Minutes of the Quality of Care and Patient Safety Committee meeting of the Board of Managers of the Dallas County Hospital District, held Tuesday, August 28th, 2024, scheduled for 10:00 a.m. in the WISH Building Conference Room (02-175) at Parkland Health and via WebEx. These minutes do not constitute a certified agenda from the meeting.

I. Attendance and Call to Order

Committee Chair Elizabeth Palacios, MD, noted that a quorum was physically present and called the meeting to order at 10:00 am. Committee members Eric G. Bing, MD, Farida Minner, RN; and Byron Cryer, MD attended in-person.

Board Member attendees included: Board Chair Marjorie Petty, JD, Reina Gonzalez, JD; Vincent Hall, and Ramon Miguez PE.

Staff Present (via Webex and in-person) included:
Brett Moran, ACMO-CMIO
Carmen Bowling, Interim SVP Nursing
David Alexander, SVP Nursing
Dawn Marchetto, SVP Nursing
Edmundo Castañeda, EVP & Chief Operating Officer
Felicia Miller, EVP & Chief Talent Officer
Fred Cerise, President & CEO
Gretchen Blake, VP Quality & Clinical Effectiveness
James Griffin, President of the Medical Executive Committee
James Orrison, Administrative Resident
Joseph Chang, SVP & CMO
Joe Longo, SVP/Chief Information Officer
Judy herrington, SVP Nursing via Webex
Karen Garvey, VP Safety & Clinical Risk Management
Kathleen Doherty, VP Nursing Surgical Services
Michael Lane, SVP Chief Quality Safety Officer
Morgan Simmons, Governance Program Coordinator
Navid Sadghi, Internal Medicine UTSW via Webex
Nneka Egbuniwe, Deputy General Counsel
Richard Humphrey, EVP & CFO
Saul Cordero, SVP & Chief Governance & Strategy Officer
Sobha Fuller, SVP Nursing
Steven Roth, EVP Chief Legal Office
Vic Summers, SVP Internal Audit

Attendees via Webex:
Navid Sadeghi, MD, MSPH , Program Chief, Parkland Cancer Program/ UTSW
Wendy Young, MBA, BSN, RN , Director,
Anita Hegde, MD, Associate CQSO; Director of Quality & Safety, Internal Medicine
Teresa Chan-Leveno, MD , Otolaryngology

Tsedey Melaku MS, BSN, RN, VP Clinical Informatics
Omaira Azizad, MD, Associate CQSO; Dir. Quality & Safety, Anesthesia
Samuel Mandel, MD, MPH, Associate CQSO; Chief Burn Surgery
Douglas Sammer, MD, Chief Plastic Surgery
Shauntee Mayfield, EdD,Vice President, Chief Experience Officer

II. Mission Statement

Chair began the meeting by stating the mission statement:
Advance Wellness | Relieve Suffering | Develop and Educate

III. Public Comments Regarding Agenda Items

No members of the public registered for comments regarding the agenda items.

IV. Conflicts of Interest

After review of the agenda, the Chair noted zero conflicts of interest for Board Members present.

V. Executive Session – Quality & Patient Safety Operations Section

At 10:01 a.m. the Committee moved into Executive Session as permitted by the closed meeting exceptions specified on the agenda.

Members of management were excused from the discussion of topics, as necessary.

In executive session, the Committee received the presentation and reports as specified in the posted agenda.

A. Update and Report by Chief Quality and Safety Officer
Includes briefing from Executive Quality Committee (EQC)

B. Review of Safety Event Cause Analysis (CA) Case(s)
Shared learnings from recent safety event(s) with associated guide

C. Update and Report Regarding Workforce Safety
Biannual update on events and actions related workforce safety

D. Update and Report Regarding Quality-Related Key Performance Indicators (KPIs)
Reports for quality improvement project(s) throughout the enterprise

1. Department Performance Improvement Committee (PIC)/ Clinical Quality Committee (CQC) Annual Presentation(s)
Annual report from service lines related to quality and safety

   a. Anesthesia/Pain CQC

   b. Surgery PIC

E. Update and Report Regarding Patient Satisfaction: Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)
Biannual report on patient satisfaction scores

The Committee reviewed all items on the agenda, asked questions and received additional information.

VI. Possible Deliberation on the Following:

A. Executive Summaries
Overview of safety events and quality reporting

B. Quality of Care Dashboard
Monthly update of quality key performance indicators (KPIs)

C. Vizient Quality and Accountability (Q&A) Scorecard
Quarterly report for national quality and safety KPIs

D. Cause Analysis (CA) Log
List of upcoming cause analysis case reviews

E. Supplemental Cause Analysis Cases

F. Update and Report by Contracts Oversight Committee
Biannual report on key performance indicators for Parkland vendor contracts

G. Supplemental Anesthesia/Pain PIC Report

H. Executive Summaries
Overview of safety events and quality reporting

I. Quality of Care Dashboard
Monthly update of quality key performance indicators (KPIs)

VII. Executive Session: Medical Executive Committee ("MEC")

James D. Griffin, MD, President of the Medical Executive Committee, discussed the items posted on the agenda starting at 11:23 am.

A. Consideration and Appropriate Action Regarding Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers

1. Medical Staff and Non-Physician Clinical Providers to Parkland Health

a. Credentialing Report

b. Delineation of Privileges (DoPs)

i. Cardiovascular Disease DoP (Criteria Language for Left Appendage Closure Device [LAAC})

ii. Non-Physician Clinical Provider Staff Women's Health and CNM L&D (triage)

The Board asked questions and received additional information.

VIII. Executive Session: Discussion regarding report and/or information provided by the Chief Quality Safety Officer and related items on this agenda.

The Committee conducted a discussion with the CQSO, Dr. Mike Lane without other members of management present.

IX. Executive Session: Discussion regarding report and/or information provided by the Medical Executive Committee President and related items on this agenda.

The Committee conducted a discussion with the Medical Executive Committee President, Dr. James Griffin without other members of management present.

Chair adjourned Executive Session and moved into Open Session at 12:23 pm.

X. Action Items (Open Session)

A. Consideration and Appropriate Action Regarding Medical Executive Committee Resolution for Appointments/Reappointments, Privileges and Staff Status Changes of the Medical Staff and Non-Physician Clinical Providers

1. Approval of the Credentialing Report
2. Approval of DoPs

a. Cardiovascular Disease DoP (Criteria Language for Left Appendage Closure Device [LAAC})

b. Non-Physician Clinical Provider Staff Women's Health and CNM L&D (triage)

Eric G. Bing, motioned to recommend Board approval of the Medical Executive Committee Recommendations. Farida Minner, RN, seconded the motion. The motion passed unanimously.

XI. Follow-Up Requests: None

XII. Closing Remarks

XIII. Adjourn

With no further business to discuss, Committee Chair Elizabeth Palacios, MD, adjourned the meeting at 12:24 pm.

SO RECORDED:

Elizabeth A Palacios MD
Elizabeth A Palacios MD (Sep 26, 2024 10:43 CDT)
Elizabeth Palacios, MD
Committee Chair

Steven J Roth
Steven J Roth (Sep 29, 2024 11:20 CDT)
Steven Roth, JD, MPH
Assistant Secretary