MEETING IN PROGRESS

GMHA Board of Trustees

Wednesday, September 2, 2020 | 5:00 p.m. Zoom Video Conference

GMHA Board of Trustees Meeting ATTENDANCE SHEET

Wednesday, September 2, 2020 | 5:00 p.m. | Zoom Video Conference

	NAME:	TITLE:	SIGNATURE:
	Theresa Obispo	Chairperson	Precent
Board of Trustees	Melissa Waibel	Vice-chairperson	Present
	Sarah Thomas- Nededog	Secretary	Present-
	Byron Evaristo	Treasurer	Present
	Sharon Davis	Trustee	
	Sonia Siliang	Trustee	Present
	Glynis Almonte	Trustee	Present
	Michael Um	Trustee	Present
	Evangeline Allen	Trustee	Present-
	Lillian Perez-Posadas	Hospital Administrator/CEO	Da run
aff	William N. Kando	Associate Administrator, Operations	W. 7. 16and
Executive Management/Medical Staff	Annie Bordallo, MD	Associate Administrator, Medical Services	am heale It
t/Med	Joleen Aguon, MD	Associate Administrator, Clinical Services	Present
emen	Don Rabanal	Assistant Administrator, Administrative Services	Procent
Aanag	Jemmabeth Simbillo	Assistant Administrator, Nursing Services	
ıtive N	Christine Tuquero	Deputy Assistant Administrator, Nursing Services	Present
Exec	Yukari Hechanova	Acting, Chief Financial Officer	Hedanan
_	Rodalyn Gerardo	Chief Auditor	Rmagne
	Dustin Prins, DPM	Medical Staff President	Present
	Andrea Pellacani	Sen. Therese Terlaje	Present-
	Wark Guayco	Hospital Unit Supervisor	Present
Guest(s)			
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Guam Memorial Hospital Authority - Board of Trustees Meeting

September 2, 2020 | 5:00 p.m. | Zoom Video Conference

BOARD MEMBERS: Theresa Obispo, Chairperson; Melissa Waibel, Vice-chairperson; Sarah Thomas-Nededog, Secretary; Byron Evaristo, Treasurer; Sharon Davis, Trustee; Sonia Siliang, Trustee; Glynis Almonte, Trustee; Michael Um, MD, Trustee; Evangeline Allen, Trustee

Item		Owner
I.	Welcoming Call Meeting to Order and Determination of Quorum	Trustee Obispo
II.	Review and approval minutes	All Trustees
	A. July 17, 2020 Special Meeting	
	B. July 29, 2020	
	C. August 17, 2020 Special Meeting	
III.	Old Business	All Trustees
	A. Bill No. 305-35 (COR) is an act to add Chapter 98 to Division 4 of Title 20, Guam Code	
	Annotated, relative to a Public-Private Partnership for the management of the Guam	
	Memorial Hospital Authority	
IV.	New Business	Executive Management
	A. Strategic Plan Update Report	
	B. Res. 2020-49, Relative to Approving Revisions to the Medical Staff Bylaws	
V.	Management's Report	Executive Management
VI.	Board Subcommittee Reports	
	A. Joint Conference & Professional Affairs	Trustees Dr. Um, Waibel
	1. Res. 2020-39, Reappointment of Active Medical Staff Privileges	
	2. Res. 2020-40, Relative to the Appointment of Provisional Medical Staff Privileges	
	3. Res. 2020-41, Relative to the Reappointment of Full Allied Health Professional Staff	
	Privileges A Post 2020 42 Polative to the Appointment of Allied Health Professional Provisional	
	4. Res. 2020-42, Relative to the Appointment of Allied Health Professional Provisional Staff Privileges	
	5. Res. 2020-43, Relative to the Appointment of Active Medical Staff Privileges for	
	Frankie Mendiola, MD. on the conditions that he be placed on a "Focused	
	Professional Practice Evaluation (FPPE)"	
	6. Res. 2020-44, Relative to the Appointment of Active Medical Staff Privileges for	
	Saied Safabakhsh, MD. on the conditions that he be placed on a "Focused	
	Professional Practice Evaluation (FPPE)"	
	7. Res. 2020-46, Relative to the Reappointment of Active Medical Staff Privileges	
	8. Res. 2020-47, Relative to the Appointment of Active Associate Medical Staff	
	Privileges	
	9. Res. 2020-48, Relative to the Appointment of Allied Health Professional Provisional	
	Staff Privileges	
	B. Human Resources	Tweetoon Walled Obline
	1. Res. 2020-32, Relative to the Creation of the Emergency Room Technician I & II	Trustees Waibel, Obispo
	Positions	
	2. Res. 2020-45, Relative to the Establishment of the Assistant Administrator of	
	Professional Support Services in the Classified Service	
	C. Facilities, Capital Improvement Projects, & Information Technology	Trustees Davis, Evaristo
	E. Governance, Bylaws, and Strategic Planning	Trustees Nededog, Siliang
	F. Quality & Safety	Trustees Almonte, Allen
VII.	Public Comment	
VIII.	Adjournment	Trustee Obispo

Special Meeting of the Guam Memorial Hospital Authority Board of Trustees

Friday, July 17, 2020 | 5:30 p.m. Zoom Video Conference

Board Members

Present: Theresa Obispo, Sarah Thomas-Nededog, Sharon Davis, Sonia Siliang, Glynis Almonte, Dr. Michael Um, Evangeline Allen

Absent: Melissa Waibel, Byron Evaristo

Leadership

ATTENDANCE

Present: Lillian Perez-Posadas, William Kando, Dr. Annie Bordallo, Dr. Joleen Aguon Don Rabanal, Jemmabeth Simbillo, Yukari Hechanova, Rodalyn Gerardo,

Absent: Christine Tuquero, Dr. Dustin Prins

Guests:

Natasha Charfauros

	ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
I.	CALL MEETING TO ORDER AND DETE	RMINATION OF QUORUM	LANTI	THEFT	
		After notices were duly issued pursuant to Title 5 GCA, Chapter 8, <i>Open Government Law</i> , Section 8107(a) and with a quorum present, Trustee Obispo called to order the special meeting of the GMHA Board of Trustees at 5:29 p.m. on Friday, July 17, 2020 via Zoom Video Conference.	Trustee Obispo	None	None
II.	NEW BUSINESS				
	COVID-19 Response Differential Pay Resolution 2020-36, Relative to Reestablishing a Ten Percent (10%) COVID-19 Response Differential Pay for Category 3 Employees	The Human Resources Subcommittee conducted an email vote on July 2, 2020 with a deadline of July 7, 2020. 7 members abstained from voting due to conflict of interest; 3 voted in favor; and 1 voted against the resolution. It was noted that one member opposed the differential pay because employees should have known the risks when they decided to work in healthcare. Mrs. Posadas informed the board that although the Governor issued an executive order to seize the 10% COVID-19 Response Differential Pay for Category 3 Employees, GMHA remains the designated hospital for COVID-19 therefore, Category 3 employees of GMHA should continue to be compensated 10%. GMHA has received \$3.4M from Cares Funds for COVID Payroll and has expended \$1.7M. Cares Funds are expected to be available through the end of the fiscal year for Category 1, 2, and 3 employees.	Executive Management; Board of Trustees	None	Approved

Mrs. Posadas explained that according to an audit done by Ms. Gerardo, a 10% differential pay for Category three employees will cost \$40k per pay period.

Ms. Hechanova informed the board that she is tracking and monitoring funds every payday. Differential pay is only paid per hour for productive hours across the board.

Trustee Nededog asked how the differential pay will be covered if funding runs out and the island is still in a state of emergency.

Mrs. Posadas explained that funding will come from operations and that GMHA will seek reimbursement from FEMA like the hospital would for any disaster.

