

BOARD OF TRUSTEES
Governance Committee

Tuesday, May 9, 2023
11:00 A.M.

BOARD ROOM
4800 Fournace Place, Bellaire, Texas 77401

The meeting may be viewed online at: <http://harrishealthtx.swagit.com/live>

Notice: Some Board Members may participate by videoconference.

Mission

Harris Health is a community-focused academic healthcare system dedicated to improving the health of those most in need in Harris County through quality care delivery, coordination of care, and education.

AGENDA

- | | | |
|---|--------------------------|---------------|
| I. Call to Order and Record of Attendance | Dr. Arthur Bracey | 2 min |
| II. Approval of the Minutes of Previous Meeting | Dr. Arthur Bracey | 2 min |
| • Governance Committee – April 11, 2023 | | |
| III. Update Regarding Mandated Board Training | | 15 min |
| – <i>Ms. Olga Rodriguez</i> | | |
| IV. Discussion Regarding Recommended Next Steps from 2022 Board Self-Assessment and Priority Focus Areas | | 30 min |
| – <i>Ms. Olga Rodriguez and Ms. Elisabeth Hurst, NRC Health</i> | | |
| V. Discussion Regarding Future Agenda Items – <i>Ms. Olga Rodriguez</i> | | 5 min |
| • Potential Revisions to Board Standard Operating Procedures | | |
| • Healthcare Governance Core Curriculum | | |
| • Nomination Function Performed by Governance Committee for September 2023 Officer Election | | |
| • Continuing Education | | |
| VI. Adjournment | Dr. Arthur Bracey | 1 min |

HARRIS HEALTH SYSTEM
MINUTES OF THE BOARD OF TRUSTEES
GOVERNANCE COMMITTEE MEETING
Tuesday, April 11, 2023
11:00 AM

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATIONS
I. Call to Order and Record of Attendance	Dr. Andrea Caracostis, Chair, called the meeting to order at 11:01 a.m. It was noted there was a quorum present and the attendance was recorded. Dr. Caracostis announced that while some Board members are in the room, others will participate by videoconference as permissible by state law and the Harris Health Videoconferencing Policy. Only participants scheduled to speak have been provided dial in information for the meeting. All others who wish to view the meeting may access the meeting online through the Harris Health website: http://harrishealthtx.swagit.com/live .	
II. Approval of the Minutes of Previous Meeting – Governance Committee – March 7, 2023		Moved by Professor Marcia Johnson, seconded by Dr. Arthur Bracey, and unanimously approved the minutes of the previous meeting. Motion carried.
III. Board Engagement Opportunities	Ms. Olga Llamas Rodriguez, Vice President, Community Engagement & Corporate Communications, stated that the Board Office along with Ambulatory Care Services (ACS) will launch a new program called First Fridays. She noted that each month a tour will be held on the first Friday of every month from 9:00 a.m. – 12:00 p.m. The tour locations will alternate monthly its projected target date for the inaugural First Friday tour is Friday, May 5, 2023.	As Presented.
IV. Presentation Regarding Parliamentary Procedure Training	Ms. Elizabeth Hanshaw Winn, Assistant County Attorney, Harris County Attorney’s Office/ Harris Health Legal Team, delivered a presentation regarding Parliamentary Procedure. She provided a high-level overview of the parliamentary procedure process including minimum meeting requirements, how to properly make a motion as well frequently used subsidiary motions. In addition, Ms. Winn touched on point of order, ways to postpone an agenda item and motions that require a two-thirds vote.	As Presented.

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATIONS
	<p>Dr. Arthur Bracey inquired regarding the voting rights of the meeting chairperson. Ms. Winn explained that Harris Health is a governmental entity and the chairperson has the same voting rights as any other Board member. A copy of the presentation is available in the permanent record.</p>	
<p>V. Presentation Regarding 2022 Board Self-Assessment</p>	<p>Ms. Elisabeth Hurst, Member Success Manager, The Governance Institute, delivered a presentation regarding the 2022 Board Self-Assessment. She provided an overview of the Board’s fiduciary duties and responsibilities. She reported there was a response rate of 100%, with 8 out of 8 respondents participating in the survey. The Board received an overall effectiveness rating of 5.5 compared to the national average of 8.3; the Board had an engagement experience rating of 6.8 and an influence rating of 6.8. These ratings were based upon a 0-10 ratings scale and were aimed at helping the Board identify areas of improvement. Ms. Hurst outlined both the highest and lowest performing assessment items. Dr. Bracey inquired regarding the best way to obtain feedback aside from an annual Board self-assessment. Additionally, Dr. Bracey also inquired regarding barriers surrounding The Open Meetings Act (TOMA). Ms. Hurst recommended one-on-one conversations between the Board chair and the Board members. As it relates to TOMA, Ms. Hurst recommended an agenda building option to help guide Board conversations. She shared Board responses to open-ended questions, open-ended themes and recommended educational topics for the Board to consider. In conclusion, Ms. Hurst highlighted suggestions and next steps in the governance planning process and provided the Board with available resources to help achieve its planning and governance goals. Ms. Jennifer Tijerina inquired regarding the frequency of the Board self-assessment survey and whether the Board has completed the survey in the past. Ms. Cowles, Chief of Staff, stated that self-assessment surveys have been conducted in the past and Harris Health Administration will go back and look for that information. Dr. Caracostis shared that she would like for the Committee to review the Board’s self-assessment matrix and recommend next steps as suggested by The Governance Institute at the next Governance meeting. A copy of the presentation is available in the permanent record.</p>	<p>As Presented.</p>

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATIONS
VI. Adjournment	Moved by Professor Marcia Johnson, seconded by Ms. Jennifer Tijerina, and unanimously approved to adjourn the meeting. There being no further business, the meeting adjourned at 11:54 a.m.	

I certify that the foregoing are the Minutes of the Meeting of the Governance Committee of the Board of Trustees of the Harris Health System held on March 7, 2023.

Respectfully submitted,

Andrea Caracostis, M.D., MPH, Chair

Recorded by Cherry Pierson

Tuesday, April 11, 2023

Harris Health System Board of Trustees Board Meeting – Governance Committee Attendance

Note: For Zoom meeting attendance, if you joined as a group and would like to be counted as present, please submit an email to: BoardofTrustees@harrishealth.org before close of business the day of the meeting.

GOVERNANCE COMMITTEE MEMBERS PRESENT	GOVERNANCE COMMITTEE MEMBERS ABSENT	ADDITIONAL BOARD MEMBERS PRESENT
Dr. Andrea Caracostis (<i>Chair</i>)	Ms. Alicia Reyes	Ms. Jennifer Tijerina
Dr. Arthur Bracey (<i>Ex-Officio</i>)		
Ms. Marcia Johnson		

EXECUTIVE LEADERSHIP
Ms. Amineh Kostov, Vice President, Operations, Specialty Care & Service Lines
Ms.Carolynn Jones, Executive Vice President & Chief Compliance and Risk Officer
Dr. Glorimar Medina-Rivera, Executive Vice President, Ben Taub Hospital
Mr. Jeffrey M. Vinson Sr., Vice President, Chief Information Security Officer
Dr. Jennifer Small, Executive Vice President, Ambulatory Care Services
Ms. Kari McMichael, Vice President, Controller
Mr. Louis Smith, Senior Executive Vice President & Chief Operating Officer
Ms. Maria Cowles, Senior Vice President, Chief of Staff
Dr. Martha Mims, Chair, Medical Executive Board
Dr. Maureen Padilla, Senior Vice President, Nursing Affairs & Support Services
Mr. Michael Hill, Executive Vice President, Chief Strategy & Integration Officer
Ms. Olga Llamas Rodriguez, Vice President, Community Engagement & Corporate Communications
Mr. Omar Reid, Executive Vice President, Chief People Officer
Ms. Patricia Darnauer, Executive Vice President, Lyndon B. Johnson Hospital
Mr. Ron Fuschillo, Senior Vice President and Chief Information Officer
Dr. Sandeep Markan, Chief of Staff, Ben Taub Hospital
Dr. Steven Brass, Executive Vice President & Chief Medical Executive
Dr. Tien Ko, Chief of Staff, Lyndon B. Johnson Hospital

ADDITIONAL GUESTS PRESENT	
Cherry Pierson	John Matcek
Daniel Smith	Katie Rutherford (<i>Harris County Attorney's Office</i>)
Derek Curtis	Matthew Schlueter
Ebon Swofford (<i>Harris County Attorney's Office</i>)	Maxia Webb (<i>The Governance Institute</i>)
Elizabeth Hurst (<i>The Governance Institute</i>)	Nicholas Bell
Elizabeth Winn (<i>Harris County Attorney's Office</i>)	Randy Manarang
Holly Gummert (<i>Harris County Attorney's Office</i>)	Tai Nguyen
Jade Teakell, MD	Tiffani Dusang
Jennifer Zarate	

Tuesday, May 9, 2023

Update Regarding Mandated Board Training



Pension Review Board Creates New Website for Minimum Educational Training

The Pension Review Board (PRB) recently launched a new Minimum Educational Training website. As a result of concerns and ongoing technical problems with the previous educational platform, the PRB has built this new platform to host all the core and continuing education courses created by the PRB.

