Laguna Honda Executive Committee Minutes Quality Council 2/6/18

Attendees: Kate Durand, Garrett Chatfield, Peter Rosel, John Grimes, Donna Valencia, Loretta Cecconi, Jennifer Carton-Wade, Heather Rudolph, Quoc Nguyen, Janet Gillen,

Arnulfo Medina, Vicky Lau, Michelle Fouts, Ed Guina

Co-chairs: Dr. McShane and Mivic Hirose (Recorder)

Guests: Grace Chen

<u>ITEM</u>	DISCUSSION	<u>ACTION</u>
CALL TO ORDER		Meeting called to order by Dr. McShane at 10am
January 2, 2018 Minutes Approval	Meeting minutes reviewed for approval.	January 2, 2018 minutes were approved.
PI Storyboards Review	FY 16-17 Employee Satisfaction A3 PI Storyboard:	PI Storyboards accepted. Exec thanked Jennifer, Anne and Donna for reporting on the Employee Satisfaction and CMS Quality Measures on Pain A3s outcomes.
	Jennifer reviewed the PI Storyboard for this completed A3, which was the Workforce True North A3 in FY16-17. Discussion focused on lessons learned including the following:	
	1) Michelle recommended using Survey Monkey as a method to receive feedback from employees;	
	2) Peter also suggested working on refining the Survey Monkey with each iteration, including adding open ended questions;	
	3) All agreed it is important to follow up with making changes when employees provide feedback to change culture; and	
	4) Building in support for managers will be essential for continued employee engagement	
	Jennifer shared the lessons learned with Lena Yue and Olivia Thanh who are spearheading the FY 17-18 Employee Satisfaction A3.	
	Pain Management A3 PI Storyboard:	
	Donna reviewed the PI Storyboard for this completed A3, which is a CMS Quality Measure. While LHH data shows a higher rate than State and National rates, there has been a reported 33% reduction in short stay and 50% reduction in long stay residents in relation to self reported moderate to severe pain from 2011 to 2017. Donna reported the following lessons learned:	
	Analyzing internal data for improvements made more sense than comparing LHH data with other facilities serving different populations; and	
	2) Reduction in pain intensity in those with chronic pain, according to guidelines is not as meaningful an indicator as is the decline in function, though CMS has not adopted this preferred metric	
	Next steps will include analyzing opioid prescriptions for residents reporting moderate to severe pain to calculate daily oral morphine equivalence and evaluating prescribing practices of opiods in chronic noncancer pain and compare dosing to available clinical practice guidelines.	

Coaching Kata: CMS Quality Measure – Activities of Daily Living	Grace Chen provided a status update on the Increased Health with Activities of Daily Living A3 as follows: 1) Currently working on standard work 2) Initiated the functional maintenance group pilot When can we see next: next CASPER report period	Next steps: 1) Review results from the functional maintenance group pilot 2) Collaborate with the Center of Excellence Workgroup
Coaching Kata: Centers of Excellence	Jennifer, Ed and Donna provided a status update on the Strategic Goal – Centers of Excellence A3 as follows: 1) Dashboard has been completed; 2) Program descriptions development is currently in progress; 3) Designating a Palliative Care Lead is pending; and 4) Determine if there can be integration with the FY 17-18 Strategic A3s that were developed at the January Hoshin Kanri When can we see next: June 2018	Next steps: 1) Catchball with Palliative Care Workgroup 2) Continue to work with the MADI group to refine dashboards
A3i Scan Final Review	Quoc presented the revised A3i Scan that was developed and shared at the January 29, 2018 Hoshin Kanri strategic deployment workshop. No edits recommended.	Quality Council approved the A3i Scan.
Next Meeting	March 6, 2018, 10am	Meeting adjourned at 10:53am.