# MEETING IN PROGRESS

# **GMHA** Board of Trustees

Wednesday, December 30, 2020 | 5:00 p.m. Zoom Video Conference

# GMHA Board of Trustees Meeting ATTENDANCE SHEET

Wednesday, December 30, 2020 | 5:00 p.m. | Zoom Video Conference

	NAME:	TITLE:	SIGNATURE:
	Theresa Obispo	Chairperson	Prevant
	Melissa Waibel	Vice-chairperson	
es	Sarah Thomas- Nededog	Secretary	SM
.nste	Byron Evaristo	Treasurer	Present
of Tr	Sharon Davis	Trustee	Present
Board of Trustees	Sonia Siliang	Trustee	* Row
₩.	Glynis Almonte	Trustee	Present
	Michael Um	Trustee	Present
	Evangeline Allen	Trustee	Present
Executive Management/Medical Staff	Lillian Perez-Posadas	Hospital Administrator/CEO	Sellian Donnes
	William N. Kando	Associate Administrator, Operations	W.7. I and
	Annie Bordallo, MD	Associate Administrator, Medical Services	
	Joleen Aguon, MD	Associate Administrator, Clinical Services	
	Don Rabanal	Assistant Administrator, Administrative Services	Prosent
e Man	Jemmabeth Simbillo	Assistant Administrator, Nursing Services	present
ecutiv	Christine Tuquero	Deputy Assistant Administrator, Nursing Services	Present
Ä	Yukari Hechanova	Acting, Chief Financial Officer	Matchana
	Dustin Prins, DPM	Medical Staff President	Present
	Jojo Santo Tomas	Guam PDN	Present
	Genry Partido	Pacific New Conter	Present
Guest(s)	John O'Connar	Guam Daily Post	present



### Guam Memorial Hospital Authority – Board of Trustees Meeting

December 30, 2020 | 5:00 p.m. | Zoom Video Conference

**BOARD MEMBERS**: Theresa Obispo, Chairperson; Melissa Waibel, Vice-chairperson; Sarah Thomas-Nededog, Secretary; Byron Evaristo, Treasurer; Sharon Davis, Trustee; Sonia Siliang, Trustee; Glynis Almonte, Trustee; Michael Um, MD, Trustee; Evangeline Allen, Trustee

Item		Owner
1.	Welcoming   Call Meeting to Order and Determination of Quorum	Trustee Obispo
II.	Review and Approval of Minutes	All Trustees
	A. November 9, 2020	
	B. November 25, 2020	
	C. December 9, 2020	
. 	Old Business	All Trustees
IV.	New Business	<b>Executive Management</b>
V.	Management's Report	Executive Management
VI.	Board Subcommittee Reports	
	A. Governance, Bylaws, and Strategic Planning	Trustees Nededog, Siliang
	B. Joint Conference and Professional Affairs	Trustees Dr. Um, Waibel
	<ol> <li>C. Human Resources</li> <li>Res. 2021-10, Relative to Amending the Necessary Special Qualification Requirements for the Physical Therapist Supervisor Position</li> <li>Res. 2021-11, Relative to Creating the Positions of Hospital Food &amp; Beverage Manager and Clinical Nutrition Manager for the Dietary Department</li> <li>Res. 2021-12, Relative to Creating the Position of Hospital Materials Management Assistant Administrator</li> </ol>	Trustees Waibel, Obispo
	D. Facilities, Capital improvements Projects, and Information Technology	Trustees Davis, Evaristo
	E. Finance & Audit 1. November 2020 Financial Report	Trustees Evaristo, Nededog
	F. Quality and Safety	Trustees Almonte, Allen
VII.	Public Comment	
VIII.	Adjournment	Trustee Obispo

### Regular Meeting of the Guam Memorial Hospital Authority Board of Trustees

Wednesday, December 9, 2020 | 5:00 p.m. Zoom Video Conference

### **Board Members**

Present: Theresa Obispo, Melissa Waibel, Sarah Thomas-Nededog, Byron Evaristo, Sharon Davis, Sonia Siliang, Glynis Almonte, Dr. Michael Um, Evangeline Allen

Absent: None

### Leadership

ATTENDANCE

Present: Lillian Perez-Posadas, William Kando, Dr. Annie Bordallo, Dr. Joleen Aguon, Don Rabanal, Jemmabeth Simbillo, Christine Tuquero, Yukari Hechanova

Absent: Dr. Dustin Prins

Guests

Gerry Partido, Steve Limtiaco

ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
I. CALL MEETING TO ORDER AND DE	ETERMINATION OF QUORUM			
	After notices were duly issued pursuant to Title 5 GCA, Chapter 8, <i>Open Government Law</i> , Section 8107(a) and with a quorum present, Trustee Obispo called to order the regular meeting of the GMHA Board of Trustees at 5:01 p.m. on Wednesday, December 9, 2020 via Zoom Video Conferencing.	Trustee Obispo	None	None
I. COVID-19 UPDATES				
A. Covid-19 Census	<ul> <li>32: Covid census (as of 12/09/20 and has been decreasing since mid-November) Of the 32, 8 require ICU level of care, and of the 8, 6 are on ventilator support.</li> <li>17: Highest ICU census since November 9, 2020</li> <li>12: Highest number of Covid patients on ventilator support</li> </ul>	Executive Management	None	Informational
B. Covid Isolation Facility (CIF)	The CIF was stood down since Monday, December 7, 2020. The census was at three over the weekend, so patients were brought back to the hospital. The contractor can proceed with the design to split the HVAC system.  135: Total number of individuals that were transferred to the CIF when it was operational.	Executive Management	None	Informational
C. Covid Bed Capacity	EMERGENCY ROOM: Has two isolation rooms with negative air pressure and hemodialysis capability.  BLU-MED TENT: Located right outside the ER and is being used for fast track overflow. It has an 8-bed capacity with negative air pressure.  The Hospital's generator was supplying the electrical source; however, it went down on December 6, 2020,	Executive Management	None	Informational

due to fuel issues. The Guam Power Authority, Department of Public Works, and the Governor's office helped resolve the problem and connected the Blu-Med tent to the Hospital's power grid.

**CARE 1:** Original Covid unit, located next to the ER. It has six patient rooms and one Ebola isolation room with negative air pressure and serves as a multi-purpose fast track transient care area.

**CARE 2:** Original ICU Covid unit. It has a 4-bed capacity and is being used for Non-Covid patients.

**CARE 3:** Located at the 4<sup>th</sup> floor, pediatrics unit. It has a 20-bed capacity, with three additional beds in the ICU bay area (old PICU). It is being used for Covid patients and has central cardiac monitoring capability and negative air pressure.

**CARE 4:** Located on the 3rd-floor, medical-telemetry unit. It has a 24-bed capacity with private and semi-private rooms; six can be used for ICU or OCU patients.

**CARE 5:** 14-bed ICU Covid unit. There are currently eight patients in the unit.

**CARE 6:** 3rd-floor medical-surgical unit was converted into a 20-bed Non-Covid telemetry unit on December 1.

### Other Units:

**PACU:** Being used for Non-Covid ICU overflow.

**PEDIATRICS and PICU:** Relocated to the 1st floor Rehabilitation Department Unit on the 1st floor. It is a 12-bed unit.

**REHABILITATION DEPARTMENT:** Inpatient rehab services was moved to the volunteer's gift shop, and outpatient rehab services are offered at the CIF.

**URGENT CARE:** Converted for fast track emergency services for individuals that present less serious and less complex illness or injuries.

	SPECIAL SERVICES: Moved to the 1st floor because the Hospital continues to provide on occasion inpatient services.  MEDICAL-SURGICAL UNIT: Moved to the 4th floor and has been converted into Non-Covid telemetry.  Medical-surgical annex opened up is being used for Non-Covid medical-surgical patients.  Outpatient services and visitation remains suspended.  Two rooms are running during the day for elective			
D. Skilled Nursing Unit	surgeries.  The SNU patients are still staying at the Catholic Social Services facility. The B-Wing of the CIF is being reserved for when they return.	Executive Management	None	Informational
E. Alternate Care Facility Plan	The \$15M grant plan was approved. \$11.5M has already been obligated and is in the Hospital's account to begin getting equipment and additional supplies to prepare the facility to provide sub-acute care. Planning was done with the guidance of FEMA Representative, Mr. Bryant Trang.	Executive Management	None	Informational
F. Staffing	The Hospital is challenged because nurses are now being offered \$8-\$10k per week in the United States. The Hospital has already lost about 15 NuWest nurses and will lose an additional 12-18 ICU nurses in December.  Mrs. Posadas informed the board that she would talk with the director and president of NuWest and Medical Solutions to see what can be done. The Hospital may have to pay the increased rates if they're implemented.  Mrs. Posadas requested the nursing administration to see what options can be offered to the local nurses so that the Hospital doesn't lose them and to ensure they don't feel slighted that the Hospital is paying higher rates for agency nurses and not offering similar or equal pay.  Trustee Evaristo inquired what the plan will be if the staffing solutions don't send more assistance.	Executive Management	None	Informational

G. Telehealth and Telemedicine Services	Mr. Kando informed the board that the Hospital is looking into the different options with the Office of Veteran's Affairs and may submit an Emergency Medical Assistance Compact (EMAC) request.  Currently, the entry salary for a staff nurse II with two years of experience is \$21.05. They may receive certification pay, 16% incentive pay for working in the Hospital, 15% ICU differential pay, and if they work in the Covid units, 25% Covid differential pay.  The Hospital is waiting for feedback from the Attorney General's Office regarding the revenue cycle management contract, which will help capture and increase revenues. Another way to receive additional revenue is to open outpatient care services. The Hospital is looking at all options.  Trustee Obispo requested for the HR subcommittee to discuss the matter at their next scheduled meeting.  The San Diego naval doctors are offering Telehealth and telemedicine services, and the Hospital was given an extension for their services until the end of December.  In the meantime, the Hospital is working on a contract with the Massachusetts General Hospital (MGH). Dr. Summer from MGH is willing to come to Guam, establish a relationship with the Hospital, and send their physical rounds equipment to assess patients, which then communicates back to Dr. Summers and his group.  The Hospital is also trying to get critical care Advanced Practice Registered Nurses through the VA track to help the intensivists.	Executive Management	None	Informational
H. \$20B Provider Relief Fund		Executive	None	Informational
	application and has not heard back.	Management		

