

BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Tuesday, June 27, 2023 6:00 pm Cypress Room, University Hospital 4502 Medical Drive San Antonio, Texas 78249-4493

MINUTES

BOARD MEMBERS PRESENT:

James R. Adams, Chair Jimmy Hasslocher, Vice Chair Margaret Kelley, MD, Secretary Anita L. Fernandez Pat Jasso Dianna M. Banks-Burns, MD

OTHERS PRESENT:

George B. Hernández, Jr., President/Chief Executive Officer, University Health
Bryan J. Alsip, MD, Executive Vice President/Chief Medical Officer, University Health
Edward Banos, Executive Vice President/Chief Operating Officer, University Health
Michael Gardner, MD, Vice President, Women's & Children's Hospital, University Health
Juan Garza, MD, Vice President, Chief Informatics Officer, University Health
Laura Gilbert, Marketing Director, Corporate Communications, University Health
Rob Hromas, MD, Dean, Long School of Medicine, UT Health San Antonio
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health
Monica Kapur, MD, President/Chief Executive Officer, University Medicine Associates
Leni Kirkman, Executive Vice President/Chief Marketing, Communication, & Corporate Affairs Officer,
University Health

Shelley Kofler, Senior Public Relations Manager/ Corporate Communications, University Health Michael Little, MD, President, Medical/Dental Staff, University Health; and Associate Professor, Department of Anesthesiology, UT Health SA

Anita Martin, Director, Community Relations/Corporate Communications, University Health Jessica Meyers, Administrative Resident, Government Relations & Public Policy, University Health Brian Lewis, Vice President, Quality/Clinical Outcomes, University Health Ian Mitchell, MD, Pediatric Surgery/General Surgery, UT Health San Antonio Joshua H. Nieto, General Counsel, Chief Compliance/HIPAA Officer, University Health Katherine Reyes, Senior Vice President, Pre-Acute Services, Robert B. Green Campus Bill Phillips, Executive Vice President/Chief Information Officer, University Health Serina Rivela, Vice President/Chief Legal Officer, University Health Don Ryden, Vice President/Project, Design & Construction, University Health Christopher Sandles, President/Hospital Operations, University Health Judy Shumway, DO, Senior Vice President/Clinical Services, University Health

Andrew Smith, Executive Director, Government Relations & Public Policy, University Health Travis Smith, Chief Financial Officer, Clinical Operations, University Health Horacio Vasquez, Executive Director, Supply Chain Management, University Health Larry Wallis, Director, Internal Audit Services, University Health Tom Milligan, CMQMT Consultants
Joe Garcia, Legislative Consultant
Chris Traylor, Legislative Consultant
Leticia Van De Putte, Legislative Consultant
And other attendees.

CALL TO ORDER:

Mr. Adams called the Board meeting to order at 6:04 pm

INVOCATION AND PLEDGE OF ALLEGIANCE — JIM ADAMS, CHAIR

Paula Harper King, University Health Chaplain, said the invocation and Mr. Adams led the pledge of allegiance.

PUBLIC COMMENT: None.

<u>APPROVAL OF MINUTES OF PREVIOUS MEETING(S): MAY 23, 2023 (REGULAR MEETING)</u>

SUMMARY: The minutes of the regular Board meeting of Tuesday, May 23, 2023,

were submitted for the Board's review and approval.

RECOMMENDATION: Staff recommends approval of the minutes as submitted.

ACTION: A MOTION to APPROVE staff's recommendation was made by Dr.

Kelley, SECONDED by Ms. Fernandez, and PASSED

UNANIMOUSLY.

EVALUATION: None. FOLLOW UP: None.

REPORT FROM UT HEALTH SAN ANTONIO — WILLIAM HENRICH, MD, PRESIDENT; BY ROB HROMAS, MD, DEAN, LONG SCHOOL OF MEDICINE

SUMMARY: Elena Volpi, MD, PhD, FGSA, has been named director of UT Health

SA's Barshop Institute for Longevity and Aging Studies. She will also be a professor in the Department of Medicine effective July 1, 2023. Dr. Volpi joins UT Health from The University of Texas Medical Branch at Galveston. She is an endocrinologist and an expert in muscle wasting of aging. Rene Olvera, MD, has been named Chair of the Department of Psychiatry and Behavioral Sciences at UT Health, replacing Dr. Steven Pliszka at the end of 2023. He has been with the Department of Psychiatry since 1995, Chief Medical Officer at The Center for Health Care Services since 2018, and formerly Outpatient Medical Director at Clarity Child Guidance Center. Allen Fink, MD, of Reno, Nevada, has been named Chief Medical Officer, replacing Bob Leverence, MD, in that role. A clinical trial for metastatic prostate cancer, previously untreatable and incurable, is underway with lutetium prostate membrane antigen

PSMA, a radioactive nugget that binds to metastatic cancer cells and kills them, and produces complete remission in prostate cancer. This is a collaboration between the Departments of Radiology, Urology, and Radiation Oncology, at UT Health San Antonio. Dr. Hromas announced another first in San Antonio – Dr. Dharam Kaushik has developed a procedure that creates a neobladder out of a bowel, a complex, 8-hour surgery that takes place at University Hospital for those who have lost a bladder due to cancer, providing hope for the hopeless. Dr. Michael Little did not have any announcements at this time. He expressed gratitude for the opportunity to represent the Medical/Dental Staff at the monthly Board of Managers meetings. He appreciates the support and collegiality of staff leadership on a day-to-day basis and enjoys the knowledge gained regarding the various topics discussed by the Board of Managers.

RECOMMENDATION: This report was provided for informational purposes only.

ACTION: No action was required by the Board of Managers.

EVALUATION: None. FOLLOW UP: None.

NEW BUSINESS: CONSENT AGENDA – JIM ADAMS, CHAIR

<u>CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF MEMBERSHIP AND PRIVILEGES — MICHAEL LITTLE, MD, PRESIDENT, MEDICAL/DENTAL STAFF</u>

SUMMARY: The Credentials Committee met on May 22, 2023 and reviewed the credential files of the individuals listed on the Credentials Report and the Professional Performance Evaluation Report provided to the Board. In its meeting of June 6, 2023, the Executive Committee of the Medical-Dental Staff approved the Credentials Committee Report in accordance with University Health's credentialing and privileging process. The Executive Committee, in turn, recommends final approval by the Board of Managers.

CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR PROFESSIONAL PRACTICE EVALUATIONS AND DELINEATION OF PRIVILEGES — MICHAEL LITTLE, MD, PRESIDENT, MEDICAL/DENTAL STAFF

SUMMARY: The Credentials Committee met on May 22, 2023, and reviewed proposed revisions to Delineation of Privilege and the Professional Performance Evaluation Report and forms. In its meeting of June 6, 2023, the Executive Committee of the Medical-Dental Staff approved the Delineation of Privileges and Focused/Ongoing Professional Performance Evaluation Report, which was provided for the Board's review, and in turn, recommends approval by the Board of Managers.

