



QUALITY PROFESSIONAL SERVICES COMMITTEE MEETING

Wednesday, April 28, 2021

5:30pm-7:30 pm

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: Telephonic/Electronic Meeting

COMMITTEE MEMBERS

Kinkini Banerjee

Taft Bhuket, MD, *Chair*

Jeanette Dong

Jennifer Esteen

Tracy Jensen

Sblend A. Sblendorio

NON-VOTING MEMBERS

Chief of Staff – AHS Medical Staff

Chief of Staff - AH Medical Staff

QUALITY PROFESSIONAL SERVICES COMMITTEE MEETING MINUTES

THE MEETING WAS CALLED TO ORDER AT 5:33 pm.

ROLL CALL WAS TAKEN AND THE FOLLOWING TRUSTEES WERE PRESENT: Kinkini Banerjee, Taft Bhuket, MD, Jeanette Dong (left at 7:00pm), Jennifer Esteen (arrived at 6:30pm), and Sblend A. Sblendorio (left at 6:51pm, returned at 7:19pm)

ABSENT: Tracy Jensen

PUBLIC COMMENT: Non-Agenda Items

None

A. REPORT/DISCUSSION: QPSC Chair

Taft Bhuket, MD, Trustee

A1. Article. Maximizing the Effectiveness of the Board's Quality Committee: Leading Practices and Lessons Learned. TGI, Fall 2015.

NOTE: In the event that a quorum of the Board of Trustees participates on this Committee, the meeting is noticed as a Special Meeting of the Board of Trustees; however, no final Board of Trustees action can be taken.

Trustee Bhuket reviewed the article beginning on agenda packet page 8.

Trustee Banerjee said the Committee had a role to play in modeling and merging a culture of transparency and openness. She like the article's questions around creating those conditions.

B. ACTION: Consent Agenda

B1. Approval of the Minutes of the March 24, 2021 Quality Professional Services Committee Meeting

B2. Recommendation of Approval of Policies and Procedures

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

AHS System – April CPC and MEC Approvals

- Covid-19 Vaccine Policy (AHS)
- Ketamine Infusion for Pain Policy (AHS)
- Medication Self Administration Policy (AHS)
- Medication Reconciliation Policy (AHS)
- Medications: High Risk High Alert Policy (AHS)
- Pain Assessment and Management (AHS)

B3. Approval of Revised Medical Staff Privilege Form(s)

Irina V. Williams, M.D., Alameda Health System Chief of Staff

Cathy Pyun, D.O., Alameda Hospital Chief of Medical Staff

- Critical Care Medicine - Multifacility
- Cardiology- Multifacility
- Hematology and Medical Oncology - Multifacility
- Hospitalist
- Neurosurgery/Orthopedic Spine – Multifacility
- Nurse Practitioner – Medicine
- Physician Assistant – Medicine form

Trustee Sblendorio moved and Trustee Dong seconded to approve the Consent Agenda.

ACTION: A motion was made and seconded to approve the Consent Agenda. A roll call vote was taken, and the motion passed.

AYES: Trustees Banerjee, Bhuket, Dong, Sblendorio

NAYS: None

ABSTENTION: None

C. REPORT/DISCUSSION: Medical Staff Reports

- *AHS Medical Staff: Irina Williams, MD (Chief of Medical Staff)
Edris Afzali, MD (SLH Leadership Committee Chair)*
- *AH Medical Staff: Cathy Pyun, DO (Chief of Medical Staff)*

Dr. Boesch discussed the report for Alameda Health System on agenda packet page 136.

Dr. Afzali reported out on the San Leandro Hospital Leadership Committee meeting. He said that he grouped his top three concerns around patient care, staffing, and quality. Patient care concerned transfers and subspecialty consults. Quality concerns included the tele monitors that would be installed soon and the inability for the San Leandro ED to save Ultrasound images creating an inability to bill for them. IT was working on building that capacity at both San Leandro and Alameda Hospitals.

