



July 11, 2024

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 **SALINAS VALLEY HEALTH**¹ will be held **MONDAY, JULY 15, 2024, AT 8:30 A.M., DOWNING RESOURCE CENTER, CEO CONFERENCE ROOM 117, SALINAS VALLEY HEALTH MEDICAL CENTER, 450 E. ROMIE LANE, SALINAS, CALIFORNIA.** (*Visit [SalinasValleyHealth.com/virtualboardmeetinglink](https://www.SalinasValleyHealth.com/virtualboardmeetinglink) for Public Access Information*).

A handwritten signature in black ink, appearing to read "Allen Radner".

Allen Radner, MD
President/Chief Executive Officer

Committee Voting Members: **Catherine Carson, RN**, Chair, **Rolando Cabrera, MD**, Vice-Chair, **Clement Miller**, Chief Operating Officer, **Carla Spencer, RN**, Chief Nursing Officer; **Alison Wilson, DO**, Medical Staff Member.

Advisory Non-Voting Members: Administrative Executive Team.

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

**MONDAY, JULY 15, 2024, 8:30 A.M.
DOWNING RESOURCE CENTER, CEO CONFERENCE ROOM 117**

**Salinas Valley Health Medical Center
450 E. Romie Lane, Salinas, California**

(Visit [SalinasValleyHealth.com/virtualboardmeeting](https://www.SalinasValleyHealth.com/virtualboardmeeting) for Public Access Information)

AGENDA

1. Call to Order / Roll Call

2. 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.

3. Approve the Minutes of the Quality and Efficient Practices Committee Meeting of June 17, 2024.
(CARSON)

- Motion/Second
- Action by Committee/Roll Call Vote

4. Patient Care Services Update (SPENCER)
Professional Development Council

5. Closed Session

6. Reconvene Open Session/Report on Closed Session

7. Adjournment

The next Quality and Efficient Practices Committee Meeting is scheduled for **Monday, August 12, 2024 at 8:30 a.m.**

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.

¹Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

**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

REPORT INVOLVING TRADE SECRET

(Government Code §37606 & Health and Safety Code § 32106)

Discussion will concern: (Specify whether discussion will concern proposed new service, program, or facility):
Trade Secret, Strategic Planning, Proposed New Programs and Services

Estimated date of public disclosure: (Specify month and year): Unknown

HEARINGS/REPORTS

(Government Code §37624.3 & Health and Safety Code §§1461, 32155)

Subject matter: (Specify whether testimony/deliberation will concern staff privileges, report of medical audit committee, hospital internal audit report, or report of quality assurance committee):

1. Report of the Medical Staff Quality and Safety Committee
 - Health Information Management – Philip Katzenberger
2. Quality and Safety Board Dashboard Review (KUKLA)
3. Opioid Committee Report- Harm Reduction/Infection Prevention
4. US World Reports/Rankings
5. Unfinished business - revisions Risk Management Plan
6. Consent Agenda:
 - Emergency Department
 - Case Management/Social Work
 - Education Department
 - Clinical Informatics
 - Human Resources
 - Mammography
 - Radiology/Nuclear Medicine
 - Compassionate Marijuana Use, Ryan’s Law

ADJOURN TO OPEN SESSION

CALL TO ORDER
ROLL CALL

(Chair to call the meeting to order)

PUBLIC COMMENT

DRAFT SALINAS VALLEY HEALTH¹
QUALITY AND EFFICIENT PRACTICES COMMITTEE MEETING
COMMITTEE OF THE WHOLE
MEETING MINUTES JUNE 17, 2024

Committee Member Attendance:

Voting Members Present: **Catherine Carson**, Chair, **Rolando Cabrera, MD**, Vice Chair, **Clement Miller**, COO, and **Carla Spencer**, Chief Nursing Officer;

Excused Absence: **Alison Wilson, DO**;

Advisory Non-Voting Members Present: (In Person): James Gilbert, MD, Interim CMO and Cheryl Pirozzoli. (Via Teleconference): Michelle Childs, CHRO, and Gary Ray, CLO.

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

1. CALL TO ORDER/ROLL CALL

A quorum was present and Chair Carson called the meeting to order at 8:31 a.m. at the Downing Resource Center CEO Conference Room 117.

2. PUBLIC COMMENT

None

3. APPROVAL OF MINUTES FROM THE QUALITY AND EFFICIENT PRACTICES COMMITTEE MEETING OF MAY 13, 2024.

Approve the minutes of the May 13, 2024 Quality and Efficient Practices Committee meeting. The information was included in the Committee packet.

