University Medical Center of Southern Nevada
Governing Board Strategic Planning Committee
August 4, 2022

UMC ProVidence Suite
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
Thursday, August 4, 2022
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
Dr. Don Mackay (Via WebEx)
Robyn Caspersen (Via WebEx)
Renee Franklin (Via WebEx)
Christian Haase (Via WebEx)
Mary Lynn Palenik (Via WebEx)

Absent:

Also Present:
Tony Marinello, Chief Operating Officer
Jennifer Wakem, Chief Financial Officer
Chris Jones, Executive Director of Support Services
Shana Tello, Academic and External Affairs Administrator
Maria Sexton, Chief Information Officer
Susan Pitz, General Counsel
Stephanie Ceccarelli, 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. No such comments were heard.

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Strategic Planning Committee meeting on June 2, 2022. *(For possible action)*

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

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 a report regarding UMC Service Line Performance; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
- Service Line Update

DISCUSSION:

Mr. Marinello provided a high level summary of statistics of service line performance and the financial data with a comparison of June 2021 and June 2022 data. Contribution margins have improved in most areas.

In general surgery, there has been focus of FCOTS (First Case On Time Start) for inpatients which is at 40%. Block time utilization for last quarter was at 44%. Staff is now trained to understand full functionality and capabilities of EPIC to help doctors take advantage of block times. The Peri-Operative committee has been active for 6 months and they are currently working with a vendor to provide analytics for OR dashboards. Capital improvements were highlighted, along with strategic next steps.

Member Franklin stressed the importance of understanding FCOTS because it also impacts patient satisfaction.

On orthopedics, Mr. Jones highlighted the integrative joint program. As of June 30th, there have been 161 total joint replacements and attendance has improved in the integrative joint class classes and the ERAS (Enhanced Surgical Recovery After Surgery) is a best practice for patients, with is at 65%; the goal is 100%. Capital purchases were briefly discussed. Administration is working with physicians input to investigate cost savings in supplies.

Staff is working to develop new marketing for the joint program and reviewing reimbursement opportunities for outpatient orthopedic procedures. We are also striving to achieve the Gold Standard Center of Excellence accreditation from the Joint Commission. A discussion ensued regarding the goal of discharging patients home (ERAS), which is set higher than the Joint Commission standard. The Committee encouraged staff to remain focused on achieving the “Gold Standard” achievement and asked if the joint camp can be mandatory for patients to attend.

Mr. Jones next showed slides representing the joint camp dashboard and reviewed data and areas of improvement.

In cardiac services, the Carto EP system has been purchased to help patents. There have been 96 EP ablations and 49 device cases as of July 1st. Volume continues to grow in the cath lab. Capital investments include the addition of new

Cath labs, Shockwave system use, an additional anesthesia machine, AVOX machine for point of care testing, etc. The team is working on improvement in clinical documentation and currently negotiating updated rates for EP studies, with positive results. Strategic next steps were reviewed.

Next was a review of ambulatory services. There has been continued growth, as well as adjustments in leadership. Growth at quick care locations is due to improvement in throughput, team collaboration, and telehealth options. Discussion continued regarding the growth of the service line and how to attract new patients.

Aliante Primary care and quick care clinic is on target to open in late December. One common goal is to improve patient experience at all clinics. Clinic refreshes are planned for Peccole and Enterprise locations. UMC continues to review opportunities to purchase versus leasing clinics. Mr. Marinello continued with revenue enhancements in collection goals, telehealth pediatrics, customer service and open scheduling in primary care. We are moving OCC Med from paper to charting in EPIC. Images from enhancements at various clinic locations were highlighted.

Oncology services ended on May 31st. We are working with UNLV for a long term oncology solution. Meetings have been scheduled to discuss plans moving forward. Dean Kahn added that approval has been received from the state for an Oncology Fellowship Program. The school has also commissioned funding to hire oncologists.

The Children's Hospital operational update highlighted we are moving forward with the use of Nitrous Oxide to relax pediatric patients for procedures. We are partnering with the University of Utah to build a Child Abuse Program. We are working with the UMC Foundation to update all pediatric units and updates to the Centrak security system is in progress. Human trafficking screening is still being done in all the pediatric areas.

In Women's services, UMC has hired a lactation consultant; the breastfeeding rate has increased to 37%. Human trafficking screening is being done. Peri OB Joint Operation Council established in May 2022 meeting twice per month. Centrak system is also being installed.

Mr. Marinello next shared the YTD Telemedicine statistics. Dr. Medina-Garcia added that volumes continue to increase. The satisfaction rate is about 99%.

Chair Hagerty asked if a bar chart of how many visits have been done since this service began. Mr. Marinello added that a full presentation will be provided at the next meeting.

FINAL ACTION TAKEN:

None taken.

ITEM NO. 5 Receive a report regarding overall market dynamics related to healthcare activity; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
- Competitive Landscape

DISCUSSION:

Mr. Marinello provided a review of the competitive landscape. He stated that volumes and revenue are going down and expenses are going up across the country. Statistics from the quarterly financial report highlighted five major healthcare systems.