CONSIDERATION AND APPROPRIATE ACTION REGARDING APPOINTMENTS TO THE UNIVERSITY HEALTH FOUNDATION BOARD OF DIRECTORS — JIMMY HASSLOCHER, CHAIR, NOMINATING COMMITTEE

SUMMARY: The Executive Committee of the University Health Foundation requests consideration regarding the appointment of the three individuals to its Board of Directors: Shan Bagby, Jarvis Baker, Trey Sadiq. Letters of interest and resumes for each candidate were provided for the Board's review.

After thoughtful consideration, the Nominating Committee of the Board of Managers recommends Board approval to appoint these members to the University Health Foundation Board of Directors, effective July 1, 2023 through June 30, 2026.

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE NOMINATION OF MR. REED HURLEY TO THE TOBACCO SETTLEMENT PERMANENT TRUST ACCOUNT INVESTMENT COMMITTEE — GEORGE B. HERNÁNDEZ, JR.

SUMMARY: The Texas Conference of Urban Counties has invited University Health to nominate a candidate for appointment to its Tobacco Settlement Permanent Trust Account Investment Committee, which is responsible for the investment and management of county tobacco settlement funds held in trust by the State of Texas. In 2023, there will be an additional \$10.3 million in funding for the residents of Bexar County who receive their primary and specialty health care services from University Health. Reed Hurley has served on this committee since 2017 and his current term expires in August 2023. Staff recommends the Board of Managers nominate Reed Hurley to serve on the Tobacco Settlement Permanent Trust Account Investment Committee for a period of six years beginning September 1, 2023 through August 31, 2029.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A RADIATION THERAPY AGREEMENT WITH UT HEALTH SAN ANTONIO — AWOALA BANIGO

SUMMARY: University Health partners with UT Health at the Mays Cancer Center (previously the Cancer Therapy & Research Center) to provide radiation therapy services. Due to the high cost of equipment and limited demand for such services, review of this partnership confirms this solution is the most efficient method to provide services to patients. The current agreement with UT Health expires on June 30, 2023. The rate paid for this service is 100 percent of the Medicare allowable rate, which is the same methodology used in previous contracts. Based on historical volumes, it is estimated the total annual expense for this service will not exceed \$350,000 per year. The proposed contract is a three year contract with an amount not to exceed \$1,050,000. Work force composition for UT Health was provided for the Board's review. Staff recommends Board of Managers' approval and authorization for the President/Chief Executive Officer to execute the Radiation Therapy Services Agreement with UT Health San Antonio for an amount not to exceed \$1,050,000 for a three year contract beginning July 1, 2023.

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE PURCHASE OF MEDICAL EQUIPMENT AND INSTALLATION SERVICES FROM STRYKER CORPORATION FOR THE WOMEN'S AND CHILDREN'S HOSPITAL—DON RYDEN

SUMMARY: During the final months of construction of the Women's & Children's Hospital, staff will begin to move certain equipment and systems into the building to allow for functional testing and operational validation prior to occupying the project for use. Staff recently completed a final validation of the medical equipment included with the pediatric catheterization laboratory build-out, including additional boom, light and audio requirements for the completed space. The proposed equipment vendor is Stryker Corporation submitted a price proposal in line with previous purchases of similar equipment on the project. The Architectural/Engineering team's medical planner has validated the proposed boom and lights package and associated costs to verify that the proposed equipment meets the project's basis of design and the operational healthcare requirements for the pediatric catheterization build-out. Staff proposes the selection of Stryker Corporation as the vendor to provide these items at a total cost of \$699,646 which aligns with coordinated design specifications. Estimated shipping and freight charges, storage fees, and mobilization costs have been included with the vendor quote. The acquisition of these

medical equipment items and services will be funded from existing Board-approved Project funds and the total cost is within the approved budget for medical equipment. The workforce composition for Stryker Corporation was provided for the Board's review. Staff recommends the Board of Managers approve the procurement of medical equipment and installation services in an amount not to exceed \$699,646 from Stryker Corporation.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONCESSION AGREEMENT WITH ROOTS SALAD KITCHEN, LLC D/B/A YOLO SLICE FOR FOOD SERVICES AT UNIVERSITY HOSPITAL — CHRISTOPHER SANDLES

SUMMARY: Through RFP-222-04-029-SVC, University Health invited proposals from experienced and qualified firms to operate separate food and beverage concessions with an emphasis on healthy food options for the new cafeteria in the Women's and Children's Hospital. This is a revenue-generating lease contract with Roots Salad Kitchen paying University Health a base rate of 5 percent of gross sales in the base year and 6.5 percent in subsequent years. The estimated annual payments University Health will receive under the agreement are: Year 1 - \$10,000; Year 2 - \$10,650; and Year 3 - \$11,332. The workforce composition for Roots Salad Kitchen, a small and minority owned business, was provided for the Board's review. Staff recommends the Board of Managers approve a two-year space lease agreement with three one-year renewal options with Roots Salad Kitchen, LLC.

CONSIDERATION AND APPROPRIATE ACTION REGARDING PURCHASING ACTIVITIES (SEE ATTACHMENT A) — REED HURLEY/TRAVIS SMITH

SUMMARY: University Health's Purchasing Consent Agenda for the month of June 2023 includes 24 proposed contracts for Board of Managers' action. The total requested Board of Managers approval for these 24 contracts is \$29,951,358. Additional presented contracts during the June 2023 Board of Managers meeting total \$16,722,665 and are considered for approval separate from the Purchasing consent packet. Staff recommends Board of Manager's approval of Purchasing Consent items in the amount of \$29,951,358.

CONSENT

RECOMMENDATION: Staff recommends approval of the consent agenda as presented above.

CONSENT

ACTION: A MOTION to APPROVE staff's recommendation was made by Dr.

Kelley, SECONDED by Ms. Fernandez, and PASSED

UNANIMOUSLY.

CONSENT

EVALUATION: None.

CONSENT

FOLLOW UP: None.

