

Quality Committee Meeting
Wednesday, September 14, 2016 (12 noon)

Meeting called by:	Kerns	Type of meeting:	BOD Committee
		Board Clerk:	Valerie Lakey
Attendees:	Mike Kerns, Committee Chair, Board Member Beatriz Vasquez, Board Member Louis Ward, CEO	AJ Weinhold, MD, Chief of Staff Sherry Wilson, CNO, Quality Designee Laura Dolman-Byer, Community Member Jack Hathaway, Director of Quality	
Please bring:	Agenda & Attachments		

----- Agenda Topics -----

Meeting Called to Order		Kerns	
Requests from audience to speak to issues/agenda items		Kerns	
Approval of Minutes – July 13, 2016 (Attachment)	A	Kerns	Action
Departmental Reports (Volunteer Services, Pharmacy, Dietary, Maintenance, Personnel, Purchasing) <ul style="list-style-type: none"> Report on quality data Report on quality issues and/or quality projects 	B	Spalding, Earnest, Garcia, Burks, Mee, Sweet	Report
Quarterly Reports <ul style="list-style-type: none"> Compliance 			Reports
Standing Reports: Monthly— <ul style="list-style-type: none"> SNF Events/Survey Administrative Report Quality – Performance Improvement Infection Control PRIME 		Wilson Ward Hathaway Lee Staff	Report Report Report Report Report
Closed Session Announcement, Government Code 54962, Medical Staff: <ul style="list-style-type: none"> Chief of Staff Report (Health & Safety Code §32155) AHP Reappointment Darla Schmunk, NP 		Weinhold, Wilson, Overton	Reports/Action
Reconvened to Open Session – Report Action(s)		Kerns	
Announcements: Next meeting: Wednesday, September 14, 2016 – Fall River			
Adjournment		Kerns	

Posted
08/11/16

**MAYERS MEMORIAL HOSPITAL DISTRICT
QUALITY COMMITTEE MEETING
MINUTES – AUGUST 17, 2016**

DRAFT Attachment A

QC Attendance

Mike Kerns, Board Chair
Louis Ward
Beatriz Vasquez, PhD, Committee
Laura Dolman-Beyer
Sherry Wilson
Theresa Overton
Jack Hathaway

Other Staff Present

Shelley Lee – By Phone
Chris Hall
Valerie Lakey

Absent

(These minutes are not intended to be a verbatim transcription of the proceedings and discussions associated with the business of the board's agenda; rather, what follows is a summary of the order of business and general nature of testimony, deliberations and action taken.)

SUBJECT	DISCUSSION	
CALL TO ORDER	The meeting was called to order at 12:08 pm by Kerns in Fall River Mills	
Public Request to Speak	None	
Opening Remarks by Chairman Kerns	None	
Minutes	Minutes from the July 13, 2016 quality committee meeting were approved. M/S/C (Lakey, Ward). All Approved	Approved
Department Reports	<p>SNF – Sherry Wilson – We are going to be implementing the Falling Star program by next week. We had our first quality care meeting last month. Dr. Watson is a part of that team. Working with Jack Hathaway regarding quality issues in LTC and comparisons with other facilities.</p> <p>Lab, Chris Hall – Staff has been catching up on EHR information. And catching up from MVHC Wellness week. Despite technology issues – things went well with the Wellness Week draws. The 2015 antibiogram is completed. We have a CLS from Nebraska working on getting California license. She is working on 2016 antibiogram in the mean time. Last fall we had issues with our old analyzer. This spring it failed again – we currently cannot do ammonia. Temperature could be a factor on what is going on with the analyzer. We have technical consultant coming to look. We will have to pass 2 more proficiencies –and should be okay by the end of the year.</p> <p>Lab does proficiencies to stay up on quality. Kerns would like to have information to take public. Kerns asked Hall to stop back and report next month on this issue. ER Specimen issue – things are going better – 98% compliance. Mislabeling issue returned again after getting better – but DON has helped in solving issue again. There was a big mislabeling from the ER.</p>	Reports

