QUALITY PROFESSIONAL SERVICES COMMITTEE MEETING Saturday, December 1, 2012

Central Administration Offices Located at Highland Hospital 1411 East 31st Street, Oakland, CA 94602 Barbara L. McElroy, Clerk of the Board (510) 437-8468

MINUTES

THE MEETING WAS CALLED TO ORDER AT 9:07 AM.

ROLL CALL WAS TAKEN AND THE FOLLOWING TRUSTEES WERE PRESENT:

Barry Zorthian, MD, Daniel Boggan, Jr., and Anthony Slimick

NON-VOTING MEMBERS PRESENT:

Taft Bhuket, MD and Joe Walker MD

Barry Zorthian, MD, Chair, provided opening remarks and framed the purpose of the Retreat; she introduced James L. Reinertsen, M.D. as the facilitator for the Retreat.

Dr. Reinertsen began the discussion by asking the attendees what they hoped to learn at the Retreat. The following ideas were presented:

- How to be effective/efficient working on Quality?
- How to sustain motivation to work on Quality institutional level
- What information does committee need?
- What should our aims be? How will senior management support?
- How should the Quality Committee function?
- Best practices for Quality. Focus? Select priorities?
- How to shift culture transparency
- How to harness passion/align?
- How to advance Culture of Safety
- How to maintain urgency?
- How to integrate Quality in all initiatives?
- How to move from committee talk to action?
- What is long term communication plan "market share"?
- How to build teamwork as a cultural attribute?
- How to engage residents?

Dr. Reinertsen then took the group through his presentation *The Board's Role in Clinical Care: Quality, Safety, and Value* highlighting the questions presented and how best to incorporate Quality into the organization.

Some issues discussed by the attendees were:

- Develop Organizational Charts to determine who is doing what in Quality (include titles and phone numbers)
- Develop clean "theory of strategy"
- Review / use / improve agenda for the Quality Professional Services Committee
- Include patient / family on committee
- Integrate Quality to overall strategic plan
- Disseminate dashboard to all staff

Dr. Reinertsen recommended that the committee include a patient story, no more than 3 minutes, at the beginning of each meeting; once a year invite a patient to attend the meeting to share their experience.

Dr. Reinertsen discussed how best practices are implemented by the Best Boards:

- 1. Adopt bold, specific, system-level strategic aims
- 2. Oversee system-level measures of progress toward those aims, using a "strategic dashboard"
- 3. Develop a strong Quality Committee
- 4. Build Will
 - Eliminate the denominator
 - Put a face on the data
 - o Start every meeting with a story
 - o Convert data to names, dates, and events
 - Harness the power of transparency
 - Face up to the difficult conversations

Quality Committee: Best Practices

- Structure
 - Lay Chair, and majority of lay trustees
 - Charter: recommend and oversee achievement of quality aims
 - Two patient/family representatives
- Process
 - Meaningful conversation not PowerPoint
 - Story, progress toward aims, "off the rails," policy recommendations
 - Report to full Board given by Chair of Committee, not by staff

- Culture
 - Everyone's voice is heard
 - Transparency
 - Patients are the only customer

Also discussed was a "starter kit" for the Board:

The best Quality Committees have a "starter kit" of good questions to ask:

- What would be the right thing to do for our patients?
- Am I the only person who doesn't understand what you just said?
- Does this set of re-credentialing recommendations fully support our mission, aims, and strategies?
- How many patients is that?
- Who is the best in the world at this?
- · Were patients and families involved in making this recommendation?

Public Comments: None

Board of Trustee Remarks: None

ADJOURNMENT: The meeting adjourned at 1:30 PM

Respectfully Submitted,

Barbara L. McElroy Clerk of the Board

APPROVED AS TO FORM:

Reviewed by:

Douglas B. Habig, Esq.,

General Counsel