Minutes

Maricopa County Special Health Care District
Board of Directors Meeting
Virginia G. Piper Charitable Trust Pavilion
2609 East Roosevelt Street, Phoenix, Arizona 85008
3rd Floor, Board Room
May 22, 2024, 1:00 p.m.

Present: J. Woodfin Thomas, Chairman, District 4

Mark G. Dewane, Vice Chairman, District 2 Mary A. Harden, RN, Director, District 1 Kate Brophy McGee, Director, District 3

Absent: Mary Rose Garrido Wilcox, Director, District 5

Others Present: Steve A. Purves, FACHE, President & Chief Executive Officer

Michael D. White, MD, MBA, Executive Vice President, Chief Clinical Officer Claire Agnew, CPA, MBA, Executive Vice President, Chief Financial Officer Lia Christiansen, MBC, Executive Vice President, Chief Administrative

Officer

Sherry Stotler, RN, MSN, Senior Vice President, Chief Nursing Officer

Ijana Harris, JD, Senior Vice President, General Counsel

Guest Presenters/ Speakers: Crystal Garcia, MBA/HCM, RN, Vice President, Specialty Services, Quality

and Patient Safety

Gene Cavallo, MC, LPC, Senior Vice President, Behavioral Health Services Martha Steiner, MSN-L, RN, Vice President, Behavioral Health Nursing and

Clinical Care

Michael Fronske, Legislative and Governmental Affairs Director

Matthew Meier, MBA, Vice President, Financial Services

Recorded by:Melanie Talbot, Chief Governance Officer; and Clerk of the Board

Cynthia Cornejo, Senior Deputy Clerk of the Board

Call to Order:

Chairman Thomas called the meeting to order at 1:00 p.m.

Roll Call

Ms. Talbot called roll. Following roll call, she noted four of the five voting members of the Maricopa County Special Health Care District Board of Directors were present, which represented a guorum.

Pledge of Allegiance

Vice Chairman Dewane led the Pledge of Allegiance.

Call to the Public

Chairman Thomas called for public comment.

Ms. Harris introduced Ms. Paige Pataky, Valleywise Health's new Senior Counsel for Employment and Litigation.

Ms. Stotler announced that Ms. Piedad Blake was selected as Nurse Leader of the Year, Ms. Ani Joseph was selected as Nurse of the Year, and the Nurse Partner of the Year was the Information Technology Department.

Mission Statement

Chairman Thomas read the mission statement aloud.

General Session, Presentation, Discussion and Action:

- 1. Approval of Consent Agenda
 - a. Minutes:
 - Approve Maricopa County Special Health Care District Board of Directors meeting minutes dated April 24, 2024
 - ii. Approve Maricopa County Special Health Care District Board of Directors meeting minutes dated May 6, 2024

b. Contracts:

- Approve amendment #8 to programming agreement (90-17-041-1-08) between Vanir Construction Management, Inc and Maricopa County Special Health Care District dba Valleywise Health, for Integrated Program Management services for the Proposition 480 program
- ii. Approve amendment #4 to the contract (90-16-044-6-04) between CareFusion Solutions, LLC and Maricopa County Special Health Care District dba Valleywise Health, to update equipment for the new acute care hospital
- iii. Approve a new agreement (90-24-284) between Medical Debt Resolution, Inc dba Undue Medical Debt aka RIP Medical Debt (RIP) and Maricopa County Special Health Care District dba Valleywise Health, where Valleywise Health will sell qualified delinquent accounts to RIP who in turn will relieve the debt of Valleywise Health patients
- iv. Approve amendment #3 to the contract (90-20-028-9-03) between Flex Financial, a division of Stryker Sales LLC and Maricopa County Special Health Care District dba Valleywise Health, for additional rovers and docking stations for Roosevelt and Peoria Campuses

c. <u>Governance</u>:

i. Approve application of Eileen Sullivan for reappointment to the Valleywise Community Health Centers Governing Council

General Session, Presentation, Discussion and Action, cont.:

- 1. Approval of Consent Agenda, cont.
 - c. Governance, cont.:
 - ii. Approve renewal of Board policy 99021 G Financial Assistance
 - iii. Approve the full and final settlement of claim number GL807901041803
 - d. Medical Staff:
 - i. Approve Valleywise Health's Medical Staff credentials for May 2024
 - ii. Approve Valleywise Health's Advanced Practice Clinician/Allied Health Professional Staff credentials for May 2024
 - iii. Approve proposed revisions to policy 39018 S Medical Staff Professionalism
 - iv. Approve proposed revisions to policy 43374 Valleywise Health Medical Staff Glossary
 - v. Approve proposed revisions to the Nurse Practitioner Women's Health Privileges/Practice Prerogatives
 - e. Care Reimagined Capital:
 - i. Intentionally Left Blank
 - f. Capital:
 - i. Intentionally Left Blank

MOTION: Director Harden moved to approve the consent agenda. Director Brophy McGee seconded.

VOTE: 4 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee, Director Harden

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1 Absent: Director Wilcox

Motion passed.

2. Discuss and Review the Quarterly Quality Report and Metrics Dashboard including but not limited to Patient Safety and Hospital Consumer Assessment of Healthcare Providers and Systems Results

Ms. Garcia outlined the results of the quality metrics for the third quarter of fiscal year (FY) 2024, noting many of the quality metrics met the established benchmarks. She mentioned that while the results for the STEMI: door-to-balloon metric met the benchmark for the third quarter, the results on a year-to-date basis did not meet the benchmark. She announced the behavioral health metric; multiple antipsychotic medications at discharge with appropriate justification percent compliance, had been retired as of January 1, 2024.

General Session, Presentation, Discussion and Action, cont.:

2. Discuss and Review the Quarterly Quality Report and Metrics Dashboard including but not limited to Patient Safety and Hospital Consumer Assessment of Healthcare Providers and Systems Results, cont.

Ms. Garcia reviewed patient safety indicator (PSI) 03, pressure ulcer rate, noting three instances caused the metric to miss the benchmark for the third quarter. There was one iatrogenic pneumothorax, PSI-06, in the third quarter, resulting in the metric not meeting the benchmark. With six incidents of death among surgical patients with serious treatable complications, PSI-04, the metric did not meet the benchmark for the third quarter.

She outlined the other metrics that did not meet the benchmark for the third quarter, including PSI-12, postoperative pulmonary embolus (PE) or deep vein thrombosis (DVT), postoperative wound dehiscence rate, PSI-14, and PSI-15, abdominopelvic accidental puncture or laceration rate.

The details related to the quality metrics that did not meet the benchmarks were reviewed, and the plans to improve the results were outlined.

Ms. Garcia reviewed the FY 2024 third quarter Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) preliminary results for the question related to the overall rating of the hospital, stated that it had improved to 73.2 percent. She noted the efforts in place that contributed to the improvement in the rating over prior quarters.

She explained that a priority matrix tool was used to determine the area of focus to improve the Net Promoter Score (NPS) for the specialty clinics and the Federally Qualified Health Centers (FQHCs). It was determined that the question related to 'seen in a timely manner' would have the greatest impact for the specialty clinics and 'registration staff helpful' would have the greatest impact for the FQHCs. The combined NPS for the Comprehensive Health Centers-Phoenix and Peoria, and the FQHCs was 75.6% in March 2024.

The action items to sustain the improvements in patient experience scores were reviewed. It was noted that the patient experience for inpatient behavioral health met the established benchmark.

3. Discuss and Review Quarterly Infection Control Metrics Dashboard

Ms. Garcia reviewed the infection control quality metrics for the third quarter of FY 2024, highlighting a slight decrease in hand hygiene compliance, but noted the metric nearly met the benchmark.

The metric related to Clostridium difficile (c. diff) did not meet the benchmark and staff reviewed each occurrence. There were no trends and additional education would be provided to clinical staff to reduce occurrences moving forward.

There were two surgical site infections in the third quarter, resulting in the quality metric not meeting the benchmark. Both cases were reviewed, noting one case was a complex surgical procedure, and there were no commonalities between the two cases.

Director Harden requested additional information related to the complex surgical case.

Ms. Garcia said that she would provide additional information to the Board.

