



NORMAN REGIONAL HOSPITAL AUTHORITY

Board Meeting
February 25, 2019

MINUTES

The Norman Regional Hospital Authority met in monthly session Monday, February 25, 2019, at 5:30 p.m., in the Norman Regional Hospital Board Room. The meeting Agenda was posted February 22, 2019 on the NRHS and Norman websites and at the entrance to Norman Regional Hospital.

Members Present: Doug Cubberley, Chair
Joan Greenleaf
Muhammad Anwar, MD
Diane Chambers, MD
James (Jeff) Kimpel, Ph.D.
Jerome (Jerry) Weber, Ph.D.
Mary Womack
Kevin Pipes

Member Absent: Tom Sherman, Vice Chair/Secretary

Others Present: Robin Mantooth, MD, Chief of Staff
Farhan Jawed, MD, Chief of Staff-Elect
Richie Splitt, President and CEO
Meegan Carter, VP Population Health & Wellness
Paula Price, VP Strategy & Growth
John Manfredo, COO
Brittni McGill, CNO
Ken Hopkins, CFO
Dr. Arron Boyd, CMO
Jenny Anderson, Director QPI & Medical Staff Services
Karen Rieger, Attorney, Crowe & Dunlevy
Jan Emmons, Director Emergency Services
Kelly Wells, Director, Planning and Communication
Patrick Cody, MD, Emergency Department
Lisa White, Manager, Performance Improvement
Jason White, Supervising Nurse, Emergency Department
Kyle Hurley, System Manager, Emergency Department
Lindsay Birdwell, RN, Emergency Department
Kelly Birdwell
Matthew Austin
Isabella Austin
Jaxon Birdwell

Recorder: Claudia Todd, Executive Assistant

Agenda Item I. Meeting Called to Order

Mr. Cubberley called the February 25, 2019, Norman Regional Hospital Authority meeting to order at 5:35 p.m.

Agenda Item II. Introduction and Recognition of Outstanding Healers

- A. March 2019 Healer of the Month – Lindsay Birdwell, RN, Emergency Department – presented by Kyle Hurley, System Manager, Emergency Department

Mr. Cubberley introduced Mr. Hurley who presented Ms. Birdwell as the Outstanding Healer for March 2019. She has been an RN since June 2016. Started at Children's Hospital and then moved here. She has a passion for teaching and education and is currently pursuing her Masters in Nursing Education. Because of that, they have placed in her an adjunct Nursing Educator role which is important in making sure our healers remain educated and up to date. Her coworkers commented she always works hard and is quick to say "thank you" for help. Regardless of how hectic things get she remains positive and keeps her cool.

Ms. Birdwell is very honored to represent the Emergency Department. She is honored and humbled to work with a great staff and doctors.

Mr. Cubberley congratulated and thanked Ms. Birdwell on behalf of the Board for her outstanding dedication, professionalism, compassion, and positive attitude that continues to make Norman Regional Health System a caring, high quality system.

Ms. Emmons, Mr. White, Mr. Hurley, Ms. Birdwell, Mr. Birdwell, Matthew Austin, Isabella Austin and Jaxon Birdwell left the meeting at 5:39 pm.

Agenda Item III. Board Education: Emergency Department Residency Update - Dr Patrick Cody, Emergency Department

Dr. Cody provided an update on the Residency program. Goals for this presentation are to define what an Emergency Medicine Resident is, how we got to where we are today, what we are presently doing and where we would like to see this program go.

- A resident physician is a physician by degree. They are a MD or DO that has graduated from medical school, but requires additional training to become eligible for board certification in their chosen specialty. We provide them with proctored experiences that will lead to board certification.
- The idea grew from the fact we have high ER patient volumes, a variety of injuries and illnesses and doctors who love to teach. Working with TeamHeath and a consultant, we began to determine finances, grants and sponsors for the academic program. Funding provided thru direct and indirect medical education and Augmented Medicare.
- Dr. Cody showed a short video explaining the residency program.
- Our first resident class started July 1, 2015. It began with 12 residents, 8 were 1st year residents right of medical school and 4 residents had completed internships elsewhere and received advanced standing credits for that time.

The later 4 residents graduated Dec, 2018, the remaining 8 graduate this past June. The 4 graduates are spread out across the country - one is doing an EMS fellowship in Buffalo, NY, one in Purcell, one in Florida and the last in Nebraska.

