



850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-01

# "RELATIVE TO THE REMUNERATION OF INTERNAL MEDICINE CLINICAL PROVIDERS"

WHEREAS, the Guam Memorial Hospital Authority ("Hospital") is a component unit of the Government of Guam whose sole responsibility is to provide and deliver quality health care to the people of Guam notwithstanding one's financial ability; and

WHEREAS, the Hospital employs and contracts with internal medicine physicians as hospitalists to staff the medical units to provide services to patients; and

WHEREAS, the Internal Medicine Department is experiencing difficulty recruiting and retaining physicians in the specialty of Internal Medicine as hospitalists to ensure the provision of care; and

WHEREAS, the Hospital will offer two options for the internists to "affiliate" with the Hospital including: A) Employment with Guam Memorial Hospital Authority with the employed physician eligible for benefits; or, B) A contractual relationship whereby the physician is not eligible for Guam Memorial Hospital Authority employee benefits; and,

WHEREAS, the Human Resources Subcommittee recommends the pay for internists to be adjusted to be more competitive to recruit and retain qualified physicians in this specialty; and

WHEREAS, at present the membership of the GMHA Board of Trustees does not constitute a quorum of five (5) members as required in the Guam Memorial Hospital Authority Board of Trustees Bylaws and by statute;

NOW, THEREFORE, I EDDIE BAZA CALVO, I Maga'låhen Guåhan, Governor of Guam, by virtue of the authority vested in me by the Organic Act of Guam, as amended do hereby order:

- 1. Authorization for the Guam Memorial Hospital Authority to amend the hourly wage paid to internists effective September 17, 2017.
- 2. The offer of different hourly compensation to internists depending on their affiliation (employee or independent contractor) at the following rates:

Employment Status	Current	Adjustment
Employee	\$100 per hour plus	\$130.00 per hour plus
	benefits	benefits
Independent	Up to 30% of the	Up to 30% of the adjusted
Contractor	adjusted rate of \$100 per	rate of \$130 per hour, without
	hour, without benefits	benefits

3. Authority for the Hospital Administrator/CEO to enter into agreements with qualified physicians for this purpose.

SIGNED AND PROMULGATED at Hagåtña, Guam, this 15th day of November, 2017.

EDDIE BAZA CALVO
I Maga'låhen Guåhan
Governor of Guam





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

# **BOARD OF TRUSTEES Official Resolution No. 2018-02**

"RELATIVE TO SUPPORTING THE COMPLETION OF FEDERALLY-FUNDED CAPITAL IMPROVEMENT PROJECTS (CIPS) APPROVED BY THE U.S. DEPT. OF THE INTERIOR (DOI), OFFICE OF INSULAR AFFAIRS (OIA), GRANT NUMBER D15AP00046, PROJECT TITLE: GUAM-CIP-2015-5."

WHEREAS, the Guam Memorial Hospital Authority ("GMHA") currently owns two (2) 1.6 Megawatt Emergency Power Generator Sets, located at the Guam Memorial Hospital ("Hospital"), and one of the two GenSets has exceeded its 20-year life expectancy as stipulated in AHA's Estimated Useful Lives of Depreciable Hospital Assets, 2013 Edition. More specifically, GMHA's 1.6 Meg Emergency Genset No. 2 was manufactured in 1992 and is therefore, 25 years old and is currently in a significantly compromised condition. Failure to replace this existing system will limit the Hospital's ability to provide continuous uninterrupted delivery of power during both normal and emergency operations, thus compromising its mission "to provide quality patient care in a safe environment;" and exposes GMHA to a high-risk status that may lead to potential loss of patient lives during both normal and emergency operations.

WHEREAS, the Office of the Honorable Governor of Guam and the U.S. Department of the Interior (DOI), Office of Insular Affairs (OIA) through Grant/Cooperative Agreement Number D15AP00046, Project Title: Guam-CIP-2015-5, Effective Date 10/01/2014 and Completion Date 09/30/2019, approved funding in the amount of \$1.8M specifically for the GMHA to complete the following Capital Improvement Projects:

- Removal and Replacement of the Hospital and Skilled Nursing Unit Nurse Call Systems:
- Telemetry Unit Patient Central Monitoring System Upgrade;
- Removal and Replacement of one (1) 1.6 Megawatt Hospital Emergency Generator Set; and
- Removal and Replacement of one (1) Hospital Steam Boiler System.

**WHEREAS**, this Project will involve the competitive procurement of construction services for the removal and replacement of the existing, antiquated 1.6 Meg Emergency Power Generator No. 2 with a new Emergency Generator of similar size/capability (e.g., 1.6 Meg Genset).

WHEREAS, this critical emergency system shall ensure continuous uninterrupted delivery of power throughout the Guam Memorial Hospital during island power outages.

WHEREAS, GMHA, having the only civilian, "public," acute care hospital on the island, realizes it is essential to sustain its ability to provide continuous uninterrupted delivery of power during both normal and emergency operations.

**WHEREAS**, this critical CIP has been reported to and approved by the GMHA BOT Facilities/CIP/Information Technology Sub-Committee; and recommends approval of the same by GMHA's Board of Trustees.

WHEREAS, at present the membership of the GMHA Board of Trustees does not constitute a quorum of five (5) members as required in the Guam Memorial Hospital Authority Board of Trustees Bylaws and by statute;

NOW, THEREFORE, I EDDIE BAZA CALVO, I Maga'låhen Guåhan, Governor of Guam, by virtue of the authority vested in me by the Organic Act of Guam, as amended do hereby order:

- 1. Full support and approval for the Removal and Replacement of one (1) 1.6 Megawatt Hospital Emergency Generator Set and the other CIPs listed within this Board of Trustees Official Resolution.
- 2. The Hospital Administrator/CEO to utilize said funds to properly procure Construction Services in order to effectively complete the Removal and Replacement of one (1) 1.6 Megawatt Hospital Emergency Generator Set and the other CIPs listed within this Board of Trustees Official Resolution.

SIGNED AND PROMULGATED at Hagåtña, Guam, this \_\_\_\_\_\_ day of November, 2017.

EDDIE BAZA CALVO
I Maga'låhen Guåhan
Governor of Guam





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-03

### "RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<b>Practitioner</b>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Frank Reda III, MD	Radiology	Radiology	October 31, 2019
Tuan Nguyen, MD	Radiology	Radiology	October 31, 2019
Mohammed Aladdin, MD	Radiology	Radiology	October 31, 2019
Russel Aubin, DO	Anesthesia	Anesthesia	October 31, 2019
Gilbert Lopez, MD	Anesthesia	Anesthesia	October 31, 2019
Yolanda Carrera, MD	Pediatrics	Pediatrics	October 31, 2019
John Garrido, MD	Pediatrics	Pediatrics	October 31, 2019
Elizabeth Hernandez, MD	Pediatrics	Pediatrics	October 31, 2019
Robert Leon Guerrero, MD	Pediatrics	Pediatrics	October 31, 2 019
Annie Bordallo, MD	Ob/Gyn	Ob/Gyn	October 31, 2019
William Freeman, MD.	Ob/Gyn	Ob/Gyn	October 31, 2019
Jeffrey Gabel, DO.	Ob/Gyn	Ob/Gyn	October 31, 2019
William Vercio, MD.	Ob/Gyn	Ob/Gyn	October 31, 2019
Steven Hayashida, MD.	Surgery	Neurosurgery	October 31, 2019
Jerone Landstrom, MD.	Surgery	Hand Surgery	October 31, 2019
Ronald Kobayashi, MD.	Surgery	Gen. Surgery	October 31, 2019
Faraz Ouhadi, MD.	Medicine	Internal Med.	October 31, 2019
Pichet Iampornpipopchai, MD	Medicine	Nephrology	October 31, 2019

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 on October 25, 2017 and the Joint Conference and Professional Affairs Committee on November 16, 2017 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 13th DAY OF DECEMBER, 2017

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Alissa Waibel





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### BOARD OF TRUSTEES Official Resolution No. 2018-04

#### "RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES"

<b>Practitioner</b>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Lauren Sturtevant, DO	Medicine	Internal Medicine	October 31, 2018
Adrian Cora-Morges, MD	Medicine	Internal Medicine	October 31, 2018
Stephen Pomeranz, MD	Radiology (Telemed)	Radiology	October 31, 2018

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 on October 25, 2017 and the Joint Conference and Professional Affairs Committee on November 16, 2017, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioners; 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 13th DAY OF DECEMBER, 2017

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





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### BOARD OF TRUSTEES Official Resolution No. 2018-05

## "RELATIVE TO THE REAPPOINTMENT OF ALLIED HEALTH PROFESSIONAL STAFF PRIVILEGES"

<u>Practitioner</u>	<b>Department</b>	<u>Specialty</u>	<b>Expiration Date</b>
Tina Heinrich, PA-C	Ob/Gyn	Physician Assistant	October 31, 2019
Sangwook, Kang, CRN.	Anesthesia	Cert. RN Anesthetist	October 31, 2019

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.2; and

WHEREAS, the Medical Executive Committee on October 25, 2017 and the Joint Conference and Professional Affairs Committee on November 16, 2017, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioners; and

WHEREAS, all appointments to Allied Health Professional 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 Allied Health Professional 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 13th DAY OF DECEMBER, 2017

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





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### BOARD OF TRUSTEES Official Resolution No. 2018-06

#### "RELATIVE TO APPROVING SEVENTY-THREE (73) NEW FEES"

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on June 22, 2017 and oral comments and written testimony have been solicited for the seventy-three (73) new fees comprised of the following Hospital departments: Pediatrics, Central Supply Room, Radiology, Pharmacy, Rehabilitative Services, Respiratory and Laboratory; and

**WHEREAS**, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now therefore be it,

**RESOLVED**, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to continue to proceed with the adjudication process of these 73 new fee items, and be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 13th DAY OF DECEMBER, 2017

**Certified By:** 

Eloy S. Lizama

Chairman, Board of Trustees

**Attested By:** 

Melissa Waibel

# GUAM MEMORIAL HOSPITAL AUTHORITY SUMMARY OF NEW FEE ITEMS/SERVICES

for Submission to the 34th Guam Legislature Public Hearing on June 22, 2017

NO	CHARGE CODE	DESCRIPTION	FEE MODEL RATE	DEPARTMENT
1	1704831	CANNULA NASAL JR PEDS	\$ 366.75	PEDIATRICS
2	1704832	CIRCUIT AIRVO 2 OPTIFLOW	\$ 514.28	PEDIATRICS
3	1713261	GLOVES SURGEON NEOPRENE SZ-6	\$ 7.19	CENTRAL SUPPLY ROOM
4	1790483	CANNULA NASAL JR INFANT	\$ 366.75	PEDIATRICS
5	2002364	NEEDLE TRANSSEPTAL TSNC-18-71.0	\$ 370.01	RADIOLOGY
6	2002365	NEEDLE TRANSSEPTAL TSNC-19-56.0	\$ 665.31	RADIOLOGY
7	2006987	NEEDLE BX CHIBA DCHN-21-65.5-U	\$ 276.61	RADIOLOGY
8	2007600	INTRODUCER PERF RCFW-10.0-38	\$ 225.80	RADIOLOGY
9	2007762	INTRODUCER PERF RCFW-9.0-38		RADIOLOGY
10	2068920	NEEDLE BX CHIBA DCHN-20-20.0-U	\$ 85.30	RADIOLOGY
11	2104800	SET MICROPNCTRE 5F 10CM G48008	\$ 296.95	RADIOLOGY
12	2105839	SET G-J 2-LUMEN C-A-COONS		RADIOLOGY
13	2110208	DILATOR 7-38-20 AQ HDRPHL COAT		RADIOLOGY
14	2110289	DILATOR 8-38-20 AQ HDRPHL COAT		RADIOLOGY
15	2110446	CATH G-J ULT MC COAXIAL	\$ 379.84	RADIOLOGY
16	2110448	SET G-J COAXIAL SYTEM		RADIOLOGY
17	2114300	STENT USE-14-300A		RADIOLOGY
18	2118300	STENT USE-18-300A		RADIOLOGY
19	2123162	CATH CXI-2.3-14-135-269		RADIOLOGY
20	2123523	COIL NESTER MWCE-35-7-3		RADIOLOGY
21	2126993	COIL NESTER MWCE-35-14-4		RADIOLOGY
22	2127047	SET G-J 2-LUMEN ULT C-A-COONS		RADIOLOGY
23	2131027	INFLATION DEVICE G31027		RADIOLOGY
24	2136901	CATH DIALYSIS CIRCUIT/ANG/IMG		RADIOLOGY
25	2136902	DIALYSIS CIRCUIT W/ANGIOPLASTY		RADIOLOGY
26	2136903	DIALYSIS CIRCUIT W/STENT/IMG		RADIOLOGY
27	2136904	PERQ TRANLMN THRBECTMY D-C IMG		RADIOLOGY
28	2136905	PERQ THRBECTMY D-C ANGIOPL/IMG	\$ 9,752.43	RADIOLOGY
29	2150002	CATH ANG CXI-2.6-18-90-P-NS		RADIOLOGY
30	2150003	CATH ANG CXI-2.6-18-150-P-NS		RADIOLOGY
31	2150791	BALLOON PTA5-35-80-7-4.0		RADIOLOGY
32	2151501	CATHETER 5FR .035X65 451-501V5		RADIOLOGY
33	2152265	BALLOON PTA5-35-135-6-4.0		RADIOLOGY
34	2152348	BALLOON PTA5-35-80-6-10.0		RADIOLOGY
35	2152352	BALLOON PTA5-35-80-7-4.0		RADIOLOGY
36	2152546	CATH CXI-4.0-35-90-P-NS-0		RADIOLOGY
37	2152547	CATH CXI-4.0-35-90-P-NS-DAV		RADIOLOGY
38	2152737	COIL NESTER MWCE-18-7-4		RADIOLOGY
39	2152739	COIL NESTER MWCE-18-7-8	*	RADIOLOGY
40	2152742	COIL NESTER MWCE-35-7-4		RADIOLOGY

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41	2152743	COIL NESTER MWCE-35-7-6	\$ 617.47	RADIOLOGY
42	2152939	CATHETER HMW-14-300-ST	\$ 730.98	RADIOLOGY
43	2319000	PUNC ASP BRST W/O IMG	\$ 539.11	RADIOLOGY
44	4200436	DOXYCYCLINE 100MG INJ	\$ 119.00	PHARMACY
45	4200472	INSULIN REGULAR-PER ML	\$ 5.38	PHARMACY
46	4204384	DEXTROSE 25% 10ML INJ	\$ 29.60	PHARMACY
47	4205450	INSULIN GLARGINE-PER ML	\$ 29.36	PHARMACY
48	4213496	DUONEB 0.5MG/0.3MG 3ML INHAL	\$ 0.98	PHARMACY
49	4215668	INSULIN NPH-PER ML	\$ 5.07	PHARMACY
50	4220004	BARIUM EZ HD 750 96% W-W	\$ 15.66	PHARMACY
51	4220008	BARIUM EZ HD 764 98% W-W	\$ 24.85	PHARMACY
52	4233255	FACTOR VII A	\$ 2,000.00	PHARMACY
53	4233265	RASBURICASE 1.5MG VIAL	\$ 1,516.75	PHARMACY
54	4233270	ZEGERID ORAL SUSP 20MG PACKET	\$ 128.22	PHARMACY
55	4236070	PROBIOTICS ADULT	\$ 7.42	PHARMACY
56	4236075	CYCLOSERINE 250MG CAP	\$ 124.79	PHARMACY
57	4236080	PASER 4GM GRANULES	\$ 30.77	PHARMACY
58	4237583	OXYCODONE 5MG TAB	\$ 0.98	PHARMACY
59	4257400	INSULIN 70/30-PER ML	\$ 	PHARMACY
60	5297165	OT EVAL-LOW COMPLEX 30 MIN	\$ 99.66	REHABILITATIVE SVCS.
61	5297166	OT EVAL-MOD COMPLEX 45 MIN	\$ 107.97	REHABILITATIVE SVCS.
62	5297167	OT EVAL-HIGH COMPLEX 60 MIN	\$	REHABILITATIVE SVCS.
63	5297168	OT RE-EVAL EST PLAN CARE	\$ 66.26	REHABILITATIVE SVCS.
64	5300610	KIT NEBULIZER CONTINUOUS	\$	RESPIRATORY
65	5304953	MASK CPAP/BIPAP-PEDS	\$ 688.34	RESPIRATORY
66	5497161	PT EVAL-LOW COMPLEX 20 MIN	\$	REHABILITATIVE SVCS.
67	5497162	PT EVAL-MOD COMPLEX 30 MIN	\$	REHABILITATIVE SVCS.
68	5497163	PT EVAL-HIGH COMPLEX 45 MIN	\$	REHABILITATIVE SVCS.
69	5497164	PT RE-EVAL EST PLAN CARE	\$	REHABILITATIVE SVCS.
70	6887449	CLOSTRIDIUM DIFFICILE, QUALI	\$	LABORATORY
71	6887807	RESP SYNCYTIAL VIRUS, QUALI	\$	LABORATORY
72	7888361	TUMOR IMMUNOHISTOCHE, COMPUTER	\$	LABORATORY
73	7888366	FISH PROBE, EACH STAIN	\$	LABORATORY

I certify that this listing of items comprises all fees required by law for submission at this time to be complete as presented here.

Frumen A. Patacsil
Hospital Quality Improvement Specialist

1st Endorsement of Concurrence:

I concur and further certify that this listing of items are exempted under Section 9301(i) to Article 3, Chapter 9, Division 1 of the Guam Code Annotated and in compliance with Title10 GCA Part 2 Division 4 Chapter 80 §80109.

Benita A. Manglona Chief Financial Officer 6/9/17 Date

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850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-07

### "RELATIVE TO APPROVING TWENTY-SIX (26) NEW FEES"

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on September 27, 2017 and oral comments and written testimony have been solicited for the twenty-six (26) new fees comprised of the following Hospital departments: Pediatrics, Radiology and Pharmacy; and

**WHEREAS**, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now, therefore be it

**RESOLVED**, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to continue to proceed with the adjudication process of these 26 new fee items; and, be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 13th DAY OF DECEMBER, 2017

**Certified By:** 

Eloy S. Lizama

Chairman, Board of Trustees

**Attested By:** 

Menssa waibei

# GUAM MEMORIAL HOSPITAL AUTHORITY SUMMARY OF NEW FEE ITEMS/SERVICES

for Submission to the 34th Guam Legislature Public Hearing on September 27, 2017

1 : :	CHARGE		FEE MODE	L
NO	CODE	DESCRIPTION	RATE	DEPARTMENT
1	1707400	SET CATH RADIAL ART 30FR 20GA	\$ 109.1	0 PEDIATRICS
2	1707431	TRAY CATH C-V 2-LUMEN 5FR 8CM	\$ 625.1	3 PEDIATRICS
3	1707432	SET CATH FEMORAL ART 4FR 18CM	\$ 216.1	6 PEDIATRICS
4	1707438	SET CATH DRAIN PL/PP 8.5F 15CM	\$ 634.1	6 PEDIATRICS
5	1790743	TRAY CATH C-V 2-LUMEN 4FR 5CM	\$ 624.1	8 PEDIATRICS
6	2110290	DILATOR AQ HYDROPHILIC 9-38-20	\$ 62.7	9 RADIOLOGY
7	2123644	GW THSF-35-180-AUS-ST G23644	\$ 176.7	1 RADIOLOGY
8	2130823	BALLOON PTA4-18-170-2-20 G30823	\$ 833.5	0 RADIOLOGY
9	2130832	BALLOON PTA4-18-170-3-20 G30832	\$ 833.5	0 RADIOLOGY
10	2150326	BALLOON PTA4-14-170-2.5-20 G50	\$ 958.5	6 RADIOLOGY
_11	2150333	BALLOON PTA4-14-170-3-20 G50333	\$ 958.5	6 RADIOLOGY
12	2152260	BALLOON PTA5-35-135-5-8 G52260	\$ 666.7	5 RADIOLOGY
13	2152266	BALLOON PTA5-35-135-6-6 G52266	\$ 666.7	5 RADIOLOGY
14	2152267	BALLOON PTA5-35-135-6-8 G52267	\$ 666.7	5 RADIOLOGY
15	2152268	BALLOON PTA5-35-135-6-8 G52267	\$ 666.7	5 RADIOLOGY
16	2152286	BALLOON PTA5-35-135-5-8 G52260	\$ 666.7	5 RADIOLOGY
17	2152334	BALLOON PTA5-35-80-4-10 G52334	\$ 666.7	5 RADIOLOGY
18	2152338	BALLOON PTA5-35-80-5-4 G52338	\$ 666.7	5 RADIOLOGY
19	2152371	BALLOON PTA5-35-80-9-14 G52371	\$ 666.7	5 RADIOLOGY
20	2152379	BALLOON PTA5-35-80-12-4 G52379	\$ 666.7	5 RADIOLOGY
21	2160530	GLIDEWIRE STIF 35X180CM GS3506	\$ 313.3	6 RADIOLOGY
22	4213780	ENOXAPARIN 120MG/0.8ML SRN	\$ 29.1	6 PHARMACY
23	4213781	ENOXAPARIN 150MG/1ML SRN	\$ 33.4	4 PHARMACY
24	4233165	NIVOLUMAB 100MG/10ML	\$ 4,001.6	0 PHARMACY
25	4233166	NIVOLUMAB 40MG/4ML		3 PHARMACY
26	4236071	PROBIOTIC PEDIATRICS	\$ 2.0	6 PHARMACY

LASTITEM \*\*\*\*\*\*

I certify that this listing of items comprises all fees required by law for submission at this time to be complete as presented here.

