



SVHCD QUALITY COMMITTEE
AGENDA

WEDNESDAY, August 11, 2021

5:00 p.m. Regular Session

TO BE HELD VIA ZOOM VIDEOCONFERENCE

To Participate Via Zoom Videoconferencing
use the link below:

[https://sonomavalleyhospital-
org.zoom.us/j/98847031323?pwd=MktBTGJneDFqTkpVTEExC
MWIGRGduQT09](https://sonomavalleyhospital-org.zoom.us/j/98847031323?pwd=MktBTGJneDFqTkpVTEExCjMwIGRGduQT09)

and Enter the **Meeting ID: 988 4703 1323**
Passcode: 700258

To Participate via Telephone only, dial:
1-669-900-9128 or 1-669-219-2599

and Enter the **Meeting ID: 988 4703 1323**
Passcode: 700258

AGENDA ITEM	RECOMMENDATION	
In compliance with the Americans with Disabilities Act, if you require special accommodations to attend a District meeting, please contact the Interim District Clerk, Stacey Finn, at sfinn@sonomavalleyhospital.org or 707.935.5004 at least 48 hours prior to the meeting.		
MISSION STATEMENT <i>The mission of the SVHCD is to maintain, improve, and restore the health of everyone in our community.</i>		
1. CALL TO ORDER/ANNOUNCEMENTS	<i>Mainardi</i>	
2. PUBLIC COMMENT SECTION <i>At this time, members of the public may comment on any item not appearing on the agenda. It is recommended that you keep your comments to three minutes or less. Under State Law, matters presented under this item cannot be discussed or acted upon by the Committee at this time. For items appearing on the agenda, the public will be invited to make comments at the time the item comes up for Committee consideration.</i>	<i>Mainardi</i>	
3. CONSENT CALENDAR • Minutes 7.14.21	<i>Mainardi</i>	Action
4. MEETING DATE AND TIME MOVE	<i>Mainardi</i>	Action
5. DEPARTMENT PI PROJECT: COMMUNICATION ABOUT MEDICATIONS	<i>Kutza/Winkler</i>	Inform
6. QUALITY INDICATOR PERFORMANCE INDICATORS/SCORECARD JUNE 2021	<i>Jones</i>	Inform
7. COMMITTEE ROLE IN POLICIES AND PROCEDURES	<i>Mainardi</i>	Inform
8. POLICIES AND PROCEDURES	<i>Jones</i>	Action
9. ADJOURN	<i>Mainardi</i>	



**SONOMA VALLEY HEALTH CARE DISTRICT
QUALITY COMMITTEE
July 14, 2021 5:00 PM
MINUTES
Via Zoom Teleconference**

Members Present	Members Present cont.	Excused	Public/Staff
Michael Mainardi, MD, via Zoom Howard Eisenstark, MD, via Zoom Susan Kornblatt Idell via Zoom Carol Snyder via Zoom	Ingrid Sheets via Zoom Cathy Webber via Zoom Andrew Solomon, MD via Zoom		Sabrina Kidd, MD, CMO, via Zoom Mark Kobe, CNO, via Zoom John Hennelly, CEO, via Zoom Philip Brown via Zoom

AGENDA ITEM	DISCUSSION	ACTION
1. CALL TO ORDER/ANNOUNCEMENTS	<i>Mainardi</i>	
	5:00 pm	
2. PUBLIC COMMENT	<i>Mainardi</i>	
	None	
3. CONSENT CALENDAR	<i>Mainardi</i>	
<ul style="list-style-type: none"> QC Minutes, 05.26.21 		MOTION: by Eisenstark to approve, 2 nd by Kornblatt Idell. All in favor.
4. QUALITY COMMITTEE WORK PLAN FOR 2021	<i>Kidd</i>	
	Dr. Kidd explained recent format changes for the Quality Committee meetings and the development of the work plan for the remainder of 2021. Guest speakers on different topics have been added each month. Infection control will be added next year some time.	MOTION: by Kornblatt Idell to approve the work plan, 2 nd by Eisenstark. All in favor.
5. DEPARTMENT PI PROJECT: ED MANAGEMENT OF SEPSIS	<i>Schmidt/Brown</i>	
	Dr. Jasper Schmidt introduced the topic and Mr. Philip Brown, ED Director, presented the sepsis action items and reviewed the metrics. Committee members are asked to let Dr. Kidd know if you have any requests for additional information.	

AGENDA ITEM	DISCUSSION	ACTION
6. QUALITY PERFORMANCE INDICATORS/ SCORECARD REVIEW FOR MAY 2021	<i>Kidd</i>	
	Dr. Kidd explained the newly reformatted quality performance indicators and discussed the May 2021 data.	
7. PATIENT CARE SERVICES DASHBOARD FOR 2ND QUARTER 2021	<i>Kobe</i>	
	Mr. Kobe reviewed the patient care services dashboard, which are areas over which nursing has direct control. Since some of these metrics are now being reported in the Quality Performance Indicators item above, he may add a couple of new metrics to his report.	
8. POLICIES AND PROCEDURES		
	<p>Dr. Mainardi spoke with the Board Chair, and it was requested that the Quality Committee take responsibility for review and approval of policies and procedures in some way. This subject will be reviewed at the August 4th Board Retreat.</p> <p>Mr. Kobe explained the retirement of the Aggressive Behavior Management policy since this one was for the physician clinic offices and it is now covered in the general hospital policy on aggressive behavior.</p> <p>Ms. Sheets had found the charter language regarding review and approval of policies confusing. Dr. Kidd agreed that was the question at hand – exactly how that is implemented. Each policy has an owner, author, and several reviewers, then goes through several committees before going to Quality and the Board. Most have a three-year review cycle, but some are reviewed every year. Many policies that are found to be duplicative are being retired.</p> <p>Going forward this item will be an “action” item again.</p>	
9. CLOSED SESSION		
	The closed session was removed from the agenda since there was no Medical Staff Credentialing to review.	
10. REPORT OF CLOSED SESSION	<i>Mainardi</i>	
	No report.	
11. ADJOURN	<i>Mainardi</i>	
	6:21 pm	

Project Purpose Statement:




SVH has been one of the lowest performing hospitals in the nation related to communication about medications HCAHPS scores. Communication with patients on medications is important for both patient experience HCAHPS scores on the HCAHPS survey AND patient safety. The objective of this project is to create a hospital wide best practice standard related to communication about medications between patients/families, front line caregivers, and pharmacists. The charge of the Communication about Medications Committee is to support these efforts with the goal of increasing the ranking of Communication about Medications Domain from the 2nd percentile rank to the 25th percentile rank by July 1st, 2021.

