

MINUTES
MEDICAL UNIVERSITY HOSPITAL AUTHORITY
BOARD OF TRUSTEES MEETING
February 9, 2018

The Board of Trustees of the Medical University Hospital Authority convened Friday, February 9, 2018, with the following members present: *Dr. Donald R. Johnson II, Chairman; Mr. William H. Bingham, Sr., Vice-Chairman; Ms. Terri R. Barnes; Mr. Jim Battle; Dr. Guy Castles; Dr. James Lemon; Ms. Barbara Johnson-Williams; Mr. Charles Schulze; Dr. Murrell Smith; Mr. Michael Stavrinakis; Mr. Tom Stephenson; Dr. Charles Thomas*

The following MUSC administrative officials were present: *Dr. David Cole, President; Dr. Lisa Saladin, Executive Vice President for Academic Affairs and Provost; Ms. Lisa Montgomery, Executive Vice President for Finance and Operations; Dr. Patrick Cawley, CEO, MUSC Health and Vice President for Health Affairs, MUSC; Mr. Jim Fisher, Vice President for Development and Alumni Affairs; Dr. Raymond Dubois, Dean, College of Medicine; Ms. Annette Drachman, General Counsel.*

Item 1. Call to Order-Roll Call.

There being a quorum present, Chairman Don Johnson called the meeting to order. Ms. Jane Scutt called the roll and made the following announcement, *“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, April 13, 2018.

Item 3. Approval of Minutes of the Regular Meeting of the Medical University Hospital Authority Minutes of December 8, 2017.

Board Action: Dr. Johnson called for a motion for the approval of the minutes. A motion was made by Mr. Schulze; 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 President.

Dr. Cole called on Dr. Patrick Cawley who introduced Dr. Mark Lockett, Associate Professor in the Department of Surgery. Dr. Lockett gave a presentation to the Board on the South Carolina Opioid Reduction Program. Dr. Lockett reported that over 11.7 billion opioids were prescribed to Americans in 2017. He also reported that 63,600 lives were lost to drug overdose in 2016 and the estimated cost to US was \$504 billion. He reported that in South Carolina alone, there were 701 drug overdoses in 2015 and the state is the 23rd in per capita overdose deaths. He commented that there were more opioid deaths in the South Carolina than heroin, cocaine and methamphetamine combined. Dr. Lockett stated that researchers estimate the impact on overdose hospital admissions cost South

Carolina almost \$48 million in 2016 and emergency room visits cost an additional \$8 million. Dr. Lockett went on to report that research shows surgeries lead to 3 million new opioid users every year and chronic opioid use is now the most common complication after surgery. Dr. Lockett expressed that he would rather MUSC focus on encourage prescribing practices of its doctors and shared the preliminary prescribing recommendations that are being rolled for common surgical procedures. In closing, Dr. Lockett discussed gave an overview of the goals and efforts of the South Carolina Opioid Reduction Program (SCORP). Dr. Cole thanked Dr. Lockett for his informative presentation and stated that this 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. G. MURRELL SMITH, SR.
(Detailed committee minutes are attached.)**

OLD BUSINESS: None.

NEW BUSINESS:

Item 6. MUHA Medical Center Status Report.

Statement: Dr. Smith reported that Dr. Pat Cawley, CEO, MUSC Health, presented the MUHA status report to committee.

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. Medical University Hospital Authority (MUHA) Financial and Statistical Report

Statement: Dr. Smith stated that Ms. Lisa Goodlett, MUHA Chief Financial Officer, provided a report to committee on the MUHA's financial status through December 31, 2017.

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 8. Report on Quality and Patient Safety.

Statement: Dr. Smith stated that Dr. Scheurer presented the quality and patient safety report to committee.

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. Smith requested approval of the following:

- Approval for the Department of Psychiatry to purchase an FDA approved MagVenture Device for TMS depression treatment for \$66,000.
- Approval for the cost of the up-fit and capital equipment in the amount of \$816,920 associated with the relocation of the MUSC Women's Clinic at Landmark Drive to Resolute Way.

Recommendation of Administration: That these purchases be approved.

Recommendation of Committee: That these purchases be approved.

Board Action: Dr. Smith made a motion for approval. The motion was seconded, voted on and unanimously carried.

Item 10. Legislative Update.

Statement: Dr. Smith stated Mark Sweatman gave an update on legislative activities at both the state and federal levels.

