Cascade Medical Center Quality & Compliance Committee Agenda & Minutes
(6/16/2026)

Purpose: **Compliance and Quality Improvement of the CMC Hospital District**
Committee Chair: **Aline Lee**
Members: **Lesa Becker, Tom Watson, Dr. David Gough**
CMC Leadership: **Tom Reinhardt, Teri Coombs, Jessica Wagner, Shelby Hallan, Sylvia Kober, Dr. Camarata, Dr. Mills**
Others Present:

CMCHD Quality & Compliance Committee Meetings are open to the public. The Committee meets via Microsoft TEAMS. The link to the live meeting is below (hover over "Join the meeting now" and press Ctrl and click to join the meeting).

Join the meeting now
Meeting ID: 223 004 482 104 73
Passcode: MM2ps3QJ

Dial in by phone
+1 323-792-6149,,342905982# United States, Los Angeles
Find a local number
Phone conference ID: 342 905 982#

Agenda Item	Minutes
• Call to order, agenda/minutes approval	• Minutes approved as written.
Continuing Business: • Quality Dashboard • Patient Satisfaction Surveys – sampling ER and Clinic patients • PT Patient Survey • 2026 PIP Plan • RHTP funding plan • Sample size data in dashboard	• Quality Dashboard -ED Patient Satisfaction: Patient data is now flowing into Press Ganey from EPIC so that satisfaction surveys can be sent. Data is starting to come in. No negative comments so far. Medication bar coding is improving and all other measures are at or better than goal. -PT: Patient goals met metric is the patient's overall perception of their satisfaction with progress. -Clinic: Staff is preparing lists of patients who have not completed screenings and/or wellness visits and staff is following up with patient to schedule. -Donnelly PT: Tracking use and satisfaction • 2026 PIP Plan -Oxygen and suction have been installed in all patient hospital/ER rooms -Dr. Mills reported that there have been reductions in denials due to improvement in provider documentation -Radiology measures improvement in quality of xrays at Donnelly by reduction in deficiencies reported by Gem State Radiology. • RHTP Funding Plan: Committee reviewed a list of items developed by CMC that will be submitted via grant proposals to the State for funding.

New Business:
• Oxygen/suction system completion
• Mock survey results
• Proposed new standing agenda items:
  • Antimicrobial Stewardship
  • Infection Control
  • P&T Reports
  • Incident Reports
	• Mock Survey Results: Committee reviewed a preliminary list of recommendations for improvement as a result of the mock survey. Final report has not yet been received. Corrective action plans are being developed. Surveyors recommended adding Antimicrobial Stewardship, Infection Control, P&T, and incident reports to the standing agenda for this committee. The most recent reports were reviewed. Antimicrobial Stewardship program is being developed and will report through Infection Control Committee to Medical Staff and QAPI Committee.
	• Incident Reports: Surveyors recommended that incident reports be reviewed by this committee. Staff will report numbers, types of incidents, and actions taken.
	• Emergency Preparedness Plan: A summary of the process for the annual review of the plan will be reported to this committee annually. Staff is planning a test of electronic medical record downtime procedures.

Executive Session if Needed	Not needed.
Other/Next Steps • Report out • Next Meeting • Meeting Adjournment	• Report to Board will include patient satisfaction sampling, mock survey results, oxygen and suction installation completion, reporting of P&T, IC, Antimicrobial Stewardship, incident reports, and emergency preparedness into the QAPI committee • Next meeting: August 11, 2026 @ 9am • Meeting adjourned at 9:55 a.m.