



BOARD OF DIRECTORS MEETING

December 10, 2007
Minutes

Dr. Burrow called the meeting to order at 9:03 a.m.

1. Public Comment

- There was no public comment.

2. Approval of Minutes

- The BoD unanimously approved the Minutes of September 17, 2007.

3. Consents

- Medical Staff Bylaws

Changes to the Medical Staff Bylaws were proposed with the most significant being related to: 1) a revision of the Disruptive Practitioner policy, and 2) clarification of the definitions of termination and suspension of medical staff membership and privileges. Additional changes were described in an attached summary included in the board packet. The following resolution was unanimously approved:

That the Board of Directors approve revisions to the John Dempsey Hospital (JDH) Medical Staff Bylaws. These changes have been recommended by the JDH Medical Board and Medical Staff.

4. Main Business Items

Deferred to the Executive Session.

5. Chief Executive Officer's Report – P. Deckers

5.1 Dr. Deckers reported on the death of Charles E. Heilig, Jr., 87., a good friend to the Health Center. Charles and his wife, Alice, gave generously to the University of Connecticut, supporting two chapels, the Murray-Heilig Endowed Chair in Surgery, an endowed Chair in Molecular Medicine and the Alice Murray Heilig Endowed Music Chair. They and their daughter, Cheryl, also established the Alice Murray Heilig Endowment for the Advancement of Music at the University of Connecticut School of Fine Arts, and sponsored an annual concert at the School.

5.2 In place of the regular CEO report, two position papers developed by Dr. Bruce Koeppen, were discussed.

- Academic Contributions of the Teaching Hospital in the Greater Hartford Area to the School of Medicine

This report describes UCHC's position as the academic leader in the Greater Hartford region and how its affiliation with community hospitals provides exemplary educational experiences for a wide range of learners including medical and dental students, medical and dental residents, and graduate students in public health and biomedical sciences. The contributions of each hospital to the curricular needs of the School of Medicine are enumerated.

Dr. Koeppen has significant experience with the school of medicine accreditation standards due to his service as a member of accreditation site teams (15+ years) and more recently being a member of the LCME board. He described models in which other schools of medicine do not 'own' their own primary teaching hospital(s), but these are less usual situations. Locally, these situations have recently been referred to as the "Harvard model."

In such cases, the LCME requires that the chief academic officer of the school have sufficient authority and resources to assemble a competent faculty together to support the educational needs of the school. This criteria can be addressed in many ways including:

- The dean of the school is a voting member of the board of the affiliated hospital(s).
- The dean of the school has an essential role in the recruitment of the senior hospital leadership including its chief of staff and department heads. Often the dean holds veto power over these appointments.
- The faculty at each affiliated hospital must have significant academic credibility and maintain a record of scholarship. There should be sufficient funds flow to support other clinical faculty and to protect time to be expended on academic/school matters.
- The school receives an unrestricted flow of funds from the affiliated hospital(s)

Others approaches were listed in Dr. Koeppen's written report. Also listed there were 16 other LCME standards that might be impacted by a decision to move towards a Harvard model.

A discussion ensued with the Board. It was established that the LCME does not prioritize its standards and expects all to be successfully addressed in order for full accreditation to be received. While it is possible that lack of compliance could result in being placed on probation before losing accreditation outright, an immediate loss of accreditation can occur. Being placed on probation or even being cited for major deficiencies can impact the ability to recruit the best students or recruit and retain the best faculty.

- Increase in SOM Class Size

It is predicted that there are not going to be enough physicians in the upcoming decades (2000s), especially in primary care. The AAMC has called for a 30% increase in enrollment in US medical schools and many schools are responding by increase class size. There are also 11-15 new schools under development with 4 of these ready to start operating in the fall of 2009. When class size increases 10% or more, the LCME is looking carefully to ensure such schools have the necessary resources to maintain LCME's standards and some schools have been placed on probation for this deficit.

Connecticut ranks 4th nationally in physicians per 100,000 population and 9th in primary care physician per 100,000 population. Despite these numbers, there are numerous geographic areas in Connecticut with insufficient numbers of physicians/primary care physicians.

The chief limiting factor at UCHC for class size expansion is securing a sufficient number of high quality clinical training sites, especially in supporting our unique ambulatory clinical experiences. Ongoing efforts are being made in this area.

The School of Medicine had made a decision to increase the class size from 80 new matriculants each year to 85 (~6%). An increase to 88 would trigger LCME review.

A discussion ensued. A Governor's committee is currently looking at the distribution of primary care providers and needs and how many such physicians are accepting new patients, especially Medicare and Medicaid patients. It was noted that simply graduating more students will not address the State's problems since that does not guarantee they will pursue primary care careers or choose to work in underserved areas. Other interventions may well be necessary to obtain those ends.

6. Academic Affairs Report – R. Galvin

- 6.1 Dr. Galvin presented a report on the last meeting of the Committee on November 5, 2007. The meeting was devoted to issues related to URM enrollment

numbers for the School of Dental Medicine, Expansion of School of Medicine classes and a proposal for forming a Clinical Translational Science Institute.

