



**BEXAR COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS**

By Telephone

Tuesday, January 26, 2021
6:00 p.m.
4502 Medical Drive
San Antonio, Texas 78229

MINUTES

BOARD MEMBERS PRESENT:

James R. Adams, Chair
Ira Smith, Vice Chair
Margaret Kelley, M.D.
Roberto L. Jimenez, M.D., Immediate Past Chair
Anita L. Fernandez
L.P. Buddy Morris
Jimmy Hasslocher

OTHERS PRESENT:

George B. Hernández, Jr., President/Chief Executive Officer, University Health System
Bryan J. Alsip, MD, Executive Vice President/Chief Medical Officer, University Health System
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System
Andrea Casas, Interim Chief Human Resources Officer, University Health System
William Henrich, MD, President, UT Health San Antonio
Rob Hromas, MD, Dean, Long School of Medicine, UT Health San Antonio
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System
Serina Rivela, Vice President/General Counsel, Legal Services, University Health System
Carlos Rosende, MD, Executive Dean for Clinical Affairs, UT Health San Antonio
Rajeev Suri, MD, Professor/Department of Radiology; and Vice President/Medical-Dental Staff,
University Health System
Michael Roussos, Administrator, University Hospital
Don Ryden, Vice President/Project, Design & Construction, University Health System
Sally Taylor, MD, Senior Vice President/Chief, Behavioral Medicine, University Health System
Jim Willis, Associate Administrator, University Hospital
Laura Garcia, San Antonio Express-News
And other attendees.

CALL TO ORDER:

Mr. Adams called the meeting to order at 6:02 pm, and provided the following statement: In light of the recent spike in Covid-19 cases and as a precautionary measure to mitigate the spread of COVID-19 and allow the Board, our staff and the public to participate in this meeting in a safe manner, this meeting will

be conducted both in person and by telephone. He then yielded the floor to the Recording Secretary for roll call and to confirm a quorum. All Board members indicated “present.” Voting today will be conducted by individual roll call to clearly identify each Board member by name and vote.

INVOCATION AND PLEDGE OF ALLEGIANCE

Mr. Adams introduced Mr. Kenneth Malone, St. Matthew’s Catholic Church for the invocation, and he led the pledge of allegiance.

PUBLIC COMMENT: None.

**SPECIAL RECOGNITION - QUARTERLY EMPLOYEE RECOGNITION AWARDS -
(GEORGE B. HERNÁNDEZ, JR./BOARD MEMBERS)**

Professional: (Nursing)	Sarita Bunnell Care Coordinator, Nursing Administration
Professional: (Non-Nursing)	Bethany Bradshaw Child Life Specialist, Nursing Administration
Management:	Sherrie Matthews Director, Internal Communications, Corporate Communications
Technical:	Rita Sosa Coordinator, Information Systems, Communication Services
Clerical	Angela Carter Sr. Administrative Assistant, UMA, EMC
Service:	Henry Carrera Controls Technician, Facilities Management
Volunteer:	Genetrix Alvarez Volunteer, Volunteer Services
Provider:	Diana Garza, NP Nurse Practitioner, Employee Health Services
Team:	Disaster Response Team Valerie Perez, Noah Knox

All of this year’s quarterly recipients will be special honored guests at the Annual Employee Recognition Awards Ceremony. Employees of the Quarter receive a plaque, embossed pen and an opportunity to select one of numerous awards valued at \$100 on the Employee Recognition website. Ms. Andrea Casas announced the annual employee recognition banquet will be held virtually on February 25, 2021.

REPORT FROM UT HEALTH SAN ANTONIO — WILLIAM HENRICH, M.D., PRESIDENT

SUMMARY: Dr. Henrich spoke to the coordinated efforts in distribution of the COVID-19 vaccine within the city; he is especially proud of the collaboration with University Health. Both organizations are “hubs” in terms of vaccination. This effort has also been coordinated with the

