

University Medical Center of Southern Nevada
UMC Governing Board Clinical Quality and Professional Affairs
February 12, 2018

UMC Providence Conference Room
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
February 12, 2018 3:00 p.m.

The University Medical Center Governing Board Clinical Quality and Professional Affairs Committee met at the time and location listed above. 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:

Donald Mackay, M.D., Chair
Jeff Ellis
Renee Franklin
Laura Lopez-Hobbs
Barbara Fraser (Non-Voting)

Absent:

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 Mackay 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 December 11, 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 Ellis that the agenda be approved as recommended. Motion carried by unanimous vote.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive a presentation from Dr. Shadaba Asad, Associate Professor of Medicine, and Medical Director, Infection Control, on the current flu epidemic; and direct staff accordingly. (For possible action)

DOCUMENT(S) SUBMITTED:

- PowerPoint Presentation

DISCUSSION: Dr. Asad provided an overview on how influenza is transmitted, the symptoms, and how bad the virus is this year.

The flu is a virus that is transmitted by droplets and the strain is very bad this year. Clark County has recorded 22 deaths, 735 hospitalizations and 959 confirmed cases of influenza. The actual number of flu cases is probably higher as not all cases are recorded.

The flu strain this year is associated with more hospitalizations and deaths than in prior years. The influenza vaccine effectiveness is lower against A(H3N2) viruses than against other strains of influenza and the vaccine was only 30% effective this year.

To prevent the flu, get yourself and your family vaccinated. The vaccine can't give you the flu but it could make you sick or uncomfortable. The sooner you get the vaccine the better. If you get sick, stay at home!

Vaccinations are available October through May to all employees full of charge. Also, every patient that gets admitted to our hospital during flu season gets offered a flu shot. The goal UMC is striving for is to have at least 90% of all employees vaccinated by year 2020. The hospital is currently at 85%.

ITEM NO. 5 Receive a report on changes to the HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) survey regarding pain management questions; and direct staff accordingly. (For possible action)

DOCUMENT(S) SUBMITTED:

- Inpatient Survey
- Revised HCAHPS Pain Management Questions

DISCUSSION: Haley Hammond, Director of Patient Experience showed the committee a summary of the new pain management questions on the patient

survey. The focus is more on communication about the patient's pain as opposed to just dealing with the pain by use of medication.

A patient questionnaire was also shown; the patient receives this survey about three weeks after they are discharged.

The committee members commented about the length of the survey; it's too long.

Chair Mackay asked if the comments that get written on the surveys are sent to staff and Danita Cohen replied that they are.

FINAL ACTION: None taken

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

DOCUMENT(S) SUBMITTED:

- None submitted

DISCUSSION: Ms. Cohen explained that Mr. VanHouweling held his Town Halls last week. She spoke about the garage greetings and other acts of kindness that staff is doing to help staff smile on their way in to work. They are still sending the, "I Caught You Caring" gift cards to the employee's home if they are mentioned in the surveys as going above and beyond for patients.

Rounding has been continuing and just last week Deb's staff and Danita's team rounded with pizza, wings, sandwiches and gift cards to all nursing staff.

A second ICARE4U video was recently filmed and Haley is continuing to do department specific training.

Member Franklin asked what staff is doing to correct employees who are not being consistent with ICARE4U principles.

Deb Fox, CNO responded that if her staff has any complaints, either from patients or other staff, there is coaching done for that employee then further action taken if needed.

Member Franklin commented about the physicians and asked what we do about the physicians who exhibit behaviors that we don't want.

FINAL ACTION: None taken.

ITEM NO. 7 Receive an update on the evaluation of the 2017 Patient Safety Plan and approval of the 2017 Annual Patient Safety Plan. (For possible action)

DOCUMENT(S) SUBMITTED:

- 2017 Patient Safety Plan Evaluation
- 2018 Patient Safety Plan

DISCUSSION: Jennifer Gaca, Associate Administrator, Clinical Quality and Patient Safety, explained that the main purpose is to create a culture of safety. This committee looks for events and trends and identifies any occurrence's that could lead to a patient safety issue.

In 2017 over 6,000 events were reported. UMC had a decrease in sentinel events which are unexpected occurrences like loss of limb or function. (These account for only 1%). UMC had only 17 reportable sentinel occurrences.

The grievance process has been revised and 100% of all grievances that come to UMC get an initial response within one day or less.

A lot of work has been done with law enforcement with a focus on strengthening relationships between the entities and hospital staff.

Another focus of the safety plan was on Heparin administration safety. Meetings were conducted and they found that within the Epic build, the Heparin dose calculator was not working very well. The biggest potential cause for an overdose was a knowledge deficit. Jenny and her team have given this feedback to the Epic team to resolve the issue.

To help lessen the confusion, training with at the elbow support was given as well as enhanced training programs and notes within the orders. Daily huddles are also conducted to remind the nurses about Heparin and appropriate doses. Super users for both day and night shift were assigned so staff can consult with them regarding Heparin questions.

The Safety Plan Evaluation for 2017 for 2018 was shown and Ms. Gaca explained the purpose of this mandated plan.

The OR has historically been lower in reporting and the goal this year is to get more events to be reported out of the OR.

FINAL ACTION TAKEN: A motion was made by member Ellis to approve the 2017 Safety Plan and make a recommendation to the Governing Board to approve. Motion carried by unanimous vote.

ITEM NO. 8 Identify emerging issues to be addressed by staff or by the Clinical Quality and Professional Affairs Committee at future meetings; and direct staff accordingly.

Chair Mackay suggested that the Board certification process be listed on the March 12 HR agenda for review and discussion.

Other items for the next Clinical Quality Meeting agenda that were suggested are:

1. Magnet Status; what is involved and where we stand.
2. The Wellness Center; what it offers to the community.

Danita suggested we have Dr. Cade from the Wellness Center present.

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 4:14 p.m., Chair Mackay adjourned the meeting.

MINTUES PREPARED BY: Terra Lovelin, Administrative Assistant

APPROVED: April 16, 2018