Frumen A. Patacsil

Hospital Quanty Improvement Specialist

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

1st Endorsement of Concurrence:

I concur and further certify that this listing of items are exempted under Section 9301(i) to Article 3, Chapter 9, Division 1 of Title 5 of the Guam Code Annotated and in compliance with Title10 GCA Part 2 Division 4

Chapter 80 §80109

Benita A. Manglona

Chief Financial Officer

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Date

09/18/17





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-08

## "RELATIVE TO THE DELEGATION OF COMPLAINT RESOLUTIONS TO THE PERFORMANCE IMPROVEMENT COMMITTEE"

WHEREAS, the Guam Memorial Hospital Authority is a component unit of the Government of Guam whose sole responsibility is to provide and deliver quality health care to the people of Guam; and

WHEREAS, the Hospital's policy on Grievances/Complaints states that data collected on patient complaints and grievances will be reported to the Performance Improvement Committee on a quarterly basis; and

WHEREAS, it is necessary for the Hospital to review complaints and grievances in order to identify any trends, patterns and developments, and to develop processes to address the areas where improvements are needed; now, therefore, be it

**RESOLVED**, that Board of Trustees hereby delegates the Performance Improvement Committee to serve as the Complaint Resolution Committee; and, be it further

**RESOLVED**, that any significant findings found as a result of the review of complaints/grievances be reported to the Board of Trustees for review and action when necessary; and be it further

**RESOLVED**, that the Chairman certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 8th DAY OF MARCH, 2018.

Certified By:

Eloy S. Lizama

Chairman, Board of Trustees

Attested By:

Metissa waibei





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-09

#### "RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES"

<b>Practitioner</b>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Anu Taylor, MD	Medicine	Internal Medicine	January 31, 2019
John Dougherty, MD	Medicine	Internal Medicine	January 31, 2019
Felix Cabrera, MD	Medicine	Internal Medicine	January 31, 2019
Jennifer Chang, MD	Medicine	Internal Medicine	January 31, 2019
George Bocobo, MD	Radiology	Diagnostic Radiology	January 31, 2019
Rose Todd, MD	Ob/Gyn	Ob/Gyn	January 31, 2019

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 on January 24, 2018 and the Joint Conference and Professional Affairs Committee on February 8, 2018, 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 8th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-10

## "RELATIVE TO THE APPOINTMENT OF ALLIED HEALTH PROVISIONAL STAFF PRIVILEGES"

<u>Practitioner</u>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Carolyn Ward, CNM	Ob/Gyn	Cert. Nurse Midwife	January 31, 2019
Adrian Medina, CNM	Ob/Gvn	Cert. Nurse Midwife	January 31, 2019

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.2; and

WHEREAS, the Medical Executive Committee on January 24, 2018 and the Joint Conference and Professional Affairs Committee on February 8, 2018, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Allied Health Professional 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 Allied Health Professional 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 8th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-11

#### "RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<u>Practitioner</u>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Dennis Sarmiento, MD	Pediatrics	Pediatrics	January 31, 2020
Edgar Magcalas, MD	Medicine	Infectious Disease	January 31, 2020
Daniel Hafner, MD	Emergency Med.	Urgent Care	January 31, 2020

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 on January 24, 2018 and the Joint Conference and Professional Affairs Committee on February 8, 2018 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 8th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-12

"RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES FOR NOEL SILAN, DPM ON THE CONDITION THAT HE BE PLACED ON A FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)"

WHEREAS, Noel Silan, DPM 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 on November 29, 2017 recommended approval of Provisional Medical Staff Membership appointment for Noel Silan, DPM; and

WHEREAS, the Joint Conference and Professional Affairs Subcommittee on February 8, 2018, recommended approval of Provisional Medical Staff Membership appointment for Noel Silan, DPM with a FPPE to address concerns brought forth to the committee with respect to his compliance with medical records requirements; 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 Noel Silan, DPM to Provisional Medical Staff Membership; and, be it further

**RESOLVED**, that the Board of Trustees directs the Hospital Administrator to duly notify Noel Silan, DPM and all Hospital and Medical Departments of this appointment; 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 8th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairman, Board of Trustees

Attested by:

Mellssa Y. Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

#### BOARD OF TRUSTEES Official Resolution No. 2018-13

# "RELATIVE TO THE APPOINTMENT OF PETERJOHN D. CAMACHO, MPH, HOSPITAL ADMINISTRATOR/CEO OF THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, 10 GCA, Chapter 80, § 80110, Administrator and Chief Executive Officer, gives full authority to the Board of Trustees to hire through direct employment or by personal services contract, as the Board deems necessary to attract and retain a qualified Administrator; and

WHEREAS, the contract for PeterJohn D. Camacho, MPH, as the Hospital Administrator/CEO executed and signed by Edward B. Calvo, Governor of Guam expired on January 31, 2018 with provisions of Section III. Contract Term, 3.3 The Board in its sole discretion, may offer to extend this Agreement for an additional two (2) years upon the terms and condition contained in this agreement or upon such additional or different terms as may be agreed upon by Employee and the Board; and

WHEREAS, the Board of Trustees in line with the above provisions of the contract, appointed PeterJohn D. Camacho, MPH to continue providing the hospital his services pending the General Board of Trustees review of his contract and completion of the annual evaluation/employee review; and

WHEREAS, the BOT-HR committee accepts the appointment of PeterJohn D. Camacho, MPH, as delegated by the Board of Trustees to continue as the Hospital Administrator/CEO to maintain the continuity and stability of GMH; now, therefore, be it

**RESOLVED**, that PeterJohn D. Camacho, MPH, Hospital Administrator/CEO continue in the capacity of Hospital Administrator/CEO pending the full review of the contract terms, annual evaluation and agreement by the Board of Trustees; and, be it further

**RESOLVED**, that the Hospital Administrator/CEO make monthly reports to the Board of Trustees; and be it further

**RESOLVED**, that the Chairman certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 8th DAY OF MARCH, 2018.

Certified By:

Eloy S. Lizama

Chairman, Board of Trustees

Attested By:

Weissa waibei





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

#### BOARD OF TRUSTEES Official Resolution No. 2018-14

# "RELATIVE TO AMENDING OFFICIAL BOARD RESOLUTION NO. 2018-01, REMUNERATION OF INTERNAL MEDICINE CLINICAL PROVIDERS"

WHEREAS, the Guam Memorial Hospital Authority ("Hospital") is a component unit of the Government of Guam whose sole responsibility is to provide and deliver quality health care to the people of Guam notwithstanding one's financial ability; and

WHEREAS, the Hospital employs and contracts with internal medicine physicians as hospitalists to staff the medical units to provide services to patients; and

WHEREAS, the Internal Medicine Department is experiencing difficulty recruiting and retaining physicians in the specialty of Internal Medicine as hospitalists to ensure the provision of care; and

WHEREAS, the Hospital will offer two options for the internists to "affiliate" with the Hospital including: A) Employment with Guam Memorial Hospital Authority with the employed physician eligible for benefits; or, B) A contractual relationship whereby the physician is not eligible for Guam Memorial Hospital Authority employee benefits; and,

**WHEREAS**, the Human Resources Subcommittee recommends the pay for internists to be adjusted to be more competitive to recruit and retain qualified physicians in this specialty; now, therefore be it

**WHEREAS**, the Governor of Guam, by virtue of the authority vested in him by the Organic Act of Guam, signed and promulgated Board of Trustees Official Resolution No. 2018-01 on November 15, 2017,

WHEREAS, it was the Guam Memorial Hospital Authority's intent to implement the change in remuneration of internists after the Board's approval of an official resolution and not retroactively to September 17, 2017; now, therefore be it

**RESOLVED**, that the Board of Trustees approves the amendment of Official Resolution No. 2018-01 as follows:

1. Authorization for the Guam Memorial Hospital Authority to amend the hourly wage paid

to internists effective November 26, 2017.

2. The offer of different hourly compensation to internists depending on their affiliation (employee or independent contractor) at the following rates:

Employment Status	Current	Adjustment
Employee	\$100 per hour plus	\$130.00 per hour plus
	benefits	benefits
Independent	Up to 30% of the	Up to 30% of the adjusted
Contractor	adjusted rate of \$100 per	rate of \$130 per hour, without
	hour, without benefits	benefits

3. Authority for the Hospital Administrator/CEO to enter into agreements with qualified physicians for this purpose.

and, be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 8th DAY OF MARCH, 2018.

Certified By:

Eloy S. Lizama

Chairman, Board of Trustees

Attested By:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-15

# "RELATIVE TO APPROVING REVISIONS TO THE MEDICAL STAFF BYLAWS AND RULES AND REGULATIONS"

WHEREAS, the Medical Staff Bylaws Committee the Medical Executive Committee, had reviewed the Medical Staff Bylaws and Medical Staff Rules and Regulations; and

**WHEREAS**, as a result of the review, proposed revisions to the Medical Staff Bylaws, section 6.5-5, Locum Tenens and Article VII: Allied Health Professionals, and Medical Staff Rules and Regulations, section 2.3-5C, Operative Reports and the addition of a section for On-"Call Physicians" were approved; and

WHEREAS, on November 16, 2017, the Joint Conference and Professional Affairs subcommittee reviewed and recommended that the Board of Trustees approve the proposed revisions to the Medical Staff Bylaws; now, therefore be it

**RESOLVED**, that the Board of Trustees accepts and approves the Joint Conference and Professional Affairs subcommittee's recommendation; and, be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 8th DAY OF MARCH, 2018.

Certified By:

Eloy S. Lizama

Chairman, Board of Trustees

Attested By:

Melissa Waibel

# GUAM MEMORIAL HOSPITAL AUTHORITY MEDICAL STAFF OFFICE

### PROPOSED REVISIONS FORM

Item: Medical Staff Bylaws

Existin	g		Proposed	Rationale
6.5-5 <b>LOCUM TENENS</b> The Administrator may grant an individual person holding an appointment to the Staff privileges to attend patients of that appoint thirty (30) days without applying for appoint	temporary admitting and clinical see for a period not to exceed	The Administrato person holding an privileges to atten	or may grant an individual serving as a locum tenens for a appointment to the Staff temporary admitting and clinical ad patients of that appointee for a period not to exceed thirty applying for appointment to the Staff.	To establish a performance review mechanism thru the Focused Professional Practice Evaluation (FPPE) for Locum Tenens
The Administrator may grant an extension thirty (30) days, a total not to exceed sixty ( This shall be done in the same manner and forth in Section 6.5 of this Part, provided th obtain such individual's signed acknowledg and had an opportunity to read copies of the Rules and Regulations, which are then in for bound by the terms thereof in all matters reclinical privileges. The individual serving a complete a request for clinical privileges for	aupon the same conditions as set at the Administrator shall first ement that he/she has received a Medical Staff Bylaws, and Staff cree and that he/she agrees to be lating to his/her temporary as a locum tenens must also	The Administrator may grant an extension of locum tenens privileges for thirty (30) days, a total not to exceed ninety (90) days.  This shall be done in the same manner and upon the same conditions as set forth in Section 6.5 of this Part, provided that the Administrator shall first obtain such individual's signed acknowledgement that he/she has received and had an opportunity to read copies of the Medical Staff Bylaws, and Staff Rules and Regulations, which are then in force and that he/she agrees to be bound by the terms thereof in all matters relating to his/her temporary clinical privileges. The individual serving as a locum tenens must also complete a request for clinical privileges form.		Physicians.
granted to an individual Staff member while the vacation. Locum tenen	whip to the Medical Staff may be who is substituting for a Medical staff member is on leave or smembership may also be granted ll temporarily be filling a shortage service department.	A.	Locum tenens membership to the Medical Staff may be granted to an individual who is substituting for a Medical Staff member while the staff member is on leave or vacation. Locum tenens membership may also be granted to an individual who will temporarily be filling a shortage or vacancy in a patient service department.	
a Locum Tenens position Staff Office.  Locum Tenens appoints Hospital Administrator appropriate Department	nry membership in order to occupy on may be made to the Medical ments may be granted by the upon recommendation of the Chairperson, Credentials and the President of the Medical	В.	Application for temporary membership in order to occupy a Locum Tenens position may be made to the Medical Staff Office.  Locum Tenens appointments may be granted by the Hospital Administrator upon recommendation of the appropriate Department Chairperson, Credentials Committee Chairperson and the President of the Medical	

Staff limited to ninety (90) days.

- C. All candidates applying for Locum Tenens position shall have and present a valid and current license to practice medicine, dentistry or podiatry in the territory of Guam. The appropriate Medical Staff member for whom the Locum Tenens candidate will be substituting or the department chairperson shall send a letter to the President of the Medical Staff stating that the candidate is qualified to assume the staff member's work. Applicants for Locum Tenens shall possess comparable qualifications required for permanent membership on the staff, or as established by the department within which such privileges are set. It shall be responsibility of a Medical Staff member(s) to supervise the work of the Locum Tenens physician and provide consultations in difficult cases.
- D. Basic primary verification shall be obtained from the (1) National Practitioners Data Bank, (2) Medicare sanction list, (3) at least one of the current United States state license and the Guam medical license, (4) health status and (5) current clinical competence and judgment to exercise the privileges requested from the most recent hospital or clinical affiliation.

Telephone verification of relevant training and experience (most recent hospital or clinical affiliation) and health status in terms of his/her ability to practice in the area in which privileges are sought shall be done and documented accordingly by the appropriate Department Chairperson.

Before Locum Tenens privileges are granted, the practitioner must acknowledge in writing that s/he has received, or has been given access to, and read the Medical Staff Bylaws and Rules and Regulations and that s/he agrees to be bound by the terms thereof in all matters relating to his/her Locum Tenens.

Continued primary verification shall be completed on he other requirements for Medical Staff membership.

E. Any unfavorable determination of an applicant will be grounds for denial of Locum Tenens privileges as recommended by the appropriate department chairperson, Chairman of the Credentials Committee, Associate

Staff limited to ninety (90) days.

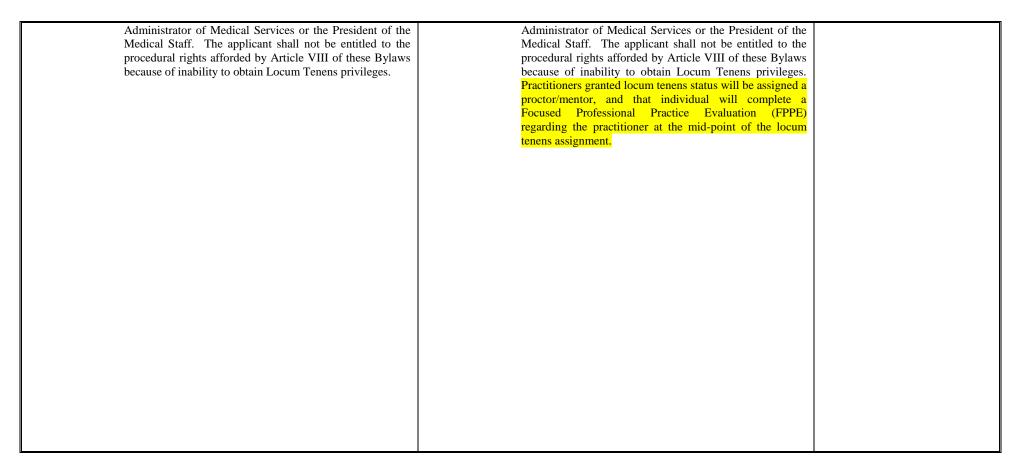
- C. All candidates applying for Locum Tenens position shall have and present a valid and current license to practice medicine, dentistry or podiatry in the territory of Guam. The appropriate Medical Staff member for whom the Locum Tenens candidate will be substituting or the department chairperson shall send a letter to the President of the Medical Staff stating that the candidate is qualified to assume the staff member's work. Applicants for Locum Tenens shall possess comparable qualifications required for permanent membership on the staff, or as established by the department within which such privileges are set. It shall be responsibility of a Medical Staff member(s) to supervise the work of the Locum Tenens physician and provide consultations in difficult cases.
- D. Basic primary verification shall be obtained from the (1)
  National Practitioners Data Bank, (2) Medicare sanction
  list, (3) at least one of the current United States state
  license and the Guam medical license, (4) health status and
  (5) current clinical competence and judgment to exercise
  the privileges requested from the most recent hospital or
  clinical affiliation.

Telephone verification of relevant training and experience (most recent hospital or clinical affiliation) and health status in terms of his/her ability to practice in the area in which privileges are sought shall be done and documented accordingly by the appropriate Department Chairperson.

Before Locum Tenens privileges are granted, the practitioner must acknowledge in writing that s/he has received, or has been given access to, and read the Medical Staff Bylaws and Rules and Regulations and that s/he agrees to be bound by the terms thereof in all matters relating to his/her Locum Tenens.

Continued primary verification shall be completed on the other requirements for Medical Staff membership.

E. Any unfavorable determination of an applicant will be grounds for denial of Locum Tenens privileges as recommended by the appropriate department chairperson, Chairman of the Credentials Committee, Associate



Reviewed by Bylaws: 03/10/17

Approved:

Bylaws Committee: 03/10/17

MEC: 03/22/17

Medical Staff 1<sup>st</sup> Reading:

JCPAC: BOT:

# GUAM MEMORIAL HOSPITAL AUTHORITY MEDICAL STAFF OFFICE

Item: Medical Staff Bylaws

### PROPOSED REVISIONS FORM

Existing		Proposed		Rationale
7.1 <u>GENI</u>		7.1 <u>GENER</u>		
7.1-1 Qualifications		7.1-1 <b>Qualifica</b>	ations	
An non-physician provider of NPP, who possesses a license, certificate or other legal credentials, if any, required by Guam law to provide patient care services in a hospital setting, as approved by the respective Guam licensing board may apply for hospital appointment as an Allied Health Professional.  7.1-2 Responsibilities		Any non-physician provider, such as a Certified Nurse Midwife (CNM), Certified Registered Nurse Anesthetist (CRNA), Physician's Assistant (PA-C) and Nurse Practitioner (NP) who possess a license, certificate or other legal credentials, if any, required by Guam law to provide patient care services in a hospital setting as approved by the respective Guam licensing board may apply for hospital appointment as an Allied Health Professional. Certified Registered Nurse Anesthetist (CRNA) are classified as Licensed Independent Practitioners in the Territory of Guam.		For clarification to remove the NPP designation, which is not recognized as an Allied Health Designation; also to properly identify the scope of individuals recognized by the Guam Memorial Hospital Medical Staff
of the	Health Professionals must practice within the scope ir license and scope of practice agreement as well as ivileges granted them by the Board. They must	7.1-2 <b>Respons</b>	Bylaws as Allied Health Professionals.	
A.	Provide care to at least four hospital patients per year at the generally recognized professional level of quality and efficiency	Allied Health Professionals must practice within the scope of their license and scope of practice agreement as well as the privileges granted them by the Board. They must		
В.	Abide by the relevant sections of the Medical Staff bylaws and by all other lawful standards, policies and rules of Guam Memorial Hospital Authority;		Provide care to at least four hospital patients per year at the generally recognized professional level of quality and efficiency	
C.	Discharge such staff, department (service), committee and hospital functions for which he/she is responsible by staff category assignment,		Abide by the relevant sections of the Medical Staff bylaws and by all other lawful standards, policies and rules of Guam Memorial Hospital Authority;	
D.	appointment, election, or otherwise;  Prepare and complete in a timely fashion any		Discharge such staff, department (service), committee and hospital functions for which he/she is responsible by staff category assignment, appointment, election, or otherwise;	
2.	documentation relevant to patient care provided; and	D.	Prepare and complete in a timely fashion any documentation relevant to patient care provided; and	To establish a process by
E.	Abide by the ethical and moral principles of the relevant profession.	E.	Abide by the ethical and moral principles of the relevant profession.	which Allied Health Professional will reviewed and evaluated.
		F.	Participate in the FPPE/OPPE process thru evaluation by	

their respective department and/or sponsoring Physician.

Item: Medical Staff Bylaws

Reviewed by Bylaws: 03/10/17

Approved:
Bylaws Committee: 03/10/17

MEC: 03/22/17

Medical Staff 1<sup>st</sup> Reading:

JCPAC: BOT:

### **GUAM MEMORIAL HOSPITAL AUTHORITY MEDICAL STAFF OFFICE**

### Item: Medical Staff Rules & Regulations

#### PROPOSED REVISIONS FORM

Existing	Proposed	Rationale
Rules & Regulations	Rules and Regulations	
Section 2.3-5C	Section 2.3-5C	
Operative reports shall be written or dictated immediately after surgery for inpatients and outpatients and describe the findings, the technical procedures used, the specimen(s) removed, the postoperative diagnosis, and the name of the primary surgeons and any assistants.	An Operative Report for inpatients and outpatients must be written or dictated immediately following surgery describing techniques, findings, tissues removed or altered, any implants, postoperative diagnosis and name of the primary surgeon and any assistants, and to be signed by the surgeon and filed into the patients chart.	The proposed change is to bring GMHA more in compliance with the requirements established by the CMS.

Item: Medical Staff Rules & Regulations

**Approved:** 

Bylaws Committee:

MEC: 10/25/17 Medical Staff 1<sup>st</sup> Reading: 10/26/17

JCPAC: BOT:

## **GUAM MEMO**RIAL HOSPITAL AUTHORITY MEDICAL STAFF OFFICE

### PROPOSED REVISIONS FORM

Item: Medical Staff Rules & Regulations

Existing	Existing Proposed	
Name	SECTION I: GENERAL	
None	1.2 ON-CALL PHYSICIANS	
	a. <u>Call Schedule</u> : The Hospital is required to maintain a list of physicians who are on call for duty after the initial examination to provide treatment necessary to stabilize an individual with an emergency medical condition. Each Medical Staff Department Head, or his/her designee, shall provide the Emergency Department and the Medical Staff Office with a list of physicians who are scheduled to take emergency call on a rotating basis. Emergency call shall be defined by the service. It is the responsibility of the physician or his/her designee to keep the Medical Staff Office updated on contact information. The determination as to whether an on-call physician must physically assess the individual in the Emergency Department is the decision of the treating Emergency Department Physician.	Add section entitled "On Call Physicians".  On-call Physician responsibility must be delineated in the medical staff bylaws, Rules & Regulations to ensure compliance with Emergency Medical Treatment and Labor Act (EMTALA) §489.24(j)
	b. Response Time: It is the responsibility of the on-call physician to respond in an appropriate time frame. The on-call physician or his/her designee should telephonically respond to calls from the Emergency Department within 15 minutes. If requested by the Emergency Department Physician to come in to assess the individual, on call physicians will respond in person to emergency consultation requests within 15 minutes if in the hospital and within 45 minutes if outside the hospital. Longer response times are acceptable if agreeable to the Emergency Department Physician. In specialties (e.g., radiology, pathology) where direct examination of the patient is often not clinically indicated, the physician must view the relevant images, specimens or other clinical materials within the specified time limits.	
	c. If the on-call physician does not respond to being called or paged, from the original page, the physician's Department Chairperson shall be contacted. Failure to respond in a timely manner may result in the initiation of	

- disciplinary action.
- d. Substitute Coverage: It is the on-call physician's responsibility to arrange for coverage and notify the Emergency Department if he/she is unavailable to take call when assigned. Failure to notify the Emergency Department and the Communications Center of an alternate may result in the initiation of disciplinary action.
- e. **Call Schedules**: All call schedules will be maintained through the Medical Staff Office and changes to call schedule reported through the Communications Center.
- f. **Primary Residence**: All physicians providing call coverage or his/her alternate must maintain a primary residence within thirty (30) minutes of the hospital.
- g. Emergency Department Physicians are expected to document a bedside consult request with time and date.
- h. Responsibilities of the on call physician include:
  - responding to the call from the ED or referring physician in a timely manner as described above
  - 2. participating in the evaluation and stabilization of the patient's condition in as it applies to the call service involved
  - 3. treating the patient for the condition for which the call service is involved
  - 4. in the instance the physician does not possess the skills or credentials to provide definitive treatment, the physician will still come in to evaluate/stabilize the patient and will work with the ED provider to identify an alternative treating physician, preferably internally, or transfer to an alternative facility.
  - 5. On-call physicians must refer to EMTALA Rules §489.24(j) for guidance.

