Minutes of the Open Session of the Quality, Patient Care and Patient Experience Committee of the El Camino Hospital Board of Directors Monday, March 7, 2022

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

Members Present

Julie Kliger, MPA, BSN, Chair**

Terrigal Burn, MD**
Michael Kan, MD

Apurva Marfatia, MD

Jack Po, MD**

Krutica Sharma, MD** Carol Somersille, MD George O. Ting, MD**

Alyson Falwell**
Melora Simon**

Members Absent

**via teleconference

	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 5:30 pm by Chair Julie Kliger. A verbal roll call was taken. Dr. Burn and Dr. Po were not present during roll call. Dr. Burn joined at 5:32 pm and Dr. Po joined at 6:01 pm. All other members were present at roll call and participated in-person or telephonically. A quorum was present pursuant to State of California Executive Orders N-25-20 dated March 12, 2020 and N-29-20 dated March 18, 2020.	
2.	POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Chair Kliger 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	Chair Kliger pulled item 3a Minutes of the Open Session of the Quality Committee Meeting (02/07/2022) and item 3d FY22 Enterprise Quality Dashboard. Chair Kliger identified an error where it listed Chair Miller instead of the correct name Chair Kliger. The issue was corrected before the meeting. Chair Kliger presented a question from a committee member asking why there were some indicators on the dashboard that only had data thru November. Dr. Beeman responded that the Patient Safety Committee is behind and is currently catching up. Dr. Somersille addressed item 3a Minutes of the Open Session of the Quality Committee Meeting (02/07/2022), specifically Agenda item 6, requesting that more detail is included around discussions that occur versus stating a discussion has ensued.	Consent Calendar approved

March 7, 2022 | Page 2 Dr. Somersille addressed item 3d FY22 Enterprise Quality Dashboard, specifically around the Mortality Index. She requested more information on the change in the mortality index which now excludes psychiatry, hospice, and rehab units. Dr. Adams stated this change occurred in 2019. Dr. Beeman followed up stating that she will be doing a deep dive into the mortality index during the open session and will address it then. **Motion**: To approve the consent calendar: (a) Minutes of the Open Session of the Quality Committee Meeting (02/07/2022); For information: (b) Report on Board Actions, (c) FY 22 Pacing Plan, (d) FY 22 Enterprise Quality Dashboard (e) QC Follow-Up items Movant: Falwell Second: Somersille Ayes: Kliger, Burn, Kan, Marfatia, Sharma, Somersille, Ting, Falwell, Simon Noes: None Abstain: None Absent: Po Recused: None 4. CHAIR'S REPORT Chair Kliger shared that Dan Woods, CEO would be providing a brief update to the Quality Committee around the Strategy Planning Process that has been underway. Dan Woods, CEO shared that El Camino Health has engaged McKinsey Consulting to assist with this process. We have identified 3 strategic themes - ACE. These are tentative as they go to the Board this week. 1. Alignment of Physicians 2. Clinical Leadership – Spotlight four services lines. Those service lines are Cancer, Ortho/Spine, Women's Health, and HVI. Additionally, focusing on Mental Health Addiction Services to support the community. 3. Emerging Service Lines - Explore Neurosciences and expand our reach. Having access to El Camino services closer to where patients live. Dan Woods shared that Newsweek announced the world rating of Healthcare agencies across the world and El Camino Health ranked 96th in the entire United States and we are the number #1 Community Hospital in the Bay Area. 5. PATIENT STORY Cheryl Reinking, CNO presented a patient story regarding positive feedback received through the Healthgrades portal. This letter was brought to our attention because one of the managers from Oncology read this letter at Enterprise Huddle. This letter is about one of the providers in SVMD, Dr. Dormady who made quite an impression on this patient. The patient expressed that Dr. Dormady made him feel like he was not just a patient, but a real person. He made sure the patient understood all his treatment options and treated him like a human with dignity and

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	respect. The patient left pleased and highly recommends Dr. Dormady.	
	Dr. Ting expressed praise for Dr. Dormady and suggested that a session could be held where doctors like Dr. Dormady can discuss the soft side of medicine. A consensus occurred within the committee around further education and stronger communication with patients to ensure a positive experience. This topic has been noted for a follow-up.	
6. PATIENT & FAMILY VOICES IN QUALITY COMMITTEE MEETINGS	Dr. Holly Beeman, CQO opened the floor for discussion and read a quote about the importance of having the voice of the patient as part of the quality and safety activities of the organization.	
	Dr. Burn expressed that he would strongly support the idea. Chair Kliger confirmed Dr. Burn's support of having patients on the Committee. Chair Kliger clarified to the Committee that the intent of this is to bring forward the voice of those receiving care.	
	Dr. Adams, Cheryl, and Chair Kliger shared experiences around having patients on the Committee.	
	Ms. Falwell supports this and would like more clarity on how we will leverage the Patient or Family that will join. Advised to set clear expectations for both the Committee and the Patient.	
	Ms. Simon expressed support and echoed the statement of Ms. Falwell. Ms. Simon also expressed that this hasn't worked in the past for this Committee.	
	Dr. Ting echoed Ms. Simon's comment regarding the prior experience of the Patient attending not working. The effectiveness of a Patient attending is in the selection of the person. Dr. Ting expressed that the best use of patient feedback is in focus groups.	
	The next step is for Dr. Burn, Cheryl, and Dr. Beeman to explore other models of this process.	
7. ENTERPRISE QUALITY TARGETS	Dr. Holly Beeman, CQO presented on Enterprise Quality Targets. She reviewed the Readmission Index and the Mortality Index. Specific data is available in the packet.	
	Dr. Ting and Dr. Somersille requested for the Readmission Index that the data provided be broken down into more detail and to help interpret the chart on the right of the Enterprise Dashboard and have confidence limits included.	
	Dr. Beeman reassured the Committee that we have an extensive amount of data and is happy to present additional information.	
	Chair Kliger recommended having this additional information available in an appendix form for the Committee.	
8. PUBLIC COMMUNICATION	There were no comments from the public.	

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9. ADJOURN TO CLOSED SESSION	Motion: To adjourn to closed session at <u>6:51 pm</u> . Movant: Somersille Second: Kan Ayes: Kliger, Burn, Kan, Marfatia, Po, Sharma, Somersille, Ting, Falwell, Simon	Adjourned to closed session at 6:51 pm
	Noes: None Abstain: None Absent: None Recused: None	
10. AGENDA ITEM 16: RECONVENE OPEN SESSION/REPORT OUT	The open session reconvened at 7:19 pm. Agenda items 10-16 were addressed in closed session. During the closed session, the Committee approved the Minutes of the Closed Session of the Quality Committee Meeting (02/07/2022), the Quality Council Minutes (02/02/2022), and the Medical Staff Credentialing and Privileges Report by unanimous vote by all committee members.	
11. AGENDA ITEM 17: CLOSING WRAP UP	No additional comments	
12. AGENDA ITEM 18: ADJOURNMENT	Motion: To adjourn at 7:20 pm Movant: Kan Second: Simon Ayes: Kliger, Burn, Kan, Marfatia, Po, Sharma, Somersille, Ting, Falwell, Simon Noes: None Abstain: None Absent: None Recused: None	Adjourned at 7:20 pm

DocuSigned by:

July Light
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Julie Kliger, MPA, BSN Chair, Quality Committee

Prepared by: Nicole Hartley, Executive Assistant II