

**Minutes of the Open Session of the
 Quality, Patient Care and Patient Experience Committee Meeting of the
 El Camino Hospital Board
 Monday, February 29th, 2016**

**El Camino Hospital, Conference Rooms A&B
 2500 Grant Road, Mountain View, California**

**Katherine Anderson participated via teleconference from the following address:
 Alpha Motoazabu 3-8-48, Motoazabu, Minatu-ku, Tokyo**

Members Present

Dave Reeder; Peter Fung, MD;
 Diana Russell, RN; Jeffrey Davis, MD;
 Nancy Carragee, Mikele Bunce,
 Wendy Ron, Alex Tsao, Melora Simon,
 and Katie Anderson (via
 teleconference).

Members Absent

Lisa Freeman

Members Excused

Robert Pinsker, MD

A quorum was present at the El Camino Hospital Quality, Patient Care and Patient Experience Committee on the 29th day, February, 2016 meeting.

Agenda Item	Comments/Discussion	Approvals/Action
1. CALL TO ORDER	The meeting of the Quality, Patient Care and Patient Experience Committee of El Camino Hospital (the "Committee") was called to order by Committee Chair Dave Reeder at 5:36p.m.	<i>None</i>
2. ROLL CALL	Chair Reeder asked Stephanie Iljin to take a silent roll call.	<i>None</i>
3. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Chair Reeder asked if any Committee member or anyone in the audience believes that a Committee member may have a conflict of interest on any of the items on the agenda. No conflict of interest was reported.	<i>None</i>
4. CONSENT CALENDAR ITEMS	<p>Chair Reeder asked if any Committee member wished to remove any items from the consent calendar for discussion. None were noted.</p> <p><u>Motion:</u> To approve the consent calendar (Open Minutes of the February 1, 2016 Meeting and Environmental Policies were approved).</p> <p><u>Movant:</u> Davis</p> <p><u>Second:</u> Russell</p> <p><u>Ayes:</u> Anderson, Davis, Fung, Russell, Bunce, Reeder, Carragee, Simon, Tsao, and Ron.</p> <p><u>Noes:</u> None</p> <p><u>Abstentions:</u> None</p> <p><u>Absent:</u> Freeman</p>	<i>The Open Minutes of the February 1, 2016 Meeting and Environmental Policies were approved.</i>

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	<p><u>Excused:</u> Pinsker <u>Recused:</u> None</p>	
<p>5. CMO TRANSITION</p>	<p>Chair Reeder updated the Committee on the CMO Transitional Plan & Medical Leadership Team, and clarified the role transfers throughout Dr. Pifer’s transition. Dr. Dan Shin will assume all Quality and Patient Centered Care areas, Dr. Dave Francisco will assume On Call and Medical Directors areas, and Dr. Shreyas Mallur, our new Associate Chief Medical Officer, will oversee Quality and Medical Directors at our Los Gatos Campus. Chair Reeder expressed his thanks and appreciation to Dr. Pifer for his diligence in serving the Quality Committee and his steadfast focus on Patient Safety.</p>	
<p>6. REPORT ON BOARD ACTIONS</p>	<p>Chair Reeder reported that the Board is currently focused on the recent land purchase in South San Jose, and the recent Board approval of opening 5 Urgent Care Facilities within the Silicon Valley.</p>	<p><i>None</i></p>
<p>7. PROPOSED FY17 COMMITTEE GOALS</p>	<p>Dr. Pifer, Chief Medical Officer, reviewed the Proposed FY17 Committee Goals to include:</p> <ol style="list-style-type: none"> 1. Review the hospital’s organizational goals and scorecard and ensure that those metrics and goals are consistent with the strategic plan and set at an appropriate level as they apply to the Quality, Patient Care, and Patient Experience Committee. 2. Biannually review peer review process and medical staff credentialing process. 3. Develop a plan to review exceptions for goals that are being monitored by the management team and report those exceptions to the El Camino board of directors. 4. Review and oversee a plan to ensure the safety of the medication delivery process. The plan should include a global assessment of adverse events and it should include optimizations to the medication safety process using the new iCare tool. <p>Dr. Pifer asked the Committee for feedback and discussion ensued. The Committee asked for the addition of a goal addressing further development of the Patient and Family Centered Care plan.</p>	<p><i>None</i></p>
<p>8. FY 16 EXCEPTION REPORT</p>	<p>Dr. Pifer, Chief Medical Officer, reviewed the exception report and noted that most metrics have remained stable</p>	<p><i>None</i></p>