I.	Covid Positive Employees	93: Total number of employees that have tested positive since the second surge. One RN is in isolation, and there is no one in quarantine.	Executive Management	None	Informational
J.	Convalescent Plasma Transfusion	The hospital has started convalescent plasma transfusion therapy. A total of 10 units has been administered to 7 inpatients, and some received two transfusions.	Executive Management	None	Informationa
K.	Bamlanivimab	Bamlanivimab is a monoclonal antibody outpatient transfusion. Ten individuals have received the transfusion, and there have been no adverse effects or complications reported.	Executive Management	None	Informationa
L.	Regeneron	Regeneron is another type of monoclonal antibody. The hospital will be getting a shipment of Regeneron for doctors to prescribe.	Executive Management	None	Informationa
M.	Maderna Covid-19 Vaccine	Mrs. Posadas informed the board that the Hospital may receive 2,500 doses of the Maderna vaccine.	Executive Management	None	Informationa
N.	Pfizer Covid-19 Vaccine	The Pfizer Covid-19 vaccine is pending emergency use authorization from the FDA. The hospital is in discussion with the Department of Public Health and Social Services to plan the distribution and prioritization. DPHSS ordered 3,900 doses.  The hospital received a freezer from the Guam	Executive Management	None	Informationa
		Environmental Protection Agency to store the vaccines.			
	Respiratory and Hemodialysis Equipment	The Hospital has received 40 respiratory machines with high flow nasal cannula capability from Ventec Life Systems and 40 from Zoll Medical Corporation. The Hospital is using the Guam Police Department's warehouse to store some of the equipment.	Executive Management	None	Informationa
		The Hospital has also received 15 Tablo hemodialysis machines. Training has been completed, and the machines are already being used in the units.			
	Medical Staff Lodging	Medical staff lodging has been extended and was moved from Perla's Court to Sea Breeze. 110 staff are taking advantage of the lodging to prevent possible transmission to their families.	Executive Management	None	Informationa
Q.	Certified Nurse Assistant Fast Track Program	The Guam Board of Nurse Examiners (GBNE) approved the UOG Certified Nurse Assistant Fast Track Program. According to Mrs. Posadas, ten individuals have	Executive Management	None	Informationa

	completed 32 hours of instruction, and another cycle of 30 will begin in December.  Ms. Simbillo informed the board that the ten individuals finished their clinicals and are now going through the hospital's employment process.  Trustee Almonte informed the board that she has 18 students who have completed the 160 hours of instruction to take the exams. Guam Marianas Training Center has requested GBNE to give the students a temporary work permit but require confirmation that they will be hired from the hospitals.  Trustee Almonte will follow-up with GBNE on the matter.			
R. Territorial Alternate Care Site Plan	The hospital has been having ongoing discussions and meetings with FEMA, HHS, Surgeon Cell, and GRMC to create a territorial alternate care site plan. It's a strategy and tactic for Guam's incident action plan. The agencies are looking at all facilities that can serve a surge.	Executive Management	None	Informational
S. Office of Economic Adjustment (OEA) Grant	The OEA grant for \$1.6M is pending approval. The governor's office submitted the grant for funding for a conceptual design of the new hospital.  Mrs. Posadas will follow up with the governor's office and GEDA on the status.  Trustee Dr. Um inquired where the new hospital will be.  The three areas of land that may be returned to the Government of Guam are the Eagle's Football Field, the old Nimitz Hill Golf Course, or the south Finagayan area.  The governor favors the Eagles Football Field property because of its size and central location. The Guam Development Authority will lead discussions and meetings for the new hospital. The hospital met with the GEDA team in October, and there have not been any further meetings.	Executive Management	None	Informational

III.	NEW BUSINESS				
	A. Letter to Sen. T. Terlaje on Bill No.	The board agreed that if any members have any	All Board	None	Closed
	305-35 Public-Private Management	additional comments or questions, they submit them no	Members		
	· ·	later than the close of business on December 10, 2020.			
IV.	. PUBLIC COMMENT				
		There were no public comments.	None	None	None
٧.	ADJOURNMENT				
		There being no further business matters for discussion,	All Board	None	Approved
		Trustee Obispo declared the meeting adjourned at 5:49	members		
		p.m., motioned by Trustee Waibel and seconded by			
		Trustee Evaristo. The motion carried with all ayes.			

Transcribed by:

Ocemacho

Submitted by:

Sarah Thomas-Nededog

Secretary

Justine A. Camacho Administrative Assistant

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the December 9, 2020 regular session meeting were accepted and approved by the GMHA

Board of Trustees on this 30th day of December 2020.

Certified by:

Theresa Obispo Chairperson

### Regular Meeting of the Guam Memorial Hospital Authority Board of Trustees

Wednesday, November 25, 2020 | 5:30 p.m. Zoom Video Conference

### **Board Members**

Present: Theresa Obispo, Melissa Waibel, Sarah Thomas-Nededog, Byron Evaristo, Sharon Davis, Sonia Siliang, Glynis Almonte, Dr. Michael Um, Evangeline Allen

Absent: None

### <u>Leadership</u>

ATTENDANCE

Present: Lillian Perez-Posadas, William Kando, Dr. Annie Bordallo, Dr. Joleen Aguon, Don Rabanal, Jemmabeth Simbillo, Christine Tuguero, Yukari Hechanova

Absent: Dr. Dustin Prins

#### Guests

Gerry Partido, Natasha Charfauros, Jasmin Stole, Tony Aguon, Edlyn Dalisay

ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
I. CALL MEETING TO ORDER AND DETE	RMINATION OF QUORUM			
	After notices were duly issued pursuant to Title 5 GCA, Chapter 8, <i>Open Government Law</i> , Section 8107(a) and with a quorum present, Trustee Obispo called to order the regular meeting of the GMHA Board of Trustees at 5:32 p.m. on Wednesday, November 25, 2020 via Zoom Video Conferencing.	Trustee Obispo	None	None
II. REVIEW AND APPROVAL OF MINUTES				
A. October 28, 2020	Trustee Allen motioned and it was seconded by Trustee Dr. Um to approve the minutes with revisions. The motion carried with all ayes.	All Board Members	None	Approved
B. November 9, 2020	The minutes of November 9, 2020 were unavailable.			Tabled
III. OLD BUSINESS	,			•
	There were no old business matters for discussion.	None	None	None
IV. NEW BUSINESS				
	There were no new business matters for discussion.	None	None	None
V. MANAGEMENT'S REPORT				
A. COVID Census	<ul> <li>77: New positive cases from November 1 to November 25</li> <li>471: Cumulative positive cases from when the Hospital started Abbott testing in April</li> <li>43: Covid census as of November 9, 2020 (10 ICU. Of the 10, 4 are on the ventilator, and 6 are at the CIF)</li> <li>21: Total deaths for November (as of 11/25/20)</li> </ul>	Executive Management	None	Informational

B. Revenue Cycle Management (RCM)	91: Employees have tested positive since     August. Majority have recovered and have been     cleared by employee health to return to work. A     few are in isolation, and a handful are in     quarantine.  The RCM contract is pending review by the Attorney	Executive	None	Informational
b. Revenue Gycle Management (NGM)	General's Office and has been with them since October 16, 2020. The hospital will follow up on the matter.	Management	None	mormational
C. Takecare Insurance Co.	The last payment received from Takecare was on September 30, 2020, in the amount of \$750k. The Hospital has not received payments for October and November, and they also have not been paying the hospitalization bill of patients diagnosed with Covid-19. The Hospital is arguing this matter with the company.  The reconciliation audit that was agreed upon with Ernst and Young is still ongoing. Takecare claims that the Hospital owes them \$6.3M.  Ms. Hechanova explained that the Hospital is supposed to get updates every two weeks. Ernst and Young is waiting for data from Takecare. They will follow-up.	Executive Management	None	Informational
D. Staffing	NuWest: 59 Staff (10 ER, 7 Hemodialysis, 28 PCU, 4 CMTs, 10 Nurses Aides) Five are assisting at GRMC.  The Hospital is conducting Cardiac Monitoring Technician Training as a long term solution for the Hospital to have its staffing resource.  The Hospital requested ten nurse aides from NuWest on a temporary assignment because the UOG fast track Certified Nurse assistant program was launched. Those involved in the training have completed the one-week series and are doing their psychomotor skills in the units. According to Ms. Simbillo, there are up to 12 CNAs, and the Hospital may be getting more.  Medical Solutions:  19 Staff (10 ICU, 1 Hemodialysis, 4 ER, 2 Telemetry, 2 CNAs) The Hospital is expecting two more staff to arrive.	Executive Management	None	Informational

E. Elective Surgeries	The hospital is in discussion and planning to open up two operation room suites to begin elective surgeries.	Executive Management	None	Informational
	The OR nurses deployed to the care units will return	Management		
	when the suites open up.			
F. Intensivists	The Hospital will be receiving two physician intensivists. There were two on a temporary assignment, but they left on December 20, 2020.	Executive Management	None	Informational
	The Hospital is also recruiting for locum tenens intensivists and hopes to recruit by January.			
	Dr. Bordallo explained that the intensivists are HHS and FEMA response employed physicians, so the Hospital			
	does not pay for anything.			
G. United Airlines	Mrs. Posadas informed the board that she was on the K57 radio show with Mr. Sam Shinohara from United Airlines. She had thanked him for supporting the Hospital by bringing the nurses from the staffing solutions. United Airlines covered the round trip airfare for 81 staff so far.	Executive Management	None	Informational
	The Hospital is waiting to hear from the staffing companies regarding a discounted rate because of the covered airfare.			
H. Financials	The Hospital is concerned because of the \$6.6M cash net decrease due to patient receivables. Total collection in October was \$6.4M versus the monthly collection in FY2020 of \$8.3M.	Executive Management	None	Informationa
	The Hospital has incurred many expenses with payroll and overtime and does not have revenues from surgeries because the service is suspended. The governor was made aware.			
	Trustee Evaristo suggested that the Hospital give a deadline. If payment is not made at such time, then do a media post informing everyone that the Hospital is no longer accepting Takecare patients.			
	Ms. Hechanova explained that the differential pay would end by December 31, 2020. The Hospital has			

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	successfully uploaded the first batch for the uninsured			
	and hopes to have a new stream of revenues from			
	patients that are not insured and the revenue cycle			
	management.			
	The Hospital received news that FEMA will be			
	potentially reimbursing 90% of costs incurred during the			
	pandemic. All Covid staffing expenses will be submitted			
	to FEMA.			
	Other Discussions:	Executive	None	Informational
	Trainings:	Management		
	<ul> <li>Ethics Training- Ms. Hechanova informed the</li> </ul>			
	board that she received an email from the			
	Pacific Islands Training Initiative. They are			
	offering free ethics training for government			
	employees and those involved with the			
	government on December 16 and 17 from 11			
	am to 1 pm via Zoom.			
	·			
	<ul> <li>Infection Control Training- Mr. Pangelinan</li> </ul>			
	informed the board that he would forward them			
	the information for the Hospitals Infection			
	Control Training. Training is due on November			
	30, 2020.			
	Covid-19 Vaccine:			
	Mrs. Posadas informed the board the hospital may be			
	getting the covid-19 vaccine and that if they are			
	interested in getting vaccinated, to let the hospital know			
	so that their names can go to employee health.			
	as that their flames sair go to employee floatin.			
	Mrs. Posadas explained that the governor had a			
	conference call with the National Governors Association			
	and was told that Guam would get 4000 vaccines. The			
	Department of Public Health will be in charge of			
	distribution.			
V. BOARD SUBCOMMITTEE REPORTS	uistribution.			1
A. Facilities, Capital Improvement	Meeting with Gov. Lou Leon Guerrero: Mr. Kando	Chair & Vice-	None	Informational
Projects, & Information Technology	informed the board that he, Mrs. Posadas, Chairwoman	chair, Fac, CIPs,	INOTIE	miomational
<u>Frojects, &amp; information reciniology</u>		& IT		
	Obispo, and Ms. Hechanova met with Governor Lou	αΠ		
	Leon Guerrero to discuss the Hospital's CIPS and			
	finances. The Governor's top concern was the roof			

upgrade. Mr. Kando explained that he gave an update on the roof and how the Hospital plans to separate the RFP for design so that the project is done in phases.

