



November 9, 2023

TO: Legal Counsel

News Media

Salinas Californian

El Sol

Monterey County Herald

Monterey County Weekly

KION-TV

KSBW-TV/ABC Central Coast

KSMS/Entravision-TV

The next regular meeting of the **QUALITY AND EFFICIENT PRACTICES COMMITTEE - COMMITTEE OF THE WHOLE** of the **SALINAS VALLEY HEALTH**¹ will be held **MONDAY, NOVEMBER 13, 2023, AT 8:30 A.M., CEO CONFERENCE ROOM, SALINAS VALLEY HEALTH MEDICAL CENTER, 450 E. ROMIE LANE, SALINAS, CALIFORNIA** or via **TELECONFERENCE** (*visit [SalinasValleyHealth.com/virtualboardmeetinglink](https://www.SalinasValleyHealth.com/virtualboardmeetinglink) for Access Information*).

A handwritten signature in black ink, appearing to read "Pete Delgado".

Pete Delgado
President/Chief Executive Officer

Committee Members: Catherine Carson, Chair; Rolando Cabrera, MD, Vice Chair; Pete Delgado, President/CEO; Allen Radner, MD, Chief Medical Officer; Clement Miller, Chief Operating Officer; Lisa Paulo, Chief Nursing Officer; Rakesh Singh, MD, Medical Staff Member; Michele Averill, Community Member

**QUALITY AND EFFICIENT PRACTICES COMMITTEE
2023 - COMMITTEE OF THE WHOLE
SALINAS VALLEY HEALTH¹**

**MONDAY, NOVEMBER 13, 2023, 8:30 A.M.
DOWNING RESOURCE CENTER, CEO CONFERENCE ROOM 117**

**Salinas Valley Health Medical Center
450 E. Romie Lane, Salinas, California
or via Teleconference
(Visit SalinasValleyHealth.com/virtualboardmeeting for Access Information)**

AGENDA

1. Call to Order / Roll Call
2. Approve the Minutes of the Quality and Efficient Practices Committee Meeting of September 25, 2023. (DELGADO)
 - Motion/Second
 - Public Comment
 - Action by Committee/Roll Call Vote
3. Approve the Minutes of the Quality and Efficient Practices Committee Meeting of October 23, 2023. (DELGADO)
 - Motion/Second
 - Public Comment
 - Action by Committee/Roll Call Vote
4. Patient Care Services Update (PAULO)
Rehabilitation Services – Unit Practice Council Report
5. Fall 2023 Leapfrog Score (KUKLA)
6. Public Comment

This opportunity is provided for members of the public to make a brief statement, not to exceed three (3) minutes, on issues or concerns within the jurisdiction of this District Board which are not otherwise covered under an item on this agenda.
7. Closed Session
8. Reconvene Open Session/Report on Closed Session
9. Adjournment
The next Quality and Efficient Practices Committee Meeting is scheduled for **Monday, December 11th, 2023 at 8:30 a.m.**

¹Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

This Committee meeting may be attended by Board Members who do not sit on this Committee. In the event that a quorum of the entire Board is present, this Committee shall act as a Committee of the Whole. In either case, any item acted upon by the Committee or the Committee of the Whole will require consideration and action by the full Board of Directors as a prerequisite to its legal enactment.

The Committee packet is available at the Committee Meeting, at www.SalinasValleyHealth.com, and in the Human Resources Department of the District. All items appearing on the agenda are subject to action by the Committee.

Requests for a disability related modification or accommodation, including auxiliary aids or services, in order to attend or participate in a meeting should be made to the Board Clerk during regular business hours at 831-759-3050. Notification received 48 hours before the meeting will enable the District to make reasonable accommodations.