PUBLIC COMMENT:

None

MOTION:

Upon motion by Committee member Miller, second by Committee Vice-Chair Dr. Cabrera, the minutes of the May 13, 2024 Quality and Efficient Practices Committee Meeting were approved as presented.

ROLL CALL VOTE:

Ayes: Chair Carson, Dr. Cabrera, Miller, Spencer;

Noes: None;

Abstentions: None;

Absent: Dr. Wilson.

Motion Carried

¹Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

4. PATIENT CARE SERVICES UPDATE: PROCEDURAL UNIT PRACTICE COUNCIL

Carla Spencer, MSN, RN, NEA-BC, Chief Nursing Officer introduced Betzi Grogin, BSN, RN, CCRP, Chair of the Procedural Unit Practice Council. Ms. Grogin reported the Council includes members from Cath Lab Holding Area/Cath Lab, Cardiology/CDOC, Cardiac Wellness, and Diagnostic Imaging. A full report was provided in the packet.

Current Initiatives include:

- **Cath Lab/Cath Lab Holding Outpatient Cardiac Procedures**
 - Patient readiness/First Case On-Time Starts: Goal of 70% met 100% of time; previous year 40%. This metric has been influenced by a >25% increase in cases since last year.
- **Cardiac Wellness**
 - New Patient Guidebook: Collaborative effort with Phase I (Heart Center) and Phase II (Outpatient Cardiac Rehab). The care coordination process will be featured in the next Magnet application.
 - Peripheral Arterial Disease Procedures (PAD) improvement in increased distance walked in 6-minute walk test and improved (vascular) quality of life (VascuQol² Questionnaire).
- **Diagnostic Imaging**
 - Patient Experience by reminding patients they will receive a survey and asking prior to discharge, “Is there anything that we could have done better?”

Future initiatives include:

- **Cardiac Wellness:** Tracking blood pressure control to align with AHA guidelines.
- **DI:** On-time first case starts in Angiography Suite.
- **DI RNs:** Developing a nurse standardized procedure for PICC Tip Confirmations.

5. UPCOMING PROPOSED CMS REPORTING CHANGES

Aniko Kukla, Director Quality & Patient Safety reviewed the following changes:

- Governmental Focus: Patient Safety and Health Equity changes
- Increase in electronic measure reporting: The 2025 IPPS Proposed Rule will require software resources, experts, education, file preparation/validation, and file submission.
- Structural Measures:
 - Patient Safety Structured Measure beginning CY 2025 to include leadership commitment to eliminating preventable harm, strategic planning/organizational policy, culture of safety/learning within hospitals, accountability/transparency and patient/family engagement.
 - Age Friendly/Geriatric Care including eliciting patient healthcare goals, responsible medication management, frailty screening/intervention, social vulnerability and age friendly care leadership.
- Additional HCAHPS sub-measures include care coordination, restfulness of hospital environment and information about symptoms (beginning 2026).
- Transforming Episode Accountability Model (TEAM) starting 2026 is a mandatory payment model proposed by CMS intended to reduce Medicare costs while maintaining quality of care. Includes five specific episodes: CABG, lower extremity joint replacement, major bowel procedure, surgical hip/femur fracture and spinal fusion which are high-volume care delivered to Medicare beneficiaries. Results need to be published on line.

6. PROGRAM PLAN REVIEW

Aniko Kukla, Director Quality & Patient Safety reviewed the following plans:

- Quality Assessment and Performance Improvement Plan: The following was added to this year's plan: ERAS, diagnostic excellence, age friendly/geriatric program, structural patient safety measures. Hand hygiene and opioid/pain PI plans will continue. Will require a more robust reporting and PI for health equity specific outcome goals.
- Infection Prevention Program Plan added risk assessment.
- Patient Safety Program Plan updated with BETA Just Culture Algorithm.
- Risk Management Plan updated with BETA Just Culture Algorithm and is still under revision.

A full report was included in the packet. The Risk Management Plan is still under review. The four plans will be routed to the Medical Executive Committee for review and referral to the Quality and Efficient Practices Committee and Board for review.

PUBLIC COMMENT:

None

MOTION:

Upon motion by Committee member Miller, second by Committee member Spencer, Quality and Efficient Practices Committee approves the Quality Assessment and Performance Improvement Plan, the Infection Prevention Program Plan, and the Patient Safety Program Plan as presented.