88TH TEXAS LEGISLATIVE SESSION REPORT — ANDREW SMITH

SUMMARY: The 88th Texas Legislature convened on Tuesday, January 10, 2023, for

its 140-day biennial regular session, and adjourned May 29, 2023. In those 140 days, lawmakers passed a \$321.3 billion balanced budget to govern state revenue collection and spending over the 2024-25 biennium. The 88th Texas Legislature had a budget surplus of \$32.7 billion and a Rainy Day fund with approximately \$14 billion to work with in the budgeting process. Both the House and the Senate made property tax

relief a major goal of the session and set aside as much as \$17 billion of the surplus to meet this goal. However, the two houses disagreed on the best way to provide relief and the session ended without an upon agreed solution, prompting Governor Greg Abbott to immediately call a special session, the first of what many Capitol observer believe will be at least three special sessions. Mr. Smith introduced University Health's legislative team, who are all in attendance: Joe Garcia, Chris Traylor, Leticia Van de Putte, and Government Relations administrative resident, Jessica Myers. He provided the following overview of the 88th Texas Legislative Session:

- Historic Budget Surplus \$32.7 Billion
 - \$17.6 Billion set aside for property tax relief
- Anti-Health/Science/Hospital Sentiment
 - Holdover from the COVID-19 pandemic
- Payors vs. Providers
- Anti-Local Control
 - HB 2127 State Preemption of Local regulation
 - HB 1372 Public Nuisance Act Repeal
- Expulsions and Impeachments
- Special Sessions

Bills Statistics Overview

	88th Legislative	Session Bill St	atistics
	Filed	% Passed	Vetoed
НВ	5413	13.7%	22
SB	2633	19.1%	54
Total HB/SB	8046	15.5%	76
	87th Legislative	Session Bill St	atistics
	Filed	% Passed	Vetoed
НВ	4671	12.6%	12
SB	2256	21.5%	8
Total HB/SB	6927	15.5%	20
	86th Legislative	Session Bill St	atistics
	Filed	% Passed	Vetoed
НВ	4765	20.3%	41
SB	2559	18.0%	15
Total HB/SB	7324	19.5%	56

HB 1 General Appropriations Act 2024-2025 State General Revenue

Total = \$321.3Billion

Article I – General Government \$12,488.5 (3.9%)

Article II – Health and Human Services \$102,399.5 (31.9%)

Article III – Agencies of Education \$124,486.8 (38.7%)

Public Education \$93,630.0 (29.1%) Higher Education \$30,856.8 (9.6%) Article IV – Judiciary \$1231.3 (0.4%)

Article V – Public Safety and Criminal Justice \$19,488.3 (6.1%)

Article VI – Natural Resources \$8,748.1 (2.7%)

Article VII – Business & Economic Development \$46,040.8 (14.3%)

Article VIII – Regulatory \$5,928.5 (1.8%)

Article X (sic) – Legislature \$489.6 (0.2%)

HB 1 - General Appropriations Act

2024-2025 - All Funds

Total = \$144.1 **Billion**

Article I – General Government \$9,334.1 (6.5%)

Article II – Health and Human Services \$42,862.1 (29.7)

Article III – Agencies of Education \$72,006.6 (50.0%)

Public Education \$50.402.0 (35.0%) Higher Education \$21,603.7 (15.06%) Article IV – Judiciary \$860.3 (0.6%)

Article V – Public Safety and Criminal Justice \$13,364.7 (9.3%)

Article VI – Natural Resources \$3,486.4 (2.4%)

Article VII – Business & Economic Development \$1,292.5 (0.9%)

Article VIII – Regulatory \$434.1 (0.3%) Article X (sic) – Legislature \$489.6 (0.3%)

HB 1 - General Appropriations Act 2024-2025

- Medicaid: \$80.8 billion AF
 - \$2 billion to raise community attendant wages
 - \$206.8 million for pediatrics, women's surgeries, private nursing
- \$638.4 million for workforce education
 - Substantial increases in nursing school budget allocations for faculty, clinical trials and preceptorships from \$19 million to about \$47 million
 - \$25 million for nursing scholarships
 - Significant investments in physician graduate medical education and loan repayment initiatives
- \$9.4 billion AF for behavioral healthcare services
 - \$302 million for community hospitals
 - \$199.4 million for state hospital operations
- \$447.2 million for women's health programs increase of \$160.1 million

Focus on Women's Health

- Expanded postpartum Medicaid coverage to 12 months (HB 12)
- Created a new mandate for fertility services associated with cancer treatment (HB 1649)
- Ensured women can receive a single, 12-month supply of contraceptives (HB 916)
- Established non-medical drivers of health (NDOH) screening criteria to assist pregnant women in accessing more Medicaid services (HB 1575).

Hospital District Related

- Hospital@Home: HB 1890
- Bexar County LPPF: SB 1155
- HB 711: The bill includes prohibitions on anti-tiering, anti-steering, gag clauses, and most favored nation provisions; All-or-nothing removed
- Itemized Hospital Billing: SB 490
- Ban hospital outpatient payments (facility fees): HB 1692

- House Bill 633: would have capped payment for services provided outside of insurance at the lowest contracted commercial rate a hospital had with any health plan
- Workforce Prevent and address workplace violence, including required workplace violence policies, committees and annual training at hospitals, along with protections for those who report a violent incident (SB 240); enhancement of the penalty for assaulting a hospital worker to a third-degree felony (SB 840); changes to existing nursing workforce development programs and creates several new proposed grant programs at the THECB (SB 25)
- **Behavioral health:** Budget wins included \$26 million in increased funds for the state's Loan Repayment Program for Mental Health Professionals and funding for 193 new inpatient psychiatric behavioral health beds; required availability of electronic applications for emergency detention orders (SB 1624)
- Local control bills would have limited hospital districts' ability to issue essential certificates of obligation to finance critical infrastructure (HB 1489, SB 976, SB 977, and HB 3002) did not pass; SB 2332 Hospital District Operations

Medicaid Managed Care Contracts

- HB 2401 Repeal of Government Code Chapter 533.004 requiring mandatory contracts for hospital district owned MCOs
- Would have retroactively applied to current procurement for STAR+PLUS and STAR
- CFHP notified of STAR+PLUS award
- Chair of House Insurance was the House Bill Author
- HB 2401Committee Hearing 4/4
- Passed out of Committee on 6-3 vote on 4/18
- Sent to Calendars 4/28
- Placed on the General State Calendar for second Reading 5/9
 Passed on second reading 76 Yeas, 68 Nays, 3 absent
 3 absent were Nays
- Failed on third reading 64 Yeas, 71 Nays, 11 absent
- Motion to Reconsider
- Amendment
- Passed, sent to the Senate
- Received in the Senate 5/11
- Referred to Committee 5/15
- Never heard in Committee
- Budget Rider
- "Last second, self-serving vendor rider."

May 24: 135th day last day for Senate to consider ALL bills on second or third reading

Conclusion

- Special Sessions May 29– Property Tax
- Future Special Sessions
- Property Taxes
- Vouchers
- Bail Reform

RECOMMENDATION:

This report was provided for informational purposes only.

ACTION: EVALUATION:

No action was required by the Board of Managers.

