

PUBLIC NOTICE

CITY OF ALAMEDA HEALTH CARE DISTRICT BOARD OF DIRECTORS

MEETING AGENDA

Thursday, September 9, 2021

OPEN SESSION: 4:00PM

Location: Remote via ZOOM

Open Session Via ZOOM

Join Zoom Meeting – Open Session - September 9, 2021

Time: 4:00PM Pacific Time (US and Canada)

Topic: Special Board Meeting, Updates on SB 1953 Legislation and Seismic Advocacy

Join Zoom Meeting

<https://us02web.zoom.us/j/89890526029?pwd=RIRTUG1NRTISWFZZSmFZSEo4c21lZz09>

Meeting ID: 898 9052 6029

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Office of the Clerk: 510-263-8223

Members of the public who wish to comment on agenda items will be given an opportunity before or during the consideration of each agenda item. Those wishing to comment must complete a speaker card indicating the agenda item that they wish to address and present to the District Clerk. This will ensure your opportunity to speak. Please make your comments clear and concise, limiting your remarks to no more than three (3) minutes.

- I. **Call to Order** Michael Williams
- II. **Roll Call** Leta Hillman
- III. **Open Session Agenda**
 - A. Call to Order Mike Williams
 - ✓ B. Minutes From August 9, 2021 Board Meeting (enclosure 2-6) Mike Williams
 - C. Update on Rules Impacting Board meetings under Brown Act Debi Stebbins
 - D. Report on Advocacy Efforts relating to 2030 Seismic Requirements Debi Stebbins

IV. **Adjournment**

City of Alameda Health Care District		Minutes of the City of Alameda Health Care District Board of Directors- Held via ZOOM	
		Open Session Monday, August 9, 2021 Regular Meeting	
Board Members Present:		Legal Counsel Present	Also Present
Tracy Jensen, Robert Deutsch MD, Mike Williams Stewart Chen DC, Gayle Codiga		Tom Driscoll	Debi Stebbins, Leta Hillman
Submitted by: Leta Hillman, Executive Assistant			
Topic		Discussion	Action / Follow-Up
I. Call to Order		The meeting was called to order at 5:40pm by President Michael Williams	
II. Roll Call		Roll had been called prior to the start of the closed session. A quorum of Directors was present.	
III. General Public Comments		No public comments	
IV. Regular Agenda		Mike Williams and Gayle Codiga met with Debi Stebbins to renew the contract. The contract rate was increased to \$170,000 annually, with no other changes. More time was spent on the Alameda Hospital seismic project and community outreach. Tracy Jensen approved the motion, with Gayle Codiga seconding. Roll call was taken and the contract was approved 5-0	
A. Approval to renew Executive Director Contract: July 1, 2021 to June 30, 2022			
B. YTD AHS Reporting			
	1)	Alameda Health System/ Alamedas Hospital Update/ Status of 2020 Alameda Hospital Seismic Project Seismic Project: The kitchen is planned to open at the end of October. The bridge will close on August 11, 2021 demolition begins on August 23, 2021 and is scheduled for completion on January 31, 2022. Transfers to Alameda Hospital: For July, 2021, all transfers came from Highland and San Leandro Hospitals in July. Highland Hospital's Surgical units transfers the most patients. None of the transferred patients were upgraded to ICU. Boarding time from Highland Hospital was reduced by 6%. Mark is committed to working with Highland and Alameda Hospitals to improve the transfer process. Surgical Volume: Highland Hospital has insufficient OR capacity to meet the demand and backlog. Dr. DiStefano and Dr. Victorino are in discussions on how to reduce the backlog. Of the 5 OR rooms at each hospital, only 2 are being used. The recommendation for Alameda Hospital is to run 3 operating rooms per day, transition elective procedures to Alameda Hospital. The recommendation for San Leandro Hospital is a phased increase: phase 1 starts with 2 operating rooms per day, phase 2 starts with 3 operating room per day. There would be a gradual transition of Vascular, General Surgery, Podiatry and Dental procedures to San Leandro Hospital. A	Mark Fratzke, Interim COO