Trustee Bhuket asked if the ultrasound issue was the same across the system. Dr. Afzali said that Highland could save the images, but Alameda and San Leandro could not at the time.

Dr. Pyun discussed the report for Alameda Hospital on agenda packet page 137. She said the Transfer Center was helpful, but transfers were always a challenge.

Trustee Dong asked for Dr. Pyun's thoughts regarding how to improve the discharge process with specialty and subspecialty care. Dr. Pyun said in the beginning they could put in appointments themselves. That function disappeared. She said that should happen with the primary care physician, but they needed to have a strong connection.

D. REPORT/DISCUSSION: Patient Safety, Regulatory Affairs, and Quality TNM Dashboard

*Tanvir Hussain, MD, Chief Quality Officer
Darshan Grewal, System Director of Patient Safety
Nilda Perez, System Director of Regulatory Affairs
Annette Johnson, Quality Analytics Director*

Dr. Hussain reviewed the reports beginning on agenda packet page 138.

E. REPORT/DISCUSSION: Review of Publicly Reported Quality Data

*Tanvir Hussain, MD, Chief Quality Officer
Annette Johnson, Quality Analytics Director*

Dr. Hussain reviewed the reports beginning on agenda packet page 165.

Trustee Esteen arrived at 6:30pm

Trustee Sblendorio left at 6:30pm

At 6:35pm, role was taken for a quorum. Trustees Banerjee, Bhuket, Dong, and Esteen were present.

Trustee Bhuket announced that they were moving into closed session to hear agenda item H1 and would return shortly.

Closed session at 6:38 pm to 6:42 pm.

Trustee Dong left at 6:50 pm.

F. REPORT/DISCUSSION: Quality Improvement Project Report, Asthma Management
Natalie Curtis, Medical Director, Ambulatory

Dr. Curtis reviewed the reports beginning on agenda packet page 177.

Trustee Esteen appreciated that racial equity was noted as an integrated part their work and that it could not be separated from quality.

Trustee Bhuket said the goal was to hit the 61.35% of patients with an asthma medication ratio, as indicated on agenda packet page 179, the current ratio was around 70%. He asked why they were successful and if it was durable. Dr. Curtis said they were conducting a lot of follow up with patients and reinforcing the message to providers so that it was an ongoing project. It was delayed in terms of impact as it was based on pharmacy data, perhaps up to three months or so. She thought the success was durable, with appropriate check ins.

Trustee Bhuket asked if they knew the dollar amount associated with achieving this Quality Intensive Program metric. Dr. Gupta said the dollar amount varied each year. They estimated that every year, every QIP metric, including asthma was worth \$1.5M. That dollar amount was subject to change, as the allocated dollars for each hospital was based on utilization data that came via the health plans.

G. INFORMATION: Planning Calendar/Issue Tracking
Taft Bhuket, MD, Chair

Trustee Bhuket reviewed the report beginning on agenda packet page 190.

Mr. Azizi announced that the Board of Trustees were adjourning into Closed Session to discuss the agendized items per the applicable Government Codes.

H. CLOSED SESSION

H1. Consideration of Confidential Medical Staff Credentialing Reports
Chief of Staff, AHS Medical Staff
Chief of Staff, AH Medical Staff

H2. 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

I. REPORT: Legal Counsel’s Report on Action Taken in Closed Session

M. D. Moye, General Counsel

Mr. Azizi 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.

ADJOURNMENT: 7:45 pm

This is to certify that the foregoing is a true and correct copy of the minutes of the Quality Professional Services Committee meeting of April 28, 2021 as approved by the Quality Professional Services Committee on May 26, 2021:

Ronna Jojola-Gonsalves

Ronna Jojola Gonsalves
Clerk of the Board

APPROVED AS TO FORM:

Reviewed by: *shakib azizi*
[shakib azizi \(Oct 4, 2021 15:28 PDT\)](#)

Ahmad Azizi
Interim General Counsel









2021-04-28 QPSC Minutes FINAL APPROVED

Final Audit Report

2021-10-05

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