Mr. Smith thanked all of the individuals including Board members and the Bexar County Legislative delegation for their support this session. Mr. Hasslocher thanked the legislative team for their remarkable work, especially Ms. Leticia Van De Putte who he feels has done more for Bexar County than any other representative in the District 26 seat. University Health owes her a great deal of gratitude and appreciation, to which Mr. Adams agreed, and he also thanked the legislative team members who are of the highest stature. Regarding the Medicaid managed care issue, Mr. Traylor thanked Rep. Mark Dorazio, who stuck with his vote although he endured pressure but he stood his ground and is a valuable asset to the Bexar County Legislative Delegation. Rep. Steve Allison and Rep. John Lujan did the same thing. Further, Mr. Traylor stated that it was the reputation enjoyed by both University Health and Community First Health Plans, Inc., across the state as extraordinary healthcare providers for people in need that led to the victory. wonderful thing when people immediately trust you because of who you represent. Ms. Van De Putte also addressed the Board saying she was delighted to join this legislative team, which previously worked together in 1991, minus Jessica Meyers, and she described the 88th Legislative Session as very difficult. This team has seen the evolution of healthcare. advocacy, networks and contracting issues this session with an unprecedented \$32.7 Billion budget surplus, half of which was already promised for tax relief. The other half of the budget is for constitutional amendments to be approved by voters, from broadband to a new University fund, to a centennial park fund, to name a few. The team worked closely with El Paso and Dallas Hospital Districts and bonded together to deliver a consistent message. In addition to the Bexar County representatives mentioned by Mr. Traylor, she reported a tremendous effort by the entire area, including Rep. Tracy King who reminded members on the house floor that it was University Hospital who responded after the tragedy at Robb Elementary School in Uvalde, Texas. Rep. Judy Zaffirini reminded them that is was University Hospital that responded to the tragedy at Sutherland Springs, Texas. And Rep. John Temple, noted that the town Sequin, Texas, immensely depends on its neighbors at University Hospital for trauma and other specialty services. It was the legislative team's job to get the message out but Ms. Van De Putte reiterated that it was reputations of University Health and Community First health Plans, Inc., that carried these efforts over the finish line due to the every-day work between University Health's excellent leadership team and UT Health faculty. legislative team is measuring victory by what it was able to defeat rather than what it was able to pass. On a personal note, Ms. Van De Putte shared that she remains extremely grateful for the excellent healthcare she receives at University Hospital's trauma clinic, which is the reason she is here today and able to walk. Mr. Adams thanked Ms. Anita Fernandez for her role in keeping the Board of Managers informed of significant legislative issues. He yielded the floor to Ms. Fernandez who described the legislative team as incredible, exceptional, and legends. Mr. Adams concluded by thanking the legislative team and Ms.

Board of Managers Meeting Tuesday, June 27, 2023 Page 10 of 24

Fernandez on behalf of the Board of Managers for all of their hard work; they have earned great respect and admiration.

FOLLOW UP: None.

ACTION ITEMS - CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED PURCHASING ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT BETWEEN UNIVERSITY MEDICINE ASSOCIATES AND FUSION ANESTHESIA SOLUTIONS, LTD., FOR ANESTHESIA BILLING SERVICES - EDWARD BANOS

SUMMARY:

In January 2023 in discussion with Dr. Hromas, Dean, Long School of Medicine, University Health agreed with UT Health San Antonio to modify the master service agreement for salary increases for MDs and CRNAs, while working on a lease arrangement where University Health will lease the entire department and bill for the associated professional services under University Medical Associates. Additionally, UT Health San Antonio agreed that in return, University Health will oversee the scheduling, utilization of CRNAs to work at the top of their license according to current state regulations, and defined resident and MD supervision. Due to the complex and unique nature of professional anesthesia services billing and collections, University Health through an anesthesia consultant, reviewed qualified turn-key anesthesia billing and revenue cycle services. Upon review of specialized anesthesia business services vendors, Fusion Anesthesia Solutions, LTD (Fusion) was identified as the optimal vendor. Fusion utilizes an anesthesia-specific billing platform and has developed a proprietary tool called CogitoAnalytics, which syncs with its billing platform daily to provide data and comprehensive reports to its clients. Fusion also provided Epic hospital references to University Health IT and operations leadership for validation of performance and integration with Epic. Through the lease arrangement with UT Health San Antonio all the anesthesia providers (MDs and CRNAs) have been credentialed through UMA. Additionally, UMA has hired anesthesiologists and CRNAs that will be part of the larger group. All anesthesia services that are provided at the main hospital (operating room and non-operating room areas) will be billed through UMA. The professional agreement will cover a 36-month period beginning August 1, 2023 and ending July 31, 2026. Fusion will be paid \$29.00 per encounter for funded patients and \$7.00 per encounter for uninsured patients where claims only require a front-end process. An encounter is defined as a single surgical or procedural case in which anesthesia provided and documented care. It is estimated that the cost of collections for all anesthesia claims will run approximately 4.7% of Management evaluated the Fusion anesthesia billing services and its analytics to performing this internally with additional University Health billing personnel and felt that Fusion was the most responsible option due to their anesthesia expertise and proprietary software. The estimated annual volume is 36,000 anesthesia encounters at University Hospital. The total amount of this agreement is currently estimated at \$2,538,000 or \$846,000 annually. Fusion's workforce composition was provided for the Board's review.

Staff recommends Board of Managers' approval of a contract between University Medicine Associates and Fusion Anesthesia Solutions, Ltd. For anesthesia billing services in an amount not to exceed \$2.538,000 for

RECOMMENDATION:

Board of Managers Meeting Tuesday, June 27, 2023 Page 12 of 24

a three-year term.

A MOTION to APPROVE staff's recommendation was made by Dr. Kelley, SECONDED by Mr. Hasslocher. Jasso, and PASSED LINANIMOUSLY.

UNANIMOUSLY.

Dr. Burns pointed opined that the flat rate payments to Fusion are not enough of an incentive. She asked about metrics, to which Mr. Banos replied that there are metrics one of which requires the submission of 93 percent "clean" claims. Dr. Kelley asked why UT Health San Antonio is not hiring someone to collect for their own anesthesiology services and Mr. Banos informed the Board that UT Health uses a coding service that submits claims on their behalf and University Health chose not to use that service, electing to use a more specialized billing service like Fusion. Dr. Kelley asked if there are higher payment rates for these services when anesthesiology physicians are employed by the hospital. Reimbursement is about the same because each entity has individual contracts directly with the insurance companies and with The Center for Medicare and Medicaid Services. Mr. Banos expressed he was concerned when he saw a loss of physicians and CRNAs at UT Health. Although there is an existing master service agreement in place for salary increases. University Health is aware of the market demand in San Antonio. To stabilize and continue to grow the Department of Anesthesiology, the proposed lease arrangement for the entire department allows University Medicine Associates to bill for the associated professional services. UT Health San Antonio has agreed that in return, University Health will oversee the scheduling and utilization of CRNAs to work at the top of their license according to current state regulations and defined resident and MD supervision. reported that going forward CRNAs will be hired as UMA employees with 20 new CRNS processed this week by University Health. University Health needs to be nimble enough to succeed because there is a need for highly qualified MDs and CRNAs. He noted that he recently co-interviewed a physician with UT Health who is now being processed as a UMA physician according to the physician's preference. But, there have recently been several great new recruits by UT Health. Hernandez added that this arrangement will create a better alignment and better efficiency due to that alignment. Mr. Adams agreed; the arrangement represents the relationship with UT Health SA. These are tough issues that University Health needs to deal with but the arrangement also raises the reputation of UMA and the relationship with Dr. Rob Hromas, Dean, School of Medicine.

