

**Jefferson County Public Hospital District No.2**  
**Board of Commissioners**  
**Regular Session Minutes**  
**Feb 3, 2016**  
**Jefferson Healthcare Conf Room**  
**2500 W. Sims Way suite 302**

**Call to Order:**

The meeting was called to order at 3:31 pm by Commission Buhler. Present were Commissioners Buhler, De Leo, Dressler, Kolff and Ready. Also present were Mike Glenn, CEO, Jackie Mossakowski, CNO, Joyce Cardinal, CNO, Lisa Holt, CAO, Brandie Manuel, Executive Director Quality, Kate Burke, Marketing Director, and Suzy White, Administrative Assistant. This meeting is being officially audio recorded by Jefferson Healthcare.

Mike Glenn introduced Jackie Mossakowski new Chief Nursing Officer.

**Minutes:**

- Jan 19 Special Session
- Jan 20 Special Session
- Jan 29 Special Session

Commissioner Kolff made a motion to approve Jan 19 special session minutes as amended, Jan 20 special session minutes as presented and Jan 29 special session minutes as presented. Commissioner Dressler seconded the motion.

**Action:** Motion passed unanimously.

**Patient Story:**

Joyce Cardinal shared a patient story about the wonderful care an inpatient received from several departments at the hospital.

**Required Approvals:**

- Medical Staff Credentials/Appointments/Reappointments
- Medical Staff Policy
- Resolution 2016-06 Equipment Surplus

Commissioner De Leo made a motion to approve Medical Staff Credentials/Appointments/Reappointments as presented, medical staff policy as presented and Resolution 2016-06 to surplus equipment as presented. Commissioner Dressler seconded the motion.

**Action:** Motion passed unanimously.

**Resolution 2016-07:**

- Regular Board Meeting Time Change

Commissioner Ready made a motion to approve Resolution 2016-07 to change the regular meeting time to begin at 3:00 pm as presented. Commissioner Kolff seconded the motion.

**Action:** Motion failed unanimously.

**Public Comment:**

Public was present no comments made.

**Patient Advocate Report:**

Jackie Levin gave a presentation on the 4<sup>th</sup> quarter patient advocate data and 2015 yearend report with an update on the patient family advisory council.

**Administrator's Update:**

Mr. Glenn reported on the recent legislative visit, inpatient psychiatric unit presentation, accountable communities of health activities, Epic healthy planet module, and upcoming events.

**Board Reports:**

Commissioners Dressler and Kolff reported on the medical executive committee. Commissioners Dressler, Kolff and De Leo reported on the immunization presentation by Dr. Marcuse. Commissioner De Leo reported on the legislative visit with Senator Hargrove.

**Board Representatives on Administrative Committees:**

Commissioner Buhler distributed a list of the 2016 Administrative committees with Board Assignments. Further discussion on Board assignments will be at future work sessions.

**Adjourn:**

Commissioner Dressler made a motion to conclude the meeting. Commissioner De Leo seconded the motion.

**Action:** Motion passed unanimously.

Meeting concluded at 4:46 pm.

Approved by the Commission:

President of Commission: Jill Buhler \_\_\_\_\_

Secretary of Commission: Marie Dressler \_\_\_\_\_

# Patient Advocate Report 4th Quarter and End of Year 2015

February 3, 2016

Jackie Levin RN, MS

Jefferson Healthcare

## Days to Acknowledgement/Calls

	2015 Total/Average	4 <sup>th</sup> Quarter 2015	3 <sup>rd</sup> Quarter 2015	2 <sup>nd</sup> Quarter 2015	1 <sup>st</sup> Quarter 2015
Total # of Patient Concerns	Total: 215	61	47	42	65
Current # Open Concerns	21.75 average	27	18	14	28
Days to Acknowledgement Letter	0-7	0-7	0-5	0-7	0-7
<b>Average</b> Days to Acknowledgement Letter	1.4	1	1	2.12	

