



**Minutes of the Open Session of the
El Camino Hospital Board of Directors
Wednesday, June 23, 2021**

Pursuant to State of California Executive Order N-29-20 dated March 18, 2020, El Camino Health did not provide a physical location for this meeting. Instead, the public was invited to join the open session meeting via teleconference.

Board Members Present

Lanhee Chen, Chair
 Peter C. Fung, MD
 Julie Kliger, MPA, BS **
 Julia E. Miller, Secretary/Treasurer
 Jack Po, MD, Ph.D.**
 Bob Rebitzer
 George O. Ting, MD
 Carol A. Somersille, MD
 Don Watters**
 John Zoglin, Vice Chair

Board Members Absent

None

 **via teleconference

Members Excused

None

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	The open session meeting of the Board of Directors of El Camino Hospital (the "Board") was called to order at 5:30 pm by Chair Chen. A verbal roll call was taken. Director Watters joined the meeting at 5:39 pm during Public Communication, and Director Po joined the meeting at 5:44 pm during the Quality Committee Report. All other Board members were present at roll call. Chair Chen reviewed the logistics for the meeting. A quorum was present pursuant to State of California Executive Orders N-25-20 dated March 12, 2020, and N-29-20 dated March 18, 2020.	
2. POTENTIAL CONFLICTS OF INTEREST DISCLOSURES	Chair Chen asked if any Board members have a conflict of interest with any of the items on the agenda. No conflicts were noted.	
3. PUBLIC COMMUNICATION	None.	
4. QUALITY COMMITTEE REPORT	<p>Dr. George O. Ting opens by sharing a patient story from the Quality Committee Meeting in which the patient shared some problems they had experienced while awaiting surgery on the Mountain View campus which included waiting more than tolerable, and difficulty convincing the nurse about her dosing amounts (given she was a type one diabetic). However, she also shared that aside from those two areas of friction, she had an overall positive experience and that she would not hesitate to recommend the hospital.</p> <p>He also discusses the readmission data collected over the past five years which has been categorized into seven different areas that CMS uses to score the HRRP (hospital readmission reduction penalty program). He noted three items that were observed more than expected, but also noted there is no pattern between them and had nothing to do with the care being received.</p> <p>Director Ting discusses the highlights the patient safety indicators for the third quarter as presented by Dr. Mark Adams, CMO, during the quality committee meeting:</p> <ul style="list-style-type: none"> - He draws attention to the six cases involving pressure ulcers in the 	

quarter. Each one was reviewed for root cause and several of them involved COVID patients, the way the oxygen mask is inserted, and the pressure from it that is placed on to them which is causing the ulcers.

- He speaks about the five cases of hemorrhage and hematoma and mentions that no pattern could be observed at the moment and that more occurrences would be followed closely.
- Director Ting also touched on the two cases of acrogenic pneumothorax which derived from the same patient. The patient ended up doing ok.
- He discussed the vaginal injury due to trauma during childbirth, so there is an ongoing discussion with maternal child health medical leadership. The instances put the hospital over the normal threshold, and there are various hypotheses as to why this occurred but none definitive.

He also touches on the quality assurance and performance improvement plan which describes the structure, functions, and peer review processes that go into the quality concerns. He states that there is a joint commission that reviews this every three years and that they are due this year, so a lot of time has been spent looking at this.

Dr. Shreyas Mallur, M.D., opens the discussion for questions that he could address given that Dr. Adams was not present at the meeting.

Director Miller asked for further comment on the increase in the mortality and readmission rates.

In response to Director Miller's question, Dr. Mallur states that the readmission has been trending downwards overall throughout the year, and the increase is attributed to the COVID patients that came back between January and March. He also discusses the mortality index and that some of it was attributed to COVID patients, but that there was also an increase in the sepsis index which is a big driver of the index.

Director Somersille inquired if there has been a specific population that has been experiencing this and whether any thought or initiative to doing a project or study of some sort in regards to the vaginal trauma during childbirth.