Covid Isolation Facility: Replacement of the chiller is a procurement that is with the Attorney General's Office. The Hospital went through a second round of curing and is working with Assistant Attorney General Matthew Wolff. Mr. Kando explained that Mr. Wolff might have a few more comments for the Hospital before the package is finalized.

### **Legal Assistance:**

The governor asked for executive leadership to request an Assistant Attorney General to assist at the Hospital until it has a full time employed attorney in March or April. The Hospital will look into the matter.

**Communication Center Relocation Project:** Ongoing. The hospital is working with the designer to clarify the final scope that GTA and IT&E needs to finalize the project. The anticipated completion is December.

Air Handling Units: The hospital will be bidding out a package for 10-15 AHUs that are one to one replacements and don't require a design. The project is part of the \$1M DOI package. Also, part of the \$1M is the OR, which was designed and is pending the availability of funds, and the radiology department, which is under design.

**Boiler #1 and 1.6meg Generator:** The Hospital rejected the IFB for Boiler #1 because it involved an OPA hearing and rejected the bid for the 1.6meg generator. The Hospital is planning to get boiler #1 repaired and resolicit the bid for the replacement of the 1.6 meg generator.

**Guam Cancer Trust Fund:** An award is pending from the Guam Cancer Trust Fund. Funding will be used to support the C-arm and Softlab LIS. The GCTF is waiting

	to see if they will get any surplus funds from the past year. The Hospital will follow up on the matter.  Cardiac Catheter Suite Equipment: The Hospital is working with the Governor's Office and the Bureau of Budget & Management Research to replace the cardiac catheter suite equipment estimated at \$2.7M. This project will be separate from the HVAC upgrade because the construction will take longer.  Electronic Health Record:  Mr. Rabanal reported the following:  Configuration training is ongoing. The Hospital recently concluded the virtual training for the second configuration session remotely. The main difference is that the Hospital requested the consultants to pre-record their didactics or classroom training so that participants can view it independently because of the time difference. The Hospital received feedback and is trying to enhance the Q&A session didactics as part of the reconfiguration scheduled for the second week of December. After, there will be a third configuration training scheduled in 2021 and superuser training. The EHR is still scheduled to go-live in May 2021. Any formal changes to the timeline will be reported when the Hospital meets with the vendor.			
B. <u>Human Resources</u> 1. <u>HR Taskforce</u>	Mr. Aguon reported that the working sessions would commence next week to discuss all adjustments made to the rules and regulations and a presentation of the various policies that correspond with the rules and the specific laws that impact them.  Mr. Kando informed the board that the Training and Need Assessment tool is being developed and will be shared with the board soon.	Chair & Vice- chair, HR	None	Informational
C. Quality and Safety	Trustee Almonte reported the following:  Ethics and Fraud Training will begin in 2021.  Leadership safety walk rounds have not been done as a group but are being done individually to maintain social distancing. It was suggested that executive leadership set a date and time to	Chair & Vice- chair, Q&S	None	Informational

do walk rounds and discuss the matter further at the next scheduled Executive Management Council Meeting. **Patient Safety Committee:** • Diverts will no longer be reported because they are more of an action than a problem. Elopement events will be monitored but will not be reported because the Hosptial has seen a decrease in incidents. Disorderly persons: The majority stem from agitated patients and family members not following instructions and being non-compliant related to the ongoing pandemic. Hospital staff received training in crisis prevention and intervention. The committee also recommended that the education department provide education and training on dealing with patients with emotional or mental illness and how to improve language interpretation. Inconsiderate/rude/hostile inappropriate persons: Related to the hospital staff and is mostly attributed to communication problems, proficiency issues, and workplace stress due to the pandemic. GMHA has provided anti-bullying and Covid-19 education. Staff huddles are done to address any issues. There are also other recommendations for the education department to pursue training on basic communication and an HR led initiative to connect the staff to counseling services through the Department of Public Health or the University of Guam if needed. **Surgery Department:** In the 2nd quarter, there were documentation

issues relative to the universal protocol and fallouts. The OR manager is responsible for doing the corrective actions with staff.

DVT prophylaxis deficiencies range from not being available and lack of MD orders and risk

assessment. Department chair to address the physician's compliance. **Fiscal Services:** • In the 3rd quarter, the ER and urgent care wait time of less than 10 minutes was negatively impacted by changes to the triage and registration process because patients need to be tested for Covid-19 before they are seen. **Nursing:** • In the 3rd quarter, the maternal and child health departments implemented new quality improvement measures related to covid-19. Data is being gathered and will be reported at a later time. Nursing implemented Crisis documentation to simplify charting during the pandemic. • The patient holding time in the ER has significantly improved due to the increase in travel nurses and other staff. Anesthesia: In the 3rd guarter, all measures monitored relate to provider documentation compliance. Department chairperson to address the issues and provide corrective actions. **Health Quality Innovation Network(HQIN):** Ms. Manglona from compliance presented the HQIN. CMS, Medicare, and Medicaid have selected HQIN to help qualified hospitals receive support to improve medical star rating and avoid payment penalties by implementing processes

associated with safer, more effective care. It will

Two organizations have approached GMHA to sign up with them; Emergency Care Research Institute and Mountain-Pacific Quality Health.

be no cost to the hospital.

	The executive management council will discuss the decision to sign up.  Mrs. Posadas explained that the hospital wants to commit to receiving additional support and training to ensure we are aligned, especially with CMS. Still, the challenge is that the hospital needs to ensure staffing resources, and HR will need to focus on the tasks and responsibilities.  Trustee Sharon suggested that Danielle let the board know what resources are needed to keep the hospital in compliance.			
D. Governance, Bylaws, and Strategic Planning  1. Annual Training and Orientation	<ul> <li>Trustee Nededog reported the following:         <ul> <li>The subcommittee hopes to have the revised training and needs assessment tool on December 4, 2020. The training tool is being worked on by Mr. Kando, nursing administration, and the human resources department.</li> <li>Tentative dates for the training and annual orientation are as follows:</li></ul></li></ul>	Chair & Vice-chair, GBSP	None	Informational
	Terlaje a letter regarding their stance on Bill 305-35.			

VI. PUBLIC COMMENT				
	There no public comments.	None	None	None
VII. ADJOURNMENT				
	There being no further business matters for discussion, Trustee Obispo declared the meeting adjourned at 6:45 p.m., motioned by Trustee Waibel and seconded by Trustee Almonte. The motion carried with all ayes.	All Board members	None	Approved

Transcribed by:

Justine A. Camacho Administrative Assistant Submitted by:

Sarah Thomas-Nededog

Secretary

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the November 25, 2020 regular session meeting were accepted and approved by the GMHA

Board of Trustees on this 30th day of December 2020.

Certified by:

Theresa Obispo Chairperson

### Regular Meeting of the Guam Memorial Hospital Authority Board of Trustees

Monday, November 9, 2020 | 4:00 p.m. Zoom Video Conference

### **Board Members**

Present: Theresa Obispo, Melissa Waibel, Sarah Thomas-Nededog, Byron Evaristo, Sharon Davis, Sonia Siliang

Absent: Glynis Almonte, Dr. Michael Um, Evangeline Allen

### Leadership

**ATTENDANCE** 

Present: Lillian Perez-Posadas, William Kando, Dr. Annie Bordallo, Dr. Joleen Aguon, Don Rabanal, Jemmabeth Simbillo, Christine Tuquero, Yukari Hechanova, Dr. Dustin Prins

#### Guests

Theo Pangelinan, Jeffrey Ventura, Rhonda Landry, Allison Pfaendler, Steve Limtiaco, Gerry Partido

ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
I. CALL MEETING TO ORDER AND DE	TERMINATION OF QUORUM			
	After notices were duly issued pursuant to Title 5 GCA, Chapter 8, <i>Open Government Law</i> , Section 8107(a) and with a quorum present, Trustee Obispo called to order the regular meeting of the GMHA Board of Trustees at 4:11 p.m. on Monday, November 9, 2020 via Zoom Video Conferencing.	Trustee Obispo	None	None
II. COVID-19 UPDATES	'	1	1	•
A. Covid-19 Census	<ul> <li>70: Covid Positive patients as of November 9, 2020 (15 are receiving ICU level of care, and of the 15, 11 are on ventilator support.)</li> <li>12: Census at the Covid Isolation Facility</li> </ul>	Executive Management	None	Informational
B. Covid Isolation Facility (CIF)	There are plans to maximize the CIF. It is a 54-bed facility, but the C-Wing is the only area open because of staffing issues. The C-Wing can accommodate 16 patients.  The hospital is working with a contractor to get the HVAC system separated so that the SNU residents can return.	Executive Management	None	Informational
C. Covid Bed Capacity	EMERGENCY ROOM: Has two isolation rooms with negative air pressure and hemodialysis capability.  BLU-MED TENT: Installed outside the ER near the bay area. It is an 8-bed structure with negative air pressure and is being used as	Executive Management	None	Informational

an ER overflow fast track, but the issue is that it's running on generator power. The Hospital is working with a contractor to get it connected to the Hospital's power source.

A second Blu-Med tent may be put up at the physician's parking lot, but the Hospital is holding off because of staffing issues.

### CARE 1:

6-bed unit and has an isolation room for Ebola, which was being used for PUIs and is now converted into an additional ER overflow fast track.

### CARE 2:

Converted into a Non-Covid ICU and has a 4-bed capacity. The Hospital is working with the Army Corps of Engineers (ACOE) to increase the area's electrical circuits. The ACOE has done their estimate, and it will cost about \$500k-600k to get the project done.

### CARE 3:

23-bed unit with negative air pressure and central cardiac monitoring; of the 23, 3 are located in the PICU bay area.

### CARE 4:

24-bed unit that has private and semi-private rooms. The ACOE upgraded the electrical capacity to allow for hemodialysis and has negative air pressure.

### CARE 5:

14-bed Covid ICU unit

### CARE 6:

18-bed unit with cardiac monitoring capability. It is being used for Covid patients and opened on October 31, 2020, in response to the high census.

### Other areas:

### **URGENT CARE CLINIC:**

Used for those with less serious and less complex illnesses or injuries.