1) Multidisciplinary Involvement

Traditionally this process was wholly reliant on nursing to provide medication education during a patient’s stay relating to new medications and what to expect from them. To make this a multidisciplinary process, nursing, respiratory therapy, and pharmacy were included in the effort. The education was tailored to be specific to new medicines that were ordered to be given to a patient during their hospital stay.

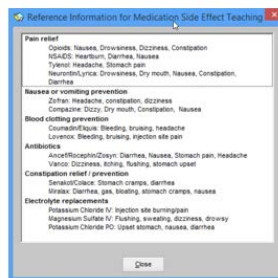
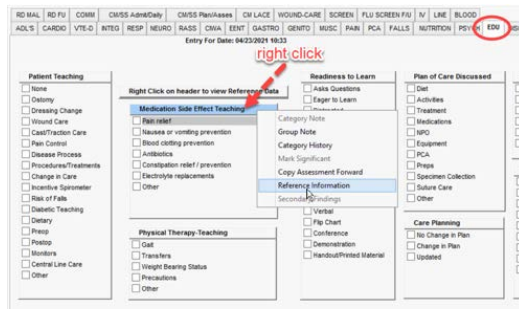
2) Medication Side Effect Teaching Document

A document was created that allowed the clinician to check off what was talked about and provide it to the patient for future reference, with the patient’s name and the date of education. Medications were separated by indication in a visual way, with common medicines within each category and listed their common side effects. In addition, there were spaces included for writing in other medicines as required.

 Sonoma Valley Hospital Medication Side Effect Teaching Sheet New/Changed Meds		
Date:	Patient Name:	
Why am I taking it? This medication is for?	What is my Medication? Medication Name: Generic (Brand)	What are possible Common side effects?
Pain 	Morphine	Nausea, Drowsiness, Constipation, Dizziness
	Hydrocodone (Dilaudid)	
	Fentanyl	
	Hydrocodone-APAP (Ibuprofen)	
	Oxycodone-APAP (Percocet)	
	Codeine (Codeine)	Heartburn, Diarrhea, Nausea
Nausea or Vomiting 	Prochlorperazine (Compazine)	Headache, constipation, dizziness
	Ondansetron (Zofran)	Headache, constipation, dizziness
	Metoclopramide (Reglan)	Drowsy, Dry mouth, Constipation, Nausea
Heartburn or Ulcer 	Omeprazole (Prilosec)	Headache, dizziness, stomach pain, diarrhea
	Pantoprazole (Protonix)	Headache, dizziness, constipation, diarrhea
	Famotidine (Pepcid)	Headache, dizziness, constipation, diarrhea
Blood Clots 	Heparin (Clexane)	Bleeding, bruising, headache
	Enoxaparin (Lovenox)	Bleeding, bruising, injection site pain
Antibiotic or other Probiotic 	Cefazolin (Ancef)	Diarrhea, Nausea, Stomach pain, Headache
	Ceftriaxone (Rocephin)	Diarrhea, Nausea, Stomach pain, Headache
	Vancomycin (Vancocin)	Diarrhea, Nausea, Stomach pain, Headache
	Amoxicillin (Amoxicillin)	Diarrhea, Nausea, Stomach pain, Headache
Constipation 	Senna (Senna)	Stomach cramps, diarrhea
	Docusate (Colace)	Diarrhea, gas, bloating, stomach cramps, nausea
	Polyethylene glycol (Miralax)	Diarrhea, gas, bloating, stomach cramps, nausea
Electrolytes 	Potassium Chloride Injection	Injection site burning/pain
	Magnesium Sulfate Injection	Flushing, sweating, dizziness, drowsy
	Potassium Chloride Tablet	Upset stomach, nausea, diarrhea

3) Medication Side Effect Teaching Documentation

The Paragon documentation tab relating to patient teaching was updated to include medication side effect teaching with specific items to guide the clinician as to what to discuss, as well as including reference information.



4) Paragon Message to Pharmacy

Nurses were trained on how to use this functionality to send a message to the pharmacist when a patient was identified who would benefit from a more in-depth conversation with the pharmacist about their medicines. In addition, morning huddle was used as a time when pharmacists could identify patients who were in need of education.

Message to Pharmacist Feature in Med Admin; new since Paragon 14.0

ISSUE: The "Rx Message" feature is meant for communication to the **pharmacy workqueue**. These messages should be limited to communication regarding medication refill or other pharmacy requests, it is similar to an email.