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	<p>Reports – we have been having difficulties with faxes between MVHC. It works off and on. We need to find a solution.</p> <p>Finance, Travis Lakey –Quality issues related to EHR being down and financial reports. Cash collections and charge captures. Working on an insurance claim – loss of revenue due to the downtime.</p> <p>IGT money will go out in September – but it will come back in during October/November.</p> <p>Volunteer Services, Barbara Spalding – Move to September</p>	
<p>Quarterly Reports</p>	<p>Patient Safety/CMS Core Measures, Jack Hathaway – (see attached) Tracking of only ACUTE or ACUTE and ER. Hathaway reviewed the Healthstream Dashboard. We have to have a certain number of surveys per quarter or year – to be on the hospital compare. Hathaway is working with Tahoe Forest and is planning a visit.</p>	<p>Reports</p>
<p>Standing Reports</p>	<p>SNF – Resident accident at annex. It happened in the smoking area, the wheelchair was on a slope, it rolled and hit the bench. The CNA was getting the apron when the wheelchair rolled. The Resident hit the bench and received a scratch. State was here yesterday, as we reported the incident. We will get a deficiency, because wheels should have been locked. Potentially the survey will be next week. There was a video of the incident which was useful.</p> <p>Administration, Louis Ward – Through the HER downtime, Ward noted that he was proud of staff. It was stressful, but everyone did a great job getting through it and getting it back up and going. As far as prevention and keeping this from happening again; we have purchased a new server and will move the existing server to Burney. We bought software which will move data from here to Burney continually.</p> <p>Meeting with Hathaway regularly to formulate a vision and plan for Quality.</p> <p>Replacing furniture in OP waiting room. Clean furniture in that room – the current furniture will be placed in the Annex for Family visiting room.</p> <p>Working with Ryan Harris on a SNF renovation in FRM for the winter.</p> <p>Waiting on USDA to approve our selection of Design-Build Contractor</p> <p>Community Informational meeting on OB – looking at format, time, place,</p>	<p>Reports</p>

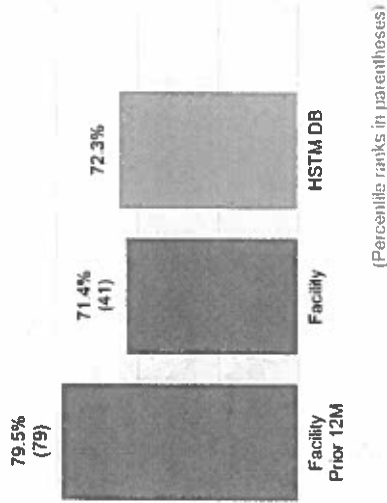
**MAYERS MEMORIAL HOSPITAL DISTRICT
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	<p>etc.</p> <p>Infection Control, Shelley Lee – Changes have been made to Lee’s report form to follow mock survey recommendations. (Report was sent to committee members) Hand hygiene has improved since a downturn in April. One TB patient – negative pressure room was set up perfectly. Kerns asked about ER infections – one with an asterisk was acquired hospital post-op. Influenza vaccine summary for employees – 86% compliance. Sonya Fitzhugh and Shelley Lee are sharing a teaching a CNA class – 4 students.</p> <p>PRIME, Jack Hathaway – New template for reporting using SMART goals, looking at patient pool and where they have come from. Breaking down milestones. We have a project liaison.</p>	
Policies and Procedures	Tabled	Action
Closed Session	No actions taken	
Announcements;	Next meeting: Wednesday, September 14, 2016 in Fall River Mills	
Adjournment	Meeting adjourned 1:35 pm	

