



**QUALITY PROFESSIONAL SERVICES  
COMMITTEE MEETING  
Thursday, July 17, 2014**

**Executive Suite Located at Highland Care Pavilion**  
1411 East 31<sup>st</sup> Street Oakland, CA 94602  
Marla Cox, Clerk of the Board  
(510) 535-7515

**THE MEETING WAS CALLED TO ORDER AT 4:00PM**

**ROLL CALL WAS TAKEN AND THE FOLLOWING TRUSTEES WERE PRESENT:**

Barry Zorthian, MD, Kinkini Banerjee, and Michele Lawrence

Joe DeVries was excused.

Non-Voting Members present: Drs. Taft Bhuket, Emmons Collins, Joe Walker and Steven Rosenthal

**MINUTES**

**(General Counsel Announcement as to purpose of Closed Session)**

**TAB #1 CLOSED SESSION**

**TAB #2 ACTION: Approval of Minutes**

Minutes of the June 19, 2014 Quality Professional Services Committee Meeting.

***ACTION: A motion was made and seconded, and the Committee approved the minutes as corrected of June 19, 2014 Quality Professional Services Committee meeting.***

**TAB #3 ACTION: Approval of Policies and Procedures**

**Alameda Health System Policies**

**Administrative Policies**

- Disclosure of Sensitive Health Information in the Health Information Exchange

**Clinical Policies**

- Exempt and "Gross Only" Specimens

**Medical Staff Policies**

- Credentialing and Privileging of Practitioners
- Introduction of a New Privilege or a New Privilege for a Specific Department or Specialty
- Medical Staff Disruptive or Unprofessional Behavior Review
- Medical Staff Proctoring
- Medical Staff Progressive Discipline Guidelines

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- Moonlighting Practitioners
  - Reappointment Application Levels
  - Sexual Harassment
  - Temporary Privileges

**San Leandro Hospital Policies**

- Antimicrobial Stewardship Policy
- Continuous Peripheral Nerve Block Using the On-Q C-Block Infusion Pump
- Discharging Patients from the Emergency Department
- Pain Assessment and Management
- Patient's Admitted Directly to the ICU from the Operating Room

***ACTION: A motion was made and seconded, and the Committee approved the policies as presented.***

**TAB #4 REPORT: Patient Story**

Kerin Bashaw, VP of Quality deferred the patient to the next QPSC meeting.

**TAB #5 REPORT: LEAN Annual Report**

Varsha Chauhan, Executive Director of the System Transformation Center presented the committee with an FY14 Lean update and FY15 goals. The FY15 goals focus is LEAN certification and Wave training for 56 LEAN change agents; value stream transformation with the ICD-10, Human Resources new employee onboarding, Fairmont Skilled Nursing, John George Psychiatric in-patient and ambulatory primary care services with plans to have one model unit implementation at each campus by October 2014.

**TAB #6 DISCUSSION: Proposed Plan for QPSC**

Kerin Bashaw, VP of Quality presented the committee with a proposed plan for QPSC that focused on flow of information and QPSC's focus; including the use of the consent agenda. Committee discussion ensued.

The plan would include all three medical staffs reporting through QPSC; in closed sessions they would continue to discuss credentialing reports from all three facilities. The Quality team is currently developing a process to better support the Chiefs of Staff and to streamline the reports that are presented to the committee.

The committee requested more focus/education on population health; harm reduction; better tracking of issues; glossary of standardized abbreviations as well as more education (goals) to inform the committee so they are better prepared to approve large dollar budget requests.

**TAB #7 REPORT: Medical Executive Committee**

Taft Bhuket, MD presented to the committee. We've gotten about a 30% reduction in the actual number of delinquent records. This is a standing issue for discussion and **the entire department shares this** is an active issue. We first reported that in May of this year with 6.5 million dollars outstanding due to missing dictations. In June it was down to 3.4 million; we are now under 870K. This is a medical staff election year; we have 3 positions open and 7 physicians candidates interested.

Steven Rosenthal, MD presented to the committee. Our Emergency Department has been very actively working to improve its services, efficiency and patient flow. They are making great progress. The Department of Medicine presented information on their census, pneumonia and hyperglycemia protocol. Our pharmacy department committee will be introducing new protocols that we hope we will improve our care. We discussed the issue of dealing with stroke patients that come to our hospital and this is something we still struggle with because we are not a stroke center. Committee discussion ensued. Dr. Rosenthal shared his own patient experience at SLH.

Emmons Collins, MD presented to the committee. The majority of our meeting focused on current needs that the executive committee feels have not been addressed previously because of financial constraints at Alameda Hospital. Our ventilators are very old, we are in need of funding for new ventilators, this is a true patient safety concern. Urology is very weak; we are hoping that over the next several months we can start to share expertise from the HGH campus to help us cover our gaps. We also have to divert people from our ER in a similar manner to SLH, not for strokes but for a lot of other things if we don't have the specialty coverage. There was a lot of discussion, there wasn't a whole lot of conclusion but we are hopeful that in working with Dr. Peruzzi we'll be able to get there. We hope to be able to report the progress to this committee in the future. Committee discussion ensued.

**TAB #8 INFORMATION: Issue Tracking & Follow-up**

No discussion.

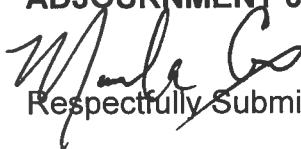
**TAB #9 REPORT: Legal Counsel's Report on Action Taken in Closed Session**

Joel Isaacson, Associate General Counsel reported that in closed session the committee reviewed and approved confidential peer review information and approved credentialing reports from each medical staff.

**Public Comments** - None

**Board of Trustees Remarks** – No remarks

**ADJOURNMENT 6:25 p.m.**

  
Respectfully Submitted,

Marla D. Cox  
Clerk of the Board

APPROVED AS TO FORM:

Reviewed by:

  
Douglas Flabig, Esq.  
General Counsel