

**University Medical Center of Southern Nevada
Governing Board
June 24, 2015**

UMC Emerald Room
901 Rancho Lane, Suite 180
Las Vegas, Clark County, Nevada
Wednesday, June 24, 2015
2:00 p.m.

The University Medical Center Governing Board met in regular session, at the regular place of meeting in the Emerald Room, 901 Rancho Lane, Suite 180, Las Vegas, Clark County, Nevada, on Wednesday, June 24, 2015, at the hour of 2:00 p.m. The meeting was called to order at the hour of 2:05 p.m. by Chair John O'Reilly and the following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:

John O'Reilly, Chair
Eileen Raney, Vice Chair
Jeff Ellis
Renee Franklin
Laura Lopez-Hobbs
Donald Mackay, M.D.
John White

Absent:

Harry Hagerty (Excused)
Michael Saltman (Joined by conference phone at 2:26, Item No. 5)

Ex-Officio Members:

Present:

Mason VanHouweling, Chief Executive Officer
Thomas Schwenk, M.D., Dean, University of Nevada School of Medicine
Barbara Atkinson, M.D, Planning Dean, UNLV School of Medicine (Excused)

Absent:

Dale Carrison, D.O., Chief of Staff

Also Present:

Mason VanHouweling, Chief Executive Officer
Lisa Logsdon, Deputy District Attorney
Susan Pitz, Legal Counsel
Cindy Dwyer, Board Secretary

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

Chair O'Reilly 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 on May 27, 2015. (Available at University Medical Center, Administrative Office) (For possible action)

FINAL ACTION: A motion was made by Eileen Raney 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 Donald Mackay that the agenda be approved with the above change. Motion carried by unanimous vote.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive a report from the Clinical Quality and Professional Affairs Committee; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- 1ST Quarter 2015 Data Analysis UMCSN Summary
- Executive Summary Adverse Drug Events (ADE)
- Strategic Recap of Staffing in the Nursing Division
- Turnover and Vacancy Rates – Nursing
- Types of Terms - Nursing

DISCUSSION: Committee Chair Renee Franklin provided an overview of the June 23, 2015 meeting of the Clinical Quality and Professional Affairs Committee, with the following highlights.

- The Chair noted that there was a large number of staff at the Committee meeting representing a large cross-section of the hospital, demonstrating a continued commitment to improving patient care and outcomes at UMC.
- The Committee received an update on the Patient Experience, including the rounding of Patient Advocates within 24 hours of admission. The transition to Avatar, the new HCAHPS vendor, will take place in July. The new program will provide more granular detail, allowing for better analysis of survey responses.
- The Committee received and discussed an analysis of measureable quality Initiatives, including corrective action taken to improve performance. A copy

of that report was included in the meeting book for Board members to reference. Report covered:

- o Infection Control
 - Goals met (Standard Infection Rate <1)
 - Catheter Associated UTI (Adult and Pediatric)
 - Possible Ventilator Associated Pneumonia (Adult and Pediatric)
 - Surgical Site Infections
 - Areas requiring improvement (Standard Infection Rate >1)
 - Central Line Associated Blood Stream Infection (Adult and Pediatric)
 - Colon Surgical Site Infections
 - Hand Hygiene compliance prior to entering patient room
 - Hand Hygiene compliance prior to leaving patient room
- o Adverse Drug Events (ADE)
 - Committee educated on medication reconciliation and efforts to increase the awareness and importance of non-punitive reporting of medication related events. The Committee discussed community outreach
- o Turnover and Vacancy Rates – Nursing
 - It was noted that turnover is a little better than the national average. The Committee discussed critical care turnover and ways to improve. Future reporting and discussions will be at the Human Resources and Executive Compensation Committee.
- o Nursing Staffing
 - A lot of effort has been put into adequately and appropriate redistributing nursing staff, which will culminate with the development of a Staffing Office.
- Hidenobu Shigemitsu, MD, FCCP, gave a presentation to the Committee on ICU Utilization and Planning, as well as the Lung Nodule and Cancer Program.
- The Committee continues to refine an electronic Board self-evaluation tool, and will bring it to the Board in the near future for further input. The tool will include the ability for administrative staff to provide upward feedback to the Board.

FINAL ACTION: No action taken.

ITEM NO. 5 Receive a report from the Strategic Planning Committee; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- UMC Strategic Plan 2015

DISCUSSION: Committee Chair John White provided an overview of the June 18, 2015 meeting of the Strategic Planning Committee, with the following highlights.

