



# AGENDA

GOVERNANCE

Meeting Date: Thursday, July 25, 2019

COMMITTEE

Time: 2:00 PM

Location: 125 Worth St /Room 532

Call to Order Mr. José Pagán

1. Approval of the Governance Committee Minutes: April 18, 2019 Mr. Pagán

## Action Item

2. Amending the Bylaws of the New York City Health and Hospitals Dr. Wei

**Authorizing the amendment of the By-Laws of the New York City Health and Hospitals Corporation (the “System”) to rename the Quality Assurance Committee as the Quality Assurance/ Performance Improvement Committee and to revise Article VI, Section 9 to state the duties and responsibilities of the Quality Assurance/ Performance Improvement Committee to include “overseeing performance improvement activities to foster sharing of system-wide and facility-specific performance improvement priorities, identifying new areas of opportunity for performance improvement, and the spreading of performance improvement best practices .”**

OLD BUSINESS

Mr. Pagán

NEW BUSINESS

ADJOURNMENT

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# ***MINUTES***

## **GOVERNANCE COMMITTEE**

**Meeting Date: Thursday, April 18, 2019**

**Time: 2:00 p.m.**

**Location: 125 Worth Street – Room 519**

## **Attendees**

Committee Members – José Pagán; Vincent Calamia; Helen Arteaga Landaverde , Gordon Campbell

Staff – Mitchell Katz; Andrea Cohen; Yvette Villanueva; Colicia Hercules;

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The meeting was called to order at 2:07 pm by José Pagán.

Mr. Pagán called a motion to accept the minutes of the Governance Committee meeting held on March 8, 2019. The motion was seconded and the minutes were unanimously approved.

Mr. Pagán then requested a motion to convene an executive session to discuss personnel matters. The motion was seconded and approved.

This meeting of the Governance Committee was convened in executive session to deliberate on the following personnel actions.

*During the Executive Session the Committee considered a nominee to the following corporate officer level position:*

**1. Christine Flaherty – Senior Vice President, Capital Projects, Construction & Design**

Following a discussion conducted by Dr. Mitchell Katz, and the subsequent deliberations by the Committee attendees, Mr. Pagán called for a motion to recommend Christine Flaherty, Senior Vice President, Capital Project, Construction & Design

The motion was seconded and unanimously approved by the Committee for consideration by the full Board.

There being no further business, the meeting adjourned at 2:28 p.m.

## **RESOLUTION**

Authorizing the amendment of the By-Laws of the New York City Health and Hospitals Corporation (the “System”) to rename the Quality Assurance Committee as the Quality Assurance/ Performance Improvement Committee and to revise Article VI, Section 9 to state the duties and responsibilities of the Quality Assurance/Performance Improvement Committee to include “overseeing performance improvement activities to foster sharing of system-wide and facility-specific performance improvement priorities, identifying new areas of opportunity for performance improvement, and the spreading of performance improvement best practices.”

**WHEREAS**, the System’s By-Laws make the Quality Assurance Committee a standing committee and Article VI, Section 9 states its scope as “assuring that each facility is fulfilling its mandate in the areas of quality assurance, credentialing of physicians and dentists, overall operations and responsiveness to Federal, State and other regulatory surveillance and enforcement activities . . .;” and

**WHEREAS**, an expansion of the scope of the Quality Assurance Committee would align with current best practices that view performance improvement as a key driver in improving processes and outcomes of care, and engaging clinical and non-clinical staff in sustainable, positive change; and

**WHEREAS**, the Quality Assurance/Performance Improvement Committee would continue Quality Assurance related activities, but expand the Committee’s scope to include oversight and integration of performance improvement best practices into all of the System’s quality activities; and

**WHEREAS**, the Quality Assurance/Performance Improvement Committee’s areas of responsibilities would include: (1) presenting System performance improvement prioritized projects; (2) sharing facility-specific performance improvement priorities; (3) identifying new areas for performance improvement; and (4) spreading performance improvement best practices.

### **NOW THEREFORE, BE IT:**

**RESOLVED**, that the By-Laws of New York City Health and Hospitals Corporation be and hereby are amended to rename the Quality Assurance Committee as the Quality Assurance/Performance Improvement Committee and to revise Article VI, Section 9 to state the duties and responsibilities of the Quality Assurance/Performance Improvement Committee to include “overseeing performance improvement activities to foster sharing of system-wide and facility-specific performance improvement priorities, identifying new areas of opportunity for performance improvement, and the spreading of performance improvement best practices.”

## EXECUTIVE SUMMARY

### **Rename the Quality Assurance Committee as the Quality Assurance/Performance Improvement Committee**

**Goal:** To amend Article VI of the By-Laws to rename the Quality Assurance Committee as the Quality Assurance/Performance Improvement Committee, with oversight over the System's quality assurance activities and performance improvement efforts.

