



THE UNIVERSITY OF NEW MEXICO • HEALTH SCIENCES CENTER
UNM HOSPITALS

UNM Hospital Board of Trustees
 Meeting Minutes
 March 5, 2010
 Pavilion Conference Room #1500

Agenda/Subject#	Discussion	Status	Due Date	Responsible Party
I. Call to Order	A quorum being established. Chair Maria Griego-Raby called the meeting to order at 9:10 a.m. Absent were: Louise Campbell-Tolber and Dr. William Rayburn.			
II. Adoption of Agenda	The Chair called for a motion to adopt the agenda as submitted. Michael Olguin so moved and Bill Lang seconded the motion. The motion passed unanimously.			
III. Announcements	Steve McKernan announced that Jamie Silva-Steele and Susana Rinderle, who completed the Disparities Leadership Program at Massachusetts General Hospital, received an award for innovation and success in addressing ethnic disparities in healthcare. A press release will go out. They were congratulated on their work.			
IV. Public Input	NONE			
V. Approval of Minutes	The Chair called for a motion to approve the minutes of the February 5, 2010, board meeting. Michelle Melendez so moved and Jerry Geist seconded the motion. The motion passed unanimously.			
VI. Consent Agenda	NONE			
VII. Board Initiatives	<p>Heart Patient Outcomes Disparities</p> <p>Dr. Laskey, Chief of Cardiology, gave a presentation (attached) Cardiac outcomes. His presentation included information on ethnicity distribution. He discussed Yentl syndrome, disparities between men and women on outcomes, gender differences in mortality after AMI, and ethnicity in coronary intervention. White Hispanics fare better than whites or blacks. Dr. Laskey reviewed statistics, ethnic distribution and outcomes within UNM Hospital. He noted DNA ultimately defines us.</p> <p>Dr. Goldstein asked about the disparities program. Jamie Silva-Steele advised she will report next month on data, community input and clinical competence. Dr. Goldstein saw a report from</p>	Report to be presented by Jamie Silva-Steele	4/02/10	Steve McKernan

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VIII. Administrative reports	<p>Dr. Goldstein made a motion to approve the proposed revised MSE policy. Dr. Loretto seconded the motion and the motion passed unanimously.</p> <p><u>HSC Executive Vice President Report</u> Dr. Roth reported on the following: 1) The Legislature completed its tasks and approved a budget, resulting in about a 4.2% cut in state funding for HSC. Departments were instructed to develop a budget around a 5% cut. They will hold onto the difference until they know there won't be another special session. They are mandated to submit budgets to the state no later than May. The budget has to be submitted to the Regents later this month.</p> <p>2) SOM has undergone an LCME accreditation visit. All aspects are reviewed: academics, finances, research, and student body, and is done every 7 years. Then the NCI visited for renewal of accreditation and designation of the Cancer Center as an NCI Center. This happens every 5 years. This past week, HUD visited for determination for insured bond and preferred rates for SRMC. It was very important that Jerry Geist, Vice Chair of the UNM Hospital Board, was present.</p> <p>3) GCRC (General Clinical Research Center) will be replaced by CTS. There will be fewer GCRC's. On Thursday, CTS application was being reviewed in Washington. It is the third time we have applied. It was missed in prior attempts by 2 or 3 points. There is new scoring system. A perfect score, rank at the highest level for a grant, is 11. There were 36 centers applying. Competitors' scores were in range of 16, some in 20s. HSC received score of 12. They are relatively optimistic on receiving the grant and should hear in May.</p> <p>4) Fiscal YR 2011 should be incredible. Other institutions are laying people off and reducing SOM class size. HSC is increasing the size of its BA/MD class this fall.</p> <p>5) DMAT went to Haiti to provide medical care. They have been called to go to Chile.</p> <p><u>CEO Report</u> Steve McKernan noted his report is in the agenda book. He also reported the Hospital received accreditation as a Pathways</p>	Sheena Ferguson to	April 2, 2010	Steve McKernan

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<p>X. Committee Reports</p>	<p>reviewed stats. Net income is at zero.</p> <p>Community Benefits Oversight Committee</p> <p>Michelle Melendez reported the committee met on February 26th. They have had 3 public meetings relative to patient payment policies. They have begun having a dialogue on values, having a fiscally viable institution and meet the mission of being a service provider to low income patients. Bill Lang and Dr. Wiese have begun a study on fiscal issues and patient assistance to see what impact collections has had on patients. The committee also had an agenda item to discuss the vacancy of business office director. Steve McKernan made some modifications to the job description. Also discussed was the VISA issue. Temporary VISA holders don't qualify for assistance. Mr. McKernan is getting legal advice since there are many VISA types. The committee has been talking since December regarding collections, looking at the legal and fiscal implications for people under certain threshold for poverty. They have set a schedule to tackle the issues.</p> <p>Finance and Audit Committee</p> <p>Jerry Geist reported the committee met yesterday and summary attached. He suggested to Michelle Melendez to fully vet the financial issues.</p> <p>Performance Oversight Committee</p> <p>Dr. Maria Goldstein reported the committee met last Friday, February 26th. Dr. Gonzales will report in closed session. The Quality Committee was discussed. It will be Dr. Gonzales' responsibility to bring reports. Cathy Jaco did a list of responsibilities which she reviewed. There is an annual calendar to review requirements and Dr. Goldstein would like to know what the full board would like to hear, annual or quarterly basis. Dr. Gonzales is doing score cards. Chair Griego-Raby would like to hear reports on a quarterly basis, because quality is an important issue and we should keep that discussion on agenda.</p> <p>Strategic Planning</p> <p>Steve McKernan reported they are focusing on getting master facility plan stage 2A completed – will take 2 months longer than planned. Planner had not included everything. The program coming along nicely and will show it soon. Management is looking on doing a strategic planning report card</p>			
<p>XI. Other Business</p>	<p>NONE</p>			