- Though the Committee did not have a quorum to take action, there was very robust discussion of the agenda items by those present.
- The Committee received a report on the planning efforts of the Las Vegas Medical District. The focus of the discussion was on potential and need to further explore benefits for UMC, i.e., parking, beautification of the area, tech infrastructure. The District is ramping up and the hospital needs to be actively involved. Staff is committed to developing an internal committee to coordinate with the District planning and report back to the Committee.
- The Committee received an update on the initiative to seek a 10% increase in market share for the five key service lines - Surgery, Cardiology, Pulmonology, Emergency Department and the Children's Hospital. The Committee reviewed the steps taken to develop these business lines, including the addition of state-of-the-art equipment and implementing new approaches with a goal to increase use of the hospital and increase efficiencies in the Emergency Department.
- The Committee received a report on capital investments. The hospital is already seeing some return on investment on capital equipment, particularly in Surgery with the robot and pulmonary equipment.
- CEO VanHouweling reported on the need for some short-term beautification around the facility, as well as some Facilities Master Planning, in conduction with the Las Vegas Medical District. This is, of course, is all complicated by the disruption of Project Neon, and the hospital needs to be prepared to respond to that. The Committee suggested that the staff be in direct communication with the Department of Transportation about the Project Neon development, with the main goal of ensuring access and signage to hospital during construction.
- The Committee received and discussed the Primary/Quick Care Strategic Plan. The clinical appear to be on track to break even for the current fiscal year.
- The Committee received an update of SB 33, which will be very helpful to the Board, but still will not allow the kinds of strategic planning discussions the Committee desires.

Vice Chair Raney acknowledged the accomplishments on the service lines, but expressed a desire to see less technical and more internal strategic issues addressed, i.e., staffing, culture, patient satisfaction, hospital image, etc. Chair White noted that the Committee agreed that the update provided included core business that should be done every day, and that the Plan should focus on how to change the business, for example a recent discussion about the changing demographics and defining the market that UMC would like to pursue.

Chair O'Reilly stressed the importance of UMC being involved and benefitting from the Project Neon planning, including the possibly an off-ramp from the I-15 for UMC.

Chair O'Reilly also noted that both tactical and strategic discussions should be an ongoing, vigorous discussion by the Board.

FINAL ACTION: No action taken

ITEM NO. 6 Receive a report from the Audit and Finance Committee; and take any action deemed appropriate. *(For possible action)*

DISCUSSION: Committee Chair Member Donald Mackay provided an overview of the June 3, June 10, and June 17, 2015 meeting of the Audit and Finance Committee, with the following highlights.

- With the announcement of the sunseting of McKesson Horizon Clinicals, proposals for a consultant to assist with the selection of a replacement vendor/system and lead change management were sought and received. Three proposals with the accompanying statement of work were received by the hospital, and staff made a recommendation to the Audit and Finance Committee to engage the services of The Rosenberg Group (TRG). Due to the magnitude and expense of the overall project the Committee requested the opportunity to review the proposals in detail and be more involved in the selection process. Each consultant was determined to be capable of assisting, with potential fees ranging from \$669,000 to \$1.4 million. Pros and cons were discussed and no consensus was reached. Consequently a special meeting was called to interview principals from each of the three consultant groups. Following interviews and considerable discussion The Rosenberg Group was unanimously selected as the consultant to assist UMC in the selection of a vendor and lead change management. Hospital Administration independently chose TRG over the other two consultants as well. Brian Rosenberg will complete the required work most all of which will be on-site. It was not possible to prepare and submit the contract and have it posted in time for the regular Committee meeting on 6/17/15, but this contract appears as Item No. 14 on today's agenda for approval.
- Several contracts were approved and recommended for approval by the Governing Board, which appear on today's consent agenda.
- The Committee reviewed the results of a Follow-up Audit on Enterprise Physical Billings. The follow-up audit revealed that all contracts were signed and current, determining that adequate corrective action was taken.
- May Financials were presented by the CFO. A request was made to look at the financials without the recent enhancement rate adjustments to ensure that expenses are adjusted in accordance with true revenue.
- The Committee received an update on the current EHR utilization following recent optimization efforts. CIO McKinley reported that the data on provider adoption shows that utilization is very good. Live nursing documentation is at

82% and is anticipated to be 88% by fall. Medication reconciliation is expected to be live by February 2016.

- The Committee was given an update on the replacement of the EHR and reviewed a draft of estimated cash flow for the McKesson. The Committee will receive monthly updates on the replacement and the cash flow.

