TARRANT COUNTY HOSPITAL DISTRICT (TCHD) d/b/a/ JPS HEALTH NETWORK 1500 S. MAIN STREET FORT WORTH, TX 76104 OUTPATIENT BUILDING, 3RD FLOOR AUDITORIUM

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JOINT BOARD OF MANAGERS AND QUALITY COMMITTEE MEETING 1:30 PM Thursday, March 2, 2017

Meeting Minutes

The Tarrant County Hospital District ("District") Board of Managers and Quality Committee met on Thursday, March 2, 2017 at JPS Health Network, 1500 S Main Street, 3rd Floor Outpatient Conference Rooms with the following Board members present:

	Roy Lowry, D.O., Committee Chair Charles Powell Rev. Ralph Emerson Dorothy DeBose Rex Hyer, M.D. Chuck Webber, M.D. Brian Webb, M.D. Chet Shrader, M.D.
Members Absent:	D.T. Nguyen
Patient Advisors:	Andrzej Osiatynski Adrienne Calvin Shirley Earley
Others Attending:	Robert Earley, President and Chief Executive Officer Bill Whitman, Executive Vice President, Chief Operating Officer Frank Rosinia, Executive Vice President, Chief Quality Officer Daniel Ziegler, M.D., President Medical Staff Wanda Peebles, Senior Vice President, Chief Nursing Officer Sharon Clark, Executive Vice President, Chief Financial Officer Melinda Costin, Senior Vice President, Chief Information Officer David Mendenhall, Chief Technology Officer Scott Rule, Vice President, Chief of Staff J.R. Labbe, Vice President, Communications and Community Affairs Lara Burnside, Chief Patient Experience Officer Merianne Roth, Vice President, Chief Strategy Officer Pia Walker, Interim Vice President, Human Resources & Learning Trudy Sanders, Vice President, Patient Care James Johnson, M.D., President, Operations Clinical and Professional Services Tricia Elliott, M.D., Vice President, Academic Affairs

Neal Adams, General Counsel Monaliza Gaw, Executive Director, Quality Nydia Gonzalez, Vice President, Diversity and Inclusion Michele Green-Ford, Director, Diversity and Inclusion Kami Walker, Director, Patient Safety and Regulatory Madhura Chandak, Executive Director, Clinical Integration Jeni McGarry, Precinct Administrator Ashley Abram, Recording Secretary

I CALL TO ORDER

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Dr. Roy Lowry called the March 2, 2017 meeting to order at 1:37 p.m. Members present represented a quorum to conduct committee business.

II CITIZENS WISHING TO ADDRESS THE BOARD

There were no citizens present to address the Board.

III CONSIDER MATTERS REQUIRING COMMITTEE ACTION

A. Approval of Minutes

Dr. Lowry called for a motion to approve the September 1, 2016 and November 3, 2016 minutes.

1. September 1, 2016

Action: Dr. Webber made a motion for approval on the September 1, 2016 minutes; motion was seconded by Mr. Powell and carried unanimously.

2. November 3, 2016

Action: Mrs. DeBose made a motion for approval on the November 3, 2016 minutes; motion was seconded by Dr. Webber and carried unanimously.

B. Approval of Tarrant County Hospital District Policies and/or Plans

Summary: Trudy Sanders presented and requested approval of policy IC-1 Infection Prevention and Control Program Authority and Approval Statement.

Action: Dr. Lowry made a motion to approved Policy IC-1 Infection Prevention and Control Program Authority and Statement as presented. Motion was moved by Mrs. DeBose and seconded by Mr. Powell. Motion carried unanimously.

IV. CONSIDER PERFORMANCE IMPROVEMENT REPORTS/UPDATES – NOT REQUIRING COMMITTEE ACTION

1. Quality Outcomes Update

Summary: Monaliza Gaw presented the performance improvement reports for Quality Outcome. She provided an update on quality metrics and how they align with the Destination Metrics on creating a safe environment of care for patients and families at JPS. She also discussed the importance of meeting and exceeding safety measures as outlined on the Leapfrog Hospital Safety survey. Additionally, Leapfrog's ability to report on key aspects of

patient safety relies on the availability of publically reported data from CMS, which creates a data log in reporting. Mrs. Gaw's presentation outlined FY16 and FY17 comparable trends reflecting improvements on catheter associated urinary tract infections (CAUTI), central line blood stream infections (CLABSI), surgical site infections (SSI) and Clostridium Difficile. Furthermore, she stated that team members have taken an extra step to challenge their existing processes to improve patient care. As part of improvement efforts, Ms. Gaw shared that she visited Cedars-Sinai Medical Center and Massachusetts General Hospital last year to learn about their best practices and innovation in healthcare. To conclude, the overall organizational goal is destination zero which will increase institutional awareness and performance improvement efforts towards improving the culture of patient safety.

This item is for information purposes only. No action(s) are required from the committee.

2. Patient Experience Update

Summary: Lara Burnside presented Patient Experience Updates and discussed the partnership between quality and service. HCAHPS performance metrics showed that out of 60,000 people who responded to the patient experience survey, E3, 2-North and 2-South were identified as the top performers for 2016 with an overall of 52% of HCAHPS rating. Overall, Mrs. Burnside's presentation listed all of the network departments that have been recognized as top performers. Tower 11 and P5 demonstrated a significant improvement in room cleanliness. Dr. Skeetora Taylor and Dr. Robert Richard were honored for excellent provider communication and overall provider rating. The overall goal for FY16 was to create awareness and alignment, which was achieved, and the goal for FY17 is to focus and accelerate change.

This item is for information purposes only. No action(s) are required from the committee.

- V. RECONVENE IN EXECUTIVE SESSION PURSUANT TO CHAPTER 551, TEXAS GOVERNMENTCODE FOR THE FOLLOWING: The committee reconvened in Executive Session at 2:47 p.m.
- VI RECONVENE IN OPEN SESSION FOR DELIBERATION(S) AND/OR ACTION(S) DEEMED NECESSARY REGARDING ANY MATTER LISTED ON THE CLOSED SESSION AGENDA, PARAGRAPHS V. A, B, C, D, E, F AND G. The committee reconvened in open session at 3:01p.m.

VII ADJOURN

There being no further business to discuss the meeting was adjourned at 3:06 p.m.

Roy Lowry D.O.

5-4-17

Date