- In September 2018, we became accredited with the Accreditation Council for Graduate Medical Education (ACGME). ACGME determines the curriculum and guidelines. We work within those prescribed rules to develop a unique program for the residents. They follow a specific rotation thru departments each year of their postgraduate years. Each resident has the opportunity to take electives for a couple months to pursue a subspecialty if they desire. The curriculum provides didactics in the auditorium – including 200 hours in house and 50 hours online annually. They do 13 blocks of rotations at NRHA each year unless there is subspecialty area we are unable to provide. They are evaluated on the Core Competencies of ACGME
- 3:1 Student-to-Teacher ratio. Faculty has protected time for teaching, have to be board certified in Emergency Medicine, must complete in scholarly activity and must publish in peer review journals every 5 years.
- The residency program represents NRHS in the "Stop the Bleed Campaign", lecture annually, serve on committees and compete at Oklahoma State College of Medicine's Emergency Medicine Update, American College of Osteopathic Emergency Physicians and the Council of Residency Directors of Emergency Medicine and our own conference, the Central Oklahoma EMS Conference. We provide Ultrasound Education for other residency programs. Our INstuctor/Doctors have traveled around the world and have scholarly works published with the Emergency Manuals.
- A byproduct of our current accreditation is we are now eligible to receive allopathic students. We recently received about 250 applicants for six resident spots. When future allopathic students find out That NRHS is now eligible for their applications, we believe our numbers will double or triple for the same six spots.
- Hosting for the first time, the Statewide Emergency Medicine Residency Conference, an annual event at rotating sites. Topic this year is Pediatric Emergencies.
- On the verge of getting a multidisciplinary (Emergency Medicine) Resident Simulation (SIM) lab. Currently requesting bids.
- Looking to start an Ultrasound fellowship.
- In the process of obtaining grant money for EMS response vehicles. It would allow emergency medicine residents to respond to emergency calls - SWAT, natural disasters, mass casualty, etc.

Agenda Item IV. Approval of January 28, 2019, Norman Regional Hospital Authority Board Meeting Minutes

Mr. Cubberley asked for approval of the January 28, 2019, Board Meeting Minutes

ACTION TAKEN: Dr. Weber made the motion to approve the January 28, 2019, Board Meeting Minutes as amended. Dr. Kimpel seconded the motion, and the motion was approved unanimously with aye votes from Dr. Anwar, Mr. Cubberley, Dr. Chambers, Dr. Weber, Dr. Kimpel, Mr. Pipes, Ms.

Greenleaf and Mrs. Womack.

Agenda Item V. Quality & Performance Updates

A. Performance Update:

Update on the 2x12 discharge initiative. We started with a 6 week base line, did our first measurement six weeks later and monthly thereafter. Trends are positive and moving upward. The number of patients discharged before noon in month of January were 425 total for both campuses.

B. Patient Safety Update:

1. 2018 Infection Plan Goal Evaluation

- **Central Line Associated Blood Stream Infection (CLABSI)** – Had 11, stayed below the projected 12.1
- **Decrease Device Utilization** - predicted 10,374 but had 14,585
- **Catheter Associated Urinary Tract Infection (CAUTI)** – predicted 17 and only had 3
- **Decrease Device Utilization** – Predicted 15,894, was actually at 20,447.
- **Decrease Clostridium Difficile Rate by 25%** - 2017 there were 55. 2018 had 44, predicted 43.21
- **Decrease Methicillin Resistant Staphylococcus Aureus (MRSA) by 25%** - had 6, no difference
- **Decrease Vancomycin Resistant Enterococcus (VRE) by 25%** - 3 in 2017, 4 in 2018, no difference.
- **Had Hygiene compliant at 100%** - 2017 was 89%, 96% for 2018.
- **Focus on Appropriate Personnel Protective Equipment (PPE) compliant at 100%** - 2017 was at 51%, 89% for 2018
- **Maintain an Employee/Physician/Volunteer influenza vaccination rate greater the 98%** - no difference from previous year at 96%
- **Decrease Surgical Site Infections:**
 - **Abdominal Hysterectomy** – Predicted 5.1, had 3
 - **Colon** – Predicted 9.2, had 11
 - **Hip Prosthesis** – Predicted 3.4, had 12
 - **Knee Prosthesis** – Predicted 1.8, had 5
 - **Gastric** – Predicted 3.7, had 2

2. 2019 Infection Plan Goals

- Zero Hospital Acquired Infections – Chasing Zero – new campaign for 2019
- Decrease the above items listed by 50%

C. Real Time Data

- Patient Experience – 82% are indicating we are 9 or 10. 2019, Quality Control is looking at trends to increase the passive patients from ranking of 7's & 8's to 9's & 10's. We do analyze differences between inpatient and outpatient ratings.