**QUALITY & EFFICIENT PRACTICES COMMITTEE
COMMITTEE OF THE WHOLE
SALINAS VALLEY HEALTH**

AGENDA FOR CLOSED SESSION

Pursuant to California Government Code Section 54954.2 and 54954.5, the board agenda may describe closed session agenda items as provided below. No legislative body or elected official shall be in violation of Section 54954.2 or 54956 if the closed session items are described in substantial compliance with Section 54954.5 of the Government Code.

CLOSED SESSION AGENDA ITEMS

1. Report of the Medical Staff Quality and Safety Committee
 - Critical Care/Progressive Care – C. Spencer
 - Perinatal Services – J. Vasher
2. Quality and Safety Board Dashboard Review – A. Kukla
3. Consent Agenda:
 - Organ/Tissue Procurement
 - Taylor Farms
 - Resuscitation Committee
 - Nursing Admin Transport/Interpreter Services
 - Nursing Education
 - Laboratory Services

ADJOURN TO OPEN SESSION

CALL TO ORDER
ROLL CALL

(Chair to call the meeting to order)

DRAFT SALINAS VALLEY HEALTH¹
QUALITY AND EFFICIENT PRACTICES COMMITTEE MEETING
COMMITTEE OF THE WHOLE
MEETING MINUTES SEPTEMBER 25, 2023

Committee Members Present:

In-person: Chair Catherine Carson, Pete Delgado, Clement Miller, Lisa Paulo, and Allen Radner MD.

Via teleconference: Vice Chair Rolando Cabrera, MD., Michele Averill, and Rakesh Singh MD.

Committee Members Absent: None

Other Board Members Present, Constituting Committee of the Whole: Via teleconference: Director Juan Cabrera, and Director Victor Rey

Director Victor Rey in at 8:41 a.m.

Director Juan Cabrera in at 8:41 a.m.

1. CALL TO ORDER/ROLL CALL

A quorum was present and Chair Carson called the meeting to order at 8:33 a.m. at the Downing Resource Center CEO Conference room 117.

2. APPROVAL OF MINUTES FROM THE QUALITY AND EFFICIENT PRACTICES COMMITTEE MEETING OF AUGUST 21, 2023.

Approve the minutes of the Quality and Efficient Practices Committee for the August 21, 2023 meeting, as presented. The information was included in the Committee packet.

Comments from the Board:

None

PUBLIC COMMENT:

None

MOTION:

Upon motion by Committee member Lisa Paulo, second by Committee member Allen Radner, MD, the minutes of August 21, 2023, of the Quality and Efficient Practices Committee Meeting were approved, as presented.

ROLL CALL VOTE:

Ayes: Chair Carson, Vice Chair Cabrera, MD, Averill, Delgado, Miller, Paulo, Radner, MD, and Singh, MD;

Noes: None;

Abstentions: None;

Absent: None

Motion Carried

3. PATIENT CARE SERVICES UPDATE

Received a presentation from Avrie Calabro, Staff Nurse II on the Patient Care Services update. Ms. Calabro reviewed the current projects of the Peri-Operative Clinical Practice Council. The projects include: outpatient surgery relocation; perioperative Hospital Acquired Pressure Injury (HAPI)

¹Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

prevention; enhancing patient experience; annual competency; bladder management with cath lab; and the standardized workflow for Diagnostic Imaging (DI) patients receiving anesthesia. The Council has four initiatives this year. The first is to improve the pre-admission testing process which is supported by the Quality Department. Second, is the surgery cancellation process. Third, are updates being made for family patients in surgery. They will be integrating Tiger Connect to message families on the status of their loved ones in the operating room. The last initiative is patient warming, planned to go live with this fall/winter.

4. PUBLIC COMMENT

No public comment

5. CLOSED SESSION

Chair Carson announced that the item to be discussed in Closed Session is *Hearings/Reports* – as reported on the closed session agenda. The meeting recessed into Closed Session under the Closed Session protocol at 9:08 a.m.

6. RECONVENE OPEN SESSION/REPORT ON CLOSED SESSION

The Committee reconvened for Open Session at 9:43 a.m., Chair Carson reported that in Closed Session, the Committee discussed *Hearings/Reports* – as reported on the closed session agenda.