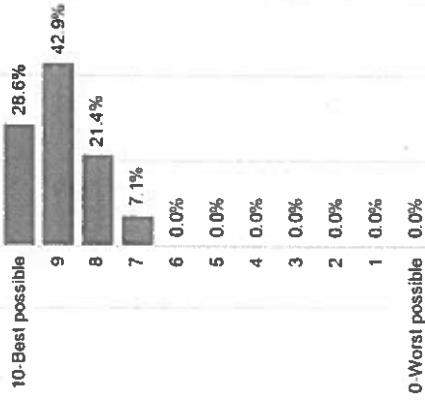
Minutes By: Valerie Lakey

Hospital - Overall Rating

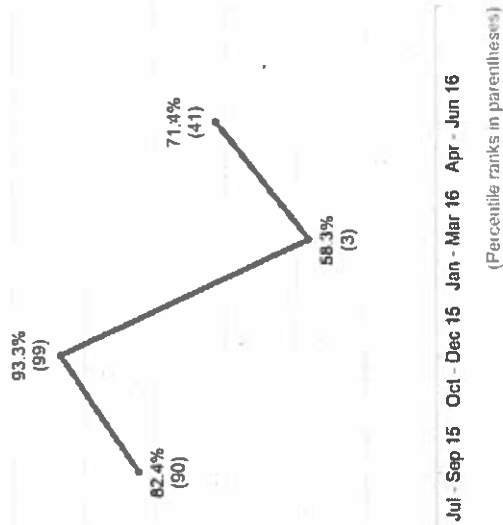
Performance Comparisons



Response Distribution

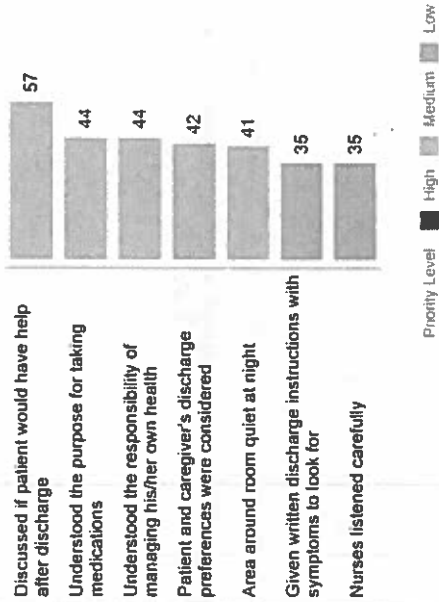


Performance Over Time

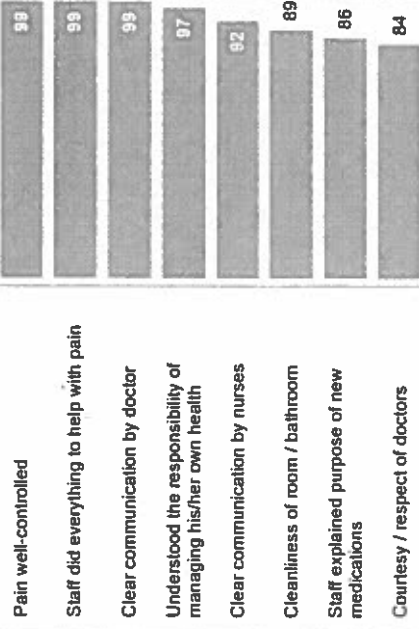


Top Priorities (Priority Index Score)

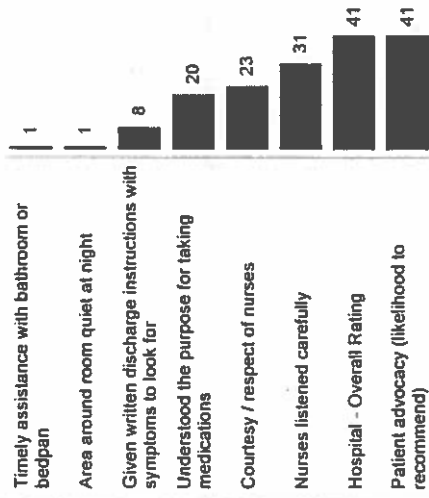
7/1/2015 - 6/30/2016



Top Performers (Percentile Rank)



Bottom Performers (Percentile Rank)