Agenda Item VI. Approval of the January 2019 Norman Regional Health System Financial Statements

Mr. Hopkins presented the January 2019 Norman Regional Health System Financial report.

- **Inpatient Volumes** – Month of January admissions were good - 3% above budget.
- **Outpatient** - improved significantly from the prior month, 8% above budget.
- **Inpatient** – gross revenue was higher than budgeted.
- **Outpatient Volumes** – ambulatory improved significantly over prior month.
- **Hospital Outpatient** – improved from prior month and evened out with January budget
- **Clinic Outpatient Visits** – improved and ahead of budget by 2 ½%.

January 2019 Financial Performance

- Gross Revenues (Budget \$176,604,686) \$182,420,480
- Net Patient Revenue (Budget \$37,305,497) \$39,247,526
- Total Operating Expenses (Budget \$36,527,881) \$38,478,323
- Total Operating Revenues (Budget \$37,708,598) \$39,710,269
- Operating Income (Budget \$1,180,717) \$1,231,946
- Non-Operating Revenues (Expenses) (Budget \$910,696) (\$5,700,945)
- Excess Revenues over Expenses (Budget \$2,091,413) (\$6,932,891)

Year-to-Date

- Operating Income (Budget \$8,634,541) \$8,348,970
- Non-Operating Revenues (Expenses) (Budget \$6,371,207) (\$923,728)
- Excess Revenues over Expenses (Budget \$15,005,748) \$9,272,697
- Accounts Receivable Days..... (Budget 43 Days) 41.4 Days
- Days Cash on Hand 221.4 Days

ACTION TAKEN: Mr. Pipes motioned to approve the December 2018 NRHS Financial Statements. Dr. Kimpel seconded and the motion was approved unanimously with aye votes from Dr. Anwar, Mr. Cubberley, Dr. Chambers, Dr. Weber, Dr. Kimpel, Mr. Pipes, Mrs. Womack and Mrs. Greenleaf.

Agenda Item VII. Medical Staff

Dr. Mantooth reported the Medical Executive Committee (MEC) met on February 13.

- Financial Presentation from Mr. Hopkins
- Discussed provider-to-provider consultants. Will discuss secure texting program at the next meeting.
- Discussed ongoing challenges and opportunities for improvement with third party radiology services provider (vRad). Vrad agreed to stop taking on new clients until these challenges and opportunities are improved. The NRHS Radiology department will develop a policy that addresses times and accuracy.

- Morbidity & Mortality study cases will be opened up to entire medical staff in order to provide more information and educational opportunities for all physicians involved.
- Bylaws Committee discussed central lines and placements. To enhance ER resident training, the medical staff will allow resident to gain valuable procedural experience by proving on call service for line placement.