Agenda Item	Comments/Discussion	Approvals/Action
	<p>or improved. Falls improved in December and January and specimen labeling errors remain low. However, surgical site infections increased in November and the metric that remains a priority is medication errors. The exception report showed that December has improved, but medication errors should remain a top priority. Dr. Pifer reported that he and Cheryl Reinking continue to chair weekly medication safety meetings with a large multi-disciplinary team. This team is working on system improvements with medication workflow. Dr. Pifer submitted the Weekly Medication Safety minutes to reflect the current action plans in place. Dr. Pifer asked the Committee for feedback and discussion ensued.</p> <p>* Dr. Pifer asked that Dr. Kemper and Catherine Nalesnik be invited to the April 4th Committee meeting in order to speak to the Surgical Site Infections.</p>	
<p>9. PATIENT AND FAMILY CENTERED CARE UPDATE</p>	<p>Mick Zdeblick, Chief Operating Officer, gave a brief overview of the Patient and Family Centered Care Plan. Mr. Zdeblick reported that since the last Quality Committee meeting senior management held a FY16 & FY17 Priority Setting Retreat. At this retreat all of the efforts required to successfully close out FY16 were reviewed. Major strategic efforts were also outlined. The consensus of the discussion was that now may not be the best time to launch a new endeavor focused on Patient Family Centered Care. Mr. Zdeblick asked the Committee for feedback and discussion ensued. The Committee voiced concern and requested further investigation and development of the Patient and Family Centered Care theme with anticipated implementation by end of FY17.</p>	<p><i>None</i></p>
<p>10. GREELEY PROJECT REVIEW</p>	<p>Dr. Pifer presented the Greeley Project to the Committee. He further explained that the Greeley Company has been retained to conduct our peer review, and assessment of our Enterprise Scope of Services. Dr. Pifer asked the Committee for feedback and discussion ensued.</p>	
<p>11. PUBLIC COMMUNICATION</p>	<p>None</p>	<p><i>None</i></p>
<p>12. ADJOURN TO CLOSED SESSION</p>	<p>Motion: To adjourn to closed session at 7:12 p.m. Movant: Freeman Second: Carragee</p>	<p><i>A motion to adjourn to closed session at 7:12 p.m. was approved.</i></p>

Agenda Item	Comments/Discussion	Approvals/Action
	<p>Ayes: Anderson, Davis, Fung, Russell, Bunce, Reeder, Carragee, Simon, Tsao, and Ron. Noes: None Abstentions: None Absent: Freeman Excused: Pinsker Recused: None</p>	
<p>13. AGENDA ITEM 18 RECONVENE OPEN SESSION/ REPORT OUT</p>	<p><i>Agenda Items 15 – 17 were reported in closed session.</i> Chair Reeder reported that the February 1, 2016 Quality Committee Closed Minutes were approved. Chair Reeder also noted the upcoming Quality Committee Meeting dates, and upcoming Semi-Annual Board and All Committee Meeting on March 23, 2016.</p>	<p><i>None</i></p>
<p>14. AGENDA ITEM 19 ADJOURNMENT</p>	<p>There being no further business to come before the Committee, the meeting was adjourned at 7:28p.m.</p>	<p><i>None</i></p>

Attest as to the approval of the Foregoing minutes by the Quality Committee and by the Board of Directors of El Camino Hospital:



Dave Reeder
Patient Experience Committee