The Texas Pension Review Board oversees all state and local public retirement systems regarding their actuarial soundness. The PRB's new educational training site can be accessed directly through education.prb.texas.gov.

The new site has features that allow participants to:

- track their progress through a course
- see which PRB courses they've completed on the site*, and
- view, save, and print completion certificates

The agency has also created training videos to assist with the transition and help new users create and troubleshoot their accounts.

Please note that participants will only be able to see the courses they've completed using the new website. Prior course completion will not be reflected on the site, nor will course completions from other entities, such as the Texas Association of Public Employee Pension Systems. Trustees and administrators should continue to report any course completions they receive to the PRB through the [PRB-2000 form](#).

Tuesday, May 9, 2023

Discussion Regarding Recommended Next Steps from 2022 Board Self-Assessment
and Priority Focus Areas



Harris Health System

Board Self-Assessment Facilitation

The Governance Institute

Elisabeth Hurst, J.D., *Member Success Manager*



The Governance Institute[®]

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HEALTH

Fiduciary Duties & Responsibilities



There are specific requirements for individuals to satisfy during their tenure as board members, some statutory and some best practice:

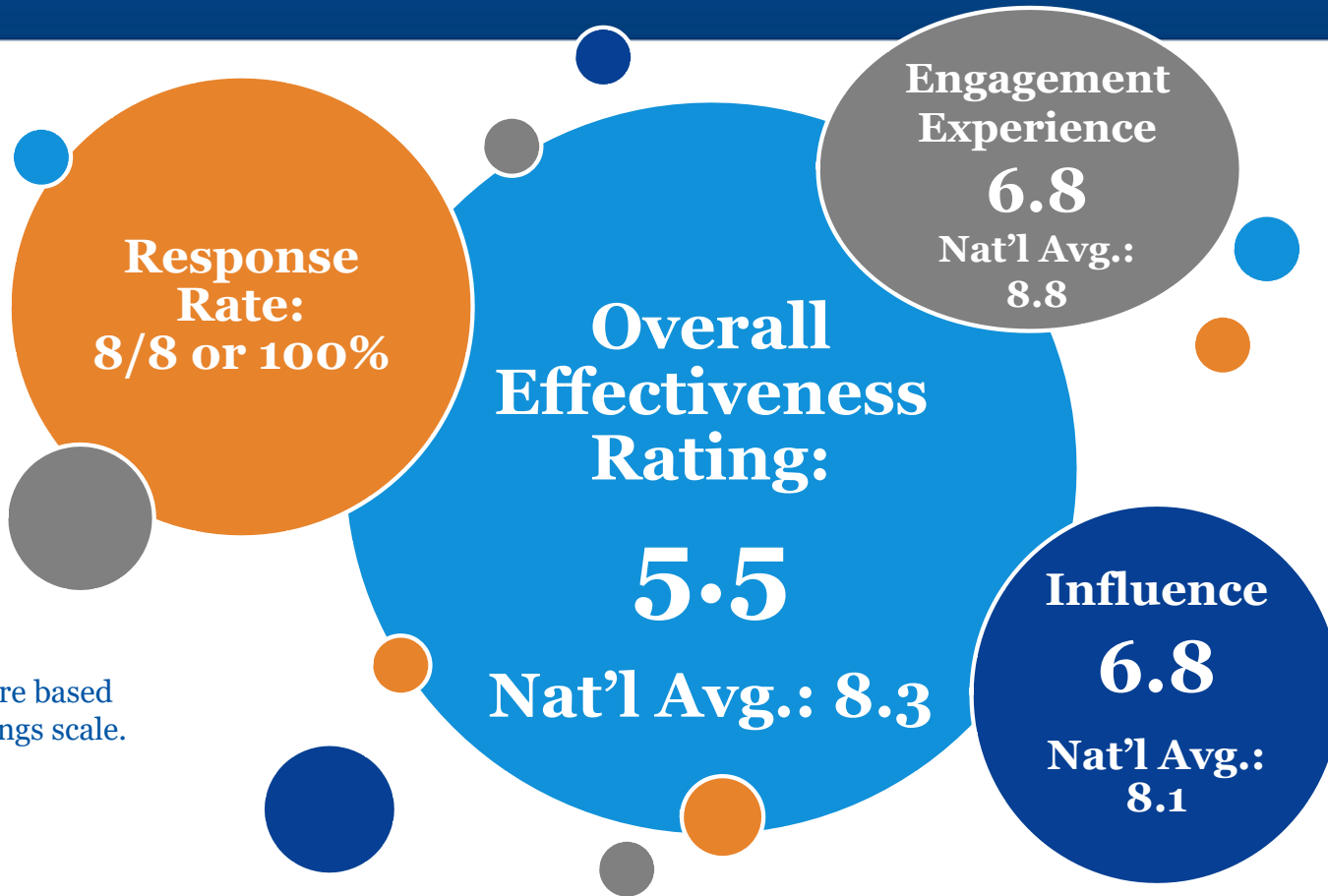
Fiduciary Duties:

- Duty of Care
- Duty of Obedience
- Duty of Loyalty

Responsibilities:

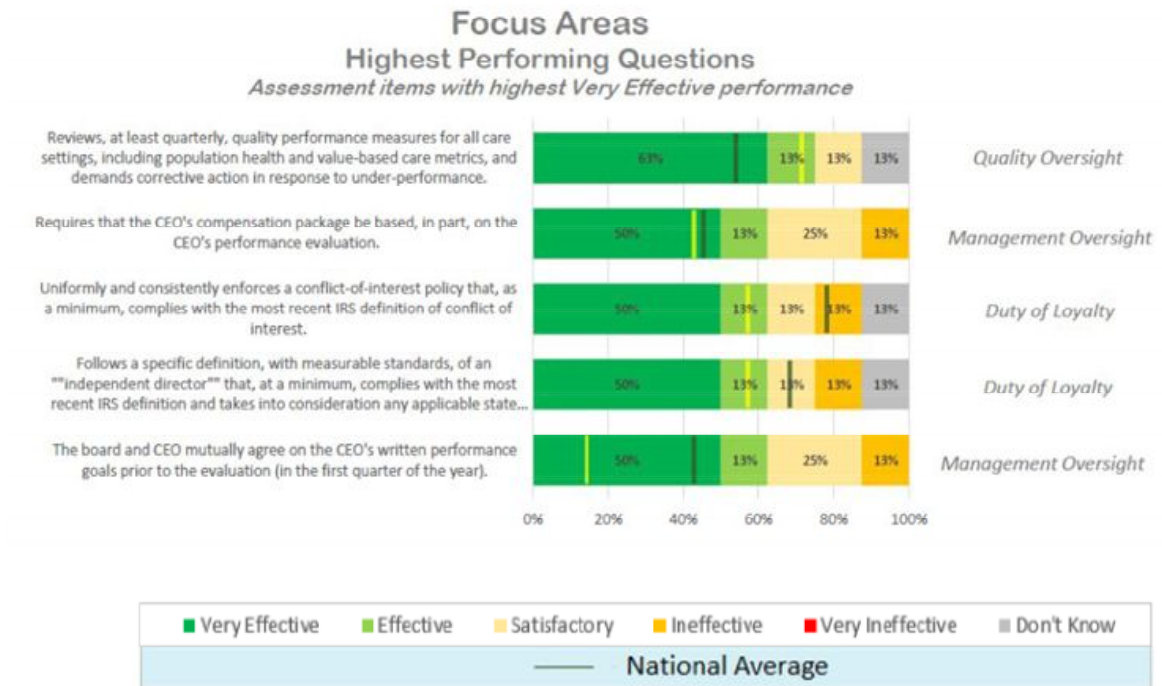
- Quality Oversight
- Financial Oversight
- Strategic Direction
- Board Assessment & Development
- Management Performance
- Community Benefit/Advocacy
- Board Culture

Overall Participation and Scaled Results of Board Member Responses



These ratings are based upon a 0-10 ratings scale.

