

Minutes of the Open Session of the Quality, Patient Care and Patient Experience Committee of the El Camino Health Board of Directors Monday, December 4, 2023

El Camino Hospital | 2500 Grant Road, Mountain View, CA 94040

Members Present Carol Somersille, MD Melora Simon (at 5:33 p.m.) John Zoglin (at 5:34 p.m.) **Pancho Chang** Jack Po, MD (at 5:35 p.m.) Philip Ho, MD (at 5:37 p.m.) Prithvi Legha, MD

Members Absent Krutica Sharma, MD

Others Present Holly Beeman, MD, MBA, CQO Dan Woods, CEO Mark Adams, MD, CMO Theresa Fuentes, CLO Christine Cunningham, Chief Experience and Performance Improvement Officer Cheryl Reinking, DPN, RN, CNO Shreyas Mallur, MD, ACMO Lyn Garrett, Senior Director, Quality Tracy Fowler, Director, Governance Services Nicole Hartley, Executive Assistant II Gabriel Fernandez, Coordinator, Governance Services

**via teleconference

	Agenda Item	Comments/Discussion	Approvals/ Action
1.	CALL TO ORDER/ ROLL CALL	The open session meeting of the Quality, Patient Care, and Patient Experience Committee of El Camino Health (the "Committee") was called to order at 5:32 p.m. by Chair Carol Somersille. A verbal roll call was taken. Committee members Jack Po, Krutica Sharma, Phillip Ho, Melora Simon, and John Zoglin were absent from the roll call. All other members were present at the roll call and participated in person. A quorum was not present until Melora Simon arrived at 5:33 p.m. John Zoglin arrived at 5:34 p.m. Jack Po arrived at 5:35 p.m. Phillip Ho arrived at 5:37 p.m. No votes were taken on any items until after Committee Member Simon's arrival.	Call to order at 5:32 p.m.
2.	CONSIDER APPROVAL FOR AB 2449 REQUESTS	No members of the Committee participated remotely, and no AB 2449 requests were submitted.	
3.	POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Chair Somersille asked if any Committee members had a conflict of interest with any of the items on the agenda. No conflicts were reported.	
4.	PUBLIC COMMUNICATION	There were no comments from the public.	

Open Minutes: Quality, Patient Care and Patient Experience Committee December 4, 2023 | Page 2

5.	CONSENT CALENDAR	Chair Somersille asked if any Committee member would like to pull an item from the consent calendar. Motion: To approve the consent calendar: (a) Minutes of the Open Session of the Quality Committee Meeting (11/06/2023), (b) Minutes of the Closed Session of the Quality Committee Meeting (11/06/2023) Received: (c) Progress against FY24 Committee Goals Movant: Zoglin Second: Po Ayes: Somersille, Chang, Simon, Zoglin, Po, Legha, Ho Noes: None Abstain: None Absent: Sharma Recused: None	Consent Calendar Approved
6.	VERBAL CHAIR'S REPORT	Chair Somersille provided a verbal Chair's report to the committee. In the report, Chair Somersille shared the knowledge she gained at the Health Quality Improvement Conference, noting that a key takeaway was how advanced ECH is compared to presenters at the conference on Quality and Health Equity performance and initiatives.	
7.	RECEIVE FY24 ENTERPRISE QUALITY DASHBOARD	Dr. Holly Beeman, CQO, presented an update on the FY24 Enterprise Quality Dashboard. Dr. Beeman provided an in-depth analysis of performance, process improvement initiatives, and HAC Index 2.0 performance measures. Discussion about hand hygiene results took place and the committee recommends the current hand hygiene compliance measures are not included in the dashboard going forward. Dr. Beeman will provide more detail on the Hand Hygiene improvement initiatives as a follow-up item for the next committee meeting.	Motion Approved
		Motion: To receive the FY24 Enterprise Quality Dashboard Movant: Po Second: Chang Ayes: Somersille, Chang, Simon, Zoglin, Po, Legha, Ho Noes: None Abstain: None Absent: Sharma Recused: None	
8.	RECEIVE FOLLOW-UP ITEM - HAC 2.0 WEIGHTING	Dr. Holly Beeman, CQO, provided information on the request from the committee to review the current weighting of each component of the HAC Index 2.0, with consideration to changing the weighting of the individual measures or potentially keeping them at their current weighting. After discussion amongst the committee and staff, a motion was made to change the weighting of the measures. Motion: To change the weighting of HAC Index 2.0 measures to 25%, for each measure	Motion Approved Actions: HAC 2.0 Index measures to be adjusted to be weighed at 25%, for each measure.