	SPECIAL SERVICES: Relocated to the 1st floor, next to elevator 3 and 4. Outpatient services are suspended until further notice.  POST-ANESTHESIA CARE UNIT(PACU): Designated for non-covid ICU patients.  PEDIATRICS: Moved to first floor rehab department.  REHAB: Inpatient services moved to gift shop and outpatient services provided at the CIF.  SURGERY: Elective surgeries are suspended.			
D. Skilled Nursing Unit	The SNU patients are still staying at the Catholic Social Services facility. The hospital needs to resolve the HVAC system issue at the CIF before they can return.	Executive Management	None	Informational
E. Outpatient Hemodialysis	There is a facility that provides outpatient hemodialysis services for Covid patients, but the hospital is still seeing them because of accommodation issues.	Executive Management	None	Informational
F. Alternate Care Facility Plan	The Hospital submitted an application to FEMA for a \$15M plan to upgrade the Skilled Nursing Facility to an Alternate Care Facility. Doing so would allow individuals whose condition worsens to get the critical care they need without being transferred to the Hospital. The application is pending approval and includes requests for all the equipment, including a CT scan, point of care testing, and staffing for areas such as professional support, respiratory, laboratory, and radiology.	Executive Management	None	Informational
G. REDI Kits	The second set of REDI kits for centralized cardiac monitoring arrived, and installation is ongoing in Care 6. All cables were pulled, and the Hospital is now waiting for the availability of rooms to do the rest.	Executive Management	None	Informational
H. Staffing	Medical Solutions (contracted since 2018): 16 Nurses (8 ICU, 5 ER, 2 Telemetry, and 1 Hemodialysis)	Executive Management	None	Informational

I. Staging Area	The Hospital requested for additional ICU and telemetry nurses, but they are in high demand in the United States.  NuWest: 82 Nurses (68 RNs, 7 nurses' aides, 7 Rapid Response Team) 7 ICU, 1 Telemetry, 2 Respiratory Therapists were assigned to the Guam Regional Medical City (GRMC) Hospital.  The agreement is for GRMC to transfer covid patients to GMHA when they can be accepted. GRMC is challenged with staffing and equipment needs.  The MOU between the hospital and GRMC is under review by the Attorney General's Office and the governor's legal counsel.  The hospital plans to place a 20 ft hard structure for the first staging area to keep the employees safe and secure, especially when there is bad weather.	Executive Management	None	Informational
J. Telehealth/Telemedicine Services	The Hospital is exploring Telehealth/Telemedicine Virtual Care for pulmonary critical care intensivists to give some support and assistance to Dr. Aguon.  The Hospital has already spoken with the Massachusetts General Hospital and Mountain-Pacific, and there will be a conference call with a company called 98.6.	Executive Management	None	Informational
K. Public Information Officer (PIO)	The Hospital is still recruiting for a PIO.	Executive Management	None	Informational
L. \$20B Provider Relief Fund	Ms. Hechanova was able to submit an application before the deadline. A response is pending.	Executive Management	None	Informational
M. Employees	86 employees have tested positive for covid-19 since the second wave. Most have been cleared by employee health and are back to work. Five remain in isolation, and of the 5, 3 are staff nurses.	Executive Management	None	Informational

N.	Convalescent Plasma Transfusion	The protocol was approved by medical leadership and is pending orders set into the system by MIS. Doctors will be able to prescribe and order electronically.	Executive Management	None	Informational
O.	Regeneron	Regeneron is a monoclonal antibody transfusion and is considered an outpatient therapy. The Hospital is trying to push for it not to be hospital responsibility. Mrs. Posadas informed the governor that it should be a community effort/service. The Hospital is discussing the matter with Health and Human Services (HHS).	Executive Management	None	Informational
P.	Pfizer Vaccine	The Pfizer vaccine has not been given emergency use authorization (EUA). Once Approved, the Hospital expects it to arrive in November, and an estimate of 2000 doses may be allocated for Guam.  The Hospital started meeting with the Department of Public Health and Social Services on the matter, and a poll is being conducted to see who would like to get vaccinated.	Executive Management	None	Informational
Q.	Respiratory and Hemodialysis Equipment	The hospital will be receiving 40 Ventec Life System respiratory machines and 15 Tablo hemodialysis machines from HHS. Two individuals will be arriving on the island to conduct testing and an assessment and provide training for hospital staff. Mr. Kando informed the board that the equipment is from the strategic national stockpile.	Executive Management	None	Informational
R.	Medical Staff Lodging	The Office of Civil Defense is looking for additional medical staff lodging. Perla's Court can only accommodate 50 staff. There is 60 additional staff waiting for lodging to minimize possible transmission to their families.	Executive Management	None	Informational
S.	Fast Track Certified Nurse Assistant Program	The University of Guam's proposal for the fast track Certified Nurse Assistant Program was approved by the Guam Board of Medical Examiners (GBME).  There are over 100 individuals who are interested in being certified nurse assistants.	Executive Management	None	Informational

	Ms. Tuquero explained there is a 32-40 hour online training with 16 hours of skills training. Before onboarding, applicants will be screened. They must be BLS certified, have a police and court clearance, must be able to commit to doing shift work, and understand that they will work with Covid testing. Government funds and a UOG grant will help cover costs.  UOG is looking at starting with a 30 class cohort, and the Guam Community College (GCC) will follow with another cohort of 30. They are looking to complete each candidate with a temporary CNA license to work. Participating organizations are GMHA, GRMC, HSP, and DPHSS. Priority will be given to the first 30 that are employed with the participating organizations.			
T. Legislative Public Hearing	<ul> <li>There will be a virtual public hearing on November 10, 2020, at 1:00 p.m. for the following bills:</li> <li>Bill 301-35, relative to authorizing certain tax credits for required medical equipment for the Guam Memorial Hospital Authority. Authored by Senator Amanda Shelton.</li> <li>Bill 305-35, relative to a public-private partnership for the management of the Guam Memorial Hospital. Authored by Senator James Moylan.  Trustee Davis questioned the bill, which sets the board to write an RFP to replace the hospital management because she doesn't feel like the board is qualified to do it. She suggested that the board reach out to Sen. Moylan to find out if he has changed his mind since being in the pandemic and what the point of the bill is.</li> <li>Trustee Nededog expressed her concerns about the concept of outsourcing management and explained that the Hospital has a cadre of professionals committed to the people, healthcare, and the hospital who have exhibited their ability along with a very functioning board. She believes it's premature</li> </ul>	Executive Management	None	Informational

	and unnecessary for the bill to be approved			
	and suggests that the board submit testimony.			
	Chairwoman Obispo agreed to reach out to Sen. J. Moylan again and extend another			
	invitation to attend a board meeting.			
	Ms. Posadas informed the board that they could participate in the public hearing, and if they are unable to, she can relay any comments, if any.			
U. <u>FEMA</u>	Ms. Rowe Landry, a FEMA representative, has been attending Hospital meetings and is part of the Hospital's Incident Command. She is helping the Hospital determine what resources are available through FEMA and is engaged in Hospital activities pertaining to Covid-19.  It was noted that there was another FEMA representative with the Hospital, but she was not present.	Executive Management	None	Informational
V. BOARD SUBCOMMITTEE REPORTS				
A. Joint Conference and Professional     Affairs     1. Res. 2021-06, Relative to the     Reappointment of Active Medical     Staff Privileges     a. Jacqueline Michaud, DO	Trustee Davis motioned, and it was seconded by Trustee Waibel to approve Res. 2021-06, Res. 2021-07, and Res. 2021-08 subject to the completion of chart documentation by Dr. Holly Llobet and Dr. Paul Llobet. The motion carried with all ayes.	Chair & Vice- chair, JCPA	None	Approved
2. Res. 2021-07, Relative to the Reappointment of Active Associate Medical Staff Privileges a. James Murphy, MD				
3. Res. 2021-08, Relative to the Appointment of Professional Provisional Allied Health Medical Staff Privileges  a. Holly Llobet, MD b. Paul Llobet, MD c. Martin Springer, MD				

d. <u>Susie White, MD</u> e. <u>Amanda River, MD</u>				
4. Res. 2021-09, Relative to Approving Revisions to the Medical Staff Bylaws to add the Emergency Preparedness Committee	Trustee Evaristo motioned and it was seconded by Trustee Davis to approve Res. 2021-09. The motion carried with all ayes.			Approved
B. Governance, Bylaws, and Strategic Planning  1. Annual Orientation	Chairwoman Obispo informed the board that because there is no representative from the Attorney General's Office, the annual orientation will be discussed and planned at the next governance subcommittee meeting.  Trustee Nededog explained that from what she understands, the AGs Office would conduct a government-wide training for all boards. She suggested that the board wait to hear from them.  Mrs. Posadas informed the board that the Hosptial might have an in-house legal counsel soon who may be able to conduct a presentation for the orientation. A candidate for in-house legal counsel was interviewed, and the panel was impressed. The candidate is also a registered nurse and a certified coder, and her husband is also a neonatologist.  Trustee Nededog reminded the board that there would be two orientations; an annual orientation to go over the board's responsibilities, etc., and a legislative orientation with the new chairperson on health.  Mr. Kando explained that the nursing administration and human resources department are working on the training and education needs assessment tool and will present it to the HR subcommittee. Once the assessment tool is finalized, it can be put online for employees to complete.	Chair & Vice-chair, GBSP	None	Informational
2. <u>Strategic Plan</u>	Trustee Nededog informed the board that after all the subcommittees have developed their recommendations for amendments to the strategic plan, that those be			

	reported to the governance committee, who will then report to the full board.  She would like for it to be done in December so that in January, training development plans are created for the year or at least the first quarter for the staff and the board.			
VI. PUBLIC COMMENT		Alama	None	None
	There no public comments.	None	None	None
VII. ADJOURNMENT	<u></u>			
	There being no further business matters for discussion, Trustee Obispo declared the meeting adjourned at 5:55 p.m., motioned by Trustee Waibel and seconded by Trustee Davis. The motion carried with all ayes.	All Board members	None	Approved

Transcribed by:

Justine A. Camacho Administrative Assistant Submitted by:

Sarah Thomas-Nededog

Secretary

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the November 9, 2020 regular session meeting were accepted and approved by the GMHA

Board of Trustees on this 30th day of December 2020.

Certified by:

Theresa Obispo Chairperson



## Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



850 GOV. CARLOS G. CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: (671) 647-2409 OR 647-2171 FAX: (671) 646-9215

### BOARD OF TRUSTEES Official Resolution No. 2021-10

## "RELATIVE TO AMENDING THE NECESSARY SPECIAL QUALIFICATION REQUIREMENTS FOR THE PHYSICAL THERAPIST SUPERVISOR POSITION"

WHEREAS, the Rehabilitation Department recently received comments from the Federation of State Boards of Physical Therapy regarding professional membership being a non-standard requirement to become a physical therapist; and

WHEREAS, on October 15, 2020, the Hospital Administrator/CEO approved the Human Resources Department request to amend the class specification of the Physical Therapist Supervisor position; and

WHEREAS, the amendment of the class specification will remove the Necessary Special Qualification requirement of professional membership which currently reads: "Must be a member with the American Physical Therapy Association"; and

WHEREAS, the provisions of 4 GCA, Chapter 6, § 6303.1(a) - Transparency and Disclosure for the amendment of positions have been met; and

WHEREAS, the class specification of the position is hospital specific and that there is no impact on any other agency outside the Authority; and

WHEREAS, the Human Resources Subcommittee on November 10, 2020 recommended approval to remove the professional membership requirement, and for the Necessary Special Qualification requirements to read as proposed: "Possession of a current valid license to practice Physical Therapy from the Guam Board of Allied Health Examiners, Commission on Licensure to practice the Healing Arts"; now, therefore be it

**RESOLVED**, that the GMHA Board of Trustees accepts the Human Resources Subcommittee's recommendation and approves the attached proposed amendment of the Physical Therapist Supervisor class specification; and, be it further

**RESOLVED**, that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 30th DAY OF DECEMBER 2020.

Certified by:

Theresa Obispo Chairperson Attested by:

Sarah Thomas-Nededog

Secretary

### PHYSICAL THERAPIST SUPERVISOR

### **NATURE OF WORK IN THIS CLASS:**

This is complex professional and supervisory work involved in the administration of physical therapy services for the hospital.