Mr. Adams asked Mr. Banos to return in 6 months with a follow-up report, and Dr. Kelley specifically asked him to address improved efficiency.

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN ASSISTANCE CENTER MANAGEMENT COMPANY FOR OPERATION OF AN AMBULATORY SURGICAL CENTER AT THE MULTI-ASSISTANCE CENTER AT MORGAN'S WONDERLAND AND RELATED FURNITURE, FIXTURES, EQUIPMENT INSTALLATION WITH LEASE HOLD IMPROVEMENTS AND INFORMATION TECHNOLOGY CONTRACTS WITH VARIOUS VENDORS—EDWARD BANOS

ACTION:

EVALUATION:

FOLLOW UP:

Board of Managers Meeting Tuesday, June 27, 2023 Page 13 of 24 SUMMARY:

The Multi-Assistance Center (MAC) at Morgan's Wonderland is a comprehensive facility that improves the lives of individuals with disabilities and special needs through wide-ranging and coordinated services. The MAC uses a family-centered approach for care of a MAC Member, involving both the MAC Member's family and community partners. The MAC's innovative approach provides many medical and non-medical services under one roof. The MAC has established a care model that is based on four anchors: Navigation, Community Support Services, Medical Home, and Therapy Home. All services at the MAC are based on a member's specific needs and coordinated with a customized navigation and tracking system call the MAC NAV System. As a component of the Medical Home branch of the MAC, there will be an 11,460 square foot ambulatory surgery center (ASC) designed to serve individuals with disabilities and special needs. University Health has been asked to equip and operate the ASC. After considerable review and discussion regarding this request, staff believes that University Health believes can effectively serve the specific needs of the MAC priority population within a broader ASC framework at the facility as outlined below. When the MAC presented the opportunity for University Health to operate the planned ASC, an initial pro-forma review required 25 surgeries per day (5 per room) to generate a positive cash flow. To reach this target, the ASC will use a mix of community physicians committed to serving MAC members and University Health physicians from the pediatric surgical services, general surgery, ENT, and orthopedics. The MAC will fund the initial build-out of the surgical center estimated at over \$3 million in construction costs. The MAC is asking University Health only to pay an annual rent of \$391,180 for an initial agreement term of five (5) years for a total of \$1,955,900. The lease is expected to commence when the ASC is schedules to open in the spring of 2024. The total capital cost of the project will be \$5,550,000. as follows:

Equipment Description	Cost
Network hardware, software, programming and	\$ 144,000
installation	
Configuration and staging of computers, monitors,	\$ 246,000
phones, and peripherals	
Visitor Management System, hardware, software,	\$ 460,000
programming, and installation of lease hold	
improvements	
Peri-Operative, Operating Room, and SPD equipment	\$ 4,200,000
Surgical and Procedural instrumentation and trays	\$ 500,000
Total	\$ 5,550,000

RECOMMENDATION:

Staff recommends Board of Managers' approval to execute a five (5) year lease agreement in an aggregate amount not to exceed \$ 1,955,900 for the MAC ASC. In addition, staff recommends the Board of Managers approve funds in an amount not to exceed \$5,550,000 for the purchase of related furniture, fixtures, equipment and information technology, for a total project cost of \$7,505,900.

Board of Managers Meeting Tuesday, June 27, 2023 Page 15 of 24

ACTION:

A MOTION to APPROVE staff's recommendation was made by Mr. Hasslocher, SECONDED by Dr. Kelley, and PASSED UNANIMOUSLY.

EVALUATION:

Discussion ensued when Dr. Kelley asked if these services were a deficit in the programming of services offered by University Health, to which Mr. Banos replied that there is a deficit in the community for special needs patients with disabilities. Although University Health is here for all residents of Bexar County, special needs services are spread throughout the city, and not all are pediatric patients. Dr. Burns confirmed that special needs patients require much more time when they present for treatment. Mr. Banos noted, and Ms. Fernandez reiterated, that University Health staff assigned to the ASC at the MAC will receive specialized training in dealing with this population and will share that knowledge with their peers at the various facilities. Ms. Fernandez described the partnership between University Health and the MAC as cutting edge. Ms. Fernandez was working for the state years ago when Mr. Gordon Hartman first approached the legislature with this initiative. The initiative is being led by the private sector and University Health is proud to step up to help. Mr. Hernandez added that Mr. Hartman has a special needs daughter and wants to develop centralized services for these patients in one location, and that this initiative has been in the works for the last 3-4 years. If this partnership is successful, Mr. Hernandez sees potential for "junior MACs" as this project is the first of its type in the country. Dr. Kelley also raised the question of liability. As the tenant, University Health assumes all liability for the services provided in the ASC. As far as credentialing of providers, Mr. Banos explained that in the state of Texas, ASCs have their own credentialing specialists, so these providers will be credentialed by the MAC for privileges only at the MAC ASC, same process as with any other provider. Ms. Jasso asked about the case management referral process which Mr. Banos described in detail. The ASC needs to conduct a minimum of 25 surgeries per day in order for University Health to break even. The operating room staff at the ASC will work with the various staff physicians to help them schedule the 5 to 8 surgeries per day to efficiently manage all five operating rooms to meet or exceed the 25 surgeries needed per day. In addition, University Health's pediatric anesthesiology team will staff the ORs at the ASC. Mr. Adams asked Mr. Banos to ensure appropriate signage in the right places at the ASC. None.

