



Psychiatric Health Facility (PHF) Governing Board Meeting
Wednesday August 22, 2018
3:00 PM – 4:00 PM
PHD Auditorium
300 N San Antonio Rd, Santa Barbara
Minutes

Staff: Alice Gleghorn, Director/PHF CEO; Susan Soderman, Quality Care Coordinator; Alesha Silva, PHF Interim Nurse Supervisor; Yaneris Muñiz, Policy Coordinator; Laura Zeitz, PHF Hospital Administrator; Shereen Khatapoush, Research and Program Evaluation; Jennifer Hidrobo, PHF Manager; Andra Dillard, Infection Control Specialist; Suzanne Grimesey, Chief Quality Care and Strategy Officer; Dalila Brown, AOP II and County Counsel (absent).

Facilitator: Terri Maus-Nisich, Assistant CEO, Health and Human Services

Roll Call –Terri Maus-Nisich, Assistant CEO, Health and Human Services; Janette Pell, Director of General Services; Vincent Wasilewski, Chief Deputy for Custody Operations, Sheriff's Department; Van Do-Reynoso, Director of Public Health; Polly Baldwin, Public Health Medical Director; Arlene Diaz, Manager, Public Administrator – Guardian; Supervisor Lavagnino, Santa Barbara County Board of Supervisors, Fifth District.

General Public Comment: none at this meeting.

1. Welcome and Overview

- Introduction of New Staff
 - Andra Dillard, Infection Control Specialist was introduced. She has seamlessly helped with a well contained infection control issue. She is contracted for one day a week and on call.
 - Jennifer Hidrobo, PHF manager was introduced and currently operating as Director of Social Services
- Updates
 - Patient Satisfaction Survey
Shereen Khatapoush updated the Governing Board regarding the PHF Patient Survey Results. The survey was produced by contracting with Press Ganey and made available in English and Spanish for patients to complete at discharge. Laura gives kudos to Shereen for the work that she did with developing, distributing, and training staff on the survey.

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- 29 PHF patients completed the survey and there is now a 50% response rate. The wording of the questions will be reviewed.
 - Dr. Gleghorn updated the Board that the contract for purchase of wholesale medications is complete and medications have been ordered. The pharmacy started on September 18, 2018. DHCS will have to approve the pharmacy as well in order for Morgan to bill for discharge medications. She did not need to wait for this to start the pharmacy or buy medications. The Department is working on the contract for purchase of wholesale medications that needs to go to the Board of Supervisors because of contracting with the same source as Public Health.

This is being moved quickly as possible due to start up deadlines of September 9th. The application to DHCS could not be submitted until all licenses for the pharmacy are received. The Board of Pharmacy will do their own inspection after the pharmacy is open however they have already approved the licenses so that the pharmacy could be open. Laura will follow up regarding the training required once all has been approved.

Action: No action.

2. Review and Approve Minutes of the PHF Governing Board Meeting listed below:

- **March 28, 2018 – (Exhibit 2a)**
- **May 23, 2018-(Exhibit 2b)**
- **June 27, 2018 – (Exhibit 2c)**

Action: Ms. Diaz made a motion to approve meeting minutes as presented for the March 28, 2018, May 23, 2018, and June 27, 2018 PHF Governing Board meetings. Ms. Do-Reynoso seconds. Motion carried.

3. Medical Staff Bylaws

- No update at this meeting.

Action: No action.

4. Staff will report on the following Quality Assessment and Performance Plan and Indicators (QAPI) (Exhibit 4a):

- **QAPI June (Exhibit 4a) Update-** Indicators that are highlighted in grey are reported to the PGB on a quarterly basis; therefore, no data is presented for the month of August.

Over a few years, the PHF has worked to decrease the hours of restraint usage and the number of seclusion episodes. In FY16/17, the utilization rate has been very low, less than 1% per month for both seclusion and restraints. At this point, the PHF monitors monthly utilization to ensure that the rates do not increase.

Complaints and Grievances

- Ms. Soderman provided the report for the month being on target. There were no grievances or complaints and no change of clinician requests. There will be items to report on next month.

Infection Prevention and Control

- Ms. Soderman provided the report for the month of July which is currently off target on hand hygiene for infection control. 13 out of 20 reported in compliance. The plan is to increase the number of observations and continue receive data from the CDC to remain in compliance. Staff has been provided with training and signage is visible for staff.