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 11. Other Committee Business.

None.

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

Statement: Medical staff appointments, reappointments and delineation of privileges for the months of November and December 2017 were presented for approval.

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

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

Board Action: Dr. Smith made a motion for approval of the medical staff appointments, reappointments and delineation of privileges. The motion was seconded, voted on and unanimously carried.

Item 13. Revisions to Medical Staff Bylaws.

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

Board Action: Deferred.

Item 14. Revisions to the Medical Staff Rules and Regulations.

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

Board Action: Deferred.

Item 15. Revisions to Medical Staff Credentialing Policy and Procedure Manual.

The proposed revisions to the Medical Staff Credentialing Policy and Procedure Manual were submitted to the committee and reviewed by all appropriate groups.

Board Action: Deferred.

Item 16. Medical Executive Committee Minutes (Consent Item).

Statement: Medical Executive Committee minutes for November and December 2017 were presented for information.

Recommendation of Administration: That these minutes be received as information.

Recommendation of Committee: That these minutes be received as information.

Board Action: Received as information.

Item 17. Medical Center Contracts and Agreements (Consent Item).

Statement: A list of contracts and agreements signed since the last board meeting was 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.)**

OLD BUSINESS: None

NEW BUSINESS:

Item 18. Children’s Health Status Report.

Statement: Mr. Bingham reported that Mr. Matt Wain presented his stoplight report for both the MUSC Shawn Jenkins Children’s Hospital and Women’s Pavilion and the new Children’s Ambulatory Center.

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

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

Board Action: Report received as information.

Item 19. MUHA Facilities Procurements/Contracts for Approval.

Statement: Mr. Bingham requested approval of the following:

- Lease of 1,622 square feet of office space located in the Roper Medical Office Building at 125 Doughty Street for the Office of External Affairs. Cost per square foot for this full service lease is \$31.50 resulting in an annual lease amount of \$51,093.00.

Recommendation of Administration: That this new lease be approved.

Recommendation of Committee: That this new lease be approved.

Board Action: Mr. Bingham made a motion for approval of the new lease as presented. The motion was seconded, voted on and unanimously carried to approve the new lease as presented.

Item 20. Other Committee Business.

None.

**CHILDREN’S HOSPITAL COMMITTEE. CHAIRMAN: MR. MICHAEL STAVRINAKIS
(Detailed Committee minutes are attached.)**

OLD BUSINESS: None.

NEW BUSINESS:

Item 21. Women’s Services Overview.

Statement: Mr. Stavrinakis reported that Dr. Sarah Taylor, Director, Milk Bank, gave a report to committee.

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. Other Committee Business.

None.

AUDIT COMMITTEE. CHAIRMAN: THOMAS L. STEPHENSON, ESQ. (Detailed Committee minutes are attached)

OLD BUSINESS: None

NEW BUSINESS:

Item 23. Compliance Update.

Statement: Mr. Stephenson stated that Ms. Kelly Shaw and Ms. Julie Acker gave the enterprise compliance update to committee.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

Item 24. Report of the Office of Internal Audit.

Statement: Mr. Stephenson reported that the results of the audits were mailed to board members.

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 25. Other Committee Business.

None.

OTHER BUSINESS FOR THE BOARD OF TRUSTEES

Item 26. Approval of Consent Agenda.

Statement: Approval of the consent agenda was requested.

Recommendation of Administration: That the consent agenda be approved.

Board Action: Mr. Schulze made a motion for the approval of the consent agenda except for the items that were deferred. The motion was seconded and unanimously carried.

Item 27. Executive Session.

Statement: A motion was made by Mr. Battle to move into closed session to discuss the following items pursuant to sections 30-4-70(a)(1) of the South Carolina Code: discussion of employment, appointment or compensation of an employee, a student, or a person regulated by a public body or the appointment of a person to a public body, including honorary degree recipients and volunteer clinical faculty.

A motion was also made by Mr. Battle to move into closed session to discuss the following items pursuant to sections 30-4-70(a)(2 and 5) of the South Carolina Code: legal advice and matters covered by the attorney/client privilege pertaining to Board of Trustees policies; and matters relating to the proposed expansion of clinical and educational services including contractual negotiations related thereto.

Board Action: The motion made by Mr. Battle was seconded and unanimously carried. Dr. Johnson stated that the board would move into closed session immediately following the end of the committee meetings.

