UMC ProVidence Suite
Trauma Building, 5th Floor
800 Rose Street
Las Vegas, Clark County, Nevada
October 20, 2015, 9:00 a.m.

The University Medical Center Governing Board Clinical Quality and Professional Affairs Committee met in ProVidence Suite, Trauma Building, 5th Floor, 800 Rose Street, Las Vegas, Clark County, Nevada, on Tuesday, October 20, 2015, at the hour of 9:00 a.m. The meeting was called to order at the hour of 9:06 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 - (Arrived 9:28 am, Item #6)

Also Present:
Kurt Houser, Chief Operating Officer
Danita Cohen, Executive Director, Strategic Development and Marketing
Mary Brann, DNP, MSN, RN, Executive Director, Clinical Excellence and Regulatory Compliance
Halley Hammond, Director of Patient Experience
Patti Stopka, RN, BSN, Assistant Director, Center for Quality and Patient Safety
Shana Tello, Director, Medical Staff Services
Ron Roemer, Director, Clinical Research and Compliance
Terra Lovelin, Administrative Assistant

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 August 18, 2015. *(For possible action)*

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 Mackay that the agenda be approved as recommended. Motion carried by unanimous vote.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive a report with an update on Leapfrog. (For possible action)

DISCUSSION: Kurt Houser, Chief Operating Officer reported that our Leapfrog measures are moving in the right direction. We recently closed our ICU to only board certified, critical care physicians; that enabled us to get us a score of 100! We were also able to lower our pressure ulcer rate. Other hospitals around town did the same thing with regards to their ICU's.

Mr. Houser also pointed out that Deb Fox, CNO, has a four year goal of getting us to Magnet Status.

Patti Stopka, RN and assistant Director for the Center for Quality and Patient Safety gave a brief update on HAC/PSI CQPS Reviews.

8 cases came to her department
- 4 of which were confirmed as hospital acquired conditions.
- 2 cases that have been changed after receiving clarification from physicians.
- 1 pending revision from the coders
- 1 unresolved case that they are looking into.
- 38% reduction in number of HACs.

Chair Franklin commended Patti on a job well done and said this was evidence of great teamwork.

FINAL ACTION: None taken.

ITEM NO. 5 Review samples recommendations of a Quality Dashboard for the Board to adopt. (For possible action)

DOCUMENT(S) SUBMITTED**:** Quality Metrics

DISCUSSION: Mr. Houser thanked Mary B., Patti S., and Shana T., who tracks these indicators. There are hundreds of quality measures to check and we pick the measure based on CMS requirements and other categories where we want to see an improvement.

A discussion took place regarding improvement initiatives and other quality measurements.

FINAL ACTION: No action taken.

ITEM NO. 6 Receive an update on current research projects (For possible action)

DOCUMENT(S) SUBMITTED**:**
-Current State of Clinical Research at UMC

DISCUSSION: Ron Roemer, Director of Clinical Research and Compliance gave an update on research.

In 18 months great strides have been made and some of those include:

- Created a structured research environment and documented standardized processes.
- All research must be reviewed and approved by the Clinical Trials Office
- Ensure that UMC costs are covered and research billing is compliant.
- Promote the conduct of clinical trials.
- Created the Research Institute; investigators have access to two exam rooms for outpatient research.
- Pharmacies are getting involved.

There are 16 sponsored clinical trials, 5 active clinical trials, 5 being negotiated, 5 in the feasibility stage and two more are in the pipeline.

Other issues discussed included drug company proactively engaging UMC, EHR support for clinical trials and potential research space in the new medical school.

Chair Franklin said it is evident that Mr. Roemer has done many great things since coming on board with UMC. It is clear he has added value to the organization and is building great relationships.

FINAL ACTION: No action taken.

ITEM NO. 7 Receive a report from Dr. John Onyema, Medical Director for Ambulatory Services in "Voice of the Physician" (For possible action)

DOCUMENT(S) SUBMITTED**:** PowerPoint Shown "UMC Quick Care"

DISCUSSION: Dr. Onyema, Medical Director for Ambulatory Services shared a PowerPoint presentation and briefed the committee on where they have been and where they are going.