Reviewed by Bylaws: 03/10/17

Approved:

**Bylaws Committee: 03/10/17** 

MEC: 03/22/17

**Medical Staff 1<sup>st</sup> Reading:** 

JCPAC: BOT:





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-16

#### "RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<u>Practitioner</u>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Darius Richardson, M.D.	Surgery	Oral & Maxillofacial	February 28, 2020
Kimberly Walton, M.D.	OB/GYN	OB/GYN	February 28, 2020
Vincent S. Duenas, D.O.	Medicine	Internal Medicine	February 28, 2020

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 on February 28, 2018 and the Joint Conference and Professional Affairs Committee on March 15, 2018 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 28th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Menssa walbei





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-17

## "RELATIVE TO THE REAPPOINTMENT OF ACTIVE ASSOCIATE MEDICAL STAFF PRIVILEGES"

PractitionerDepartmentSpecialtyExpiration DateJohn Merillat, MD.MedicineCardiologyFebruary 28, 2020

WHEREAS, the above listed practitioners met the basic requirements for Active Associate 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 on February 28, 2018 and the Joint Conference and Professional Affairs Committee on March 15, 2018 recommended approval of Active Associate Medical Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all reappointments to Active Associate 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 Associate 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 28th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-18

#### "RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES"

PractitionerDepartmentSpecialtyExpiration DateJacqueline Michaud, D.O.MedicineInternal MedicineFebruary 28, 2019

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 on February 28, 2018 and the Joint Conference and Professional Affairs Committee on March 15, 2018, 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 28th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





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## BOARD OF TRUSTEES Official Resolution No. 2018-19

#### "RELATIVE TO THE APPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<u>Practitioner</u>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Rachael Consoli, M.D.	OB/GYN	OB/GYN	February 28, 2020
Kenneth Tan, M.D.	Radiology	Diagnostic Radio	ology February 28, 2020

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 4.3; and

WHEREAS, the Medical Executive Committee on February 28, 2018 and the Joint Conference and Professional Affairs Committee on March 15, 2018, recommended approval of Active Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Active 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 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 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 28th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





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#### **BOARD OF TRUSTEES** Official Resolution No. 2018-20

#### "RELATIVE TO THE REAPPOINTMENT OF ALLIED HEALTH PROVISIONAL STAFF PRIVILEGES"

**Practitioner** Kevin Sullivan, CRNA **Department** Anesthesia

Specialty

**Expiration Date** Certified Registered February 28, 2020

Nurse Anesthetist

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and

WHEREAS, the Medical Executive Committee on February 28, 2018 and the Joint Conference and Professional Affairs Committee on March 15, 2018, recommended approval of Allied Health Provisional Staff Membership reappointment for the above listed practitioner; and

Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.2; and

WHEREAS, all reappointments to Allied Health Professional 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 Allied Health Professional 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 28th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

lissa Waibel





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BOARD OF TRUSTEES
Official Resolution No. 2018-21

### "RELATIVE TO THE APPOINTMENT OF ALLIED HEALTH PROVISIONAL STAFF PRIVILEGES"

PractitionerDepartmentSpecialtyExpiration DateKirsten Blomberg, CNM.Ob/GynCert. Nurse MidwifeFebruary 28, 2019

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.2; and

WHEREAS, the Medical Executive Committee on February 28, 2018 and the Joint Conference and Professional Affairs Committee on March 15, 2018, recommended approval of Allied Health Provisional Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Allied Health Professional 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 Allied Health Professional 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 28th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





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BOARD OF TRUSTEES
Official Resolution No. 2018-22

### "RELATIVE TO APPROVING THE CREATION OF THE ACCREDITATION COORDINATOR POSITION FOR THE COMPLIANCE OFFICE"

WHEREAS, the Compliance Office provides support to medical and hospital staff for the improvement of clinical care, patient safety and compliance and regulatory requirements; and

WHEREAS, this area coordinates activities to assure compliance with The Joint Commission, the Centers for Medicare and Medicaid Services (CMS) and other regulatory programs in order to make a difference in patient care and healthcare quality; and

WHEREAS, the Compliance Office is staffed with an incumbent holding a position that may not be properly classified; and

WHEREAS, the creation of the Accreditation Coordinator position for the Compliance Office is proposed for better operational efficiency; and

WHEREAS, the provisions of §6303.1, Chapter 6, Title 4 of the Guam Code Annotated have been met and no comments from the public were received; and

WHEREAS, the Board of Trustees Human Resources subcommittee, on November 21, 2017, recommended approval of the creation of the Accreditation Coordinator position; now, therefore be it

**RESOLVED,** that the Board of Trustees accepts the recommendation of the Board of Trustees Human Resources subcommittee and approves the creation of the Accreditation Coordinator position; and, be it further

**RESOLVED,** that the Hospital Administrator/CEO is directed to initiate the administrative processes to bring to fruition the utilization of this position; and, be it further

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

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel

#### Accreditation Coordinator

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

This is complex technical work involved in coordinating and monitoring the hospital-wide compliance of accreditation regulations and standards for continual readiness with all aspects of accreditation.

An employee in this class will coordinate the overall assessment, design/development and implementation of the hospital-wide regulatory compliance and continuous survey readiness plan.

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

Assist in all accreditation and regulatory activities.

Coordinate and facilitate functional chapter teams to determine compliance and recommend improvements in operational processes.

Coordinate the hospital's tracer program and develop, communicate, implement and track action plans identifying gaps in care or compliance.

Review and prepare response for purposes of the Joint Commission and CMS Surveys.

Review and recommend changes, additions, or deletions of policies and/or procedures, performance improvement plan, patient safety plan, management of information plan, environment of care management plan, and other organization plans.

Monitor regulatory websites for new information and is involved in the development, assessment and achievement of the hospital's readiness for compliance.

Participate in providing consultation and education of the hospital's regulatory and accreditation issues.

Prepare reports on findings, outcomes and recommendations.

Coordinate the annual Joint Commission Focused Standards Assessment (FSA), and compile and disseminate pertinent survey information.

Participate and make recommendations related to root cause analyses.

#### MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Skill in writing Evidence of Standard Compliance (ESC) responses.

Skill in developing and maintaining interpersonal relationships with healthcare professionals and hospital leadership.

Skill in direct patient care in a hospital setting.

Basic computer and technological skills.

Accreditation Coordinator Page 2 of 2

Knowledge of The Joint Commission (TJC) and Centers for Medicare and Medicaid Services (CMS), Conditions of Participation (CoP) standards; and survey preparation.

Knowledge of healthcare accreditation process.

Ability to collect and organize data.

Ability to evaluate and recommend and initiate changes to improve program effectiveness.

Ability to work effectively with employees and the public.

Ability to communicate effective, orally and in writing.

Ability to work independently and within teams.

#### MINIMUM EXPERIENCE AND TRAINING REQUIREMENTS:

- A. Six (6) months of experience in regulatory compliance and or accreditation work in a hospital setting; Two (2) years and six (6) months of experience in clinical and or ancillary care services in a hospital setting and a Bachelor's degree in healthcare or health sciences field; or
- B. One year of experience in regulatory compliance and or accreditation standards in a hospital setting; four (4) years of clinical and or ancillary care services in a hospital setting; and an Associate's degree in healthcare or health sciences field; or
- C. Six years of experience in clinical and or ancillary care services in a hospital setting; and graduation from high school or its equivalent.

#### **SPECIAL QUALIFICATION REQUIREMENT:**

Employee must complete ten (10) contact hours of continuing education per year in the field of hospital accreditation in order to maintain competency; or

Obtain and maintain Certified Joint Commission Professional Certification within three years of hire into the position. Employee must maintain status of being a Certified Joint Commission Professional Certification-Eligible by the end of the second year of hire as a condition of employment.

Established:

Job Evaluation:

Know How: EI2 230
Problem Solving: E3 (33%) 76
Accountability: D2C 87
Total Points: 393
Pay Grade: N (General Pay Plan)

Approved:

Eloy S. Lizama, Chairman, Board of Trustees

Date: 3/28/18





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### BOARD OF TRUSTEES Official Resolution No. 2018-23

# "RELATIVE TO COMMENDING AUGUSTINA C. SALAS FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with AUGUSTINA C. SALAS who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Hospital Environmental Services Technician I, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to AUGUSTINA C. SALAS on the occasion of her RETIREMENT and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

**RESOLVED**, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

**RESOLVED,** that this Resolution shall be presented to AUGUSTINA C. SALAS and a copy be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.

Eloy S. Lizama

Attested by:

Melissa Waibel

Chairperson, Board of Trustees Secretary, Board of Trustees





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### BOARD OF TRUSTEES Official Resolution No. 2018-24

# "RELATIVE TO COMMENDING ALFONSINA S.N. REYES FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with ALFONSINA S.N. REYES who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Clerk II, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to ALFONSINA S.N. REYES on the occasion of her RETIREMENT and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

**RESOLVED**, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

**RESOLVED,** that this Resolution shall be presented to ALFONSINA S.N. REYES and a copy be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.





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### BOARD OF TRUSTEES Official Resolution No. 2018-25

# "RELATIVE TO COMMENDING EDITH A. PALMA FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with EDITH A. PALMA who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Hospital Environmental Services Technician I, her duties were conducted with commitment, pride and loyalty; and

**WHEREAS**, that the Board of Trustees does extend its recognition and gratitude to EDITH A. PALMA on the occasion of her RETIREMENT and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

**RESOLVED**, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

**RESOLVED,** that this Resolution shall be presented to EDITH A. PALMA and a copy be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.





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## BOARD OF TRUSTEES Official Resolution No. 2018-26

# "RELATIVE TO COMMENDING LORENZO D. DEVELLES FOR HIS DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, throughout his employment at the Guam Memorial Hospital Authority (GMHA), he dedicated himself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with LORENZO D. DEVELLES who showed integrity whenever he worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since his employment at Guam Memorial Hospital Authority in the position of a Nurse Aide II, his duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to LORENZO D. DEVELLES on the occasion of his RETIREMENT and best wishes to his family and does hope he will enjoy many successes in the future; now, therefore be it

**RESOLVED**, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

**RESOLVED**, that this Resolution shall be presented to LORENZO D. DEVELLES and a copy be placed in his personnel file.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Mekssa Waibel



Certified by:

### **Guam Memorial Hospital Authority** Aturidåt Espetåt Mimuriåt Guåhan



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#### **BOARD OF TRUSTEES** Official Resolution No. 2018-27

#### "RELATIVE TO COMMENDING MARIA TERESA A. PALAD FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL **HOSPITAL AUTHORITY"**

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with MARIA TERESA A. PALAD who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Staff Nurse II, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to MARIA TERESA A. PALAD on the occasion of her RETIREMENT and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

RESOLVED, that this Resolution shall be presented to MARIA TERESA A. PALAD and a copy be placed in her personnel file.

Attested by:

Secretary, Board of Trustees

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.

Eloy S. Lizama Chairperson, Board of Trustees





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### BOARD OF TRUSTEES Official Resolution No. 2018-28

#### "RELATIVE TO COMMENDING WINSTON G. VILLARUEL FOR HIS DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, throughout his employment at the Guam Memorial Hospital Authority (GMHA), he dedicated himself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with WINSTON G. VILLARUEL who showed integrity whenever he worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since his employment at Guam Memorial Hospital Authority in the position of a Staff Nurse II, his duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to WINSTON G. VILLARUEL on the occasion of his RETIREMENT and best wishes to his family and does hope he will enjoy many successes in the future; now, therefore be it

**RESOLVED**, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

**RESOLVED**, that this Resolution shall be presented to WINSTON G. VILLARUEL and a copy be placed in his personnel file.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.

Certified by:	Attested by:		
	Melisallays		
Eloy S. Lizama	Melissa Waibel		
Chairperson, Board of Trustees	Secretary, Board of Trustees		





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### BOARD OF TRUSTEES Official Resolution No. 2018-29

# "RELATIVE TO COMMENDING JOSEPHINE A. EUSTAQUIO FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with JOSEPHINE A. EUSTAQUIO who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Hospital Nurse Supervisor II, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to JOSEPHINE A. EUSTAQUIO on the occasion of her RETIREMENT and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

**RESOLVED**, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

**RESOLVED**, that this Resolution shall be presented to JOSEPHINE A. EUSTAQUIO and a copy be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





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### BOARD OF TRUSTEES Official Resolution No. 2018-30

#### "RELATIVE TO COMMENDING CECILIA S.N. CAMPOS FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with CECILIA S.N. CAMPOS who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Nurse Aide II, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to CECILIA S.N. CAMPOS on the occasion of her RETIREMENT and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

**RESOLVED**, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

**RESOLVED**, that this Resolution shall be presented to CECILIA S.N. CAMPOS and a copy be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





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### BOARD OF TRUSTEES Official Resolution No. 2018-31

## "RELATIVE TO COMMENDING EDDIE C. MENO FOR HIS DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, throughout his employment at the Guam Memorial Hospital Authority (GMHA), he dedicated himself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with EDDIE C. MENO who showed integrity whenever he worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since his employment at Guam Memorial Hospital Authority in the position of a Maintenance Supervisor, his duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to EDDIE C. MENO on the occasion of his RETIREMENT and best wishes to his family and does hope he will enjoy many successes in the future; now, therefore be it

**RESOLVED**, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

**RESOLVED**, that this Resolution shall be presented to EDDIE C. MENO and a copy be placed in his personnel file.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.





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### BOARD OF TRUSTEES Official Resolution No. 2018-32

# "RELATIVE TO COMMENDING FELY N. DE VERA FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with FELY N. DE VERA who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

**WHEREAS**, since her employment at Guam Memorial Hospital Authority in the position of a Nurse Aide II, her duties were conducted with commitment, pride and loyalty; and

**WHEREAS**, that the Board of Trustees does extend its recognition and gratitude to FELY N. DE VERA on the occasion of her RETIREMENT and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

**RESOLVED**, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

**RESOLVED**, that this Resolution shall be presented to FELY N. DE VERA and a copy be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.





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### BOARD OF TRUSTEES Official Resolution No. 2018-33

# "RELATIVE TO COMMENDING ENRIE M. ABAYA FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital's mission "To provide quality patient care in a safe environment." and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with ENRIE M. ABAYA who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Ward Clerk, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to ENRIE M. ABAYA on the occasion of her RETIREMENT and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

**RESOLVED**, that the Board of Trustees Chairman certifies and the Secretary attests to the adoption of this Resolution; and, be it further

**RESOLVED**, that this Resolution shall be presented to ENRY M. ABAYA and a copy be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-34

#### "RELATIVE TO APPROVING FORTY (40) NEW FEES"

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on December 13, 2017 and oral comments and written testimony have been solicited for the forty (40) new fees comprised of the following Hospital departments: Central Sterile Room, Radiology, Operating Room, Laboratory and Special Services; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now, therefore be it,

**RESOLVED**, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to continue to proceed with the adjudication process of these 40 new fee items; and, be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 28th DAY OF MARCH, 2018.

# GUAM MEMORIAL HOSPITAL AUTHORITY SUMMARY OF NEW FEE ITEMS/SERVICES

for Submission to the 34th Guam Legislature Public Hearing on December 13, 2017

NO.	CHARGE CODE			E MODE	
1	1724601	TOOTHETTE SUCTION SYSTEM	\$	KAIE :	DEPARTMENT
2	2076641	US-BREAST UNIL COMPLETE	\$	17.86	CENTRAL STERILE ROOM
3	2076642	US-BREAST UNIL LIMITED	\$		RADIOLOGY
4	2077065	DX MAMMO INCL CAD UNIL	\$		RADIOLOGY
5	2077066	DX MAMMO INCL CAD BIL	\$		RADIOLOGY
6	2077067	SCREEN MAMMO BIL INCL CAD	\$		RADIOLOGY
7	2106005	CATH HNB5.0-38-100-P G06005	\$		RADIOLOGY
8	2108376	CATH PICC 3FR 50CM G08376	\$		RADIOLOGY
9	2150319	BALLOON PAT4-14-170-2-20G50319	\$		RADIOLOGY
10	7000202	NAIL FEMUR TFNA LT 10MMX400MM	\$		RADIOLOGY
11	7000320	NAIL FEMUR TFNA RT 10MMX420MM	\$		OPERATING ROOM
12	7000942	RELOAD ETS 45MM 4.1MM TR45G	\$		OPERATING ROOM
13	7000943	RELOAD ETS 45MM 2.5MM TR45W	\$		OPERATING ROOM
14	7002018	NAIL FEMUR TFNA LT 10MMX320MM	\$		OPERATING ROOM
15	7002019	NAIL FEMUR TFNA RT 10MMX340MM	\$		OPERATING ROOM
16	7002022	NAIL FEMUR TFNA LT 10MMX360MM	\$		OPERATING ROOM
17	7002023	NAIL FEMUR TFNA RT 10MMX360MM	\$		OPERATING ROOM
18	7002024	NAIL FEMUR TFNA RT 10MMX380MM	\$		OPERATING ROOM
9	7002025	NAIL FEMUR TFNA LT 10MMX380MM	\$		OPERATING ROOM
20	7011020	NAIL FEMUR TFNA 12MMX170MM	\$		OPERATING ROOM
1	7012020	NAIL FEMUR TFNA LT 10MMX340MM	\$		OPERATING ROOM
2	7020010	NAIL FEMUR TFNA RT 10MMX400MM	\$	3 015 20	OPERATING ROOM
3		NAIL FEMUR TFNA RT 10MMX320MM	\$		OPERATING ROOM
4		NAIL FEMUR TFNA RT 10MMX300MM	\$		OPERATING ROOM
5	7040020	NAIL FEMUR TFNA LT 10MMX420MM	\$		OPERATING ROOM
6	7041020	NAIL FEMUR TFNA LT 10MMX300MM	\$		OPERATING ROOM
7	7050020	NAIL FEMUR TFNA RT 10MMX440MM	\$		OPERATING ROOM
8	7060020	NAIL FEMUR TFNA LT 10MMX440MM	\$	3 015 20	OPERATING ROOM
9	7070020	NAIL FEMUR TFNA 10MMX170MM	\$		OPERATING ROOM
-	7090020	NAIL FEMUR TENA 11MMAY170MM	<del>φ</del> \$		OPERATING ROOM
-		BRAF GENE ANALYSIS	\$ \$		OPERATING ROOM
2		KRAS GENE ANALYSIS	\$		ABORATORY
4		NRAS GENE ANALYSIS	<del>φ</del> \$		ABORATORY
4	9304750 H	(IT 3 VALVE MANIEOLD	φ <u> </u>		ABORATORY
		CONTRAST INJECTION LINE 60"			PECIAL SERVICES PECIAL SERVICES

9380932	CATH JDK RT 4CM 5F 100CM 0 S-P	\$	77.42	SPECIAL SERVICES
9380933	CATH JDK LT 4CM 5F 100CM 0 S-P	s		SPECIAL SERVICES
9380934	CATH MLTP B1 6FR 100CM 0 S-P	\$		SPECIAL SERVICES
9380935	CATH MLTP A2 5FR 100CM 2 S-P	\$		SPECIAL SERVICES
9382101	TRAY PARACENTESIS PIGTAIL	\$		SPECIAL SERVICES
_	9380933 9380934 9380935	9380933 CATH JDK LT 4CM 5F 100CM 0 S-P 9380934 CATH MLTP B1 6FR 100CM 0 S-P 9380935 CATH MLTP A2 5FR 100CM 2 S-P	9380933 CATH JDK LT 4CM 5F 100CM 0 S-P \$ 9380934 CATH MLTP B1 6FR 100CM 0 S-P \$ 9380935 CATH MLTP A2 5FR 100CM 2 S-P \$	9380933 CATH JDK LT 4CM 5F 100CM 0 S-P \$ 77.42 9380934 CATH MLTP B1 6FR 100CM 0 S-P \$ 77.42 9380935 CATH MLTP A2 5FR 100CM 2 S-P \$ 77.42

I certify that this listing of items comprises all fees required by law for submission at this time to be complete as presented here.

