



# University Health System

## REGULAR BI-MONTHLY MEETING OF THE BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Tuesday, March 28, 2017  
6:00 p.m.  
Board Room  
Texas Diabetes Institute  
701 S. Zarzamora  
San Antonio, Texas 78207

### MINUTES

---

#### **BOARD MEMBERS PRESENT:**

James R. Adams, Chair  
Ira Smith, Vice Chair  
Dianna M. Burns, M.D., Secretary  
Roberto L. Jimenez, M.D, Immediate Past Chair  
Robert Engberg  
James C. Hasslocher  
Janie Barrera

#### **OTHERS PRESENT:**

George B. Hernández, Jr., President/Chief Executive Officer, University Health System  
Bryan Alsip, M.D., Executive Vice President/Chief Medical Officer, University Health System  
Awoala Banigo, Senior Vice President, Operations/Chief Revenue Officer, University Health System  
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System  
Lourdes Castro-Ramirez, President, University Health System Foundation  
Ted Day, Executive Vice President, Strategic Planning and Business Development, University Health System  
Theresa De La Haya, Senior Vice President, Health Promotion/Clinical Prevention, University Health System – Texas Diabetes Institute  
Sergio Farrell, Senior Vice President, Ambulatory Services, Robert B. Green, University Health System  
Don Finley, Director, External Communications/Corporate Communications, University Health System  
Greg Gieseman, President/Chief Executive Officer, Community First Health Plans, Inc.  
William Henrich, MD, President, UTHSCSA  
Barbara Holmes, Vice President/Chief Financial Officer, Community First Health Plans, Inc.  
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System  
Michelle Ingram, Vice President/Chief Quality Officer, University Health System  
Monika Kapur, MD, President, University Medicine Associates  
Karen Kruger, Contract Specialist/Team Leader, Procurement Services, University Health System  
Leni Kirkman, Senior Vice President, Strategic Communications and Patient Relations, University Health System  
Serina Rivela, Associate General Counsel, University Health System  
Bill Mundt, Deputy Chief Information Officer, Information Services, University Health System  
Bill Phillips, Senior Vice President/Chief Information Officer, Information Services, University Health System

Kirsten Plastino, M.D., President/Medical Dental Staff, University Health System; and Professor,  
Department of Obstetrics and Gynecology, UTHSCSA  
Allen Strickland, Vice President/Hospital Administration, University Health System  
Nancy Ray, Vice President/Chief Nurse Executive, University Hospital  
Richard Rodriguez, Vice President, Asset and Property Management, University Health System  
Michael Roussos, Hospital Administrator, University Health System  
Armando J. Sandoval, Chief of Police, University Health System  
Travis Smith, Deputy Chief Financial Officer, University Health System  
Theresa Scepanski, Senior Vice President/Chief Administrative Officer, University Health System  
Sally Taylor, M.D., Senior Vice President/Chief, Behavioral Services, University Health System  
Roberto Villarreal, M.D., Senior Vice President, Research and Information Management, University  
Health System  
Mark Webb, Chief Executive Officer/University Children's Health, University Health System  
Jim Willis, Vice President, Associate Administrator, University Hospital  
Francine Wilson, Senior Vice President, Supply Chain Management, University Health System  
And other attendees.

**CALL TO ORDER AND RECORD OF ATTENDANCE: JAMES R. ADAMS, CHAIR, BOARD OF MANAGERS**

Mr. Adams called the meeting to order at 6:07 p.m.

**INVOCATION AND PLEDGE OF ALLEGIANCE**

Mr. Adams introduced Pastor Cliff Harden of First Baptist Church of LaCoste, for the invocation, and he led the pledge of allegiance.

