UMC ProVidence Conference Room
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
October 17, 3:00 p.m.

The University Medical Center Governing Board Clinical Quality and Professional Affairs Committee met in the ProVidence Conference Room, Trauma Building, 5th floor, Las Vegas, Clark County, Nevada, on Monday, October 17, 2016, at the hour of 3:00 p.m. The meeting was called to order at the hour of 3:02p.m. by Chair Jeff Ellis and the following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:
Jeff Ellis, Chair
Renee Franklin – via phone
Donald Mackay, M.D.
Mike Saltman

Absent:
Laura Lopez-Hobbs (excused)

Also Present:
Jennifer Gaca, Associate Administrator, Director of Clinical Safety and PI
Danita Cohen, Executive Director, Strategic Development and Marketing
Mason VanHouweling, Chief Executive Officer
Terra Lovelin, Administrative Assistant/Board Secretary

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

Chair Ellis 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 15, 2016. ***(For possible action)***

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

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive a presentation on the Zika Virus and its community impact by Dr. Shadaba Asad (For possible action)

DOCUMENT(S) SUBMITTED**:**
Patient Experience Update

DISCUSSION: Dr. Shadaba Asad, MD. and Medical Director for Infection Control gave a brief presentation regarding the Zika Virus.

A 31 year old female physician presented to UMC with Zika like symptoms in April of 2016. She had just returned from the Dominican Republic about 48 hours prior to her admittance. Her relatives also had the same symptoms and were being treated for them back in the Dominican Republic.

The Zika virus is similar to the Yellow Fever virus and can be transmitted through infected mosquitos. Zika is not a new virus and was identified in Uganda in the Zika forest, in 1947.

There is no specific treatment for Zika infection but a person infected should rest, take fluids and avoid mosquitos and unprotected sexual intercourse. This is the first virus in over five decades known to cause birth defects and is causing great concern right now in that regard.

There are many ways to prevent being infected, such as wearing long sleeve shirts and pants, use insect repellent. Also, stay in places with air conditioning and sleep under mosquito netting if screened or air conditioned rooms are not available.

ITEM NO. 5 Receive a report on current HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) scores, reviewing trended data as well as benchmarks and initiatives for improvement. (For possible action)

DOCUMENT(S) SUBMITTED**:**
-Patient Experience Update

DISCUSSION: Haley Hammond, Director of Patient Experience provided an update on the 2016 HCAHPS scores.

Deb Fox provided an update on an initiative called, "Take a seat, rest your feet." This was a program that was piloted on 5 North and 5 South over a four week period. The number of excuses that physicians gave for not wanting to use the chairs differed and included; they were uncomfortable carrying the chairs, physicians wanted to sit on the bed instead of the chair, and they were in a rush during rounds so they didn't have time to sit down. Two physicians ended up using the chairs.

The recommendation was to discontinue the pilot and not invest in anymore chairs. They did place in the rooms, a standardized patient chair that is more therapeutic.

Dr. Mackay added that as a physician he wouldn't want to wait for a chair but having a chair that both the doctor and visitor could use would be nice.

Ms. Fox added that the issue is that when a doctor comes in, there is a visitor in the chair so do they then ask the person to get up or do we designate a chair just for the doctor?

Mr. VanHouweling added that we need to have more chairs available as it's a huge problem but it is also a very expensive venture so staff are looking into this.

Member Franklin asked if we could have a sign in the rooms saying that people have to get out of the chair when a doctor enters the room.

Member Ellis agreed with this idea.

Mr. VanHouweling mentioned he is holding a summit with Pioneer, Sound Physicians and others, regarding best practices and getting everyone on board with the initiatives.

FINAL ACTION: None taken.

ITEM NO. 6 Receive an update on ICARE4U. (For possible action)

DOCUMENT(S) SUBMITTED**:**
-None submitted.

DISCUSSION: Danita Cohen reported that during Leadership Boot Camp for Managers, she and her team are leading refresher classes to remind the directors and managers that they set the stage for ICARE4U.

The ICARE "Wow" wall was shown to the committee. This is going to be in print and in digital form to remind the teams about ICARE.

Ms. Hammond gave a report on the secret shopper program that they are participating in. This involves Haley and her team watching and setting off call lights and seeing how promptly they are being responded to. Her team takes candy and ICARE cards out with them when they do these shopping trips to reward staff when they answer lights promptly.

