

MEETING IN PROGRESS

GMHA Board of Trustees

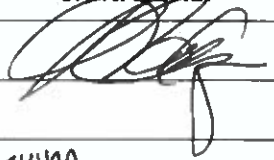

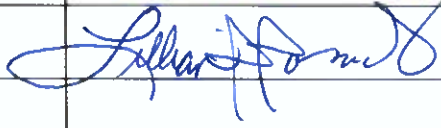


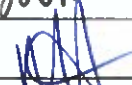
Wednesday, December 29, 2021 | 5:00 p.m.

Zoom Video Conference

GMHA Board of Trustees Meeting

ATTENDANCE SHEET

Wednesday, December 29, 2021 | 5:00 p.m. | Zoom Video Conference

	NAME:	TITLE:	SIGNATURE:
Board of Trustees	Theresa Obispo	Chairperson	
	Melissa Waibel	Vice-chairperson	
	Sarah Thomas-Nededog	Secretary	zoom
	Byron Evaristo	Treasurer	
	Sharon Davis	Trustee	zoom
	Sonia Siliang	Trustee	zoom
	Glynis Almonte	Trustee	zoom
	Michael Um	Trustee	zoom
	Evangeline Allen	Trustee	
Executive Management/Medical Staff	Lillian Perez-Posadas	Hospital Administrator/CEO	
	William N. Kando	Associate Administrator, Operations	
	Annie Bordallo, MD	Associate Administrator, Medical Services	
	Joleen Aguon, MD	Associate Administrator, Clinical Services	
	Don Rabanal	Assistant Administrator, Administrative Services	zoom
	Ana Belen Rada	Assistant Administrator, Professional Support Services	zoom
	Christine Tuquero	Assistant Administrator, Nursing Services	zoom
	Liezl Concepcion	Acting, Deputy Asst. Administrator, Nursing Services	zoom
	Yukari Hechanova	Chief Financial Officer	
	Danielle Manglona	Administrator of Quality, Patient Safety and Regulatory Compliance	
	Jon Sidell, MD	Medical Staff President	
Guest(s)	Guam Daily Post - John O'Connor		zoom
	Natasha Chappautas	Office of Speaker Reference	zoom
	Rayna Cruz	Program Coordinator	zoom
	Mai Habes	Comms Director	
	Taryn Gorman	Acting HR Administrator	zoom

GMHA Board of Trustees Meeting

ATTENDANCE SHEET

Wednesday, December 29, 2021 | 5:00 p.m. | Zoom Video Conference

Guest(s)	J. Kelly	Revenue Cycle Management	Zoom
	Bydell Tauscan		Zoom
	Danielle Santos	Accountant	Zoom
	PNC Hospital		Zoom
	Theo Angelina	EEO	Zoom
	Kamelin Torres	Admin Assistant	Zoom

AGENDA

Guam Memorial Hospital Authority – Board of Trustees Meeting

December 29, 2021 | 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
I. Welcoming Call Meeting to Order and Determination of Quorum	Trustee Obispo
II. Review and Approval of the Minutes A. October 27, 2021 B. November 23, 2021	All Trustees
III. Old Business	All Trustees
IV. New Business	All Trustees
V. Management's Report	Executive Management
VI. Board Subcommittee Reports	
A. Joint Conference and Professional Affairs 1. Res. 2022-13, Relative to the Appointment of Provisional Medical Staff Privileges 2. Res. 2022-14, Relative to the Provisional Appointment of Allied Health Professional Medical Staff Privileges 3. Res. 2022-15, Relative to the Reappointment of Active Medical Staff Privileges	Trustees Dr. Um, Waibel
B. Human Resources 1. GMHA Nurse Recruitment and Retention Initiatives 2. Res. 2022-16, Relative to Amending the Minimum Qualifications and Necessary Special Qualification Requirements of the Medical Records Coder I and II Positions	Trustees Waibel, Obispo
C. Facilities, Capital Improvement Projects, and Information Technology 1. Evaluation for 2020 Life Safety Management Plan	Trustees Davis, Evaristo
D. Governance, Bylaws, and Strategic Planning 1. CY2022 Strategic Plan	Trustees Nededog, Siliang
E. Quality and Safety	Trustees Almonte, Allen
F. Finance and Audit	Trustees Evaristo, Nededog
VII. Public Comment	
VIII. Adjournment	Trustee Obispo

Regular Meeting of the
Guam Memorial Hospital Authority
Board of Trustees
 Wednesday, October 27, 2021 | 5:00 p.m.
 Zoom Video Conference

ATTENDANCE

Board Members

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

Absent: Glynis Almonte

Leadership

Present: Lillian Perez-Posadas, William Kando, Dr. Joleen Aguon, Don Rabanal, Ana Belen Rada, Christine Tuquero, Liezl Concepcion, Yukari Hechanova, Danielle Manglona, Dr. Jon Sidell

Absent: Dr. Annie Bordallo

Guests

Mai Habib, Dr. Alexandra Leon Guerrero, Dr. David Weingarten, Dr. Jerone Landstrom, Joe Taitano, Natasha Charfauros, Nora Garces, Paula Manzon, Rayna Cruz, Sydnie Taisacan, Edlyn Dalisay, PNC Digital, John O'Connor, Philip Leon Guerrero, Dr. Daniel Medina

ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
I. CALL MEETING TO ORDER AND DETERMINATION OF QUORUM				
	After notices were duly issued pursuant to Title 5 GCA, Chapter 8, Open Government Law, Section 8107(a) and with a quorum present, Chairwoman Obispo called to order the regular meeting of the GMHA Board of Trustees at 5:05 p.m. on Wednesday, October 27, 2021 via Zoom Video Conferencing.	Chairperson	None	None
II. EXECUTIVE SESSION				
	<p>At the written request of Trustee Dr. Um, Trustee Davis motioned, and it was seconded by Trustee Nededog to hold an executive session to discuss a personnel matter. The Motion carried with all ayes.</p> <p>The Board of Trustees went into executive session at 5:05 p.m.</p> <hr/> <p>At 5:11 p.m., the Board reconvened for regular session.</p>	All Board Members	None	None
III. REVIEW AND APPROVAL OF MINUTES				

A. September 30, 2021	Trustee Waibel motioned, and it was seconded by Trustee Allen, to approve the September 30, 2021 minutes as presented. The motion carried with all ayes.	All Board Members	None	Approved
IV. OLD BUSINESS				
	There were no old business matters for discussion.	None	None	None
V. NEW BUSINESS				
	There were no new business matters for discussion.	None	None	None
VI. MANAGEMENT'S REPORT				
A. Patient Census	<ul style="list-style-type: none"> ❖ Covid Census (as of October 27, 2021): 32 (6 ICU (4 on ventilator support), 2 Progressive Care, 9 Telemetry, 13 Med-Surg, 2 Postpartum) ❖ Total Patient Census (as of October 27, 2021): 154 ❖ Covid Deaths within the last 24 hours: 3 	Executive Management	None	Informational
B. Vaccination Clinic	<p>The vaccination clinic continues to remain active, and at the same time, employee health is also giving flu vaccines to staff. They are also testing individuals who choose not to be vaccinated weekly.</p> <p>518 Employees have received their third dose of the Pfizer vaccine.</p> <p>GMHA has extended its efforts by providing the third dose to the GMH Volunteers Association, Guam Fire Department, and Guam Police Department.</p> <p>GMHA is awaiting the CDC guidelines for providing Covid-vaccinations to children 5-11 years old before determining how to provide the service.</p>	Executive Management	None	Informational
C. Employee Positivity	Total # of Employees that have tested positive for Covid-19 since the beginning of 2021 to present: 92	Executive Management	None	Informational
D. Department of Defense Nurses	The Department of Defense granted GMHA a one-week extension for 4 of the 15 DOD nurses.	Executive Management	None	Informational
E. Travel Nurses	<p>Total # of Travel Nurses assigned to GMHA: 66</p> <ul style="list-style-type: none"> ❖ Medical Solutions Nurses: 9 ❖ NuWest Nurses: 57 	Executive Management	None	Informational

F. GMH Volunteers Association	The volunteer's gift shop has reopened but under limited hours.	Executive Management	None	Informational
G. Bill 121-36, Proposed Legislation for 21 st Century Health Care Center	Mrs. Perez-Posadas reported that Bill 121-36 is now public law 36-56, which will provide a funding mechanism of \$35M annually for the New Medical Campus. Groundbreaking of the site may take place in October 2022.	Executive Management	None	Informational
H. Strategic Planning	A meeting with Mr. Clifford Guzman took place to begin discussions on strategic planning. Nothing has been finalized, and other options will be explored.	Executive Management	None	Informational
I. Employee Town Hall Meeting	There will be an employee town hall meeting on November 18.	Executive Management	None	Informational
J. Guam Ethics Commission	A meeting with the Guam Ethics Commission took place on October 5 regarding public law 36-25, which went into effect in May, requiring all employees of the Government of Guam (unclassified and classified) to complete ethics training every four years. Training dates to complete modules are October 29, November 18, December 3, and December 18.	Executive Management	None	Informational
K. Anesthesia Service	Dr. Aguon reported that the anesthesia service is no longer in-house at night. GMHA can open another OR room, and all surgeries are still going through triaging to determine urgency. Now that there is more nursing staff, GMHA can consider opening the outpatient cardiology clinic effective November 1, 2021, and interventional radiology. GMHA is also looking into other professional support services, such as rehab, because of the need to rehab patients that have had surgery.	Associate Administrator, Clinical Services	None	Informational
VII. BOARD SUBCOMMITTEE REPORTS				
A. <u>Joint Conference and Professional Affairs</u> 1. <u>Res. 2022-01, Relative to the Appointment of Active Associate Medical Staff Privileges for UC DAVIS HEALTH Pediatric Tele-</u>	Trustee Dr. Um motioned, and it was seconded by Trustee Davis to approve Res. 2022-01 through 2022-04. The motion carried with all ayes.	Chair & Vice-Chair, JCPA	None	Approved

<p><u>Health Consultants</u> <u>(Pediatric/Critical Care)</u></p> <p>2. <u>Res. 2022-02, Relative to the Appointment of Active Associate Medical Staff Privileges for UC DAVIS HEALTH Pediatric Tele-Health Consultants</u> <u>(Pediatric/Infectious Disease)</u></p> <p>3. <u>Res. 2022-03, Relative to the Appointment of Active Associate Medical Staff Privileges for UC DAVIS HEALTH Pediatric Tele-Health Consultants</u> <u>(Pediatric/Nephrology)</u></p> <p>4. <u>Res. 2022-04, Relative to the Appointment of Provisional Medical Staff Privileges</u> a. <u>Aldo Gutierrez, MD</u></p> <p>5. <u>Res. 2022-05, Relative to Approving Renewal of the Medical Staff Rules and Regulations for the Anesthesia Department</u></p>	<p>Dr. Um informed the trustees that the original rules and regulations stated that CRNAs are to have an agreement with a physician, implying that the nurse anesthetist cannot practice independently, which goes against Guam law; therefore, the statement was removed.</p> <p>Trustee Allen motioned, and it was seconded by Trustee Waibel to approve Res. 2022-05. The motion carried with all ayes.</p>			<p>Approved</p> <p>Approved</p> <p>Approved</p> <p>Approved</p>
<p>B. <u>Human Resources</u></p> <p>1. <u>Res. 2022-06, Relative to Extending a 25% Working Differential Incentive Pursuant to 4GCA, subsection 6229.7 for Certified or Licensed Allied Health Positions</u></p>	<p>The Board will continue to see requests to sustain and retain employees and attract new candidates.</p> <p>Dr. Aguon informed the Board that to right-size the Clinical Services Division, HR looks into the Department of Labor and Statistics, the national average and compares it with MGMA, an additional</p>	<p>Chair & Vice-Chair, HR</p>	<p>None</p>	<p>Approved</p>

	<p>resource and looks at the number of years staff have worked and their level of education.</p> <p>Rehab is getting paid 40%-53% below the national average, radiology is between 19%-39% below the national average, and dietary is between 27%-38% below the national average.</p> <p>Mrs. Perez-Posadas reported that a working differential would help increase staff salary, especially since wages cannot be changed. A comprehensive wage study needs to be done.</p> <p>The annual cost for the 25% working differential is 690k.</p> <p>According to Ms. Hechanova, the working differential will be funded by vacancies. The Fiscal Department will monitor and watch payroll as well as hiring.</p> <p>Trustee Allen expressed that it's time for the Board to let staff know that their contribution is important, and if nothing is done, GMHA will continue to lose staff which will cause a ripple effect on patient care.</p> <p>Trustee Allen motioned, and it was seconded by Trustee Dr. Um to approve Res. 2022-06. The motion carried with all ayes.</p>			
2. <u>Res. 2022-07, Relative to Amending the Position of Assistant Administrator of Administrative Services to Assistant Administrator of Operations for the Operations Division</u>	<p>Mr. Kando informed the board that to have the proper leadership in managing and leading the Operations Division, the Assistant Administrator of Operations is critical and is undoubtedly proven necessary. The division was consolidated down to 7 complex departments and is one of the largest divisions of the hospital.</p>			
3. <u>Res. 2022-08, Relative to Creating the Position of Deputy Assistant</u>	<p>Ms. Hechanova found funding for the creation of the position.</p>			

