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**Alameda Health System Medical Executive Committee (MEC)**  
**Report to the Quality Professional Services Committee of the Board**

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**September 28, 2022**

**A. Community**

1. Medical Staff Diversity, Equity and Inclusion workgroup expanded into Medical Staff Justice, Equity, Diversity and Inclusion committee

The committee will be partnering with HEDI committee on addressing patient care inequity within AHS. The committee is being co-chaired by Dr Kevin Smith and Dr Heather Clague. Committee is currently evaluating for presence of any race-based calculators within AHS.

**B. Quality**

1. Simulation Education and Operations Committee

Newly formed Simulation Education and Operations Committee will provide oversight and monitoring of all simulation education programming as well as policies and procedures of the Simulation Center. This Committee will be responsible for guiding the development and assessment of simulation-based education offerings at AHS and will strive to support curricula that reinforces improvements in patient safety, quality of care and patient experience across AHS. In addition, the Committee will encourage multidisciplinary and interprofessional use of the Simulation Center, including supporting the continued use of the Simulation Center by HealthPATH, and work to ensure that Simulation Center users receive the highest-quality experience in simulation education.

**C. Staff/Patient Experience**

1. Committee on Interdisciplinary Practice report

The committee reviewed and continues to revise the proposed Advanced Practice Provider Policy and Procedure Manual. This manual is intended to replace and sunset the 2007 AHP Rules and Regulations document. The list of existing standardized procedures and their last review date was considered.

Committee focus and goals:

- Develop an Advanced Practice Provider Policy and Procedure Manual
- Update/review existing Standardized Procedures/Protocols
- Evaluate Supervisory Agreements template forms
- Evaluate co-signature requirements for APPs
- Update Physician Assistant scope of practice in response to PA Practice Act changes
- Replace DSAs with Practice Agreements
- Develop Physician Assistant Practice Agreement template
- Consider updates to CNM scope of practice in response to anticipated changes in law

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2. Recent tragic events has providers and staff shaken

Providers and staff continue to debrief and reflect on recent tragic events. Strong sense of AHS community and mutual support is being recognized and appreciated. A number of teams are introducing new ways of provider-to-provider support. For example, OMG department is piloting “buddy system”.

3. Search Committees / Department Chair Recruitment and Retention

Search continues for the Chairs of the Departments of Emergency Medicine, Orthopedics and Radiology. Strategy around administrative support for future and current Department chairs is being discussed. There are a number of applicants for Emergency Medicine Chair position. There is a strong internal applicant for Orthopedic Chair position.

4. Patient Experience Data

FYTD 22 Rate the Hospital performance for both Highland and San Leandro Hospital below goal. Highland FY22 performance 74.08 (goal 75.17), San Leandro FY22 performance 66.57 (goal 71.66). Additional metrics with opportunity include Communication with Nurse and Doctors, Care Transitions, Discharge Information, Responsiveness, and Hospital Environment.

Action plan:

1. Patient Experience team will continue to perform floor audits of G.I.F.T standard utilization and White Board completeness.
2. Patient Experience has recommended increasing Nurse Leader Rounding and Service Recovery in Sentact.
3. Weekly Leadership review of patient data and comments.
4. Leadership to utilize huddles for staff reminders and data review.
5. Continual focus on use of GIFT, Purposeful Hourly Rounding with 4P’s (pain, position, placement and personal needs), and No Pass Zone standards across all units.
6. Beginning September 2022, implement new inpatient orientation materials, including medication information sheet.
7. Patient Experience has recommended increasing EVS audits on all floor/units. Some units at SLH have posters of quiet for a healing environment.
8. Reinstigate Care Transition Rounds.

**D. Sustainability**

1. Staffing shortage

Daily callouts due to COVID infection continue to negatively impact operations and patient throughput.