

A meeting of the McAlester Regional Health Center Authority was held at 4:00 PM, on Wednesday December 06, 2017 at McAlester Regional Health Center in the Administration Board Room. Public notice, setting forth thereon the day, time and place for this regular meeting had been delivered to the office of the City Clerk at 03:26 PM on Tuesday December 05, 2017.

**TRUSTEES PRESENT:**

Cara Bland ~ L.M. Milton, MD ~ Evans McBride MD (arrived at 4:05 PM) ~ Susan Kanard ~ Mary Shannon, Vice Chairman ~ Kevin Priddle ~ Brent Grilliot ~ Mark Sehgal, MD ~ Weldon Smith, Chairman.

**TRUSTEES ABSENT:**

**HOSPITAL STAFF:**

David Keith ~ Sonya Stone, Recording Secretary, Shawn Howard, Jared Droze, Jason Bray, Dr. Jason McElyea, Lindsey Fassio, Kim Stout, Tezarah Reagan, John Domanski, Kyle Henslee

**OTHER ATTENDEES:**

Elise Brennan, Legal Counsel, Pete Stasiak, City Manager, Dwayne Robinett, HFG, Corinne Smith, Strasburger Attorney at Law, Vanessa Garcia, SE Alliance

**CALL TO ORDER:**

Chairman Smith called the meeting to order at 4:00 PM.

**Public Comment: None**

**Consent Agenda:**

1. MRHCA Board of Trustees minutes for November 01, 2017.
2. Medical Staff credentialing appointments as follows:
  - A. Approval of appointments for Provisional privileges for One (1) year per the recommendation of the Medical Executive Committee:
    - a. Sean M. Doyle, M.D. ~ Active Staff ~ Urology
    - b. Kevin J. Gancarczyk, MD ~ Active Staff ~ Urology
    - c. James B. McGeady, MD ~ Active Staff ~ Urology
    - d. Oren F. Miller, MD ~ Active Staff ~ Pediatric Urology
    - e. Joseph I. Padalino, MD ~ Active Staff ~ Urology
    - f. Michael Padilla, MD ~ Affiliate Staff ~ Orthopedic Surgery
    - g. Courtney T. Tripp, DO ~ Affiliate Staff ~ Teleradiology
  - B. Approval of appointment for Reappointment (Advancement) privileges for Two (2) years per the recommendation of the Medical Executive Committee:
    - a. Robert Emerick, M.D. ~ Active Staff ~ Interventional Cardiology
    - b. Stephanie A. Reddick, MD ~ Affiliate Staff ~ Teleradiology
    - c. Michael I. Vengrow, MD ~ Affiliate Staff ~ Neurology
  - C. Approval of appointment for Reappointment privileges for Two (2) years per the recommendation of the Medical Executive Committee:
    - a. Chad B. Rabinowitz, MD ~ Affiliate Staff ~ Teleradiology
    - b. Anthony A. Terreri, MD ~ Affiliate Staff ~ Teleradiology

A Motion was made (Priddle) and seconded (Sehgal) to approve items one (1) and two (2) of the consent agenda as presented. The vote was taken as follows: Aye: Kevin Priddle, Mark Sehgal, M.D., Susan Kanard, Cara Bland, Mary Shannon, Brent Grilliot and Weldon Smith. Nay: None. Absent: Evans McBride. Abstain: L.M. Milton, MD. Chairperson Smith declared the motion carried

**Hospice Accreditation Presentation:** Ms. Lindsey Fassio provided a hospice educational presentation to the Board that is required as part of the accreditation process. She shared the legal authority and responsibility of the Board which states the Governing body will assume full legal authority and responsibility for the operation of hospice, fiscal operations and the continuous quality assessment and performance improvement that are consistent with acceptable standards of practice. Ms. Fassio stated she has been appointed as the administrator over Southeast Hospice; however in her absence Ms. Kim Hall was appointed as the alternate administrator who will act on her behalf. Ms. Fassio discussed quality assurance and performance improvement (QAPI) for hospice and how it is collected and reported. She added the hospice's governing body is also responsible for ensuring that the hospice-wide QAPI efforts address priorities for improved quality of care and patient safety, and that all improvement actions are evaluated for effectiveness. She closed by sharing the hospice organizational structure, confidentiality practices and the hospice philosophy of care.

**Vocera Presentation & Demonstration:** Ms. Kim Stout reported the Vocera system is a hands-free, wireless communication device that operates off WiFi. She stated that currently the hospital has 40 units. Once the staff logs on they are able to push a button and communicate with other nurses and physicians who are equipped with a unit. The units have been deployed on 2 West, 3 North, ICU, OB 2 North, ER, Respiratory Therapy, Transport and to the House Supervisor. Ms. Stout stated the staff can better communicate the time sensitive needs of our patients. She added the staff no longer has to go in search of people up and down the hall which leads to better use of time. She reported the Vocera system improves the appearance of professionalism. Ms. Stout described future growth to include outside calling, interface from patient bed to unit which will allow patients to directly communicate with caregiver to improve timeliness of response and the additional units to expand communication throughout the hospital. Ms. Stout concluded her presentation by demonstrating the Vocera system.