		<p>workgroup will be formed to analyze block scheduling. An analysis and review will be performed at 6 months, with continued assessments.</p> <p>Length of Stay Initiative: The goal is to decrease the length of stay by 0.5 days, resulting in cost savings of \$8 million. This will be done by: length of stay meeting, daily afternoon discharge meeting.</p> <p>Chief Administrator Officer Search: There are 6 candidates, 2 will be selected, one for Highland Hospital, one for San Leandro/Alameda Hospital. Patty Espeseth, LMFT has been appointed Chief Administrative Officer at John George. A start date of mid-September is planned.</p>	
	2)	<p>Patient Experience/ Follow-up on Management of Emergency Department arrivals by Alameda Fire Department Ambulances</p> <p>Patient Experience Scores for May: Remain strong; call button help ,doctors treat with courtesy and respect, hospital staff and nurses treat with courtesy and respect are meeting goals. The action plan remains a focus.</p> <p>Ambulance Off-Loading: Data is for April, May and June. Extensive wait time have increased, based on three reported incidents received from the Alameda Fire/EMS departments. Following a review, it was discovered that staff believed it was acceptable to hold patients in ambulances while being monitored by the EMS crew than to bring them in to an at capacity emergency department. The recommendation made by the Nurse Manager is that this is not an acceptable practice. A new detailed plan is being implemented to quickly receive patients and provide efficient placement. Changes have been made to assure the right team member is placed in the role. Meetings now include the Nursing team coordinating with Hospitalists to obtain admission orders. Nursing leadership communicates via the unit "SMILE" Huddle Board. Shift Coordinators on each floor are directed to review reports and accept admissions from the Emergency Department if a primary RN is not available. The coordinators manage the flow. Debi Stebbins met with Dr. Joshi at Alameda Hospital and suggested that state mandated staffing ratios may have contributed to the problem.</p> <p>More admission issues are happening during the evening shift as after midnight admissions are increasing at a much higher rate.</p>	Ronica Shelton, VP Patient Care Services
	3)	<p>Alameda Health System Financials and Budget Update</p> <p>AHS holds their books open until the end of July, then the information is given to the auditors. Final financial statements are presented in November. FY22 Operating Budget was approved. Entity based, stand alone financial statements will be provided on a monthly basis. These will be used in Strategic Planning. These entity based statements will show performance and efficiencies.</p> <p>YTD: Operating Revenue below budget by \$21.1 million with lower volumes. \$30.9 million provided by CARES funding. Labor and benefit costs are adding to operating expenses. Net Income YTD is \$34.1 million and below budget by \$35.4 million.</p> <p>AR Days increased 3.0 days from the prior month. Net Negative Balance is below the June 30, 2021 target of \$120 million.</p> <p>Patient Collection: FY 21 cash collections are \$563 million, exceeding FY 20 and FY19. AHS is forecasting lower collections due to lower volumes caused by the COVID-19 pandemic.</p> <p>Capital Expenditures were not completed due to projects not being started.</p>	Kimberly Miranda, AHS CFO
	4)	<p>Alameda Hospital Medical Staff Update</p> <p>There is a new Critical Care Team and a new Tele-Neurology Program. Highland Transfers: Due to an issue, there is now an "Administrator on Call" to expedite. Dr. Pyun will distribute the schedule when it becomes</p>	Dr. Catherine Pyun Chief of Medical Staff

