

***University Medical Center of Southern Nevada
UMC Governing Board Clinical Quality and Professional Affairs
August 14, 2017***

UMC ProVidence Conference Room
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
August 14, 2017 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, August 14, 2017 at the hour of 3:00 p.m. The meeting was called to order at the hour of 3:00 p.m. by Chair Dr. Donald Mackay and the following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:

Chair, Donald Mackay, M.D.
Renee Franklin
Laura Lopez-Hobbs

Absent:

Mike Saltman (Excused)

Also Present:

Mason VanHouweling, Chief Executive Officer
Tony Marinello, Chief Operating Officer
Susan Pitz, General Counsel
Dr. Carrison, Chief of Staff
Jeff Ellis, Governing Board Member
Danita Cohen, Chief Experience Officer
Deb Fox, Chief Nursing Officer
Haley Hammond, Director of Patient Experience
Shana Tello, Director Medical Staff Services
Jennifer Gaca, Associate Administrator, Director of Clinical Safety and PI
Terra Lovelin, Administrative Assistant/Board Secretary

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

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

Speaker(s): None

Due to lack of quorum, Items No. 2 and 3 were skipped until quorum was present. Item No. 4 was heard next.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Presentation from Dr. Stephanie K. Hansen, DO, Internal Medicine, on what hospitalists do and their role at UMC. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Sound Physicians PowerPoint

DISCUSSION: Dr. Hansen provided an overview on what a Hospitalist is and what they do.

The definition of a Hospitalist was defined as; A Practitioner who is engaged in clinical care, teaching, research, and/or leadership in the field of hospital medicine. Practitioner of hospital medicine include physicians, nurse practitioner and physician assistants.

(Laura Lopez-Hobbs arrived at 3:07pm and quorum was achieved)

In addition to their expertise managing the clinical problems of patients, hospital medicine practitioners work to enhance the performance of hospitals by:

- Prompt and complete attention to all patient care needs
- Employing quality and process improvement techniques
- Collaboration with all physicians and healthcare personnel caring for the patient
- Safe transitioning of patient care within the hospital and from the hospital to the community.
- Efficient use of hospital and healthcare resources.

Dr. Carrison asked about collaboration with doctors and Dr. Hansen explained that Sound Physicians and UMC have been working together for over 8 years. Sound Physicians provide 24/7/365 patient care and are involved with the various residency and fellowship programs at UMC.

Ms. Franklin asked about the coordination of patients and Dr. Hansen replied that the Hospitalist are part of discharge planning, they do not admit patients.

FINAL ACTION: None taken

Since quorum is present, Items No. 2 and 3 were voted on.

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Clinical Quality and Professional Affairs Committee meeting on June 19, 2017. (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 Lopez-Hobbs that the agenda be approved as recommended. Motion carried by unanimous vote.

Moved to Item No. 7, 8 and 9 due to staff schedules.

ITEM NO. 7 Approve and recommend approval by the Governing Board, the amended Medical and Dental Staff Bylaws of University Medical Center of Southern Nevada; as accepted and voted on by the Medical Executive Committee on July 25, 2017. (For possible action)

DOCUMENT(S) SUBMITTED:

- Bylaws

DISCUSSION: Shanna Tello and Dr. Carrison provided a brief overview on the process of revising the bylaws.

October 1, is the proposed start date for the bylaws.

Medical staff spent many hours and days reviewing the bylaws. The bylaws had not been given a detailed, comprehensive review for several years. The Greeley Corporation provided assistance in rewriting and customizing the bylaws along with legal staff.

Dr. Carrison commented that the Medical staff voted to split the cost with the hospital for revising the bylaws, reflecting a team effort.

FINAL ACTION: A motion was made by Member Lopez-Hobbs to approve and make a recommendation to the Governing Board to approve the agreement. Motion carried by unanimous vote.

ITEM NO. 8 Approve and recommend approval by the Governing Board, the newly revised Medical Staff Bylaws of University Medical Center of Southern

Nevada; as accepted and voted on by the Medical Executive Committee on November 22, 2016. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Bylaws

DISCUSSION: Dr. Mackay asked if doctors pay dues and Ms. Tello replied that they do. There is also a charge for credentialing in the amount of \$350.00. If they want the application expedited the cost is \$600.00. For reappointment each doctor would pay \$350.00 every two years.

FINAL ACTION: A motion was made by Member Lopez-Hobbs to approve and make a recommendation to the Governing Board to approve the agreement. Motion carried by unanimous vote.

ITEM NO. 9 Approve and recommend approval by the Governing Board, the newly revised Medical Staff Rules and Regulations of University Medical Center of Southern Nevada; as accepted and voted on by the Medical Executive Committee on June 27, 2017. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Rules and Regulations

DISCUSSION: No discussion

FINAL ACTION: A motion was made by Member Lopez-Hobbs to approve and make a recommendation to the Governing Board to approve the agreement. Motion carried by unanimous vote.

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:

- Chart

DISCUSSION: Haley Hammond, Director of Patient Experience presented a report to the committee showing trending data by quarters.

Member Lopez-Hobbs asked about the scores that were not on a positive upward trend and what staff is doing to help the scores increase.

Ms. Hammond responded that there are initiatives in place to help with each of those categories such as the triad model in nursing.

Dr. Mackay asked if these scores can be presented a quarterly basis rather than monthly.

Ms. Franklin asked for a few changes with regards to how the trending data is shown.

FINAL ACTION: None taken.

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

DOCUMENT(S) SUBMITTED:

- None submitted

DISCUSSION: Danita Cohen mentioned that she would like to show the ICARE4U video at a later date when all the committee members are present.

Ms. Hammond commented that the team is now applying ICARE4U to specific departments for more personal training.

FINAL ACTION: None taken.

ITEM NO. 10 Receive a report on Value Based Purchase and an update on Leapfrog. (For possible action)

DOCUMENT(S) SUBMITTED:

- Value Based Purchasing PowerPoint

DISCUSSION: Jenny Gaca provided an update on Value Based Purchasing (VBP). VBP as determined by CMS is what guides quality in our hospital. CMS requires UMC to report data on specific areas and then these reports are made public.

UMC implemented new software through our coding department that allows current data for Patient Safety Indicators (PSI). Prior to this new software UMC had no concurrent data. This new software allows us to know what PSIs we need to work on to and then staff can look at the documentation and come up with a plan.

There is a team in place now that looks at each case and asks specific questions to find the cause of the PSI.

With regards to Leapfrog, the data is updated twice a year and a grade will be made available in the fall. UMC is at 95% compliance at the end of June with the Leapfrog requirements.

FINAL ACTION: None 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.

None

COMMENTS BY THE GENERAL PUBLIC:

At this time, Chair Mackay 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 4:22 p.m., Chair Dr. Mackay adjourned the meeting.

MINTUES PREPARED BY: Terra Lovelin, Administrative Assistant

APPROVED: October 23, 2017