

University Medical Center of Southern Nevada
UMC Governing Board Clinical Quality and Professional Affairs
February 10, 2020

UMC ProVidence Conference Room
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
February 10, 2020 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 3:05 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:

Dr. Mackay – Chair
Renee Franklin
Laura Lopez-Hobbs
Jeff Ellis
Barbara Fraser – Ex-Officio

Absent:

None

Also Present:

Patty Scott, Director, Clinical Safety and PI
Deb Fox, Chief Nursing Officer
Tye Masters, Attorney
Beth Rethore, Executive Secretary / Board Secretary
Various Nursing Students from UNLV shadowing Deb Fox for leadership hours

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

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Clinical Quality and Professional Affairs Committee meeting on October 7, 2019 (For possible action)

FINAL ACTION: A motion was made by Member Laura Lopez-Hobbs that the minutes be approved as written. Motion carried by unanimous vote.

ITEM NO. 3 Approval of Agenda (*For possible action*)

FINAL ACTION: A motion was made by Member Laura Lopez-Hobbs that the agenda be approved as recommended. Motion carried by unanimous vote.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive an update and education on current and emerging issues within the area of infection control, prevention and communicable disease from Shabada Asad, MD, Medical Director Infection Diseases, University Medical Center and Associate Professor of Medicine, University of Nevada Las Vegas, School of Medicine. (*For possible action*)

DOCUMENT(S) SUBMITTED:

- Power Point Presentation

DISCUSSION: Dr. Asad presented on the infectious diseases outlined in the attached power point.

ITEM NO. 5 Receive an update on Quality, Safety, and Infection Prevention Program Measures and Performance Improvement activities including approval of organizational policies/procedures; and direct staff accordingly. (*For possible action*)

DOCUMENT(S) SUBMITTED:

- Quality/Safety/Infection/Regulatory Update
- Complaints & Grievances 3rd Quarter 2019
- Regulatory Compliance
- Patient Safety Program

DISCUSSION: Patty Scott summarized the slides in the presentation and updated the members on the included information.

Grievance 3rd Quarter 2019 – Patty Scott reviewed the attached documentation. 23 grievances were received with a total of 26 concerns. This is a 32% decrease in grievance reports received compared to 2nd Quarter 2019. Care Team Concerns accounted for the most of the grievances at 69% of reported concerns.

There were 2 contracts evaluated and approved since last meeting.

We had one accreditation survey, The American College of Cardiology for our Chest Pain program. Survey went very well; surveyor will recommend approval of UMC as a designated Chest Pain Center. The Stroke Survey should take place sometime in March and we are also preparing for the Joint Commission Survey which TJC has to complete by June 16, 2020.

Patient Safety- State Reported Sentinel Events for 4th Quarter 2019 – There were 5 events that required reporting. 4 falls with injury and 1 wrong side procedure. All cases reported within required State timeframes. There were RCA with actions taken on all cases.

Patty Scott presented an over view of Safety Culture and Just Culture.

FINAL ACTION TAKEN: The Board would like more information on the Quick Care & Urgent Care Grievances. Would like to know if each location is doing better each quarter. Patty Scott will report this data at the next meeting.

ITEM NO. 6 Approve the UMC Policies and Procedures Committee's activities for the period of November 22, 2019 and January 22, 2020 including, the creation, revision or retirement of UMC policies and procedures and take any action deemed appropriate.

DOCUMENT(S) SUBMITTED:

- Policy & Procedure Memo
- List of Retired & Archived Policies

DISCUSSION: Policy & Procedure Approval – A total of 42 Policies & Procedures were approved, 25 were retired or archived from November 2019 through January 2020. All were approved through the Hospital Policy & Procedure Committee and Medical Executive Committee.

FINAL ACTION TAKEN: A motion was made by Member Renee Franklin to recommend approval of the UMC Policy and Procedures Committee's activities for the period of November 2019 to January 2020 and recommend approval of the UMC Quality and Patient Safety Committee's annual evaluation of UMC patient care and service contracts, as measured against established performance standards. Motion carried by unanimous vote.

ITEM NO. 7 Identify emerging issues to be addressed by staff or by the Clinical Quality and Professional Affairs Committee at future meetings and direct staff accordingly.

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 4:01 p.m., Chair Mackay adjourned the meeting.

MINTUES PREPARED BY: Beth Rethore, Governing Board Secretary

APPROVED: Approved June 8, 2020