



# Chief Medical Officer's Report

Prepared for Board meeting July 28, 2025

# Quality Metrics



Clinical Measure	Where we are	Where we were	Change	Goal	At Goal?	Comment
Uncontrolled Diabetes	18.4%	18.1%	Worsening	18%	FALSE	Small decrease - again
Hypertension Control	77.3%	76.6%	Improving	75%	<b>TRUE</b>	Nice increase - again
Cervical Cancer Screening Rate	52.7%	52.6%	Improving	50%	<b>TRUE</b>	Tiny increase - again
Breast Cancer Screening Rate	61.9%	63.0%	Worsening	60%	<b>TRUE</b>	Mild decrease
Colorectal Cancer Screening Rate	52.6%	51.8%	Improving	55%	FALSE	Nice increase - again
2 Year Old Vaccination Rates	8.6%	8.6%	Improving	12%	FALSE	Tiny increase
Well Child Visit 3-21	57.5%	57.6%	Worsening	55%	<b>TRUE</b>	Tiny decrease - again
Well-Child Visits, 30 months	55.9%	55.5%	Improving	45%	<b>TRUE</b>	Nice increase - again
Depression Screening Rates	80.1%	79.2%	Improving	80%	<b>TRUE</b>	Nice increase - again
Diabetic Eye Exams	36.0%	33.7%	Improving	40%	FALSE	Small increase
Diabetic Kidney Screening	74.6%	74.1%	Improving	80%	FALSE	Large increase
HIV screening	62.5%	62.1%	Improving	60%	<b>TRUE</b>	Nice increase - again

Most all improving  
Decreases are small or maybe correction (mammograms)

# Quality Improvement Committee

**Last meeting –**

June 24, 2025 – minutes submitted

**Next meeting -**

August 26, 2025

**Ongoing Outcomes:**

Roster management (PCP panels)

Flu shot initiative for the Fall

Provider Enhancement Program





# Risk Management

# Risk Management Committee

## Last Meeting

June 17, 2025 – minutes submitted

## Next meeting –

August 19, 2025

## Outcomes:

Labels for sample meds

Colorectal cancer screening primer and review of workflows

Electronic incident report system



# Risk Management Goals



- Risk Management Plan ✓
- Risk Management Training plan in place ✓
- Training completion rate >95% (met for 2024)
- Quarterly risk assessments – Q1 & Q2 2025 ✓
- Annual Risk Management Report – April ✓

# Risk Management Dashboard - 2025

Person Responsible	Measure/ Key Performance Indicator	Threshold	Q1 (Jan-Mar)	Q2 (Apr-Jun)	Q3 (Jul-Sep)	Q4 (Oct-Dec)	Annual Total
	<b>Risk Assessments</b>						
CMO	# Completed quarterly assessments	4	1	1			2
CMO	# Completed high risk assessments	1	0	0			0
CMO	% Open action plans	50%	50%	42.9%			46.5%
	<b>Adverse Events/ Incident Reports</b>						
Center staff	# Adverse events	Total #/qtr	20	66			86
Center staff	# Near misses	Total #/qtr	2	23			25
Center staff	# Unsafe conditions	Total #/qtr	3	7			10
Center staff	# Serious reportable events/Sentinel events	Total #/qtr	0	1			1
Key staff	# RCAs completed per qtr.	Total #/qtr	1	3			4
CMO	# Peer review audits completed (10/provider twice per year)	90%	-	pending			#DIV/0!
	<b>Training and Education</b>						
RM	# Other specialty clinical training	4	1				1
CMO	Annual training completion rate	95%	56.5%	79.3%			79.3%
CMO	Obstetrics training completion rate	90%	0.0%	62.1%			62.1%
	<b>Risk and Patient Safety Activities</b>						
QI	Patient satisfaction top score rate	80%	-	-			0.0%
Appropriate staff	Referral completion rate	75%	73.6%	71.8%			72.7%
	<b>Claims Management</b>						
CM	# Claims submitted to HHS	0	1	0			1
CM	# Claims settled or closed	0	0	0			0
CM	# Claims open	0	1	0			1
CM	# Lawsuits filed	0	0	0			0
CM	# Lawsuits settled	0	0	0			0
CM	# Lawsuits litigated	0	0	0			0

# Risk Management Plan



- Needs board review and approval
- Minor edits, mostly updating positions and minor grammatical changes