Notes entered here are not part of the medical record

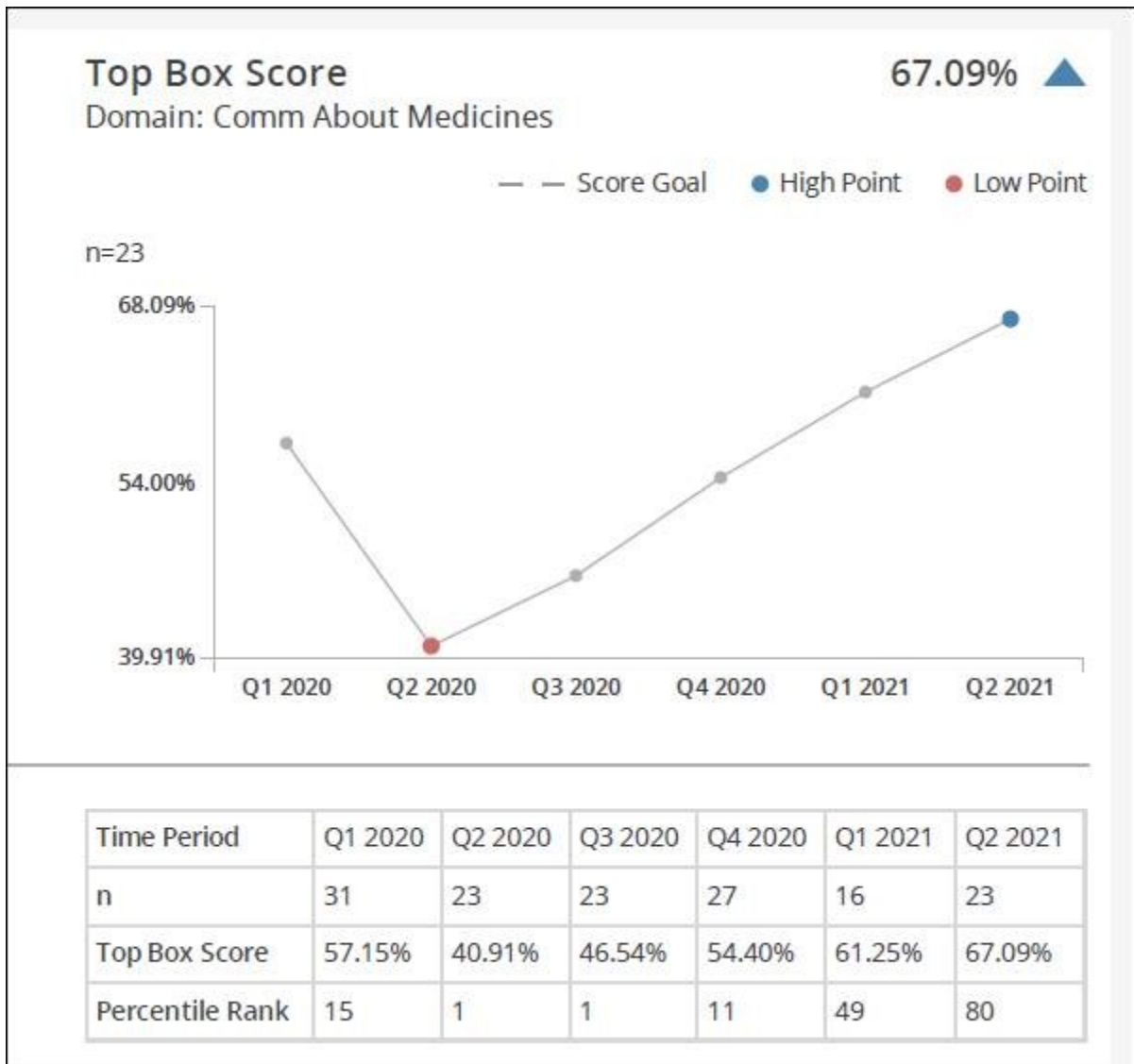
Please do not document clinical data under the "Rx Message" feature

5) Respiratory Therapist Medication Teaching

Respiratory therapists were trained to ensure that patients are taught about any medication given by inhalation at the time that the therapist is administering the doses.

6) Results

This project exceeded its goal. The goal was to increase our score to the 25th percentile by July 31st 2021. Our performance resulted in a score representing the 80th percentile.

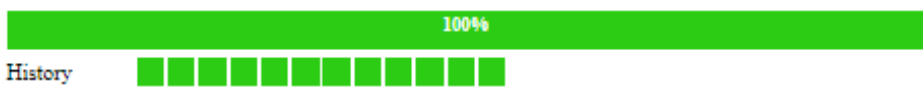


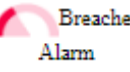


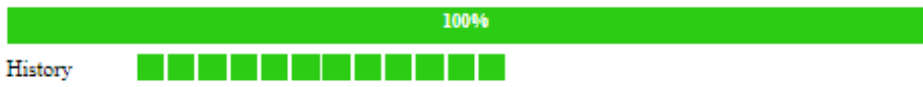





Quality Indicator Performance & Plan




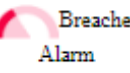
August 2021

Data for June 2021

Quality > Autopsies Mortalities

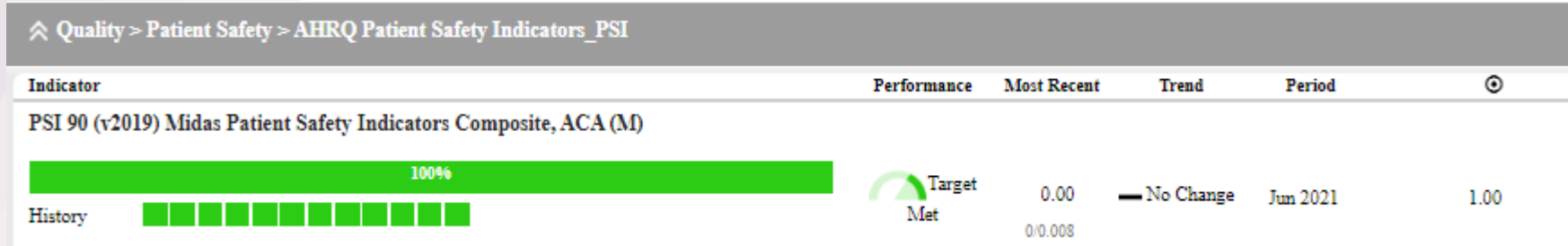
Indicator	Performance	Most Recent	Trend	Period	
Acute Care Mortality Rate (M) 	 Target Met	4.4% 3/68	Improved	Jun 2021	15.3%
Congestive Heart Failure Mortality Rate [M] 	 Breaches Alarm	33.3% 1/3	Deteriorated	Jun 2021	11.5%
COPD Mortality Rate [M] 	 Target Met	0.0% 0/2	No Change	Jun 2021	8.5%
Ischemic Stroke Mortality Rate [M] 	 Target Met	0.0% 0/4	No Change	Jun 2021	13.8%
Pneumonia Mortality Rate [M] 	 Target Met	0.0% 0/1	Improved	Jun 2021	15.6%

