Bartlett Regional Hospital

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Board Quality Committee November 10, 2021 Minutes

Called to order at 3:28 p.m. by Board Quality Committee Chair, Rosemary Hagevig

Board Members: Rosemary Hagevig, Mark Johnson, Hal Geiger, Mark Johnson

Staff: Deborah Koelsch, Autumn Muse, Gail Moorehead*, Jerel Humphrey, Holly Cockerill, Jeannette Lacey, Racheal Gladhart, Karen Forrest*, Kim McDowell*, Dallas Hargrave*, Vlad Toca*

Guests: Bridgett Dowd, KTOO

Mark Johnson made a MOTION to approve the minutes from September 8, 2021 Board Quality Meeting. Kenny Solomon Gross seconded, they are approved.

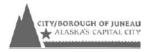
Old Business: None

Standing Agenda Items:

• None

New Business: <u>**QAPI Presentation – Case Management**</u>

- Ms. Lacey presented on three Case Management process improvement projects. She provided an overview of the Case Management department and their contributions to the hospital and our patients. The discharge planning and outlier chart reviews was the first project presented. Our geographic location is a barrier to transition patients to the next level of care. The improvement opportunities include earlier discharge planning, provider participation with the discharge planning process and demonstrating the severity of illness with documentation and coding. The department worked on streamlining their processes by working with Clinical IT by adding a facility referral section. This ensures that things don't fall through the cracks. Patients are provided a provider list and the CMS ratings on possible placement options.
- The Hello B.A.B.Y. Plan of Safe Care Program was presented by Ms. Gladhart. The program is meant to engage families with perinatal substance use and develop plans to keep babies safer and families healthier. BRH partners with ROCK Juneau to provide this program. BRH has had 42 families referred, 81% of the referrals were enrolled in the program. This program lets us reach a vulnerable population of Juneau. Bartlett will participate in the state-wide process improvement program the Alaska's Perinatal Quality



Collaborative. We currently meet five of the 11 key changes the program is targeting. Ms. Gladhart shared the major gaps we are experiencing within our community including transportation, respite childcare, parenting skills, diaper insecurities and mental health in the fourth trimester.

• The Oncology Program presentation will be sent to the Board of Directors via email.

Fall Vaccine Update

• Tabled to next Board of Directors meeting

Update on JC New Board Requirements

• Ms. Muse gave an update on The Joint Commission's possible plan to do a hybrid survey. Our survey schedule will remain the same. Ms. Muse gave an update of new standards. In July of 2022, there will be a large overhaul in the Emergency Management requirements. Ms. Muse invited the Board of Directors to the Joint Commission Survey Boot Camp and the upcoming Breakfast Briefings. There was a request to have the boot camp recorded and provided to the board at a later date. Ms. Hagevig responded that watching it at a later date would remove the chance to have an interaction with staff. Mr. Hargrave will check with Mr. Palmer regarding the posting of the meeting.

Review of Current CMS Quality Measures/Reporting

- Ms. Moorehead gave an overview of the current CMS quality measures and reporting and using measurement for quality improvement. The three aims for the National quality strategy are better health, better care and lower costs. We make care safer by improving support for a culture of safety, reducing inappropriate and unnecessary care and preventing and minimizing harm in all settings. Ms. Moorehead shared our current objectives to promote effective safe care. Ms. Moorehead shared her vision for future reporting to the Board of Directors regarding Quality measures.
- Discussion surrounding Sentinel Event reporting and how that information is provided to the Board of Directors.

Review of the Governance Conference

• Ms. Hagevig would like to review the presentations provided today again and share them with Strategic Planning. Mr. Solomon-Gross expressed how important Quality is to the hospital. Ms. Hagevig would like to share the recordings from the conference with the Quality Department.

Adjournment: 5:06 p.m.

Next Quality Board meeting: January 13, 2022 at 3:30 pm

