

## **QUALITY, SAFETY & PATIENT EXPERIENCE COMMITTEE MEETING MINUTES**

Friday, August 4, 2023 at 8:00 AM

Location: GCMC Board of Directors or Teleconference

The QSPE Committee meeting was called to order at 8:00 a.m. by David Klein, Co-Chair, Board Member

### **MEMBERS PRESENT**

Therese Everly, BS, RRT, Board Vice-Chair

David Klein, Board Member

Nancy McGovern, Board Member

Asif Azam, MD, Physician Member

Iahn Gonsenhauser, MD, Chief Medical Officer and Committee Sponsor

Keri Mason, MD, Physician Member

### **VIRTUALLY PRESENT**

Leah Boyette, MD Physician Member

Larry Hobbs, DO, Physician Member

### **MEMBERS NOT PRESENT**

Kathy Bridge-Liles, RN, Board Member, Committee Chair

Yanet Rios, MD, Physician Member

### **GUESTS**

Diane Champion, Board Member

Donna Clark, Board Member

George Knott

Stephanie Stovall, MD

Darcy Allen

Gloria Graham

Kris Fay

Tracy Pyles

David Berger

Blake Schofield

Marcello Zottolo

### **PUBLIC INPUT STATEMENT**

David Klein read the Public Input statement.

### **QUALITY, SAFETY, & PATIENT EXPERIENCE (QSPE) COMMITTEE MEETING MINUTES**

David Klein asked for approval of the June 2, 2023 QSPE Committee meeting minutes.

**A motion was made by Therese Everly to approve the June 6, 2023 QSPE meeting minutes. The motion was seconded by Nancy McGovern and carried with no opposition.**

David Klein asked Dr. Iahn Gonsenhauser to give a framing conversation of the meeting before we share the slides.

## QSPE COMMITTEE MEETING MINUTES – 08/4/2023

Dr. Iahn Gonsenhauser shared the following:

1. Performance – We are a strong performing organization offering the best care available in our region and some of the highest rated care across the state. We do still have opportunities however, in terms of outcomes we are particularly attentive to Serious Safety Events, which we believe have most recently been on decline and trending in the right direction, but did spike immediately before and after Hurricane Ian. This is an area of emphasis for us.
2. The experience of our patients is another area we are focused on. Inpatient patient experience specifically has been flat and underperforming and as such we are developing our response to these data. You will hear more about both of these topics today.
3. Structure – The continued shift towards outpatient care and alternative sites of care will have an ongoing downward pressure on hospital financial performance compounded by continually increasing costs, particularly wage growth, pharmaceuticals and supplies. The growing competition for skilled labor in our market adds yet more pressure and will continue to push labor costs disadvantageously.
  1. Our Service Lines are the operational structures that are driving transformative evolution of the system. You will hear more about the Service Line operating model which is realigning how we approach the creation of access to care, built not around our sites of care but rather the patient care arc which moves across many sites of care and often blends primary and specialty care. The service lines are slated to present their strategic plans throughout the scheduled QSPE meetings to come.
  2. Establishing alternative sites of care is a necessity to decompress our inpatient areas and a number of initiatives are taking shape to this end:
    1. In order to move quickly to market with a hospital at home program, have initiated discussions with a leading HAH vendor.
    2. Creating immediate access points for patients in our community to avoid EDs and be seen quickly at lower cost
    3. Decreasing the cost of low acuity ambulatory clinic care via digital/virtual pathways
4. Staffing – the number of job openings in the healthcare sector has almost doubled vs the average over the past 10 years. We have been very successful recruiting and retaining staff and our number of openings has dropped for our staff; however, our historical emphasis on inpatient care has created challenges in the physician staffing space. We continue to recruit successfully, but particularly our ability to cover call obligations for our inpatient facilities has remained a challenge. Using our size to our advantage and leveraging technology to be the workplace of choice for physicians in this community is a key focus and Dr Carracino will be providing. Using technology to decrease administrative burden and creating contemporary, convenient and highly efficient spaces for specialists, particularly surgical subspecialists to leverage, affiliate or join with our system.
5. Lastly, my most significant insomnia is driven by the need to achieve greater discipline in operational excellence. We have a number of key measures that indicate we are lacking efficiency in how our care delivery environments are managed, think LOS, Excess Days, MSPB type metrics and also a need for greater discipline in approaching our system expansion projects. My observation is that we have far too many potential projects that are of limited impact to our greatest challenges, namely access and in the present environment we need to be laser focused on a smaller number of higher impact solutions to current problems that are

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identified and scaled using consumer and market intelligence insights, which I believe our capacity to provide is still maturing.