Quality > Process of Care > Sepsis Care

Indicator	Performance	Most Recent	Trend	Period	
Sepsis, Severe - Mortality Rate (M) 	 Target Met	0.0% 0/3	Improved	Jun 2021	25.0%
Septic Shock - Mortality Rate (M) 	 Breaches Alarm	33.3% 1/3	No Change	Jun 2021	25.0%

Scorecard Summary

AHRQ Patient Safety Indicators





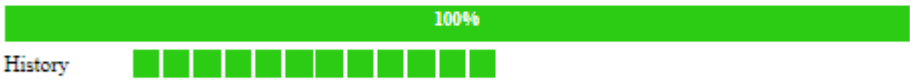



- The Patient Safety Indicators 90 (PSIs)
 - PSI 03 Pressure Ulcer
 - PSI 06 Iatrogenic Pneumothorax Rate
 - PSI 08 In Hospital Fall with Hip Fracture
 - PSI 09 Perioperative Hemorrhage or Hematoma
 - PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis
 - PSI 11 Postoperative Respiratory Failure
 - PSI 12 Perioperative Pulmonary Embolism or DVT
 - PSI 13 Postoperative Sepsis
 - PSI 14a Postoperative Wound Dehiscence, Open
 - PSI 14b Postoperative Wound Dehiscence, Non-Open
 - PSI 15 Accidental Puncture or Laceration

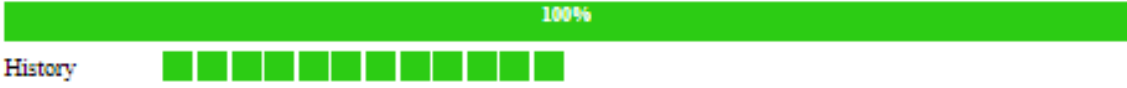














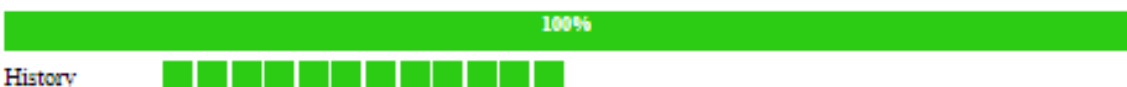


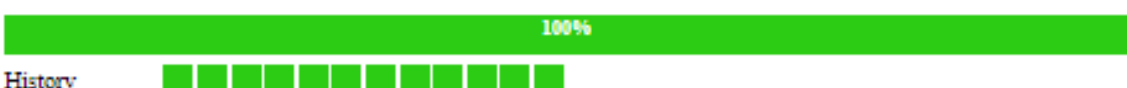


Scorecard Summary

Patient Falls

Preventable Harm





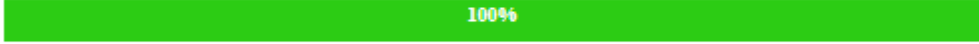







Quality > Patient Safety > Falls

Indicator	Performance	Most Recent	Trend	Period	
RM ACUTE FALL- NO INJURY (M) per 1000 patient days 	 Target Met	0.00 0/243	No Change	Jun 2021	3.75
RM ACUTE FALL- WITH INJURY (M) per 1000 patient days 	 Target Met	0.00 0/243	No Change	Jun 2021	3.75
RM ACUTE FALL- All (M) per 1000 patient days 	 Target Met	0.00 0/243	No Change	Jun 2021	3.75

Indicator	Performance	Most Recent	Trend	Period	
30-DV Inpatients - % Readmit to Acute Care within 30 Days (M) 	 Target Met	4.62% 3/65	 Improved	Jun 2021	15.30%
COPD, CMS Readm - % Readmit within 30 Days, ACA (M) 	 Target Met	0.0% 0/2	 No Change	Jun 2021	19.5%
HF, CMS Readm Rdctn - % Readmit within 30 Days, ACA (M) 	 Target Met	0.0% 0/2	 No Change	Jun 2021	21.6%
Hip/Knee, CMS Readm Rdctn - % Readmit within 30 Days, ACA (M) 	 Target Met	0.0% 0/1	 No Change	Jun 2021	4.0%
PNA, CMS Readm Rdctn - % Readmit within 30 Days, ACA (M) 	 Target Met	0.0% 0/1	 Improved	Jun 2021	16.6%
Sepsis, Severe - % Readmit within 30 Days (M) 	 Target Met	0.3% 1/3	 Improved	Jun 2021	12.0%
Septic Shock - % Readmit within 30 Days (M) 	 Target Met	0.0% 0/2	 Improved	Jun 2021	13.3%

Blood Culture Contamination

Quality > Blood Utilization

Indicator	Performance	Most Recent	Trend	Period	📍
Blood Cultures -Total Contamination Rate (M)  History 	 Target Met	0.8% 1/130	 Improved	Jun 2021	3.0%
Blood Cultures -Contamination Rate [LAB] (M)  History 	 Target Met	1.5% 1/65	 Improved	Jun 2021	3.0%
Blood Cultures -Contamination Rate[RN] (M)  History 	 Target Met	0.0% 0/65	 Improved	Jun 2021	3.0%

