



DESERT HEALTHCARE DISTRICT
HOSPITAL GOVERNANCE AND OVERSIGHT COMMITTEE MEETING
MEETING MINUTES
June 21, 2018

Directors Present	District Staff Present	Absent
Chair, Carole Rogers, RN President, Les Zendle, MD	Herb K. Schultz, CEO Chris Christensen, CFO Andrea S. Hayles, Clerk of the Board	Lisa Houston, COO

AGENDA ITEMS	DISCUSSION	ACTION
I. Call to Order	The meeting was called to order at 9:30 a.m. by Chair Rogers	
II. Introductions	Chair Rogers invited all in attendance to introduce themselves.	
III. Approval of Agenda	Chair Rogers asked for a motion to approve the agenda.	Moved and seconded by President Zendle and Chair Rogers to approve the agenda. Motion passed unanimously.
IV. Public Comment	None	
V. Approval of Meeting Minutes	Chair Rogers requested approval of the May 8, 2018 Meeting Minutes.	Moved and seconded by President Zendle and Chair Rogers to approve the agenda. Motion passed unanimously.
VI. Old Business – Facility Condition Assessment Update	Chris Christensen, CFO, distributed a Capital Reserve Schedule for Improvements regarding the Facility Condition Assessment (FCA) conducted by CBRE. The Schedule highlights the exterior, interior, roofing, plumbing systems, heating, ventilation and air conditioning; electrical system, fire protection and life safety, garages and carports; and elevators. Michele Finney, CEO, Desert Regional Medical Center, distributed the Opinions of Costs and described the various site areas for repair including finalized repairs. Jason O. Lind, Executive Vice President, Americas, and Mr. Christensen explained that the list is similar to a roadmap to assist CBRE with the FCA.	



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	<p>President Zendle inquired on an anticipated list of 2019 Capital Improvements. Michel Finney, CEO, Desert Care Network, Desert Regional Medical Center, explained that the capital replacements are reviewed in the hospital Governing Board Meeting that the two Committee Members are participants.</p> <p>During the discussion, it was determined that maintenance related issues would be addressed to the Hospital Governance and Oversight Committee, and the District Board of Directors will review the capital projects.</p>	
<p>VII. New Business</p> <p>VII.1. Hospital Safety Presentation, Debra Karam, Patient Safety Officer, Desert Regional Medical Center</p>	<p>Christine Langenwalter, Quality Improvement and Education Services introduced Debra Karam, Patient Safety Officer, and provided an overview of her presentation with reactive and proactive approach to safety.</p> <p>Debra Karam, Patient Safety Officer, Desert Regional Medical Center, provided an overview of her vast experience in patient safety. Mrs. Karam presented details of the Roles and Responsibilities of a Patient Safety Officer that includes an online event reporting system and following the guidelines of federal and state requirements, including other additional roles and responsibilities of a Patient Safety Officer. Triggers for Joint Commission and Serious Reportable Events such as</p>	



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	<p>sentinel and unanticipated death or permanent or temporary harm was detailed. A thorough overview of a Cause Map that can contribute to medical errors was described by Mrs. Karam, as well as Lessons Learned concerning distractions and hypervigilance during critical processes. The Action Plan and Goals for Patient Safety were also described.</p> <p>Throughout the presentation, Vice-President Rogers as a retired Registered Nurse explained some of the quandaries associated with medication errors and bag spiking as outlined in the presentation.</p> <p>President Zendle reminded everyone that the role of the District is not to oversee the quality of the hospital – the Governing Board manages those matters. In addition, President Zendle explained that the root causes of some errors such as feeling rushed could be the result of staffing issues that could be resolved.</p> <p>Christine Langenwalter, Quality Improvement and Education Services explained that feeling rushed is an initial response of most staff and staffing efficiency is part of the evaluation and validation as Michele Finney, CEO, Desert Regional Medical Center pointed out. Competency is also examined during the process.</p>	
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	<p>Administrator’s visit the units and speak with the patient to ensure they are involved as it is an obligation.</p> <p>Herb K. Schultz, CEO, Desert Healthcare District, stated that the process or disclosure for the patient is important explaining the means of notification. Christine explained that disclosure could come from herself or Mrs. Karam. All notifications are documented in the medical record for disclosure when and by whom including the family, if applicable.</p>	
<p>Public Comment</p>	<p>Regina Epp, RN, Desert Regional Medical Center and District Resident, explained that the electronic system is not user friendly and reporting a near miss can be a barrier at times for the night shift. Christine Langenwalter, Quality Improvement and Education Services explained that nurses can all the afterhours number concerning any errors or near misses.</p> <p>Laura Bruce, RN, Desert Regional Medical Center, stated that it is important that all staff and nurses are advised of any errors or mishaps for educational purposes.</p>	
<p>VIII. Adjournment</p>	<p>Chair Rogers adjourned the meeting at 10:56 a.m.</p>	<p>Audio recording available on the website at http://dhcd.org/Hospital-Governance-Oversight-Committee</p>

ATTEST: _____
 Carole Rogers, Chair/Vice-President/Secretary
 Hospital Governance and Oversight and Committee