



## BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Tuesday, October 22, 2019

2:00 p.m.

Cypress Room

University Hospital

4502 Medical Drive

San Antonio, Texas 78229

### MINUTES

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#### **BOARD MEMBERS PRESENT:**

James R. Adams, Chair  
Ira Smith, Vice Chair  
Dianna M. Burns, M.D., Secretary  
Robert Engberg  
James C. Hasslocher

#### **BOARD MEMBERS ABSENT:**

Roberto L. Jimenez, M.D, Immediate Past Chair  
Janie Barrera

#### **OTHERS PRESENT:**

George B. Hernández, Jr., President/Chief Executive Officer, University Health System  
Bryan Alsip, MD, Executive Vice President/Chief Medical Officer, University Health System  
Tommye Austin, Ph.D., Senior Vice President/Chief Nurse Executive, University Health System  
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System  
Lourdes Castro-Ramirez, President, University Health System Foundation  
Ted Day, Executive Vice President, Strategic Planning and Business Development, University Health System  
Frank Garza, Chair, University Health System Foundation Board of Directors  
Randy Harig, Chair-Elect, University Health System Foundation Board of Directors  
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  
Leni Kirkman, Senior Vice President, Strategic Communications and Patient Relations, University Health System  
Monika Kapur, MD, President/Chief Executive Officer, University Health System  
Lillian Liao, MD, Director, Pediatric Trauma Center, University Hospital  
Anita Martin, Director, Community Relations/Corporate Communications, University Health System  
Teresa Nino, Director, Epic, University Health System  
Bill Phillips, Senior Vice President/Chief Information Officer, Information Services, University Health System  
Serina Rivela, Interim Vice President/Associate General Counsel, Legal Services, University Health System  
Michael Roussos, Hospital Administrator, University Hospital

Don Ryden, Vice President/Project, Design, and Construction, University Health System  
Allen Strickland, Vice President, Hospital Administration, University Hospital  
Andrew Smith, Director, Government Relations  
Rajeev Suri, M.D., Medical Director, Radiology Services; and President, Medical/Dental Staff, University Health System; Professor, Vascular Interventional Radiology, UT Health San Antonio  
Sally Taylor, MD, Senior Vice President/Chief Behavioral Officer, University Health System  
Jim Willis, Associate Administrator, University Hospital  
Toni Van Buren, Senior Program & Development Officer, University Health System Foundation  
Ricardo Villarreal, President, Community First Health Plans, Inc.  
Emily Volk, MD, Senior Vice President/Clinical Services, University Health System  
Representative Barbara Gervin-Hawkins, Texas House of Representatives, 20th District  
Joe Garcia, The Garcia Group, Government & Public Affairs Consulting  
Ms. J.D. Pedraza, Chief of Staff, Office of State Rep. Barbara Gervin-Hawkins  
Laura Vaccaro, Vice President for Community Relations & Events, Valero Energy  
And other attendees.

**CALL TO ORDER AND RECORD OF ATTENDANCE: JIM ADAMS, CHAIR, BOARD OF MANAGERS**

Mr. Adams called the meeting to order at 2:05 pm.

**INVOCATION AND PLEDGE OF ALLEGIANCE**

Mr. Adams introduced Mr. Ben Chappell of Covenant Baptist Church in Gardenridge, Texas, for the invocation and he led the Pledge of Allegiance.

**SPECIAL RECOGNITION:**

**RECOGNITION OF STATE REPRESENTATIVE BARBARA GERVIN-HAWKINS FOR PASSAGE OF HB 496 - (GEORGE B. HERNÁNDEZ, JR./BOARD MEMBERS)**

