

MINUTES
MEDICAL UNIVERSITY HOSPITAL AUTHORITY
BOARD OF TRUSTEES MEETING
April 11, 2014

The Board of Trustees of the Medical University Hospital Authority convened Friday, April 11, 2014, with the following members present: Thomas L. Stephenson, Esquire, Chairman; Dr. James E. Wiseman, Jr., Vice Chairman; Dr. Stanley C. Baker, Jr.; The Honorable James A. Battle; Mr. William H. Bingham, Sr.; Mr. William B. Hewitt; Dr. Harold W. Jablon; Dr. Donald R. Johnson II; Ms. Barbara Johnson-Williams; Dr. Ragin C. Monteith; Dr. E. Conyers O'Bryan, Jr.; Dr. Thomas C. Rowland, Jr.; Mr. Charles W. Schulze; The Honorable Robin M. Tallon; Dr. Charles B. Thomas, Jr.; Dr. G. Murrell Smith, Sr.; Mr. Michael E. Stavrakis.

The following administrative officials were present: Dr. Mark Sothmann, Interim President and Vice President for Academic Affairs and Provost; Dr. Etta Pisano, Vice President for Medical Affairs, and 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; Dr. Frank Clark, Vice President for Information Technology and CIO; Mr. Jim Fisher, Vice President for Development.

Item 1. Call to Order-Roll Call.

There being a quorum present, Chairman Stephenson called the meeting to order. Ms. Celeste Jordan called the roll.

Item 2. Secretary to Report Date of Next Meeting.

The date of the next regularly scheduled meeting is Thursday, May 15, 2014.

Item 3. Approval of Minutes of the Regular Meeting of the Medical University Hospital Authority of February 14, 2014.

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. Mark Sothmann said there is a strategic initiative on the part of the Authority and the University to advance the institution in the area of analytics and informatics. He asked Dr. Cawley to introduce the speakers who will provide information on this important initiative. Dr. Cawley introduced Dr. Leslie Lenert, MUSC's first Chief Research Information Officer and John Long the Chief Analytics Officer. He stated that both of these new hires have had a quick impact at MUSC. Dr. Lenert is a professor of Medicine in the Department of Medicine who is a primary care physician with over twenty years of experience in research and development work in biomedical

informatics and predictive analytics. In the 90s he was a pioneer in the development of web-based systems for patient use and on-line research studies. In response to the 9/11 attacks, Dr. Lenert led a team of engineers and computer scientists that developed the first wireless location-aware electronic health record system for first responders. In 2007, he became the founding Director of the National Center for Public Health Informatics at the CDC. He has also conducted NIH funded research on the use of collaborative filtering for decision support in clinical medicine. He has more than 120 papers in peer reviewed journals and is very active in several academic societies. He earned his BS from the University of California-Riverside; an MD from University of California-Los Angeles and his MS in Biomedical Informatics from Stanford. He did his internal medicine residency at the University Texas Southwestern and postdoctoral work in clinical pharmacology at Stanford.

Dr. Cawley also introduced John Long who has over twenty-five years of experience in architecture, design, development, deployment and integration of enterprise systems. He has extensive technical expertise and experience in building, leading and mentoring technical teams. He has excellent communication, presentation and consultation skills. He has a MS in in computer systems engineering from Northeastern University and BS in industrial engineering from Northeastern as well.

Dr. Lenert said he and John Long were presenting information on their efforts to design and deploy at MUSC a learning health system (LHS). They are working to create a system that allows people who have insight, whether in the lab or the clinic or the hospital to be able to test the scientific validity of that insight and to rapidly change the health system to incorporate that in the clinical practice. A learning health system has to support clinical care, education, research, quality improvement, consumer engagement and public health. The purpose of the LHS is to use informatics to capture what is known and deploy that information rapidly to enhance patient care. John Long discussed the health information technology structure being proposed to create the LHS and emphasized the importance of governance and security to the MUSC Learning Health System.

At the conclusion of the presentation, Dr. Sothmann thanked the Dr. Lenert and Mr. Long for their clear presentation on this complex issue. The development of the LHS is something that will be transformative for MUSC in many ways.

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

Board Action: Received as information.

Item 5. Other Business. None.