<p><u>Administrator of Operations for the Operations Division</u></p>	<p>Mr. Don Rabanal is the current Assistant Administrator of Administrative Services, helping Mr. Kando manage the Operations Division. The position name is old; therefore, they want to amend the position to Assistant Administrator of Operations and make it clear that Mr. Rabanal is helping Mr. Kando manage the entire division.</p> <p>The Operations Team feels that a deputy is required to meet the need of the division because it oversees HR, materials management, planning, environmental services, safety and security, facilities maintenance, and the IT and communications center. Many projects are going on, and GMHA is managing two facilities, GMHA and SNF, so the challenge of doing normal operations and Covid-19 response is tremendous.</p> <p>According to Dr. Aguon, the projects are huge, and a third person is essential to continue the operations.</p> <p>Trustee Davis motioned, and it was seconded by Trustee Allen to approve Res. 2022-07 and 2022-08. The motion carried with all ayes.</p>			
<p>4. <u>Organizational Chart – Revision to Operations Division</u></p>				
<p>5. <u>Res. 2022-09, Relative to Creating Seven (7) New Hospital Environmental Services Technician I Positions and Amending the Total Position FTE Count on the GMHA Staffing Pattern</u></p>	<p>Mr. Kando reported that the Environmental Services (ES) Department needs 60 full-time FTEs. The department has 53 FTEs and requires an additional seven new positions. GMHA currently has limited-term appointments from the Dept of labor program to serve during covid-19. Mr. Kando expressed that although they are LTAs, they are GMHA employees, and they deserve an opportunity to compete for a position in ES because they performed above and beyond, especially during the Covid-19 response.</p>			

	<p>Mrs. Perez-Posadas added that along that same vein, GMHA staff have responded in the community to help other agencies as part of the Care Act that Governor Leon Guerrero put forth, Covid Unified Response Effort. They call upon GMHA to help other agencies.</p> <p>Mr. Kando said not to do housekeeping for their facilities but to train other agencies to sustain themselves and their staff.</p> <p>Trustee Waibel motioned, and it was seconded by Trustee Davis to approve the Organizational chart with the revisions to the Operations Division and Res. 2022-09. The motion carried with all ayes.</p>			
C. <u>Facilities, Capital Improvement Projects, and Information Technology</u>	<p>Mr. Kando reported the following:</p> <ul style="list-style-type: none"> • HVAC Upgrade: GMHA procured 22 out of 62 air handling unit replacements. 2 out of the 64 are complete. • Chillers for the SNF are being manufactured and expected in mid-December. Expanding pads are being installed. • 1 out of 4 OR surgical lights was installed, and the others are arriving. • Boiler #1 is being refurbished. Boiler tubes will be replaced. Testing will take place on October 28 to ensure there is no leaking. • Physician's parking ceiling repair: False ceiling was completely removed. • Roof and Envelope Upgrade: The first package from the designer for the lab and part of the 4th-floor rooftop is ready and expected within the week. GMHA will start procuring the construction phase to upgrade the roof. GMHA will be getting the full assessment to launch the other phases strategically. • C-Arm for IR room is completed, installed, and commissioned. There is also a new c-arm in the OR. 	Chair & Vice-Chair, Fac, CIP, & IT	None	Informational

	<ul style="list-style-type: none"> • Z-Wing: Lowest bidder was selected for the structural repairs of the Z-Wing pre-demolition. When the complete design is received, GMHA will procure the demolition phase in November and hopefully be awarded by December so that demolition can take place from January through March. <p>Ms. Rayna Cruz presented the following:</p> <ul style="list-style-type: none"> • EHR is 80% complete and is on pause due to the high Covid and Non-Covid census. The team hopes to resume in January 2022 and estimates a new go-live date in the 2nd qtr. 95% of the team were pulled back to the floors to provide patient care, and the 5% who remain are doing what they can to keep the project moving forward. • The team continues to build assessments and enter charges for the super build application but is also working to close out issues identified in round one of the integrated testing. • The MIS Team has been testing interfaces and making sure that they communicate with CareView. • The Laboratory Team is working hard to build the SoftLab application and keep the project on track to avoid further delays. • The EHR team was able to get integrated test results in a timely manner and started resolving issues right away. GMHA has a new Medical Records Administrator, Ms. Tina Quinata. The team is bringing her up to speed with the project. • The EHR Team achieved seven milestones but still has seven more to go until going live. 			
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	<ul style="list-style-type: none"> • The RCM Cloud is a new application currently in the development phase. • The team estimates the project to take 120 more days. Some constraints that might cause a delay include staff exhaustion, any issues identified from round two of integrated testing, and staff training. <p>Ms. Paula Manzon provided the following updates on the Telemedicine Program:</p> <ul style="list-style-type: none"> • The telemedicine service program is expanding. There are a few intensivists already in line, as well as a neonatologist, rheumatologist, and hospitalist. The telemedicine technician section is growing steadily also. • GMHA received a 2nd rounder and is steadily expanding equipment. • The Tele Tech program is being advertised to attract more candidates. • GMHA was awarded \$722k for the FCC grant. • The Informatics Team is initiating discussions of GMHA as a new clinical environment with Dr. Darren Sommers and the New York Institute of Technology in Arkansas. Dr. Sommers is a GMHA hospitalist for tele-med. 			
D. <u>Governance, Bylaws, and Strategic Planning</u>	<p>Trustee Nededog and Trustee Siliang reported the following:</p> <ul style="list-style-type: none"> • The subcommittee last met on October 19, 2021. • The board self-evaluations have been tallied. However, it has not been analyzed for further review by the chair and vice-chair of the subcommittee. • The Education Department reported that they would be rolling out phase 4 of the training and development dashboard starting November 1. 	Chair & Vice-Chair, GBSP	None	Informational

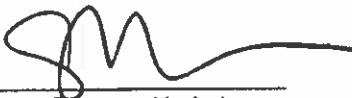
	<p>Mr. Kando added that the training and education dashboard is a consolidated electronic platform using MGMA and bringing in all other platforms to make it one master electronic platform for all staff. Managers will be able to track staff training which will be helpful when doing evaluations.</p> <p>Mr. Rabanal informed the board that the first phase is targeted to the supervisors and department heads so that they have an opportunity to try the platform before it is endorsed to their staff.</p> <ul style="list-style-type: none"> • Priority training based on the Employee Training and Development Survey includes customer service skills and communication, anger management, time management, critical thinking, and conflict resolution. • Leadership continues to update the strategic plan and team development plan. The update on the strategic plan progress report was emailed to the board members for their review and feedback. • Ms. Mai Habib continues to track and update the communications tracker. • There is no definite date for strategic planning training with Mr. Clifford Guzman. 			
E. <u>Quality and Safety</u>	<p>Trustee Allen reported the following:</p> <ul style="list-style-type: none"> • All committees continue to monitor indicators and metrics and report to Q&S every month. • The last subcommittee meeting took place on October 20, 2021. • Leadership safety walk rounds continue. It allows patients and staff to have face time with leadership, voice any concerns, and ask questions. • The strategic plan for CY2021-2022 was emailed to all trustees for review and is continuously updated. 	Chair & Vice-Chair, Q&S	None	Informational

	<ul style="list-style-type: none"> • To date, the hospital is pending receipt of CMS's official acceptance and approval of corrective action plans for the September 8 and 9 revisit survey. • The accreditation team continues to work with the Center for Improvement in Healthcare Quality (CIHQ). The self-assessment is in progress, and the new deadline for submission is November 15. Once the self-assessment is completed, the Accreditation Team will create a report on compliance status with CIHQ standards, and then the initial action plan phase will take place. A mock survey will be held in 2022. • Mrs. Perez-Posadas reported that Ms. Danielle Manglona sent out a QAPI training presentation, and trustees must take the training. 			
F. <u>Finance and Audit</u> 1. <u>September 2021 Financials</u>	<p>The subcommittee did not meet in October. Ms. Hechanova reported the following based on the September 2021 financials:</p> <ul style="list-style-type: none"> • Collections were good in August and September, and the Hospital has been able to pay more vendors. • GMHA received \$7.3M in American Rescue Plan Act (ARPA) funds from the governor and was used to pay down the over 90-day payables. • The Fiscal Team continues to work with the RCM project consultants. They are looking at their processes and are finding a lot of shortfalls. The ultimate goal is to train employees to run the RCM in-house. • Expenses are still running a little high, mainly attributed to travel nurse costs. • Payables are down because of ARPA money received. 	Chair & Vice-Chair, F&A	None	Informational

	<ul style="list-style-type: none"> • FY2021 audit with Deloitte & Touche has begun. GMHA will be meeting with the OPA to discuss audit status. • The Guam PDN put out an article claiming that GMHA owes TakeCare Insurance Company \$7.3M. The article is not true. <p>GMHA met with TakeCare Executive President and a TakeCare board member, and they assured they would pay what is owed to GMHA. A meeting will take place with the TakeCare Administrator to discuss the matter further and reach an agreement based on the conclusion of the Ernst & Young reconciliation audit. Ms. Janelle Santos will be meeting with TakeCare on Friday to go over open items from the report and work on items that GMHA did not have a chance to respond to.</p>			
VIII. PUBLIC COMMENT				
	<p>Dr. Jerone Landstrom expressed concerns regarding attempted changes to the GMHA bylaws initiated by the previous GMHA Medical Executive Committee for the Department of Surgery regarding medical staff voting rights and medical staff active membership status.</p> <p>Dr. Alexandra Leon Guerrero gave a presentation regarding the issue as it has been a quandary in the Department of Surgery for the past several months. She believes that the issue goes beyond voting rights and into patient safety and legal liability as it relates to how we are assigning staff members their category.</p> <p>The matter will be discussed further at the next scheduled Joint Conference and Professional Affairs Subcommittee to determine a recommendation on how to proceed.</p>	Medical Staff	None	Open
IX. ADJOURNMENT				
	There being no further business matters for discussion, Chairwoman Obispo declared the meeting	All Board members	None	Approved

	adjourned at 7:04 p.m. motioned by Trustee Waibel and seconded by Trustee Davis. The motion carried with all ayes.			
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Transcribed by: 
 JAC Justine A. Camacho
 Administrative Officer

Submitted by: 
 Sarah Thomas-Neddog
 Secretary

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the October 27 2021, regular session meeting were accepted and approved by the GMHA Board of Trustees on this 29th day of December 2021.

Certified by: Theresa C. Obispo
 Theresa Obispo
 Chairperson

Digitally signed by Theresa C. Obispo
 DN: cn=Theresa C. Obispo, o=GMHA
 Memorial Hospital Authority, ou=Chief of
 the Board of Trustees
 email=thobispo@gmail.com, c=US
 Date: 2022.11.13 15:36:29 +1000

<p style="text-align: center;"> Regular Meeting of the Guam Memorial Hospital Authority Board of Trustees Tuesday, November 23, 2021 5:00 p.m. Zoom Video Conference </p>		ATTENDANCE		
		<u>Board Members</u> Present: Theresa Obispo, Sarah Thomas-Nededog, Byron Evaristo, Sharon Davis, Sonia Siliang, Glynis Almonte, Dr. Michael Um Absent: Melissa Waibel, Evangeline Allen	<u>Leadership</u> Present: Lillian Perez-Posadas, William Kando, Dr. Annie Bordallo, Dr. Joleen Aguon, Don Rabanal, Ana Belen Rada, Christine Tuquero, Yukari Hechanova, Danielle Manglona Absent: Liezl Concepcion, Dr. Jon Sidell <u>Guests</u> Jenelle Santos, Natasha Charfauros, Tricia Shimizu, John O'Connor, Jill Acda, Mai Habib, Paula Manzon, Edlyn Dalisay, Han Seo, PNC Digital, Jeremy Kelley, Chuck, Peskadot828, Kamalin Toves	
ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
I. CALL MEETING TO ORDER AND DETERMINATION OF QUORUM				
	After notices were duly issued pursuant to Title 5 GCA, Chapter 8, Open Government Law, Section 8107(a) and with a quorum present, Chairwoman Obispo called to order the regular meeting of the GMHA Board of Trustees at 5:01 p.m. on Tuesday, November 23, 2021 via Zoom Video Conferencing.	Chairperson	None	None
II. REVIEW AND APPROVAL OF MINUTES				
A. October 27, 2021	The October 27, 2021 minutes were tabled.	All Board Members	None	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. Patient Census	❖ Covid Census (as of November 23, 2021): 11 (2 ICU (1 on ventilator support), 4 Telemetry, 5 Med Surg) ❖ Non Covid Census (as of November 23, 2021): 169	Executive Management	None	Informational
B. Vaccination Clinic	❖ Percentage of vaccinated employees and physician providers: 96.9% ❖ Third dose/booster administered to employees: 640	Executive Management	None	Informational

	CMS released a vaccination mandate requiring all healthcare facilities that participate in Medicare/Medicaid programs to have 100% staff COVID vaccination by January 2022, including privileged staff, students, contractors, volunteers, and board members. To meet that deadline, staff need to receive their first dose by December 6, 2021. Obtaining a medical or religious exemption will be the only exemptions accepted.			
C. Travel Nurses	❖ # of Travel Nurses assigned to GMHA: 70 - combination of Medical Solutions and NuWest Nurses	Executive Management	None	Informational
D. UOG Graduate Nurses	❖ # of UOG Graduate Nurses at GMHA: 14 ❖ # of UOG Graduate Nurses processing at GMHA: 4	Executive Management	None	Informational
V. BOARD SUBCOMMITTEE REPORTS				
A. <u>Joint Conference and Professional Affairs</u>		Chair & Vice-Chair, JCPA	None	
1. <u>Res. 2022-10, Relative to the Appointment of Provisional Medical Staff Privileges</u> a. <u>Anthony Basel, MD</u> b. <u>Biju Thomas, MD</u> c. <u>Clark Knutson, MD</u> d. <u>Felipe Grimaldo, MD</u>	Trustee Dr. Um motioned, and it was seconded by Trustee Evaristo to approve Res. 2022-10 and 11. The motion carried with all ayes.			Approved
2. <u>Res. 2022-11, Relative to the Provisional Appointment of Allied Health Professional Medical Staff Privileges</u> a. <u>Kathryn Cooper, CNM</u> b. <u>Caprice Wright, CNM</u> c. <u>Lean Carlo Losinio, CNM</u>				Approved
3. <u>Membership Status and Election Update</u>	Trustee Dr. Um reported that Dr. Landstrom's membership status will remain active until the end of CY2021, given he fulfills the hands-on patient requirement and will continue to have voting privileges. If he does not meet the criteria, we will be reclassified. Dr. Landstrom was informed of the subcommittee's decision.			Approved