**SUMMARY:**

Mr. Hernandez introduced State Representative Barbara Gervin-Hawkins. The Board of Managers recognized and thanked her for authoring and leadership in passing House Bill 496 relating to traumatic injury response protocol and the use of bleeding control stations in public schools and open-enrollment charter schools. Representative Gervin-Hawkins saw the need to author HB 496 due to the increase of school shootings affecting the state and the nation. HB 496 will aid in statewide efforts to improve school safety in the context of school shootings and other serious threats. In an effort to support the full implementation of HB 496, University Hospital's Level I trauma team will provide training and bleeding control kits to school districts in Bexar County at no cost. HB 496 provides for the development and implementation of a bleeding control station program at each campus of a public school district and open enrollment charter school, and ensures appropriate staff members are trained to effectively apply bleeding control techniques until first responders can respond. The Texas Education Agency has recently approved the American College of Surgeons "Stop the Bleed" training program as amended to meet the requirement of HB 496. University Health System is providing funding to assist schools with training and bleeding control kits. These funds are

available thanks to the generosity of donors at the Foundation’s annual Medical Miracles fundraising event.

RECOMMENDATION: This presentation was provided for informational purposes only.

ACTION: No action was required by the Board of Managers.

EVALUATION: The Honorable Gervin-Hawkins thanked Mr. Hernandez and the Board of Managers for recognizing that passing legislation is difficult. To her, this was a common sense bill, a no-brainer; people do not need to bleed out. However, some of her colleagues felt it was an unfunded mandate for schools and they really challenged it. She wanted an additional clause that would require sensors to help first responders go directly to the injured parties; however, that will now have to wait until the next legislative session. She recognized her chief of staff, Ms. J.D. Pedraza , for her experience and knowledge. Her ability to ensure sure that Rep. Gervin-Hawkins gets to the right place at the right time; teams are important to make things happen. Ms. Gervin-Hawkins explained that this legislation allows 7<sup>th</sup> to 12<sup>th</sup> graders to be trained at school to “Stop the Beed” during a mass shooting tragedy, and at home, for example, while hunting with family members. This bill is truly important, and arms our kids with knowledge. Mr. Hernandez presented Ms. Gervin-Hawkins with a small token of appreciation from the Health System, yellow roses and a beautiful glass gift. The audience gave Ms. Gervin-Hawkins a round of applause and the Board of Managers posed for photos with her, Mr. Hernandez, Foundation Board members, and staff.

FOLLOW-UP: None.

**UNIVERSITY HEALTH SYSTEM FOUNDATION CHECK PRESENTATION IN SUPPORT OF THE STOP THE BLEED PROGRAM — LOURDES CASTRO RAMÍREZ**

SUMMARY: Ms. Lourdes Castro Ramirez introduced University Health System Foundation Chair, Frank Garza, and Chair-elect Randy Harig. In addition, Ms. Laura Vaccaro, Vice President for Community Relations & Events, from Valero Energy, represented Mr. Jason Fraser, University Health System Foundation Board member. The University Health System Foundation recognized the courage, faith and strength of the 2019 Medical Miracles Gala honorees Kris Workman and Ryland Ward and the community of Sutherland Springs, first responders, and trauma professionals who brought their very best on one of the worst days. This year’s Medical Miracles Gala was the Foundation’s biggest fundraising effort in its 14- year history. As a result, the University Health System Foundation Board approved an award of \$200,000 in addition to the \$33,500 raised through Fund the Mission, to support University Health System’s Trauma Services’ “Stop the Bleed” efforts. Funding will enable University Health System to deliver Stop the Bleed training and provide bleeding control kits at Bexar County schools and to the Sutherland Springs community. Ms. Castro-Ramirez and Mr. Frank Garza presented a check for \$232,000 to Mr. Mike Roussos, Hospital Administrator; and Dr. Lillian Liao, Director, Pediatric Trauma Center, for the Stop the Bleed program. Following this presentation, Ms. Vaccaro said a few words and presented a check for \$72,515 to Ms. Lourdes Castro-Ramirez and Mr. Frank Garza, payable to the University Health System Foundation, for \$72,515. Valero Energy employees elected to donate funds raised during

this year's United Way campaign, which is a 100 percent employee effort, to the University Health System Foundation's campaign for the purchase of gun locks and bleeding control kits.