In response to a question from Vice-Chair Raney, Ms. Merrill noted that the estimate in cash flow for the EHR Replacement for FY 2016 is \$9 and \$15 million for FY 2017, for an estimated total of \$25-\$30 million over the next five years, or even higher depending on which system is selected. Vice-Chair Raney requested that the updated cash flow be provided at next month's Board meeting.

FINAL ACTION: No action taken.

ITEM NO. 7 Receive the monthly financial report for May 2015; and direct staff accordingly. (For possible action)

DOCUMENT(S) SUBMITTED:

- May 2015 Financials

DISCUSSION: Stephanie Merrill, Chief Financial Officer, reviewed the financials for May 2015, with the following highlights:

- Net Revenue was \$3.4 million ahead of budget. This was mostly due to MCO enhanced rates and UPL rates, without which Net Revenue would have been about \$400,000 less than budget. The June Financials will show enhanced rates vs. regular operations.
- Total Operating Expenses were \$3.9 million better than budget.
- Net Operating Deficit was \$600,000, which is \$7.3 million better than budget. The YTD net operating loss is \$34.8 million, was significantly better than the budgeted loss of \$60,000.
- Salaries & Benefits were \$1.4 million better than budget, with 4.7% overtime, and productivity at 106%.
- Supplies were \$1.7 million below budget
- Purchased services were \$600,000 better than budget
- Net Patient Revenue for the last five months was above prior year and budget.
- Total Operating Costs were below budget and below prior year
- Salary and Benefits compared to prior year were down 260 FTE's and 4.4%. FTE's were down by 6 from prior month.
- Supplies were down compared to budget and to prior year
- Purchased Services were below budget but similar to last year
- Professional fees were below last year and current budget
- Volume
 - o Average Daily Census notched down a bit in May and was below budget and prior year
 - Adjusted Patient days ticked up a bit, but still continue below prior year and below budget

- o Emergency Department volume stayed the same as April and slightly below last year and below budget
- o Outpatient visits continue to run above last year and last year-to-date
- o Surgery volume was about even for past couple of months. There have been 129 robotic cases to date. The Committee discussed tracking volume by minutes vs. cases. The ROI business case did not take complexity into account.

CFO Merrill and CEO VanHouweling spoke about the decreasing inpatient volume. While staff is working to bring paying patients to the hospital, it was noted that if there is a decrease in the volume of non-paying patients, the corresponding expenses would also be decreased. While the analysis of the volume shift is ongoing, CEO VanHouweling noted several possible factors, including reduced length of stay, and increased volume of patients placed on observation status in accordance with Interqual Criteria, to ensure appropriate reimbursement.

Emergency Department and Quick Care volumes have increased. Mr. VanHouweling noted that this is probably attributable to the Affordable Care Act enabling patients to get insured.

FINAL ACTION: No action taken.

ITEM NO. 8 Receive an update on the University of Nevada School of Medicine; and direct staff accordingly. (For possible action)

DISCUSSION: Dean Schwenk provided the following updates:

- The School is working successfully with UMC through changes with the Cardiology Fellowship, which is critically linked to the Pulmonary Fellowship ready to launch. Three major sub-specialty fellowships have been successfully launched.
- Governor Sandoval has signed legislation to support the start-up of the UNLV Medical School, as well as funding to recreate a UNSOM campus in Reno. The two Deans and UMC will engage in detailed planning of the transition.

Chair O'Reilly inquired about the proceeds from a recent \$8 million drug company settlement for the purpose of improving women's healthcare. The Dean reported that UNSOM has internally vetted grant proposals and submitted some of them to the AG for consideration. CEO VanHouweling reported that UMC has formed a committee that will be going through a process to vet ideas and needs.

FINAL ACTION: None taken.

ITEM NO. 9 Receive an update on the University of Nevada Las Vegas School of Medicine; and direct staff accordingly. (For possible action)

DISCUSSION: Dean Atkinson provided the following updates:

- The State Legislature has fully funded, at \$27 million, the UNLV Medical School for next two years and to start the class of 2017 once accredited
- Funding is committed for 60 scholarships for the first class for four years. Additionally, the Englestad Foundation gave 75 scholarships, 25 each for second, third and fourth class of medical students.
- UNLV has engaged a group of consultants (three former deans) to look at strategies and conducting a review of the accreditation documents, which are due for submission on August 1st. They've been impressed the support of the Regents and with the innovative curriculum.
- UNLV has two RFPs out for consulting – one for architectural design of the school, and one for consultants for six different projects, including a review of accreditation documents, to assist with the set up of GME, set up a new practice plan, IT systems, structure of outpatient practice sites, and strategies for hospital coordination.

FINAL ACTION: None taken.