**Rationale:** From the 1970s through 1990s, most of the System's focus of quality activities across the continuum of healthcare services had been reactive in nature in an attempt to meet regulatory requirements. While, quality assurance should inform performance improvement activities, it should not be the sole focus of a quality program. Over the years, there has been much more emphasis placed on performance improvement. While quality assurance is critical to ensure that regulations are adhered to and metrics are monitored, performance improvement is the key driver in improving processes and outcomes of care, and engaging clinical and non-clinical staff in sustainable, positive change.

Furthermore, the CMS Conditions of Participation state that hospitals and other healthcare institutions must develop, implement, and maintain an effective, ongoing, data-driven quality assessment and performance improvement program<sup>1</sup>, articulating the need for broader focus on efforts to engage in proactive improvement.

**Purpose:** The Quality Assurance/Performance Improvement Committee would expand the current Quality Assurance Committee's duties and responsibilities by overseeing facility- and system-wide strategies in the following key areas:

- Present system performance improvement prioritized projects;
- Share other facility-specific performance improvement priorities;
- Identify new areas of opportunity for performance improvement; and
- Spread performance improvement best practices.

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<sup>1</sup> § 482.21 - Condition of participation: Quality assessment and performance improvement program:  
[https://www.govregs.com/regulations/expand/title42\\_chapterIV\\_part482\\_subpartC\\_section482.21#title42\\_chapterIV\\_part482\\_subpartC\\_section482.21](https://www.govregs.com/regulations/expand/title42_chapterIV_part482_subpartC_section482.21#title42_chapterIV_part482_subpartC_section482.21)

# Action Item

## Board of Directors By-Laws Amendment

Creating the Quality Assurance/Performance Improvement Committee of the Board, rather than the former Quality Assurance Committee of the Board

**Presented by:**

**Eric Wei, MD, Vice President and Chief Quality Officer**

**Hillary Jalon, Assistant Vice President, Quality & Safety**



## Agenda

- Fundamental Differences Between Quality Assurance and Performance Improvement
- Current State: Quality Assurance Committee to the Board
- Proposed Future State: Quality Assurance/Performance Improvement Committee to the Board
- Request to Amend By-Laws



# Quality Terms



- Quality Control (QC)
- Quality Assurance (QA)

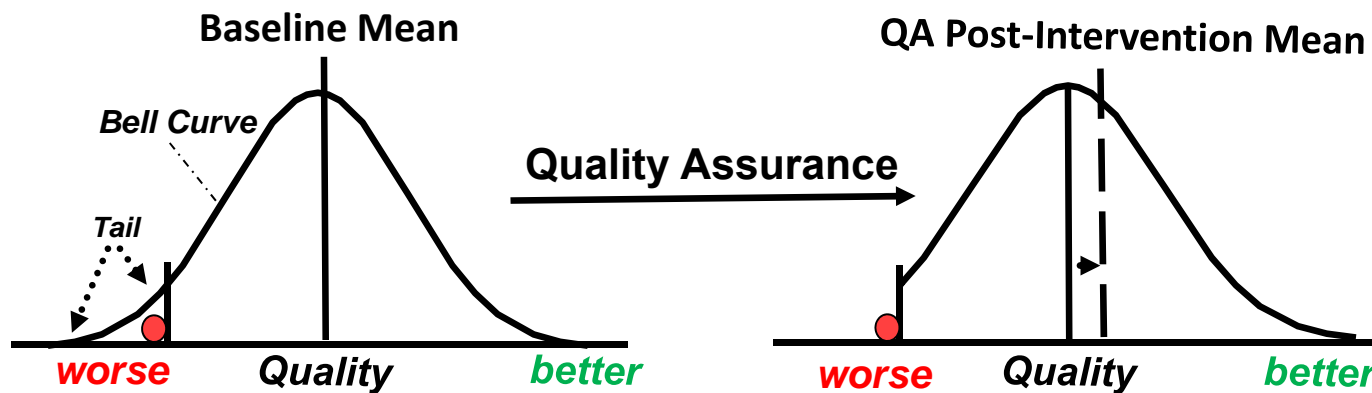


- Performance Improvement (PI)
- Quality Improvement (QI)



