MINUTES

BOARD MEMBERS PRESENT:
James R. Adams, Chair
Roberto L. Jimenez, M.D., Immediate Past Chair
Robert Engberg
James C. Hasslocher
Janie Barrera

BOARD MEMBERS ABSENT:
Dianna M. Burns, M.D., Secretary
Ira Smith, Vice Chair

OTHERS PRESENT:
George B. Hernández, Jr., President/Chief Executive Officer, University Health System
Bryan J. Alsip, M.D., Executive Vice President/Chief Medical Officer, University Health System
Tommye Austin, Senior Vice President/Chief Nurse Executive, University Health System
Awoala Banigo, Senior Vice President/Chief Revenue Officer, University Health System
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System
Antonio Carrillo, Executive Director, Procurement Services, University Health System
Lourdes Castro-Ramirez, President, University Health System Foundation
Ted Day, Executive Vice President, Strategic Planning and Business Development, University Health System
Theresa De La Haya, Senior Vice President/Health Promotion and Clinical Prevention, University Health System - Texas Diabetes Institute
Sergio Farrell, Senior Vice President/Chief, Ambulatory Services, University Health System - Robert B. Green Campus
Stacy Foremski, Special Assistant to the Chief Operating Officer, University Health System
Rocio García, R.N., Executive Director, Emergency Department, University Hospital
Roe Garrett, Vice President/Controller, University Health System
Greg Gieseman, President/Chief Executive Officer, Community First Health Plans, Inc.
William Henrich, M.D., President, UT Health San Antonio
Barbara Holmes, Vice President/Chief Financial Officer, Community First Health Plans, Inc.
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System
Monika Kapur, M.D., President/Chief Executive Officer, University Medicine Associates
CALL TO ORDER AND RECORD OF ATTENDANCE: JIM ADAMS, CHAIR, BOARD OF MANAGERS

Mr. Adams called the meeting to order at 6:00 p.m.

INVOCATION AND PLEDGE OF ALLEGIANCE

Mr. Adams introduced Lucila (Lucci) Guyer, R.Ph., Pharmacy Services, Texas Diabetes Institute for the invocation, and he led the pledge of allegiance.

QUARTERLY EMPLOYEE RECOGNITION AWARDS - GEORGE B. HERNÁNDEZ, JR./BOARD MEMBERS

Employees listed below were recognized by the Board of Managers:

Professional: Melissa Laskowski
(Nursing) Staff Nurse III, Trauma ICU

Professional: Jon Perkins
(Non-Nursing) System Administrator, Clinical Systems

Management: Julie Anne Eddy
Director, Life Support/Palliative Care
All of this year’s quarterly recipients will be special honored guests at the Annual Recognition Awards Ceremony at the Omni on February 28, 2019. Employees of the Quarter receive a plaque, embossed pen and an opportunity to select one of numerous awards valued at $100 on the Employee Recognition website. Ms. Barrera addressed the employees on behalf of the Board of Managers. She thanked the many talented people who share their gifts with the Health System to help as many people in the community as possible. She also thanked family and friends for supporting the staff and encouraging them to strive to do better. This organization is a great leader and the Board of Managers is very proud of its staff.

CITIZENS’ PARTICIPATION: None.

REPORT FROM UT HEALTH SAN ANTONIO – WILLIAM HENRICH, M.D., PRESIDENT

Dr. Henrich reported that Dr. Hromas is on campus this evening with the Liaison Committee on Medical Education (LCME) for a 2.5 day visit. They visit every 7 years, with three years of preparation, and the accreditation is not an easy hurdle to clear, since they review all aspects of residency programs, to include finances and research. The LCME is a group well known to be critical. The School of Medicine team working with Dr. Hromas has been hard at work for about three (3) years, two (2) full years before Dr. Hromas arrived. The LCME will provide an oral report summarizing their visit tomorrow by noon. Health System leadership will participate in the LCME interviews as a clinical affiliate; Dr. Alsip has been involved in the preparations.

