University Medical Center of Southern Nevada
Governing Board Strategic Planning Committee
February 7, 2019

UMC ProVidence Suite
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
Thursday, February 7, 2019
9:00 a.m.

The University Medical Center Governing Board Strategic Planning Committee met at the time and location listed above. The meeting was called to order at the hour of 9:02 a.m by Chair Hagerty and the following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:
Harry Hagerty, Chair
Robyn Caspersen
Renee Franklin
Christian Haase (Via phone)
Dr. Mackay
Mary Lynn Palenik

Absent:
David Straus, Ex-Officio (Excused)

Also Present:
Tony Marinello, Chief Operating Officer
Marcia Turner, Chief Administrative Officer
Jennifer Wakem, Chief Financial Officer
Danita Cohen, Chief Experience Officer
Deb Fox, Chief Nursing Officer
Lonnie Richardson, Chief Information Officer
Susan Pitz, General Counsel
Vick Gill, Associate Administrator
Terra Lovelin, Board Secretary

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

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

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Strategic Planning Committee meeting on December 6, 2018. *(For possible action)*

FINAL ACTION: A motion was made by Member Caspersen that the minutes be approved as recommended. Motion carried by unanimous vote.

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

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

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive a report regarding UMC market share and changes in market dynamics; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
- Q3 2018 Market Share

DISCUSSION: Vick Gill went over the market share for the most recent quarter.

UMC holds 10.3% of market share in Inpatient Services. Sunrise has 14% of the market share followed by Summerlin and Mountain View.

With regards to Cardiovascular Services UMC has 6.8% of the Market with Mountain View being the top percentage at 12.7%. UMC had a dip in services in November due to a key physician being out.

General Surgery continues to be a strong suit for the hospital. We went from 13.1% to 13.8% in market share and are currently number one.

Deb Fox, Chief Nursing Officer stated that they have sent letters out to surgeons who are not utilizing their reserved block of surgery time so they can then use that space for those surgeons who want to bring patients here. This will help with volume and subsequent market share.

Chair Hagerty asked if there was a reason for the steady decline of general surgery visits.

Ms. Fox replied that we had multiple, high volume surgeons who were off at the same time during those months.

Member Caspersen asked if we should be looking at a consistent metric across all services.

Mr. Gill replied that we usually look the services at admissions. We can however dive a bit deeper and look at surgeries and what kind of surgeries they are; more specific categories.

Member Palenik asked if we are utilizing the same metrics that other hospitals are using for market share analysis.

Mr. Gill replied that we are utilizing the same DRG's (Diagnosis Relate Group) that other hospitals use to gauge the numbers.

With regards to Orthopedics, UMC has 11.9% percent, behind Spring Valley with 15.6% and St. Rose Siena with 11.9%. Spring Valley does a great job with marketing these service and that plays into their lead.

UMC only provides in-patient oncology, no out-patient and we are second behind Summerlin with 13.4% of the market. Summerlin has 19.3% currently.

Ambulatory volume for the month of December has greatly increased in our Quick Cares but decreased in our Primary Care. We have added staff and extended hours and are now opened on weekend in our Quick Cares and this has increased volume exponentially.

UMC's Pediatric's department is currently in third in the market with 13% followed by Summerlin and Sunrise. UMC is at 100% capacity every day in Peds Ed.

FINAL ACTION TAKEN: None taken.

ITEM NO. 5 Receive an update regarding UMC service line performance; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
-None submitted

DISCUSSION: Chair Hagerty gave a brief overview of his first cardiology meeting with UMC staff. He mentioned the Cath Lab and the issues we are having with capacity and throughput. He wants to focus on what the cardiology practices will be in the future.

Dr. Mackay gave an update on his first orthopedic committee meeting. Hand surgery was mentioned and the volume done here at UMC is high. Anesthesia was a topic of the meeting as well as the issue of an anesthesiologist usually practicing out of one place instead of all over the valley. Utilizing reserved block times and surgeries starting on time with was also a topic that needs to be focused on. There was an emphasis on streamlining orthopedic hardware. The goal is to minimize the number of companies that supply the hardware for surgeons.

Member Franklin added that the general surgery committee met last month and it was a good meeting.

Member Caspersen met with the oncology committee and felt the meeting went well. She noted that UMC is the only accredited hospital in the state by the National Oncology Association. A good conversation ensued regarding performance metrics, Epic and the modules that will be implemented. A SWOT analysis on outpatient oncology services will be done.

Member Haase and Member Palenik's committee will meet after this meeting.

FINAL ACTION TAKEN: None taken

ITEM NO. 6 Receive a presentation regarding Telemedicine; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
- Telehealth Update

DISCUSSION: Mr. Gill briefed the committee on what Telehealth is and how it can impact UMC.

We have a tremendous opportunity at UMC to integrate Telehealth. There are a few barriers to navigate but once we get through these it will be a great opportunity.

Patient barriers to access and treatment include long wait times, transportation, privacy concerns and multiple follow-up visits. With the use of Telehealth patients can experience real-time virtual visits, remote patient monitoring, e-consults and secure messaging.

Top specialty applications include, stroke, psychiatry, neurology, radiology and pediatrics.

Some key stats of why telehealth will be successful:
-Smartphone adoption among adults aged 65+ in the US had quadrupled in the last five years
-Among U.S. adults in 2016, smartphone ownership was equal to computer ownership
-Enhanced monitoring technology with wearable devices has the potential to increase telehealth capabilities.

Next steps: UMC team to tour Renown Health in Reno, NV and asses their Telehealth Program.

Lonnie Richardson explained that Vidyo and Zoom are the two largest platforms used now and Epic is set up to work with both.

FINAL ACTION: None taken

ITEM NO. 7 Receive a presentation regarding Ambulatory Surgery Centers; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
- Ambulatory Surgery Center (ASC)

DISCUSSION:
Mr. Gill provided an overview on what an Ambulatory Surgery Center is and what it can do for patients.

ASC's are modern health care facilities focused on providing same-day surgical care including diagnostic and preventative procedures, where a hospital admission is not required.

The ASC market has seen a large increase since 2017.

Some experience factors that appeal to consumers include convenient access and parking, ease of scheduling and appointments, and minimal wait times.

FINAL ACTION: None taken

SECTION 3: EMERGING ISSUES

ITEM NO. 8 Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. *(For possible action)*

Chair Hagerty asked about Medicare for all and would like a high level to understanding of what that would do for UMC.

COMMENTS BY THE GENERAL PUBLIC:

At this time, Chair Hagerty 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):

There being no further business to come before the Board at this time, at the hour of 10:43 a.m. Chair Hagerty adjourned the meeting.

APPROVED: April 11, 2019
MINUTES PREPARED BY: Terra Lovelin