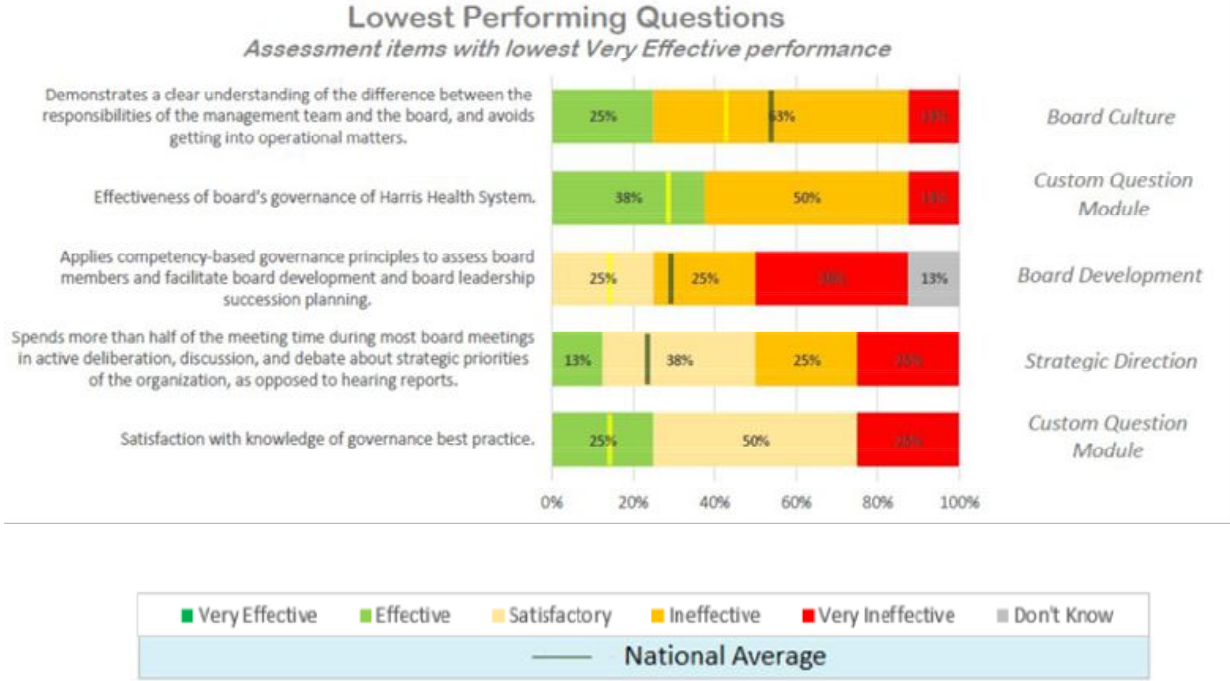
Highest Performing Assessment Items



National Benchmark:

The dark line on each graph indicates where the average organization began their “Very Effective” response rate on a 100% scale.

Lowest Performing Assessment Items



National Benchmark:

The dark line on each graph indicates where the average organization began their “Very Effective” response rate on a 100% scale.

Responses to the Open-Ended Question of Board Member Obligations

QUESTION ASKED: What do you believe to be your most important obligations as a member of the board?



Themes within the Responses



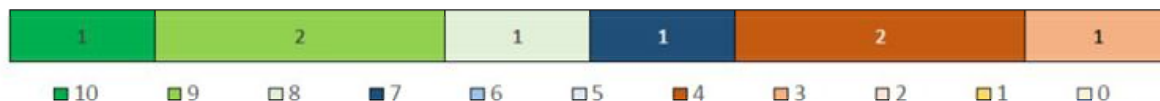
Summary:
The array of topics is themes derived from the open-ended question.
All 8 respondents provided feedback.

Responses to the Open-Ended Question of Board Members Engagement in Their Roles

STATEMENT EVALUATED: My experience on the board is positive, meaningful, and engaging.

**HHS
Engagement
Experience
6.8**

**Nat'l Avg.:
8.8**



Open-Ended Responses:

- “The personal experience has been rewarding. My regret is that board churning lends to uncertainty, lack of knowledge re this complex organization and more division among members. That said - groupthink is not the ideal goal. The perfect balance must be sought.”
- “Not all board members are given equal and meaningful opportunities to participate. There is minimal dialogue to allow for the diversity of thought and participation of all members. Something as basic as only 3 individuals are looked to for motions and seconds on agenda items. Conversations on topics that are meaningful and priority are not encouraged they are actually stifled.”

Summary:

Respondents were asked to rate their agreement on a given statement (Engagement) on a scale of 0-10.

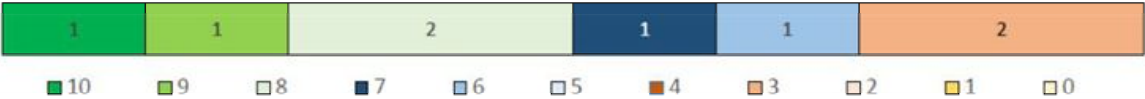
Of the eight (8) respondents who participated in the survey, two (2) board members provided qualitative feedback on Engagement.

Responses to the Open-Ended Question of Board Members Influence in Their Roles

STATEMENT EVALUATED: I have the opportunity to effectively influence the organization’s strategic direction, culture, and/or performance.

**HHS
Role Influence
6.8**

**Nat'l Avg.:
8.1**



Open-Ended Responses:

- “Need to work on this for all members.”
- “There is a lack of transparency and effectiveness. We should receive robust evidence to support recommended decisions. There should be more time spent with Board members on high priority items.”

Summary:

Respondents were asked to rate their agreement on a given statement (Influence) on a scale of 0-10.

Of the eight (8) respondents who participated in the survey, two (2) board members provided feedback on the statement on Influence.

What is the single most important improvement the board could make to be more effective in the upcoming year?

Open-Ended Response Themes:

Of the eight (8) respondents who participated in the survey, all eight (8) board members provided feedback.

The list provided is an external perception of recommendations, not verbatim, of the respondents' feedback.

- Communication with Committees
- Committee Structure
- Strategic Planning Focus
- Continued Governance Growth
- Transparency
- Board Engagement



Open-Ended Comments: Suggestions for Education Topics



Summary:

Respondents were asked to provide suggestions for ongoing board education topics.

Of the eight (8) respondents who participated in the survey, five (5) board members provided feedback.

The list provided is an external perception of recommendations, not verbatim, of the respondents' feedback.

Governance Education/Curriculum

Board Retreat

Healthcare Finance

Safety Net Designation

Bond Referendums

Medicaid Expansion

Inclusion

Development Planning

“Just as the organization does, the board must look for objective standards for its own performance and track whether it is improving and at the right pace. Goals should be clear and specific as to what is to be accomplished, who will lead the effort, the board members involved, tracking mechanism for progress, and the timeline for completion.”

- *Continuous Governance Improvement*
(Jan. 2017)

Intentional Governance Spectrum



Suggested Next Steps in Governance Planning



Action Item	Strategy	Resources Available
Elevate Strategic Discussion During Board Meetings	<ul style="list-style-type: none"> • Embed discussion topics within meeting agendas allowing for ample discussion/review, identifying and adopting metrics for strategic goals • Leverage Intentional Governance resources to bolster an understanding of strategic planning responsibilities and processes • Utilize executive summaries to streamline meeting materials • Contemplate limiting presentation materials within meetings (e.g., limit to 5 slides) • Seek board member input on Strategic Topics of interest 	<ul style="list-style-type: none"> • Intentional Governance: Strategic Planning • Sample Board Meeting Agenda w/Framing Questions • Governance Notes: Practical Tips for Better Hybrid Board Meetings • Elements of Governance: Effective Board Meetings
Provide Best Practice Governance Education	<ul style="list-style-type: none"> • Examine the role of board members in governance as a partnership with executive leadership • Specifically focus on needs of the board’s role as an effective conduit for change in Harris Health System • Engage with The Governance Institute to implement an educational plan that encompasses governance best practices 	<ul style="list-style-type: none"> • Intentional Governance: Advancing Boards Beyond the Conventional (10 Year Anniversary Edition) • Governance Across the Continuum: Leadership Accountability for Creating Health Communities
Adopt Competency-Based Governance Strategies	<ul style="list-style-type: none"> • Assess current board competencies and diversity needs to pre-plan recruitment parameters • Utilize a skills and term limit matrix to plan for future board leadership needs and potential candidate identification • Identify, based upon board member feedback and competency assessment, the educational needs of the board • Create an educational board plan that aligns with the annual workplan 	<ul style="list-style-type: none"> • Building a More Diverse Board • Succession Planning • Competency-based governance • Educational Resources
Use the Board Self-Assessment Results to Establish Board Performance Goals	<ul style="list-style-type: none"> • Share assessment results with full board • Include full board in generative discussion of improvement areas • Identify areas for board and committee performance improvement goals that align with the organization’s strategic plan • Full board reviews and finalizes development plan by outlining objectives to meet plan goals • Board monitors plan to ensure goals are being met and presents progress to full board 	<ul style="list-style-type: none"> • Intentional Governance Guide: Board Evaluation & Performance • Elements of Governance: Board Education, Goal Setting, and Work Plans

Resources for Next Steps in Governance

Areas of Focus:

- *Strategic Planning*
- *Fiduciary Duties & Responsibilities*

Resources Available:

- *Publications, E-Newsletters, Case Studies, White Papers*
- *Leadership Conferences and Webinars*
(Virtually & In-Person)
- *E-Learning Modules*



Thank you for participating in The Governance Institute's Board Self-Assessment Facilitation.



