



November 7, 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, NOVEMBER 11, 2024, AT 8:30 A.M., DOWNING RESOURCE CENTER, ROOM 117, CEO CONFERENCE ROOM, SALINAS VALLEY HEALTH MEDICAL CENTER, 450 E. ROMIE LANE, SALINAS, CALIFORNIA.** (Visit [https://www.salinasvalleyhealth.com/~about-us/healthcare-district-information-reports/board-of-directors/board-committee-meetings-virtual-link/](https://www.salinasvalleyhealth.com/~/about-us/healthcare-district-information-reports/board-of-directors/board-committee-meetings-virtual-link/) for Public Access Information).

A handwritten signature in black ink, appearing to read "Allen Radner", is positioned above the printed name and title.

Allen Radner, MD
President/Chief Executive Officer

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

Advisory Non-Voting Members: Administrative Executive Team.

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

**MONDAY, NOVEMBER 11, 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 October 14, 2024. (CARSON)

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

4. Patient Care Services Update (MILLER)
Rehab Services Unit Practice 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, December 16, 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 <https://www.salinasvalleyhealth.com/about-us/healthcare-district-information-reports/board-of-directors/meeting-agendas-packets/2024/>, and in the Human Resources Department of the District located at 611 Abbott Street, Suite 201, Salinas, California, 93901. 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

HEARINGS/REPORTS

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

1. Report of the Medical Staff Quality and Safety Committee

Lab Utilization Report – Lilia Meraz-Gottfried, Director Clinical Development (10 Minutes)

Care Continuum Support – Troy Scott, Director Case Management (10 Minutes)

Health Equity – Kathleen Fitzgerald, Clinical Performance Improvement Specialist (10 Minutes)

Leapfrog – Aniko Kukla, Director Quality & Patient Safety (3 min)

2. Quality and Safety Board Dashboard Review (Aniko Kukla)

3. Consent Agenda:

Laboratory services

Sepsis

Service Excellence/Patient Experience

Organ/Tissue Procurement

Code Blue

Community/Volunteer Services

Outpatient Cardiology Cardiovascular Diagnostics (formerly CDOC)

Taylor Farms Family Health & Wellness Center

Sleep Medicine

Critical Care/Progressive Care Service Line

Pharmacy & Therapeutics/Infection Prevention – Includes MERP Plan update

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 OCTOBER 14, 2024

Committee Member Attendance:

Voting Members Present: **Rolando Cabrera, M.D.**; Vice-Chair, **Clement Miller**, COO, and **Carla Spencer**, Chief Nursing Officer, and **Alison Wilson, M.D.**, Medical Staff Member;

Voting Members Absent: **Catherine Carson**, Chair;

Advisory Non-Voting Members Present:

In Person: Allen Radner, M.D., President/CEO, Timothy Albert, M.D., CCO, and Cheryl Pirozzoli.

Other Board Members Present, Constituting Committee of the Whole:

Via teleconference: Juan Cabrera, Joel Hernandez-Laguna, Victor Rey.

Dr. Wilson arrived at 8:39 a.m.

Joel Hernandez-Laguna arrived at 8:55 a.m.

Juan Cabrera arrived at 9:14 a.m.

1. CALL TO ORDER/ROLL CALL

A quorum was present and Vice-Chair Dr. Cabrera called the meeting to order at 8:30 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 SEPTEMBER 16, 2024.

Approve the minutes of the September 16, 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 member Spencer, the minutes of the September 16, 2024 Quality and Efficient Practices Committee Meeting were approved as presented.

ROLL CALL VOTE:

Ayes: Vice-Chair Cabrera, Miller, Spencer;

Noes: None;

Abstentions: None;

Absent: Chair Carson, Dr. Wilson.

Motion Carried

¹Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

4. PATIENT CARE SERVICES UPDATE: MED-SURG UNIT PRACTICE COUNCIL

Carla Spencer, MSN, RN, NEA-BC, Chief Nursing Officer, introduced Eva Abendano-Real, BSN, RN, Chair of the MedSurg Unit Practice Council, Flor Silva, BSN, RN, CMSRN, Co-Chair, who reported the following:

Completed Projects/Initiatives:

- Hospital acquired pressure injuries (HAPI) for 3Main: 3 Key Elements: (1) Consistent use of HAPI SKIN bundle, (2) Checklist for high-risk patients completed for each, and (3) Monthly mini-prevalence study assessing HAPI and HAPI prevention, using peer feedback when necessary and sharing data/findings with staff. HAPI prevalence rate has been zero for the past 2 quarters. Focus will continue on 3Main.

