

MINUTES
MEDICAL UNIVERSITY HOSPITAL AUTHORITY
BOARD OF TRUSTEES MEETING

December 11, 2015

The Board of Trustees of the Medical University Hospital Authority convened Friday, December 11, 2015, with the following members present: *Dr. Donald R. Johnson II, Chairman; Mr. William H. Bingham, Sr., Vice-Chairman; Dr. Stanley C. Baker, Jr.; Mr. William A. Baker, Jr.; Ms. Terri R. Barnes; The Honorable James A. Battle; Dr. Harold W. Jablon; Dr. James Lemon; Ms. Barbara Johnson-Williams; Dr. E. Conyers O'Bryan, Jr.; Mr. Charles W. Schulze; Dr. G. Murrell Smith, Sr.; Thomas L. Stephenson, Esquire; Mr. Michael E. Stavrinakis; Dr. Charles B. Thomas, Jr.* Absent: *Dr. Ragin C. Monteith*

The following administrative officials were present: Dr. David Cole, President; Dr. Mark Sothmann, Provost; Dr. Bruce Elliott, Interim Vice President for Medical Affairs, Dr. Deborah Deas, Interim Dean, College of Medicine; Ms. Lisa Montgomery, Executive Vice President for Finance and Operations; Dr. Pat Cawley, Vice President for Clinical Operations and Executive Director, MUHA; Mr. Jim Fisher, Vice President for Development.

Item 1. Call to Order-Roll Call.

There being a quorum present, Chairman Johnson called the meeting to order at 8:00 a.m. Ms. Celeste Jordan called the roll. She announced the following: *In compliance with the Freedom of Information Act, notice of meetings and agendas were furnished to all news media and persons requesting notification.*

Item 2. Secretary to Report Date of Next Meeting.

The date of the next regularly scheduled meeting is Friday, February 12, 2016.

Item 3. Approval of Minutes of the Regular Meeting of the Medical University Hospital Authority of October 9, 2015.

Board Action: It was moved that the Minutes be approved. The motion was seconded, voted on and unanimously carried.

RECOMMENDATIONS AND INFORMATIONAL REPORTS OF THE PRESIDENT

OLD BUSINESS: None.

NEW BUSINESS:

Item 4. General Informational Report of the Interim President.

Dr. Cole called on Dr. Patrick Cawley to introduce Dr. William Moran. Dr. Cawley said Dr. Moran graduated from Medical School and completed residency training in Internal Medicine at Georgetown University. He completed a Geriatrics Fellowship and received a MS in Clinical Epidemiology from Wake Forest University in 1992. In 2005, he joined the MUSC faculty as McKnight Professor on Aging and Director of the Division of General Internal Medicine and Geriatrics. His areas of focus include analysis of the clinical environment, coordination of the clinical teams and informatics infrastructure for the Patient-Centered Medical Home.

Dr. Moran presented information on Patient-Centered Medical Home which is a new care delivery model for primary care. He discussed the principles, implications and measures of the model. Some expected outcomes of the model are to 1. move primary care from high volume of service to high value care; 2. Work as a team to provide high quality, safe and more effective care and 3. Prevent avoidable cost and utilization.

Dr. Cole thanked Dr. Moran for his presentation and said that concluded his report.

Recommendation of Administration: That the report be received as information.

Board Action: Received as information.

Item 5. Other Business. None.

OPERATIONS, QUALITY AND FINANCE COMMITTEE. CHAIRMAN: DR. STANLEY C. BAKER, JR. (Detailed committee minutes are attached to these minutes).

OLD BUSINESS: None.

NEW BUSINESS:

Item 6. MUSC Medical Center Status Report.

Statement: Dr. Baker said Dr. Crawley had provided a report to committee and included in the report was an update on the following: FY2016 goal performance year to date; Certificate of Need outcomes; Initiant and ART 7 opening.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.

Item 7. MUSC Medical Center Financial and Statistical Report.

Statement: Dr. Baker said Mr. Hargett had provided a report to committee and stated that the FY15 Audit has been completed and it was another good audit year for the Medical Center.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

Item 8. Report on Quality and Patient Safety.