The Committee received and accepted the following reports:

1. Report of the Medical Staff Quality and Safety Committee
 - a. Opioid/Pain Committee
 - b. Sepsis
2. Quality and Safety Board Dashboard Review
3. Balanced Scorecard – discussion HAC index and hand hygiene
4. MERP attachment updates and the Medication Error Analysis
5. Consent agenda items
 - a. Cath Lab/Cardiac Rehab/CDOC
 - b. Environmental Services
 - c. Pathology Tissue Review 1-2Q 2023
 - d. Pharmacy & Therapeutics/Infection Prevention Full Report
 - e. Service Excellence

7. ADJOURNMENT

There being no other business, the meeting adjourned at 9:43 a.m. The next Quality and Efficient Practices Committee Meeting is scheduled for **Monday, October 23, 2023, at 8:30 a.m.**

Catherine Carson, Chair
Quality and Efficient Practices Committee

DRAFT SALINAS VALLEY HEALTH¹
QUALITY AND EFFICIENT PRACTICES COMMITTEE MEETING
COMMITTEE OF THE WHOLE
MEETING MINUTES OCTOBER 23, 2023

Committee Members Present:

In-person: Chair Catherine Carson, Pete Delgado, Clement Miller, Lisa Paulo, Allen Radner MD., and Alison Wilson, MD.

Via teleconference: Vice Chair Rolando Cabrera, MD., and Michele Averill

Committee Members Absent: None

Other Board Members Present, Constituting Committee of the Whole: Directors Juan Cabrera and Victor Rey (via teleconference)

Michele Averill in at 8:33 a.m., left at 9:26 a.m.

Pete Delgado joined in at 8:33 a.m.

Director Juan Cabrera in at 8:52 a.m.

1. CALL TO ORDER/ROLL CALL

A quorum was present and Chair Carson called the meeting to order at 8:30 a.m. at the Downing Resource Center CEO Conference room 117.

2. PATIENT CARE SERVICES UPDATE: MEDICAL SURGICAL UNIT PRACTICE COUNCIL

Anna Paz Mercado, BSN, RN, Oncology Chair and Natasha Limosnero, BSN, RN, Oncology, Co-Chair, gave an update on the Council's work. Projects have included Common Medication Handout, Partner in Care, and Nursing Engagement and the impact on patient experience scores.

BOARD MEMBER DISCUSSION: Further discussion with staff clarified the following: Implementation of new protocols for Hospital-Acquired Pneumonia (HAP) have improved outcomes for COVID-19. Patients are educated on oral care during and after hospitalization as part of pneumonia prevention.

3. CHEST PAIN PROGRAM REPORT

Michael O'Mahoney, Disease Specific Care Coordinator, provided an overview of the STEMI and TJC Performance Measures for the Chest Pain Program.

BOARD MEMBER DISCUSSION: Further discussion with staff clarified the following: Using discharge checklists is an important process for staff to follow and every discharge is reviewed to ensure staff compliance.

4. MAMMOGRAPHY PROGRAM REPORT

Amy Lantis Stemerman, MD, Medical Director, Breast Health Center, Co-Medical Director, Diagnostic Imaging, provided a Quality Update 2023 for the Salinas Valley Health Nancy Ausonio Breast Health Center. Dr. Stemerman reported the breast health center meets or exceeds national quality screening mammography standards, mammography regulations are some of the strictest federal regulations in

¹Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

medicine and patients/clinicians should feel confident about the quality and safety of screening at the breast center.

BOARD MEMBER DISCUSSION: Further discussion with staff clarified the following:

Dr. Stemerman confirmed that they do offer AI for 3D images. The highest trained mammographers use this and it's effective. Ms. Carson stated there is a 6-month wait in scheduling mammograms in San Jose and she was able to make her mammogram appointment at the Nancy Ausonio Mammography Center quickly. Allen Radner, MD, noted that during the transition in radiologists both Dr. Stemerman and Dr. Michael Basse helped out with the transition. He thanked them both for their help. They have a great Radiology Team.