Patient Services, Care and Safety

- Report – no report for the quarter.
- Patient Injuries – Ms. Soderman provided the report for the month and is on target for all indicators.
- Adverse Outcomes in Patient Care - Ms. Soderman provided the report for the month and is on target for all indicators.
- Suicide Management, Treatment Planning, Consents, Nursing Services (Quarterly Feb, May, Aug, Nov)

Social Work Services

- No report for this month

Restraint/Seclusion

- No report for this month

Medication Use/Pharmacy Services

- Report (Quarterly: Feb, May, Aug, Nov) Ms. Soderman reported on medication use and pharmacy services. Four of the Suboxone was taken out of the Medication E-Kit, but only three were labeled. All appropriate superiors were notified and the problem was corrected.
- Medication Error Rates/Unavailability – Ms. Soderman provided the report for the month. This is currently in the process of gathering the data and will report on this next month.

Significant Adverse Outcomes

Ms. Soderman provided the report for the month and all indicators were on target. _____ **Food and Nutritional Services**

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- No report for the quarter

Physician and Allied Health Professionals Related Services

Ms. Soderman provided the report for the month and all indicators were on target.

Environmental Services (EVS)

No report for the quarter.

Environment of Care (Facilities)

- **No report for the quarter.**

Laboratory Services:

- **No report for the quarter**

Process Improvement Projects

- Ms. Soderman reports there were small studies conducted on the PHF to choose an area to make improvements and data points to choose from in order to understand and reduce number of administrative days.
 - Shereen reviewed a Contract Management and Performance Tool handout with the Board and advised that she needs to collect and analyze quarterly data. She is prepared to come and report again in December.
- **PHF Status Report**
 - Patient Status (UR) Report July (Exhibit 4b) and August (Exhibit 4c) - Ms. Soderman provided report on PHF Status (UR) (Exhibit 4b). The graphs depict a breakdown of acute versus administrative days. There were 44% non-billable and 50% billable days in addition to over 40 non administrative billable days. There was a total of 33% IST bed days in July.
 - **Contract Monitoring-contract to match monitoring**

Laura advised that all of the tools were reviewed to monitor contracts to identify if regulations were met. The PHF will review them and want approval from the board.

Report (Quarterly: Feb, May, Aug, Nov)

- Edwin Feliciano, MD Contract
- Hometown Pharmacy Contract
 - There have been some performance issues with deliveries and other timely issues. The plan is to have Hometown only provide discharge medications due to PHF pharmacy opening. Other arrangements at point of transfer may need to be explored. The Pyxis machine has arrived and nurses will be able to utilize it. There are new policy and procedures to be completed alongside Pyxis protocol and new production. Updates will be provided next month. A small purchase agreement with Federal drug will

serve as a gap for services. ANKA currently helps PHF with emergency medication supply to facilitate a discharge.

- Southern Coast Janitorial Contract
 - Kudos to the janitorial staff, PHF staff and Andra Dillard with infection control.
- Valle Verde Contract
 - The PHF has amended the contract on a few items to reflect the current service they are providing to us regarding menus, diet manuals, and therapeutic diets. It has not changed the fiscal portion of the contract; really just foodservice and nutrition logistics.
- Maxim HealthCare Services Contract
 - Maxim is being utilized for services with nothing new to report.
- Greeley Contract
 - There is currently no update for Greeley and Laura will do a write up on this every month if necessary.
- **Significant Areas/Key Events occurring at the Psychiatric Health Facility (PHF) such as patient care (monthly).**
 - Recruitment Update- There are currently no issues and recruitments are up to date with minor adjustments.
 - Hiring Night Team Supervisor
 - A night team supervisor candidate was hired however he took a different position. Create a re-opening for this position.
 - RA passed her RN boards and was changed to EXH RN
 - A recovery assistant in nursing school was transferred from RA status to extra help.
 - Filled a Civil Service 1414 that was vacant for one year.
 - There is less pressure for staff and less overtime at night since filling the CS 1414 position.
 - Infection Control Update:
 - Infection Control Specialist Contract Update- There are currently no large issues and next quarter there will be a report on an infection control issue.

Action: Ms. Diaz made a motion to acknowledge report was received. Ms. Do-Reynoso seconded. No objections.

5. Staff will provide a report on the following Compliance:

- Staff Credentialing/Privileging
 - None at this meeting

Action: No action.

6. Budget Development

- No report at this meeting.

Action: No action.

7. New Policies and Procedures

None at this meeting

Action: No action.

8. PHF Governing Board Administrative Items

- Item tabled

Action: No action

9. Review of Future Meeting Agenda Items

- HVAC update
- MOU update

10. Adjournment – Meeting adjourned at 3:56 pm. Next Meeting Date, September 26, 2018