Metropolitan Health District and WellMed to do the best job possible to vaccinate the Bexar County community. The major problem across the county is the demand which exceeds supply. San Antonio has done a very good job with the vaccine that has been received so far. A collateral benefit of COVID-19 pandemic is that there has been a tremendous uptick and interest in medical and health professions. Applications to the Schools of Medicine, Dentistry, Nursing, and Allied Health Professions have increased by 20 percent. One of the motivators is apparently the desire of these applicants to serve humanity and therefore, have chosen the health profession. He touched upon are the elective surgeries that have been paused at University Hospital due to a high census of COVID-19 patients; however, he is confident that in a couple of weeks, University Hospital will reach a census level that will allow restarting elective surgeries until conditions improve. Dr. Hromas discussed the Texas Legislature, which is now in session. Preliminary information indicate that the School of Medicine/UT Health we will lose some funding from the state and he is keeping a close eye on that. A unified approach would be very important, and he expressed appreciation for the partnership as both organizations approach the state with their joint interests in health care, research, and education. Dr. Jimenez was pleased to learn about the increase in applications for admission and asked whether recruiters were keeping an eye on minority applicants in particular and presenting the qualifying programs and pushing the whole issue of recruiting minorities. The changing demographics and nature of the population all over the country is becoming increasingly more diverse, especially in certain states like California and Texas, where there will be dramatic changes in the minority composition within the next 20 years. There will be a need for more minority professionals in healthcare; he urged Drs. Henrich and Hromas to keep this in mind as a major factor when reviewing applications for admission. Dr. Henrich emphasized that diversity is important for UT Health for many reasons but the reasons Dr. Jimenez pointed out are precisely on his mind. UT Health has appointed several individuals who are proactive in recruiting underrepresented minorities to matriculate with UT Health. In that regard, UT Health is already known as a minority-serving institution. The average for medical schools of minority enrollment across the county is at an average of 16 to 17 percent. The Long School of Medicine has a minority enrollment rate of 27 to 28 percent; and the School of Nursing is approaching 45 to 50 percent. The School of Allied Health Professions also has a high minority enrollment rate. The individuals appointed have a specific purpose – to increase diversity and improve it. Dr. Henrich is proud of Dr. Hromas, in collaboration with Office of the President, the Long School of Medicine has started to offer scholarships targeting under-represented minority students of ability who are often recruited away by other institutions. He is hopeful this effort will help attract minorities, in addition to other incentives. Dr. Henrich expressed his firm commitment to train minorities in healthcare. He feels strongly that future medical providers need to look more like the population they care for. Dr. Hromas is happy to offer scholarships to minorities who are superstar, academic students that are being lost to Harvard and Yale. At the very least, training of these healthcare providers at UT Health and University Health is keeping them in the

State. Dr. Kelley asked about recruitment of minorities to the residency programs at UT Health. She recalled how competitive the Ob/Gyn residency program was for admission. UT Health has several programs aimed at improving minority recruitment. First, there is a virtual diversity residency webinar annually that has 300 to 400 minority medical students from across the country attend. There is also a breakfast for minority medical students when they interview for residencies where they are matched with a minority faculty and a minority physician resident that serves as a mentor. Scholarships are offered to well-credentialed students especially from minority schools where UT Health pays for travel and lodging for an entire month so that these potential students can see first-hand what UT Health offers. UT Health does very well in recruiting women – both to the school of medicine and residency training programs. Fifty (50) percent of the residents are women in general medicine, family medicine, pediatrics, orthopedic, neurosurgery, and urology. Not doing well in recruiting women or male minorities to surgical subspecialties. The match for resident physicians is very competitive and has become more so recently. UT Health uses individuals to portray what has been done at UT Health as a welcome home to anyone of any background. Dr. Hromas feels the team does a good job of trying to bring more minorities on campus and accordingly, are targeting surgical subspecialties at this time. Dr. Jimenez recommended an excellent article which appeared in Modern Healthcare last summer authored by the Dean of Meharry Medical College regarding the importance of recruiting and training minorities in the next quarter of a century in this nation. He was very pleased to learn what UT Health reported today.

ACTION: This report was provided for informational purposes only; no action by the Board was required.

EVALUATION: None.

FOLLOW-UP: None.

NEW BUSINESS:

CONSENT AGENDA — JIM ADAMS, CHAIR

CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF MEMBERSHIP AND PRIVILEGES — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF

SUMMARY: Pursuant to Article III, Section 3.3-1 of the Medical-Dental Staff Bylaws, initial appointments and reappointments to the Medical-Dental Staff of University Health shall be made by the Board of Managers. The Board of Managers shall act on initial appointments, reappointments, or revocation of appointments only after there has been a recommendation from the Executive Committee of the Medical-Dental Staff. If approval is granted by the Board of Managers, the clinical provider is placed on a two-year reappointment cycle. After 12 months' provisional review, the provider's status changes from Provisional to Active or Courtesy Staff depending on board certification and the frequency of patient encounters during the previous 12 months. The Credentials Committee met on December 14, 2020 November 23, 2020, and reviewed the credential files of the

individuals listed in the written Credentials Committee Report and Professional Performance Evaluation Report provided to the Board of Managers. At its meeting of January 5, 2021, in accordance with University Health's credentialing and privileging process, the Executive Committee of the Medical-Dental Staff approved the Credentials Committee's Report and its recommendation for clinical privileges for staff membership. The Executive Committee recommends approval by the Board of Managers of the Credentials Committee Report.

CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR PROFESSIONAL PRACTICE EVALUATIONS AND DELINEATION OF PRIVILEGES — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF

SUMMARY: The Credentials Committee met on December 14, 2020, and reviewed proposed revisions to Delineation of Privileges and the Professional Performance Evaluation Reports and forms, which were provided to the Board of Managers. In its meeting of January 5, 2021, the Executive Committee of the Medical-Dental Staff approved the following:

- 1) Focused/Ongoing Professional Performance Evaluation Report
- 2) Delineation of Privileges
 - a. University Health
 - i. Internal Medicine/Pulmonary (Revised)
 - ii. Radiation Oncology (Revised)
 - b. Ambulatory Surgery Center – Medical Center
 - i. Radiation Oncology (Revised)

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AMENDMENT TO THE LEASE CONTRACT WITH CROSSROADS MALL PARTNERS, LTD. — DON RYDEN

SUMMARY: University Health currently leases 40,544 sq. ft. of office space at Wonderland of the America. This space was originally designated for classroom training and competency testing clinical and non-clinical staff and providers as University Health and UT Health San Antonio under took the adoption of the new electronic health record. Wonderland of the Americas (a.k.a. – Crossroads Mall) is located on Fredericksburg Road adjacent to the IH-10 and Loop 410 interchange. It is very accessible and in close proximity to University Hospital. It provides a convenient and well known location for the general public. Accordingly, staff has determined to use this site for distribution of the COVID-19 vaccine to eligible Bexar County citizens. In addition, as a pre-admission procedure for asymptomatic patients of University Hospital, COVID-19 screening will be performed here prior to their admittance to the hospital. Previously, this pre-procedure testing was done at the Express Med Pavilion. The original one year lease term for this location commenced December 1, 2019, at a rental rate of \$20.00 per sq. ft. (\$67,573.33 per month). The lease was amended effective October 1, 2020 with an adjusted rental rate of \$7.75 per sq. ft. (\$26,191.00 per month). With previously Board approved funding, the lease will terminate February 28, 2021. The proposed renewal term will extend the lease agreement to September 30, 2023. The amended monthly rental

amount of \$26,191.00 will stay in effect for a total lease expense of \$811,921. The lease rate includes maintenance, insurance, chilled water for HVAC, and janitorial service. There is a thirty (30) day termination clause in the lease agreement provided for both the Landlord and Tenant. This lease expense will be funded through 2021 operational funds. Staff recommends Board of Managers' approval of the amendment to the lease contract with Crossroads Mall Partners, Ltd. thereby extending the lease term to September 30, 2023 in an amount not to exceed \$811,921.

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE 4TH QUARTER INVESTMENT REPORT — ROE GARRETT/REED HURLEY

SUMMARY:

The Investment Portfolio Summaries for University Health and Community First Health Plans (CFHP) invested funds for the fourth quarter of 2020 were provided for the Board's review. In total, the value of all invested funds as of December 31, 2020, was \$1,643,039,457 consisting of University Health, Project, Certificate and CFHP Funds. The reports include all information required by the Texas Public Funds Investment Act. In addition, University Health and CFHP portfolio reports have been provided separately. The portfolios earned \$2,180,384 in interest income during the fourth quarter, a 66% decline from \$6,469,452 in the same period a year ago, reflecting the collapse in interest rates during 2020. The portfolio's unrealized gain moderated to \$4,576,861. As of December 31, 2020, University Health portfolio for operations (excluding CFHP and the debt related funds) was valued at \$1,030,441,389. The portfolio, consisting of the Operating, Contingency, Capital and Tax Funds, had a weighted average yield-to-maturity of 0.54% and a weighted average maturity of 253 days. The portfolio's yield pulled well ahead of its benchmarks this quarter, easily topping both the 6-month Constant Maturity Treasury (CMT) benchmark, which yielded 0.12%, and the 1-year CMT benchmark's 0.38% yield. This information is presented for approval by the Board of Managers.