RECOMMENDATION: This presentation was for recognition purposes only.  
ACTION: No action by the Board of Managers is required.  
EVALUATION: Next Medical Miracles Gala will take place on May 15, 2020.  
FOLLOW-UP: None.

At this time, Mr. Adams invited Dr. Henrich to provide a brief update on UT Health SA activities. Dr. Henrich has been collaborating with Mr. Hernandez regarding a strategic presentation about the future of UT Health and the partnership, with three major beneficiaries in mind. First are the citizens of Bexar County and the surrounding areas that use Health System and UT Health facilities, practices, and clinics as public resources. UT Health SA was chartered as a school and an instrument of public trust. The Health System does not stand alone in this regard as a public servant. Other beneficiaries include the Health System itself, and UT Health SA. Dr. Henrich is excited to be in this position due in part to the Health System's success in a number of areas, such as the new Women's and Children's Hospital that will soon be built. UT Health San Antonio's numbers are also very good, in terms of the growth of the practice, and together, we have become the health destination of choice, serving individuals from every socioeconomic layer in the city, because as partners we take so seriously the Mission, with a deep focus on public health. He looks forward to making the series of presentations.

Dr. Henrich yielded the floor to Dr. Hromas for an update on the School of Medicine. Dr. Hromas provided a reminder of the new talent that arrives in just a few weeks. Dr. Ralph Riviello starts his new role as Chair, Department of Emergency Medicine, in two weeks. He comes to us from Philadelphia. Dr. Allen Anderson, currently Professor of Medicine/Division of Cardiology, Northwestern University School of Medicine starts his new role as Chief of Cardiology in about six weeks. The School of Medicine continues to recruit from the best places around the country. The outpatient clinics continue to grow. The School of Medicine has more research dollars this year than ever before - \$180 million. Dr. Hromas thanked Rep. Gervin-Hawkins for her support and her work on the Texas Legislature, and he yielded the floor to Dr. Suri for an update on Medical/Dental Staff issues. As far as Epic is concerned, the medical staff is on a home stretch, physicians are more actively involved and working closely with Information Technology staff on training issues. Testing takes place in March and go live still scheduled for May 9, 2020. The new PACS (Picture Archiving & Communication System) imaging system is AFGA, the radiology phase will be active as of December 16, 2019. The goal is one stop shopping for imaging needs. The new online credentialing process becomes active on November 2 and aligns School of Medicine and University Health System. Dr. Suri acknowledged Mr. Chris Copeland's professionalism and helpfulness.

**CITIZENS' PARTICIPATION:** None.

**PRESENTATIONS AND EDUCATION:**

**REPORT ON THE CREATION OF AN INSTITUTE OF TRAUMA-INFORMED CARE —  
BRYAN ALSIP, M.D./ROBERTO VILLARREAL, M.D./COLLEEN BRIDGER, PH.D.**

SUMMARY: Dr. Alsip welcomed and introduced Dr. Colleen Bridger, Director, San Antonio Metropolitan Health District; and Assistant City Manager, City of San Antonio for this joint presentation. The Substance Abuse and Mental Health Services Administration defines "Trauma" as an event, series of events, or set of circumstances experienced by an individual as physically

or emotionally harmful or life-threatening with lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. Types of trauma includes physical, mental, social and emotional. Trauma can occur at any age and can affect any race, gender, ethnicity, socioeconomic group and community group. Dr. Alsip summarized a study of Adverse Childhood Experiences (ACEs) by Drs. Vincent Felitti Robert Anda that began in the 1990s:

- Kaiser Permanente's Department of Preventive Medicine in San Diego & the Centers for Disease Control and Prevention (CDC)
- Over 17,000 subjects
- Observed effects of adverse childhood experiences over time
- Largest study ever done on this subject