Elisabeth Hurst, JD
Member Success Manager
The Governance Institute
A service of NRC Health
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ehurst@governanceinstitute.com



Governance Institute E-Learning Courses

3.5 continuing education hours // Estimated Completion Time: 4 hours

1. Board Orientation

This course contains lessons on:

- Fundamental Fiduciary Duties
- How the Board Accomplishes Work
- Quality Oversight
- Financial Oversight
- Board Responsibilities: Strategic Direction and Mission Oversight
- Board Development, Management Oversight, and Community Benefit and Advocacy
- Committees: The Workhorses of the Board
- Gaining Perspective to Serve Effectively: An Overview of the Healthcare Industry

1 continuing education hour // Estimated Completion Time: 1 hour

2. The Role of the Board Chair

This course includes lessons on:

- The Board Chair's Responsibilities
- How to be an Effective Chairperson
- More Effective Meetings: The Chairperson's Role

3. Financial Oversight in a Dynamic Healthcare Environment

This course includes lessons on:

- Disciplined Planning and Credit Ratings
- Finding the Right Balance of Cash and Debt
- Setting Organizational Direction

4. Involving Physicians in Governance

This course includes lessons on:

- Expanding physician presence on the board
- Legal, financial, regulatory, and ethical constraints
- Alternatives to increased physician board membership

5. Board Committees & Work Structures

This course includes lessons on:

- Strategically Structuring Board Committees
- Committee Composition and Authority
- Ensuring Effective Committee Functioning



6. Innovation: The Board's Opportunity to Shape the Future

This course includes lessons on:

- What is Innovation in Healthcare?
- Examples of Innovation in Healthcare
- How to Develop an Innovation Strategy: The Board's Role

7. System Structure: Aligning Core Responsibilities across Boards

This course includes lessons on:

- The Importance of an Effective Board Structure
- System Board Structure: Considerations
- Opportunities for Local Boards
- Committee Structure for Systems That Retain Local Boards

8. Management vs. Governance

This course includes lessons on:

- The Distinction between Management and Governance
- Board vs. Management Responsibilities of Oversight
- Working Together

9. The Board's Role in Quality

This course contains lessons on:

- The Board's Role in Quality
- A Culture of Quality and Safety

10. Value-Based Care & Population Health Management: A Primer

This course includes lessons on:

- Definitions
- Examples of Value-Based and Population Health Payment Models
- How to Make the Transition

11. Board Culture & Effectiveness

This course includes lessons on:

- Board Culture
- Performance Evaluation
- Continuous Governance Improvement

12. The Board's Role in Strategic Planning

This course includes lessons on:

- The Strategic Planning Process
- Making Informed Decisions around Future Strategy



- Implementing the Strategic Plan and Enhancing its Effectiveness

13. Patient Experience & Its Role in Quality and Population Health

This course includes lessons on:

- A Brief History and Definition of Patient Experience
- Tying Patient Experience to Quality
- Tying Patient Experience to Population Health

14. Improving Community Health

This course includes lessons on:

- Setting the Stage for Community Health Initiatives
- Leading Practices for Improving Community Health
- Moving beyond the CHNA: Integrating Community Health and Population Health

15. Consumerism: Making Strategic Connections

This course includes lessons on:

- Focusing on the Healthcare Consumer
- Consumer Influencers and Lessons from Outside Industries
- Becoming a Customer-Centric Organization

15-Minute Short Courses:

You can self-select from short courses to create your own e-learning curriculum. For every four courses you take, you can complete an evaluation and earn 1 continuing education credit. Courses in our library include:

- Conflict of Interest
- Physician Credentialing
- Board Culture: Encouraging Member Engagement
- An Introduction to Governance: Fundamental Fiduciary Duties
- Quality Improvement
- Implementing Strategy
- Moving Beyond the CHNA: Integrating Community Health and Population Health
- Value-Based and Population Payment Models
- Distinction between Management and Governance
- Becoming a Consumer-Centric Organization
- Compliance
- Cybersecurity
- Enterprise Risk Management

www.governanceinstitute.com/Learn

BOARD OF TRUSTEES

Quality Committee

Tuesday, May 9, 2023
12:00 P.M.

(or immediately following the Governance Committee)

BOARD ROOM
4800 Fournace Place, Bellaire, Texas 77401

The meeting may be viewed online at: <http://harrishealthtx.swagit.com/live>.

Notice: Some Board Members may participate by videoconference.

Mission

Harris Health is a community-focused academic healthcare system dedicated to improving the health of those most in need in Harris County through quality care delivery, coordination of care, and education.

AGENDA

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|---|--------------------------|-----------------|
| I. Call to Order and Record of Attendance | Dr. Arthur Bracey | 1 min |
| II. Approval of the Minutes of Previous Meeting | Dr. Arthur Bracey | 2 min |
| <ul style="list-style-type: none"> • Quality Committee Meeting – April 11, 2023 | | |
| III. Harris Health Safety Message: Informed Consent Done Right | | 2 min |
| <i>– Dr. Steven Brass</i> | | |
| IV. Presentation Regarding Safety Culture Survey – Ms. Tiffani Dusang | | 8 min |
| V. Presentation Regarding Patient Experience – Dr. Jackie Brock | | 8 min |
| VI. Executive Session | Dr. Arthur Bracey | 67 min |
| <ul style="list-style-type: none"> A. Report Regarding Harris Health System Correctional Health Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report | | <i>(10 min)</i> |
| <i>– Dr. Otis R. Eging</i> | | |
| <ul style="list-style-type: none"> B. Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002, to Receive Peer Review and/or Medical Committee Report in Connection with the Evaluation of the Quality of Medical and Healthcare Services | | <i>(52 min)</i> |
| <i>– Dr. Steven Brass and Dr. Yashwant Chathampally</i> | | |

-
- C. Report by the Executive Vice President, Chief Compliance and Risk Officer, Regarding Compliance with Medicare, Medicaid, HIPAA and Other Federal and State Health Care Program Requirements and a Status of Fraud and Abuse Investigations, Pursuant to Texas Health & Safety Code §161.032, and Possible Action Regarding this Matter Upon Return to Open Session – **Ms. Carolynn Jones**

(5 min)

- VII. **Reconvene** **Dr. Arthur Bracey** **1 min**
- VIII. **Adjournment** **Dr. Arthur Bracey** **1 min**

HARRIS HEALTH SYSTEM
MINUTES OF THE BOARD OF TRUSTEES
QUALITY COMMITTEE MEETING
Tuesday, April 11, 2023
12:00 PM

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATIONS
I. Call to Order and Record of Attendance	Dr. Andrea Caracostis, Chair, called the meeting to order at 12:07 p.m. It was noted that a quorum was present and the attendance was recorded. Dr. Caracostis announced that while some Board members are in the room, others will participate by videoconference as permissible by state law and the Harris Health Videoconferencing Policy. Only participants scheduled to speak have been provided dial in information for the meeting. All others who wish to view the meeting may access the meeting online through the Harris Health website: http://harrishealthtx.swagit.com/live .	
II. Approval of the Minutes of Previous Meeting Quality Committee Meeting – March 7, 2023		Moved by Dr. Arthur Bracey, seconded by Mr. Lawrence Finder, and unanimously approved the minutes of the previous meeting.
III. Harris Health Safety Message: Shared Decision-Making	Dr. Steven Brass, Executive Vice President & Chief Medical Executive, delivered a Minute for Medicine video series related to shared decision-making. Copies of the video series and the presentation are available in the permanent record.	As Presented.
IV. Presentation Regarding Removing Race from Renal Function Calculations (Inpatient and Outpatient): A Monumental Step for Harris Health	Dr. Melandrea Worsley, Chief Nephrology Fellow, Baylor College of Medicine (BCM), delivered a presentation on Removing Race from Renal Function Calculations (Inpatient and Outpatient): A Monumental Step for Harris Health. She shared that race-based equations were previously utilized to determine a patient’s renal function. These equations were based on misconceptions that African Americans have higher levels of creatinine due to larger muscle mass, diet, or other factors. Dr. Worsley shared that new non-race based formulas were developed to remove the race based component which ultimately led to disparities in kidney disease treatment. She noted that Harris Health has adopted the non-race based calculation and estimated glomerular filtration rate (eGFR) results will be reported without any race qualifiers.	As Presented.

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATIONS
	<p>Dr. Worsley stated that these changes mark a monumental step as our organization continues to evolve with the newest evidence and takes actionable steps to remove systematic racism and healthcare bias from our practice of medicine. Dr. Bracey inquired if Harris Health is considering other areas where there may be inappropriate designations such as neutrophil count and Glucose-6-phosphate dehydrogenase (G6PD). Dr. Brass shared that Dr. Markan, Chief of Staff, Ben Taub Hospital, delivered a presentation to the Joint Conference Committee on reconsidering the use of race corrections in clinical algorithms. He stated that Harris Health plans to perform a gap analysis of the top clinical algorithms to look for race corrections. A copy of the presentation is available in the permanent record.</p>	
<p>V. Presentation Regarding Venous Thromboembolism (VTE) Prophylaxis: Striving for the Quadruple Aim in Healthcare</p>	<p>Dr. Chirayu Shah, Associate Professor, General Internal Medicine, BCM, delivered a presentation regarding Venous Thromboembolism (VTE) Prophylaxis: Striving for the Quadruple Aim in Healthcare. He reported that VTE is one of the leading preventable causes of harm in hospitalized patients. With a collaborative multi-disciplinary multi-institutional approach, Harris Health has implemented a standardized approach for assessing and mitigating VTE risk. Dr. Shah shared that leveraging innovative dynamic Epic order sets and integrating key workflows has led to rapid adoption and downstream improvements in patient safety and quality measures. A copy of the presentation is available in the permanent record.</p>	<p>As Presented.</p>
<p>VI. Presentation Regarding Gastrointestinal Service Line</p>	<p>Ms. Amineh Kostov, Vice President of Operations, System Service Lines, delivered a presentation regarding the Gastrointestinal Service Line. She recognized Dr. Brooks Cash, Interim Medical Director, Gastroenterology, University of Texas Health Science Center at Houston (UT Health) and Dr. RJ Sealock, Medical Director, Gastroenterology, BCM. The Gastrointestinal (GI) Service Line in collaboration with Anesthesia, Primary Care, and Outside Medical Services has developed an updated order for colorectal screening that provides indications for fecal immunochemical testing (FIT) and colonoscopy screening. The single screening colonoscopy order will route to Outside Medical Services, GI Lab (endoscopy), or the GI Clinic based on answers to clinical questions. Ms. Kostov shared that the new orders are currently being tested and will go live May 1, 2023. Dr. Caracostis inquired whether Harris Health is using the Cologuard (At-Home colon cancer screening tests).</p>	<p>As Presented.</p>

