

MEETING IN PROGRESS

GMHA Board of Trustees

Wednesday, May 22, 2024 | 5:00 p.m.

Zoom Video Conference

AGENDA

Guam Memorial Hospital Authority – Board of Trustees Meeting

May 22, 2024 | 5:00 p.m. | Zoom Video Conference

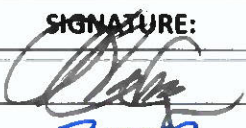

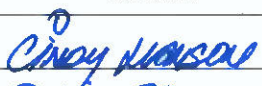



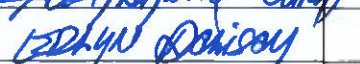

BOARD MEMBERS: Theresa Obispo, Chairperson; Edgar Aguilar, Vice-chairperson; Sonia Siliang, Treasurer; Sharon Davis, Secretary; Michael Um, MD, Trustee; Teresa Damian-Borja, MD, Trustee, Antoinette Kleiner, Trustee

Item	Owner
I. Welcoming Call Meeting to Order and Determination of Quorum	Trustee Obispo
II. Open Government Compliance	
A. Publication, May 15, 2024	
B. Publication, May 20, 2024	
C. GovGuam Notices Portal & Website Posting	
III. Review and Approval of the Minutes	All Trustees
A. April 24, 2024	
IV. Old Business	
A. Res. 2024-31, Relative to the Declaration of Officers of the Guam Memorial Hospital Authority Board of Trustees	All Trustees
V. New Business	All Trustees
VI. Management's Report	Executive Management
VII. Guam Memorial Hospital Volunteers Association Report	GMHVA President
VIII. Board Subcommittee Reports	
A. Joint Conference and Professional Affairs	Trustee Dr. Um
1. Res. 2024-32, Relative to the Reappointment of Active Medical Staff Privileges	
2. Res. 2024-33, Relative to the Appointment of Provisional Medical Staff Privileges	
3. Policy No.: A-MS100 - Disruptive Practitioner	
4. CY2023 Strategic Goal: 5 Engage Physicians	
B. Human Resources	Vice Chairperson Obispo
1. Revenue Cycle Management Administrator	
2. CY2023 Strategic Goal 4: Engage the Healthcare Workforce	
C. Facilities, Capital Improvement Projects, and Information Technology	Trustee Davis
1. Harmon Warehouse Mold Remediation Plan of Corrective Action	
2. Critical Infrastructure Projects (\$20M ARPA Funding)	
3. MCH Renovation & Expansion Project	
4. OB Ward/L&D Power Source Project	
5. GMHA 1 st Floor Elevator Lobby & 3 rd Floor Med Surg 2 Leaks AARP & IP	
6. CY2023 Strategic Goal 2: Enhance Infrastructure & Technology	
D. Quality and Safety	Trustee Obispo, Kleiner
1. CY2023 Strategic Goal 3: Transform Healthcare Services	
E. Finance and Audit	Trustee Aguilar, Obispo
1. Res. 2024-34, Relative to Approval of Patient Receivable Accounts Batch No. 2024-004	
2. CY2023 Strategic Goal 1: Achieve Financial Viability	
F. Governance, Bylaws, and Strategic Planning	Trustees Dr. Borja, Siliang
1. CY2023 Strategic Goal 6: Engage & Partner with the Community	
IX. Public Comment	
X. Adjournment	Trustee Obispo

GMHA Board of Trustees Meeting

ATTENDANCE SHEET

Wednesday, May 22, 2024 | 5:00 p.m. | Zoom Video Conference

	NAME:	TITLE:	SIGNATURE:
Board of Trustees	Theresa Obispo	Chairperson	
	Edgar Aguilar	Vice-Chairperson	Zoom
	Sharon Davis	Secretary	Zoom
	Sonia Siliang	Treasurer	Zoom
	Michael Um, MD	Trustee	Zoom
	Teresa Damian-Borja, DPM	Trustee	Zoom
	Antoinette Kleiner	Trustee	Antoinette Kleiner (missing)
Executive Management/Medical Staff	Dustin Prins, DPM	Acting Hospital Administrator/CEO	
	Rizaldy Tugade	Acting Associate Administrator of Operations	Zoom
	Rodalyn Gerardo	Deputy Assistant Administrator, Operations	Rmagnumb
	Jonathan Sidell, MD	Acting Associate Administrator, Medical Services	In Sidell
	Ana Belen Rada	Assistant Administrator, Professional Support Services	Zoom
	Christine Tuquero	Assistant Administrator, Nursing Services	
	Liezl Concepcion	Deputy Assistant Administrator, Nursing Services	Zoom
	Yukari Hechanova	Chief Financial Officer	Hechanova
	Danielle Manglona	Administrator of Quality, Patient Safety and Regulatory Compliance	Zoom
	Jeffery Shay, MD	Medical Staff President	
Guest(s)	NAME:	TITLE:	SIGNATURE:
			Zoom
			Zoom
			Zoom
			Zoom
			Zoom
			Zoom

Jordan Pauluhn Legal Counsel



**Regular Meeting of the
Guam Memorial Hospital Authority
Board of Trustees**

Wednesday, April 24, 2024 | 5:00 p.m.
Zoom Video Conference

ATTENDANCE

Board Members

Present: Theresa Obispo, Sonia Siliang, Dr. Michael Um, Dr. Teresa Damian-Borja, Sharon Davis, Antoinette Kleiner & Edgar Aguilar

Absent:

Absent: Dr. Jeffery Shay, Dr. Larry Lizama, Liezl Concepcion, Hilda Pellacani & Ana Belen Rada

Leadership

Present: Dr. Dustin Prins, Rizaldy Tugade, William Kando, Rodalyn Gerardo, Dr. Jonathan Sidell, Christine Tuquero, Yukari Hechanova & Danielle Manglona

Guests: Tony Aguon, Sydnie Taisacan, Vince Quichocho, Jordan Pauluhn, Robert Weinberg, Amy Rose Edmonson, Colleen Bamba, Aida Yap, Edlyn Dalisay, Joseph Taitano, Rayna Cruz & Brenda Sana

ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
I. CALL MEETING TO ORDER AND DETERMINATION OF QUORUM				
	After notices were duly issued pursuant to Title 5 GCA, Chapter 8, Open Government Law, Section 8107(a) and with a quorum present, Chairwoman Obispo called to order the regular meeting of the GMHA Board of Trustees at 5:05 p.m. on Wednesday, April 24, 2024, via Zoom Video Conferencing.	Chairwoman	None	None
II. REVIEW AND APPROVAL OF MINUTES				
A. March 27, 2024	Trustee Dr. Um motioned, and it was seconded by Trustee Dr. Damian-Borja to approve the March 27, 2024 minutes as presented. The motion carried with all ayes.	All Trustees	None	Approved
III. OLD BUSINESS				
A. Nomination and Election of Board of Trustees Officers	Res. 2024-31, Relative to the Declaration of Officers of the Guam Memorial Hospital Board of Trustees. The Newly Elected Officers Accepted and Approved on this day, April 24, 2024 are as follows: Theresa Obispo - Chairperson Edgar Aguilar - Vice Chairperson Sharon Davis - Secretary Sonia Siliang - Treasurer	All Trustees	None	Approved
IV. NEW BUSINESS				
		Executive Management	None	Informational
V. MANAGEMENT'S REPORT				

<p>A. Above-Step Recruitment Petition for Adrian M. Atalig & Joanne L. Delgado</p>	<p>Mr. Tony Aguon & Mrs. Brenda Sana reported that under the GMHA Board of Trustees Resolution No. 2024-20 regarding the Above-step salary is as follows:</p> <ul style="list-style-type: none"> • The Ten days posting transparency period was met for Mr. Adrian M. Atalig & Ms. Joanne L. Delgado's above-step petition. • There was no feedback or comments from the public. • The Board of Trustees is aware of this report and has taken no action. • This Above-step Petition for Mr. Adrian M. Atalig & Ms. Joanne L. Delgado is approved. 	<p>Executive Management</p>	<p>None</p>	<p>Approved</p>
<p>B. Maternal Child Health Family Birthing Center Project (MCH)</p>	<p>Dr. Dustin Prins reported the following:</p> <ul style="list-style-type: none"> ➤ MCH Project's source of funding has been identified by DOA Director Edward Birn. ➤ This is a long time-consuming project from 2016 and may now proceed and become a reality once and for all. ➤ The expansion of the Labor & Delivery and OB Ward will benefit from this project. ➤ The hospital will now have a new NICU ward and will recruit a Neonatologist. 	<p>Executive Management</p>	<p>None</p>	<p>Informational</p>
<p>C. CMS Visit</p>	<p>Three CMS Surveyors are currently reviewing a couple of complaints within the hospital. Ms. Danielle Manglona and her Team are working on getting the corrective actions together to resolve the issues.</p>	<p>Executive Management</p>	<p>None</p>	<p>Informational</p>
<p>D. Acting Associate Administrator of Medical Services</p>	<p>Dr. Jonathan Sidell is GMH's Acting Chief Medical Officer from April 8 to June 1, 2024. More talks to be discussed at a later date on whether he will continue to serve in this position. Dr. Sidell is a true asset to this hospital and is greatly appreciated.</p>	<p>Executive Management</p>	<p>None</p>	<p>Informational</p>
<p>VI. GUAM MEMORIAL HOSPITAL VOLUNTEERS ASSOCIATION (GMHVA) REPORT</p>				
	<p>There were no new updates to report.</p>	<p>GMHVA Pres. (Hilda Pellacani)</p>	<p>None</p>	<p>Informational</p>

VII. BOARD SUBCOMMITTEE REPORTS				
<p>A. <u>Joint Conference and Professional Affairs</u></p> <ol style="list-style-type: none"> 1. <u>Res. 2024-29, Relative to the Reappointment of Active Medical Staff Privileges</u> <ol style="list-style-type: none"> a. <u>Scott Shay, MD</u> 2. <u>Res. 2024-30, Relative to the Appointment of Provisional Medical Staff Privileges</u> <ol style="list-style-type: none"> a. <u>Youngho Kim, MD</u> b. <u>Tanya Shah, MD</u> c. <u>Bishoy ElBebawy, MD</u> d. <u>Kelvin Santos, MD</u> e. <u>Michael LaRoy, MD</u> 3. Policy No.: A-RI100 - Ethics Committee Guidelines 4. Policy No.: A-RI1000 - Patient Complaints Grievances 5. CY2023 Strategic Goal 5: Engage Physicians 	<p>Trustee Dr. Damian-Borja motioned, and it was seconded by Trustee Davis to approve Res. 2024-29 & 2024-30 as presented. The motion carried with all ayes.</p> <p>Trustee Dr. Damian-Borja motioned, and it was seconded by Trustee Kleiner to approve Policies A-RI100 & A-RI1000 as presented. The motion carried with all ayes.</p> <p>There were no new updates to report.</p>	<p>Executive Management, Chair JCPA</p> <p>Executive Management, Chair JCPA</p> <p>Executive Management, Chair JCPA</p>	<p>None</p> <p>None</p> <p>None</p>	<p>Approved</p> <p>Approved</p> <p>Informational</p>
<p>B. <u>Human Resources</u></p> <ol style="list-style-type: none"> 1. GMHA/Guam Federation Teachers - Collective Bargaining Agreement 	<p>Mr. William Kando reported on changes included the following:</p> <p>(A) Rate of Pay</p> <p>RN and LPN overtime shall be paid to personnel by the provisions under 4 GCA § 6221, § 6221.1, and § 6229.7.</p> <p>(B) Overtime</p>	<p>Executive Management, Chair HR</p>	<p>None</p>	<p>Approved</p>