Three types of ACEs include abuse, neglect, house-hold dysfunction. Abuse can be physical, emotional, or sexual. Neglect can be physical or emotional; and household dysfunction can include mental illness, incarcerated parent, parent who is treated violently, substance abuse, and/or divorce. Dr. Alsip noted that the 17,000 ACE Study participants were mostly white, middle- and upper-middle class, college-educated, and all had jobs with great health care since they were all members of Kaiser Permanente. Of 17,000 ACE study participants, 26 percent had 1 ACE; 16 percent had 2 ACEs; 9.5 percent had 3 ACEs; and 36 percent of these had zero ACEs. The ACEs Study revealed that adverse childhood experiences are common. ACEs often occur in clusters – subsequent studies have examined the cumulative effects of ACEs. ACEs demonstrate a dose–response relationship with many health problems. Dr. Alsip reviewed the odds ratio and likelihood to develop health conditions based on ACEs:

Dr. Alsip also noted an increased risk of death for those who suffer adverse childhood experiences, which can alter the body's endocrine and immune systems and the way the brain and body respond to stress. These changes affect a child's cognitive development, academic success, and physical, emotional, and behavioral health. For children who endure multiple adverse events, their risk of adverse health outcomes increases as they become adults. The more traumatic events that a child experiences, the more likely the impact will be substantial and pervasive. Heart Disease is the leading cause of death with an odds ratio of 2.2. He reviewed other causes of death and odds ratio for cancer, chronic lower respiratory disease, accidents, stroke, Alzheimer's, influenza and pneumonia, kidney disease, and suicide.

#### The Pathophysiology of Trauma

- Exposure to Trauma (toxic stress)
- Changes in Brain
- Architecture, Social, Emotional, Cognitive Impairment,
- Health Risk Behaviors as Coping Mechanism,
- Severe, Persistent Physical and Mental Health Issues

#### Prevalence of Trauma

- Fifty (50) percent of children have experienced one traumatic life event in the United States;
- Ten (10) percent of Texas (730,000) children have experienced 3 or more ACEs;
- San Antonio has the highest proportionate rate of confirmed child abuse cases of all major cities in Texas;
- According to ChildSafe San Antonio, one in four girls and one in six boys will be victims of sexual abuse before they turn 18.

#### Trauma-Informed Care

- Addressing all types of trauma and ACEs includes an understanding of Trauma-Informed Care
- A framework that emphasizes physical, psychological, and emotional safety for both patients and staff to rebuild a sense of control and empowerment
- Trauma-informed organizations understanding triggers of trauma survivors that services may exacerbate, so that these programs can be designed to be supportive

#### Trauma-Informed Care Paradigm

- What is wrong with you?
- What happened to you?

#### The Four Rs of Trauma-Informed Care (TIC)

- Realize the widespread impact of trauma and understand potential paths for recovery
- Recognize the signs and symptoms of trauma in clients, families, staff, and others involved with the system
- Respond by fully integrating knowledge about trauma into policies, procedures and practices
- Resist re-traumatization of children as well as the adults who care for them.

#### Prevention of Trauma is a Health System Priority

- Texas Health and Human Services Commission (HHSC) has an established priority to “keep patients free from harm”
- University Health System’s mission includes the purpose of improving the good health of our community with a focus on prevention
- Level I Trauma center for adults and pediatrics in South Texas
- Develop programs to respond to and prevent all types of trauma

#### Community-based Plan for TIC (City of San Antonio; South Texas Trauma Informed Consortium; Trauma Informed Care Certifying Entity; and Institute for Trauma Informed Care)

- Supports functions of the South Texas Trauma-Informed Care Consortium
- Provides Initial Funding
- Community vision for TIC

- Establish cross-sector standards
- 12 Core Sectors
- Provides certification of community organizations based on local standards of TIC
- Education
- Training
- Technical Assistance

Institute for Trauma-Informed Care

- University Health System
- Become Trauma Informed Organization
- Work in Collaboration with COSA and STTICC
- Established Trauma Informed for TIC in Bexar County
- Train other organizations to prepare for TIC certification
- Benefits of Trauma Informed-Care Bexar County
- Individuals become more resilient and open to services better matched to their needs
- Children develop long-lasting relationships with organizations that will support and empower them
- Families learn how to predict their own cycle of crisis, prepare for stressful times, and reduce reactions to trauma
- Measurable benefits include improved health outcomes and reduced overuse of healthcare resources

RECOMMENDATION: This report was provided for informational purposes.  
ACTION: No action by the Board of Managers was requested.  
EVALUATION: Trauma-induced changes are reversible...using Trauma-Informed Care. Mr. Adams was delighted to learn of the project that will benefit average citizens.  
FOLLOW-UP: None.