General Session, Presentation, Discussion and Action, cont.:

4. Update on Behavioral Health Programs and Services at Valleywise Health

Mr. Cavallo provided an update on behavioral health services throughout Valleywise Health, reiterating that 15 additional beds were opened in February 2024. He conveyed the positive impact those additional beds had on increased capacity.

Director Brophy McGee asked how the increased capacity affected the time-out rate for court-ordered evaluations.

Mr. Cavallo explained that there were some inconsistencies with the time-out definition. He would be meeting with various stakeholders to discuss that topic, along with other key issues. However, he commented that should the petition for a court-ordered evaluation were to time-out, the individual may get another petition, at which time the court-ordered evaluation would occur. Staff monitored the statistic and stated there were many contributing factors, including but not limited to the number of beds available and the length of stay.

Ms. Steiner stated that 16 of the 18 licensed inpatient psychiatric units were operational, with two units at Valleywise Behavioral Health Center-Maryvale still closed. There were plans to open one of the two units at reduced capacity, or 15 additional beds, by September 2024.

She expressed the importance of capacity management. COVID-19, flu and norovirus cases required units to be quarantined. There was continual monitoring of discharges, quarantine requirements, bed availability, and the number of pending admissions to operate efficiently and better serve the needs of the community. She outlined the specific tasks of Nursing House Supervisors to coordinate efforts at each inpatient behavioral health facility, including transporting patients in need of a private room to Valleywise Behavioral Health Center-Maryvale.

Director Harden questioned how patients were transported between facilities.

Ms. Steiner said the patient's status determined the transportation process, but noted there was an internal patient transport team that conducted the patient transports between facilities.

Mr. Cavallo reviewed a three-year comparison of behavioral health inpatient admissions, average daily census, staffed units, and occupancy rates. In April 2022, 14 units were open with the average daily census of 279 and in April 2024, 16 units were open with the average daily census of 322.

Ms. Steiner addressed the previous question related to timed-out admissions, as defined by Valleywise Health staff, noting improvements made since the first quarter of FY 2024, from 580.3 to 437 in April 2024.

Director Brophy McGee asked if staff anticipated a stakeholder consensus surrounding the definitions and understanding for specific terminology and tracking mechanisms.

Mr. Cavallo stated that there were numerous issues concerning the stakeholders, including but not limited to clarification with definitions and metrics, and capacity improvement initiatives since a pilot program with Connections Health Solutions that added 16 court-ordered evaluation beds at their facility would soon end. While increasing the number of inpatient psychiatric beds was a solution, it was not the only solution. Stakeholders would discuss solutions to address length of stay and ensuring individuals were appropriately referred for court-ordered evaluations. There were many systemic processes to review.

Ms. Steiner highlighted inpatient behavioral health program enhancements, including group activities on the unit, as well as outside activities. A walking labyrinth was created at Valleywise Behavioral Health Center-Mesa, which was shown to promote solace and healing.

General Session, Presentation, Discussion and Action, cont.:

4. Update on Behavioral Health Programs and Services at Valleywise Health, cont.

Ms. Steiner discussed the efforts to retain and recruit behavioral health clinical staff, noting an enhanced process to connect and schedule interviews with applicants in a timely manner and restarting the Shared Governance Council to gain insight from the employee's perspective. However, the overall voluntary turnover increased to 21.12%, with the registered nurse (RN) voluntary turnover at 23.29% and a 25.06% voluntary turnover rate for behavioral health technicians (BHTs). There were currently 71 vacant BHT positions, and 17 vacant RN positions.

She highlighted the success of the Grown Our Own program, with four nurse externs advancing to RN clinical nurse, two BHTs advancing to licensed practical nurse (LPN), one BHT advancing to a nurse extern, and two patient care technicians (PCT) advancing to nurse extern.

She listed the ongoing challenges, including the need to quarantine units due to infectious virus and higher acuity patients requiring private rooms.

Mr. Cavallo provided an update on the outpatient behavioral health programs, including the Assertive Community Treatment (ACT) program, noting the program would soon relocate from within the Valleywise Behavioral Health Center-Mesa to a newly constructed building located on the Valleywise Behavioral Health Center-Mesa campus.

