



QUALITY PROFESSIONAL SERVICES COMMITTEE MEETING

THURSDAY, JUNE 27, 2019

2:30PM – 5:00PM

Conference Center at Highland Care Pavilion

1411 East 31st Street Oakland, CA 94602

Ronna Jojola Gonsalves, Clerk of the Board

(510) 535-7515

LOCATION:

Open Session: HCP Conference Center

COMMITTEE MEMBERS **

Kinkini Banerjee

Taft Bhuket, MD, *Chair*

Maria Hernandez

Tracy Jensen

NON-VOTING MEMBERS

Chief of Staff – AHS Medical Staff: M. Kelley Bullard, MD

Chief of Staff - AH Medical Staff: Joseph Marzouk, MD

Chief of Staff - SLH Medical Staff: Michael Ingegno, MD

QUALITY PROFESSIONAL SERVICES COMMITTEE MEETING MINUTES

THE MEETING WAS CALLED TO ORDER AT 2:44 PM.

ROLL CALL WAS TAKEN AND THE FOLLOWING TRUSTEES WERE PRESENT: Kinkini Banerjee (arrived at 2:45pm), Taft Bhuket, MD, Maria Hernandez, and Tracy Jensen (arrived at 2:49pm)

ABSENT:

A quorum was not established.

Trustee Bhuket announced that, in lieu of a quorum, agenda item D, Medical Staff Reports, would be heard first.

A. CLOSED SESSION (Estimated 30 minutes)

1. Consideration of Confidential Medical Staff Credentialing Reports

M. Kelley Bullard, MD - AHS Medical Staff

Joseph Marzouk, MD - AH Medical Staff

Michael Ingegno, MD - SLH Medical Staff

2. Conference with Legal Counsel

M. D. Moye, General Counsel

Significant Exposure to Litigation [Accreditation, Risk Management, Patient Safety]

[Government Code Section 54956.9]

Discussion of Matters Constituting Trade Secrets [Government Code Section 54962;
Health & Safety Code Section 101850(ae)(1)]

(Reconvene to Open Session)

Trustee Bhuket announced the Committee would hear agenda item E following the Closed Session.

B. ACTION: Consent Agenda (Estimated 10 minutes)

1. Approval of the Minutes of the May 23, 2019 Quality Professional Services Committee Meeting

2. Approval of Policies and Procedures

Recommendation to the Board of Trustees for approval of the Policies listed below.

System

- Medication Samples
- Medication and Verification Profile Review

Alameda

- 340 B Drug Pricing Program

Highland

- Medication Kits Transport Boxes

Medical Staff, Alameda Health System and Alameda Hospital

- Medical Staff Conflict of Opinion
- Medical Staff Credentialing and Privileging of Practitioners
- Medical Staff Policy for Credentialing Practitioners in the Event of a Disaster
- Introduction of a New Privilege or a New Privilege for a Specific Department or Specialty
- Medical Staff Health Status
- Medical Staff Peer Review
- Medical Staff Professionalism and Conduct
 - Attachment A – Professional Conduct Agreement
 - Attachment B – Professionalism and Conduct Policy Flow Chart

- Attachment C – Professional Misconduct Memo
- Medical Staff Application Levels
- Medical Staff Temporary Privileges

Medical Staff, Alameda Health System

- Facility with Medical Staff Added to Hospital License
- Medical Staff Routine FPPE/Proctoring
- Medical Staff Moonlighting Practitioners

Medical Staff, Alameda Hospital

- Medical Staff FPPE/Proctoring
- Moonlighting Practitioners

3. Approval of Privileges Forms

ACTION: A motion was made and seconded to approve the Consent Agenda. The motion passed.

AYES: Trustees Banerjee, Bhuket, Hernandez, and Jensen

NAYS: None

ABSTENTION: None

END OF CONSENT AGENDA

Trustee Bhuket announced they would adjourn to Closed Session following the Consent Agenda.

C. REPORT/DISCUSSION: QPSC Chair (Estimated 5 minutes)

Taft Bhuket, MD, Chair

1. Article: How Not To Cut Health Care Costs. HBR.

Trustee Bhuket discussed the article beginning on agenda packet page 147.

D. REPORT/DISCUSSION: Medical Staff Reports (Estimated 40 minutes)

M. Kelley Bullard, MD - AHS Medical Staff

Joseph Marzouk, MD - AH Medical Staff

Michael Ingegno, MD - SLH Medical Staff

Dr. Marzouk discussed the report beginning on agenda packet page 193.

Trustee Banerjee arrived at 2:45pm and a quorum was established.

Trustee Jensen arrived at 2:49pm.

Trustee Bhuket asked about the impact of the Alameda Primary Care facility closure. Dr. Marzouk said there was a need for primary care particularly the patients who were uninsured or never had a primary care physician. Dr. Jamaledine said AHP would work to communicate with the patients and AHS would work to reassign the patients in our system, and patients who

were discharged and had no primary care. Mr. Finley said there was still a process for working through the details that would include a notification period. The timing was still unknown.

Trustee Jensen said the issue of the closure came up at the AHCD. She said it was unfortunate as it was a needed service and the community supported the clinic. She asked how many providers were there and what the hours were. Dr. Jamaledine said there was one provider and they struggled to get coverage when that provider was on PTO, but generally the clinic was full time. Mr. Finley said the clinic was run through AHP. There was a need for the clinic and AHS had invested heavily in it to help it succeed. The clinic volume was about 20 visits a month.

Dr. Marzouk said that his top concerns, in order, were the same as last month, patient safety, S*A*P*P*H*I*R*E*, and specialty services at Alameda.

Dr. Bullard discussed the report beginning on agenda packet page 158. Dr. Smith reviewed the report beginning on agenda packet page 159.