Item 28. New Business for the Board of Trustees.

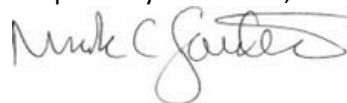
None.

Item 29. Report from the Chairman.

None.

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

Respectfully submitted,



Mark C. Sweatman, Secretary

**Hospital Operations, Finance and Quality Committee
February 8, 2018 Minutes**

Board Members attending:

Dr. Murrell Smith, Chair
Ms. Terri Barnes
Mr. Jim Battle
Mr. William Bingham
Dr. Guy Castles
Dr. Donald Johnson

Ms. Barbara Johnson-Williams
Dr. James Lemon
Mr. Charles Schulze
Mr. Michael Stavrinakis
Mr. Tom Stephenson
Dr. Charles Thomas

Item 6. Medical University Hospital Authority Status Report

Dr. Patrick J. Cawley, CEO, MUSC Health, gave a report focused on two areas. The first was an update on the performance year to date on the 2018 goals. Dr. Cawley reported that overall performance has improved by 0.15 since the previous board meeting and no problem areas have been identified. Finance, Growth, Innovation, and Quality/Ambulatory care are all achieving goal. Service and People/Diversity are close to goal. Quality/Inpatient is currently in the red but moving in the right direction. This is primarily due to hospital acquired infections which are less than last year, but we are not quite hitting our internal goal. All areas in the “yellow” and “red” have good operational plans behind them.

The second area was an update on leadership changes within MUSC Health. Since the last board meeting, Dr. Mark Lyles, who oversaw affiliations, and Dr. Daniel Handel, chief medical officer, MUHA have both left MUSC. Matt Severance has been hired in the position of chief affiliations and network development officer of MUSC Health and he starts in mid-February. Dr. Phillip Warr has been named interim chief medical officer of inpatient services and MUHA.

Action: Report received as information.

Item 7. Medical University Hospital Authority Financial and Statistical Report

Ms. Lisa Goodlett gave an update on MUHA’s financial status through December 2017. Ms. Goodlett reported an operating margin of 2.20% with an overall margin of 2.79%. Days in A/R are at 59 days and Days Cash on Hand are at 60. The debt service coverage ratio is 3.31 compared to 3.75 for the same period last year.

Action: Report received as information.

Item 8. Report on Quality and Patient Safety

Dr. Danielle Scheurer, Chief Quality Officer, presented a WIN reporting that MUSC Health has achieved a Bronze award achievement from the State on Baldrige performance. She then updated the current quality pillar performance. She then

updated on the Vizient inpatient rankings (#40) and ambulatory rankings (#12). She ended by summarizing efforts in the Comprehensive Stroke Program.

Action: Report received as information.

Item 9. Update on MUSC Physicians.

Dr. Dirk Elston requested approval of the following:

- Approval for the Department of Psychiatry to purchase an FDA approved MagVentureDevice for TMS depression treatment for \$66,000.
- Approval for the cost of upfit and capital equipment in the amount of \$816,920 associated with the relocation of the MUSC Women’s Clinic at Landmark Drive to Resolute Way.

Action: Recommend approval.

Item 10. Legislative Update

Mr. Mark Sweatman gave an update on legislative activities.

Action: Report received as information

Item 11. Other Committee Business.

None.

Item 12. Appointments, Reappointments and Delineation of Privileges.

The committee reviewed the appointments, reappointments and delineation of privileges requests for the months of November and December 2017. These have been recommended for approval by all appropriate committees.

Action: Recommend approval.

Item 13. Revisions to Medical Staff Bylaws.

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

Action: Item deferred.

Item 14. Revisions to the Medical Staff Rules and Regulations.

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

Action: Item deferred.

Item 15. Revisions to Medical Staff Credentialing Policy and Procedure Manual.

The proposed revisions to the Medical Staff Credentialing Policy and Procedure Manual were submitted to the committee and reviewed by all appropriate groups. The committee recommended approval.

Action: Item deferred.

Item 16. Medical Executive Committee Minutes.

The Medical Executive Committee minutes November and December 2017 were reviewed by the committee.

Action: Received as information.

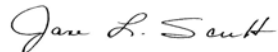
Item 17. Contracts and Agreements.

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

Action: Received as information.

There being no further business, the committee adjourned.