ITEM NO. 10 Receive an update from the Hospital CEO; and direct staff accordingly. (For possible action)

DISCUSSION: Mason VanHouweling, Chief Executive Officer provided the following operational updates.

- Kurt Houser was introduced as the new Chief Operating Officer
- Currently searching/interviewing for Chief Nursing Officer
- Copies distributed of Top Doctors 2015 magazine, highlighting some of UMC's physicians
- UMC's emergency physician group was acknowledged for the great job they did managing the large volume of patients at the recent Electric Daisy Carnival.
- UMC's Emergency Department was also acknowledged for their participation in the Healthy Nevada Program, a repository of records of all hospital visits within the community. UMC has led the way in accessing that information in the ED to expedite care and drive down healthcare costs. Congratulations to Dr. Young who has lead that charge.
- CEO VanHouweling and the Board bid a fond farewell given to Cindy Dwyer, Board Secretary, who is leaving UMC after 32 years of service.

FINAL ACTION: None taken.

- ITEM NO. 11 Receive a report on bills passed during the 78th Legislative Session that may have an impact on UMC; and direct staff accordingly. *(For possible action)***

DOCUMENT SUBMITTED:

- 2015 Legislative Session; Bills Passed Impacting UMC

DISCUSSION: Board members were provided with an executive summary of 23 bills approved in the recent legislative session that will potentially impact UMC to varying degrees.

Of particular note is Senate Bill 33, which will allow the Board to go into closed session to discuss expansion of existing services or addition of new services.

FINAL ACTION: None taken.

- ITEM NO. 12 Approve the settlement agreement in the matter of District Court Case No. CV-S-2:13-00003-APG-VCF, Martinez vs. University Medical Center; and authorize the Chief Executive Officer and UMC's legal counsel to execute the necessary settlement documents. *(For possible action)***

DOCUMENT SUBMITTED:

- Settlement Agreement and Release between Martin Martinez and UMCSN

DISCUSSION: Doug Spring, Director of UMC HR Operations, came before with a recommendation for the Board's approval of a settlement agreement. The agreement is for an employee involuntarily separated from UMC, who subsequently filed a law suit alleging that UMC violated his protections and rights under the Americans with Disabilities Act. UMC denied those claims and participated in a settlement hearing resulting in the settlement agreement before the Board today.

FINAL ACTION: A motion was made by Renee Franklin to recommend approval of the settlement agreement by the Governing Board. Motion carried by unanimous vote.

- ITEM NO. 13 Approve the First Amendment to the Chief Executive Officer's Employment Agreement and authorize the Chairman to sign the amendment; and take any action as deemed appropriate. *(For possible action)***

DOCUMENT SUBMITTED:

- First Amendment Employment Agreement between Mason VanHouweling and UMCSN
- Schedule B – UMC CEO Performance Objectives

DISCUSSION: An Amendment to Mason VanHouweling's Employment Agreement was presented to the Board for approval. The amendment deletes and replaces Schedule B with a new set of performance objectives, which were fully vetted by the Governing Board Committees. The Amendment also

addresses the timeframe for CEO's first performance evaluation and subsequent evaluations.

FINAL ACTION: A motion was made by Renee Franklin to approve the Amendment. Motion carried by unanimous vote.

ITEM NO. 14 Approve the Agreement between The Rosenberg Group and University Medical Center of Southern Nevada for Services to assist with the selection, change management and implementation oversight of the Electronic Health Record system; and authorize the Chief Executive Officer to sign the agreement. *(For possible action)*

DOCUMENTS SUBMITTED:

- Project Consultant Agreement between the Rosenberg Group, LLC and UMCSN
- Certificate of Liability Insurance
- Disclosure of Ownership
- Disclosure of Relationship

DISCUSSION: The selection of The Rosenberg Group to assist with the selection, change management and implementation oversight of the a new EHR was thoroughly vetted by the Audit & Finance Committee, as noted in Item No. 6 above. Staff also recommended the engagement of the Rosenberg Group for the project.

Member Donald Mackay noted a typo in Section 4, Letter A, which will be corrected.

FINAL ACTION: A motion was made by Don Mackay to approve the Agreement. Motion carried by unanimous vote.

SECTION 3: CONSENT ITEMS

All matters of this section were considered to be routine and were acted upon in one motion, unless requested to be taken separately. For all items left on the Consent Agenda, the action taken was staff's recommendation as indicated on the item.)