To prevent any liabilities, Ms. Gerardo suggested to add "subject to availability of funds" to the resolution.

Trustee Allen expressed her support and informed the board that it is their responsibility to convey that all employees of the hospital are valued.

Trustee Nededog expressed concern of amending an executive order that the governor made and suggested that the Governor fix her executive order.

Mrs. Posadas explained that she spoke with Governor Lou Leon Guerrero about the reinstatement and was told that it is for the board to decide on.

Revisions that were agreed upon are:

- Change "Reestablishing" to "Establishing"
- Add "Subject to availability of funds" for Category 3 Employees

Trustee Davis motioned, and it was seconded by Dr. Um to approve Resolution 2020-36 with revisions. The motion carried with all ayes.

٧.	PUBLIC COMMENT				
		There were no public comments.	None	None	None
VI.	ADJOURNMENT				
		There being no further matters for discussion, Trustee Obispo declared the meeting adjourned at 6:14 p.m., motioned by Trustee Davis and seconded by Trustee Almonte. The motion carried with all ayes.	All Board members	None	Approved

Transcribed by:

Justine A. Čamacho Administrative Assistant Submitted by:

Sarah Thomas-Nededog

Secretary

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the July 17, 2020 special meeting was accepted and approved by the GMHA Board of

Trustees on this 2nd day of September 2020.

Certified by:

Theresa Obispo Chairperson

Regular Meeting of the Guam Memorial Hospital Authority Board of Trustees

Wednesday, July 29, 2020 | 5:00 p.m. Zoom Video Conference

Board Members

Present: Theresa Obispo, Melissa Waibel, Sarah Thomas-Nededog, Byron Evaristo Sharon Davis, Sonia Siliang, Glynis Almonte, Dr. Michael Um

Absent: Evangeline Allen

Leadership

ATTENDANCE

Present: Lillian Perez-Posadas, William Kando, Dr. Annie Bordallo, Dr. Joleen Aguon, Don Rabanal, Jemmabeth Simbillo, Christine Tuquero, Yukari Hechanova, Rodalyn Gerardo, Dr. Dustin Prins

Guests:

Natasha Charfauros

ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
I. CALL MEETING TO ORDER AND DETE	RMINATION OF QUORUM			
	After notices were duly issued pursuant to Title 5 GCA, Chapter 8, <i>Open Government Law</i> , Section 8107(a) and with a quorum present, Trustee Obispo called to order the regular meeting of the GMHA Board of Trustees at 4:59 p.m. on Wednesday, July 29, 2020 via Zoom Video Conferencing.	Trustee Obispo	None	None
II. REVIEW AND APPROVAL OF MINUTES			Γ	Γ .
A. <u>June 24, 2020</u>	Trustee Evaristo motioned, and it was seconded by Trustee Almonte to approve the June 24, 2020 minutes as presented. The motion carried with all ayes.	All Board Members	None	Approved
B. July 17, 2020 (Special Meeting)	The July 17, 2020 special meeting minutes were tabled.			Tabled
III. OLD BUSINESS	,	1	1	1
A. Bill No. 305-35 (COR)is an act to add Chapter 98 to Division 4 of Title 20, Guam Code Annotated, relative to a Public-Private Partnership for the management of the Guam Memorial Hospital Authority	Chairwoman Obispo informed the board that she along with Trustee Evaristo and Trustee Nededog met with Senator James Moylan to discuss Bill No. 305-35. It was noted that Senator Moylan's Chief of Staff, Bobby Shringi and Dr. Vincent Akimoto were present. Trustee Evaristo reported that Mr. Bobby Shringi gave a background of how and why the bill was created and	All Board Members	Updated to be provided at the next scheduled meeting.	Open
	recognized that the bill may not be needed anymore. In addition, Dr. Akimoto voiced his concerns about improving the hospital without the political aspect. Senator Moylan was invited to the August BOT meeting to present the history of the bill and to address questions of the board.			

В.	Sen. Terlaje's letters of June 18 th & 19 th regarding: (1) Status of CIPs and FY2021 GMHA Budget (2) Request for detailed list of purchase items and expenditures from Hotel	Chairwoman Obispo explained that she emailed Senator Therese Terlaje's Office to schedule a meeting to discuss the GMHA Business Sustainability Plan. GMHA fulfilled Senator Terlaje's request for documents.	Hospital Administrator		Closed
	Occupancy Tax Surplus Fund				
٧.	NEW BUSINESS		L	_ I	
	Presentation of Optional Accrediting Organizations	 Ms. Manglona presented four accrediting organizations: Det Norske Veritas (DNV) The Center for Improvement in Healthcare Quality (CIHQ) The Joint Commission (TJC) Healthcare Facilities Accreditation Program (HFAP) Ms. Manglona went over a cost comparison and explained that the true costs depend on the size of the facility and/or the average patient census and FTEs. In addition, accreditation is not mandatory. Medicare is an external oversight because they survey the hospital. Some benefits of being accredited are: Doesn't allow for anyone to say bad things about the hospital Gives comfort to doctors Many programs require medical students or residents to train in an accredited institution Research opportunities to bring in funding CMS will not have to come to the hospital because the accrediting organization has CMS deeming authority. Mrs. Posadas explained that the Executive Management Council will continue discussion on this matter and that 	Compliance Administrator	None	Informational
		GMHA can focus on accreditation after the hospital gets through the ongoing pandemic. The end goal is to obtain accreditation for the hospital.			

B. USDA Telemedicine Grant Application	Ms. Manzon informed the board that when GMHA found out the USDA Telehealth and Distance Learning Grant was available, other agencies were notified but they did not respond. A week before the grant was due, Lt. Governor, Josh Tenorio was able to get the agencies together to plan and prepare the grant. It was noted that the Department of Public Health & Social Services and the Department of Education did not participate in this grant due to time constraints. The following are highlights from Ms. Manzon's presentation for USDA Telehealth & Distance Learning: • Agencies in collaboration with GMHA and the SNF are Guam Behavioral Health and Wellness Center, the Department of Corrections (Mangilao and Agana Locations) and the University of Guam. • Project Cost/Amount Requested: \$423,677 The amount will cover costs for Telecommunications equipment and software, Telemedicine carts and supplies, training services for staff, distance learning equipment, TVs, Teleconferencing equipment and shipping costs for all agencies involved. • Not required to provide a minimum match because of our geographical location.	Clinical Nurse Informatics Supervisor	None	Informational
C. Cerner Laboratory Information System Presentation	Mr. Rabanal informed the board that Cerner has not provided an adjusted proposal and hopes to present at the next BOT meeting.	Assistant Administrator for Administrative Services	None	Informational
VI. MANAGEMENT'S REPORT				
A. COVID-19 census	Mrs. Posadas reported the following: 14: New positive cases from July 1, 2020 to July 28, 2020 23: Cumulative Positive Cases (Since GMHA started	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
	Abbott ID Testing) 4: Current COVID-19 Census			