	<p>(1) Employees are encouraged to work overtime where necessary to ensure quality patient care. Such overtime shall be at the discretion and upon the approval of the Employer or designee. All overtime worked by an employee must be authorized and such authorization shall be in advance if possible.</p> <p>(2) If the employer cannot assure the employee of paying overtime by 4 GCA § 6221, § 6221.1, and § 6229.7, then compensatory time off shall be granted instead of overtime compensation by mutual agreement between management and the employee.</p> <p>NOTE: GMHA has been guided that it is still presently governed by the Department of Administration Personnel Rules and Regulations (“DOA-PRR”) that provide “in the absence of funds for overtime compensation, compensatory time off shall be granted in lieu of overtime pay by mutual agreement between the employee and management before work is performed.” DOA-PRR § 7.405 (A). The Guam Supreme Court has stated that an employee may not waive his or her right to overtime for overtime hours worked except as provided in Rule 7.405. Guerrero v. Santo Thomas, 2010 Guam 11; and also, Yun v. GMHA, Civil Case No. CV1263-04, at 15-16 (Guam Sup. Ct. 2011). This is consistent with the federal Fair Labor Standards Act, 29 U.S.C. § 207 (0).</p> <p>SECTION 14. HOLIDAYS</p> <p>14.1 Recognized Holidays</p> <p>The parties agree that they will comply with the recognized list of paid holidays established by the Government of Guam or proclaimed by the Governor. The following holidays are recognized as paid</p>	Executive Management, Chair HR	None	Approved
--	---	-----------------------------------	------	----------


	<ul style="list-style-type: none"> • A small team to Travel to our neighboring regions like Hawaii or California to reach out to the nursing programs. • Meeting via WhatsApp or Zoom with the responsible representatives. • The offering of incentives like scholarships for the nurses to come out to an underserved area. <p>Trustee Kleiner went on to add that HRSA recruits and puts together virtual job fairs to help with the recruitment of nurses across the U.S. Many are also looking for opportunities to live and work in beautiful, remote places such as ours Guam.</p>	Executive Management, Chair HR	None	Informational
<p>C. <u>Facilities, Capital Improvement Projects, and Information Technology</u></p> <p>1. Critical Infrastructure Projects (\$20M ARPA Funding)</p> <p>GMH & SNF HVAC & Other Utility Systems CIPs</p> <p><i>Cost Estimate</i> <i>\$8,225,000</i></p> <p>GMH Structural/Architectural Improvements</p> <p><i>Cost Estimate</i></p>	<p>Mr. William Kando reported that 50% of the \$20M ARPA funding has been obligated. The remaining will be obligated by the end of September 2024.</p> <p>The following are the High Priority CIPs:</p> <ul style="list-style-type: none"> • Replace GMH Air Handling Units (Qty 40, est. \$3M) • 450 Ton Chillers (Qty 2) & Cooling Towers (Qty 2) Pkg (est. \$2M) • 265 Ton Chiller (Qty 1) and Air Cooled Condensing Units (Qty 3) Package (est. \$1M) • Replace SNF HVAC Chilled Water Lines (A, B, & C-Wings)(est. \$1M) • Refurbish Biohazardous Waste Autoclave Shredder System (est. \$500K) • Replace Hospital Chilled Water and Condenser Pump with VFD (est. \$275K) • SNF Chiller Pumps Redundancy System (est. \$250K) • Installation & Commissioning of Power Source for L&D/Nursery/OB Ward/Admin Split ACs (est. \$200K) • GMH Envelope Typhoon Mitigation (e.g., Wall Hardening, Courtyard Windows Replacement, Window Seals and Typhoon Shutters) 	Executive Management, Chair FAC, CIP & IT	None	Informational

<p>\$5,775,000</p> <p>Medical Equipment</p> <p><i>Cost Estimate</i> \$4,000,000</p>	<p>Replacement, Doors, Intakes/Exhausts, Facility Painting) (est. \$3M)</p> <ul style="list-style-type: none"> • GMH NICU Expansion Project (A/E Design & Construction) (est. \$1.6M) • GMH Center Island Parking Expansion (Construction Services est. \$750K; A/E Services During Construction, est. \$50K) • GMH Angio suite 2 Lead Barrier Shield (A/E Design & Renovation (A/E Design & Construction) (est. \$175K) • GMH LOX Enclosure/Tanks Expansion Project (est. \$144K) • GMH Z-Wing Demolition 1B (2nd Flr) (A/E Services During Demolition, est. \$56K) <ul style="list-style-type: none"> • Automated Medication Dispensing System (2 Yrs, \$900K) • Replacement of Vehicle Fleet (to include 2 Medical Transports, Flat Bed Truck to transfer medical equipment, Pickup Trucks and Sedans to transport medical supplies)(est. \$855K) • Hemodialysis Units (Qty 10, est. \$500K) • Adult Acute Care Defibrillators (Qty 16, est. \$272K) • CT Scanner Tube (Qty 1, est. \$253K) • Adult Acute Care Ventilators (Qty 2, est. \$240K) • BIPAP Machines (Qty 3, est. \$180K) • GMH & SNF Staff Chairs (Infection Control Compliant) (Qty approx. 400, est. \$150K) • Infusion Pumps Drug Library (One Lot, est. \$125K) • Portable Ultrasound Machines (Qty 3, est. \$102K) • Ventilators/Bipaps Repair Parts (One Lot, est. \$100K) • Acute Care Bariatric Stretchers (Qty 6, est. \$100K) • Laboratory Vaccum Infiltration Processor for Tissue Specimens (Qty 1, est. \$75K) • Glidescope Systems (Qty 1 Full and 2 Portables for ER, ICU, and OR, est. \$50K) • Acute Care Bladder Scanners (Qty 2, est. \$30K) • Stretcher Components (One Lot, est. \$27K) 	<p>Executive Management, Chair FAC, CIP & IT</p>	<p>None</p>	<p>Informational</p>
--	---	--	-------------	----------------------

<p>GMHA IT Network/Systems Infrastructure Needs</p> <p><i>Cost Estimate</i> <i>\$2,000,000</i></p> <p>2. CY2023 Strategic Goal 2: Enhance Infrastructure & Technology</p>	<ul style="list-style-type: none"> • Wound Vacuum Machines (Qty 6, est. \$21K) • ER Suture Room Procedure Table (Qty 1, est. \$10K) • Portable Hearing Diagnostic and Screening Instrument (for Adults, Children, and Neonates) (Qty 2, est. \$10K) • Access Control/CCTV Surveillance Systems (est. \$500K) • Fire Walls Replacement Pkg. (est. \$365K) • Active Domain Management System (est. \$350K) • Servers Replacement Pkgs. (est. \$220K) • SNF IT Server Room (est. \$75K A/E; \$200K Construction) • 40 KVA UPS (Qty 2 for Main Server Room & Laboratory) and 15 KVA UPS (Qty 1 for the Data Center) (est. \$200K) • HIPAA Compliant Crosscut Shredders (Qty 10) and Patient Information Technology Scanners (Qty 8) (est. \$90K) <p>There were no new updates to report.</p>	<p>Executive Management, Chair FAC, CIP & IT</p>	<p>None</p>	<p>Informational</p>
<p>D. <u>Quality and Safety</u></p> <p>1. CY2023 Strategic Goal 3: Transform Healthcare Services</p>	<p>The following are some highlights:</p> <ul style="list-style-type: none"> ➤ The Executive Management Committee held a working session to review the Goals and Objectives of the 5-year Strategic Goal. ➤ Discussed at the meeting was to prioritize which should be done first versus second year versus third year, and so on. ➤ The EMC will meet quarterly to help monitor and ensure a forward action and to also re-evaluate the objectives and goals within the strategic plan. ➤ Modifications are possible due to the progression of time where expected changes may happen. 	<p>Executive Management & Chair Q&S</p>	<p>None</p>	<p>Informational</p>

<p>E. Finance and Audit 1. CY2023 Strategic Goal 1: Achieve Financial Viability</p>	<p>The following are some highlights:</p> <ul style="list-style-type: none"> • A big improvement in the hospital's Gross Revenues, with Billings at \$177M compared to last year's \$104M and Collections at \$57M compared to last year's \$46M. • An increase in collections in all the different payers, excluding Medicaid due to the advance received last year following the network shutdown. GMHA is slowly paying that back. • The half portion of Medicaid reimbursements received are being withheld by DOA to help repay the advance. • On the expense side. The impact of the 22% general pay plan increase paid to employees is higher than what it was before. • An increase in contractual services mainly for the travel nurses and the contract doctors as they are also getting higher pay. • The FY2023 Financial Audit with Ernst & Young is almost near its completion and is expected to be released in May 2024. • The FY2020 Medicare cost report audit with Meridian our CMS contractor will soon start. • The Guam Legislature will advise on The FY2025 Budget hearing schedule. <p>Ms. Yuka Hechanova added that the goal for next month May 2024 will be an Invitation for Bid (IFB) solicitation for a Collection agency to take over some of the hospital's self-pay accounts.</p>	<p>Executive Management & Chair F&A</p>	<p>None</p>	<p>Informational</p>
<p>F. Governance, Bylaws, and Strategic Planning 1. CY2023 Strategic Goal 6: Engage & Partner with the Community</p>	<p>The Strategic Goal and Bylaws are still a work in progress. A working session will be forthcoming.</p>	<p>Executive Management, Chair GBSP</p>	<p>None</p>	<p>Informational</p>
<p>VIII. PUBLIC COMMENT</p>				
		<p>Public Comment</p>	<p>None</p>	<p>None</p>
<p>IX. ADJOURNMENT</p>				
	<p>There being no further business matters for discussion, Chairwoman Obispo declared the</p>	<p>All Board members</p>	<p>None</p>	<p>Approved</p>

	meeting adjourned at 6:34 p.m. motioned and seconded. The motion carried with all ayes.			
--	---	--	--	--

Transcribed by: 
Janet U. Mandapat
Administrative Assistant

Submitted by: 
Sonia Siliang
Secretary

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the March 27, 2024 regular session meeting were accepted and approved by the GMHA Board of Trustees on this 24th day of April 2024.

Certified by: 
Theresa Obispo
Chairperson



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDAT ESPETAT MIMURIAT GUAHAN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



BOARD OF TRUSTEES Official Resolution No. 2024-31

RELATIVE TO THE DECLARATION OF OFFICERS OF THE GUAM MEMORIAL HOSPITAL AUTHORITY BOARD OF TRUSTEES

WHEREAS, at the April 24, 2024 regular meeting of the GMHA Board of Trustees open floor nominations were made for and accepted by the following individuals to serve as officers of the Guam Memorial Hospital Authority Board of Trustees.

Name	Position
Theresa Obispo	Chairperson
Edgar Aguilar	Vice-chairperson
Sharon Davis	Secretary
Sonia Siliang	Treasurer

NOW, THEREFORE, BE IT RESOLVED, that the Board of Trustees approves the election of the aforementioned to serve as officers until their successor(s) are duly elected, unless he or she resigns, is removed from office, or is otherwise disqualified from serving as an officer of this Board; and

BE IT FURTHER RESOLVED, that the Board of Trustees directs the Acting Hospital Administrator/CEO to duly notify the hospital and medical staff of this election of officers; and

BE IT FURTHER RESOLVED, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 22nd DAY OF MAY 2024.

Certified by:

Theresa Obispo
Chairperson

Attested by:

Sharon Davis
Secretary



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDAT ESPETAT MIMURIAI GUAMAN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



BOARD OF TRUSTEES

Official Resolution No. 2024-32

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Milliecor Fojas, MD	Pediatric	Pediatric	April 30, 2026
Sherif Philips, MD	Medicine	Nephrology	April 30, 2026
Saied Safabakhsh, MD	Medicine	Nephrology	April 30, 2026
Suwarat Wonggitraporn, MD	Medicine	Internal Medicine	April 30, 2026
Ornusa Teerasukjinda, MD	Medicine	Internal Medicine	April 30, 2026
Christopher Frederick, MD	ER	Emergency Medicine	April 30, 2026
Angelito Santos, MD	ER	Emergency Medicine	April 30, 2026

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 April 24, 2024 and the Joint Conference and Professional Affairs Committee 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 22nd DAY OF MAY, 2024.

Certified by:

Theresa Obispo
Chairperson

Attested by:

Sharon Davis
Secretary



GUAM MEMORIAL HOSPITAL AUTHORITY

ATUR/DAT ESPETAT MIMURIA/ GUAHAN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



BOARD OF TRUSTEES Official Resolution No. 2024-33

“RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Kelli Jarrett, MD	OB/Gyn	FM/OB	April 30, 2025

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 email voted on April 24, 2024 and the Joint Conference and Professional Affairs Committee 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 22nd DAY OF MAY, 2024.