5. PUBLIC COMMENT

No public comment

6. CLOSED SESSION

Chair Carson announced that the item to be discussed in Closed Session is *Hearings/Reports – Hearings/Reports – Report of the Medical Staff Quality and Safety Committee, Quality and Safety Board Dashboard Review, and the Consent Agenda*. The meeting recessed into Closed Session under the Closed Session protocol at 8:58 a.m.

7. RECONVENE OPEN SESSION/REPORT ON CLOSED SESSION

The Committee reconvened for Open Session at 9:37 a.m., Chair Carson reported that in Closed Session, the Committee discussed *Hearings/Reports* as listed on the closed session agenda.

The Quality and Efficient Practices Committee received and accepted the reports listed on the Closed Session agenda, no additional action was taken.

8. ADJOURNMENT

There being no other business, the meeting adjourned at 9:38 a.m. The next Quality and Efficient Practices Committee Meeting is scheduled for **Monday, November 13, 2023, at 8:30 a.m.**

Catherine Carson, Chair
Quality and Efficient Practices Committee

Board Paper: Quality & Efficient Practices Committee

Agenda: Patient Care Services Update
Executive: Lisa Paulo, MSN/MPA, RN
Sponsor: Chief Nursing Officer
Date: November 13, 2023

Pillar/Goal Alignment:

Service People Quality Finance Growth Community

QUALITY:

Rehab Services Unit Practice Council:

- Stephanie Sterner, MS, OTR/L [*Chair*]
- Jan Martha Conducto, MS, OTR/L [*Co-Chair*]
- Matthew Countryman, PT, DPT
- Michelle Shaw, PT, DPT
- Katilin Roe, MA, CCC-SLP
- Paige Randall, MS, CCC-SLP
- Ashley Pugh, MS, CCC-SLP
- Jessica Graziano, PT, DPT, SCS [*Advisor*]

Council Purpose:

Identify and implement standards of care and evidence based practice specific to rehabilitation services including physical therapy, occupational therapy, and speech-language pathology

Goals:

- Foster a culture of professional development
- Improve quality and efficiency of patient care
- Establish a mechanism through which the practicing professional is able to fully participate in the decisions which affect rehabilitation related practice, quality, competence and knowledge

Current Initiatives

Career Ladder:

- PT** (Physical Therapy)
- OT** (Occupational Therapy)
- SLP** (Speech-Language Pathologist)

◆ Goals

- Encourage development of advanced clinical skills
- Retention and recruitment of staff
- Recognize and reward Clinical Excellence
- Cultivate culture and promote professional growth
- Align with other healthcare institutions

Current Initiatives

FEES (Fiberoptic Endoscopic Evaluation of Swallowing)

- Implemented September 2023

Benefits:

- **Significantly reduced delay in patient care and safe initiation of diet**
(Decreased time from order placed to time of study)

Average time from order to completion	2.1 hrs
Percentage of patients who were NPO (Nothing by mouth) and able to resume PO (Per oral/orally) diet safely following study	75%

Current Initiatives

OT Breast Cancer Program Development

- Physician Champion: Dr. Geetha Varma
- 2023 Cancer Program Goal:
 - **To increase the percentage of pre-op breast cancer OT referrals from 41% to 90% by 12/31/23**
 - **Surgeries defined as breast cancer directed surgeries with surgical lymph node procedure**

	2022 (Jan 1-Dec 31)	2023 (Jan 1 – Oct 29)
Surgeries Performed	108	96 (performed YTD)
Total OT Referrals	47	66
Referral Rate	43.5%	68.8%

