

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

FINAL 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>

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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