**Southeast Alliance Update:** Ms. Vanessa Garcia reported the Southeast Alliance Network is a non-profit, multi-county network of healthcare providers and social service organizations in Southeast Oklahoma, formed for the purpose of sharing resources, promoting operational efficiencies, and improving healthcare services for member organizations and the rural communities they serve. She reported there are currently three hospitals, five Federally Qualified Health Centers and one Social Service/Behavioral Health Center who have joined the network. Ms. Garcia shared the Governance structure and added the activities of the network are guided by three committees; Network Development, Hospital Sustainability and Care Coordination Committees. Ms. Garcia closed by sharing the Mission, Vision and Goals and Objectives.

**Master Facility Plan Phasing Update:** Mr. Dwayne Robinett provided an overview of the McAlester Regional Health Center's Master Facility Plan. He reported the project goals are to promote culture change, improve patient experiences, allow for future growth & flexibility, optimize departmental relationships & staff efficiency and to minimize disruption to hospital services during construction. Along with the master plan overview, he shared the project priorities and project summaries which included architectural drawings of the priority areas. He reported the project priorities include a renovation of Central Sterile Processing, construction of a tower shell and new main entry/waiting area and to build out the ICU area. Discussion was held regarding parking access, construction cost and concerns with financing the project. Mr. Keith reported the presentation included the entire architectural restructuring project; however the project will be done in phases. He agreed to work

with the Administrative Executive Team to determine the criteria for phase one of the project and the associated cost.

**Consideration and approval of Meditech 6.1 Electronic Medical Record Software System:** Mr. Jason Bray shared Meditech 6.1 implementation timeline. He reminded the Board that overall the physicians and staff who participated in a demo were very much in favor of the Meditech 6.1 System. He reported per the request of the Board he received a legal opinion in regards to termination obligations for the NextGen agreement. It was determined the agreement auto renews and a 60 day notice is required before the December 1<sup>st</sup> expiration date. He stated there should not be any difficulties terminating the agreement. Mr. Bray opened the floor to Ms. Corinne Smith from Strasburger Attorney at Law who shared a legal opinion of the Meditech 6.1 Agreement which included additions and modifications. Mr. McBride discussed Arvest Bank financing opportunities and he recommended the option out clause on the financing and the Meditech 6.1 agreement mirror a seven year period. He reported Mr. Darryl Linnington is currently working with Arvest Bank on solidify options for financing. A Motion was made (McBride) and seconded (Bland) to approve the Meditech 6.1 Electronic Medical Record Software System contingent upon financing; and at the cost summarized in the proposal; and assure the option out clause on the financing and the Meditech 6.1 agreement mirror a seven year period. The vote was taken as follows: Aye: Evans McBride, Cara Bland, Brent Grilliot, Susan Kanard, Kevin Priddle, L.M. Milton, MD, Mark Sehgal, MD, Mary Shannon and Weldon Smith. Nay: None. Absent: None. Abstain: None. Chairperson Smith declared the motion carried.

**CEO Report:**

1. **CEO Report:** Mr. David Keith provided his written CEO report only due to time constraints.
2. **Review of Strategic Objectives:** Mr. David Keith reviewed the draft Strategic Plan Objectives. He included in his report; priority/short term objectives, priority by fiscal year and ranking of priorities by staff members. He reported that the final version of the Strategic Plan will be presented well in advance of the beginning of FY 2018.

**Chief of Staff Report:**

Dr. Jason McElyea reported Dr. Cook turned in his resignation as Hospitalist effective February 28, 2018 due to health issues. He stated he is looking at educational opportunities regarding the Pediatric Service Line in an effort to retain patients at this hospital. Dr. McElyea reported an ED physician is taking time away which may result in prolonged wait times. He stated all efforts are being made to minimize the wait times as much as possible. He reported attending the Osteopathic Medical Education Consortium of Oklahoma (OMECO) which is the Governing Board for the Resident Program. He learned that our Residents ranked our hospital higher ranking satisfaction scores than other programs across the State. Dr. McElyea reported he recently received word that the Accreditation Council for Graduate Medical Education (ACGME) Certification is moving forward. This certification will allow the hospital to host Doctors of Medicine (MD) and Doctors of Osteopathic Medicine (DO) in our Residency Program. He is expecting to receive the final ACGME Certification in January 2018. Discussion followed regarding Resident retention in the community.

**Board QI Report:**

Dr. Mark Sehgal reported the Board QI met. He stated quality measures were discussed. Dr. Murphy and Chelsea Bishop provided a presentation regarding MIPS and MACRA. He reported the December 2017 meeting was cancelled due to the Christmas holiday.