ROLL CALL VOTE:

Ayes: Chair Carson, Dr. Cabrera, Miller, Spencer;

Noes: None;

Abstentions: None;

Absent: Dr. Wilson.

Motion Carried

7. CLOSED SESSION

Chair Carson announced that the item to be discussed in Closed Session is *Hearings/Reports* as listed on the closed session agenda. The meeting recessed into Closed Session under the Closed Session protocol at 9:05 a.m.

8. RECONVENE OPEN SESSION/REPORT ON CLOSED SESSION

The Committee reconvened for Open Session at 9:46 a.m. Chair Carson reported that in Closed Session, the Committee discussed *Hearings/Reports* as published on the closed session agenda as follows:

1. Report of the Medical Staff Quality and Safety Committee
 - Sepsis review
 - CMS star reports-July release, ORYX TJC Report
2. Quality and Safety Board Dashboard Review

3. Consent Agenda:

- Diagnostic Excellence /ECRI Hazards report
- Disease Specific Care: Joint Program
- Restraints Report
- Environment of Care: Fire Safety Mgmt, EH, IC
- Pathology Tissue Reviews 4Q 2023
- Disease Specific Care: Stroke
- Environment of Care Committee Reports (includes Emergency Plan Yearly Report)
- Risk Management/Patient Safety Full Report
- Accreditation and Regulatory Committee Full Report

Committee Discussion: Dr. Gilbert reported that the Salinas Valley Health quality results in comparison to State and National averages/expectations are impressive.

9. ADJOURNMENT

There being no other business, the meeting adjourned at 9:47 a.m. The next Quality and Efficient Practices Committee Meeting is scheduled for **Monday, July 15, 2024** at 8:30 a.m.

Catherine Carson, Chair
Quality and Efficient Practices Committee

Patient Care Services Update



Presented by:

Carla Spencer, MSN, RN, NEA-BC
Chief Nursing Officer

Featuring:

Professional Development Council

Monday, July 15, 2024

Professional Development Council

Members:

Chair: Stephanie Fierro, BSN, RN, CCRN

Sheilah Quentin, BSN, RN, CAPA, PHN

Lisa Sandberg, BSN, RN, CPN

Xiaoli Liu, BSN, RN, CMSRN

Kimberly Jacobs, BSN, RN, PCCN

Suzette Urquides, DNP, RN, CCRN, MPA

Co-Chair: Krystal Cortez, BSN, RN, PCCN

Aracely Martinez, BSN, RN, PCCN

Rebecca Rodriguez, MSN, RN, CEN, CPHQ

Sandra Tapia, BSN, RN, PCCN

Lori Woodfin, BSN, RN, CFRN, CVRN-BC

Svetalana Ushakoff, MSN, RN, RNC-MNN, CLC

Advisors: Vanessa Irwin Nieto, DNP, RN, NPD-BC, NE-BC, CNML, CNE, CLC

Stephanie Frizzell, MSN, RN, NPD-BC, CMSRN



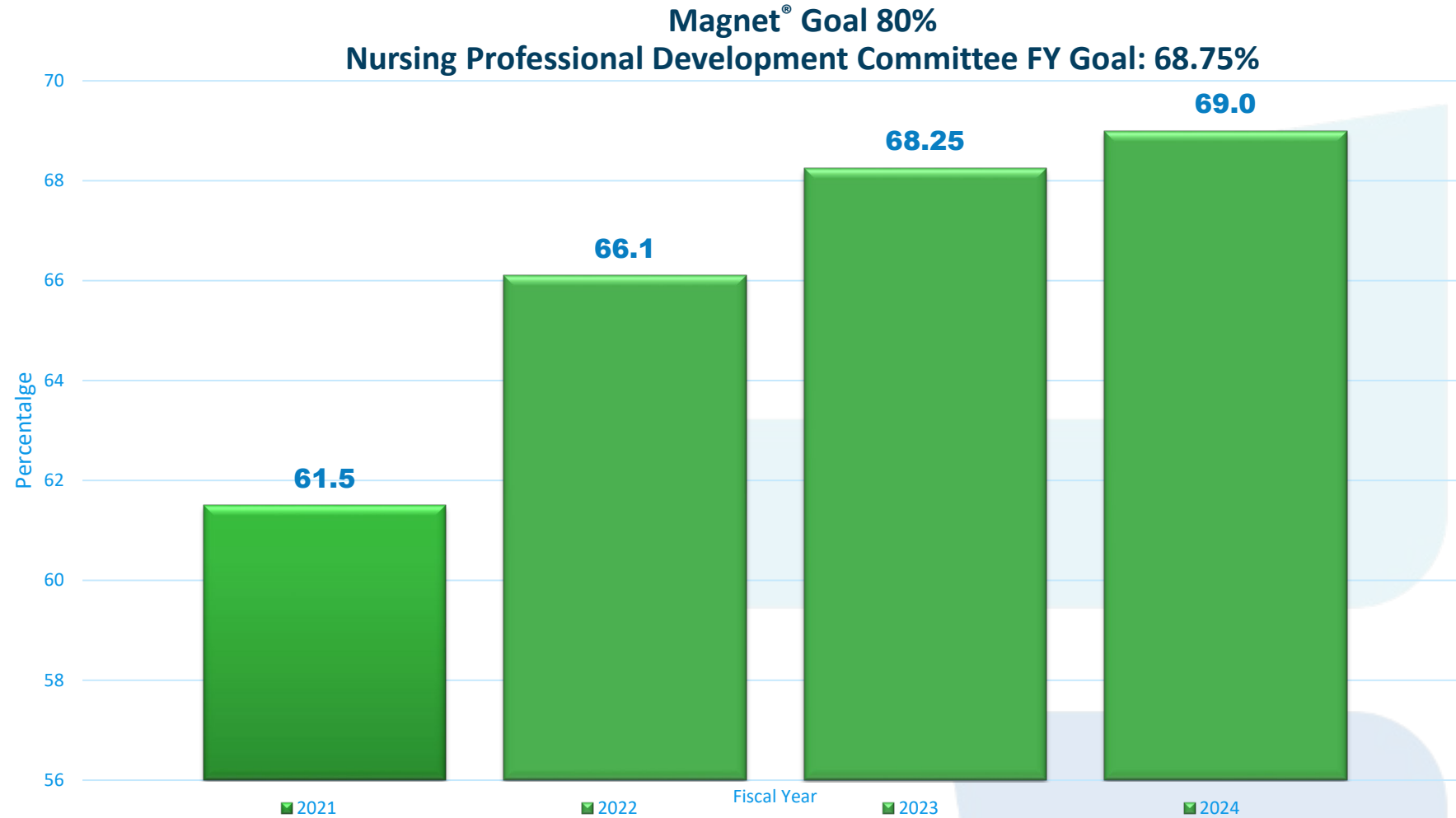
2024 Goals:

- Support nurses to pursue professional achievements: advanced degrees and specialty certifications
- Monitor organizational vacancy and turnover rates to identify trends and opportunities for improvements

Initiatives:

- SVH RN BSN or Higher Degree
- SVH RN Professional Certification
 - SVH Certification Preparation Classes
 - Certified Nurses Day
- Clinical Ladder - Staff Nurse III
- RN Turnover
- Professional Development & Education Fair
- Daisy Program Revitalization