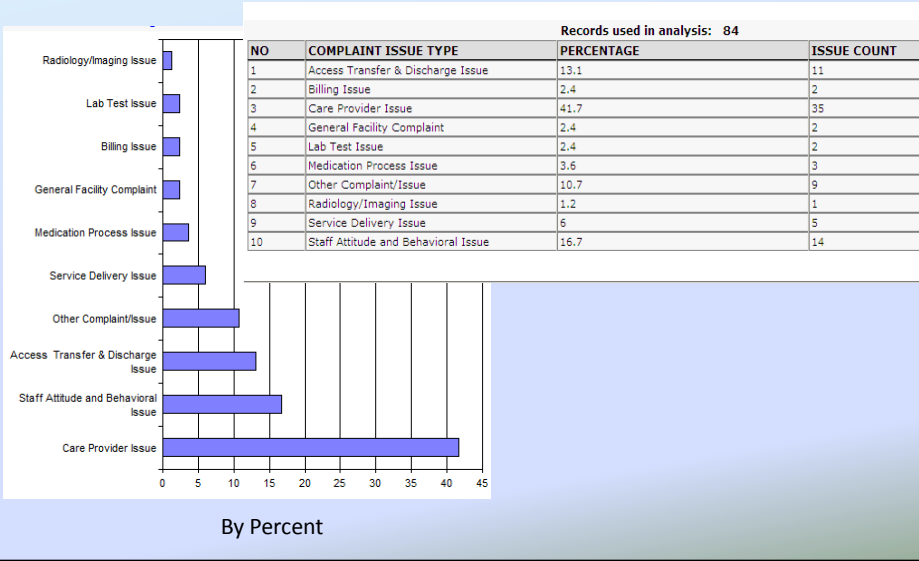
## # of Days Concerns Open

	4 <sup>th</sup> Quarter 2015	3 <sup>rd</sup> Quarter 2015	2 <sup>nd</sup> Quarter 2015	1 <sup>st</sup> Quarter 2015
Low	0	1	1 day	1 day
High	77 days	97 days	86 days	76 days
Average	26	24	15.7 days	25 days
# Records open > 30 Days	21	13 records	3 records	19 records

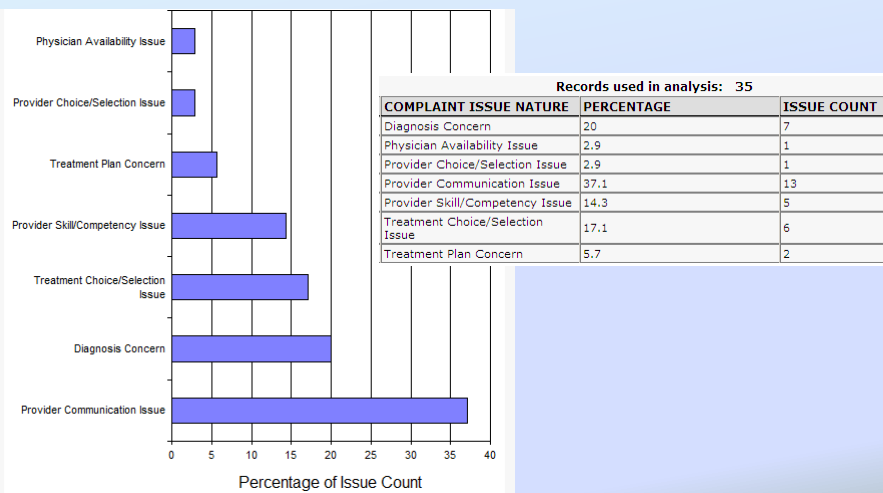
## Peer Review and Grievance Data

	4 <sup>th</sup> Quarter	2015 Total
Peer Review Cases	5	10 (3 <sup>rd</sup> Q)
Grievance Committee Concerns	Zero	1

# Distribution of Concerns



## Care Provider Issues 4th Quarter 2015



## Data 2015 Care Provider and Staff Attitude

	2015 Totals	4 <sup>th</sup> Q	3 <sup>rd</sup> Q	2 <sup>nd</sup> Q	1 <sup>st</sup> Q
<b>Care Provider Issue</b>	<b>118/254</b> <b>46.5%</b>	<b>35/84</b> <b>41.7 %</b>	<b>24/52</b> <b>46.2%</b>	<b>23/53</b> <b>43%</b>	<b>36/65</b> <b>55.4%</b>
<b>Staff Attitude and Behavior</b>	<b>43/254</b> <b>17%</b>	<b>14/84</b> <b>16.7%</b>	<b>8/52</b> <b>15.4%</b>	<b>10/53</b> <b>18.9%</b>	<b>11/65</b> <b>17%</b>