Dr. Mallur addresses that in addition to the Asian population experiencing vaginal trauma, the South Asian population also has huge increases and that the Department of Maternal Child Health is looking at this very closely. He also mentions that there is no specific case study or project being conducted, and instead trends were being identified among different hospitals, but that they could bring this idea back to the Department of Maternal Child Health.

Director Zoglin inquired if there is a ECHMN equivalent of the research.

Director Ting states that there is no one right now, but that it is in the works, and the information surrounding it is extremely minimal.

Director Kliger also adds that there is minimal information surrounding this as well and hasn't seen this item being driven but that it could be added to the agenda to at least create a plan.

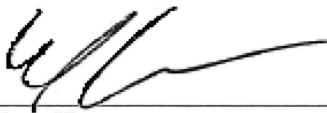
Dan Woods, CEO, agrees that with Director Kliger and that the same

	<p>structure as the enterprise quality plan could be used to develop this.</p> <p>Director Fung asks about whether inpatient data could become available in the quality committee reports, and why are we only reviewing outpatient data.</p> <p>Mr. Woods, comments that Director Fung brings up a really valid concern, and that the best place to start with this would be to emphasize focus on the service lines and start building data from there.</p> <p>Director Somersille made a correction to the quality improvement of patient safety plan in the medical staff and department’s division surgery. She addresses that it should read gynecologic surgery instead gynecologic oncology.</p>	
<p>5. FY21 PERIOD 10 FINANCIALS</p>	<p>Carlos Bohorquez, CFO, starts a brief discussion by sharing results from the month of April in which he notes that it was an overall strong month from a volume and activity standpoint which is attributed to the rate of vaccination and the increase in volume of procedural cases as restrictions ease up. He also noted a strong operating margin which indicates a very strong recovery and stability for the months to come. He additionally touches on the quality mortality rate indicating that the CMI has increased, meaning that less patients are coming in to the organization, but that they are receiving care a little bit later. He mentions that the one item that is not fully recovered yet is the ED with strong activity in the month of May and June, however patients are still skeptical about receiving care in general. He notes that despite the challenges and costs associated with COVID, the organization is on a stable and strong path to recovery.</p> <p>Movant: Watters Second: Zoglin Ayes: Chen, Fung, Kliger, Miller, Po, Rebitzer, Somersille, Ting, Watters, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>FY21 Period 10 Financials approved</i></p>
<p>6. ADJOURN TO CLOSED SESSION</p>	<p>Motion: To adjourn to closed session at 5:57 pm pursuant to <i>Gov’t Code Section 54957.2</i> for approval of the Minutes of the Closed Session of the Hospital Board Meeting (05/12/2021), Minutes of the Closed Session of the Hospital Board Meeting (05/22/2021), and FY22 Individual Executive Performance Incentive Goals; pursuant to <i>Health and Safety Code Section 32155</i> for a report of the Medical Staff; deliberations concerning reports on Medical Staff quality assurance matters: Quality Committee Report (Medical Staff Credentials and Privileges Report, Quality Council Minutes); pursuant to <i>Health and Safety Code Section 32155</i> for a report of the Medical Staff; deliberations concerning reports on Medical Staff quality assurance matters: Medical Staff Report; pursuant to <i>Gov’t Code Section 54957.6</i> for a report and discussion on personnel matters: Potential Amendment to CEO Employment Agreement; pursuant to <i>Gov’t Code Section 54956.9</i> for a report and discussion on personnel matters: Executive Performance Incentive Benefit Plan Design; pursuant to <i>Gov’t Code Section 54957.6</i> for a report and discussion on personnel matters: Proposed CQO Salary Range; pursuant to <i>Health and Safety Code Section 32106(b)</i> for a</p>	<p><i>Adjourned to closed session at 5:57 pm</i></p>