MEDICAL UNIVERSITY HOSPITAL AUTHORITY 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. Medical University Hospital Authority Status Report.

Statement: Dr. Baker said the committee recommended approval of MUSC joining the SC Hospital Collaborative which would include five hospitals – MUSC, McLeod Health, Greenville Health system, Palmetto Health and Self Regional Healthcare. The Collaborative will be called *Initiant Health Collaborative*

Recommendation of Administration: That the request to join the SC Health Collaborative be approved.

Recommendation of Committee: That the request to join the SC Health Collaborative be approved.

Board Action: a motion was made, seconded and unanimously voted to approve the request for MUSC to join the SC Health Collaborative.

Item 7. MUSC Medical Center Financial and Statistical Report.

Statement: Dr. Baker said Mr. Steve Hargett had provided a financial report to committee and was received as an information item.

Recommendation of Administration: That this 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. Baker stated everyone had been present for the committee report on Quality and Patient Safety from Dr. Danielle Scheurer.

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. Report of the Vice President for Medical Affairs and Dean, College of Medicine.

Statement: Dr. Baker stated Dean Pisano's report to committee was 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 10. Update on MUSC Physicians.

Statement: Dr. Baker stated Dr. David Cole had requested approval of the following:

The Department of Pediatrics Cardiology division offering approved screening to detect congenital heart defects on all newborns in 9 other hospitals and birthing centers throughout South Carolina.

The Department of Dermatology's expenditure of \$431,000 in department funds to support purchase of three new Cryostats, five new procedure chairs, one new Pulse Dye Laser, five new single and dual lights and multiple pieces of MUHA equipment in support of Mohs Surgery's relocation to the East Cooper Clinic.

Recommendation of Administration: That the requests be approved.

Recommendation of Committee: That the requests be approved.

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

Item 11. Legislative Update.

Statement: Dr. Baker said a brief legislative update had been given to committee.

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 12. Other Committee Business. None

Item 13. 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 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 for January and February 2014 be approved. The motion was seconded, voted on and unanimously carried.

Item 14. Medical Executive Committee Minutes (Consent Item).

Statement: Minutes of the Medical Executive Committee for 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 January and February 2014 were received as information.

Item 15. 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.

Item 16. Environment of Care Report (Consent Item).

Statement: The Environment of Care report was presented.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

**MEDICAL UNIVERSITY HOSPITAL AUTHORITY PHYSICAL FACILITIES COMMITTEE.
CHAIRMAN: MR. WILLIAM H. BINGHAM, SR. (Detailed Committee Minutes Are Attached To These Minutes)**

OLD BUSINESS: None

NEW BUSINESS:

Item 17. Project Update.

Statement: Mr. Bingham stated an update on the feasibility study for the Children's Hospital and Women's Pavilion was given to committee by representatives from Kurt Salmon and Perkins & Will. At the conclusion of the presentation, there was discussion by the board and it was noted that Mr. Hewitt felt that the additional debt created by this project for the institution was too high for the rate of return on the investment.

Mr. Bingham stated a selection committee of seven board members had met to interview architectural firms to provide design services for the Children's Hospital and Women's Pavilion and the firm of Perkins & Will had been selected. He asked for approval.

Recommendation of Administration: That the selection of Perkins & Will be approved.

Recommendation of Committee: That the selection of Perkins & Will be approved.

Board Action: A motion was made, seconded and voted to approve the selection of Perkins & Will as architects for the Children's Hospital and Women's Pavilion. Mr. Hewitt stated he would vote no on anything having to do with the project.

Item 18. Other Committee Business. None

Item 19. Facilities Contracts Awarded (Consent Item).

Statement: Facilities Contracts awarded since the last 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.

MEDICAL UNIVERSITY HOSPITAL AUTHORITY AUDIT COMMITTEE. CHAIRMAN: MR. WILLIAM B. HEWITT. (Detailed Committee Minutes Are Attached To These Minutes)

OLD BUSINESS: None

NEW BUSINESS:

Item 20. Information Security Update.

Statement: Mr. Hewitt stated Dr. Frank Clark had asked the board if there were any questions about the information security update from internal audit and there being none it was received as information.

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 21. Report of the Office of Internal Audit.

