



Quality Council
Meeting Minutes
December 12th, 2017

MEMBERS PRESENT: **Dr. M. Jones, Dr. W. Bird, C. Schott, Dr. Hahn, C. Zander, Dr. K. Martin, J. Van Osdal, T. Jensen, M. Benson, A. Moore, T. Jensen, S. Brown, K. Geil, B. Schaab, P. Joines, S. Stage**
 OTHERS PRESENT: **T. Lawson, K. Renkes**

AGENDA ITEM	DISCUSSION/CONCLUSION	RECOMMENDATIONS/ PERSON RESPONSIBLE
Call to Order	Dr. Jones called the meeting to order at 12:30.	
Review of Meeting Minutes	Minutes were approved.	Continue to report.
Review of CEC Summary	Approved.	Continue to report.
Reports:		
PI Dashboard	<p>HCAHPS scores: slightly down from last quarter, keep in mind last quarter was one of our best. The Discharge info measure has fallen below the nation median, this was in part to new nursing staff. July was identified as the fallout month.</p> <p><u>Patient Safety indicators:</u> Fallouts include Iatrogenic Pneumothorax rate and postoperative respiratory failure. PSI-90 is being removed from VBP.</p> <p>Infection rates: C.diff infections lab identified is the only fallout for 3rd quarter. Inappropriate testing being done on C.diff positive patients which is causing our infection rates to increase. New C.diff testing guidelines are being released in 4-6 weeks, at this time, new education will be rolled out. Potential for introducing hard-stops as related to decrease inappropriate testing. New process audits are being done to prevent catheter associated UTIs.</p> <p><u>Mortality rates:</u> Heart failure is the only fallout for these rates.</p> <p><u>Readmission rates:</u> COPD and Heart failure are the only fallouts for these rates. Discussion was had at CEC to bring high-risk readmission patients back in for follow-up within 2-4 days.</p>	<p>Quality to continue to share respective metrics (opportunities and success) with departments and teams.</p> <p>Heavy focus on C-diff infection rates and introducing process changes to ordering. Will await for new guidelines for next steps.</p>
Clinical Dashboard	<p>Rehab services- Physical Therapy: did not meet goal. Have had a tremendous increase in demand for services. Many new therapists have been brought on and have worked through getting them licensed. New Orthopedic Surgeon has been increasing demand for PT as well.</p> <p>Echo/Stress times: 2nd quarter we saw some improvements. 3rd quarter times have increased. One provider was the main outlier for this increase and has been spoken to. This un-blinded data has gone to Cardiology section.</p>	<p>Continue to report.</p> <p>Dr. Bird will speak to the Cardiologist and discuss any opportunities in the process of timely reads.</p>

	<p>Primary C-section rate: This rate is now being calculated slightly differently.</p> <p>Anesthesiology PONV: Most fallouts in the past were documentation issues with the Anesthesia Charge sheets. Changes were made to the documentation and the rate improved. Recently the rate has fallen, investigating issues. Individual information shared with all Anesthesia providers.</p> <p>Diabetes measures: Working to get report on Statin use instead as per latest evidence. Monitoring to see if the Wisconsin Collaborative will update their goals related to most recent change in blood pressure parameters.</p>	
Hospital Compare Dashboard	<p>Correction to "2016-2017 Flu Season YTD", should read "2017-2018 Flu Season YTD".</p> <p>ED times: Recent times have improved greatly.</p> <p>Aspirin at arrival (OP-4), Median time from door to doc (OP-20) and Median time to pain management for long bone (OP-21) measures will be removed and no longer abstracted as of April 2018.</p>	Continue to report.
New Business:		
2018 Quality Measures	Please refer to attachment F for a full breakdown of upcoming changes.	Continue to monitor and report.
MIPs Update	We are expecting a score of 100 out of 100 points for the 2017 year thus far. Please refer to attachment G for a full breakdown of MACRA/MIPs program.	Continue to report.
Leap Frog	See attachment H for breakdown. CGH currently has rating of "C". Opportunities mainly in areas of infection rates. Bundle underway for SSI-colon. C-diff will be priority focus for some time and seeing its impact on this grade. Phil is investigating whether it would be advantageous for CGH to participate in free Leap Frog survey.	Continue to report.
Hospital Compare Star Ratings	Our current star rating is 4 stars up from 3 with the recent methodology enhancements per CMS. High level: only those organizations that submit enough measures will receive a star rating and then compared among each other.	Continue to report.
Quality & Patient Safety Report	Refer to attachment J for the full report.	Continue to report.
Other	VBP: with the final report from CMS released in Nov 2017, CGH is now expecting a \$26,500 gain applied to FY18 discharges instead of the original expected \$5,000 loss described in the preliminary reports.	Continue to report.
Next Meeting	March 13 th , 2017	