

MAYERS MEMORIAL
HOSPITAL DISTRICT

Quality Committee Meeting
Monday, October 24, 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 – September 14, 2016 (Attachment)	A	Kerns	Action
Departmental Reports (Environmental Services, Imaging, Marketing) <ul style="list-style-type: none"> Report on quality data Report on quality issues and/or quality projects 		Rodriguez, Dendauw & Worthington, Lakey	Report
Quarterly Reports <ul style="list-style-type: none"> Safety Workers Comp 		V. Lakey Mee	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
NEW BUSINESS: <ul style="list-style-type: none"> ➤ Grounds Maintenance ➤ Policies & Procedures (PDF Attached) <p><u>Document</u></p> <ul style="list-style-type: none"> ABUSE RESIDENT, SNF Approved Organization Chart Consent, Informed Patient DEPARTMENTAL QI REPORTING FORM MMH56 Drug Supply Chain Security Act Compliance Plan FOCUS-PDCA-handFOCUS-PDCA-handout2... History and Physical Responsibility on Patients Admitted thru Emergency Dept Procedure for Hospital Census Alert 1 Alert 2 IC Brochure MMH456 Identification, Patient Conducting Investigation Guidelines with Investigation Tool Form SNF MMH314 Medical Management Conflict of Pt. Care Guidelines for Staff 	<u>Page</u>		<i>ACTION ITEM</i>
		1-6	
		7	
		8-9	
		10	
		11-12	
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		14-15	
		16-20	
		21-22	
		23-24	
		25-26	
		27-30	
		31-32	

<ul style="list-style-type: none"> • Nursing Home Residents Rights • Pathology Tissue Review • Post Fall Assessment and Documentation with Care Plan - Fall With Injury MMH130P • Post Fall Huddle Packet MMH559 • SKIN EVALUATION AND ASSESSMENT MMH128 • Neuro Check Sheet MMH154 • FALL RISK ASSESSMENT Form MMH186 • Proctorship Program - Non-Surgical MMH528 • Resident and Non-Resident Patients • Sedation and Analgesia • Unit Cleaning 	<p>33-70 71-72</p> <p>73-74 75 76-79</p> <p>80 81 82 83 84 85-94 95-98</p>		
<p>P & P Quarterly Summary – Approval</p>	<p>PDF</p>		<p>ACTION ITEM</p>
<p>Closed Session Announcement, Government Code 54962, Medical Staff:</p> <ul style="list-style-type: none"> • Chief of Staff Report (Health & Safety Code §32155) <p>Status change Provisional to Active: Jose Barrios, MD</p> <p>Amend privileges to exclude the Obstetric Core: Tom Watson, MD A. J. Weinhold, MD Jose Barrios, MD Dan Dahle, MD</p>		<p>Weinhold, Wilson, Overton</p>	<p>Reports/Action</p>
<p>Reconvened to Open Session – Report Action(s)</p>		<p>Kerns</p>	
<p>Announcements: Next meeting: Wednesday, November 16, 2016 – Fall River</p>			
<p>Adjournment</p>		<p>Kerns</p>	

Posted
10/19/2016

**MAYERS MEMORIAL HOSPITAL DISTRICT
QUALITY COMMITTEE MEETING
MINUTES – SEPTEMBER 14, 2016**

DRAFT Attachment A

OC Attendance

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

Other Staff Present

Susan Garcia
Steve Sweet
Dave Burks
Keith Earnest
Libby Mee
Barbara Spalding
Jessica Stadem
Valerie Lakey

