## Laguna Honda Executive Committee Minutes Quality Council 7/3/18

Attendees: Kate Durand, Quoc Nguyen, Jennifer Carton-Wade, Peter Rosel, Garrett Chatfield, Janet Gillen, Vince Lee, Elizabeth Schindler, David Snyder, Angela Pownall-Elizalde, Olivia Thanh, Sheri Lee, Donna Valencia, Arnulfo Medina

Chair: Dr. McShane

Guests: Diamond Kincaid (intern)

<u>ITEM</u>	DISCUSSION	<u>ACTION</u>
CALL TO ORDER		Meeting called to order at 10:03 A.M. by Dr. McShane
June 5, 2018 Minutes Approval	Meeting minutes reviewed for approval	June 5, 2018 minutes approved.
VSM 1, Kaizen 1 A#: Pre- admissions PI Storyboard	<ol> <li>Several interventions were done to decrease the pre-admission process time:         <ol> <li>Admission application packet was shortened and included admission criteria guidelines</li> <li>Electronic submission of admission application was begun</li> <li>A folder was created in a shared drive for general access and a text alert will be sent to screeners</li> </ol> </li> <li>Begin daily review of all specialty care admission applications and simple general SNF admissions</li> <li>After interventions made goals of time from financial clearance to medical screener time, and from medical screener to decision time were all surpassed.</li> </ol>	Continue to monitor performance to ensure we consistently remain within our target goal.     Continue to evaluate the process to determine any areas needing improvement.
VSM 1, Kaizen 2 A3: Clinical Assessment Storyboard	Several interventions were done to decrease the time for all services to complete their resident admission assessments:  1. Give RCTs access to the clinical packet before admission 2. Have a group paging system to notify RCT members of the resident arrival 3. Have all admissions check in at the nursing station before going to the room 4. Create an admission kit that medicine and nursing can use 5. Create a sequence of clinical assessments based on disciplines  After interventions made the assessment process is much smoother, all disciplines know the sequence, admission and ADL kits are ordered and used, and essentially all initial clinical assessments are completed in 48 hours, and final clinical assessments by day 7 after admission.	Next steps:  1. Maintain the RCT group paging 2. Maintain the admission and ADL starter kits 3. Continue monitoring to insure the initial clinical assessments are done within 48 hours and final clinical assessment by day 7 after admission.

FY 17-18 True North – Equity – Homeless Data Capture	Catch ball for The True North Equity – Homeless Data Capture  1. The data was reviewed and a discussion ensued concerning the non-matching charts of the % of homeless admissions data from social services, and %of homeless admissions data from Invision.  2. It was decided not to use the data from social services and have only one source of data, from Invision. We will keep the data starting from 2015 to demonstrate how the new processes begun in January of 2017 have affected the data.	Next steps:     1. Sheri will take the historical data picture chart back to DET to give our input about the confusion the directions there cause.
Update: FY 18-19 X-Matrix and Strategic Priorities	A review of the layout of the FY18-19 X-Matrix was given by Elizabeth Our three strategic priorities for this fiscal year will be Optimizing Data for Value Based Care, Develop our people, and Implement the electronic health record  Also the True North Performance Tracker was reviewed	N/A
Adjournment 10:43 AM		Next meeting August 7, 2018