**Finance Committee Report:****1. Finance Report for October 2017:**

Mr. John Domanski presented the October 2017 Financial Reports. He reported the month of October showed a net operating loss due to negative adjusting of bad debt entry and the elimination of a recurring journal entry to record late charge revenues. He reported October's volumes were mixed with inpatient discharges up to 383 from 348 in the prior year and outpatient registrations in the Emergency Department and surgeries were down for the month. Mr. Domansky reported the Days Cash on hand for October was down slightly from this time last year 135.9 due to a back log of accounts payable that he addressed upon his arrival. He reported there is continued improvement in labor management which reflected 61 less full time employees from this time last year. A Motion was made (Shannon) and seconded (Grilliot) to approve the October 2017 financial reports as presented. The vote was taken as follows: Aye: Mary Shannon, Brent Grilliot, Mark Sehgal, MD, L.M. Milton, MD, Evans McBride, Kevin Priddle, Susan Kanard, Cara Bland and Weldon Smith. Nay: None. Absent: None. Abstain: None. Chairperson Smith declared the motion carried.

- 2. Consideration and approval of Medical Spa Proposal:** Ms. Kim Stout presented a proposal for a Medical Spa. She reported the goal is to offer a complete, relaxing day spa experience focused on health, wellness and beauty. She added the mission is to promote health and wellness through beautiful living. She stated it is a state of complete physical, mental and social well-being. Ms. Stout reported there is currently a lack of upscale, luxurious spa services in Southeastern Oklahoma and one must travel to Tulsa, Dallas or Oklahoma City in order to have a complete day spa experience. She stated the Spa will provide high-end therapeutic massage, aesthetician and medical services in a caring, upscale and professional environment. She shared the targeted market, the competitive landscape in McAlester and the sales and marketing channels. In closing Ms. Stout shared a financial Performa showing an increased cash flow in the first three years. She added the Performa is conservative and she expects the cash flow to exceed the Performa. Additional discussion occurred regarding the location options for the Spa. A motion was made (Bland) and seconded (Grilliot) to approve the proposal for a Medical Spas as presented. Aye: Cara Bland, Brent Grilliot, Susan Kanard, Mark Sehgal, MD, Kevin Priddle, L.M. Milton, MD, Mary Shannon, Evans McBride and Weldon Smith. Nay: None. Absent: None. Abstain: None. Chairman Smith declared the motion carried.

- 3. Consideration and approval of Capital Expenditure Request (CER) for HFG/VA Space Planning:** Mr. John Domansky presented a Capital Expenditure Request for professional architectural and engineering services from Health Facility Group (HFG) for the new VA tenant improvement to be completed in the existing Doctor's Building. He reported the total cost associated with the CER was \$55,000. The cost of the project will be recaptured by the Veterans Administrations. Motion was made (Priddle) and seconded (Bland) to approve the Capital Expenditure Request for professional architectural and engineering services from Health Facility Group (HFG) for the new VA tenant improvement to be completed in the existing Doctor's Building in the amount of \$55,000 as presented. The vote was taken as follows: Aye: Kevin Priddle, Cara Bland, Mark Sehgal, MD, Evans McBride, Susan Kanard, L.M. Milton, MD, Mary Shannon, Brent Grilliot and Weldon Smith. Nay: None. Absent: None. Abstain: None. Chairperson Smith declared the motion carried

- 4. Consideration and approval of CER for Cisco Security Solutions:** Mr. Jason Bray presented a Capital Expenditure Request (CER) for Cisco Security Solutions. He reported MRHC has two Cisco ASA firewalls that are 10 years old that are opening MRHC up to attack. MRHC has been attacked via Ransomware six times. Presently MRHC does not have support for MRHC firewalls and is paying \$26,000 for Bluecoat Web Filtering. He added the new Cisco security system will provide three levels of protection and service and the annual cost after the first year will be \$32,000. He reported bids were received

from Pinnacle and Sirius. Pinnacle was chosen as the lowest bid of \$111,444.40. He closed by stating the firewall will be good for 5 years and the Cisco System will continually update. A Motion was made (Bland) and seconded (Shannon) to approve the Capital Expenditure Request for Cisco Security Solutions at a cost of \$111,444.40. The vote was taken as follows: Aye: Cara Bland, Mary Shannon, Brent Grilliot, Susan Kanard, Kevin Priddle, Evans McBride, L.M. Milton, MD, Mark Sehgal, MD and Weldon Smith. Nay: None. Absent: None. Abstain: None. Chairperson Smith declared the motion carried.

**New Business: None**

**Executive Session: NO EXECUTIVE SESSION WAS HELD.**

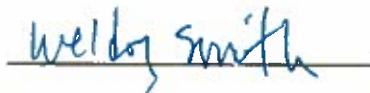
**Executive Session (25 O.S. § 307(B)) – Discussion and Action – Weldon Smith, Chairman**

**25 O.S. § 307(B)(4):** "Confidential communications between a public body and its attorney concerning a pending investigation, claim, or action if the public body, with the advice of its attorney, determines that disclosure will seriously impair the ability of the public body to process the claim or conduct a pending investigation, litigation, or proceeding in the public interest."

1. Discuss Hospitalist Group Support

**Adjournment:**

With no further questions or business to come before the Board, the meeting adjourned at 6:48PM



Weldon Smith ~ Chairperson



Mary Shannon ~ Secretary

/sds