CONSIDERATION AND APPROPRIATE ACTION REGARDING PURCHASING ACTIVITIES (SEE ATTACHMENT A) — ANTONIO CARRILLO/TRAVIS SMITH

SUMMARY:

A total of 21 contracts with a value of \$29,544,342 are being presented to the Board of Managers during the month of January 2021. The following contracts require approval by BCHD Board of Managers: 13 consent contracts with a total value of \$10,323,115; and 8 presented contracts with a total value of \$19,221,227. During the month of January 2021, there were four contracts classified as a Small, Minority, Woman, or Veteran Owned Business Enterprises (SMWVBE). The January 2021 SMWVBE Status Report reflects items submitted for Board approval.

**CONSENT AGENDA
RECOMMENDATION:**

Staff recommends approval of all of the items above on the Consent agenda.

**CONSENT AGENDA
ACTION:**

A **MOTION** to approve staff's recommendation was made by Dr. Jimenez, **SECONDED** by Dr. Kelley, and **PASSED UNANIMOUSLY**.

**CONSENT AGENDA
EVALUATION:**

None.

CONSENT AGENDA

FOLLOW-UP: None.

ACTION ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED PURCHASING ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH WASTE MANAGEMENT NATIONAL SERVICES, INC. FOR WASTE STREAM MANAGEMENT SERVICES — JIM WILLIS

SUMMARY:

Waste Management National Services, Inc. (Waste Management) has provided services to University Health since 2011. The original contract was awarded to Waste Management through Request for Proposal (RFP) 210-10-279-IF. There have been 11 subsequent amendments to the original contract. All renewal options have been exhausted and a new contract was solicited through RFP 220-09-051-SVC. On October 22, 2020, only one response by Waste Management was received by Procurement Services. After careful consideration and review, management’s recommendation is to award the master waste stream services contract to Waste Management. During the course of the previous 10 years, Waste Management has been an excellent partner, they have provided ongoing annual reviews for all University Health waste streams and provided operational expertise and technology to reduce waste stream volumes and costs. During the term of the original agreement, there have been no regulatory findings. The value of a new five-year contract with Waste Management is \$10,123,895. Breakdown of costs are as follows:

Waste Management Fees	2021	2022	2023	2024	2025
Annual Flat Fee	\$1,600,619	\$1,600,619	\$1,600,619	\$1,600,619	\$1,600,619
Transactional Fees	\$294,160	\$294,160	\$294,160	\$294,160	\$294,160
Overage Fee		\$50,000	\$150,000	\$200,000	\$250,000
Yearly Total	\$ 1,894,779	\$1,944,779	\$2,044,779	\$2,094,779	\$2,144,779
				5 Year Total =	\$10,123,895

University Health produces 9 million pounds of trash yearly. The workforce composition data of Waste Management National Services, Inc., was provided for the Board’s review.

RECOMMENDATION:

Staff recommends Board of Managers’ approval of a master waste stream services contract with Waste Management for five years at a cost not to exceed \$10,123,895 with the option for four one-year renewals.

ACTION:

A **MOTION** to approve staff’s recommendation was made by Dr. Kelley, **SECONDED** by Mr. Morris, and **PASSED UNANIMOUSLY**.

EVALUATION:

Dr. Jimenez expressed concern that out 819 employees at Waste Management, 572 employees are white. The diversity of the workforce does not represent Bexar County and he sees opportunity for them to improve their diversity while working with University Health.

FOLLOW-UP: Staff will bring Dr. Jimenez's concern to the attention of Waste Management leadership and will encourage diversification of their workforce.

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FINANCIAL REPORT FOR DECEMBER 2020 — REED HURLEY

SUMMARY: In December, University Health operations continued to be significantly impacted by the COVID-19 crisis resulting in stay at home and social distancing directives reducing patient activity. Clinical activity (as measured by inpatient discharges) was down 6 percent for the month compared to budget. Year-to-date inpatient discharges were down -10.1 percent compared to budget. Community First Health Plans (CFHP) fully insured membership was up 14.8 percent to budget. On a consolidated basis, gain from operations was \$63.2 million, \$51.4 million better than budget. The consolidated bottom line gain (before financing activity) was \$54.4 million, \$47.4 million better than the budgeted gain of \$6.9 million. Higher supplemental, net patient revenue and CFHP premium revenue slightly offset by higher operating expense resulted in performance better than budget. CFHP experienced a bottom line gain of \$5.4 million, which was \$2.2 million better than the budgeted gain of \$3.1 million. Higher premium revenue offset by premium deficiency reserve cost accounted for the improved Mr. Hurley reviewed notable increases and/or decreases from the December 31, 2019 Consolidated Balance Sheet in detail with the Board.