SVH RN BSN or Higher Degree



SVH RN Professional Certification Data

Magnet® Goal ≥51%

Nursing Professional Development Committee FY Goal: 36.51%

RN Professional Certifications

Magnet Hospitals

201-300 Beds

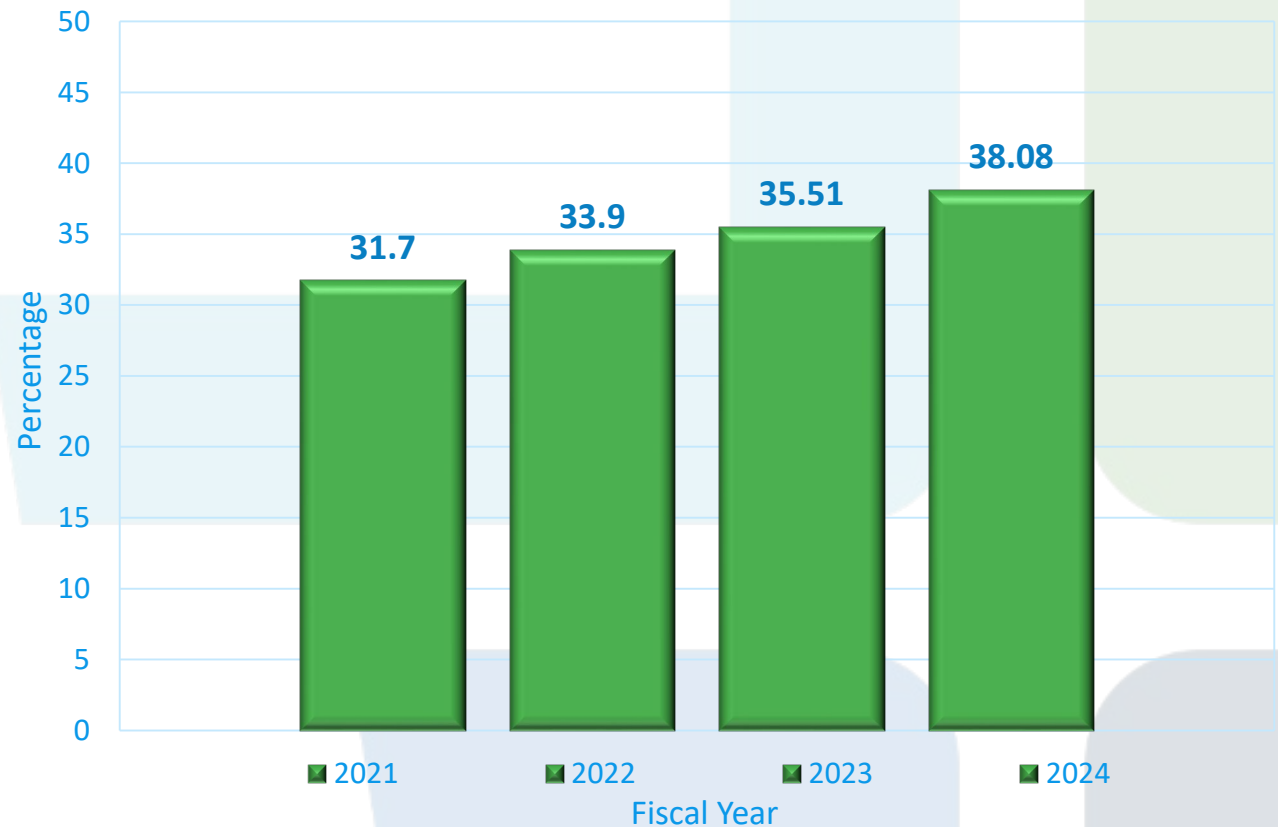
Average 39.78%

(Updated May 2022)

Source:

- <https://www.nursingworld.org/organizational-programs/magnet/about-magnet/why-become-magnet/characteristics-of-magnet/>

RN Professional Certification



SVH Certification Preparation Classes



Salinas Valley Health continues to support Registered Nurses seeking certification in their specialty by providing in person and virtual review classes.

Two new classes offered FY 2024:

- Oncology Specialty (OCN)
- Neonatal Specialty (RNC-NIC)

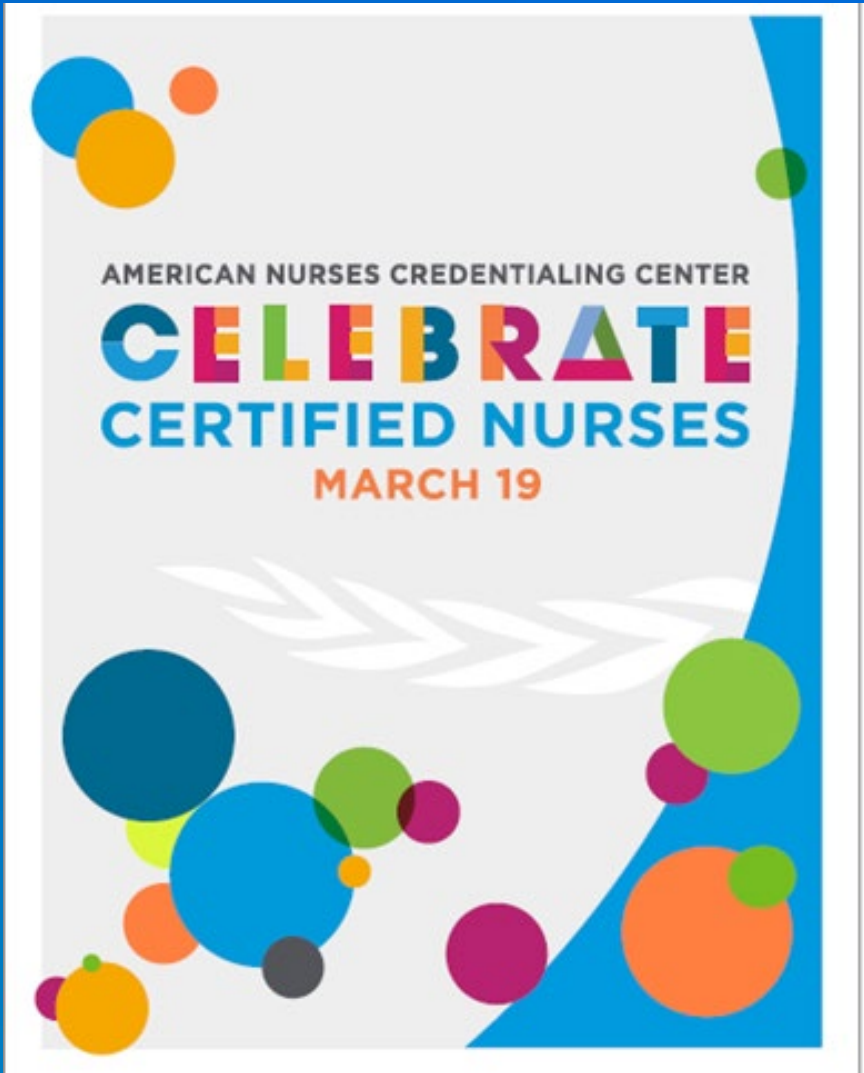
Continued course offerings:

- Medical Surgical Specialty (CMSRN, MEDSURG-BC)
- Progressive Care Specialty (PCCN)

Upcoming Courses:

- Critical Care Specialty (CCRN)
- Maternal Newborn Specialty (RNC-MNN)

“Second chance” pilot program implemented for PCCN & CCRN



"We empower our nurses to create an exceptional environment for our patients," says Lisa Paulo, MSN/MPA, RN, CENP, (former) Salinas Valley Health Chief Nursing Officer

SVH RN Recognition and Retention Clinical Ladder Promotions – Staff Nurse III Data

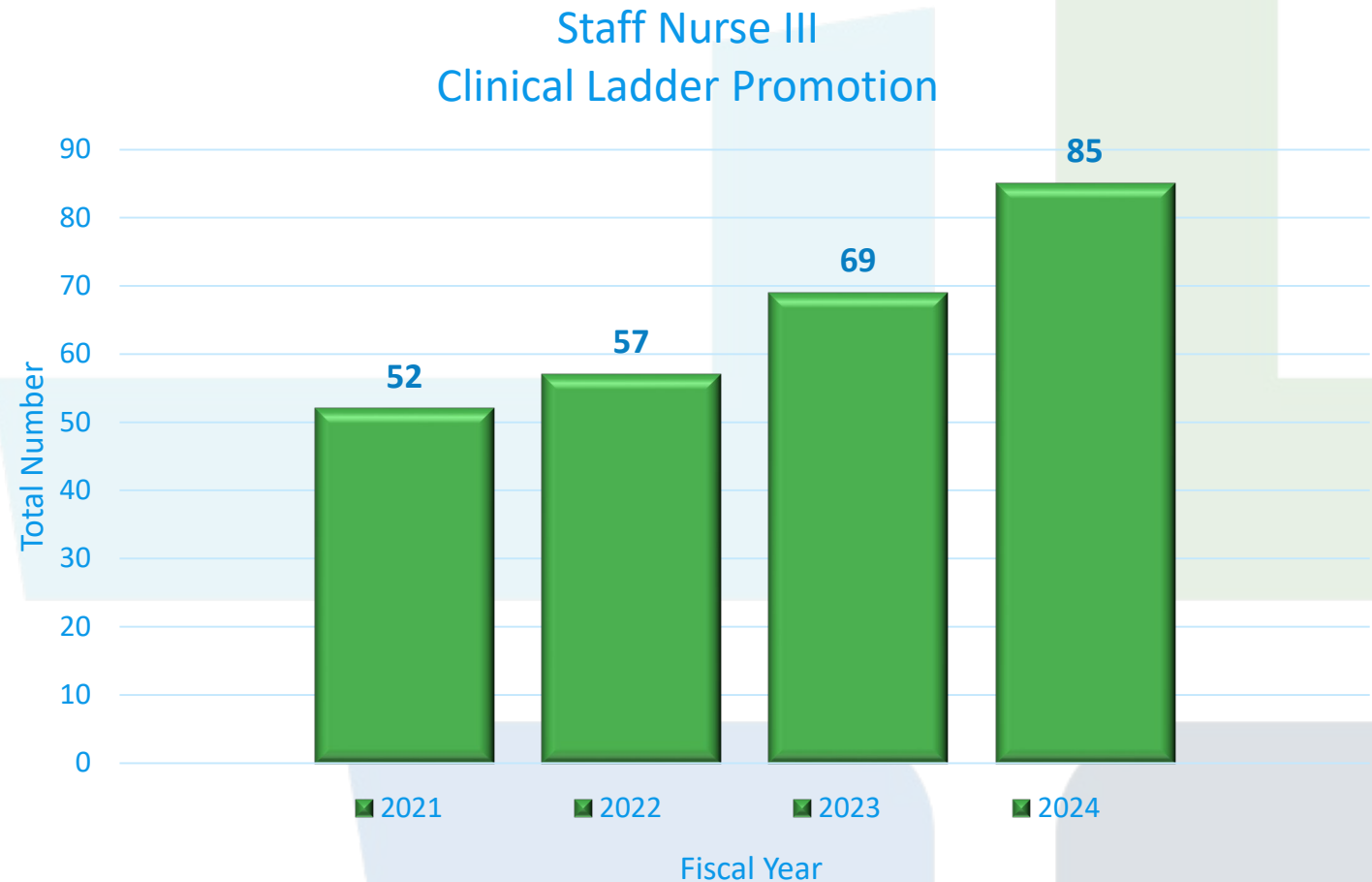
- The Staff Nurse III functions as an exemplary care provider, demonstrates leadership, and a level of involvement beyond what is required for Staff Nurse II.
- An application process based on points earned for enhanced knowledge, leadership, teaching and nursing practice skills
- Requires annual renewal
- Version 11 SNIII guidelines released in FY2024

