes all decisions on behalf of the PSO, including oversight of budgets, contracts, policies and procedures, publications, relationships with outside parties, and the general direction of the organization. With the Medical Director and the Administrative Director, the Governing Council shall assure compliance with federal regulations governing PSOs.

The decisions of the Governing Council are subject to approval by the Board of Directors of the Society for Vascular Surgery (SVS) for the following: adoption of an annual budget, authorization of major changes in the purpose or operations of the SVS PSO or any other action of the Governing Council identified by the chair of the Governing Council as involving a significant legal issue. No action of the Governing Council with respect to any such matter shall be effective and binding until approval by the SVS Board of Directors has been obtained.

The Governing Council consists of representatives appointed by the Society for Vascular Surgery and representatives appointed by each regional vascular quality group. The number of representatives shall be determined by the Governing Council. The SVS PSO Medical Director and the chair of the PSO Quality Committee shall be ex officio non-voting members of the Governing Council.

The Governing Council may meet in person, by conference call or by email. Meetings may be called by the chair, or at the request of any other two members of the Governing Council.

The duration of the term for Governing Council members is at the discretion of the organization being represented by the individual. In the event of a vacancy in the Governing Council, the remaining members of the Council may exercise the powers of the full Council until the vacancy is filled.

A quorum of the Governing Council consists of at least half the Governing Council members at the time of the vote. A majority vote of the members present at a meeting at which a quorum exists is required to pass resolutions. Minutes of the Governing Council meetings shall be distributed electronically to all Governing Council members.

#### **ARTICLE IV. Officers**

The officers of the SVS PSO Governing Council shall consist of chair and vice-chair.

The chair and vice chair of the Governing Council shall be appointed by the SVS Board of Directors. The chair shall preside at all meetings of the Governing Council and shall, in general, perform all duties customarily incident to the position of president or chair and such other duties as may be prescribed from time to time. The chair shall report regularly to the SVS Board of Directors.

The vice-chair shall assume the duties of the chair when the latter is not available.

#### **ARTICLE V. Committees**

The Governing Council may from time to time establish such committees as it deems advisable. Such committees shall consist of such number of persons, and shall have such powers, as designated by the Governing Council.

SVSPSO standing committees include the SVS PSO Quality Committee.

1) SVS PSO Quality Committee

The role of the SVS PSO Quality Committee is to improve patient safety and the quality of vascular healthcare delivery as directed by the Governing Council. This includes the creation and analysis of patient safety work product (“PSWP”); the development and dissemination of information with respect to improving patient safety, such as recommendations, protocols, or information regarding best practices; and the utilization of PSWP for the purposes of encouraging a culture of safety and of providing feedback and assistance to effectively minimize patient risk. The Quality Committee will design and implement appropriate data collection instruments, analyze submitted data, develop risk-adjustment algorithms, and prepare benchmark reports (PSWP) for SVS PSO members. It will coordinate quality efforts of regional groups and facilitate quality research performed by regional groups.

The Quality Committee shall include members who are active PSO participants appointed by the Society for Vascular Surgery, including the chair, plus representatives from each regional vascular quality group. The number of representatives shall be determined by the Governing Council. The SVS PSO medical director shall be an ex officio member.

#### **ARTICLE VI. Staff**

The SVS PSO shall engage a Medical Director to provide clinical and scientific expertise and to manage the work of the PSO. The Medical Director shall engage such additional staff for the PSO as are needed to fulfill the organizational and analytical needs of the PSO, subject to budget approval by the SVS PSO Governing Council.

The Medical Director shall be an ex officio, non-voting member of the Governing Council and an ex officio member of the SVS PSO Quality Committee.

The Society for Vascular Surgery shall provide administrative support for the PSO, including the Governing Council.

#### **ARTICLE VII. Indemnification**

To the full extent permitted by, and in accordance with the procedure prescribed in the General Not for Profit Corporation Act of Illinois, the Society for Vascular Surgery shall indemnify any and all of the members of the Governing Council and any and all of the officers, staff, agents and representatives of the SVS PSO for certain expenses and other amounts paid in connection with legal proceedings in which any such persons become involved by reason of their serving in any such capacity for the SVS PSO.

#### **ARTICLE VIII. Amendments**

These governance policies may be amended by the Board of Directors of the Society for Vascular Surgery. Participating practice entities will be notified of changes in a timely manner.

## Exhibit A

### 1. Shared Registry Data Ownership

Each practice entity (hospital, physician group, or physician) owns the data that it submits to the SVS PSO, and is entitled to specify and control the use of its data in the manner set forth in the contract. Any use of a practice entity's data by the SVS PSO for purposes other than quality improvement or any of the standard quality assurance functions performed by the SVS PSO shall require the prior consent of the practice entity, in the manner set forth in the contract.

### 2. Policies

The following principles guide the function of the SVS PSO and must be adhered to by all participants.

- a. All activities of the SVS PSO must be consistent with the purpose of the PSO, as stated in its governing documents.
- b. Each physician member must submit data for all consecutive procedures in the modules in which they participate that are recorded by the SVS PSO and must agree to submit office claims data on a periodic basis to allow an audit to ensure accurate and complete data entry.
- c. Each member hospital agrees to submit ICD-9 based claims data on a periodic basis to allow an audit to ensure accurate and complete data entry.
- d. Each member hospital and physician must submit complete data forms, including all elements of the SVS
- e. PSO registry for all eligible procedures, using a web-based system approved by the SVS PSO, including follow-up data at one year, or other time points established by the SVS PSO.
- f. Each member hospital and physician agrees that Patient Safety Work Product including any comparative data can never be disclosed or used for competitive marketing. Hospitals and physicians own their own data, and can download and publish such data and indicate that it was derived from their participation in the SVS PSO. However, they may not publish Patient Safety Work Product provided in benchmarking reports that compares their hospital or practice with other groups in the SVS PSO.
- g. Each SVS PSO hospital and physician member agrees to follow all regulations contained within the Hospital Insurance Portability and Accountability Act (HIPAA) and the Patient Safety Quality Improvement Act (PSQIA).. This includes, but is not limited to not disclosing any patient, hospital or provider identifiable information.
- h. Failure to adhere to these policies may result in loss of membership in SVS PSO for a hospital or physician, if so determined by a majority vote of the Governing Council.

### 3. Non-identifiable Data Release:

The SVS PSO may prepare non-identifiable datasets for quality research as set forth in the Patient Safety Quality Improvement Act. Such datasets may be prepared for regional vascular quality groups after approval by the process specified in the bylaws of the regional quality group. Requests for non-identifiable datasets from regional groups shall identify the principal investigator, the purpose of the project, and contain an agreement that restricts the use of such data to the designated project. The SVS PSO shall maintain a log of such projects. Parties who receive nonidentifiable data for quality analysis from the SVS PSO agree to indicate that such data was non-identifiable in any publication or presentation.

Requests for non-identifiable datasets for quality research involving more than one regional quality group shall be reviewed and coordinated by the SVS PSO Quality Committee. Each regional group, via their



representative on the Quality Committee must approve the use of their regional data in order for it to be included in a multi-regional dataset.

Prior to releasing non-identifiable data, the SVS PSO shall obtain permission from each contracting entity as specified in their contact with the SVS PSO

Amended by SVS Board of Directors 01.07.12