The First Episode Center located within Valleywise Community Health Center-Avondale was at capacity, with 90 members. The First Episode Center based in Mesa, Arizona was nearing 50 members. He explained that the Mesa Behavioral Health Specialty Clinic located within Valleywise Community Health Center-Mesa would soon relocate to the new building on the Valleywise Behavioral Health Center-Mesa, and the First Episode Center based in Mesa would then relocate within Valleywise Community Health Center-Mesa.

The Integrated Behavioral Health (IBH) program continued to expand, services were offered at all FQHCs, and would soon offer services within Valleywise Comprehensive Health Center-Phoenix.

He highlighted the medication assisted treatment (MAT) program for opioid dependence, which had provided prevention, treatment, and recovery assistance for at least 605 low-income individuals.

Director Brophy McGee stated that there were claims that the medication used, suboxone, was addictive and may have unintended consequences.

Dr. White said that the organization used suboxone to treat individuals. While there were claims that the medication was addictive or problematic, the studies did not support that claim. The benefits of suboxone treatment currently outweighed the risks, however, staff would continue to monitor patient outcomes.

Mr. Cavallo commented that the grim statistics related to opioid use led to the increased focus on quick and multi-faceted interventions for individuals, including MAT and counseling.

He noted the leveling out of IBH referrals, which may be due to either lack of providers or capacity, or the community demand had been met. More providers were budgeted to be added in FY 2025, to increase capacity and continue to meet the growing demand.

He reviewed future behavioral health projects, including the timeline for the completion of the construction at Valleywise Behavioral Health Centers-Mesa and Maryvale. Construction of the new building at the Valleywise Behavioral Health Center-Mesa campus was scheduled to be completed by August 2024, with services beginning in the Fall 2024. Renovations for a new behavioral health specialty clinic at Valleywise Behavioral Health Center-Maryvale were complete and the clinic received licensing.

General Session, Presentation, Discussion and Action, cont.:

5. Discussion and Possible Action on Valleywise Health's 2024 Legislative Agenda and/or the Maricopa County Special Health Care District's Position Regarding Proposed State and Federal Legislative Items

Mr. Fronske reviewed the statistics of the current legislative session, which had been in session for 136 days and had passed 256 bills, and the Governor had signed 197 bills. He reviewed the legislative deadlines, noting the only outstanding date was the July 1, 2024, budget deadline.

He reviewed the status of the bills that staff was tracking and stated there were no major changes since the prior month.

Staff continued to focus on the ongoing federal issues, the essential hospital designation legislation, advocating for 340B funding, and protecting hospitals from site-neutral payment cut proposals.

Chairman Thomas asked if the state would be able to pass a continuing resolution or if it was required to create an actual budget for the upcoming fiscal year.

Mr. Fronske stated that the state was required to pass a budget for the upcoming fiscal year.

6. Discuss and Review Patient Volumes, Revenues, Expenses, Other Assumptions and Capital Target for Fiscal Year 2025

Mr. Meier provided an overview of the operating budget for FY 2025, including patient volumes and payor mix assumptions. There was a major focus on reducing contract labor usage and expenses. Major strategic initiatives occurring in FY 2025 included transitioning to the new acute care hospital and opening additional behavioral health beds.

He stated that the patient volumes were developed using statistical data from April 2024, on an annualized basis. Total admissions were budgeted to increase by four percent over current year projections, with an increase of 2.2% in acute admissions and an increase of 9.2% increase in behavioral health admissions.

Total emergency department visits were budgeted to decrease by 0.3%, compared to current year projections. He said that labor and delivery emergency department visits would be included in the Roosevelt emergency department statistics after the new acute care hospital was operational.

Director Brophy McGee requested an explanation for the change.

Dr. White explained that the data was gathered based on how the patient presented to the hospital. The new acute care hospital was designed to have all patients seeking emergency services, including labor and delivery, to present in the emergency department, to ensure the appropriate staff and equipment was available to properly treat each patient. In the current medical center, there may be logistical challenges that require expectant mothers to be transferred to the emergency department for treatment.