Statement: Mr. Hewitt stated a report had been received from the Internal Auditor

and since there were no questions or suggestions the report would be received as information.

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 22. Other Committee Business.

Mr. Hewitt stated Ms. Jennifer Hall, a Partner with KPMG, presented the 2014 External Audit Plan for MUHA and MUSC to committee. She will be in charge of the University audit and Mr. Brian Wiese continues as the KPMG Partner conducting the MUHA/UMA Audit. She gave a summary of professional services to be provided during the audit.

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

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

OTHER BUSINESS FOR THE BOARD OF TRUSTEES:

Item 23. Approval of Consent Agenda.

Statement: Approval of the 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 24. New Business for the Board of Trustees.

Chairman Stephenson stated amendments to the MUHA Bylaws had been distributed yesterday to allow for electronic voting by the board. All members had signed a Waiver of Notice allowing the late distribution of the changes. He asked for a motion to approve the Bylaw changes.

Board Action: A motion was made, seconded and unanimously voted to approve the Amendments to the MUHA Bylaws.

Item 25. Report from the Chairman. None

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

Respectfully submitted,



Hugh B. Faulkner III
Secretary

HBf:wcj

Medical University Hospital Authority Board of Trustees
Hospital Operations, Quality and Finance Committee
April 10, 2014

Attendees:

Dr. Stanley Baker, Chair	Annette Drachman, Esq.
Thomas Stephenson, Esq.	Mr. H. B. Faulkner
Mr. Jim Battle	Mr. Matt Wain
Mr. William Bingham, Sr.	Dr. David Cole
Mr. William B. Hewitt	Mr. Dennis Frazier
Dr. Harold Jablon	David McLean, Esq.
Ms. Barbara Johnson-Williams	Ms. Gina Ramsey
Dr. Donald Johnson, II	Mr. John Sanders
Dr. Ragin Monteith	Ms. Darlene Shaw
Dr. Conyers O'Bryan	Dr. Marilyn Schaffner
Dr. Thomas Rowland	Dr. Danielle Scheurer
Mr. Charles Schulze	Dr. Mark Scheurer
Dr. Murrell Smith	Mr. John Cooper
Mr. Michael Stavrinakis	Mr. Mark Sweatman
The Honorable Robin Tallon	Mr. Greg Weigle
Dr. Charles Thomas	Mr. Steve Valerio
Dr. James Wiseman, Jr.	Ms. Susan Barnhart
Dr. Mark Sothmann	Ms. Jennifer Nall
Dr. Pat Cawley	Ms. Sarah King
Dr. Frank Clark	Ms. Lauren Sasser
Ms. Lisa Montgomery	Ms. Ashley Barker
Mr. Jim Fisher	Dr. Cotesworth Fishburne
Dr. Etta Pisano	

The meeting was called to order by Dr. Stanley Baker, Chair at 8:01 a.m.

Item 6. Medical University Hospital Authority Status Report

FY14 Organizational Goals

Dr. Patrick Cawley presented the Hospital Authority Status report. Cawley reported that updates to the strategic goals will not happen until May or June when the *US News and World Report* data comes out. Cawley stated that the hospital's number one thing this past year was to improve financially and number two was to improve both employee and physician satisfaction. Cawley reported that significant improvement was made in both of these areas and the hospital achieved its goal for both in FY14. Under service, Cawley commented that while we are doing well overall, there is still some opportunity to improve. Under quality, there is also some opportunity to improve, particularly with CAUTI and 30-day readmissions.

MUSC Performance Excellence

Cawley gave an update on MUSC Performance Excellence. Last year MUHA worked with consultants who help identify over \$64 million in financial improvements. To date, over \$51 million has been implemented and over \$28 million has hit the financial statements. Cawley announced that Case Mix Index (CMI) Improvement has been added to the \$100 million wheel. CMI explained that CMI is the hospital's physician documentation and how we code. He reported that an analysis was conducted over the couple of months and it has been determined

that we have an opportunity to increase the CMI. When you increase the CMI, you get better reimbursement; Cawley stated that we have an opportunity to improve our CMI by .2 which equates to about \$10 million over the next year. He stated that MUSC already has a fairly high CMI compared to other SC hospitals which reflects the severity of our cases. The comparison was done with other similar academic medical centers.