**CITIZENS' PARTICIPATION:** None.

**APPROVAL OF MINUTES OF PREVIOUS MEETING(S): FEBRUARY 21, 2017 AND FEBRUARY 28, 2017**

SUMMARY:	The minutes for the regular meetings of Tuesday, February 21, 2017, and Tuesday, February 28, 2017 were presented for the Board's approval.
RECOMMENDATION:	Staff recommends approval of the minutes as submitted
ACTION:	A <b>MOTION</b> to approve staff's recommendation was made by Ms. Barrera, <b>SECONDED</b> by Mr. Engberg, and <b>PASSED UNANIMOUSLY</b> .
EVALUATION:	None.
FOLLOW-UP:	None.

**REPORT FROM THE HEALTH SCIENCE CENTER – WILLIAM HENRICH, M.D., PRESIDENT**

SUMMARY:	Dr. Plastino distributed Fiesta medals to all those in attendance. The medal was designed by one of the youth leadership council members, Leonard, a high school student in the San Antonio Independent School District. The medal is a token of appreciation for the Board's support of Teen Health San Antonio.
----------	---

Dr. Henrich acknowledged the physician leaders present, and provided a brief status report on each of the three major searches:

Alzheimer's Center Director – There are couple of candidates who are finalists for the director position and will return for second visits.

Cancer Therapy and Research Center Director - This committee is actively interviewing candidates, and he hopes to offer the position to someone during the month of May, 2017.

Dean, School of Medicine – This search opened up about 10 days ago. The search firm engaged is out of Dallas. The committee will take a first look at the candidate pool in April, 2017. George Hernandez serves on this search committee.

Regarding alignment efforts, Dr. Rodriguez informed the Board that there will be a joint leadership retreat held in the coming months where senior leadership from both organizations will discuss strategic plans and attempt to organize them so that they are in alignment. The leadership will also be looking at ways the organizations can partner on infrastructure and the electronic medical record. The issues are far more complex than they would appear and integration will likely take more than one year.

RECOMMENDATION: None.  
ACTION: None.  
EVALUATION: None.  
FOLLOW-UP: None.

#### **CONSENT AGENDA –JIM ADAMS, CHAIR**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR STAFF MEMBERSHIP –KRISTEN A. PLASTINO, M.D., PRESIDENT, MEDICAL/DENTAL STAFF**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING UHS POLICY NO. 9.26, TRANSPORT AND CARE OF HOSPITALIZED PATIENTS FOR THE PROVISION OF MEDICAL SERVICES UNAVAILABLE AT UNIVERSITY HOSPITAL—BRYAN ALSIP, M.D.**

**CLARIFICATION OF FUNDING SOURCE FOR BOARD-APPROVED PROJECTS—MARK WEBB**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE EXTENSION AND CLOSE OUT OF THE SODEXO CONTRACT—JAMES WILLIS**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING PURCHASING  
ACTIVITIES (SEE ATTACHMENT A) –FRANCINE WILSON**