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATIONS
	<p>Ms. Kostov stated that based upon the System’s current patient population, GI physician leaders felt that Cologuard would not be a good fit and they should continue utilizing the current FIT testing. She noted that Administration can provide more clinical data related to this matter. Dr. Bracey inquired regarding the success rate of patients who elect to have colonoscopy services performed. Ms. Kostov will return with supporting information. A copy of the presentation is available in the permanent record.</p>	
<p>VII. Presentation Regarding Workforce Safety and Violence Prevention</p>	<p>Dr. Jackie Brock, Executive Vice President & Chief Nursing Executive, delivered a presentation regarding Workforce Safety and Violence Prevention. She stated that a risk assessment was performed and completed in 2021. Dr. Brock mentioned that multiple initiatives have been implemented, some are currently underway and others are being evaluated for the future. She shared that Harris Health continues to work towards improving workplace safety for its employees, patients, visitors and contractors. A copy of the presentation is available in the permanent record.</p>	<p>As Presented.</p>
<p>VIII. Executive Session</p>	<p>At 12:42 p.m., Dr. Caracostis stated that the Quality Committee of the Board of Trustees would go into Executive Session for items “A and B” as permitted by law under Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002.</p>	
	<p>A. Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002, to Receive Peer Review and/or Medical Committee Report in Connection with the Evaluation of the Quality of Medical and Healthcare Services</p>	<p>No Action Taken.</p>
	<p>B. Report by the Executive Vice President, Chief Compliance and Risk Officer, Regarding Compliance with Medicare, Medicaid, HIPAA and Other Federal and State Health Care Program Requirements and a Status of Fraud and Abuse Investigations, Pursuant to Texas Health & Safety Code §161.032, and Possible Action Regarding this Matter Upon Return to Open Session</p>	<p>No Action Taken.</p>
<p>IX. Reconvene</p>	<p>At 1:32 p.m., Dr. Caracostis reconvened the meeting in open session; she noted that a quorum was present and that no action was taken in Executive Session.</p>	

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATIONS
X. Adjournment	Moved by Mr. Lawrence Finder, seconded by Dr. Arthur Bracey, and unanimously approved to adjourn the meeting. There being no further business, the meeting adjourned at 1:32 p.m.	

I certify that the foregoing are the Minutes of the Meeting of the Quality Committee of the Board of Trustees of the Harris Health System held on April 11, 2023.

Respectfully submitted,

Andrea Caracostis, M.D., MPH, Chair

Recorded by Cherry Pierson

Tuesday, April 11, 2023

Harris Health System Board of Trustees Board Meeting – Quality Committee Attendance

Note: For Zoom meeting attendance, if you joined as a group and would like to be counted as present, please submit an email to:

BoardofTrustees@harrishealth.org before close of business the day of the meeting.

QUALITY COMMITTEE BOARD MEMBERS PRESENT	QUALITY COMMITTEE BOARD MEMBERS ABSENT	QUALITY COMMITTEE DESIGNEES PRESENT	OTHER BOARD MEMBERS PRESENT
Dr. Andrea Caracostis (<i>Chair</i>)	Dr. Ewan D. Johnson	Mr. Lawrence Finder	Ms. Marcia Johnson
Dr. Arthur W. Bracey (<i>Ex-Officio</i>)	Ms. Alicia Reyes		

EXECUTIVE LEADERSHIP
Ms. Amineh Kostov, Vice President, Operations, Specialty Care & Service Lines
Ms. Amy Smith, Senior Vice President, Transitions & Post-Acute Care
Ms.Carolynn Jones, Executive Vice President & Chief Compliance and Risk Officer
Dr. Glorimar Medina-Rivera, Executive Vice President, Ben Taub Hospital
Dr. Hemant Roy, Vice Chair, Harris Health System & Ben Taub Hospital
Dr. Jackie Brock, Executive Vice President & Chief Nursing Executive
Dr. Jennifer Small, Executive Vice President, Ambulatory Care Services
Dr. Joseph Kunisch, Vice President, Quality Programs
Ms. Kari McMichael, Vice President, Controller
Dr. Kunal Sharma, Vice Chair, Medical Executive Board
Mr. Louis Smith, Senior Executive Vice President & Chief Operating Officer
Ms. Maria Cowles, Senior Vice President, Chief of Staff
Dr. Martha Mims, Chair, Medical Executive Board
Dr. Maureen Padilla, Senior Vice President, Nursing Affairs & Support Services
Mr. Michael Hill, Executive Vice President, Chief Strategy & Integration Officer
Dr. Michael Nnadi, Senior Vice President, Chief Pharmacy Officer
Ms. Monica Carabajal, Vice President, Contract Administration
Ms. Olga Llamas Rodriguez, Vice President, Community Engagement & Corporate Communications
Mr. Omar Reid, Executive Vice President, Chief People Officer
Dr. Otis Reggie Ekins, Chief Medical Officer, Correctional Health
Ms. Patricia Darnauer, Executive Vice President, Lyndon B. Johnson Hospital
Mr. Ron Fuschillo, Senior Vice President and Chief Information Officer
Dr. Sandeep Markan, Chief of Staff, Ben Taub Hospital

Dr. Steven Brass, Executive Vice President & Chief Medical Executive
Dr. Tien Ko, Chief of Staff, Lyndon B. Johnson Hospital
Dr. Yashwant Chathampally, Associate Chief Medical Officer & Senior Vice President, Quality and Patient Safety

ADDITIONAL GUESTS PRESENT	
Adriana Barron	John Matcek
Cherry Pierson	Matthew Schlueter
Daniel Smith	Nicholas Bell
Derek Curtis	Randy Manarang
Ebon Swofford	Tai Nguyen
Jade Teakell, MD	Tiffani Dusang
Jennifer Zarate	

Tuesday, May 9, 2023

Harris Health Safety Message

HRO Safety Message (Video): Harris Health Minute for Medicine

- Informed Consent Done Right

HARRISHEALTH SYSTEM

HRO Safety Message

**Steven Brass, MD, MPH, MBA
EVP, Chief Medical Executive**

**Board of Trustees Quality Committee
May 9, 2023**

SAFETY MESSAGE

HARRIS
HEALTH
SYSTEM

ZERO
HARM

Safety 1st. Always.

Having a High-reliability Organization's Mindset

High-reliability Organizations (HROs) are those that successfully complete their missions despite massive complexity and high risk. Examples include the Federal Aviation Administration's Air Traffic Control system, aircraft carriers, and nuclear power plants. In each case, even a minor error could have catastrophic consequences. Yet, adverse outcomes in these organizations are rare. The key components of High Reliability Organizations (HROs), including leadership, a safety-focused culture, and a dedication to continuous learning and improvement.



HRO Mindset:

- Minute for Medicine Video: Informed Consent Done Right
- https://youtu.be/gu4Q_l0XBF8

BOARD OF TRUSTEES

Quality Committee

HARRISHEALTH
SYSTEM

Tuesday, May 9, 2023

Presentation Regarding Safety Culture Survey

HARRISHEALTH SYSTEM

Safety Culture Survey

**Tiffani Dusang, MSN, RN, AFN-BC, NEA-BC
VP, Patient Safety & Risk Management**

**Board of Trustees Quality Committee
May 9, 2023**

Survey Statistics



Response Rate by Population

Population	¹ # Sampled	# Returned	Response %
Ambulatory Care Services	1,470	1,078	73%
Ben Taub Hospital	3,548	1,242	35%
Lyndon B. Johnson Hospital	2,168	867	39%
² Medical/House Staff	6,394	502	8%

1: ACS, BT, & LBJ numbers obtained from Employee List Report provided by HR on 7/25/22. Number of medical/house staff provided by Medical Staff Services on 7/17/22.

2: Since the number of medical staff at each pavilion is unknown, they have been excluded from the response rate calculation for pavilion. However, their responses have been included in the survey completion results to ensure a comprehensive and representative analysis of the safety culture in the healthcare organization.