CIHQ Stroke Certification Measures

Quality > Process of Care > Code Stroke Elapsed Time

Indicator	Performance	Most Recent	Trend	Period	⊙	
CDSTK-03 Median- Code Stroke Called [M] elapsed time (mins)	 History	Target Met	4.50	⬇ Deteriorated	Jun 2021	10.00
CDSTK-04 Median- Door to Phys Eval [M] minutes	 History	Target Met	1.50	↔ No Change	Jun 2021	10.00
CDSTK-05 Median- Door to CT Scanner [M] elapsed time (minutes)	 History	Target Met	7.00	⬇ Improved	Jun 2021	25.00
CDSTK-06 Median- Neuro Consult Contacted [M] minutes	 History	Target Met	11.00	⬇ Deteriorated	Jun 2021	30.00
CDSTK-07 Median- CT Read by Radiology [M] minutes	 History	Target Met	22.00	⬇ Improved	Jun 2021	45.00
CDSTK-08 Median- Lab Results Posted [M] minutes	 History	Target Met	18.00	⬇ Improved	Jun 2021	45.00
CDSTK-10 Median- Door to EKG Complete [M] minutes	 History	Target Met	40.00	⬇ Deteriorated	Jun 2021	60.00
CDSTK-11 Median- Door to tPA Decision [M] minutes	 History	Target Met	15.00	⬇ Improved	Jun 2021	60.00

- Stroke encounters for June 2021
 - 14 "Code Stroke"
 - 7 ICD-10 coded

Utilization Management

Finance > Utilization Management						
Indicator	Performance	Most Recent	Trend	Period		
Acute Care - Geometric Mean Length of Stay [M]	 History	Target Met 2.55 <small>30.6016/12</small>	Improved	Jun 2021	2.75	
1 Day Stay Rate-Medicare [M]	 History	Target Met 6.82% <small>3/44</small>	Deteriorated	Jun 2021	8.10%	
1 Day Stay Rate Medi-Cal [M]	 History	Target Met 0.00% <small>0/15</small>	Improved	Jun 2021	2.61%	

Core Measures










Quality > Core Measures > HOP Measures > HOP Colonoscopy

Indicator	Performance	Most Recent	Trend	Period	
Core OP29/ASC9 - Colonoscopy:F/U for Avg Risk Pts (M)				Jun 2021	89.0%
Core OP-23 - Head CT/MRI Results for STK Pts w/in 45 Min of Arrival (M)				Jun 2021	72.0%
Core OP-18b - Median Time ED Arrival to ED Departure - Reporting Measure (M)				Jun 2021	140.00

Core Measures Sepsis

Quality > Core Measures > Sepsis						
Indicator	Performance	Most Recent	Trend	Period		
SEP-1 Early Management Bundle, Severe Sepsis/Septic Shock (M)			Bet. 80.0% 4/5	Deteriorated	Jun 2021	81.0%
History						
SEP1aa - severe sepsis - initial lactate management (M)			100.0%	No Change	Jun 2021	94.0%
History						
SEP1ab - severe sepsis - broad spectrum antibiotic (M)			100.0%	No Change	Jun 2021	94.0%
History						
SEP1ac - severe sepsis - blood culture collection (M)			100.0%	Improved	Jun 2021	100.0%
History						
SEP1b - severe sepsis - repeat lactate level measurement(M)			100.0%	No Change	Jun 2021	100.0%
History						
SEP1c - septic shock - resuscitation w/ crystalloid fluids (M)			80.0%	Deteriorated	Jun 2021	100.0%
History						
SEP1da - septic shock - vasopressors (as of 1/20) (M)			100.0%	No Change	Jun 2021	100.0%
History						
SEP1db - septic shock - repeat volume status/tissue perfusion assess (as of 1/20) (M)			100.0%	No Change	Jun 2021	100.0%
History						

Infection Prevention

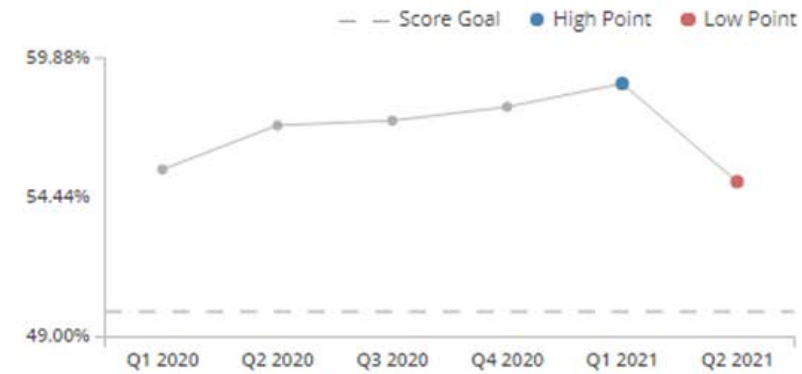
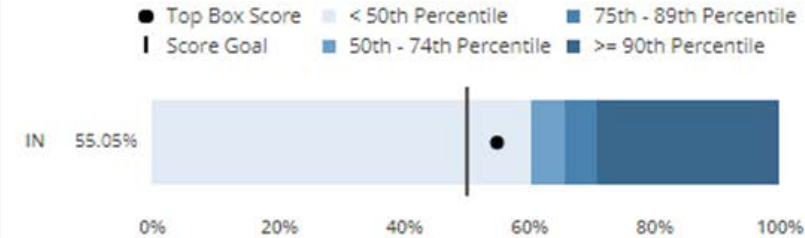
Specific/Preventable Harm Metrics Hospital Acquired Infection or Condition	FY20 Baseline # of events	# of Harm Events		Ratio		FY21 Goals	Trendline Summary of Rate Green/Red Dot: Best/Worst Monthw/in 12-month Trend
		June 2021	FY21TD	FY20	FY21TD		
CLABSI-Central Line Blood Stream Infection (per 10k pt days)	0	0	0	0.00000000	0.00000000	0.777	
CAUTI-Catheter Associated Urinary Tract Infection (per 10k pt days)	0	0	0	0.00000000	0.00000000	0.734	
MRSA-Methicillin-resistant Staphylococcus aureus (per 10k pt days)	0	0	0	0.00000000	0.00000000	0.865	
VAE-Ventilator-Associated Event (per 10k pt days)	0	0	0	0.00000000	0.00000000	not on hosp compare	
SSI HYST-Surgical Site Infection Hysterectomy (per 10k pt days)	0	0	0	0.00000000	0.00000000	0.944	
SSI JOINT-Surgical Site Infection Joint (per 10k pt days)	0	0	0	0.00000000	0.00000000	not on hosp compare (complication rate is)	
SSI COLON-Surgical Site Infection Colon (per 10k pt days)	0	0	0	0.00000000	0.00000000	0.863	
C.DIFF- Clostridioides difficile (per 10k pt days)	0	0	2	0.00000000	6.31711900	0.554	
HAPI- Hospital Acquired Pressure Injuries (per 10k pt days)	0	0	0	0.00000000	0.00000000	0.59	