Frumen A. Patacsil

Hospital Quality Improvement Specialist

1st Endorsement of Concurrence:

I concur and further certify that this listing of items are exempted under Section 9301(i) to Article 3, Chapter 9, Division 1 of Title 5 of the Guam Code Annotated and in compliance with Title10 GCA Part 2 Division 4 Chapter 80 §80109

Benita A. Manglona

Chief Financial Officer





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-35

#### "RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<u>Practitioner</u>	<b>Department</b>	<u>Specialty</u>	<b>Expiration Date</b>
Jerry Castro, M.D.	Surgery	Otolaryngology	March 31, 2020
Golda Sol Fernandez, M.D.	Medicine	Internal Medicine	March 31, 2020
William Graf, M.D.	Radiology	Radiology	March 31, 2020
Miran Ribati, M.D.	Radiology	Interventional Radiology	March 31, 2020
David Weingarten, M.D.	Surgery	Neurosurgery	March 31, 2020

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 on March 28, 2018 and the Joint Conference and Professional Affairs Committee on April 5, 2018 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 19th DAY OF APRIL, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-36

# "RELATIVE TO THE APPOINTMENT OF ALLIED HEALTH PROVISIONAL STAFF PRIVILEGES"

PractitionerDepartmentSpecialtyExpiration DateBradley Patrick, CRNAAnesthesiologyCertified Nurse AnesthetistMarch 31, 2020

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.2; and

WHEREAS, the Medical Executive Committee on March 28, 2018; and the Joint Conference and Professional Affairs Committee on April 5, 2018, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

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

**RESOLVED**, that the Board of Trustees approves this recommendation to appoint the above named practitioner to Allied Health Professional Staff as recommended; and, be it further

**RESOLVED**, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioner listed above and all Hospital and Medical Departments of this appointment; 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 19th DAY OF APRIL, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96911 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

BOARD OF TRUSTEES
Official Resolution No. 2018-37

"RELATIVE TO THE DECREASE OF THE TOTAL NUMBER OF VACANT BUDGETED FTE PHYSICIAN POSITIONS FOR FY-2018 IN THE UNCLASSIFIED SERVICE FOR THE GUAM MEMORIAL HOSPITAL AUTHORITY"

WHEREAS, the Guam Memorial Hospital has been publicly criticized that the current Staffing Pattern listing of Physicians still reflected physicians who were no longer working and/or have left the authority for many years and did not reflect the true number of active physicians; and

WHEREAS, based on the current need to streamline the physician staffing by the Associate Administrator of Medical Services in collaboration with the Chief Financial Officer and the Hospital Administrator/CEO; and

WHEREAS, the budgeted Staffing Pattern for the Guam Memorial Hospital Authority was at 1,225 FTEs, it is requested by the Associate Administrator of Medical Services to reduce the number of budgeted physician vacancies by 28 FTEs inclusive of full-time and part-time positions; and

**WHEREAS**, the request to reduce the total number of full-time and part-time vacant physician equivalency also reduces the total warm bodies by (45) forty-five impacting a decrease from 1,315 to 1,270; and

**WHEREAS,** favorable reviews were made by the BOT–Human Resources Subcommittee at the April 3, 2018 meeting, respectively recommending approval by the full Board of Trustees; now, therefore be it

**RESOLVED**, that the Board of Trustees accepts the recommendation of the BOT–Human Resources Subcommittee to reduce the budgeted total FTEs from 1,225 to 1,197 for the remainder of FY-2018 budget; and, be it further

**RESOLVED**, that the Hospital Administrator/CEO is directed to initiate other administrative processes to reduce the total staffing to 1,197 FTEs beginning the month ending April 30, 2018; and be it further

**RESOLVED**, that the Chairman certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 19th DAY OF APRIL, 2018.

Certified by:

Elov S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waihel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-38

#### "RELATIVE TO GUAM MEMORIAL HOSPITAL AUTHORITY'S FURLOUGH PLAN A AND PLAN B OF 2018"

WHEREAS, Executive Order 2018-04 dated March 2, 2018 ordered the planning of a furlough to begin in compliance with Appendix H of the Personnel Rules and Regulations, as adopted; and

WHEREAS, in compliance with Appendix H, a review of the Hospital's administrative costs was assessed keeping in mind the mandated mission of the Hospital in maintaining and operating a facility that provides acute, chronic, and all other health care services for the people of Guam; and

WHEREAS, in order to achieve this mission, the Hospital shall sustain a culture and environment of safe, quality patient care in compliance with national standards that addresses the needs of our community; and

WHEREAS, collectively the positions of those in nursing, respiratory, laboratory, rehabilitation, dietary, radiology, pharmacy; special services including those in environmental, facilities, risk management, regulatory and compliance, patient registration, etc. types of positions the mandated mission of the Hospital will be fully achieved; and

WHEREAS, BBMR Circular 18-04 dated January 23, 2018 requested the identification of cost saving measures; and

WHEREAS, and in accordance with the policy statement of Appendix H, these procedures will be used only after all other efforts have been explored to cut operating costs; and

**WHEREAS**, cost saving measures have been explored as presented in the attached Furlough Plan A resulting in about \$2,634,077 closely meeting the targeted savings goal of \$2.7M; and

WHEREAS, Plan B identifies the need to implement a furlough; and

WHEREAS, it was recommended to and approved by the Human Resources Subcommittee at the April 3, 2018 meeting that the need to furlough is not required based on Plan A however, should there be a need to furlough, Plan B may take effect; now, therefore be it

**RESOLVED**, that the Board of Trustee's accepts the Human Resource Subcommittee's recommendation and approves the attached Furlough Plans as appropriate; and, be it further

**RESOLVED**, that the Hospital Administrator/CEO is directed to see the cost saving measures identified in the attached Furlough Plan A to fruition or Plan B as appropriate; and, be it further

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

DULY AND REGULARLY ADOPTED ON THIS 19th DAY OF APRIL, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

#### Guam Memorial Hospital Authority Furlough Plan A July-September 2018

The budget allocation for FY 2018 is \$107m and the amount required to save in order to complete FY2018 within the allocated budget is \$2.7m.

The Guam Memorial Hospital Authority pursuant to §80109, Chapter 80, Title 10 of the Guam Code Annotated is mandated to maintain and operate a facility providing acute, chronic, and all other health care services for the people of Guam. In order to achieve this it is imperative that the Hospital sustains a culture and environment of safe, quality patient care in compliance with national standards that addresses the needs of our community.

The budget requirement is in inclusive of positions critical to essential services is \$129m reduced to \$107m for FY2018. The positions include those in nursing, respiratory, laboratory, rehabilitation, dietary, radiology, pharmacy and special services. However, collectively, along with environmental, facilities, risk management, regulatory and compliance, patient registration, etc. types of positions the mandated mission of the Hospital will be fully achieved.

Cost savings will be realized from the non-processing of salary increments beginning February 6, 2018 through September 30, 2018. This time period is a result of the provisions of BBMR Circular 18-04. This savings is estimated at about \$613,105(approx. 431 employees); the elimination of any further straight time pay for both department managers and non-managers, in which \$87,096(est. future cost @5mths, \$36,290) and \$190,531 (est. future cost @5mths, \$79,387), respectively were incurred in CY2017; the implementation of the Interim Compensation Policy for Exempt and Non-Exempt Employees, effective April 29, 2018; and the hiring freeze of non-licensed positions resulting in a savings of about \$1,905,299(March through September @approx. 129 positions).

The hiring freeze of non-licensed positions is to avoid a furlough of all Hospital employees occupying both non-licensed and licensed positions which collectively should achieve the mandated mission of the hospital. However, consequences may arise surrounding the decision not to fill vacancies albeit the targeted savings of \$2.7m being closely met. These are the increase of both employee call outs and burnout; lack of quality work; and the continued increase of overtime hours among other things. Be that as it may, the total cost savings of about \$2,634,077 is close to the expected target savings goal of \$2.7m. Therefore, the need to furlough is not required.





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

Guam Memorial Hospital Authority
Furlough Plan B
July-September 2018

The budget allocation for FY 2018 is \$107m. The amount required to save in order to complete FY2018 within the allocated budget is \$2.7m.

The Guam Memorial Hospital Authority pursuant to §80109, Chapter 80, Title 10 of the Guam Code Annotated is mandated to maintain and operate a facility providing acute, chronic, and all other health care services for the people of Guam. In order to achieve this it is imperative that the Hospital sustains a culture and environment of safe, quality patient care in compliance with national standards that addresses the needs of our community.

The budget requirement is in inclusive of positions critical to essential services is \$129m reduced to \$107m for FY2018. These positions include nursing, respiratory, laboratory, rehabilitation, dietary, radiology, pharmacy and other specialized health services. However, without the collective efforts, of environmental, facilities, risk management, regulatory and compliance, patient registration, etc. types of positions the mandated mission of the Hospital will not be fully achieved.

Proposed cost savings considered may be realized from the non-processing of salary increments beginning February 6, 2018 through September 30, 2018. This time period is a result of the provisions of BBMR Circular 18-04. This savings is estimated at about \$613,105 (approx.. 431 employees); the elimination of any further straight time pay for both department managers and non-managers, which in CY 2017 cost \$87,096 (est. future cost @5mths, \$36,290) and \$190,531(est. future cost @5mths, \$79,387), respectively; and the implementation of the Interim Compensation Policy for Exempt and Non-Exempt Employees, effective April 29, 2018.

The target savings goal of \$2.7m will not be met based on the figure of \$613,105 above, thus the need to implement Layoff and Furlough provisions. Therefore, the termination of non-clinical unclassified appointments shall be considered. With that, approval of this Plan is requested to conduct a furlough of employees occupying non-licensed positions and those licensed healthcare positions solely performing administrative type work. (This action is covered by H.2. of Appendix H –Furlough Procedures).

Services not involved in the <u>direct delivery of patient care</u> are those provided by positions in

operational, administrative and fiscal areas of the Hospital. However, it is important to note that the services provided by positions in these areas although not in direct patient care are essential to meeting <u>fully</u> the mission and mandated requirements of the Hospital.

Furlough of employees in the occupational areas associated with operational, administrative and fiscal type positions is recommended. The number of employees and their corresponding positions affected by this furlough plan is approximately 500 and shall be furloughed upon approval of this Plan as appropriate. These positions are affected due to the nature of their jobs absence functions associated with the direct delivery of patient care.

The duration of this furlough will be for three (3) months from July 1, 2018 to September 30, 2018. Employees affected will have their work hours reduced from forty (40) hours per week down to thirty-six (36) hours per week for a total of seventy-two (72) hours per pay period. This is equivalent to a ten (10%) reduction in work hours. To reduce to anything less than 72 hours per pay period will have devastating effects on the mandated requirements of the Hospital and the community we were established to serve.

The additional potential savings to be achieved as a result of reducing the work hours of operational, administrative and fiscal type positions across-the-board by 10% per pay period for the duration of three (3) months is approximately \$517,582 including the \$613,105 (S/I freeze) savings for a total of \$1,130,687. However, this action will not meet the target savings goal. An additional savings of \$1,569,313 is required to meet our target savings goal of \$2.7m.

Upon approval of this Plan, a written ninety (90) day "Notice of Furlough" to all employees will be issued with all necessary information including the encouragement of voluntary furloughs. Additionally, at least sixty (60) days prior to the commencement of the furlough, a second such notice will be issued to affected employees.



#### BUREAU OF BUDGET & MANAGEMENT RESEARCH

OFFICE OF THE GOVERNOR
Post Office Box 2950, Hagaifia Guara 96932

EDDIE BAZA CALVO GOVERNOR

DIRECTOR

RAY TENORIO LIEUTENANT GOVERNOR

JAN 23 2018

LESTER L. CARLSON JR. DEPUTY DIRECTOR

#### **BBMR CIRCULAR NO. 18-04**

To:

All Executive and Autonomous Department and Agency Heads

From:

Acting Director, Bureau of Budget and Management Research (BBMR)

Subject:

**General Fund Reduction** 

Hafa Adai! As all of you are aware President Trump signed the "Tax Cuts and Jobs Act of 2017 (the "Act")" into law at the end of 2017. The passage of this Act will have a negative effect on the Government of Guam's General Fund revenues specifically with the reduction in Corporate Taxes, Withholding Taxes and Individual Income Taxes.

BBMR has conferred with Governor Calvo and the Governor's Fiscal Team and the impact on the General Fund will begin this fiscal year with an estimated loss of approximately \$47.9 Million of projected General Fund revenue for the remainder of Fiscal Year 2018. Further, in Fiscal Year 2019 our projections show approximately \$66.! Million in General Fund Revenue will be lost.

Your immediate attention in identifying areas of cost cutting within your respective department/agency is requested as well as your suggestions for <u>revenue enhancements to offset this revenue loss</u>. A quick review of the General Fund level of appropriations to each department/agency (excludes debt service and miscellaneous appropriations) shows the following:

DEPARTMENT	LEVEL OF FY 2018 GF APPROPRIATIONS
l. Legislature	\$ 8,966,564
2. Judiciary	<b>\$</b> 34,696,443
3. Public Defender	<b>\$ 4,341,373</b>
4. University of Guam	<b>\$</b> 35,077,747
5. Guarn Community College	\$ 19,750,031
6. Guarn Memorial Hospital	\$ 2,770,616
7. Mayor's Council	\$ 788,931
8. Office of Public Accountability	\$ 1,396,898
9. Department of Education	\$225,826,664
10. Office of the Attorney General	\$ 16,249,713
11. Executive Branch Operations	\$200,819,614

Absent an immediate upward adjustment in General Fund revenues, your department/agency can expect to see a pro rata reduction, of the cuts required, in disbursements as early as February, 2018. Additionally, all options will be considered in addressing the revenue shortfall including those departments/agencies that are funded by Special Funds.

Your assigned BBMR Analyst will be in contact with your department/agency shortly with further details.

Your urgent attention and immediate response to this matter is greatly appreciated, thank you.



#### **BUREAU OF BUDGET & MANAGEMENT RESEARCH**

OFFICE OF THE GOVERNOR
Post Office Box 2950, Hagatin Guarn 96932

EDDIE BAZA CALVO GOVERNOR

DIRECTOR

RAY TENORIO LIEUTENANT GOVERNOR

JAN 23 2018

LESTER L. CARLSON JR. DEPUTY DIRECTOR

#### **BBMR CIRCULAR NO. 18-04**

To:

All Executive and Autonomous Department and Agency Heads

From:

Acting Director, Bureau of Budget and Management Research (BBMR)

Subject:

**General Fund Reduction** 

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Your assigned BBMR Analyst will be in contact with your department/agency shortly with further details.

Your urgent attention and immediate response to this matter is greatly appreciated, thank you.

#### **BUREAU OF BUDGET & MANAGEMENT RESEARCH**

OFFICE OF THE GOVERNOR
Post Office Box 2950, Hagairia Guam 96932

EDDIE BAZA CALVO GOVERNOR

LESTER L. CARLSON JR. ACTING DIRECTOR

RAY TENORIO LIEUTENANT GOVERNOR

FEB 8 5 2018

#### **BBMR CIRCULAR NO. 18-05**

To:

All Executive and Autonomous Department and Agency Heads

From:

Acting Director, Bureau of Budget and Management Research (BBMR)

Subject:

2018 General Fund Reduction in Revenues and Expenditures

#### Hafa Adai!

At the meeting of the Special Economic Service (SES) held on Wednesday, January 31, 2018, the Office of the Public Auditor and the Legislature's Office of Finance and Budget confirmed BBMR's estimate of \$47.9 Million as the amount of FY 2018 General Fund revenues that will be reduced as a result of the Tax Cuts and Jobs Act of 2017 (TCAJA). As such, appropriation levels will be affected and overall General Fund appropriation allotments must be adjusted to reflect reductions in anticipated revenues for FY 2018. As a result, BBMR will be strictly enforcing the cost cutting provisions outlined in Executive Order 2012-01 (Attachment #1). Additionally, BBMR will coordinate allotment controls with the Department of Administration with respect to cash disbursements.

The Speaker recessed the SES meeting and I expect the SES will reconvene sometime during the week of February 5, 2018 in order to discuss revenue enhancements which could temper the negative fiscal impact.

BBMR will be calling upon departments and agencies to discuss their responses to BBMR's Circular 18-04 (Attachment #2) regarding the implementation of the cost cutting measures submitted, as well as any additional measures necessary to address this revenue shortfall. Please be prepared to present details and timelines for execution of proposed cost reductions particularly for reductions/shutdown of services and/or programs. In addition, the impact of such reductions on the public must be included in your presentation.

Your urgent attention and participation at the upcoming meetings is mandatory. You will be contacted by your respective BBMR Budget Analyst for your scheduled date and time.

Thank you.

**Attachments** 



#### OFFICE OF THE GOVERNOR HAGATÑA, GUAM U.S.A.

#### **EXECUTIVE ORDER NO. 2012-01**

RELATIVE TO ESTABLISHING GUIDELINES IN SUPPORT OF THE FISCAL STABILIZATION, DEFICIT REDUCTION, COST-CONTAINMENT AND FOR IMPROVED EFFICIENCY IN GOVERNMENT OPERATIONS.

WHEREAS, the Government of Guam presently faces difficult financial challenges which stem from the cumulative deficit, unfunded/unbudgeted obligations in current and prior fiscal years, the impact of inflation on the costs of government operations, delay in planned economic development activity such as the relocation of U.S. Armed Services personnel to Guam and its effect on revenue growth, the recent natural disasters affecting Japan and other economies of the region, growth in the number of migrants to the island, and recession related factors constraining local business opportunities and trade; and

WHEREAS, the Government of Guam's ability to provide essential and efficient services to the residents of our island is highly dependent upon the optimum allocation of financial resources to the departments, agencies and instrumentalities of the government; and

WHEREAS, the consistent enforcement and monitoring of cost-containment guidelines applicable to all departments, agencies and instrumentalities is essential to improving the financial position of the government; and

WHEREAS, it is the government's intent to continue increasing the allocation of resources to the priority programs including but not limited to education, health and public safety; and

WHEREAS, the audited FY 2010 Financial Statements indicate a \$71M increase in the General Fund deficit from \$265M to \$336M; and

WHEREAS, the Department of Administration (DOA) continues to liquidate prior year accounts payable using current fiscal year revenue collections thus contributing substantially to the present negative cash flow position while adding great stress on the General Fund's ability to sustain monthly operating cash requirements and sufficient account balances; and

WHEREAS, the unfunded General Fund obligations and expenditures, inclusive of courtordered payments, further exacerbates financial stabilization efforts; and

WHEREAS, the current cash demands create the potential for recurring shortfalls if such resources are not properly collected and allocated in a manner that reflects controlled spending and adherence to corrective management initiatives; and

WHEREAS, raising the level of fiscal integrity and stability of the Government of Guam is a priority of the Administration and the implementation of remedial financial measures is essential to this aim; and



WHEREAS, the Executive branch of the government of Guam intends to stringently adhere to authorized spending thresholds that are sustained by annual operating revenue collections with the aim of improving the overall financial health and stability of the General Fund;

NOW, THEREFORE, I, EDWARD J. B. CALVO, I Maga lahen Guāhan, Governor of Guam, by virtue of the authority vested in me by the Organic Act of Guam, do order:

#### I. General Cost-containment Measures:

A. Power Usage and Consumption: The requirement of agency-wide conservation practices is mandatory and electricity usage shall be maintained at a minimum level. Cost-saving technologies to help reduce power demand shall be acquired through prescribed procurement practices. Cost saving initiatives to include weatherization, the use of optimum energy efficient air conditioners, alternative energy programs, and conservation measures shall be adhered to by all departments and agencies. Government offices shall maintain room temperature at seventy-six degrees Fahrenheit (76°F) during working hours. The Guam Energy Office shall monitor power usage and consumption by the departments/agencies/instrumentalities and provide quarterly reports to I Maga'lahen Gudhan on any non-compliance no later than 20 days after the close of each quarter. The Bureau of Budget and Management Research (BBMR) shall sequester a percentage of the non-compliant agency's annual appropriation for each quarter of non-compliance.

B. Maximized Use of Office Space: Minimum standard floor space requirements, as prescribed by OSHA, shall be determined by each entity leasing office space and shall identify excess lease space and negotiate leases accordingly. Such entity shall submit a report to BBMR as an attachment to office space lease agreements, detailing its findings. BBMR shall review all office space lease agreements, inclusive of amendments, and consider the minimum space requirements in its review and recommend consolidation/reduction of office

space where applicable.

C. Reorganization: Adaptive reorganization plans are currently being developed for agencies of the government of Guam to generate cost containment and or reduction in operating costs. Organizational design and restructuring best suited to meet the operational needs of an agency shall be developed. Certain environmental and technological changes or requirements are key factors guiding reorganization initiatives. Achieving economies of scale, maintaining or enhancing efficiencies, improving service delivery and quality of services, at the optimum level of resource allocation shall be instituted and affected government entities shall ensure compliance with all laws, rules, regulations and policies in implementation of the reorganization.

D. Fuel Consumption: Trends in the price of fuel, require departments and agencies to employ conservation practices throughout the government. Agencies maintaining rolling assets including equipment and machinery that are engaged in operations and support services and, who are major consumers of fuel such as the Guam Mass Transit Authority, Department of Public Works, Department of Public Health and Social Services, Department of Education, the Guam Police Department, Guam Fire Department and any agency that maintains an inventory of five (5) or more vehicles, equipment or machinery and other similar inventory are subject to this order. The primary objective of



this government is to reduce current fuel consumption by two to five percent in FY 2012 and subsequent fiscal years.

E. Government Procurement: DOA shall provide periodic training on procurement procedures to all departments, agencies and instrumentalities in order to ensure compliance with procurement laws, rules, regulations and guidelines. Year-end procurement requests shall be monitored by BBMR and DOA to identify excessive acquisition and storage practices or stock-piling tendencies. Such amounts identified in such practices shall be reported by DOA to BBMR who shall then sequester these funds.

F. Consolidated Training and Staff Development: During the course of the fiscal year, staff development and training programs are offered without full regard for maximized delivery and participation. Certain departments and agencies have provided internal training programs solely for the benefit of its employees. Agencies that lack resources or expertise to provide similar training programs for its staff shall be considered for joint participation to the extent feasible with the objective of facilitating or promoting staff development and training opportunities on a government-wide basis.

G. Fleet Management and Maintenance: Reducing fuel costs associated with vehicle fleet maintenance and operation is a perennial budgetary challenge of the government of Guam in years past. The Department of Public Works (DPW) is tasked to develop recommendations in this regard, to include government vehicles in line agencies that are not currently maintained by DPW, and will incorporate findings in subsequent departmental budget requests. Subsequent to presenting it findings and recommendations, DPW will recommend cost effective program/strategies to attain reduction in costs.