RECOMMENDATION: Staff recommends approval of the financial reports subject to audit.
ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Hasslocher, **SECONDED** by Dr. Kelley, and **PASSED UNANIMOUSLY**.

EVALUATION: Dr. Jimenez specifically asked about trends in employee compensation and medical supplies. Employee compensation was over budget \$5.6 million or 9.5 percent for December and under budget \$18.3 million year to date. Salaries were over budget \$2.7 million for the month primarily due to the annual PTO accrual. Year to date salaries were under budget \$11.0 million year to date due primarily to lower Epic costs and patient activity due to COVID-19. Supply costs were over budget \$3.7 million or 17.3 percent in December and under budget \$3.6 million year to date. The variance to budget is the result of higher medical supplies of \$3.1 million. Year to date pharmaceuticals were under budget \$11.3 million and implant costs were under \$9.5 million offset by medical supplies over budget \$18.5 million.

FOLLOW-UP: None.

PRESENTATIONS AND EDUCATION:

FOURTH QUARTER QUALITY REPORT — BRYAN ALSIP, M.D.

SUMMARY: The Quality Metric Summary for the period January to November 2020 indicates Length of stay (LOS), sepsis LOS, mortality, and Hospital-Acquired Infections were below baseline and not at target YTD. The goal for 2020 for sepsis length of stay is 13.33 days as compared to 2019 baseline performance of 14.54 days. This metric is currently at a value of

16.78 days. The goal for 2020 for mortality is a ratio of 0.66 as compared to 2019 baseline performance of 0.67. This metric is currently at a value of 0.77.

Readmissions, patient safety, SEP-1 Bundle, and PC-02 (C-Section) were better than baseline but not at target YTD.

Hospital readmissions are measured as an observed to expected ratio of readmissions to the hospital within 30 days of the initial admission for the eight readmission diagnoses incorporated into the CMS Readmission Reduction Program. The goal for 2020 for hospital readmissions is a ratio of 0.84 as compared to 2019 baseline performance of 0.98. This metric is currently at a value of 0.97.

To date, all six metrics of the Patient Safety Composite for 2020 are better than 2019 baseline performance targeted goals and three (PSI-9, PSI-11 and PSI-15) are significantly better than targeted goals.

PSI-90 and Process are better than target YTD. Performance to date is excellent for these metrics and is significantly better than 2019 baseline and well beyond target goal performance (133 percent to target).

Performance for all HAI metrics for 2020 is at 72 percent of target and worse than 2019 baseline with the exception of CDI and SSIs for colon surgical patients, both of which are better than the 2019 baseline. The trend for all HAI metrics improved in September through November 2020.

The goal for 2020 for the sepsis bundle compliance is 54 percent as compared to 2019 baseline performance of 38 percent. This metric is currently at a value of 50.5 percent.

The goal 2020 goal for Cesarean section (PC-02) rate core measure is 23 percent. The current value is 26 percent, better than 2019 baseline performance of 29 percent.

Length of stay for all inpatients is calculated as the ratio of observed length of stay (LOS) to expected LOS. The goal for 2020 for all inpatient length of stay is a ratio of 0.81 as compared to 2019 baseline performance of 0.85. This metric is currently at a value of 0.85.

Length of Stay, Sepsis Length of Stay, and Mortality were negatively impacted by the extended length of stay observed among COVID-19 positive inpatients admitted to University Hospital during the second and third quarter. Dr. Alsip reviewed average length of stay trend comparison for the period January through November 2020. For the month of November there were 137 COVID positive cases at University Hospital and the COVID+ average length of stay was 7.45 days while the non-COVID average length of stay was 6.04 days. Non-COVID visits were at 2,784.