**Future initiative: Post-operative Rehab Services*

Future Initiatives

- **Mobilization of Patients on Mechanical Ventilation**
- **Post-Extubation Swallow Evaluation Order Set**
- **Update Rehab Guidelines**
 - **Cardiac, Shoulder, Spine**
- **Mobilization of Patients on CRRT** (Continues Renal Replacement Therapy)
- **TENS** (Transcutaneous Electrical Nerve Stimulation) **unit and non-pharmacological pain management**

Patient Care Services Update



Presented by:
Lisa Paulo, MSN/MPA, RN
Chief Nursing Officer

Featuring:
Rehab Services Unit Practice Council

November 13, 2023

Rehab Services Unit Practice Council

Members:

Stephanie Sterner, M.S., OTR/L (Chair)

Jan Martha Conducto, M.S., OTR/L (Co-Chair)

Matthew Countryman, PT, DPT

Michelle Shaw, PT, DPT

Kaitlin Roe, M.A., CCC-SLP

Paige Randall, M.S., CCC-SLP

Ashley Pugh, M.S., CCC-SLP

Jessica Graziano, PT, DPT, SCS (Advisor)



Rehab Services UPC



Council Purpose:

Identify and implement standards of care and evidence based practice specific to rehabilitation services including physical therapy, occupational therapy, and speech-language pathology

Goals:

- Foster a culture of professional development
- Improve quality and efficiency of patient care
- Establish a mechanism through which the practicing professional is able to fully participate in the decisions which affect rehabilitation related practice, quality, competence and knowledge

Current Initiatives

Career Ladder:

- PT** (Physical Therapy)
- OT** (Occupational Therapy)
- SLP** (Speech-Language Pathologist)

◆ Goals

- Encourage development of advanced clinical skills
- Retention and recruitment of staff
- Recognize and reward Clinical Excellence
- Cultivate culture and promote professional growth
- Align with other healthcare institutions

Current Initiatives

FEES (Fiberoptic Endoscopic Evaluation of Swallowing)

- Implemented September 2023

Benefits:

- **Significantly reduced delay in patient care and safe initiation of diet (Decreased time from order placed to time of study)**

Average time from order to completion	2.1 hrs
Percentage of patients who were NPO (Nothing by mouth) and able to resume PO (Per oral/orally) diet safely following study	75%

Current Initiatives

OT Breast Cancer Program Development

- Physician Champion: Dr. Geetha Varma
- 2023 Cancer Program Goal:
 - **To increase the percentage of pre-op breast cancer OT referrals from 41% to 90% by 12/31/23**
 - **Surgeries defined as breast cancer directed surgeries with surgical lymph node procedure**

	2022 (Jan 1-Dec 31)	2023 (Jan 1 – Oct 29)
Surgeries Performed	108	96 (performed YTD)
Total OT Referrals	47	66
Referral Rate	43.5%	68.8%

**Future initiative: Post-operative Rehab Services*

Future Initiatives

- **Mobilization of Patients on Mechanical Ventilation**
- **Post-Extubation Swallow Evaluation Order Set**
- **Update Rehab Guidelines**
 - **Cardiac, Shoulder, Spine**
- **Mobilization of Patients on CRRT (Continues Renal Replacement Therapy)**
- **TENS (Transcutaneous Electrical Nerve Stimulation) unit and non-pharmacological pain management**



Questions?

Thank you!

Fall 2023 Leapfrog Score



Leading the Way in Patient Safety

Our medical center is nationally recognized for excelling in quality and safety. We earned the 8th consecutive **"A" Hospital Safety Grade** from The Leapfrog Group.

