

HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY

MINUTES OF THE MAY 18, 2017 MEETING

(Open Session)

Attendees:

Authority Board Members: Dr. Charles Lingle, Fred Ghiglieri, Joel Callins, Pastor Charlene Glover, John Hayes, Dr. Kathy Hudson, Ferrell Moultrie, and Nyota Tucker

Authority Legal Counsel: Jay Reynolds

Those Present on Behalf of Phoebe Putney Memorial Hospital, Inc.: Joel Wernick, Joe Austin, Dawn Benson, Brian Church, Dr. Steven Kitchen, Felicia Lewis

Absent Authority Members: Dr. Michael Laslie

Open Meeting and Establish a Quorum:

Chairman Lingle called the meeting to order at 7:30am in the Willson Board Room at Phoebe Putney Memorial Hospital. Dr. Lingle thanked all Members for their attendance and participation and he observed that a quorum was present.

Welcome to New Authority Member:

Chairman Lingle welcomed Ms. Nyota Tucker as the newest member of the Authority.

Approval of the Agenda:

The proposed Agenda had been previously provided to the Authority Members and a motion to adopt the proposed Agenda for the meeting was made and seconded. A copy of the Agenda as adopted is attached.

Approval of the Minutes:

The proposed Minutes of the February 16, 2017 open session meeting of the Authority and of the March 17, 2017 open session meeting of the Authority had likewise been provided to Members prior to this meeting and the same were considered for approval. Ferrell Moultrie made a motion and John Hayes seconded the motion, to approve the Minutes as previously provided. The motion passed unanimously by vote of all Members present.

Financial Reports:

Brian Church, CFO of PPMH, Inc., presented and reviewed an interim financial report for the Authority's current fiscal year through April 30, 2017. A copy of the Authority's Financial Statements as presented by Mr. Church is attached.

PPMH, Inc. CEO and Operational Reports:

Joel Wernick, CEO / President of the Hospital and Health System, spoke on the national healthcare scene and the lack of Medicaid expansion in Georgia. Mr. Wernick provided an update on the Community Care Clinic. In the past year, the clinic had 14,000 patient visits which in turn provided a \$12-15 million savings to the community. Mr. Wernick also spoke on recent merger/acquisitions of hospitals in Columbus and Savannah.

Joe Austin, COO of the Hospital and Health System, provided an update on hospital facilities. The medical student housing will have opening events in the coming week. This apartment complex will help pull in well-trained physicians to the area. Mr. Austin reported the Phoebe Camilla Clinic will open in June. The clinic will have three to four primary care physicians with room for rotating specialists. He also noted a primary clinic will open in Ellaville in June. Mr. Austin reported continued improvements in three metrics: quality of care, safety, and service. He will provide an update to the board at the next meeting. Mr. Austin commended Mr. Church on the budget process, which will be ongoing for the next several weeks. Mr. Austin also reported that the hospital census is near capacity this week especially on the surgical, cardiac, and oncology floors.

Steve Kitchen, MD, CMO of the Hospital and Health System, provided a presentation on Medical Ethics at Phoebe. The Ethics Advisory Committee was formed in 1990 and is chaired by Dr. Bernard Scoggins, a physician with Albany Area Primary Health Care. The primary purpose of the committee is to serve as an advisory board to the Medical Staff and other health care professionals, administrative staff, and patients and families on matters related to ethical decisions that arise while rendering care and treatment at Phoebe. Dr. Kitchen reported that the committee’s main obligation is serving the patient’s best interest. Ms. Benson remarked on the importance of having an Advanced Directive. Dr. Kitchen also reported that a Family Advisory Council is being formed which will involve broad-based community input in hospital functions and matters. A copy of Dr. Kitchen’s presentation is attached.

Closing of the Meeting:

A motion was made by Mr. Ghiglieri, seconded by Mr. Hayes to close the meeting for the purposes of: (i) engaging in privileged consultation with legal counsel; (ii) to discuss potentially valuable commercial plans, proposals or strategies that may be of competitive advantage in the operation of Phoebe Putney Memorial Hospital or its medical facilities, or (iii) to discuss confidential matters or information pertaining to peer review or provided by a peer review organization as defined in O.C.G.A. §31-7-131.