<u>ILLUSTRATIVE EXAMPLES OF WORK:</u> (These examples do not list all the duties which may be assigned; any one position may not include all the duties listed.)

Supervises the planning and administration of medically prescribed physical therapy rehabilitation and treatment for patients suffering from injuries, or muscle, nerve, joint and bone diseases, to restore function, relieve pain, and prevent disability.

Ensures that practitioners review physician's diagnosis and referral orders; supervises the administration of proper therapy, which range from conservative treatment using physical agents for acute condition to extensive rehabilitation programs covering a broad range of conditions.

Ensures that practitioners consults with physicians on patient's reactions and response to treatment; recommends changes in treatment procedures; delegates program plan as appropriate to subordinate physical therapist and technicians; and ensures that safety precautions and care of patients are enforced during treatment to prevent retarding healing processes or injuring patients.

Ensures that the quality improvement program for physical therapy services is completed on an quarterly basis; monitors evaluation of the physical therapy programs on a periodic basis.

Advises on budgetary inputs/needs for the physical therapy services.

Advises and instructs subordinates physical therapist and technicians in simpler techniques and modalities of physical therapy.

Creates, designs, operates, and adjusts mechanical equipment used in the physical therapy area; ensures the proper maintenance and upkeep of equipment.

Performs performance evaluations on subordinate physical therapists and technicians.

Maintains records and prepares administrative and prepares administrative and operating reports and recommendations.

Performs related duties as required.

### **MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:**

Knowledge of the principles and practices of supervision, and in the administration of a physical therapy program.

Knowledge of anatomy, neuro-anatomy, physiology, kinesiology, and related sciences, physical therapy as applied to medicine, neurology, orthopedics, pediatrics, genetics, psychiatry, and surgery.

### **Physical Therapist Supervisor**

Knowledge of the technical procedures and modalities, trends and developments in physical therapy.

Ability to instruct and/or supervise others in the techniques and procedures of physical therapy.

Ability to plan and carry out medically prescribed physical therapy treatments.

Ability to evaluate and select the best type of treatment based upon medical diagnosis.

Ability to conduct physical therapy demonstration programs.

Ability to arrange and maintain schedules for physical therapy treatments.

Ability to observe, record, and report on patients' progress.

Ability to work effectively with the public and employees.

Ability communicate effectively, orally and in writing.

Ability to maintain records and prepare reports.

Skill in the operation and use of physical therapy equipment.

### **MINIMUM EXPERIENCE AND TRAINING:**

- A) Four (4) years of progressively responsible professional experience as a physical therapist, and graduation with a Bachelor's degree from a school of physical therapy as accredited by the American Physical Therapy Association; or
- B) Any equivalent combination of experience and training beyond the Bachelor's degree which provides the minimum knowledge, abilities, and skills.

### **NECESSARY SPECIAL QUALIFICATIONS:**

Possession of a current valid license to practice Physical Therapy from the Guam Board of Allied Health Examiners, Commission on Licensure to practice the Healing Arts.

ESTABLISHED: AMENDED: September 14, 1993 December 30, 2020

PAY GRADE/PLAN:

N(GPP)

**HAY EVALUATION** 

 KNOW HOW:
 EI3
 230

 PROBLEM SOLVING:
 D3(33%)
 76

 ACCOUNTABILITY:
 D2C
 87

 TOTAL POINTS 393

THERESA OBISPO, Chairperson Board of Trustees



## Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



850 GOV. CARLOS G. CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: (671) 647-2409 OR 647-2171 FAX: (671) 646-9215

**BOARD OF TRUSTEES**Official Resolution No. 2021-11

### "RELATIVE TO CREATING THE POSITIONS OF HOSPITAL FOOD & BEVERAGE MANAGER AND CLINICAL NUTRITION MANAGER FOR THE DIETARY DEPARMENT"

WHEREAS, the request for the creation of the Food Services Administrator position was first discussed at the HR-BOT Sub-committee meeting on November 19, 2019 at the recommendation of the Associate Administrator of Clinical Services; and

WHEREAS, the Human Resources Department conducted the position classification study and submitted its recommendation to the Hospital Administrator/CEO on August 6, 2020 to create the positions of Hospital Food & Beverage Manager and Clinical Nutrition Manager, and to abolish the positions of Hospital Food Services Assistant Administrator; Administrator, Hospital Food Services (HCA); and the Administrator, Hospital Dietary Services (HCA); and

WHEREAS, on August 12, 2020, the Hospital Administrator/CEO approved the Human Resources Department's recommendation to create the Hospital Food & Beverage Manager and the Clinical Nutrition Manager for the Dietary Department, and submitted the creation of position petition to the HR-BOT Subcommittee for review and consideration on September 8, 2020; and

WHEREAS, the provisions of 4 GCA, Chapter 6, § 6303.1(a) - Transparency and Disclosure for the creation of positions have been met; and

WHEREAS, the class specifications of the positions are hospital specific and that there is no impact on any other agency outside the Authority; and

WHEREAS, the Human Resources Subcommittee on December 8, 2020 recommended approval to accept the Hospital Administrator's petition to create and establish the Hospital Food & Beverage Manager and the Clinical Nutrition Manager positions; now, therefore be it

**RESOLVED**, that the GMHA Board of Trustees accepts the Human Resources Subcommittee's recommendation and approves the attached proposed class specifications for the Hospital Food & Beverage Manager position and the Clinical Nutrition Manager position; and to abolish the positions of Hospital Food Services Assistant Administrator; Administrator, Hospital Food Services (HCA); and the Administrator, Hospital Dietary Services (HCA); and, be it further

**RESOLVED**, that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 30th DAY OF DECEMBER 2020.

Certified by:

Theresa Obispo Chairperson Attested by:

Sarah Thomas-Nededog

Secretary

### **HOSPITAL FOOD AND BEVERAGE MANAGER**

### **NATURE OF WORK IN THIS CLASS:**

This position plans, directs, coordinates and evaluates all departmental activities and functions relevant to the food service operation for patients, employees and cafeteria customers.

Work is performed under direction; receiving guidance about general objectives in most tasks, determining methods, work sequence, and how to achieve objectives while operating within policy guidelines. Work is reviewed through submission of reports. This position reports to the Assistant Administrator of Professional Support Services.

### <u>ILLUSTRATIVE EXAMPLES OF WORK:</u> (These examples do not list all the duties which may be assigned; any one position may not include all the duties listed.)

Establishes policies and procedures and provides administrative direction of menu formulation in coordination with registered dietitians to include food preparation and service, purchasing, sanitation standards, safety practices and personnel utilization.

Develops and monitors profitability and sales Key Performance Indicators (KPI) such as cash flow, cost of goods sold, prime cost, gross profit, and labor and food cost percentage.

Reviews department performance and institute changes in procedures to improve and promote food service operation assuring compliance with regulatory requirements.

Prepares department budget on annual basis and manages budgeted and other fiscal resources related to food service operation.

Evaluates customer and patient satisfaction levels with a focus on continuous improvement.

Manages, disciplines, and evaluates the performance of assigned department personnel based on job requirements and core competencies assigned to the job.

Ensure employee compliance with health and food safety standards and regulations.

Oversees food preparation, portion sizes and overall presentation of food for patients and the cafeteria.

Manage the inventory and order of food and beverages, equipment and supplies.

Ensure the completion of all performance evaluations and competency assessments of employees in a timely manner as per hospital guidelines.

Performs related work as assigned.

### **MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:**

Knowledge of the principles and practices of hospital food service management, including food value and costs.

Knowledge of the techniques and equipment involved in preparing food on a large scale.

### Page 2

### **Hospital Food and Beverage Manager**

Knowledge of food preparation, cooking, and service.

Knowledge of safe food storage and sanitation.

Knowledge of the principles and practices of supervision and management.

Ability to direct the preparation and service of food in a hospital environment.

Ability to work effectively with the public and employees.

Ability to communicate effectively, orally and in writing.

Ability to maintain records and prepare reports.

Skill in MS Office application, restaurant management software, POS.

### **MINIMUM EXPERIENCE AND TRAINING:**

- A) Associate's Degree from an accredited college or university with a major in Food Service Management, Culinary Arts or hospitality or related fields with four (4) years of experience in Hospital Food Service Administration or Culinary Arts to include one (1) year which must have been in a supervisory capacity; or
- B) Six years of experience as a cook or a chef in a large cafeteria or restaurant to include one (1) year in a supervisory capacity; or
- C) Any equivalent combination of experience and training which provides the minimum knowledge, abilities and skills.

### **NECESSARY SPECIAL QUALIFICATIONS:**

Must be certified as a dietary manager (CDM), certified food service manager or similar national certification for food service management and safety from a national certifying body.

Must have a valid Health Certificate (from Department of Public Health & Social Services, Division of Environmental Health).

ESTABLISHED: December 30, 2020

PAY GRADE/PLAN: O (GPP)

HAY EVALUATION

 KNOW HOW:
 EII3
 264

 PROBLEM SOLVING:
 E3 (38%) 100

 ACCOUNTABILITY:
 E1P
 132

 TOTAL POINTS 496

THERESA OBISPO, Chairperson

**Board of Trustees** 

### **CLINICAL NUTRITION MANAGER**

### **NATURE OF WORK IN THIS CLASS:**

This position directs the nutrition care process through supervision of clinical dietitians, dietetic technicians, and clerical staff, including nutrition screening, assessment, diagnosis, intervention, monitoring and evaluation, education, and menu processing according to established departmental policies.

Work is performed under direction; receiving guidance about general objectives in most tasks, determining methods, work sequence, and how to achieve objectives while operating within policy guidelines. Work is reviewed through submission of reports. This position reports to the Assistant Administrator of Professional Support Services.

# <u>ILLUSTRATIVE EXAMPLES OF WORK:</u> (These examples do not list all the duties which may be assigned; any one position may not include all the duties listed.)

Consults with physicians regarding dietary prescriptions; makes suggestions to modify diets to adapt to the individual needs of the patient.

Ensures the preparation of quality food, which meets the nutritional and therapeutic needs of the patients and, in addition, ensures all food is flavorful, served attractively, and at the proper temperature.

Addresses questions and concerns of patients and families, community members, and health professionals in accordance with evidence-based nutrition practices.

Establishes and integrates department goals with hospital-wide goals and visions to provide optimal nutrition care.