Mortality is calculated as an observed to expected ratio based on national data for patient diagnoses and severity of illness. The goal for 2020 for mortality is a ratio of 0.66 as compared to 2019 baseline performance of 0.67. This metric is currently at a value of 0.77

There was a reduction in performance during the second quarter with device-associated infections (CAUTI and CLABSI) among the COVID-19 patient population. The goal for 2020 for CLABSI is 0.53 as compared to 2019 baseline of 0.55. This metric is currently at 1.02. The goal for 2020 for CAUTI is 1.05 as compared to 2019 baseline performance of 1.65. The metric is currently at 1.73 days.

The 2020 goal for Healthcare-Associated *C. difficile* infections (per 10,000 patient days) was 4.00 as compared to the 2019 baseline of 4.10. This metric is currently at 3.56.

The 2020 goal for 30-day readmissions (O:E) is 0.84 as compared to 2019 baseline performance of 0.98. This metric is currently at 0.84.

Patient Safety Indicators – Rate per 1000 –To date, all six metrics are better than 2019 baseline performance targeted goals and three (PSI-9, PSI-11 and PSI-15) are significantly better than targeted goals. Although opportunity remains with PSI-3, we have seen a marked improvement in performance September through November 2020 with zero events in November (lower is better). Patient safety indicators (PSI) composite metric was revised in 2020 to reflect an increased focus on specific components of the Leapfrog Hospital Safety Score and the PSI-90, which also impacts the CMS Hospital Star Rating program. PSI-90 is a calculated, risk-adjusted observed to expected ratio determined from clinical documentation coding. The goal for 2020 for the PSI-90 metric is a ratio of 0.70 as compared to 2019 baseline performance of 0.84. This metric is currently at a value of 0.66. This is better than goal at 105 percent to target and represents a significant improvement over baseline.

The goal for 2020 for the sepsis bundle compliance is 54 percent as compared to 2019 baseline performance of 38 percent. This metric is currently at a value of 50.5 percent.

CMS Dialysis Facility Compare – October 2020 Release for 2016-2019 Data – For this time period, University Dialysis West, University Dialysis Southeast, and University Dialysis South each received a 5-star quality of patient care rating (much above average)

RECOMMENDATION:
ACTION:
EVALUATION:

This report was provided for informational purposes only.

No action was required by the Board of Managers.

Dr. Jimenez asked about University Hospital's visitation policy during the pandemic and whether the policy would have had any impact on the data presented today? University Hospital restricted patient visitation due to the potential mitigation and risk of infection. On the other hand, providers may counter-claim that having fewer visitors especially by family members can adversely affect a patient's outcome. These decisions are not made lightly. University Health is restricting visitors in

collaboration with community standards, especially with end of life scenarios, it can become very challenging. Mr. Adams commended the staff for achieving 5-star quality ratings from CMS on three dialysis facilities. He is well aware that when the staff and physicians of University Health set out to something, as they have with dialysis, it gets accomplished. Mr. Adams, however, is disappointed with some the data presented today. The staff has room to improve outcomes when competing nationally. If University Health wants to be known among the best in the country, staff needs to seriously look at what is happening and produce better outcomes. University Health is a competent health system in everything it does with UT Health. Dr. Hromas completely agrees and pledged the assistance of UT Health's Chief Medical Officer, Dr. Robert Leverage to work closely with Dr. Alsip and staff to develop a quality improvement plan for University Hospital.

FOLLOW-UP:

None.

UNIVERSITY HEALTH COVID-19 UPDATE — *BRYAN ALSIP, M.D./ED BANOS*

SUMMARY:

Bexar County has seen over 148,000 confirmed cases and over 2,000 deaths affected by the COVID-19 virus. University Health was one of the first healthcare organizations in the county to do and support other hospitals with COVID-19 testing and the administration of 2,000 vaccinations a day as of January 2021. Mr. Banos reviewed COVID-19 related actions and contributions made by University Health. In collaboration with the Regional Medical Operations Center (RMOC), University Health assisted with early COVID-19 testing for the community, and in early 2020, University Hospital's Emergency Department immediately created new locations and surge protocols to appropriately care for additional surge increases expected in the area.

- May 4, 2020 - University Health transitioned support of operations at the Joe Freeman Coliseum in order to redeploy staff to provide in-house testing capabilities.
- October 2020 - University Health Vaccine Program Implementation Group organized internal efforts in anticipation of the forthcoming COVID-19 vaccines.
- November 2020 - UT Health launched a COVID-19 Vaccine Assessment and Access Task Force including University Health representatives to coordinate planning efforts
- December 18, 2020 - University Health staff and providers eligible to receive the vaccine in Phase 1A began.