Statement: Dr. Baker said the committee received a report from Dr. Scheurer on

Quality and Patient Safety.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.

Item 9. Update on MUSC Physicians.

Statement: Dr. Baker stated Dr. Rockey had presented a report to committee and also requested approval for the following:

Purchase of a Transcranial Magnetic Stimulation Device (TMS) machine by the Department of Psychiatry and Behavioral Sciences for the Primary Care Expansion that will be located at Carnes Crossroads.

Recommendation of Administration: That the purchase be approved.

Recommendation of Committee: That the purchase be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the purchase as presented.

Item 10. Legislative Update.

Statement: Dr. Baker said no report was given.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

Item 11. Other Committee Business. None.

Item 12. Medical University Hospital Authority Appointments, Reappointments and Delineation of Privileges (Consent Item).

Statement: An updated list of appointments, reappointments and delineation of privileges to the medical staff for September and October 2015 were presented for approval.

Recommendation of Administration: That the appointments, reappointments and delineation of privileges to the medical staff be approved.

Recommendation of Committee: That the appointments, reappointments and delineation of privileges to the medical staff be approved.

Board Action: Dr. Baker moved that the list of appointments, reappointments and delineation of privileges to the medical staff be approved. The motion was seconded, voted on and unanimously carried.

Item 13. Revisions to Medical Staff Bylaws (Consent Item).

Statement: Revisions to the Medical Staff Bylaws were presented for approval.

Recommendation of Administration: That the revisions be approved.

Recommendation of Committee: That the revisions be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the revisions to the Medical Staff Bylaws.

Item 14. Revisions to the Medical Staff Rules and Regulations (Consent Item).

Statement: Revisions to the Medical Staff Rules and Regulations were presented for approval.

Recommendation of Administration: That the revisions be approved.

Recommendation of Committee: That the revisions be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the revisions to the Medical Staff Rules and Regulations.

Item 15. Medical Executive Committee Minutes (Consent Item).

Statement: Minutes of the Medical Executive Committee for September and October 2015 were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: The minutes of the Medical Executive Committee for September and October 2015 were received as information.

Item 16. Medical Center Contracts and Agreements (Consent Item).

Statement: Contracts and Agreements which have been signed since the last board meeting were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

**PHYSICAL FACILITIES COMMITTEE. CHAIRMAN: MR. WILLIAM H. BINGHAM, SR.
(Detailed committee minutes are attached to these minutes).**

OLD BUSINESS: None

NEW BUSINESS:

Item 17. Resolution Regarding Creation of the Charleston Sustainable Energy District, Inc.

Statement: Mr. Bingham asked for approval of a resolution authorizing MUHA to participate in the creation of the Charleston Sustainable Energy District, Inc.

Recommendation of Administration: That the resolution be approved.

Recommendation of Committee: That the resolution be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the resolution as presented.

Item 18. Approval to Proceed with HUD Application for the Shawn Jenkins MUSC Children's Hospital.

Statement: Mr. Bingham asked for approval to proceed with the HUD application for the Shawn Jenkins MUSC Children's Hospital.

Recommendation of Administration: That the approval to proceed with the HUD Application be given.

Recommendation of Committee: That the approval to proceed with the HUD Application be given.

Board Action: A motion was made, seconded and unanimously voted to give approval to proceed with the HUD Application for the Shawn Jenkins MUSC Children's Hospital.

Item 19. Other Committee Business.

Statement: Mr. Bingham asked the current estimated budget for the Shawn Jenkins MUSC Children's Hospital of \$349.4 million be increased by \$35.4 million to \$384.8 million.

Recommendation of Administration: That the Shawn Jenkins MUSC Children's Hospital budget be increased by \$35.4 million.

Recommendation of Committee: That the Shawn Jenkins MUSC Children's Hospital budget be increased by \$35.4 million.

Board Action: A motion was made, seconded and unanimously voted to give approval to increase the Shawn Jenkins MUSC Children's Hospital budget by \$35.4 million to \$384.8 million.