Certified by:

Theresa Obispo
Chairperson

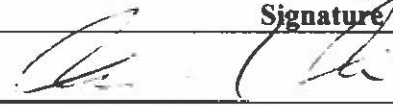
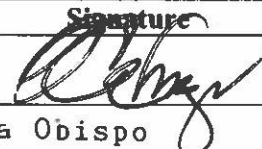
Attested by:

Sharon Davis
Secretary

**GUAM MEMORIAL HOSPITAL AUTHORITY
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledge that they have reviewed and approved the following:

- Bylaws Submitted by Department/Committee: MEDICAL STAFF OFFICE
- Rules & Regulations Policy No.: A-MS100
- Policies & Procedures Title: DISRUPTIVE PRACTITIONER


Reviewed/Endorsed	Date	Signature
	5/22/24	
	Name: Michael Um, M.D. Title: Chair, JCPA	
Reviewed/Endorsed	Date	Signature
	5/22/24	
	Name: Theresa Obispo Title: Chairperson, BOT	
Reviewed/Endorsed	Date	Signature
	Name Title	
Reviewed/Endorsed	Date	Signature
	Name Title	
Reviewed/Endorsed	Date	Signature
	Name Title	
Reviewed/Endorsed	Date	Signature
	Name Title	
Reviewed/Endorsed	Date	Signature
	Name Title	


***Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer.**

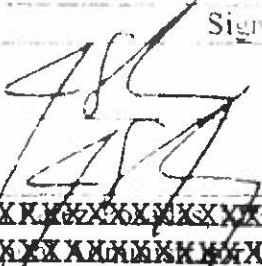
GUAM MEMORIAL HOSPITAL AUTHORITY
REVIEW AND APPROVAL (CERTIFICATION)

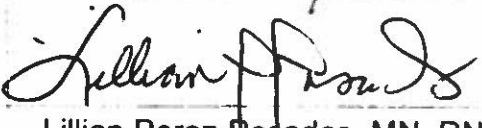
The signatories on this documents acknowledge that they have reviewed and approved the following

- Bylaws Submitted by: Medical Staff Office
- Rules and Regulations Department Committee MEDICAL STAFF OFFICE
- Policies & Procedures Title A-MS100 Disruptive Practitioner

Title			Mariana Cook-Huynh, MD Chair, Bylaws Committee
	Date		Signature
Reviewed	12 18 2023		
Approved	12 18 2023		

Title			Jeffrey Cruz, MD Chair, Credentials Committee
	Date		Signature
Reviewed	12/22/23		
Approved	12/22/23		

Title			Jeffery Shay, MD Chair, Medical Executive Committee
	Date		Signature
Reviewed	12/27/23		
Approved	12/27/23		

Title			XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX
	Date		Signature
Reviewed	01/29/24		
Approved			 Lillian Perez-Posadas, MN, RN Chairperson, Executive Management Council


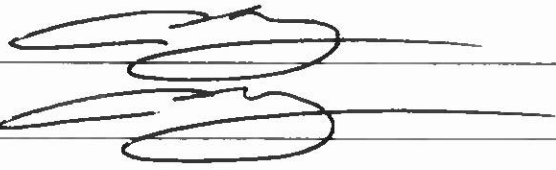
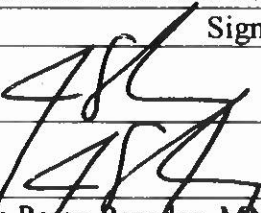
GUAM MEMORIAL HOSPITAL AUTHORITY
REVIEW AND APPROVAL (CERTIFICATION)

The signatories on this documents acknowledge that they have reviewed and approved the following:

[] Bylaws Submitted by: Medical Staff Office

[] Rules and Regulations Department/Committee: MEDICAL STAFF OFFICE

[X] Policies & Procedures Title: A-MS100 Disruptive Practitioner

Title	Mariana Cook-Huynh, MD. Chair, Bylaws Committee	
	Date	Signature
Reviewed	12/18/2023	
Approved	12/18/2023	
Title	Jeffrey Cruz, MD. Chair, Credentials Committee	
	Date	Signature
Reviewed	12/22/23	
Approved	12/22/23	
Title	Jeffery Shay, MD. Chair, Medical Executive Committee	
	Date	Signature
Reviewed	12/27/23	
Approved	12/27/23	
Title	Lillian Perez-Posadas, MN, RN. Hospital Administrator/CEO	
	Date	Signature
Reviewed		
Approved		

**/DisGUAM MEMORIAL HOSPITAL AUTHORITY
ADMINISTRATIVE MANUAL**

APPROVED BY:	RESPONSIBILITY:	EFFECTIVE DATE:	POLICY NO.	PAGE
Lillian Perez-Posadas, MSN, RN Hospital Administrator/CEO	Medical Staff Risk Management	XX/XX/XXXX	A-MS100	1 of 8
TITLE: DISRUPTIVE PRACTITIONER				
LAST REVIEWED/REVISED: 08/2023				
ENDORSED: CC 12/2023, MEC, 12/2023, EMC 01/2024, JCPAC XX/XXXX, BOT XX/XXXX				

PURPOSE:

To ensure optimum patient care by promoting a safe, cooperative and profession healthcare environment through the prevention, to the extent possible, of conduct which is disruptive to the operation of Guam Memorial Hospital Authority (GMHA) or the safety of patients or staff within it.

DEFINITIONS:

Disruptive Behavior: The American Medical Association defines disruptive behavior as personal conduct, whether verbal or physical, that affects or that potentially may affect patient care negatively, including, but not limited to, conduct that interferes with one's ability to work with other members of the healthcare team.

Practitioner: Any appropriately licensed physician, dentist, podiatrist, or other state licensed independent practitioner applying for, or exercising, clinical privileges at GMHA.

Prohibited Conduct: Characteristics of a Practitioner exhibiting prohibited behavior in the workplace may include, but are not limited to:

- Profane, disrespectful or derogatory language including the use of racial, ethnic, and gender-related epithets, jokes, or slurs;
- Unwarranted yelling or screaming;
- Demeaning or intimidating behavior, including use of threatening or offensive gestures and verbal threats;
- Unwelcome touching, striking, or pushing of others;
- Unwelcome sexual comments or innuendo;
- Throwing, hitting, or slamming objects;
- Outbursts of rage or violent behavior;
- Impertinent or inappropriate comments written in patient medical records, or in other official documents;

- Impugning the quality of care in the hospital, or attacking particular physicians, hospital staff, or hospital policy;
- Inappropriately criticizing healthcare professionals and GMHA staff in front of patients/and or their families, visitors, or other staff;
- Retaliation against a person who filed a complaint against a practitioner for violation of this, or any other GMHA policy;
- Repeated failure to respond to a reasonable request by staff for orders, instructions, or assistance with a patient;
- Repeated failure to respond to calls or pages;
- Inappropriate arguments with patients, family, staff, and other physicians;

See also GMHA Policy No. A-LD500, Behaviors that Undermine a Culture of Safety.

POLICY:

Disruptive behavior is prohibited. GMHA recognizes that an environment which nurtures cooperation, collegiality, courtesy and respect is necessary to achieve the delivery of quality care to patients in a safe working environment. If a Practitioner fails to conduct him or herself accordingly, the matter shall be addressed through the procedures outlined in this policy.

PROCEDURE:

I. GMHA STAFF RESPONSE TO DISRUPTIVE BEHAVIOR

Any GMHA employee or Practitioner who believes that a Practitioner is subjecting him or her to disruptive behavior is authorized to take the following actions:

- A. Promptly contact his or her immediate supervisor and submit an event report through the hospital's incident reporting system, the Safety Learning System (SLS), to report the situation. The supervisor may, at his or her discretion, arrange for the transfer of any necessary patient care assignment to another staff member in order to permit the employee or Practitioner to avoid conversing or interacting with the disruptive Practitioner.
- B. Threats, assaults, or other criminal behavior that require immediate attention by law enforcement must be reported first to GMHA Security via the Code 60 emergency code system through the Communications Center. GMHA Security shall act immediately to secure the safety of hospital staff and patrons and, where a criminal allegation has been made by any person, shall alert law enforcement as soon as is reasonably possible to the situation. GMHA Security shall provide such aid and support to law enforcement as is necessary to investigate any allegation of criminal behavior occurring on GMHA property pursuant to this section. However, access to patient and staff records by law enforcement shall be restricted where federal or local

laws mandate that such records may only be disclosed to law enforcement pursuant to a warrant, court order, subpoena, or other mechanism of law.

- C. Any member of staff, regardless of rank or status, shall employ any and all reasonable means necessary to immediately notify law enforcement of any present or ongoing threat to the life and safety of any person at GMHA so long as the reporting person may do so in a manner that does not place the reporting person's life or safety (and/or the lives and safety of others) in jeopardy.
- D. In the event of concern that a Practitioner is practicing under the influence of a substance, any member of staff, regardless of rank or status, shall notify the Nursing Supervisor or designee. The Nursing Supervisor shall then notify the Department Chairperson to determine if a replacement Practitioner is necessary to continue immediate patient care.

II. REPORTING OF ALLEGATIONS

- A. In addition to the requirements set forth in subsection B of section I, above, all reports involving threats, assaults, or other criminal behavior are to be reported by the Chief of Security immediately to the Chief Executive Officer, and as appropriate, to the respective division head, and the GMHA President of the Medical Staff.
- B. Each individual may file a report of disruptive and inappropriate behavior in good faith without fear of reprisal, retaliation, retribution or intimidation. Reports shall be made within 24 hours, unless as described in subsection "B" of section I, above, utilizing the hospital's Safety Learning System (SLS) to report any incident of disruptive or inappropriate behavior. However, where any individual observes any act by any person that prevents or interferes with the administration of medical treatment and/or places the health or safety of a patient or other staff member in jeopardy, then the observing staff member shall be obligated to act pursuant to subsections B and C of section I, above.

III. INVESTIGATION

- A. Under the leadership of the hospital's Risk Management Program Officer or designee, an initial review of complaints or allegations of Practitioner disruptive behavior shall be completed within seven (7) business days. Unless indicated in subsections B and C of Section I "GMHA Staff Response to Disruptive Behavior," the hospital's Risk Management Program Officer or designee shall conduct their review by and through the hospital's Safety Learning System (SLS).
- B. Completion of the initial review by the hospital's Risk Management Program Officer or designee shall conclude when a Safety Assessment Code (SAC) of rank 1 (lowest severity) to rank 3 (highest severity) is assigned to the complaint or allegation of

Practitioner disruptive behavior, based on an objective severity and frequency of occurrence matrix. Refer to Attachment I for severity categories, probability categories and the SAC classification matrix.

- C. SAC rank 1 complaints or allegations of Practitioner disruptive behavior shall be referred to Department Chairpersons for investigation and resolution at the department level. At any time in the investigation, if the department chair feels the SAC rank is above 1 or for any conflict of interest, the department chair can forward the investigation to the President of the Medical Staff.
- D. SAC rank 2 complaints or allegations of Practitioner disruptive behavior shall be referred to the President of the Medical Staff, or the GMHA Vice President of the Medical Staff in his/her absence, for prompt review as set forth in this policy. The Credentials Committee Chairperson will participate in the absence of both of these individuals. In the event the allegations involve the President of the Medical Staff, the allegation will be reviewed by the Associate Administrator of Medical Services. The Risk Management Program Officer or designee shall assist the Medical Staff President or designee in the ensuing investigation.
- E. **SAC rank 3 complaints or allegations of Practitioner disruptive behavior shall be investigated by the Risk Management Program Officer or designee with notifications to the Chief Executive Officer, President of the Medical Staff and Associate Administrator of Medical Services.**
- F. The investigation shall be completed within ten (10) business days and corrective action, if any, shall be initiated by the President of the Medical Staff. Investigative methods that the President of the Medical Staff or designee may effectuate include, but are not limited to:
 - 1. Interview witnesses;
 - 2. Review video surveillance footage;
 - 3. Review medical records;
 - 4. Review system audit logs;
 - 5. Request drug screening;
 - 6. Request medical examination.
- G. Should the President of the Medical Staff deem that the allegation(s) of disruptive behavior are unsubstantiated; their conclusion shall be documented in the Safety Learning System (SLS) report associated with the original complaint. Through this act, the complaining party shall be informed of the results of the investigation and the decision of the President of the Medical Staff. Unsubstantiated allegations are not to be made a part of any Practitioner Ongoing Professional Practice Evaluation or influence past, present, or future decisions surrounding sanction of the Practitioner.

