



**Minutes of the Open Session of the
El Camino Hospital Board of Directors
Wednesday, September 12, 2018
2500 Grant Road, Mountain View, CA 94040
Conference Rooms F&G (ground floor)**

Board Members Present

Lanhee Chen, Chair
Jeffrey Davis, MD
Neysa Fligor
Peter C. Fung, MD
Gary Kalbach
Julie Kliger
Julia E. Miller, Secretary/Treasurer
David Reeder
John Zoglin, Vice Chair

Board Members Absent

Bob Rebitzer

Members Excused

None

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	The open session meeting of the Board of Directors of El Camino Hospital (the "Board") was called to order at 5:47pm by Chair Chen. A silent roll call was taken. Director Fung joined the meeting at 5:48pm during Agenda Item 3: Board Recognition. Director Davis joined the meeting at 5:52pm during Agenda Item 4: Quality Committee Report. Director Rebitzer was absent. All other Board members were present at roll call.	
2. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Chair Chen asked if any Board members may have a conflict of interest with any of the items on the agenda. No conflicts were reported.	
3. BOARD RECOGNITION	<p>Motion: To approve <i>Resolution 2018-10</i>.</p> <p>Movant: Miller Second: Kliger Ayes: Chen, Fligor, Kalbach, Kliger, Miller, Reeder, Zoglin Noes: None Abstentions: None Absent: Davis, Fung, Rebitzer Recused: None</p> <p>Dan Woods, CEO, recognized Michael Fitzgerald, Executive Director, Behavioral Health Services, Brenda Taussig, Director, Government & Community Relations, Joseph Sandoval, Manager, Business Operations, Mental Health & Addiction Services, and Joy Villaverde, Contracts Negotiator, Managed Care Contracting, for working with Santa Clara County to broaden the Medi-Cal funded network of mental health services for low-income adolescents and their parents through After-School Program Interventions Resiliency Education® (ASPIRE).</p>	<i>Resolution 2018-10 approved</i>
4. AGENDA ITEM 4: QUALITY COMMITTEE REPORT	<p>Director Reeder, Chair of the Quality Committee, noted that due to a lack of a quorum at the last meeting, the Committee will be reviewing and approving the FY18 Annual Patient Safety Report at its October meeting.</p> <p>He suggested that future Quality Committee Reports to the Board focus on organizational goals and the Quality Committee will review the more detailed goals on the dashboard. He briefly described the achievement of the FY18 organizational goals.</p> <p>Mark Adams, MD, CMO, reviewed the FY19 Quality Dashboard as further detailed in the packet, noting that 1) mortality and readmissions are areas</p>	

	<p>that have a broad reach across the organization, 2) sepsis continues to be an area of focus, 3) length of stay is tracked over a 24-month period and is both an operational and a quality/safety measure, and 4) the organizational goals regarding throughput and HCAHPS are also included for tracking on the Committee's dashboard.</p> <p>Director Zoglin and Dr. Adams discussed the measurement periods and goal setting for length of stay and readmissions. Director Zoglin commented that goals should be more challenging and rigorous than the achievement of the prior year. The Board discussed measurement and goal setting, including 1) using performance over the last 12 months versus the last quarter of the fiscal year, and 2) the number of cases for a particular measure and variation over the year.</p> <p>Director Fligor suggested that management look at the performance of ECH's competitors in goal setting and evaluation. Dr. Adams noted that this will be included in future materials.</p> <p>Director Fung requested additional information about Emergency Department wait times at Los Gatos and potential lessons learned as the organization works on improving patient throughput.</p> <p>Chair Chen noted that the Board will have a more robust discussion around these issues in October, including additional context for the dashboard and comparison with peer competitors.</p>	
<p>5. FY18 ORGANIZATIONAL GOAL ACHIEVEMENT</p>	<p>Dan Woods, CEO, reviewed the FY18 organizational goal achievement:</p> <ul style="list-style-type: none"> - Average Length of Stay: 1.08 - Patient Experience (Rate the Hospital): 78.7% - Standardized Infection Ratio: steady improvement to reduce all Hospital Acquired Infections - Operating Margin: exceeded budget, awaiting approval of the final audited financial statements <p>Motion: To approve the FY18 organizational goal achievement, subject to the Board's approval of the financial audit.</p> <p>Movant: Kalbach Second: Fung Ayes: Chen, Davis, Fligor, Fung, Kalbach, Kliger, Miller, Reeder, Zoglin Noes: None Abstentions: None Absent: Rebitzer Recused: None</p>	
<p>6. PATHWAYS BUSINESS UPDATE</p>	<p>Barbara Burgess, CEO of Pathways, Home Health & Hospice, thanked the Board for the invitation to present and introduced Pathways Board members and administrative leadership in attendance.</p> <p>Ms. Burgess outlined the services that Pathways provides in the areas of home health, palliative care, and hospice. She also described fund development activities.</p> <p>She reviewed a snapshot of the organization, including the three areas of the strategic plan (Pathways People, Quality, Epic Partner Connectivity) and core and specialized programs.</p> <p>Ms. Burgess also outlined the statement of financial positions (highlighting \$54.2 million in net assets) and a three year downward trend in the bottom line (noting issues with hospice admissions and length of stay). She described 1) challenges, including fierce competition for services,</p>	