He noted that he heard some unfavorable public comments about Farm Tech. Specifically, that those funds could have been better spent in other areas.

7. Clinical Affairs Report – J. Thornton

7.1 Mr. Thornton presented a report on the last meeting of the Committee on November 27, 2007. At this meeting, the CEO of Planetree addressed the Committee and reviewed opportunities to deploy this model of patient centric at JDH in 2008.

The clinical enterprise key indicators were reviewed.

8. Financial Affairs Report – J. Haberland

8.1 At the last meeting, matters pertaining to challenges of getting back on budget were discussed.

8.2 Leases

The Board Unanimously approved the following resolutions:

That the Board of Directors recommend that the Board of Trustees approval of a ten-year lease extension with Blackthorn Holdings LLC for approximately 36,032 Net Usable Square Feet (NUSF) at 65 Kane Street, West Hartford, for the purpose of providing outpatient clinical offices for the University Medical Group.

That the Board of Directors recommend that the Board of Trustees approval of a three-year lease extension with two one year options for renewal with S. S. and H. Associates for 9,001 Net Usable Square Feet (NUSF) at 10 Talcott Notch, Farmington, for the purpose of providing outpatient clinical and acadmie offices fo the Department of Psychiatry.

8.3 Contract Renewals through Finance Corporation

The Board Unanimously approved the following resolutions:

That the Board of Directors of the UCHC Finance Corporation approve a contract renewal, on behalf of the UConn Medical Group, with Invision Medical Imaging, LLC to provide interventional radiology services for the period February 1, 2008 through January 31, 2010, in an amount not to exceed \$490,000, and that the Executive Director be authorized to enter into said contract.

The Eastern Connecticut Health Network contract provided in the Board meeting materials was removed from the agenda since they hired our physicians.

8.4 Project Budgets – S. Whetstone

8.4.1 Susan Whetstone explained that the UCHC Board of Directors calendar is such that, following the 12/10/07 meeting, the Board does not meet again until March 10, 2008. This will result in a nearly 3 month period during which the Board has no meetings at which action on project budgets could be taken. Because of that, the Board of Directors approved the following:

That the Board of Directors delegate approval of project budgets to the BOD Finance Committee for projects that would otherwise be delayed if action on the budget is delayed until the March 10, 2008 meeting. The Finance Committee may approve projects budgets up to the following limits:

1. for projects up to \$1,000,000 the approval is limited to no more than 10% higher than the existing approved project budget to allow the project to go out to bid or a contract to be awarded;
2. for projects over \$1,000,000 the approval is limited to no more than 5% higher than the existing approved budget to allow the project to go out to bid or a contract to be awarded.

8.4.2. (Design) – Dowling North Renovation

8.4.3. (Final) – Cooling Coil Conversion Project

8.4.4. (Design) – UCHC Library/Student Computer Center Renovation

The Board unanimously approved the above named Project Budgets.

8.5 Informational Items reviewed.

9. Other Reports

9.1 Joint Audit and Compliance Committee Report – J. Haberland
No significant items to report.

9.2 Compliance Updates – I. Mauriello
No significant item of specific concern t report from the Compliance Office.

• Executive Session

By unanimous vote the committee entered into Executive Session at 9:55 am.

Item A (9:55 am) Preliminary Notes and Drafts

Attendees: G. Burrow (phone) , M. Cicchetti, C. Chase, S. Cloud, D. Friend (phone), R. Galvin, J. Haberland, B. Hehir, M. Hogan, L. Jacobs, R. Samuels, P. Albertsen, S. Brohinsky, B. Carlson, B. Feldman, B. Koeppen, M. Lalande, J. Lombardo, J Thornton, L. Troyer D. Upton, J. Walter, S. Wetstone, S. Whetstone, D. Chin (PWC), F. Pennell (PWC), A. Edwards (PWC).

Item B (11:14 am) On-going Litigation

Attendees: G. Burrow (phone) , M. Cicchetti, C. Chase, D. Friend (phone), R. Galvin, J. Haberland, B. Hehir, M. Hogan, L. Jacobs, R. Samuels, P. Albertsen, S. Brohinsky, B. Carlson, B. Feldman, B. Koeppen, M. Lalande, J. Lombardo, J Thornton, L. Troyer D. Upton, J. Walter, S. Wetstone, S. Whetstone, D. Chin (PWC), F. Pennell (PWC), A. Edwards(PWC).

Executive Session concluded at 11:45 a.m.

There being no further business, the meeting was adjourned at 11:45 am

Respectfully submitted,

Peter J. Deckers, M.D.

Attendees: G. Burrow (phone) , M. Cicchetti, C. Chase, S. Cloud, D. Friend (phone), R. Galvin, J. Haberland, B. Hehir, M. Hogan, L. Jacobs, and R. Samuels.