B. Diagnostic Data	(2 are in ICU Care 2, 2 were in Care 3 but as of 3 p.m., July 29, 2020, they were released to the Government sponsored isolation facility because doctor deemed them stable.) 1: PUI in ER initially tested negative, but will be tested again in the morning to validate and confirm 5: Deaths Information provided to HSS Teletracking Port: 2,769: Total swabs performed (Since GMHA started Abbott ID Testing) 2746: Cumulative Negative Results 12: Employee Exposure (since April)	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
C. Catholic Social Services	GMHA does not have an official agreement to use the CSS Facility for SNF patients. With the recent development that Guam is in typhoon season, GMHA may reach out to GRMC to find out if their rooms can be rented or bring the SNF patients back to the hospital because CSS is not secured with shutters and are unable to provide meals. GMHA will continue to look for other options.	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
D. SNF Chiller	The chiller was repaired but is not keeping the facility cool enough. A Request for Quote (RFQ) was submitted for two 160 ton chillers donated by a banking institution. The Guam Army National Guard did an assessment of the donated chillers and they are 100% functional. Accepting the donated chillers will give the hospital time to get the chillers replaced since the current bid is under dispute.	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
E. Skilled Nursing Facility	The SNF will become a switch ready facility for overflow of COVID-19 patients and have the capability to provide ICU level of care so that patients won't have to be transported to GMHA.	Executive Managers	Updates to be provided at the next	Informational

				scheduled meeting.	
F.	FY2019 Audit	The FY2019 audit is available on the GMHA website.	Executive Managers	None	Informational
G.	Legal Services Contract	Based on the review from the Office of the Attorney General, GMHA will need to draft another RFP because the procurement record was incomplete. GMHA currently has legal services under a small purchase procurement.	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
H.	Electronic Health Record (EHR) Project Update	Expected launch date is May 2021. GMHA received a Freedom of Information Act (FOIA). There are some vendors questioning the novation process.	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
I.	Revenue Cycle Management (RCM) Update	GMHA published a new RFP and it closed on July 20, 2020. Two bids were received and the panel will rate and select the most qualified.	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
J.	Takecare Insurance Company	Takecare Insurance has secured services from Ernst and Young, a 3 rd party auditor to perform agreed upon procedures to reconcile disputes for the \$6.3M credit from prior years and the current claims from 2019 and 2020. GMHA continues to accept patients who have Takecare Insurance but they pay out of pocket since becoming	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
K.	Family Visitation Policy	out-of-network on March 13, 2020. The Family Visitation Policy was amended to allow immediate family members only. It was discovered that there were too many visitors per patient to include children. GMHA is only accepting visitors 18 and over.	Executive Managers	None	Informational
L.	Request from the Archdiocese	The Archdiocese made a request to allow a member/s of the clergy to perform anointing of the sick and last rites for COVID-19 patients. GMHA is looking to find a way to accommodate the request to avoid violation of civil rights, patient's freedom, religious freedom, etc. GMHA will need to provide the necessary training and PPEs for the clergy member/s.	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational

M. FY2020-2021 CIP List	GMHA is in the process of recruiting a project manager.	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
N. New Hospital Taskforce	Governor Lou Leon Guerrero tasked Mrs. Posadas to create a taskforce for the new hospital. A list has been created and will be presented to the executive management council, the board of trustees, and the Governor. The taskforce will be responsible for identifying available property, size, bed capacity and services that will be offered.	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
O. GMHA Website	Tentative month of completion for the website is October.	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
P. ICU Bed Capacity	ICU bed capacity has been increased from six to eight because more nurses have been recruited.	Executive Managers	None	Informational
Q. GFT Collective Bargaining Agreement	The agreement is in its final form and is under review by GFT.	Executive Managers	Updates to be provided at the next scheduled meeting.	Informational
R. Recruitment of Nurses	GMHA continues to recruit nurses. The Human Resources Department is putting a package together to attract nurses from the mainland who were laid off or lost their jobs in the mainland.	Executive Managers	None	Informational
VII. BOARD SUBCOMMITTEE REPORTS				
A. Joint Conference & Professional Affairs 1. Resolution No. 2020-35, Relative to the Reappointment of Active Medical Staff Privileges	Trustee Waibel motioned, and it was seconded by Trustee Almonte to approve Resolution 2020-35. The motion carried with all ayes.	Chair & Vice- chair, JC&PA Subcommittee	None	Approved
2. <u>Billing Process</u>	Dr. Um requested for an update with regards to the billing process and how it's effected if medical records are not completed.			
	Dr. Bordallo explained that she and Dr. Prins visited the Medical Records Department to get an idea of how			

	many incomplete records there are. A process is being			
	worked on to connect accounting and billing & coding so that physicians can see how the hospital is impacted.			
	Dr. Bordallo explained that next Medical Records Administrator should have Health and HIS system Management background because all records will become electronic.			
B. Human Resources 1. Res.2020-32, Relative to the Creation of the Emergency Department Technician I & II Positions	Mr. Mark Guayco, Hospital Unit Supervisor, informed the board that most ER Technicians have made it their career, and creating an ED Tech II position would be an opportunity for a step up which will maximize the skill mix in the Emergency Department and allow for a lead role among ER Techs and other non-licensed staff. He added that the dynamics of emergency medicine in the emergency department has changed and the need for these non-licensed staff is critical to the hospital. The request is for two ED Tech II's per shift. There will be no additions to the total number of ED Technicians. Instead six ED Tech I positions will be converted to ED Tech II. It was noted that if all six positions are filled, ER tech I's can't move up unless a position becomes vacant or if there are funds available to add additional positions. Dr. Um inquired why EKG monitoring is not a standard requirement for all ED Technicians. Ms. Tuquero explained that performing a 12 lead EKG diagnostic procedure is part of the entry level ED Tech duties but the interpretation and ability to identify critical and fatal rythyms on the spot is not part of their duties. Ms. Simbillo expressed that GMHA has not had the opportunity to put something like this into effect and suggested that if approved, the positions are monitored to decide if changes need to be made for the next budget year.	Chair & Vice-chair, HR Subcommittee	None	Tabled

		1		
C. Finance and Audit		Chair & Vice-		
 Res.2020-38, Relative to 	Trustee Waibel motioned, and it was seconded by	chair, F&A	None	Approved
Approving 140 New Fees and	Trustee Davis to approve Resolution 2020-38. The	Subcommittee		
Updating 9,119 Professional	motion carried with all ayes.			
Fees	menon came a mar an ayour			
2. June 2020 Financials and	Mrs. Hechanova reported the following:		None	Informational
Highlights	Cash		None	IIIIOIIIIationai
riigriiigrits				
	Balance: \$10M as of June 30, 2020			
	Cash increased by \$5.4M due to \$7.7M Cares			
	Act Relief Funds received in April & May,			
	\$4.5M received for Medicare Advance Payment,			
	and decrease in accounts payable.			
	Payables			
	 Accounts payable: \$5.3M as of June 30, 2020 			
	 DRT Witholding Taxes were paid off as of June 			
	19, 2020. Interest and penalty fees were			
	waived.			
	 Vendors are being paid in the over 60 day 			
	range. 90 day range vendors have gone down.			
	Most significant amount was owed to Pacific			
	Laundry for Feburary and March 2020 invoices.			
	February Invoice was paid July 2020. March			
	pending payment.			
	Revenues			
	Net patient revenue: \$6.9M			
	Billing and Collections			
	YTD collections: 55% of gross revenues			
	Payments from Medicaid are coming in regularly 201/2016 for a seal leading of third and third and third are the seal leading of the seal lea			
	3M's are now 59% of our collections, third party			
	payers are 33% and self-pay patients are 8%.			
	June collection alone was \$9.6M			
	Insurance Company Updates			
	GMHA is working to settle dispute with			
	Takecare Insurance Company.			
	 Discussions have started with Select Care 			
	Insurance Company regarding dispute over			
	Cardiac case rates.			
	 Aetna payments are slowly improving but there 			
	are issues with denials. GMHA will meet with			
	Aetna regularly to address the issues			
	Expenses			
	Operating Expenses: \$12.6M			