Inpatient Capacity Management -

- Mid - November 2020 - Inpatient COVID-19 admissions began significantly increasing and University Hospital enacted a phased response plan to ensure appropriate bed availability for services.
- November 19, 2020- University Hospital began converting inpatient rehabilitation beds into medicine beds, which allowed adding up to 27 additional medicine inpatient beds for patient surge.
- November 30, 2020 - Four additional medicine beds were added to 9th floor Rio Tower.
- December 3, 2020 - Additional COVID-19 ICU beds were created on 8th Floor Sky Tower as a backup to 5th floor ICU.

- December 17, 2020 - Sky Tower third floor Pre-Op patients were relocated to the new Advanced Diagnostic Center, which opened up the third floor Pre-Op area for up to 21 additional medicine beds.
- January 4, 2021 - University Hospital paused elective surgeries requiring a postoperative inpatient stay, except for Tier 3 procedures which can include trauma, transplants, cardiac surgery, cancer, or neurosurgery procedures. Ambulatory surgery centers remained opened.
- January 11, 2021 - Advanced Diagnostic Center was converted into an inpatient medicine unit for up to 30 inpatients, if needed.
- January 11, 2021 - Only procedures scheduled at University Hospital were those meeting 3a or 3b criteria. University Hospital limited visitors in alignment with all other Bexar County Hospitals.
- January 19, 2021 - University Health has received and processed a cumulative total of 102,465 COVID-19 diagnostic tests.
- University Hospital continues to receive all adult and pediatric trauma patients transported by EMS directly from the locations where people are injured. Brooke Army Medical Center (BAMC) will temporarily receive all adult trauma transfers from other hospitals in the region. BAMC is voluntarily serving as a regional resource for critically ill COVID-19 patients requiring ECMO

Pharmacy Operations and Support -

- Staff has worked diligently with local and state officials to “think outside the box” and has supported four studies, with over 250 patients, one of which was the largest in the world.
- Re-wrote the entire medication administration time protocols to combine treatment doses.
- Dedicated one pharmacist 24/7 to support therapeutic efforts in the Emergency Department to ensure quality and timely patient care.
- Successfully navigated through approximately 141 critical drug shortages, and provided alternatives to ensure therapeutic treatment consistency
- Manufactured monoclonal antibodies in a sterile environment to prevent mild symptoms from becoming severe enough to require hospitalization. University Health offered to collect the allocations given to each hospital in the county, making 100 products per day for the Regional Infusion Center located at the Freeman Coliseum.
- Developed an operational plan to provide all vaccine administrators in a ready-to-use bar code labeled syringe.

University Medicine Associates –

- April 2020 - Peak utilization of telehealth within UMA. More than 82 percent of patients were seen via telehealth. More than 17 percent of patients were seen via face-to-face encounters. Total UMA encounters for 2020 were 409,096 and of that total, 152,297 were telehealth encounters which represented 37.23 percent of the volume for the year.
- January 2021 - UMA works closely with Epic Ambulatory team to evaluate workflows to integrate telemedicine within the MyChart Application.

Procurement -

Initially, staff was expecting extremely limited days of critical Personal Protective Equipment (PPE); however, the Supply Chain team developed alternate sourcing methods while building an emergency stock.

- N95 masks went from as low as a three days to over 945 days at the current utilization rate.
- Isolation gown stock was grown to an 87 day supply and includes the use of reusable gowns to minimize the utilization rate of disposable gowns.

January 18, 2021 - University Health has administered 35,431 doses of Moderna and Pfizer vaccine (staff, first responders, frontline health care workers outside University Health, teachers and members of the public who are in the 1B category of 65+ or with chronic health conditions). In late December, leadership selected Wonderland of the Americas as the hub site for University Health. Almost 1,500 doses were administered to the community on the first day (January 4).

February 2021 - Expectations are to open a larger site at Wonderland of the Americas to accommodate up to 5,000 daily vaccinations. Meanwhile, the Robert B. Green Campus has expanded services to support other front line organizations such as CommuniCare, CentroMed, CHCS, and the San Antonio Food Bank. University Health is working with Metro Health, STRAC, WellMed, and UT Health San Antonio on a frequent basis to load balance weekly vaccine allotments to sustain the multiple-site community-based mass vaccination model.