#### II. Personnel Actions and Initiatives:

- A. Filling of Vacancies: All Executive branch agencies desiring to fill a vacant position or create a new position shall submit a request for recruitment to the BBMR for approval to ensure that only positions essential to public health, safety and welfare or vital to government operations are filled. Any action taken contrary to or in violation of this Executive Order shall be voidable. Approval of filling any vacancy or a new position may be granted if one or more of the stipulated requirements below are met:
  - the position is critical to the agency's operation and failure to fill will cause the inability of such agency to fulfill mandates or major mission responsibilities;
  - (2) the position is vital to providing essential government functions directly related to public health, safety or welfare;
  - (3) the position is fully funded by the federal government in accordance with the federal grant award and as evidenced by the federal granting official or authority;
  - (4) the position is essential to the collection of government revenue;
  - (5) the position is mandated by local or federal law or a contract;
  - (6) the position is necessary to reduce personnel or operational costs such as accrual of overtime and or special pay.
- B. Promotions: Any promotion or position upgrading by any Executive branch agency shall be submitted to BBMR for review and approval provided that the criteria established in subsection IIA of this Executive Order are met.



Authority to Detail Employees: The Director of BBMR shall have final approval of all planned detail appointments within and between Executive branch programs and departments to include General Fund, Federal and Special Fund programs consistent with the Personnel Rules and Regulations, applicable statutes, guidelines, and terms and conditions of federal grant awards.

HI. Travel Requests:

- BBMR Approval: Executive branch travel requests shall be subject to BBMR's final approval. All air travel by persons authorized to travel at government expense for official business shall be at the lowest fare possible. Unless otherwise justified and approved by BBMR, no more than one traveler shall attend the same seminar or training session. All travel requests shall be submitted to BBMR for approval at least fifteen (15) working days prior to the commencement date of travel. The guidelines for approval shall be, but not be limited to the following:
  - The travel is essential to the conduct of important government business. (This includes the accompanying of patients or irunates to off-island
  - 2) The travel will result in securing additional revenues for the government of Guam, achieve current or future cost-savings for government operations and programs, or relate to the agency's priority work program
  - 3) The travel is required pursuant to existing contracts, public law, rule or federal program; or

4) The travel is paid by a federal grant:

Travel to Participate in Personnel Certification, Training and Staff Development or Educational Programs: BBMR and DOA shall review all travel requests to determine if it is financially feasible to conduct periodic staff education and training programs locally by:

1) Requiring government agencies to promote, host or sponsor a person, business, institution or qualified entity to conduct educational and

training programs on island;

2) Maximizing the number of employee participants who can benefit from available educational and training opportunities on island;

3) Eliminating redundant travel requests by employees who are repeat participants in certain educational and training opportunities which do not provide optimal cost-benefit return to departments and agencies;

4) Consolidating costs of travel by one or more government entities to fund local training opportunities that foster greater employee participation and benefits:

5) Allowing department and agency heads to afford greater scrutiny of travel requests and recommend to BBMR where greater cost benefit impacts can be attained.

IV. Overtime and Night Differential Pay:

All Executive branch agencies shall minimize work schedule of employees to reduce the accrual of overtime or night differential payment which shall be compensated only if such expenditures are documented, approved and submitted for processing within two weeks of the date



on which the work is performed. Each Executive branch agency shall adopt an overtime plan. The plan is due no later than thirty (30) days from the promulgation of this Executive Order with any future plans or amendments to be approved by BBMR. Overtime shall be an optional management tool or measure of last resort.

#### V. Contracts:

All contracts with any Executive branch agency shall require the review and approval of BBMR. All contracts shall be submitted to BBMR at least thirty (30) days prior to its effective date. Each agency must certify the contract complies with all laws and regulations of Guam. Upon obtaining BBMR approval, all contracts shall be submitted to the Attorney General's Office for its disposition.

- A. Office Space: All Executive branch agency contracts or renewals for office space shall not be approved unless the following criterion are met:
  - 1) Adequate space is not available at any public building; and
  - 2) The space requested is determined the minimum space required; and
  - 3) The lowest responsible bidder is selected; and
  - 4) Funding is allocated for the entire length of the contract; and
  - 5) The space is in compliance with the American Disabilities Act.
- B. Procurement: All Executive branch agencies shall submit each procurement contract for approval by BBMR. Such contracts shall be accompanied by:
  - 1) Copy of the bid specifications; and
  - 2) A copy of prior year's agreement, if applicable; and
  - 3) Evidence of funding to meet the obligations; and
  - Justification showing that the procurement from the supplier is the most cost-effective means.
- C. Off-island Recruitment and Consultant Contracts: Prior to recruitment, all contracts for off-island recruitment shall be submitted to BBMR for approval. Such contracts shall comply with the laws and regulations of Guam applicable to such. Departments, agencies, bureaus and other instrumentalities of the government of Guam shall provide proof that funding is available throughout the entire contract period.
- D. Services and Contractual Agreements: Executive branch agencies seeking contractual arrangements shall submit proposals to BBMR for approval. The proposals shall indicate:
  - (1) The agencies inability to perform the services sought in-house; and
  - (2) Cost-savings analysis or assessment; and
  - (3) Funding is available for the entire contractual period.
- E. Multi-year Contracts: Prior to the commencement of each respective fiscal year, departments and agencies shall submit proposed contract(s) requiring multiple fiscal year expenditures or appropriations to the Director of BBMR for approval. Such submittals shall occur no less than thirty (30) days prior to the proposed commencement date of the contract(s) unless otherwise accepted by the Director of BBMR for justifiable circumstance. Each contract submitted pursuant to this provision shall require the signature of the Director of BBMR to enable any department or agency to issue notice to proceed. Failure to meet BBMR review requirements established herein shall result in the non-release of funds for payment of contract(s) not in compliance with the provisions of this section.



VI. Indirect Cost Recapture (Federal Sourced Programs):

Department heads, program managers, administrators and other personnel who manage or oversee federally funded programs are directed to comply with Guam State Clearinghouse (GSC) mandates and applicable federal program provisions concerning the recapture of indirect cost outlay. Formal documentation and application for indirect cost reimbursement to respective federal funding entities shall be a standard requirement (annually) of federally funded program recipients. The recapture of indirect cost entitlements authorized by federal law shall be monitored by GSC who shall report the total indirect Cost applied for by department and program. Departments that do not apply for Indirect Cost shall submit evidence of Grantor notification, indicating the reason why Indirect Cost will not be reimbursed / funded.

#### **Authorization To Release Funds**

The Director of BBMR shall make appropriation releases to government of Guam entities only upon compliance with the requirements set forth in this Executive Order.

VIII. Monitoring of Non-General Fund Sourced Entities

All Executive branch agencies regardless of funding, shall submit at minimum, quarterly financial statements and quarterly staffing patterns to BBMR. Such agencies, department, bureaus and other instrumentalities, shall in addition, submit copies of their current fiscal year's budget, and all other information as requested, to BBMR.

IX. Non-Compliance

Non-compliance with the requirements herein, inclusive of deadlines, shall result in the immediate return/disapproval of such requests. All departments/agencies are liable and responsible for the accuracy and compliance with all rules/regulations and policies governing the respective requests/expenditures. BBMR/DOA shall promptly return/disapprove such requests once identified.

This Executive Order hereby rescinds Executive Order No. 2007-02.

X. Implementation Date This Executive Order shall take effect on January 25, 2012.

SIGNED AND PROMULGATED at Hagatria, Guam this 25th day of January, 2012.

EDWARD I. B. CALVO

l Maga'lahen Guahan Governor of Guam

COUNTERSIGNED

RAMOND S. TENORIO l Segundu na Macolahen Gudhan

Lieutenant Governor of Guam



#### OFFICE OF THE GOVERNOR HAGÅTÑA, GUAM 96910 U.S.A.

#### **EXECUTIVE ORDER NO. 2018-04**

#### RELATIVE TO AMENDING EXECUTIVE ORDER NO. 2018-03 AND TO IMPLEMENT A 32-HOUR WORK WEEK FOR THE ENTIRE EXECUTIVE BRANCH

WHEREAS, on February 28, 2018, Executive Order No. 2018-03 relative to implementing a 32-hour work week for executive branch agencies funded or partially funded by the General Fund was signed; and

**WHEREAS**, Executive Order No. 2018-03 provided for an implementation date to be effective on Tuesday, March 6, 2018; and

WHEREAS, on March 1, 2018, the Attorney General of Guam advised that the Governor "may implement a furlough program by Executive Order across the government of Guam provided the due process and other procedural requirements of Appendix H of the DOA Personnel Rules and Regulations are complied with.";

WHEREAS, unless and until the 34th Guam Legislature takes decisive and effective action to resolve the very real financial crisis that is facing the government and the island, no alternative remains but to institute whatever austerity measures are necessary and available; and

WHEREAS, Section § 1422 of the Organic Act of Guam (Title 48, United States Code) provides that the executive power of Guam is vested in the Governor of Guam "who shall have general supervision and control of all the departments, bureaus, agencies, and other instrumentalities of the executive branch of the government of Guam."



**NOW, THEREFORE, I, EDDIE BAZA CALVO,** Governor of Guam, by the authority vested in me by the Organic Act and laws of Guam, do hereby order and direct as follows:

- (1) Furlough and Layoff Procedures to Begin. In accordance with the requirements of Appendix H of the DOA Personnel Rules and Regulations and the laws of Guam, the Department of Administration shall begin the furlough and layoff procedures set forth therein.
- (2) Across the Board Application. This Executive Order shall apply, regardless of the funding source, to all Government of Guam departments, bureaus or agencies, including autonomous and semi-autonomous agencies or other instrumentalities of the Executive Branch of the government of Guam based on their respective furlough and layoff personnel rules and regulations; and shall further apply to federally-funded positions, whether fully or partially funded.

**SIGNED AND PROMULGATED** at Hagåtña, Guam, this 2nd day of March, 2018.

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EDDIE BAZA CALVO
I Maga'Låhen Guåhan
Governor of Guam





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-39

"RELATIVE TO APPROVING NINETY-EIGHT (98) NEW FEES AND UPDATING EIGHT THOUSAND SIX HUNDRED AND EIGHT (8,608) PROFESSIONAL FEES"

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on March 21, 2018 and oral comments and written testimony have been solicited regarding the ninety-eight (98) new fees comprised of the following Hospital departments: Pediatrics, Central Supply Room, Pharmacy, Operating Room and Special Services; and

WHEREAS, the Public Hearing held was also for updating Eight Thousand Six Hundred and Eight (8,608) Professional Fees; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and the updated professional fees and found the same to be in order; now, therefore be it,

**RESOLVED**, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to continue to proceed with the adjudication process of these 98 new fee items and the updated 8,608 professional fees; and, be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 19th DAY OF APRIL, 2018.

Certified by:

Attested by:

Eloy S. Lizama

Chairperson, Board of Trustees

Melissa Waibel

# GUAM MEMORIAL HOSPITAL AUTHORITY SUMMARY OF NEW FEE ITEMS/SERVICES

for Submission to the 34th Guam Legislature Public Hearing on March 21, 2018

	©H/ARGE		a lease	<b>373</b> (922)	
4NO	GODE -	DESCRIPTION		15W051	
1	1701921	FILTERLINE H ADULT/PEDS	\$ 123.00 \$	96 22	PEDIATRICS
2	1701923	FILTERLINE H INFANT/NEONATE	\$		PEDIATRICS
3	1704681	CAPNOLINE H O2 NASAL PEDS	1 \$		PEDIATRICS
4	1704689	CAPNOLINE H ADULT	\$		PEDIATRICS
5	1704691	CAPNOLINE H INFANT/NEONATE	\$		PEDIATRICS
6	1708640	CAPNOLINE H O2 NASAL ADULT	\$		PEDIATRICS
7	1711126	DRESSING TEGADERM F-A 5.5"X5.5"	\$	27.68	
8	1711127	DRESSING TEGADERM HDC 5.25"X6"	\$	20.46	
9	1711128	DRESSING TEGADERM 6 3/4X6 3/8"	\$	43.44	<del> </del>
10	1748768	CANNULA SHILEY 8.0MMM DIC	\$		CENTRAL SUPPLY ROOM
11	4233069	PROTHROMBIM COMPLEX 500IU VIAL	\$		
12	4233070	PROTHROMBIM COMPLEX 1000IU VL	\$	2,225.00	
13	4233410	TICAGRELOR 90MG TAB UD	\$	12.65	
14	4233415	ABCIXIMAB 10MG/5ML VIAL	\$	1,579.45	
15	4233420	EPTIFIBATIDE 20MG/10ML VIAL	\$	284.16	
16	4233421	EPTIFIBATIDE 75MG/100ML VIAL	\$	545.00	PHARMACY
17	4233422	EPTIFIBATIDE 200MG/100ML VIAL	\$	1,311.55	
18	4233425	ENTRESTO 24MG/26MG TAB	\$	19.46	PHARMACY
19	4233426	ENTRESTO 49MG/51MG TAB	\$	19.46	
20	7001035	SHEATH URETERAL 10/12FR 35CM	\$	738.20	OPERATING ROOM
21	7001235	SHEATH URETERAL 12/14FR 35CM	\$	738.20	OPERATING ROOM
22	7009530	PLATE DIS/RAD LCP NRW RT 2.4MM	\$		OPERATING ROOM
23	7009531	PLATE DIS/RAD LCP NRW LT 2.4MM	\$		OPERATING ROOM
24	7009630	PLATE DIS/RAD LCP 6HH RT 2.4MM	\$		OPERATING ROOM
25	7009631	PLATE DIS/RAD LCP 6HH LT 2.4MM	\$		OPERATING ROOM
26	7009730	PLATE DIS/RAD LCP 7HH RT 2.4MM	\$		OPERATING ROOM
27	7009731	PLATE DIS/RAD LCP 7HH LT 2.4MM	\$		OPERATING ROOM
28	7085849	SCREW LOCKING TI 5.0MMX26MM	\$		OPERATING ROOM
29	7085863	SCREW LOCKING TI 5.0MMX28MM	\$	765.35	OPERATING ROOM
30	7085887	SCREW LOCKING TI 5.0MMX30MM	\$	765.35	OPERATING ROOM
31	7085900	SCREW LOCKING TI 5.0MMX32MM	\$	765.35	OPERATING ROOM
32	7085924	SCREW LOCKING TI 5.0MMX34MM	\$	765.35	OPERATING ROOM
33	7085948	SCREW LOCKING TI 5.0MMX36MM	\$	765.35	OPERATING ROOM
34	7085962	SCREW LOCKING TI 5.0MMX38MM	\$	765.35	OPERATING ROOM
35	7085986	SCREW LOCKING TI 5.0MMX40MM	\$		OPERATING ROOM
36		SCREW LOCKING TI 5.0MMX42MM	\$		OPERATING ROOM  OPERATING ROOM
37		SCREW LOCKING TI 5.0MMX44MM	\$		OPERATING ROOM  OPERATING ROOM
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38	7086044	SCREW LOCKING TI 5.0MMX46MM	\$	765.35	OPERATING ROOM
39	7086068	SCREW LOCKING TI 5.0MMX48MM	\$	765.35	OPERATING ROOM
40	7086082	SCREW LOCKING TI 5.0MMX50MM	\$	765.35	OPERATING ROOM
41	7086105	SCREW LOCKING TI 5.0MMX52MM	\$	765.35	OPERATING ROOM
42	7086129	SCREW LOCKING TI 5.0MMX54MM	\$	765.35	OPERATING ROOM
43	7086143	SCREW LOCKING TI 5.0MMX56MM	\$	765.35	OPERATING ROOM
44	7086167	SCREW LOCKING TI 5.0MMX58MM	\$	765.35	OPERATING ROOM
45	7086181	SCREW LOCKING TI 5.0MMX60MM	\$	765.35	OPERATING ROOM
46	7086228	SCREW LOCKING TI 5.0MMX64MM	\$	765.35	OPERATING ROOM
47	7086266	SCREW LOCKING TI 5.0MMX68MM	\$	765.35	OPERATING ROOM
48	7086303	SCREW LOCKING TI 5.0MMX72MM	\$	765.35	OPERATING ROOM
49	7086341	SCREW LOCKING TI 5.0MMX76MM	\$	765.35	OPERATING ROOM
50	7086389	SCREW LOCKING TI 5.0MMX80MM	\$	765.35	OPERATING ROOM
51	7086402	SCREW LOCKING TI 5.0MMX85MM	\$	765.35	OPERATING ROOM
52	7086426	SCREW LOCKING TI 5.0MMX90MM	\$	765.35	OPERATING ROOM
53	7089862	BLADE HELICAL TFNA 85MM	\$	1,506.04	OPERATING ROOM
54	7098900	BLADE HELICAL TFNA 70MM	\$	1,506.04	OPERATING ROOM
55	7098924	BLADE HELICAL TFNA 75MM	\$	1,506.04	OPERATING ROOM
56	7098948	BLADE HELICAL TFNA 80MM	\$	1,506.04	OPERATING ROOM
57	7098986 📝	BLADE HELICAL TFNA 90MM	\$	1,506.04	OPERATING ROOM
58	7099006	BLADE HELICÂL TFNA 95MM	\$	1,506.04	·
59	7099020	BLADE HELICAL TFNA 100MM	\$	1,506.04	OPERATING ROOM
60	7099044	BLADE HELICAL TFNA 105MM	\$	1,506.04	OPERATING ROOM
61	7099068	BLADE HELICÄL TFNA 110MM	\$	1,506.04	OPERATING ROOM
62	7099082	BLADE HELICAL TFNA 115MM	\$	1,506.04	OPERATING ROOM
63	7099105	BLADE HELICAL TFNA 120MM	\$	1,506.04	OPERATING ROOM
64	7099129	BLADE HELICAL TFNA 125MM	\$	1,506.04	OPERATING ROOM
65	7099143	BLADE HELICAL TFNA 130MM	\$	1,506.04	
66	9300385	GUIDEWIRE CRN NS .014"X180CM	\$	621.90	SPECIAL SERVICES
67	9301510	BALLOON SPRINTER 1.5MMX10MM	\$	770.00	SPECIAL SERVICES
68	9302251	STENT COR DES 2.25MMX14MM	\$	2,000.00	SPECIAL SERVICES
69	9302512	STENT COR DES 2.5MMX12MM	\$	2,000.00	SPECIAL SERVICES
70	9302514	STENT COR DES 2.5MMX14MM	\$	2,000.00	
71	9302518	STENT COR DES 2.5MMX18MM	\$	2,000.00	SPECIAL SERVICES
72	9302520	BALLOON SPRINTER 2.5MMX20MM	\$	770.00	SPECIAL SERVICES
73	9303015	STENT COR DES 3.0MMX15MM	\$	2,000.00	SPECIAL SERVICES
74	9303026	STENT COR DES 3.0MMX26MM	\$	2,000.00	SPECIAL SERVICES
75	9303415	GUIDEWIRE CRN MG 130CM 1.8FR	\$	621.90	SPECIAL SERVICES
76	9303512	STENT COR DES 3.5MMX12MM	\$	2,000.00	SPECIAL SERVICES
77	9303518	STENT COR DES 3.5MMX18MM	\$	2,000.00	SPECIAL SERVICES
78	9303526	STENT COR DES 3.5MMX26MM	\$	2,000.00	SPECIAL SERVICES
79	9303851	GUIDEWIRE NS EXT .014"X150CM	\$	130.26	SPECIAL SERVICES
80		CATHETER GUIDE SBS4 2 S-H 6FR	\$	284.79	SPECIAL SERVICES
81		STENT COR DES 4.0MMX15MM	\$		SPECIAL SERVICES
			_Ψ	د,٥٥٥.٥٥	OF ECIAL SERVICES

82	9307042	GUIDEWIRE FC JTIP .035"X145CM	\$ 680.00	SPECIAL SERVICES
83	9308631	GUIDEWIRE FC JTIP .035"X280CM	\$ 680.00	SPECIAL SERVICES
84	9310016	CATHETER GUIDE AL1 LT 2S-H 6FR	\$ 284.79	SPECIAL SERVICES
85	9310038	CATHETER HOCKEY STICK	\$ 86.02	SPECIAL SERVICES
86	9310225	BALLOON SPRINTER 2.25MMX10MM	\$ 770.00	SPECIAL SERVICES
87	9310259	BALLOON SPRINTER NC 2.5MMX9MM	\$ 770.00	SPECIAL SERVICES
88	9310309	STENT COR DES 3.0MMX9MM	\$ 2,000.00	SPECIAL SERVICES
89	9310312	BALLOON SPRINTER NC 3MMX12MM	\$ 770.00	SPECIAL SERVICES
90	9310325	BALLOON SPRINTER NC 3.25MMX12MM	\$ 770.00	SPECIAL SERVICES
91	9310351	BALLOON SPRINTER NC 3.5MMX12MM	\$ 770.00	SPECIAL SERVICES
92	9310415	BALLOON SPRINTER NC 4MMX15MM	\$ 770.00	SPECIAL SERVICES
93	9330016	CATHETER GUIDE AL3 LT 6FR	\$ 284.79	SPECIAL SERVICES
94	9352023	CATHETER SONES 6FR 100CM	\$ 77.42	SPECIAL SERVICES
95	9353001	CATHETER GUIDE 3.5 2 S-H 6FR	\$ 284.79	SPECIAL SERVICES
96	9379109	BALLOON SPRINTER NC 4MMX9MM	\$ 770.00	SPECIAL SERVICES
97	9381830	INTRODUCER SHTH .038"X11CM 6FR	\$ 70.97	SPECIAL SERVICES
98	9391039	BALLOON SPRINTER NC 3MMX9MM	\$ 770.00	SPECIAL SERVICES
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LAST ITEM

	I certify that this listing of items	comprises all fees required by law	for submission a	at this time to be o	omniata
ï	as presented/here.	,			omhiere

Hospital Quality Improvement Specialist

1st Endorsement of Concurrence:

I concur and further certify that this listing of items are exempted under Section 9301(i) to Article 3, Chapter 9, Division 1 of Title 5 of the Guam Code Annotated and in compliance with Title10 GCA Part 2 Division 4 Chapter 80 §80109

Benita A. Manglona

**Chief Financial Officer** 

3/12/18

Date





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-40

#### "RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<u>Practitioner</u>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Kia Rahmani, MD	Surgery	General Surgery	April 30, 2020
Ibrahim Aburiziq, MD	Surgery	Pathology	April 30, 2020
Joel Rubio, MD	Medicine	Endocrinology	April 30, 2020
Vasin Jungtrakoolchai, MD	Medicine	Internal Medicine	April 30, 2020
Daniel Case, MD	Emergency Med.	Emergency Medicine	April 30, 2020
Christian Eusebio, MD	Surgery	General Surgery	April 30, 2020

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 on April 25, 2018 and the Joint Conference and Professional Affairs Committee on May 3, 2018 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 31st DAY OF MAY, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-41

#### "RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES"

<b>Practitioner</b>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
John Holeman, MD	Medicine	Internal Medicine (Hospitalist)	April 30, 2020
Divis Khaira, MD	Medicine	Internal Medicine (Hospitalist)	April 30, 2020
Craig Settle, MD	Emergency Med.	Emergency Medicine	April 30, 2020

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 on April 25, 2018 and the Joint Conference and Professional Affairs Committee on May 3, 2018, 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 31st DAY OF MAY, 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-42

"RELATIVE TO THE ESTABLISHMENT OF THE ASSISTANT ADMINISTRATOR OF NURSING SERICES AND DEPUTY ASSISTANT ADMINISTRATOR OF NURSING SERVICES POSITIONS IN THE CLASSIFIED SERVICE FOR THE NURSING ADMINISTRATION DEPARTMENT"

WHEREAS, the current Assistant Administrator, Nursing Services and the Deputy Assistant, Nursing Services are both under the unclassified service of the government of Guam classification list; and

WHEREAS, the current position is staffed with incumbents holding the unclassified position; and

WHEREAS, the practicality of classifying these two position to provide continuity of the mission and objective of the Nursing Division; and

WHEREAS, for better operational efficiency and coordination of positions, the Assistant Administrator, Nursing Services and the Deputy Assistant, Nursing Services; now, therefore be it

**RESOLVED**, that the Board of Trustees accepts the recommendation of the HR, BOT Sub-Committee and approves the establishment the Assistant Administrator, Nursing Services and Deputy Assistant Administrator, Nursing Services in the classified service for the Nursing Administration Department positions; and, be it further

**RESOLVED,** that the classified positions be filled through the competitive administrative recruitment process; and, be it further

**RESOLVED,** that the Hospital Administrator/CEO is directed to initiate the administrative processes to bring to fruition the utilization of these positions; 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 31st DAY OF MAY, 2018.