	Dr. Um motioned and it was seconded to approve the recommendation of Membership Status and Election Update for Dr. Landstrom. The motion carried with all ayes.			
B. <u>Human Resources</u>	There were no reports to present.	Chair & Vice-Chair, HR	None	Informational
C. <u>Facilities, Capital Improvement Projects, and Information Technology</u>	Trustee Davis reported that the subcommittee met at the SNU and did a walkthrough of the facility. Mr. Kando reported the following: <ul style="list-style-type: none"> The Marketing and Communications Director led a press conference showcasing the completion of the C-Arm project on November 23, 2021. The roof upgrade, Z-Wing demolition, and HVAC upgrade projects are in the procurement process. 	Chair & Vice-Chair, Fac, CIP, & IT	None	Informational
D. <u>Governance, Bylaws, and Strategic Planning</u>	Trustee Nededog reported the following: <ul style="list-style-type: none"> The self-evaluation is complete. The final report will be presented to the Board in December. The strategic plan for 2022 is in progress and the timelines are currently being worked on. Mai Habib, Marketing and Communications Director, presented a comprehensive communications plan. 	Chair & Vice-Chair, GBSP	None	Informational
E. <u>Quality and Safety</u>	Trustee Almonte reported the following: <ul style="list-style-type: none"> The Patient Safety Taskforce has met twice. They are currently working on getting all the champions to understand patient safety, as well as debunking myths about GMHA. The QAPI Indicators/Metrics are a work in progress and are being continuously monitored. 	Chair & Vice-Chair, Q&S	None	Informational

	<ul style="list-style-type: none"> • The subcommittee will provide the Annual QAPI Evaluation Report at the next PIC meeting. • The A-Team is establishing processes for accreditation. The self-assessments were submitted on November 15, 2021, with the exception of the anesthesia department. • The CMS CIHQ online training was completed by all department managers and representatives. November 22, 2021 was the completion deadline. • CMS is now allowing SNU residents to have visitors, regardless of visitor vaccination status. • The leadership team continues to conduct the Leadership Walk Rounds. They have been receiving positive feedback from the staff during the visits. <p>Ms. Manglona reported the following:</p> <ul style="list-style-type: none"> • The QAPI CIHQ Standards training was completed. With that, Contract Management will be the next training to take place. After, the respiratory department specific training will take place. • The submitted self-assessments are being reviewed to ensure completion. • A meeting is scheduled with Dr. Lim on Monday, November 29, 2021, to follow-up on the anesthesia department self-assessment. 			
F. Finance and Audit 1. <u>Res. 2022-12, Relative to Approving Seventy-Three (73) New Fees</u>	Trustee Evaristo informed the Board that of the 73 new fees, 49 are mainly in the operating room. During	Chair & Vice-Chair, F&A	None	Approved

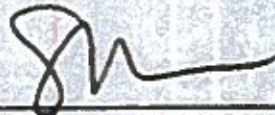
	<p>the public hearing, Take Care had some questions and the documents requested were provided.</p> <p>Trustee Davis motioned, and it was seconded by Trustee Dr. Um to approve Res. 2022-12. The motion carried with all ayes.</p> <p>-----</p> <p>Trustee Evaristo recognized Mr. Lawrence Quinto for the creation of the RCM project dashboard.</p> <p>Trustee Evaristo reported the following:</p> <ul style="list-style-type: none"> • RCM has aided in identifying areas of improvement and is providing a new perspective on out dated legacy processes. • RCM automates the collection process and reports. It highlights the areas that need to be followed-up on and forces personnel to review them. • The cash balance for October is \$199,000, which is a lot lower compared to the previous months. <p>Mr. Kelley reported that the Claim Scrubber will be implemented and will increase effectiveness and productivity.</p> <p>Mrs. Perez-Posadas added that the RCM has a three prong approach: 1.) Improving cash flow; 2.) Providing education and training for staff; and 3.) Revamping processes.</p> <p>Ms. Santos reported the following:</p> <ul style="list-style-type: none"> • The Claim Scrubber will be launched earlier than anticipated. With that, the AS400 will no longer be in use for billing. • The second phase of the MedSphere Project-patient accounting system project, which is 			Informational
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	<p>the implementation of the RCM cloud, is projected to be implemented in 2022.</p> <ul style="list-style-type: none"> Discharged Not Final Bill (DNFB) report is a category of accounts that are being held as it does not meet the qualifications to move to the billing process. Some of the issues include registration, coding, chart deficiencies, etc. As of present, the DNFB is at \$9.6M. 			
VI. PUBLIC COMMENT				
	There were no public comments made.	None	None	None
VII. ADJOURNMENT				
	There being no further business matters for discussion, Chairwoman Obispo declared the meeting adjourned at 5:53 p.m. motioned by Trustee Almonte and seconded by Trustee Nededog. The motion carried with all ayes.	All Board members	None	Approved

Transcribed by:


Kamalin Toves
Administrative Assistant

Submitted by:


Sarah Thomas-Nededog
Secretary

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the November 23, 2021, regular session meeting were accepted and approved by the GMHA Board of Trustees on this 29th day of December 2021.

Certified by:

Theresa C. Obispo
Theresa Obispo
Chairperson

Digitally signed by Theresa C. Obispo
DN: cn=Theresa C. Obispo, o=GMHA
Reason: I am the Signer of this Document
Date: 2021.12.29 13:28:15 -0500



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDÁT ESPETÁT MIMURIÁT GUÅHÑ

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
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BOARD OF TRUSTEES Official Resolution No. 2022-13

“RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Todd Zisholtz, MD	Medicine	Family Medicine	November 30, 2022
Juan Quiros, MD	Medicine	Cardiology	November 30, 2022
Mahaboob Alam, MD	Medicine	Cardiology	November 30, 2022

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.3; and

WHEREAS, the Medical Executive Committee met on November 24, 2021 and the Joint Conference and Professional Affairs Committee met on December 1, 2021 and recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Provisional Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Provisional Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

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

DULY AND REGULARLY ADOPTED ON THIS 29th DAY OF DECEMBER 2021.

Certified by:

Theresa C. Obispo

Theresa Obispo
Chairperson

Digitally signed by Theresa C. Obispo
DN: cn=Theresa C. Obispo, o=Guam Memorial
Hospital Authority, ou=Chair of the Board of
Trustees, email=tcobispo@gmail.com, c=US
Date: 2022.01.07 11:15:35 +1000

Attested by:

Sarah Thomas-Nededog
Secretary



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDĀT ESPETĀT MIMURIĀT GUĀHĀN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
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BOARD OF TRUSTEES Official Resolution No. 2022-14

“RELATIVE TO THE PROVISIONAL APPOINTMENT OF ALLIED HEALTH PROFESSIONAL MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Shiela Sua, CRNA	Anesthesia	Certified Registered Nurse Anesthetist	November 30, 2022

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.7.; and

WHEREAS, the Medical Executive Committee met on November 24, 2021 and the Joint Conference and Professional Affairs Committee met on December 1, 2021 and recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Provisional Allied Health Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Provisional Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

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

DULY AND REGULARLY ADOPTED ON THIS 29th DAY OF DECEMBER 2021.


Certified by:

Theresa C. Obispo

Theresa Obispo
Chairperson

Digitally signed by Theresa C. Obispo
DN: cn=Theresa C. Obispo, o=Guam Memorial
Hospital Authority, ou=Chair of the Board of
Trustees, email=tcobispo@gmail.com, c=US
Date: 2022.01.07 11:15:52 +1000

Attested by:


Sarah Thomas-Nededog
Secretary



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDĀT ESPETĀT MIMURIĀT GUĀHĀN

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BOARD OF TRUSTEES Official Resolution No. 2022-15

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Weerawat Tananusont, MD	Medicine	Internal Medicine	November 30, 2023

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee met on November 30, 2021 and the Joint Conference and Professional Affairs Committee met on December 1, 2021 and recommended approval of Active Medical Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

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

DULY AND REGULARLY ADOPTED ON THIS 29th DAY OF DECEMBER 2021.

Certified by:

Theresa C. Obispo

Theresa Obispo
Chairperson

Digitally signed by Theresa C. Obispo
DN: cn=Theresa C. Obispo, o=Guam Memorial
Hospital Authority, ou=Chair of the Board of Trustees
email=thobispo@gmail.com, c=US
Date: 2022.01.07 11:16:10 +1000

Attested by:

Sarah Thomas-Nededog
Secretary

GMHA Nurse Recruitment and Retention Initiatives

(Updated November 6, 2021)

Background Information

Why is there a nursing shortage?

Nursing staff shortages are not unique to Guam. The U.S. is in the midst of a critical nursing shortage that is expected to continue through 2030. We have an aging population, an aging workforce, limited supply of new nurses, and nurses leaving the workforce.

The Growing Nursing Shortage: The U.S. is projected to experience a shortage of Registered Nurses (RNs) that is expected to intensify as Baby Boomers age and the needs for health care grow. Compounding the problem is the fact that nursing schools across the country are struggling to expand capacity to meet the rising demand for care, given the national movement toward health care reform.

By 2022, there will be far more registered nurse jobs available than any other profession, at more than 100,000 per year.

The bravery and dedication of America's nurses have been displayed in front-page newspaper stories across the country throughout the COVID-19 pandemic. However, the pandemic has also been a huge strain on nurses and the healthcare system, due in part to limited staff and resources. The nursing shortage facing America began long before the pandemic propelled it into the headlines once again.

Demand is on the Rise: As of February 2021, registered nursing was the fifth-most in-demand job in the American workforce, according to LinkedIn. Healthcare facilities are searching for skilled RNs because they are facing increased patient demand for care.

The country has a larger population over the age of 65 than ever before in its history, composed primarily of baby boomers (those born between 1946 and 1964). This 65+ demographic has grown rapidly, jumping from 41 million people in 2011 to 71 million in 2019—an enormous 73% increase. And the U.S. Census Bureau projected that number to continue to rise, estimating it will reach 73 million by 2030.

With better and more accessible healthcare, the growing population of seniors requires more health services due to age-related conditions. Lengthened lifespans stretch out the timeframe when patients require services, thus adding pressure to an already strained healthcare system.

With more than 500,000 seasoned RNs anticipated to retire by 2022, the U.S. Bureau of Labor Statistics projects the need for 1.1 million new RNs for expansion and replacement of retirees, and to avoid a nursing shortage.

The Educator Exodus: Nurses need to be taught by other nurses. As the average age of the RN population has increased, so has the age of RNs who have stepped into the role of educator. They, too, are looking toward retirement, leaving nursing schools without a strong pipeline of teachers to take their place.

GMHA Nursing Numbers:

Nursing Position	Amount employed
Registered Nurses	275 (239 full-time/36 part-time)
Licensed Practical Nurses	20 (17 full-time/3 part-time)
Travel Nurses	68
Administrative/Leadership/Management Nurses	32
Graduate Nurse	4 (all part-time)

Numbers of Incoming and Outgoing Nurses:

January-December 2020	Recruitment: 47 (32 RNs, 1 LPN, 14 GNs) Resignations/Retirement: 35
January 2021- Present	Recruitment: 25 RN, 3 LPN, 4 GN Resignations: 18 RN, 4 LPN Retirement: 1 RN, 1 LPN Discontinued inactive PT: 10 RN, 1 LPN Convert FT to PT: 8 RN, 1 LPN

Number of Nurse Needs Per Unit:

Unit	Total Beds	Total Nurses Required	Nurses on staff (Locally-hired)	Remaining Needs
Intensive Care Unit	14	36	18	18
Operating Room/PACU	3 OR 6 PACU	19	17	2
Intervntl. Rad/Cath Lab	2-3	4	2	2
Emergency Room	10 ER regular 2 trauma 2 iso 2 exam rms 2 holding 5 Care-I	42	37	5
Hemodialysis	6-8 HemoBay 3 Bedside	12	10	2
Telemetry-Progressive Care Unit	24	30	21	9
Medical-Surgical I	27	27	26	1
Medical-Surgical II	14	18	11	7
Surgical Unit	27	30	27	3
Pediatrics Unit	10 Peds 4 PICU	20	17	3
Nursery/NICU	4 NICU 10 Intermed 16 Regular	22	21	1
OB Ward	20	22	21	1
Labor and Delivery	10	24	21	3
Skilled Nursing Facility	18	15	14	1
Total		321	263	58

Changes during COVID Surge:

Unit	Formerly known as	Total Beds	Total Nurses Required	Nurses on staff (Locally-hired)	Travel nurses (temporary fill)	Total Remaining RN Needs
Care 1	Urgent Care	5	8	0	---	8
Care 2 (ICU level)	Special Services	4	12	0	(From C5)	12
Care 3 (Telemetry)	Pediatrics	19	25	11	11	14
Care 4 (Telemetry-PCU)	Tele-PCU	24	30	21	9	9
Care 5	ICU	14	38	18	31 (for C2/C5)	20
Care 6	Med-Surg	27	27	26	---	1
Emergency Room	Same with COVID work flow	10 ER regular 2 trauma 2 iso rms 2 exam rms 2 holding 5 Care-I	47	37	10	10
Hemodialysis and Outpatient Hemodialysis	In-Patient HD only	6-8 HemoBay 3 Bedside	14	10	4	4
Pediatrics/PICU	Med-Surg II	14	20	17	1	3
Surgical Unit	Same	27	30	27	---	3
Nursery/NICU	Same	4 NICU 10 Int. 16 Regular	22	21	---	1
OB Ward	Same	17	22	21	---	1
Labor and Delivery	Same	10	24	21	---	3
Operating Room/PACU	Same	3 OR 6 PACU	19	17	---	2
Interventional Rad/Cath Lab	Same	2-3	4	2	2	2
Skilled Nursing Facility	Same	27	18	17	---	1
Total			360	266	68	94

