UMC ProVidence Suite
Delta Point Building
901 Rancho Lane (Emerald Room)
Las Vegas, Clark County, Nevada
December 14, 2015, 9:00 a.m.

The University Medical Center Governing Board Clinical Quality and Professional Affairs Committee met in the Delta Point Building, Emerald Room, 901 Rancho Lane, Las Vegas, Clark County, Nevada, on Tuesday, December 15, 2015, at the hour of 9:00 a.m. The meeting was called to order at the hour of 9:05 a.m. by Chair Renee Franklin and the following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:
Renee Franklin, Chair
Laura Lopez-Hobbs
Donald Mackay, M.D.
John White

Also Present:
Mason VanHouweling, Chief Executive Officer
Kurt Houser, Chief Operating Officer
Danita Cohen, Executive Director, Strategic Development and Marketing
Mary Brann, DNP, MSN, RN, Executive Director, Performance Improvement and Quality Management
Hailey Hammond, Director of Patient Experience
Shana Tello, Director, Medical Staff Services
Linda Garrison, Director, Health Information Management
Terra Lovelin, Board Secretary

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

Chair Franklin asked if there were any persons present in the audience wishing to be heard on any item on this agenda.

Speaker(s): None

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Clinical Quality and Professional Affairs Committee meeting on October 20, 2015. *(For possible action)*

Two minor changes were noted by Chair Franklin and these were fixed by the Board Secretary prior to posting.

FINAL ACTION: A motion was made by Member Lopez-Hobbs that the minutes be approved as recommended. Motion carried by unanimous vote.

ITEM NO. 3 Approval of Agenda *(For possible action)*

FINAL ACTION: A motion was made by Member White that the agenda be approved as recommended. Motion carried by unanimous vote.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Approve and recommend approval by the Governing Board of the amended Medical and Dental Staff Bylaws of University Medical Center of Southern Nevada; as accepted and voted on by the Medical Executive Committee and General Medical Staff on November 24, 2015. (For possible action)

DOCUMENT(S) SUBMITTED**:** Governing Board Bylaws Memo dated November 24, 2015.

DISCUSSION: Shana Tello explained the revisions to the Medical and Dental Staff Bylaws.

FINAL ACTION: A motion was made by Member Mackay that the amended bylaws be approved as recommended. Motion carried by unanimous vote.

ITEM NO. 5 Receive a report from Dr. Jay Fisher, Medical Director, Children's Hospital of Nevada at UMC's Pediatric Emergency Department in "Voice of the Physician" (For possible action)

DOCUMENT(S) SUBMITTED**:** PowerPoint titled, "Children's Hospital of Nevada Pediatric Emergency"

DISCUSSION: Dr. Fisher explained his role as a Physician in the Children's Hospital and what types of scenarios dealing with mental health problems that he sees everyday in the hospital.

Dr. Fisher presented statistics that showed an increase in young patients with mental illness. There are not enough places in Nevada that take adolescents with mental health issues and this poses many problems. The average length of stay at the Children's Hospital when a child arrives with signs of mental illness is around 9.5 hours. Trying to assess them, get them services and a bed is very time consuming.

A discussion ensued about what we could do as a hospital to increase recognition of the mental health crisis and work to find a solution locally.

FINAL ACTION: No action taken.

ITEM NO. 6 Receive an update on HAC/PSI Reviews. (For possible action)

DOCUMENT(S) SUBMITTED**:** HAC (Hospital Acquired Conditions and PSI (Patient Safety Indicators)

DISCUSSION: Linda Garrison, Director of Health Information Management explained that although they do not have auditors which are greatly needed, staff is reviewing everything themselves and this is helping them to eliminate potential HACs.

Member Lopez-Hobbs and Chair Franklin said it was obvious that there has been a lot of improvement and thanked Ms. Garrison for all her work.

Ms. Garrison noted that Page, the new Coding Manager is doing all the reviews, training and coaching of the coders and Vanessa is working with the doctors; the entire team is really working hard on making the process work better.

(Skipped number 7 due to time constraints)

FINAL ACTION: No action taken.

ITEM NO. 7 Receive an overview on the new ICARE4U framework for all patient and colleague interactions. (For possible action)

DOCUMENT(S) SUBMITTED**:**

DISCUSSION: Danita Cohen, Director of Strategic Development

This item was tabled due to time constraints and will be placed on the February agenda.

FINAL ACTION: No action taken.

ITEM NO. 8 Receive a report on United Health Consortium (UHC) consultant visit. (For possible action)

DOCUMENT(S) SUBMITTED**:** Objective: Improve Documentation and Coding

DISCUSSION: Kurt Houser, Chief Operating Officer explained that we invited UHC on December 2, 2015 to speak about documentation and coding. Many doctors and staff attended this session and great steps towards improving our coding and documentation resulted from this.

UHC compared UMC with other Level I trauma centers in the Country and their statistics showed that a lot of our admissions come thru Trauma, 12.6% compared to 2.4%.

We have more people coming thru trauma but it looks like they are healthier than when they arrive according to the documentation. This is the case however, through the entire hospital. Education of the physicians and attendings in respect to proper coding are key to correct this.

FINAL ACTION: No action taken.

ITEM NO. 9 Receive an update of HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) from the Patient Experience Department. (For possible action)

DOCUMENT(S) SUBMITTED**:** None

DISCUSSION: Hailey Hammond, Director of Patient Experience updated the committee on a few items.

UMC is still holding strong with communications and pain management has increased in the scores. Quietness and care transition still need improvement.

Avatar, the HCAPS vendor visited UMC two weeks ago and we are currently waiting on the official report and recommendations. They also helped set up improvement plans within the system.

The white boards have been installed on the fifth floor and the fourth floor installations should be done this week. The feedback on the white boards is very positive with the patients and nurses.

FINAL ACTION: No action taken.

ITEM NO. 10 Receive a report on the Joint Commission visit. (For possible action)

DOCUMENT(S) SUBMITTED**:** None

DISCUSSION: Mary Brann, Executive Director of Performance Improvement and Quality Management, announced that the Joint Commission is here through Wednesday. We invited them to look at any issues we may have and see how were are doing with things coming up.

FINAL ACTION: No action taken.

ITEM NO. 11 Identify emerging issues to be addressed by staff or by the Clinical Quality and Professional Affairs Committee at future meetings; and direct staff accordingly. (For possible action)

DISCUSSION: None

FINAL ACTION: No action taken.

COMMENTS BY THE GENERAL PUBLIC:

At this time, Chair Franklin asked if there were any persons present in the audience wishing to be heard on any items not listed on the posted agenda.

SPEAKERS(S): None

There being no further business to come before the Committee at this time, at the hour of 11:00 a.m., Chair Franklin adjourned the meeting.

MINTUES PREPARED BY: Terra Lovelin, Governing Board Secretary

APPROVED: February 22, 2016