Demonstrates accountability for the proper use of patients' protected health information and adherence to institutional safety practices.

Assesses, designs, implements, evaluates, and creates/updates nutrition care policies and procedures to achieve cost containment and improved patient outcomes, implements and maintains cost control procedures, adhering to budget while ensuring quality service.

Manages, disciplines, and evaluates the performance of assigned department personnel based on job requirements and core competencies assigned to the job.

Ensure the completion of all performance evaluations and competency assessments of employees in a timely manner as per hospital guidelines.

Performs related work as assigned.

### **MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:**

Knowledge of the principles of menu planning, general nutrition recommendations, education and counseling techniques, general nutrient composition of food, and appropriate sources of nutrition references.

Knowledge in medical nutrition therapy and charting using NCPT (Nutrition Care Process Terminology).

Knowledge of the principles and practices of Hospital Food Service.

#### Page 2 **Clinical Nutrition Manager**

Knowledge of the principles and practices of supervision and management.

Ability to interpret and apply pertinent program guidelines and requirements.

Ability to maintain records and prepare reports of relative complexity.

Ability to work effectively with employees and the public.

Ability to communicate effectively, orally and in writing.

Skill in using Microsoft applications.

## **MINIMUM EXPERIENCE AND TRAINING:**

- A) Bachelor's degree from an accredited college or university with a major in Nutrition, Dietetics or other related fields with five (5) years of experience as a clinical dietitian with two (2) years of supervisory experience ; or
- B) Any equivalent combination of experience and training beyond the Bachelor's degree which provides the minimum knowledge, abilities and skills.

#### **NECESSARY SPECIAL QUALIFICATIONS:**

Must be a registered dietitian/Nutritionist by Commission on Dietetic Registration, licensed Clinical Dietitian by Guam Board of Allied Health Examiners, active membership with the Academy of Nutrition and Dietetics, and must have a Health Certificate (from Department of Public Health & Social Services, Division of Environmental Health).

**ESTABLISHED:** December 30, 2020

PAY GRADE/PLAN: Q (GPP)

HAY EVALUATION

KNOW HOW: FII3 350 E3 (38%) 132 PROBLEM SOLVING: **ACCOUNTABILITY:** 175 E1P **TOTAL POINTS -**657

THERESA OBISPO, Chairperson

**Board of Trustees** 





850 GOV. CARLOS G. CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: (671) 647-2409 OR 647-2171 FAX: (671) 646-9215

BOARD OF TRUSTEES
Official Resolution No. 2021-12

## "RELATIVE TO CREATING THE POSITION OF HOSPITAL MATERIALS MANAGEMENT ASSISTANT ADMINISTRATOR"

WHEREAS, on July 1, 2020, the Hospital Materials Management Administrator submitted a request to Human Resources to reallocate the pay grade of the Assistant Supply Management Administrator position; and

WHEREAS, the Human Resources Department recognized that the Assistant Supply Management Administrator position is utilized government-wide and recommended the creation of a Hospital Assistant Supply Management Administrator position; and

WHEREAS, on October 18, 2020, the Hospital Administrator/CEO approved the Human Resources Department's recommendation to create the Hospital Materials Management Assistant Administrator at Pay Grade O; and

WHEREAS, the provisions of 4 GCA, Chapter 6, § 6303.1(a) - Transparency and Disclosure for the creation of positions have been met; and

WHEREAS, the class specification of the position is hospital specific and that there is no impact on any other agency outside the Authority; and

WHEREAS, the Human Resources Subcommittee on December 8, 2020 recommended approval to accept the Hospital Administrator's petition to create and establish the Hospital Materials Management Assistant Administrator position; now, therefore be it

**RESOLVED**, that the GMHA Board of Trustees accepts the Human Resources Subcommittee's recommendation and approves the attached proposed class specification of the Hospital Materials Management Assistant Administrator position; and, be it further

**RESOLVED**, that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 30th DAY OF DECEMBER 2020.

Certified by:

Theresa Obispo Chairperson Attested by:

Sarah Thomas-Nededog

Secretary

#### HOSPITAL MATERIALS MANAGEMENT ASSISTANT ADMINISTRATOR

#### **NATURE OF WORK IN THIS CLASS:**

Assists the Hospital Materials Management Administrator in the application, coordination and implementation of the procurement procedures and contract management of the materials management system throughout the hospital, and provide a systematic means of providing supplies, equipment, and services under the procurement authority pursuant to law. Assists in the oversight of the Central Supply and Receiving Department's systematic inflow, processing and distribution of medical supplies, materials and equipment, including the maintenance, disassembly and assembly of technical medical equipment.

# <u>ILLUSTRATIVE EXAMPLES OF WORK:</u> (These examples do not list all the duties which may be assigned; any one position may not include all the duties listed.)

Assists in planning, organizing, coordinating, integrating and evaluating all programs/activities and functions within the Materials Management and Central Supply and Receiving Department to ensure quality services and to achieve the hospital's mission, vision, values, goals, objectives, plans etc.

Assists in overseeing activities of the Materials Management and Central Supply and Receiving Departments' sterilization operations and ensure regulatory compliance.

Assists in planning, directing, and managing medical supplies, pharmaceuticals, laboratory reagents, equipment and procurement stock inventory for the agency.

Assists in the development and administration of policies and procedures, including budget administration and personnel.

Ensure compliance to established programs (Infection Control, Safety, Risk Management, Security, Quality Assurance, accrediting organizations, and Centers for Medicare & Medicaid Services).

Responsible for assisting in the procurement of all hazardous materials that are requested and/or used within the Hospital.

Assists in training personnel within the facility to handle any spills or dispose hazardous chemical/materials and comply with the National Toxicology Program (NTP), Environmental Protection Agency (EPA), OSHA, accrediting organization, and Centers for Medicare & Medicaid Services.

Develops recommendations for improvements affecting cost, efficiency and quality of operations and functions.

Researches and develops specifications to determine agency requirements for annual bids and price agreements; reviews and approves or rejects vouchers.

Maintains and supervises the maintenance of a variety of records and prepares comprehensive reports.

Performs related work as assigned.

#### MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of modern warehousing, purchasing and materials management practices and procedures.

Knowledge of the types, characteristics, sources, and market factors of supply, materials and equipment categories frequently required by the agency.

Knowledge of the principles of administration as applied to a centralized supply/materials management program.

Knowledge of accrediting organizations, CMS, and federal and local regulations for acute and skilled nursing facilities.

Ability to assist in administering the programs and activities of supply management functions.

Ability to make decisions in accordance with appropriate program guidelines.

Ability to evaluate operational effectiveness and recommend/implement changes in organization, policies and procedures to improve effectiveness.

Ability to interpret and apply pertinent laws, regulations, and policies governing the purchasing of commodities by the agency.

Ability to work effectively with the public and employees.

Ability to communicate effectively, orally and in writing.

Ability to maintain records and prepare reports.

#### MINIMUM EXPERIENCE AND TRAINING:

- A) Three years of experience in the various phases of supply work including procurement, supply cataloging, warehousing, contracting, stock control, issuing, and receiving of supplies; two years of supervisory experience and graduation from high school; or
- B) Any equivalent combination of experience and training which provides the minimum knowledge, abilities and skills.

#### Completion of all of the following procurement courses is preferred prior to or soon after hiring:

Module 1: Fundamentals and Principles of Procurement (Basic)

Module 2: The Procurement Solicitation Process (Advanced)

Module 3: The Procurement Review and Remedies (Administrative)

Module 4: The Management and Administration of Procurement (Administrative)

ESTABLISHED: July 1980

AMENDED: April 1989; December 30, 2020

PAY GRADE/PLAN: O (GPP)

**HAY EVALUATION** 

 KNOW HOW:
 EII3
 264

 PROBLEM SOLVING:
 E3 (33%)
 87

 ACCOUNTABILITY:
 E1C
 100

 TOTAL POINTS 451

THERESA OBISPO, Chairperson Board of Trustees

# **Guam Memorial Hospital Authority Financial Highlights – November 2020**

	11/30/2020	09/30/2020	Inc (Dec)	%
Cash	\$3,932,128	\$12,087,145	(\$8,155,017)	(68%)

Net decrease of \$8.2M due to:

- Lower collection of patients' receivable by \$3.4M when compared to prior year's average collection rate.
- The \$7.7M CARES Act funds via USHHS received in prior year was almost depleted.
- On a positive note, GMH received \$1.1M from GovGuam's CARES Act Funds in November 2020 as reimbursement for doctors pay. This however took over a month to get collected.
- As of November 30, 2020, \$2.0M paid for NuWest nurses pending reimbursement from FEMA; \$2.8M paid for differential pay for employees & contract doctors, and doctors hired for COVID pending reimbursement from CARES Act via Dept. of Administration.

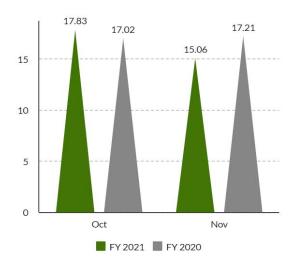
	11/30/2020	09/30/2020	Inc (Dec)	%
Trade Payables	\$10,022,420	\$5,666,216	\$4,356,204	77%

With reduced cash starting October 2020, vendor payables had increased. Top five vendors, which account for \$4M of total trade payables, are: (a) AETNA for employees' insurance premiums, (b) MD Wholesale, ASD Specialty Healthcare, and JMI-Edison for pharmaceutical and general supplies, and (c) NuWest for traveling nurses.

	11/30/2020	11/30/2019	Inc (Dec)	%
Net Patient Revenues	\$15,695,481	\$20,970,993	(\$5,275,512)	(25%)

• In June 2020, bad debts rate for self-pays was increased to 80% from 59%, thereby decreasing **net** patient revenues. Two months of net revenue is under the budget by \$1.9M. In addition, **gross** patient revenues was lower by \$1.3M compared to prior year.

**Chart 1. GROSS PATIENT REVENUES** (in millions)



#### **Billings & Collections:**

	11/30/2020		11/30/2019		Inc (Dec)
Gross Revenues	\$32,884,222		\$34,220,330		(\$1,336,108)
Collections	13,154,515		20,021,139		(6,866,624)
Collection %	40%		59%		
Breakdown of collections:					
Medicare	1,607,508		2,709,514		
Medicaid	2,774,897	<b>- 38%</b>	7,411,007	<b>- 49%</b>	(6,841,839)
MIP	1,732,635		2,836,358		
Third Party Payers	4,845,567	33%	5,339,051	39%	(493,484)
Selfpays	2,193,908	29%	1,725,209	12%	468,699
Total	\$13,154,515		\$20,021,139		

- Medicare withheld \$1.0M due to settlement adjustment for FY2018 cost report audit.
- Medicaid federal matching was increased to 100% in 1<sup>st</sup> quarter of FY 2020.
- There was no collection from TakeCare since October 2020.