Department Reports

- Behavioral Medicine – Dr. Jawed reported construction beginning on the BMS Unit. Also working on their Helaer Engagement/Gallup survey action plans.
- Emergency Department – department meeting changing from report based to problem based. They will take that problem or project and discuss, solve and work on a plan in each meeting. New downtime forms. Implemented tech rounding with patients to make sure patients' needs are being attended to. Discussed no food/drink zones. Dr. Cody discussed streamlining schedule of students.
- Hospital Medicine - Discussed controlled substances and the new law. Working on discharge times. Also discussed Physician-to-Physician consults.
- Infection Committee – Foley-catheter and infection rates look good. There was only one C-diff infection. Hip infection rates are being studied further.
- OB/GYN – New guidelines were discussed for the NICU and antibiotic usage. Received an update on the women's resource center. Discussed new consent form regarding placentas. Ectopic treatment now available at HealthPlex. Dr. Graham presented an update on the Laborist Program and updates to the OB hemorrhage order set. New C-section pre-op plan.
- Pathology – Patient ID errors are trending downward
- Pediatrics – New Standard Protocols of when to notify physicians and checking patients' blood sugars upon discharge to make sure they are not 45 or greater. New human donor breast milk program offered for those needing it. Continuing to monitor Cytomegalovirus (CMV) until enough data is gathered to evaluate if the test is still needed.
- Pediatric Hospitalist - Reviewed patient transfers including those where patients were admitted and then transferred. Outreach in the community - speaking, educational seminars and telehealth continuing.
- Physician Advisory Committee – talked about secure texting application. Demo the application at Physician Advisory meeting on Feb 22. Order sets recently updated. Opioids policy again discussed. Reflexing tests done for sepsis to get within CMS guidelines.
- Radiology – Reviewed patient concerns about radiation exposure to thyroid during mammogram. Determined risk is miniscule and not harmful to patients.
- Residency Update – First annual state-wide Residency conference will be held on March 7th and NRHS is hosting.
- Transfusion Safety Committee – The usage at Porter was down, but up at HealthPlex. Cryoprecipitate waster went up. 5 transfusion reactions at Porter and 3 at HealthPlex in 2018.
- Medical Staff Report – Asking doctors to sign death certificates in a timely fashion to accommodate patient family needs. Doctor's Day's is March 26th. New Medication reconciliation process being developed with pharmacists. ICU codes are being reviewed. New software called Verity to be used for credentialing process.

- Several new pieces of equipment purchased for Endoscopy, Urology and other monitoring equipment.

Agenda Item VIII Quality and Patient Safety Committee

Ms. Greenleaf reported on the Quality and Patient Safety Committee Meeting held on February 4th.

- Ms. Greenleaf mentioned the presentation Ms. Anderson provided on specifics of our quality, performance and safety.
- 4 presentations from within our system.
 - Brad Foster presented on penicillin allergy skin testing. Data presented from April 2018 to September 2018. Less than 10% of the patients who report a penicillin allergy are actually allergic to it. Testing has been highly successful for the patients and us.
 - Jennifer Minnis reported on the Skilled Nursing Facility Length of Stay. Brochure being prepared for patients and family to use while working with Case Management.
 - Maria Griffin reported on Clinical Documentation, Integrity and Quality on the importance on patient information to be accurately assessed and documented for coding. Important for patient and reimbursement. Three components were Case Mix, Severity of Illness and Risk of Mortality.
 - Dr. Cook presented on the Pediatric Hospitalist Program, which was implemented in December 2017. They admitted 470 children. Work done within the community and schools has helped minimize unnecessary inpatient admissions and to manage the care in an outpatient setting.
- Standing reports from Courtney Blau and Judy Stewart were presented.
- Ms. Greenleaf inquired about the Morbidity and Mortality committee status. Ms. Anderson stated the departments would combine their efforts and have one committee.

Agenda Item IX. Finance Committee

A. Report from the February 18, 2019 Finance Committee

- Mr. Cubberley reported Ms. Paula Price presented Quarterly Strategic Plan updates.
- 2 Resolutions to be heard later in this meeting.
- Capital Requests totaling \$854,030:
 - Healthplex Registration Expansion - \$95,096
 - Cisco Catalyst 3850 Series Switches - \$405,439
 - Virtual Desktop Upgrade - \$353,495

B. Recommend Approval of Capital Equipment Purchase Requests

ACTION TAKEN: Mr. Pipes made a motion to approve the Capital Equipment Requests totaling \$854,030 as recommended by the Finance Committee. Dr. Kimpel seconded and the motion was approved unanimously with 8 aye votes from Dr. Anwar, Mr. Cubberley, Dr.

Chambers, Dr. Weber, Dr. Kimpel, Ms. Greenleaf, Mr. Pipes and Ms. Womack.

Agenda Item X. Old Business

Mr. Splitt announced Courtney Blau delivered a healthy baby girl. Both are doing well and are at home. Compliance review will be on the agenda next month.

65 Physician Wellness surveys were turned in. Mr. Manfredo stated an action plan would be built around those responses. NRHS will be retaining the services of a well renowned organization that will deliver on site, in-person CME options for our providers. The effort is aimed at bolstering individual wellness, coping-skills and identifying any perceived institutional impediments to wellness. We will provide multiple offerings to accommodate the physician's schedules. They will then inform the executive team of any perceived or reported institutional barriers. In addition, they will prepare and deliver online CME activities to support continued individual wellness learning and they will prepare high intensity offsite CME activity to support individuals who may require more intense self-wellness learning. This will be offered to the entire medical staff and is an important investment in the health and wellness of our providers.