GMHA Compared to Other Agencies, RN Starting Wages (with new DOA adjustments):

GMHA	DPHSS	DOE	GBHWC
Staff Nurse I N-K \$19.98 \$24.98 (+25%)	Comm. Health Nurse I N-L \$21.92 \$25.21(+15%)	School Health Counselor I (non-existent) ----	Psychiatric Nurse I N-M \$24.21 \$30.26 (+25%)
Staff Nurse II N-M \$24.21 \$30.26 (+25%)	Comm. Health Nurse II N-M \$24.21 \$27.84 (+15%)	School Health Counselor II N-L \$21.92 \$24.11 (+10%)	Psychiatric Nurse II N-N \$26.60 \$33.25 (+25%)
Staff Nurse III N-N \$26.60 \$33.25 (+25%) <not yet open>	---	School Health Counselor III N-M \$24.21 \$26.23 (+10%)	Psychiatric Nurse III N-O \$29.34 \$36.68 (+25%)

GMHA RN and LPN Wages:

Position	Starting Wage (+25%)	5 years exp (+25%)	10 years exp (+25%)	20 years exp(+25%)
Staff Nurse I	\$19.98 (24.98)	\$24.06 (30.08)	\$26.58 (33.23)	\$31.07 (38.84)
Staff Nurse II	\$24.21 (30.26)	\$29.16 (36.45)	\$32.22 (40.28)	\$37.66 (47.08)
LPN I	\$15.43 (19.29)	\$18.59 (23.24)	\$20.53 (25.66)	\$24.00 (30.00)
LPN II	\$16.73 (20.91)	\$20.15 (25.19)	\$22.26 (27.83)	\$26.02 (32.53)

Active Strategies:

1.	Maintain Current Differentials	Board of Trustees Resolutions: <ul style="list-style-type: none"> Specialty Area Differential (ICU, Hemo, ER) 15% ICU Progressive Differential 40% In Accordance with Executive Order: <ul style="list-style-type: none"> COVID Differential 10%
2.	Recruitment: UOG BSN Class of 2021	29 Graduates: <ul style="list-style-type: none"> 25 Attended GMHA Meet & Greet Event 22 Interested in working at GMHA as an RN 21 Passed NCLEX (as of 11/6/21) 13 Applied at GMHA (6 at GRMC)
3.	DOA Nurse Wage Increase	Effective 8/1/2021: <ul style="list-style-type: none"> Base Wages increased by 15% GMHA RN/LPN Work Differential 25% (replaced the BOT 16% differential)
4.	Offer Above Step Rates for eligible New Hires and Promotions	Incentives under 4GCA, Chapter 6, §6229: <ul style="list-style-type: none"> Eligible for nurses with hospital work experience Max is limited to Step 10

Proposed Strategies:

1.	Establish Nursing Career Pathways	<p><i>Leadership and Administrative Pathways:</i></p> <ul style="list-style-type: none"> • Nursing Administrative and Leadership positions • Nursing Management positions <p><i>Clinical Pathways for Specialty Units:</i></p> <ul style="list-style-type: none"> • ICU, OR, Hemo, ER
2.	Enhancement of clinical performance	<p><i>Build the Staff Nurse Training Officer Team</i></p> <ul style="list-style-type: none"> • To assess learning needs specific to their clinical areas • Further develop knowledge, skills, and performance, thus improving patient outcomes • To support nursing staff to boost confidence and work optimally with other members of the healthcare team
3.	Upward mobility opportunity for Staff Nurses	<p><i>Open the Staff Nurse III position</i></p> <ul style="list-style-type: none"> • Will allow upward mobility for clinical experts in their areas • Will take a lead role in assisting the Unit Supervisor, focusing on strengthening clinical practices and management of care
4.	Offer a Charge Nurse Incentive	<ul style="list-style-type: none"> • Charge nurses oversee specific departments and are responsible for the many details that make a unit run smoothly. While charge nurses have bedside responsibilities, they are also the person who coordinates the schedules and assigns each nurse's duties and responsibilities. They ensure that admissions and discharges are running smoothly and that all supplies and medications are available as needed, while also being available to communicate with physicians, members of the healthcare team, patients, and family members should an issue require attention.
5.	Explore Individual Contracts for Nurses	<p><i>Pros:</i></p> <ul style="list-style-type: none"> • Less Expensive compared to travel agency contracts • Attractive to those seeking short-term employment <p><i>Cons:</i></p> <ul style="list-style-type: none"> • Applicants look for food, housing, and travel stipends • Permanent employees may seek this as an employment option • Will benefit from a coordinator or recruiter
6.	Explore Per Diem Rates	<p>Regulations include:</p> <ul style="list-style-type: none"> • Max 30 hours per pay period

		<ul style="list-style-type: none"> • Beyond 30 hours, additional hours will be paid at Step 1 • Not eligible for overtime rates • Not eligible for night differential • Not eligible for holiday pay, certification pay, on-call pay, and weekend differentials • Complicated payroll management
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Recruitment and Retention Challenges

- Lower base wages compared to national wages
- Remote location from resource pools
- Limited numbers of local nurse graduates from UOG and GCC
- Limited upward mobility for clinical nurses
- Pay structure same for all units (no difference in wages for higher skilled or specialty areas)
- Recommendation for charge nurse incentive (common in other hospitals)
- Working environment, workplace challenges

Goal to Decrease Travel Nurses

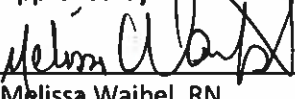
Unit	Needs to keep current levels of care	Current Number	Goal by Feb 2022	Goal by April 2022
Hemodialysis	4	4	2	0
ER	10	10	6	3
Tele (2 units)	23	20	15	10
ICU	32	32	22	18
IR/CATH	2	2	1	0
TOTAL	71	68	46	31

This is a living document, to be evaluated and adjusted annually or as necessary.

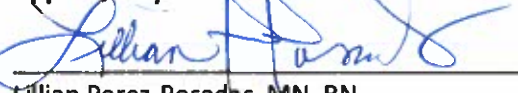
Submitted by:


 Christine Tuquero, MSN, RN
 Assistant Administrator, Nursing Services


Approved by:


 Melissa Waibel, RN
 Chairperson
 GMHA BOT Human Resources Subcommittee

Approved by:


 Lillian Perez-Posadas, MN, RN
 Chairperson
 Executive Management Committee

Approved by:


 Theresa Obispo
 Chairperson
 GMHA Board of Trustees



GUAM MEMORIAL HOSPITAL AUTHORITY

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BOARD OF TRUSTEES

Official Resolution No. 2022-16

“RELATIVE TO AMENDING THE MINIMUM QUALIFICATIONS AND NECESSARY SPECIAL QUALIFICATION REQUIREMENTS OF THE MEDICAL RECORDS CODER I AND II POSITIONS”

WHEREAS, on October 28, 2021, the Hospital Administrator/CEO approved the petition for amendment of the Medical Records Coder I and II position minimum qualifications requested by the Chief Financial Officer; and

WHEREAS, recruitment efforts into the entry-level medical records coder I position, reveal an insufficient number of qualified applicants meeting the current minimum qualifications for the position; and

WHEREAS, the amendments of the minimum qualification requirements is needed to align the two positions and clarify the acceptable certification, training, and experience requirements to become a medical records coder at both the entry-level and skilled-level positions; and

WHEREAS, the main distinction in qualifications between the two positions is that at the entry-level, one year of medical coding experience or a course in medical coding are sufficient for eligibility; and

WHEREAS, at the skilled level, an applicant must have obtained certification as a medical coder in at least one of five or more options to include medical coding experience of the completion of a medical coder course; and

WHEREAS, the Human Resources Subcommittee on November 9, 2021 recommended approval to accept the proposed amendments and minimum qualification, training, and experience of the Medical Records Coder I and II positions; and

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

RESOLVED, that the GMHA Board of Trustees accepts the Human Resources Subcommittee’s recommendation and approves the amendment to the class specification (the amendment has no effect on the compensation of the positions); and be it further

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



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDÂT ESPETÂT MIMURIÂT GUÅHÅN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



DULY AND REGULARLY ADOPTED ON THIS 29th DAY OF DECEMBER 2021.

Certified by:

Theresa C.

Obispo

Theresa Obispo

Chairperson

Digitally signed by Theresa C. Obispo
DN: cn=Theresa C. Obispo, o=Guam Memorial
Hospital Authority, ou=Chair of the Board of
Theresa, email=theresaobispo@gmail.com, c=US
Date: 2022.01.07 11:16:32 -1000

Attested by:

Sarah Thomas-Nededog

Secretary

MEDICAL RECORDS CODER I**NATURE OF WORK IN THIS CLASS**

This is technical work involved in coding and abstracting of in-patient, ambulatory surgery, urgent care, emergency room, skilled nursing unit and out-patient services health records.

Employees in this class are responsible for coordinating the data abstracted.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed.)

Assigns ICD-10-CM diagnostic, procedural codes to inpatient records, assigns ICD-10-CM diagnostic, procedural, and CPT codes to outpatient records.

Codes all diagnoses and procedures on in-patient, ambulatory, urgent care, emergency room, skilled nursing unit and out-patient charts using the International Classification of Diseases, 10th Revision: Clinical Modification (ICD-10), Current Procedural Terminology (CPT), Health Care Financing Administration's Common Procedural Coding System (HCPCS), Uniform Hospital Discharge Data Set (UHDDS) definitions and established sequencing guidelines.

Ensures that all data in patients' charts are complete and accurate for assigning of ICD-10-CM, CPT and HCPCS codes by working closely with the medical staff to clarify entries in the patients' charts, and when directed by the physician, add diagnoses as necessary and/or change an incorrectly described diagnosis.

Enters abstracted data and assigned diagnostic and procedural codes into the computer in an accurate and timely manner.

Generates timely reports on the abstracted data and makes recommendations for improvement to the Medical Health Records Administrator.

Applies quality improvement and volume indicators to the coding, abstracting, and reports generated.

Reads materials, views educational films, and attends meetings and workshops pertinent to coding of patient health records.

Applies computer knowledge and experience to strengthen and continue to build a strong automated management information system.

Respects each patient's right to privacy, particularly the privacy of the medical record and safeguards the confidential information of each patient record.

Performs related duties as assigned.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of the principles and practices of ICD-10-CM, ICD-10-PCS and the CPT-4 coding systems.

Knowledge of anatomy, physiology, and their application to medical science.

Knowledge of hospital rules governing medical record practices.

Knowledge with clinical encoders and groupers.

MEDICAL RECORDS CODER I**0.239**

Ability to interpret and apply pertinent federal, state, local laws, and regulatory guidelines relative to coding and abstracting of patient information.

Ability to operate manual and automated systems and to enhance their effectiveness.

Ability to participate in on-going coding training and advancement

Ability to work effectively with employees and the public.

Ability to communicate effectively, orally and in writing.

Ability to maintain records and prepare reports.

Must be detail oriented and self-motivated.

MINIMUM EXPERIENCE AND TRAINING:

- A. Graduation from High School or successful completion of a General Equivalent Development (GED) Test and one (1) year of medical records coding experience related to patient records using ICD-10-CM, ICD-10-PCS, and the CPT-4 coding systems or completion of an ICD-10-PCS or ICD-10-CPT course from an accredited professional coding organization or other approved coding certification program; or
- B. Any equivalent combination of experience and training which provides the minimum knowledge, abilities and skills.

ESTABLISHED: November 1993

AMENDED: December 29, 2021

PAY GRADE/PLAN: J (GPP)

HAY EVALUATION

KNOW HOW:	DI1	152
PROBLEM SOLVING:	C3 (25%)	38
ACCOUNTABILITY:	CNIV	50
TOTAL POINTS -		240

Theresa C.
Obispo

Digitally signed by Theresa C. Obispo
DN: cn=Theresa C. Obispo, o=Guam
Memorial Hospital Authority, ou=Chair of
the Board of Trustees,
email=tcobispo@gmail.com, c=US
Date: 2022.01.13 15:56:54 +1000

**THERESA OBISPO, Chairperson
Board of Trustees**

MEDICAL RECORDS CODER II**NATURE OF WORK IN THIS CLASS**

This is technical work involved in coding and abstracting of in-patient, ambulatory surgery, urgent care, emergency room, skilled nursing unit and out-patient services health records.

Employees in this class are responsible for coordinating the data abstracted.

ILLUSTRATIVE EXAMPLES OF WORK (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed)

Assigns ICD-10-CM diagnostic, procedural codes to inpatient records; assigns ICD-10-CM diagnostic, procedural, and CPT codes to outpatient records.

Codes all diagnoses and procedures on in-patient, ambulatory, urgent care, emergency room, skilled nursing unit and out-patient charts using the International Classification of Diseases, 10th Revision: Clinical Modification (ICD-10), Current Procedural Terminology (CPT), Health Care Financing Administration's Common Procedural Coding System (HCPCS), Uniform Hospital Discharge Data Set (UHDDS) definitions and established sequencing guidelines.

Ensures that all data in patients' charts are complete and accurate for assigning of ICD-10-CM, CPT and HCPCS codes by working closely with the medical staff to clarify entries in the patients' charts, and when directed by the physician, add diagnoses as necessary and/or change an incorrectly described diagnosis.

Enters abstracted data and assigned diagnostic and procedural codes into the computer in an accurate and timely manner.

Generates timely reports on the abstracted data and makes recommendations for improvement to the Medical Health Records Administrator.

Applies quality improvement and volume indicators to the coding, abstracting, and reports generated.

Reads materials, views educational films, and attends meetings and workshops pertinent to coding of patient health records.

Applies computer knowledge and experience to strengthen and continue to build a strong automated management information system.

Respects each patient's right to privacy, particularly the privacy of the medical record and safeguards the confidential information of each patient record.