	11/30/2020	11/30/2019	Inc (Dec)	%
Operating expenses	\$29,053,236	\$21,295,552	\$7,757,684	36%

Increase of \$7.8M mainly due to:

- Personnel costs grew by \$3.2M. On average, headcount was higher by 99 compared to prior year. Current year personnel cost includes \$1.3M in COVID-19 employees' differential pays.
- Supplies and materials increased by \$1.5M mainly due to issuances of Remdesivir drug to COVID-19 patients.
- Current year contractual services include \$2.6M from NuWest nurses and \$1.4M in COVID-19 contract physicians' pay.

#### Status of COVID-19 Funds, Usage, Encumbrances as of 12/11/20:

	Expenses &		
<b>Fund Amount</b>	<b>Encumbrances</b>	Balance	
\$7,777,905	(\$6,093,133)	\$1,684,772	Α
3,514,658	(3,514,658)	-	В
319,410	(319,410)	319,400	С
3,087,714	(3,087,714)	-	D
5,000,000	(2,947,717)	2,052,283	Е
\$19,699,687	(\$15,962,632)	\$4,056,455	
	\$7,777,905 3,514,658 319,410 3,087,714 5,000,000	Fund Amount         Encumbrances           \$7,777,905         (\$6,093,133)           3,514,658         (3,514,658)           319,410         (319,410)           3,087,714         (3,087,714)           5,000,000         (2,947,717)	Fund Amount         Encumbrances         Balance           \$7,777,905         (\$6,093,133)         \$1,684,772           3,514,658         (3,514,658)         -           319,410         (319,410)         319,400           3,087,714         (3,087,714)         -           5,000,000         (2,947,717)         2,052,283

- A- Reserved for current requisitions for COVID related supplies, services, equipment.
- B- Fully exhausted for COVID doctors pay, differential pay, and critical equipment.
- C- Reserved to drawdown for payroll instead of ICU beds which will not arrive before 12/31/20.
- D- Fully exhausted for employees' COVID differential pay.

E- Reserved for COVID differential pay, contract doctors pay, GMH share for travel nurses.

## Status of GovGuam Appropriations as of 12/11/20:

	FY 2021		
	Appropriation	Received	Balance
Pharmaceutical Fund	\$18,844,806	\$1,570,406	\$17,274,400
General Fund (Operations)	8,208,795	1,368,135	6,840,660
Healthy Futures Fund	1,729,597	432,400	1,297,197
Total	\$28,783,198	\$3,370,941	\$25,412,257

• As of 12/11/20, we are yet to receive remaining \$1.1M for FY 2019 Pharmaceutical Fund.

## **Insurance Companies Updates:**

- TakeCare reconciliation ongoing and expected completion January 2021.
- Aetna contract received and ready to forward to legal for review.

Statements of Net Position November 30, 2020 and September 30, 2020

	N	Unaudited ovember 30, 2020	Unaudited September 30, 2020	Change	% +/-
ASSETS		0.000, 2020			70 17
Current assets:					
Cash	\$	3,932,128	12,087,145	(8,155,017)	-67.5%
Patient accounts receivable, net		42,321,403	39,794,170	2,527,233	6.4%
Due from the Government of Guam		2,089,508	2,892,971	(803,463)	-27.8%
Other receivables		57,311	138,069	(80,758)	-58.5%
Inventory, net		4,024,848	3,825,085	199,763	5.2%
Prepaid expenses		-	-	-	
Total current assets		52,425,198	58,737,440	(6,312,242)	-10.7%
Capital assets:		_			·
Depreciable assets, net		27,112,031	26,280,649	831,382	3.2%
Construction in progress		1,295,008	1,295,008	-	0.0%
Total noncurrent assets		28,407,039	27,575,657	831,382	3.0%
Total assets		80,832,237	86,313,097	(5,480,860)	-6.3%
		00,002,207	00,010,007	(3) 100)000)	0.070
Deferred outflows of resources:					
Pension		15,984,072	15,984,072	-	0.0%
OPEB		14,515,198	14,515,198		0.0%
Total deferred outflows of resources	. —	30,499,270	30,499,270		0.0%
Total assets and deferred outflows of resources	\$ <b></b>	111,331,507	116,812,367	(5,480,860)	-4.7%
LIABILITIES AND NET POSITION Current liabilities:					
Accounts payable-trade	\$	10,022,420	5,666,216	4,356,204	76.9%
Accounts payable-other		(171,617)	(6,999)	(164,618)	2352.0%
Due to Noridian		4,501,120	4,501,120	-	
Other accrued liabilities		560,000	560,000	-	0.0%
Accrued payroll and benefits		1,977,819	4,253,743	(2,275,924)	-53.5%
Current portion of accrued annual leave		2,332,960	2,140,785	192,175	9.0%
Total current liabilities		19,222,702	17,114,865	2,107,837	12.3%
Accrued annual leave, net of current portion		2,969,221	2,724,635	244,586	9.0%
Accrued sick leave		4,062,643	4,046,946	15,697	0.4%
Net pension liability		126,135,550	126,135,550	-	0.0%
OPEB liability		134,276,729	134,276,729	-	0.0%
Total liabilities		286,666,845	284,298,725	2,368,120	0.8%
Deferred inflows of resources:					
		E E02 00E	E E02 00E		0.00/
Pension OPEB		5,583,805	5,583,805	-	0.0% 0.0%
Total deferred inflows of resources		56,220,601	56,220,601 61,804,406	<del></del>	0.0%
Total deferred lilliows of resources	_	61,804,406	01,804,400		0.0%
Net position:					
Net position in capital assets		28,407,039	27,575,657	831,382	3.0%
Unrestricted		(265,546,783)	(256,866,421)	(8,680,362)	-3.4%
Total net position		(237,139,744)	(229,290,764)	(7,848,980)	-3.4%
Total liabilities, deferred inflows of resources and net position	\$	111,331,507	116,812,367	(5,480,860)	-4.7%

Statements of Revenues, Expenses and Changes in Net Position For the month ended November 30, 2020 and 2019

		Actual (Unaudited) lovember 30, 2020	Actual (Audited) November 30, 2019	Change	% +/-
Operating Revenues:					
Net Patient Revenues	\$	7,413,837	10,483,008	(3,069,171)	-29.3%
Other operating revenues:					
DOC		187,290	191,818	(4,528)	2.4%
Cafeteria food sales		51,588	25,783	25,805	100.1%
Other revenues		6,175	5,953	222	3.7%
Total operating revenues		7,658,890	10,706,562	(3,047,672)	-28.5%
Operating Expenses:					
Salaries		6,644,286	6,231,798	412,488	6.6%
Fringe Benefits		1,568,669	1,278,939	289,730	22.7%
Total personnel costs		8,212,955	7,510,737	702,218	9.3%
Contractual Services		2,920,032	1,546,993	1,373,039	88.8%
Supplies & Materials		1,702,879	1,374,406	328,473	23.9%
Depreciation		300,086	301,243	(1,157)	-0.4%
Retiree health care costs		253,211	254,214	(1,003)	-0.4%
Utilities		197,286	277,182	(79,896)	-28.8%
DOC Clinic Expenses		167,223	168,020	(797)	-0.5%
Miscellaneous		25,550	13,439	12,111	90.1%
Minor Equipment		87,318	39,402	47,916	121.6%
Travel & Mileage Reimbursement		-	110	(110)	-100.0%
Training		-	11,830	(11,830)	-100.0%
Total operating expenses		13,866,540	11,497,576	2,368,964	20.6%
Income (loss) from operations		(6,207,650)	(791,014)	(5,416,636)	-684.8%
Nonoperating revenues (expenses):					
Transfers from GovGuam		2,686,872	3,190,645	(503,773)	-15.8%
Federal grants		1,093,239	148,000	945,239	638.7%
Contributions		253,211	266,614	(13,403)	-5.0%
Federal program expenditures		(2,492)	(17,776)	15,284	-86.0%
Interest and penalties		-	-	-	#DIV/0!
Loss from disposal of fixed asset		-	-	-	#DIV/0!
Other	_	59,227	(28,842)	88,069	305.3%
Total nonoperating revenues (expenses)		4,090,057	3,558,641	531,416	14.9%
Income (loss) before capital					
grants and contributions	_	(2,117,593)	2,767,627	(4,885,220)	-176.5%
Capital grants and contributions:					
Government of Guam		-	-	-	
Federal grants		-			
Total capital grants and contributions	_	-			
Change in net position	\$_	(2,117,593)	2,767,627	(4,885,220)	-176.5%

Monthly Statements of Revenues, Expenses and Changes in Net Position (Unaudited)

				·		FY 2021	·							
		YTD	Sep-21	Aug-21	Jul-21	Jun-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21	Dec-20	Nov-20	Oct-20
Operating Revenues:														
Net Patient Revenues	\$	15,695,481											7,413,837	8,281,644
Other operating revenues:														
DOC		373,621											187,290	186,331
Cafeteria food sales		90,709											51,588	39,121
Other revenues		13,831											6,175	7,656
Total operating revenues		16,173,642	-	-	-	-	-	-	-	-	-	-	7,658,890	8,514,752
Operating Expenses:														
Salaries		12,783,359											6,644,286	6,139,073
Fringe Benefits		3,265,725											1,568,669	1,697,056
Total personnel costs		16,049,084	-	-	-	-	-	-	-	-	-	-	8,212,955	7,836,129
Contractual Services		6,669,849											2,920,032	3,749,817
Supplies & Materials		4,181,187											1,702,879	2,478,308
Depreciation		602,059											300,086	301,973
Retiree health care costs		506,422											253,211	253,211
Utilities		402,684											197,286	205,398
DOC Clinic Expenses		324,537											167,223	157,314
Miscellaneous		68,480											25,550	42,930
Minor Equipment		226,009											87,318	138,691
Travel & Mileage Reimbursement		-											-	-
Training		22,925											-	22,925
Total operating expenses		29,053,236	-	-	-	-	-	-	-	-	-	-	13,866,540	15,186,696
Income (loss) from operations		(12,879,594)	-	-	-	-	-	-	-	-	-	-	(6,207,650)	(6,671,944)
Nonoperating revenues (expenses):		, , , ,											, , , , ,	,
Transfers from GovGuam		3,418,929											2,686,872	732,057
Federal grants		1,093,239											1,093,239	-
Contributions		514,752											253,211	261,541
Federal program expenditures		(60,528)											(2,492)	(58,036)
Interest and penalties		(69)												(69)
Loss from disposal of fixed asset		-												-
Other		64,291											59,227	5,064
Total nonoperating revenues (expenses)		5,030,614	-	-	-	-	-	-	-	-	-	-	4,090,057	940,557
Income (loss) before capital														,
grants and contributions		(7,848,980)	-	-	-	-	-	-	-	•	-	-	(2,117,593)	(5,731,387)
Capital grants and contributions:	$\prod$													
Government of Guam		-	-	-	-	-	-	-	-	-	-	-	-	-
Federal grants		-	-	-	-	-	-	-	-	1	-	-	-	-
Total capital grants and contributions			-	-	-	-	-	-	-	-	-	-	-	-
Change in net position	\$	(7,848,980)	-	-	-	-	-	-	-	-	-	-	(2,117,593)	(5,731,387)