D. Facilities, Capital Improvement	Personnel costs have gone up mainly due to COVID Differential Pay YTD Expenses: \$100.4M Mainly for personnel costs and COVID related expenses FY2019 Audit Audit released June 28, 2020. GMHA received an unqualified opinion and audit findings under patient receivables. Audit findings under patient receivables were lssues with \$9.16M of unbilled receivables pending verification of charges. Monthly contractual estimates are not reviewed prior to posting. GMHA has taken action on this and is reevaluating contractual allowances. There is a significant amount in expense accounts. GMHA is working on clearing the accounts. The number of days from discharge to billing is ranging from 8 to 39 days for some of the samples that the auditor tested. Ms. Hechanova explained that compared to last year, the hospital is losing \$1M-\$2M a month since March due to the pandemic. Ms. Hechanova reported the following issues made by the Office of Public Accountability: "Emphasis of a matter" because the hospital relies on the government to subsidize funding. The unpaid withholding taxes. It was noted that the amount was paid off. CMS rebasing that was approved The increase in the net patient revenues	Chair & Vice-		
Projects, & Information Technology 1. US ACOE Facilities Condition Assessment, GMHA, 18-22 November 2019	Trustee Davis informed the board that the Governor tasked Mrs. Posadas to form a taskforce for the new hospital.	chair, Facilities, CIP & IT Subcommittee	None	Informational
E. Quality & Safety	Trustee Allen prepared a summary of the CY2020, 1st Quarter QAPI reports that were discussed at the July 22, 2020 Quality & Safety Subcommittee meeting and Trustee Almonte presented on her behalf.	Chair & Vice- chair, Q&S Subcommittee	None	Informational

The following were highlighted: **QAPI Reporting:**

 Detailed reports/discussions will occur at the department level meetings and summaries to be presented at Q&S Meetings.

Grievances/Complaints Reviews:

 Case regarding patient appeal for bill. Guest Relations and Fiscal is working with patient to resolve issue.

Nursing Services:

 Interventions not matched due to incorrect scoring in maternal-child health.

 Documentation not done in timely matter for Labor Room pain management.

• Communication Strategies will continue to be reinforced by Medical Surgical Unit Supervisors.

• Current Nurse to patient ratio is 1:5; national standard is 1:4.

• ER boarding patient's average length of stay improved.

 Patient's condition due to incomplete hemodialysis treatment, not due to equipment failure/malfunction.

Elopement Taskforce (QAPI):

 Left without being seen/left before final disposition in ER/Urgent Care- Solutions discussed were frequent updates on wait time and availability of products for immediate relief.

Fiscal Services Division:

 The department continues to improve in their processes and have less errors due to hiring additional staff.

Environment of Care Committee:

• Critical Processes inadvertently not completed due to ongoing pandemic.

• Handling/processing of requisitions timeframe not being met.

 Contract with Laundry Solutions ends in September 2020. GMHA is actively addressing this matter.

Patient Safety Committee:

	 Increase of active SLS accounts attributed to Patient Safety week which was held June 3-5, 2020. Divert Status continues to be monitored. Professional Support Services: There is a need for Chuukese Medical Interpreters. Suggestions were to reach out to UOG Language Department, Healing Hearts, and the court. Inappropriate serving of patient trays-Recommendation: Process that would alert patient allergies when preparing. Surgery Department: Documentation issues- Suggestion to add computer in OR so that information is documented in real time. 		
F. Governance, Bylaws, & Strategic Planning	Trustee Nededog went over recommendations with regard to the board self-evaluations: 1. Annual Orientation and review of strategic plan 2. Monthly media releases to promote all good things done by GMHA 3. Public Relations plan need to be created. 4. Schedule meetings quarterly with the Governor and key legislators to keep them informed of what's happening at the hospital. 5. Training and development plan for CEO 6. Appreciation day for CEO and Staff 7. Receive board minutes in a timely matter 8. Review CEO evaluation process Trustee Obispo informed that board that she has been meeting regularly with Mrs. Posadas and Mr. Kando to focus on the strategic plan. Trustee Obispo requested that the Governance, Bylaws, and Strategic Planning Subcommittee discuss the strategic plan and work on creating a format/structure before meeting with the full board. The Governance, Bylaws, and Strategic Planning Subcommittee scheduled to meet on August 4, 2020.	Chair & Vice-chair, GB & SP Subcommittee	Informational

		Dr. Bordallo informed the board that the volunteer PR Team created a job description which will be presented to the HR Subcommittee.			
VIII.	PUBLIC COMMENT				
		None	None	None	None
IX.	ADJOURNMENT				
		There being no further business matters for discussion, Trustee Obispo declared the meeting adjourned at 7:52 p.m., motioned by Trustee Davis and seconded by Trustee Evaristo. The motion carried with all ayes.	All Board members	None	Approved

Transcribed by:

Justine A. Camacho

Administrative Assistant

Submitted by:

Sarah Thomas-Nededog

Secretary

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the July 29, 2020 regular session meeting were accepted and approved by the GMHA Board

of Trustees on this 2nd day of September 2020.

Certified by:

Theresa Obispo Chairperson

Special Meeting of the Guam Memorial Hospital Authority Board of Trustees

Monday, August 17, 2020 | 5:00 p.m. Zoom Video Conference

Board Members

Present: Theresa Obispo, Melissa Waibel, Sarah Thomas-Nededog Byron Evaristo, Sharon Davis, Sonia Siliang, Glynis Almonte, Dr. Michael Um, Evangeline Allen

Guests:

ATTENDANCE

Minakshi Hemlani – Legal Counsel Suzanne Santiago-Hinkle – Legal Counsel George Castro – Court Reporter

Leadership

Present: Lillian Perez-Posadas

ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS	
. CALL MEETING TO ORDER AND DETERMINATION OF QUORUM					
	After notices were duly issued pursuant to Title 5 GCA, Chapter 8, <i>Open Government Law</i> , Section 8107(a) and with a quorum present, Trustee Obispo called to order the special meeting of the GMHA Board of Trustees at 5:01 p.m. on Monday, August 17, 2020 via Zoom Video Conference.	Trustee Obispo	None	None	
II. EXECUTIVE SESSION					
	At the written request of Attorney Minakshi Hemlani, Trustee Evaristo motioned, and it was seconded by Trustee Davis, to hold an executive session to discuss matters relating to ongoing litigation. The motion carried with all ayes. The Board of Trustees went into executive session at 5:02 p.m. At 5:43 p.m., the Board reconvened for regular session. Trustee Davis motioned, and it was seconded by Trustee Almonte, to accept legal counsel's recommendation in regard to a claim from Catholic Social Services. The motion carried with all ayes. Trustee Evaristo motioned, and it was seconded by	Board of Trustees	None	Approved Approved	
	Trustee Davis, to accept legal counsel's recommendation in regard to Case No. CV 419-14, Crystal Pangelinan & Mark Pangelinan v. Guam Memorial Hospital Authority. The motion carried with all ayes.				

V. PUBLIC COMMENT				
	There were no public comments taken.	None	None	None
VI. ADJOURNMENT		1 14 1		
	There being no further matters for discussion, Trustee Obispo declared the meeting adjourned at 5:46 p.m., motioned by Trustee Waibel and seconded by Dr. Um. The motion carried with all ayes.	All Board members	None	Approved

Transcribed by:

Justine A. Camacho Administrative Assistant Submitted by:

Sarah Thomas-Nededog

Secretary

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the August 17, 2020 special session meeting was accepted and approved by the GMHA Board of Trustees on this 2nd day of September 2020.

Certified by:

Theresa Obispo Chairperson

GUAM MEMORIAL HOSPITAL AUTHORITY

Strategic Plan Implementation Report

Strategic Goal # 1 – Achieve Financial Stability

- O What does this mean?
 - Improve cash flow by addressing 7 distinct issues
 - 10 strategies
- O What is our goal?
- What are the metrics we are using to determine our progress with achieving financial stability?
 - % of cash flow improvement?
 - Improvement in collection?
 - Increase in revenue?