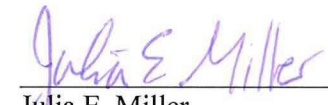
	<p>report and discussion involving healthcare facility trade secrets: Anesthesia Professional Services Agreement; pursuant to <i>Health and Safety Code Section 32106(b)</i> for a report and discussion involving health care facility trade secrets: FY22 Strategic Metrics and Goals; pursuant to <i>Gov't Code Section 54956.9(d)(2)</i> – conference with legal counsel – pending or threatened litigation and <i>Gov't Code Section 54957</i> and <i>54957.6</i> for a discussion and report on personnel matters: CEO Report on Legal Services and Personnel Matters; and pursuant to <i>Gov't Code Section 54957</i> for discussion and report on personnel performance matters – Senior Management: Executive Session.</p> <p>Movant: Miller Second: Ting Ayes: Chen, Fung, Kliger, Miller, Po, Rebitzer, Somersille, Ting, Watters, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	
<p>7. AGENDA ITEM 15/16: RECONVENE OPEN SESSION/ REPORT OUT</p>	<p>Open session was reconvened at 8:35 pm by Chair Chen. Agenda Items 7-14 were addressed in closed session.</p> <p>During the closed session, the Board approved the Minutes of the Closed Session of the Hospital Board Meeting (05/12/2021 & 5/22/21), FY 22 Individual Executive Performance Incentive Goals, Quality Committee Report, including the Medical Staff Credentials and Privileges Report, and the Annual Summary of Physician Financials by a unanimous vote in favor of all members present and participating in the meeting (Directors Chen, Fung, Kliger, Miller, Po, Rebitzer, Somersille, Ting, and Watters).</p>	
<p>8. AGENDA ITEM 17: CONSENT CALENDAR</p>	<p>Chair Chen asked if any member of the Board or the public wished to remove an item from the consent calendar. No items were removed.</p> <p>Motion: To approve the consent calendar: Minutes of the Open Session of the Hospital Board Minutes (05/22/21); FY22 Master Calendar; FY22 Committee Goals; FY22 Committee and Liaisons Appointments; FY22 Community Benefit Plan; Anesthesia Professional Services Agreement; Reviewed and Recommended for Approval by the Finance Committee; FY21 Period 9 Financials; Infection Control Medical Director Agreement; Reviewed and Recommended for Approval by the Medical Executive Committee; Medical Staff Report Information; MV Major Projects Update</p> <p>Movant: Chen Second: Watters Ayes: Chen, Fung, Kliger, Miller, Po, Rebitzer, Somersille, Ting, Watters, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Consent calendar approved</i></p>
<p>9. AGENDA ITEM 18: CONSIDERATION OF BENEFITS COVERAGE FOR</p>	<p>Agenda Item will be deferred to a later date.</p>	

<p>BOARD MEMBERS RECLASSIFIED AS W-2 EMPLOYEES FOR IRS PURPOSES</p>		
<p>10. AGENDA ITEM 19: CEO REPORT</p>	<p>Dan Woods, CEO, reported on participation in Magnet4Europe research project, achieving Healthgrades 2021 Outstanding Patient Experience Award, COVID-19 vaccination partnership with Google, launch of Employee Voice Survey, and the holding of Taking Wing celebration.</p>	
<p>11. AGENDA ITEM 20: BOARD COMMENTS</p>	<p>None.</p>	
<p>12. AGENDA ITEM 21: ADJOURNMENT</p>	<p>Motion: To adjourn at 8:43pm. Movant: Chen Second: Watters Ayes: Chen, Fung, Kliger, Miller, Po, Rebitzer, Somersille, Ting, Watters, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Meeting adjourned at 8:43pm</i></p>

Attest as to the approval of the foregoing minutes by the Board of Directors of El Camino Hospital:



 Lanhee Chen
 Chair, ECH Board of Directors



 Julia E. Miller
 Secretary, ECH Board of Directors

Prepared by: Shiraz Ali, Director