The School of Medicine has three active Chair Search Committees underway – two are hospital-based (Anesthesiology and Emergency Medicine). He is pleased to have met several of the candidates and Dr. Hromas is hoping to extend offers sometime in the spring. Over 20 physicians and physician groups have joined the School of Medicine’s Accountable Care Organization (ACO). Having an ACO will help the
School of Medicine receive Medicare dollars in the new economy for reimbursement.

Congratulations to the Hospitalists at University Hospital for meeting and/or exceeding their metrics for discharges by 12 noon.

There are pivotal issues before the 86th Texas Legislature this session that are health-related, higher education items. Texas has not had a per capita formula increase for graduate medical education training since 2001. Buying power for Medical Schools has decreased while expenses have increased. The Long School of Medicine has 125 medical sub-specialties and every one of them has an accrediting body. Anyone time there is an accrediting body doing a full examination of a certain program, the School of Medicine picks up the costs. The School of Medicine is asking for an increase in funding for some meritorious programs such as the first Alzheimer’s program in the city known as The UT Glenn Biggs Institute for Alzheimer’s & Neurodegenerative Diseases. There are not any other such institutions in the city because it would be an absolute financial loss for private practitioners.

At University Hospital, there has been a slight snafu with the parking situation while the Women’s and Children’s Tower is under construction. However, UT Health has a proposal for Mr. Hernandez and Mr. Banos to review so that construction on the new building can start on time. Mr. Hernandez assured the Board that the staff will review the parking proposal as soon as possible to avoid any delay in construction.

Dr. Henrich thanked Dr. Tommye Austin for her professionalism and assistance over the ML King Holiday weekend, when he received a distress call from a prominent person in town. Within 1.5 hours, Dr. Henrich, Dr. Austin, and three other M.D.s where in the patient’s room, much to the patients delight.

Dr. Suri acknowledged the physician leaders present. Various clinical staff attended more than 130 Epic sessions last week, great participation from UT faculty, UMA physicians, residents, nurses, technicians, and IT staff. The Health System’s IT team has been working for 1.5 years on CareSelect, a computerized support system that helps physicians order the most appropriate imaging study for the most appropriate indication, especially high cost imaging such as CT scans and MRIs. The Health System is ready to go live in March, 2019. A demo of CareSelect has been presented to the UMA Board of Directors and the Executive Committee of the Medical/Dental Staff. The software is required by CMS to be in place by 2020 and Dr. Suri is personally reaching out to the various physicians for successful implementation on the outpatient side, followed by work on the inpatient side.

**RECOMMENDATION:** This report was provided for informational purposes only.

**ACTION:** No action by the Board of Managers was required.

**EVALUATION:** Dr. Jimenez has become aware that the 86th Legislature is interested in increasing funding for medical education. According to Dr. Henrich, this statement is generally true, however, during which particular session,
the legislature has disposable money and a rainy day fund of $13 billion, and the Speaker of the House informed Dr. Henrich that it is always easier when the legislature does not have disposable funds. This session they are dealing with the hurricane victim fund, road infrastructure problems and public school education. Higher education and health-related education is the economic engine for the state because it is the knowledge economy that will win for the State of Texas. There is always lots of optimism in January; however, Dr. Henrich expects to start seeing things come together in March. He urged Board members to make contact with their elected officials to stress the importance of higher education and health-related education in the state, it is so crucial for Texas to compete with Massachusetts, New York, North Carolina, Washington, and California, so that Texas can win the knowledge economy, the state cannot skimp on this educational effort.

FOLLOW-UP:

None.

CONSENT AGENDA – JIM ADAMS, CHAIR

CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR STAFF MEMBERSHIP — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF

CONSIDERATION AND APPROPRIATE ACTION TO APPOINT DR. STEVEN R. SEIDNER AS THE CLINICAL DEPARTMENT CHAIR OF PEDIATRICS — RAJEEVSURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF

CONSIDERATION AND APPROPRIATE ACTION REGARDING POLICY NO. 8.02.02 STANDARDIZATION OF PATIENT ADMISSIONS FROM THE EMERGENCY DEPARTMENT— EMILY VOLK, M.D.