Absent

Louis Ward – at conference

(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 August 17, 2016 quality committee meeting were approved. M/S/C (Vasquez, Hathaway). All Approved	Approved
Department Reports	<p>Volunteer Services, Barbara Spalding – Spalding reported last time on the volunteer application process, some volunteers in SNF were not being processed. That has been remedied. There are a few that need to be completed. Wilson will check on the law requirements of volunteer background check. Volunteers are not covered under Workers Comp. Changes will be made to handbook. Volunteers need to wear name badges when in facility. Some have not received badges. Barb will get a list to Jessica. Policies and procedures have been replaced and upgraded. Goals – using volunteers to help with surveys. Potentially grandfather volunteers that have been here a longer amount of time and not have them go back and do all of the paperwork. Kerns noted that the store looks great. The store is doing well.</p> <p>Pharmacy, Keith Earnest – (Power Point – Exhibit A) Pharmacy Access Afterhours was the focus of Earnest's presentation. A lot of pharmacy access is for ER hold patients. Vasquez had questions about the Pyxis machine and how it works.</p> <p>Dietary, Susan Garcia – Update on the McConnell grant. Burney and Fall River – new furniture and tables. Communication board and display case. Outside tables and chairs. Need to finish the decorations. Everything has been purchased. Menu display monitor. Changed the way</p>	Reports

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	<p>food is purchased. Using containers – example (small and large salads, etc) Applied for Driscoll grant – employee education – trying for 20 Serve Safe certificates for employees and one Certified Dietary Manager (CDM)course.</p> <p>Maintenance, Dave Burks – (Exhibit B)Worked with dietary to fix Burney annex water damage. Plumbing in drain pipes – cast plumbing – have replaced about 70% under the building and more in the walls. Nurses’ station 3 has been renovated as well as the nurses’ station in Burney. Will be renovating SNF area this winter. Thrift store exterior will be painted soon.</p> <p>Personnel, Libby Mee – (Exhibit C) Focus on recruiting. Will be working on SNF side. Working with Shasta College on CNA program. Completed Master’s Certificate. Applying principles learned in the program. Quality is implemented in the new hire process. Looking at turnover ratio. Will be able to measure – working with Jack. Working on wage scale, job descriptions. Will be doing an employee satisfaction survey will go out Sept 23rd. Working on training calendar.</p> <p>Purchasing – Steve Sweet – New restroom deodorizes. Six weeks into FY17 and have issued 427 purchase orders for a little over \$399,000. Grants - \$29,000 foundation. Capital expenditures - \$131,000. Helped with Pyxis setup.</p>	
<p>Quarterly Reports</p>	<p>Compliance - Move to October</p>	<p>Reports</p>
<p>Standing Reports</p>	<p>SNF – Mock survey results were sent out. There was good feedback. Worked on things that could be fixed immediately, then charts were reviewed. A few other specific areas were addressed. There is a new report Wilson is looking forward to sharing. Kerns asked about visiting another facility. It will happen after the survey.</p> <p>Administration, Louis Ward – no report (at Wipfli Conference)</p> <p>Infection Control, Shelley Lee - Absent</p> <p>PRIME, Jack Hathaway – Reporting platform is up and live. We have access – it is due September 30th. We are looking at how we are going to capture the group. Million Hearts – 30 patients 2 times per year. Antimicrobial 30 patients - 2 timers per year. Need to be Medical/Partnership patients. Our skilled Nursing Patients count. Teamed up with Northern Inyo – Reports for McKesson that are ready for PRIME. We may have access to those reports</p> <p>Quality, Jack Hathaway - Working on the new MMHD QIP – working together with the multiple departments. Met yesterday for the first time.</p>	<p>Reports</p>

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	Developing and external reporting chart. Will be putting up a Quality tracking board in the board rooms. Because of volume sometimes the good work we do is unrecognized. Nothing we do is insignificant, but becomes statistically insignificant. Would like to have the 5-7 quality indicators to track and will post publicly on the website. Working with Tahoe Forest.	
		Action
Closed Session	Darla Schmunk (Vasquez, Kerns) Approved	
Announcements;	Next meeting: Wednesday, October 12, 2016 in Fall River Mills	
Adjournment	Meeting adjourned 1:35 pm	

Minutes By: Valerie Lakey

**PHARMACY ACCESS
AFTERHOURS
FOCUS-PDCA**

Quality Improvement Process

Presentation to Quality Improvement
Committee

September 14, 2016

**FIND OPPORTUNITY FOR
IMPROVEMENT**

- Nursing access to the pharmacy after hours was identified as a potential for risk of dispensing errors by Nursing and Pharmacy Administration.
- ▣ Mock survey or identified this process as a high risk area.