The group discussed a variety of topics including, payor mix, legislative impact on the hospital, value based care, reimbursements and developing relationships with not for profit organizations.

Activities and growing employment trends in the Las Vegas market from Dignity Health, HCA facilities, UHS, West Henderson Hospital and Intermountain Healthcare were reviewed.

FINAL ACTION TAKEN:

None

At this time the Committee discussed agenda Item No. 8.

ITEM NO. 8 Receive an update regarding UMC/UNLV business strategy; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
- None

Dean Kahn updated the Committee that the new Medical Education Building construction is near completion and the planned move in date is October 2022. The school is seeking funding for a new ambulatory building for the 9-acre site.

Faculty recruitments are in process for several departments at the school. Priorities in will be in Oncology and Rheumatology, which will benefit the community greatly. Funding for a training program has been received.

Dean Kahn mentioned the importance of working strategically with UMC and Intermountain to improve healthcare. The Committee asked what UMC can do to facilitate a strong alignment. Dean Khan stated that oncology primarily and in the long term pediatrics. The discussion continued regarding other strategies involving CRNAs, anesthesia and transplant services.

Member Mackay asked if there is any movement in improving the number of residency spots. Dean Kahn responded that it is slow movement, but a proposal has been submitted.

FINAL ACTION TAKEN:

None

ITEM NO. 6 Discuss the FY22 CEO Goals and Objectives as it relates to the subject matter relevant to the Strategic Planning Committee and make a recommendation to the Human Resources and Executive Compensation Committee; and take action as deemed appropriate. *(For possible action)*

DOCUMENT SUBMITTED:
- None

DISCUSSION:

The Committee reviewed the CEO performance goals.

1. **Continue to play a leading role in the development of the Las Vegas Medical District.**

   This goal was met. UMC continues to be one of the leaders in the medical district.

2. **Improve Focused Six Service Lines financial outcomes and next steps (identify and enhance existing strategic service line initiatives and incorporate into 5-year financial plan, utilizes Proforma)**

   This goal was met.

3. **Expand upon the five-year financial plan for UMC Enterprise to include consolidated income statement, cash flow statement and facility wide capital plan. The plan will be detailed down to the service line level and, within service lines will forecast volumes, revenue and expenses by sub service line.**

   Chair Hagerty stated that the provision by the deadline was met, but the content did not reflect financial outcomes that would be a good five-year plan.

4. **Align UMC/UNLV strategic initiatives**

   This goal was met.

   Chair Hagerty felt that 3 of the 4 goals were met and recommended to award 75% as achievement of the goals.

   Ms. Wakem began to show the revised 5-year plan.

   Chair Hagerty felt that the current information they have to present is relevant for fiscal 2023.

   Member Franklin said that the 3rd goal may not have been completely met, but staff is on the path, so she would give 80%.

Mr. Van Houweling acknowledged that we did not hit this goal and although results were presented, we missed the goal and the team is aware. He added that we now have a great tool moving forward as a reference.

FINAL ACTION TAKEN:

A motion was made by Chair Hagerty to make a recommendation to the Governing Board Human Resources Committee to award 75% for the Strategic Planning Committee 2022 CEO Performance Objectives. The motion was seconded by Member Mackay. Motion carried by unanimous vote.

ITEM NO. 7 Discuss CEO Performance Goals and Objectives for FY23; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:

Chair Hagerty provided a summary of the goals from FY22 and recommended that we should repeat the 4 goals and demand results for item 3.

He asked the Committee's thoughts on if there is a need to change the goals.

Member Caspersen likes the 4 goals the way they are, but also recommended there be a measurable action that could be added that shows management progress.

Chair Hagerty likes this idea. The team did a good job previously of showing what was done against the goals.

Member Franklin likes the 4 goals. She suggests that the team could provide periodic updates.

Member Mackay and Member Palenik also agree with the goals as presented.

FINAL ACTION TAKEN:

A motion was made by Member Mackay that the FY2023 goals be approved as presented. Motion carried by unanimous vote.

SECTION 3: EMERGING ISSUES

ITEM NO. 9 Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. *(For possible action)*

DISCUSSION:
None

FINAL ACTION TAKEN:

Dean Kahn and Shana Tello will be attending a panel meeting regarding Envisioning the Future of the Medical District on August 23rd.

The team will be at EPIC UGM August 21st.

COMMENTS BY THE GENERAL PUBLIC:

Comments from the general public were called for prior to going into closed session. No such comments were heard.

At the hour of 11:01 a.m., the committee voted on a motion made by Member Mackay to go into closed session.

SECTION 4. CLOSED SESSION

ITEM NO. 10 Go into closed session pursuant to NRS 450.140(3) to discuss new or material expansion of UMC's health care services and hospital facilities.

At the hour of 11:47 a.m., Chair Hagerty adjourned the meeting

APPROVED: October 6, 2022

MINUTES PREPARED BY: Stephanie Ceccarelli, Board Secretary