

North Broward Hospital District Board of Commissioners  
1601 South Andrews Avenue, Suite 100, Fort Lauderdale, FL 33316

**QUALITY ASSESSMENT & OVERSIGHT COMMITTEE MEETING  
Immediately following the Pension and Investment Committee Meeting  
Wednesday, November 30, 2022**

The Quality Assessment and Oversight Committee of the North Broward Hospital District was held at the Broward Health Sports Medicine Building, 1601 South Andrews Avenue, Suite 100, Fort Lauderdale, FL 33316.

1. **NOTICE OF MEETING**

Official notice is attached to these minutes, titled EXHIBIT I. Agenda of this meeting is attached to the minutes, titled EXHIBIT II. Supporting documents, if applicable, are attached to these minutes, titled EXHIBIT III. These exhibits are presented for consideration of the Committee.

2. **CALL TO ORDER**

There being a quorum present, the meeting was called to order by Chair Ray T. Berry at 11:28 a.m.

3. **ROLL CALL**

*Present:*

Commissioner Stacy L. Angier  
Commissioner Nancy W. Stamper, Vice Chair  
Commissioner, Ray T. Berry, Chair

*Additionally Present:*

Commissioner Paul C. Tanner  
Commissioner Christopher J. Pernicano  
Commissioner Levi G. Williams, Jr.  
Shane Strum, President, Chief Executive Officer  
Alan Whaley, EVP, Chief Operating Officer  
Alex Fernandez, SVP, Chief Financial Officer  
Linda Epstein, Corporate General Counsel

4. **PUBLIC COMMENTS**

Chair Berry opened the floor for public comments, in which there were none.

5. **APPROVAL OF MEETING MINUTES**

- 5.1. Approval of the Quality Assessment and Oversight Committee Meeting Minutes dated September 15, 2022

Without objection, Chair Berry approved the minutes, dated September 15, 2022.

Motion *carried* without dissent.

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## 6. CONSENT AGENDA

### **QUARTERLY REPORTS, DATA Q3 CY2022, POWERPOINT PRESENTATION (Presenter – Barry Gallison, Director, VP Risk and Quality Management)**

- 6.1. Environment of Care
- 6.2. Antimicrobial Stewardship
- 6.3. Infection Prevention
- 6.4. NPSG - Hand Hygiene
- 6.5. Grievances
- 6.6. Medicare Readmissions
- 6.7. Medicare Mortalities
- 6.8. Patient Satisfaction HCAHPS
- 6.9. Risk Management Quarterly Reports

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

The Quality Assessment and Oversight Committee of the North Broward Hospital District approve items 6.1 through 6.9 on the Consent Agenda, as presented.

Motion *carried unanimously*.

## 7. TOPIC OF DISCUSSION

### **QUALITY AND SAFETY AGENDA PRESENTATION (Presenter – Barry Gallison, Director, VP Risk and Quality Management)**

- 7.1. Readmissions Reduction Program

Mr. Gallison presented an overview of the District's system-wide condition specific readmission rates for the period January 2020 – September 2022. Noted the District is below the national observed average for the following:

- Acute Myocardial Infraction (AMI)
- Heart Failure (HF)
- Chronic Obstructive Pulmonary Disease (COPD)
- Pneumonia (PN)

Noted, in light of COVID, CMS has removed pneumonia patients and, suppressed data from Q1'20 and Q2'20. It was further noted that the District's penalty totaled \$200K; which is an improvement from prior year penalty of \$400K.

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## 7.2. Leapfrog Update

Mr. Gallison reported the results of the District's Leapfrog Fall ratings:

- Broward Health Coral Springs = A
- Broward Health Imperial Point = B
- Broward Health North = B
- Broward Health Medical Center = C

Discussion ensued on how close the District's three (3) facilities were to an improved rating. It was noted, Spring 2023 is the next Leapfrog public reporting period.

## 7.3. Patient Experience Plan

As a follow-up to the September 15, 2022, Quality Assessment and Oversight Committee Meeting, Mr. Gallison presented the District's Patient Engagement Action Plan.

Per CMS a third-party vendor is required to survey patients. It was noted that the organization engaged Press Ganey.

It was further noted, that Press Ganey has a high reliable organization pathway aligned to The Joint Commission (TJC) which measures quality outcomes aligning with the experience of care and employee engagement.

The following "Best Practices" are considered building blocks to achieving high reliability within the organization:

- Transformational Change
  - Intersection of Quality Outcomes
  - Experience of Care
  - Employee Engagement
- Align Culture
  - Patient Centric
  - Robust Data Strategy
  - Patient Loyalty
  - Staff Engagement
  - System of Accountability

Additionally, the following are some of the District's current best practices:

- Implemented Basics
  - Bedside Handoff
  - Purposeful Rounding
  - Partner in Care Calls
  - Nurse Leader Rounding

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- Focus on Personal Connections
- Discharge Phone Calls
- Key Activity Focusing on Excellence:
  - Strengthen Shared Governance structure consistent with Pathway to Excellence
  - Standardize theoretical foundation for nursing practice modeling Jean Watson's Human Caring Theory
  - Patient & Family Advisory Councils
  - Hardwired Ancillary leader rounding on patients
  - Hardwire Interdisciplinary rounding on all units
- Cultivate Leaders:
  - Enterprise- wide quarterly nursing leadership meetings
  - Succession planning
  - Promote Broward Health Leadership University classes on service recovery and managing difficult situations for leaders
  - Mentorship
  - Focused onboarding with touch points weekly, biweekly, monthly, quarterly for first 2 years
- Acknowledge & reward success:
  - Daisy Awards- Individual and Team
  - Public recognition to include patient/family member for letters received.
  - Enhance Clinical ladder Program
  - Celebrate Successes!

For further detail, related slides are available within the November 2022 Quality Assessment and Oversight Committee Meeting book on the Board of Commissioners' web page.

## 8. **ADJOURNMENT**

There being no further business on the agenda, the Chair adjourned the meeting at 12:25 p.m.

Respectfully submitted,  
Commissioner Paul C. Tanner, Secretary/Treasurer