

MINUTES OF THE BOARD OF TRUSTEES MEETING
OF THE
HEALTH AND HOSPITAL CORPORATION
OF MARION COUNTY, INDIANA

June 19, 2018

The meeting of the Board of Trustees (“Board”) of the Health and Hospital Corporation of Marion County, Indiana (“HHC”) was held on Tuesday, June 19, 2018, at 1:30 p.m., at the Sidney and Lois Eskenazi Hospital, 720 Eskenazi Avenue, Outpatient Care Center, Rapp Family Conference Center, First Floor, Faegre Baker Daniels Conference Room, Indianapolis, Indiana.

Members present: Joyce Q. Rogers; James D. Miner, M.D; Charles S. Eberhardt; David F. Canal, M.D.; Gregory S. Fehribach; Carl L. Drummer;

Ms. Rogers called the meeting to order and proceeded with the roll call.

Ms. Rogers asked if there were any additions, corrections, or deletions to the Board minutes from the May 15, 2018, meeting. Mr. Drummer made the motion to approve. Mr. Eberhardt seconded the motion. The minutes from the May 15, 2018, meeting were unanimously approved.

The next item on the agenda was *Purchase Recommendations and Bids*. The first purchase recommendation was for “Menu Management Software and Related Services.” Dr. Miner explained the purchase recommendation and criteria needed to be considered for the bid. CBORD was recommended for purchase as they were the best fit for the project in terms of safety, efficiency, and tracking. A motion was made to approve the bid and seconded. The purchase recommendation “Menu Management Software and Related Services” was unanimously approved. The second purchase recommendation was for “Parking Lot C Build-Out.” Dr. Miner explained the purchase recommendation and criteria needed to be considered. It was recommended that Hagerman Inc. be awarded the contract as they were the best fit for the project in terms of diversity. A motion was made to approve the bid and seconded. The purchase recommendation “Parking Lot C Build-Out” was unanimously approved. The last purchase recommendation was for “Main Campus Wayfinding Signage.” It was recommended that no contract be awarded and that the Board of Trustees formally reject the submitted

bids. Eskenazi Facilities will determine a future plan for implementation of this project. A motion was made and seconded to reject the bids. All bids for “Main Campus Wayfinding Signage” were unanimously rejected.

Daniel E. Sellers, treasurer and CFO, HHC, gave the Treasurer’s Report. The May Cash Disbursements were \$156.5 million, above the monthly disbursement amount of \$144.5 million. The increase is related to Eskenazi Health accounts payable payments and a Headquarters property purchase. The May 2018 Cash Disbursements Report was unanimously approved.

Mr. Sellers continued with the Revenue and Expenditure Report. The year-to-date actual revenues are close to budget. We continue to estimate the taxes and will know more next month on where we stand with Semi-Annual Taxes being submitted at that time. Based on the budget we are at \$49.9 million. Other State and Federal Revenues are estimated at \$25.6 million and Intergovernmental transfer actuals are at \$40 million. Public Health Miscellaneous Revenues are at \$4.2 million and Headquarters is at \$9.7 million. Total Revenues for the Organization are \$58.2 million. Expenditures are slightly better than budget. Personal Services and Merit Increases are 2% better than budget at \$26.8 million. Supplies with most of the annual purchase orders are in place at \$4.5 million. Other Services and Charges have purchase orders of \$20.6 million. Capital Outlays are at \$1.1 million. Total Expenditures in the General Fund are \$65.3 million. All other support items are on budget as expected and Debts are fully funded. Total Support Expense is \$51 million. The organization is running at a slight surplus of \$6.8 billion. A motion was made to approve and seconded. The June 2018 Revenue and Expenditure Report was unanimously approved.

Dr. Miner presented Medical Staff Policies. Policy No. 700-13 “*Dental Services*” and Policy No. 700-24 “*Guidelines for Performance of Sterilization Procedures.*” A motion was made and seconded. Policy No. 700-13 “*Dental Services*” and Policy No. 700-24 “*Guidelines for Performance of Sterilization Procedures*” were unanimously approved.

Dr. Miner continued with Privilege Forms. The form presented was the “*Chiropractic Privilege Form.*” A motion was made and seconded. The May 2018 Privilege Form “*Chiropractic Privilege Form*” was unanimously approved.

The next agenda item was Appointments, Reappointments, and Changes to Privileges. Dr. Miner stated that the Appointments, Reappointments, and Changes in Privileges were reviewed in the May 15, 2018, Hospital Committee meeting. The Appointments, Reappointments, and Changes in Privileges have also been reviewed

and approved by the Medical Executive Committee. The Hospital Committee recommends approval of the Appointments, Reappointments, and Changes to Privileges. A motion was made and seconded. The May 2018 Appointments, Reappointments, and Changes in Privileges were unanimously approved.