SUMMARY:	The items listed above were presented for the Board’s consideration as consent items. Mr. Smith pulled the Sodexo Contract Extension for deliberation by the Board.
RECOMMENDATION:	Staff recommends approval of the remaining items on the consent agenda.
ACTION:	A <b>MOTION</b> to approve the items on the consent agenda, minus the Sodexo Contract Extension, was made by Mr. Hasslocher, <b>SECONDED</b> by Mr. Engberg, and <b>PASSED UNANIMOUSLY</b> .
EVALUATION:	<p>Mr Smith expressed concern that the contract with Sodexo is being extended once again. Most recently, it was amended and extended 90 days for the period of January 1, 2017 through March 31, 2017, to accommodate the RFP and selection processes which resulted in awarding contracts to both ABM Healthcare Support Services and Luby’s Fuddruckers Restaurants, LLC. The value of that contract amendment for a 90-day extension was \$200,000.00. Mr. Banos explained that an additional 90-day extension is being requested to cover the period of April 1, 2017 through June 30, 2017 to close out existing services with Sodexo and transition operations to the new vendors. During this transition period, the Information Technology department must work with both vendors to develop, test, and validate various computer interfaces to facilitate the data flow for nursing/physician orders, dietary consults, inventory management, catering requests, and point of sale transactions. New vendors will also need this additional time to fully implement food line production strategies, menu selection/pricing, and training of all current Health System dietary employees on new systems, processes and software. Further, since the contract with Sodexo was not renewed, Sodexo notified their current management team comprised of one Director, three Operation Managers, and one Executive Chef to allow them to begin seeking other employment. During this extension, if any of the current Sodexo management gain employment outside of the Health System, Sodexo will bring interim leadership from other locations to maintain operations. Based on the contract’s non-compete clause, Sodexo employees are not to be solicited for employment in any facility owned or controlled by the Health System for a period of one year after termination of the contract. The 90 day extension is necessary to facilitate an organized and orderly transition. The breakdown of costs for this request is:</p> <ul style="list-style-type: none"><li>• \$200,000 to cover core Sodexo management fees; and</li><li>• \$113,296.00 to cover added costs of premium pay, airfare, transportation and housing to replace upwards to three Sodexo leaders should they chose to resign immediately.</li></ul> <p>This additional \$113,296 expense would represent worst case scenario if all three Sodexo employees resigned on day one of the of the extension.</p>
RECOMMENDATION:	Staff recommends Board of Managers’ approval of the Sodexo contract extension to continue management of University Hospital inpatient nutrition services and third floor cafeteria, University Hospital Café,

Robert B. Green Café and Texas Diabetes Institute Cafeteria for an additional 90-day period not to exceed \$313,269.00

ACTION: A **MOTION** to approve the Sodexo Contract Extension was made by Mr. Hasslocher, **SECONDED** by Dr. Burns, and **PASSED UNANIMOUSLY**.

FOLLOW UP: None.

**ACTION ITEMS:**

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

**CONSIDERATION AND APPROPRIATE ACTION REGARDING RENEWAL OF THE FOLLOWING CONTRACTS FOR SKILLED NURSING FACILITY CARE: CHANDLER ESTATE HEALTHCARE; TOUCHSTONE COMMUNITIES; CANTEX CONTINUING CARE NETWORK; AND LEGEND HEALTHCARE — AWOALA BANIGO**

SUMMARY: In the fall of 2014 the Health System successfully added a post-acute long term care project to the DSRIP program. The successful implementation of this program allowed DSRIP dollars to flow to the Health System to place uninsured patients in SNF's for access to more cost effective and lower acuity settings for care, prior to returning the patient to home. In February 2015 the Board of Managers approved a two-year contract with Chandler Estate Healthcare, Touchstone Communities, Cantex Continuing Care Network and Legend Healthcare for provision of Skilled Nursing Facility Care for unfunded patients in the amount of \$4,660,000 for a two year period. This award was secured through RFP #214-12-054-SVC. Mr. Banigo reviewed quality metrics for 4<sup>th</sup> quarter of FY 2016, all of which met the required standard and expectations. Quality metrics include re-admission rates, influenza vaccine rates, urinary tract infection rates and psychotropic drug use rates. Over the last 22 months, April 2015 through January 2017, 423 patients were placed in SNFs under this contract with an average length of stay of 21 days. (9,046 days of care), for the following services: IV therapy, skilled therapy (PT, OT, ST), wound care, and other. Mr. Banigo pointed out that most of the Health System's patients who are discharged to these SNFs have higher acuity levels that other facilities will not take. The average daily cost for the contracted SNF care is \$430 and this arrangement is fully funded by DSRIP. Further, Lean Process Improvement strategies put in place significantly improved efficiencies and significant cost savings demonstrated in the overall reduction of the length of stay in the SNFs from an average of 26 days in 2015, to 21 days by the end of 2016. In achieving both the patient care and cost savings milestones, this DSRIP project since the contract began has brought in an overall total of \$5,912,382, i.e. \$1,544,075 in DY3; \$1,423,025 in DY4; and \$2,945,282 in DY5, compared to the total University Hospital expense for the same time period of \$3,874,000. (April 2015 - January 2017). The success of the program has led to savings for the Health System to the tune of \$4.7 million. The project is also anticipated to achieve its milestones for the current year ending in

October 2017 where it is projected to bring in another \$2,473,299 (DY6) to the Health System.