Survey Demographics – Overview

- Most of the respondents were:
 - Nurses (24%)
 - Medical Staff (14%)
 - Technologist/Technician (13%)
- Most of respondent years at Harris Health:
 - 1 to 4 yrs (27%)
 - 5 to 10 yrs (24%)
 - 11 to 20 yrs (21%)

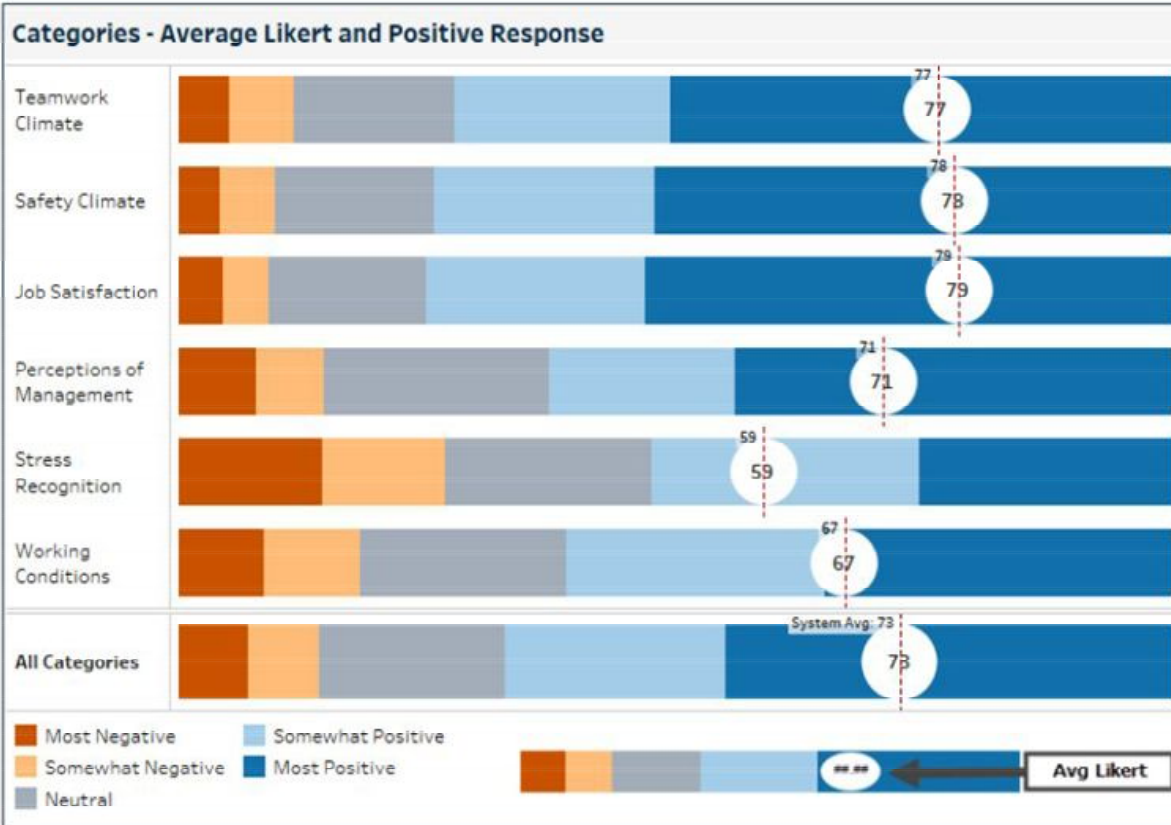


Overall Scores

All - All

Safety Culture Survey

Refreshed: 4/20/2023 9:10:42 AM



Highest 5 Scoring Questions

I know the proper channels to direct questions regarding patient safety in this work area.	Safety Climate
I like my job.	Job Satisfaction
I am encouraged by my colleagues to report any patient safety concerns I may have.	Safety Climate
I am proud to work in this work area.	Job Satisfaction
It is easy for personnel here to ask questions when there is something that they do not understand.	Teamwork Climate

Lowest 5 Scoring Questions

The levels of staffing in this work area are sufficient to handle the number of patients.	Working Conditions
Fatigue impairs my performance during emergency situations (e.g. emergency resuscitation, seizure).	Stress Recognition
PavMgt-Problem personnel are dealt with constructively by our:	Perceptions of Management
PavMgt-Management doesnt knowingly compromise pt safety:	Perceptions of Management
PavMgt-Management is doing a good job:	Perceptions of Management

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Pavilion
All

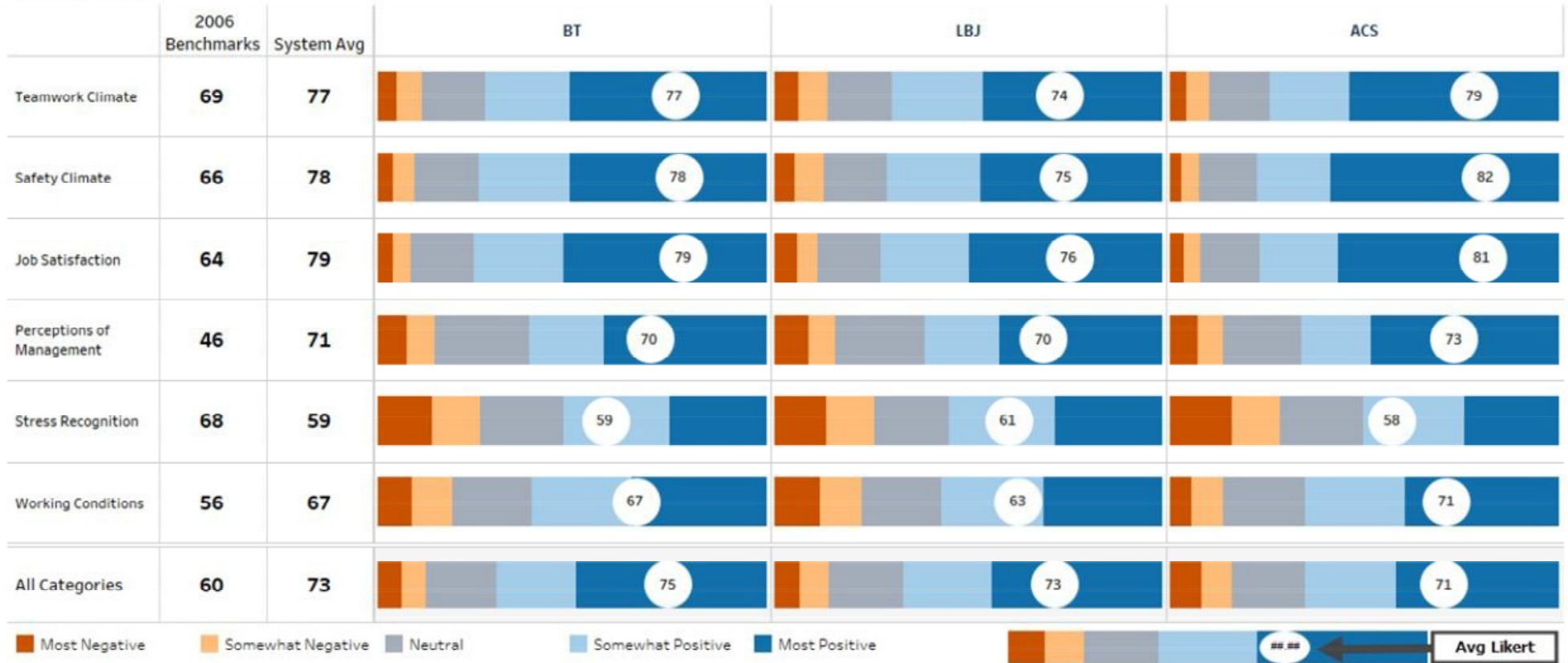
Department
All

Pavilion Comparison

All Categories

Safety Culture Survey

Refreshed: 4/20/2023 9:10:42 AM



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Select Category
All Categories

System-Level Strengths



Strengths – Job Satisfaction

- Overall score of 79 indicating respondents have a positive attitude about the work experience.

Highest Scoring Question

I like my job.

85

Lowest Scoring Question

Morale in this work area is high.

66



Strengths – Safety Climate

- Overall score of 78 indicating respondents have a positive perception of the organization's commitment to safety.

Highest Scoring Question

I know the proper channels to direct questions regarding patient safety in this work area.

87

Lowest Scoring Question

In this work area, it is difficult to discuss errors.

67



Strengths – Teamwork Climate

- Overall score of 77 indicating respondents have a positive perception of the quality of teamwork in their work area.

Highest Scoring Question

It is easy for personnel here to ask questions when there is something that they do not understand.

82

Lowest Scoring Question

In this work area, it is difficult to speak up if I perceive a problem with patient care.

70



System-Level Opportunities



Opportunities – Stress Recognition

- Overall score of 59 indicating respondents acknowledge workplace stressors and hostile situations impact performance.

Highest Scoring Question

I am less effective at work when fatigued.

65

Lowest Scoring Question

Fatigue impairs my performance during emergency situations.

52



Opportunities – Working Conditions

- Over all score of 67 indicating respondents have a below target perception of their work environment and logistical support.

Highest Scoring Question

Trainees in my discipline are adequately supervised.

77

Lowest Scoring Question

The levels of staffing in this work area are sufficient to handle the number of patients.

