

THE METROHEALTH SYSTEM
QUALITY & SAFETY COMMITTEE
BOARD OF TRUSTEES
REGULAR MEETING MINUTES

DATE: October 25, 2016

TIME: 10:00 a.m.

PLACE: MetroHealth Medical Center
K107, Business Services Building

COMMITTEE

TRUSTEE: Mr. Moss, Mr. McDonald, Mr. Spain

STAFF: Dr. Boulanger, Dr. Boutros, Dr. Connors, Ms. Aulisio, Dr. Bolen, Ms. Conti, Ms. Delp, Dr. Golob, Mr. Kaufmann, Ms. Kline, Mr. Lewis, Dr. Misak, Ms. Rocco, Mr. Stern

(ABSENT): Ms. Dee, Dr. Silver, Ms. Kiedio, Dr. Minor, Mr. Schneider, Ms. Whiting

Mr. Moss called the regular meeting of the Quality & Safety Committee to order at 10:01 am

I. Approval of Minutes – July 26, 2016

The minutes of the July 26, 2016 Quality & Safety Committee Meeting were approved as presented.

II. DISCUSSION ITEMS

A. Patient Safety Update (PQRSC) - Dr. Joseph Golob

Dr. Golob stated that the last hospital Culture of Safety Survey was in 2014. Dr. Golob discussed the hospitals strengths and opportunities for improvement. Dr. Boutros recommended that the data be dissected to specific areas that we need to work on and then report back to the committee.

B. Patient Safety & Quality Update – Matthew Kaufmann

Mr. Kaufmann updated committee members on the quarterly clinical and documentation review of Population Health, Hospital Acquired Infections, Hospital Acquired Conditions, Patient Safety Indicators, PSI 90, Readmission, Sharp Injury Reduction and Order Set Utilization. Mr. Kaufmann stated that the PSI 90 Composite Score was good this year. It was better than most of the hospitals across the country. The committee asked that Mr. Kaufmann get a correct Sharp Injury definition.

C. The Joint Commission Extension Survey – Darlene Rocco

Ms. Rocco stated the Joint Commission surveyed the Parma Medical offices and Ambulatory Surgery Center, Rocky River Medical offices, Bedford Medical offices and Cleveland Heights Medical offices. There were four direct findings and two indirect findings. Correction plans were developed and implemented.

D. Infection Prevention Updates – Jennifer Conti

Ms. Conti stated there were 31 central line infections last year with a projected target to have 24 this year. Some initiatives include improving signage for 11C, more hand hygiene dispensers, improve technology in microbiology to determine pathogens, urine preservative project, new sure step foley system, root cause analysis performed on every infection, ventilator cleaning performed and checked by respiratory manager and VAP education presentation added to all new resident orientations. Initiatives to decrease C-diff include all C-diff rooms tracked daily, all C-diff rooms are double cleaned with bleach and UV lighted, messaging sent to staff who care for patient, weekly room UV lighting of equipment, information to all employees at hire and annually regarding C-diff and daily cleaning of overbed table by dietary. The dietary staff is also offering patients hand hygiene products before meals and resident manuals are being prepared with tips for preventing infections.

E. Hypertension Reduction – Shari Bolen, M.D.

Dr. Bolen stated that MetroHealth participates in a regional health improvement collaborative called Better Health Partnership. Better Health has identified and disseminated a best practice for blood pressure management. Best practice includes education on accurate BP measurement, timely follow-up, standardized treatment algorithm, outreach using EMR-based patient registries and communication curriculum for building trusting relationships with patients. BP control at MetroHealth has improved from 56% to 75% in primary care. The hypertension best practice works equally well in diverse populations. Better blood pressure control is strongly linked to less heart attacks, strokes and deaths. Future work includes improving timely follow-up, outreach to patients, spreading to specialty care, patient engagement and community partnerships.

F. Draft of 2017 Quality Goals – Dr. Connors

Dr. Connors will be meeting with the Service Line Teams next week to set goals and a timeline so they can be brought before this committee in January 2017. He stated that there will be a draft completed in December and it will be sent to the committee members before the January meeting.

G. Data Transparency for MetroHealth – Dr. Connors

Dr. Connors stated that data transparency will make it easier for the hospital to know quality outcomes. Service lines will get monthly feedback. The dashboard will send reports each month to senior leaders and eventually it will go to all physicians. It will identify appropriate targets for QI interventions and provide timely data to QI teams. It will also identify areas in current goals for improvement and gaps in quality goals to focus on in 2017.

H. MetroHealth STAR Rating Update – Dr. Connors

Dr. Connors stated that we are now a 2 Star Hospital. In order to improve this rating we will focus on improving Safety, (PSI 90 already part of Quality Goals), Readmissions (heart failure, stroke, pneumonia – teams assigned), Patient Experience (strong system focus, recent improvements with daily rounding), Timeliness (include in Chair and Service Line Goals) and Imaging (include in Chair and Service Line Goals).

III. NON-CONSENT/ACTIONS ITEMS

None

IV. CONSENT ITEMS

None

There being no further business to come before the Committee, the meeting was adjourned at 11:47a.m for executive session.

Respectively submitted,

Mr. John Moss, Chairman
Board of Trustees