Certified by:	Attested by:
	Metros Warfel
Eloy S. Lizama Chairperson, Board of Trustees	Melissa Waibel Secretary, Board of Trustees

## ASSISTANT ADMINISTRATOR, NURSING (Proposed Creation)

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

The Assistant Administrator, Nursing is administratively responsible for the provision of all nursing services provided by the Hospital. The employee in this class is responsible for planning, administering, directing, controlling, and coordinating nursing care delivery and the operations of the Nursing Division. The Assistant Administrator, Nursing is expected to collaboratively work-with the Board of Trustees, the Administrator, the Executive Management Council, the Medical Staff, Hospital Departments, and members of the community in meeting the goals and needs of the Nursing Division.

This position reports to the Associate Administrator, Clinical Services. The Assistant Administrator of Nursing Services is a mandatory member of the Executive Management Council.

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

Assesses and evaluates the organization of the Division. Initiates modifications in the structure to improve the efficiency and quality of the nursing services provided.

Identifies annual goals in collaboration with the Nursing Management Team which correspond to the Hospital's mission and annual goals established through the planning process.

Prepares and defends proposals for the capital and operating budgets. Participates in at least a quarterly evaluation of the budgetary performance of the Division.

Determines the number, types, and utilization of nursing personnel for all current and programs being planned. Implements a program for the recruitment and retention of staff.

Administers Government of Guam policies established for the recruitment and management of personnel and for the procurement of equipment and supplies.

Establishes and implements a mechanism to allocate and monitor the allocation of nursing staff on a shift-to-shift basis for each Nursing Unit.

Assures members of the Division have sufficient supplies and equipment to provide quality and safe patient care.

Assures standards of care are established and monitored for each Nursing Unit.

Assures the implementation of the Quality Improvement Program in the Division.

Serves as an advisor to the Hospital Administrator on all matters pertaining to nursing.

Represents the Hospital as the nursing resource person in meetings and conferences between the Board of Trustees, the Executive Management Council, professional nurses, medical staff, department heads, and organizations in the community. Presents the nursing component serving as an educator or patient advocate on the issues which are addressed.

Participates with the medical and nursing staff in the development and formulation of major operational policies of the hospital. Develops, interprets, revises, and implements policies and procedures which promote patient care delivery or the efficient operation of the Division. Assures all policy and procedure manuals are reviewed or revised at least annually.

Periodically conducts unit inspections and visits with staff and patients to assess the compliance to established standards and policies which promote quality, consistency, and safety. Implements appropriate corrective actions based upon these findings.

Maintains knowledge of current Health Care Financing Administration, Joint Commission, and GOSHA standards and applicable health law. Coordinates the education of the appropriate members of the Department to these changes. Assures compliance to these standards and laws.

Assures the continuous implementation of an effective program to orient and continually develop all nursing personnel.

Assures mechanisms are in place to effectively address patients' rights, resolving ethical issues, educational needs, and discharge planning needs.

Establishes and enforces a mechanism for the documentation of the nursing process for all nursing services provided.

Participates in continuing educational activities and review of journal articles and research to keep abreast of current administrative or clinical trends.

Supervises the administrative support staff of the Department.

Performs related work as appropriate and assigned.

#### MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Extensive knowledge of the principles, practices, and theory of hospital nursing administration and the application of techniques in providing nursing care to patients.

Extensive knowledge of supervisory and management principles, strategies, and interventions involved in hospital nursing administration.

Current knowledge of the trends and current developments in nursing administration and the clinical areas of service which are provided by the Hospital.

Thorough knowledge of the methods of prevention and control of communicable and infectious diseases.

Ability to plan, direct, organize, and supervise the work of others.

Ability to develop and defend capital and operating budgets.

Ability to establish and maintain effective working relationships with the Board of Trustees, Administration, Medical Staff, Department Heads and subordinates.

Ability to make decisions in accordance with professional standards, ethics, the law, and rules and regulations.

Ability to effectively express oneself clearly, concisely, and effectively both orally and in writing.

Ability to communicate effectively one-on-one, in small groups, and to large bodies of people.

Ability to monitor the operation of the Division and to prepare complex reports.

Documented clinical experience in at least one nursing area.

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

- A. Graduation from an accredited college or university with a Master's degree in nursing administration, or closely related field with four (4) years of progressively responsible hospital nursing experience which includes three (3) years in an administrative or supervisory capacity; or
- B. Graduation from an accredited college or university with a Bachelor's degree in nursing and six (6) years of progressively responsible hospital nursing experience which includes at least four (4) years in an administrative or supervisory capacity. All candidates who lack a master's degree must consent to submit a plan for prior approval, to Administration which demonstrates how they propose to complete a master's degree or equivalent preparation within five (5) years of hire.

#### **NECESSARY SPECIAL OUALIFICATION REQUIREMENT:**

Possession of a current license as a Registered Nurse on Guam.

#### **DESIRED SPECIAL OUALIFICATION REQUIREMENT:**

Certification by the American Nurses Credentialing Center (ANCC) as a Certified Nurse Executive  $\underline{o} \underline{r}$  a Certified Nurse Executive, Advanced.

Established: \_\_\_\_\_ 2018

KNOW HOW FII3 400

PROBLEM SOLVING F4 (50%) 200

ACCOUNTABILITY E2P 230

TOTAL 830

PAY GRADE S (NPP)

Approved:

Eloy S. Lizama, Chairman, Board of Trustees

Date: 5/31/18

## Deputy Assistant, Nursing Services (Proposed Creation)

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

This is responsible supervisory and administrative work in assisting the Assistant Administrator of Nursing in directing all nursing services of the hospital.

The employee in this class assists the Nursing Administrator in planning, directing and coordinating the entire nursing services of the hospital.

The employee exercises considerable independent judgment and initiative in accordance with professional nursing standards, established policies and procedures. Work is reviewed through conferences and submission of reports.

#### ILLUSTRATIVE EXAMPLES OF WORK:

Assists the Assistant Nursing Administrator in planning, directing and coordinating the nursing services of the hospital, encompassing the day, evening and night shifts.

Participates in analyzing and evaluating nursing and related services rendered to improve quality of patient care, and assists in planning better utilization of staff time and abilities.

Assists in developing policies and procedures; interprets and explains new policies and procedures to nursing personnel.

Participates in coordinating nursing activities of various hospital departments, promoting and maintaining harmonious relationships among nursing personnel and medical staff, patients and the public.

Assists in recruiting, selecting and retaining qualified nursing and auxiliary personnel.

Directs and participates in orientation and in-service training programs for nursing and auxiliary personnel designed to improve nursing care.

Participates in meetings and conferences.

Answers correspondence relating to nursing services, and prepares administrative reports.

Directs and evaluates the application of professional nursing principles and practices, and recommends changes in procedures to improve standards of nursing car

Performs related work as required.

#### MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of the principles, practices and theory of professional nursing and application of techniques in providing hospital nursing care to patients, including those basic knowledges related to nursing such as biological, physical, social and medical sciences, and their application for better understanding of patient care problems.

Knowledge of the methods of prevention and control of communicable and infectious diseases.

Knowledge of supervisory and management techniques and procedures involved in hospital nursing administration.

Knowledge of the trends and current developments in nursing, with emphasis in hospital nursing administration.

Ability to plan, assign and supervise the work of others.

Ability to make work decisions in accordance with professional standards, rules and regulations, and to apply departmental policies and procedures to work problems.

Ability to establish and maintain effective working relationships with others.

Ability to express oneself clearly, concisely and effectively, both orally and in writing.

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

- (a) Graduation from an accredited college or university with a Master's degree in nursing, administration or closely related field, and three (3) years of progressively responsible professional nursing work, including two (2) years in an administrative or supervisory capacity; or
- (b) Graduation from an accredited college or university with a Bachelor's degree in nursing, and four (4) years of progressively responsible professional nursing work, including three (3) years in an administrative or supervisory capacity.

#### **NECESSARY SPECIAL OUALIFICATION REQUIREMENT:**

Possession of a current license as a Registered Nurse on Guam.

#### **DESIRED SPECIAL OUALIFICATION REQUIREMENT:**

Certification by the American Nurses Credentialing Center (ANCC) as a Certified Nurse Executive or a Certified Nurse Executive, Advanced.

Established: \_\_\_\_ 2018

KNOW HOW

EII3 350

PROBLEM SOLVING E4 (43%) 152

ACCOUNTABILITY E3C 175

TOTAL

630

PAY GRADE

R (NPP)

Approved:

Eloy S. Lizama, Chairman, Board of Trustees



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### Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

#### BOARD OF TRUSTEES Official Resolution No. 2018-43

# "RELATIVE TO THE DELEGATION OF POLICY APPROVAL TO THE BOARD SUBCOMMITTEES"

WHEREAS, the Governance and control of the Guam Memorial Hospital Authority (GMHA) are vested in a Board of Trustees; and

WHEREAS, GMHA's sole responsibility is to provide and deliver quality health care to the people of Guam guided by its policies and procedures, Bylaws, and other forms of guidance; and

WHEREAS, the Centers for Medicare and Medicaid Services (CMS) and the Joint Commission (JC) require regular (annual or three year) policy and procedure reviews to be conducted; and

WHEREAS, the Centers for Medicare and Medicaid Services (CMS) and the Joint Commission (JC) require that certain policies and procedures be reviewed and approved by the Governing Body; now, therefore be it

**RESOLVED**, that Board of Trustees hereby delegates approving authority for policies and procedures by the Board subcommittees that fall under the purview of the respective subcommittee (e.g. human resources related shall be approved by the Human Resources Subcommittee, medical staff related shall be approved by the Joint Conference and Professional Affairs Subcommittee, etc.); and, be it further

RESOLVED, that the Chairman certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF JULY, 2018.

Certified by:	Attested by:	
Elov C Ligama		
Eloy S. Lizama	Melissa Waibel	
Chairperson, Board of Trustees	Secretary, Board of Trustees	





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-44

#### "RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<b>Practitioner</b>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Thomas Shieh, MD	Obstetrics/Gynecology	Obstetrics/Gynecology	May 31, 2020
Martin Arrisueno, MD	Emergency Medicine	Emergency Medicine	May 31, 2020

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 on May 30, 2018 and the Joint Conference and Professional Affairs Committee on June 7, 2018 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 6th DAY OF JULY 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

# BOARD OF TRUSTEES Official Resolution No. 2018-45

# "RELATIVE TO THE REAPPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES"

<b>Practitioner</b>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Soheil Hanjani, MD	Obstetrics/Gynecology	Obstetrics/Gynecology	May 31, 2020
Frankie Mendiola, MD	Emergency Medicine	Emergency Medicine	May 31, 2020
Lan Vu, MD	Radiology	Radiology	May 31, 2020

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 on May 30, 2018 and the Joint Conference and Professional Affairs Committee on June 7, 2018, 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 6th DAY OF JULY 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-46

#### "RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<u>Practitioner</u>	<b>Department</b>	<b>Specialty</b>	Expiration
Michael Um, MD	Pediatrics	Pediatrics	June 30, 2020
Dina Domalanta-Villaluna, MD	Pediatrics	Pediatrics	June 30, 2020
Joleen Aguon, MD	Medicine	Pulmonary/Critical Care	June 30, 2020
Erika Alford, MD	Medicine	Endocrinology	June 30, 2020
Jonathan Sidell, MD	Ob/Gyn	Ob/Gyn	June 30, 2020
Virgilio Petero, MD	Surgery	Urology	June 30, 2020

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 on June 27, 2018 and the Joint Conference and Professional Affairs Committee on July 19, 2018 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 26th DAY OF JULY 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

# BOARD OF TRUSTEES Official Resolution No. 2018-47

#### "RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES"

PractitionerDepartmentSpecialtyExpirationJennifer Law, MDEmergency RoomEmergency MedicineJune 30, 2019

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 on June 27, 2018 and the Joint Conference and Professional Affairs Committee on July 19, 2018, 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 26th DAY OF JULY 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

# BOARD OF TRUSTEES Official Resolution No. 2018-48

#### "RELATIVE TO APPROVING REVISIONS TO THE MEDICAL STAFF BYLAWS"

WHEREAS, the Medical Staff Bylaws Committee the Medical Executive Committee, had reviewed the Medical Staff Bylaws and Medical Staff Rules and Regulations; and

WHEREAS, as a result of the review, proposed revisions to the Medical Staff Bylaws, Article III: Membership, Article X: Meetings, and Article XII: Committees of Staff; and

WHEREAS, on July 19, 2018, the Joint Conference and Professional Affairs subcommittee reviewed and recommended that the Board of Trustees approve the proposed revisions to the Medical Staff Bylaws; now, therefore be it

**RESOLVED**, that the Board of Trustees accepts and approves the Joint Conference and Professional Affairs subcommittee's recommendation; and, be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 26th DAY OF JULY 2018.

Certified By:

Eloy S. Lizama

Chairman, Board of Trustees

Attested By:

Melissa Waibel

# GUAM MEMORIAL HOSPITAL AUTHORITY MEDICAL STAFF OFFICE

Item: Medical Staff Bylaws

PROPOSED REVISIONS FORM

	Existing		Proposed	Rationale
ARTICLE III:	MEMBERSHIP	ARTICLE III:	MEMBERSHIP	
3.3 BASIC RE	SPONSIBILITIES OF MEMBERSHIP	3.3 <u>BASI</u>	C RESPONSIBILITIES OF MEMBERSHIP	
Each member	of the Staff shall:	Each member	of the Staff shall:	
3.3-1	Provide patients with care at the professionally highest level of quality safety and efficiency and with care and compassion.	3.3-1	<ul> <li>Provide patients with care at the professionally highest level of quality safety and efficiency and with care and compassion.</li> </ul>	To ensure
3.3-2	Abide by the Medical Staff bylaws and rules and regulations, and by all other established standards, policies and rules of the hospital;	3.3-2	Abide by the Medical Staff bylaws and rules and regulations, and by all other established standards, policies and rules of the hospital;	compliance with all hospital mandated training and
3.3-3	Discharge such staff, department, (service), committee and hospital functions for which he/she is responsible by appointment, election or otherwise;	3.3-3	Discharge such staff, department, (service), committee and hospital functions for which he/she is responsible by appointment, election or otherwise;	policies.
3.3-4	Prepare and complete within the time limitation as specified in these bylaws, the medical and other required records for all patients admitted or in any way provided care in the hospital;	3.3-4	Prepare and complete within the time limitation as specified in these bylaws, the medical and other required records for all patients admitted or in any way provided care in the hospital;	
3.3-5	Abide by the ethical principles of his/her profession, including but not limited to: refraining from fee splitting or other inducements relating to patient referral; providing for continuous care of his/her patients; refraining from delegating the responsibility for diagnosis or care of hospitalized patients to a practitioner who is not adequately qualified or supervised; seeking consultation whenever necessary;	3.3-5	Abide by the ethical principles of his/her profession, including but not limited to: refraining from fee splitting or other inducements relating to patient referral; providing for continuous care of his/her patients; refraining from delegating the responsibility for diagnosis or care of hospitalized patients to a practitioner who is not adequately qualified or supervised; seeking consultation whenever necessary;	
	Promptly notify the Administrator of the revocation or suspension of his/her professional license by any state, or of his/her loss of staff membership or privileges at any hospital or other health care institution;	3.3-6	Promptly notify the Administrator of the revocation or suspension of his/her professional license by any state, or of his/her loss of staff membership or privileges at any hospital or other health care institution;	
3.3-7	Promptly notify the Administrator of any change in health or	3.3-7	Promptly notify the Administrator of any change in health or	

mental status that would affect his/her ability to practice
hospital privileges with reasonable sill and safety;

- 3.3-8 Participate in continuing medical education programs, which may include programs conducted by the hospital.
- 3.3-9 Avoid disruptive behavior and activities that are demeaning or threatening to other staff and/or place the patient at risk.

- mental status that would affect his/her ability to practice hospital privileges with reasonable sill and safety;
- 3.3-8 Participate in continuing medical education programs, which may include programs conducted by the hospital.
- 3.3-9 Avoid disruptive behavior and activities that are demeaning or threatening to other staff and/or place the patient at risk.
- 3.3-10 Comply with all hospital requirements to include all hospital required compliance training and adhere to all applicable policies and procedures of the hospital.

Item: Medical Staff Bylaws
Reviewed by Bylaws: 02/09/18

Approved:

Bylaws Committee: 02/09/18

MEC: 02/28/2018

Medical Staff 1st Reading: 04/26/2018

JCPAC: BOT:

#### **GUAM MEMORIAL HOSPITAL AUTHORITY MEDICAL STAFF OFFICE**

Item: Medical Staff Bylaws

#### PROPOSED REVISIONS FORM

Existing	Proposed	Rationale
ARTICLE X: MEETINGS  10.3 QUORUM  Twenty-five percent of those members, who are eligible to vote and have signed in, shall constitute a quorum for any regular or special meeting of the Staff. A quorum once having been found, the business of the meeting may continue and all actions taken shall be binding even though less than a quorum exists at a later time in the meeting. The exception would be for items not on the agenda unless approved by a quorum present.  10.4-4 Quorum  A. The presence of twenty-five percent of the total membership of the department or committee eligible to vote at any regular or special meeting (but no fewer than three members) shall constitute a quorum for all actions.  B. When a Medical Staff Committee has a multidisciplinary composition, a quorum shall consist of twenty five percent of the total membership of the committee.  C. Once a quorum has been established, the business of the meeting may continue and all actions taken shall be binding even though less than a quorum exists at a later time in the meeting.	ARTICLE X: MEETINGS  10.3 QUORUM  Fifteen (15%) percent of those members, who are eligible to vote and have signed in, shall constitute a quorum for any regular or special meeting of the Staff. A quorum once having been found, the business of the meeting may continue and all actions taken shall be binding even though less than a quorum exists at a later time in the meeting. The exception would be for items not on the agenda unless approved by a quorum present.  10.4-4 Quorum  A. The presence of fifteen (15%) percent of the total membership of the department or committee eligible to vote at any regular or special meeting (but no fewer than one medical staff member) shall constitute a quorum for all actions.  B. When a Medical Staff Committee has a multidisciplinary composition, a quorum shall consist of fifteen (15%) percent of the total membership of the committee.  C. Once a quorum has been established, the business of the meeting may continue and all actions taken shall	To ensure that all meetings of the medical staff are able to establish a quorum and conduct business in accordance with the bylaws.

