

Meeting of the Joint Conference Committee (JCC)

Wednesday, December 13, 2023

Arrowhead Regional Medical Center (ARMC)

Location: Ponderosa / Redwood Conference Room

Present	Supervisor Joe Baca, Jr., John Brill MD, Nanette Buenavidez (Chief Nursing Officer), William Gilbert (Hospital Director and Chair, Joint Conference Committee), Tommy Lee MD, Charles Phan (Deputy County Counsel), Kambiz Raoufi, MD, Supervisor Dawn Rowe, Katrina Shelby (Administrator, Quality & Accreditation and Chief Compliance Officer), Luther Snoke (Chief Executive Officer), Webster Wong MD
Excused	Mark Comunale, MD
Guests	Andrew Goldfrach (Chief Operating Officer), Arvind Oswal (Chief Financial Officer), Aurora Barraza (Executive Assistant), Kimberly Rodarte (Secretary I)

Item	Discussion	Follow-Up
Call to Order	The meeting was called to order at 3:00PM by Mr. Gilbert, Joint Conference Committee Chair.	
1. Review Joint Conference Committee Meeting Min	A motion to approve the minutes of the September 21, 2023, Joint Conference Committee (JCC) meeting was put forth by Mr. William Gilbert.	Minutes are approved as submitted.
2. Introductions of New Members	Mr. William Gilbert introduced Mr. Luther Snoke as San Bernardino County Chief Executive Officer as the newest member of the ARMC Joint Conference Committee. Mr. Gilbert welcomed them to the committee and its commitment to San Bernardino County.	
3. Director's Report	Mr. William Gilbert (Hospital Director and Mr. Andrew Goldfrach (ARMC Chief Operating Officer) reported the following which were received by the JCC members. (See attached presentation and attachment).	Review of metrics.

Item	Discussion	Follow-Up
<p>3. Director's Report (Continuation from Page 1)</p>	 <ul style="list-style-type: none"> ▪ Change in Family Medicine to Vituity due to the inability to meet an agreement that aligned with county guidelines. <ul style="list-style-type: none"> • The transition is set for May 1, 2024. ▪ A 4-month extension for a smooth transition will be brought to the Board of Supervisors. ▪ The mitigation agreement with California University of Science and Medicine (CUSM) and Arrowhead Regional Medical Center (ARMC) was approved on September 12, 2023 and includes the following agreements: <ul style="list-style-type: none"> • ARMC use of CUSM Simulation Center • Office of Research and Grants where CUSM bears the cost of maintaining 5.0 FTE positions who will spend at least 50% of their time on grant opportunities that benefit both ARMC and CUSM. • Joint marketing to inform public about affiliation between CUSM and County/ARMC. • Chief Medical Officer Leadership Academy CUSM will pay for one physician designated by ARMC to attend the Chief Medical Officer Leadership Academy each year. 	

Item	Discussion	Follow-Up
3. Director's Report (Continuation from Page 2)	<ul style="list-style-type: none"> • CUSM Board of Trustees to change one of its at-large board positions into a position that is jointly selected by the County and CUSM. • ARMC will collaborate jointly on the feasibility for CUSM to establish a fully-accredited nursing school on it campus adjacent to ARMC. <p>Supervisor Dawn Rowe inquired about the requirements and parameters in choosing a board member for CUSM.</p> <p>A discussion was had to obtain Board of Supervisors approval for member-at-large CUSM board seat criteria.</p>	
4. Reports	Ms. Katrina Shelby (Administrator, Quality and Accreditation and Chief Compliance Officer) and Dr. Kambiz Raoufi, MD (President of the ARMC Medical Staff) presented the following reports which were received by the JCC members. (See attached presentation and attachment).	Review of metrics.
5. Public Comment	None	None
6. Adjourn to Closed Session	Adjourned to Closed Session at 3:50 PM for review of the following Quality Assurance Reports	Open session adjournment.
7. Next Meeting of the Joint Conference Committee	Next meeting: Thursday, March 21, 2024, but no fewer than four times per fiscal year.	ARMC will confirm the March meeting time for alignment with the proposed agenda.
8. Adjournment	The meeting was adjourned at 4:15 PM.	