23.2% Increase 2023-2024

21% Increase 2022-2023

9% Increase 2021-2022

57% Increase 2020-2021



Nurse Turnover

Magnet® Goal <10%

Nursing Professional Development Committee FY Goal: 10.15%

Magnet Hospitals
201-300 Beds
Average Turnover 12.16%
(Updated 2022)
National Average 18.4%
(Updated 3/2024)

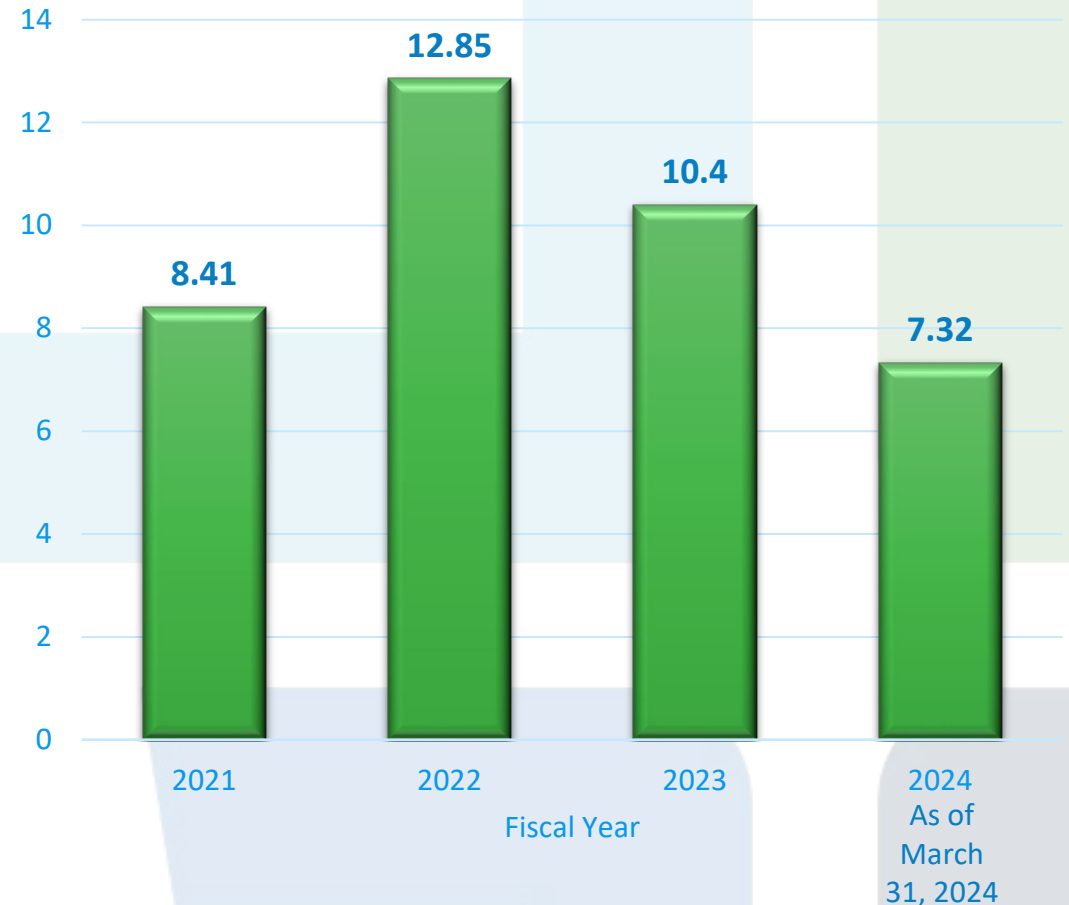
Turnover rate: Calculated as FTEs departed divided by the FTEs Actual. Departures include resignations controllable, resignations uncontrollable, and terminations. Excludes travel nurses. Excludes per-diem that are not distinctly allocated or hired as an employed nurse to a particular unit.