• Strategic Goal # 2 – Leadership Team Development

- O What does this mean?
 - Main objective is "to develop a leadership team capable of properly leading, managing, and holding accountable the staff
 - 5 strategies
- O What is our goal?
- What are the metrics we are using to determine our progress with achieving development of our leadership team?

Strategic Goal # 3 – Establishing and Sustaining Safety and a Quality Culture

- O What does this mean?
 - Main objective is to effectively establish and sustain GMHA's safety and quality culture
 - 15 strategies
- O What is our goal?
- What are the metrics we are using to determine our progress with sustaining safety and a quality culture?

Strategic Goal # 4 – Training and Education Assessment, Development and Implementation

- O What does this mean?
 - Main objective is to effectively assess, develop and implement GMHA's training and education plan
 - 5 strategies
- o What is our goal?
- What are the metrics we are using to determine our progress with implementing our training and education plan?

• Strategic Goal # 5 – Capital Improvement Planning and Implementation

- O What does this mean?
 - Main objective is to effectively develop and implement GMHA's Capital Improvement Plan to include modernization and/or replacement of its Facilities and obsolete infrastructure
 - 4 strategies
- O What is our goal?
- What are the metrics we are using to determine our progress with achieving the planning and implementation of our capital improvement





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BOARD OF TRUSTEES
Official Resolution No. 2020-49

"Relative to Approving Revisions to the Medical Staff Bylaws"

WHEREAS, the Medical Staff Bylaws and Medical Executive Committees, had reviewed the Medical Staff Bylaws and Medical Staff Rules and Regulations; and

WHEREAS, as a result of the review, proposed revisions were made and to the Medical Staff Bylaws, Article VI Clinical Privileges; 6.7 Emergency Clinical Privileges for a Medical Disaster by the Hospital Administrator: and 6.8 Telemedicine Privileges

WHEREAS, on September 2, 2020 recommended that the Board of Trustees approve the proposed revisions to the Medical Staff Bylaws; now, therefore be it

RESOLVED, that the Board of Trustees accepts and approves as recommended; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2nd DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo

Chairperson, Board of Trustees

Attested by:

GUAM MEMORIAL HOSPITAL AUTHORITY

MEDICAL STAFF OFFICE

PROPOSED REVISIONS FORM

Item: Medical Staff Bylaws

Existing	Proposed	Rationale
ARTICLE VI: CLINICAL	ARTICLE VI: CLINICAL PRIVILEGES	
PRIVILEGES	6.7 EMERGENCY CLINICAL PRIVILEGES FOR A	
6.7 EMERGENCY CLINICAL	MEDICAL DISASTER BY THE HOSPITAL	Contingency plan during an emergency declaration.
PRIVILEGES FOR A MEDICAL	ADMINISTRATOR:	
DISASTER BY THE HOSPITAL	$\overline{6.7-3}$ (d) Identification that the individual is a member of a	
ADMINISTRATOR:	Defense Health Administrator (DHA), Virtual Medical	
6.7-3(d) Identification that the individual is	Center (VMC)Disaster Medical Assistance Team	
a member of a Disaster Medical	(DMAT), Medical Reserve Corps (MRC) unit	
Assistance Team (DMAT),		
Medical Reserve Corps (MRC)		
unit		
A. DEFINITION OF TELEMEDICINE PRIVILEGES "Telemedicine Privileges" means the authorization granted by the Board of Trustees to a Practitioner not residing on Guam to render a diagnosis of a patient at the Hospital through the use of electronic communication or other communication technologies. The	6.8 TELEMEDICINE PRIVILEGES A. DEFINITION OF TELEMEDICINE PRIVILEGES "Telemedicine Privileges" means the authorization granted by the Board of Trustees to a Practitioner not residing on Guam to render a diagnosis of a patient at the Hospital through the use of electronic communication or other communication technologies. The Practitioner will not be an active member and may not provide direct patient care not write orders. In the event of a Public Health Emergency declared by	
Practitioner will not be an active member and may not provide direct patient care not write orders.	the President of the United States or a State of Emergency declared by the Governor of Guam, as permitted by law and regulation, providers with telemedicine privileges may provide definitive diagnosis and treatment, and may write orders independently, within the scope of their consultation.	

Reviewed by Bylaws: 09/02/2020

<u>Approved:</u>
Bylaws Committee: 09/02/2020 Urgent amendment due to COVID-19

MEC: 09/02/2020 JCPAC: N/A BOT: 09/02/2020





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BOARD OF TRUSTEES
Official Resolution No. 2020-39

"RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<u>Practitioner</u>	<u>Department</u>	Specialty	Expiration Date
Milliecor Fojas, MD	Pediatrics	Pediatrics	July 31, 2022
Seung Young Huh, MD	Emergency Medicine	Emergency Medicine	July 31, 2022
Angelito Santos, MD	Emergency Medicine	Emergency Medicine	July 31, 2022
Frankie Mendiola, MD	Emergency Medicine	Emergency Medicine	July 31, 2022
Nathaniel Berg, MD.	Radiology	Radiology	July 31, 2022
Xavier Packianathan, MD.	Radiology	Radiology	July 31, 2022
Arsalan Saleem, MD.	Radiology	Radiology	July 31, 2022
Saied Safabakhsh, MD.	Medicine	Nephrology	July 31, 2022
Alessandro Giambartolomei, MD.	Medicine	Cardiology	July 31, 2022
Jennifer Chang, MD.	Medicine	Internal Medicine	July 31, 2022
Sherif Philips, MD.	Medicine	Nephrology	July 31, 2022
Friedrich Bieling, MD.	Ob/Gyn	Ob/Gyn	July 31, 2022
Faye Jensen, MD.	Ob/Gyn	Ob/Gyn	July 31, 2022

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee met on July 29, 2020 and the Joint Conference and Professional Affairs Committee on August 5, 2020 recommended approval of Active Medical Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2nd DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo Chairperson Attested by:

Sarah Thomas-Nededog





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BOARD OF TRUSTEES
Official Resolution No. 2020-40

"RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES"

<u>Practitioner</u>	Department	Specialty	Expiration Date
Albert Im, MD	Surgery	General Surgery	July 31, 2021
Daniel Oh, MD	Surgery	General Surgery	July 31, 2021
Philip Tutnauer, DPM	Surgery	Podiatry	July 31, 2021
Fatmah Albaaj, MD	Medicine	Family Medicine	July 31, 2021

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.3; and

WHEREAS, the Medical Executive Committee met on July 29, 2020 and the Joint Conference and Professional Affairs Committee on August 5, 2020 recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Provisional Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Provisional Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2ND DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo Chairperson Attested by:

Sarah Thomas-Nededog





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BOARD OF TRUSTEES Official Resolution No. 2020-41

"RELATIVE TO THE REAPPOINTMENT OF FULL ALLIED HEALTH PROFESSIONAL STAFF PRIVILEGES"

Practitioner Practitioner	Department	Specialty	Expiration Date
Janet Nightingale, CNM	Ob/Gyn	Certified Nurse Midwife	July 31, 2022
Khampho Ohno, PA-C	Ob/Gyn	Physician Assistant	July 31, 2022
Matthew Marsh, PA-C	Ob/Gyn	Physician Assistant	July 31, 2022
Adrian Medina, CNM	Ob/Gyn	Certified Nurse Midwife	July 31, 2022

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.2; and

WHEREAS, the Medical Executive Committee met on July 29, 2020 and the Joint Conference and Professional Affairs Committee on August 5, 2020, recommended approval of Full Allied Health Staff Membership appointment for the above listed practitioner; and

WHEREAS, all reappointments to Full Allied Health Professional Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Full Allied Health Professional Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2ND DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo Chairperson Artested by:

Sarah Thomas-Nededog





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BOARD OF TRUSTEES
Official Resolution No. 2020-42