Action: Report received as information.

Telemedicine Reimbursement

Dr. Cawley reported that MUSC received approximately \$11 million in telemedicine funding over the last year and while not yet finalized, we are expected to get another \$10 – \$15 million this coming year. Cawley urged the board members that if they receive calls from DHHS or DHEC regarding telemedicine, please let them know that we will be happy to answer any questions or show them what MUSC is doing with telemedicine.

South Carolina Hospital Collaborative

Dr. Patrick Cawley started off the discussion by informing the board that he is asking for BOT approval to join the South Carolina Hospital Collaborative. Cawley gave an overview on the need for this collaborative. Cawley stated that cost pressures are severe on hospitals and this collaborative is an opportunity to work with other hospitals to get at some of these fixed costs yet still remain independent. Collaborative members will still be competitors outside of the purposes of the collaborative. Cawley shared examples of other collaborative such as the University of Iowa HealthCare, BJC HealthCare in St. Louis and Stratus HealthCare which is anchored by Medical College of Georgia. The founding members in the South Carolina Hospital Collaborative include: MUSC, McLeod Health, Greenville Health System, Palmetto Health and Self Regional Healthcare. The Collaborative is an LLC owned by its members. Other members and participants can only be added by unanimous vote. Any hospitals that are already linked to the core members, such as an affiliation agreement, will become secondary members. Cawley reviewed the governance and management structure. Four things the collaborative will work on over new two years are supply chain/capital spend, contracted services, information technology and population health. The official name of the South Carolina Hospital Collaborative will be *Initiant Health Collaborative*. Cawley reviewed the key dates and next steps. Pending approval by the BOT, the formal announcement will be made April 11, 2014, and the initial board meeting will be held on June 5, 2014 in Columbia.

Action: Recommend Approval

Item 7. Medical University Hospital Authority Financial and Statistical Report

Mr. Steve Hargett reported on the Authority's financial status as of February 2014. Hargett reported that as of February, the operating margin is at 5.79%. Hargett reported a \$30 million plus bottom line for 8 months which is well ahead of budget. Days cash on hand are at 22. Debt service coverage ratio is 3.49. Hargett commented that HUD only requires 1.75 so we have twice the debt service coverage that we need. Long-term debt eight years ago was at \$552 million; as of February 2014, it is down to \$409 million.

Action: Report received as information.

Item 8. Report on Quality and Patient Safety

Dr. Danielle Scheurer presented the following under the Quality and Safety Update.

Culture of Safety Survey

The Culture of Safety Survey is conducted annually using the Agency for Healthcare Research and Quality (AHRQ) survey. Scheurer reported that we have been conducting since 2005 and have comparative data since 2007. The 2014 response rate of 2014 was 46% which is about the same as last year. Scheurer reported that MUSC went up in every domain this year except staffing which could be a result of the staffing changes made under Performance Excellence. Highest ratings were in the areas of teamwork within units and direct supervisors; lowest ratings were handoffs and transitions of patients and non-punitive response to error. Scheurer commented that while non-punitive response to errors was one of our lowest scoring areas, we jumped up 12 points this year and commented that this increase is probably attributed to the just culture rollout organization wide. Survey results rollout will be similar to last year including meeting with administrators, directors and managers individually to review results; development and implementation of action plans and working with the lowest scoring areas on exception-based reporting/action plans.

Nursing Excellence/Magnet Update

A copy of the Nursing Annual Report was given to each board member. Dr. Scheurer reported on where MUSC is with Nursing Sensitive Indicators. These are the quality indicators that are considered nursing sensitive where nursing can have a dramatic impact on the outcome. For the period of April 2012 through December 2013, we are green in all areas except for CAUTI. Scheurer reported that for the period of January through March 2014, we are significantly better.