# Quality Control/Assurance

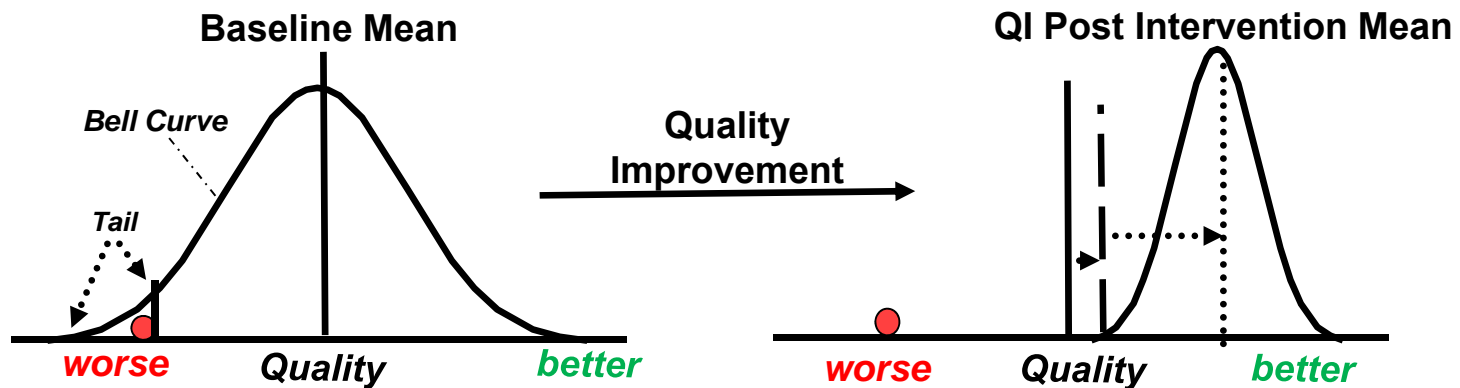
- **Quality Control: monitor and maintain performance**
- **Quality Assurance: eliminate defects, maintain constant performance – not seeking to improve**





# Performance Improvement

- Synonymous with Quality Improvement (QI)
- The goal is to **transform the delivery of care**, not just eliminate defects



## QA versus PI

- **QA Example:** suspension of providers who do not sign their medical records – identify and force the low performing outliers to comply with this regulatory standard
- **QI Example:** conduct a multi-disciplinary project to improve the on-time starts for OR first cases of the day from 30% to 80% within 6 months



# Current State

- Article VI, Section 2 designates the Quality Assurance Committee as a standing committee of the Board.
- Article VI, Section 9 sets forth the scope of this Committee as follows:
  - Assuring that each facility is fulfilling mandates in the areas of quality assurance, credentialing of physicians and dentists, overall operations and responsiveness to Federal, State and other regulatory surveillance and enforcement activities;
  - Assuring that there is a systematic and effective mechanism for communication among members of the Board of Directors in their role as members of the governing body, and the administration and medical staff of each HHC facility. This communication should facilitate direct participation by the governing body in quality assurance activities and other issues of importance as set forth above;
  - Monitoring the progress at Corporation facilities towards meeting appropriate HHC goals and objectives related to its health care programs;
  - Reviewing quality assurance activities of each of the Corporation's facilities on at least a quarterly basis.



# Proposed Expansion and Rationale

## Proposed Expansion

- Expand the Committee's scope to include oversight and integration of performance improvement best practices into all of the organization's quality activities.

## Rationale

- Focus of quality activities in healthcare historically has been reactive in nature, predominantly on quality assurance.
- Quality assurance is important to inform performance improvement activities.
- Performance improvement is the key driver in improving processes and outcomes of care, and engaging clinical and non-clinical staff in sustainable, positive change.
- The CMS Conditions of Participation state that hospitals [and other healthcare institutions] must develop, implement, and maintain an effective, ongoing, data-driven quality assessment and performance improvement program.\*

\* § 482.21 - Condition of participation: Quality assessment and performance improvement program:

[https://www.govregs.com/regulations/expand/title42\\_chapterIV\\_part482\\_subpartC\\_section482.21#title42\\_chapterIV\\_part482\\_subpartC\\_section482.21](https://www.govregs.com/regulations/expand/title42_chapterIV_part482_subpartC_section482.21#title42_chapterIV_part482_subpartC_section482.21)



# Role of Quality Assurance/ Performance Improvement Committee

- Continue the Quality Assurance Committee-related activities, but expand them to oversee and integrate performance improvement activities and best practices within the structure. The following sets forth areas of focus related to performance improvement:
  - **Present system performance improvement prioritized projects:** Present quarterly performance improvement projects from a prioritized pick list.
  - **Share other facility-specific performance improvement priorities:** Encourage discussion of performance improvement priorities and projects presented at facility-specific quality assurance/performance improvement committees.
  - **Identify new areas of opportunity for performance improvement:** Promote and discuss ideas and change strategies that can lead to improvements.
  - **Spread performance improvement best practices:** Support the sharing and dissemination of best practices related to performance improvement activities across facilities and services.



## Request to Amend By-Laws

**RESOLVED**, that the By-Laws of New York City Health and Hospitals Corporation be and hereby amended to rename the Quality Assurance Committee as the Quality Assurance/Performance Improvement Committee and to revise Article VI, Section 9 to state the duties and responsibilities of the Quality Assurance/Performance Improvement Committee to include this statement related to performance improvement:

- “overseeing performance improvement activities to foster sharing of system-wide and facility-specific performance improvement priorities, identifying new areas of opportunity for performance improvement, and spreading performance improvement best practices.”