CONSENT ITEMS FOR INFORMATION:

Item 20. Facilities Contracts Awarded (Consent Item).

Statement: The facilities contracts awarded since the last meeting were presented for information.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

CHILDREN'S HOSPITAL COMMITTEE. CHAIRMAN: DR. RAGIN C. MONTEITH (Detailed Committee Minutes Are Attached To These Minutes)

OLD BUSINESS: None.

NEW BUSINESS: In Dr. Monteith's absence, Dr. Donald Johnson chaired the committee meeting. He stated that all board members had attended and received all reports presented as information. There were no approval items.

Item 21. Operations and Facilities Report.

Statement. Report to committee by Dr. Cawley received as information.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.

Item 22. Children's Hospital Financial Report.

Statement: Report to committee by Mr. Hargett received as information.

Recommendation of Administration: Received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

Item 23. Development Activity Report.

Statement: Report by Mr. Fisher to committee received as information.

Recommendation of Administration: Received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

Item 24. Children's Hospital Clinical Overview.

Statement: Report to committee by Dr. Mark Scheurer received as information.

Recommendation of Administration: received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

Item 25. Women's Services Clinical Overview.

Statement: Report by Dr. David Soper received as information.

Recommendation of Administration: Received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

Item 26. Other Committee Business. None

AUDIT COMMITTEE. CHAIRMAN: THOMAS L. STEPHENSON, ESQ. (Detailed Committee Minutes Are Attached To These Minutes)

OLD BUSINESS: None

NEW BUSINESS:

Item 27. KPMG Exit Conference.

Statement: Mr. Stephenson stated the KPMG Exit Conference had been held with the committee and received as information.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

Item 28. Report of the Office of Internal Audit.

Statement: Mr. Stephenson stated a report had been provided to committee by Ms. Susan Barnhart.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

Item 29. Revisions to the MUSC/MUHA Conflict of Interest Policy (Consent).

Statement: Revisions to the MUSC/MUHA Conflict of Interest Policy were presented for approval.

Recommendation of Administration: That the Revisions be approved.

Recommendation of Committee: That the Revisions be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the Revisions to the MUSC/MUHA Conflict of Interest Policy as presented.

Item 30. Institutional Conflict of Interest FY2015 Annual Report (Consent).

Statement: The Institutional Conflict of Interest FY2015 Annual Report was presented for information.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

Item 31. Other Committee Business.

Statement: Mr. Stephenson asked for approval of additional fees of \$66,000 be paid to KPMG for work during the FY2015 audits. Additional fees for MUHA are \$50,000 and for MUSC \$16,000.

Recommendation of Administration: That the additional fees be approved.

Recommendation of Committee: That the additional fees be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the additional fees of \$66,000 to KPMG for work during the FY2015 audits.

OTHER BUSINESS FOR THE BOARD OF TRUSTEES:

Item 32. Approval of Consent Agenda.

Statement: Approval of the Medical University Hospital Authority consent agenda was requested.

Recommendation of Administration: That the consent agenda be approved.

Board Action: It was moved, seconded and unanimously voted that the consent agenda be approved.

Item 33. New Business for the Board of Trustees. None

Item 34. Report from the Chairman. None

There being no further business, the Hospital Authority meeting was adjourned and the University Board of Trustees meeting was convened.

Respectfully submitted,



Mark C. Sweatman
Secretary

/wcj
Attachments

**Medical University Hospital Authority
Hospital Operations, Finance and Quality Committee
December 10, 2015**

Attendees:

Dr. Stanley Baker, Chair	Dr. David Cole	Mr. Tom Anderson
Mr. Bill Baker	Dr. Patrick Cawley	Annette Drachman, Esq.
Ms. Terri Barnes	Dr. Bruce Elliott	David McLean, Esq.
The Honorable Jim Battle	Mr. Jim Fisher	Ms. Susan Barnhart
Mr. William Bingham, Sr.	Dr. Deborah Deas	Mr. John Cooper
Dr. Harold Jablon	Ms. Lisa Montgomery	Mr. Mark Sweatman
Dr. Donald Johnson, II	Dr. Mark Sothmann	Mr. Greg Weigle
Ms. Barbara Johnson-Williams	Mr. Michael Caputo	Dr. Don Rockey
Dr. James Lemon	Dr. Danielle Scheurer	Mr. Dennis Frazier
Dr. Conyers O'Bryan	Dr. Mark Scheurer	Ms. Gina Ramsey
Mr. Charles Schulze	Ms. Darlene Shaw	Ms. Robin Mutz
Dr. Murrell Smith	Mr. Matt Wain	Ms. Heather Woolwine
Mr. Michael Stavrinakis	Mr. Steve Hargett	Ms. Lauren Sausser

The meeting was called to order at 8:24 am by Dr. Stanley Baker, Chair.

Item 6. Medical University Hospital Authority Status Report

Dr. Cawley presented the Medical University Hospital Authority status and reported on following:

- **FY2016 Organizational Goal Performance Year to Date:**
 - Achieve Ideal Patient Experience Composite Score of 3.0; current result = 3.25 (green)
 - Increase Employee Commitment Score to 4.18; current result = no data until 2016 survey
 - Increase Physician Engagement Score to 4.21; current result = no data until 2016 survey)
 - Achieve Diversity Composite Score of 3.0; current result = 2.65 (yellow)
 - Achieve Ideal Care Composite Score of 3.0; current result = 3.65 (green)
 - Achieve Culture of Safety Composite Score of 3.0; current result = no data until 2016 survey
 - Achieve Overall Teamwork Score of 3.99 = no data until 2016 survey
 - Achieve total cash at fiscal year-end of \$115 million; current result = \$99.2 million (yellow)
 - Achieve an Operating Margin of 3.5%; current result = 5.16 (green)
 - Strategically Grow Telehealth Composite Score of 3.0; current result = data not available
 - Achieve a year over year decrease in LOS index of .006; current result = .017 (green)
 - Reduce 30 day all cause readmissions by 0.5%; current result = .6 (green)
 - Implement 1 Population Health Initiative in COM/SLC areas; current result = 7 (red)
 - Achieve a weighted innovation score of 3.0; current result = data not available

- **ART 7 Opening:**
 - 42 new beds
 - Opened November 14
 - Census steadily increasing; dip took place during holidays

- **Update on Consumers Choice Health Plan:**
 - One of exchange products
 - Stopping business in South Carolina
 - Reimbursement not what it needs to be
 - Of the three exchange plans in South Carolina, MUSC is only in network for one plan
 - MUSC meeting with and educating patients who are being affected by the withdrawal of Consumers Choice

- **Update on Certificate of Need (CON) Outcomes:**
 - North Charleston Linear Accelerator (Radiation Therapy)
 - CON submitted in January 2015
 - Project review completed
 - Final decision soon
 - Opposed by Trident
 - North Charleston Pediatric Ambulatory Center & Imaging
 - CON submitted December 2014
 - Project Review in September
 - DHEC accepted Imaging
 - Disapproved Ambulatory Surgery Center
 - Opposed by Trident and SCA
 - Disapproved by DHEC
 - MUSC will appeal
 - North Charleston Pediatric 1st Floor Medical Office Building w/Imaging
 - CON submitted April 2015
 - Opposed by Trident
 - Approved by DHEC
 - West Ashley Ambulatory Surgery Center, Imaging Center and Medical Office Shell Space
 - CON submitted October 2015
 - Competitors have 60 Days to Oppose
 - Proposed Opening August 2018

Action: Report received as information.