Performs related duties as assigned.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of the principles and practices of ICD-10-CM, ICD-10-PCS and the CPT-4 coding systems.

Knowledge of anatomy, physiology, and their application to medical science.

Knowledge of hospital rules governing medical record practices.

Knowledge with clinical encoders and groupers.

MEDICAL RECORDS CODER II**0.240**

Ability to interpret and apply pertinent federal, state, local laws, and regulatory guidelines relative to coding and abstracting of patient information.

Ability to operate manual and automated systems and to enhance their effectiveness.

Ability to participate in on-going coding training and advancement.

Ability to work effectively with employees and the public.

Ability to communicate effectively, orally and in writing.

Ability to maintain records and prepare reports.

Must be detail oriented and self-motivated.

MINIMUM EXPERIENCE AND TRAINING:

- A. Graduation from High School or successful completion of a General Equivalent Development (GED) Test and one (1) year of medical records coding experience related to patient records using ICD-10-CM, ICD-10-PCS, and the CPT-4 coding systems or completion of an ICD-10-PCS or ICD-10-CPT course from an accredited professional coding organization or other approved coding certification program; or
- b. Any equivalent combination of experience and training which provides the minimum knowledge, abilities and skills.

NECESSARY SPECIAL QUALIFICATION REQUIREMENT:

An active/current coding certification from an accredited professional coding organization such as the American Health Information Management Association (AHIMA), American Association of Professional Coders (AAPC) or other approved coding certification program. Certifications accepted include but are not limited to the following:

- Certified Professional Coder (CPC) – AAPC
- Certified Outpatient Coder (COC) – AAPC
- Certified Inpatient Coder (CIC) – AAPC
- Certified Coding Specialist (CCS) – AHIMA
- Certified Coding Specialist Physician Based (CCS-P) – AHIMA

ESTABLISHED: November 1993

AMENDED: December 29, 2021

PAY GRADE/PLAN: K (GPP)

HAY EVALUATION

KNOW HOW:	D12	175
PROBLEM SOLVING:	C3(29%)	50
ACCOUNTABILITY:	CNIV	<u>57</u>
TOTAL POINTS -		282

**Theresa C.
Obispo**

**THERESA OBISPO, Chairperson
Board of Trustees**

Digitally signed by Theresa C. Obispo
DN: cn=Theresa C. Obispo, o=Guam
Memorial Hospital Authority, ou=Chair of
the Board of Trustees,
email=thobispo@gmail.com, c=US
Date: 2022.01.13 15:37:45 +1000

**GUAM MEMORIAL HOSPITAL AUTHORITY
TAMUNING, GUAM**

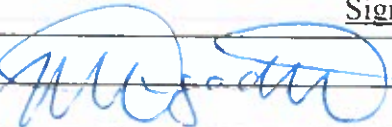
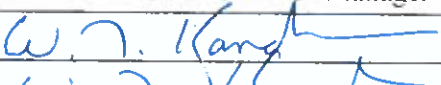
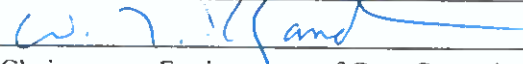


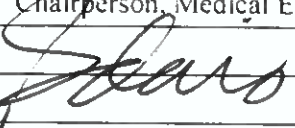
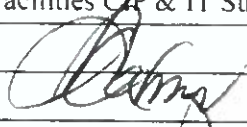
REVIEW AND APPROVAL

The signatories on this document acknowledge that they have reviewed and approved the following:

☐ Bylaws Submitted by
Department/Committee: _____

☐ Rules & Regulations Title: _____

☒ Policy & Procedure Evaluation for 2020 Life Safety Management Plan

	Date	Signature
Reviewed	7/28/21	
Approved		
Title	Zaldy Tugade, Hospital Facilities Maintenance Manager	
Reviewed	9-27-21	
Approved	9-27-21	
Title	William N. Kando, Chairperson, Environment of Care Committee	
Reviewed	10/06/2021	
Approved	10/06/2021	
Title	Lillian Perez-Posadas, Chairperson, Executive Management Council	
Reviewed	10/27/2021	
Approved	10/27/2021	
Title	Jonathan Sidell, MD, Chairperson, Medical Executive Committee	
Reviewed	21 dec 2021	
Approved		
Title	Sharon Davis, Chairperson, Facilities CIP & IT Sub-committee	
Reviewed		
Approved	29 Dec 2021	
Title	Theresa Obispo, Chairperson, Board of Trustees	



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDAT ESPETAT MIMURIAT GUAHAN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



Annual Evaluation of the Effectiveness of the Life Safety Management Program Calendar Year 2020

I. OBJECTIVES

What are the results of review and evaluations of the objectives for the Life Safety Management Program?

The program is established to ensure continuous upkeep and maintenance of all life safety systems and related equipment throughout the facility to assure the patients, staff and visitors are in a safe environment. The Life Safety Management responsibilities are shared amongst multi-disciplines. The hospital's Facilities Maintenance, and Safety Departments work collaboratively with the Environment of Care Committee to establish objectives for each calendar year. The six (6) primary objectives of this plan are:

1. To ensure the building structure and its components are in compliance with applicable NFPA 101 (2012) – Life Safety Code standards and local fire regulations.
2. To provide education to personnel on the elements of the Life Safety Management Program including organizational protocols for response to, (e.g. R.A.C.E., Hospital Evacuation Procedures) a fire.
3. To assure that staff competency training related to the Life Safety Management Program are effective, competency evaluations are administered via multiple related methods (e.g. In-person training, hospital-wide policy, frequent and consistent daily rounding by both departments, etc.) specific to satisfying individual Life-Safety element requirements.
4. To inspect, test, maintain (ITM), repair and certify the fire alarm system (FAS) devices, detection systems and fire suppression systems (FSS) in accordance with NFPA 101 (2012) – Life Safety Code standards, NFPA 10, 13, 14, 25, 72, & 99, as well as applicable federal and local fire regulations.
5. To inspect and maintain the integrity of the fire barrier/smoke compartmentalization and fire exit doors.
6. To institute Interim Life Safety Measures (ILSM) alongside the Infection Control Risk Assessment (ICRA) during construction or fire alarm or detection systems failures or impairments; and ensure staff and contractors are well versed on ILSM and ICRA.

Evaluation of the objectives established under the Life Safety Management Program:

Throughout the course of CY 2020 the Plan's objectives were assessed to the degree to which they were met:

1. The building structure and its components are in compliance with applicable NFPA 101 – Life Safety Code standards and local fire regulations. Modernization of Public Elevator Units 1 & 2 completed in April 2020.

This objective has been met.

2. All new hospital personnel go through a required orientation process which contains any and all updated pertinent hospital training, standard operating procedures, and information that accommodates a smooth indoctrination process regarding life-safety.

This objective has been met.

3. CY 2020 presented significant environment and operational adjustments that was challenging to achieve competency training and checks were given our emergency response to this COVID-19 pandemic. Competency evaluations were conducted quite often to accommodate any changes to the care environment, staff work practices, restrictions/appropriate use of PPE's, Exposure minimization practices, and appropriate containment.

This objective has been met.

4. Annual inspection, testing and maintenance scheduled for May was delayed due to COVID-19, but conducted on August 2020. Quarterly inspections were conducted in January 2021 and in June 2021. Annual inspection has been scheduled and to be completed by end of CY 2021.

This objective has been partially met.

5. Inspection, testing and maintenance (ITM) and risk assessments were conducted to determine the extent of fire barrier/smoke compartmentalization breaches throughout the facility and corrections were made as deficiencies were encountered. Main focus was based on above ceiling permits generated by in-house staff and outside contractors and service providers. Reporting of inspected doors now reflects both non-rated and fire rated doors. Maintained a 100% completion rate.

This objective has been met.

6. ILSM's were initiated as needed to address changes in egress due to conversion of areas to COVID-19 Care Sites to address COVID-19, as well as any other scheduled construction for clinical needs of patients, watchers, and staff.

This objective has been met.

Goals of the Life Safety Management Program for Calendar Year 2021:

Continue its six (6) primary objectives as stated above.

These objectives are accomplished through the following processes:

A. Criteria and Inventory:

- The Environmental Maintenance (EM) Shop at present uses hard copy checklist for its Preventive Maintenance (PM) of all Fire Rated Door Assemblies. In CY 2020 we acquired MPulse, a new Computerized Maintenance Management System (CMMS) software. Transition to this system will follow one shop at a time. Transition is scheduled for CY 2021 after Electrical Shop is completed.
- The Main Fire Alarm System, with its integrated software system, has a current inventory of all devices and components being monitored by Facilities and Maintenance Department and its Contractor. All devices are assigned with unique nomenclature and control numbers for ease of identification of devices and related components.

B. Maintenance Strategies:

- Inspection, Testing, Maintenance (ITM) and Certification – Fire alarm devices and fire suppression equipment are tested in accordance with the NFPA 101 (2012)– Life Safety -Code standards, NFPA 10 - Standard for Portable Fire Extinguishers NFPA, 13 - Standard for installation of Fire Sprinkler Piping System NFPA, 14 - Standard for Installation of Stand Pipes & Hose System NFPA, 25 - Standard Inspection Testing and Maintenance of Water Based Fire Protection System NFPA, 72 - National Fire Alarm and Signaling Codes & NFPA 99 - Health Care Facilities Codes as well as applicable federal and local fire regulations.
- Inspection and Preventive Maintenance – Fire Rated Door Assemblies and Fire Barrier/ Smoke Compartments are inspected and serviced in accordance with the NFPA 80 standards. Established frequencies for fire rated doors is monthly while inspection of wall partitions is quarterly covering each floor.
- Fire Rated Door Assembly Failures – The Facilities and Maintenance Manager reviews fire rated door problems, type of failures and submits a summary report identifying discrepancies to the Environment of Care Committee for review and corrective action on a monthly basis.

C. Continuing Education

Staff training and development is a continuous process in which staff learn :

- how to respond to fires;
- general fire safety guidelines specific to their departments and/or worksites;
- proper use and location portable fire extinguishers;
- and get familiarized with the location of oxygen shut-off valves and who is authorized to turn off these valves;
- location and use of evacuation chairs;

- plans/routes and how to properly evacuate by moving horizontally to the nearest smoke compartment and then vertically as needed;
- how to Keep egress free from obstructions and maintain combustible items at low inventory levels at normal times and while construction or renovation works are on-going relevant to applicable Interim Life Safety Measures (ILSMs).

II. SCOPE

What are the results of the Safety / Environment of Care Committee's review and evaluation of the scope covering the Fire Safety and Life Safety Management Plan / Program?

The Hospital Safety and Security Administrator focuses on the human aspects of Fire Safety such as safe work practices and emergency response/evacuation while the Facilities Maintenance Manager focuses on the physical aspects of Life Safety, such as operability of fire alarm/fire suppression equipment, facility design and construction, and maintenance of building systems and components. Based on CMS guidelines and accreditation standards and other applicable regulations, there have been no other changes to the organization and/or its mission that would necessitate further changes to the scope of the operation in CY 2020 and carried over in CY 2021.

The scope of the Life Safety Management Plan / Program for the upcoming year include: (Has something changed? i.e., added new services/responsibilities, physician practices)

The Life Safety Management Plan will remain the same for CY 2021. Emphasis on ILSM when applicable as the facility transitions as a result of patient surges generated by COVID-19 to various Care Sites.

List any items under consideration for addition to the plan/program at this time:

As previously mentioned, the Life Safety Management responsibilities are shared among multi-disciplines. The Facilities Maintenance, and Safety Departments work collaboratively with the Environment of Care Committee to establish objectives while implementing various programs, projects and activities to address current standards and practices.

Although there are no immediate changes suggested for addition to the plan at this time, the organization will continue to focus on enforcement and improvement of the plan/program by the following methods:

- Continue to ensure regulatory compliance through review of departmental fire safety and life safety standard operating procedures for compliance with newer OSHA and applicable NFPA codes;
- Continue to track emergency response and incident reporting while conducting fire drills in accordance with frequencies as required;
- Continue to conduct environmental risk assessments, hazardous surveillance risk

assessments and infection control risk assessments to improve overall program goals and objectives;

- Continued enforcement and documentation of ICRA / ILSM requirements during periods construction, renovation, maintenance activities or impairment of fire alarm systems;
 - Continue regular review and updates to the eSOC, BBI and PFI while tracking percentage of PFI's completed on time as deemed necessary reference to the implementation of newer applicable codes; and
 - Continue to provide new employee orientation and annual refresher training and development to elevate staff competency as it relates to Fire Safety and Life Safety Management Programs.
-

III. PERFORMANCE

Are Fire Safety and Life Safety Management reports maintained and reported to Safety/Environment of Care Committee at least quarterly? Please explain:

Yes, reports are submitted to the Environment of Care Committee on a monthly basis and to the Performance Improvement Committee on a quarterly basis.

Have there been any user errors/accidents over the course of the past year? Please explain and include actions taken to prevent recurrence:

No significant errors or accidents related to the Life Safety Management Program in CY 2020.

When problems or opportunities for improvement have been identified have actions been taken, documented and evaluated for effectiveness? Please explain:

Problem#1 – FAS has reached its 10-year useful life expectancy so a thorough assessment is ongoing and that refurbishment and upgrade was sought in CY 2020 but no quotes were submitted by G4S, the service provider. This will, therefore, be pursued in CY 2021.

Problem #2 – Schedule for inspection, testing and maintenance was delayed in CY 2020 due to COVID-19. However, we will be able to complete before CY 2021 ends.

What are the results of performance improvement projects selected for the year? How did these projects affect patient care delivery?

The matrix below reflects Performance Improvement monitoring activities and indicators detailing them into specific categories.