Approved by:



Mr. William Gilbert, Joint Conference Committee Chair

3/21/24
Date



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**California University of Science
and Medicine and Arrowhead
Regional Medical Center**

CUSM Mitigation Plan Update

**Joint Conference Committee
December 13, 2023**



Key Elements of the Memorandum of Understanding

- On March 7, 2017 (Item 24), the Board of Supervisors approved a Memorandum of Understanding (MOU) between San Bernardino County (County) and CUSM, with a twenty (20) year term of April 1, 2017 through March 31, 2037.
- The MOU memorialized the County's support and collaboration with CUSM for the development of a medical school adjacent to ARMC.
- Under the MOU, the County agreed to provide funding to CUSM in the amount of \$2,000,000 per year for the first five years (\$10 million total) of the MOU in recognition of the positive impact the school would have on the residents of the County and the public purpose of the school.
- The MOU also provided that CUSM's medical students would be given preference in medical student rotation slots at ARMC, and that if such preference results in the displacement of students from other medical schools, which in turn results in a reduction of financial support from other medical schools, CUSM would make up the difference in lost revenue to ARMC through a yearly payment.

Key Elements of the Memorandum of Understanding

B. CalMed/CMSOM shall be given preference in the allocation of assigned available teaching rotations at ARMC. In the event such preference causes the displacement of students from other medical schools, which in turn results in a reduction of financial support from the affected medical schools, CalMed/CMSOM shall make up the difference in lost revenue to ARMC through a yearly cash payment to ARMC.

Financial Support from other Medical Schools

Affiliation Agreements in 2016-19 (academic years)	Financial Support to ARMC Per Academic Year
St. George University	\$1,450,000
Touro University	\$505,000
Western University	\$1,100,000
Total	\$3,055,000

Affiliation Agreements (2019-20)	Financial Support
St. George University	\$1,269,750
Touro University	No contract
Western University	\$344,750
Total	\$1,614,500
Loss from Prior Years	\$1,440,500

Affiliation Agreements (2020-21)	Financial Support
St. George University	\$1,078,200
Touro University	No contract
Western University	\$465,750
Total	\$1,543,950
Loss Compared to 2019 Loss from Prior Years	\$70,550 \$1,511,050

Procedural History

- Board of Supervisors Closed Session 9/29/20: ARMC was advised by the Board of Supervisors to attempt to reach a resolution with CUSM.
- Following the 9/29/20 Closed Session meeting until 8/2023, ARMC and CUSM have been attempting to negotiate a Mitigation Agreement to make up for some of the “lost revenue” to ARMC.
- During the Board of Supervisors Meeting on 9/12/2023, the Mitigation Agreement with CUSM and ARMC was approved.

Mitigation Agreement with California University Science and Medicine

Element	Details	Value to County (Per Year)
ARMC Use of CUSM Simulation Center	Use of 5,000 hours per year (valued at \$250/hr)	\$1,250,000
Office of Research & Grants (5.0 FTE)	CUSM shall bear the cost of maintaining 5.0 FTE positions who will spend at least 50% of their time working on grant support that jointly benefit ARMC and CUSM. 2 position in recruitment at present.	\$136,982.50
Joint Marketing	Engage marketing firm to inform public about affiliation between CUSM and County/ARMC at \$350,000 per year	\$175,000
Chief Medical Officer Leadership Academy	CUSM will pay for one physician designated by ARMC to attend the Chief Medical Officer Leadership Academy each year	\$7,950
CUSM Board of Trustees	CUSM Board will include one member that is jointly selected by CUSM and ARMC.	TBA
Nursing School	The parties will work together towards the common goal of having CUSM establish a fully accredited nursing school on its campus, adjacent to ARMC.	TBA

Board Seat Information

- Under the 2017 MOU, the County Board Chair and ARMC Hospital Director are permanent members of the CUSM Board of Trustees.
- Under the 2023 Mitigation Agreement, the CUSM Bylaws would change one of its at-large board positions into a position that is jointly selected by the County and CUSM. Selection criteria may include:
 - Live and/or work in the Inland Empire,
 - Demonstrate ties to education, healthcare, and/or community activism,
 - ARMC Medical Staff Leadership,
 - Exhibit expertise and ability, and
 - Commit the requisite time to serve.

Next Steps

- Discussion at Joint Conference Committee (12/13/23)
- Obtain BOS approval for member-at-large CUSM Board Seat Criteria



Questions?





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Joint Conference Committee

Compliance Report

(period September 1, 2023 – November 30, 2023)

Katrina S. Shelby, JD, MBA
Administrator, Quality & Accreditation
and Chief Compliance Officer



Compliance Program/Activity

- **Compliance Program/Activity:**
 - ARMC continues to utilize CyraCom for its interpretation services
 - CyraCom provides interpreters in over 200 languages via video, phone, and in-person interactions
 - Staff can utilize CyraCom to become Medically Qualified Interpreters
 - ARMC continues to conduct monthly audits to ensure patients were provided aid or in interpreter in a timely manner for patients who are deaf and/or hard of hearing

- **Compliance Program Review:**
 - Monthly review of the Office of Inspector General (OIG) exclusion list to ensure vendors and staff are not excluded from Federally funded health care programs (Ongoing).
 - There were no incidents of Fraud, Waste or Abuse reported for this quarter.

