

**University Medical Center of Southern Nevada
Governing Board Strategic Planning Committee
October 3, 2024**

UMC Providence Suite
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
Thursday, October 3, 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 9:00 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
Renee Franklin (Via WebEx)
Christian Haase (Via WebEx)
Mary Lynn Palenik (Via WebEx)

Absent:

Robyn Caspersen (Excused)

Also Present:

Mason Van Houweling, Chief Executive Officer
Tony Marinello, Chief Operating Officer
Jennifer Wakem, Chief Financial Officer
Chris Jones, Executive Director of Support Services
Ernest Barela, Physician Practice Plan Administrator
Emelia Allen, Assistant 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 August 15, 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 amended. Motion carried by unanimous vote.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive a report regarding UMC Service Line Market Data; and direct staff accordingly. (For possible action)

DOCUMENT SUBMITTED:

- Market Data

DISCUSSION:

Mr. Jones provided an update on the service line market data.

UMC is number 4 in the market and quarterly trends have decreased year over year.

The committee asked if there was a way to adjust the trend to reflect the number of beds relative to like facilities.

In general surgery, UMC holds #3 in the market with 11.4% of the market. There was discussion regarding actual number of surgery beds throughout the hospital.

In orthopedics, UMC has decreased slightly in the market. UMC is at #2 in the market, down .5%. There have been challenges with expansion in the clinic location.

In cardiac services, volumes are increasing in the market share. UMC holds 8.2% of market share. UMC is at #6 in the market.

Children's Hospital holds 18.63% of the market and remains #3 in the market after Sunrise and Summerlin.

In Women's services, the volume has been trending downward during the quarter. UMC is at #9 in the market.

FINAL ACTION TAKEN:

No action taken

ITEM NO. 5 Receive a report regarding UMC Service Line Performance Overview; and direct staff accordingly. (For possible action)

DOCUMENT SUBMITTED:

- Service Line Update

DISCUSSION:

Mr. Marinello reviewed the Service Line Updates for general surgery, orthopedics, cardiology, oncology and ambulatory. He noted that FY25 first quarter updates are not available.

First case on time starts has risen to 64% with a goal of 80% by the end of the year. There has been an update in policy to decrease late start times. Fifteen minutes would be considered late. Room turnover has gone up 6 minutes from last quarter. Same day cancellations have been tracked since July; the rate is currently at 12%, with a goal of a 5% or less cancellation rate. The solution includes 7-day patient outreach with scheduling to be 3-4 days prior to surgery. There was continued discussion regarding the variance between inpatient vs. outpatient cancellations and the benefits of employed anesthesiologists, which has reduced cancellations.

UMC has purchased the latest DaVinci Robot with a go-live set in October. UMC is the first hospital in the state to offer this technology. There has been collaboration within the industry to increase and diversify robotic surgery in the community.

General surgery renovation will be staged with 2 rooms at a time in order to maintain cost effectiveness. A 3rd heart team has been added due to increased volumes. Research projects promoting our organization will be submitted for UMC Research Empowerment day. These will be submitted for publication in peer journals in the future. Technology strategies in Epic were discussed, as well as multiple capital purchases.

Mr. Marinello briefly reviewed updates in orthopedic services, which remained consistent to the previous report. The team continues to show improvement in joint class attendance and discharge to home percentages. The goal is to strive to reach Center of Excellence certification. Mr. Marinello showed slides of the dashboard used to track and measure goals. Operational updates and strategic next steps were reviewed. UMC will be adding 2 new triage physicians to the clinics in September and October, a new trauma surgeon in December and a pediatric trauma surgeon in November.

Cardiac services show increased volumes and there have been 120 TAVR cases performed to date. New procedures starting in October are the renal ablations and sleep apnea procedures. Marketing campaigns for cardiac services will be launched in late November.

In Women's and Children's the NICU reunion is scheduled for October 26th at the Clark County Amphitheater. UMC is working with the community physicians to bring deliveries and surgeries to UMC.

Primary care volumes are up 22% and quick care volumes are below budget 9% due to the intermittent closure of the Sunset and Nellis locations. Mr. Marinello continued with a brief review of service line statistics and expense opportunities.

There was continued discussion regarding capacity at the primary care locations and challenges and improvements in patient scheduling at the clinics. It was noted

by Ms. Sexton, CIO, how patients are able to schedule appointments through MyChart, as well as open scheduling for patients that are not established patients at UMC. Average incoming referrals are 11,500 per month. Expense opportunities, strategic next steps and technology strategies were reviewed briefly.

FINAL ACTION TAKEN:

None taken

ITEM NO. 7 Receive a report regarding UMC Ambulatory Operations; and direct staff accordingly. (For possible action)

DOCUMENT SUBMITTED:

None

DISCUSSION:

Mr. Marinello provided an overview of data how UMC manages its referral system.

For the month of July, UMC transferred 371 patients from clinic locations, and 88 were admitted. In August there were 460 with 107 admitted from various locations.

Chair Hagerty asked if data is available for tracking patients that go to other hospitals. A lengthy discussion ensued regarding helping patients remain within the hospital system, in order to obtain the best patient care and outcomes.

Next, Mr. Marinello reviewed the referrals that are coming from the clinic locations to the Ortho clinics. We received approximately 300 patients during the months of July and August.

The committee would like to see market share financials for the next meeting.

FINAL ACTION TAKEN:

No action 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)

DISCUSSION:

1. Update Performa on Rehab for 4th and 5th Floor project.
2. Update on the pathway toward Center of Excellence in Stroke. What is the stroke side of cardio and how will it help reach this certification. Mr. Marinello will also bring an update on the stroke/cardiology logo that was at the Cath Lab dedication.

There was continued discussion regarding a Medical Office Building (MOB) on campus.

3. Outreach to community leaders and influencers to build our reputation within the community. Brand leader in the community.

FINAL ACTION TAKEN:

No action taken

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 Mackay that the go into closed session pursuant to NRS450.140(3). Motion carried by unanimous vote.

At the hour of 10:15 a.m., the Committee went into closed session.

SECTION 4. CLOSED SESSION

- ITEM NO. 9** 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 11:21 a.m.

APPROVED: December 5, 2024

MINUTES PREPARED BY: Stephanie Ceccarelli, Board Secretary