RECOMMENDATION: Staff recommends Board of Managers' approval to renew this contract for an additional two years in the amount of \$4,166,935 for the period March 31, 2017 to March 31, 2019. The award would support the execution of the two year contract extension period afforded in the original contract.

ACTION: A **MOTION** to approve staff's recommendation was made by Dr. Burns, **SECONDED** by Ms. Barrera, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW-UP: None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH CGC GENERAL CONTRACTORS, INC., FOR PARKING LOT IMPROVEMENTS AT THE ROBERT B. GREEN CAMPUS—MARK WEBB**

SUMMARY: Staff has identified the need for additional parking at the RBG campus as the number of clinicians increase to meet patient demand. RFCSP-216-05-024-CNST was issued on 6/03/2016. One proposal was received on July 6, 2016. After evaluating the proposal, staff recommends a contract be awarded to CGC General Contractors, Inc. whose proposal was selected as providing the best value to the Health System based on the company's stability and length of time in business, responses in the Contractors Qualification Statement, projected completion date, and proposed price. The initial RFP included both the visitor and patient parking lot upgrades, as well as the permit parking lot work. However, at this time staff recommends proceeding with visitor and patient parking lot work only, due to funding constraints. This cost of the project is \$562,426 and will be funded from the contingency dollars allocated within the 2017 budgeted capital account. Increasing the number of permit parking spaces will decrease tripping hazards in the parking lot and increase clinician satisfaction due to the increased availability of parking. CGC General Contractors, Inc., is certified by the South Central Texas Regional Certification Agency (SCTRCA) as a Small Business Enterprise, a Women Owned Business Enterprise, and a Historically Underutilized Business. Subcontractors to be included on the project are: Dutch Construction Sitework is certified as Small Business Enterprise; Eagle Enterprises Electrical is certified as Small Business Enterprise; Maldonado Landscaping and Irrigation is certified as Minority Business Enterprise; and Pro-Line Paving is certified as Small Business Enterprise. The workforce composition data of CGC General Contractors, Inc. was provided for the Board's review.

RECOMMENDATION: Staff recommends Board of Managers' approval to execute a contract with CGC General Contractors, Inc. in the amount of \$562,426 to reconstruct and add on to the permit parking lot at RBG campus.

ACTION: A **MOTION** to accept staff's recommendation was made by Ms. Barrera, and **SECONDED** by Dr. Burns. After further discussion, Ms. Barrera **AMENDED** the **MOTION** to accept staff's recommendation, to include a requirement for a minimal asphalt depth of 2.5 inches. There being no objection, the **AMENDED MOTION CARRIED**.

EVALUATION: The number of parking spaces will increase from 56 to 89, which equates to \$6,300 per space, a reasonable price considering that old asphalt, sidewalk, and curbs will need to be torn out. The project will be completed in phases and is estimated to last 14 weeks. Mr. Hasslocher asked whether the vendor will re-use old asphalt. Also, how thick will the new asphalt be? Depth can run anywhere from 2 to 3.5 inches. A 2.5 inch depth is the norm for commercial properties and will last approximately 10 years. This is the minimum asphalt depth the Board will require. Also, was there an RFP issued for concrete? If additional costs are involved to meet the asphalt depth requirement discussed today, staff will return to the Board for approval.

FOLLOW-UP: Mr. Webb will follow up on the important inquiries made by Mr. Hasslocher and respond. He does not believe staff issued an RFP for concrete.

