FINAL Attachment A

**QC** Attendance

Beatriz Vasquez, PhD, Board Chair Laura Dolman-Beyer, BOD Committee Jack Hathaway Other Staff Present
Jessica Stadem
Sherry Rodriguez
Steve Sweet
Val Lakey
Ryan Harris
Travis Lakey
Dave Burks
Sammi McClung
Alan Northington

Absent Sherry Wilson Louis Ward Theresa Overton Dr. Tom Watson

(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	The meeting was called to order at 12:05 pm by Vasquez in Fall River Mills	
ORDER		
Public Request	None	
to Speak		
Opening		
Remarks		
Minutes	Minutes from the August 9, 2017 Quality Committee meeting were approved.  M/S/C (Hathaway, Beyer) <i>All Approved</i>	Approved
Department Reports	Environmental Services: Tracking the quality of linen, gathering numbers for past 8 months, receive approx. 120 fitted sheets per week, 10% average per month are returned (holes, some stains); also hand towels come in w/grease, napkins w/food; have met w/Aramark to discuss issues, saved items and showed them (stains, tape residue), possible to get out of contract? Give them 30 days to improve, if no improvement can get out, not ready to take that step though; replacement of worn linen is not common; work with Jack on tracking and contract details; 1-2 hours per day putting up linen.  Imaging: Handout provided; RF room, problem with camera, may have to bring in someone from company who originally installed equipment, required by state, that is why needs to be fixed, not much impact on patient care; monitoring ultrasound program, since opening up program, noticing it's limitations; mobile unit exceeding expectations in performance and quality, no worries with exposure when doing procedures in LTC rooms; SNF in Burney xrays stopped due to staffing, would like to bring back 2-3 days per week, space issues also,	Reports

would like to have another mobile unit in Burney (\$180k), don't need leaded walls for mobile units; likely that if SNF xrays started again CT referrals would increase, would it be worth putting together a proposal and cost analysis? **Public Relations**: Handout provided; added to management scorecard to meet with marketing, opportunity to increase exposure to all departments, increase info to community; marketing plan will tie into strategic plan; continuing with employee wellness, received BETA award for your:life program, new program ideas upcoming, working to get more people involved; new legislation upcoming, in really good shape with transparency, working with Jack on webpage. **Dietary**: Updated the menu cycle (will be seasonal, regulations say we need 4 cycles), nutritional analysis was not complete so received tag during survey, has since been completed, everyone seems to be enjoying new recipes, cafeteria use has gone up, trying to add new PRIME project regarding obesity, Dietary will be participating. **Maintenance**: Handout provided; Changed Burney parking lot lights, LED lights will save money, make parking lots safer, going around entire building; vacuum system failed (suction), it is state mandated to have vacuum system, hard time finding pumps, found company who put in rental pumps while other pumps were being fixed and replaced; in general, facility and equipment is aging, expensive to replace; replaced fire doors (\$21k); residents complimenting new windows, very pleased; **Purchasing:** Handout provided; general store is patient chargeable items; major moveable items, plant ops for building improvements; use to have 1 manager, 2 buyers, 4 clerks and not doing this much work (now 1 manager, 1 buyer, 1 clerk); costs compared to previous years? Pretty close to average. **Cardiac**: No additional falls, staff member injury moving weights, on restriction, working on exercises for back strength; electrical cord hazard, installed new outlet to prevent cords stretching across the room; fax machine location was HIPAA violation, finally moved into the office; still safety issue with chairs (old metal chairs, welds wearing and cutting), need 12 but not in the budget; EKG monitors were starting to malfunction, didn't cost anything to replace (3) from manufacturer; 3 monitor patients, maintenance patent numbers down a little; survey on patients, everyone happy with facility and equipment, temperature and parking were issues. Quarterly **Safety Committee**: Meeting attendance has increased, was able to send memo regarding topics that came up at meeting; Val attended disaster conference, CMS Reports **Reports** 

requirements in place Nov. 16<sup>th</sup>, started department trainings, information will

	be included in surveys, all employees need to be accessing email because that is how info is spread throughout the facility; joint commission standards require 2 fully functional exercises per year, we would have a hard time meeting that requirement, currently can use tabletops, functional or actual incidents (need 2 per year); send reminder about workplace violence reporting	
Standing Reports	Worker's Compensation: Move to November.  SNF Events/Survey: It is survey season, working on issues, not 100% confident we're ready, making sure processes between the two facilities are more alike, less discrepancies, working on staff attitudes; Jack bought guide book to surveys, working with staff at SNF quality meetings, includes all info on tags and explanations; also got joint commission book for acute.  Infection Control: Dawn Jacobson attending training in December, more cooperation with hand hygiene, flu vaccines are available, (100% last year), almost 200 shots given already; no trending illnesses, Shelley Lee still doing infection reporting, haven't coordinated transfer of information; trainings before different illness seasons hit, education on difference between influenza and gastroenteritis.  PRIME: Sent supporting docs to state, waiting to hear (on DY 11 and 12), software gap analysis was sent, incorrectly sent them technology analysis when first started switching over staff; Pit River on board with partnering on PRIME, will take MOU to them this week; haven't confirmed new project but excited to get it started, would start DY 13 (obesity program, work with dietary and new menu system, work with Val on your:life), need 5 of 8 requirements, need to plan; doesn't have the requirement of finding 30 new patients.	Reports
Old Business	Administrative Report: No report.	Discussion
New Business	Policies for Approval: Beyer/Hathaway, all approved (with changes noted)  • Application for Medical Staff Appointment  • CEO Job Description – customer service values attachment, remove  • CEO Performance Evaluation P&P – update info regarding Trakstar  • 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	Update on Acute quality stats, board updated in boardroom; looking to translate CMS requirements using our volumes so we have an accurate representation, discuss with other small facilities; HCAHPS surveys big portion of star rating, have been successful in getting some; Jack Hathaway attending compliance conference next week, will become a Certified Compliance and Ethics Professional, will bring back education materials for board; mock surveyor will return soon.	Discussion
	Need a patient and a family representative to attend board meetings, CMS requirement, Susan Knoch from MVHC will be volunteer for one, still need the other; will give insight from point of view of patient or family when issues come up, Jack will send job descriptions of positions, required to start 2019/2020; look at ways to set program up to benefit our facility best, rotate patient reps annually to get a better representation.	
Closed Session	None	
Announcements	Next meeting November 8, 2017 in Fall River Mills	
Adjournment	Meeting adjourned 2:06 pm	

Minutes By: Jessica Stadem