



QUALITY PROFESSIONAL SERVICES COMMITTEE MEETING

Thursday, October 24, 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

QUALITY PROFESSIONAL SERVICES COMMITTEE REGULAR MEETING AGENDA

Public Comment Instructions

If you wish to address the Committee, complete a Public Speaker Card and submit it to the Clerk of the Board. The Clerk of the Board is available to assist in completing the form. Speaker cards must be submitted prior to the beginning of the public speaker time for that item. Each speaker will be allotted between one and three minutes to speak, depending on the number of speakers present. Public comment for non agenda items will be heard at the end of the open session.

OPEN SESSION / ROLL CALL

A. CLOSED SESSION (Estimated 40 minutes)

Public comment on Closed Session items may take place prior to the Board adjourning to the Closed Session. An announcement of any action taken during the Closed Session will take place prior to the end of the Open Session.

A1. Consideration of Confidential Medical Staff Credentialing Reports

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

Joseph Marzouk, MD – Chief of Staff, AH Medical Staff

A2. 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)

OPEN SESSION

B. ACTION: Consent Agenda (Estimated 10 minutes)

Public comment on all Consent Agenda items may be heard prior to the Committee's vote. The Committee does not deliberate on Consent Agenda items. Any member of the public or the Committee may request that a Consent Agenda item get pulled from the Consent Agenda for deliberation and to be voted on separately from the Consent Agenda.

B1. Approval of the Minutes of the September 26, 2019 Quality Professional Services Committee Meeting

[Attachment](#)

B2. Approval of Policies and Procedures

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

HGH Hospital Only-

- Anticoagulant therapy in patients undergoing Percutaneous Coronary Intervention
- Bivalirudin as a flush
- Cardiac Stress testing in nuclear medicine
- Criteria for prioritizing Interventional Service Patients
- Use of Echocardiography contrast imaging agents
- Esophagram/Barium Swallow
- Femoral Sheath Removal Arterial/Venous
- Fluoroscopy Sentinel Event
- Heart Alert Activation- Team STEMI
- Implantable Cardiac Device Evaluation/Interrogation
- Insertion of temporary Trans-Venous Pacemaker in Interventional Services
- Interventional FEMO STOP Device Application and Maintenance
- Interventional Services Suite Terminal Cleaning
- Interventional Radiology Embolization Team Activation
- Intra-Aortic Balloon Pump
- Intra-Coronary Nitroglycerine
- Intra-Coronary Nitropusside
- Intradepartmental transfer to and from interventional services

- IV Adenosine for fractional flow reserve for interventional services
- Lumbar Puncture (Spinal Tap)
- Maintaining Radiation Exposure (ALARA)
- Medication Diatrizoate (Gastrografin) Oral contrast solution administration
- Magnetic Resonance Imaging Regulations
- Pacemakers-Temporary Tran-Venous
- Patient Status for Interventional Services Patient
- Perclose Proglide Suture Mediated Closure System
- Radial Sheath Removal
- Trans-Cutaneous External Pacing
- Transthoracic Echocardiography
- Treatment of Chest Pain and NSTEMI
- Upper Gastro Intestine with and without small bowel follow through
- Use of echocardiography with agitated saline contrast
- Provider and Periprocedural care requirements for cardiac cathlab procedures
- Same Day Discharge in patients undergoing Percutaneous Coronary Intervention

John George Psychiatry Hospital Policies Only:

- Suicide Screening and Assessment
- John George Psychiatry Emergency Response Policy

AHS SYSTEM:

- Assessment/Reassessment and Care Planning
- Establishing Code Status and Level of Life Sustaining Treatments
- EPIC Downtime Policy
- Hand Off Communication Guidelines
- Patient Belongings/Valuables Property Policy
- Medication: Renal Dosing Pharmacy Adjustment
- Restraint and Seclusion in Acute Care
- Rapid Response Team
- School of Nursing Para Professional Affiliation
- HR Section 4.00-Policy 4.21 Annual Competencies
- Adverse Reaction to Contrast Media
- Critical Results reporting for cardiology
- Pregnant Patients and IV Contrast Administration
- Safely Opening Packages
- Scope of Services-Cardiovascular Services
- Scope of services- Imaging Services
- Screening Women of Child Bearing Age prior to imaging
- Transesophageal Echo Procedure
- Approval of Quality Assurance and Performance Improvement Plan FY 20

[Attachment](#)**B3. Approval of Privileges Forms**

M. Kelley Bullard, MD, AHS Chief of Staff

Joseph Marzouk, MD, AH Chief of Staff

[Attachment](#)

Recommendation: Motion to Approve

END OF CONSENT AGENDA

Public comment on each Report/Discussion item may take place after the staff presentation and prior to Committee discussion. The Committee does not vote on Report/Discussion items.