Agenda Item XI. New Business

A. Proposed Revisions to the 2018 Infection Prevention Plan Policy

ACTION TAKEN: Dr. Weber moved to approve the revisions to the 2019 Infection Prevention Plan Policy as submitted. Ms. Greenleaf seconded and the motion was approved unanimously with aye votes from Dr. Anwar, Ms. Greenleaf, Dr. Chambers, Dr. Kimpel, Mr. Cubberley, Mr. Pipes, Dr. Weber and Ms. Womack.

B. Proposed Vote to Authorize The CEO to Pursue Strategic Goals and Objectives that Support the Mission and Vision of Norman Regional Health System

ACTION TAKEN: Dr. Weber made a motion to approve authorizing the CEO to pursue Strategic Goals and Objectives that support the Mission and Vision of Norman Regional Health System. Dr. Kimpel seconded, and the motion was approved unanimously with aye votes from Dr. Anwar, Ms. Greenleaf, Dr. Weber, Dr. Kimpel, Mr. Pipes, Mr. Cubberley, Ms. Womack and Dr. Chambers.

Dr. Weber made a point of observation comment that Mr. Splitt and team did an excellent job on the Board Advance on Saturday. Mr. Splitt stated it was team effort. Mr. Cubberley thanked the board and staff for their participation, discussion and for being engaged throughout the day.

Agenda Item XII. Administrative Report

Mr. Splitt provided an update on the following:

- Thanked the Board and staff for their input and participation in the Board Advance. He agreed with Mr. Cubberley, it was one of the best advances we have had in terms of dialogue, outcome and potential as we move forward.
- Norman Regional was nominated by Norman Public Schools for the Celebration of Heroes Community Impact Award thru the American Red Cross. Award to honor our participation and support of the Nursing program in Norman schools. Mr. Splitt and Ms. Barnhart recorded a video to be played at the reception and a few of our healers will attend a luncheon to receive the award.
- Thanked Dr. Mantooth and Dr. Jawed for their leadership and experience in guiding the Medical Executive Committee. Their efforts are notable, recognizable and greatly appreciated.

Agenda Item XIII Proposed Executive Session

- A.** Proposed Vote to Convene an Executive Session Pursuant to 25 Okla. Stat. § 307.B.4 to Discuss with Legal Counsel Pending Internal Peer Review/Credentialing Investigation Regarding the Medical Staff Members/Applicants Listed Below, to Discuss Real Property/Appraisal Pursuant to 25 Okla. Stat. § 307.B.3

ACTION TAKEN: Dr. Kimpel made a motion to adjourn into Executive Session. Dr. Weber seconded and the motion was approved unanimously with aye votes from Dr. Anwar, Mr. Cubberley, Dr. Chambers, Dr. Weber, Mr. Pipes, Dr. Kimpel, Ms. Greenleaf and Mrs. Womack.

Ms. Wells, Ms. Anderson and Ms. White left the meeting at 7:00 p.m.

- B.** Medical Staff Recommendations Regarding the Medical Staff Members/ Applicants as Listed in XIII.B 1-4 Below.

1. Recommend New Provisional Medical Staff Appointments:
 - a. Lauren Donaldson, PA-C – Pediatrics
2. Recommend Advancement of Medical Staff from Provisional Status:
 - a. Casey Peters, MD – Medicine
3. Recommend Medical Staff Reappointments:
 - a. Terry Hill, DO – Emergency Medicine
 - b. Anderson Greenshaw, MD – Anesthesia
 - c. Mason Lawrence, MD – Anesthesia
 - d. Tom Connally, MD – Surgery
 - e. Jason Benn, DO – Emergency Medicine
 - f. Robert Frantz, MD – Emergency Medicine
 - g. Martin McBee, DO – Emergency Medicine
 - h. Ben Harvey, MD – Surgery
 - i. Richard Brock, DO – Medicine
 - j. Sheryl Ronne-Dellinger, APRN-CRNA – Anesthesia
 - k. Kent Bays, PA-C – Surgery
 - l. Jorge Gorton, PA-C – Medicine