### **PERFORMANCE OVERSIGHT**

Dr. Iahn Gonsenhauser shared the FY23 system strategic scorecard and current performance. We are currently A's across the board for Leapfrog. Congratulations! System SSER - months of May and June were presented. Trend has continued through July and beyond. LMH/HP advances to 5 Star rating, GCMC maintains their 4 stars and CCH advances to 4 stars in the CMS Overall hospital quality framework. Excellent work to the team.

### **FY23 SYSTEM STRATEGIC SCORECARD**

Dr. Iahn Gonsenhauser reviewed the details and trends for each metric on the scorecard was reviewed. Inpatient experience had a bump in recent month of data, which is favorable, but in overall terms, it is relatively flat trend across the past year, year and a half. Patient experience in the outpatient has seen a bump over the past few months. That's about 5 months now of increasing data. Strong performance in the patient impact by condition.

### **CCH MEDICAL STAFF REPORT**

Keri Mason, DO presented Cape Coral Hospital Progression of Care Model 4.0. This is an evidence-based model and very successful. We use a Global Patient Station (GPC) model to support all levels of care. GPS model coordinates internal and external patient flow. POC model and framework was also shared along with a sample of the Badge Buddy. Lastly the discharge milestones delays/barriers and benefits were discussed.

### **EQSC (EXECUTIVE QUALITY & SAFETY COUNCIL) UPDATES**

Dr. Stephanie Stovall gave the presentation. She highlighted the EQSC June and July 2023 meetings. This is an Accreditation requirement that we report to the board.

### **PATIENT EXPERIENCE**

Darcy Allen gave the presentation. Darcy highlighted: Patient and Family Advisory Committee current status and future plans. She also presented Patient Experience: Performance Review, Key Drivers and Action Plan.

Thank you for a great presentation and your leadership.

### **WORKPLACE VIOLENCE**

Gloria Graham discussed Workplace Violence (WPV) Committee Overview, using technology and processes to reduce violence, how their team creates a culture of reporting and their current reported data related to workplace violence.

### **PROGRESS AND PLANS TO NATIONAL LEADER**

Marcelo Zottolo, VP, Data Analytics & Continuous Improvement gave the presentation. He overviewed the external quality frameworks used to identify and guide hospital improvement efforts.

Marcelo will be bringing back more information regarding Vizient in the future.

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### **CELEBRATIONS**

Dr. Iahn Gonsenhauser reviewed Lee Health's accomplishments and awards.

Comments: is it possible for the board members to give these teams recognition?

### **BOD: QUALITY, SAFETY AND PATIENT EXPERIENCE SCHEDULE**

Dr. Iahn Gonsenhauser shared the QSPE schedule to plan throughout the year. A great mapping of important issues. We will be revising the placement of topics and themes for the meetings. We will have a consistent themes with each meeting more to come on this. This is the first revision of the placement.

Comments: The QSPE committee has so many topics coming in front of us, we sometimes struggle with so many topics. We need to share some of the topics with other committees.

### **COMMITTEE MEMBERS REPORT/MEETING FEEDBACK**

The committee felt it was a great meeting and great presentations. Thank you for stepping in for Kathy. I am excited to hear that our hospitals have 5 stars rating!

### **NEXT REGULAR MEETING**

The next meeting will be held on Friday, October 13, 2023 at 8:00 a.m. It will be a flex model where Committee members can attend in person at Gulf Coast Medical Center, Medical Office Building, Boardroom, 13685 Doctors Way, Fort Myers, FL 33912 or by WebEx.

### **ADJOURNMENT**

The QSPE Committee Meeting was adjourned at 11:03 a.m. by David Klein, Co-Chair. Minutes were recorded by Wanda Heit, Assistant to CNO & CMO.

Signed by:

Date:



Kathy Bridge-Liles  
10/21/2023 18:28 EDT