MAYERS MEMORIAL
HOSPITAL DISTRICTQuality Committee MeetingWednesday, October 11, 2017 (12:00 p.m.)

Boardroom – Fall River Mills

Meeting called by:	Vasquez	Type of meeting:		BOD Committee	
		Board Clerk:		Valerie Lakey	
Attendees:	Beatriz Vasquez, PhD, Commit Laura Beyer, Board Member Louis Ward, CEO			Tom Watson, MD, Chief of Staff Sherry Wilson, CNO, Quality Designee Jack Hathaway, Director of Quality	
Please bring:	Agenda & Attachments				

----- Agenda Topics -----

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Meeting Called to Order		Vasquez	
Requests from audience to speak to issues/agenda items		Vasquez	
Approval of Minutes – August 9, 2017 (Attachment)	Α	Vasquez	Action
 Departmental Reports: (Environmental Services; Imaging; Public Relations; Dietary; Maintenance; Purchasing) Report on quality data Report on quality issues and/or quality projects 		Rodriguez; Northington; Lakey; Garcia; Burks; Sweet	Report
Quarterly Reports Safety Committee Worker's Compensation 		Lakey Mee	Reports
Standing Reports: Monthly: SNF Events/Survey Quality – Performance Improvement Infection Control PRIME Administrative Report		Wilson Hathaway Jacobson Hathaway Ward	Report Report Report Report Report Report
New Business: Policies for Approval • Application for Medical Staff Appointment	PDF		Action
 CEO Job Description CEO Performance Evaluation P&P Physician Orders (policy)-Verbal and or Telephone Restraint Log MMH578 Restraints or Seclusion (Physical Restraints), Use of 			
Unit Cleaning Unusual Events			
Announcements, Other, Future Agenda Items		Vasquez	Discussion
 Closed Session Announcement, Government Code 54962, Medical Staff: Chief of Staff Report (Health & Safety Code §32155) 		Watson, Wilson, Overton	Reports/Action
Reconvened to Open Session – Report Action(s)		Vasquez	
Announcements: Next meeting: Wednesday, November 8, 2017 – Fall River			
Adjournment			+

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DRAFT Attachment A

<u>QC Attendance</u> Beatriz Vasquez, PhD, Board Chair Laura Dolman-Beyer, BOD Committee Theresa Overton Jack Hathaway Louis Ward Dr. Tom Watson <u>Other Staff Present</u> Jessica Stadem Chris Hall Travis Lakey Stevie Collins - Intern <u>Absent</u> Sherry Wilson Shelley Lee

(These minutes are not intended to be a verbatim transcription of the proceedings and discussions associated with the business of the board's agenda; rather, what follows is a summary of the order of business and general nature of testimony, deliberations and action taken.)

SUBJECT	DISCUSSION	
CALL TO ORDER	The meeting was called to order at 12:06 pm by Vasquez in Fall River Mills	
Public Request to Speak	None	
Opening Remarks		
Minutes	Minutes from the July 12, 2017 Quality Committee meeting were approved. M/S/C (Beyer, Ward) <i>All Approved</i>	Approved
Department Reports	SNF – Sherry Wilson : Absent, no report Lab – Chris Hall : Biggest quality issue is getting non-applicable reports or not getting lab reports; have been faxing all outpatient reports manually, staff have to check each fax – now have autofax with paragon; MVHC receives too many unneeded reports via their TOC line from us; have been working with IT specialist at Paragon to figure out what the problem is, have identified the problem, fixed setting to make sure each provider only receives the reports they need; another issue is patients not having a PCP so they just state the last doctor they saw, which means we send report to that doctor, need to educate patients on how to state who their PCP is, also tell clinic that if report is sent at request of patient, need to contact to initiate PCP; will report on how many unwanted faxes are received after fixed; Biofire up and running, doing 3-4 tests per week, all tests negative or positive are informative and helpful to patient's diagnosis; Siemens tech will be here tomorrow to add 5 new tests to machine, some of these tests will be helpful because they are offered at	Reports

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	 MVHC wellness week, will also save us a little bit of money (pay labcorp \$15, only \$6.25 for us to run); required to do testing by CMS on each test we offer, in past 2 annual tests only 3 failures, all have been resolved. Finance – Travis Lakey: Emailed report; COH looks good, will dip a little because of IGT payment, although we will receive this back; \$60k from first project, still making payments; Travis, Allen, Abe attending Wipfli conference in September; hoping for CCAHN CFO updates more regularly. 	
Quarterly Reports	Patient Safety First : No patient safety reports from FR, just received first report for FY18.	
	CMS Core Measures : Do not have enough reportable incidents to be measured, learned that if under 5 it is not necessary to report (MBQIP); once HCAHPS is done in-house, will be able to track and measure better; volume is still the major issue, will continue to be until requirements can be changed; still report info to patients even if it can't be made public outside in community; do staff get regular info about where they stand with quality? No, most info comes from patient surveys, Quality department is working with managers to pass on info, also want to pass on to staff what they are doing well, not just errors	Reports
Standing Reports	 SNF Events/Survey – Sherry Wilson: Absent, no report Quality – Performance Improvement – Jack Hathaway: PCC has PIP section 27 total, 16 doing very well on, have PIPs set up on the other 11; working with Watson on what should and should not be reported, working on educating staff exactly what is within in appropriate threshold for reporting (don't report over or under). Infection Control – Jack Hathaway for Shelley Lee: Working on policies; considering bringing back antimicrobial stewardship to PRIME program, worried about requirements for PRIME. PRIME – Jack Hathaway: Pit River Health interested in working on our Million Hearts Program with PRIME, they have several Partnership patients that would fit within the metrics, different possibilities on how to reach Pts (go to them, or send patients up here); PRIME likes to see facilities that are changing and/or expanding to reach more patients in communities. Administrative Report – Louis Ward: SNF window project begins today (replacing 40 total windows, 4-5 a day), scheduled so that there is least impact on patient life; door skins are being put up on SNF doors, will start painting soon; everything submitted to OSHPD, hoping the permit 	Reports

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	timeline, will have GMP in next few months, loan will be closed, will present to board as steps are accomplished; next step is community awareness, meet with Rotary on 17 th , presentation at golf tournament (introduce contractors, etc); ordered easels and pictures to use for presentations, will move them around town so the community can see them; met with Dave Jones, discussed continuing collaboration, PRIME program money could go away if we can't start our own clinic, will email with more details about conversation, special meeting on 22 nd ; McKesson was bought by All Scripts, not sure how or if it will affect our system, All Scripts is very tech forward, has clinic software available; Employee BBQ on 20 th ; idea challenge review will be happening, need to form committees to implement, will include the person who submitted the idea; Stevie Collins intern has been shadowing Louis today, working in a lot of different departments, really enjoying all of his opportunities; showed newest doctor recruitment video.	
Old Business	Compliance Plan & Code of Ethics : Took comments from committee, made changes; SCEP (society of compliance and ethics professionals), Jack will be taking a test to become certified	Discussion
New Business	 Policies for Approval: Not a policy but approved to move on to full board Application for Medical Staff Appointment 	
Announcements, Other, Future Agenda Items	ACHD meeting attendance will be larger than expected, if you know anyone who needs to register, do so soon. ACHD webinars – upcoming suicide prevention, offer to staff. September meeting will need to be moved because of ACHD annual meeting and Wipfli Conference.	Discussion
Closed Session Announcements Adjournment	Next meeting September 13, 2017 in Fall River Mills Meeting adjourned 1:38 pm	

Minutes By: Jessica Stadem