In-Progress Projects/Initiatives:

- Standardizing Oral Care Protocol: Sub-optimal oral care can impact many patient safety and quality measures, including Non-Ventilator Hospital-Acquired Pneumonia (NVHAPs). New, evidence-based oral care products were trialed and adopted. A standardized oral care protocol was developed; documentation screen was updated to align. Policy revision is in progress. Outcome measures include documentation and tooth brushing/oral care at least twice per day and automation of NVHAP data (currently a manual abstraction process).
- Falls Action Plan for 3Main: In collaboration with Falls Committee: (1) Update communication boards, (2) staff education about fall prevention strategies, (3) weekly huddle sheet distributed throughout the cluster, (4) “Call, Don’t Fall” signage, (5) collaboration with pharmacy to review medications that could impact fall risk, and (6) mini fall surveillance studies utilizing falls rounding tools, teaching, data review/share. Outcome measures include surveillance audits and falls and falls with injury rates.

A full report was provided in the packet.

Committee Discussion: Family members, care givers and patients are offered the opportunity to assist with teeth brushing. There is shift-to-shift handoff for falls action plans. The current HAPI protocol is successful and the plan is to sustain the plan throughout the entire hospital and revise it as needed.

5. CLOSED SESSION

Vice-Chair Cabrera announced that the items to be discussed in Closed Session are *Hearings/Reports* as listed on the closed session agenda. The meeting recessed into Closed Session under the Closed Session protocol at 8:41 a.m.

6. RECONVENE OPEN SESSION/REPORT ON CLOSED SESSION

The Committee reconvened for Open Session at 9:24 a.m. Vice-Chair Cabrera reported that in Closed Session, the Committee received and accepted the (1) *Hearings/Reports* as published on the closed session agenda, as follows:

Hearings and Reports

1. Report of the Medical Staff Quality and Safety Committee
Environment of Care

2. Quality and Safety Board Dashboard Review
3. Consent Agenda:
 - Chest Pain Program
 - Falls Committee
 - Risk/Patient Safety Reports
 - Accreditation and Regulatory Report

7. ADJOURNMENT

There being no other business, the meeting adjourned at 9:25 a.m. The next Quality and Efficient Practices Committee Meeting is scheduled for **Monday, November 11, 2024** at 8:30 a.m.

Rolando Cabrera, M.D., Vice-Chair
Quality and Efficient Practices Committee

Rehab Services Unit Practice Council

Members:

Stephanie Sterner, M.S., OTR/L, CLT (Chair)

Jan Martha Conducto, M.S., OTR/L (Co-Chair)

Matthew Countryman, PT, DPT

Michelle Shaw, PT, DPT

Jocelyn Lopez, PT, DPT

Kaitlin Roe, M.A., CCC-SLP

Jessica Graziano, PT, DPT, SCS (Advisor)

Decorntae Kpou, DrOT, OTR/L, CSRS (Advisor)





Rehab Services UPC

Council Purpose:

Identify and implement standards of care and evidence based practice specific to rehabilitation services including physical therapy, occupational therapy, physical therapy assistants, rehab aides and speech-language pathology

Goals:

- Foster a culture of professional development
- Improve quality and efficiency of patient care
- Establish a mechanism through which the practicing professional is able to fully participate in the decisions which affect rehabilitation related practice, quality, competence and knowledge

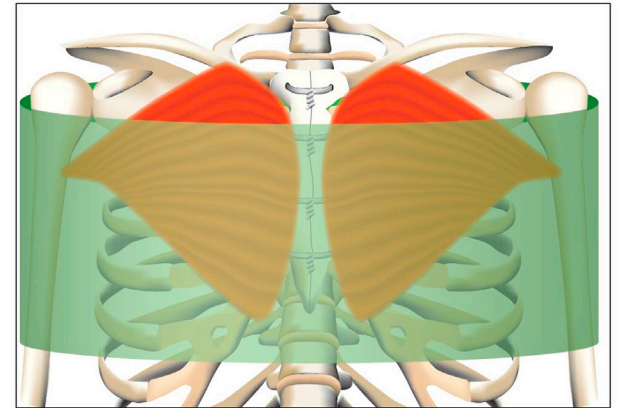
Current Initiatives

Cardiac Rehab Phase I

- Updated cardiac protocol to follow best practice guidelines (Keep Your Move In The Tube™)
- Interdisciplinary collaboration with Nursing, Cardiac phase II, cardiothoracic surgeons, hospitalists and rehabilitation department
- Educated and trained staff hospital wide to incorporate this initiative
- Go Live date was on **Oct 22**

Benefits:

- Patients can perform functional activities independently rather than using other resources (lessen caregiver burden, lower costs for caregiving, return to meaningful activities)