# Risk Management Plan



## Table of Contents

Overview .....	3
Corporate Risk Management Program.....	7
Risk Management Committee .....	9
Risk Control .....	11
Reporting of Incidents .....	13
Adverse Drug Reaction .....	18
Infection and Exposure Control .....	22
Handling Hazardous Waste .....	23
Accident, Injury or Illness Report .....	24
Patient's Rights.....	25
Customer Grievance.....	26



# Incident Reporting



Pharmacy



Lab or X-ray



Patient Fall or Injury



Medication Error



Behavioral Health



Compliance



Patient Compliment or Complaint



Employee Safety



Environmental Services



IT



ED Transfer



Drill or Actual Emergency



Good Catch or Near Miss



Workplace Violence

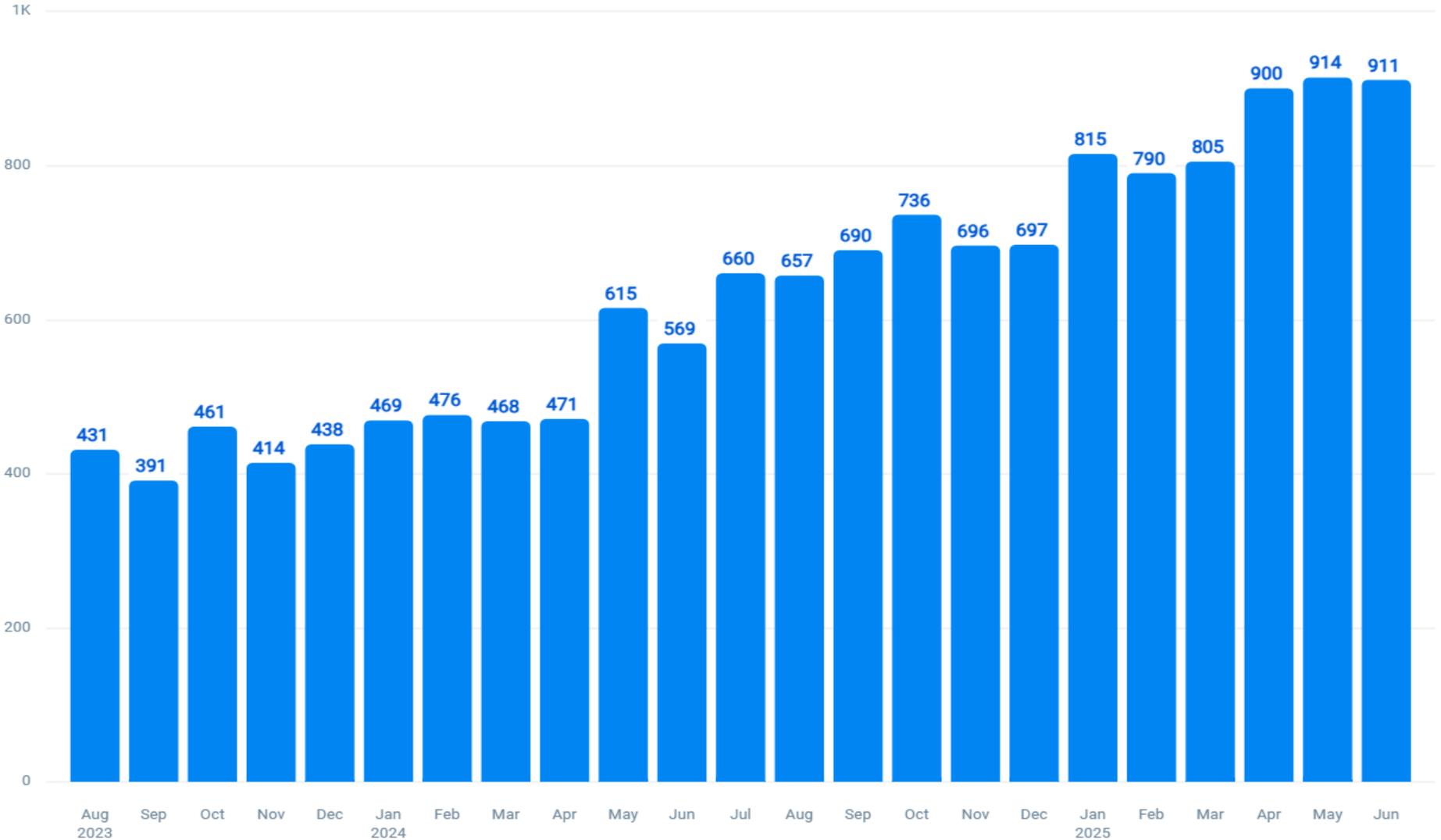


Other Event

# Behavioral Health

## Visits by BH staff

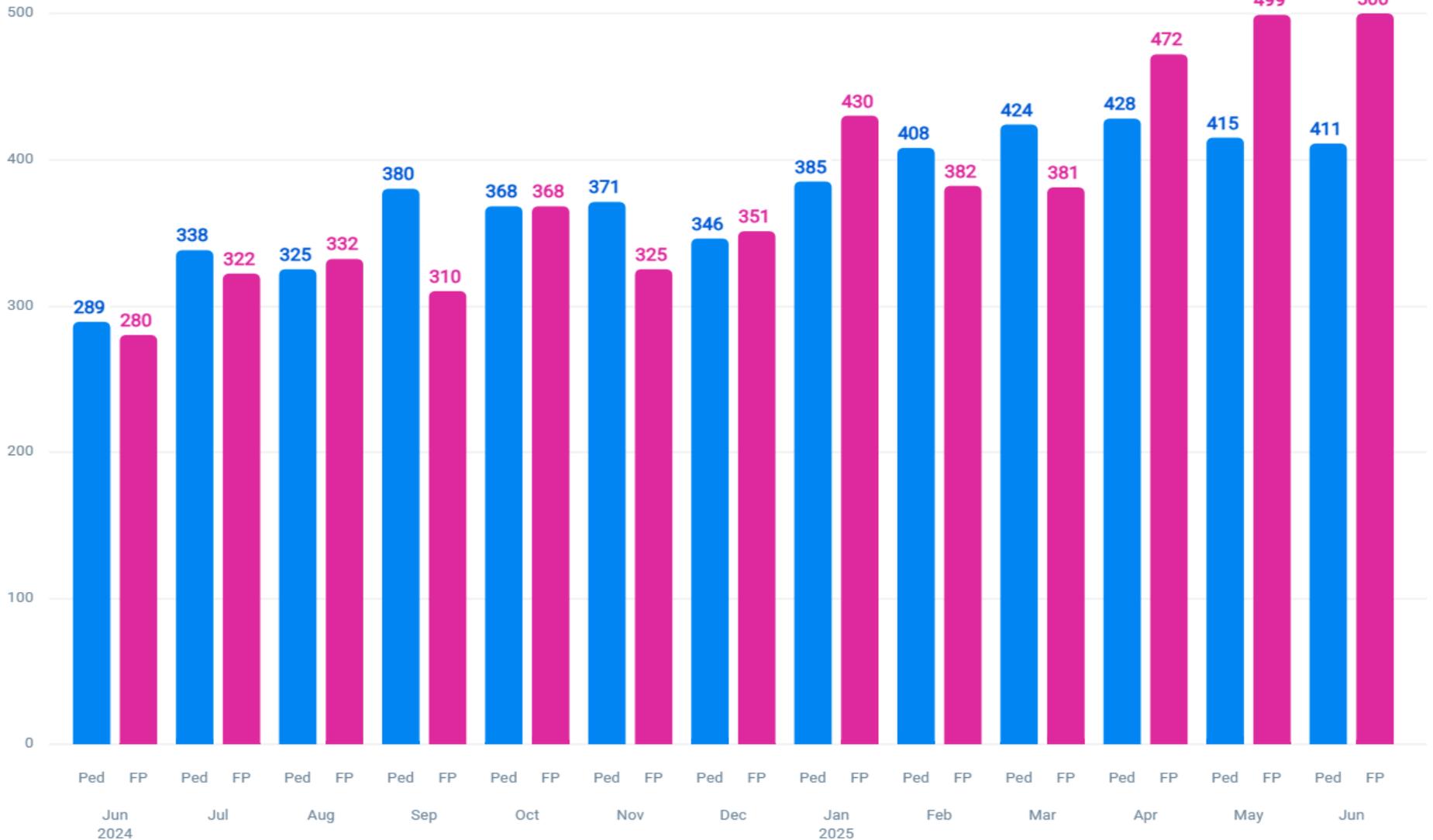
Between 8/1/2023 and 6/30/2025 by month



# Behavioral Health

## Visits by BH staff

Between 6/1/2024 and 6/30/2025 by month





# Action Items

## Appointment and granting of privileges

Melissa Senf, FNP – RSFP – half time

Emily Askew Robbins, PNP – TCC

Natasha Bonaparte, LMSW – internal transfer – UFP and  
PFHC

Kristan McCrary, peer support specialist – UFP

Steven Gause, peer support specialist (GCOR) - UFP

## Documents for Board Approval

Risk Management Plan 2025