Respectfully Submitted



Jane L Scutt

MUHA Physical Facilities Committee
February 8, 2018
Minutes

Board Members Attending:

Mr. William H. Bingham, Sr., Chair
Ms. Terri R. Barnes
Mr. Jim Battle
Dr. Guy Castles
Dr. Donald R. Johnson II
Ms. Barbara Johnson-Williams

Dr. James Lemon
Mr. Charles Schulze
Dr. Murrell Smith
Mr. Michael E. Stavrinakis
Mr. Tom Stephenson
Dr. Charles Thomas

The meeting was called to order by Mr. Bingham, Committee Chair.

REGULAR ITEMS

Item 18. Children's Health Status Report.

Mr. Matt Wain presented the stoplight report on the progress of the MUSC Shawn Jenkins Children's Hospital and Women's Pavilion and also the new Children's Ambulatory Center in North Charleston.

Action: Report received as information.

Item 19. MUHA Facilities Procurements/Contracts for Approval.

Mr. Greg Weigle presented the following for approval:

- Lease of 1,622 square feet of office space located in the Roper Medical Office Building at 125 Doughty Street for the Office of External Affairs. Cost per square foot for this full service lease is \$31.50 resulting in an annual lease amount of \$51,093.00.

Action: Recommend approval.

Mr. Greg Weigle also reported that McMillan Pazdan and Smith was the firm selected for the West Ashley Ambulatory Surgery Center project.

Action: Received as information.

Item 20. Other Committee Business.

None.

There being no other business, the meeting was adjourned.



**Medical University Hospital Authority
Shawn Jenkins Children’s Hospital Committee
Minutes
February 8, 2018**

Board Members Attending:

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|--------------------------------|------------------------------|
| Mr. Michael Stavrinakis, Chair | Ms. Barbara Johnson-Williams |
| Ms. Terri Barnes | Dr. James Lemon |
| Mr. Jim Battle | Mr. Charles Schulze |
| Mr. William Bingham, Sr. | Dr. Murrell Smith |
| Dr. Guy Castles | Mr. Tom Stephenson |
| Dr. Donald Johnson | Dr. Charles Thomas |

The meeting was called to order by Mr. Stavrinakis, Chair.

Item 21. Children’s and Women’s Clinical Overview

Dr. Sarah Taylor, Director of Milk Bank, gave a presentation on “Optimizing South Carolina Infant Outcomes through Nutrition.” Dr. Taylor reported that in South Carolina there are 1000 very low birth weight infants per year and went on to discuss the life-saving benefits of mother’s own milk and donor human milk. Dr. Taylor also that since the Mother’s Milk Bank of South Carolina opened in May of 2015, the bank has sent over 133,000 ounces of milk to 12 hospitals in South Carolina. Dr. Taylor also discussed new health innovation efforts in combatting infant mortality across the state of South Carolina.

Action: Report received as information.

Item 22. Other Committee Business

None.

With no further business, the meeting was adjourned.

Respectfully submitted,

Jane L. Smith

**Medical University Hospital Authority
Audit Committee
Minutes
February 8, 2018**

Board Members Attending:

Mr. Tom Stephenson, Chair
Ms. Terri R. Barnes
Mr. Jim Battle
Mr. William H. Bingham
Dr. Guy Castles
Dr. Donald Johnson

Ms. Barbara Johnson-Williams
Dr. James Lemon
Mr. Charles Schulze
Dr. Murrell Smith
Mr. Michael E. Stavrinakis
Dr. Charles B. Thomas

Mr. Tom Stephenson, Chair, called the meeting to order.

REGULAR AGENDA

Item 23. Compliance Update

Ms. Kelly Shaw gave the Enterprise HIPAA Update for MUHA, MUSC and MUSC-P. Ms. Shaw showed a breakdown of HIPAA breaches that occurred in CY2017 and discussed Phase II OCR preparation and education initiatives. Ms. Julie Acker gave an overview of HIPAA security initiatives including administrative and technical safeguards.

Recommendation of Committee: Received as information.

Item 24. Report of the Office of Internal Audit.

Mr. Stephenson stated that the results of the audits were mailed to the board members and Susan Barnhart would be happy to answer any questions.

Recommendation of Committee: That this be received as information.

Item 25. Other Committee Business.

None.

With no further business, the meeting was adjourned.

Respectfully submitted,

Jane L. Scutt