

Minutes of the Open Session of the Quality, Patient Care and Patient Experience Committee Meeting of the El Camino Hospital Board Wednesday, June 1st, 2016

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

Members Present

Dave Reeder; Jeffrey Davis, MD; Diana Russell, RN; Mikele Bunce, Nancy Carragee, Melora Simon, and Alex Tsao. **Members Absent**

Peter Fung, MD; Katie Anderson, Lisa Freeman, and Wendy Ron. **Members Excused**

Robert Pinsker, MD

A quorum was present at the El Camino Hospital Quality, Patient Care, and Patient Experience Committee on the 1st day of June, 2016 meeting.

A	genda 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 5:39 p.m.	None
2.	ROLL CALL	Chair Reeder asked Stephanie Iljin to take a silent roll call.	None
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.	None
4.	CONSENT CALENDAR ITEMS	Chair Reeder asked if any Committee member wished to remove any items from the consent calendar for discussion. None were noted. Motion: To approve the consent calendar (Open Minutes of the May 2, 2016 meeting were approved). Movant: Simon Second: Davis Ayes: Davis, Russell, Bunce, Reeder, Carragee, and Simon. Noes: None Abstentions: None Absent: Fung, Anderson, Freeman, and Ron. Excused: Pinsker Recused: None	The Open Minutes of the May 2 nd , 2016 were approved.
5.	REPORT ON BOARD ACTIONS	Chair Reeder reported that the Board is currently focused on the Fiscal Year End Budget. He reported that while finances and investment returns are	None

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Agenda Item	Comments/Discussion	Approvals/Action
*	improving, we are still experiencing low volumes in Maternal Health. Other areas of focus are the New Construction Projects which include the Parking Structure, BHS, iMob, and Women's Hospital. He also announced that as of July 1, 2016, Dr. Rebecca Fazilat will become the Mountain View Chief of Staff and Dr. Augusto Bastidas will become the Mountain View Vice-Chief of Staff. He further reported that Lisa Freeman has accepted a new job and will no longer serve on the Quality Committee. Chair Reeder thanked her for her time and expertise while serving on the Committee.	
6. BOARD DISCUSSION QUALITY IT		None
7. FY16 EXCEP' REPORT	TION Dr. Shin presented the FY16 Exception Report to the Committee. He reported that seven metrics are stable, but highlighted that responsiveness of hospital staff remains below average. He noted that specimen labeling errors problem has been resolved and proposed replacing this metric with a new sepsis metric for the FY17 Exception Report. The Committee generally agreed with this recommendation.	None
8. DRAFT FY17 EXCEPTION REPORT	Joy Pao, MD, Senior Director of Clinical Quality and Patient Safety, presented a sample of major quality, safety, and risk measures across the hospital to the Committee for consideration for the FY17 Exception Report and asked for questions and feedback. The Committee briefly discussed ideas for metrics for the Exception Report.	None

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Agenda Item	Comments/Discussion	Approvals/Action
	*The Committee requested that a Draft FY17 Exception Report, prepared by Dr. Pao, and more detailed discussion be agendized for August 1st, 2016 meeting.	
9. FY17 ORGANIZATIONAL GOALS	Mick Zdeblick, Chief Operating Officer presented the FY17 Organizational Goals to the Committee further detailed in the packet. He reiterated the Committee's agreement from the May 13th meeting with the recommendation to the Board Option #2 - Pain Management Indicator as a Quality Component to the FY17 Organizational Goals. This would be in conjunction with maintaining current readmission rates and achieving length of stay reductions in Medicare patients.	None
	Chair Reeder asked the Committee for feedback and discussion ensued. The Committee discussed pain reassessment as a process measure and patient satisfaction scores of pain management as an outcome measure for a quality component of Patient Safety and iCare FY 17 Organizational Goals. They also proposed a countermeasure for pain to assure narcotic safety.	
10. PATIENT AND FAMILY ADVISORY COUNCIL UPDATE	Cheryl Reinking, Chief Nursing Officer, introduced RJ Salas, Director of Patient Experience, to the Committee and asked that he further detail the update on the Patient and Family Advisory Council as submitted in the packet. Mr. Salas presented an update regarding the Patient and Family Advisory Council's (PFAC): Current Timeline Efforts in Recruitment Vision and Charter Current PFAC Snapshot Efforts in Increasing Patient and Family Involvement and Increasing the Patient Voice Mr. Salus asked the Committee for questions or feedback and discussion ensued.	None
11. PUBLIC COMMUNICATION	None	None
12. ADJOURN TO CLOSED SESSION	Motion: To adjourn to closed session at 7:19 p.m. Movant: Carragee Second: Russell Ayes: Davis, Russell, Bunce, Reeder, Carragee, and	A motion to adjourn to closed session at 7:19 p.m. was approved.

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Agenda Item	Comments/Discussion	Approvals/Action
	Simon.	
	Noes: None	
	Abstentions: None	
	Absent: Fung, Anderson, Freeman, and Ron.	
	Excused: Pinsker	
8	Recused: None	<u>.</u>
13. AGENDA ITEM 16	Agenda Items 13–15 were reported in closed session.	None
RECONVENE OPEN	Chair Reeder reported that Closed minutes of the May 2,	
SESSION/	2016 Quality Committee Meeting were approved. Chair	
REPORT OUT	Reeder also noted the upcoming Quality Committee	
	Meeting dates.	
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14. AGENDA ITEM 17	There being no further business to come before the	None
ADJOURNMENT	Committee, the meeting was adjourned at 7:21p.m.	

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

Chair, ECH Quality, Patient Care and

Patient Experience Committee