Reviewed by Bylaws: 02/09/18
Approved:
Bylaws Committee: 02/09/18
MEC: 02/28/18

Medical Staff 1st Reading: 04/26/2018

JCPAC: BOT:

# GUAM MEMORIAL HOSPITAL AUTHORITY MEDICAL STAFF OFFICE

Item: Medical Staff Bylaws

#### PROPOSED REVISIONS FORM

PROPOSED REVISIONS FORM			
Proposed	Rationale		
ARTICLE XII: COMMITTEES OF THE STAFF  12.1-2 Chairpersons			
<ul> <li>A. All medical staff committee and clinical departments' Multidisciplinary Working Subcommittee chairpersons, unless otherwise provided for in these Bylaws, will be appointed by the President of the Medical Staff subject to the approval of the Medical Executive Committee.</li> <li>All chairpersons shall be selected from among persons appointed to the Active Staff. After serving an initial term of one year, a chairperson may be reappointed by the President of the Medical Staff or the department chairperson, as appropriate, for a maximum of three additional yearly terms.</li> <li>B. Co-Chairpersons of the Multidisciplinary Subcommittees shall be the appropriate nurse director and shall be appointed by the Assistant Administrator of Nursing Services. The term of office for the co-chairperson shall be for an indefinite period.</li> <li>C. The Chairpersons of all medical staff committees shall have the responsibility of ensuring that committee meetings are held and conducted in accordance with these bylaws.</li> <li>D. The Chairman identified in Bylaws 12.1-1 as being members of the Medical Executive Committee are expected to attend all MEC meetings. If a Chairman is not available for the MEC meeting, he/she may designate a representative to attend as proxy.</li> <li>E. If the Chairman of a committee has 2 consecutive unexcused absences from meetings of the committee of which he/she is Chairman, then it will be the responsibility of the MEC Chairman to speak with the Chairman of that committee and</li> </ul>	To ensure that Chairpersons of Committees discharge their responsibility of ensuring that meetings are held and meeting business is conducted in accordance with the bylaws.		
	A. All medical staff committee and clinical departments' Multidisciplinary Working Subcommittee chairpersons, unless otherwise provided for in these Bylaws, will be appointed by the President of the Medical Staff subject to the approval of the Medical Executive Committee.  All chairpersons shall be selected from among persons appointed to the Active Staff. After serving an initial term of one year, a chairperson may be reappointed by the President of the Medical Staff or the department chairperson, as appropriate, for a maximum of three additional yearly terms.  B. Co-Chairpersons of the Multidisciplinary Subcommittees shall be the appropriate nurse director and shall be appointed by the Assistant Administrator of Nursing Services. The term of office for the co-chairperson shall be for an indefinite period.  C. The Chairpersons of all medical staff committees shall have the responsibility of ensuring that committee meetings are held and conducted in accordance with these bylaws.  D. The Chairman identified in Bylaws 12.1-1 as being members of the Medical Executive Committee are expected to attend all MEC meetings. If a Chairman is not available for the MEC meeting, he/she may designate a representative to attend as proxy.  E. If the Chairman of a committee has 2 consecutive unexcused absences from meetings of the committee of which he/she is Chairman, then it will be the responsibility of the MEC		

6

meetings of the MEC, then it will be the responsibility of the MEC Chairman to counsel the Chairman of that committee. If the Chairman of a committee has 3 consecutive unexcused absences from meetings either of the committee of which he/she is Chair or of the MEC, then it will be the responsibility of the MEC Chairman to appoint a new Chairman of the committee. It will be the responsibility of the MEC Chairman to report to the Board of Trustees any committee which does not meet 3 consecutive times as scheduled by the Bylaws, regardless of the reason for not meeting.

Item: Medical Staff Bylaws Reviewed by Bylaws: 02/09/18 Approved:

Bylaws Committee: 02/09/18

MEC: 02/28/18

Medical Staff 1st Reading: 04/26/2018

JCPAC: BOT:

# GUAM MEMORIAL HOSPITAL AUTHORITY MEDICAL STAFF OFFICE

Item: Medical Staff Bylaws

#### PROPOSED REVISIONS FORM

Existing	Proposed	Rationale
ARTICLE XII: COMMITTEES OF THE STAFF	ARTICLE XII: COMMITTEES OF THE STAFF	
12.1-3 <u>Members</u>	12.1-3 Members	
<ul> <li>A. Medical staff members of each committee and subcommittee, except as otherwise provided for in these Bylaws, shall be appointed yearly by the President of the Staff, not more than ten (10) days after the end of the medical staff year, with no limitation in the number of terms they may serve. All appointed medical staff members may be removed and vacancies filled by the President of the Staff at his/her discretion.</li> <li>B. All appointed non-physician staff (sub) committee members may be removed and vacancies filled by the appropriate Hospital Administrative staff. Non-physician staff (sub) committee members or their respective designees, unless otherwise designated as ex-officio, shall be members, with vote, on all multidisciplinary (sub) committees.</li> </ul>	<ul> <li>A. Medical staff members of each committee and subcommittee, except as otherwise provided for in these Bylaws, shall be appointed yearly by the President of the Staff, not more than ten (10) days after the end of the medical staff year, with no limitation in the number of terms they may serve. All appointed medical staff members may be removed and vacancies filled by the President of the Staff at his/her discretion.</li> <li>B. All appointed non-physician staff (sub) committee members may be removed and vacancies filled by the appropriate Hospital Administrative staff. Non-physician staff (sub) committee members or their respective designees, unless otherwise designated as ex-officio, shall be members, with vote, on all multidisciplinary (sub) committees.</li> <li>C. Members of committees may designate a member of the medical staff to act as a proxy member in their absence. The proxy will have voting rights in accordance with these bylaws.</li> <li>D. The Chairman identified in Bylaws 12.1-1 as being members of the Medical Executive Committee are expected to attend all MEC meetings. If a Chairman is not available for the MEC meeting, he/she may designate a representative to attend as proxy.</li> <li>E. If the Chairman of a committee has 2 consecutive unexcused absences from meetings of the Committee and reschedule the meeting immediately. If the Chairman of a committee has 2 consecutive unexcused absences from meetings of the MEC, then it will be the responsibility of the MEC Chairman to counsel the Chairman of that committee.</li> <li>F. If the Chairman of a committee has 3 consecutive unexcused absences from meetings either of the committee of which he/she is Chair or of the MEC, then it will be the responsibility of the MEC Chairman to</li> </ul>	To establish members by proxy for the purpose of ensuring the business of committee meetings are carried out and not stalled due to lack of quorum.
	appoint a new Chairman of the committee.  G. It will be the responsibility of the MEC Chairman to report to the Board of Trustees any committee which does not meet 3 consecutive times as scheduled by the Bylaws, regardless of the reason for not meeting	

Item: Medical Staff Bylaws

Reviewed by Bylaws: 02/09/18

Approved:
Bylaws Committee: 02/09/18
MEC:02/28/18

Medical Staff 1st Reading: 04/26/2018

JCPAC: BOT:





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-49

# "RELATIVE TO THE ADDITION OF ACCOUNTABILITY FACTORS TO PERFORMANCE EVALUATIONS FOR ALL SUPERVISORY AND MANAGERIAL POSITIONS"

WHEREAS, supervisors and managers throughout the hospital play a critical role in the operations of their respective departments and at ensuring their departments are compliant with all applicable requirements; and

WHEREAS, department leaders are responsible for developing policies and procedures to provide guidance for decision-making and to streamline our internal processes, and for conducting periodic reviews to ensure best practices are incorporated; and

WHEREAS, department leaders are responsible for establishing a clear understanding of their employees' job duties, responsibilities, and priorities in an efficient and timely manner because it provides opportunities for coaching an employee on how to become more proficient and productive where needed; and

WHEREAS, department leaders are responsible for actively participating in the hospital's Quality Assessment and Performance Improvement Plan that was intended to support its Vision, Mission, Values and organizational/strategic priorities; and

WHEREAS, there is a need to hold department leaders accountable for the prioritization of the aforementioned; now, therefore be it

**RESOLVED,** that the Board of Trustees approves the addition of Policies & Procedures, Performance Evaluations, and Quality Assessment & Performance Improvement factors be added to all supervisory and managerial positions of the Guam Memorial Hospital Authority; and, be it further

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

DULY AND REGULARLY ADOPTED ON THIS 26th DAY OF JULY 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

#### BOARD OF TRUSTEES Official Resolution No. 2018-50

# "RELATIVE TO THE CREATION OF THE FOODSERVICE PRODUCTION SUPERVISOR POSITION IN THE CLASSIFIED SERVICE FOR THE DIETETIC SERVICES DEPARTMENT"

WHEREAS, the creation of this position was a result of a citation from the Centers for Medicare and Medicaid (CMS); and

WHEREAS, The Hospital and the Skilled Nursing Facility (SNU) must employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, etc.; and

WHEREAS, CMS requirement §483.60 (a) (2) provides that "if a qualified dietitian or other clinically qualified nutrition professional is not employed full-time, the facility must designate a person to serve as the person-in-charge...;" and

WHEREAS, the creation of the Foodservice Production Supervisor position will satisfy the requirements of §483.60 (a) (2); now, therefore be it

**RESOLVED,** that the Board of Trustees accepts the recommendation of the Human Resources Subcommittee and approves the establishment of the Foodservice Production Supervisor in the classified service for the Dietetic Services Department; and, be it further

RESOLVED, that this position be filled through the competitive recruitment process; and, be it further

**RESOLVED,** that the Hospital Administrator/CEO is directed to initiate the administrative processes to bring to fruition the utilization of this position; 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 26th DAY OF JULY 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel

#### Foodservice Production Supervisor

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

This position is responsible for the daily operations of the Foodservice Production Unit which includes participation in the nutritional assessment of residents/patients.

An employee in this class will provide supervision and guidance to ensure that food quality, safety standards, and resident/patient expectations and needs are met.

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

Oversee staff and daily operations of foodservice production and distribution, temperature control, waste and pilferage control, and sanitation.

Supervise and participate in a variety of activities of a food service unit to include food preparation, service, and record maintenance in an acute and semi-acute care setting.

Conduct resident/patient nutritional assessments which includes food/fluid intake information in collaboration with registered dieticians.

Identify standards and procedures for food preparation.

Participate in menu planning, including responding to resident/patient preferences, substitution lists, therapeutic diets, and industry trends.

Inspect meals and assure that standards for appearance, palatability, temperature, and serving times are met.

Manage the preparation and service of special nourishments and supplemental feedings.

Assure safe receiving, storage, preparation, and service of food in compliance with guidelines.

Takes corrective action as needed to determine appropriate utilization, storage or disposal of foodstuffs.

Ensure adherence to high quality standards and sanitation procedures of staff.

Record nutritional assessment data in the medical record and other required MDS forms.

Determine, review, revise and develop dietary plans in collaboration with a registered dietitian and physician orders; nutritional status and eating function of clients/patients.

Establish and implement policies and procedures.

Attend department/division meetings and participates in the development of quality and performance improvement reports.

Maintain records and prepare reports.

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

Knowledge of nutritional counseling techniques and methods for diet teaching.

Knowledge of food sanitation procedures.

Knowledge of the principles of menu planning for optimal nutrition of health and disease for clients/patients.

Knowledge of culturally sensitive and educational techniques and methods.

Ability to conduct nutritional assessments.

Ability to operate computer programs, i.e., Microsoft Word, Excel, etc.

Ability to supervise.

Ability to lift and carry in excess of 50 pounds.

Ability to withstand extreme temperatures, hot and cold.

Ability to work effectively with the public and employees.

Ability to communicate effectively, orally and in writing.

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

- A. Two (2) years of experience in healthcare foodservice management and a Bachelor's degree in food service management, hospitality or related field; or
- B. Four (4) years of experience in foodservice management or hospitality and an Associate's degree in foodservice management, hospitality or related field.

#### **NECESSARY SPECIAL QUALIFICATION REQUIREMENT:**

Possession of a valid Certification in Dietary Management (CDM) or similar national certification in food service management and safety from a national certifying body.

KNOW HOW

EI3 200

PROBLEM SOLVING

E3 (33%) 66

ACCOUNTABILITY

E1C 76

TOTAL.

342

**PAY GRADE** 

M

Approved:

Eloy S. Lizama, Chairman, Board of Trustees

Date: 7/26/18





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

#### BOARD OF TRUSTEES Official Resolution No. 2018-51

# "RELATIVE TO THE CREATION OF THE CLINICAL CASE MANAGER POSITION IN THE CLASSIFIED SERVICE FOR THE NURSING DEPARTMENT"

WHEREAS, the creation of this position is a result of a citation from the Centers for Medicare and Medicaid (CMS) regarding the development of a Discharge Planning Program for the Hospital; and

WHEREAS, The Hospital is required to provide coordination of care for patients who are most at risk for health deterioration; sentinel events; poor outcomes; and must ensure that care and discharge plans meet the physical, social, and emotional needs of patients; and

**WHEREAS**, this position will collaborate with interdisciplinary teams ensuring the coordination of care for those patients at risk by providing comprehensive disease management assessment, treatment, and follow-up evaluations; now, therefore be it

**RESOLVED**, that the Board of Trustees accepts the recommendation of the HR, BOT Sub-Committee and approves the **establishment of the Clinical Case Manager in the classified service for the Nursing Department**; and, be it further

RESOLVED, that this position be filled through the competitive recruitment process; and, be it further

**RESOLVED,** that the Hospital Administrator/CEO is directed to initiate the administrative processes to bring to fruition the utilization of this position; 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 26th DAY OF JULY 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel

#### CLINICAL CASE MANAGER

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

Employees in this class are responsible for the coordination of care for patients who are most at risk for health deterioration, sentinel events, and/or poor outcomes and work holistically, ensuring that care and discharge plans meet the physical, social, and emotional needs of patients.

Clinical Case Managers collaborate with interdisciplinary teams to provide comprehensive disease management assessment, treatment, and follow-up evaluation for patients receiving care within the hospital. **ILLUSTRATIVE EXAMPLES OF WORK:** (Any one position may not include all duties listed, nor do the examples cover all duties which may be performed and may be learned on the job.)

Conduct comprehensive assessment of patients by reviewing records and documentation.

Determine discharge planning, by completing intake interviews.

Collaborate with physicians, nurses, social workers and a wide range of medical and non-medical professionals in meeting complex patient needs.

Determine the need for therapeutic medical, psycho-social and psychiatric evaluations; reviewing therapist evaluations, treatment objective and plans.

Coordinate services and monitor care provided to patients.

Establish treatment programs by setting schedules and routines.

Monitor cases by verifying patient attendance at care conferences and by observing and evaluating treatments and responses.

Facilitate regular review meetings with interdisciplinary teams to discuss ongoing appropriateness of the plan of care.

Advocate for needed services and entitlements of patients; obtain additional resources; and intervene in crises.

Maintain patient records by reviewing case notes and logging events and progress. Communicate patient progress by conducting interdisciplinary meetings and evaluations;

Disseminate and explain results and obstacles to the clinical team and the family.

Prepare patient discharge by reviewing and amplifying discharge plans.

Coordinate discharge and post-discharge requirements.

Serve as liaison between patients, their families and healthcare providers.

Train and orient family members on learning opportunities and provide resources.

#### MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of electronic health record systems and associated applications.

Clinical Case Manager Page 2 of 2

Knowledge of hospital work processes and resources for patients.

Ability to access and document on an electronic health record system.

Ability to review and analyze clinical team member and patient information.

Ability to verify information and document into specific databases.

Ability to pay high attention to detail and to meet accuracy standards.

Ability to communicate effectively orally and in writing.

Ability in resolving conflicts effectively.

Ability to organize, multitask, and prioritize duties and responsibilities efficiently.

Must be proficient in medical terminology.

Ability to work in a team environment.

Skill in effective decision making.

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

- A. Five (5) years of experience in professional hospital nursing work, and graduation from a recognized college or university with a Bachelor's degree in nursing; or
- B. Four (4) years of experience in professional hospital nursing work and graduation from a recognized college or university with a Master's degree in nursing.

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

- 1. Possession of a current license as a Registered Professional Nurse on Guam.
- 2. Possession of current Basic Life Support certification.
- 3. Must obtain Certified Case Manager (CCM) credential by the Commission on Case Manager Certification (CCMC) three years from the effective date of hire and must maintain certification.

Date: 7/24/18

KNOW HOW EI3 230 PROBLEM SOLVING E3 (38%) 87 ACCOUNTABILITY E1C 87 TOTAL 417 PAY GRADE N (NPP)

Approved:

Eloy S. Lizama, Chairman, Board of Trustees





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-52

#### "RELATIVE TO APPROVING EIGHTY-EIGHT (88) NEW FEES"

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on June 29, 2018 and oral comments and written testimony have been solicited for the Eighty-Eight (88) new fees comprised of the following Hospital departments: Intensive Care Unit, Pediatrics, Radiology, Pharmacy, Respiratory, Laboratory, Operating Room and Special Services; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now, therefore be it

**RESOLVED**, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to continue to proceed with the adjudication process of these 88 new fee items; and, be it further

RESOLVED, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 26th DAY OF JULY 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel

# GUAM MEMORIAL HOSPITAL AUTHORITY SUMMARY OF NEW FEE ITEMS/SERVICES

for Submission to the 34th Guam Legislature Public Hearing on June 29, 2018

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NO.	CHARGE.	1000	FEE MODEL	TO A STATE OF THE PROPERTY OF THE PARTY OF T
				DEPARTMENT
1	1700483 1702229	KIT FECAL MGMT FLEX-SEAL FMS		INTENSIVE CARE UNIT
3	1702229	MATRIX SUTURABLE DURAGEN		INTENSIVE CARE UNIT
		CATHETER SWAN NECK CURL INFANT		PEDIATRICS
5	1705801	SHUNT LUMBAR PERITONEAL SPETZL		INTENSIVE CARE UNIT
6	1707270	KIT CRANIAL ACCESS W/DRILL		INTENSIVE CARE UNIT
_	1708330	CATHETER LUMBAR OPEN TIP		INTENSIVE CARE UNIT
7	1708401	ACCUDRAIN W/ANTIREFLUX VALVE		INTENSIVE CARE UNIT
8	1708420	SET VENTRICULAR TRAUMACATH		INTENSIVE CARE UNIT
9	1708700	BAG DRAINAGE ACCUDRAIN		INTENSIVE CARE UNIT
10	1709020	LIMITORR VOLUME LIMIT EVD 20ML		INTENSIVE CARE UNIT
11	2100001	GRID CT BIOPSY		RADIOLOGY
12	2100014	TUBE FEEDING MIC*G 14FR	\$ 254.99	
13	2100016	TUBE FEEDING MIC*G 16FR	\$ 254.99	RADIOLOGY
14	2100018	TUBE FEEDING MIC*G 18FR	\$ 254.99	RADIOLOGY
15		TUBE FEEDING MIC*G 20FR	\$ 254.99	RADIOLOGY
16	2101030	ONCOZENE 100+25UM 3ML	\$ 931.25	RADIOLOGY
17	2101109	WALLSTENT ENDOPRO 6F 6MMX135CM	\$ 2,635.72	RADIOLOGY
18	2101530	SET IV ADMINISTRATION 92"	\$ 16.56	RADIOLOGY
19	2101616	NEEDLE BX COAX 15GX13.8CM	\$ 193.11	RADIOLOGY
20	2101617	NDLE BX MAX CORE INST 16GX16CM	\$ 569.39	RADIOLOGY
21	2101618	NDLE BX MAX CORE INST 16GX10CM	\$ 569.39	RADIOLOGY
22	2101816	NEEDLE BX COAX 17GAX13.8CM	\$ 133.57	RADIOLOGY
23	2101825	INSTR BX MIS CORE 18GAX25CM	\$ 267.14	RADIOLOGY
24	2102022	TUBE FEEDING MIC*J 22FR	\$ 692.94	RADIOLOGY
25	2102024	TUBE FEEDING MIC*J 24FR	\$ 692.94	RADIOLOGY
26	2103670	NDLE BX MIS CORE INST 20GX20CM	\$ 511.51	RADIOLOGY
27	2103902	NEEDLE SPINAL QUINCKE 22GX5IN	\$ 48.35	RADIOLOGY
28	2104031	WALLSTENT ENDPRO 10F 14MMX75CM	\$ 3,300.00	RADIOLOGY
29	2104033	WALLSTENT ENDPRO 10F 16MMX75CM	\$ 3,300.00	RADIOLOGY
30	2104170	NEEDLE BX COAX 19GX7.8CM	\$ 202.76	RADIOLOGY
31	2104171	NEEDLE BX COAX 19GX17.8CM	\$ 202.76	RADIOLOGY
32	2105021	DEVICE VASCULAR MYNXGRIP 5FR	\$ 899.00	RADIOLOGY
33	2107427	INTRO CK FLO 5FR .035'X13CM	\$ 79.88	RADIOLOGY
34	2107630	NDLE BX MIS CORE INST 20GX10CM	\$ 511.51	RADIOLOGY
35		SET ANCHOR GASTROINTESTINAL	\$ 690.26	RADIOLOGY
36		NDLE BX MIS CORE INST 16GX10CM	\$ 511.51	RADIOLOGY
37		NDLE BX MIS CORE INST 16GX16CM	\$ 511.51	RADIOLOGY
استنسا			Ψ 311,31	TIMUIULUUT