**CONSIDERATION AND APPROPRIATE ACTION TO APPROVE A CONTRACT WITH SPAWGLASS GENERAL CONTRACTORS, INC. TO PROVIDE AND INSTALL 69 EXPANSION JOINTS IN THE SKY TOWER—MARK WEBB**

SUMMARY: Approximately two years after completion of the Sky Tower, various expansion joints began to fail. After a thorough investigation by outside consultants, it was determined that the design team specified the incorrect expansion joint cover. Compounding the issue, the contractor did not install the expansion joints per manufacturer recommendations. As such, based on a random test sample, staff determined the most prudent course of action was to replace all 69 expansion joints in the Sky Tower (3 have already been replaced as part of the investigation and analysis of corrective construction process). This item was included in the recently settled claims dispute with the Perkins+Will and ZVL teams. The scope of work for this project is to provide and install 69 expansion joints in the Sky Tower, to include demolition of existing the expansion joints. The phasing of the work will be carefully coordinated to minimize operational distribution and timing will vary based on the location and the type of expansion joint. This request is for approval of a contract to replace 69 expansion joints in the Sky Tower in the amount of \$650,900.00. This expense will be funded from the recent settlement agreement with Perkins+Will, ZVL, and has no impact on the Health System's operating budget. SpawGlass is a local firm. Health System staff will work to maximize local and SMWVBE participation during the project. SpawGlass has a total of 192 employees, the workforce composition data was provided for the Board.

RECOMMENDATION: Staff recommends Board of Managers' approval of funding in the amount of \$650,900; and approval to execute a contract with SpawGlass General Contractors, Inc., for replacement of 69 Expansion Joints in the Sky Tower.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Engberg, **SECONDED** by Mr. Hasslocher, and **PASSED UNANIMOUSLY**.

EVALUATION: If installed correctly, durability of expansion joints is the standard life of the building, 30-40 years. However, they do fail over time with extreme wear and tear. There is an appropriate warranty associated with this

project that supersedes the original warranty. The vendor was selected through a bid process, so additional pricing was received from other vendors. Mr. Engberg expressed an interest in reviewing bid information since it was not included in staff's written report. Discussion ensued regarding settlement funds. The Health System received \$1.5 million from ZVL, Perkins+Will, and subcontractors for the Sky Tower. As part of the settlement agreement, the amounts contributed by each vendor are not known. The funds are currently in the Board's capital account, assuming repairs/corrections will be needed in the Sky Tower at some point. The process for use of these funds includes a thorough review of items as they come up, followed by a determination as to whether the item is capital or a correction/repair, followed by a disbursement from the appropriate account. Mr. Engberg urged the staff to clearly distinct items paid from the settlement account for the sake of transparency. Mr. Hernandez informed the Board that staff will supplement the written report presented today to include this distinction and bid information requested by Mr. Engberg. Ms. Barrera asked if there are any other projects at this time that will be paid from the settlement fund. The remaining amount is for corrections needed in the Sky Tower. Mr. Adams noted the diverse workforce composition of SpawGlass. He looks forward to the day when there are more minority groups serving in a professional capacity. He asked staff to identify those firms that have a good record of trying to achieve that for minority groups, especially females.

FOLLOW-UP:

Staff will supplement the written report to include bid and settlement fund information. Mr. Webb will also provide the list of items and amounts that was part of the settlement agreement

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH PROJECT CONTROL OF TEXAS TO PROVIDE STAFF AUGMENTATION AND PROJECT MANAGEMENT SERVICES—MARK WEBB**

SUMMARY:

Over the past two years, many of the Health System's projects have experienced delays and budget challenges. There are a variety of reasons associated with these situations. In an effort to better understand the root causes, health system leadership engaged a local, highly qualified project management team to spend time with a variety of staff within the health system and develop an assessment of areas for improvement and/or change. Over the course of four months during the summer/fall of 2016, Project Control of Texas conducted numerous interviews with health system staff from Facilities Development, Plant Engineering, Administration, Legal, Procurement, Finance, and other impacted departments. Based on that assessment, and the recommendations for improvement, staff is recommending Project Control of Texas to augment current staff to assist with delivery of construction projects, as well as implement strategies and recommendations from the 2016 Facilities Development Assessment. This proposed professional services arrangement is similar to others within the Health System where outside firms provide management leadership and process improvement implementation. In addition to the assessment work, Project Control has



been working with staff on the delivery of the Hilliard Clinic project. Although only on the project for a few months, Project Control has already provided value through cost saving ideas and schedule enhancements. In total, there are 43 individual recommendations addressed in the assessment that are areas of concern. These recommendations include process changes/improvements in Facilities Development, Plant Engineering, Administration, Legal, Procurement, and Finance. The achievable goal is to improve the effectiveness and efficiency of the health system's project delivery process and team, and ultimately benefit the citizens of Bexar County and South Texas. Staff has carefully reviewed the proposal for project management services and concurs with the annual fee of \$840,000 for the 3 full time staff members, as well as other staff time from Project Control team members as needed. Staff recommends a 2 year agreement with two 1 year renewal options. Funding for this agreement would be from operating funds. Due to potential upcoming retirements, a portion of this cost would be paid through departmental savings. Project Control is a local firm. Project Control of Texas, along with all other divisions of Raba-Kistner, has a total of 362 employees. The workforce composition data was provided for the Board's review.

RECOMMENDATION: Staff recommends Board of Managers' approval of a project management contract with Project Control of Texas in an amount not to exceed \$1,680,000 for the augmentation of current staff to assist with delivery of construction projects, as well as implement strategies and recommendations from the 2016 Facilities Development Assessment.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Hasslocher, **SECONDED** by Ms. Barrera, and **PASSED UNANIMOUSLY**.

EVALUATION: The 43 recommendations in the Assessment Report address potential failures in the system, delays in projects, and possible cost overruns in that there is an apparent price addition for jobs at University Health System, because vendors know it takes longer to complete projects. Project Control staff will report to Mr. Webb and Cesar Silva, Director of Facilities Development, on a day-to-day basis. Staff has also established an Executive Committee comprised of Mr. George Hernandez, Mr. Banos, Mr. Hurley and Mr. Webb, to review progress on a monthly basis, and any issues that arise as needed. The project delivery team is comprised of staff from the facilities development team, although the plant engineering team also delivers some projects. Mr. Adams urged the staff to carefully scrutinize the long term need for project staff, i.e., internal staff versus expert staff.

FOLLOW-UP: None.

#### **INFORMATION ONLY ITEMS:**

**REPORT REGARDING MEDICAL-DENTAL STAFF COMMITTEES AND DEPARTMENTS—KRISTEN A. PLASTINO, M.D., PRESIDENT, MEDICAL/DENTAL STAFF**

**UPDATE ON FACILITIES DEVELOPMENT ACTIVITIES—MARK WEBB**

**REPORT ON RECENT RECOGNITIONS AND UPCOMING EVENTS—LENI KIRKMAN**

**UPDATE ON THE 85<sup>TH</sup> LEGISLATIVE SESSION—ANDREW SMITH**

SUMMARY:	Mr. Adams directed the Board members' attention to the five (5) written reports above. He urged his colleagues to contact staff with specific comments, questions, or suggestions.
RECOMMENDATION:	These reports were provided for informational purposes only.
ACTION:	No action by the Board of Managers was required.
EVALUATION:	None.
FOLLOW-UP:	None.