4. Recommend Request for Change in Staff Membership Category:
 - a. Namali Pierson, MD – Change from Consulting Staff to Active Staff
– Medicine

C. Request to Adjourn Out of Any Such Executive Session and Return to Regular Session

ACTION TAKEN: Dr. Weber made a motion to adjourn out of Executive Session and return to regular session. Dr. Kimpel seconded, and the motion was approved unanimous aye votes from Dr. Anwar, Mr. Cubberley, Mrs. Greenleaf, Dr. Chambers, Dr. Weber, Dr. Kimpel, Mr. Pipes and Mrs. Womack.

Mr. Cubberley noted the Board returned to regular session. There were no decisions or votes taken except to return to regular session and any information shared during the Executive Session is privileged and needs to remain in Executive Session.

E. Proposed Vote to Approve or Disapprove the Medical Executive Committee Recommendations Regarding Credentialing of the Referenced Medical Staff Members as Listed in XII B 1-4 with name correction.

ACTION TAKEN: Dr. Weber motioned to approve credentialing items as recommended with corrections by Medical Executive Committee and Credentials Committee of all referenced Medical Staff members listed in XII B 1-4. Dr. Kimpel seconded, and the motion was approved with unanimous aye votes from Dr. Anwar, Mr. Cubberley, Dr. Chambers, Mr Pipes, Dr. Weber, Dr. Kimpel, Ms. Greenleaf and Ms. Womack.

F. Proposed Vote to Approve or Reject the Resolution for the Real Property/Appraisal as Recommended by the Finance Committee.

ACTION TAKEN: Mr. Pipes motioned to approve the Resolution for the Real Property/Appraisal as Recommended by the Finance Committee. Dr. Weber seconded, and the motion was approved with unanimous aye votes from Dr. Anwar, Mr. Cubberley, Dr. Chambers, Mr. Pipes, Dr. Weber, Dr. Kimpel, Ms. Greenleaf and Ms. Womack.

Agenda Item XIV Consideration for Proposal of Sale of Two Real Properties Owned by NRHA

A. Proposed Vote to Approve or Disapprove the Resolution for sale of NRHA Real Property located at 801 N. Findlay Avenue, Norman, OK

ACTION TAKEN: Dr. Weber motioned to approve the Resolution for sale of NRHA Real Property located at 801 N. Findlay Avenue, Norman, Ok. Mr. Pipes seconded, and the motion was approved with unanimous aye

votes from Dr. Anwar, Mr. Cubberley, Dr. Chambers, Mr. Pipes, Dr. Weber, Dr. Kimpel, Ms. Greenleaf and Ms. Womack.

- B. Proposed Vote to Approve or Disapprove the Resolution for sale of NRHA Real Property located at 7900 Nichols Gate Circle, Oklahoma City, OK**

ACTION TAKEN: Dr. Kimpel motioned to approve the Resolution for sale of NRHA Real Property located at 7900 Nichols Gate Circle, Oklahoma City, OK. Dr. Weber seconded, with aye votes from Dr. Anwar, Mr. Cubberley, Mr. Pipes, Dr. Weber, Dr. Kimpel, Ms. Greenleaf and Ms. Womack. There were no "no" votes. Dr. Chambers abstained. The motion passed 8-0-1.

Dr. Kimpel reminded the Board this was a part of the hospital goal to have the CEO and his family relocate to Norman.

Board Open Discussion

- A. The Managers and Directors will meet Friday, March 1st to continue the conversations and activities from the Board Advance. Their additional input will be considered in choosing a name for the BHAG initiative and our continued growth.
- B. Dr. Mantooth mentioned that Jill Splitt attended the Heart Health event at Nosh this past Thursday and they were thankful for her support and the benefit of she and Mr. Splitt living in our community.

Agenda Item XV. Adjournment

ACTION TAKEN: Dr. Weber made a motion to adjourn the meeting at 7:47p.m. Mr. Kempel seconded, and the motion passed unanimously with aye votes from Dr. Anwar, Mr. Cubberley, Dr. Chambers, Dr. Weber, Mr. Pipes, Dr. Kimpel, Ms. Greenleaf and Mary Womack.

Respectfully Submitted,



Tom Sherman, Vice-Chair/Secretary