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE APPOINTMENT/REAPPOINTMENT(S) TO THE MISSION DEL LAGO TIRZ #6 BOARD OF DIRECTORS — ROBERT ENGBERG, CHAIR, NOMINATING COMMITTEE

CONSIDERATION AND APPROPRIATE ACTION REGARDING PURCHASING ACTIVITIES (SEE ATTACHMENT A) — ANTONIO CARRILLO/TRAVIS SMITH

SUMMARY: The items above were presented for the Board’s consideration as consent items. The following details are associated with these consent items:

Consideration and Appropriate Action Regarding Medical-Dental Staff Recommendations for Staff Membership — Rajeev Suri, M.D., President, Medical/Dental Staff - Monthly Credentials Committee Report (listing of providers in accordance with the Health System’s Credentialing and Privileging Process); and Focused/Ongoing Professional Performance Evaluation Reports submitted to the Board of Managers for approval.
Consideration and Appropriate Action to Appoint Steven R. Seidner, M.D., as the Clinical Department Chair of Pediatrics — Rajeev Suri, M.D., President, Medical/Dental Staff – The Executive Committee of the Medical/Dental Staff recommends the appointment of Steve R. Seidner, M.D., as Clinical Department Chair for the Department of Pediatrics. This is a joint recommendation between University Health System and the Long School of Medicine whose goal it is to select the best qualified candidate whose personal qualifications and clinical practice experience can best lead the department’s operations, assure high quality care, patient satisfaction and efficiency.

Consideration and Appropriate Action Regarding Policy No. 8.02.02 Standardization of Patient Admissions from the Emergency Department— Emily Volk, M.D. - This is a new policy presented for Board approval. It addresses the need for a timely and appropriate patient admission process through the Emergency Department (ED) into the inpatient/observation setting of University Hospital. The policy also stipulates that any contested admission requires evaluation by, and communication between, attending physicians to resolve any disagreements in care plans for the patient.

Consideration and Appropriate Action Regarding the Appointment/Reappointment(s) to the Mission Del Lago TIRZ #6 Board of Directors — Robert Engberg, Chair, Nominating Committee - The Nominating Committee recommends the appointment of Mr. Thad Rutherford to the Mission Del Lago TIRZ # 6 Board of Directors. Mission Del Lago is a petition-initiated Tax Increment Refinance Zone (TIRZ) designated by the San Antonio City Council in 1999. The zone includes approximately 812 acres in the Southside Independent School District (SISD). The Health System currently participates in the Mission Del Lago project (TIRZ #6). Participating in the project means that the Health System refunds to the City of San Antonio any property taxes collected on taxable properties within the boundaries of the TIRZ. The Mission Del Lago TIRZ project Board of Directors is comprised of appointments by the City of San Antonio, Bexar County, SISD, the State Senator, the State Representative and the Health System. Since October 2016, Mr. Kimball Woodbury has served as the Health System’s appointed Board Member. Mr. Woodbury has recently resigned as a principal with South Star Development Partners and now resides full-time in Florida. Mr. Thad Rutherford, President of SouthStar Communities, has expressed an interest to serve as the Health System’s appointee to the TIRZ #6 Board of Directors. Mr. Rutherford has an MBA in International Business from the University of Miami. He currently oversees SouthStar’s $200 million portfolio of eight (8) residential development properties across Texas and the Southeast United States, representing over 2,500 single-family home sites. The term of this appointment is effective immediately to complete Mr. Woodbury’s initial term on May 19, 2019, through the end of the following term ending April 30, 2021.
Consideration and Appropriate Action Regarding the 4th Quarter Investment Report — Roe Garrett/Reed Hurley - The Investment Portfolio Summaries for the Health System and Community First Health Plans, Inc. (CFHP), invested funds for the fourth quarter of 2018 show that, in total, the value of all invested funds as of December 31, 2018 was $1,293,120,140 consisting of Health System, Project, Certificate and CFHP Funds. The reports include all information required by the Texas Public Funds Investment Act. In addition, the Health System and CFHP portfolio reports were provided separately for the Board’s review. The portfolios earned $6,682,381 in interest income in the fourth quarter, a 150 percent increase over the same period a year ago. The portfolio’s unrealized loss was reduced to $1,258,961 as interest rates fell during the quarter. This report was presented for the Board’s approval.

