

**BEAUFORT MEMORIAL HOSPITAL BOARD OF TRUSTEES
BOARD MEETING BY ZOOM (DUE TO COVID-19) – OPEN SESSION**

MINUTES – July 28, 2021

BY ZOOM: Vernita Dore; Hampton Long; Kathy McDonagh, Ph.D.

PRESENT: David House (Chair); Bill Himmelsbach (Vice-Chair); Richardson LaBruce; Stephen Larson, M.D.; Eric Billig, M.D.; Jane Kokinakis, D.O.; Kurt Ellenberger, M.D.; Russell Baxley; Alice Howard; Karen Carroll; Kurt Gambla, D.O.; Shawna Doran; Debbie Schuchmann; Courtney McDermott; Ken Miller; Ashley Hildreth; Brian Hoffman; Courtney Smith; and Anna Sobiech

Guest: Heather Sager, Ph.D., Press Ganey Associates LLC

Public/Open Session CALL TO ORDER: Mr. House called the meeting to order at 7:30 a.m. and stated that the Press had been notified. Anna Sobiech took roll call. A quorum of the Board is confirmed.

MOTION: A motion was made by Dr. McDonagh for Board Members to go into Executive Session for the following purposes: To discuss legal guidance related to Hospital County Ordinance; Discussion of Medical Staff recruitment and contracting, strategic matters related to facility expansion and contractual arrangements with related partners. The motion was seconded by Mr. LaBruce and unanimously approved.

Public/Open Session MOTION: A motion was made by Mr. LaBruce to re-commence into Public/Open Session at 8:48 a.m. The motion was seconded by Dr. Billig and unanimously approved.

Mr. House provided the mission statement.

Karen Carroll provided a patient story.

CONSENT AGENDA – Approval of Minutes for June 30, 2021, Committee Reports & Minutes, and Staff Reports. Mr. LaBruce made a motion, which was seconded by Dr. Billig to adopt the agenda, amendment to the minutes and reports as presented. Unanimous approval/no oppositions.

Heather Sager, Ph.D. of Press Ganey Associates provided a high level overview of the results of two surveys: one specific to work force and the other to physicians and providers. She indicated that the survey uses a five-point scale with benchmarks from November 30 and December 23, 2020. Pre-pandemic points comparisons were made from 2018 and 2019. General observations were provided. Dr. Sager also reviewed the areas of focus. Mr. House thanked Dr. Sager for the excellent report indicating the results were great. He acknowledged all the hard work.

COMMITTEE CHAIR ISSUE IDENTIFICATION:

Finance: Dr. McDonagh reported that June was another strong financial month thanks to staff. BMH is taking a conservative approach that the Health and Human Services funding will need to be returned and is keeping the funds in reserve. The Finance Committee discussed price transparency and indicated that BMH is compliant with the regulations. Mr. House commented that the financial results were very good and most impressively that the hospital is building cash on hand after paying off the bonds. He congratulated the team in managing expenses. Dr. McDonagh indicated that the hospital continues with its growth strategy despite adversities.

Quality Improvement Committee: Dr. Billig provided an overview on the Joint Commission Report. He indicated that the pain assessment scores and the medication scan rates continue to a focus on meeting the goals. Sending out additional tracers within the hospital to prepare for the upcoming Joint Commission visits. Total joint numbers are good. The Annual Appraisal of Quality, the hospital Quality and Safety Plan and the Plan for Provision of Care were all reviewed by the committee. The first quarter quality scorecard reflected good numbers. The staffing effectiveness report showed the hospital overall had adequate staffing despite the challenges of Covid. The patient throughput report showed challenges in the timely admission of patients from the ER. BMH is working diligently to mitigate this. Karen Carroll briefly spoke about the opening of 2 Central relating to the ER department.

BMH FOUNDATION: Mr. Long indicated that the Foundation Board did not meet. He indicated that the Foundation is near closing on a naming gift towards the Pavilion (August or September). He indicated that a \$15K contribution was received of which \$10K will be used towards the Surgical Pavilion and \$5K to the Breast Center. The Investment Committee will be reviewing the IRA Form 990 which is due on August 15th. Two additional individual soirees are planned for the near future. The Annual Appeal Letter will be going out in October.

MEDICAL STAFF: Dr. Ellenberger indicated that there were no outstanding issues.

MEDICAL STAFF – *Credentials:* The following practitioners requested Appointment: Marshall, Elizabeth, CRNA, Dependent Staff/Anesthesiology; Mayer, Dennis, MD, Locum Tenens/Surgery; Santavicca, Nicole, CRNA, Dependent Staff/Anesthesiology; Stafford, Christopher, MD, Active/Medicine-Critical Care; Evec, Adam, DO, Active/Anesthesiology-Critical Care; Behan, Anna, CRNA, Dependent Practitioner/ Anesthesiology.

