
UMC ProVidence Suite
Trauma Building, 5th Floor
800 Rose Street
Las Vegas, Clark County, Nevada
Thursday, September 24, 2015
3:00 p.m.

The University Medical Center Governing Board Strategic Planning Committee met in the ProVidence Suite, UMC Trauma Building, 5th Floor, Las Vegas, Clark County, Nevada, on Thursday, September 24, 2015, at the hour of 3:00 p.m. The meeting was called to order at the hour of 3:03 p.m. Chair John White and the following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:
John White, Chair
Donald Mackay, MD
Eileen Raney
Jeff Ellis – Arrived at 3:16 pm, Item #4

Absent:
Michael Saltman (Excused)

Also Present:
Kurt Houser, Chief Operating Officer
Danita Cohen, Executive Director, Strategic Development and Marketing
Terra Lovelin, Board Secretary

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

Chair White asked if there were any persons present in the audience wishing to be heard on any item on this agenda.

Speaker(s): None

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Strategic Planning Committee meeting on June 18, 2015. *(For possible action)*

FINAL ACTION: A motion was made by member Mackay that the minutes be approved as recommended. Motion carried by the following vote:

Voting Aye: John White, Donald Mackay
Abstaining: Eileen Raney

ITEM NO. 3 Approval of Agenda *(For possible action)*

FINAL ACTION: A motion was made by member Mackay that the agenda be approved as recommended. Motion carried by unanimous vote.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive an update on the UNLV School of Medicine from Maureen Shafer, UNLV School of Medicine Chief of Staff. *(For possible action)*

DOCUMENT SUBMITTED: None

DISCUSSION: Maureen Shafer, Barbara Atkinson's Chief of Staff, updated the committee on what is going on at the School of Medicine. She thanked Chair White on his involvement and all that he has done for them. Ms. Shafer noted that they completed their 60 scholarships in 60 days with the help of a large donation from the Engelstad Foundation. Dr. Marlon also made a large donation of $2 million and his donation was specifically earmarked for the orthopedic program.

The School of Medicine is in conversation about their new building; their sites are set for the Medical District. The School of Medicine has received a $28 million dollar appropriation that will help with recruiting staff. The School of Medicine has also retained Price Waterhouse Cooper to help them build their medical schools, specifically their third and fourth year community clinics that the students will practice in. PWC are also helping them prepare their accreditation.

(Jeff Ellis arrived)

Chair White inquired about the handoff with UNSOM.

Ms. Shafer explained that everyone has agreed to work together and accept everyone onto the plan once it is ready. The UNLV School of Medicine is shooting for the end of the year to get their practice plan up.

FINAL ACTION: No action taken.

ITEM NO. 5 Receive a report on the current market share data and initiatives to increase specific service line market share. *(For possible action)*

DOCUMENT SUBMITTED: General Market Share

DISCUSSION: Chief Operations Officer, Kurt Houser shared the current market share data statistics.
- UMC's market share is significantly behind Sunrise Hospital.
-Medicaid rate payers increased by 10.75%
-Medicare decreased by 5.22%
-HMOs went down by .68%
-ACA and Self Pay mix went down by 51.88%
-Commercial insurance increased by 7.1%

Kurt said that they are going to set some targets about where we need to be.

Danita Cohen, Executive Director of Strategic Development and Marketing, explained what UMC is doing to increase UMC's market shares:
-There are two Physician's Coordinator positions posted
-The OR surgeons lounge just opened

-Marketing for Children's Hospital, specifically the children's emergency dept. continues.
-UMC is focusing now on Quick Care ads and marketing.
-Community outreach continues.
-The Administrative team is meeting monthly with the ER staff; there is always an Administrative Representative in each of their meetings.
-The EMS Lounge just opened and has been packed the last few days.

FINAL ACTION: No action taken.

ITEM NO. 6 Receive an update from Dr. Hidenobu Shigemitsu on the SPOTS pulmonary clinic. *(For possible action)*

DISCUSSION: Dr. Shigemitsu is the Division Chief of Pulmonary Care Medicine and has worked at UMC for about two and a half years. The SPOTS clinic is collaboration between UMC and the Medical school faculty. This is a program centered on lung cancer; as lung cancer kills more people in the US than any other cancer.

SPOTS stands for Screening Pulmonary Oncologic Tumor Services. The program was developed from a joint effort between UMC and UNSOM, and is the only multidisciplinary program in the whole valley. The clinic has experts and specialists from various disciplines who are committed and know what they are doing. The key to the success of this type of program is to have a Thoracic surgeon involved and UMC is very lucky to have Dr. Quynh N. Feikes, MD.

Early detection allows for the patient to have the best chance of survival.

A video was shown highlighting a new technique called Electro Magnetic Navigation Bronchoscopy.

Ms. Cohen and many of the public relations personal are working on marketing the clinic and the services they provide.

Andrew and Dr. Shigemitsu have been working on launching the program.

Andrew Chung, Associate Administrator explained that he has already pitched the program to the Culinary Union.

FINAL ACTION: No action taken

ITEM NO. 7 Receive an update on UMC Director's Impact committee initiatives on Leadership, Patient Experience, Physicians, Employees, Marketing, Operations and Service Lines. *(For possible action)*

DOCUMENT(S) SUBMITTED: None

DISCUSSION: Danita Cohen explained what certain groups are doing for UMC.

Marketing Group: Looking at building a new website including mobile features.

Service Lines: Focusing on improvements that will eliminate some of the silos that have happened over the years.