ITEM NO. 15 Approve Amendment Seven to Hospital Services Agreement between Connecticut General Life Insurance Company d/b/a CIGNA Healthcare and University Medical Center of Southern Nevada signed by the Chief Executive Officer; and take action as deemed appropriate. *(For possible action)*

DOCUMENTS SUBMITTED:

- Amendment Number Seven to Hospital Agreement between Cigna and UMC

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

ITEM NO. 16 Ratify Amendment Two to Service Agreement for Interpretation and Translation Services between CyraCom International, Inc. and University Medical Center of Southern Nevada; and take action as deemed appropriate. (For possible action)

DOCUMENTS SUBMITTED:

- Amendment Two to Service Agreement between CyraCom and UMCSN
- Disclosure of Ownership

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

ITEM NO. 17 Approve the Single Site Agreement between DePuy Synthes Sales, Inc. and University Medical Center of Southern Nevada; and take action as deemed appropriate. (For possible action)

DOCUMENTS SUBMITTED:

- Single Site Agreement between Depuy Synthes Sales and UMCSN

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

ITEM NO. 18 Approve the Software License and Services Amendment between Hyland Software, Inc. and University Medical Center of Southern Nevada for use of the Hosted Onbase Suite of products; and take action as deemed appropriate. (For possible action)

DOCUMENTS SUBMITTED:

- Amendment to Hosting Agreement between Hyland Software and UMCSN

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

ITEM NO. 19 Approve Amendment Ten to Food and Nutrition Management Agreement between Morrison Management Specialists, Inc. and University Medical Center of Southern Nevada; and authorize Chief Executive Officer to sign the amendment. (For possible action)

DOCUMENTS SUBMITTED:

- Amendment Number Ten to the Food and Nutrition Management Agreement between Morrison Management Specialists and UMCSN

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

- ITEM NO. 20 Approve Clinical Affiliation Agreement with The Board of Regents of the Nevada System of Higher Education on behalf of the Nevada State College and authorize the Chief Executive Officer to sign future amendments; and take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Clinical Affiliation Agreement between Nevada State College and UMCSN

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

- ITEM NO. 21 Approve the Agreement for Physician Medical Directorship and Physician Professional Services with Oral and Maxillofacial Surgery Associates of Nevada; and take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Agreement for Physician Medical Directorship and Physician Professional Services between Oral and Maxillofacial Surgery Associates of Nevada and UMCSN

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

- ITEM NO. 22: Approve a new “Agreement for Associated Physician Professional Services” Template and authorize the CEO to approve each new Associated Physician Agreement as they are entered into, in support of the new Agreement for Physician Medical Directorship and Physician Professional Services with Oral and Maxillofacial Surgery Associates of Nevada, herein referred to as the O&MF Primary Agreement (see Agenda Item #23); and take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Template Agreement for Associated Physician Professional Services

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

- ITEM NO. 23 Approve the Support Agreement for the RightFit Service Agreement Ingenuity CT between Philips Healthcare and University Medical Center of Southern Nevada; and take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Phillips Quote and Support Agreement

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

- ITEM NO. 24 Approve the Support Agreement for the RightFit Service Agreement Brilliance CT 64 Channel between Philips Healthcare and University Medical Center of Southern Nevada; and take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Phillips Quote and Support Agreement

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

- ITEM NO. 25 Approve the First Amendment to Master Services Agreement (MSA), which revises the Termination for Convenience notification period and incorporates a new Services Agreement for Perfusion and Related Services, with Specialty Care Cardiovascular Resources, Inc. (SCCR); and take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- First Amendment to Master Services Agreement between Specialty Care Inc and UMCSN

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

- ITEM NO. 26 Approve the Second Amendment to Standard Office Lease Agreement between Uptown, A Nevada Limited Liability Company and University Medical Center of Southern Nevada; and take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Second Amendment to Lease Agreement between Uptown, LLC and UMCSN

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

- ITEM NO. 27 Approve the Option to Exercise a 3 year Extension for the On-Site Branch Banking Services, to U.S. Bank National Association; and take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Letter of Intent to Exercise Option to Extend Lease

FINAL ACTION: A motion was made by Renee Franklin to approve as recommended. Motion carried by unanimous vote.

SECTION 4: EMERGING ISSUES

ITEM NO. 28 Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. *(For possible action)*

Chair O'Reilly requested that the Board's meeting books be numbered for the convenience of Board members during the meetings. Additionally, he suggested that staff consider a software solution for digitizing and paginating the Board's meeting books to date to assist with future access.

COMMENTS BY THE GENERAL PUBLIC:

At this time, Chair O'Reilly 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 3:25 p.m., Chairman O'Reilly adjourned the meeting.

APPROVED: August 19, 2015