**APPROVAL OF MINUTES OF PREVIOUS MEETINGS(S): AUGUST 20, 2019 (REGULAR MEETING) AND SEPTEMBER 17, 2019 (REGULAR MEETING)**

SUMMARY: The minutes of the Board meetings of Tuesday, August 20, 2019, and Tuesday, September 17, 2019, were presented for the Board's approval.  
RECOMMENDATION: Staff recommended approval of the minutes as submitted.  
ACTION: There being **NO OBJECTION**, the minutes were **APPROVED** as submitted.  
EVALUATION: None.  
FOLLOW-UP: None.

**NEW BUSINESS:**

**CONSENT AGENDA – JIM ADAMS, CHAIR:**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE RESCISSION OF POLICY 7.05.01 USES OF DISPROPORTIONATE SHARE III MONIES AND POLICY 2.01.02 NURSING SERVICES OVERSIGHT—REBECCA CEDILLO**

SUMMARY: Policy No. 7.05.0, Uses of Disproportionate Share III Monies - This policy

was promulgated in 1996 to adopt the Texas Hospital Association's (THA) "Voluntary Principles Disproportionate Share III Expenditures Guidelines" that were published in 1992. The Disproportionate Share III Program no longer exists and this policy is no longer relevant. This process is no longer in practice and does not meet current standards of operation for the Health System.

Policy No. 2.01.02, Nursing Services Oversight - This policy has merged with Policy No. 9.11, Plan for Provision of Patient Care and Nursing Leadership Services policies in support of professional Nursing Practice. This will allow for a streamlined single source of information and guidance regarding nursing services, hierarchy and leadership roles. The stand-alone policy on nursing oversight is no longer necessary.

RECOMMENDATION: The Executive Policy Review Committee recommends that the Board of Managers approval rescind both policies above.

ACTION: A **MOTION** to approve the Executive Policy Review Committee's recommendation was made by Mr. Hasslocher, **SECONDED** by Mr. Engberg, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

#### **ACTION ITEMS:**

#### **CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED PURCHASING ITEMS:**

#### **CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AMENDMENT TO THE CONSULTING AGREEMENT FOR ELECTRICAL ENGINEERING SERVICES WITH SHERMCO INDUSTRIES — ED BANOS**

SUMMARY: The electric power systems supporting the Horizon Tower recently suffered two significant electrical power events. These events required action for immediate recovery and emergency evaluation of the electrical power systems serving Rio, Horizon and Sky Towers. To ensure highly reliable electrical systems, uninterrupted services, and protect the health and safety of patients, staff and visitors, a systematic comprehensive evaluation of the electrical power system was emergently initiated. The initial riser diagram and data from this study has outlined current conditions, integrity of the hospital's electrical systems, identified areas for improvement, and the development of corrective action plans. While conducting the study, two additional power outages occurred prompting the necessity to move forward emergently with the required infrared scanning to assess the integrity of additional components of the electrical systems. The scope of the project includes critical maintenance repairs, outstanding preventive work and coordination of all power sources across the towers. This work includes all electrical substations; automatic transfer switches (ATS), switchgear relays, and major breakers. Horizon Tower will be the first to the undergo improvement and corrective measures. The Horizon Tower houses the Health System's youngest and most vulnerable patients, the neonatal and pediatric hearts. The Rio Tower will follow. The Sky Tower will be given the lowest priority due to the age of the facility and no history of electrical power



issues. The infrared study and the necessary repairs will ensure that appropriate power and back-up electrical systems are functioning at optimal capacity to minimize system downtime and to ensure that patient care is not affected by electrical outages. Mr. Banos reviewed the specific repairs and preventative maintenance that will be performed under this contract. Shermco Industries, GSA contract #GS-00F-222DA, has completed the previous analysis and developed a comprehensive action plan. Their detailed knowledge of the current status of the electrical systems, immediate availability, and well-known, proven vendor capable of delivering required professional service, perform maintenance, testing, and repairs, is the reason for the selection of Shermco Industries to complete the outlined scope of work. The workforce composition for Shermco Industries, Inc., was provided for the Board's review.