51



Opportunities – Perceptions of Management

- Overall score of 71 indicating respondents have a below target approval of their pavilion and work area management aims.

Highest Scoring Question

Work area management supports my daily efforts.
76

Lowest Scoring Question

Problem personnel are dealt with constructively by pavilion management.
66



Action Plan by Domain & Next Steps



System-Level Opportunity for Improvement



Action Plan Toolkit:

- Shift or After Event Debriefs
- Respid Room Rotations
- Leadership Rounding
- Stay Interviews
- Mental Health Employee Benefits
- Health Coaching
- Mother Friendly Resources
- Healthy@Harris Health Well Powered Living Classes
- Healthy@Harris Health Group Exercise: Meditation
- Healthy@Harris Virtual Group Exercises
- Healthy@Harris Health EAP Webinars
- Healthy@Harris Health Group Wellness Workshops



System-Level Opportunity for Improvement



Action Plan Toolkit:

- Stay Interviews
- Quality Check
- Leadership Rounding
- Townhalls
- Anonymous Suggestion Box
- Resource Assessment and Prioritization with Communication Plan
- Add Workplace Conditions as Standing Agenda Item for Safe Staffing Advisory Committees
- Partner with Learning and Talent Management to Review Onboarding Criteria and Competency Assessment



System-Level Opportunity for Improvement



Action Plan Toolkit:

- Psychological Safety Training
- JAC Training
- HRO Leadership Toolkit
- Leading with Love: Staff & Leadership Development Series
- LEAD: Leadership Enhancement and Development
- Mission Retention
- Leadership Development Coaching
- Consulting and Customized Training
- Healthy@Harris Health Emotional Intelligence Classes



Next Steps



Safety Culture Overview & Survey Details



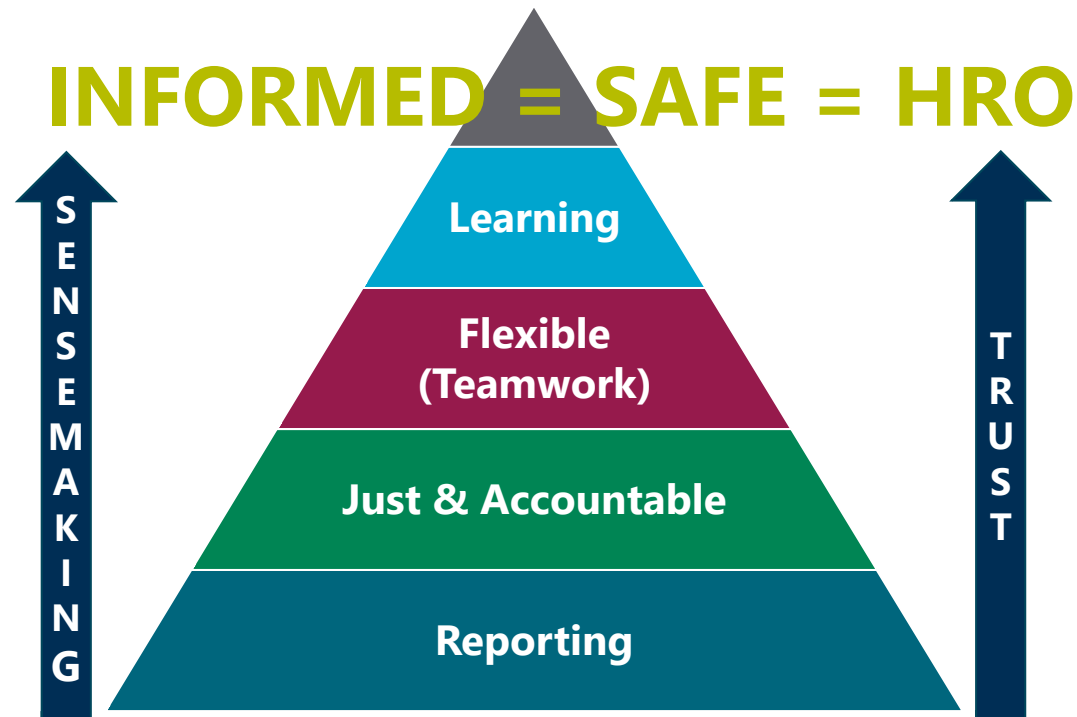
What is Safety Culture?

- Perceived priority of safety relative to other goals.
- Culture is the compass team members use to guide their behaviors, attitudes, and perceptions on the job.



<https://www.ahrq.gov/hai/tools/mvp/modules/cusp/assess-psc-hsop-fac-guide.html>

Four Components of Safety Culture



<https://www.ahrq.gov/hai/cauti-tools/archived-webinars/connecting-dots-slides.html>

“An organization whose leaders embrace a safety culture makes safety its number one priority. Leaders demonstrate their commitment by supporting the organization to learn about errors and near misses, investigate errors to understand their causes, develop strategies to prevent error recurrence, and share the lessons learned with staff so they recognize the value of reporting their concerns.”



<https://www.ecri.org/components/HRC/Pages/RiskQual21.aspx>

How Often Do We Assess Safety Culture?

- Every other year.
- Facilitated by the Patient Safety & Risk Department.
- Pavilion-level leadership are responsible for evaluating findings and developing an action plan to address areas of concern.









Survey Assessment Tool & Process

- The Safety Attitudes Questionnaire (SAQ) was used to measure safety culture.
- Developed by the University of Texas.
- 36 items that are sub-divided into 6 domains.
- Survey administered from 7/25/22 to 8/12/22 (deadline extended 5 calendar days).
- Survey Monkey was used to capture data.
- English and Spanish versions were made available.



Domains & Definitions

Domain	Definition
 Teamwork Climate	Perceived quality of collaboration between personnel.
 Safety Climate	Perceptions of a strong and proactive organizational commitment to safety.
 Job Satisfaction	Positivity about the work experience.
 Perceptions of Management	Approval of managerial aims and action.
 Stress Recognition	Acknowledgement of how performance is influenced by stressors.
 Working Conditions	Perceived quality of the work environment and logistical support.



Analysis Method, Benchmarking & Action Plan

- Survey answered in Likert Scale:



- Likert Scale converted to 100 point scale for benchmarking.
- Pavilions are benchmarked against system domain scores.
- Any domain score < 75 requires an Action Plan.
- Pavilion-level leadership are responsible for evaluating results and developing an action plan.