Consideration and Appropriate Action Regarding Purchasing Activities (See Attachment A) — Antonio Carrillo/Travis Smith — A total of fourteen (14) contracts with a value of $25,549,992 are being presented to the Board of Managers in January 2019. The following contracts require approval by the BCHD Board of Managers: Five (5) consent contracts with a total value of $11,003,946. Nine (9) presented contracts with a total value of $14,546,046. During the month of January 2019, there were three (3) contracts classified as a Small, Minority, Woman, or Veteran Owned Business Enterprises (SMWVBE). Two (2) of these contracts are with Certified SMWVBE vendors. January 2019 SMWVBE Status Report reflects items being submitted for Board approval.

RECOMMENDATION: Staff recommends approval of the items listed on the consent agenda.

ACTION: A MOTION to approve all of the items on the consent agenda was made by Ms. Barrera, SECONDED by Mr. Engberg, and PASSED UNANIMOUSLY.

EVALUATION: On behalf of the Board of Managers, Mr. Adams commended the appointment of Dr. Steve Seidner as Clinical Chair of the Department of Pediatrics. He is an outstanding person and neonatologist with great plans for the Department of Pediatrics.

FOLLOW UP: None.

ACTION ITEMS:

CONSIDERATION AND APPROPRIATE ACTION RELATING TO SELECTED PURCHASING ITEMS

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AMENDMENT WITH PREMIER HEALTHCARE SOLUTIONS, INC. FOR ENTERPRISE RESOURCE PLANNING SOFTWARE — BILL PHILLIPS/REED HURLEY

SUMMARY: The Health System currently uses Infor/Lawson Enterprise Resource Planning (ERP) modules to measure financial performance on the General Ledger (GL) and manage Supply Chain efforts. The Health system has been using Infor/Lawson ERP since 1999. In April 2016, the attempts were made to upgrade to a streamlined ERP system by converting from the existing version of Lawson v9 to Lawson’s newest version, Lawson v10 Cloud Suite. Unfortunately, the attempted upgrade was not successful using third party contractors. In an effort to improve the implementation, the
Health System engaged directly with Infor Consulting Services who recommended we upgrade to the newest Lawson version 11. Infor Consulting Services was engaged to support the implementation but due to the continued challenges with Infor/Lawson implementation, on October 30, 2018, Health System staff requested the teams discontinue efforts to upgrade while the remediation plans were considered and alternative solutions were evaluated. The Health System’s recommended ERP product with Premier Healthcare Solutions in a completely integrated, cloud-based platform at a cost of $7,700,000 over a 5-year term. Included within the cost of the product is initial implementation and training efforts to achieve go-live within 9 months, ahead of Epic project deadlines. In addition, the Premier agreement includes over 60 hours annually for ongoing consulting engagement to optimize use of the software platform. Because of Premier’s integrated platform, the Health System expects to experience improved financial visibility, gains in efficiency, and resulting cost reductions across the system. ERP Platform costs are as follow for the next 5 years:

<table>
<thead>
<tr>
<th></th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Year 4</th>
<th>Year 5</th>
<th>5-Year Agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premier Integrated</td>
<td>$1,700,000</td>
<td>$1,500,000</td>
<td>$1,500,000</td>
<td>$1,500,000</td>
<td>$7,700,000</td>
<td>$7,700,000</td>
</tr>
<tr>
<td>Legacy Solutions</td>
<td>$1,560,548</td>
<td>$1,570,033</td>
<td>$1,579,893</td>
<td>$1,601,059</td>
<td>$7,901,742</td>
<td>$7,901,743</td>
</tr>
<tr>
<td>Variance</td>
<td>$139,452</td>
<td>$(70,003)</td>
<td>$(79,893)</td>
<td>$(90,238)</td>
<td>$(101,059)</td>
<td>$(201,742)</td>
</tr>
</tbody>
</table>

The workforce composition data for Premier Healthcare Solutions, Inc., was provided for the Board’s review.