3. Fire Alarm System Testing Completed	100 %	75%	100 %	92%	100 %	80%	100 %	93%	100 %	100 %	100 %	100 %	100 %	98%	100 %	99%	96%
# of fire alarm system testing completed	5	3	4		4	4	4		1438	4	4		5	85	5		
# of testing scheduled	5	4	4		4	5	4		1438	4	4		5	87	5		
Data Breakdown																	
FIRE PUMP TESTING (weekly)	100 %	75%	100 %	92%	100 %	80%	100 %	93%	100 %	100 %	100 %	100 %	100 %	50%	100 %	83%	92%
# of fire pump testing completed	5	3	4		4	4	4		5	4	4		5	2	5		
# of testing scheduled	5	4	4		4	5	4		5	4	4		5	4	5		
FIRE DAMPERS TESTING (semi-annually)	---	---	---	---	---	---	---	---	---	---	---	---	---	100 %	---	100 %	100 %
# of fire dampers testing completed	0	0	0		0	0	0		0	0	0		0	55	0		
# of testing scheduled	0	0	0		0	0	0		0	0	0		0	55	0		
AHU TESTING (semi-annually)	---	---	---	---	---	---	---	---	---	---	---	---	---	100 %	---	100 %	100 %
# of AHU testing completed	0	0	0		0	0	0		0	0	0		0	28	0		
# of testing scheduled	0	0	0		0	0	0		0	0	0		0	28	0		
FIRE ALARM DEVICES TESTING (annually)	---	---	---	---	---	---	---	---	100 %	---	---	100 %	---	---	---	100 %	100 %
# of fire alarm devices testing completed	0	0	0		0	0	0		1433	0	0		0	0	1361		
# of testing scheduled	0	0	0		0	0	0		1433	0	0		0	0	1361		
NUMBER OF FIRE ALARM SYSTEM COMPONENTS THAT DID NOT PASS TESTING:				0				0				0				0	0
NOTE: Please discuss what specific components failed testing, and what was done to address them, in your quarterly report.																	

a. Number of Emergency Generator Testing Scheduled and Completed

Maintained at 82%, not in compliance. In CY 2020 the 650 KW Emergency Generator turbo hose gave up and was therefore in need of replacement. A temporary fix was made by GPA in September 2020, which allowed continuation of generator testing. OEM parts ordered and will be installed once received for permanent fix. Replacement of the older 1.6 Meg, through two (2) IFBs, did not materialize; and GMHA will continue to maintaining this Emergency Generator throughout CY 2021.

b. Number of Fire Rated Doors Scheduled and Completed Maintenance

Monthly inspection continues at 100% completion. Reporting changed to reflect only Fire Rated Doors but still continue to inspect, test and maintain all doors, rated and non-fire rated.

c. Number of Fire Alarm Devices Tested as Scheduled and Completed

More system troubles are experienced due to the system's age. It has met its useful life expectancy of 10 years. In CY 2021, assessment and recommendation from the

service provider, G4S, will be forthcoming. Replacement of devices and system repairs are done as it occurs. System annunciator at Communication Center is being relocated in CY 2021. Annual Testing completed in December 2020.

Has the facility selected processes for monitoring that need the most attention? Please explain.

None selected but emphasized for those that did not meet as all testing requirements and frequencies as required are all monitored and treated the same attention or importance.

Any revisions in the Fire Safety and Life Safety Management Plan / Program Performance Improvement Indicators / Measures for the upcoming year?

Minor revisions done for CY 2020. This is the inclusion of Fire Pump, Air Handling Unit and Damper Testing. The organization continues with the current number of performance improvement monitoring activities and measures for CY 2021

IV. PLAN/PROGRAM EFFECTIVENESS

Identify the Fire Safety and Life Safety Management Plan's / Program's strengths and weaknesses (What has been accomplished, what opportunities for improvement were identified?):

Strengths

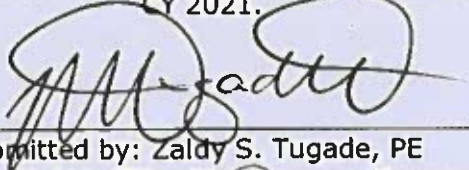
- 100% Attendance to all Continuing Education and cross training for involving the entire organization. Ability of in-house staff to perform trouble shooting, inspection, testing and maintenance of systems not covered and provided by our special service providers.
 - Weaknesses
 - Delay in provision of outside specialty service providers due to the advent of COVID-19. Though delayed, all were completed before end of CY 2020.
 - Late attendance by personnel on leave or other extenuating circumstances (e.g., COVID-19 response); and
 - Staff shortage due to other projects other than those allocated for PM. Projects like in-house construction to address immediate Life Safety issues (e.g., COVID-19 response).
-

What resources have been allocated toward these goals?

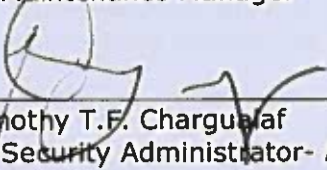
Budget submission to be allocated this or next year for upgrade of Fire Alarm System. Materials requested has been requisitioned to continue replacement of system downed components, which are anticipated to be received in CY 2021.

The following as part and parcel to performance improvement activity is considered as a priority for improvement and will be forwarded to the Safety/ Environment of Care Committee, Performance Improvement Committee and to administration.

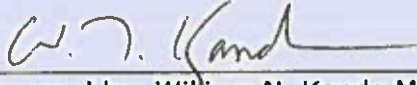
- Track ITM for Damper and AHU Shutdown, and continued Fire Pump testing for CY 2021.


Submitted by: Zaldy S. Tugade, PE
Hospital Facilities Maintenance Manager

Date: 7/23/2021


Concurred by: Timothy T.F. Charguaf
Hospital Safety & Security Administrator- Acting

Date: 9-23-2021


Approved by: William N. Kando MSM
Chairperson, Environment of Care Committee

Date: 9-27-2021

GMHA Electronic Health Record (EHR) PROJECT ROLLUP



Project Information

% Complete

86%

Status

Paused

Start Date

07/23/19

End Date

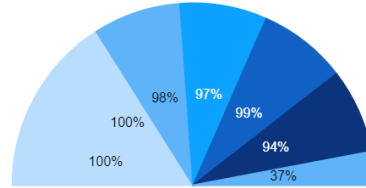
Estimated 06/11/22

Go-Live Date

Estimated 06/05/22

Phase Summary

- Phase 1: Vision/Scope
- Phase 2: Project Plan Development, Finalization & Acceptance
- Phase 3: System Setup
- Phase 4: Data Loads
- Phase 5: CareVue Design & Build
- Phase 6: Testing and System Validation
- Phase 7: Training



Phase Not Started

Phase 8: Deployment

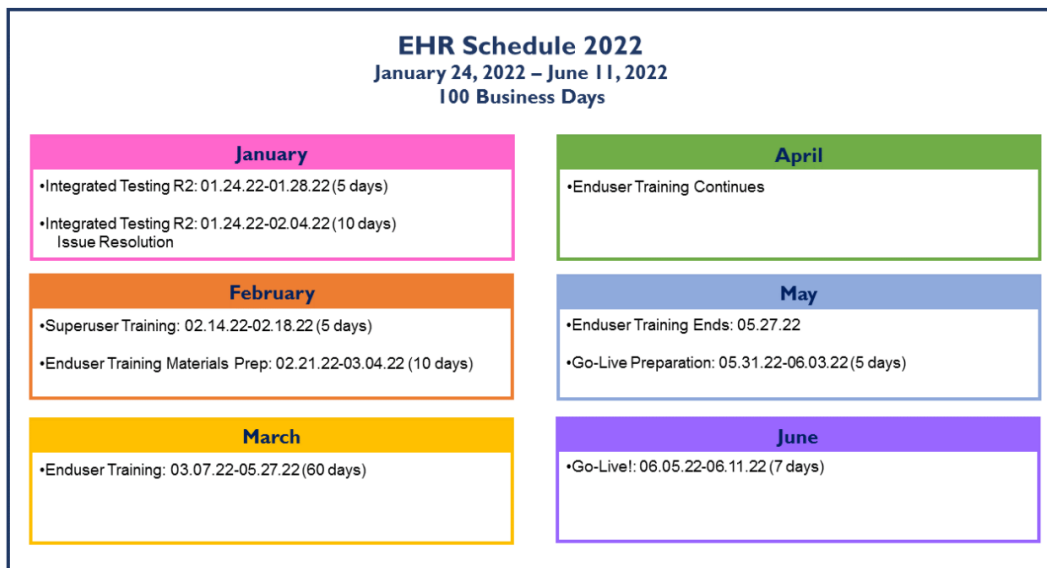
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Key Contacts

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Don Rabanal, Asst. Administrator of Administrative Services	don.rabanal@gmha.org
Paula Manzon, RN, Clinical Nurse Informatics Supervisor	paula.manzon@gmha.org
Vince Quichocho, IT Administrator	vince.quichocho@gmha.org
Rayna Cruz, Program Coordinator III	rayna.cruz@gmha.org



Project Schedule



Other Milestones

Milestone	Status	Start Date	Date Achieved	Updates
Status	●			
Softlab Implementation	●	01/21/21		Building and testing in progress.
Archival Tool Implementation	●	02/23/21		Phase 2 Internal Testing started Dec 15.
Revenue Cycle Management (RCM) Cloud Implementation	●	09/29/21		Enterprise Assessment questionnaire submitted to MSC on Dec 21. Site visit scheduling in progress - tentative dates week of Jan 17 or week of Jan 31.
Patient Portal Implementation	●	12/08/21		Demo presented on Dec 8.



Last Updated: December 29, 2021

Please contact Rayna Cruz for more information regarding this Dashboard: rayna.cruz@gmha.org

2022 Strategic Plan - Guam Memorial Hospital Authority

Benchmark Objectives

1st Quarter

- Finalize review of the internal GMHA CIHQ Self-Assessment for accreditation.
- Develop and implement Plan of Corrective Action in preparation for a CIHQ Accreditation Mock Survey.
- Ensure quarterly Directors' and Employee Town Hall meetings are conducted/fulfilled consistently and regularly.
- Complete organization-wide Quality Assessment & Performance Improvement (QAPI) data collection, analysis and reporting via the hospital's Performance Improvement Committee (PIC) and to the BOT Quality & Safety (Q&S) subcommittee.
- Develop and implement team-based strategies to enhance GMHA's holistic engagement with Patients, Residents and their Families.
- Complete Capital Improvement Projects (CIPs) in alignment with and in response to internal assessments (e.g., EOC Assessments, Compliance Tracers, Executive Leadership Walk Rounds, etc.) and external assessments (e.g., USACE Assessment, CMS Surveys, CIHQ Surveys, etc.).
- Complete a conceptual design draft of the new hospital at the desired/proposed Sagan Hinemlo Medical Campus.
- Commence New EHR key Super-users and Stakeholders Training.
- Increase recruitment and retention of nurses (RNs and LPNs) and other healthcare professionals as well as staff in the non-clinical operations.
- Reduce the utilization of travel nurses by 50%.
- Sustain a successful GMHA COVID-19 Response and Recovery program to include ensuring the created/restructured COVID Care Units are maintained in a state of "readiness" for immediate occupancy in the event of another COVID-19 surge.
- Complete the Alternate Care Facility/Site (ACF/ACS) project.
- Finalize and submit the FY2023 Budget.
- Publish the mandated annual Citizens' Centric Report (CCR).

January 2022

- Assess and monitor/track GMHA's COVID-19 Response and Recovery processes to include ensuring the created/restructured COVID Care Units are maintained in a state of "readiness" for immediate occupancy in the event of another COVID-19 surge.
- Continue collaborating with and engaging the Guam Healthcare Task Force to complete the Conceptual Design Plan for the new hospital facility and Medical Campus.

- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Achieve a reduction of the RN “vacancy rate” to 10% thereby increasing bed capacity throughout all the inpatient care units.
- Design a plan to reduce dependency, reliance and utilization of travel nurses.
- Achieve a cumulative collection rate of 60-percent of gross revenues from payers
- Recruit and retain additional and critical human resources for the division of clinical, fiscal, operations and medical services so as to reduce reliance on high-cost/off-island travel nurse staffing agencies.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF).
- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- Publish monthly internal newsletter to engage staff in all departments, boosting morale and creating an additional space for communication with all GMHA staff and BOT.
- Engage media on positive GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.

February 2022

- Continue collaborating with and engaging the Guam Healthcare Task Force to complete the Conceptual Design Plan for the new hospital facility and Medical Campus.
- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Finalize plan to reduce dependency, reliance and utilization of travel nurses.
- Achieve a cumulative collection rate of 60-percent of gross revenues from payers.

- Continue monitoring and tracking the hospital's and the island community's COVID Response and Recovery activities/strategies.
- Create Revenue Integrity Director, Revenue Cycle Management Director, and Hospital Comptroller positions.
- Recruit and retain additional and critical human resources for the division of clinical, fiscal, operations and medical services so as to reduce reliance on high-cost/off-island travel nurse staffing agencies.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF).
- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- Publish monthly internal newsletter to engage staff in all departments, boosting morale and creating an additional space for communication with all GMHA staff and BOT.
- Engage media on positive GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.

March 2022

- Finalize an evaluation of GMHA's COVID-19 Response and Recovery program to include:
 - PPE supplies and medical equipment
 - Plan to activate/deploy additional manpower and resources
 - "Readiness" status of the created/restructured COVID Care Units are maintained in a state of "readiness" for immediate occupancy in the event of another COVID-19 surge
- Continue collaborating with and engaging the Guam Healthcare Task Force and other official/contracted entities to complete the Conceptual Design Plan for the new hospital facility and Medical Campus.
- Submit report on FEMA on the completion of the ACF/ACS project.
- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Achieve and sustain the reduction of "RN "vacancy rate" of 10% or lower thereby maximizing the hospital's bed capacity throughout all the inpatient care units.