**RECOMMENDATION:** Staff recommends the Board of Managers approve the contract amendment with Shermco to complete the Infrared Study and associated action plan from the Power System Study for \$450,000.

**ACTION:** A **MOTION** to approve staff's recommendation was made by Mr. Hasslocher, **SECONDED** by Mr. Smith, and **PASSED UNANIMOUSLY**.

**EVALUATION:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT WITH ZONES, LLC, FOR PATIENT ROOM TV REPLACEMENT IN SUPPORT OF THE EPIC ELECTRONIC HEALTH RECORD PROJECT — BILL PHILLIPS**

**SUMMARY:** Currently the Health System uses GetWellNetwork to provide patient engagement via the television in the patient's room. This interactive system provides patients with bedside-access to educational content, entertainment (TV and movies), hospital services (food ordering), medical information, surveys and nurse call activity. With the Epic implementation, staff will increase the information provided on televisions to include care teams, scheduled tests and other critical information for the patient and their families. The original plan was to add an additional electronic display to each patient's room, which would require power, cabling, wall plating and the acquisition of an extra monitor. Staff has worked with GetWellNetwork and Epic to provide all of the needed information on a single device (TV). The current patient room televisions are 32 inches in size. For the patient to clearly view the displayed information, all patient room televisions will be upgraded to 49 inches. This is also the recommended size of television from GetWellNetwork. Mr. Phillips reviewed the quotes received from four vendors. Total cost for the acquisition of 716 49-inch televisions is \$558,480. Zones is a Premier vendor and had the best pricing. The workforce composition for Zones, LLC, was provided for the Board's review. Zones, LLC is a Minority Business Enterprise (MBE).

**RECOMMENDATION:** Staff recommends the Board of Managers approve the procurement of LG 49 inch televisions for the Epic implementation from Zones, LLC, in the amount of \$558,480

**ACTION:** A **MOTION** to approve staff's recommendation was made by Mr. Smith, **SECONDED** by Mr. Hasslocher, and **PASSED UNANIMOUSLY**.

EVALUATION: The television sets will be hardwired for Epic

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE PURCHASE OF PHILIPS HEALTHCARE MEDICAL EQUIPMENT FOR THE HEART/VASCULAR & ENDOSCOPY CENTER — DON RYDEN**

SUMMARY: The design for the Heart/Vascular and Endoscopy (HVE) Suite project included medical equipment planning for the different spaces including non-invasive diagnostic cardiology, special procedure rooms, Cath labs, bronchoscopy, endoscopy, advanced endoscopy, patient holding and recovery, and administrative support areas. For the procurement of architectural significant fixed medical equipment (Group 1 equipment) the Health System has determined cost benchmarking analysis and use of Group Purchasing Contracts will provide the best value. During the project design and after medical equipment planning, Philips Healthcare was invited to develop and provide a proposed equipment list and associated cost proposal to meet the functions of the project basis of design for the following systems: digital bi-plane and single plane vascular angiography imaging systems, and Hemodynamics system. A series of coordination sessions and site visits with the design team, Health System users, and care providers were held to further develop the system solution to support the following spaces with the proposed Philips Group 1 equipment. Initial design of the HVE included completion of three special procedure labs for Cardiology with two shelled rooms. Over the past two years the growth in Cardiology units has seen significant growth in Vascular and Neurovascular procedures. Leadership recommends that the additional two rooms for Neurovascular and Vascular cases be included during this construction phase. If approved, the total equipment would include five (5) special procedure Cath Labs at the cost indicated below:

Cardiac - \$2,788,864\*  
Vascular - \$2,164,055\*\*  
Electrophysiology, \$2, 515,326\*  
Neuro - \$2,554,591\*\*  
Hybrid operating room - \$2,799,771\*  
Total: \$12,822,607

\* Equipment to be paid from Women's and Children's Hospital and Associated Projects' Capital Funds

\*\* Medical Equipment budget for HVE is \$25 million. The proposed Philips equipment included in this list is within the project budget.