- H. Should the President of the Medical Staff deem that the allegation(s) of disruptive behavior are substantiated, the President of the Medical Staff or designee shall interview the Practitioner as soon as reasonably possible, preferably the next business day. This interview shall be documented in the Safety Learning System (SLS) report associated with the original complaint. Upon interview, the Practitioner will be provided with sufficient information to understand the allegation(s), and afforded the opportunity to respond to the allegation(s), either during the interview, in writing within 48 hours, or both.

At no point in time is a copy of the disruptive behavior Safety Learning System (SLS) report to be given to the individual involved in the questionable behavior, nor are they to be shown the report.

- I. Upon receipt of the verbal or written response to the allegation(s) from the Practitioner, the President of the Medical Staff or designee shall determine and communicate final action to the Practitioner in writing within ten (10) business days. Action may include, but is not limited to:
1. No further action is warranted;
 2. Issue a written letter of warning to the practitioner;
 3. Request the practitioner to apologize to the complainant;
 4. Refer the practitioner to appropriate anger management training or other training course; or
 5. Refer the practitioner for an evaluation by a medical professional.
 6. Place provider on FPPE (refer to FPPE policy for details).
- J. Actions 1 through 6 above shall not be considered medical disciplinary action and shall not be reported to the Guam Board of Medical Examiners (GBME) or the National Practitioner Data Bank. Thus, the Practitioner is not entitled to a hearing or appeal under Article VIII of the Bylaws.
- K. A copy of the investigative report, the Practitioner's written response, if any, and the record of action taken shall be retained in both the Practitioner's credentials file as well as the Safety Learning System (SLS) report associated with the original complaint. These records shall not be immune from discovery.
- L. The President of the Medical Staff may also initiate corrective action under Bylaws Article VIII, Correction Action and Fair Hearing Plan.

IV. INVESTIGATIVE LEAVE OF ABSENCE

- A. If substantiated disruptive behavior allegations involve physical assault or battery with the intent for bodily harm, reasonably suspected drug or alcohol use or abuse, or

any other conduct which may seriously interfere with the hospital's ability to deliver quality patient care, the Chief Executive Officer, Associate Administrator of Medical Services and/or the President of the Medical Staff may initiate an investigative leave of absence. If the Practitioner is a GMHA employee, he or she will be placed on administrative leave.

- B. Within seven (7) business days (excluding weekends and holidays) after imposition of an investigative leave of absence, the Medical Executive Committee shall meet to consider the leave of absence. The affected Practitioner shall be afforded, in writing, notice of an opportunity to attend such meeting, but is not required to do so. Any such appearance shall be informal in nature and shall not constitute a hearing. The Chief Executive Officer, Associate Administrator of Medical Services and/or the President of the Medical Staff or designee shall present all investigative findings to the Medical Executive Committee.

- C. At the meeting's conclusion, an impartial ad hoc committee appointed by the Medical Executive Committee, or the Medical Executive Committee itself, shall have thirty days to produce a written report of the investigation which shall include a decision on action. Such action may include, without limitation:
 - 1. Rejecting any request for corrective action, or taking no action;
 - 2. Issuing a warning, a letter of admonition, or letter of reprimand;
 - 3. Recommending documentation of physical and mental health status by a physician(s) acceptable to the Medical Executive Committee;
 - 4. Recommending terms of probation or requirements of consultation; or as required additional medical education for recognized deficiency;
 - 5. Recommending reduction, suspension or revocation of clinical privileges;
 - 6. Recommending reduction of staff category or limitation of any staff prerogatives directly related to patient care; and
 - 7. Recommending suspension or revocation of staff appointment.

- D. A leave of absence for investigatory purposes shall not constitute a summary suspension, or a medical disciplinary cause or reason and as such, shall not be reported to the Guam Board of Medical Examiners, Guam Board of Allied Health Examiners or the National Practitioner Data Bank.

- E. Should the Practitioner disagree with the Medical Executive Committee's decision on action pursuant to subsection C above, they may enact the Fair Hearing Plan under Bylaws Article VIII, Correction Action and Fair Hearing Plan.

V. SUMMARY SUSPENSION

If at any time immediate action is necessary to protect the life or welfare of patients, prospective patients, or any other persons, all or part of the Practitioner's privileges or

Medical Staff membership may be summarily suspended pursuant to Article VIII, Section 8.2 of the Medical Staff Bylaws.

REFERENCES:

Guam Memorial Hospital Authority Medical Staff Bylaws.

Guam Memorial Hospital Authority Rules & Regulations.

VHA National Center for Patient Safety: Assessment Code (SAC) Matrix.

RELATED POLICY:

Policy A-LD500, *Behaviors that Undermine a Culture of Safety* of the Administrative Manual made effective August, 2017.

RESCISSION:

Policy A-MS100, *Disruptive Practitioner* of the Administrative Manual made effective August, 2017.

ATTACHMENT I

Severity Categories

<i>Catastrophic</i>	<i>Major</i>
<ul style="list-style-type: none"> • Death of staff. • Injury requiring hospitalization. • Permanent injury to staff member. • Destruction of hospital assets. • Physical assault. • Sexual assault. • Practicing under the influence. 	<ul style="list-style-type: none"> • Lost time or restricted duty or illness of staff. • Threatened physical assault of staff. • Verbal assault/harassment of staff. • Discrimination. • Sexual harassment. • Retaliation. • Suspected substance abuse.
<i>Moderate</i>	<i>Minor</i>
<ul style="list-style-type: none"> • Lack of responsiveness. 	<ul style="list-style-type: none"> • Incident w/ no injury and no assistance from internal security required.

Probability Categories

<i>Frequent</i>	<i>Likely to occur immediately or within a short period of time (may happen several times in one year).</i>
<i>Occasional</i>	<i>Probability will occur in time (may happen several times in 1 to 2 years).</i>
<i>Uncommon</i>	<i>Possible to occur in time (may happen sometime in 2 to 5 years).</i>
<i>Remote</i>	<i>Unlikely to occur (may happen sometime in 5 to 30 years).</i>

Safety Assessment Code (SAC) Matrix

		<i>SEVERITY</i>			
		<i>Catastrophic</i>	<i>Major</i>	<i>Moderate</i>	<i>Minor</i>
<i>PROBABILITY</i>	<i>Frequent</i>	<i>3</i>	<i>3</i>	<i>2</i>	<i>1</i>
	<i>Occasional</i>	<i>3</i>	<i>2</i>	<i>1</i>	<i>1</i>
	<i>Uncommon</i>	<i>3</i>	<i>2</i>	<i>1</i>	<i>1</i>
	<i>Remote</i>	<i>3</i>	<i>2</i>	<i>1</i>	<i>1</i>



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDÁT ESPETÁT MIMURIÁT GUÅHÑ

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



GMHA Medical Records Warehouse Mold Remediation Plan of Corrective Action

Description

This document is an Executive Level Summary of the Guam Memorial Hospital Authority ("GMHA") Medical Records Warehouse Mold Remediation Plan of Corrective Action.

Background

On May 24, 2023, Typhoon Mawar made landfall to Guam in which the Tropical Cyclone was equivalent to a Category 4 Typhoon with maximum sustained winds reported at 140 mph with gusts up to 165 mph, according to the Joint Typhoon Warning Center.

Tropical Cyclone Condition of Readiness (COR) 4 was declared on May 25, 2023 at 5:00 pm, thus placing the Government of Guam back to normal operations. The Government of Guam prioritized community safety as work began to restore island-wide water and power. Debris removal commenced from roadways. Damage assessment of the offsite warehouse started the following day.

Upon initial exterior inspection of the Medical Records warehouse, the corner of the warehouse tin roof was clearly ripped open and exposed. Upon entry to the warehouse it was also apparent that it sustained internal damages, as several areas of the warehouse had pooled water, clumps of insulation strewn about the building, and many of the medical records were visibly wet.

The power was out at the time of initial inspection of the warehouse but once power was restored, it was found that all three air conditioning units were inoperable.

Over the course of five months without power and proper working air-conditioning, mold started growing in the warehouse as well as on the medical records. Mold infiltrated the entire ceiling area and in several areas, the growth was apparent on the medical records files and boxes.

The following represents GMHA's Medical Records Warehouse Mold Remediation Plan of Corrective Action in response to the Microbial Assessment Survey Report (completed December 7, 2023) and Tape Lift Sampling Report (completed February 2, 2024) completed by GMHA's contractor, Industrial Hygiene Professionals (IHP) Inc.

Plan of Corrective Action (POC)

Immediate POC (May through December 2023)

- May 2023 – First inspection completed after the typhoon to assess initial damages on May 26, 2023 wherein the power was out.
- June and July 2023- Various visits were made to the warehouse. Since power had not been restored, mold growth could be seen on the ceiling area starting on the area closest to the exterior wall. During the June 15, 2023 visit, the property manager was onsite and was informed that the AC units were not working.

- June 16, 2023 in the Finance and Audit Subcommittee meeting, the CEO and CFO reported the condition of the warehouse.
- During the GMHA Compliance Department's visit, it was apparent that the exterior damage to the warehouse was not fixed and mold, dust, insulation, and other debris were visible throughout the warehouse. In addition, mold could also be seen growing on boxes, signs, and equipment throughout the warehouse.
- August to October 2023– Inspection of the warehouse was completed by GMHA employees including Infection Control and Safety Inspectors to determine usability of the facilities in its current state.
 - According to the Infection Control report dated August 11, 2023, "The medical records warehouse space is unsafe and not suitable for occupancy. Mold and vermin droppings, poor ventilation, and a warm and moist environment are combined risk factors for substantial impact to the health and well-being of any occupant".
 - GMHA's Safety Inspectors' report confirmed the findings of the Infection Control report.
 - Mold specimens were collected and sent to a laboratory for analysis, but GMHA was later informed that the company would not be able to process the specimens.
 - GMHA management decided to add the warehouse mold sampling to the procurement of the mold assessment services being sought for GMH and SNF facilities.
- November 2023 – Considered an environmental risk for employees of GMHA, the CEO restricted access to the warehouse moving forward. The key was surrendered from GMHA Medical Records to the GMHA Security Team.
- December 2023– Industrial Hygiene Professionals (IHP) conducted Microbial Assessment Survey Report.
 - The report confirmed that "mold growth is present on the interior building components. Relative humidity readings throughout the inspected areas are well above the recommended range of 60% throughout the interior of the warehouse" and, "With relative humidity readings inside the space above the recommended threshold and moisture still present from water intrusions/leaks, the mold present inside the warehouse has the ideal environment for it to proliferate and cause further mold growth on the materials below the ceiling (i.e. walls, floors, furniture, medical records, etc.)."

Intermediate POC (January through October 2024)

- January and February 2024- IHP returned to the warehouse to conduct a tape lift sampling in order to identify the mold types growing in the warehouse. The results of the sampling identified multiple strains of mold types. According to the report, "Industry guidelines recommend that all affected materials (regardless of mold spore type) be remediated. Remediation will be based on the porosity of the material with mold growth. Porous materials (insulation, gypsum board, paper, cardboard, etc.) should be removed and replaced (if replacement is necessary), while non-porous materials (such as metal, concrete, glass, hard plastics, etc.) may be adequately cleaned using EPA-registered fungicides." Since medical



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDÁT ESPETÁT MIMURIÁT GUĀHĀN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508




records are paper-based, it was determined that all medical records and other porous materials will need to be destroyed.

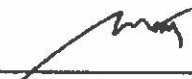
- February to March 2024-
 - Obtain initial quotes to determine the appropriate procurement method for the destruction of porous materials, develop scope of services, and proceed with the appropriate procurement method.
 - Initiate internal audit of onsite charts.
- Complete procurement and award vendor for safe and HIPAA-compliant porous material destruction services.
- Commence and complete the remediation of GMHA's moldy medical records (est. 6 months).
- Create a comprehensive Medical Records Emergency Response and Recovery Plan and train Medical Records staff and operational support staff on the same.

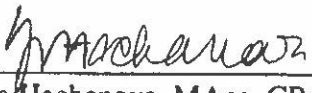
Future Goals


- Eliminate paper storage through digitization of current paper records.