RECOMMENDATION: Staff recommends the Board of Managers approve the funding in the amount of $7,700,000 and authorize the President/Chief Executive Officer to execute a contract amendment with Premier Healthcare Solutions for Enterprise Resource Planning software and support.

ACTION: A MOTION to approve staff’s recommendation was made by Mr. Hasslocher, SECONDED by Ms. Barrera, and PASSED UNANIMOUSLY.

EVALUATION: None.

FOLLOW UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FOLLOWING AGREEMENTS FOR LANDSCAPING SERVICES: RUBEN ARCINIEGA D/B/A BONITA LANDSCAPING AND PRO LANDSCAPE SOLUTIONS, LLC — JIM WILLIS

SUMMARY: On June 26, 2018, the Board of Managers approved the award of the first of two landscape contracts to Goodwill Industries of San Antonio. The contract with Goodwill Industries includes the landscaping needs of University Hospital, Robert B. Green Campus, Texas Diabetes Institute, Northwest Clinic, University Health System Pavilion, Southwest Clinic, Southeast Clinic, Southeast Dialysis, and all Health System irrigation. The second phase of the award is a group of smaller contracts being presented for consideration of landscape maintenance services at the remaining eight clinic and/or business locations. In order to promote local community participation, the second RFP allowed potential contractors to bid on all eight locations or by the basis of zone. Zone One is comprised of the Data Technology Center and the Business Center. Zone Two includes the North Clinic, South Flores Clinic, Hilliard Clinic, Zarzamora Clinic, Kenwood
Clinic, and Naco-Perin Clinic. The selection criteria for these services include references (10 percent), quality control and qualifications of workers (20 percent), landscape service capabilities (35 percent), and pricing (35 percent). Mr. Willis identified the ten vendors who respond to the second landscape RFP. On September 21, 2018 each respondent presented to the evaluation committee. The evaluation committee consisted of Ambulatory and Hospital leadership and Mr. Willis identified the selection criteria for the second interview included: staffing and equipment to support arborist services (20 percent), ability to meet an emergency response time of two hours (30 percent), and pricing (50 percent). After careful consideration, the recommendation was to award two contracts; Pro Landscape Solutions for Zone One; and Bonita Landscaping Zone Two. Both vendors are from within the community. Pro Landscape Solutions submitted a proposal of $33,540 per year for Zone One. Bonita Landscaping submitted a proposal of $81,492 per year for Zone Two. These are budgeted operational expenses beginning in fiscal year 2019. The workforce composition data for Ruben Arciniega d/b/a Bonita Landscaping and Pro Landscape Solutions, LLC, was also provided for the Board’s review.

RECOMMENDATION: Staff recommends the Board of Managers approve an initial three year landscape contract with Pro Landscape Solutions with two, one-year renewal options in the amount of $167,700. Staff also recommends the Board of Managers approve a second initial three-year landscape contract with Bonita Landscaping with two, one-year renewal options in the amount of $407,460.

ACTION: A MOTION to approve staff’s recommendation was made by Mr. Engberg, SECONDED by Mr. Hasslocher, and PASSED UNANIMOUSLY.

EVALUATION: None.
FOLLOW UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FINANCIAL REPORTS FOR DECEMBER 2018—REED HURLEY

SUMMARY: In December, clinical activity (as measured by inpatient discharges) was up 2.0 percent for the month compared to budget. Outpatient activity was down 19.5 percent as compared to budget, and total funded payer mix for the month was 73.2 percent. Community First Health Plan (CFHP) fully-insured membership was down 0.6 percent. On a consolidated basis, gain from operations was $15.7 million, $9.4 million better than budget. The consolidated bottom line gain (before financing activity) was $12.9 million, $12.5 million better than budget. Higher patient and non-patient revenue were somewhat offset by higher than budget operating expenses. CFHP experienced a bottom line gain of $1.0 million which was $433 thousand worse than budget. Premium revenue was up $4.0 million due to an increase in reimbursement rate that took effect in September. Medical claims expense was higher than budget by $4.1 million. Year to date actual revenue variance to budget is $107.3 million impacted by Uncompensated Care—($6.6m). Year to date actual expense variance to budget is -($80.6m) impacted by salary and benefits
- ($14.5m); supplies - ($24.8m); increase in CFHP claims expense – ($44.1m); and other – ($9.2m). Non-operating variance to budget was $23.6 million. The 2018 budgeted bottom line is $8.7 million and the actual bottom line reported is $59.0 million. Debt service revenue was $5.3 million which is $112 thousand more than the budgeted debt service payment of $5.02 million due to year end reconciliation to Bexar County Tax Assessor records. Mr. Hurley reviewed 2018 operating indicators and notable increases and/or decreases from the consolidated balance in detail.