December 4, 2023 | Page 3 Movant: Somersille Second: Po Ayes: Somersille, Chang, Simon, Zoglin, Po, Legha, Ho Noes: None Abstain: None Absent: Sharma Recused: None Cheryl Reinking, CNO, presented multiple nominations for the 9. RECEIVE PATIENT Motion STORY **Approved** Daisy Award. The Daisy Award nominations are written by grateful patients or their families, each month, to highlight exceptional patient care they receive from El Camino Health staff. Ms. Reinking highlighted that two of the Daisy Award nominations were received from patients who described elements of what is included in the Press Ganey survey questions and exemplifies strong support that the ongoing patient experience training is reaching the patients of El Camino Health. Motion: To receive the Patient Story Movant: Po Second: Chang Ayes: Somersille, Chang, Simon, Zoglin, Po, Legha, Ho Noes: None Abstain: None Absent: Sharma Recused: None Dr. Holly Beeman, CQO, provided an update on Health Equity 10. RECEIVE HEALTH Motion **EQUITY UPDATE** initiatives within the organization. Dr. Beeman highlighted work Approved being done to optimize the tools (EPIC), workflows and training of staff to accurately collect patient reported information on race, language, and social determinants of health. A review of the Quality Council structure and reporting cadence was discussed including progress on having each department select one improvement measure viewed through a health equity lens. Motion: To receive Health Equity Update Movant: Simon Second: Po Ayes: Somersille, Chang, Simon, Zoglin, Po, Legha, Ho Noes: None Abstain: None Absent: Sharma Recused: None 11. RECEIVE PSI REPORT Dr. Holly Beeman, CQO, provided an update on the Patient Motion Safety Indicators (PSIs) scores for FY23. Committee members Approved discussed PSI-18/19, obstetrical laceration, and performance. ECH has a high ob laceration rate attributed to the high number of Asian patients who deliver at ECH. Asian women have a higher rate of obstetrical lacerations. Ms. Simon recalled having a detailed review of ECH obstetrical lacerations in a prior meeting. A follow-up item is to provide the detailed

Open Minutes: Quality, Patient Care and Patient Experience Committee

Open Minutes: Quality, Patient Care and Patient Experience Committee December 4, 2023 | Page 4

December 4, 2023 Page 4		
	earlier report on obstetrical lacerations to the committee for review at a future meeting.	
	Motion: To receive FY2023 PSI report	
	Movant: Simon Second: Po Ayes: Somersille, Chang, Simon, Zoglin, Po, Legha, Ho Noes: None Abstain: None Absent: Sharma Recused: None	
12. RECESS TO CLOSED SESSION	Motion: To recess to closed session Movant: Second: Ayes: Somersille, Chang, Simon, Zoglin, Po, Legha, Ho Noes: None Abstain: None Absent: Sharma Recused: None	Recessed to closed session at 6:43 p.m.
13. AGENDA ITEM 18: CLOSED SESSION REPORT OUT	During the closed session, the Quality Committee approved the recommendation of the Credentialing and Privileges Report for approval by the El Camino Hospital Board of Directors, by a unanimous vote of all members present.	Reconvened Open Session at 7:13 p.m.
14. AGENDA ITEM 19: COMMITTEE ANNOUNCEMENTS	Chair Somersille recounted and confirmed action items for staff and the committee. No further announcements were made by the committee.	
15. AGENDA ITEM 20: ADJOURNMENT	Motion: To adjourn at 7:17 p.m. Movant: Po Second: Simon Ayes: Somersille, Chang, Simon, Zoglin, Po, Legha, Ho Noes: None Abstain: None Absent: Sharma Recused: None	Adjourned at 7:17 p.m.

Attest as to the approval of the foregoing minutes by the Quality, Patient Care, and Patient Experience Committee of El Camino Hospital:

Gabriel Fernandez, Governance Services Coordinator

Prepared by: Gabriel Fernandez, Governance Services Coordinator

Reviewed by: Tracy Fowler, Director of Governance Services