QUALITY ASSESSMENT & OVERSIGHT COMMITTEE MEETING
Immediately following the ACO Board of Directors Meeting
September 11, 2019

1. **NOTICE**

Notice of this meeting is attached to the official Minutes as EXHIBIT I. The official Agenda for this meeting, as presented for the consideration of the Committee, is attached to the official Minutes as EXHIBIT II.

2. **CALL TO ORDER** 10:53 a.m.

Chair Gregoire, asked that a moment of silence be given for the 3,000 victims that perished during 9/11 and the nearly 3000 victims that past as a result of 9/11.

3. **COMMITTEE MEMBERS**

*Present:* Commissioner Nancy W. Gregoire, Chair
Commissioner Ray T. Berry
Commissioner Stacy L. Angier

*Senior Leadership*

*Additionally Present:* Christopher T. Ure/ Commissioner, Gino Santorio/President/Chief Executive Officer, Alan Goldsmith/Chief Administrative Officer, Alex Fernandez/Chief Financial Officer, Linda Epstein/Corporate General Counsel, Jerry Del Amo/Sr. Associate, General Counsel

4. **PUBLIC COMMENTS** None

* Please note, item (6), Approval of Minutes, was heard prior to item (5), Election of Quality Assessment and Oversight Committee Officers.

6. **APPROVAL OF MINUTES**

Approval of the Quality Assessment and Oversight Committee meeting minutes, dated July 24, 2019.

**MOTION** It was **moved** by Commissioner Angier, **seconded** by Commissioner Berry, to:

Approve the Quality Assessment and Oversight Committee Meeting minutes, dated July 24, 2019.

Motion **carried** unanimously.
5. **ELECTION OF QUALITY ASSESSMENT & OVERSIGHT COMMITTEE OFFICERS**

**MOTION** It was moved by Commissioner Berry, seconded by Commissioner Gregoire, to:

Appoint Commissioner Gregoire as Chairperson of the Quality Assessment and Oversight Committee for the Board of the North Broward Hospital District.

Motion carried unanimously.

**MOTION** It was moved by Commissioner Berry, seconded by Commissioner Gregoire, to:

Appoint Commissioner Angier as Vice Chairperson for the Quality Assessment & Oversight Committee for the Board of the North Broward Hospital District.

Motion carried unanimously.

7. **CONSENT AGENDA**

Mr. Barry Gallison, Director of Risk and Quality Management, thanked Commissioner Gregoire for attending the Risk Practice Counsel meeting.

He requested that the committee approve the quarterly reports listed on the Consent Agenda, items 8.1 through 8.10.

**MOTION** It was moved by Commissioner Berry, seconded by Commissioner Angier, that:

The Quality Assessment and Oversight Committee approve all items on the Consent Agenda.

Motion carried unanimously.

8. **QUARTERLY REPORTS CONSENT AGENDA (PowerPoint Slides)**

8.1. Community Health Services: Healthcare for Homeless  
8.2. Population Health  
8.3. Gold Coast Home Health & Hospice  
8.4. Medicare Mortalities  
8.5. Environment of Care  
8.6. Sepsis Prevention  
8.7. Infection Prevention  
8.8. Hospital Acquired Pressure Injury  
8.9. Grievances  
8.10. Risk Management Regional Reports
9. **QUALITY AND SAFETY AGENDA, PowerPoint Slides**

9.1. Ambulatory- Physician Practice Update

Mr. Gallison reported on the quarterly results for quality outcomes and utilizations for Broward Health’s providers, as referenced below.

- AVMED Medicare Quality Outcomes
- AVMED Utilization
- HUMANA RESULTS (May 2019)
- MY BLUE Quality Outcomes
- MY BLUE Quality Outcomes - Utilizations
- UNITED MEDICARE Quality Outcomes
- COMMUNITY CARE PLAN (CCP)

Mr. Gallison concluded the presentation by providing the action plan for the physician practice group.

9.2. Antimicrobial Stewardship

Mr. Dave Lacknauth, Executive Director of Pharmacy Services, reported on the improvements that the antimicrobial management had within the healthcare system. He detailed improvement on pharmacist interventions around antimicrobial stewardships. Mr. Lacknauth also provided an overview of the ASP policy and procedures.

- BHMC ASP Update (decentralized pilot)
- BH ASP Initiatives

9.3. Patient Engagement

In regards to the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) scores from calendar year 2019 to present, Mr. Lee Ghezzi, Sr. Vice President for Quality and Case Management, presented on the Press Ganey indicators for patient engagement and patient experience. Said reports included results for Star Reports, Value Based Purchasing and Leapfrog.

**BHMC CMS HSCAHPS CY 2019 TO 08/16/2019**

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<th>Discharge Information</th>
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<tr>
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<td>Care Transition</td>
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<tr>
<td>Communication with Nurses</td>
<td>Clean and Quiet Combined</td>
</tr>
<tr>
<td>Communication with Doctors</td>
<td>Cleanliness of Hospital Environment</td>
</tr>
<tr>
<td>Communication about Medicines</td>
<td>Quietness of Hospital Environment</td>
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<td>Responsiveness of Hospital Staff</td>
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9.4. Readmissions Program

Mr. Gallison presented an overview of the Medicare Readmissions Reduction Program between the years of July 1, 2015 and June 30, 2018. An explanation was given regarding Medicare’s 3% at-risk hold back contingent upon performance and the three readmission action plans that were in progress, as seen below:

- Discharge Process
- High Risk Readmissions
- Transitions of Care

In closing, Mr. Gallison shared the potential max penalties at 3% versus actual penalties incurred for 2018 regarding performance.

9.5. Leapfrog Update

Mr. Gallison informed the committee that there were no updates regarding Leapfrog scores and anticipated reporting new data in the following quarter.

10. ADJOURNMENT 11:51 a.m.

MOTION It was moved by Commissioner Angier, seconded by Commissioner Berry, to:

Adjourn the Quality Assessment and Oversight Committee meeting.

Motion carried unanimously.

Respectfully submitted,
Commissioner Stacy L. Angier, Secretary/Treasurer.