Responsible Parties

Prepared by: 
Tina M. Quinata, MS, MA
Medical Records Administrator, Acting
Date: 5/03/24

Reviewed by: 
Sydne Taisacan CHFP, CRIP, BSA
General Accounting Supervisor, RCM
Date: 5/6/2024

Reviewed by: 
Yuka Hechanova, MAcc, CPA, CIA, CGFM, CPPO
Chief Financial Officer
Date: 5/6/2024

Approved by: 
Dustin B. Prins, DPM, MBA, FACFAS,
CWSP
Acting Hospital Administrator/CEO
Date: 5-7-24

Status of ARPA-Funded CIPs as of
05/20/2024

ARPA-Funded CIPs	Project Complete		PO Issued / To Be Issued		Drawdown		Active Solicitation		Pending Solicitation / On Hold		TOTAL	
	#	\$	#	\$	#	\$	#	\$ (est.)	#	\$ (est.)	#	\$ (est.)
GMH & SNF HVAC & Other Utility Systems CIPs	0	\$ -	2	\$ 223,640	1	\$ 125,000	4	\$ 6,474,860	4	\$ 1,991,500	10	\$ 8,690,000
GMH Structural/Architectural Improvements	1	\$ 144,000	3	\$ 404,000	3	\$ 179,330	1	\$ 175,000	2	\$ 5,196,000	6	\$ 5,775,000
Medical Equipment	1	\$ 252,675	10	\$ 2,320,870	1	\$ 252,675	8	\$ 1,292,600	2	\$ 224,205	20	\$ 3,837,675
GMHA IT Network/Systems Infrastructure Needs	0	\$ -	1	\$ 231,204	1	\$ 2,868	2	\$ 142,712	4	\$ 1,323,409	7	\$ 1,697,325
TOTAL	2	\$ 396,675	16	\$ 3,179,714	6	\$ 559,872	15	\$ 8,085,172	12	\$ 8,735,114	43	\$ 20,000,000

GMHA Critical Infrastructure Projects

ARPA Funded CIP Listing

	Project Name	Project Cost Allocation	Amount Est.	Drawdown Amount	Project Status	
	GMH & SNF HVAC & Other Utility Systems CIPs:			\$ -		
1	Replace GMH Air Handling Units (Qty 40, est. \$3M)	\$8,225,000	\$3,000,000		RFQ issued on 04/29/24; Quotes due on 05/17/24	
2	450 Ton Chillers (Qty 2) & Cooling Towers (Qty 2) Pkg (est. \$2M).		\$2,000,000		RFQ issued on 04/22/24; Quotes due on 05/09/24	
3	265 Ton Chiller (Qty 1) and Air Cooled Condensing Units (Qty 3) Package (est. \$1M).		\$1,000,000		RFQ issued on 04/22/24; Quotes due on 05/09/24	
4	Replace SNF HVAC Chilled Water Lines (A, B, & C-Wings) and A&E Design and service during construction (est. \$1M)		\$1,000,000			
4a	Replace SNF HVAC Chilled Water Lines (A, B, & C-Wings)					Procurement not Started
4b	To Provide all required inspection needed to complete the assessment, A&E Design and A&E service during construction (SDC) SNF Chilled Water line removal and replacement					Procurement not Started
5	Refurbish Biohazardous Waste Autoclave and Remove & Replace Shredder System (est. \$500K)		\$500,000			
5a	Refurbish Biohazardous Waste Autoclave					PO to be issued
5b	Removal & Replacement of the Shredder System					IFB to be issued in May 2024
6	Replace Hospital Chilled Water and Condenser Pump with VFD (est. \$275K)			\$275,000		Procurement not Started
7	SNF Chiller Pumps Redundancy System (est. \$250K)		\$250,000		Procurement not Started	
8	Installation & Commissioning of Power Source for L&D/Nursery/OB Ward/Admin Split ACs (est. \$200K)		\$200,000		PO issued on 02/05/2024; Pending project completion.	
	GMH Structural/Architectural Improvements:			\$ 179,309		
9	GMH Envelope Typhoon Mitigation (e.g., Wall Hardening, Courtyard Windows Replacement, Window Seals and Typhoon Shutters Replacement, Doors, Intakes/Exhausts, Facility Painting) (est. \$3M)	\$5,775,000	\$3,000,000	\$ 22,963	Requisition on hold due to pending MCH project recertification	
9a	A&E design of its courtyard and store front windows, wall structure modification, shutter system replacement, door replacement					Requisition on hold due to pending MCH project recertification
10	GMH NICU Expansion Project (A/E Design & Construction)(est. \$1.6M)			\$1,600,000	\$ 12,346	A&E design on hold due to pending MCH project recertification

GMHA Critical Infrastructure Projects

ARPA Funded CIP Listing

	Project Name	Project Cost Allocation	Amount Est.	Drawdown Amount	Project Status	
11	GMH Center Island Parking Expansion (Construction Services est. \$750K; A/E Services During Construction, est. \$50K)	\$4,000,000	\$800,000		Solicitation not Started	
12	GMH Angiosuite 2 Lead Barrier Shield (A/E Design & Renovation (A/E Design & Construction))(est. \$175K)		\$175,000		RFQ to be issued in May 2024	
13	GMH LOX Enclosure/Tanks Expansion Project (est. \$144K)		\$144,000	\$ 144,000	Project Complete	
14	GMH 2-wing Demolition to (2nd Flr) (A/E Services During Demolition, est. \$56K)		\$56,000		On Hold	
Medical Equipment:			\$ 252,675			
15	Automated Medication Dispensing System (2 Yrs, \$900K)		\$900,000		PO to be issued	
16	Replacement of Vehicle Fleet (to include 2 Medical Transports, Flat Bed Truck to transfer medical equipment, Pickup Trucks and Sedans to transport medical supplies)(est. \$855K)		\$855,000			
16a	Replacement of Fleet Vehicles (FM)				IFB to be issued in May 2024	
16b	Medical Transports (Qty 2)				IFB to be issued in May 2024	
17	Hemodialysis Units (Qty 10, est. \$500K)		\$500,000		RFQ to be issued in May 2024	
18	Adult Acute Care Defibrillators (Qty 16, est. \$272K)		\$272,000		IFB to be issued in May 2024	
19	CT Scanner Tube (Qty 1, est. \$253K)		\$253,000	\$ 252,675	Project Complete	
20	Adult Acute Care Ventilators (Qty 2, est. \$240K)		\$240,000		RFQ to be issued in May 2024	
21	BIPAP Machines (Qty 3, est. \$180K)		\$180,000		PO to be issued	
22	GMH & SNF Staff Chairs (Infection Control Compliant) (Qty approx. 400, est. \$150K)	\$150,000		Solicitation not Started		
23	Infusion Pumps Drug Library (One Lot, est. \$125K)	\$125,000		PO Issued		
24	Portable Ultrasound Machines (Qty 3, est. \$102K)	\$102,000		Solicitation not Started		
25	Ventilators/Bipaps Repair Parts (One Lot, est. \$100K)	\$100,000		RFQ to be issued in May 2024		
26	Acute Care Bariatric Stretchers (Qty 3, est. \$100K)	\$100,000		RFQ to be issued in May 2024		
27	Laboratory Vaccum Infiltration Processor for Tissue Specimens (Qty 1, est. \$75K)	\$75,000		RFQ to be issued in May 2024		
28	Glidescope Systems (Qty 1 Full and 2 Portables for ER, ICU and OR, est. \$50K)	\$50,000		PO to be issued		
29	Acute Care Bladder Scanners (Qty 2, est. \$30K)	\$30,000		RFQ to be issued in May 2024		

GMHA Critical Infrastructure Projects

ARPA Funded CIP Listing

	Project Name	Project Cost Allocation	Amount Est.	Drawdown Amount	Project Status
30	Stretcher Components (One Lot, est. \$27K)		\$27,000		RFQ to be issued in May 2024
31	Wound Vacuum Machines (Qty 6, est. \$21K)		\$21,000		RFQ to be issued in May 2024
32	ER Suture Room Procedure Table (Qty 1, est. \$10K)		\$10,000		Solicitation not Started
33	Portable Hearing Diagnostic and Screening Instrument (for Adults, Children and Neonates) (Qty 2, est. \$10K)		\$10,000		PO to be issued
	GMHA IT Network/Systems Infrastructure Needs:			\$ -	
34	Access Control/CCTV Surveillance Systems (est. \$500K)	\$2,000,000	\$500,000		IFB to be issued in May 2024
35	Fire Walls Replacement Pkg. (est. \$365K)		\$365,000		IFB to be issued in May 2024
36	Active Domain Management System (est. \$350K)		\$350,000		RFP to be issued
37	Servers Replacement Pkgs. (est. \$220K)		\$220,000		PO issued
38	SNF IT Server Room (est. \$75K A/E; \$200K Construction)		\$275,000		RFP to be issued
39	40 KVA UPS (Qty 2 for Main Server Room & Laboratory) and 15 KVA UPS (Qty 1 for the Data Center) (est. \$200K)		\$200,000		RFQ to be issued in May 2024
40	HIPAA Compliant Crosscut Shredders (Qty 10) and Patient Information Technology Scanners (Qty 8) (est. \$90K)		\$90,000		RFQ to be issued in May 2024

UPDATED: 05/03/24

Based on Rev-10 3.26/24

\$20,000,000	\$20,000,000	\$	431,984
--------------	--------------	----	---------



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDÁT ESPETÁT MIMURIÁT GUÁHÀN


850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



MEMORANDUM

Date: May 3, 2024

To: Acting Hospital Administrator/CEO

Fr: Acting Associate Administrator of Operations 

Subject: **GMHA 1st Floor Elevator Lobby and 3rd Floor Medical Surgical 2 Unit Water Leaks
After Action Report & Improvement Plan**

Event Name: GMHA 1st Floor Elevator Lobby Area & 3rd Floor Medical Surgical 2 Unit Water Leaks

Type of Event: Emergency Event

Location of Event: 850 Governor Carlos Camacho Rd. Tamuning, GU 96913

Event Start Date & Time: Tuesday, April 30, 2024 @ 10:15 AM

Event End Date & Time: Tuesday, April 30, 2024 @ 5:00 PM

Duration of Event: 6 hours and 45 minutes

Sponsor: n/a

Program: n/a

Mission/Purpose: To provide an After Action Report/Improvement Plan (AAR/IP) on the emergency response relative to the Guam Memorial Hospital Authority's (GMHA) leaks at the 1st floor elevator lobby area and 3rd floor Medical Surgical 2 area. This AAR/IP will enable GMHA to enhance its response and recovery efforts in preparation for future emergency that are similar in nature.

Capabilities: The following capabilities were identified:

- Planning and Intelligence Capabilities – Awareness and preparedness fostered by communications between internal and external partners.
- Intelligence and Communications Capabilities- Logistical readiness and documentation (e.g., utility systems, facilities and maintenance tools and equipment, cleaning supplies and equipment, etc.)
- Communications Capabilities- Maintenance of a safe and secure environment of care at the hospital facility in Tamuning.

DESIRED GMHA'S RESPONSE & RECOVERY END STATE

- Identification of organizational strengths, weaknesses, improvement opportunities and recommendations relative to current organizational doctrine, operational concepts, plans and capabilities; and
- Development and implementation of GMHA's After Action Report/Improvement Plan.

GMHA'S RESPONSE & RECOVERY SEQUENCE OF EVENTS

The following outlines the response and recovery efforts by the Guam Memorial Hospital Authority (GMHA) relative to the water leaks that occurred on the 1st floor elevator lobby area and the 3rd floor Medical Surgical 2 unit on Tuesday, April 30, 2024 in the morning.

1st Floor Elevator Lobby Area

- GMHA's chilled water supply line for the Emergency Department (ED) busted at approximately 10:15 AM on Tuesday, April 30, 2024, which caused water leaks and pooling of water in the first floor elevator lobby and compromised the ED's air handling unit (AHU). In addition, ceiling tiles were soaked with water and fell to the floor.
- All personnel from Environmental Services (ES), Facilities Maintenance (FM), Safety, and Operations executive management, as well as a number of Security and Materials Management (MM) personnel, responded to the emergency need to contain the water.
- Operations staff worked together to place towels on the floor, while FM personnel worked overhead to stop the leak/flooding. FM staff stopped the leak at approximately 10:45 AM.
- Having learned from Typhoon Mawar, the Operations executive management provided a directive to squeegee and channel the water towards the middle courtyard area to the drainage system. ES staff continued to vacuum, mop, and dry the hallway and elevator lobby floor. These activities concluded at approximately 11:30 AM.
- To maintain an adequate environment of care in the ED, FM staff shut down the AHU. FM staff verified that air conditioning split units were turned on, portable A/C units were dispatched to the ED and deployed as needed, and continued to monitor the room temperature until the AHU unit was turned back on.