Dr. Onyema said that quality depends on the eye of the beholder. Improving the experience of care includes, improving access, engaging the patient and value based care.

He explained the patients are broken down into four categories:

A discussion was had regarding marketing Quick Care doctors, needed staff resources and throughput times at the clinic.

Member Lopez-Hobbs asked if Doctors could tell patients who are using the ED to go to Quick cares to help decongest the ED, if they don't really need it.

Dr. Oneyma replied that doctors cannot do that.

FINAL ACTION: No action taken.

(5 minute break taken here)

ITEM NO. 8 Receive an update of HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) from the Patient Experience Department and recent Avatar training. (For possible action)

DOCUMENT(S) SUBMITTED**:** None

DISCUSSION: Haley Hammond, Director of Patient Experience presented a few updates to the Committee.

Ms. Hammond explained that the highest HCAP scores are in communication with physicians, and the lowest HCAP scores are in responsiveness with staff; they are continuing to track both of these.

The new white boards that will be placed in all patient rooms are on track and should be arriving in four weeks. The staff is currently going through a lot of education on consistency with filling out the boards and learning how to utilize them as a great tool for communication.

Ms. Hammond also explained that they just implemented a "Patient Experience" leadership rounding committee, which involves non-nursing employees. As of now, these committee members are at the Director level representing departments throughout the entire hospital, but in the future, the hope is to include all levels of personnel. This committee will make rounds throughout the hospital to visit the same patients every day and talk with them. They want to be the "ear" so they can get some of the needs resolved and compliments heard.

Shana Tello, Director of Medical Staff Services, updated the committee on the Three Wish Campaign. The physician's filled out note cards with their "wishes" on them. They received a lot of responses and the biggest one was a new EHR, which we are working on. They also had small ones too, like bigger cups in the physician's lounge. The doctors are seeing action and are quite happy.

Chair Franklin said that this was a fabulous idea. She also suggested that Shana continue to follow the progress as she is currently doing.

FINAL ACTION: No action taken.

ITEM NO. 9 Receive an overview on the new ICARE4U framework for all patient and colleague interactions. (For possible action)

DOCUMENT(S) SUBMITTED**: ICARE4U packet.**

DISCUSSION: Danita updated the committee on the preparation and roll out of the new ICARE4U tool.

ICARE4U will be rolled out at the November's Director Meeting. This is about changing the culture at UMC. It's a satisfaction tool for working with patients and coworkers. This is a proven tool that is being currently used at Stanford and stands for **Identifying** yourself, **Communicating** why you are in the area, **Asking** permission to do a task, **Responding** to patient and staff questions promptly, **Exiting** every conversation asking, "Is there anything else I can do 4-u?"

This framework will be rolled out throughout UMC on December 1, 2015 and integrated into the evaluation process as well. Mr. Houser had a great idea that before an employee can see a job posting at UMC, ICARE4U flashes on the screen and they have to check a box that they agree to follow these expectations, if selected to for employment at UMC.

Chair Franklin commented that for a teaching hospital, this is a very important tool since so many residents and students and other personnel are always coming through the hospital.

FINAL ACTION: No action taken.

ITEM NO. 10 Review a draft of the Governing Board evaluation survey. (For possible action)

DOCUMENT(S) SUBMITTED**:** Survey Monkey Draft

DISCUSSION: Chair Franklin briefed the committee on a survey that she is putting together for the board evaluation. Terra has put these questions into a survey format using Survey Monkey. Chair Franklin requested that the committee members look at the survey that Terra will be sending them today, and offer her feedback regarding the length of the survey and the content.

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 11:20 a.m., Chair Franklin adjourned the meeting.

MINTUES PREPARED BY: Terra Lovelin, Governing Board Secretary

APPROVED: December 15, 2015