

**TARRANT COUNTY HOSPITAL DISTRICT (TCHD)  
d/b/a JPS HEALTH NETWORK  
1500 S. Main Street  
Fort Worth, TX 76104  
OPC Auditoriums, 3<sup>rd</sup> Floor**

**QUALITY AND PATIENT SAFETY COMMITTEE MEETING  
1:00 P.M., MONDAY, AUGUST 12, 2024**

**MEETING MINUTES**

The Tarrant County Hospital District ("District") Quality and Patient Safety Committee met on Monday, August 12, 2024, with the following members present:

Margaret Holland, MD, Chair  
Brian Webb, MD  
Dorothy DeBose  
Dustin Austin  
Stephanie Carson-Henderson, MD

**Members Absent:**

Tim Davis  
Amanda Arizola

**Others Attending:**

Karen Duncan, M.D., President and CEO  
Daphne Walker, EVP, Chief Legal Officer  
Jill Farrell, EVP, Chief Operating Officer  
Colin Werenka, SVP, Chief Compliance Officer  
Rory McCrady, SVP, Interim CFO  
Sudhakar Karlapudi, MBBS, MBA, EVP, CMO  
Razaq Badamosi, MD, FCCP, VP of Quality  
Phyllis Chambers, SVP, Chief Nursing Officer  
Shannon Fletcher, VP, Chief of Staff Executive Affairs  
Ashlea Quinonez, VP, Government Relations  
Rhonda McKinnis, Deputy General Counsel  
Lani Taylor, Manager of Legal Operations

**I. CALL TO ORDER – M. Holland**

*Dr. Holland called the meeting to order at 1:04 p.m.*

**II. CITIZENS WISHING TO ADDRESS THE COMMITTEE**

*There were no citizens present to address the Committee.*

**III. APPROVAL OF MINUTES**

**A. Quality and Patient Safety Committee Meeting – May 13, 2024**

**Action:** *Ms. DeBose made a motion to approve the minutes from the May 13, 2024 Quality and Patient Safety Committee Meeting, seconded by Dr. Webb, motion passed unanimously.*

**IV. QUALITY & PATIENT SAFETY REPORTS/UPDATES NOT REQUIRING COMMITTEE ACTION(S)**

**A. Patient Voice – S. Karlapudi/R. Badamosi**

**Summary:** *Dr. Karlapudi shared a story highlighting the quality care JPS offered a patient and their family.*

**B. Patient Safety Recognition (Golden Mitt) – S. Karlapudi/R. Badamosi**

**Summary:** *Dr. Karlapudi recognized the Emergency Department as recipients of the Golden Mitt Award for the month of May 2024.*

**C. Quality Programs – E. Rodgers**

**Summary:** *Ms. Rodgers provided a high-level overview of Quality Programs.*

**1. Nursing Clinical Services Certifications – E. Rodgers/K. Watts**

**Summary:** *Ms. Rodgers and Ms. Watts provided an overview of Nursing Clinical Services highlighting recertified programs such as the Patient Blood Management Program, Sepsis Program and the Acute Myocardial Infarction Program.*

**2. Patient Blood Management – T. Watson/S. Pattar**

**Summary:** *Ms. Watson and Dr. Pattar provided a high-level overview of Patient Blood Management.*

**3. Acute Myocardial Infarction – K. Feinauer/ J. Lokhandwala**

**Summary:** *Ms. Feinauer and Dr. Lokhandwala provided a high-level overview of Acute Myocardial Infarction.*

**4. Sepsis – J. Aguilar/J. Lawson/G. Johnson**

**Summary:** *Ms. Aguilar, Mr. Lawson and Dr. Johnson provided a high-level overview of Sepsis.*

**D. Quality Assessment Performance Improvement (QAPI) Reports – R. Badamosi**

**Summary:** *Dr. Badamosi provided an overview of the QAPI plan highlighting changes, recommendations and gaps.*

**E. External Quality Reporting – R. Badamosi**

**Summary:** *Dr. Badamosi provided an overview of external quality reporting highlighting Preventable Adverse Events (PAE), CHIRP, and Leapfrog.*

F. Patient Safety – R. Badamosi

**Summary:** *Dr. Badamosi reviewed the PSEM process and provided information on mandatory State and Federal reporting.*

V. **CONSIDER QUALITY & PATIENT SAFETY MATTERS REQUIRING COMMITTEE ACTION(S) AND/OR APPROVAL**

There are no matters requiring Committee action/approval.

*The Committee took a break at 2:35 p.m.*

VI. **RECONVENE IN EXECUTIVE SESSION PURSUANT TO CHAPTER 551, TEXAS GOVERNMENT CODE FOR THE FOLLOWING:**

*Executive Session started at 2:39 p.m.*

In addition to the matters posted for deliberation in executive (closed) session, the Board may from time to time during the meeting reconvene and meet in executive session to receive legal advice pursuant to Section 551.071 of the Texas Open Meetings Act regarding any matter included on this agenda.

A. **Receive Report from Patient Safety and Quality Governance in Committee's Capacity as Medical Committee and/or Medical Peer Review Committee Pursuant to Sections 161.031, Et. Seq., Texas Health and Safety Code and/or Chapter 160, Texas Occupations Code, and/or Serve as Medical Committee and/or Medical Peer Review Committee Pursuant to Said Statutes.**

1. Sentinel Events
2. Serious Safety Events 1 (SSE1)
3. Serious Safety Events 2 (SSE2)
4. Reportable Events
5. Workplace Violence Events

B. **Receive Report from Physician Excellence Committee in Committee's Capacity as Medical Committee and/or Medical Peer Review Committee Pursuant to Sections 161.031, Et. Seq., Texas Health and Safety Code and/or Chapter 160, Texas Occupations Code, and/or Serve as Medical Committee and/or Medical Peer Review Committee Pursuant to Said Statutes.**

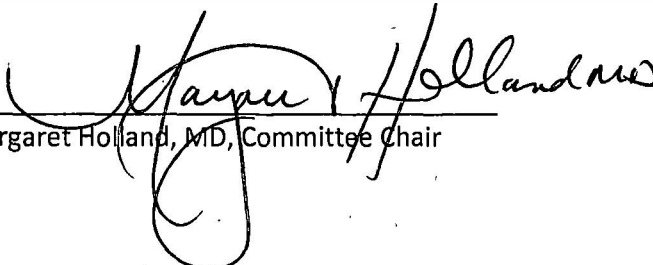
C. **Consultation with General Counsel to Receive Legal Advice on Risk/Litigation Cases and Other Matters under Subsection 1 and 2, Section 551.071, Texas Open Meetings Act.**

**VII. RECONVENE IN OPEN SESSION FOR DELIBERATION(S) AND/OR ACTION(S) DEEMED NECESSARY REGARDING ANY MATTER LISTED ON THE CLOSED SESSION AGENDA, PARAGRAPHS VI. A., B., and C.**

*The Committee reconvened in Open session at 3:08 p.m.*

**VIII. ADJOURN**

*There being no further business for the Quality and Patient Safety Committee to discuss, the meeting adjourned at 3:08 p.m.*

  
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Margaret Holland, MD, Committee Chair

11/11/2024  
Date