- Implement the plan to reduce dependency, reliance and utilization of travel nurses.
- Achieve a cumulative collection rate of 60-percent of gross revenues from payers.
- Finalize the FY2021 financial audit.
- Continue to recruit and retain additional and critical human resources for the division of clinical, fiscal, operations and medical services so as to reduce reliance on high-cost/off-island travel nurse staffing agencies.
- Complete a total of six (6) Executive Leadership Walk Rounds organization-wide (both GMH & SNF).
- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- Publish and disseminate the monthly internal newsletter to engage staff in all departments, continue boosting employee morale and creating an additional space for communication with all GMHA staff and BOT.
- Engage media on positive GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.
- Successful completion of the Z-Wing Demolition project.

2nd Quarter

- Conduct quarterly Directors' and Employee Town Hall meetings.
- Complete organization-wide Quality Assessment & Performance Improvement (QAPI) data collection, analysis and reporting via the hospital's Performance Improvement Committee (PIC) and to the BOT Quality & Safety (Q&S) subcommittee.
- Collaborate/Coordinate with CIHQ in conducting the accreditation "mock survey".
- Develop and implement team-based strategies to enhance GMHA's holistic engagement with Patients, Residents and their Families.
- Complete Capital Improvement Projects (CIPs) in alignment with and in response to internal assessments (e.g., EOC Assessments, Compliance Tracers, Executive Leadership Walk Rounds, etc.) and external assessments (e.g., USACE Assessment, CMS Surveys, CIHQ Surveys, etc.).
- Prepare to launch GMHA's New HER.

April 2022

- Continue collaborating with and engaging the Guam Healthcare Task Force and other official/contracted entities to complete the Conceptual Design Plan for the new hospital facility and Medical Campus.

- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Provide an evaluation report to the BOT HR subcommittee on the effectiveness of strategies/tactics to reduce the RN “vacancy rate” to 5-percent thus sustaining the hospital’s maximum bed capacity throughout all the inpatient and outpatient care units.
- Achieve a cumulative collection rate of 60-percent of gross revenues from payers.
- Recruit and retain additional and critical human resources for the division of clinical, fiscal, operations and medical services so as to reduce reliance on high-cost/off-island travel nurse staffing agencies.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF).
- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- Sustain monthly internal newsletter to engage staff in all departments, boosting morale and creating an additional space for communication with all GMHA staff and BOT.
- Engage media on positive GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.

May 2022

- Continue collaborating with and engaging the Guam Healthcare Task Force to complete the Conceptual Design Plan for the new hospital facility and Medical Campus.
- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Prepare response the CIHQ’s mock survey findings.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Maintain the reduction of the RN “vacancy rate” at 5-percent or lower thereby sustaining maximum bed capacity throughout all the inpatient care units.

- Continue a cumulative collection rate of 60-percent of gross revenues from payers.
- Finalize updated hospital fees for submission to Legislature per Public Law 36-54.
- Finalize Fiscal Services policies and procedures for revenue cycle management and revenue integrity.
- Recruit and retain additional and critical human resources for the division of clinical, fiscal, operations and medical services so as to reduce reliance on high-cost/off-island travel nurse staffing agencies.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF).
- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- Continue monthly publication of internal newsletter to engage staff in all departments, boosting morale and creating an additional space for communication with all GMHA staff and BOT.
- Engage media on positive GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.
- Successful completion of the HVAC and Roof Repair CIPs.

June 2022

- Continue collaborating with and engaging the Guam Healthcare Task Force to complete the Conceptual Design Plan for the new hospital facility and Medical Campus.
- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Explore additional and innovative strategies to continue the reduction of the RN and other clinical staff “vacancy rate”.
- Achieve a cumulative collection rate of 60-percent of gross revenues from payers.
- Recruit and retain additional and critical human resources for the division of clinical, fiscal, operations and medical services so as to reduce reliance on high-cost/off-island travel nurse staffing agencies.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF).

- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- Sustain monthly internal newsletter to engage staff in all departments, boosting morale and creating an additional space for communication with all GMHA staff and BOT.
- Engage media on positive GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.

3rd Quarter

- Conduct quarterly Directors' and Employee Town Hall meetings.
- Complete organization-wide Quality Assessment & Performance Improvement (QAPI) data collection, analysis and reporting via the hospital's Performance Improvement Committee (PIC) and to the BOT Quality & Safety (Q&S) subcommittee.
- Develop and implement team-based strategies to enhance GMHA's holistic engagement with Patients, Residents and their Families.
- Complete Capital Improvement Projects (CIPs) in alignment with and in response to internal assessments (e.g., EOC Assessments, Compliance Tracers, Executive Leadership Walk Rounds, etc.) and external assessments (e.g., USACE Assessment, CMS Surveys, CIHQ Surveys, etc.).
- Full implementation of GMHA's New HER.
- Obtain/Receive notice from CIHQ of Accreditation Deemed Status.

July 2022

- Continue collaborating with and engaging the Guam Healthcare Task Force to complete the Conceptual Design Plan for the new hospital facility and Medical Campus.
- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Examine/Explore innovative strategies to increase collection rate above 60-percent of gross revenues from payers.

- Recruit and retain additional and critical human resources for the division of clinical, fiscal, operations and medical services so as to reduce reliance on high-cost/off-island travel nurse staffing agencies.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF).
- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- Publish monthly internal newsletter to engage staff in all departments, boosting morale and creating an additional space for communication with all GMHA staff and BOT.
- Engage media on positive GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.

August 2022

- Continue collaborating, engaging and planning with the Guam Healthcare Task Force the ground breaking of the desired/preferred site for the new Sagan Hinemlo Medical Campus.
- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF).
- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- Publish monthly internal newsletter via GMHA's website to engage staff in all departments, boosting morale and creating an additional space for communication with all GMHA staff and BOT.
- Continue the collaborative working relationship with media on GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.

September 2022

- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Achieve a reduction of the RN “vacancy rate” to 5-percent thereby increasing bed capacity throughout all the inpatient care units.
- Achieve a cumulative collection rate of 60-percent of gross revenues from payers.
- Recruit and retain additional and critical human resources for the division of clinical, fiscal, operations and medical services so as to reduce reliance on high-cost/off-island travel nurse staffing agencies.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF).
- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- Publish monthly internal newsletter via GMHA’s to engage staff in all departments, boosting morale and creating an additional space for communication with all GMHA staff and BOT.
- Continue the collaborative working relationship with media on GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.

4th Quarter

- Continue conducting quarterly Directors’ and Employee Town Hall meetings.
- Complete organization-wide evaluation of the hospital’s Quality Assessment & Performance Improvement (QAPI) data collection, analysis and submit the annual evaluation report via the hospital’s Performance Improvement Committee (PIC) and to the BOT Quality & Safety (Q&S) subcommittee.
- Develop and implement team-based strategies to enhance GMHA’s holistic engagement with Patients, Residents and their Families.
- Complete Capital Improvement Projects (CIPs) in alignment with and in response to internal assessments (e.g., EOC Assessments, Compliance Tracers, Executive Leadership Walk Rounds, etc.) and external assessments (e.g., USACE Assessment, CMS Surveys, CIHQ Surveys, etc.).

- Evaluate the full implementation of GMHA's New HER.

October 2022

- Assist and support the "Ground Breaking" of the desired/preferred site for the Sagan Hinemlo Medical Campus.
- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF)
- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- Enhance/Expand the monthly publication of the hospital's internal newsletter to engage staff in all departments, boost employee morale and creating an additional space for communication with all GMHA staff and BOT.
- Continue the collaborative working relationship with media on GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.

November 2022

- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Recruit and retain additional and critical human resources for the division of clinical, fiscal, operations and medical services so as to reduce reliance on high-cost/off-island travel nurse staffing agencies.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF)

- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.

December 2022

- Sustain a successful GMHA COVID-19 Recovery to include ensuring the created/restructured COVID Care Units are maintained in a state of “readiness” for immediate occupancy in the event of another COVID-19 surge.
- Continue collaborating with and engaging the Guam Healthcare Task Force to complete the Conceptual Design Plan for the new hospital facility and Medical Campus.
- Sustain commitment and active participation in the Health Quality Innovation Network (HQIN) by implementing evidence-based innovative processes associated with improved patient safety outcomes.
- Provide ongoing healthcare training and education programs to Guam to include locally developed and implemented clinical and non-clinical training and education programs; and explore and pursue federal grants and programs for healthcare workforce development and training.
- Recruit and retain additional and critical human resources for the division of clinical, fiscal, operations and medical services so as to reduce reliance on high-cost/off-island travel nurse staffing agencies.
- Sustain Executive Leadership Walk Rounds organization-wide (both GMH & SNF).
- Continue the collaborative working relationships with the Executive and Legislative leaders to appropriate funding for the Capital Improvement Plans and Critical Facilities/Infrastructure Plans.
- Engage staff, stakeholders and general public through online platforms, to include consistent social media presence; and maintain a Key Performance Indicator (KPI) gathering format to track metrics.
- By the end of CY2022, a total of twelve (12) publications of the hospital’s monthly internal newsletters is available via the GMHA website.
- Continue the collaborative working relationship with media on GMHA updates at least once a month (e.g., news releases, videos, photos, opinion pieces); and maintain a media communications tracker for proactive opportunities.

Kamalin Toves

From: Kamalin Toves <kamalin.toves@gmha.org>
Sent: Tuesday, December 21, 2021 11:37 AM
Subject: NOTICE of GMHA Board of Trustees Meeting - December 29, 2021

FOR IMMEDIATE RELEASE – December 21, 2021

NOTICE OF PUBLIC MEETING

In accordance with the Open Government Law relative to notice of meetings and, in addition to notices published on the Government of Guam Public Notices Portal and in The Guam Daily Post, this serves as public notice for the regular meeting of the GMHA Board of Trustees on Wednesday, December 29, 2021 at 5:00 p.m. via Zoom Video Conferencing. Meeting ID: 913 5266 3119; Password: 556240.

Agenda :

I. Call to Order

II. Approval of the Minutes:

- A. October 27, 2021 Regular Board Meeting
- B. November 23, 2021 Regular Board Meeting

III. Old Business

IV. New Business

V. Management's Report

VI. Board Subcommittee Reports:

A. Joint Conference and Professional Support:

- 1. Res. 2022-13, Relative to the Appointment of Provisional Medical Staff Privileges
- 2. Res. 2022-14, Relative to the Provisional Appointment of Allied Health Professional Medical Staff Privileges
- 3. Res. 2022-15, Relative to the Reappointment of Active Medical Staff Privileges

B. Human Resources:

- 1. GMHA Nurse Recruitment and Retention Initiatives
- 2. Res. 2022-16, Relative to Amending the Minimum Qualifications and Necessary Special Qualification Requirements of the Medical Records Coder I and II Positions

C. Facilities, CIP and IT:

- 1. Evaluation for 2020 Life Safety Management Plan

D. Governance, Bylaws, and Strategic Planning:

- 1. CY2022 Strategic Plan

E. Quality and Safety

F. Finance and Audit

VII. Public Comment

VIII. Adjournment

For special accommodations, please contact Theo Pangelinan, EEO Officer, at (671) 647-2104, Monday through Friday from 8:00 a.m. to 5:00 p.m.

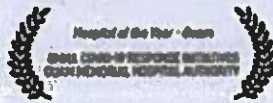
Thank you,



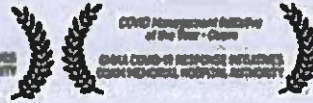
Kamalin Tores

Administrative Assistant
Guam Memorial Hospital Authority
850 Governor Carlos G. Camacho Rd.,
Tamuning, GU, 96913
Phone: (671) 647-2367 | Fax: (671) 649-0145

HEALTHCARE ASIA
AWARDS 2021



HEALTHCARE ASIA
AWARDS 2021




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GMHA Board of Trustees Meeting | 5:00 p.m., December 29, 2021

 PRINT

GMHA Board of Trustees Meeting | 5:00 p.m., December 29, 2021

Meeting

 **Posted on:** 12/21/2021 12:02 PM

 **Posted by:** Justine Camacho, Kamalin Toves, Administrative Assistant

 **Department(s):** GUAM MEMORIAL HOSPITAL AUTHORITY (/notices?department_id=51)

 **Division(s):** HOSPITAL ADMINISTRATION (/notices?division_id=178)

 **Notice Topic(s):** BOARD MEETING (/notices?topic_id=71)

 **For Audience(s):** PUBLIC (/notices?public=1)

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Hafa Adai!

The GMHA Board of Trustees will hold its regular meeting on **Wednesday, December 29, 2021 at 5:00 p.m.** via Zoom Video Conferencing.

Meeting ID: 913 5266 3119

Password: 556240

Agenda :

I. Call to Order

II. Approval of the Minutes:

A. October 27, 2021 Regular Board Meeting

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VI. Board Subcommittee Reports:**A. Joint Conference and Professional Support:**

1. Res. 2022-13, Relative to the Appointment of Provisional Medical Staff Privileges
2. Res. 2022-14, Relative to the Provisional Appointment of Allied Health Professional Medical Staff Privileges
3. Res. 2022-15, Relative to the Reappointment of Active Medical Staff Privileges

B. Human Resources:

1. GMHA Nurse Recruitment and Retention Initiatives
2. Res. 2022-16, Relative to Amending the Minimum Qualifications and Necessary Special Qualification Requirements of the Medical Records Coder I and II Positions

C. Facilities, CIP and IT:

1. Evaluation for 2020 Life Safety Management Plan

D. Governance, Bylaws, and Strategic Planning

1. CY2022 Strategic Plan

E. Quality and Safety.**F. Finance and Audit****VII. Public Comment****VIII. Adjournment**

For special accommodations, please contact Theo Pangelinan, EEO Officer, at (671) 647-2104, Monday through Friday from 8:00 a.m. to 5:00 p.m.