Health Insurance Portability and Accountability Act (HIPAA) Privacy & Security Report Highlights

- Epic Hyperdrive local install on desktop computers testing completed. Some medical imaging desktop computers are now configured with this solution. Third-party application testing is completed for Imprivata, OnBase, 3M and Nuance. Rollout strategies currently being developed. 2nd. floor at nursing tower, and outpatient clinics 2nd. floor are currently in progress.
- 10Zigs replacement project initiated: Most 10Zig thin client devices will be replaced with full blown thick client desktop computers. This will allow for Epic Hyperdrive local install and to speed up login procedures and workflows as well. 2nd. floor at nursing tower, and Oncology department are currently in progress. An estimated 600 10Zigs will be replaced at the end of this project.

Health Insurance Portability and Accountability Act (HIPAA) Privacy & Security Report Highlights

- Bitwarden, an Enterprise Password Manager solution has been implemented and configured. Password information has been transferred, user accounts have been transferred and documentation is now completed. Rollout strategy is completed and deployment is currently in progress and almost completed as well.
- Imprivata PAM (Privileged Access Management) servers' implementation and configuration is now completed. Environment configuration, Active Directory integration, and documentation are completed. Rollout strategies is currently in progress.

HIPAA Reportable Breaches

- October 20, 2023 – ARMC's HIM Department misplaced two temporary shred boxes after move to the new, off-site Valley business office location. The breach was reported to California Department of Public Health and the U.S. Department of Health and Human Services - Office for Civil Rights. The department completed corrective action requirements for the incident.



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Regulatory Compliance Report

(period September 1, 2023 – November 30, 2023)

Katrina S. Shelby, JD, MBA
Administrator, Quality & Accreditation
and Chief Compliance Officer



Regulatory Update – Regulatory and Accrediting Agencies

- ARMC underwent twelve (12) CDPH visits investigating a total of seventeen (17) complaint / follow-up cases resulting from patients, families, self-reports, and/or from employees or other anonymous sources that were investigated.
- ARMC received four (4) CDPH deficiency requiring a corrective action plan related to:
 - October 2023
 - Quality of care complaint (Pt / Family Notification of adverse event/change of condition)
 - Complaint (BH – Unsafe Discharge)
 - Self-Report HAPI (Documentation – Interventions/repositioning)
 - Self-Report Abuse (Documentation – Patient Care Assistant Q15 minutes safety check)
- Licensing Survey
 - 11/20 – Temporary MRI Trailer (Pending final approval)

Regulatory Update – Culture of Safety Survey

- Agency for Healthcare Research and Quality (“AHRQ”) is the lead federal agency charged with supporting research designed to improve the quality of health care, reduce its cost, address patient safety and medical errors, and broaden access to essential services.
- In 2004, AHRQ released the Hospital Survey on Patient Safety Culture for providers and other staff to assess the patient safety culture in their hospitals.
- The Joint Commission Leadership Standards and Leapfrog require hospitals to regularly assess the safety culture of the organization (employee and patient safety).
- BETA, our insurance carrier requires that we conduct a patient safety survey to assist with claims reduction and is also required by partnerships such as BETA/HQI Cares for quality improvement incentives.

Regulatory Update – Culture of Safety Survey

- 400 Participating Hospitals (last year 172)
- 206,410 providers and staff respondents nationally (last year 87,856)
- ARMC Participation Rate is 67% (2,798 respondents)
 - AHRQ average hospital response rate 48%
- 10 Composite Measures
- ARMC Survey Data available for 5 years (2018, 2019, 2020, 2021 and 2022)

Regulatory Update – Culture of Safety Survey

- Areas of Strength
 - Supervisor, Manager or Clinical Leader Support for Patient Safety
 - Teamwork
 - Communication/Openness
 - Communication About Errors

- Areas of Improvement
 - Staffing
 - Work Pace
 - Unit/Department Management Response to Error
 - Frequency of Events Reported

- Comments
 - Staffing, Accountability, and Work Pace

Next Steps

- Development of hospital action plans (Fall 2023)
- Discussion of findings (Winter 2023)
 - Including Small Group of Similar Unit Debriefs
- Communication and Implementation of action plans (Winter 2023/Spring 2024)
- Monitoring action items (Spring 2024)
- Re-survey (Fall 2024)



Questions?

