

***University Medical Center of Southern Nevada
UMC Governing Board Clinical Quality and Professional Affairs
June 11, 2018***

UMC ProVidence Conference Room
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
June 11, 2018 3:00 p.m.

The University Medical Center Governing Board Clinical Quality and Professional Affairs Committee met at the location listed above, at the hour of 3:00 p.m. The meeting was called to order at the hour of 3:00 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:

Dr. Donald Mackay, Chair
Renee Franklin (Via phone)
Laura Lopez-Hobbs
Jeff Ellis

Absent:

Barbara Fraser (Excused)

Also Present:

Tony Marinello, Chief Operating Officer
Jennifer Gaca, Associate Administrator, Director of Clinical Safety and PI
Danita Cohen, Chief Experience Officer
Haley Hammond, Director of Patient Experience
Tye Master, Attorney
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 April 16, 2018 (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.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive an overview from Jerry Cade, MD, Director of UMC's Wellness Center, on the history and current state of the UMC Wellness Center and the patients we serve; and direct staff accordingly. (For possible action)

DOCUMENT(S) SUBMITTED:

- HIV/AIDS Services, UMC, August 29, 1985 to Present

DISCUSSION: Dr. Cade presented the history of the Wellness Center and where it is today in the treatment of HIV/AIDS patients.

June 5, 1981 was the beginning of the HIV epidemic in the US.

In December of 1986 the first AIDS Outpatient Clinic opened on 5 North with five patients. On July 5, 1987 a formal HIV inpatient unit opened on 100 South. (UMC now has 2,200 HIV patients and 1,100 Hepatitis C patients.)

In January of 1995 UMC received federal support for the HIV program under Ryan White Part III (now part C). In April of 1999 UMC received additional federal support for the HIV program under Ryan White IV (now Part D).

The annual federal support for UMC's HIV program is now over \$2 million.

In 2010 UMC merged their Hepatitis C treatment program with the HIV program at the Wellness Center.

Dr. Cade explained the importance of prenatal care to mother's with the HIV virus. The current use of at least a three-drug HIV regimen as part of the prenatal care in mothers with the virus has reduced the incidence of maternal-infant transmission to virtually 0%.

Income and other financial contributions through the 340B program were explained.

Member Ellis commented that HIV and AIDS hasn't gotten the media attention like it used to and asked if there was still research being done.

Dr. Cade replied that research continues to be done and discussed at conferences, however, due to the fact that effective drug regimens are now established, it does not get the media attention like it used to.

ITEM NO. 5 Receive an update on ICARE4U. (For possible action)

DOCUMENT(S) SUBMITTED:

- None submitted

DISCUSSION: Danita Cohen provided a summary of what the Experience Team has been doing.

During hospital week the team handed out \$50 Zappos Gift Cards, courtesy of Zappos.

The employee engagement survey just wrapped up and once the results are in, the results will be provided to the Board.

The final edits are being done to the new ICARE video.

Caught You Caring cards have been updated and \$1 Starbucks discount has been added. Also, the cards will be numbered so the team can keep track of what managers and directors who are handing them out.

FINAL ACTION: None taken.

ITEM NO. 6 Receive a report on Leapfrog 2018; and direct staff accordingly. (For possible action)

DOCUMENT(S) SUBMITTED:

- 2018 Leapfrog Changes

DISCUSSION: Jenny Gaca updated the committee on the new survey period that opened on June 1.

The survey is comprised of 200 pages that is divided into 9 sections.

A change in the CPOE section involves a raise in the implementation score from 75% to 85%.

A new section has to do with hospitals and surgeon volumes. They have certain ICD10 procedure codes that they will accept. In those codes UMC has to have physicians with a certain volume in order to say you provide excellent care. They also want to identify that you are doing credentialing of those physicians based on minimum volumes.

Tye Masters, Attorney, added that the current Medical and Dental Staff Bylaws do not impose a defined minimum volume criteria for privileges but include a general requirement that applicants be able to demonstrate clinical competence. The minimum number of procedures that a physician must complete for the applicable privileges is defined by some Departments within the Department's Delineation of Privileges.

The letter grade comes out at the Fall and the highest grade is placed on HCAHPS as a whole. UMC's biggest struggle has been the HCAHPS and the hospital acquired infections.

FINAL ACTION: No action taken.

ITEM NO. 7 Receive a report on Hospital Policies and Procedures; and direct staff accordingly. (For possible action)

DOCUMENT(S) SUBMITTED:

- PowerPoint

DISCUSSION: Ms. Gaca asked the board members their thoughts on their involvement in the approval process regarding hospital policies and the best way to get information to them.

Member Ellis suggested placing the policies on the consent agenda and Dr. Mackay and Member Franklin agreed.

Member Franklin asked if the summary could be on consent and Ms. Gaca replied that they could be.

Ms. Gaca said she will put together a standardized process and convey it to Chair O'Reilly as well.

FINAL ACTION: No Action Taken.

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.

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 3:53 n p.m., Chair Mackay adjourned the meeting.

MINTUES PREPARED BY: Terra Lovelin, Governing Board Secretary

APPROVED: August 13, 2018