Item 7. Medical University Hospital Authority Financial and Statistical Report

Steve Hargett gave the Medical University Hospital Authority Financial and Statistical Report and presented following:

- **October 2015 Dashboard – Unaudited:**
 - Doing well during first four months of FY16
 - Days in Accounts Receivable at 56
 - Days Cash on Hand at 33
 - 21 Days is number needed to maintain for HUD covenant and transfers to University
 - Pick-up of \$6 million from RAC audit
 - Debt Service Coverage Ratio at 4.47
 - Decrease in revenue due to flooding and holidays
 - Operating Margin
- **Readmissions Reduction Program Analysis:**
 - New Medicare reimbursement reduction program based on readmissions
 - Areas looked at include: AMI, heart failure, pneumonia, total knee and COPD
 - Medicare calculation rate based on actual exceeding expected
 - Projected penalty for MUSC is \$545,000

Action: Received as information.

Item 8. Report on Quality and Patient Safety

Dr. Danielle Scheurer gave the Report on Quality and Patient Safety and presented the following:

- **Quality (Ideal Care) Performance Year to Date:**
 - Performing well in most areas
 - Central Line Infection Rate (CLABSI) – continue to work on improving
 - Hand Hygiene – slight dip but still high at 95.5%; most hospitals at 50%

- **Joint Commission Survey Update:**
 - Triannual Survey Opportunities
 - Infection control practices (attire, disinfection, upholstery)
 - Environment of care (doors, airflow)
 - JC will return within 45 days for recheck
 - CMS will follow if there are ongoing concerns after JC follow up survey
 - Diabetes Survey – No findings!
 - Comprehensive Stroke Opportunities
 - Pre-hospital and post-hospital care transitions

- **Baldrige:**
 - Performance Excellence program
 - Relatively new to healthcare
 - Framework to build a High Reliability Organization (HRO)
 - Can pursue Baldrige Award (highly prestigious)
 - Next steps: acquiring people and skills to pursue this framework

- **Daily Check In (“DCI”) Format Example**

- **Risks to Manage:**
 - Transplant – Upcoming CMS and UNOS site visits
 - Value Based Purchasing Program – FY16 HAC Penalty
 - Payer-based Ranking Program – Blue Cross/Blue Shield – Blue Distinction – added hip-knee-spine
 - Electronic quality measures (e-measures) – only hospital in country to submit e-measures to CMS!
 - Joint Commission – findings require revisit

Action: Report received as information

Item 9. Update on MUSC Physicians

Dr. Rockey reported MUSC-P entered into a non-binding letter of intent to purchase five acres of land in West Ashley for \$560,000 per acre.

Action: Report received as information.

Dr. Rockey presented the following item for approval:

Request for purchase of a Transcranial Magnetic Stimulation Device (TMS) machine by the Department of Psychiatry & Behavioral Sciences.

Action: Recommend approval

Item 10. Legislative Update

No report.

Item 11: Other Committee Business

No other committee business.

CONSENT ITEMS FOR APPROVAL

Item 12. Medical University Hospital Authority Appointments, Reappointments and Delineation of Privileges

The committee reviewed the appointments, reappointments and delineation of privileges requests for the months of September and October 2015. These have been recommended for approval by all appropriate committees.

Action: Recommend approval

Item 13. Revision to Medical Staff Bylaws

The proposed revisions to the Medical Staff Bylaws were submitted to the committee and reviewed by all appropriate groups. The committee recommended approval.

Action: Recommend approval.

Item 14. Revisions to the Medical Staff Rules & Regulations

The proposed revisions to the Medical Staff Rules and Regulations were submitted to the committee and reviewed by all appropriate groups. The committee recommended approval.

Action: Recommend approval.

CONSENT ITEMS FOR INFORMATION

Item 15. Medical Executive Committee Minutes

The Medical Executive Committee minutes from September and October 2015 were reviewed by the committee.

Action: Received as information

Item 16. Medical Center Contracts and Agreements

Contracts and agreements entered into since the last meeting of the board were presented for information.

Action: Received as information

There being no further business, the committee adjourned at 9:05 a.m.