	<p>2) resetting the cost structure, and 3) reworking recruitment and business development efforts.</p> <p>She reported that Pathways achieved four stars on the Home Health Quality Report. She also described differences between profit and non-profit health care. She emphasized the importance of Pathways providing access and choice as the only non-profit community-based home health agency in the area.</p> <p>Ms. Burgess noted that Pathways' short term goal for this year is to break even; long-term goals revolve around partnering with other like agencies and non-profits. She described the investments that Pathways has made in Epic and resource requirements for the future.</p> <p>In response to Director Fung's question, Ms. Burgess described the connectivity with PAMF palliative care physicians and a telehealth pilot with ConnectedHome Living.</p> <p>In response to Director Zoglin's question, Ms. Burgess expressed concerns about Pathways' longevity in the market and emphasized the need to partner with other organizations to share costs and maximize program offerings.</p> <p>Director Miller thanked Ms. Burgess for the presentation and Ms. Burgess and her team for their work.</p>	
7. PUBLIC COMMUNICATION	<p>Director Miller reported that, following a positive patient experience at both campuses, Mr. Michael Fox, Sr. donated \$10,000 to the ECH Foundation. She thanked the family for their comments and generosity.</p>	
8. ADJOURN TO CLOSED SESSION	<p>Motion: To adjourn to closed session at 6:45pm pursuant to <i>Gov't Code Section 54957.2</i> for approval of the Minutes of the Closed Session of the Hospital Board Meeting (August 15, 2018); pursuant to <i>Gov't Code Section 54956.9(d)(2)</i> – conference with legal counsel pending or threatened litigation: Compliance Committee Report and FY18 Annual Patient Safety Report; pursuant to <i>Health and Safety Code Section 32155</i> for a report of the Medical Staff; deliberations concern reports on Medical Staff quality assurance matters: Medical Staff Report; pursuant to <i>Health and Safety Code Section 32155</i> for a report of the Medical Staff; deliberations concern reports on Medical Staff quality assurance matters: Grievance; pursuant to <i>Health and Safety Code Section 32106(b)</i> for a report and discussion involving health care facility trade secrets, <i>Health and Safety Code Section 32155</i> for a for a report of the Medical Staff; deliberations concern reports on Medical Staff quality assurance matters, and <i>Gov't Code Section 54956.9(d)(2)</i> – conference with legal counsel – pending or threatened litigation: CEO Report on New Services and Program, Quality Assurance Matters, and Legal Matters; and pursuant to <i>Gov't Code Section 54957</i> for discussion and report on personnel performance matters – Senior Management: Executive Session.</p> <p>Movant: Fung Second: Miller Ayes: Chen, Davis, Fligor, Fung, Kalbach, Kliger, Miller, Reeder, Zoglin Noes: None Abstentions: None Absent: Rebitzer Recused: None</p>	<p><i>Adjourned to closed session at 6:45pm</i></p>
9. AGENDA ITEM 16: RECONVENE OPEN	<p>Open session was reconvened at 7:47pm by Chair Chen. Agenda items 9-15 were addressed in closed session.</p>	

SESSION/ REPORT OUT	During the closed session, the Board approved the Minutes of the Closed Session of the Hospital Board Meeting (August 15, 2018) and the Medical Staff Report by a unanimous vote in favor of all members present (Directors Chen, Davis, Fligor, Fung, Kalbach, Kliger, Miller, Reeder, and Zoglin). Director Rebitzer was absent. The Board also received for information a report from the Compliance Committee and the FY18 Annual Patient Safety Report.	
10. AGENDA ITEM 17: CONSENT CALENDAR	<p>Chair Chen asked if any member of the Board or the public wished to remove an item from the consent calendar. Director Zoglin requested that Agenda Item 17a (Minutes of the Open Session of the Hospital Board Meeting (August 15, 2018)) be removed for discussion.</p> <p>Motion: To approve the consent calendar: Medical Staff Report; and for information: Investment Committee Report; Compliance Committee Report; and FY19 Period 1 Financials.</p> <p>Movant: Miller Second: Kalbach Ayes: Chen, Davis, Fligor, Fung, Kalbach, Kliger, Miller, Reeder, Zoglin Noes: None Abstentions: None Absent: Rebitzer Recused: None</p> <p>Director Zoglin requested that his full comments rather than a summary be included on Item 13 in the minutes.</p> <p>Motion: To approve the consent calendar: Minutes of the Open Session of the Hospital Board Meeting (August 15, 2018) amended to include Director Zoglin's full comments on Item 13.</p> <p>Movant: Zoglin Second: Miller Ayes: Chen, Davis, Fligor, Fung, Kalbach, Kliger, Miller, Reeder, Zoglin Noes: None Abstentions: None Absent: Rebitzer Recused: None</p>	<i>Consent calendar approved</i>
11. AGENDA ITEM 18: LEADERSHIP UPDATE	<p>Dan Woods, CEO, highlighted the upcoming employee engagement survey, the first meeting of the Chief Medical Officer Advisory Council, LEAN implementation efforts, a transit subsidy program and East Bay Shuttle, the HeartFlow system, and SVMD's acquisition of Direct Urgent Care in Mountain View as further detailed in the packet.</p> <p>He also acknowledged the recent generous donations to the Foundation, its upcoming Golf Tournament, and the Auxiliary's contribution of 6,676 volunteer hours in July.</p> <p>Director Davis requested a LEAN tutorial for Board members.</p>	
12. AGENDA ITEM 19: BOARD COMMENTS	None.	
13. AGENDA ITEM 20: ADJOURNMENT	<p>Motion: To adjourn at 8:01pm.</p> <p>Movant: Fung Second: Miller Ayes: Chen, Davis, Fligor, Fung, Kalbach, Kliger, Miller, Reeder, Zoglin Noes: None</p>	<i>Meeting adjourned at 8:01pm</i>

	Abstentions: None Absent: Rebitzer Recused: None	
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Attest as to the approval of the foregoing minutes by the Board of Directors of El Camino Hospital:



Lanhee Chen
Chair, ECH Board of Directors



Julia E. Miller
Secretary, ECH Board of Directors

Prepared by: Cindy Murphy, Director of Governance Services
Sarah Rosenberg, Contracts & Board Services Coordinator