Dr. Lingle polled each individual Authority Member present with respect to his or her vote on the motion and the vote of each of the Members is shown below, with no Member opposing:

Fred Ghiglieri	Yes
Dr. Michael Laslie	absent
Joel Callins	Yes
Dr. Kathy Hudson	Yes
Dr. Charles Lingle	Yes
John Hayes	Yes
Ferrell Moultrie	Yes
Pastor Charlene Glover	Yes
Nyota Tucker	Yes

The motion having passed, the meeting closed.

Open Session Reconvened:

Following unanimous vote of all Members in attendance at the conclusion of the Closed Session, the meeting reopened.

Adjournment:

There being no further business the meeting was adjourned.

AGENDA

HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA

(OPEN SESSION)

Meeting of May 18, 2017

(Willson Board Room)

- | | | |
|-------|--|--------------------|
| I. | Open meeting and establish quorum | Chairman |
| II. | Welcome to new Authority member – Sharon “Nyota” Tucker | Chairman |
| III. | Consider Approval of Agenda (draft previously provided to Members) | Chairman |
| IV. | Consideration of Open Session Minutes of February 16, 2017 meeting (draft previously provided to Members). Consideration of Open Session Minutes of March 17, 2017 meeting (draft previously provided to Members). | Chairman |
| V. | Financial Reports | Brian Church |
| | a. Hospital Authority Financial Update | |
| VI. | Phoebe Putney Memorial Hospital, Inc. CEO and Operational Reports | Joel Wernick |
| | a. Facilities Update | Joe Austin |
| | b. Medical Ethics Presentation | Steven Kitchen, MD |
| VII. | Consideration of vote to close meeting for Executive Session | Chairman |
| VIII. | Additional Business | |
| IX. | Adjournment | |

HOSPITAL AUTHORITY OF ALBANY- DOUGHERTY COUNTY, GEORGIA

Financial Statement Update

April-2017 YTD

Fiscal Year 2017

HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA
BALANCE SHEET
4/30/2017

Unaudited
April 30, 2017

ASSETS

Current Assets:

Cash and cash equivalents	\$	92,376
Assets limited as to use - current		-
Patient accounts receivable, net of allowance for doubtful accounts		-
Supplies, at lower of cost (first in, first out) or market		-
Other current assets		7,700
Total current assets		<u>100,076</u>

Property and Equipment, net -

Other Assets:

Goodwill -

Total other assets -

Total Assets \$ 100,076

HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA
BALANCE SHEET
4/30/2017

Unaudited
April 30, 2017

LIABILITIES AND NET ASSETS

Current Liabilities:

Accounts payable	-
Accrued expenses	-
Estimated third-party payor settlements	-
Deferred revenue	-
Short-term obligations	-
Total current liabilities	-

Total liabilities -

Net assets:

Unrestricted	100,076
Total net assets	100,076

Total liabilities and net assets \$ 100,076

HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA
STATEMENTS OF REVENUES, EXPENSES AND
CHANGES IN UNRESTRICTED NET ASSETS
4/30/2017

	Unaudited <u>April 30, 2017</u>
OPERATING REVENUE:	
Net patient service revenue (net of provision for bad debt)	
Lease Consideration	34,860
 Total Operating Revenue	 <u>34,860</u>
 OPERATING EXPENSES:	
Salaries and Wages	
Employee health and welfare	
Medical supplies and other	
Professional services	14,736
Purchased services	229
Depreciation and amortization	
 Total Operating Expenses	 <u>14,965</u>
 Operating Gain / (Loss)	 <u>19,895</u>
 NONOPERATING INCOME (EXPENSES):	
Gain in Long Term Lease	-
Interest Expense	-
 Total Nonoperating Income	 <u>-</u>
 EXCESS OF REVENUE OVER EXPENSE	 <u><u>19,895</u></u>



Facilities Update

May 18, 2017

Flaggstone

apartment homes for healthcare professionals in training



The name - Flaggstone - invokes a sense of a strong foundation - both tangibly in terms of the beautiful building structure which features stonework but also in terms of the solid educational foundation which residents of the facility will receive during their time at Phoebe.

The additional 'g' in the spelling is a subtle nod to Phoebe's founder - Judge Francis Flagg Putney.





