



**Minutes of the Open Session of the
Quality, Patient Care and Patient Experience Committee
of the El Camino Hospital Board of Directors**

Monday, June 7, 2021

El Camino Hospital | 2500 Grant Road, Mountain View, CA 94040

Members Present

George O. Ting, Vice Chair**

Terrigal Burn, MD**

Alyson Falwell**

Michael Kan, MD**

Apurva Marfatia, MD**

Jack Po, MD**

Krutica Sharma, MD**

Melora Simon**

Members Absent

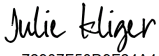
Julie Kliger, MD, Chair

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	The open session meeting of the Quality, Patient Care and Patient Experience Committee of El Camino Hospital (the “Committee”) was called to order at 5:30pm by Vice Chair Ting. A verbal roll call was taken. Dr. Po and Ms. Simon were not present during roll call. All other members were present at roll call and participated telephonically. A quorum was present pursuant to State of California Executive Orders n-25 dated March 12, 2020 and N-29-20 dated March 18, 2020.	
2. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Vice Chair Ting asked if any Committee members had a conflict of interest with any of the items on the agenda. No conflicts were reported.	
3. CONSENT CALENDAR	<p>Vice Chair Ting asked if any member of the Committee or the public wished to remove an item from the consent calendar. No items were removed.</p> <p>Dr. Po and Ms. Simon joined the meeting at 5:33pm during the Consent Calendar.</p> <p>Motion: To approve the consent calendar. (a) Minutes of the Open Session of the Quality, Patient Care and Patient Experience Committee Meeting (05/03/21). For information (b) Progress Against FY21 Committee Goals; (c) FY21 Enterprise Quality Dashboard; (d) Report on Board Actions; (e) Quality Committee Follow-Up Tracking; (f) Article of Interest.</p> <p>Movant: Burn Second: Marfatia Ayes: Burn, Falwell, Kan, Marfatia, Po, Sharma, Simon, Ting Noes: None Abstain: None Absent: Kliger Recused: None</p>	Consent Calendar approved
4. CHAIR’S REPORT	The Board has reviewed financials and had elections. Lanhee Chen remains Chair, Bob Rebitzer is the Vice Chair, and Julia Miller is the Secretary/Treasurer. The Board is still undergoing strategic planning efforts with McKinsey.	
5. PATIENT STORY	Cheryl Reinking, DNP, RN NCA-BC, CNO, presented a patient’s story from an El Camino Hospital employee. This employee was complimentary of the care she received, but she had a bad experience with patient registration. The person in front of her in line was taking a lot of time. Ms.	

	<p>Reinking believes that the patient registration team can have more situational awareness and make sure all patients are being cared for efficiently. The patient registration team took this situation to heart and are making the proper improvements in this area.</p> <p>Ms. Reinking also reported that the other area of concern this same patient had was related to her diabetic management. This patient has been a Type 1 Diabetic for 34 years and had just had surgery. It was concerning to find out that after the surgery, the patient's blood sugar was above 300. The patient knew how to manage her sugars, but they were not being managed properly post-operation. This case has been referred to the Diabetic Management Committee. The patient is an El Camino Hospital employee and she agreed to come talk to this group about her experience. It was also reported that there would be an in-depth chart review to understand what staff could have done better and what can be done, in a broader sense, for post-operative patients in the future.</p>	
<p>6. READMISSION DASHBOARD</p>	<p>Mark Adams, MD, CMO reported the O/E ratio for FY21 (End of Q3) was 0.86 which is good because El Camino Hospital's overall target is 0.93 for all the readmission categories. (The dashboard here is limited to the seven diagnoses used by CMS for the readmission reduction penalty program.) Dr. Adams reported that the two categories that saw a spike were the Coronary Artery Bypass Graft and Total Hip Arthroplasty and/or Total Knee Arthroplasty. Dr. Adams clarified that those are the two categories that have a higher variance because 1 or 2 readmissions have a larger effect on the O/E ratio. Those cases will be reviewed to see what can be done differently. Dr. Adams also clarified that each of the seven (7) categories need to meet the index or else the hospital is penalized. El Camino Hospital almost avoided the penalty, but 80% of hospitals are penalized. Dr. Adams also clarified that if a patient is readmitted, the readmission counts toward the category's O/E Ratio, even if the readmission is completely unrelated to the initial cause of hospitalization.</p>	
<p>7. PSI REPORT</p>	<p>Dr. Adams reported that the composite PSI score for FY21 (Q1-3) is very good. The categories in which El Camino Hospital was over the mean were Pressure Ulcer, Iatrogenic Pneumothorax, Perioperative Hemorrhage or Hematoma, OB Trauma Vaginal Delivery with Instrument, and OB Trauma Vaginal Delivery without Instrument. Dr. Adams mentioned that the Pressure Ulcer was likely higher due to the abundance of patients with Covid-19 who required oxygen delivery devices to be put on their face. The Iatrogenic Pneumothorax was an isolated incident in one patient with bilateral pneumothoraces. Dr. Adams reported that the OB Trauma Vaginal Delivery with and without instrument categories remain above average with efforts being made to try to lower them.</p>	
<p>8. QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT PLAN</p>	<p>Dr. Adams compared the IBM Watson Top 100 score from 2018 and 2020. The 2018 score, at the time, left many with questions about how to improve, but the 2020 score shows that El Camino Hospital had the most improvement according to IBM Watson's metrics. They ranked #1 within the Top 100 in performance improvement.</p> <p>Motion: To approve the Quality Assessment and Performance Improvement Plan.</p> <p>Movant: Po Second: Sharma Ayes: Burn, Falwell, Kan, Marfatia, Po, Sharma, Simon, Ting Noes: None Abstain: None</p>	<p><i>Quality Assessment and Performance Improvement Plan Approved</i></p>

	Absent: Kliger Recused: None	
9. PUBLIC COMMUNICATION	None.	
10. ADJOURN TO CLOSED SESSION	Motion: To adjourn to closed session. Movant: Burn Second: Po Ayes: Burn, Falwell, Kan, Marfatia, Po, Sharma, Simon, Ting Noes: None Abstain: None Absent: Kliger Recused: None	<i>Adjourned to closed session at 6:15pm</i>
11. AGENDA ITEM 16 RECONVENE OPEN SESSION/ REPORT OUT	Open Session reconvened at 6:59pm. Agenda items 11-15 were covered in closed session. During the closed session, the Committee approved the consent calendar: Minutes of the Closed Session of the Quality Committee (05/03/2021), Quality Council Minutes, and Medical Staff Credentialing and Privileges Report.	
12. AGENDA ITEM 17: CLOSING WRAP UP	None.	
13. AGENDA ITEM 18: ADJOURNMENT	Motion: To adjourn at 7:01 pm. Movant: Sharma Second: Marfatia Ayes: Burn, Falwell, Kan, Marfatia, Po, Sharma, Simon, Ting Noes: None Abstain: None Absent: Kliger Recused: None	<i>Meeting adjourned at 7:01pm.</i>

Attest as to the approval of the foregoing minutes by the Quality, Patient Care and Patient Experience Committee of El Camino Hospital:

DocuSigned by:

 72907E50D9E24A4...

Julie Kliger, MPA, BSN
 Chair, Quality, Patient Care and Patient Experience Committee