Germany: NATO will not allow Russia to dictate its posture

RUKLA, Lithuania (Reuters) — NATO will discuss Russia's security proposals but it will not let Moscow dictate the alliance's military posture, German Defense Minister Christine Lambrecht said on Sunday on a visit to German troops based in Lithuania to deter a Russian attack.

On Friday, Moscow set out a list of demands for the West that includes withdrawing NATO battalions from Poland and Estonia, Latvia and Lithuania, once part of the Soviet Union.

Russia is also demanding a legally binding guarantee that NATO will give up any military activity in Eastern Europe and Ukraine and an effective Russian veto on future NATO membership for Ukraine — which the West has already ruled out.

"We need to solve the current tensions on the diplomatic level but just as well by putting up a credible deterrence," Lambrecht told reporters in Rukla on her first visit to German troops abroad.

The combat units, deployed three years after Moscow's annexation of the Ukrainian peninsula Crimea in 2014, are meant to stall an assault and buy time for additional NATO troops to arrive at the front line.

"We will discuss Russia's proposals. ... But it cannot be that Russia dictates to NATO partners their posture, and that is something that we will make very clear in the talks (next week at the NATO council)," she added.

The West has threatened harsh economic sanctions on Russia should Moscow escalate its military buildup on Ukraine's border. Moscow says



LAMBRECHT: German Defense Minister Christine Lambrecht speaks to troops as she visits Rukla military base in Lithuania on Sunday. Ints Kalnins/Reuters

it is only responding to threats to its security from Kyiv's increasingly close relations with NATO.

Speaking alongside Lambrecht on Sunday, Lithuania's Defense Minister Arvydas Anusauskas accused Russia of trying to drive a wedge into the alliance, and said NATO must not allow Moscow to divide Europe into spheres of influence.

"We need to support Ukraine with all means, which includes the delivery of lethal weapons," Anusauskas added, without giving details on what kind of weapons he meant.

Lambrecht declined to comment on a report by Spiegel on Saturday that NATO's top general Tod Wolters had suggested the alliance should establish a similar military presence as in Poland and the Baltic states in Bulgaria and Romania.

Refugees lack COVID-19 vaccine shots because drugmakers fear suits, documents show

BRUSSELS/BANGKOK (Reuters) — Tens of millions of migrants may be denied COVID-19 vaccines from a global program because some major manufacturers are worried about legal risks from harmful side effects, according to officials and internal documents from Gavi, the charity operating the program, reviewed by Reuters.

Nearly two years into a pandemic that has already killed more than 5 million people, only about 7% of people in low-income countries have received a dose. Vaccine deliveries worldwide have been delayed by production problems, hoarding by rich countries, export restrictions and red tape. Many programs have also been hampered by hesitancy among the public.

The legal concerns are an additional hurdle for public health officials tackling the coronavirus — even as officials say unvaccinated people offer an ideal environment for it to mutate into new variants that threaten hard-won immunity around the world. Many COVID-19 vaccine manufacturers have required that countries indemnify them for any adverse events suffered by individuals as a result of the vaccines, the United Nations says.



THAILAND: A man receives a COVID-19 vaccination at Thamhin refugee camp in Thailand on Oct. 25.

International Rescue Committee/Handout via Reuters

Where governments are not in control, that is not possible.

The concerns affect people, such as those displaced by the Myanmar, Afghanistan and Ethiopian crises, who are beyond the reach of national governments' vaccination schemes.

For refugees, migrants and asylum-seekers, as well as people afflicted by natural disasters or other events that put them out of reach of government help, the global program known as COVAX created a Humanitarian Buffer — a last-resort reserve of shots to be administered by humanitarian groups. Gavi, the vaccine alliance, is a public-private partnership set up in 2000 to promote vaccination around the world.

But that buffer does not have any mechanism to offer compensation. Gavi, which operates COVAX with the World Health Organization, says that where those applying for doses, mainly NGOs, can't bear legal risks, deliveries from that stockpile can only be made if vaccine-makers accept liability.

WE WISH YOU A
Merry
CHRISTMAS

Dear loyal readers and valued clients,

Another holiday season is upon us, and we would like to express our gratitude for your support through our shared challenges during the second year of this COVID-19 environment.

We hope to usher in the holidays with a sense of hope that we all will come out of this as a better community that's inspired by the spirit of giving, kindness and understanding.

Part of how we observe the holiday season with you is to hold a one-day pause to our news cycle.

Yes, as part of our tradition for several years now, our entire team will take a break, just for Christmas day, from delivering the most comprehensive local news on Guam.

Therefore, there will be no newspaper published or delivered on Sunday, December 26, 2021.

We hope this moment will allow us, together, as a community to reflect and share joys with friends and family.

Merry Christmas! Feliz Navidad! Maligayang Pasko!

THE GUAM
DAILY POST



Guam Memorial Hospital Authority

Aturidat Espetat Mimuriat Guahan

850 Governor Carlos Camacho Road, Tamuning, Guam 96913

Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



Board of Trustees Meeting

Date: Wednesday, December 29, 2021

Time: 5:00 p.m.

Meeting will take place via Zoom Video Conferencing.

Meeting ID: 913 5266 3119

Passcode: 556240

Agenda: I. Call to Order; II. Approval of the Minutes: A. October 27, 2021 Regular Board Meeting, B. November 23, 2021 Regular Board Meeting; III. Old Business; IV. New Business; V. Management's Report; VI. Board Subcommittee Reports: A. Joint Conference and Professional Support: 1. Res. 2022-13, Relative to the Appointment of Provisional Medical Staff Privileges, 2. Res. 2022-14, Relative to the Provisional Appointment of Allied Health Professional Medical Staff Privileges, 3. Res. 2022-15, Relative to the Reappointment of Active Medical Staff Privileges; B. Human Resources: 1. GMHA Nurse Recruitment and Retention Initiatives, 2. Res. 2022-16, Relative to Amending the Minimum Qualifications and Necessary Special Qualification Requirements of the Medical Records Coder I and II Positions; C. Facilities, CIP and IT: 1. Evaluation for 2020 Life Safety Management Plan; D. Governance, Bylaws, and Strategic Planning: 1. CY2022 Strategic Plan; E. Quality and Safety; F. Finance and Audit; VIII. Adjournment

For special accommodations, please contact Theo Pangellinan, EEO Officer, at (671) 647-2104, Monday through Friday from 8:00 a.m. to 5:00 p.m.

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

This advertisement was paid for with government funds.

\$125K in senators' independent contracts during fiscal year 2021

By John O'Connor
john@postguam.com

A few lawmakers in the 36th Guam Legislature engaged about \$125,300 worth of independent contracts for fiscal year 2021, according to the contracts page of the Guam Legislature website.

These contracts largely deal with consultation work, assistance with legislation writing or research work, with some lawmakers engaged in more contracts than others. Vice Speaker Tina Muña Barnes and Sen. James Moylan have the most of these independent contracts, although there are just eight in total. Sens. Chris Duenas and Frank Blas Jr. have one contract each.

Meanwhile, the contractual cost among current lawmakers for office space reaches a total of \$720,000, but this is applied for the period between early January through the end of December 2022. This includes the office space for the Office of Finance and Budget.

Independent contracts

Office of Vice Speaker Tina Muña Barnes

Contractor: Ryan J. Shinohara
Contract period: Jan. 16 to March 15, 2021

Payment: \$8,000

Purpose: Legislation writing, assistance with public communication and consultation on community concerns and solutions

Contractor: Majime Solutions LLC
Contract period: Feb. 15 to Sept. 30, 2021

Payment: \$37,500

Purpose: Legislation writing, assistance with public communication and consultation on community concerns

and solutions, with specific focus on the military buildup, regional affairs and economic recovery from COVID-19

Contractor: Ryan J. Shinohara
Contract period: May 1 to Sept. 30, 2021

Payment: \$20,000

Purpose: Consulting services and coordinating war claims

Office of Sen. James Moylan

Contractor: Bharat (Bobby) A. Shringi

Contract period: Jan. 4 to Sept. 31, 2021

Payment: \$22,500

Purpose: Researching and drafting of economic measures, primarily related to COVID-19 impacts, as well as to address other policy issues

Contractor: Raffaele Sgambelluri
Contract period: Jan. 4 to Sept. 30, 2021

Payment: \$9,000

Purpose: Consultation, research and drafting on public safety and law enforcement-related issues

Contractor: Cierra Camacho
Contract period: July 1 to Sept. 30, 2021

Payment: \$6,000

Purpose: Consultation, research and drafting of legislation related to education and environment issues

Office of Sen. Chris Duenas

Contractor: Edward A. Alvarez
Contract period: Feb. 1 to Sept. 30, 2021

Payment: \$15,000

Purpose: Research related to housing and the Chamorro Land Trust

Office of Sen. Frank Blas Jr.

Contractor: Vincent Anthony V. Borja
Contract period: July 19 to Sept. 30, 2021

Payment: \$7,308

Purpose: Researching and drafting

economic recovery measures

Rental contracts

Office of Sen. Tony Ada

Vendor: Ada's Trust & Investment, Inc.

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$48,000

Office of Sen. Joanne Brown

Vendor: Ada's Trust & Investment, Inc.

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$48,000

Office of Sen. Mary Torres

Vendor: DNA Inc.

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$48,000

Office of Sen. Telena Nelson

Vendor: Ada's Trust & Investment, Inc.

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$72,000

Office of Sen. Joe San Agustin

Vendor: Ran-Care Inc.

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$72,000

Office of Sen. Clynton Ridgell

Vendor: DNA Inc.

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$72,000

Office of Sen. Jose Terlaje

Vendor: Marciano V. Pangelinan

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$72,000

Office of Sen. James Moylan

Vendor: DNA Inc.

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$48,000

Office of Sen. Frank Blas Jr.

Vendor: DNA Inc.

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$48,000

Office of Sen. Telo Taitague

Vendor: DNA Inc.

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$48,000

Office of Finance & Budget (Sen. Joe San Agustin)

Vendor: Ran-Care Inc.

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$72,000

Office of Sen. Sabina Perez

Vendor: Edward S. Terlaje

Contract period: Jan. 4, 2021, to Dec. 30, 2022

Amount: \$72,000






#1

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18,000btu (17 SEER)	\$2,000⁰⁰	

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Guam Memorial Hospital Authority

Aturidat Espetat Mimuriat Guahan
850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



Board of Trustees Meeting

Date: Wednesday, December 29, 2021

Time: 5:00 p.m.

Meeting will take place via Zoom Video Conferencing.

Meeting ID: 913 5266 3119

Passcode: 556240

Agenda: I. Call to Order; II. Approval of the Minutes; A. October 27, 2021 Regular Board Meeting; B. November 23, 2021 Regular Board Meeting; III. Old Business; IV. New Business; V. Management's Report; VI. Board Subcommittee Reports: A. Joint Conference and Professional Support: 1. Res. 2022-13, Relative to the Appointment of Provisional Medical Staff Privileges; 2. Res. 2022-14, Relative to the Provisional Appointment of Allied Health Professional Medical Staff Privileges; 3. Res. 2022-15, Relative to the Reappointment of Active Medical Staff Privileges; B. Human Resources: 1. GMHA Nurse Recruitment and Retention Initiatives; 2. Res. 2022-16, Relative to Amending the Minimum Qualifications and Necessary Special Qualification Requirements of the Medical Records Coder I and II Positions; C. Facilities, CIP and IT: 1. Evaluation for 2020 Life Safety Management Plan; D. Governance, Bylaws, and Strategic Planning: 1. CY2022 Strategic Plan; E. Quality and Safety; F. Finance and Audit; VIII. Adjournment

For special accommodations, please contact Theo Pangelinan, EEO Officer, at (671) 647-2104, Monday through Friday from 8:00 a.m. to 5:00 p.m.

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

This advertisement was paid for with government funds.



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDÅT ESPETÅT MIMURIÅT GUÅHÅN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



Date: 010622

VIA ELECTRONIC MAIL

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

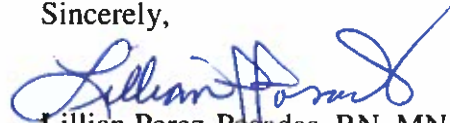
RE: Reporting Requirements for Boards and Commissions

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 29, 2021 GMHA Board of Trustees Meeting via Google Drive as guided by your office.

Please contact Kamalin Toves, Administrative Assistant – Board Office, at (671) 647-2367 or by email at kamalin.toves@gmha.org for any questions or clarifications.

Sincerely,


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

submitted via electronic mail 1/6/2022 KT



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDÅT ESPETÅT MIMURIÅT GUÅHÅN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



Date: **011422**

VIA ELECTRONIC MAIL

Honorable Lourdes A. Leon Guerrero

I Maga'hågan Guåhan

Ricardo J. Bordallo Governor's Complex

Adelup, GU 96910

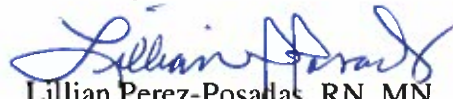
RE: Reporting Requirements for Boards and Commissions

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 29, 2021 Meeting of the GMHA Board of Trustees.

Please contact Kamalin Toves, Administrative Assistant – Board Office, at (671) 647-2367 or by email at kamalin.toves@gmha.org for any questions or clarifications.

Sincerely,


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

submitted via electronic mail 1/14/22 RT



GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDÂT ESPETÂT MIMURIÂT GUÅHÃN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



Date: **011422**

VIA ELECTRONIC MAIL

Honorable Therese M. Terlaje
Speaker of I Minatrentai Sais Na Liheslaturan Guåhan
163 Chalan Santo Papa
Hagåtña, GU 96910


RE: Reporting Requirements for Boards and Commissions

Dear Speaker Terlaje:

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 29, 2021 Meeting of the GMHA Board of Trustees.

Please contact Kamalin Toves, Administrative Assistant – Board Office, at (671) 647-2367 or by email at kamalin.toves@gmha.org for any questions or clarifications.

Sincerely,


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

submitted via electronic mail 1/14/22 JT