Director Brophy McGee asked historically, what percentage of patients presenting to the labor and delivery emergency department had to be transferred to the emergency department for other medical treatment.

Dr. White said that he would gather the information and report to the Board.

Mr. Meier noted that total ambulatory visits were budgeted to increase by 6.5% over current year projections. The Community Health Centers visits were budgeted to increase by 5.6%, visits at Valleywise Comprehensive Health Center-Phoenix were budgeted to decrease by two percent, visits at Valleywise Comprehensive Health Center-Peoria were budgeted to increase by 5.2%, visits within all outpatient behavioral health services were budgeted for the largest increase, at 27.5%, and dental visits were budgeted to decrease by 0.2 percent.

General Session, Presentation, Discussion and Action, cont.:

6. Discuss and Review Patient Volumes, Revenues, Expenses, Other Assumptions and Capital Target for Fiscal Year 2025, cont.

Director Brophy McGee asked if the Community Health Centers were operating at full capacity.

Dr. White said that Valleywise Health had the ability to accept new patients within the ambulatory setting.

Mr. Meier outlined the budgeted patient days, for both the acute and behavioral health settings. Overall patient days were budgeted to increase by 4.8%, due to the improvements in length of stay and the increased capacity within behavioral health.

He stated surgeries at Valleywise Health Medical Center were budgeted to increase by 2.7% over current year projections. Surgeries at Valleywise Comprehensive Health Center-Peoria were budgeted to increase by 0.6% over current year projections. Total endoscopy procedures at Valleywise Health Medical Center were budgeted to increase by 0.5% over current year projections, and the procedures at Valleywise Comprehensive Health Center-Peoria were budgeted to decrease by 11.3%, which was provider related. Deliveries were budgeted to increase by 3.1% over current year projections.

The FY 2025 payor mix was the same as the current payor mix through April 2024 annualized. He explained the payers that were classified as other government, including but not limited to correctional health and Indian Health Services.

He stated the capital budget, including routine and contingency capital, had increased to \$20 million for FY 2025. Staff was in the process of finalizing the items that would be included.

7. Discuss and Review Valleywise Health's April 2024 Financials and Statistical Information

Ms. Agnew stated the FY 2024 budget was developed under the assumption that the new acute care hospital would open in late January 2024 or early February 2024. The volumes and revenues were budgeted based on that assumption, causing variances in the monthly statistics.

She reviewed statistical information for April 2024, noting total admissions missed budget by 12.4%, with acute admissions missing budget by 16.7% and 1.8% more behavioral health admissions than budgeted. Emergency department visits were 5.1% better than budget and ambulatory visits missed budget by 1.2%, which was provider driven.

On a year-to-date basis, total admissions missed budget by 1.4%, emergency department visits were better than budget by 5.6%, and ambulatory visits were 0.5% better than budget.

The payor mix was discussed, noting an increased utilization of uninsured and other, which impacted the net patient service revenue and other items on the income statement.

Ms. Agnew reviewed the income statement, highlighting the net patient service revenue had a negative 8.2% variance. Other revenue was better than budget by 36%, due to revenue received from various sources, including Health II, 340B funding, and retail pharmacy. Total operating revenue was better than budget by two percent.

While reviewing operating expenses, she explained the negative variances, including employee benefits, medical service fees, supplies and purchased services, noting increased expenses related to the grand opening events and attorney fees.

Net assets, after factoring in non-operating revenue and expenses, and removing bond-related activity, decreased by \$8,793,299, compared to a budgeted decrease of \$6,349,625, resulting in a negative variance of \$2,443,674.

General Session, Presentation, Discussion and Action, cont.:

7. Discuss and Review Valleywise Health's April 2024 Financials and Statistical Information, cont.

On a year-to-date basis, Ms. Agnew stated the net assets, normalized, decreased by \$90,937,925, compared to a budgeted decrease of \$75,018,322, resulting in a negative variance of \$15,919,603. There were 44.6 days of cash on hand and 75.2 days in accounts receivable.

8. Update on Care Reimagined Projects

Ms. Christiansen provided the last update on the Care Reimagined projects, as the patients were scheduled to move to the new acute tower on June 13, 2024. Staff had just completed the Arizona Department of Health Services (ADHS) Life Safety Survey and the full licensing survey was scheduled to occur in early June 2024. The final Day in the Life event was conducted earlier in the week, and the last Mock Move exercise was planned for the following day.