[Image 1](#)

Current Initiatives

Cardiac Rehab Phase I – Order Set:

View Order Detail

Order	Consult Occupational Therapy Routine	Ordering User	Cahill,Madel
Order Set	Cardiac Surgery Immediate A	Ordering Device	EDXED096
Ordering Provider	Jewel,Trita, MD	Verifying User	Cahill,Madel
Source	Non- Signature	Verifying Device	EDXED096
Order	07/31/24 13:00	Category	Consultations
Start	07/31/24 13:01	Order Number	240731-130537823
Status	Active	Internal Order Number	H0-B20240731130537823

Reason For Exam	
Physician Instructions	Evaluate and Treat
Comment	

Begin Phase I Cardiac Rehab POD#1

If chest tubes are still present, place on water seal for Rehab.

Instruction If patient develops shortness of breath, return chest tube to - 20cm suction immediately.

Teach modified sternal precautions using "Keep your move in the tube™" guidelines.

Audit	User	Event	Ack
07/31/24 13:05	OM - Daemon,Background	Status changed: Verified to Transmitted	NA
07/31/24 13:05	Daemon,Background	Queued to destination: NURSETRAIN #40157	NA
07/31/24 13:05	OM - Cahill,Madel	No Signature is Necessary Order is Entered	N

Current Initiatives

Cardiac Rehab Phase I

“SuperUsers” Course – Lab/Lecture (1 hr)

Location: CP 1 & 2

- Monday, 9/23
- Thursday, 9/26

Nursing Staff Lab - Lab only (30 min, 2x day)

Intensive Care Unit:

- Tuesday, 9/24
- Friday, 9/27

Heart Center:

- Tuesday, 9/24:
- Friday, 9/27

Cardiac Rehab Phase 2 Lab:

- Oct 2

CNA Labs

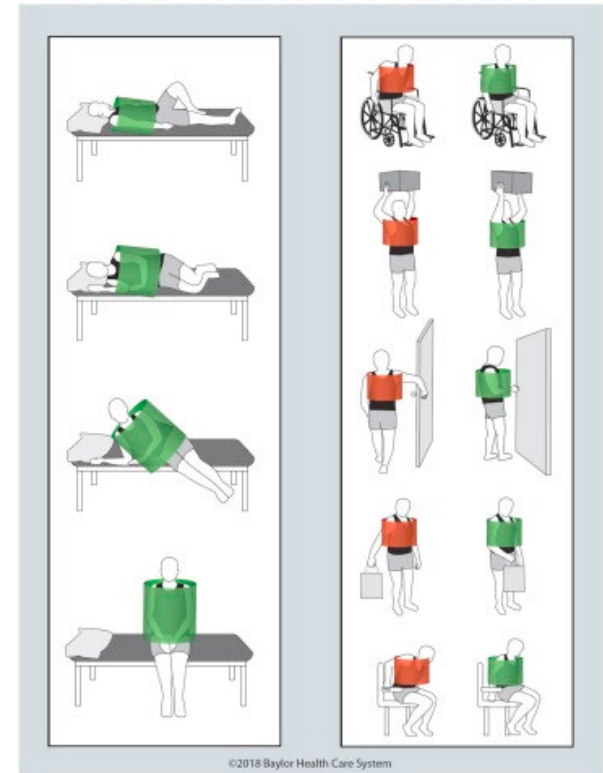
Oct 14,16,18,21 (7:45 3:15)

Baylor Medical Center Inservice: Oct 8th

Rehab Services Cardiac Lecture/Lab (1.5 hours)

- 9/4, 9/9, 9/12, 9/13, 9/16, 9/26

Keep Your Move in the Tube™



[Image 2](#)

Current Initiatives

Early Mobilization of Patients on Mechanical Ventilation

Benefits:

- Decreased number of days on mechanical ventilation
- Decreased length of ICU stay
- Increased D/C home vs. rehab facility
- Reduce delirium
- Reduction in next day use of physical restraints
- Reduction in hospital death within 7 days



[Image 1 - Mobigo](#)

Current Initiatives

Early Mobilization of Patients on Mechanical Ventilation

ABCDEF Bundle:

A: Assess, Prevent, and Manage Pain

B: Both Spontaneous Awakening Trials (SATs) and
Spontaneous Breathing Trials (SBTs)