"RELATIVE TO THE APPOINTMENT OF ALLIED HEALTH PROFESSIONAL PROVISIONAL STAFF PRIVILEGES"

<u>Practitioner</u>	Department	Specialty	Expiration Date
Lean Carlo Losinio, CNM	Ob/Gyn	Certified Nurse Midwife	July 31, 2021
Bethany Helm, PA-C	Ob/Gyn	Physician Assistant	July 31, 2021

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.2; and

WHEREAS, the Medical Executive Committee on July 29, 2020 and the Joint Conference and Professional Affairs Committee on August 5, 2020 recommended approval of Full Allied Health Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Allied Health Professional Provisional Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Allied Health Professional Provisional Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2ND DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo Chairperson Attested by:

Sarah Thomas-Nededog





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BOARD OF TRUSTEES
Official Resolution No. 2020-43

"RELATIVE TO THE APPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES FOR FRANKIE MENDIOLA, MD. ON THE CONDITIONS THAT HE BE PLACED ON A "FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)"

WHEREAS, Frankie Mendiola, MD met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on July 29, 2020 recommended approval of Active Medical Staff Membership reappointment for Frankie Mendiola, MD: and

WHEREAS, the Joint Conference and Professional Affairs Subcommittee on August 5, 2020 recommended approval of Active Medical Staff Membership reappointment for Frankie Mendiola, MD with a FPPE to address concerns brought forth to the committee with respect to his compliance with Meeting Attendance Requirements; and

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify Frankie Mendiola, MD and all Hospital Medical Departments of this reappointment; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2ND DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo Chairperson Actested by:

Sarah Thomas-Nededog





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BOARD OF TRUSTEES
Official Resolution No. 2020-44

"RELATIVE TO THE APPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES FOR SAIED SAFABAKHSH, MD. ON THE CONDITIONS THAT HE BE PLACED ON A "FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)"

WHEREAS, Saied Safabakhsh, MD met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on July 29, 2020 recommended approval of Active Medical Staff Membership reappointment for Saied Safabakhsh, MD: and

WHEREAS, the Joint Conference and Professional Affairs Subcommittee on August 5, 2020 recommended approval of Active Medical Staff Membership reappointment for Saied Safabakhsh, MD with a FPPE to address concerns brought forth to the committee with respect to his compliance with Meeting Attendance Requirements; and

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify Saied Safabakhsh, MD and all Hospital Medical Departments of this reappointment; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2nd DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo Chairperson Attested by:

Sarah Thomas-Nededog





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"RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<u>Practitioner</u>	<u>Department</u>	Specialty	Expiration Date
Willie Bruce, DO	Emergency Medicine	Emergency Medicine	August 31, 2022
Aaron Johansen, MD	Emergency Medicine	Emergency Medicine	August 31, 2022
Deborah Swena, MD	Ob/Gyn	Ob/Gyn	August 31, 2022
Isaias Coelho, MD	Ob/Gyn	Ob/Gyn	August 31, 2022
Ornusa Teerasukjinda, MD	Medicine	Internal Medicine	August 31, 2022
Suwarat Wongjittraporn, MD	Medicine	Internal Medicine	August 31, 2022
Edward Blounts, DO	Medicine	Internal Medicine	August 31, 2022
Silvia Romine, MD	Medicine	Internal Medicine	August 31, 2022

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on August 26, 2020; and the Joint Conference and Professional Affairs Committee on September 2, 2020 recommended approval of Active Medical Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2nd DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo
Chairperson, Board of Trustees

Attested by:





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BOARD OF TRUSTEES
Official Resolution No. 2020-47

"RELATIVE TO THE APPOINTMENT OF ACTIVE ASSOCIATE MEDICAL STAFF PRIVILEGES"

PractitionerDepartmentSpecialtyExpiration DateMarlon Ramilo, MDMedicineCardiologyAugust 31, 2022

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.6; and

WHEREAS, the Medical Executive Committee on August 26, 2020; and the Joint Conference and Professional Affairs Committee on September 2, 2020 recommended approval of Active Medical Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all reappointments to Active Associate Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2nd DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo

Chairperson, Board of Trustees

Attested by:





850 GOV. CARLOS G. CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: (671) 647-2409 OR 647-2171 FAX: (671) 646-9215 BOARD OF TRUSTEES Official Resolution No. 2020-48

"RELATIVE TO THE APPOINTMENT OF ALLIED HEALTH PROFESSIONAL PROVISIONAL STAFF PRIVILEGES"

PractitionerDepartmentSpecialtyExpiration DateMegan Taylor, NPMedicineFamily Nurse PractitionerAugust 31, 2021

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.7.; and

WHEREAS, the Medical Executive Committee on August 26, 2020; and the Joint Conference and Professional Affairs Committee on September 2, 2020 recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Provisional Allied Health Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Provisional Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2nd DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo

Chairperson, Board of Trustees

Attested by:





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BOARD OF TRUSTEES Official Resolution No. 2020-32

"RELATIVE TO THE CREATION OF THE EMERGENCY DEPARTMENT TECHNICIAN I & II POSITIONS"

WHEREAS, on June 10, 2019, the Emergency Department requested for the creation of new positions that will establish a series for the Emergency Room Technician from a single position to a three level series that will assist the department in adapting with the ever changing demands of healthcare and standards of care involving diseases of the heart; and

WHEREAS, in January 2020, a review of the request was conducted by the Human Resources Department and the results concluded that the creation of position was warranted for two technician levels; and

WHEREAS, on March 23, 2020, the Hospital Administrator/CEO approved the creation of position petition for the Emergency Department and the abolishment of the existing Emergency Room Technician position; and

WHEREAS, the provisions of 4 GCA, Chapter 6, § 6303.1(a) - Transparency and Disclosure for the creation of positions have been met; and

WHEREAS, the class specification of the positions is hospital specific and that there is no impact on any other agency outside the Authority; and

WHEREAS, the Human Resources Subcommittee on May 12, 2020 recommended approval to accept the Hospital Administrator's petition to create and establish the Emergency Department Technician I and II positions and to abolish the existing Emergency Room Technician position; and

WHEREAS, the BOT on June 24, 2020 deliberated on the Hospital Administrator's petition and requested for additional information; and

WHEREAS, the Human Resources Subcommittee on July 13, 2020 reported that at least two positions from each shift will be eligible for promotion to the proposed Emergency Department Technician II level and that the main justification for the two levels of technicians are as follows: to provide skill development for incumbents with additional certification in cardiac monitoring; to build capacity of level-one staff to assist with more complex trauma cases; and to help attract and retain applicants/incumbents with non-licensed emergency services or technician certification; now, therefore be it

RESOLVED, that the GMHA Board of Trustees accepts the Human Resources Subcommittee's recommendation and approves the attached proposed class specifications as of July 14, 2020 by the Human Resources Department for the positions of Emergency Department Technician I and II, and the abolishment of the Emergency Room Technician position; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2nd DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo Chairperson Sarah Thomas-Nededog

EMERGENCY DEPARTMENT TECHNICIAN I & II

NATURE OF WORK IN THIS CLASS:

Emergency Department Technician I – This class represents the entry level where positions receive training in and experience with daily emergency activities in the care of patients in the Emergency Department including responsible nursing assistance work. Explicit guidelines are available and work is performed under close supervision, routinely subject to technical review for knowledge of and adherence to established procedures on the emergency care and safety of patients. As competence is gained and independent performance is assumed, more difficult duties are assigned on a progressively responsible basis.

<u>Emergency Department Technician II</u> – This class represents the independent worker level where positions perform the full range of daily emergency activities in the care of patients in the Emergency Department working under the general direction of their respective shift Registered Nurse or Licensed Practical Nurse. Employees in this class perform moderately complex technical nursing assistance work independently on an ongoing basis and participate in a variety of complex technical duties under closer supervision. May occasionally assist the LPN with lead duties.

