



QUALITY PROFESSIONAL SERVICES COMMITTEE MEETING

THURSDAY, AUGUST 22, 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 2:31 PM.

ROLL CALL WAS TAKEN AND THE FOLLOWING TRUSTEES WERE PRESENT: Kinkini Banerjee, Taft Bhuket, MD, and Maria Hernandez

ABSENT: Tracy Jensen (Excused)

A quorum was established.

A. CLOSED SESSION (Estimated 30 minutes)

A1. 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

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

B1. Approval of the Minutes of the July 25, 2019 Quality Professional Services Committee Meeting

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

AYES: Trustees Banerjee, Bhuket, and Hernandez

NAYS: None

ABSTENTION: None

END OF CONSENT AGENDA

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

Taft Bhuket, MD, Chair

C1. “Firearm-Related Injury and Death in the United States: A Call To Action From the Nation’s Leading Physician and Public Health Professional Organizations”. Annals of Internal Medicine 2019.

C2. “Physician Groups Forge Action Plan Against Gun Violence”. Medscape 2019.

Trustee Bhuket and Dr. Bullard discussed the articles beginning on agenda packet page 12.

Trustee Hernandez said the trauma from gun violence affects the whole family.

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 21.

Dr. Marzouk said his top concerns were the S*A*P*P*H*I*R*E* implementation with the go live taking place soon and the transfer process.

Dr. Ingegno provided a verbal report for San Leandro Hospital.

Dr. Ingegno said that his top concerns, in order, were nursing availability during roll out of S*A*P*P*H*I*R*E*, S*A*P*P*H*I*R*E* itself, and the Operating Room volumes.

Trustee Banerjee asked about staffing during the rollout. Janet McInnes, CAO, CNE, said that there were super users at every location, then there were house supervisors, managers, and assistant managers who were also super users. There would be the regular staff plus those additional layers. Dr. Ingegno said that even with super users it was going to take longer for staff to assist patients and they should increase staff.

Dr. Bullard discussed the report beginning on agenda packet page 20.

The Board discussed a concern brought up by Dr. Bullard about an LGBTQ patient who was treated inappropriately. Dr. Jamaledine suggested AHS work toward an LGBTQ certification to improve education for providers. The Board discussed the need for specific consequences for staff members and the need for improved cultural competency. Dr. Baden said a Midas report was completed, staff said that HR was involved.

Dr. Bullard said that her top concerns were diversity, trust, and S*A*P*P*H*I*R*E*.

E. REPORT/DISCUSSION: SBU Quality Metric Report, Behavioral Health (Est. 20 minutes)
Karyn Tribble, PsyD, LCSW, Chief Administrative Officer, Behavioral Health

Dr. Tribble discussed the report on agenda packet page 23.

Trustee Hernandez discussed the acuity of patients. Dr. Sidhartha described some of the challenges caused by these patients. Typically, they would have their physical symptoms stabilized in the ER then they would be brought to John George to have the psychosis stabilized.

Trustee Bhuket asked what would solve the problem, in a perfect world. Dr. Tribble said having a true acute care unit at John George and having enough inpatient beds for the population. Trustee Bhuket asked if there were regulatory impediments to that goal. Dr. Tribble said it would be expensive and a challenge to reallocate budget but could be done from a regulatory stand point.

Answering a question from Trustee Banerjee, Dr. Jamaledine said in the PES they could have up to 60 patients with varying degrees of issues. They could also have patients with medical problems. Having a structure to be able to screen for those problems was important. They had high risk with medical issues that can manifest as psychiatric issues, they were working to make sure the patient gets the right care.

F. REPORT/DISCUSSION: Update on S*A*P*P*H*I*R*E* (Est. 10 minutes)
Mark Amey, CIO and David English, MD, CMIO

Mr. Amey discussed the report on agenda packet page 36.

Trustee Bhuket asked about the choreography of the rollout. Dr. English said that two weeks before rollout the long-term residents will be put into EPIC. Just before rollout staff will input all the people in acute care beds. On the day of roll out a team will back load the information from the chart. At midnight the old system will no longer accept new events, though the system will still be

available for reference. For the next few hours interfaces will be switched to EPIC. Staff in the ED and birthing center will begin to backload data for patients who expect to still be there when the system switches. A group of senior leaders will review the status and make a call to go or not go. In the early morning hours of the 28th the staff will be released to get into the EPIC. Mr. Amey said that Monday was another big go live as many people who were not in over the weekend would have to be supported.

Trustee Hernandez asked what percent of patient data had been transferred in. Dr. English said it varied per area, it was a work in progress, but it was typically about three years.

G. REPORT/DISCUSSION: Patient Safety and Regulatory Affairs (Estimated 10 minutes)
Tanvir Hussain, MD, Vice President of Quality
Darshan Grewal, Director of Patient Safety

Dr. Hussain discussed the report beginning on agenda packet page 44.

Trustee Bhuket asked for some information regarding the site license merger with San Leandro and the timing of the current CMS survey. Nilda Perez said that the merger was slated to be completed no later than early October. The current CMS survey happened prior to that so there was no implication or San Leandro Hospital as part of the process.

Trustee Hernandez asked if Dr. Hussain felt resourced for the September 3rd Plan of Correction deadline. Dr. Hussain said that he the operational leaders were doing the work. What the surveyors were looking for was true implementation and reliability rate was minimized.

Trustee Hernandez asked staff to keep the Board posted on how they can support the process.

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

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

Trustee Bhuket said that Dr. Jamaledine would provide an update in November on the patient affairs landscape, is there a role for a patient voice on the committee.

J. 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 August 22, 2019 as approved by the Quality Professional Services Committee on September 26, 2019:



Ronna Jojola Gonsalves
Clerk of the Board

APPROVED AS TO FORM:

Reviewed by: 
M.D. Moye
General Counsel