Dr. Bullard said that her top concerns were trust, trust, and wellness.

Dr. Ingegno discussed the report beginning on agenda packet page 195.

Trustee Hernandez asked about the payment ratio information discussed by Dr. Ingegno. Mr. Finley said it was the amount AHS collected based off of the charges billed to the payers. The ratio was contingent largely on the contracts and the rates as well as the charges. Mr. Finley discussed reporting collection ratio data and what he felt would be the best process.

Trustee Jensen asked about the administrative process efficiencies related to the payment ratios. Mr. Finley said the data presented was in aggregate of many different services across the board. S*A*P*P*H*I*R*E* would bring efficiencies, but the primary issue was not a lack of efficiency.

Trustee Banerjee asked about when the Acute Care Clinic would move. Mr. Fonseca said the licensing process dictates when they can use the space. There were operational teams working on all these facets including the ratios.

Dr. Ingegno said that his top concerns, in order, were nursing availability, S*A*P*P*H*I*R*E*, and the Medical Staff Merger.

Trustee Bhuket announced that agenda item B would be heard next.

E. REPORT/DISCUSSION: SBU Quality Metric Report, Acute Care (Estimated 15 minutes)

Luis Fonseca, Chief Operating Officer

Janet McInnes, Chief Administrative Officer/Chief Nurse Executive

Teresa Cooper and Ronica Shelton discussed the report beginning on agenda packet page 198.

Trustee Hernandez asked if staff teach back techniques by asking the patient to repeat the instructions and if they used a variety of languages and pictures for patient materials. Staff

stated that they do practice those techniques and were working on providing materials in a wider variety of languages.

Trustee Bhuket asked what items they planned to keep or change on the Acute SBU Dashboard. Dr. Hussain said that once the TNM Dashboards were finalized they would begin work on SBU's.

Ms. Shelton said her top concerns, in order, were budget, SAPPHIRE, and patient experience

Ms. Cooper said her top concerns, in order were staff morale, S*A*P*P*H*I*R*E* and sustaining the surge progress.

Mr. Fonseca reviewed the presentation beginning on agenda packet page 203.

Trustee Bhuket suggested that Mr. Fonseca attend an MEC meeting to work towards clarity regarding bed utilization and coverage at San Leandro Emergency Department.

F. REPORT/DISCUSSION: Status of Throughput Initiatives (Estimated 15 minutes)

Sheila Lyzwa, Vice President – Care Management

Felicia Tornabene MD, Assistant Chief Medical Officer

Janet McInnes, Chief Administrative Officer/Chief Nurse Executive

Sheila Lyzwa spoke regarding the presentation beginning on agenda packet page 212.

Trustee Jensen asked about barriers to placement. Ms. Lyzwa said there were capacity issues and issues with the community's willingness to take the patients.

Trustee Bhuket discussed avoidable days and the \$3500 a day that AHS was losing because of them. He said this was very important measure.

Trustee Banerjee added that the data was important to also show that the homeless issue wasn't the only contributing factor.

Ms. Lyzwa said her top concerns, in order, were barriers to placing patients in the community, staff morale, and S*A*P*P*H*I*R*E*.

G. REPORT/DISCUSSION: Patient Safety and Regulatory Affairs (Estimated 5 minutes)

Tanvir Hussain, MD, Vice President of Quality

Darshan Grewal, Director of Patient Safety

Trustee Bhuket and Dr. Jamaledine discussed the report beginning on agenda packet page 229.

H. ACTION: Approve the 2019-2020 True North Metric Dashboard (Estimated 25 minutes)

Tanvir Hussain, MD, Vice President of Quality

Trustee Hernandez asked if, once S*A*P*P*H*I*R*E* was in place, they could look at this data by ethnicity and gender, etc. every now and then. Mr. Finley said they were creating a report card to include the qualitative and quantitative as well health equity and diversity and inclusion efforts. They were looking at bringing it to the Board twice a year.

Trustee Bhuket asked if there were any reasons to not put avoidable days on the Dashboard. Dr. Hussain said they needed to be mindful of how the data was captured. Mr. Finley said data was added to dashboards to create an improvement measure. He said that setting a target for something like avoidable days that was largely out of their control could lead to frustration. Trustee Bhuket said it would be good to measure so they could manage it.

ACTION: A motion was made and seconded to approve the 2019-2020 True North Metric Dashboard as presented and to include data regarding avoidable days. The motion passed.

AYES: Trustees Banerjee, Bhuket, Hernandez, and Jensen

NAYS: None

ABSTENTION: None

I. REPORT/DISCUSSION: True North Metric Dashboard Review (Estimated 3 minutes)
Tanvir Hussain, MD, Vice President of Quality

J. DISCUSSION: Planning Calendar/Issue Tracking (Estimated 1 minute)
Taft Bhuket, Chair

Trustee Bhuket said going forward they were separating Behavioral Health and Post-Acute.

Trustee Bhuket announced the Committee would hear agenda item C next.

K. REPORT: Legal Counsel's Report on Action Taken in Closed Session (Estimated 1 minute)
M. D. Moye, General Counsel

Mr. Moye reported that the Committee met in Closed Session and considered credentialing reports for each of the medical staffs and approved credentials/privileges for fully qualified practitioners recommended by the medical staffs.

PUBLIC COMMENT - None


TRUSTEE REMARKS - None

ADJOURNMENT: 5:01PM

This is to certify that the foregoing is a true and correct copy of the minutes of the regular meeting of June 27, 2019 as approved by the Quality Professional Services Committee on July 25, 2019:


Romna Jojola Gonsalves
Clerk of the Board

APPROVED AS TO FORM:

Reviewed by: 
M.D. Moye
General Counsel
