BEAUFORT MEMORIAL HOSPITAL BOARD OF TRUSTEES BOARD MEETING- OPEN SESSION

MINUTES – October 26, 2023

BY ZOOM: Stephen Larson, M.D.

PRESENT: Bill Himmelsbach, Dave House (Chair), Eric Billig, M.D., Carolyn Banner, Ph.D., William Jessee, M.D., Jane Kokinakis, M.D.; Vernita Dore, Dan Barton, Alice Howard, Richardson LaBruce, Russell Baxley, Karen Carroll, Kurt Gambla, D.O., Brian Hoffman, Chris Ketchie, Ken Miller, Dee Robinson, Courtney Smith, Victoria Viventi

Absent: Douglas Folzenlogen, M.D.

Public/Open Session CALL TO ORDER: Mr. House called the meeting to order at 8:30 a.m. The meeting has been posted. Victoria Viventi took roll call. A quorum of the Board is confirmed.

MOTION: A motion was made by Dr. Jessee for Board Members to go into Executive Session for the following purpose: Discussion of Medical Staff recruitment and contracting, strategic matters related to facility expansion and contractual arrangements with related partners. The motion was seconded by Mrs. Dore and unanimously approved.

Public/Open Session MOTION: A motion was made by Dr. Billig to re-commence into Public/Open Session at 9:28 a.m. The motion was seconded by Dr. Kokinakis and unanimously approved.

Mr. House provided the mission statement.

Karen Carroll provided a patient story.

CONSENT AGENDA – Approval of Minutes for September 27, 2023, Approval of Committee Reports, Patient Flow and Staff Reports – Mr. LaBruce made a motion, which was seconded by Mrs. Dore to adopt the agenda and reports as presented. Unanimous approval/no oppositions.

QUALITY IMPROVEMENT COMMITTEE: Mr. Himmelsbach provided the Quality report on behalf of Dr. Billig. For credentials there were new appointment requests for hospitalists, anesthesia, oncology, and pulmonology. There were issues to report for MEC. The department level tracer completion rate was 96%, the highest it has been with a new online tool for the staff to use. Top findings in the tracer reports were; stained ceiling tiles, cardboard on the floor, furniture integrity and items stored under the hand sanitizer dispensers. Quality tracers have restarted as well. Quarterly medication scan rates are still above the goal of 95%. For the quality metrics CY Q2 scorecard report, there were some decreases in stroke measures due to very low volume. ER length of stay numbers were reviewed. The provider consult notification policy was approved.

COMMITTEE CHAIR ISSUE IDENTIFICATION:

Finance Committee: Mrs. Dore noted the finance committee reviewed year end results. In general finances were better than both prior year and budget,

Governance Committee: Mr. LaBruce reminded the board two names need to be submitted to the County by the beginning of next year for the pending open seat. Interviews are being scheduled.

Compliance Committee: Dr. Banner noted no issues.

MEDICAL STAFF: Dr. Gambla indicated that there were no issues on the incoming appointments.

MEDICAL STAFF – *Credentials*: The following practitioners requested <u>Appointment</u>: Abu Alula, Samer, MD, Requesting Appointment: Active; Department of Medicine; Hospitalist; Team Health Hospitalist; Baxter, QuaNeicey, MD, Requesting Appointment: Locums; Department of Pediatrics; Pediatric Hospitalist; BMH Pediatric Hospitalist; Caglayan, Jordan, AA, Requesting Appointment: APP; Anesthesia Support; Department of Anesthesia; Anesthesiology; Low Country Anesthesia; Cawthon, William, CRNA, Requesting Appointment: APP ; Department of Anesthesia; Anesthesiology; Low Country Anesthesia; Draper, Danielle, CRNA, Requesting Appointment: APP ; Department of Anesthesia; Draper, Danielle, CRNA, Requesting Appointment: APP ; Department of Anesthesia; Anesthesiology; Low Country Anesthesia; Knudsen, Michael, MD, Requesting Appointment: Locums; Department of Pediatrics; Pediatric Hospitalist; BMH Pediatric Hospitalist; Lillis, Patricia, MD, Requesting Appointment: Locums; Department of Medicine; Radiation Oncology; BMH Radiation Oncology; Nievierowski, Shawna, FNP, Requesting Appointment: APP; Department of Medicine; Pulmonary Critical Care; BMH Pulmonary Specialist

Reappointment:

Bergmann, Shayla, MD, Reappointment: Community Active; Department of Pediatrics; Pediatrics; MUSC Health Pediatric; Hematology/Oncology; Bernstein, Erik, MD, Reappointment: Active; Department of Medicine; Nephrology; Nephrology and Hypertension; Blocker, Edward, MD, Reappointment: Active; Department of Orthopedics; Orthopedics; Beaufort Memorial Orthopedic Specialist; Brown, Kenneth, MD, Reappointment: Active ; Department of Surgery; Otolaryngology; Charleston ENT & Allergy Beaufort; Chicos, Celestin, MD, Reappointment: Active; Department of Medicine; Hospitalist; Team Health Hospitalist; Christian, Don, MD, Reappointment: Active ; Department of Surgery; Otolaryngology; Charleston ENT & Allergy Beaufort; Dardes, Nicholas, DO, Reappointment: Active; Department of Ambulatory Primary Care; Internal Medicine; BM Low Country Medical Group Primary Care; DuRant, Mary, CNM, Reappointment: APP; Department of Obstetrics; Obstetrics; BJHCHS Obstetrics; Edwards, Michael, DPM, Reappointment: Active; Department of Surgery; Podiatry; Island Foot and Ankle Surgery; Ellenberger, Kurt, MD, Reappointment: Active; Department of Pediatrics; Pediatrics; BMH Pediatrics; Fletcher, Lauren, DNP, Reappointment: APP; Department of Medicine; Palliative Care; South Carolina House Calls; Harvey, Harold, PA-C, Reappointment: APP; Department of Ambulatory Primary Care; Primary Care; BM Harrison Peeples Healthcare Center; Jackson, William, MD, Reappointment:

Active; Department of Radiology; Radiology; Beaufort Medical Imaging; Jones, Kathryn, NP, Reappointment: APP; Department of Medicine; Oncology; Beaufort Memorial Oncology Specialists; McEvoy, Danyel, MD, Reappointment: Consulting; Department of Surgery; Pathology; Coastal Pathology Laboratories; Reappointment: APP; Department of Pediatrics; Pediatrics; BM Harrison Peeples Healthcare Center; Moore, Pamela, NP, Shealy, Neal, MD, Reappointment: Community Active; Department of Ambulatory Primary Care; Family Medicine; BM Harrison Peeples Healthcare Center; Troxell, Annsley, PA-C, Reappointment: APP; Department of Surgery; Vascular Surgery; MUSC Health Vascular Surgery Beaufort; Whalen, Allison, MD, Reappointment: Telemedicine; Department of Pediatrics; Pediatrics Critical Care; MUSC Telemedicine Affiliation; Zivick, Elizabeth MD, Reappointment: Telemedicine; Department of Pediatrics; Tele-Peds MUSC Telemedicine Affiliation

<u>Resignation</u>s: Norris, Jeanette, MD, Reflex Resignation; Bennett Pedersen, Cierra, CRNA, Reflex Resignation; Sharp, John, MD, Reflex Resignation; Sylvia, John, MD, Reflex Resignation; Colmer, Cecilia, MD, Reflex Resignation; Favor, Ta-Tanishe, MD, Reflex Resignation; MacDonald, Jana, PA, Reflex Resignation; Gilbreath, Michael, MD, Reflex Resignation; Hassan, Sohaib, MD, Reflex Resignation

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

CMO Report: Dr. Gambla noted the GME feasibility study is underway and will have the outcomes to report to the board by the end of the year. The on-call plan revision with MUSC has been tabled pending a special panel review. The MEC slate of officers will be voted on in the annual Med Staff Meeting in October. The Pharmacy team is developing antimicrobial stewardship competency modules for providers per Joint Commission standards. Heart failure multidisciplinary committee is making good progress. There is also a heart failure multidisciplinary committee working through AHA Get with the Guidelines. Pharmacy is also working on developing standardized protocols for joint committee review around VTE prophylaxis and antimicrobial prophylaxis. MAT is discussing a collaborative project with the County. Palliative Care and South Carolina House Calls are recruiting additional providers to pursue 7 day inpatient coverage. Sickle Cell is joining the National Network of Clinics currently in development. Shayla Bergman, MD is joining as an additional supervising physician and expanding to absorb some benign hematology/blood conservation. Infection Prevention finalized the C-Diff 2 stage testing/reporting process and going to MEC for approval.

Patient Care Services Report: Karen Carroll noted the room renovation/tower refresh project is almost complete. Patient satisfaction survey results have many comments related to food and resulted in launching the "Ready to Eat" initiative where the nursing team helps deliver the trays to patients when the food arrives on the floor. The capacity and throughput taskforce continues to meet regularly and continue to see successes and improved throughput metrics. New IV catheters in the ED are still under trial and being evaluated. International recruitment is going very well, and there has been an uptick in RN applicants. Continue to work with the Beaufort Naval Hospital providing their active-duty staff with current acute care experience. BMH nominated 6 RNs for the South Carolina Palmetto Gold program.

Beaufort Physician Partners Report: Chris Ketchie reported the DAX AI Scribing solution rolled out with the first 20 providers in October and has received positive feedback so far. Phreesia is an appointment accelerator program that has been active in 4 practices for the last 2.5 months and both solutions are helping patient and provider experience. Physician practice volumes are steady, specifically express care. Advanced Practice Provider (APP) recruitment is well under way.

BMH FOUNDATION: Mr. Barton noted the Foundation is transitioning investment management services to Truist. Capital Campaign study is underway with letters sent to 400 prospective donors. Annual appeal was sent to 4000 homes. The Winkler Group who is conducting the capital campaign feasibility study will be presenting to the board later in the day at the board retreat.

MANAGEMENT REPORT:

Mr. Baxley provided an update on the proposed new committee of the board, the legislative and community outreach committee. The governance committee has discussed the strategic planning committee, concluding there has become a bit redundancy for the committee as the board itself has transitioned to being very strategic focused. The bylaw amendment outlines the purpose of the committee to bring relevant staff, board, committee, foundation and community members together to invite elected officials and discuss legislation and state and federal level concerns affecting hospitals. This committee is not a PAC, specifically giving hospital feedback on certain legislation and having open communication. A vote on the bylaw amendment will occur in the November board meeting. Mr. House shared his support for the new committee. Mr. LaBruce provided some clarity on the bylaw amendment.

OR renovations starting the first week of November, just waiting for final permits.

The 2023 Balance and Growth scorecards were provided to the Board as an informational update.

ACTION ITEMS, POLICIES, DISCUSSION OR SUPPLEMENTAL INFORMATION:

Supplemental Information:

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

Respectfully submitted,

Stephen Larson, M.D.