UMC ProVidence Conference Room
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
February 13, 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, February 13, 2017 at the hour of 3:00 p.m. The meeting was called to order at the hour of 3:02 p.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
Laura Lopez-Hobbs
Mike Saltman

Absent:
Donald Mackay, M.D. - Excused

Also Present:
Jennifer Gaca, Associate Administrator, Director of Clinical Safety and PI
Danita Cohen, Chief Experience 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

Jenny Gaca introduced a UNLV intern who is working with Andrew; her major is Health Care Administration. She also noted that Patti Stopka has been promoted to Director of Patient Safety.

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Clinical Quality and Professional Affairs Committee meeting on December 12, 2017. *(For possible action)*

FINAL ACTION: A motion was made by Member Saltman 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.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive a presentation regarding women and heart disease from Dr. Chowdhury Ahsan, Medical Director of UMC Cardiology. (For possible action)

DOCUMENT(S) SUBMITTED**:**
- PowerPoint Presentation

DISCUSSION: Dr. Chowdhury Ahsan presented an overview on the factors and signs of heart disease. Dalia Hawwass M.D. was also introduced as she is in a fellowship program with Cardiology.

Heart disease is the biggest killer of women; one women dies every minute from heart disease. It is important that we do not underestimate heart disease in women.

Symptoms in women can present as fatigue, nausea or vomiting, sweating, light headedness, anything not right. Men will present with the traditional symptoms, pain in arm, hard to breathe, pain in chess, etc.

Some risk factors are menopause, obesity, depression, and stress, history of trauma or abuse and smoking.

Making physicians aware of the signs in women with heart disease and good teamwork helped reduce the number of deaths from heart disease throughout the ER at UMC.

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

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

DISCUSSION: Ms. Cohen announced that the team just finished shooting the UMC empathy video that will mirror the Cleveland Clinics video, which is currently on YouTube. It is a great reminder of what happens in the halls of our hospital. This video will be used in the ICARE refresh classes to remind employees why ICARE is so important. This video will also be on the famous Doctor rapper, "Z-dog's"' web page. This Doctor happens to be a physician here at UMC and has millions of followers.

A few more updates:
-Banners have been placed in the garage to remind employees to practice the ICARE principals.
-Spring Valley clinic had the best Yelp reviews so staff is giving them a party to thank them for the positive comments.
- Gift cards to the UMC Café will be mailed, along with a thank you note to any employee who is mentioned in a positive way through our survey.

FINAL ACTION: None taken.

ITEM NO. 7 Receive a report on the 2016 Annual Patient Safety Plan Evaluation and the 2017 Annual Patient Safety Plan (For possible action)

DOCUMENT(S) SUBMITTED**:**
- 2016 Patient Safety Plan Evaluation
- 2017 Patient Safety Plan

DISCUSSION: The purpose of the plan is to analyze event data for trends to ensure medication safety, risk assessment, etc.

Accomplishments in 2016 included the implementation of new Patient Safety Committee (meets monthly), in accordance with NRS, inclusion of Patient Safety in new hire orientation and a 25% increase in event reporting compared to 2015.

Actions taken to improve safety were listed and include:
-Improvements in documentation and communication
-Improved medication processes
-Dedicated Sepsis nurse
-Promotion of Just Culture
-Concurrent mortality review
-Policy revisions with staff
-Staffing review

FINAL ACTION: No action taken.

ITEM NO. 8 Receive update on the 2017 Joint Commission survey process. (For possible action)

DOCUMENT(S) SUBMITTED**:**
- Joint Commission Survey 2017

DISCUSSION: New survey methodology starting January 1, 2017, SAFER Method. They have implemented a "See it, Cite it" and compliance is required within 60 days. The higher the risk the more action is required.

Our old method gave us a response time of 45 or 60 days with a three "strikes" rule. With the SAFER Method an organization has 60 days to respond to a citation. Also, results are final.

The survey is expected before August 2017 with a possibility of increased citations. No measure of success with this survey.

Member Franklin asked what we are doing in terms of mock surveys.

Ms. Gaca hired a Regulatory Compliance Manager and had done three mock tracers so far. She has also added a weekly survey readiness update where she give the Admin. team an update. Ms. Fox has also hired a regulatory compliance individual.

FINAL ACTION: A motion was made by member Lopez-Hobbs to approve and make a recommendation to the Governing Board to approve the 2017 Safety Plan. 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**:**
Press Ganey CAHPS Oct 2016-Jan 2017

DISCUSSION: Haley Hammond provided an update on HCAHPS scores. There is a lot of inconsistency with this report.

Ms. Cohen stated that we need to hold our employees accountable and make sure they are embracing the ICARE values.

Chair Ellis asked about the plan of action to correct this.

Ms. Cohen asked the ACNO's for help to fix the employee behavior issues.

Ms. Fox stated that recruiting is an issue here on the specialty side and it is next to impossible to fire someone for bad behavior.

Chair Ellis mentioned that there were specific initiatives and plans that were supposed to move the needle, including hiring Jack London's firm, implementing

a new nursing model, and the ICARE program. None of these have worked. He would like a better action plan on how to get better results.

Ms. Cohen said she would come back to the committee with some initiatives focused on accountability. HR was asked how many people were written up due to bad interactions with each other or with our patients. If these are our scores and we don't see any discipline action coming from HR, we have disconnect.

Member Lopez-Hobbs said she would help in any way she can and she advised HR to give Ms. Cohen anything she needs.

Member Franklin sees the culture change happening but we have to stay on the employees because things will only get more intense. This is the kind of thing that determines bonus and merit increases. This as a measurement should be included.

Chair Ellis mentioned incentives and using them to make some cultural shifts.

FINAL ACTION: Come to the next meeting with initiatives that will help improve the HCAHPS scores.

ITEM NO. 9 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 4:43 p.m., Chair Ellis adjourned the meeting.

MINTUES PREPARED BY: Terra Lovelin, Administrative Assistant

APPROVED: April 10, 2017