Statements of Revenues, Expenses and Changes in Net Position For two months ended November 30, 2020 and 2019

	ual (Unaudited) ember 30, 2020	Actual (Audited) November 30, 2019	Change	% +/-
Operating Revenues:				
Net Patient Revenues	\$ 15,695,481	20,970,993	(5,275,512)	-25.2%
Other operating revenues:	, ,	, ,	. , , ,	
DOC	373,621	393,448	(19,827)	-5.0%
Cafeteria food sales	90,709	55,926	34,783	62.2%
Other revenues	13,831	15,846	(2,015)	-12.7%
Total operating revenues	 16,173,642	21,436,213	(5,262,571)	-24.5%
Operating Expenses:				
Salaries	12,783,359	10,633,424	2,149,935	20.2%
Fringe Benefits	3,265,725	2,249,032	1,016,693	45.2%
Total personnel costs	16,049,084	12,882,456	3,166,628	24.6%
Contractual Services	6,669,849	3,541,980	3,127,869	88.3%
Supplies & Materials	4,181,187	2,677,266	1,503,921	56.2%
Depreciation	602,059	601,021	1,038	0.2%
Retiree health care costs	506,422	508,428	(2,006)	-0.4%
Utilities	402,684	525,144	(122,460)	-23.3%
DOC Clinic Expenses	324,537	343,893	(19,356)	-5.6%
Miscellaneous	68,480	78,332	(9,852)	-12.6%
Minor Equipment	226,009	112,734	113,275	100.5%
Travel & Mileage Reimbursement	-	12,249	(12,249)	-100.0%
Training	22,925	12,050	10,875	90.2%
Total operating expenses	 29,053,236	21,295,552	7,757,684	36.4%
Income (loss) from operations	 (12,879,594)	140,661	(13,020,256)	9256.4%
Nonoperating revenues (expenses):				
Transfers from GovGuam	3,418,929	3,190,645	228,284	7.2%
Federal grants	1,093,239	148,000	945,239	638.7%
Contributions	514,752	520,828	(6,076)	-1.2%
Federal program expenditures	(60,528)	(38,204)	(22,324)	-58.4%
Interest and penalties	(69)	(943)	874	92.7%
Loss from disposal of fixed asset	-	-	-	#DIV/0!
Others	 64,291	(54,149)	118,440	218.7%
Total nonoperating revenues (expenses)	 5,030,614	3,766,177	1,264,437	33.6%
Income (loss) before capital grants and contributions	(7,848,980)	3,906,839	(11,755,819)	-300.9%
Capital grants and contributions:				
Government of Guam	-	-	-	
Federal grants	 -			
Total capital grants and contributions	 -			
Change in net position	\$ (7,848,980)	3,906,839	(11,755,819)	-300.9%

GUAM MEMORIAL HOSPITAL AUTHORIT	ГҮ												
Monthly cash receipts and disbursemen	ts												
FY 2021													
	Total YTD	Sep-21	Aug-21	Jul-21	Jun-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21	Dec-20	Nov-20	Oct-20
Cash - beginning balance \$	12,087,145	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	5,533,960	12,087,145
Cash receipts													
Patient revenues	13,154,515											6,706,032	6,448,483
General fund subsidy	3,938,379											2,686,872	1,251,507
DOC	606,491											205,154	401,337
GBHWC - Meals services	41,138											-	41,138
Federal Grants (CARES Act)	1,077,489											1,077,489	-
Cafeteria sales	33,771											16,546	17,225
Miscellaneous receipts:	-												-
CATScan Allotment	47,998											-	47,998
Others	182,699											81,732	100,967
Total cash receipts	19,082,480	-	-	-	-	-	-	-	-	-	-	10,773,825	8,308,655
Cash disbursements													
Payroll Payables	16,373,842											6,960,026	9,413,817
Contract Doctors	3,663,078											1,787,564	1,875,514
Other Contractual Services	3,400,612											1,665,602	1,735,010
Supplies and Materials	2,480,997											1,035,986	1,445,011
IT Software, Licenses, etc.	209,835											120,949	88,885
Power	283,429											254,372	29,057
Water	77,623											38,031	39,591
Boiler	36,827											18,267	18,560
Telephone	762											-	762
Minor Equipment/Fixed Assets	483,363											443,098	40,265
Miscellaneous	227,130											51,763	175,366
Total cash disbursements	27,237,496	-	-	-	-	-	-	-	-	-	-	12,375,657	14,861,840
Cash - ending balance	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	3,932,128	5,533,960
	0	check											

## **Guam Memorial Hospital Authority**

Patient Revenues, Contractual Adjustments and Collections

Year to Date - November 2020

	Gross revenues <sup>1</sup>		es <sup>1</sup>	Contractual / Bad debt <sup>2</sup>		Net revenues	s <sup>2</sup>	Collections <sup>2</sup>		
Medicare	\$	7,783,017	24%	\$ 5,058,961	65%	\$ 2,724,056	35%	\$ 1,607,508	21%	12%
Medicaid		5,561,863	17%	2,892,169	52%	2,669,694	48%	2,774,897	50%	21%
MIP		3,228,366	10%	1,549,616	48%	1,678,750	52%	1,732,635	54%	13%
		16,573,246	50%	9,500,746	57%	7,072,500	43%	6,115,040	37%	46.5%
Takecare		1,798,207	5%	485,516	27%	1,312,691	73%	-	0%	0%
Staywell		1,794,673	5%	538,402	30%	1,256,271	70%	787,858	44%	6%
Selectcare		1,980,921	6%	515,039	26%	1,465,882	74%	1,167,060	59%	9%
Aetna		2,550,586	8%	688,658	27%	1,861,928	73%	2,181,071	86%	17%
Netcare		473,564	1%	99,448	21%	374,116	79%	404,369	85%	3%
Other		2,378,310	7%	1,094,022	46%	1,284,288	54%	305,209	13%	2%
		10,976,261	33%	3,421,086	31%	7,555,175	69%	4,845,567	44%	36.8%
Self pay		5,334,713	16%	4,266,908	80%	1,067,805	20%	2,193,908	41%	16.7%
Total	\$	32,884,220	100%	\$ 17,188,739	52%	\$ 15,695,481	48%	\$ 13,154,515	40%	100%

<sup>1 %</sup> of total

<sup>2 %</sup> of gross

## Wednesday, December 30, 2020

## 2:00 PM - Guam Ancestral Lands Commission Board

The Guam Ancestral Lands Commission Board Meeting will be held on Wednesday, December 30, 2020, at 2:00 pm. This meeting is open to the public via ZOOM.

Join Zoom Meeting

https://uso2web.zoom.us/j/82456291377?

pwd=dlJRZWo5aodDZGVIWExhSVQvNVFqdzo9

(https://uso2web.zoom.us/j/82456291377?

pwd=dlJRZWo5aodDZGVIWExhSVQvNVFqdzo9)

Meeting ID: 824 5629 1377

Passcode: 2020

The agenda may be viewed at the following link: http://dlm.guam.gov/announcements-2/ (http://dlm.guam.gov/announcements-2/)

Individuals requiring special accommodations, auxiliary aids or services, may call Joey Leon Guerrero at 649-5263 ext. 440/816 or email admin@galc.guam.gov for more information.

## 5:00 PM - Guam Memorial Hospital Authority Board of Trustees

The GMHA Board of Trustees will convene for a meeting via Zoom Video Conferencing on Wednesday, December 30, 2020 at 5:00 p.m.

To join the meeting, you may enter this link (https://zoom.us/j/95811329210? pwd=VHJBaDRldzJXQ29NQnJlMForSGJhZzo9 (https://zoom.us/j/95811329210? pwd=VHJBaDRldzJXQ29NQnJlMForSGJhZzo9)) into your browser or download the app on your mobile device, and enter Meeting ID: 958 1132 9210; Password: 258354.

For further inquiries, please contact the Board Desk at 648-7997.

## Tuesday, December 29, 2020

## 8:30 AM - Guam Board of Examiners for Optometry

TOPIC: Guam Board of Examiners for Optometry (GBEO)

Date/Time: Tuesday, December 29, 2020 - 8:30 AM - 9:30 AM

Join GoToMeeting





850 GOV. CARLOS G. CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: (671) 647-2409 OR 647-2171 FAX: (671) 646-9215

Date: 0 1 0 7 2 1

## **VIA ELECTRONIC MAIL**

Honorable Lourdes A. Leon Guerrero I Maga'hågan Guåhan Ricardo J. Bordallo Governor's Complex Adelup, GU 96910

RE: Reporting Requirements for Boards and Commissions

#### Dear Governor Leon Guerrero:

To comply with Ch. 8 of Title 5 GCA, Section 38, §8113.1, Reporting Requirements for Boards and Commissions, the GMHA hereby submits the materials presented and discussed at the December 30, 2020 Meeting of the GMHA Board of Trustees.

Please contact Justine Camacho, Administrative Assistant – Board Office, at 648-7997 or by email at justine.camacho@gmha.org for any questions or clarifications.

Kindest Regards,

Lillian Perez-Posadas, RN, MN Hospital Administrator/CEO

submitted is a electronic mail or 107/21 ge





850 GOV. CARLOS G. CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: (671) 647-2409 OR 647-2171 FAX: (671) 646-9215

Date: 010721

## VIA ELECTRONIC MAIL

Honorable Tina Muña Barnes Speaker of I Minatrentai Singko Na Liheslaturan Guåhan 163 Chalan Santo Papa Hagåtña, GU 96910

RE: Reporting Requirements for Boards and Commissions

#### Dear Speaker Barnes:

To comply with Ch. 8 of Title 5 GCA, Section 38, §8113.1, Reporting Requirements for Boards and Commissions, the GMHA hereby submits the materials presented and discussed at the December 30, 2020 Meeting of the GMHA Board of Trustees.

Please contact Justine Camacho, Administrative Assistant – Board Office, at 648-7997 or by email at justine.camacho@gmha.org for any questions or clarifications.

Kindest Regards,

Lillian Perez-Posadak, RN, MN Hospital Administrator/CEO

Submitted via electronic mail or 107/21 gc





850 GOV. CARLOS G. CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: (671) 647-2409 OR 647-2171 FAX: (671) 646-9215

Date: 0 1 0 7 2 1

## **VIA ELECTRONIC MAIL**

Benjamin J.F. Cruz Public Auditor Office of Public Accountability Suite 401 DNA Building 238 Archbishop Flores Street Hagåtña, GU 96910

RE: Reporting Requirements for Boards and Commissions

Dear Mr. Cruz:

To comply with Ch. 8 of Title 5 GCA, Section 38, §8113.1, Reporting Requirements for Boards and Commissions, the GMHA hereby submits the recording for the December 30, 2020 GMHA Board of Trustees Meeting via Google Drive as guided by your office.

Please contact Justine Camacho, Administrative Assistant – Board Office, at 648-7997 or by email at justine.camacho@gmha.org for any questions or clarifications.

Sincerely,

Lillian Perez-Posadas, RN, MN Hospital Administrator/CEO

Submitted via electronic mail 01/07/21 ge