Medical Surgical 2 Unit

- At approximately 10:40 AM, there were reports of leaking at GMHA's Medical Surgical 2 (MedSurge 2) unit on the third floor of which the nurses' station and one patient room was compromised. In addition, a number of ceiling tiles were soaked with water and fell to the floor.
- A number of personnel from ES, FM, Safety, Security, and MM responded to the emergency need to contain the water.
- Operations staff worked together to place towels on the floor, while FM personnel worked overhead to stop the leak/flooding. FM staff stopped the leak at approximately 11:00 AM.
- ES staff mopped and dried the affected floor areas.
- While the MedSurge 2 leaks did not affect the AHU, out of an abundance of caution, the Acting Hospital Administrator/CEO directed clinical staff to temporarily transfer the one compromised patient room to another unit that could provide the care.

Hospital-Wide Impact & Emergency Response

- Elevators #1, 2, and 3 were temporarily placed off-line so FM staff can assess and ensure that the elevator's electrical system was not compromised by the leaks. Elevator #4 was down due to a scheduled maintenance. Upon containing the flood in the first floor elevator lobby area, FM staff focused their efforts to resume elevator operations. Elevator #3 was operational as of 11:41 AM, while Elevators #1 and #2 were operational as of 4:30 PM.

- GMHA's Public Information Officer maintained communication with the Governor's Office and media.
- The Hospital Administrator/CEO temporarily suspended full patient visitation, but allowed patient visitation to be on a case-by-case basis; which meant those visitors who could manage going up the stairs to see their patient was allowed. Unrestricted patient visitation was resumed once at least Elevator #3 was operational.
- Operations and Nursing Administration coordinated with the Communications Center to make several announcements to the hospital community throughout the emergency.
- Security staff controlled patient and visitor traffic to minimize any safety concerns. Foot traffic was directed to use the front stairwell to travel between floors.
- Due to the elevators being temporarily inoperable, staff from Materials Management and Information Technology & Communications departments assisted the Dietary Department with delivering patient meals to the patient care units by 12:00 PM which is approximately when the meals would have been delivered.

FM Assessment

- Based on process of elimination, FM staff was able to isolate the break was on the chilled water supply line system.
- After the flooding in the 1st floor elevator lobby area was contained, FM staff began their assessment of what caused the chilled water supply line to break. It was determined that the cause was a corroded pipe coupler nut and bolt that broke off. FM staff then started locating the part, procured and replaced on the same day, April 30, 2024.
- After the flooding in the 3rd floor was contained, FM staff began their assessment of what caused the chilled water supply line to leak. It was determined that the cause of the leak was a pressure relief valve that activated to depressurize the chilled water supply line. Further, FM staff assessed that the pressure build-up was related to the 1st floor isolation of the ED AHU chilled water supply line break. Once the 3rd floor chilled water supply line was depressurized, the leak stopped and there was no adverse effect to the chilled water system.
- Upon initial assessment of the damage sustained and recovery efforts needed, Operations executive management determined that there was no immediate need for external assistance from our vendors.

System Restoration

- FM staff tested related systems, such as electrical, fire alarm, CCTV, etc.
- FM assessed and restored elevators #1, 2, and 3.
- FM staff restored the damaged ceiling tiles.
- ES will schedule floor care (i.e., strip and wax) in the affected areas.

Nursing and Clinical Assessment/Interventions

- Communicated with all nursing units and/or unit supervisors regarding current situation, including temporary closure of elevators while situation was being addressed.

- Assessed all units to check if any patients were out of their rooms and on a different floor. Only one patient from Tele was in radiology, stable, and attended to by radiology nurse. Rounded in radiology department to check on the patient and update staff.
- There was another patient on the second floor in process for cardiac cath lab. Was expected to remain in cardiac cath lab and in Care 1 for post procedure. No transfer anticipated for several hours.
- House Supervisor and Nursing Administrators rounded on all nursing units to further assess and direct/address any patient movement.
- Instructed all unit supervisors to huddle with their staff, have patient visitors and watchers informed that elevators are temporarily closed, and to keep them informed with updates.
- All patients were accounted for in each nursing unit.
- Units assessed all upcoming procedures for any need to reschedule. One MRI (non-urgent) was rescheduled.
- Discharges from (second floor areas) OB Ward, Nursery, OR/PACU, and Care 1 clinic were being routed via second floor registration
- There were no delays in admissions from ER. No delay in any transfers between any units.
- ER was holding one ICU patient with an assigned room and no elevator needed to transfer this patient.
- No emergencies activated during this timeframe (i.e., Code Blue, RRT calls, or Code 60).
- Food deliveries were on time. Man power from different divisions assisted to move trays to patient units via the stairs safely.
- No adverse outcomes noted/reported for patients, staff, visitors and support persons (i.e., falls, injuries).
- No issues with visitation.
- Unit supervisors remained in their units, re-evaluated units until elevators were back in service and first floor lobby was clear and open.

GMHA IMPROVEMENT OPPORTUNITIES & RECOMMENDATIONS

- Given the aging hospital infrastructure, it is pertinent for FM staff to conduct a more thorough assessment of the Heating, Ventilation, and Air Conditioning (HVAC) system throughout the hospital to prevent such emergencies from occurring in the future. With HVAC system-related projects (i.e., removal and replacement of chillers, air handling units, etc.) scheduled in the next six to twelve months and beyond, FM staff will conduct visual inspections of the chilled water supply lines during and after the installation and commissioning of the new units.
- GMHA, through our Public Information Officer and Communications Center staff, should continue to ensure that the hospital patients, visitors, and staff, as well as the public, are informed and updated of the emergency situation as soon as practicable and as frequent as possible to allay any fear and panic.
- In light of this emergency and although GMHA has several emergency management plans, GMHA does not presently have a comprehensive hospital evacuation plan. As such, the Safety and Security Administrator is already drafting a comprehensive hospital evacuation plan.

GMHA RESPONSE & RECOVERY EFFECTIVENESS

Overall, there was minimal negative impact to the hospital operations. It was determined that the emergency response did not require an Incident Command to be stood up as the situation was quickly resolved. The hospital-wide coordination, teamwork, and communication amongst all the hospital divisions was critical to ensuring the successful and expeditious resolution of the emergency.

Guam Community Health Centers

Board of Director's Meeting
 Wednesday, May 22, 2024 @ 10:00am
 Southern Regional Community Health Center 162 Asprman Dr. Inallhan,
 Guam <https://www.facebook.com/profile.php?id=61550962051973>

AGENDA

<p>I. Call to Order</p> <p>II. Review and Approval of Minutes</p> <p>III. Public Forum</p> <p>IV. Old Business</p> <p>A. Induction of Board Officers</p> <p>B. National Certification for Quality Assurance Inspection Report as a Patient Centered Medical Home submission for NPHC</p> <p>C. Operations Report</p> <p>1. Staffing Report</p> <p>2. Recruitment of CEO</p> <p>3. Other Staffing</p> <p>a. Pharmacy Waiver Request</p> <p>2. Electronic Health Records</p> <p>a. Update</p> <p>b. HECF - Health Efficient</p> <p>3. Encounter Report</p> <p>D. Grants Reports and Applications - APR SAC, Behavioral Health</p> <p>E. Proposed Updates of Policies</p> <p>F. CHC Facilities' Commission Report</p> <p>1. APRN Mirror Presentation APRN Capital Improvement</p> <p>2. FEMA Repair Project/Reimbursements for GCHCs</p> <p>3. FEMA Hazard Mitigation (Northern and Southern Region Projects)</p> <p>4. SRCHC Roof Repair/Air Conditioning replacement/Painting</p> <p>G. Resolution and MOU between GCHC and Dept. of Rev and Tax</p>	<p>H. DPHSS/DOA MOA</p> <p>I. Amendment to PL 10 GCA Chapter 3 Article 8 Community Health Centers Program</p> <p>V. New Business</p> <p>A. Introduction of new Chief Public Health Officer</p> <p>B. Health Information Technology</p> <p>C. Co-Tenant Program Agreement</p> <p>D. Proposed Fee for Immunization transcription for non-scheduled patients.</p> <p>VI. Chief Medical Director</p> <p>A. Peer Review</p> <p>B. Provider Recruitment/Contracts</p> <p>C. QUALITY ASSURANCE/QUALITY IMPROVEMENT</p> <p>1. In-reach Outreach</p> <p>2. Incident Reports</p> <p>VII. Board</p> <p>VIII. Financial</p> <p>A. FY Budget</p> <p>B. Reports</p> <p>1. Impact of 18% pay increase for nurses</p> <p>2. Current status on Billing and Claims Processing</p> <p>C. FOH: Medicaid Rates</p> <p>D. Insurance's Report</p> <p>X. Announcements/Open Discussion</p> <p>XI. Schedule Next Meeting</p> <p>XII. Adjournment</p>
---	---

For special accommodations please call (671) 635-7447
 This ad is paid by the GCHC Program Income, DPHSS

USSI Hiring/Needed

Electrical Technician

Company Benefits available

671-648-0030/888-0038

fredridm@ussicorp.com

HELP WANTED

LABORERS PAINTERS CARPENTERS

Call or email Matt Murphy
671-487-7781
mattmurphy708@gmail.com

COAST 360

Federal credit union

450 Route 8, Maite, GU 96910 • Tel: 671-477-8736

VEHICLES FOR SEALED BID SALE

- 2013 Nissan 370 Z
- 2015 Nissan Sentra
- 2015 Jeep Renegade
- 2018 Hyundai Elantra
- 2018 Nissan Kicks
- 2019 Mazda CX-5
- 2019 Mitsubishi Mirage
- 2021 Chevrolet Tahoe
- 2023 Mitsubishi Outlander

At this time, bid applications are scheduled by appointment and on weekdays only. To schedule an appointment or for more information, contact Credit Solutions Services at (671) 477-0124. All sealed bid applications must be submitted no later than 5:00P.M., Friday, May 17, 2024. We reserve the right to refuse any and all bids.

Federally insured by NCUA.

LOURDES A. LEON QUERENDI
 Honorable Governor
 At large/At-large

Air Force and International
AIRPORT GUAM

P.O. Box 9770 Tamuning, GU 96910 • Tel: (671) 644-8800

JOSEPH P. TERORIO
 Honorable Lt. Governor
 Segunda Maja 15th

JOHN "TET" GUARDIA
 Executive Manager

ANTONIO "TICKY" HERRANDEZ, Ph.D.
 Deputy Executive Manager

INVITATION FOR BID

DESCRIPTION: REPLACEMENT OF GIAA COOLING TOWER FAN ASSEMBLIES

IFB No: GIAA-CDS-FY24 Project No. GIAA-FY24-005-1	Pre-Bid Conference / Site Visit: (GIAA Conference Room) 10:00 a.m. (CHST) 05/17/24	Deadline for Receipt of Written Questions: (Single Point of Contact) 5:00 p.m. (CHST) 05/21/24	Bid Submission Deadline: (GIAA Admin Office - 3rd floor) 1:00 p.m. (CHST) 06/06/24
--	--	--	--

For additional information, contact Ms. Jerlebe Merlo, the Single Point of Contact, via email at: gliaaibc24@guamairport.net

The complete IFB packet and any addenda are available for public inspection at the GIAA Administration Office and for download from GIAA's website at www.guamairport.com. A non-refundable payment of Ten Dollars (\$10.00) in cash, certified check, or cashier's check is required for an electronic file (.pdf format) on a USB flash drive, which can be obtained at the GIAA Administration Office. All Prospective bidders must register by submitting to GIAA the Acknowledgement of Receipt Form included as part of this IFB. GIAA shall not be liable for failure to provide notice(s) or addenda to any prospective bidder who does not submit an Acknowledgement of Receipt Form. GIAA reserves the right to reject any and all bids and to waive any and all informalties, and such rejection or waiver will be in GIAA's best interest.

GUAM VISITORS BUREAU

OFFICE OF TOURISM

INVITATION FOR BID

PRODUCTION AND DELIVERY OF PROMOTIONAL POLYPROPYLENE NON-WOVEN REUSABLE BAGS

GVB IFB 2024-007

The Guam Visitors Bureau ("GVB"), a public, non-stock, non-profit, membership corporation, issues this invitation for Bid GVB IFB 2024-007 for the production and delivery of promotional polypropylene non-woven reusable bags. GVB intends to enter a multi-term contract for FY2024 and the following three (3) fiscal years thereafter (FY2025, FY2026, FY2027) to ensure continuity of the bag production and design and to ease administrative work.