Physician Experience: Physician orientation and the three wishes outreach, along with a HCAPS committee.

Patient Experience: Focusing on new framework, this will be discussed during agenda item 8.

Employee Experience: Focusing on accountability, recruitment and retention of quality employees and succession planning.

Leadership: Identifying cultural expectations and revising the UMC leadership camp.

FINAL ACTION: No action taken

ITEM NO. 8 **Receive an update on UMC's new ICARE4U framework of desired behaviors during all patient and employee interactions. *(For possible action)***

DISCUSSION: Danita Cohen gave a brief overview of this new framework for expectations of how we handle every single interaction with patients and colleagues. This will be rolled out more at the next Quality and Patient Subcommittee Meeting.

This stands for:
"I" = Identify yourself by name
"C" = Communicate while you are there
"A" = Ask permission to do a procedure
"R" = Responding to any questions

"E" = Exiting every interaction with, "Is there anything else I can do for you?"

FINAL ACTION: No action taken

ITEM NO. 9 Receive an update on UMC's capital plans. *(For possible action)*

DOCUMENT SUBMITTED:
-FY Capital Budgeting Update (Part of the General Market Share packet)

DISCUSSION: Kurt gave a brief recap of the FY 16 Capital Budgeting Update

$15 M Capital Expense (new beds and other equipment)
-$5 M for Priority Equipment and Renovation
-$5 M for Capital Committee Prioritization
-$5M for EHR Replacement

$10 M Capital / Operational Budget Reserve
-Available if UMC achieves budgeted financial targets

$4 M Attorney General Pfizer Settlement Fund

FINAL ACTION: No action taken

ITEM NO. 10 Receive an update on UMC's beautification plans. *(For possible action)*

DOCUMENT SUBMITTED:
Shadow Lane Streetscape Improvements

DISCUSSION: Kurt Houser, Chief Operating Officer, explained some of the improvements that are scheduled for Shadow Lane. Some of these changes include; increasing lighting, planting trees, laying rock, etc. Also, fresh paint will be added to the UMC Quick Care and UMC Primary Cares to rebrand them and give them a fresh look.

Vice Chair Raney asked Mr. Houser if there are plans to make some of the labor and delivery rooms single occupancy and he replied yes. There are currently 9 single rooms and the plan is to renovate more.

FINAL ACTION: No action taken

ITEM NO. 11 Discuss four possible areas of assessment goals to include productivity improvement, performance improvement and efficiency. *(For possible action)*

DOCUMENT SUBMITTED: None

DISCUSSION: Chair White discussed how we measure productivity and performance improvement. He would like to see reports on savings and performance.

Vice Chair Raney said it was important to not measure savings and omit employee satisfaction. It should be about a culture of excellence and that means satisfied employees and low turnover. These things will lead to lower costs.

Member Mackay said that some of the Doctors told him that they were impressed that Mr. Houser and Mr. VanHouweling spent time with them in the OR, that has not happened previously and they really appreciated it.

FINAL ACTION: No action taken

ITEM NO. 12 Receive an update on UMC's proposed partnership with Tri-West and as a Department of Defense pilot site. *(For possible action)*

DOCUMENT SUBMITTED: None

DISCUSSION: Kurt Houser explained that we currently have the Smart Program right now with the Army. We also have an opportunity to partner with Tri-West, the contractor for the Veterans Administration. Thru the VA Patient Centered Community Care Program, the VA is networking with hospitals to be a preferred provider of VA patients. UMC submitted an application to be considered and their CEO will come to UMC next month to see what we can do for Veterans.

The DOD (Department of Defense) wants to partner with civilian facilities to put in additional nursing staff and physicians. They are looking in Las Vegas due to the high population we have here. The physicians would work in UMC's ICU to sustain their skills. The DOD is just not seeing the complexity of care at their facilities so partnering with UMC will give them the experience they need.

FINAL ACTION: No action taken

ITEM NO. 13 Receive the results of the Las Vegas Medical District Resident Survey and proposed organization chart. *(For possible action)*

DOCUMENT SUBMITTED: None submitted
(Document was given out at the Governing Board meeting on September 23 however)

DISCUSSION: Assistant Hospital Administrator, Vick Gill noted that he will be speaking with Maureen from the UNLV School of Medicine to discuss this further.

FINAL ACTION: None Taken

ITEM NO. 14 Receive an update on the meeting between UMC Leadership and Project Neon discussing construction details and access and signage for UMC. *(For possible action)*

DOCUMENT SUBMITTED: None submitted

DISCUSSION: Kurt Houser said that the Project Manager for Project Neon assured him that UMC would be given advanced noticed regarding which streets will be closed and when. This relationship has been working very well and Mr. Houser and staff are satisfied with the ongoing communication.

Streets will be closed starting in March of 2016. This will not affect access to and from the hospital; ambulances will still be able to get to UMC.

FINAL ACTION: None taken.

ITEM NO. 15 Identify emerging issues to be addressed by staff or by the Strategic Planning Committee at future meetings, and direct staff accordingly. *(For possible action)*

No emerging issues.

Chair White did express that he would like to have a report back on Market Share Data, to be reviewed on the next agenda.

COMMENTS BY THE GENERAL PUBLIC:

At this time, Chair White asked if there were any persons present in the audience wishing to be heard on any items not listed on the posted agenda.

SPEAKER(S): None

There being no further business to come before the Board at this time, at the hour of 5:00 p.m. Chairman White adjourned the meeting.

APPROVED: December 17, 2015

MINUTES TAKEN BY: Terra Lovelin