RECOMMENDATION: Staff recommends acceptance of the financial reports subject to audit.

ACTION: A MOTION to accept the financials subject to audit was made by Mr. Engberg, SECONDED by Mr. Hasslocher, and PASSED UNANIMOUSLY.

EVALUATION: None.

FOLLOW UP: None.

PRESENTATIONS AND EDUCATION:

OPERATIONS REPORT — EDWARD BANOS

SUMMARY: Mr. Banos introduced the PowerUp! Emergency Department team to the Board of Managers: Dr. Andrew Muck, Dr. Steven Moore, and Ms. Rocio Garcia, the main drivers in the ED along with Dr. Tommy Austin and Mr. Mike Roussos. He also introduced the PowerThrough! Inpatient team, a process recently started on the medicine units for discharging patients by 12 noon: Mario Noli Legarde, Golda Manalili, R.N.; Maria Roselle Sadornas, R.N., and Ms. Dorothy Krumbholz of Care Coordination. They, along with the staff on their units, are the engine responsible for the success that will be reviewed today.

Overall Volume Trends

Inpatient Discharges, 2014 to 2018 - Sky Tower opened in 2014, at that time inpatient discharges were at 22,000 and at the end of November 2018 the count had increased to 30,000 discharges, or 4.1 percent growth from 2017.

Total Emergency Room Visits, 2014 to 2018 – There were 75,000 ED visits in 2014. In 2018, there were over 90,000 visits, or a 4.9 percent growth which includes trauma, pediatrics, women’s services, and adult Emergency Department. In 2018, inpatient admissions increased by 4.1 percent from 2017. Adult admissions from the Emergency Department grew 12.8 percent, while outpatient Emergency Department volume grew 4.9 percent throughout the year.

Acute Adult Emergency Department Admissions, 2014 to 2018 - Of the 2014 ED visits, 9,841 were adult admissions to an inpatient unit. Of the 2018 visits, 16,000 were adult admissions to an inpatient unit, a 52 percent increase since 2014, which puts a tremendous burden on University Hospital and the need for inpatient beds.
Addressing the Growth in 2018, University Hospital

- Increased bed capacity by 29 beds:
  - 9 Rio and 7 Horizon conversion gained 9 beds
  - 7 Sky opened 8 beds AYA Unit
  - 12 MSU conversion gained 12 observation beds
- Inpatient Dialysis Unit: 12 dialysis treatment bays

Power Up! Emergency Department Progress Report - Project started in April 2018. Goals are to improve the flow and delivery of patient care; simultaneous registration and medical evaluation by a registered nurse; second evaluation by a Physician in Triage (PIT); and standard criteria for fast, mid, and major care track.

Emergency Department Trends and comparison to Academy of Administrators in Academic Emergency Medicine (AAAEM)

- Discharge Length of Stay (LOS) Avg. Minutes - In 2016, LOS was 396; in 2017, LOS was 372; in 2018 LOS was 269; AAAEM average time in 2016 was 240 minutes.

- Left before treatment complete (LBTC) Avg. Percentage – In 2016, average was 47; in 2017 average was 15; in 2018 average was 4.9; AAAEM average in 2016 was 4.3.

- Door to Provider – Avg. Minutes – in 2017 was 48; in 2018 was 3; AAAEM average minutes in 2016 were 30.