**ANNOUNCEMENTS:**

Mr. Adams provided his thoughts regarding today's meeting:

- He asked staff to consider how we handle major and minor construction projects, it must be done as expeditiously as possible.
- He is looking forward to major improvements in Emergency Department. There is tremendous value in what the staff sets out to do in this area.
- He urged staff to go all out to build a positive partnership with UT Health. In the coming months Board members, Mr. Adams and Mr. Hernandez, collectively, have fully committed to the alignment of both institutions

Dr. Jimenez asked Ms. Kirkman to expand upon the announcement regarding Dr. Sylvia-Leal Canstanon, as well as the Resolution adopted by the Texas Senate earlier this month. Dr. Sylvia Leal-Castanon, Associate Professor, General Pediatrics, University Children's Health, was presented with a UT Health San Antonio Presidential Clinical Excellence Award on March 6. Dr. Leal-Castanon is the co-director of the pediatric resident continuity clinic at the Robert B. Green Campus. Dr. Jimenez requested that Mr. Hernandez write a congratulatory note to Dr. Leal-Castanon on behalf of the Board. The Texas Senate adopted a Resolution on March 6, 2017, in recognition of the Robert B. Green's 100<sup>th</sup> Anniversary Celebration, a copy of which was provided in the Board's reading materials. The State House of Representatives will recognize the University Health System on Wednesday, April 26 at 10 a.m.

Mr. Hernandez briefly introduced Lourdes Castro-Ramirez, President, University Health System Foundation. Ms. Castro-Ramirez comes to the Health System with over 20-years of experience working to improve communities by building strong public and private partnerships, increasing the availability of affordable housing and social services, implementing transformative community development initiatives, and developing effective teams and strong organizations. She will work closely with the Foundation Board of Directors, staff and partners to advance our strategic vision and mission and to strengthen our overall strategic planning efforts, organizational development and program operations.

**CLOSED MEETINGS:**

The Chair, James R. Adams, announced this meeting closed to the public at 6:49 p.m. with the following Board members present: James Adams, Chair; Ira Smith, Vice Chair; Dr. Dianna M. Burns-Banks, Secretary; Roberto L. Jimenez, M.D., Immediate Past Chair; Robert Engberg, Member; James Hasslocher, Member; and Janie Barrera, Board member, who entered the meeting at 7:15 p.m. The following staff members were also present: George B. Hernández, Jr., Edward Banos, Reed Hurley, Dr. Bryan Alsip, Ted Day, Mark Webb, Travis Smith, Michael Roussos, Kristen Plastino, M.D., Karen McMurry, Leni Kirkman, Don Finley, and Steve Amason. The closed meeting was held pursuant to TEX. GOV'T CODE, Section 551.085 (Vernon 2004) to receive information regarding pricing or financial planning information relating to a bid or negotiation for the arrangement or provision of services or product lines to another person if disclosure of the information would give advantage to competitors of the hospital district. After discussion, no action was taken in closed session. The Chair, James R. Adams, announced that the closed meeting ended at 7:58 p.m., on the 28<sup>th</sup> day of February 2017. After discussion, no action was taken in closed session.

The Chair, James R. Adams, announced another meeting closed to the public at 8:00 p.m., with the following Board members present: James Adams, Chair; Ira Smith, Vice Chair; Dr. Dianna M. Burns-Banks, Secretary; Roberto Jimenez, M.D., Immediate Past Chair; Janie Barrera, Member; Robert Engberg, Member; and James Hasslocher, Member. Also present was George B. Hernández, Jr., President/Chief Executive Officer. At 8:23 p.m., Mr. George B. Hernández, Jr., President/Chief Executive Officer, left the meeting. A closed meeting was held pursuant to TEX. GOV'T CODE, Section 551.074 (Vernon 2004) to evaluate the performance and duties of the President/CEO. After discussion, no action was taken in closed session. The Chair, James R. Adams, announced that the closed meeting ended at 8:30 p.m., and the public meeting reconvened at 8:30 p.m.

**ADJOURNMENT:**

There being no further business, Mr. Adams adjourned the Board meeting at 8:32 p.m.

---

James R. Adams  
Chair, Board of Managers

---

Dianna M. Burns, M.D.  
Secretary, Board of Managers

---

Sandra D. Garcia, Recording Secretary