38	2118000	POWERPORT CLEARVIEW SLIM 8FR	\$ 1,100.00	RADIOLOGY
39	2118107	NDLE BX MIS CORE INST 18GX10CM	\$ 511.51	RADIOLOGY
40	2118167	NDLE BX MIS CORE INST 18GX16CM	\$ 511.51	RADIOLOGY
41	2118207	NDLE BX MIS CORE INST 18GX20CM	\$ 511.51	RADIOLOGY
42	2118257	NDLE BX MIS CORE INST 18GX25CM	\$ 511.51	RADIOLOGY
43	2130022	TUBE FEEDING MIC*G 22FR	\$ 254.99	RADIOLOGY
44	2130162	NEEDLE BX COAX 15GAX17.8CM	\$ 133.57	RADIOLOGY
45	2130181	NEEDLE BX COAX 17GAX7.8CM	\$ 133.57	RADIOLOGY
46	2130182	NEEDLE BX COAX 17GAX17.8CM	\$ 133.57	RADIOLOGY
47	2130810	NDLE BX MAX CORE INST 18GX10CM	\$ 569.39	RADIOLOGY
48	2130816	NDLE BX MAX CORE INST 18GX16CM	\$ 569.39	RADIOLOGY
49	2130820	INSTR BX MIS CORE 18GAX20CM	\$ 267.14	RADIOLOGY
50	2138370	CATH ANG CXI 2.3FR .014INX65CM	\$ 788.94	RADIOLOGY
51	2138371	CATHETER CXI 2.3FR .014INX90CM	\$ 788.94	RADIOLOGY
52	2138372	CATH ANG CXI 2.3FR .014INX90CM	\$ 788.94	RADIOLOGY
53	2167630	NDLE BX MIS CORE INST 20GX16CM	\$ 511.51	RADIOLOGY
54	2176302	TUBE FEEDING MIC*J 20FR	\$ 692.94	RADIOLOGY
55	2184540	KIT RENEGADE FATHOM16 180CM	\$ 1,456.25	RADIOLOGY
56	2187630	NEEDLE BX COAX 15GX7.8CM	\$ 209.70	RADIOLOGY
57	2191300	BALLOON PTAX4-14-170-2-20	\$ 958.56	RADIOLOGY
58	4208195	CALCIUM 600MG+VIT D3 800IU TAB	\$ 0.91	PHARMACY
59	4210470	DEXAMETHASONE 0.4MG/ML OS	\$ 6.40	PHARMACY
60	4213779	ENOXAPARIN 80MG/0.8ML SRN	\$ 25.36	PHARMACY
61	4225438	HYDROMORPHONE 0.5MG/0.5ML INJ	\$ 8.88	PHARMACY
62	4233285	SODIUM CITRATE 4% 250ML BAG	\$ 51.24	PHARMACY
63	4233290	RIVAROXABAN 15MG TAB	\$ 28.21	PHARMACY
64	4233291	RIVAROXABAN 20MG TAB	\$ 29.80	PHARMACY
65	4233295	APIXABAN 2.5MG TAB	\$ 7.48	PHARMACY
66	4233296	APIXABAN 5MG TAB	\$ 6.49	PHARMACY
67	4233325	LEVETIRACETAM 500MG/100ML PMIX	\$ 46.57	PHARMACY
68	5300501	TUBE BREATHING HFNC ADULT	\$ 209.64	RESPIRATORY CARE
69	5304942	CANNULA NASAL OPTFLW ADULT-SML	\$ 140.70	RESPIRATORY CARE
70	5304944	CANNULA NASAL OPTFLW ADULT-MED	\$ 140.70	RESPIRATORY CARE
71		BLOOD OCCULT IMMUNOASSAY QUALI	\$ 39.28	LABORATORY
72	7001978	SURGIFOAM GELATIN POWDER	\$ 647.00	OPERATING ROOM
73	7003091	GUIDEWIRE SENSOR 0.038INX150CM	\$ 543.10	OPERATING ROOM
74	7020081	BURR FLUTED MS 3MM SHORT	\$ 680.00	OPERATING ROOM
75		BURR FLUTED MS 3MM LONG	\$ 680.00	OPERATING ROOM
76	7074200	BURR FLUTED MS 3MM MEDIUM	\$ 680.00	OPERATING ROOM
77		CATHETER PERCUTANEOUS 11CM 7FR	\$ 196.06	SPECIAL SERVICES
78		KIT EVEREST 30 SURVIVAL	\$ 713.74	SPECIAL SERVICES
79		CATHETER PERCUTANEOUS 11CM 6FR	\$ 196.06	SPECIAL SERVICES
80	9381235	CATHETER GUIDE SBS35 6FR	\$	SPECIAL SERVICES
81	9381302	CATHETER GUIDE JL 4.0 6FR	\$	SPECIAL SERVICES

82	9381306	CATHETER GUIDE JR 5.0 6FR	\$	284 79	SPECIAL SERVICES
83	9386100	CATHETER GUIDE IM 6FR	\$		SPECIAL SERVICES
84	9386102	CATHETER GUIDE EG 7FR	-   <del>\$</del>		SPECIAL SERVICES
85	9392920	PRQ CARDIAC ANGIOPLAST 1 ART	-   0		SPECIAL SERVICES  SPECIAL SERVICES
86	9392928	PRQ CARD STENT W/ANGIO 1 VSL	- 4		
87	9392937	PRQ REVASC BYP GRAFT 1 VSL	-   4		SPECIAL SERVICES
88	9392943	PRQ CARD REVASC CHRONIC 1 VSL	-   \$		SPECIAL SERVICES
*****	******	THIS CAND TEVASO CHIONIC I VSL		10,509.72	SPECIAL SERVICES

LAST ITEM

I certify that this listing of items comprises all fees required by law for submission at this time to be complete as presented here.

Frumen A. Patacsil

Hospital Quality Improvement Specialist

1st Endorsement of Concurrence:

I concur and further certify that this listing of items are exempted under Section 9301(i) to Article 3, Chapter 9, Division 1 of Title 5 of the Guam Code Annotated and in compliance with Title10 GCA Part 2 Division 4 Chapter 80 §80109

Benita A. Manglona

Chief Financial Officer





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-53

## "RELATIVE TO MANDATING SAFETY EVENT REPORTING EDUCATION FOR HOSPITAL STAFF AND LICENSED INDEPENDENT PRACTITIONERS"

WHEREAS, the Guam Memorial Hospital Authority's Board of Trustees desires to adopt a transparent, non-punitive approach to reporting so that the hospital can report to learn and can collectively learn from safety events and has approved a policy outlining a just safety culture, commits to put the data from event reporting to work by driving improvements; and

WHEREAS, the Board of Trustees realizes that every safety event (from close calls to events that cause major harm to patients, staff, or visitors) must be reported in order to allow the hospital to define the problem, identify solutions, achieve sustainable results, and disseminate the changes or lessons learned throughout the hospital; and

WHEREAS, safety is everyone's priority and through collective mindfulness staff and licensed independent practitioners realize that systems always have the potential to fail and thus should focus on finding and reporting hazardous conditions or close calls at early stages before a patient may be harmed so that system and processes can be further improved to prevent any defect; and

WHEREAS, staff who do not deny or cover up errors but rather want to report errors to learn from mistakes and improve system flaws that contribute or enable safety events must be given the knowledge, support, and resources for which to make these reports; and

WHEREAS, it is a requirement of the Centers for Medicare and Medicaid Services for the hospital to measure, analyze, and track medical errors and adverse events, analyze their causes, and implement preventive actions and mechanisms that include feedback and learning throughout the hospital; now, therefore be it

**RESOLVED,** that the Guam Memorial Hospital Authority shall obtain and maintain an online event reporting system and the staff and licensed independent practitioners are hereby mandated to participate and complete annual training on Just Safety Culture and Event Reporting; and, be it further

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

DULY AND REGULARLY ADOPTED ON THIS 26th DAY OF JULY 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-54

### "RELATIVE TO THE DELEGATION OF POLICY APPROVAL TO THE BOARD SUBCOMMITTEES"

WHEREAS, the Governance and control of the Guam Memorial Hospital Authority (GMHA) are vested in a Board of Trustees; and

WHEREAS, GMHA's sole responsibility is to provide and deliver quality health care to the people of Guam guided by its policies and procedures, Bylaws, and other forms of guidance; and

WHEREAS, the Centers for Medicare and Medicaid Services (CMS) and The Joint Commission (TJC) require regular (annual or three year) policy and procedure reviews to be conducted; and

WHEREAS, the Centers for Medicare and Medicaid Services and The Joint Commission require that certain policies and procedures be reviewed and approved by the Governing Body; now, therefore be it

**RESOLVED**, that Board of Trustees hereby delegates approving authority for policies and procedures by the Board subcommittees that fall under the purview of the respective subcommittee (e.g. human resources related shall be approved by the Human Resources Subcommittee, medical staff related shall be approved by the Joint Conference and Professional Affairs Subcommittee, etc.); and, be it further

**RESOLVED**, that the Chairpersons for each subcommittee shall inform the Board of Trustees of any and all policies and procedures approved at the subcommittee levels; and, be it further

**RESOLVED**, that the Chairman certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 30th DAY OF AUGUST 2018.

Certified by:	Attested by:		
1	Melissa Waibel		
Eloy S. Lizama	Melissa Waibel		
Chairperson, Board of Trustees	Secretary, Board of Trustees		





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-55

### "RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES"

PractitionerDepartmentSpecialtyExpirationVerrad Nyame, MDSurgeryNeurosurgeryJune 30, 2019

WHEREAS, the above listed practitioner 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 on June 27, 2018 and the Joint Conference and Professional Affairs Committee on August 9, 2018, 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 practitioner to Provisional Medical Staff as recommended; and, be it further

**RESOLVED**, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioner 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 30th DAY OF AUGUST 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-56

#### "RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<b>Practitioner</b>	<b>Department</b>	<b>Specialty</b>	<b>Expiration</b>
Borja, Teresa, D.P.M.	Surgery	Podiatry	July 31, 2020
Fegurgur, John, M.D.	Surgery	General/Plastic Surgery	July 31, 2020
Im, Sunggeun, M.D.	Surgery	General Surgery	July 31, 2020
Sandy, Gisella, M.D.	Surgery	General Surgery	July 31, 2020
Gerling, William, M.D.	Family Practice	Family Practice	July 31, 2020
Dissadee, Mana, M.D.	Internal Medicine	Nephrology	July 31, 2020
Kim, Byungsoo, M.D.	Internal Medicine	Cardiology	July 31, 2020
DelRosario, Amanda, M.D.	Pediatrics	Pediatrics	July 31, 2020
Linsangan, Ma.Gladys, M.D.	Pediatrics	Pediatrics	July 31, 2020
Manaloto, Ma.Cristina, M.D.	Pediatrics	Pediatrics	July 31, 2020
Santos, Ma.Edna, M.D.	Pediatrics	Pediatrics	July 31, 2020
Annamalai, Palam, M.D.	Radiology	Radiology	July 31, 2020

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 on July 27, 2018 and the Joint Conference and Professional Affairs Committee on August 9, 2018 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 30th DAY OF JULY 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

lekissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

### BOARD OF TRUSTEES Official Resolution No. 2018-57

#### "RELATIVE TO THE APPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

PractitionerDepartmentSpecialtyExpirationLinh Tieu, D.O.PediatricsPediatricsJuly 31, 2020

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 4.3; and

WHEREAS, the Medical Executive Committee on July 27, 2018 and the Joint Conference and Professional Affairs Committee on August 9, 2018, recommended approval of Active Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Active 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 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 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 30th DAY OF AUGUST 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

#### BOARD OF TRUSTEES Official Resolution No. 2018-58

### "RELATIVE TO APPROVING REVISIONS TO THE MEDICAL STAFF BYLAWS"

WHEREAS, the Medical Staff Bylaws and Medical Executive Committees, had reviewed the Medical Staff Bylaws and Medical Staff Rules and Regulations; and

WHEREAS, as a result of the review, proposed revisions were made and to the Medical Staff Bylaws, Article V: Appointment and Reappointment; and

WHEREAS, on August 9, 2018, the Joint Conference and Professional Affairs subcommittee reviewed and recommended that the Board of Trustees approve the proposed revisions to the Medical Staff Bylaws; now, therefore be it

**RESOLVED**, that the Board of Trustees accepts and approves the Joint Conference and Professional Affairs subcommittee's recommendation; and, be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 30th DAY OF AUGUST 2018.

Certified By:

Eloy S. Lizama

Chairman, Board of Trustees

Attested By:

Melissa Waibel

# GUAM MEMORIAL HOSPITAL AUTHORITY MEDICAL STAFF OFFICE

Item: Medical Staff Bylaws

### PROPOSED REVISIONS FORM

	Existing		Proposed	Rationale
ARTICLE V: APPOINTMENT AND REAPPOINTMENT		ARTICLE V: APPOINTMENT AND REAPPOINTMENT		
5.1-1	<u>Information</u>	5.1-1 <u>Inform</u>	ation_	
	Applications for appointment to the Staff shall be in writing fully completed and shall be submitted on forms approved by the Board upon recommendation of the Credentials Committee via the Medical Executive Committee. Gender, Race, Creed and National Origin are not used in making decisions regarding the granting or denying of clinical privileges. The application shall contain a request for specific clinical privileges desired by the applicant and shall require detailed information concerning the applicant's professional qualifications including:  A. Documentation of experience and training, completion of an approved residency is required, unless otherwise specifically delineated by individual departments. The dental staff and allied health professionals shall be exempt from this rule.  B. Written evidence of current Guam license, certificate or other legal credentials required by Guam law.  C. The names and complete addresses of at least two physicians, dentists, podiatrists or other practitioners, as appropriate, who have had recent extensive experience in observing and working with the applicant and who can provide adequate information pertaining to the applicant's present professional competence and character;	comple upon re Executi not use clinical informa includir A. Do app del hea B. Wr leg C. The de hav	tions for appointment to the Staff shall be in writing fully sted and shall be submitted on forms approved by the Board ecommendation of the Credentials Committee via the Medical ve Committee. Gender, Race, Creed and National Origin are ed in making decisions regarding the granting or denying of privileges. The application shall contain a request for specific privileges desired by the applicant and shall require detailed ation concerning the applicant's professional qualifications and concerning the applicant's professional qualifications are:  cumentation of experience and training, completion of an proved residency is required, unless otherwise specifically lineated by individual departments. The dental staff and allied alth professionals shall be exempt from this rule. The retitent evidence of current Guam license, certificate or other calcredentials required by Guam law.  The names and complete addresses of at least two physicians, antists, podiatrists or other practitioners, as appropriate, who we had recent extensive experience in observing and working the applicant and who can provide adequate information retaining to the applicant's present professional competence dicharacter;	To ensure compliance with all hospital mandated training and policies.
	D. The names and complete addresses of the chairpersons of each department of any and all hospitals or other institutions at which the applicant has worked or trained (i.e., the individuals who served as chairpersons at the time the applicant worked in the particular department). If the number of hospitals the applicant has worked in is great or if a number of years have passed since the applicant worked at a particular hospital, the Credentials Committee and the Board may take into consideration the applicant's good faith effort to produce this information;	D. The de the ser pa has the Co ap	e names and complete addresses of the chairpersons of each partment of any and all hospitals or other institutions at which a applicant has worked or trained (i.e., the individuals who wed as chairpersons at the time the applicant worked in the rticular department). If the number of hospitals the applicant is worked in is great or if a number of years have passed since a applicant worked at a particular hospital, the Credentials immittee and the Board may take into consideration the plicant's good faith effort to produce this information;	
	E. Information as to whether the applicant's Staff appointment or clinical privileges have ever been resigned, denied, revoked, suspended, reduced or not renewed at any other hospital or	clir	ormation as to whether the applicant's Staff appointment or nical privileges have ever been resigned, denied, revoked, spended, reduced or not renewed at any other hospital or	

- health care facility;
- F. Information as to whether the applicant has ever withdrawn his/her application for appointment, reappointment and clinical privileges before final decision by a hospital's or health care facility's governing board;
- G. Information as to whether the applicant's membership in local, state, territory, or national professional societies or his/her license to practice any profession in any state, territory, or his/her Guam Controlled Substance license (GCSL) or Drug Enforcement Administration (DEA) license has ever been suspended, modified or terminated.
- H. Applicant has up to 180 days to submit GCSL and DEA licenses, or must show just cause in a written statement why DEA or GCSL has not been submitted which will be reviewed by the Chairperson of the Credentials Committee. Failure to comply with the above may result in termination or limitation of hospital privileges.
- Information as to whether the applicant has currently in force professional liability insurance coverage, the name of the insurance company and the amount and classification of such coverage;
- J. Information concerning applicant's malpractice litigation experience;
- K. A consent to the release of information from the applicant's present and past professional liability insurance carriers;
- L. Information on the applicant's physical and mental health;
- M. Information as to whether the applicant has ever been named as a defendant in a criminal action and details about any such instance:
- N. Copy of Driver's License or Passport and Passport size photo taken within the last year.
- O. The applicant's signature;
- P. Such other information as the Board may require

- health care facility;
- F. Information as to whether the applicant has ever withdrawn his/her application for appointment, reappointment and clinical privileges before final decision by a hospital's or health care facility's governing board;
- G. Information as to whether the applicant's membership in local, state, territory, or national professional societies or his/her license to practice any profession in any state, territory, or his/her Guam Controlled Substance license (GCSL) or Drug Enforcement Administration (DEA) license has ever been suspended, modified or terminated.
- H. Applicant has up to 180 days to submit GCSL and DEA licenses, or must show just cause in a written statement why DEA or GCSL has not been submitted which will be reviewed by the Chairperson of the Credentials Committee. Failure to comply with the above may result in termination or limitation of hospital privileges.
  - 1. In accordance with federal and local law, Allied Health Professionals as defined in Article VII, who are not required to hold DEA licenses, are exempt from providing an explanatory letter to the Credentialing Committee and are exempt from obtaining DEA licensure.
- Information as to whether the applicant has currently in force professional liability insurance coverage, the name of the insurance company and the amount and classification of such coverage;
- J. Information concerning applicant's malpractice litigation experience;
- K. A consent to the release of information from the applicant's present and past professional liability insurance carriers;
- L. Information on the applicant's physical and mental health;
- M. Information as to whether the applicant has ever been named as a defendant in a criminal action and details about any such instance;
- N. Copy of Driver's License or Passport and Passport size photo taken within the last year.
- O. The applicant's signature;
- P. Such other information as the Board may require

Approved:

Bylaws Committee: 07/13/2018

MEC: 07/26/2018

Medical Staff 1st Reading: 07/27/2018

JCPAC: BOT:





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## **BOARD OF TRUSTEES Official Resolution No. 2018-59**

#### "RELATIVE TO THE SALARY INCREMENTS FOR FISCAL YEAR 2018"

WHEREAS, Executive Order 2018-38 requested the identification of cost-saving measures for the Guam Memorial Hospital Authority (GMHA) in light of budget shortfalls; and

WHEREAS, the cost-saving measure of freezing employee salary increments effective February 6, 2018 through September 30, 2018 was implemented absent legislation to repeal the provisions of 4 GCA, Chapter 6, Compensation of Public Employees, § 6202, Salary Increments, and thus, remaining a liability for the GMHA; and

**WHEREAS**, the proposed Budget Bill for Fiscal Year 2019 places a freeze on future salary increments with no retroactive compensation for the hard-working, well-deserving and loyal employees of the GMHA, which negates the aforementioned public law that provides rewards for the hard work and accomplishments of government employees; and

WHEREAS, a recommendation was made and approved by the Human Resources Subcommittee on August 14, 2018 and again on September 18, 2018 for all salary increments held and salary increments effective through September 30, 2018 be processed and paid retroactively; and

WHEREAS, the cost to implement the remaining salary increments held was approximately \$200,000 and the Chief Financial Officer certifies that funding is available; now, therefore be it

**RESOLVED**, that the Board of Trustees accepts and approves the Human Resources Subcommittee's recommendation and lifts the freeze on salary increments and those effective through September 30, 2018; and, be it further

**RESOLVED**, that the Board of Trustees directs the Hospital Administrator/CEO to ensure the administrative processes are taken to implement the actions set forth by this resolution; and, be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 27th DAY OF SEPTEMBER 2018.

Certified By:

Eloy S. Lizama

Chairman, Board of Trustees

Attested By:

wienssa warbei





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## **BOARD OF TRUSTEES Official Resolution No. 2018-59**

#### "RELATIVE TO THE SALARY INCREMENTS FOR FISCAL YEAR 2018"

WHEREAS, Executive Order 2018-38 requested the identification of cost-saving measures for the Guam Memorial Hospital Authority (GMHA) in light of budget shortfalls; and

WHEREAS, the cost-saving measure of freezing employee salary increments effective February 6, 2018 through September 30, 2018 was implemented absent legislation to repeal the provisions of 4 GCA, Chapter 6, Compensation of Public Employees, § 6202, Salary Increments, and thus, remaining a liability for the GMHA; and

**WHEREAS**, the proposed Budget Bill for Fiscal Year 2019 places a freeze on future salary increments with no retroactive compensation for the hard-working, well-deserving and loyal employees of the GMHA, which negates the aforementioned public law that provides rewards for the hard work and accomplishments of government employees; and

WHEREAS, a recommendation was made and approved by the Human Resources Subcommittee on August 14, 2018 and again on September 18, 2018 for all salary increments held and salary increments effective through September 30, 2018 be processed and paid retroactively; and

WHEREAS, the cost to implement the remaining salary increments held was approximately \$200,000 and the Chief Financial Officer certifies that funding is available; now, therefore be it

**RESOLVED**, that the Board of Trustees accepts and approves the Human Resources Subcommittee's recommendation and lifts the freeze on salary increments and those effective through September 30, 2018; and, be it further

**RESOLVED**, that the Board of Trustees directs the Hospital Administrator/CEO to ensure the administrative processes are taken to implement the actions set forth by this resolution; and, be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 27th DAY OF SEPTEMBER 2018.

Certified By:

Eloy S. Lizama

Chairman, Board of Trustees

Attested By:

wienssa warbei





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-60

# "RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

<b>Practitioner</b>	<b>Department</b>	<b>Specialty</b>	Expiration
Saied Safabakhsh, MD	Internal Medicine	Nephrology	August 31, 2020
Friedrich Bieling, MD	Ob/Gyn	Ob/Gyn	August 31, 2020
Faye Jensen, MD.	Ob/Gyn	Ob/Gyn	August 31, 2020
Alessandro Giambartolomei, MD	Internal Medicine	General Surgery	August 31, 2020
Janet Nightingale, CNM	Ob/Gyn	Certified Nurse Midwife	August 31, 2020
Teresa Anderson, CNM	Ob/Gyn	Certified Nurse Midwife	August 31, 2020
Matthew Marsh, PA-C	Ob/Gyn	Physician Assistant	August 31, 2020
Khampho Ohno, PA-C	Ob/Gyn	Physician Assistant	August 31, 2020
Seung Huh, MD	Emergency	Emergency Medicine	August 31, 2020

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 on August 29, 2018 and the Joint Conference and Professional Affairs Committee on September 19, 2018 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 27th DAY OF SEPTEMBER 2018.

Certified by:

Eloy S. Lizama

Chairperson, Board of Trustees

Attested by:

Melissa Waibel





850 GOV. CARLOS CAMACHO ROAD OKA, TAMUNING, GUAM 96913 TEL: 647-2444 or 647-2330 FAX: (671) 649-0145

## BOARD OF TRUSTEES Official Resolution No. 2018-61

### "RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES"

<b>Practitioner</b>	<b>Department</b>	<b>Specialty</b>	<b>Expiration Date</b>
Elliot Ross, MD	Emergency	Emergency Medicine	August 31, 2020
Mark Penn, MD	Emergency	Urgent Care	August 31, 2020
Jamie Pacheco, CNM	Obstetrics/Gynecology	Certified Nurse Midwife	August 31, 2020
Frank Farrel, MD	Internal Medicine	Internal Medicine	August 31, 2020
		/Gastroenterology	

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 on August 29, 2018 and the Joint Conference and Professional Affairs Committee on September 19, 2018, 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 27th DAY OF SEPTEMBER 2018.

Certified by:	Attested by:		
Eloy S. Lizama	Melissa Waibel		
Chairperson, Board of Trustees	Secretary, Board of Trustees		