FOLLOW UP:

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT WITH A GENERAL CONTRACTOR AND APPROVAL OF ASSOCIATED INFORMATION TECHNOLOGY, FURNITURE, FIXTURES AND EQUIPMENT FOR THE BREAST CENTER LOCATED AT 8403 WURZBACH, SAN ANTONIO, TEXAS 78229 — DON RYDEN

SUMMARY:

The purchase of the building located at 8403 Wurzbach Road was approved by the Board in 2021 and was formerly a branch bank for Credit Human. The facility consists of approximately 6,000 square feet of floor space. The architectural and engineering (A/E) team of Lynn

Kuckelman Design Group was selected to be the designer to renovate the building for use as the new University Health Breast Center. Currently, it is located in shared leased space at UT Health San Antonio Mays Cancer Center. The new location will provide appropriate space to provide a state-of-the-art diagnostic and treatment facility for women in a single location that is easily accessible, comfortable and convenient to the hospital. Procedures at this new facility would include 3-D mammography, breast ultrasound, routine breast biopsies, stereotactic biopsy. A Request for Proposal (RFCSP-223-04-026) was issued April 24, 2023. Evaluation criteria included a Summary of Interest and Qualifications, Education and Years of Experience, Scope of Services and Owner Contract Agreement, Proposed Project Schedule, Quality Control and Safety Program, and Pricing. A total of seven (7) proposals were submitted from the following firms: Structure Tone Southwest, LLC; Structura, Inc.; Metropolitan Contracting Co.; Rogers-O'Brien Construction; VPG Construction; The Trevino Group, Inc.; and Drash Contracting Company, LLC. Base bid pricing varied from \$3.180M to \$4.275M, with completion dates varying from 129 days to 213 days. Based upon the evaluation criteria and consideration of best value to UH, Structure Tone Southwest, LLC was determined to be the choice for this contract award. It should be noted here that the Structure Tone Southwest, LLC base bid (\$3,191,444) was slightly higher (\$11,846) than the next closest ranked respondent. However, their projected schedule for completion was significantly better. In addition, several design alternatives were also accepted for a total of \$124,858. The cost for the construction renovation was determined from the results of the RFCSP. The prone biopsy table, ultrasound, and mammogram equipment were priced by UH standardized vendors (Hologic and Philips) and pricing was negotiated directly with these companies. Pricing for furniture and signage were obtained from UH standardized vendors. General clinic equipment was priced through CME, a Premier contract holder. Staff recommends funding for the Project costs from the Board Designated Capital Account. The purchase of the building for \$750,000 was approved by the Board in August 2021 as part of the C.Y. 2021 Capital Budget. Staff also solicited a Request for Competitive Sealed Proposals (RFCSP) for the construction site improvements and renovation of the building. Bids were obtained for diagnostic equipment as well as furniture, signage, IT equipment, and the ancillary items necessary to operate the new clinic. Personnel from the existing Breast Imaging Center in the Mays Cancer Center will be relocated to the new facility upon its completion. Included in this project will be decommissioning of the clinical space in the Mays Cancer Center and relocation of equipment to other facilities within University Health. Mr. Ryden summarized the total project costs as follows:

Construction		\$3,191,444
Add Alternates		\$ 124,858
	Sub-Total	\$3,316,302

Medical Equipment:

Stereo-tactic, Mammo (Vendor: Hologic) \$2,719,351 Ultrasound (Vendor: Philips) \$ 425,107 RECOMMENDATION:

Other Medical		\$	168,866
	Sub-Total	\$3	,313,324
Furniture & Artwor	rk	\$	195,568
Active I.T.		\$	329,406
Signage		\$	134,565
Other		\$	56,256
	Sub-Total	\$	715,795
	Total Project Costs	\$7	,345,421

The workforce composition for the proposed vendors was provided for the

Board's review.

Staff recommends the Board of Managers approve the construction renovations of the Breast Center with Structure Tone Southwest, LLC in the amount of \$3,316,302 and authorize the President/Chief Executive Officer to execute a contract therein; and approve the procurement of medical equipment for \$3,313,324, information technology for \$329,406, furniture for \$195,568, signage for \$134,565, and associated installation services and related costs therein for \$56,256 for a total of \$7,345,421, to be funded from the Board Designated Capital Account.

ACTION: A MOTION to APPROVE staff's recommendation was made by Mr.

Hasslocher, SECONDED by Ms. Fernandez, and PASSED

UNANIMOUSLY.

EVALUATION: None. FOLLOW UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH OH BE JOYFUL, LLC TO PURCHASE REAL PROPERTY LOCATED AT 15102 HUEBNER RD., IN SAN ANTONIO, BEXAR COUNTY, TEXAS AND AUTHORIZING ALL OTHER ACTIONS IN SUPPORT THEREOF — DON RYDEN

SUMMARY:

In the summer of 2020, Dr. Karen Shimotsu was contemplating the closure of her clinic located at 15102 Huebner Road, the Inwood Clinic, due to the COVID pandemic. The practice was well established and supported by the community and after meeting with senior leadership, Dr. Shimotsu, decided to allow University Medicine Associates (UMA) to take over operations of the clinic and she became employed by UMA. The practice has since been able to grow with additional primary care providers. Initially, staff decided to lease the Inwood Clinic from OH BE JOYFUL, LLC, but the original lease included an option to purchase the property for \$850,000 if exercised in writing prior to the original lease termination date of September 20, 2021. In lieu of purchasing the property, University Health exercised the First Amendment to the lease, which provided options to extend the lease for one year up to three years. University Health has exercised two years to date. Dr. Shimotsu plans to retire at the end of this year and has offered the property to University Health, which then had a fair market value study performed by an independent real estate appraiser to assist in determining an offer price. Based on the appraisal, University Health has offered a purchase price of \$900,000, which has been accepted by Dr. Shimotsu. The purchase price of the building is \$900,000 plus all closing costs. The clinic has been maintained and operating under the University Health name since

October 2020. The facility will not require any renovation or repairs and will continue operational as part of the ambulatory network within University Heath. This project will be funded out of routine capital and was encumbered in 2021 capital. OH BE JOYFUL, LLC is a single

person real estate entity, and has no employees.

RECOMMENDATION: Staff recommends Board of Managers' approval to execute a Purchase

and Sale Agreement with OH BE JOYFUL, LLC in the amount of \$900,000 and related closing costs therein, for the acquisition of the building located at 15102 Huebner Rd., San Antonio, Bexar County,

Texas.

ACTION: A **MOTION** to **APPROVE** staff's recommendation was made by Mr.

Hasslocher, SECONDED by Ms. Fernandez, and PASSED

UNANIMOUSLY.

EVALUATION: None. FOLLOW UP: None.