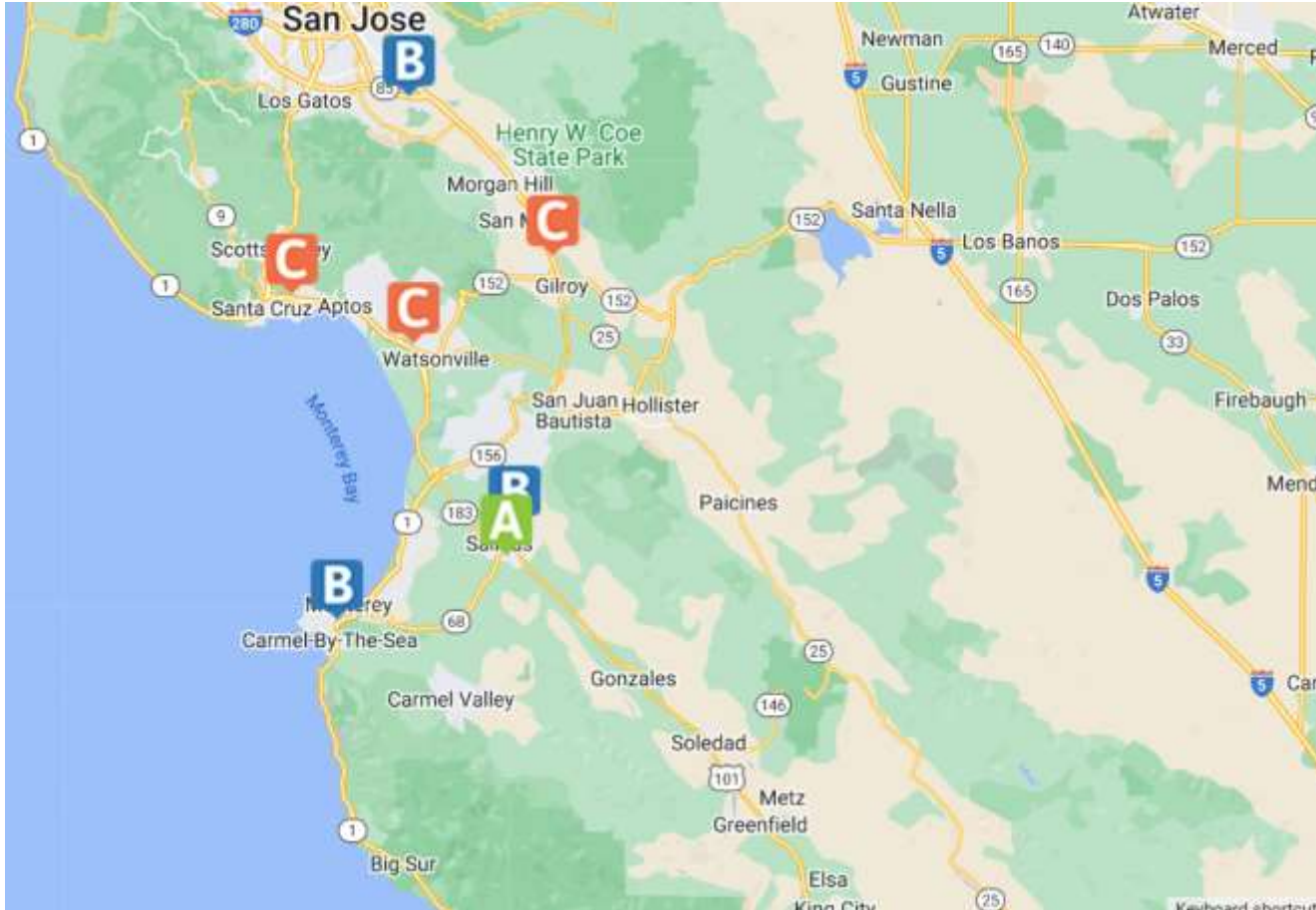
Congratulations to our outstanding team, keeping our community rising in good health - and safety!



Learn more about our awards
by scanning the QR code.



Fall 2023 Leapfrog Scores



PUBLIC COMMENT

CLOSED SESSION

*(Report on Item to be
Discussed in Closed Session)*

*RECONVENE OPEN SESSION/
REPORT ON CLOSED SESSION*

ADJOURNMENT