The workforce composition data for Philips Healthcare was provided for the Board's review.

RECOMMENDATION: Staff recommends Board of Managers' approval of the capital purchase request for Philips Healthcare Equipment for the Heart/Vascular and Endoscopy Center for \$12,822,607.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Smith, **SECONDED** by Dr. Burns, and **PASSED UNANIMOUSLY**.

EVALUATION: Each of the catheterization labs has been configured for multipurpose use, which means that all five labs can accommodate any specialty function. Equipment for each cath lab will be special ordered.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A DESIGN ENHANCEMENT AND PUBLIC ART PROGRAM IN SUPPORT OF THE WOMEN'S AND CHILDREN'S HOSPITAL — DON RYDEN/LENI KIRKMAN**

SUMMARY: The Board of Managers greeted Ms. Leni Kirkman and Ms. Allison Lane, the Health System's Curator & Archivist. They provided the following presentation:

Salud-Arte: Art of Healing Vision

- *Our vision is to use art to inspire healing, compassion, hope and trust. We also aim to reflect the community, improve the experience of our patients and visitors, and communicate our important mission through art and design enhancements, while being good stewards of our financial and natural resources.* University Health System, Design Enhancement Public Art Committee, January 2010

Program Overview

- More than 2,500 works of art across the Health System.
- Member of the Texas Public Art Association and the National Organization of Arts in Health.
- Local and national acclaim for elevating the traditional healthcare experience.
- The program includes three components: design enhancement, site-specific public art and procured art.

Salud- Arte: Art of Healing Program - Definitions

- *Design Enhancement* - Art that is integrated into the building and enhances an area already slated for construction. Example: glass, metal surfaces, concrete
- *Public Art* - Art that is placed in a signature, high visibility area identified by the architect and art committee
- *Art Procurement* - Art that is purchased, framed and displayed in patient and staff areas
- *Donated Art* - High quality Art that is consistent with the mission and vision of the Art of Healing program and accepted as a donation through the University Health System Foundation.

Women's & Children's Hospital

- Ensuring new spaces match the warmth, comfort and welcoming experience of Sky Tower is an important priority.
- Growing evidence supports the positive impact art and nature can have on patients and caregivers.
- Call-for-artists process to include outreach to maximize participation of local artists.
- Engage community groups, local schools, regional college art programs and art institutions.
- Website to facilitate the flow of information to those interested in participating.

- *Art of Healing* Committee will review submittals and select works that are consistent with the vision of our program and best meet the identified art opportunity.

Fiscal Impact

- Extension of the existing *Art of Healing* program at University Hospital.
- Fewer areas in need of large interior or exterior site-specific installments.
- Funding Recommendation: .5% of construction budget (Sky Tower/RBG: 1%)
- Opportunity for the Foundation to secure philanthropic support.
- Recommendation: not-to-exceed budget of \$2.5 million and use any donations to reimburse the Health System.

RECOMMENDATION: Staff recommends Board of Managers' approval of a not-to-exceed budget of \$2.25 million for a Design Enhancement/Public Art Program for the Women's and Children's Hospital.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Smith, **SECONDED** by Mr. Engberg, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

**ADJOURNMENT:**

There being no further business, Mr. Adams adjourned the Board meeting at 3:45 p.m.

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James R. Adams  
Chair, Board of Managers

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Dianna M. Burns, M.D.  
Secretary, Board of Managers

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Sandra D. Garcia, Recording Secretary