2019 Power Up! Action Plan

- Committed to improving the ER patient physician seen to discharge time metric.
- Creating Epic ED templates and standard of care.
- Work with UT Health on reducing the volume of consults in the ED for discharged patients.
- Working with UMA Ambulatory Connections Clinic, Dr. Du, and Outpatient Transitions of Care team to coordinate care post Emergency Department.

Power Through! Inpatient Hospitalist Progress Report - Project started December 2018. Working groups created with UT Hospitalists, Residents, Care Coordination, and Nursing. Goals are 25 percent discharge before noon (DBN) metric; Physical/Occupational Therapy and DME standardization; Realign Care Coordination with dedicated Hospitalist teams; Discharge care coordination with outpatient services

Power Through! Initial Results - Discharge before 12 Noon (5 Sky) - 8 percent in January 2018; 8.90 in percent October 2018; 14.20 percent in November 14.20; 33.20 percent in December 2018; and 38.0 in January 2018. Since December 18, 2018 there has not been a Capacity Management Plan activated.
Power Through! Next Steps - Daily calls to discuss why individual patients were not discharged by noon; Expanding the roll out of Power Through!: 12 MSU roll out in Jan 2019; 8 Sky roll out Jan 29, 2019; 6 Sky (Trauma) and 10 Sky retreat in February 2019 and plan for roll out in March 2019; Continue to roll out throughout the year to all units.

RECOMMENDATION: This report was provided for informational purposes only.
ACTION: No action by the Board of Managers was required.
EVALUATION: Board members applauded the progress made to date in the Emergency Department and on the inpatient Medicine unit. Dr. Jimenez suggested that a staff medical economist would be useful in translating program data in terms of savings for an idea on how these programs impact the Health System. Although the Health System does not have access to a medical economist at this time, the cost to house a patient on an acute inpatient unit is approximately $1,000 per day. The other way the staff plans to measure success is through patient satisfaction surveys which can significantly improvement scores. Mr. Hurley agreed that it is difficult to measure flow improvements, however, he is confident that improvements will show in the bottom line. Dr. Jimenez asked Dr. Austin how she plans to sustain the progress made year to date. The units are very competitive and a lot of the staff is self-motivated. In addition, Mr. Nelson Tuason, Associate Chief Nursing Officer for Adult Services, could not be here this evening but is a quality master and will oversee the PowerThrough! project. She is confident that the PowerThrough! project will be a huge success. As for the Power Up! project, staff reviews ED data every day and they want to improve. The staff wants patients to be happy and that makes the staff happy. Mr. Roussos believes the staff will sustain both projects because it is the right thing to do. Mr. Adams walks the halls of the ED and he no longer sees people waiting in the lobby, in pain, or lying in gurneys in the hall way, he sees both teams working as one team in the ED. Dr. Muck thanked Dr. Moore for his leadership in the ED while the project was implemented. He also commended Dr. Tommy Austin and Nurse Rocio Garcia for their daily support

FOLLOW UP: None.

INFORMATION ONLY ITEMS:

EPIC ELECTRONIC HEALTH RECORD PROJECT UPDATE — GEORGE B. HERNÁNDEZ, JR.
UPDATE ON PLANNING, DESIGN AND CONSTRUCTION ACTIVITIES — DON RYDEN
UNIVERSITY HEALTH SYSTEM FOUNDATION UPDATE — LOURDES CASTRO-RAMÍREZ
REPORT ON RECENT RECOGNITIONS AND UPCOMING EVENTS — LENI KIRKMAN
REPORT ON THE 86TH LEGISLATIVE SESSION — ANDREW SMITH

SUMMARY: Mr. Adams directed his colleagues’ attention to the five informational reports above and asked them to provide feedback, comments, or questions directly to the staff.

RECOMMENDATION: These reports were provided for informational purposes only.
ACTION: No action by the Board of Managers was required.
EVALUATION: None.
FOLLOW-UP: None.

ADJOURNMENT:

There being no further business, Mr. Adams adjourned the Board meeting at 7:55 p.m.

James R. Adams  Dianna M. Burns, M.D.
Chair, Board of Managers  Secretary, Board of Managers

Sandra D. Garcia, Recording Secretary