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**Monthly Board Meeting**

**Date:** May 27, 2020

**Location - Webex:** <https://unitedmedicalcenter.webex.com/unitedmedicalcenter/j.php?>

MTID=m411e1e31e2052b19b59ee2a060cfb7b3

**Meeting number:** 717 322 395

**Password:** cBZYg9xeW73

**2020 BOARD OF DIRECTORS**

LaRuby Z. May, *Chair*

Colene Y. Daniel, *CEO*

Girume Ashenafi

Raymond Tu, MD

Konrad Dawson, MD

Brenda Donald

Malika Fair, MD

Millicent Gorham

Angell Jacobs

William Sherman

Velma Speight

Wayne Turnage

Marilyn McPherson-Corder, MD

Robert Bobb



**THE NOT-FOR-PROFIT HOSPITAL CORPORATION  
BOARD OF DIRECTORS  
NOTICE OF PUBLIC MEETING**

**LARUBY Z. MAY, BOARD CHAIR**

The monthly Governing Board meeting of the Board of Directors of the Not-For-Profit Hospital Corporation, an independent instrumentality of the District of Columbia Government, will convene at 12:00PM on Wednesday, May 27, 2020. Due to the Coronavirus pandemic, the meeting will be held via Webex. Meeting link:

<https://unitedmedicalcenter.webex.com/unitedmedicalcenter/j.php?MTID=m411e1e31e2052b19b59ee2a060cfb7b3> Meeting number: 717 322 395 Password: cBZYg9xeW73

Notice of a location, time change, or intent to have a closed meeting will be published in the D.C. Register, posted in the Hospital, and/or posted on the Not- For-Profit Hospital Corporation's website (www.united-medicalcenter.com).

**DRAFT AGENDA**

**I. CALL TO ORDER**

**II. DETERMINATION OF A QUORUM**

**III. APPROVAL OF AGENDA**

**IV. READING AND APPROVAL OF MINUTES**

April 22, 2020

**V. CONSENT AGENDA**

- A. Dr. Raymond Tu, Chief Medical Officer
- B. Dr. Marilyn McPherson-Corder, Medical Chief of Staff
- C. Dr. Jacqueline Payne-Borden, Chief Nursing Officer

**VI. EXECUTIVE MANAGEMENT REPORT**

- A. Colene Daniel, Chief Executive Officer
- B. Human Resources Report, Trenell Bradley

**VII. CORPORATE SECRETARY REPORT**

- A. Toya Carmichael, VP Public Relations/Corporate Secretary

**VIII. NFPHC COMMITTEE REPORTS**

**IX. PUBLIC COMMENT**

**X. OTHER BUSINESS**

- A. Old Business
- B. New Business

**XI. ANNOUNCEMENTS**

**XII. ADJOURN**

**NOTICE OF INTENT TO CLOSE.** The NFPHC Board hereby gives notice that it may close the meeting and move to executive session to discuss collective bargaining agreements, personnel, and discipline matters. D.C. Official Code §§2-575(b)(1)(2)(4A)(5),(9), (10),(11),(14).



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## **General Board Meeting**

**Date: May 27, 2020**

# **Reading and Approval of Minutes**

**Minutes Date:**  
**April 22, 2020**



Not-For-Profit Hospital Corporation  
GENERAL BOARD MEETING  
**Wednesday, April 22, 2020**  
**Held via conference call 1-866-820-5**

**Present:**

**Directors:** Chair LaRuby May, Dr. Malika Fair, Girume Ashenafi, Robert Bobb, Brenda Donald, Millicent Gorham, Angell Jacobs, William Sherman, Dr. Konrad Dawson, DM Wayne Turnage, Velma Speight,

**UMC Staff:** COS Dr. McPherson Corder, CEO Colene Daniel, CMO Dr. Tu., Fay Goode-Vaddy, CFO Lillian Chukwuma, COO Marcela Maamari, GC Kameka Waters, Sec. Toya Carmichael, HR Dir. Trenell Bradley, Perry Sheeley, Kendrick Dandridge, Kim Bussie, CIO David Perry, Ken Blackwell, Tamika Hardy.

**Other:** Kai Blisset, Cheyenne Holland, Faith Saporantos, Marc Grossman, Gene Grabowksi, Daniel Rene

Agenda Item	Discussion
	<b>Chairwoman May</b>
<b>Call to Order</b>	The meeting was called to order at approximately 12:12 pm. Quorum determined by Corporate Secretary Toya Carmichael.
<b>Approval of the Agenda</b>	GC added the resolution extending the COVID 19 emergency.  Motion to approve agenda. Motion by Dir. Speight, second by Dir. Ashenafi. Agenda approved with unanimous vote.
<b>Approval of the Minutes</b>	Motion by Dir. Ashenafi, second by Dr. Fair. Minutes approved by unanimous vote.