Report Summary

Survey Type	Patient Insights - Inpatient
Facilities	Mayers Memorial Hospital (System)
Report Dates/Data Collection	Apr - Jun 16 Active
Reporting Group	Mayers Memorial Hospital (System) - Mayers Memorial Hospital
Note	Patient Insights - Inpatient: This report has been produced by HealthStream and does not represent official HCAHPS results, which are published on the Hospital Compare Web site

Priority Analysis



Mayers Memorial Hospital (System)

Mayers Memorial Hospital

Patient Insights - Inpatient
Patients Discharged 10/1/2015 - 9/30/2016

Question	Adjusted N	Correlation	Your Top Box	HSTM DB Top Box	Percentile Rank	Previous 12-Month Your Top Box	Trend Your Top Box	Priority Level	Priority Index
Discussed if patient would have help after discharge	41	0.27	80.5%	86.2%	11	93.3%	-12.8%	Medium	57
Understood the responsibility of managing his/her own health	42	0.37	57.1%	56.4%	56	62.5%	-5.4%	Medium	49
Patient and caregiver's discharge preferences were considered	41	0.36	48.8%	46.7%	64	56.3%	-7.5%	Medium	46
Area around room quiet at night	42	0.13	50.0%	67.9%	1	58.8%	-8.8%	Medium	45
Understood the purpose for taking medications	35	0.34	62.9%	61.0%	65	64.3%	-1.4%	Medium	43
Given written discharge instructions with symptoms to look for	41	0.03	80.5%	91.4%	1	93.3%	-12.8%	Low	39
Nurses listened carefully	42	0.12	81.0%	79.8%	49	87.5%	-6.5%	Low	37
Courtesy / respect of nurses	42	0.15	90.5%	87.6%	68	100.0%	-9.5%	Low	35
Timely response to call button	33	0.15	72.7%	64.2%	73	80.0%	-7.3%	Low	31
Clear communication by doctor	42	0.07	83.3%	77.8%	77	94.1%	-10.8%	Low	26
Clear communication by nurses	41	0.25	87.8%	77.8%	96	76.5%	11.3%	Low	22
Doctors listened carefully	42	0.09	90.5%	80.9%	92	100.0%	-9.5%	Low	22
Courtesy / respect of doctors	42	0.14	95.2%	87.9%	93	94.1%	1.1%	Low	20
Cleanliness of room / bathroom	42	0.02	85.7%	74.8%	89	70.6%	15.1%	Low	12
*Patient advocacy (likelihood to recommend)	41	0.15	80.5%	74.1%	77	81.3%	-0.8%	--	--
*Hospital - Overall Rating	41	1.00	75.6%	72.3%	61	82.4%	-6.7%	--	--
Pain well-controlled	24	--	83.3%	67.6%	99	54.5%	28.6%	--	--
Staff did everything to help with pain	24	--	100.0%	80.9%	99	72.7%	27.3%	--	--
Staff explained purpose of new medications	19	--	89.5%	79.8%	96	100.0%	-10.5%	--	--
Staff clearly described side effects of new medications	19	--	73.7%	54.5%	98	57.1%	16.5%	--	--

Priority Analysis



Mayers Memorial Hospital (System)
Timely assistance with bathroom or bedpan

Patient Insights - Inpatient
Patients Discharged 10/1/2015 - 9/30/2016
66 100.0% -22.2%

16

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77.8%

73.5%

66

100.0%

-22.2%

Survey Type

Patient Insights - Inpatient

Facilities

Mayers Memorial Hospital

Filters

No Filters

Report Dates / Data Collection

Patients Discharged 10/1/2015 - 9/30/2016 Active

Correlation

Hospital - Overall Rating

Reporting Group

Mayers Memorial Hospital (System) - Mayers Memorial Hospital

Notes

Patient Insights - Inpatient: This report has been produced by HealthStream and does not represent official HCAHPS results which are published on the Hospital Compare Web site

*Outcome questions do not have a Priority Index