Tuesday, May 9, 2023

Presentation Regarding Patient Experience

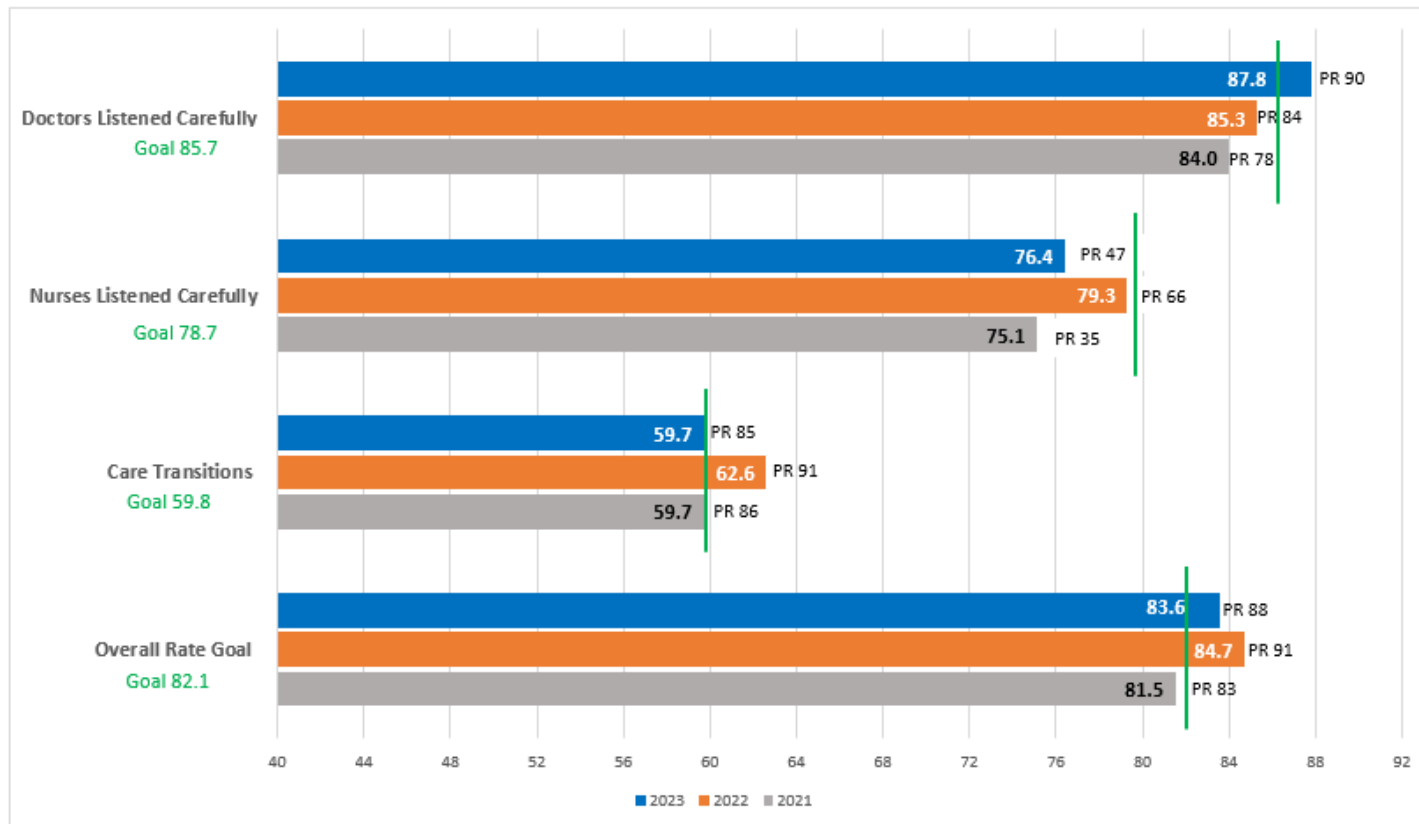
HARRISHEALTH SYSTEM

Patience Experience

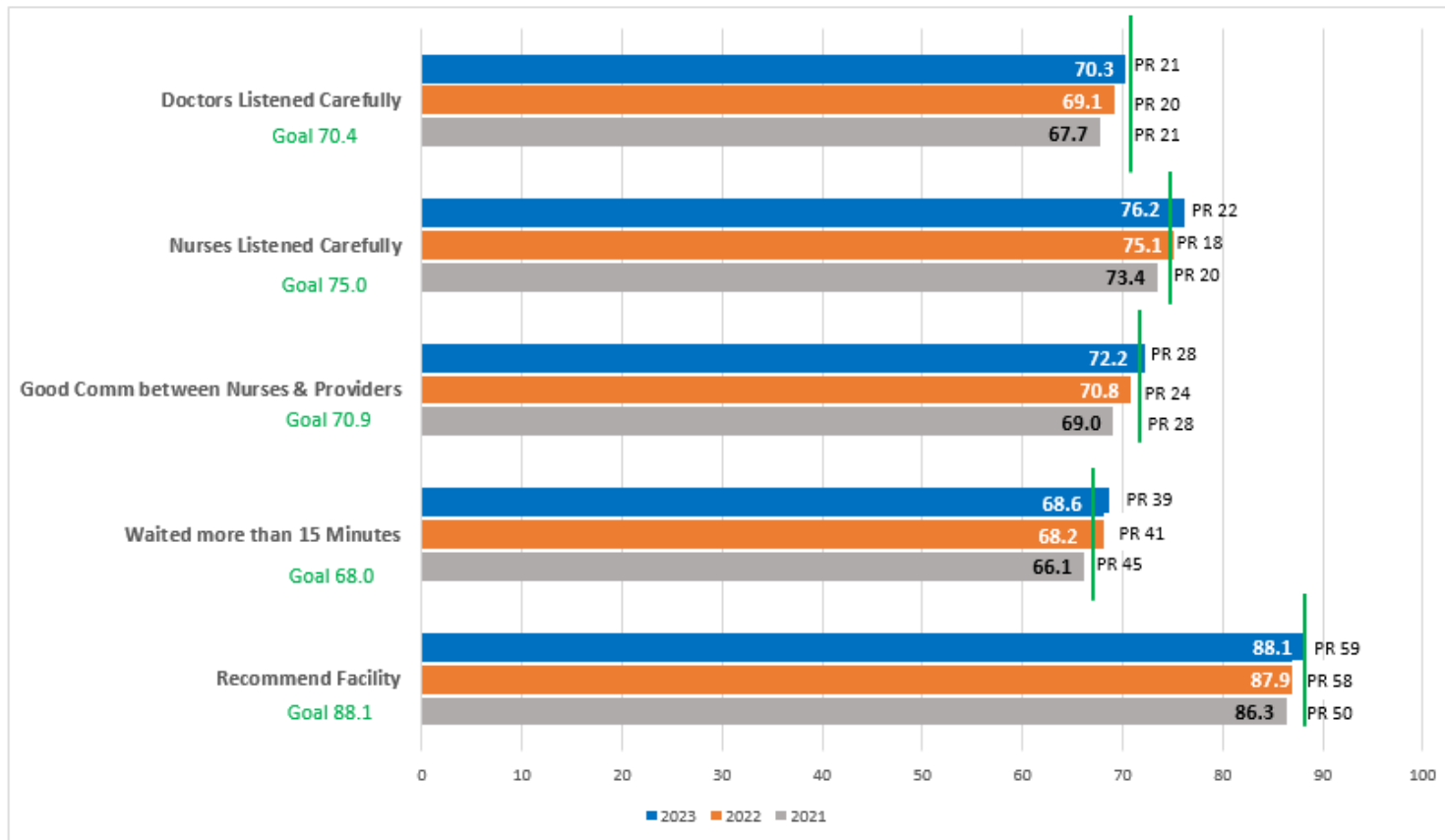
**Jacqueline Brock, DNP, RN
EVP, Chief Nursing Executive
David Riddle, CPXP
Administrative Director,
Patient Experience**

**Board of Trustees Quality Committee
May 9, 2023**

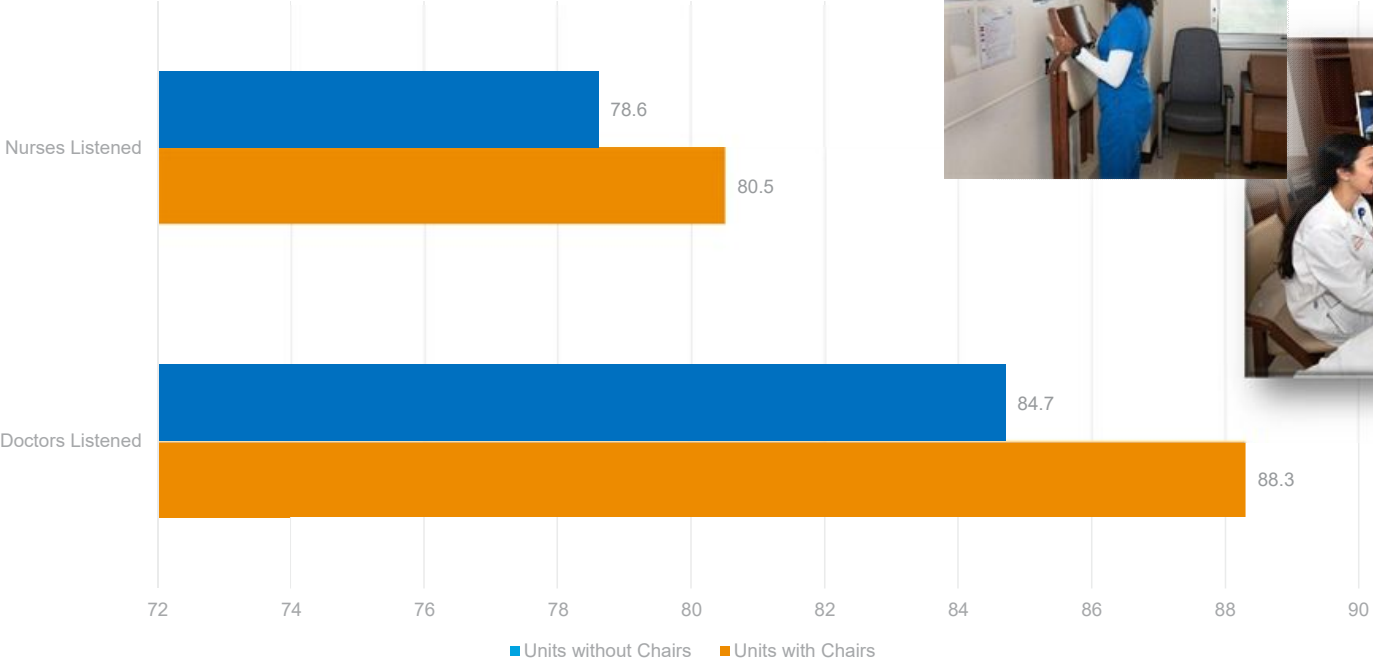
Highly Correlated Questions Performance 2021 – Q1 2023 for Inpatient



Highly Correlated Questions Performance 2021 – Q1 2023 for Outpatient HARRISHEALTH SYSTEM



Commit to Sit Seating



2023 Tactics

- Assemble Baylor and UT Doctors Listening Champion Committees for both Inpatient and ACS
- Expanding enhanced Discharge Folders to Outpatient Surgery
- Revitalizing Service Recovery Program
- Strengthen leadership/patient experience rounding nursing communication and whiteboard use
- Explore expanding commit to sit seating throughout inpatient units
- Reconvene Patient Experience Collaborative to build on and monitor established initiatives

Tuesday, May 9, 2023

Executive Session

Report Regarding Harris Health System Correctional Health Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report

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Tuesday, May 9, 2023

Executive Session

Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002, to Receive Peer Review and/or Medical Committee Report in Connection with the Evaluation of the Quality of Medical and Healthcare Services

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