



ALAMEDA COUNTY MEDICAL CENTER

Highland Campus • Fairmont Campus

John George Psychiatric Pavilion • Ambulatory Healthcare Services

QUALITY PROFESSIONAL SERVICES COMMITTEE MEETING

Thursday, September 20, 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

TAB #1 CLOSED SESSION

OPEN SESSION: THE MEETING WAS CALLED TO ORDER AT 4:55 PM.

ROLL CALL WAS TAKEN AND THE FOLLOWING TRUSTEES WERE PRESENT:

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

Valerie D. Lewis, Esq. was excused.

NON-VOTING MEMBERS PRESENT:

Lyn Berry, MD and Taft Bhuket, MD

TAB #2 ACTION: Approval of Minutes

ACTION: A motion was made, seconded, and approved the Minutes from the June 21, 2012 Quality Professional Services Committee Meeting as presented. Trustee Slimick Abstained from voting as he was not present at the June 21, 2012 QPSC meeting.

MOTION: Trustee Boggan

SECOND: Trustee Slimick

AYES: Trustees Zorthian and Boggan

NAYS: None

ABSTAIN: Trustee Slimick

ABSENT: Trustees Lewis

TAB #8 INFORMATION: Issue Tracking & Follow-up

Barry Zorthian, MD, Chair, Quality Professional Services Committee, moved TAB #8 to the top of the meeting for discussion.

The committee discussed the focus of the Quality Professional Services Committee going forward. Dr. Zorthian shared ideas that were presented at a recent NAPH conference in Houston. Some ideas included patient stories to be shared at committee meetings as well as the committee members participating in reality rounds.

A half day retreat was suggested to discuss best practices and to have a professional facilitator preside. Wright Lassiter, III, Chief Executive Officer, will reach out to Dr. Jim Reinertsen to see if he is available to facilitate.

Dr. Zorthian shared *The Summit Series* with the committee, a learning tool provided at the Houston NAPH conference. More information will be forthcoming on the utilization of the website *ORBoardworks*.

TAB #3 ACTION: HRT – Phase II: Quest for Zero – Suggested New Targets

Kathleen Clanon, MD, Interim Chief Medical Officer, presented Phase II of the Harm Reduction Team initiative Quest for Zero and the possible approaches that could be taken. 1) Quest to Zero, journey to zero as an initiative where the target is zero episodes of harm and the time period is open; or 2) Set a fixed time period and percent target of reduction of harm.

The committee discussed the two options looking at pros and cons. No action was taken; the committee requested the Quality department bring back a specific plan for approval focused on the recommendations at this meeting.

TAB #4 ACTION: Medical Staff / Organizational Policies and Procedures

Kerin Bashaw, MPH, RN, VP, Quality, presented the following Medical Staff Policies and Procedures for approval by the Committee:

- Environment of Care Rounds
- Criteria for Prioritizing Patients
- Women's Clinic Pre-Natal Vitamins
- Nurse Triage for Women's Clinic
- Essential Supplies 96 Hours

- Guidelines for ER Disposition of Traumatic Activation Patients Without Injury
- Physician Notification and Penalty
- Diabetes/Hypertension/Hyperlipidemia Therapy Management Protocol for Clinical Pharmacists

Typographical errors were identified in some policies; Dr. Zorthian will provide corrections to the Clerk of the Board and Quality staff.

The policy ***Criteria for Prioritizing Patients*** will require some editing; Ms. Bashaw will provide changes to the Clerk of the Board and Quality staff.

ACTION: *A motion was made, seconded, and unanimously approved to adopt the Organizational Policies and Procedures as presented with minor revisions identified.*

MOTION: *Trustee Boggan*

SECOND: *Trustee Slimick*

AYES: *Trustees Zorthian, Boggan, and Slimick*

NAYS: *None*

ABSTAIN: *None*

ABSENT: *Trustees Lewis*

TAB #5 REPORT: Medical Executive Committee

Lyn Berry, MD, Chief of Staff, APMC Medical Staff, presented her report.

The annual meeting will be held on the evening of September 24, 2012.

The names of the candidates for the Chair of the Department of Internal Medicine have been submitted to Mr. Lassiter for review.

The Maternal Child and Health department has attained a patient satisfaction rating of 70% over a 2 – 3 month period.

Medical staff leadership will be transitioning as of the Annual meeting. Taft Bhuket, MD will be named as Chief of Staff and Joe Walker, MD will be Vice-Chief.

TAB #6 REPORT: Chief Medical Officer

No report was given.

TAB #7 REPORT: VP, Quality

Ms. Bashaw reported that CMS had not arrived as of this meeting. The deadline to correct deficiencies identified in the previous survey is October 16, 2012. It is anticipated that CMS will arrive any day; ACMC staff is ready and prepared for their arrival.

TAB #9 REPORT: Legal Counsel's Report on Action Taken in Closed Session

Douglas B. Habig, General Counsel, reported that in Closed Session the Committee considered confidential peer review matters and approved credentialing.

Public Comment: None.

Board of Trustees Remarks: Evan Seevak, MD announced that a LEAN Kaizen will be held for the Emergency Department on September 21, 2012 at 9:00 am in Classroom B.

ADJOURNMENT: The meeting adjourned at 6:07 pm.

Respectfully Submitted,

Barbara L. McElroy
Clerk of the Board

APPROVED AS TO FORM:

Reviewed by:


Douglas B. Habig, Esq.,
General Counsel