The Invitation for Bid packages can be downloaded at no cost at https://go.opengovguam.com/bids/bids_list/gvb or obtained (in USB format) at the GVB Office, 401 Pale San Vitores Road, Tumon, Guam, 9:00 AM - 5:00 PM, Monday - Friday, excluding Guam holidays. A non-refundable \$25.00 fee will be charged if packet is picked up at the GVB office (payable in US\$ cash, bank wire transfer or major credit card (Visa MasterCard, Discover, JCB)).

Questions, if any, should be made in writing to the President and CEO, which can be dropped off at the GVB office; emailed to procurement@visitguam.org; or sent by fax to 671-646-3917 according to the timeline provided in the IFB packet.

GVB hereby notifies all bidders that it will affirmatively ensure that minority business enterprises will be afforded full opportunity to submit a response to this invitation for bid and will not be discriminated against on the grounds of race, color or national origin in consideration for an award.

GVB reserves the right to reject any or all bids, solicit new bids, waive minor informalties or irregularities for this procurement. Except to the above person named, direct or indirect contact with the GVB Management or Staff, Board Member, or any person participating in the selection process is prohibited.

Bid submission deadline is at 12:00 p.m. Chamorro Standard Time on Friday, June 7, 2024.

/s/ CARL T. C. GUTIERREZ
 President and CEO

This advertisement was paid for by the Tourist Attraction Fund

GUAM VISITORS BUREAU | ESTABLISHMENT GUAMAHAN
 401 Pale San Vitores Road, Tumon, Guam 96910 | (671) 644-6278 | (671) 646-6861 fax
www.visitguam.com | info@visitguam.com | 1800.visitguam.com

GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDAT ESPETAT MIMURIAT GUAHAN

Board of Trustees Meeting

Date: Wednesday, May 22, 2024
 Time: 5:00 p.m.
 Meeting Location: Pale San Vitores Conference Center
 Meeting ID: 889 2761 9303
 Association: 907879

AGENDA:

- I. Call Meeting to Order and Determination of Quorum
- II. Open Government Compliance
 - A. Publication May 15, 2024
 - B. Publication May 20, 2024
 - C. Complain Notices Points & Ways to Help POC
- III. Approval of the Minutes - April 23, 2024
- IV. Old Business - A. Res. 2024-11, Relative to the Declaration of Officers of the GMAHA Board of Trustees
- V. New Business
- VI. Management's Report
- VII. Guam Memorial Hospital, Volunteers Association Report
- VIII. Board Subcommittee Reports, a. Joint Conference and Professional Affairs: 1. Res. 2024-32 Relative to the Reappointment of Acute Medical Staff Privileges, 2. Res. 2024-33, Relative to the Appointment of Provisional Medical Staff Privileges, 3. Policy No. A-MG100 - Disruptive Practitioner, 4. CY2023 Strategic Goal 5: Engage Physicians & Physician Assistants, 5. Revenue Cycle Management Administration, 7. CY2023 Strategic Goal 4: Engage the Healthcare Workforce, 8. Financial, 9. Operational Improvement, 10. Information Technology, 1. Harmonize Warehouse Mold Remediation Plus 1st Corrective Action, 2. Critical Infrastructure Projects (S274 ARPA Funding), 1. MCH Renovation & Expansion Project, 4. OB Ward/L&D Power Source Project, 5. GMAHA 1st Floor Elevator Lobby & 3rd Floor Mud Sump 2 Leaks ARPA & IP, 6. CY2023 Strategic Goal 2: Enhance Infrastructure & Technology, D. Quality and Safety: 1. CY2023 Strategic Goal 3: Transform Healthcare Services, E. Finance and Audit: 1. Res. 2024-34, Relative to Approval of Patient Receivable Accounts Batch No. 2024-004, 2. CY2023 Strategic Goal 1: Advance Financial Viability of Governance, Bylaws and Strategic Planning, 1. CY2021 Strategic Goal 5: Engage & Partner with the Community
- IX. Public Comment
- X. Adjournment

For special accommodations please contact Theo Rangelan, EEO Officer, at (671) 647-2101. Monday through Friday from 8:00 a.m. to 5:00 p.m.

/s/ Dustin Pardo, DPM, MBA, FACFAS, CWSP
 Acting Hospital Administrator/CEO
 This advertisement is paid with government funds by the GMAHA



GUAM MEMORIAL HOSPITAL AUTHORITY
ATURIDAT ESPETAT MIMURIAT GUAHAN



Board of Trustees Meeting
 Date: Wednesday, May 22, 2024
 Time: 6:00 p.m.
 Meeting will take place via Zoom Video Conferencing
 Meeting ID: 888 5741 9303
 Passcode: 907878

AGENDA:

- I. Call Meeting to Order and Determination of Quorum
- II. Open Government Consultation
 - A. Publication, May 15, 2024
 - E. Publication, May 29, 2024
 - C. Guam Human Resource Portal & Virtual Assistance
- III. Approval of the Minutes, April 24, 2024
- IV. Old Business: A. Res. 2024-31, Relative to the Disposition of Officers of the Board of Trustees
- V. New Business
- VI. Management Report
- VII. Guam Memorial Hospital Volunteers Association Report
- VIII. Board Subcommittees Reports: A. Joint Conference and Professional Affairs 1. Res. 2024-32, Relative to the Reappointment of Active Medical Staff Physicians; 2. Res. 2024-33, Relative to the Appointment of Provisional Medical Staff Physicians; 3. Policy No. AMMS189, Disruptive Practitioner; 4. CY2023 Strategic Goal 6, Engage Physicians; B. Human Resources 1. Reverse Cycle Management Administrator; 2. CY2023 Strategic Goal 4, Engage the Healthcare Workforce; C. Facilities, Capital Improvement Projects, and Information Technology 1. Hermon Warehouse Mold Remediation Plan of Corrective Action; 2. Critical Infrastructure Projects (R204 AFPA Funding); 3. ACH Renovation & Expansion Project; 4. B Ward/PLD Power Source Project; 5. MHA 1st Floor Elevator Lobby & 3rd Floor Med Surg 2 Level AARP & P; 6. CY2023 Strategic Goal 2, Enhance Infrastructure & Technology; D. Quality and Safety 1. CY2023 Strategic Goal 3, Transform Healthcare Services; E. Finance and Audit 1. Res. 2024-34, Relative to Approval of Patient Receivable Accounts Batch No. 2024-084; 2. CY2023 Strategic Goal 1, Achieve Financial Viability; E. Governance, Ethics, and Strategic Planning 1. CY2023 Strategic Goal 5, Engage & Partner with the Community
- IX. Public Comments
- X. Adjournment

For special accommodations please contact Theo Pangelinan, EE, Director at (671) 647-2111 Monday through Friday from 8:00 a.m. to 5:00 p.m.

for Dustin Pina, CPA, MBA, FACFAS, CMSP
 Acting Hospital Administrator of CEO
 This advertisement is paid with government funds by the GMHA



Office of the Speaker
 Therese M. Terlaja

I Mina'trentai Siette Na Liheslaturan Guahan

CALL TO SESSION

Tuesday, May 28, 2024

I Liheslaturan will be called into session on Tuesday, May 28, 2024 at 8:30 AM at the Guam Congress Building.

AGENDA

(Pursuant to Standing Rules 3.02.c.)

