



BETSY LEHMAN CENTER

for Patient Safety

Approval on 1/21/2026

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Date of meeting: October 29, 2025

Beginning time: 1:03 P.M.

End time: 1:52 P.M.

PROCEEDINGS

A meeting of the Betsy Lehman Center Board of Directors was held on Wednesday, October 29, 2025, via Zoom.

Board members and designees present:

Joanne Marqusee (JM), representing Secretary of Health and Human Services Kiame Mahaniah

Lauren Peters (LP)

Sandra Wolitzky (SW), representing Attorney General Andrea J. Campbell

Betsy Lehman Center staff in attendance: Barbara Fain (BF), Tim O'Neill (TO) Annaise Foureau (AF)

Approval of minutes:

BF asked for a motion to approve the July 30, 2025 meeting minutes; motion made by JM, seconded by LP. Minutes were approved unanimously.

Discussion:

Introduction of New Staff

BF introduced two new additions to the BLC staff. Annaise Foureau joined BLC in August as the new Chief of Staff. Timothy O'Neill joined BLC in September as the new Director of Policy & Government Affairs.

Budget Updates

- BF informed the Board that the BLC's requested FY25 PAC in the amount of \$395,000 has been included in both the House and Senate versions of the FY25 close-out budget pending in the legislature. BLC requested this PAC to help finance ongoing action steps in the *Roadmap to Health Care Safety for Massachusetts*, and once the close-out budget is finalized the funds will augment the \$500,000 earmarked in FY26 for *Roadmap* activities.
- BF previewed BLC's submission of its FY27 Agency Request to A&F, due November 3. BLC will be requesting a modest increase in its operations line item, 4100-0063, as it continues to transition from past "start-up" funding levels.

EXECUTIVE DIRECTOR
Barbara Fain

BOARD MEMBERS
Andrea J. Campbell
Attorney General

Kate Walsh
Secretary
of Health and
Human Services

Layla R. D'Emilia
Undersecretary
of Consumer Affairs
and Business

Andrew Jackmauh
Interim Executive Director,
Center for Health
Information and Analysis

- **Automated Adverse Event Monitoring (AAEM) Pilot**
- BF provided an update on activities related to the AAEM pilot project.
- BF informed the Board that BLC requested that EOHHS include a proposal to implement the AAEM pilot in a cohort of rural hospitals and health centers in the state application for federal funding available through the Rural Hospital Transformation Fund Program (RHTFP). BF provided the Board with a brief overview of the RHTFP, a \$50B fund administered by CMS. EOHHS will be submitting a comprehensive state application in the coming days. CMS will announce approved projects on December 31, 2025.
- Should the BLC project be included and approved, the caveat is that the funding may only be for recognized rural providers. BF stated that this would require BLC and Pascal to modify the proposal and shift outreach to the eligible providers.
- LP asked if BLC would be able to implement the pilot in compliance with the CMS timeline for RHTFP programs. BF answered that BLC submitted a timeline and projected budget to EOHHS in support of its request for inclusion in the state application and expects BLC would be able to conform with CMS requirements.
- LP asked a follow-up question on BLC's ability to expend any funds awarded through RHTFP in FY26. BF answered that BLC would accelerate implementation activities according to the timeline and projected budget provided to EOHH but noted that CMS guidance on its administration of RHTFP is still under development.
- JM commented that under RHTFP, states will share half of the \$50B available, and half will be awarded to proposals that meet certain objects and political considerations.

Exploration of Non-Public Funding Opportunities

- BF informed the Board of BLC's efforts to identify sources of private funding to supplement the Center's public funding. BLC has contracted with consulting firm Copely Raff to identify potential funding entities among the >1000 private family foundations and offices in Massachusetts. Solicited funding would be deposited into the BLC trust fund which was recently reauthorized for an additional 3 years. In addition to seeking funding sources to support the AAEM pilot, BLC will seek funding for more general purposes to supplement public appropriations.

Presentation on Allocation of Current Budget

- BF presented a slide deck depicting a rough estimate of the distribution of BLC staff resources. Of note, the data shows 80% of payroll is attributed to full-time BLC staff, with the remaining 20% covering contracted workers. These figures are estimates as certain costs are shared with CHIA. Research and Data teams represent the largest share of BLC resources, followed by Communications then Programs. Data on the AAEM Pilot and Health Care Safety Education Curriculum are broken out separately.
- BF provided a more in-depth analysis of the Research category. In this category, maternal health activities require the largest percentage of staff resources. This work, performed in partnership with DPH, receives most of its funding through BLC.

- BF also commented on the Center's work administering Behavioral Health Trust Fund Peer Support for EOHHS.
- BF noted that requests for BLC to perform additional duties for or in partnership with other state agencies are increasing. The Board was informed that most current activities are performed without ISAs, a situation that continues to put a strain on the Center's finances. Moving forward, BF encourages the Board to consider opportunities to communicate to appropriators the importance of rightsizing BLC funding to provide sustainable resources required by the increasing volume of requests from other state agencies.
- JM asked if BLC could provide the Board with a similar data presentation to further explore which areas the full BLC team is focusing on. BF answered that such an analysis is currently underway and that it would soon be shared with the Board. BF closed this portion of the discussion by reiterating that BLC anticipates continued difficulty transitioning ongoing and requested projects from the planning phase into full operation absent a corresponding increase in appropriations above maintenance.

Further Discussion on Interagency Initiatives

- BF provided an update on the initial plans for an Interagency Safety Data Harmonization initiative. BLC is convening partner agencies to begin planning on an initiative to coordinate and streamline data reporting and collection protocols and will be providing updates to the Board at the next meeting.
- BF informed the Board that, in response to a request from DPH, the Center has begun work to convene agency representatives and select stakeholders in the long-term care and senior living sectors to identify opportunities to enhance quality and safety. Potential opportunities include the provision of technical assistance and peer learning modules.
- BF noted for the Board that for both initiatives, the Center does not currently have the resources necessary to perform any work beyond the convening of stakeholders.
- SW asked how the long-term care initiative fits within the *Roadmap* and how any work performed by the Center would fit with recent work performed by other state agencies. BF stated that expanding the Center's activities into long-term care was a part of the recommendations as presented in the *Roadmap*, and that the plan is to start with data sets collected by other agencies, pick up where past task forces left off, and synchronize efforts specifically addressing issues of safety and quality.

Adjournment

- No meeting date was set. With no other business to discuss, a motion was made by SW, seconded by LP and unanimously approved that the meeting adjourn at 1:52PM.