Reappointment: Anderson, Bonnie, MD, Consulting/Radiology-VRC; Banerjee, Chirantan, MD, Consulting/Telemedicine; Burrus, III, Edward, MD, Active/Surgery-General Surgery; Choe, Leo, MD, Active/Medicine-Hospitalist; Collins, Brad, MD, Active/Surgery-Pathology; D’Orazio, Kate, PA-C, Allied Health Professional/ Emergency Medicine; Hunter, David, MD, Active/Surgery-Ophthalmology; Kolb, Ronald, PA-C, Allied Health Professional/ Emergency Medicine; Kumjian, Dana, MD, Consulting/Medicine-Nephrology; Larson, Stephen, MD, Consulting/ Emergency Medicine; McLaughlin, Matthew, MD, Active/ Medicine-Critical Care; Miler, Margaret, PA-C, Allied Health Professional/ Gastroenterology; Patel, Ravikumar, MD, Active/ Medicine-Hospitalist; Pearce, Holton, MD, Active/ Surgery-General Surgery; Phillips, David, MD, Active/ Emergency Medicine; Reibold, Gretchen, PA-C, Allied Health Professional/

Internal Medicine; Robinson, Taylor, NP, Allied Health Professional/Medicine-Family Medicine; Sisco, Stephen, MD, Active/Surgery-General Surgery; Tavel, Edward, MD, Active/Anesthesiology-Pain Management; Thornberry, Lauren, DPM, Navy Active/Orthopedics.

Additional Privileges: Blau, Sarah, PA-C, Allied Health Professional/Medicine.

Resignations: Robinson, Julie, MD, Consulting/Medicine-Infectious Disease; Reynolds, Jarrod, MD, Active/ Medicine-Hospitalist; Hohenwarter, Susan, MD, Active/ Anesthesiology; George, Ayodeji, MD, Locum Tenens/Hospitalist; Middleton, Katrina, NP, Allied Health Professional.

A brief discussion ensued regarding physicians having Active privileges but not being a part of the call schedule. This oversight will be corrected.

After review and the recommendation by MEC and then QIC, Mr. Himmelsbach made a motion, which was seconded by Dr. Billig to accept the Credentials Committee recommendations as presented. Unanimous approval.

CMO Report: Dr. Gambla indicated that increasing dialog around the ramification of provider burnout has led to researching tools for the Medical Staff. Don Bodiker, RN is officially starting his position August 1st as Medical Staff Quality Improvement and Peer Coordinator. Dr. Gambla provided a brief update on the opiate program indicating that Dr. Cusumano will be starting in September with regards to the Addiction Medicine Clinic. The goal of the Palliative Care program is to serve the community seven days a week and pursue the disease specific designation. Sickle Cell program is contemplating joining the National Network of Clinics which will be launched soon. BMH has encountered an increase in monoclonal antibody requests.

ACTION ITEMS, POLICIES, DISCUSSION OR SUPPLEMENTAL INFORMATION:

Relating to the BMH Medical Staff Proctoring Policy/Procedure, Mr. LaBruce asked for clarification on the term practitioner versus physician. He indicated that under the statement section the word *practitioner* had not been changed to be consistent with the remainder of the changes proposed. He also indicated that under the definition section the word *physician*'s would also need to be changed to be consistent with the remainder of the changes in the policy. A motion to approve this policy will be made to include the corrections stated.

MOTION: A motion was made by Mr. LaBruce to approve the following: Plan for the Provision of Care; BMH Medical Staff Proctoring Policy/Procedure; Medical Staff Approval of Reference Labs; and Medical Staff Approval of Referral Services Imaging. The motion was seconded by Dr. Billig and unanimously approved.

MANAGEMENT REPORT:

Mr. Baxley provided an update on COVID and vaccines. He explained the incentives for employees to vaccinate. He then provided the statistics on hospital employee vaccinations. BMH has been experiencing an increase in ER visit and in Covid-19 testing. BMH will be

reviewing protocols and procedures and will continue to enforce masking in the Hospital. BMH is considering constructing the tent in front of the ER. Mr. Baxley provided an overview of the current state of the Delta variant. He explained the supply chain issues relating to product ordering. BMH will continue to provide pop up vaccine events. Dr. Ellenberger referenced the State Department of Education's statement relating to CDC guidelines and universal masking for the upcoming school year.

Mr. House informed the Board that this was Dr. Kathy McDonagh's last meeting due to a decision to move out of state. Dr. McDonagh will be resigning from the Board effective today. A notice will be submitted to the County. Mr. House acknowledged the enormous contributions in leadership and expertise made by Dr. McDonagh during her tenure on the Board.

ADJOURN – A motion was made by Dr. Billig, and was seconded by Mr. Himmelsbach, to adjourn the meeting. Unanimous approval. The meeting adjourned at 10:30 a.m.

Respectfully submitted,

Stephen Larson, M.D.