## Data 2011-2015 Care Provider and Staff Attitude

	2015	2014	2013	2012	2011
<b>Care Provider</b>	<b>118/254</b> <b>46.5%</b>	<b>171/302</b> <b>56.6%</b>	<b>156/313</b> <b>49.8%</b>	<b>64/159</b> <b>40.3%</b>	<b>49/162</b> <b>30.2%</b>
<b>Staff Attitude</b>	<b>43/254</b> <b>17%</b>	<b>30/302</b> <b>9.9%</b>	<b>60/313</b> <b>19.2%</b>	<b>27/159</b> <b>17%</b>	<b>33/162</b> <b>20.4%</b>

## Areas of Concern

	4 <sup>th</sup> Quarter 2015	3 <sup>rd</sup> Quarter 2015	2 <sup>nd</sup> Quarter 2015	1 <sup>st</sup> Quarter 2015
ED	15/61 (25%)	5/47 ( 11%)	10/42 (24%)	15/65 (23%)
Clinics	34/61 (56%)	29/47 (62%)	17/42 (40%)	12/65 (18%)
ACU	2/61 (3%)	3/47 (6 %)	5/42 (12%)	
Others: Lab (1) Radiology (1) Surgery (2) Home Health(2) Parking (3) Other (1)	10/61 (16%)	7/47 (15%) Lab (1) Radiology (2) Surgery (2) Hospice (2)	10/42 (24%)	

## Data Per Total Visits/Year

	# of visits 2015	# of concerns 2015	# of concerns /total visits
ED	10,416	45/215 (21%)	45/10,416 (0.43%)
Clinics	62,646	92/215 (43%)	92/68,905 (0.13%)

Focus 1<sup>st</sup> Quarter 2016

## Clinic Issues

### Process Change: Call Center 4th Quarter 2015

- Call Center Concerns
  - Patient frustrations
    - Couldn't reach a live person
    - Did not want to leave a voice message
    - Didn't trust they would get a call back in a timely manner or at all
  - Staff frustrations
    - CC staff unable to reach Nurse, MA or Pod Support
    - Taking time to problem solve vs. directing call
    - Small space to work in, isolated from the team
- Action Steps
  - Kaizen with PFAC involvement



## Changes Made November 1, 2015

- 4 Rings increased to 7 Rings
- Phone Tree
  - If this is an Emergency
  - If you are a Pharmacist or Physician Office
  - If you have a medication refill
  - All other callers stay on the line, VM after 7 rings
- Eventually move CC staff into team area Pods,
- Patients now have access to Clinic Pod phone numbers

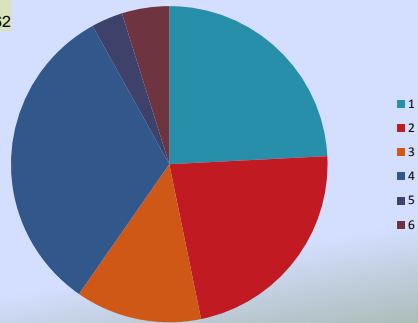
## Call Center Kaizen Outcomes

- Decreased volume of telephone calls related to the lack of need for people to call us multiple times
- Trend is in positive direction
- Increased CC staff satisfaction and less frustration