<u>CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FINANCIAL REPORT</u> FOR MAY 2023 AND REALLOCATION OF RESERVES REPORT — *REED HURLEY*

SUMMARY:

University Health's consolidated bottom line for the month of May 2023 reflects a gain of \$34.4 million, \$28.5 million better than the budgeted gain of \$5.9 million. This gain to budget is primarily due to patient activity driving positive net patient revenue of \$28.0 million and investment income of \$4.9 million offset by employee compensation over budget \$5.5 million. In May, clinical activity (as measured by inpatient patient days) was up by 9.8% and inpatient discharges were higher than budget by 5.0%. Volumes exceeded budget across all key service delivery areas. Community First experienced a bottom line gain of \$3.9 million, which was \$2.6 million better than the budgeted gain of \$1.3 million. Community First fully insured membership was down 5.1% to budget but the bottom line gain was driven by lower than expected expenses and a pick-up from interest income. Mr. Hurley reviewed significant items to note from the Monthly Consolidated Statement of Revenues and Expenses in detail with the Board, including the following: Net patient revenue over budget \$28.0 million driven by high patient volumes, acuity of inpatient services, a \$10.5 million 2022 Medicare cost report settlement and the continued growth of retail pharmacy volumes. Supplemental revenue over budget \$1.8 million for the month of May due to FY23 DSH payments exceeding budget. Community First premium revenue was under budget \$22.2 million related to experience rebate high to budget of \$14.0 million in addition to budgeting for additional Health Insurance Exchange members that did not materialize. Further, pursuant to University Health policy, Mr. Hurley reported that based on audited results for calendar year 2022, \$253.7 million in cash flow reserves will be transferred as provided for under Reserve Policy No. 7.0504, and the Funding of Financial Reserve for Capital Expenditures Policy No. 7.0502. The transfer consists of an increase of \$56.3 million to the Emergency Operating Account to meet the 90 days of cash expenditure level provided for in Sections III.G of the Reserve Policy. The remaining \$197.4 million will be transferred to

the Capital Account to address future capital needs as provided for in Policy No. 7.0502. After the transfer, the total balance in the Emergency Operating Account will be \$425.9 million. The total in the Capital Account will be \$788.0 million; of this amount, \$600.7 million has been committed leaving an unencumbered balance of \$187.3 million.

RECOMMENDATION: Staff recommends approval of the financial reports subject to audit.

ACTION: A **MOTION** to **APPROVE** staff's recommendation was made by Mr.

Hasslocher, SECONDED by Ms. Fernandez, and PASSED

UNANIMOUSLY.

EVALUATION: Mr. Hurley reported that the staff is now moving on to tax rate planning,

and there will be a need for a special meeting in August to obtain Board approval for a tax rate recommendation to Bexar County Commissioners Court. In addition, Commissioners Court approved University Health's

request for a 5% homestead exemption, on Tues., Aug. 20, 2023.

FOLLOW UP: None.

PRESENTATIONS AND EDUCATION:

SECOND QUARTER QUALITY REPORT — JUDY SHUMWAY, DO

SUMMARY:

University Health's quality goals for 2023 include improving publicly reported ratings across multiple healthcare assessment agencies while reducing CMS Pay for Performance Program financial penalties. This quarterly Quality Report provides an overview of quality performance outcomes including their proximity to target. Dr. Shumway led her presentation with another positive story; the latest win in reducing colon surgical site infections.

Tactical Metric Overview

There are 11 hospital-specific reputational ratings (Mortality, Readmissions, Medicaid PPC, PSI-4, PSI-90 Composite, Hand Hygiene, C-Diff, CAUTI, CLABSI, MRSA, and SSI Colon) and financial programs, including CMS, Leapfrog, Vizient, US News and World Report, and the Lown Institute. University Health selected 31 tactical metrics which comprise over 75% of all quality outcomes included in these 11 programs. Today's focus will be on colon surgical site infections. Over the last several years, University Health has seen significant challenges with this measure. This measure impacts 8 of the 11 programs, which also explains why it's included in University Health's Quality Improvement Agreement as a priority outcome metric.

Most of the metrics fall into 1 of the 4 categories: HAIs, Readmissions, Complications, and Patient Experience. At University Health, the staff sets Quality goals annually against benchmarks that reflect the highest level of performance nationally. The staff aims to rival the top performers

in our peer group of similar hospitals. Dr. Shumway shared a table comparing current outcomes and their proximity to targets, listing the 31 tactical metrics in decreasing order of percent-to-target. Every month, the staff evaluates progress and reviews performance on the 31 tactical metrics by monitoring baseline, current, and target outcomes. Sometimes it is helpful to compare current outcomes with baselines to see the progression. In the first four months of the year, in green below, 11 of the 31 metrics have either met or exceeded target. Highlighted in yellow is the colon surgical site infection rate that is now 50 percent better than target.

Metric Surgical Site Infections after Hysterectomies PC-01	% to Target 200% 200%
Surgical Site Infections after Colon Surgeries	150%
C-Diff	128%
MRSA	125%
HWR Medicare - Acute Care 30-day	
readmissions (Same facility)	118%
Overall Event Reporting (per 1000 pt days)	112%
Mortality O:E	103%
Near Miss Event Reporting (per 1000 pt	
days)	103%
Medicaid Potentially Preventable	
Complications	102%
PSI-4	100%
PSI-90	98%
Hand Hygiene (% of units meeting LF goal)	95%
PC-02	95%
Discharge Information	94%
CAUTI	94%
Readmission O:E	94%
Doctor Communication	93%
Willingness to Recommend	90%
Overall Rating of Hospital	89%
Communication About Medicines	88%
Nurse Communication	87%
Potentially Preventable Emergency Visits	83%
Cleanliness of Hospital Environment	83%
Quietness of Hospital Environment	82%
SEP-1	81%
Care Transition Measure	81%
Responsiveness of Hospital Staff	79%
Potentially Preventable Inpatient Admissions	77%
CLABSI	57%

Colon Surgical Site Infection Rates

(Colon SSI Rate for 100)

*2023 Colon SSI includes data from January – March 2023

2019 = 4.83

2020 = 4.58

2021 = 6.82

2022 = 5.592023 = 1.43*

University Health prides itself on being a Level I Trauma and tertiary hospital for complex surgical oncology cases. The physicians and clinical staff provide high-quality and compassionate care. They garner respect nationally for their expertise and skill. As a result, there is a widely held perception that University Health patients are sicker than those seen in comparable institutions. Furthermore, the competitive benchmarks selected were perceived as "impossible" targets. In fact, data suggests that across the high-performing surgical community nationally, averages for colon SSIs are much higher than the targets set by agencies, like CMS and Leapfrog. Regardless, University Health's performance is publicly reported, and colon SSI rates weigh heavily on national ratings. University Health struggled with colon SSI rates especially in 2021. In October of 2021, colon SSIs was a clear priority for the Quality team. Early in 2022, as University Health continued to see high rates of infections, the staff implemented several changes and actions. Dr. Shumway proudly reported that in the first quarter of 2023 University Health has finally outperformed target rates for colon surgical site infections. Although it is early and the need to demonstrate sustainability exists, the staff has demonstrated that the goal, though aggressive, is now achievable.