C: Choice of Analgesia and Sedation

D: Delirium: Assess, Prevent, and Manage

E: Early Mobility and Exercise

F: Family Engagement and Empowerment

Current Initiatives

Early Mobilization of Patients on Mechanical Ventilation

Level: 1 Team: Nursing Patient: On bed rest	Nursing <ul style="list-style-type: none">• Every 2 hour turning with PROM
Level: 2 Team: Nursing Respiratory Therapy Patient: On bed rest, but may begin active and resistive exercises in bed and begin sitting in upright position in bed	Nursing <ul style="list-style-type: none">• Every 2 hour turning with PROM• Chair position after Safety Screen is passed; minimum 20 minutes 2x/day Respiratory Therapy <ul style="list-style-type: none">• RT available at bedside for respiratory support as needed

Current Initiatives

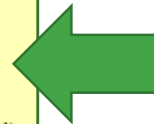
Early Mobilization of Patients on Mechanical Ventilation

<p>Level: 3</p> <p>Team: Nursing Physical Therapy Occupational Therapy Respiratory Therapy</p> <p>Patient: May progress to sitting at edge of bed</p>	<p>Nursing</p> <ul style="list-style-type: none"> • Passive ROM once per shift (If patient can perform safely and independently, remind patient to perform exercises per PT/OT instructions; PT and OT to provide patient written/visual independent exercise program as appropriate) • Every 2 hour turning if not doing independently • Chair position after Safety Screen is passed; minimum 20 minutes 2x/day, if not sitting up in chair 2x/day • EOB with nursing if minimal assist with therapy 	<p>Occupational Therapy</p> <ul style="list-style-type: none"> • Active/ resistive progressive exercises with emphasis on upper extremities as appropriate • Management of delirium and cognition through functional and therapeutic activities. • Bed mobility – progress to sit at edge of bed (with PT, RN and/or RT as needed) • Progress with ADLs/Hygiene training at edge of bed • Advance to level 4 if able to sit at EOB with minimal assist <p>Respiratory Therapy</p> <ul style="list-style-type: none"> • If on vent, assist PT and/or OT with mobility to edge of bed
	<p>Physical Therapy</p> <ul style="list-style-type: none"> • Active /resistive progressive exercises with emphasis on lower extremities as appropriate • Bed mobility – progress to sit at edge of bed (with OT, RN and/or RT as needed) • PT and/or OT assess at each session ability to progress to level 4 • Advance to level 4 if able to sit at EOB with minimal assist 	

Current Initiatives

Early Mobilization of Patients on Mechanical Ventilation

<p>Level: 4</p> <p>Team: Nursing Physical Therapy Occupational Therapy Speech Therapy Respiratory Therapy</p> <p>Patient: May progress to transferring out of bed to chair and gait training as able</p>	<p>Nursing</p> <ul style="list-style-type: none"> • Passive ROM once per shift (If can perform safely and independently, remind patient to perform per PT/OT instructions; PT and OT to provide patient independent exercise program as appropriate) • Every 2 hour turning if not doing independently • Chair position after safety screen is passed; minimum 20 minutes 2x/day, if not sitting up in chair 2x/day <ul style="list-style-type: none"> ○ EOB with nursing if minimal assist with therapy • Perform swallow screen status-post <u>extubation</u> <p>Physical Therapy</p> <ul style="list-style-type: none"> • Active/ resistive progressive exercises with emphasis on lower extremities • Transfer out of bed to chair (with OT, RN and/or RT as needed) <p>Gait Training (with nursing and/or RT, OT as needed)</p> <ul style="list-style-type: none"> • Active/ resistive progressive exercises with emphasis on upper extremities as appropriate • Management of delirium and cognition through functional and therapeutic activities. <p>Progress with ADLs/Hygiene training out of bed, sitting in chair or standing at sink or showering</p>	<p>Respiratory Therapy</p> <ul style="list-style-type: none"> • If on vent, assist PT and/or OT with mobility to edge of bed <p>Speech Therapy:</p> <ul style="list-style-type: none"> • Status-post <u>extubation</u> (Intubated >48 hours), perform swallow evaluation, and/or cognitive and linguistic evaluation, if indicated.
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Current Initiatives

Early Mobilization of Patients on Mechanical Ventilation:

- Interdisciplinary collaboration: Critical Care nursing, Respiratory, PT, OT, Speech (Feb/ March meetings)
- Communication Board integration
- New York Presbyterian In-service
- Policy and Procedure “**Vent Mobilization for Critically Ill Patients in the Intensive Care Unit: Multidisciplinary Mobilization Guidelines**”
- Nurses Classes
- Education via Health Stream
- Go Live November 2024

Future Initiatives

- **Mobilization of Patients on CRRT** (Continuous Renal Replacement Therapy)



Questions?

Thank you!

CLOSED SESSION

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

*RECONVENE OPEN SESSION/
REPORT ON CLOSED SESSION*

ADJOURNMENT