Leapfrog Group/Hospital Safety Score

Dr. Scheurer reminded the committee of the Leapfrog Group ratings that are widely publicized and use the ratings of A through F of which MUSC received an "A" rating last year. Scheurer reported that we are now in the cycle of submitting our application for this year. One of the requirements of Leapfrog is that certain items are presented to the board for awareness. One of the items is where we stand with teamwork training. Scheurer commented that teamwork training is recommended for all staff and while we are not there yet, a huge teamwork training initiative is being rolled out in the fall in Women's Care to train physicians, residents, nurses and other patient care staff. The second item is medication reconciliation. This is a very difficult process that when a patient is transferred from any place, you are to reconcile all of the patients' medications, but validating this occurring 100% of the time is very difficult. National standards are at 90% and we are currently in the high 80%. Scheurer reported that we will re-invigorate our efforts with the Epic enterprise rollout. The third item is FMEA or Failure Mode Effect Analysis which is a quality technique where you take a relatively high risk situation and break it down into its component parts and figure how it can fail and how to fix. This year several FMEAs were conducted, but some of the more difficult ones included morgue body identification; high risk pediatric transport and pediatric elopement potential.

Action: Report received as information.

Item 9. General Report of the Dean, COM and Vice President for Medical Affairs

Dr. Etta Pisano gave an update on College of Medicine activities in the areas of Education and Research. Dr. Pisano reported on the fall 2014 medical school admission statistics. Pisano reported that of 3,836 applicants, 597 were in-state and 3,239 were out of state. Mean GPA of admitted students is 3.7 and mean MCAT is 31. Pisano reported that 158 of 160 students matched into a resident on "Match Day." 44 (27% are staying in state for their residency training. Pisano reported that nearly 38% of the class will be entering primary care. For MUSC, all but 1 residency position was filled. This was a PGY2 in Nuclear Medicine. Pisano also showed how MUSC's ranks in regards to where graduates practice after residency. MUSC ranks in the 91st percentile in African American graduates and 86th percentile for number of African American graduates. Pisano also showed data on medical student debt and how MUSC compares to the national average.

Dr. Pisano announced that Dr. Richard Drake has been appointed the Director of the MUSC Tissue Biorepository Network effective April 1, 2014.

Dr. Pisano reported on the Bridge Funding program that started in 2011. Pisano reported that of the 35 applications, 19 received bridge funding. Total investment from the Dean's office, department and Provost Funds was \$1,135,000 with a total return on investment of \$15,799,321.

Action: Report received as information.

Item 10. Update on MUSC Physicians

Dr. David Cole reported the following:

The Department of Pediatrics Cardiology division offering approved screening to detect congenital heart defects on all newborns in 9 other hospitals and birthing centers throughout South Carolina.

The Department of Dermatology's expenditure of \$431,000 in department funds to support purchase of three new Cryostats, five new procedure chairs, one new Pulse Dye Laser, five new single and dual lights and multiple pieces of MUHA equipment in support of Mohs Surgery's relocation to the East Cooper Clinic.

Action: Recommend approval.

Item 11. Legislative Update

Mr. Mark Sweatman gave an update on legislative activity. Sweatman reiterated what was reported by Dr. Cawley earlier, that telemedicine is really transforming the state with receiving \$30 million in funding if the senate budget works out. Sweatman also reported that the merger bill has been pushed out and has turned into a bill that should now give the College of Charleston the tools needs to become a research university.

Action: Report received as information.

Item 12. Other Committee Business

No items

CONSENT ITEMS FOR APPROVAL

Item 13. Medical University Hospital Authority Appointments and Reappointments and Delineation of Privileges.

Credentialing rosters from January and February were presented to the committee. The rosters have been approved by the appropriate hospital committees and the Medical Executive Committee.

Action: Recommend approval

CONSENT ITEMS FOR INFORMATION

Item 14. Medical Executive Committee Minutes

The minutes from the January and February meetings were presented and reviewed by the committee.

Action: Received as information.

Item 15. Medical Center Contracts and Agreements

The contracts and agreements entered into since the last meeting of the Board have been reviewed.

Action: Received as information.

Item 16. Environment of Care Report

The annual Environment of Care Report was reviewed by the committee.

Action: Report received as information

There being no further business, the committee adjourned at 9:12 am.