Reduction of Colon Surgical Site Infections

- Engaged Leader
- Engagement and Alignment of Team
- Accountability & Psychological Safety
- Collaboration & Communication

It was most challenging trying to figure out how to overcome the perception that University Health goals were too aggressive. It was not productive to keep engaging in that discussion, so the leadership redirected away from the argument and instead focused on process and next steps. The staff identified an opportunity to improve colon bundle compliance when a group of surgeons and anesthesiologists created the colon bundle several years ago. It is a collection of elements when followed, would translate into improved outcomes. Examples included temperature control, pre-operative antibiotics, the use of a wound protector, and changing of gowns and gloves prior to closing a wound. Interestingly, it was discovered that the biggest barrier to bundle compliance was that many of the surgeons and anesthesiologists did not trust this bundle. While there was resistance, the staff were hard-pressed to dismiss the bundle when colon SSI rates were so high. A great deal of frustration revolved around this culture that strayed from the use of a standardized process. Eventually the right leaders were engaged and with meaningful participation, everyone was aligned around a clear goal of improving bundle compliance, and provided psychological safety and eventually held everyone accountable. The collaboration and communication were essential to determining the true barriers and opportunities to improve.

In order to hold members accountable, emails were sent to the entire surgical team the day prior to a scheduled surgery, reminding the team to use the colon bundle. Then an email was sent postoperatively to report bundle compliance. If noncompliance was identified, the elements that

were not complied with were specifically listed. Feedback from the surgical team allowed the colon SSI workgroup to understand the barriers to compliance. As an example, the use of a wound protector was limited by size of the wound. Unfortunately, many trauma patients experience wounds that are so large that a wound protector serves no purpose. In addition, the physician stakeholders reviewed the literature in concern that one of the bundle elements, high concentrations of oxygen, might inflict potential harm to patients. As a result of the collaborative review, this element was eliminated from the bundle.

The focus on bundle compliance opened a path forward to identifying barriers and opportunities to improve. The optimal colon bundle compliance rate is not known but the focus on compliance has yielded rates on average of 82.5% for 2023 thus far, ranging as low as 73% in January to 100% in June. More importantly, in the same time period, University Health saw a dramatic decrease in surgical site infection rates to 1.43 per 100 cases, which is down from 6.82 in 2021 and 5.59 in 2022. There is now a process that allows for more detailed review of each infection identified in relative real time. These deep-dive analyses invites participation from the relevant members of the case. Similar to the staff's work in complications like mortality and patient safety indicators, there is now an identified opportunity to improve documentation. With documentation of exclusion criteria, potential colon SSIs have been clarified and excluded. After a year of focus, the staff has hard-wired an approach to track and trend outcomes, identify improvement opportunities, and intervene early and more effectively.

The Quality Incentive Agreement (QIA) is leveraged to engage not only the physicians but also the staff. The workgroups outlined below include the multiple disciplines that impact the metrics. In promoting the teamwork, relationships and trust are strengthened that create that psychologically safe environment that encourages members to speak up and share their perspectives. Teaming and collaboration across disciplines are much more effective than each operating in silos separate from one another. Lastly, the QIA helps University Health create an environment where every team member can be held accountable.

Workgroups Colon SSI	Group Membership Nursing, OR Staff, Physicians/Providers
Mortality & Sepsis	Care Coordination, Epic, Nursing, Physicians, Providers
Complications (PSI-90)	Coding/CDI, Dieticians, Epic, Nursing, Physicians/Providers
Healthcare-Acquired Infections (HAIs)	Materials Management, Nursing, Physicians/Providers

When an outcome seems unattainable, leadership can redirect towards short-term goals that help position University Health better for later success. In the case with colon SSIs, the aggressive goals distracted from the progress, so instead priorities shifted to improving bundle compliance and eventually deep dive analyses. With sepsis and mortality, expectations towards order set utilization to achieve better sepsis bundle compliance were simplified, and as a result improved sepsis and overall mortality.

Start with Compassionate Leadership

- ✓ Create an environment that encourages everyone to speak up
- ✓ Frame the Work with Clarity of Purpose
- ✓ Invite engagement & participation
- ✓ Respond productively

Compassionate care starts with compassionate leadership. At University Health there is strength in the mission, vision, and values that center around high quality, compassionate care. Compassionate leaders:

- ✓ Create an environment that encourages everyone to speak up
- Frame the Work ahead of us with *Clarity of Purpose* and help redirect energy towards continual improvement
- Invite engagement and participation with humility and curiosity. When we act with intention, we invite specific people to participate and share why they've been chosen. This confers confidence that their input will be valued. We want to learn from them. We need their perspectives.
- ✓ Finally, they respond productively with gratitude for the feedback provided, even if it's not obvious how to integrate that feedback. They reframe "failures" as "learning opportunities." Even more importantly they ensure fairness by holding accountable those behaviors that are clear violations.

In doing this we not only continue our improvement efforts in quality, patient safety, and patient experience, but we improve overall culture and internal staff experience as well.

RECOMMENDATION: This report was provide for informational purposes only.

ACTION: No action was required by the Board of Managers.

EVALUATION: Dr. Kelley expressed appreciation for the intensiveness in attacking this

issue.

FOLLOW UP: None.

INFORMATION ONLY ITEMS:

<u>UPDATE ON THE WOMEN'S AND CHILDREN'S HOSPITAL AND ASSOCIATED PROJECTS — DON RYDEN</u>

UNIVERSITY HEALTH FOUNDATION UPDATE — SARA ALGER

REPORT ON RECENT RECOGNITIONS AND UPCOMING EVENTS — LENI KIRKMAN

Board of Managers Meeting Tuesday, June 27, 2023 Page 24 of 24

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Mr. Adams directed his Board colleagues' attention to the informational items above. He urged them to review on their own time, and he invited Ms. Kirkman and Mr. Ryden to provide an update regarding the building, ribbon cutting and grand opening activities of the Women's & Children's Hospital in July. The theme for the grand opening is Say Hello. There will be a VIP reception on Thurs., July 20, 2023 from 6 to 8 pm, with a program start time of 6:15 pm. The invitation list for this event was comprised of community partners, UT faculty, elected officials, and Board members. The community ribbon cutting ceremony will take place on Sat., July 22, 2023 from 10 am to 1 pm with parking available in the beautiful, new North garage. Commissioner Justin Rodriguez will be the keynote speaker, and the staff has arranged performances by a children's choir and an all-female mariachi group. Mr. Ryden reported that the City of San Antonio has issued a temporary certificate of occupancy effective tomorrow for the new North garage. About 200 employee will be allowed to park in the new garage until the opening of the new hospital to help alleviate overcrowding in the West garage.

RECOMMENDATION: These reports were provided for informational purposes only.

ACTION: No action was required by the Board of Managers.

EVALUATION: None. FOLLOW UP: None.

ADJOURNMENT:

ere being no further business, Mr. Adar	ms adjourned the public meeting at 8:10 pm.
imes R. Adams	Margaret A. Kelley, MD.
hair, Board of Managers	Secretary, Board of Managers

Sandra D. Garcia, Recording Secretary