ORGANIZE A TEAM

- ▣ Team consisted of:
 - Keith Farnest, Pharm D, Director of Pharmacy
 - Theresa Overton, RN, Director of Nursing
 - Chris Broadway, IT Manager

CLARIFY THE PROCESS

- ▣ Current policy reviewed.
- ▣ Current forms reviewed.
- ▣ Adherence to current policy reviewed.

UNCOVER/VERIFY ROOT CAUSES

- ☐ Lack of inservice
- ☐ Old policy
- ☐ Technology

SELECT THE IMPROVEMENT

- ☐ Revise Policy
- ☐ Revise Forms
- ☐ Implement remote video verification
- ☐ Inservice RN staff

Revised Policy/Forms

- ☐ Key points
 - Helpful hints for locating medications
 - Leave a second dose next to the sign out log
 - Requires Pharmacy competencies and inservice prior to accessing pharmacy.
 - Remote Video Verification

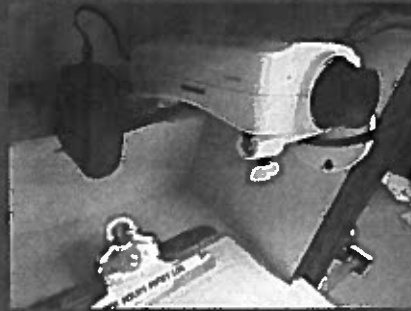
Original Form

Drug/Supply	Patient Name	Nurse Signature
1-10-1011 Famotidine	[Handwritten]	[Handwritten Signature]
1-10-1011 Flexonid	[Handwritten]	[Handwritten Signature]
1-10-1011 Vit B-12	[Handwritten]	[Handwritten Signature]
1-10-1011 Cath Flo	[Handwritten]	[Handwritten Signature]
1-10-1011 Requir	[Handwritten]	[Handwritten Signature]
1-10-1011 [Handwritten]	[Handwritten]	[Handwritten Signature]
1-10-1011 Foral	[Handwritten]	[Handwritten Signature]
1-10-1011 [Handwritten]	[Handwritten]	[Handwritten Signature]
1-10-1011 [Handwritten]	[Handwritten]	[Handwritten Signature]
1-10-1011 [Handwritten]	[Handwritten]	[Handwritten Signature]
1-10-1011 [Handwritten]	[Handwritten]	[Handwritten Signature]
1-10-1011 [Handwritten]	[Handwritten]	[Handwritten Signature]
1-10-1011 [Handwritten]	[Handwritten]	[Handwritten Signature]
1-10-1011 [Handwritten]	[Handwritten]	[Handwritten Signature]

Revised Form

PHARMACY AFTER HOURS ENTRY LOG					
Photo 2" Area here for nurse bottle	Day	Supply	Phone Name	Phone Number	Notes

Remote Video Verification



Remote Video Verification

- Nurse calls Remote Solutions from pharmacy and camera is activated.
- Pharmacist at Remote Solutions verifies that the medication being removed is correct by checking it against the order.
- Pharmacist take a screen shot of the removed medications for our records assuring that the check to place.

Video Capture



Inservice/Competancies

- ☐ Review policy and answer questions
- ☐ In pharmacy scavenger hunt for various medications
- ☐ Live practice with camera

Current Status

- ☐ Log filled out completely: 100%
- ☐ Second dose left: Good compliance but Labor Day weekend was 0%
- ☐ Video verification: Spotty, need to survey nurses as to why compliance is poor
 - Possible factors: time, lack of understanding of process, not seen as required

Plans to reduce need to access pharmacy in the future

- ☐ Pyxis Upgrade
- ☐ Will show if item is in another Pyxis machine.
- ☐ Will be able to access another Pyxis machine without override.