She highlighted the internal intranet page dedicated to Care Reimagined news had over 31,123 visits from staff, which included valuable resources such as move guides and videos produced by the Marketing and Communications Department.

She reviewed the construction progress of the new acute care hospital, noting the completion of the fire alarm and door integration testing, submission of the air balance report, and completion of the air damper integration. In the next 30 days, staff would conduct acceptance walks on each level, and the overhead signage would be prepared for opening.

The patient move scheduled was outlined, noting the emergency department would be the first department to transition to the new acute care hospital beginning at 3:00 a.m. The number of transfer teams had increased from 10 to 15, to move the patients quickly, however, the entire move was expected to take up to 13 hours. The Incident Command would be activated a week prior to the move and would have 24/7 support leading up to the patient move day and would remain activated until operations were stabilized.

- 9. Review and Possible Action on the Following Reports to the Board of Directors:
 - a. Monthly Marketing and Communications Report (April 2024)
 - b. Monthly Care Reimagined Capital Purchases Report (April 2024)
 - c. Monthly Valleywise Health Employee Turnover Report (April 2024)
 - d. Quarterly Compliance Officer's Activities Report; Valleywise Health's Finance, Audit and Compliance Committee Activities Report
 - e. Quarterly Valleywise Health Foundation's Report to Valleywise Health's President & Chief Executive Officer

Chairman Thomas addressed item 9.c. the Monthly Valleywise Health Turnover Report and noted the continued improvements.

General Session, Presentation, Discussion and Action, cont.:

- 10. Concluding Items
 - a. Old Business:

April 2024

Quality

Number of hospital acquired pressure injuries requiring surgical intervention

January 24, 2024

Compliance Training

• Future discussion on disclosure of gifts District Board members receive

Care Reimagined Update

 Once available, provide the date that the Conference and Administration Center will be decommissioned

May 24, 2023

April 2023 Financials

- How will fixed costs change (old facilities vs new facilities); include the change in utility costs and maintenance costs
- b. Board Member Requests for Future Agenda Items or Reports
- c. Comments
 - i. Chairman and Member Closing Comment
 - ii. President and Chief Executive Officer Summary of Current Events

Ms. Talbot reviewed old business, noting the items that had been completed, as well as the ongoing items.

Mr. Purves thanked staff for their efforts, noting the organization was filled with extraordinary people doing extraordinary things on a daily basis, which were highlighted during Nurses Week and Hospital Week.

He expressed his appreciation to the Valleywise Health Foundation for coordinating a meeting space for Thunderbird Charities to hold a meeting and tour the new acute care hospital. He noted that Valleywise Health had been beneficiaries of their generosity.

He announced that Ms. Christiansen had been selected as one of Arizona Most Influential Women by *Arizona Business Magazine* for 2024. She would be honored at a ceremony in August 2024.

He stated that Ms. Agnew was an active member of Hospital Financial Management Association (HFMA) and recently participated in a panel and represented herself and the organization well. He noted Ms. Amanda De Los Reyes, Vice President of Revenue Cycle, just became a Chapter President for the HFMA.

Mr. Purves recognized Ms. Jeanne Nizigiyimana, Clinic Manager for the Center for Refugee and Global Health, as she was named one of 230 Black Healthcare Leaders to know by *Beckers Hospital Review*.

He showcased a news report on the opening of the new acute care hospital, including the Level 1 Trauma Center. He thanked Ms. Heather Burton, Vice President of Acute and Emergency Services, for participating in the interview.

<u>Adjourn</u>

MOTION: Director Harden moved to adjourn the May 22, 2024, Maricopa County Special Health Care

District Board of Directors General Session Meeting. Director Brophy McGee seconded.

VOTE: 4 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee,

Director Harden

0 Nays

1 Absent: Director Wilcox

Motion passed.

Meeting adjourned at 2:47 p.m.

J. Woodfin Thomas, Chairman
Maricopa County Special Health Care District
Board of Directors