Jane L. Scutt

**Medical University Hospital Authority
Physical Facilities Committee
April 10, 2014
Minutes**

Board Members Attending:

Mr. William H. Bingham, Sr., Chair	Dr. Thomas C. Rowland, Jr.
Dr. Stanley C. Baker	Mr. Charles W. Schulze
Mr. James A. Battle	Dr. G. Murrell Smith, Sr.
Mr. William B. Hewitt	Mr. Thomas L. Stephenson
Dr. Harold Jablon	Mr. Michael E. Stavrinakis
Dr. Donald R. Johnson II	The Honorable Robin M. Tallon
Ms. Barbara Johnson-Williams	Dr. Charles B. Thomas, Jr.
Dr. Ragin C. Monteith	Dr. James E. Wiseman, Jr.
Dr. E. Conyers O'Bryan, Jr.	

Mr. Bingham called the meeting to order.

REGULAR Items

Item 17 Update on Projects.

Mr. Matt Wain, Chief Operating Officer for the Medical Center, introduced Ms. Melissa Anderson, Senior Manager at Kurt Salmon and Mr. Jim Bynum, Healthcare Regional Practice Leader at Perkins & Will, to discuss the updated feasibility study for the Children's Hospital and Women's Pavilion. They reviewed the key assumptions of the study and based on those assumptions, they deemed the \$350 million Children's Hospital and Women's Pavilion project to be feasible. However, in order to make the project feasible, MUHA must focus on the following and achieve these assumptions over the next 10 years:

- Decrease current length of stay from 6.1 days to an average of 5.9 days
- Ensure costs (salaries, supplies, purchased services) increase at 2.5% annually
- Ensure that commercial payor rates increase at an average of 1.8% annually
- Raise \$50 million in philanthropy to support the Hospital/Pavilion

Mr. Hewitt felt that the additional debt for the institution appeared to be a high risk investment with a low rate of return.

Dr. Smith expressed concern that there were not enough labor rooms and C-Section rooms provided for in the study in order to accommodate expected growth.

Dr. Cawley commented that MUHA has to continue the hospital replacement project in order to free up space for other services to expand.

At the conclusion of the presentation of the feasibility study, Mr. Dennis Frasier stated a selection committee of seven board members, Chaired by Mr. Bingham, had interviewed four architectural firms to provide design services for the new hospital. The committee had selected Perkins & Will as the architects and asked for approval of the selection.

Recommendation of Committee: A motion was made and seconded to approve the selection of Perkins & Will and all voted yes with the exception of Mr. Hewitt who voted no.

Item 18 **Other Committee Business.** None

CONSENT Items for Information:

Item 19 **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
Audit Committee
April 10, 2014
Minutes**

Board Members Attending:

Mr. William B. Hewitt, Chair	Dr. Thomas C. Rowland, Jr.
Dr. Stanley C. Baker	Mr. Charles W. Schulze
Mr. James A. Battle	Dr. G. Murrell Smith, Sr.
Mr. William H. Bingham, Sr.	Mr. Thomas L. Stephenson
Dr. Harold Jablon	Mr. Michael E. Stavrinakis
Dr. Donald R. Johnson II	The Honorable Robin M. Tallon
Ms. Barbara Johnson-Williams	Dr. Charles B. Thomas, Jr.
Dr. Ragin C. Monteith	Dr. James E. Wiseman, Jr.
Dr. E. Conyers O'Bryan, Jr.	

Mr. Hewitt called the meeting to order.

REGULAR Items

Item 20. Information Security Update.

Dr. Frank Clark, Chief Information Officer, asked the board if there were any questions about the information security update from internal audit. There being no questions, the board received the report as information.

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

Item 21. Report of the Office of Internal Audit.

Ms. Susan Barnhart had distributed the results of internal audit reports and there being no questions, the reports were received as information.

Recommendation of Committee: That the report be received as information

Item 22. Other Committee Business.

Ms. Jennifer Hall, a Partner with KPMG, presented the 2014 External Audit Plan for MUHA and MUSC. Ms. Hall stated she will be in charge of the University audit and Mr. Brian Wiese continues as the KPMG Partner conducting the MUHA/UMA audit. She gave a summary of professional services to be provided; information on materiality and reporting of audit differences; timing of audit fieldwork; and reviewed the general audit approach to be followed. She also reviewed priority areas for audit review as well as changes to federal grant policies and single audits. She concluded with a technical accounting update.

Respectfully Submitted,

Celeste Jordan

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

With no further business, the meeting was adjourned.

Respectfully submitted,

Celeste Jordan