Q2 HCAHPS data
will be finalized
September 2021

Inpatient Patient Satisfaction

Service Line Performance ⓘ

PG Overall



Section Performance ⓘ

SORT BY

Default

SELECT

Standard

▲ Positive ▼ Negative

Survey Type	Section	Current n	Current Period (Q2-21)	Previous Period (Q1-21)	Change	
CAHPS	Comm w/ Nurses	35	77.14%	81.00%	-3.85%	▼
CAHPS	Response of Hosp Staff	33	70.94%	67.65%	3.29%	▲
CAHPS	Comm w/ Doctors	35	72.59%	82.87%	-10.28%	▼
CAHPS	Hospital Environment	35	58.38%	60.48%	-2.10%	▼
CAHPS	Comm About Medicines	23	67.09%	61.25%	5.84%	▲
CAHPS	Discharge Information	33	74.19%	81.13%	-6.93%	▼
CAHPS	Care Transitions	34	47.11%	55.56%	-8.45%	▼

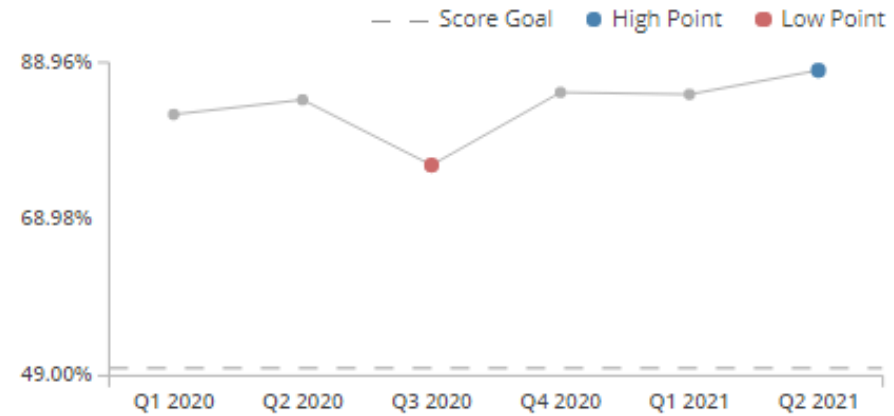
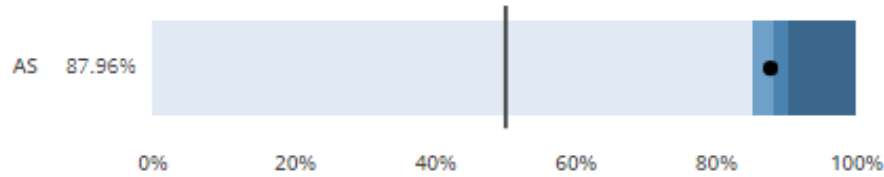
Q2 HCAHPS data
will be finalized
September 2021

Surgery Patient Satisfaction

Service Line Performance ⓘ

PG Overall

- Top Box Score
- < 50th Percentile
- 75th - 89th Percentile
- Score Goal
- 50th - 74th Percentile
- >= 90th Percentile



Section Performance ⓘ

SORT BY

Default

SELECT

Standard

▲ Positive ▼ Negative

Survey Type	Section	Current n	Current Period (Q2-21)	Previous Period (Q1-21)	Change	
CAHPS	Communication	88	90.98%	90.08%	0.90%	▲
CAHPS	Facility/Personal Trtment	88	96.19%	98.91%	-2.72%	▼
CAHPS	Discharge	88	79.20%	77.92%	1.28%	▲

Document Tasks by Committee

Listing of currently pending and/or upcoming document tasks grouped by committee.

Sonoma Valley Hospital

Run by: Finn, Stacey (sfinn)
Run date: 08/02/2021 1:51 PM

Report Parameters

Filtered by: Document Set: all applicable
Committee: 07 BOD-Quality Committee of the Board
Include Current Tasks: Yes
Include Upcoming Tasks: No

Grouped by: Committee

Sorted by: Document Name, Document Location

Report Statistics

Total Documents: 34

Committee: 07 BOD-Quality Committee of the Board

Committee Members: Finn, Stacey (sfinn), Woodall, Vivian (vwoodall)

Current Approval Tasks (due now)

Document	Task/Status	Pending Since	Days Pending
24 Hour Cardiac Monitor Scanning <i>Cardio Dept</i>	Pending Approval	7/16/2021	17
<p>Summary Of Changes: Policy reviewed, updated directors title. No content changes made.</p> <p>Please retire this policy. We do not perform this test</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Todeschini, Laurel (ltodeschini), Young, Dave (dyoung)</p> <p>Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Accountability and Responsibility GL8750-101 <i>Case Management/UM Dept</i>	Pending Approval	7/6/2021	27
<p>Summary Of Changes: Added:Monday through Friday. . Behavioral/Mental Health consultations with a medical staff member or contracted psychiatrist/psychologist/LCSW are initiated by the ordering physician.</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Jones, Danielle (djones)</p> <p>Approvers: Jones, Danielle (djones) -> 01 P&P Committee - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Aerosol Therapy Indications Policy <i>Respiratory Therapy Dept</i>	Pending Approval	7/16/2021	17
<p>Summary Of Changes: Reviewed. Recommend retiring; it is not clear what this policy is trying to say - but Indications for Aerosol Therapy is covered in EBSCO Dynamic health</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Winkler, Jessica (jwinkler)</p> <p>Approvers: Medical Director-Respiratory Therapy -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Finn, Stacey (sfinn)