ILLUSTRATIVE EXAMPLES OF WORK: (These examples do not list all the duties which may be assigned; any one position may not include all the duties listed.)

Assists the registered nurses and/or the physicians in emergency procedures such as the delivery of babies in the emergency room or near/within the hospital's premise, cardiac resuscitation of patients, assisting in the application of tracheostomy procedures, or the application of orthopedic procedures (i.e., closed reduction, dislocation, splinting, application of casts, etc.).

Prepares instruments and supplies required in the care of patients and/or assists the registered nurse and/or physician in the preparation and application of equipment and supplies required for treatment to include, but not limited to oxygen therapy, intermittent positive pressure breathing, resuscitating, cardiac monitoring, defibrillator use, and suctioning; assists the physician in the procedure for suturing wounds by prepping, sponging, cutting of sutures and applying the dressing.

Obtains brief patient medical history and the nature of emergency illness, communicates findings to the registered nurse and/or physician; obtains and records vital signs of patients and reports abnormal findings to the registered nurse and/or physician; provides instructions to patients regarding the usage of crutches and other assistive devices.

Performs removal of orthopedic casts, sutures and dressings; applies and removes steri-strips and dressing under the supervision of a physician; assists in the debridement of wounds; cleans surgically affected areas with specified preparation and instructions; obtains laboratory specimens; performs simple urine tests; performs vision and hearing testing; transports or moves patients as needed to the appropriate ward or department.

Cleans equipment and certain areas of the emergency department; orders supply and replenishes them as needed.

Assists in the management of violent or disruptive patients; applies cooling measures as ordered by the physician.

Performs and records inventory of personal belongings of patients as needed; conducts informal on-the-job orientation and training for less experienced employees and/or lower-level staff.

Participates in staff conferences, meetings, staff development, and in-service training programs.

Maintains records and prepares reports.

Performs related work as assigned.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS: (The knowledge, abilities, and skills required in order to effectively perform the key duties for each of these classes are indicated in the following table. The degree of each knowledge, ability, and skill required is commensurate with the scope and level of complexity of the duties and responsibilities that are reflected in each class.)

"P" indicates <u>prerequisite</u> knowledge, abilities, and skills that must be brought to the job.

"A" indicates knowledge, abilities, and skills that are required for full performance but may be <u>acquired</u> on the job within the probationary period. Otherwise "n/a" indicates not applicable.

	EMERGENCY DEPARTMENT TECHNICIAN		
KNOWLEDGE:			
1.	of the general principles, methods, materials and practices employed in the emergency department.		P
2.	in the use, operation and maintenance of the equipment used in the emergency room and the use of sterile techniques and first-aid procedures.	Α	P
3.	of Basic Life Support methods and techniques.	P	P
4.	of Cardiac Monitoring-EKG methods and practices.	n/a	P
ABILITY:		1	- 11
5.	to learn and understand medical terms and procedures relating to the work.	P	P
6.	to work effectively with the public and employees.	P	P
7.	to communicate effectively, orally and in writing.	P	P
8.	to work closely with and anticipate the needs of the patient and physician.	Ρ	P
9.	to work well in high stress situations.	A	Ρ
10.	to follow detailed instructions.	P	P
11.	to use and operate a computer.	P	P
12.	to keep clinical records and charts.	P	P
13.	to exercise emotional control in working with patients.	A	P
14.	to lead others.	n/a	A
SKI	u:		- 11
15.	in the use and care of equipment and instruments used within the emergency department.	A	P

MINIMUM EXPERIENCE AND TRAINING:

Basic Education/Experience Requirements

Applicants must possess a high school diploma or equivalent, and work experience as a nurse aide and in emergency patient services in a hospital, clinic, or emergency transport.

<u>General Experience:</u> Progressively responsible work experience which demonstrated the ability to care for or transport patients or serve as a nurse aide or EMT; follow instructions; learn medical terminology; communicate effectively orally and in writing; and operate a computer.

<u>Specialized Experience</u>: Progressively responsible work experience in a hospital, clinic, or transport providing emergency care to patients; assisting a registered nurse or physician in the treatment of patients; using and maintaining emergency equipment or assisting a registered nurse or physician in the use of emergency equipment; using computer equipment or systems to monitor patient vital signs and/or communicating with a nurse or physician in the care of a patient.

CLASS TITLE	General Experience (years)	Specialized Experience (years)	Total Experience (years)
Emergency Department Technician I	1	1	2
Emergency Department Technician I			

Page 3 of 3
Emergency Department Technician I & II

CLASS TITLE	General	Specialized	Total
	Experience	Experience	Experience
	(years)	(years)	(years)
Emergency Department Technician II	1	3	4

CLASS TITLE	Necessary Special Qualifications	Hay		
		Evaluation		
Emergency Department Technician I	Possession of a current AHA Basic Life Saving (BLS) Certificate or Emergency Medical Services/Technician (EMS/EMT) Certificate.	HAY EVALUATION KNOW HOW:	H (GPP) CI2 C2(19%) CNII	115 22 29 166
Emergency Department Technician II	Possession of a current AHA Basic Life Saving (BLS) Certificate or Emergency Medical Services/Technician (EMS/EMT) Certificate; and Cardiac Monitoring – EKG Class Certification.		I (GPP) CI2 C2(22%) CNII	132 29 33 194

ESTABLISHED: September 2, 2020

THERESA OBISPO, Chairperson Board of Trustees





850 GOV. CARLOS G. CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: (671) 647-2409 OR 647-2171 FAX: (671) 646-9215

BOARD OF TRUSTEESOfficial Resolution No. 2020-45

"RELATIVE TO THE ESTABLISHMENT OF THE ASSISTANT ADMINISTRATOR OF PROFESSIONAL SUPPORT SERVICES IN THE CLASSIFIED SERVICE"

WHEREAS, the current Assistant Administrator, Professional Support Services position is under the unclassified service of the government of Guam; and

WHEREAS, the current position is vacant and moving forward it would be in the best interest of GMHA to establish the position in the classified service for purposes of recruitment and retention and to provide continuity and stability of operations; and

WHEREAS, on June 12, 2020, the Hospital Administrator/CEO approved the amendment of position to remove the unclassified service designation; and

WHEREAS, the provisions of 4 GCA, Chapter 6, § 6303.1(a) - Transparency and Disclosure for the amendment of position has been met; and

WHEREAS, the class specification of the position is hospital specific and that there is no impact on any other agency outside the Authority; and

WHEREAS, the Human Resources Subcommittee on July 13, 2020 recommended approval to accept the Hospital Administrator's request to establish the Assistant Administrator, Professional Support Services position in the classified service; now, therefore be it

RESOLVED, that the GMHA Board of Trustees accepts the Human Resources Subcommittee's recommendation and approves the attached proposed amended class specification by the Human Resources Department for the position of Assistant Administrator, Professional Support Services; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 2nd DAY OF SEPTEMBER 2020.

Certified by:

Theresa Obispo Chairperson Actestectby:

Sarah Thomas-Nededog

ASSISTANT ADMINISTRATOR, PROFESSIONAL SUPPORT SERVICES

NATURE OF WORK IN THIS CLASS:

This is highly responsible senior health care management work involving the administration of all ancillary services provided by the Hospital.

The employee in this class is responsible for directing and coordinating the operations and delivery of comprehensive diagnostic and therapeutic professional services to include, but not limited to radiology, laboratory, pharmacy, respiratory care, dietetic services, rehabilitative and social services.

<u>ILLUSTRATIVE EXAMPLES OF WORK:</u> (These examples do not list all the duties which may be assigned; any one position may not include all the duties listed.)

Evaluates and assesses the organization and delivery of services; initiates changes to improve the efficiency and quality of the ancillary services provided.

