

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

QUALITY AND PATIENT SAFETY COMMITTEE MEETING
1:00 P.M., MONDAY, NOVEMBER 11, 2024

MEETING MINUTES

The Tarrant County Hospital District (“District”) Quality and Patient Safety Committee met on Monday, November 11, 2024, with the following members present:

Margaret Holland, MD, Chair
Brian Webb, MD
Dorothy DeBose
Dustin Austin

Members Absent:

Tim Davis
Amanda Arizola
Stephanie Carson-Henderson, MD

Others Attending:

Karen Duncan, MD, President and Chief Executive Officer
Daphne Walker, SVP, Chief Legal Officer
Jill Farrell, SVP, Chief Operations Officer
Colin Werenka, SVP, Chief Compliance Officer
Rory McCrady, SVP, Interim Chief Financial Officer
Sudhakar Karlapudi, MBBS, MBA, EVP, Chief Medical Officer
Razaq Badamosi, MD, FCCP, VP Network Quality Officer
Phyllis Chambers, SVP, Chief Nursing Officer
Tricia Elliott, SVP, Academic Research Affairs, MD
Shannon Fletcher, SVP, Chief of Staff/External Affairs
Ashlea Quinonez, VP, Government Relations
Angela Norris, Executive Director Network Quality
Lani Taylor, Legal Operations Manager
Ashley Sanchez, Board Coordinator

I. CALL TO ORDER – M. Holland

Dr. Holland called the meeting to order at 1:00 p.m.

II. CITIZENS WISHING TO ADDRESS THE COMMITTEE

There were no citizens wishing to address the Committee.

III. APPROVAL OF MINUTES

A. Quality and Patient Safety Committee Meeting Minutes – August 12, 2024

Action: *Ms. DeBose made a motion to approve the minutes from the August 12, 2024 Quality and Patient Safety Committee Meeting, seconded by Mr. Austin, 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. The Joint Commission Survey Report – J. Farrell/R. Badamosi/A. Norris

Summary: *Ms. Farrell and Dr. Badamosi provided an update on The Joint Commission Survey Report.*

C. Culture of Safety Survey Results – R. Badamosi

Summary: *Dr. Badamosi provided an update on the Culture of Safety Survey, highlighting a plan to strengthen the flow of critical information.*

D. Quality Presentation – R. Badamosi

Summary: *Dr. Badamosi provided an overview of metrics, hospital acquired infections, and CMS Star Ratings.*

E. FY2025 Quality Assessment Performance Improvement Plan – S. Karlapudi/R. Badamosi

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

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

A. Approval of Tarrant County Hospital District (TCHD) Policies and/or Plans

1. QA 1000 Quality Assessment Performance Improvement Plan Policy – R. Badamosi

Action: *Mr. Austin made a motion to approve, seconded by Ms. DeBose, motion passed unanimously.*

- 2. MM 600 Medication Diversion Prevention Policy – R. Badamosi
- 3. NPSG 900 Sentinel Event Policy – R. Badamosi
- 4. NPSG 901 Sentinel Event Procedure - R. Badamosi

Action: *Ms. DeBose made a motion to approve, seconded by Mr. Austin, motion passed unanimously.*

The Committee took a break at 2:24 p.m.

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

Executive Session started at 2:45 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 – R. Badamosi
- 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.

Open Session reconvened at 2:37 p.m.

VIII. ADJOURN

There being no further business to discuss, the Quality and Patient Safety Committee adjourned at 2:37 p.m.


Margaret Holland, MD, Committee Chair

01-23-2025
Date