Respectfully Submitted



Jane L Scutt

**Medical University Hospital Authority
Physical Facilities Committee
December 10, 2015
Minutes**

Board Members Attending:

Mr. William H. Bingham, Sr., Chair
Dr. Stanley C. Baker, Jr.
Mr. William A. Baker, Jr.
Ms. Terri R. Barnes
Mr. James A. Battle
Dr. Harold Jablon
Dr. Donald R. Johnson II
Ms. Barbara Johnson-Williams
Dr. James Lemon

Dr. E. Conyers O'Bryan, Jr.
Mr. Charles W. Schulze
Dr. G. Murrell Smith, Sr.
Mr. Thomas L. Stephenson
Mr. Michael E. Stavrinakis
Dr. Charles B. Thomas, Jr.

Mr. Bingham called the meeting to order.

REGULAR Items

Item 17 Resolution Regarding Creation of the Charleston Sustainable Energy District, Inc.

A Resolution was presented authorizing MUHA to participate in the creation of the Charleston Sustainable Energy District, Inc.

Recommendation of Committee: That the Resolution be approved.

Item 18 Approval to Proceed with HUD Application for the Shawn Jenkins MUSC Children's Hospital.

Mr. Bingham asked for approval to proceed with the HUD Application for the Shawn Jenkins MUSC Children's Hospital.

Recommendation of Committee: That the approval be given to proceed with filing the HUD Application.

Item 19 Other Committee Business.

Mr. Matt Wain, Chief Operating Officer, MUHA provided a cost and project update on the Shawn Jenkins Children's Hospital. He stated the current estimated budget as of November 2015 is \$384.8 million which is a variance of \$35.4 million from the original budget. He asked for approval of the new budget amount.

Recommendation of Committee: That the current estimated budget for the Shawn Jenkins MUSC Children's Hospital of \$384.8 million, an increase of \$35.4 million, be approved.

CONSENT Items for Information:

Item 20 Facilities Contracts Awarded

The facilities contracts since the last board meeting were presented for information.

Recommendation of Committee: That this report be received as information.

With no further business, the meeting was adjourned.

Respectfully submitted,

Celeste Jordan

**Medical University Hospital Authority
Children's Hospital Committee
December 10, 2015
Minutes**

Attendees:

Dr. Donald Johnson, Chair	Dr. David Soper
Mr. Bill Baker	Dr. Deborah Deas
Ms. Terri Barnes	Ms. Lisa Montgomery
The Honorable Jim Battle	Dr. Mark Sothmann
Mr. William Bingham, Sr.	Dr. Dan Handel
Dr. Harold Jablon	Dr. Mark Scheurer
Dr. Stanley Baker	Dr. David Soper
Ms. Barbara Johnson-Williams	Dr. Michelle Hudspeth
Dr. James Lemon	Ms. Darlene Shaw
Dr. Conyers O'Bryan	Mr. Matt Wain
Mr. Charles Schulze	Mr. Steve Hargett
Dr. Murrell Smith	Mr. Tom Anderson
Mr. Michael Stavrinakis	David McLean, Esq.
Mr. Alan Stalvey	Ms. Susan Barnhart
Dr. David Cole	Mr. John Cooper
Dr. Patrick Cawley	Mr. Mark Sweatman
Dr. Bruce Elliott	Ms. Sarah King
Mr. Jim Fisher	Mr. Greg Weigle
Mr. Mike Caputo	Ms. Gina Ramsey
Annette Drachman, Esq.	Ms. Robin Mutz
	Mr. Patrick Wamsley

The meeting was called to order at 9:14am by Dr. Donald Johnson, Chair.

Item 21. Operations and Facilities Report

Dr. Patrick Cawley reported 2015-2016 Children's Hospital & Women's Health Goals with focus on service, quality and growth.

- Service – reviewed data and YTD results for pediatric outpatient clinics
- Quality – discussed mortality index and core measures.
- Growth – opportunities for improvement are improve length of stay index, reduce 30 day readmission rate, and improve timely discharge completion.

Action: Report received as information.

Item 22. Children's Hospital Financial Report

Steve Hargett reported on the following:

- Current interest rate per feasibility study = 6.25%
- Projected interest rate should feds increase short term rates = 4.82%
- Interest expense "cushion" in feasibility study = \$4.5M in on year

Action: Report received as information.