Establishes division goals in collaboration with department managers; aligns division goals with the goals and mission of the Hospital.

Prepares and defends proposals for the capital and operating budgets of the division; participates in quarterly evaluations and assesses the budgetary performance of the division.

Reviews and approves all program staffing levels; assesses, researches, and implements recruitment and retention strategies pursuant to policies and procedures established for the recruitment, allocation, and management of personnel.

Actively supports the procurement of equipment and supplies; ensures the sufficient availability and inventory of supplies and equipment to provide quality and safe patient care.

Implements the quality assessment and performance improvement programs of the division; ensures compliance with and maintenance of established standards of care and the elements of performance mandated by accrediting bodies.

Serves as an advisor to the Hospital Administrator/CEO on all matters pertaining to ancillary services; represents the hospital as the ancillary services resource person in meetings, conferences, and with community organizations.

Participates with the medical and professional staff in the formulation and development of major operational policies of the Hospital; updates, implements and maintains policies and procedures which promote efficient and effective patient care and delivery.

Conducts unit inspections and visits with staff and patients to assess compliance with established standards and policies which promote quality, reliability and safety; takes appropriate corrective actions as necessary on inspection findings.

Invests, promotes, and implements training and education programs to orient and continually develop all ancillary personnel; collaborates with HR on personnel management issues, to include, but not limited to the timely submission of employee performance evaluations, pay administration matters, employee grievance, and employee discipline.

Ensures that procedures are in place to effectively address patient rights; resolves ethical issues and addresses educational and discharge planning needs.

Evaluates service fees and conducts appropriate financial analysis to ensure that revenues reflect costs of services; makes recommendations for inclusion to the Chief Financial Officer.

Page 2

Assistant Administrator, Professional Support Services

Monitors department/program productivity and effectiveness by adhering to QAPI standards and submitting timely QAPI reports; establishes and enforces procedures for the documentation of the ancillary process and services provided.

Participates in continuing educational activities that include, but is not limited to the review of journal articles and/or conducting research to keep abreast of current administrative or clinical trends.

Supervises the administrative support staff of the division.

Performs related work as assigned.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of the principles, practices, and theory of ancillary administration and the application of techniques in providing professional care to patients.

Knowledge of supervisory and management principles, strategies, and interventions involved in ancillary administration.

Knowledge of the trends and current developments in ancillary administration and the clinical areas of service which are provided by the Hospital.

Knowledge of capital and operating budget methods and processes.

Knowledge of clinical standards and practices mandated by national accrediting bodies.

Knowledge of quality/process improvement methods and techniques.

Ability to make work decisions in accordance with professional standards, ethics, the law, rules and regulations, and established policies and procedures.

Ability to plan, organize, coordinate, and direct the work of others.

Ability to communicate effectively, orally and in writing.

Ability to work effectively with the public and employees.

Ability to maintain records and prepare complex reports.

MINIMUM EXPERIENCE AND TRAINING:

- a) Graduation from an accredited college or university with a Master's degree in Health Science, Health Administration or a closely related field and four years of progressively responsible hospital experience which includes three years in an administrative or supervisory capacity; or
- b) Graduation from an accredited college or university with a Bachelor's degree in Health Science, Health
 Administration or a closely related field and six years of progressively responsible hospital experience which
 includes four years in an administrative or supervisory capacity.

ESTABLISHED: October 13, 2003

AMENDED: September 2, 2020

PAY GRADE/PLAN: S (GPP)

HAY EVALUATION

KNOW HOW: FII3 400
PROBLEM SOLVING: F4(50%) 200
ACCOUNTABILITY: E3S 230
TOTAL POINTS - 830

THERESA OBISPO, Chaleperson

Board of Trustees

4:00 PM - Guam Board of Medical Examiners

As of August 28, 2020, this meeting has been postponed till further notice

Click

(https://drive.google.com/file/d/1Lhmur1AagotGYHu1lEOUUHOtmeMsMGV-/view? usp=sharing) for official postponement.

Reconvene Guam Board of Medical Examiners (GBME)

Date/Time: Wednesday, September 2, 2020 – 4:00 PM – 5:00 PM

Join GoToMeeting

Please join my meeting from your computer, tablet or smartphone https://global.gotomeeting.com/join/408918013

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You can also dial in using your phone. (For supported devices, tap a one-touch number below to join instantly.)

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5:00 PM - Guam Memorial Hospital Authority Board of Trustees

The GMHA Board of Trustees will convene for a meeting via Zoom Video Conferencing on Wednesday, September 2, 2020 at 5:00 p.m.

To join the meeting, you may enter this link (https://zoom.us/j/91950908784? pwd=aGljUlNidmdjUkxkWTl5ZnJMMopMdzo9 (https://zoom.us/j/91950908784? pwd=aGljUlNidmdjUkxkWTl5ZnJMMopMdzo9)) into your browser or download the app on your mobile device, and enter Meeting ID: 919 5090 8784; Password: 405677.

For further inquiries, please contact the Board Desk at 648-7997.

Tuesday, September 01, 2020

oagguam.org/govguam-meetings/





850 GOV. CARLOS G. CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: (671) 647-2409 OR 647-2171 FAX: (671) 646-9215

September 4, 2020

VIA ELECTRONIC MAIL

Benjamin J.F. Cruz Public Auditor Office of Public Accountability Suite 401 DNA Building 238 Archbishop Flores Street Hagatna, GU 96910

RE: Reporting Requirements for Boards and Commissions

Dear Mr. Cruz:

To comply with Ch. 8 of Title 5 GCA, Section 38, §8113.1, Reporting Requirements for Boards and Commissions, the GMHA hereby submits the recording for the September 2, 2020 GMHA Board of Trustees Meeting via Google Drive as guided by your office.

Please contact Justine Camacho, Administrative Assistant – Board Office, at 648-7997 or by email at justine.camacho@gmha.org for any questions or clarifications.

Sincerely,

Lilliah Perez-Posadas, RN, MN Hospital Administrator/CEO





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September 4, 2020

VIA ELECTRONIC MAIL

Honorable Lourdes A. Leon Guerrero I Maga'hågan Guåhan Ricardo J. Bordallo Governor's Complex Adelup, GU 96910

RE: Reporting Requirements for Boards and Commissions

Dear Governor Leon Guerrero:

To comply with Ch. 8 of Title 5 GCA, Section 38, §8113.1, Reporting Requirements for Boards and Commissions, the GMHA hereby submits the recording and materials presented and discussed at the September 2, 2020 Meeting of the GMHA Board of Trustees.

Please contact Justine Camacho, Administrative Assistant – Board Office, at 648-7997 or by email at justine.camacho@gmha.org for any questions or clarifications.

Kindest Regards,

Lillian Perez-Posadas, RN, MN Hospital Administrator/CEO





850 GOV. CARLOS G. CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: (671) 647-2409 OR 647-2171 FAX: (671) 646-9215

September 4, 2020

VIA ELECTRONIC MAIL

Honorable Tina Muña Barnes Speaker of I Minatrentai Singko Na Liheslaturan Guåhan 163 Chalan Santo Papa Hagåtña, GU 96910

RE: Reporting Requirements for Boards and Commissions

Dear Speaker Barnes:

To comply with Ch. 8 of Title 5 GCA, Section 38, §8113.1, Reporting Requirements for Boards and Commissions, the GMHA hereby submits the recording and materials presented and discussed at the September 2, 2020 Meeting of the GMHA Board of Trustees.

Please contact Justine Camacho, Administrative Assistant – Board Office, at 648-7997 or by email at justine.camacho@gmha.org for any questions or clarifications.

Kindest Regards,

Lillian Perez-Posadad, RN, MN Hospital Administrator/CEO