Mayers Memorial Hospital District

Quality Committee September 14, 2016

(Engineering Department)

Engineering, (Maintenance) is a full service department providing a safe, clean and comfortable environment to residents, patients, staff and visitors that use our facilities. We abide by Federal, State and Life & safety Regulations. We are available 24 hrs a day 7 days a week for repairs and services. Our department provides a courier service twice a day from Fall River Mills to Burney for medication, laboratory mail and supply transport. The engineering department manages the trash disposal for our facilities. Further responsibilities include grounds maintenance and snow removal.

:(F.R.M./ Dietary) The dietary work area including shelving has been repainted with a USDA food and beverage epoxy providing durability and ease of cleaning. F R P vinyl wall covering has been installed in high traffic area`s including walls, food prep stations, and the dishwashing area. The staff and public dining room also received a facelift with new paint, furnishings and equipment.

: (F.M.R./ Nurses Station #3) Nurse's station # 3 has been completely renovated with a new nurse's station, replacing the old, dated work area. Fresh paint and refinished cabinetry have increased the environmental appeal and professionalism appeal of this area serving our out patient needs.

: (F.R.M./ Thrift Store) An extensive amount of energy has gone into the renovation of the Thrift Store. Damaged floor joists, sub flooring, and siding were replaced. New windows, doors and flooring were also added. The project will be complete with a new exterior paint job.

: (F.R.M./ Air Curtains) In many problematic area`s entrance door air curtains have been installed to assist in discouraging flying insects from entering our buildings.

: (Burney Annex/ Dietary) The dietary work area was repainted with a USDA food and beverage epoxy. Extensive water damage was found in the dishwashing room, old sheet rock had to be removed and replaced with new (green, water proof) sheet rock. Cast plumbing in the walls also had to be repaired. The room than received paint and F R P vinyl wall covering to make clean up easier and to protect the newly repaired walls. F R P was also installed in high traffic areas. The staff dining also was repainted and new equipment was installed.

: (Burney Annex/ Main Nurses Station) The main nurses' station was completely renovated by removing the old worn counters and replacing them with new modern work stations. With new paint and cove base this area is pleasantly comfortable and professional for our residents, staff, and visitors to enjoy.

: (Burney Annex/ Patios) Renovations were made to both of our patio areas at the Burney Annex. The areas were made larger and new fencing was installed to provide a safer and more enjoyable outdoors experience for our residents

Respectfully Submitted by David Burks (Maintenance / Manager)

EXHIBIT C

Quality Committee Meeting

Wednesday September 13, 2016

Presented by Libby Mee – Director of Human Resources

Primary efforts have been spent on Recruiting – From 01/01/2016 – 09/03/2016 = 44 new hires

Activities – 1

Admin COO & CQO – 2

Admitting – 1

Computer – 2

Dietary – 7

ER RN – 3

ER EMT – 1

Casual – 2

High School/College Intern – 4

Lab CLS – 1

Medical Records – 1

Acute Care RN - 3

Radiology – 4

Respiratory – 1

SNF LVN – 4

SNF CNA – 6

SNF Ward Clerk - 1

Positions/Departments currently in Hire process

Physical Therapist

Ultrasound Tech

Radiology Tech/Manager

Skilled Nursing CNA (2)

Acute Care RN

ER/Amb Paramedic and EMT

Pharmacy Tech

Admitting Clerk

Dietary

Housekeeper

*Primary recruiting efforts going forward will be in Skilled Nursing

Completion of Masters Certificate through Villanova University

Last course – Six Sigma Healthcare

Define – Measure – Analyze – Improve – Control

Participating in Quality Committee

Work with Jack – Report to QHI on Turnover ratios

In the future will be able to analyze and compare with other companies

Currently working with Operations Team to complete Wage Scale, Annual Evals and Job Descriptions

Will be sending out an Employee Satisfaction Survey with next Payroll

MMHD Training Calendar

Coordinate with Disaster/Safety and Staff Developer

Re evaluating Orientation and Reorientation for current employees as well as registry