Item 23. Development Activity Report

Jim Fisher reported on the following:

- MUSC Shawn Jenkins Children's Hospital Building Campaign
 - Fundraising Progress as of December 7th: Overall Goal increased to \$125M – 61% has been raised (\$76,809,490)
- In the future a more robust discussion is needed in regards to the bricks and mortar and program development goals.

Action: Report received as information.

Item 24. Children's Hospital Clinical Overview

Dr. Mark Scheurer introduced Dr. Michelle Hudspeth, Division Chief and Director; Pediatric BMT:

- Dr. Hudspeth presented on:
 - Pediatric Blood and Marrow Transplantation
 - Severe Combined Immunodeficiency Syndrome
 - Pediatric Neuro-oncology
 - Bleeding Disorders & Vascular Malformations
 - Congratulations to Dr. Julie Kanter, Director of Sickle Cell Research, for receiving the prestigious Duke Endowment Award
 - Gene Therapy Trial for Sickle Cell Diseases
 - Pediatric Hematology/Oncology Fellowship Training
 - MUSC Strategic Plan Commit to Patients First

Action: Report received as information.

Item 25. Women's Services Clinical Overview

Robin Mutz introduced to Dr. David Soper, Women's Health Service Line Medical Director.

- Dr. Soper presented on Placenta Percreta.
 - Placenta Accreta:
 - Potentially life threatening obstetrical condition
 - Requires multidisciplinary approach
 - Incidence is 1 in 533 pregnancies and increases with rising cesarean rate
 - 90% of patients need a transfusion
 - 7% maternal mortality rate
 - Explained the process of what a patient goes through with Placenta Percreta including initial admission cesarean delivery to the readmission hysterectomy.

Action: Report received as information.

Item 26. Other Committee Business

There being no further business, the committee adjourned at 9:46am.

Respectfully Submitted,

Angie Baldwin

**Medical University Hospital Authority
Audit Committee
December 10, 2015
Minutes**

Board Members Attending:

Mr. Thomas L. Stephenson, Chair
Dr. Stanley C. Baker
Mr. William A. Baker, Jr.
Ms. Terri R. Barnes
Mr. James A. Battle
Mr. William H. Bingham, Sr.
Dr. Harold Jablon
Dr. Donald R. Johnson II
Ms. Barbara Johnson-Williams
Dr. James Lemon
Dr. E. Conyers O'Bryan, Jr.
Mr. Charles W. Schulze
Dr. G. Murrell Smith, Sr.
Mr. Michael E. Stavrinakis
Dr. Charles B. Thomas, Jr.

Mr. Stephenson called the meeting to order.

REGULAR Items

Item 27. KPMG Exit Conference.

Ms. Jennifer Hall, Audit Managing Director with KPMG presented the results of the 2015 audits. She provided an overview of the results; reviewed significant audit areas; internal control observation and audit adjustments and implementation of GASB 68. She reported that MUSC and MUHA were issued unmodified opinions.

Recommendation of Committee: Received as information.

Item 28. Report of the Office of Internal Audit.

Mr. Stephenson stated Ms. Susan Barnhart had distributed the results of recent internal audits and if there were no questions, the reports would be received as information.

Recommendation of Committee: That the reports be received as information.

Item 29. Revisions to the MUSC/MUHA Conflict of Interest Policy (Consent).

Mr. Stephenson asked for approval of the consent items at the appropriate time.

Recommendation of Committee: That the Revisions be approved.

Item 30. Institutional Conflict of Interest FY2015 Annual Report (Consent).

Mr. Stephenson asked for approval of the consent items at the appropriate time.

Recommendation of Committee: Received as information.

Item 31. Other Committee Business.

Mr. Stephenson stated additional fees would be due KPMG for work during the FY2015 External Audits of MUSC and MUHA. Additional fees for MUHA are \$50,000 and for MUSC \$16,000. He asked for approval of these fees.

Recommendation of Committee: That the additional fees totaling \$66,000 be paid to KPMG. With no further business, the meeting was adjourned.

Respectfully Submitted,

Celeste Jordan