Flaggstone Opening Events



Save the Date

Join



as we celebrate the opening of our new
Apartment Homes for Healthcare Professionals-in-Training

Keystone Society Event

Thursday, May 18, 2017 | 6:30 p.m.

By Invitation Only - Formal invitation to follow

Special Preview for

Donors and Other Distinguished Guests

Friday, May 19, 2017 | 7 - 10 a.m. & 4 - 7 p.m.

By Invitation Only - Formal invitation to follow

Grand Opening & Ribbon Cutting

Tuesday, May 23, 2017 | 10 a.m. - 12 p.m.

Open to the public





Student Housing



Flaggstone

apartment homes for healthcare professionals in training



Student Housing



Flaggstone

apartment homes for healthcare professionals in training



Camilla Family Clinic





Camilla Family Clinic





Camilla Family Clinic





Camilla Family Clinic





Camilla Family Clinic





Hospital Authority of Dougherty County

Steven E. Kitchen, MD, Chief Medical Officer

May 18, 2017



Medical Ethics at PPMH

- **Ethics Advisory Committee started in 1990 as a Medical Staff Committee**
- **Membership has always been inclusive and hospital wide with physician, clinical and administrative staff, and community representation**
- **Primary purpose is to serve as an advisory body to the Medical Staff and other health care professionals, administrative staff, and patients and families on matters related to ethical decisions that arise while rendering care and treatment at PPMH**



Functions of Ethics Committee

- **Directs Educational Programs in Biomedical Ethical Issues**
- **Provides a structured forum for discussion among medical and hospital staff regarding medical ethical issues**
- **Serves in an advisory capacity and/or resource for physicians, nurses, clinical and administrative staff involved in medical ethical decision making**
- **Evaluates institutional experiences related to reviewing decisions which have biomedical ethical implications**
- **Develops for adoption by the MEC and approval by the hospital board any Medical Staff and hospital policy regarding the bioethics of patient care and treatment, including withdrawal of life support, DNR, and other end of life policy statements, guidelines, and principles**



Medical Ethics Committee

Does **NOT** serve as a professional ethics review board, as a substitute for judicial/legal review, or to make decision in ethical dilemmas.

However, members of the committee can serve in a consultative capacity to provide input and guidance when requested by members of the medical staff or clinical staff when they have ethical concerns/dilemmas that arise in patient care.

Such consults do not become a part of the permanent medical record.



Ethical Framework

Formalized standard of ethical decision making based on a combination of accepted professional guidelines and compliance with governmental and regulatory requirements. The Charter of Medical Professionalism incorporates three Fundamental Principles:

- **Primacy of Patient Welfare – serving best interest of patient**
- **Principle of Patient Autonomy – empowering patients to make informed decisions about their decisions**
- **Principle of Social Justice – promoting the fair distribution of healthcare resources**



COMPOSITION

Following is a list of the current members of the Ethics Advisory Committee:

Bernard Scoggins, M.D.
Alan Brown, M.D.
Deirdre Lawson, M.D.
Craig Mitchell, M.D.
Chad Kishore, M.D.
Tracy Rosenbaum, D.O.
Walisa Maynard, M.D.
Steve Kitchen, MD
Frances Ferguson, M.D.
Lamont Smith, M.D.
Tracey Anyanwu, DO
Stephen Daniel, M.D.
Maria Kyiacou, M.D.
Kim Ann Dang, M.D.

Jennifer Stephens, LMSW
Mande Chavers, RN, Quality Coord Critical Care
Fred Lee, Attorney at Law
Jeanette McDowell, RN, House Supervisor
Zerettia McGriff, RN, Nurse Manager 7A/7B
Bob Farr, VP/Chief Risk Officer
Lindsay Fussell, RN ICU Educator
Kim Smith, Coordinator Spiritual Care
Dorothy Johnson, RN, 7A/7B
Veena Gangadharen, Clinical Dietician
Melinda Spencer, RN, Neonatal Outreach Coord.
Rochelle Tinman, MSN, RN Director Critical Care
Lenore Reilly, RN Director General Medical
Dawn Benson, Vice President/Asst. Gen. Counsel
Audrey Pike, Vice President Compliance Officer
Jerry West, Corporate Director of Quality
Denise Robinson, Director Care Mgmt.
Denise Johnson, RN Care Manager

Questions?