FINAL ACTION: No action taken.

ITEM NO. 7 Receive a report on Complaints and Grievances. (For possible action)=

DOCUMENT(S) SUBMITTED**:**
- Patient Complaints and Grievances

DISCUSSION: Jenny Gaca, Director of Clinical Quality gave an update on grievances.

CMS regulates patient grievances and these are tracked by Haley's department. We currently do not have the most robust system for tracking and reporting all grievances. Grievances can be verbal or written and can include cold food or bad care.

The present system Haley's team utilizes is quite antiquated. Jenny is looking at a new grievance tracking system that will be more user-friendly and run better reports.

There were 87 grievances in the first quarter and 147 in the second quarter. She compared these with patient days and out of 40,000 patient days, we received 147 grievances.

The team will come up with benchmarks and report and track response times.

FINAL ACTION: No action taken.

ITEM NO. 8 Receive a report on the Hospital's Infection Control Program. (For possible action)

DOCUMENT(S) SUBMITTED**:**
- UMC Infection Prevention

DISCUSSION: Ms. Gaca updated the committee on all of the things UMC does for infection prevention.

Value based purchasing was explained further. The safety score is impacted by our infection control surveillance data. 20% of the reimbursement is going to be related to how we do on our infection control.

One of the items that UMC reports is central line infections. The infection prevention team has been putting in a lot of effort around reducing these infections. The national bench mark is 1.0 and we are at 1.278. We have a robust team that is rounding and making great progress.

Ms. Gaca is very proud of our infection prevention program. They nurses and other staff in the group are all certified in infection control. These teams have been put in place for the three areas in need of attention. They have increased daily surveillance, held skills fairs, education, orientation, and collaboration with the residents has been fantastic.

The, "You have been spotted program" has been a huge satisfier. An employee is recognized for helping prevent infections throughout the hospital and is rewarded with a covered parking spot for one month as well as recognition in the Pulse.

Dr. Mackay asked about C-diff and how long it's been a problem.

Dr. Asad responded that it has been around for ages but in 2011 we saw a much more severe strain so this caught people's attention.

FINAL ACTION: No action taken.

ITEM NO. 9 Discuss and review amended 2016 Patient Safety Program Plan. (For possible action)

DOCUMENT(S) SUBMITTED**:**
- UMC Patient Safety Program Management Plan 2016

DISCUSSION: Ms. Gaca explained that UMC needs a Grievance Committee so she would like the Patient Safety Committee to act as the grievance committee.

This committee would be made up of people designated by Nevada statute and includes a Patient Safety Officer, Pharmacy Director, Medical Staff, ACNO's and CNO and CEO or designee as well as others.

FINAL ACTION: A motion was made by member Saltman that the item be approved as recommended. Motion carried by unanimous vote.

ITEM NO. 10. Discuss proposed calendar for reporting to the Quality Subcommittee of the Board. (For possible action)

DOCUMENT(S) SUBMITTED**:**
- Reporting Calendar

DISCUSSION: Ms. Gaca explained that there are certain data elements that need to be reported to the board on a regular basis due to state regulation or other regulation. When she came on board this was not being done as robustly as it should have been so Ms. Gaca created a calendar so the committee knew what was expected to be reported and when.

FINAL ACTION: No action taken.

ITEM NO. 11. Discuss CEO annual incentive compensation performance standards as it relates to subject matter relevant to the Clinical Quality and Professional Affairs Committee and make a recommendation to the Human Resources and Executive Compensation Committee. (For possible action)

DOCUMENT(S) SUBMITTED**:**
- None submitted

DISCUSSION: Mr. VanHouweling explained that his incentive is based on certain objectives and goals that were to be met by himself and the organization. In December he will present to the committee why these objectives were met or not met.

FINAL ACTION: None

ITEM NO. 12 Identify emerging issues to be addressed by staff or by the Clinical Quality and Professional Affairs Committee at future meetings; and direct staff accordingly.

None

COMMENTS BY THE GENERAL PUBLIC:

At this time, Chair Ellis 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 4:27 p.m., Chair Ellis adjourned the meeting.

MINTUES PREPARED BY: Terra Lovelin, Administrative Assistant

APPROVED: December 12, 2016