<p><b>Discussion</b></p>	<p style="text-align: center;"><b><u>CONSENT AGENDA</u></b></p> <p><b><u>CHIEF OF MEDICAL STAFF REPORT: Dr. Tu</u></b></p> <ul style="list-style-type: none"> <li>• Medical staff consumed and enthusiastic about coming on board for the necessary measures needed to respond the challenge of COVID-19.</li> <li>• Acknowledged laboratory team who are very busy processing and reporting test results. Completed 617 samples and 23% have been positive. Peak of 81 samples on April 16<sup>th</sup> which means 81 patients came through our doors. Medical and lab staff have been addressing the needs of our patients in a dignified and safe way.</li> <li>• Acknowledged Dr. Yacoub and Dr. Lawson in pharmacy team for acquiring hydroxyl chloroquine through collaboration with a commercial pharmacy since none of the other major distributors had this medication.</li> <li>• March was very busy time for leadership we wrote and implemented many new policies with making adjustments to our visitors' policies.</li> <li>• Acknowledged IT and Behavioral Health now we have telehealth and tele court to help optimize the movement of BHU patients through our system.</li> <li>• Acknowledged Regina Kim and all the work she has done to deal with COVID challenges and keeping her staff and patients safe.</li> <li>• Thank laboratory and work with Quest to report our results back in a timely fashion we are now getting them back in less than 24 hours which is a great improvement from the beginning of this process.</li> </ul> <p><b><i>Discussion:</i></b></p> <ul style="list-style-type: none"> <li>• Chairwoman followed up on Dr. Fair question about length of stay? The question was answered and reports are included from different directors now.</li> <li>• Chairwoman asked if we have an in house system? Dr. Tu said we sent out 617 samples for testing.</li> <li>• Dr. Fair asked about Dr. Yacoub's noted challenges with PPE? CEO noted that we are working with department heads to make sure they are putting in the proper numbers when they request PPE. We have placed orders with every supplier we can find and DC Health. Have been acquiring some supplies from Home Depot and Lowes but expecting a shipment today. We are doing better with securing the supplies we have by having a lock and key system where staff have to request supplies and PPE from their manager. Union is not happy about the new process but we have to keep it under lock because a few weeks ago we had 900 isolation gowns that disappeared in under 24 hours.</li> <li>• Discussion regarding positive cases and COVID vs other infectious diseases. 48 PUI but 19 were COVID and the rest were SARS patients. CEO has not seen this many SARS patients since she worked with world health organization in China.</li> </ul>
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- DM Turnage asked how sick the SARS patients are? CEO said very sick. DM Turnage asked if there is a vaccine for SARS? We need to find that out immediately and know if there is automatic reporting for SARS.
- Dr. Fair explained that SARS is COVID but it is COVID-2, one is a virus and one is the disease. We need to make sure that we are recording the results properly.
- CEO requested to work with Chairwoman to inform DC Health of the other infectious diseases that are we are seeing and make sure DC Health knows about this level of disease so they can track and help us manage it. Public health division should know about this.
- Chairwoman asked on case management, do we have an idea now that Dr. Morgan is on board, were are we in terms of our denials?
- Dr. Tu said the comparison between the average length of stay from last year has improved. In April it was 5.09 vs. 5.39 last year. In March 5.34 vs. 5.62. There are outliers like patients who are hard to place due to homelessness. There is a whole presentation from the new case management team but we are not seeing significant progress as of yet.

**Action Items:**

- Chairwoman asked about the deaths noted in the report (8 deaths in the ICU) where they all COVID related? Dr. Tu will follow up and report back.

**MEDICAL CHIEF OF STAFF: Dr. Marilyn McPherson-Corder**

- Echo Dr. Tu's report regarding the medical staff and dedication of the physicians.
- Acknowledged Dr. O'Connell in ED, Dr. Yacoub.
- We are solving the issue of the PPE and today we will receive 1,000 masks from Masks for America. So we now will have a surplus.
- Going through a list of volunteers as we prepare for the surge for more staff so we are in compliance.
- We had an emergency meeting and a MEC meeting where we received a real time report of the District's COVID plan from the CEO and CMO.
- We are also working with the testing outside of the ED and you know we are a testing site for DC Health.

***Discussion:***

- Chairwoman asked who UMC is recruiting for? Recruiting for physicians from other jurisdictions to come on board for the surge.
- Dir. Millicent asked about what type of masks are being donated? N95 masks.

**CHIEF NURSING OFFICER: Fay Goode-Vaddy (Sen. Dir. of Nursing)**

- Patient Care services in conjunction with Dr. O’Connell repurposed the current super track to efficiently function as a triage waiting area to protect our vulnerable patient population and the work force.
- Working with C Suite officers to identify the best approach to increase our bed capacity for the COVID surge.
- Staffing patterns for different disciplines have been reviewed in case we have a surge.
- Our DC Health survey occurred March 7-12, we were complimented on our improvements in our environment of care and the willingness of staff to engage with the surveyors.
- Education Dept. joined forces with ED and Infectious Control group to provide information to our staff through town hall meetings.
- Increased rounding of nursing areas. An attachment to the report is included to show what was sent to the staff in appreciation of all their hard work.
- HR Dept. with input from the nursing leadership has agreed to aggressively recruit supplemental staff as we have several staff out on self-quarantine, some are recovering from COVID and others are just calling out.
- Sometimes our average daily census is greater than our staff due to call outs and surge of patients.
- UMC ethics committee has been revitalized. Once members are identified they will be presented to the board for approval.
- CNO presented as a keynote speaker for the Black Nurses Association Luncheon on March 7<sup>th</sup>, there were over 600 nurses from the DC area.