Run date: 08/02/2021 1:51 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Aggressive Behavior Management <i>Ancillary Services Dept Policies</i>	Pending Approval	7/6/2021	27
Summary Of Changes:	Retire--use organizational policy and competency (Workplace Violence #xxxxxxx)		
Moderators:	Newman, Cindi (cnewman), Tierney, Pat (ptierney)		
Lead Authors:	Kuwahara, Dawn (dkuwahara)		
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)		
AIDET-Patient Relations Protocols 8440-01 <i>EVS Dept Policies</i>	Pending Approval	7/6/2021	27
Summary Of Changes:	Retire, follow organizational protocol. Reviewed policy and made minor grammar corrections.		
Moderators:	Newman, Cindi (cnewman), Tierney, Pat (ptierney)		
Lead Authors:	Drummond, Kimberly (kdrummond)		
Approvers:	01 P&P Committee -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Ambient Breathing (A.B.) Treatments <i>Respiratory Therapy Dept</i>	Pending Approval	7/16/2021	17
Summary Of Changes:	Reviewed. Recommend retiring, same information available on EBSCO Dynamic Health ("Aerosol Therapy")		
Moderators:	Newman, Cindi (cnewman), Tierney, Pat (ptierney)		
Lead Authors:	Winkler, Jessica (jwinkler)		
Approvers:	Medical Director-Respiratory Therapy -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Cardiac Exercise Test (Treadmill) <i>Cardio Dept</i>	Pending Approval	7/16/2021	17
Summary Of Changes:	No changes to content		
Moderators:	Newman, Cindi (cnewman), Tierney, Pat (ptierney)		
Lead Authors:	Todeschini, Laurel (ltodeschini), Young, Dave (dyoung)		
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Care Transitions Program Post Discharge Phone Calls DS8750- 124 <i>Case Management/UM Dept</i>	Pending Approval	7/6/2021	27
Summary Of Changes:	Retire. This policy was part of the PRIME grant that ends December 31, 2020. It may be that it is reinstated in another format in 2021.		
Moderators:	Newman, Cindi (cnewman), Tierney, Pat (ptierney)		
Lead Authors:	Jones, Danielle (djones)		
Approvers:	Jones, Danielle (djones) -> 01 P&P Committee - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Central Venous Pressure Monitoring <i>ICU Dept</i>	Pending Approval	7/16/2021	17
Summary Of Changes:	Reviewed, Recommend retiring in favor of EBSCO Dynamic Health.		

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Finn, Stacey (sfinn)

Run date: 08/02/2021 1:51 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Winkler, Jessica (jwinkler)**
 Approvers: **01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Clinical Practice Guidelines	Pending Approval	7/16/2021	17
<i>Governance and Leadership Policies</i>			

Summary Of Changes: **Reviewed, no changes except that it was revised to meet current formatting guidelines.**

Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Kidd, Sabrina (skidd)**
 Approvers: **01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Continuity of Operations Plan (COOP)	Pending Approval	7/16/2021	17
<i>Emergency Preparedness Policies (EP)</i>			

Summary Of Changes: **No Changes to current policy**

Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Kobe, Mark (mkobe)**
 ExpertReviewers: **Finn, Stacey (sfinn)**
 Approvers: **01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Discharge from the Intensive Care Unit	Pending Approval	7/16/2021	17
<i>ICU Dept</i>			

Summary Of Changes: **Reviewed. Recommend retiring in favor of EBSCO Dynamic Health**

Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Winkler, Jessica (jwinkler)**
 Approvers: **01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Discharge Referral Process for Home Care DC8750- 107	Pending Approval	7/6/2021	27
<i>Case Management/UM Dept</i>			

Summary Of Changes: **Updated for electronic exchanges of information; added documents that need to be sent; changed the name to reflect all potential discharge referrals and added details for each referral process.**

Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Jones, Danielle (djones)**
 Approvers: **Jones, Danielle (djones) -> 01 P&P Committee - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Emergency Department Nursing Protocols	Pending Approval	7/16/2021	17
<i>Nursing Services Policies (NS)</i>			

Summary Of Changes: **Very minimal punctuation changes**

Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Kobe, Mark (mkobe)**
 Approvers: **01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Finn, Stacey (sfinn)

Run date: 08/02/2021 1:51 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Emergency Operations Plan	Pending Approval	7/16/2021	17
<i>Emergency Preparedness Policies (EP)</i>			
<p>Summary Of Changes: Air Quality standards as measured by Purple Air added</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Kobe, Mark (mkobe)</p> <p>ExpertReviewers: Finn, Stacey (sfinn)</p> <p>Approvers: Kobe, Mark (mkobe) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Hospital Evacuation During Disaster	Pending Approval	7/16/2021	17
<i>Emergency Preparedness Policies (EP)</i>			
<p>Summary Of Changes: Updated. Added Appendix A which is a document to instruct staff what to put together for the patient in the event of mandatory evacuation. Medical record information, contact information, medications for the transport of the patient to another facility</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Kobe, Mark (mkobe)</p> <p>ExpertReviewers: Finn, Stacey (sfinn)</p> <p>Approvers: Kobe, Mark (mkobe) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Intravenous Management	Pending Approval	7/16/2021	17
<i>ICU Dept</i>			
<p>Summary Of Changes: Reviewed. Recommend retiring in favor of EBSCO Dynamic Health.</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Winkler, Jessica (jwinkler)</p> <p>Approvers: 01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Mechanical Ventilation Management	Pending Approval	7/16/2021	17
<i>ICU Dept</i>			
<p>Summary Of Changes: Reviewed; Recommend retiring in favor of EBSCO Dynamic Health</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Winkler, Jessica (jwinkler)</p> <p>Approvers: 01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Nursing Services Education Plan	Pending Approval	7/16/2021	17
<i>Nursing Services Policies (NS)</i>			
<p>Summary Of Changes: Updated to reflect current department status eliminating references to Skilled Nursing Unit and Home Care. Deleted reference to non-existent bonus program for certification.</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Kobe, Mark (mkobe)</p> <p>Approvers: 01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Finn, Stacey (sfinn)