		<p>available. Alameda Hospital would like to have access to e-consult services, this would let physicians conduct follow-up visits and expedite patient discharges. Dr. Deutsch suggested having an “on call” list to include the physicians phone numbers for quick contact. Dr. Pyun would like Alameda Hospital to accept more transfer patients, but physician specialties at Alameda Hospital are not as extensive as at Highland Hospital. Dr. Amina Williams advised Dr. Pyun there would be a pilot program planned for the opening of one or two sub-specialties.</p> <p>Working on MRI protocols for out-patients, now there are extensive wait times.</p>	
C. District & Operational Updates			
	1)	District Liaison Reports	
		<p>a. President’s Report: No items to report Executive Director’s compensation and contract renewal were previously reviewed.</p>	<p>Michael Williams No action taken</p>
		<p>b. Alameda Health System Liaison Report Director Jensen thanked Mark Fratzke, Kimberly Miranda, Dr. Pyun and Ronica Shelton for their contributions to this meeting.</p>	<p>Tracy Jensen No action taken.</p>
		<p>c. Alameda Hospital Liaison Report Dr. Deutsch stressed the need for “Best Practices” for patient care.</p>	<p>Robert Deutsch, MD No action taken</p>
		<p>d. Executive Director Report and Board Updates Debi Stebbins thanked Dr. Pyun for the update on the clinical issues. There is opportunity for greater synergy between Alameda and Highland Hospitals.</p> <p>1. A major priority is advocacy for the amendment to SB 1953, it would cost \$200 million to achieve these standards within the South Wing. Through the California Hospital Association, the focus is on a “budget trailer”, tentatively approved by the Governor. The Hospital Disaster Modernization Plan would take the place of the current 2030 standards and beyond the 2020 standards. The difference is the new plan would require that hospitals show they could operate emergency services (to include diagnostic and emergency services) for a period of time following a major earthquake. There will be an effort to contact organized labor who are the main opponents to this amendment. There are plans to contact other community members. The focus is to have a working Emergency Room department after an earthquake.</p> <p>The Joint Strategic Planning Committee is beginning to work on initiatives:</p> <ul style="list-style-type: none"> - To we need a focus study with an outside consultant for new programs and how Alameda Hospital can be a part of the Alameda Health System. - The Kaufman Hall proposal received last year has been reviewed. A few consulting firms are being looked at to review proposals that would benefit the entire AHS system. - Discussed possible new programs that are good for the community (restoration of primary care, maximizing the use of the Emergency Department, geriatric-psych program, developing a geriatric certified emergency department). <p>-Current Insurance Coverage is due for a review. All current policies and premiums are included in the packet. Matt McManus of Alliant Insurance will be asked to speak at the October Board Meeting.</p>	<p>Debi Stebbins</p>

		Questions for the District Board: Do we need cyber and crime coverage? The premiums for Property Coverage which covers property loss has increased approximately by 40%, the original estimate was 25%.	
		e. Alameda Hospital Strategic Planning Committee Report - Committee updates were included in the Executive Director's report.	Gayle Codiga
D. Consent Agenda			
	1)	Acceptance of Minutes of June 14, 2021 District Board Meeting	A motion was made, seconded and carried to approve the minutes of the board meeting. 4 members in attendance and 1 member was absent
	2)	Acceptance of Financial Statements for April, May and June 2021	A motion was made, seconded and carried to accept the financial statement results. 4 members in attendance and 1 member was absent
E. October 11, 2021 Agenda Preview			
	1)	Acceptance of August 9, 2021 Minutes	
	2)	Acceptance of July and August 2021 Financial Statements	
	3)	Election of Officers and Appointments to Liaison Positions (President, Vice President, Treasurer and Secretary)	
	4)	Overview of Alameda Health Care District Insurance Coverage: Matt McManus, Alliant Insurance to Present	
	5)	Report From Community Advisory Board's August 24, 2021 meeting and the Alameda Hospital Strategic Planning Committee)	
	6)	Proposed Board Meeting Calendar FY 2021-2022	
		Informational Items:	
	1)	YTD AHS Reporting (CAO/Hospital, Quality, Financial, Medical Staff Reports)	
VI. General Public Comments			None

<p>VII. Board Comments Stewart Chen inquired about the Governor's Mandate that all health care workers be vaccinated.</p>			<p>Ronica Shelton provided an update that implementation meetings have just started. At AHS for staff, proof of vaccination and twice weekly COVID-19 testing are now required to continue working. For visitors, a vaccine or proof of a negative COVID-19 test will be required. These programs will be in place by August 23rd.</p> <p>For post acute patients, Richard Espinosa added that the visitor program is already in place. There are currently no positive patients in the system's Skilled Nursing Facilities though there remain unvaccinated staff.</p>
<p>VIII. Adjournment</p>			<p>There being no further business, the meeting was adjourned at 7:15pm</p>

Approved: _____