Dr. Alsip praised University Health's communications team for the critical and important role they have played during the pandemic which began almost one year ago, January 29, 2020. He and Ms. Kirkman discussed the importance of communication and the team's understanding and focus on evidence based practices and transparency which has served University Health very well. In October 2020, they also discussed the uncertainties that could be a challenge in terms of communicating. Ms. Kirkman and her team have done an outstanding job and are busier now than when the pandemic began. Communication is, and will be, critical as the community moves further along.

ACTION:

EVALUATION:

This report was provided for informational purposes only.

Dr. Jimenez initiated a discussion regarding a program on National Public Radio by the American Academy of Pediatrics regarding pediatric and adolescent mental health. There is a real concern by experts with the growing public health issue of mental health and the impact of COVID-19 all over the country, for example, a recent suicide of a 9-year-old that was attributed to pandemic confinement and school closure. Growing prevalence of pediatric mental and behavioral health disorders, coupled with scarce psychiatric resources, has resulted in a substantial increase in the number of youth waiting in emergency departments for psychiatric care in an already overwhelmed health systems. Dr. Jimenez suggested that a packet which includes all of the local resources that are available to these families regarding mental health issues they are beginning to experience, particularly for those who use the Emergency Department and those who visit the various ambulatory clinic. Include basic information on suicide,

self-injury, depression, anxiety, panic attacks and other mental health issues, and where to go and who to call for help. Dr. Alsip agreed that healthcare providers have not touched upon the scope of the mental health issues that continue to surround this pandemic. From Dr. Alsip's standpoint, in working with the staff, University Health providers are sensitive and aware of those issues. Through Ms. Kirkman's communications team, those resources for healthcare providers have been listed. The challenge for providers are those patients who are not coming to clinic and are not being seen. There is a huge demand in getting those resources to community members in need, especially those not coming in for healthcare; mental health is just as important in that regard. Ms. Fernandez noted existing opportunities to get that information out due to the partnerships, collaborations, and numerous entities University Health deals with in the community. She suggested University Health be proactive and initiate this conversation with schools and universities as it relates to COVID. Although patients may not be coming to the Emergency Department seeking help at this time, University Health's presence in the community is so that strong that there is opportunity to capitalize on existing partnerships to be the disseminators of such information. Mr. Hernandez spoke on his intention to negotiate and improve contracts with Clarity Children's Guidance Center for additional mental health support. Some cities are tackling vaccine distribution in a random fashion. In San Antonio, the decision was made early on to work with the 19 school districts in Bexar County and University Health was able to allocate vaccine for their 1A and 1B qualified staff. The consensus was that targeting the school districts would be a good move for the community. Children are desperate because they are not in school, they miss their friends, teachers, and the lack of interaction. University Health has had tremendous success having vaccinated over 3,000 school district employees who met the 1A or 1B requirement. It is important that administrators apply judgement to some of the requirements being set forth by the state to keep the infrastructure of this community alive. Mr. Adams is amazed and proud that the staff is looking beyond what needs to be done. Dr. Kelley commended the staff for the outstanding and smooth process set out for the vaccine rollout. It was fascinating for her to read the update about all the planning and work that takes place behind the scenes. She drew attention to a sentence in Mr. Banos' written report which summarizes her personal belief: "*The past year has been one that defined University Health's commitment to the community and how a public hospital system can be a leader in the community for all its citizens.*" Dr. Jimenez thanked University Health leadership for taking a public health approach to this issue. He is especially moved by the staff's concern about the mental health aspect of this pandemic.

FOLLOW-UP:

None.

INFORMATION ONLY ITEMS:

REPORT ON THE 87TH TEXAS LEGISLATURE — ANDREW SMITH

UNIVERSITY HEALTH FOUNDATION UPDATE — SARA ALGER

REPORT ON RECENT RECOGNITIONS AND UPCOMING EVENTS — LENI KIRKMAN

UPDATE ON THE WOMEN'S AND CHILDREN'S HOSPITAL AND ASSOCIATED PROJECTS — DON

SUMMARY: Mr. Adams directed his colleague's attention to the four informational reports above and urged them to contact staff members directly with questions and/or comments.

RECOMMENDATION: These reports were provided for informational purposes only.

ACTION: No action was required by the Board of Managers

EVALUATION: None

FOLLOW-UP: None.

ADJOURNMENT:

There being no further business, Mr. Adams adjourned the meeting at 7:10 m

James R. Adams
Chair, Board of Managers

Margaret A. Kelley, MD.
Secretary, Board of Managers

Sandra D. Garcia, Recording Secretary