# Clinic Data June – Dec. 2015

## Quantros and FYI's

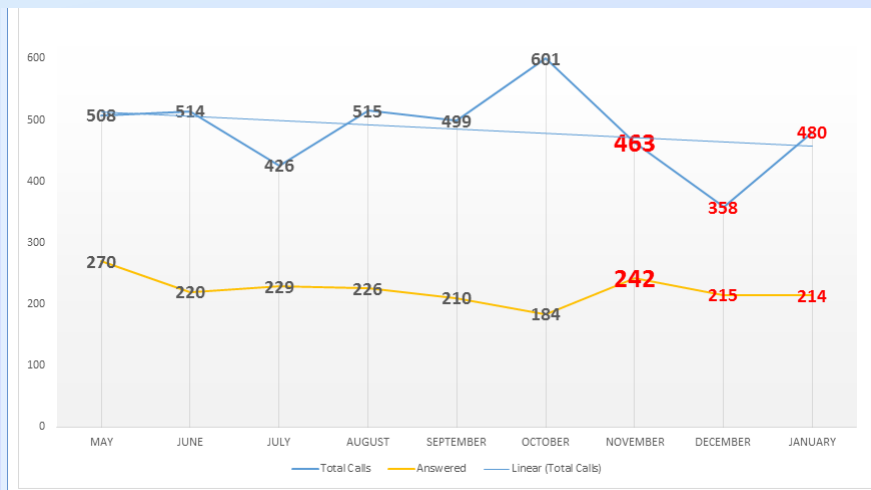
Concern	Totals
1 Care provider issue	15
2 staff behavior and attitude	14
3 Provider competency and treatment plan	8
4 Service issue	20
5 diagnosis concern	2
6 Other complaint	3
<b>Total Concerns</b>	<b>62</b>
	Quantros 34
	FYI 28



## JHPC Call Center Averages

\* Jan included 3 post holiday days that had 950+ calls

\*\* Nov 2nd Go Live



## Clinic Call Center Data

	Average daily call volume	# Calls Answered	Calls Abandoned	% of Calls Answered
October 2015	601	184	49	32%
November 2015	463	242	15	56%
December 2015	358	215	10	63%

## Focus 1<sup>st</sup> Quarter 2016 Clinic Issues

- Team Approach
  - Clinic Directors, SLG Members, Financial Services, Patient Advocates,
  - Soon additional staff and possibly PFAC members
- Use Picker Clinic Data, Quantros, FYIs
- Clinic Audit Form
- Use this approach as pilot for Service Excellence Program

# Clinic Call Audit Form

<b>Employee Name:</b>		
Type of Call:	Insurance:	CSN#
Adult or Peds:	Exam:	HAR#
Language Spoken:	Patients MRN:	
Date/Time of Call:	Patients Name:	
Length of Call:		
<b>Introduction</b>	Introduced Self:	
	Introduced Department:	
	Safety Keywords:	
<b>Patient Identifiers</b>	Patients Name:	
	Date of Birth:	
<b>Call Disposition</b>	HIPPA Compliant:	
	Appropriate Tone/Voice:	
	Positive Attitude:	
	Displayed Confidence:	
<b>Appointment Details:</b>	Displayed Professionalism:	
	Confirmed documented:	
	Exam/Procedure:	
	Date/Time:	
	Do you need directions:	
Do you have questions:		
Thank Patient:		

## TeamSTEPPS



- 3 Daylong Programs held
- Directing a common language to communicate patient safety issues and enhance team performance.
  - Briefing, Huddles, Debrief
  - SBAR (Situation, Background, Assessment, Recommendation)
  - CUS (I'm concerned, I'm Uncomfortable, This is a patient Safety Issue)

## Patient Family Advisory Council Goal 2016

### Increase Membership on Hospital Committees

- Ethics
- Palliative Care
- Ad Hoc Committees: Hand Washing Adherence
- Service Excellence
- Patient Financial Services

## Other Patient Advocate Work

- Palliative Care Committee
- Surgical Quality Committee and Orthopedic Rounding
- Ethics Committee
- Patient Family Advisory Council
- Work with staff on communication style
- Mindfulness Courses
  - Cardiac Rehab (2/12 class sessions)
  - 8 Week Mindfulness program (community and staff)
  - Exercise and Thrive Program (1 class per several week program)
  - Working on how to bring this to providers and staff

**Questions?**

# Administrator's Report

February 3, 2016



## Advocacy Update

- Mental Health Care
- Single Payer Healthcare



## Inpatient Psychiatric Unit Presentation

- March 2 Board Meeting

## Accountable Communities of Health

- Eligible for certification
- Establishing governing bylaws
- Hiring an Executive Director
- Preparing for payment reform



## Healthy Planet

- Epic module for population health

## Coming Events

- Provider Engagement Dinner, February 9
- Well Hearts Luncheon, February 5