

North Broward Hospital District Board of Commissioners
1700 Northwest 49th Street, Suite #150, Ft. Lauderdale, FL 33309

QUALITY ASSESSMENT & OVERSIGHT COMMITTEE MEETING 12:30 p.m., Wednesday, December 15, 2021

The Quality Assessment and Oversight Committee of the North Broward Hospital District was held on December 15, 2021 at the Broward Health Corporate Spectrum Location, 1700 NW 49th Street, Suite 150, Fort Lauderdale, Florida 33309.

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 12:34 p.m.

3. COMMITTEE MEMBERS

Present:

Commissioner Stacy L. Angier
Commissioner Nancy W. Stamper, Vice Chair
Commissioner Ray. T. Berry, Chair

Senior Leadership

Additionally Present:

Commissioner Marie C. Waugh (via Teams)
Commissioner Christopher J. Pernicano
Shane Strum, President, Chief Executive Officer
Alex Fernandez, SVP, Chief Financial Officer
Linda Epstein, Corporate General Counsel

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4. PUBLIC COMMENTS

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

5. APPROVAL OF MINUTES

Without objection, Chair Berry approved the minutes, dated September 8, 2021.

Motion *carried* without dissent.

6. CONSENT AGENDA

Quarterly Reports, Data Q3 CY2021, PowerPoint Presentation (Presenters – Joshua Lenchus, Interim Chief Medical Officer, Barry Gallison, Director, VP Risk and Quality Management)

Dr. Lenchus requested approval for Consent Agenda items below, which included quarterly updates for each region.

- 6.1. Community Health Services: Healthcare for Homeless
- 6.2. Home Health
- 6.3. Environment of Care
- 6.4. Antimicrobial Stewardship
- 6.5. Infection Prevention
- 6.6. National Patient Safety Goals (NPSG) – Hand Hygiene
- 6.7. Grievances
- 6.8. Risk Management Quarterly Reports
- 6.9. Medicare Readmission
- 6.10. Medicare Mortalities
- 6.11. Patient Engagement HCAHPS

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 through 6.11 on the Consent Agenda, as presented.

Motion confirmed by roll call.

YES Commissioner Stacy L. Angier

YES Commissioner Nancy W. Stamper, Vice Chair

YES Commissioner Ray T. Berry, Chair

Motion *carried* 3/0.

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7. DISCUSSION AGENDA

7.1. Quality and Safety Agenda Presentation (Presenters – Joshua Lenchus, Interim Chief Medical Officer, Barry Gallison, VP, Risk and Quality Management)

7.1.1. Readmission Reduction Program

- Changes to CMS Quality Programs in the current fiscal year
 - Value Based Purchasing (VBP)
 - Health Acquired Condition
 - Readmissions

Dr. Lenchus advised the Centers for Medicare & Medicaid Services (CMS) Hospital Readmission Reduction Program (HRRP) a VBP program focuses primarily on several conditions and/or procedures specific to avoidable readmission. Assessment of the District was equal to the national average on the following four (4) diagnostic categories:

- Heart Failure
- Chronic Obstructive Pulmonary Disease
- Pneumonia
- Acute Myocardial Infraction

Dr. Lenchus reviewed the Districts costs of Medicare readmission for the FY'20 actual penalty in addition to the FY'21 potential 3% max cost of re-admissions.

CMS ceased judging each hospital against each other, however hospitals are currently stratified into five (5) peer groups (quintiles 1-5) with similar proportions of patients that are dually eligible for Medicare and full-benefit Medicaid.

Dr. Lenchus shared the Districts following three (3) peer groups:

- Region 4
 - BHMC: 18 Florida Hospitals; Penalties ranged from 2.07% to 0.04%; BHMC was at 0.62%; 8 were higher and 7 were lower
- Region 2
 - BHCS & BHIP: 45 Florida Hospitals; Penalties ranged from 3% to 0%; BHIP was at 0.63%; BHCS was at 0.5%; 33 were higher and 9 were lower

*Noted, a correction to BHCS data in presentation deck should reflect 0.5% for FY'19, as 0.73% is reflective for FY'18.

- Region 3
 - BHN: 24 Florida Hospitals; Penalties ranged from 2.07% to 0.04%; BHN was at 0.27%; 20 were higher and 3 were lower

For further detail, related slides are available within the December 2021 Quality Assessment and Oversight Committee Meeting book on the Board of Commissioners' web page.

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7.1.2. Joint Commission Update

Dr. Lenchus advised that the District achieved and/or requested the following Disease Specific Certifications:

- Broward Health Imperial Point (BHIP)
 - Advanced Primary Stroke Center - 12/2021
 - Heart Failure – 5/2020
- Broward Health Medical Center (BHMC)
 - Advanced Comprehensive Stroke Center – 6/2021
 - Joint Replacement Hip / Knee – 8/2021
 - Palliative Care application *submitted* to review program
- Broward Health North (BHN)
 - Advanced Total Hip & Knee Replacement – 3/2020
 - Alzheimer’s Disease – 1/2020
 - Spine Surgery – 11/2019
- Broward Health Coral Springs (BHCS)
 - Advanced Primary Stroke Center – 9/2021
 - Minimally Invasive Colorectal Surgery – 8/2021

Dr. Lenchus provided a high-level overview of the TJC Full Accreditation findings. The District’s Leadership Team was recognized for their achievements amidst the COVID-19 pandemic.

7.1.3. Leapfrog Update

Dr. Lenchus reported that the District achieved a “B” rating for Leapfrog Fall 2021.

Discussion ensued on how close all of the organizations’ (4) facilities were to an “A” rating.

8. ADJOURNMENT

There being no further business on the agenda, the Chair adjourned the meeting at 12:54 p.m.

Respectfully submitted,
Commissioner Christopher J. Pernicano, Secretary/Treasurer