- (i) Call to Order (ii) Prayer (iii) Recognition of a Recipient of / Mlayan Mas Tahhō Na Solomōn (iv) Reading of Address (v) Singing of the Guam Hymn in Chamoru (vi) Singing of the National Anthem (vii) Roll Call (viii) Call for Approval of the Legislative Journal (ix) Communications and Petitions (x) Messages from / Mlaga Tagan Guahan (xi) Reports of Standing Committees (xii) Reports of Select Committees (xiii) Introduction and First Reading of Bills and Resolutions (xiv) Motions - Vetoes Bills Resolved - VETOED BILL NO. 7-37 (COR); AN ACT TO ADD A NEW § 19406, AND AMEND §§ 19405(b), 19405(c), AND 19605(c) OF CHAPTER 19, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO PROHIBITING THE SUSPENSION OF CONSTITUTIONAL RIGHTS; AND TO REPEAL CRIMINAL PENALTIES FOR VIOLATIONS OF EXECUTIVE ORDERS VETOED BILL NO. 89-37 (COR); AN ACT TO ADD A NEW § 4101 (a)(1)(E) OF ARTICLE 1, AND A NEW § 4203.4 OF ARTICLE 2, BOTH OF CHAPTER 4, TITLE 4, GUAM CODE ANNOTATED, AND TO AMEND 49.50 OF CHAPTER 49, TITLE 9, GUAM CODE ANNOTATED, RELATIVE TO THE PROHIBITION OF EMPLOYMENT IN THE GOVERNMENT OF GUAM FOR INDIVIDUALS CONVICTED OF OFFICIAL MISCONDUCT VETOED BILL NO. 136-37 (COR) - AN ACT TO ADD A NEW § 7117 TO CHAPTER 7, TITLE 17, GUAM CODE ANNOTATED RELATIVE TO ALLOWING THE USE OF EMERGENCY PROCUREMENT PROCEDURES TO ENABLE THE GUAM DEPARTMENT OF EDUCATION TO COMPLY WITH PUBLIC LAW 37-4 IN THE WAKE OF TYPHOON MAWAR; VETOED BILL NO. 189-37 (COR); AN ACT TO ADD A NEW ARTICLE 11 AND A NEW § 51A120(c) TO CHAPTER 51A OF TITLE 10, GUAM CODE ANNOTATED; AND ADD A NEW § 14104(p) TO CHAPTER 14 OF TITLE 12, GUAM CODE ANNOTATED, RELATIVE TO ESTABLISHING THE GUAM SOLID WASTE AUTHORITY ISLANDWIDE COLLECTION PLAN; VETOED BILL NO. 185-37 (LS) - AN ACT TO ADD A NEW § 83117 TO CHAPTER 83 OF TITLE 12, GUAM CODE ANNOTATED, RELATIVE TO REQUIRING ANY NEW HOSPITAL CONSTRUCTED PURSUANT TO THE GUAM TWENTY-FIRST (21ST) CENTURY HEALTHCARE CENTER ACT OF 2021 TO BE CONSTRUCTED ON LOT 5173-1-R2NEW-R7, LOT 5173-1-R2NEW-7, AND LOT 5173-1-R2NEW-6 IN THE VILLAGE OF TAMUNGING; VETOED BILL NO. 208-37 (COR) - AN ACT TO AMEND §§ 3803, 3805, 3806, 3807, 3808, 3809, 3810, 3811, 3813, AND 3814 OF ARTICLE 8, CHAPTER 3, TITLE 18, GUAM CODE ANNOTATED, RELATIVE TO UPDATING THE COMMUNITY HEALTH CENTER PROGRAM, ITS ADVISORY COUNCIL, AND THE DUTIES OF THE COUNCIL CONCERNING COMMUNITY HEALTH CENTERS; VETOED BILL NO. 213-37 (COR) - AN ACT TO ADD A NEW § 1909(c)(1) TO CHAPTER 19 OF TITLE 1, GUAM CODE ANNOTATED, RELATIVE TO THE DUTIES OF THE PUBLIC AUDITOR; VETOED BILL NO. 234-37 (COR) - AN ACT TO AMEND § 90.308 OF ARTICLE 7, CHAPTER 90, TITLE 9, GUAM CODE ANNOTATED, RELATIVE TO INCREASING THE PLEDGE OR RESERVATION OF REVENUES OF THE DEPARTMENT OF CORRECTIONS MODERNIZATION ACT OF 2021; (iv) Legislative Concurrence - Appointment of Rene K. Borja to serve as a Member (General Public Representative) of the Guam Contractors License; Appointment of Michael A. Agro to serve as a Member of the Guam Visitors Bureau Board of Directors; (v) Consent Calendar (vi) Second Reading File: BILL NO. 109-37 (LS) - AN ACT TO ADD A NEW § 4124(b)(3) AND (4) TO CHAPTER 4 OF TITLE 17, GUAM CODE ANNOTATED, RELATIVE TO PROVIDING PARITY BY CREATING AN EXEMPTION FROM COMPLETING THE FULL SEVENTY-FIVE (75) HOURS OF SERVICE LEARNING REQUIREMENT FOR GRADUATING HIGH SCHOOL STUDENTS IN SCHOOL YEAR 2023-2024 AND INSTEAD REQUIRE THE COMPLETION OF THIRTY-FIVE (35) HOURS OF SERVICE LEARNING AND FOR GRADUATING HIGH SCHOOL STUDENTS IN SCHOOL YEAR 2024-2025 AND INSTEAD REQUIRE THE COMPLETION OF FIFTY-FIVE (55) HOURS OF SERVICE LEARNING; BILL NO. 153-37 (LS) - AN ACT TO ADD A NEW SUBSECTION 80.37(b) TO ARTICLE 2, CHAPTER 80, TITLE 9, GUAM CODE ANNOTATED, RELATIVE TO THE POSSESSION OR USE OF AN EXPLOSIVE OR AN IMPROVISED EXPLOSIVE DEVICE IN THE COMMISSION OF A FELONY; BILL NO. 189-37 (COR) - AN ACT TO AMEND §§ 25.19(b) AND 25.20(b) TO CHAPTER 25 OF TITLE 9, GUAM CODE ANNOTATED, RELATIVE TO ENACTING HIGHER MINIMUM SENTENCING REQUIREMENTS FOR INDIVIDUALS CONVICTED OF FIRST AND SECOND DEGREE CRIMINAL SEXUAL CONDUCT INVOLVING VICTIMS UNDER 12 YEARS OF AGE; BILL NO. 227-37 (LS) As Amended - AN ACT TO AMEND § 1909(f) RELATIVE TO ENHANCING THE INDEPENDENT STATUS OF THE OFFICE OF PUBLIC ACCOUNTABILITY (OPA) BY CONTINUOUSLY APPROPRIATING ONE-QUARTER (0.25) OF ONE PERCENT (1%) OF THE GOVERNMENT OF GUAM'S ANNUAL BUDGET TO THE OPA; BILL NO. 240-37 (COR) As Amended - AN ACT TO AMEND § 34111(b) AND ADD NEW §§ 34401, 34402, AND 34403 OF ARTICLE 1, CHAPTER 34, TITLE 5, GUAM CODE ANNOTATED, RELATIVE TO EFFECTIVELY DISTRIBUTING AND DISPOSING OF UNDISTRIBUTED CHILD SUPPORT FUNDS AT THE OFFICE OF THE ATTORNEY GENERAL OF GUAM; Resolution No. 218-37 (COR) - RELATIVE TO SUPPORTING H.R. 522, DELIVER FOR VETERANS ACT, INTRODUCED IN THE UNITED STATES HOUSE OF REPRESENTATIVES, WHICH AIMS TO COVER THE SHIPPING AND DELIVERY EXPENSES OF ADAPTIVE VEHICLES PROVIDED FOR VETERANS WITH DISABILITIES; BILL NO. 268-37 (COR) As Amended - AN ACT TO ADD NEW SECTIONS 67111, 67112, AND 67113 TO ARTICLE 1 OF CHAPTER 67 OF TITLE 10 OF THE GUAM CODE ANNOTATED RELATIVE TO THE SERVICES PROVIDED BY THE OFFICE OF VETERANS AFFAIRS; BILL NO. 274-37 (COR) As Amended - AN ACT TO ADD A NEW § 14104(p) TO ARTICLE 1 OF CHAPTER 14, DIVISION 1, TITLE 12, GUAM CODE ANNOTATED, RELATIVE TO AUTHORIZING THE GUAM WATERWORKS AUTHORITY TO ESTABLISH A CUSTOMER ASSISTANCE PROGRAM TO PROMOTE WATER CONSERVATION AND TO FACILITATE REPAIRS ON PRIVATE PROPERTY; BILL NO. 277-37 (LS) As Amended - AN ACT TO APPROPRIATE FIFTEEN MILLION EIGHT HUNDRED TWENTY-EIGHT THOUSAND DOLLARS (\$15,828,000) FROM FISCAL YEAR 2024 GENERAL FUND REVENUES COLLECTED IN EXCESS OF THE ADOPTED LEVELS ENUMERATED IN PUBLIC LAW 37-42, AS AMENDED, TO THE GUAM POWER AUTHORITY FOR A THREE (3)-MONTH EXTENSION TO THE PROGRAMAN AYUDA PARA I TAOTAO-TA ENERGY CREDIT PROGRAM, RELATIVE TO PROVIDING CUSTOMERS WITH THREE HUNDRED DOLLARS (\$300) CREDIT TOWARD THEIR ACCOUNT; BILL NO. 285-37 (LS) As Amended - AN ACT TO APPROPRIATE ONE MILLION DOLLARS (\$1,000,000) FROM FISCAL YEAR 2024 GENERAL FUND REVENUES COLLECTED IN EXCESS OF THE ADOPTED LEVELS ENUMERATED IN PUBLIC LAW 37-42, AS AMENDED, TO THE GUAM OFFICE OF VETERANS AFFAIRS RELATIVE TO INCREASING SERVICES AND OPERATIONS; BILL NO. 280-37 (COR) As Amended - AN ACT TO ADD A NEW § 8108(f) OF DIVISION 1, CHAPTER 8, TITLE 11, GUAM CODE ANNOTATED, RELATIVE TO LAWFUL OPERATION OF CANNABIS-RELATED FACILITIES; BILL NO. 361-37 (LS) As Amended - AN ACT TO ADD A NEW § 8108(f) OF DIVISION 1, CHAPTER 8, TITLE 11, GUAM CODE ANNOTATED, RELATIVE TO LAWFUL OPERATION OF CANNABIS-RELATED FACILITIES; BILL NO. 289-37 (LS) As Amended - AN ACT TO ADOPT THE 51 NEW HOSPITAL FEES PROPOSED BY THE GUAM MEMORIAL HOSPITAL AUTHORITY AND RECEIVED BY I MINA'TRENTAI SIETTE NA LIHESLATERAN GUAHAN ON APRIL 11, 2024; (viii) Consideration of the Daily File; (1) Third Reading File (2) Voting File (iii) Brief Extension of Remarks (iii) Announcements; and (iii) Adjournment.

All bills, resolutions, and appointments can be found at <https://guamlegislature.com/index/the-legislature/>. The placement of bills, resolutions, and appointments on this session agenda will be pursuant to Standing Rules. The session will be broadcast on GTA Channel 21, DocuOne Channel 117 and at http://www.guamlegislature.com/live_feed.htm. A recording of the session will be available online via Guam Legislature Media on YouTube after the session. Please email senatoraralejaguo@gmail.com or (671) 472-3586 if you require any special accommodations or further information. This ad is paid for by Legislature funds.

AVAILABLE JOBS FOR ELIGIBLE U.S. WORKERS

13 - CARPENTER with min. 1 yr. exp. \$15.58 PER HOUR*

Duties: Constructs and builds window sills, shelves, cabinets, back splashes, and other wooden fixtures used in buildings, using woodworking machines, carpenter's hand tools or power tools. Study specifications in blueprints, sketches or building plans to determine type of work required and materials needed. Selects wood and required materials. Measures and marks cutting lines on materials, using a ruler, pencil, chalk and marking gauge. Prepares layout using ruler, framing square, and calipers. Shapes and/or cuts materials to specified measurements, using hand tools, machines, or power saws. Installs shelves, cabinets, countertops, back splashes, closet rods, handrails, and window sills using carpenter's hand or power tools. Verifies trueness of structures using plumb bob and level. Finishes surfaces of woodwork and applies decorative or textured finishes. Follows established safety rules and regulations and maintains a safe and clean work site.

2 - CONSTRUCTION SUPERVISOR with min. 2 yrs. exp. \$24.27 PER HOUR*

Duties: Supervises and coordinates activities of construction workers in performing construction works. Reads specifications such as blueprints to determine construction requirements and to plan procedures. Estimate material and worker requirements to complete jobs and assigns work to employees. Order or requisition materials and supplies. Examines and inspects work progress, equipment, and construction sites to verify safety and to ensure that specifications are met. Supervises, coordinates, and schedules the activities of the construction workers. Trains workers in construction methods, operation of equipment, safety procedures, and company policies. Assists the workers with carpenter works and computer numerical control (CNC) machining work and production. Confers with managerial and technical personnel in order to resolve problems and to coordinate activities.

Verification of qualifications required.

*Special Wage Rate: Work to be performed on DPRH-funded projects and projects covered by Davis Bacon, Service Contracts Act, and/or Executive Order 14206 will be paid no less than the indicated wage rate but may be paid more where special rates apply

Benefits: Round trip airfare for off-island hire; lodging at \$40.00/week; local transportation toll from jobsite from the employer's designated housing facility; and Employer/employee-paid medical insurance provided.

Successful applicant must be able to obtain military base access. Off-island applicants must complete a health screening prior to working on Guam.

The job offer meets all EEO requirements, and initiates a temporary placement. The recruitment associated with this job offer is closely monitored by the Department of Labor. Qualified, available and willing U.S. workers are highly encouraged to apply. Should you qualify for the job and are not hired, you may appeal with the Department of Labor who will independently review matter.

Apply in person at the American Job Center
 414 W. Soledad Avenue, Suite 300 GCIC Building Hagatna, Guam
 Or apply online at www.hiringuam.com; Enter Keyword: 2024-063

GMHA Board of Trustees Meeting

 PRINT

GMHA Board of Trustees Meeting MEETING



 **Posted on:** 05/15/2024 10:32 AM

 **Posted by:** Justine Camacho, BOT Admin. Asst. - Janet Mandapat

 **Meeting Date:** 05/22/2024 05:00 PM

 **Department(s):**
GUAM MEMORIAL HOSPITAL AUTHORITY (/notices?department_id=51)

 **Division(s):** HOSPITAL ADMINISTRATION (/notices?division_id=178)

 **Notice Topic(s):** BOARD MEETING (/notices?topic_id=76)

 **Types of Notice:** MEETING (/notices?type_id=5)

 **For Audience(s):** PUBLIC (/notices?public=1)

 **Share this notice**

Item

Owner

I. Welcoming | Call Meeting to Order and Determination of Quorum Trustee Obispo

II. Open Government Compliance

- A. Publication, May 15, 2024
- B. Publication, May 20, 2024
- C. GovGuam Notices Portal & Website Posting

III. Review and Approval of the Minutes

A. April 24, 2024

All Trustees

IV. Old Business

- A. Res. 2024-31, Relative to the Declaration of Officers of the Guam Memorial Hospital Authority Board of Trustees

All Trustees

V. New Business

All Trustees

VI. Management's Report

Executive Management

VII. Guam Memorial Hospital Volunteers Association Report

GMHVA President

VIII. Board Subcommittee Reports

A. Joint Conference and Professional Affairs

- 1. Res. 2024-32, Relative to the Reappointment of Active Medical Staff Privileges
- 2. Res. 2024-33, Relative to the Appointment of Provisional Medical Staff Privileges
- 3. Policy No.: A-MS100 - Disruptive Practioner
- 4. CY2023 Strategic Goal: 5 Engage Pysicians

Trustee Dr. Um

B. Human Resources

- 1. Revenue Cycle Management Administrator
- 2. CY2023 Strategic Goal 4: Engage the Healthcare Workforce

Vice Chairperson Obispo

**C. Facilities, Capital Improvement Projects,
and Information Technology**

Trustee Davis

1. Harmon Warehouse Mold Remediation Plan of Corrective Action
2. Critical Infrastructure Projects (\$20M ARPA Funding)
3. MCH Renovation & Expansion Project

4. OB Ward/L&D Power Source Project

Trustee Obispo,
Kleiner

5. GMHA 1st Floor Elevator Lobby & 3rd

Floor Med Surg 2 Leaks AARP & IP

6. CY2023 Strategic Goal 2: Enhance Infrastructure & Technology

Trustee Aguilar,
Obispo

D. Quality and Safety

1. CY2023 Strategic Goal 3: Transform Healthcare Services

E. Finance and Audit

Trustees Dr.
Borja, Siliang

1. Res. 2024-34, Relative to Approval of Patient Receivable Accounts Batch No. 2024-004

2. CY2023 Strategic Goal 1: Achieve Financial Viability

F. Governance, Bylaws, and Strategic Planning

1. CY2023 Strategic Goal 6: Engage & Partner with the Community

IX. Public Comment

X. Adjournment

Trustee Obispo