

North Broward Hospital District Board of Commissioners  
1601 South Andrews Avenue, Suite 100, Fort Lauderdale, FL 33316

## **QUALITY ASSESSMENT & OVERSIGHT COMMITTEE MEETING Immediately following the Pension and Investment Committee Meeting Wednesday, June 28, 2023**

The Quality Assessment and Oversight Committee of the North Broward Hospital District was held at the Broward Health Sports Medicine Building, 1601 South Andrews Avenue, Suite 100, Fort Lauderdale, FL 33316.

### **1. NOTICE**

Official notice is attached to these minutes, titled EXHIBIT I. Agenda of this meeting is attached to the minutes, titled EXHIBIT II. Supporting documents, if applicable, are attached to these minutes, titled EXHIBIT III. These exhibits are presented for consideration of the Committee.

### **2. CALL TO ORDER**

There being a quorum present, the meeting was called to order by Chair Ray T. Berry at 1:27 p.m.

### **3. COMMITTEE MEMBERS**

*Present:*

Commissioner Stacy L. Angier  
Commissioner Nancy W. Stamper, Vice Chair  
Commissioner Ray T. Berry, Chair (via TEAMS)

*Senior Leadership*

*Additionally Present:*

Commissioner Jonathan K. Hage (via TEAMS)  
Commissioner Christopher J. Pernicano  
Commissioner Levi G. Williams, Jr.  
Shane Strum, President, Chief Executive Officer  
Alan Whaley, EVP, Chief Operating Officer  
Alisa Bert, VP, Interim Chief Financial Officer  
Linda Epstein, Corporate General Counsel

### **4. PUBLIC COMMENTS**

Chair Berry opened the floor for public comments, in which there were none.

### **5. APPROVAL OF MINUTES**

5.1. Approve Meeting Minutes dated March 29, 2023

Without objection, Chair Berry approved the minutes, dated March 29, 2023.

Motion *carried* without dissent.

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**6. CONSENT AGENDA**

6.1. Quarterly Reports, Data Q1 CY2023, PowerPoint Presentation (Presenter – Barry Gallison, Director, VP Risk and Quality Management)

- 6.1.1. Environment of Care
- 6.1.2. Antimicrobial Stewardship
- 6.1.3. Infection Prevention
- 6.1.4. NPSG - Hand Hygiene
- 6.1.5. Grievances
- 6.1.6. Medicare Readmissions
- 6.1.7. Medicare Mortalities
- 6.1.8. Risk Management Quarterly Reports
- 6.1.9. 2022 Patient Safety Appraisal Reports by Region
- 6.1.10. 2022 Performance Improvement Appraisal by Region
- 6.1.11. 2022 Infection Prevention Appraisal by Region
- 6.1.12. 2022 Environment of Care Annual Reports by Region

**MOTION** It was *moved* by Commissioner Stamper, *seconded* by Commissioner Angier, that:

The Quality Assessment and Oversight Committee of the North Broward Hospital District approve items 6.1.1 through 6.1.12 on the Consent Agenda, as presented.

Motion *carried* unanimously.

**7. DISCUSSION AGENDA**

- 7.1. Quality and Safety Agenda Presentation
  - 7.1.1. 2023 Infection Control Plan

**MOTION** It was *moved* by Commissioner Angier, *seconded* by Commissioner Stamper, that:

The Quality Assessment and Oversight Committee of the North Broward Hospital District approve the 2023 system-wide Infection Prevention and Control Program Surveillance Plan for all Broward Health facilities and the Ambulatory Division.

Motion *carried* unanimously.

- 7.1.2. 2023 Performance Improvement Plan

**MOTION** It was *moved* by Commissioner Stamper, *seconded* by Commissioner Angier, that:

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The Quality Assessment and Oversight Committee of the North Broward Hospital District approve the 2023 system-wide Performance Improvement Plan for all Broward Health facilities and the Ambulatory Division.

Motion *carried* unanimously.

7.1.3. 2023 Patient Safety Plan

**MOTION** It was *moved* by Commissioner Angier, *seconded* by Commissioner Stamper, that:

The Quality Assessment and Oversight Committee of the North Broward Hospital District approve the 2023 system-wide Patient Safety Plan for all Broward Health facilities and the Ambulatory Division.

Motion *carried* unanimously.

7.1.4. Complaint & Grievance Management Policy

**MOTION** It was *moved* by Commissioner Stamper, *seconded* by Commissioner Angier, that:

The Quality Assessment and Oversight Committee of the North Broward Hospital District approve the 2023 system-wide Complaint/Grievance Management Policy for all Broward Health facilities and the Ambulatory Division.

Motion *carried* unanimously.

7.1.5. 2022-2023 Influenza Program (Presenter – Barry Gallison, Director, VP Risk and Quality Management)

Mr. Gallison reported on the District’s compliance for the 2022-2023 Influenza Program, per Leapfrog and Centers for Medicare & Medicaid Services (CMS) requirements. It was noted that the national average participation for hospitals is 78% and the following regional participation was given among employees, Medical Staff and Students/Volunteers:

- Broward Health Medical Center (BHMC) 84%
- Broward Health North (BHN) 84%
- Broward Health Imperial Point (BHIP) 78%
- Broward Health Coral Springs (BHCS) 85%

It was also noted that there was opportunity identified within physician documentation.

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## 7.1.6. Spring Leapfrog Review (Presenter – Barry Gallison, Director, VP Risk and Quality Management)

Mr. Gallison reported the District's rating for Leapfrog Spring 2023 by region:

- Broward Health Coral Springs (BHCS) = B
- Broward Health Imperial Point (BHIP) = C
- Broward Health North (BHN) = B
- Broward Health Medical Center (BHMC) = C

Noted Fall 2023 next public reporting period.

Discussion ensued regarding a decrease in the above mentioned scores within the last reporting period.

Mr. Gallison shared that at the next QAOC Committee meeting, patient experience will be presented as a new survey tool was launched in April 2023. It was requested that patient experience be reported at each QAOC Committee meeting to ensure progress on improvement.

## 7.1.7. 2023 Culture of Safety (Presenter – Barry Gallison, Director, VP Risk and Quality Management)

- Regulatory required survey to ensure a culture of safety.
- Culture of Safety survey is taken every two years via Press Ganey.
- 65% participation rate in 2023; improved from 50% participation rate in 2021.
- Survey includes 33 questions across three categories:
  - Employee Engagement
  - Safety Culture Index
  - Resilience Index

The survey identified five strengths and four opportunities. Implementation of action plans were in process.

For further detail, related slides are available within the June 2023 Quality Assessment and Oversight Committee Meeting book on the Board of Commissioners' web page.

## 8. **ADJOURNMENT**

There being no further business on the agenda, the Chair adjourned the meeting at 1:59 p.m.

Respectfully submitted,  
Commissioner Ray T. Berry, Chair