Dr. Canal gave the Quality Committee Report. The Quality Subcommittee met earlier on May 15, 2018, under the leadership of Crissy Lough. The minutes were approved from the previous month and a report on HCAPS (Hospital Consumer Assessment of Healthcare Providers and Systems) patient satisfaction survey was reviewed. An area of focused improvement is patient communication for post-discharge instructions. There has been reorganization with Eskenazi Health and the Quality, Risk and Regulatory and Safety Department which will report under Crissy Lough as a unified group moving forward. There was a discussion from Dr. David Crabb, CMO on how to create policies. A challenge was identified at Eskenazi concerning the process of writing a policy and working it through subcommittees, meetings, and the approval process. There was the success with writing a new policy that addresses overlapping surgery and it will be presented before the Medical Executive Committee next month. The final agenda item was Access Times. Access times to clinic, operating room, referral for specialty care and continuous measures of quality are to be reported back to the organization through the committees.

Carl Drummer gave the Public Health Committee Report. The Marion County Public Health Department nutritional program focused on several areas including the farmer's market program and WIC, Women Infant and Children program. The farmer's market program enhanced WIC by providing fresh unprepared locally grown fruit and vegetables. The WIC staff is present at the farmer's market events and provide vouchers onsite. This year the WIC health education will pilot a program to teach families how to urban garden and discuss nutrition for infants and their families. A copy of the urban garden packet can be obtained from Dr. Virginia Caine or Carl Drummer.

Dr. Miner gave the Eskenazi Health Committee Report. A report was given by Lee Ann Blue, CNO. She discussed the Synergy Model for Patient Care which reflects the needs of the patient and family. The model is driven by the skills and competencies of the nursing staff providing care along with the Shared Governance Model where decision making is made collectively for the structure of care. There are eleven service lines, including informatics that is involved in providing nursing care within our facility. The total number of Registered Nurses within the organization is just under 1,200. The majority are involved in acute care, mental health at Midtown and ambulatory care. A large percentage of our nurses are female. The national average age in nursing is 47 and this is reflective of the involvement of educators establishing a key young workforce and

retirements in the baby boomer age group over the last several years. She then gave a broad spectrum of the diversity of our workforce and discussed improving turnover rates in nursing. Reasons for turnover include relocation, pursuing career growth, family obligations or retirement. The education level of the average Eskenazi nurse in acute care is 61% with a Bachelor Degree. The ability to retain and maintain nursing staff involves a strong program for nurse engagement, working on better staffing policies that allow for scheduled meal breaks, and improving the systems for nurses to be involved in quality improvement programs within our facility. We also have an excellent location for learners in nursing which allows us to attract younger individuals. We have multiple levels of rotation with several schools of nursing. The number of nursing accomplishments in the last year has led to increased activity within the hospital. There was a brief discussion regarding the St. Margaret's Hospital Guild Center for Nursing Excellence. This is an investment on the part of the St. Margaret's Hospital Guild with a goal of \$2.1 million dollars to invest in nursing residencies and fellowships to expand the student extern programs. They have collected \$1.5 million and look to reach their goal soon. The second report was regarding Medical Education from Dr. David Crabb, CMO. He discussed the number of different posted Clinical Education Programs here at the facility. We have a large percent of learners from the IU School of Medicine in the Indianapolis area at Eskenazi, by far the largest proportion particularly in medicine, obstetrics and surgery. We also have a strong program for continuity of care in the Residency Programs and Fellowships where they have the opportunity to monitor patients over an extended period of time. We have a high representation as well in the Fellowship Programs at the IU School of Medicine. That was the report regarding Medical Education and completion of the Eskenazi Health Report.

Shelia Guenin gave the Long Term Care Committee Report. The first item discussed is the Crowe Horwath Long-Term Care Summary for the first quarter of 2018. The overall average CMS Five Star Rating for HHC's facilities was 3.7 and 59% of the facilities had a 4 to 5 star ratings. The Executive Summary related to financials noted the quarter ending March 31, 2018, a \$1.8 million above budget total revenue offset by a \$2.2 million over budget total operating expense. The major expense affecting the first quarter variance is nursing expenses which were \$1.8 million above budget. Most of this expense variance is related to recruitment and wage adjustments to address the present staffing markets and the issues that are affecting all of Long Term Care in regards to nursing staff. The average occupancy during the quarter was 84.7%, which is consistent with the past two years. Average occupancy for HHC facilities continues to be higher than the state average which was approximately 73% based on the semi-annual Comprehensive Care Facility Occupancy Report prepared by the Indiana State Department of Health. An estimated 479 facilities participate in the IGT program, representing 91% of Indiana Medicaid licensed facilities. There are 26 county hospitals and other non-state government organizations now participating in this program. Medicare managed care has reached about 33% nationwide,

