

**University Medical Center of Southern Nevada
Governing Board Strategic Planning Committee
August 15, 2024**

UMC Providence Suite
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
Thursday, August 15, 2024
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 9:03 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
Robyn Caspersen
Renee Franklin
Mary Lynn Palenik
Christian Haase (Via WebEx)

Absent:

None

Also Present:

Mason Van Houweling, Chief Executive Officer
Tony Marinello, Chief Operating Officer
Chris Jones, Executive Director of Support Services
Bud Shawl, Executive Director of Post-Acute Care Services
Frederick Lippmann, Chief Medical 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 13, 2024. *(For possible action)*

FINAL ACTION: A motion was made by Member Mackay 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 Overview; and direct staff accordingly. (For possible action)

DOCUMENT SUBMITTED:

- Service Line Update

DISCUSSION:

Mr. Marinello stated this would be a review of the close of FY2024 performance metrics for the service lines, which include general surgery, orthopedics, cardiology, oncology and ambulatory.

Chairman Hagerty asked that staff focus the discussion on the ambulatory service line financials, as all other service lines seem to be doing well year over year in revenue and contribution margins.

Mr. Marinello reminded the Committee that there were changes in clinic reimbursement that affected revenue. He added that staff is currently reviewing the managed care contracts to ensure proper reimbursements.

Quick care location volumes and expenses are up but net revenue is down. Primary cares show revenue and expenses up. Mr. Marinello commented that staffing is a key driver in increased expense and the team is considering retooling the staffing models, while maintaining and ensuring efficiency. Mr. Van Houweling suggested including data that shows conversion to admissions from the primary and quick care locations.

Member Franklin noted that improving quality and throughput, as the team reviews the staffing model, will improve financial outcomes and volumes. She commended the team on the performance and improvements of staff at the quick care and primary care locations.

At this time the Committee reviewed the service line updates from all service lines.

In general surgery there is focus on establishment of guidelines and implementation of corrective actions pertaining to perioperative and documentation and KPI initiatives.

Chair Hagerty asked if there are standard data and metrics to track efficiency and productivity of the OR suite, as well as other service lines, that the Committee can begin to review. There was continued discussion regarding management of the OR rooms and block times and review of dashboard data.

Member Caspersen asked if the OR rooms are interchangeable. Mr. Marinello explained that they are not all interchangeable and explained the constraints of the different operating rooms. UMC has 23 OR rooms facility wide. There was continued discussion regarding OR surgery tracking processes.

In orthopedic surgery, case volumes decreased due to the clinic remodels during the 4th quarter. UMC ranks #2 overall in the market. Arthroplasty cases have increased and joint camp class attendance has increased. There was brief discussion regarding making the class attendance mandatory education for patients. Mr. Marinello continued by discussing length of stay, expense controls and strategic next steps.

Ms. Wakem commented that as of August 19th, dedicated case managers would be assigned to units, which will help improve patient throughput. A discussion ensued regarding UMC's ranking of orthopedics in the state.

Cardiac services has shown continued growth, averaging 215 cases per month. The third Cath lab will open August 28th. UMC will begin renal ablations and sleep apnea procedures in August. A new marketing campaign will begin in November.

Women's and Children's services highlighted Safe Sleep performance improvement project continues in pediatrics. UMC is working to improve volumes in deliveries. The team is working to enhance the service line with pediatric transplants.

The Committee asked if there are any outreach programs that can assist patients in making decisions regarding prenatal services and delivery choices. The team discussed the Baby Steps program where patients are able to receive assistance and education. Mr. Van Houweling added that there is also the Daddy Boot Camp for new fathers. A discussion ensued regarding how UMC can continue to provide support and educate to the community in labor and delivery services.

FINAL ACTION TAKEN:

None taken.

- ITEM NO. 5 Discuss the FY24 Organizational Performance Goals 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:

-PowerPoint Presentation

DISCUSSION:

- 1. Continue to deliver improved clinical and financial outcomes in the existing 5 service lines and develop a business plan for 2 other service lines that will be critical to help UMC deliver an important service line to the community going forward.**

- The team felt this goal was met overall. There as an increased growth of \$30 million.
 - Future service lines were planned and/or developed for rehab, outpatient pharmacy, radiology and ED and Hospitalist services.
- 2. Continue to play a leading role in the Medical District.**
- This goal was met.
- 3. Expand physician employment model- decrease expenses and capture additional market share.**
- This goal has been met with the employment of radiologist, 21 internal medicine providers and inpatient hospitalist medicine, 45 emergency medicine providers and a specialty physician for surgical services.
- 4. 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.**
- The plan was presented in June and was agreed upon. The committee suggested this be a roadmap for growth and will be presented on a semi-annual basis.
- 5. To enhance Strategic Initiatives in furtherance of the Academic Health Center.**

This goal was met. Mr. Marinello listed several accomplishments, including:

- Approved GME Master Agreements with UNLV
- Rheumatology Fellowship with UNLV
- Joined Association of American Medical Colleges (AAMC)
- Joint Leadership Meetings (Monthly)
- Created Internal Academic Affairs Department
- Developed bimonthly Resident Newsletter
- Dental Anesthesia Residency CODA approval to start in July 2025
- Pediatric Rotation UNLV/UMC Related to Social Determinants of Health/Patient Eligibility
- New School Affiliation Agreements: Nursing, Pharmacy, Paramedic Program, Respiratory, Coders
- Office of Military Medicine Training Expansion: Radiology and Pharmacy

Chair Hagerty began the discussion stating that goals 2-5 were met in full. Goal one fell short. He commented that overall 95% of the total goals were met.

The committee agreed with the 95%. The total amount allotted to the Strategy is 25%.

Mr. Van Houweling suggested a presentation on the military relationship in the future.

FINAL ACTION TAKEN:

A motion was made by Member Franklin to award 95% of the FY24 Strategic Planning Organizational Goals and to recommend approval to the Human Resources and Executive Compensation Committee. Motion passed unanimously.

- ITEM NO. 6 Finalize proposed Organizational Performance Goals for FY25 related to the Strategic Planning Committee and make a recommendation to the Human Resources and Executive Compensation Committee; and direct staff accordingly. (For possible action)**

DOCUMENT SUBMITTED:

- PowerPoint

DISCUSSION:

The proposed goals for FY25 included:

- 1. Continue to deliver improved clinical and financial outcomes in the existing 5 service lines.**
- 2. Finalize Rehab Business Plan and Proforma for the expansion of 4th and 5th floor trauma building and submit through approval process**
- 3. Enhance Strategic Initiatives in furtherance of the Academic Health Center**
- 4. Continue on the Journey to Achieve Comprehensive Stroke Certification**

After brief discussion, the committee agreed to accept the goals as presented.

FINAL ACTION TAKEN:

A motion was made by Member Palenik to make a recommendation to the Human Resources and Executive Compensation Committee of the FY24 Organizational Performance goals as they relate to the Strategic Planning Committee. Motion passed unanimously.

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:

Member Caspersen reminded the committee that there would be a presentation regarding the UMC Emergency Preparedness program at the Audit and Finance Committee.

COVID resurgence preparation.

FINAL ACTION TAKEN:

None

COMMENTS BY THE GENERAL PUBLIC:

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

A motion was made by Member Caspersen that the go into closed session pursuant to NRS450.140 (3). Motion carried by unanimous vote.

At the hour of 11:04 a.m., the Committee went 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.

There being no further business to come before the committee this time, at the hour of 11:30 a.m.

APPROVED: October 3, 2024

MINUTES PREPARED BY: Stephanie Ceccarelli, Board Secretary