Run date: 08/02/2021 1:51 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Orientation, Case Manager <i>Case Management/UM Dept</i>	Pending Approval	7/6/2021	27
Summary Of Changes:	Recommend Retirement--redundant		
Moderators:	Newman, Cindi (cnewman), Tierney, Pat (ptierney)		
Lead Authors:	Jones, Danielle (djones)		
Approvers:	Jones, Danielle (djones) -> 01 P&P Committee - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Oxygen Therapy Policy <i>Respiratory Therapy Dept</i>	Pending Approval	7/16/2021	17
Summary Of Changes:	Reviewed. Recommend retiring in favor of EBSCO Dynamic Health ("Oxygen Therapy")		
Moderators:	Newman, Cindi (cnewman), Tierney, Pat (ptierney)		
Lead Authors:	Winkler, Jessica (jwinkler)		
Approvers:	Medical Director-Respiratory Therapy -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Patient Resuscitation Code Status <i>Targeted Quality & Safety Initiatives Policies (QS)</i>	Pending Approval	7/16/2021	17
Summary Of Changes:	Updated language to match order set language and definitions of code types.		
Moderators:	Newman, Cindi (cnewman), Tierney, Pat (ptierney)		
Lead Authors:	Kidd, Sabrina (skidd)		
Approvers:	01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Patient's Rights to Access Protective Services <i>Patient Rights Policies (PR)</i>	Pending Approval	7/16/2021	17
Summary Of Changes:	Reviewed, no changes.		
Moderators:	Newman, Cindi (cnewman), Tierney, Pat (ptierney)		
Lead Authors:	Jones, Danielle (djones), Kidd, Sabrina (skidd)		
Approvers:	01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Pregnant and Breastfeeding Healthcare Workers, Guidelines for <i>Infection Prevention & Control Policies (IC)</i>	Pending Approval	7/16/2021	17
Summary Of Changes:	added covid, changed some basic wording issues, defined acronyms		
Moderators:	Newman, Cindi (cnewman), Tierney, Pat (ptierney)		
Lead Authors:	Montecino, Stephanie (smontecino)		
Approvers:	Jones, Danielle (djones) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Protective and Advocacy Services PR8750 -120 <i>Case Management/UM Dept</i>	Pending Approval	7/6/2021	27

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Finn, Stacey (sfinn)

Run date: 08/02/2021 1:51 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Summary Of Changes: **Spoke to Social Worker Updating and Maintaining Resource List**
 Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Jones, Danielle (djones)**
 Approvers: **Jones, Danielle (djones) -> 01 P&P Committee - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Sputum Collection/Induction <i>Respiratory Therapy Dept</i>	Pending Approval	7/16/2021	17
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Summary Of Changes: **Reviewed. Recommend retiring. It is outdated and EBSCO Dynamic health has it covered.**
 Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Winkler, Jessica (jwinkler)**
 Approvers: **Medical Director-Respiratory Therapy -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Standard Employer Service Rate <i>Ancillary Services Dept Policies</i>	Pending Approval	7/6/2021	27
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Summary Of Changes: **Reviewed, no changes**
 Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Kuwahara, Dawn (dkuwahara)**
 Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Suctioning Patients in the Intensive Care Unit Patients <i>ICU Dept</i>	Pending Approval	7/16/2021	17
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Summary Of Changes: **Reviewed. Recommend retiring in favor of EBSCO Dynamic Health**
 Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Winkler, Jessica (jwinkler)**
 Approvers: **01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Tracheal Tube Cuff Management <i>Respiratory Therapy Dept</i>	Pending Approval	7/16/2021	17
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Summary Of Changes: **Reviewed. Recommend retiring. Same information, (updated) is available on EBSCO Dynamic Health.**
 Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Winkler, Jessica (jwinkler)**
 Approvers: **Medical Director-Respiratory Therapy -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Tracheostomy Care <i>ICU Dept</i>	Pending Approval	7/16/2021	17
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Summary Of Changes: **Reviewed. Recommend retiring in favor of EBSCO Dynamic Health**
 Moderators: **Newman, Cindi (cnewman), Tierney, Pat (ptierney)**
 Lead Authors: **Winkler, Jessica (jwinkler)**
 Approvers: **01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Finn, Stacey (sfinn)

Run date: 08/02/2021 1:51 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Tracheostomy Suction Procedure <i>Respiratory Therapy Dept</i>	Pending Approval	7/16/2021	17
<p>Summary Of Changes: Reviewed. Recommend retiring. Same information (updated) is in EBSCO Dynamic Health</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Winkler, Jessica (jwinkler)</p> <p>Approvers: Medical Director-Respiratory Therapy -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Transfer of Patients from Acute Units to SNF or Other Long Term Care Facilities <i>Discharge Planning (DP)</i>	Pending Approval	7/16/2021	17
<p>Summary Of Changes: Retire this policy--it is a step-by-step procedural guide</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Jones, Danielle (djones)</p> <p>Approvers: 01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Transvenous Pacing <i>ICU Dept</i>	Pending Approval	7/16/2021	17
<p>Summary Of Changes: Reviewed. Recommend retiring. We do not do this at SVH, and if we randomly needed to EBSCO Dynamic Health has it covered in depth</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Winkler, Jessica (jwinkler)</p> <p>Approvers: 01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Withdrawal of Life Sustaining Treatment <i>Patient Rights Policies (PR)</i>	Pending Approval	7/16/2021	17
<p>Summary Of Changes: Reviewed, no changes.</p> <p>Moderators: Newman, Cindi (cnewman), Tierney, Pat (ptierney)</p> <p>Lead Authors: Kidd, Sabrina (skidd)</p> <p>Approvers: 01 P&P Committee -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality Committee of the Board - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			