with projections to increase another 5-7% in 2018 and projected to reach 50% soon. With pressures already mounting regarding length-of-stay for Medicare Part A stays, increased Medicare Managed Care will only put additional pressure on decreasing the number of days a Medicare recipient spends in a skilled nursing facility. Shelia briefly discussed the Long Term Care Report. Bethlehem Woods Nursing and Rehabilitation earned a fifth deficiency free annual licensure and recertification survey in a row. This survey by the Indiana State Department of Health Long Term Care Division was completed on April 5th. A total of fifty-one residents and thirty family members were interviewed during the site visits this quarter. Trends identified as concerns or suggestions for improvement are loud televisions, music, visitors and staff, lack of consistent night shift and staff turnover. Of those interviewed, 90% stated they are generally satisfied with the care provided and would recommend the facilities to others. The HHC goal is RN direct care coverage 24-hours per day, seven days a week in all the skilled nursing facilities. The federal requirements for skilled nursing facilities are minimal for RN coverage at only eight hours per day. Smoke-free environments continue to be encouraged. Of the twenty-four site visits during the quarter, a total of sixteen facilities are completely smoke-free for residents, and two facilities permit only “grandfathered” residents to smoke. The resident handbooks and facility policies encourage smoking cessation. Shelia ended the report by sharing the narrative regarding Forest Creek Village, acquired January 2003 and located on the south side of Indianapolis. This facility is a participant of Phase I and II of the CMS funded, Indiana University OPTIMISTIC program which is an innovation project to prevent hospitalization of long-stay residents and includes a payment model for the facility and Attending Physicians. Forest Creek partners with Eskenazi Health in the preferred provider program and with IU Health’s Care Alliance. The facility serves as a clinical training site for the Brightwood College LPN program. There is a CNA enrolled in the Opportunities to Nursing Excellence (O2NE) education program studying to become an LPN.

Matthew Gutwein, president and CEO, HHC, gave an abbreviated President/CEO Report. He congratulated Dr. Virginia Caine, director, MCPHD on her work to implement a Safe Syringe Exchange Program and gave special thanks to the City-County Council for unanimously passing the Safe Syringe Exchange Program. Recognition was also given to President Vop Osili and minority leader, Michael McQuillen who co-sponsored the measure. Dr. Caine and her staff did a tremendous job building community support from other healthcare systems in the city, public safety partners, faith-based organizations and community leaders. The Safe Syringe Exchange Program will result in greater safety to our community, fewer incidents of Hepatitis C, lessen the spread of HIV and provide greater access to treatment.

Dr. Virginia Cain, director, MCPHD gave the MCPHD report. Mosquito Control hosted the Tire Recycle Day event held on June 16, 2018. This program is important in preventing the amount of mosquitoes breeding in trapped water. There were 837 tires collected in one day. Dr. Caine had the pleasure of participating in the Summer Food Service Program kickoff along with Mayor Joe Hogsett and City Council President Vop Osili. Each year the City of Indianapolis, the Indiana Department of Education and Indy Parks oversee the Summer Food Service Program serving the children of Indianapolis. Dr. Caine expressed her elation about the unanimous approval of the Safe Syringe Exchange Program by the City-County Council. This is a special comprehensive program that is not just about exchanging needles or syringes. It's also about having the ability to run a screen for HIV and Hepatitis C. We will also do referrals for substance abuse, disorders, mental health and work closely with Eskenazi Health Midtown and other programs. The community will be given access to treatment for Hepatitis C and HIV. The next step is ordering the mobile unit with the assistance of IMPD who will help in determining the locations where the ambulance services are using Narcan for overdoses. The program will be ready by late summer or early fall. It may take a couple of months to get the mobile unit in place. The end cost will be about \$500,000 and she hoping to get some funding from the Health Foundation of Greater Indianapolis and looking to target federal dollars. Dr. Caine would like to thank all the board members for their support and trust. She would also like to give her gratitude and thanks to everyone that was instrumental in getting the Safe Syringe Program approved.

Dr. Lisa Harris, medical director and CEO, Eskenazi Health reported on the academic mission of Eskenazi Health and its focus on teaching. She discussed recognizing individuals from Physicians and Faculty through the Trust in Teaching Awards for excellence in clinical teaching. The highest honor awarded is voted on by the graduating class of the School of Medicine. For the third year running graduating seniors voted Dr. Graham Carlos, Chief of Medicine, for this award. The area in and around Eskenazi Health is considered to be a food dessert. Food services have created a grocery store know as the Fresh Food Market within Eskenazi Health with fresh food available to visitors and staff.

Since this was a public meeting, Ms. Rogers asked if there were any comments or questions from the public or additional business. There were no comments.

Mr. Eberhardt motioned to adjourn the meeting. Mr. Drummer seconded the motion. The meeting was adjourned by unanimous voice consent.

The next meeting of the Board will be held on Tuesday, July 24, 2018, at 1:30 p.m.

Joyce Q. Rogers, Chairwoman
Board of Trustees

Matthew R. Gutwein
President and Chief Executive Officer