Source:

[Characteristics of Magnet Organizations | ANCC | ANA \(nursingworld.org\)](#)

[NSI National Health Care Retention Report.pdf \(nsinursingsolutions.com\)](#)

RN Org Level Turnover



Nurse Turnover

- Overall Organizational RN Turnover: 7.32% through FY24Q3
- Overall Organizational RN Turnover Rolling Year: 10.25% (FY23Q4 & FY24Q1, Q2 & Q3)

Magnet® Goal <10%	
Nursing Professional Development Committee FY Goal	10.15%
RN Turnover per clinical department	Assessing unit specifics with action plan
Experienced RN Transferring Specialty	0% Q3 FY24
New Hire experienced Nurse Turnover at 1 year service	0% Q3 FY24

- HR Exit Interview Project: We are LIVE!! Data analysis planned at 6 months

2023 Fall Fair October 31, 2023

Annual event to increase knowledge and visibility among hospital staff and valued partners. Committees, special projects, advanced degree planning, gift distribution, prizes, and so much more available at the event.

A Halloween-themed poster for a professional development fair. The background is dark blue with a large yellow moon, a blue ghost, a blue cloud, a black spiderweb, a witch on a broom, and a blue balloon with a smiley face. The text is in yellow and white. At the bottom, there are two lit candles and another ghost.

**2023
Fall Professional
Development
& Education Fair**

**October 31, 2023
0730 – 1630
DRC ABC**

***Please join us for this wonderful event open to all!
There will be booths providing education and
information on nursing initiatives, shared
governance council initiatives, professional
development, and universities including:***

- o ***Universities:*** CSUMB, GCU, & Aspen
- o ***Education updates from/on:*** Nursing Practice Council, Research & EBP Council, Restraints, Alcohol Withdrawal Protocol, Vascular Access Excellence, Survey Readiness, Opioid & Pain, Delirium, Medication Reconciliation, Clinical Research Department, and the Medical Library Department
- o ***Professional Development:*** Professional Development Council, RN Certification, SNIII

**We will have sweet treats & raffle prizes!
* Costumes Encouraged ***

Staff attending on a day off may clock in for up to 1 hour. Clock-in Code: 88

Salinas Valley

Nurse Recognition Activities

- Daisy Program revitalization complete with noticeable increase in nominations
- Ongoing Preceptor recognition
- Recognition Board design underway

Want to Recognize an Excellent Nurse or Amazing Employee?

To nominate someone for a DAISY® or STAR award, scan the appropriate QR code and complete the form.



Nominate an excellent nurse for the DAISY® Award.
The DAISY® Award recognizes special nurses who provide exceptional care.



Nominate an amazing employee for the STAR Award.
The STAR Award recognizes employees who exemplify values of support, teamwork, quality and respect.



¿Quiere reconocer a una excelente enfermera, enfermero o miembro destacado del personal?

Para nominar a alguien para un premio DAISY® o premio STAR, escanee el código QR adecuado y complete el formulario.



Nomine a una excelente enfermera o enfermero para el premio DAISY®.
El premio DAISY® reconoce a personal de enfermería que provee una atención excepcional.



Nomine a un empleado increíble para el premio STAR.
El premio STAR reconoce a los empleados que ejemplifican los valores de apoyo, trabajo en equipo, responsabilidad y respeto.



THANK YOU

CLOSED SESSION

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

*RECONVENE OPEN SESSION/
REPORT ON CLOSED SESSION*

ADJOURNMENT