C. REPORT/DISCUSSION: QPSC Chair (Estimated 10 minutes)

Taft Bhuket, MD, Chair

C1. The Normalization of Deviance in Healthcare Delivery. Banja, John. 2009.

C2. Why ‘Deviance’ Becomes the New Normal in Health Care Safety Practices. Betsy Lehman Center for Patient Safety. 2016.

[Attachment](#)

D. REPORT/DISCUSSION: Medical Staff Reports (Estimated 30 minutes)

- *AHS Medical Staff: M. Kelley Bullard, MD, Chief of Staff*
Michael Ingegno, MD - SLH Leadership Committee Chair
- *AH Medical Staff: Joseph Marzouk, MD Chief of Staff*

[Attachment](#)

E. REPORT/DISCUSSION: SBU Quality Metric Report, Acute Care (Estimated 25 minutes)

Luis Fonseca, Chief Operating Officer
Janet McInnes, Chief Administrative Officer/Chief Nurse Executive

[Attachment](#)

F. REPORT/DISCUSSION: Wellness Task Force Report (Estimated 10 minutes)

Lisa Rosequist, PhD, Director of Provider Wellness
Gene Hern, MD, Immediate Past Chief of Staff

[Attachment](#)

G. REPORT/DISCUSSION: Patient Safety and Regulatory Affairs (Estimated 10 minutes)

Tanvir Hussain, MD, Vice President of Quality
Darshan Grewal, Director of Patient Safety

[Attachment](#)

H. REPORT/DISCUSSION: True North Metric Dashboard Review (Estimated 8 minutes)

Tanvir Hussain, MD, Vice President of Quality

[Attachment](#)

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

[Attachment](#)

- J. **REPORT: Legal Counsel’s Report on Action Taken in Closed Session** (Estimated 1 minute)
M. D. Moye, General Counsel

PUBLIC COMMENT: Non-Agenda Items

TRUSTEE REMARKS

ADJOURNMENT

Our Mission

Caring, Healing, Teaching, Serving All

Strategic Vision

AHS will be recognized as a world-class patient and family centered system of care that promotes wellness, eliminates disparities and optimizes the health of our diverse communities.

Values

Compassion, Commitment, Teamwork, Excellence, Integrity, and Respect.

Meeting Procedures

The Board of Trustees is the Policy Body of the Alameda Health System. The Board has several standing Committees where Board matters are the subject of discussion at which members of the public are urged to testify. Board procedures do not permit: 1) persons in the audience at a Committee meeting to vocally express support or opposition to statements by Board Members or by other persons testifying; 2) ringing and use of cell phones, pagers, and similar sound-producing electronic devices; 3) signs to be brought into the meeting or displayed in the room; 4) standing in the meeting room. Citizens are encouraged to testify at Committee meetings and to write letters to the Clerk of the Board or to its members, 1411 East 31st Street Oakland, CA 94602.

Members of the public are advised that all Board and Committee proceedings are recorded (audio), including comments and statements by the public in the course of the meetings. Copies of the audio recordings will be made available to the public. Copies of the agendas and supporting documents can be found here: <http://www.alamedahealthsystem.org/meeting-agendas-and-minutes/>. By attending and participating in Board/Committee meetings, members of the public consent to audio recording of any statements they may make during the proceedings.

Disability Access

The Meeting Rooms are wheelchair accessible. Assistive listening devices are available upon request at the Clerk of the Board's Office. To request sign language interpreters, readers, large print agendas or other accommodations, please contact the Clerk of the Board. Requests made at least 48 hours in advance of the meeting will help to ensure availability. The nearest accessible BART station is Fruitvale. Accessible AC Transit Bus Route 51A stops on the corner of Santa Clara Avenue and Willow Street. For schedule updates, call AC

Transit at (510) 817-1717; BART at (510) 465-2278. There is accessible parking in the main parking lot, enter on Willow Street.

In order to accommodate persons with severe allergies, environmental illness, multiple chemical sensitivity or related disabilities, attendees at public meetings are reminded that other attendees may be sensitive to perfumes and various other chemical-based scented products. Please help us to accommodate these individuals.

The AHS Board of Trustees is committed to protecting the private health information (PHI) of our patients. We ask that speakers refrain from disclosing or discussing the PHI of others. Please also know that, should you decide to disclose your PHI, the Trustees will still likely refer your matter, to the extent it involves PHI, to the executive staff for a confidential review of the facts and for confidential handling. If you would like more information regarding the confidentiality of PHI as it relates to the Health Insurance Privacy and Accountability Act, please refer to 45CFR Section 164.101, et.seq.