Discussion:

- Dir. Donald asked what was meant by the ethical challenges we may face due to COVID-19. Fay responded that there may be times based on how patients present that we should not do CPR on certain patients. We do not want to make these decisions in isolation so we will have the ethics committee to discuss these issues ahead of time and make a decision. For example, today we had a conversation about doing echo and scans on patients despite their status as COVID positive. So we want the committee to help determine how we do what is just for our patients.
- Kameka explained the makeup of the committee.
- Dr. Dawson added that this will not be an issue because we now have enough ventilators to treat everyone.
- Dr. Fair added that this is a national conversation that is being held, and we want to make sure we think about this from an equity lense, as well and it is great that we have a committee on the ground thinking about this now.
- Dir. Donald asked if UMC doesn’t already have an ethics committee? Shouldn’t we have one as a normal course of business?

	<ul style="list-style-type: none"> <li>• GC said the committee was established back in 2010 but there has not been an active clinical ethics committee.</li> <li>• Dr. Dawson and Dr. Corder said every hospital they have worked at has had an clinical ethics committee.</li> <li>• Chair May stated we need to make sure the committee is an ongoing practice and not just during COVID pandemic.</li> <li>• Chair May asked what we are doing about the nurses calling out?</li> <li>• Fay said that we are disciplining nurses who are just calling out but if it is due to COVID, HR is handling that.</li> <li>• Lillian stated that we are working on a plan for people that have a lot of vacation time and using that to call out. We are putting together a plan now with OGC's office.</li> </ul>
<b>Approval of the CMO, Medical Chief of Staff &amp; CNO Reports</b>	Motion by Dir. Ashenafi second by Dir. Gorham. Approved as submitted.
	<p style="text-align: center;"><b><u>EXECUTIVE REPORT: Colene Daniel</u></b></p> <ul style="list-style-type: none"> <li>• Responding to city for reports related to our surge planning. Working with DCHA to get a handle on that.</li> <li>• Case management has been in effect for a month and the doctors are responding well to the program, particularly Dr. Francis in ER.</li> <li>• Capital Budget, Marcela has been working with Kai so we know what goes in the capital budget vs. the surge plan.</li> <li>• Keeping up on the SAFER Matrix and all the JC findings that had to be met so that we are ready for JC.</li> <li>• DC Health license POC was submitted on time, thanks to Dr. Tu and Marcela that spent about six hours this weekend editing and rewriting the POC so it could be submitted on time.</li> <li>• JC due to give us our annual visit by September. But day in and day out we are getting our beds ready for the surge.</li> <li>• Recognized Pat Lyles for her service to UMC and noted Cafeteria staff working to celebrate her life. Chair asked for information about Ms. Lyles ceremony.</li> </ul> <p>Motion to accept report by Dir. Gorham second by Dir. Donald.</p> <p>Discussion: GC clarified that part of HR report should be provided during closed session.</p> <p><b>Action Items:</b></p> <ul style="list-style-type: none"> <li>• Chairwoman asked that HR report be added to the agenda.</li> </ul> <p>Dr. Fair asked that we speak generally in the board book about staff passing to acknowledge the diversity of religious beliefs of our staff.</p> <p>CEO Report approved with unanimous vote.</p>



**HR REPORT: HR Director Trenell Bradley**

- In March we announced we would begin the implementation of the new HR system Kronos in late April. Implementation will occur in two phases: first phase will go live on July 1 and full implementation going live on October 1. It is a very involved process and we are currently going through the issues but have to make sure we are staffed for COVID.
- A lot of what we are doing has to do with the programs we offer, employee recognition, training, etc. All of these have to be reviewed and developed so they can be a part of our HRIS system.
- In March we had 14 new hires. A number of positions in tech, 4 nurses, 6 were DC residents, 3 are Ward 8 residents and 8 were from MD.
- 30 separations in March which is a large number and we can talk more about those areas in closed session.

**Discussion:**

- Chair May asked for a status on the compliance officer position? Trenell said the OGC is recruiting for the position. C
- hair asked why the GC instead of HR is recruiting for the position. HR Dir. clarified that HR has been working with GC, GC has all the applications. HR is not vetting the applicants for the positions. HR didn't have the staffing to recruit for the entire hospital and instead was focused on clinical positions.
- GC has been pressing the issue and is not the hiring person or the person the Compliance Officer would report to. A few weeks ago, the GC, CEO, and CFO interviewed an applicant and has not heard anything sense.
- Chair May stated that due to the extremely important role the Compliance Officer plays and the Board gave Ira a 30-day mandate to get this position filled. This time has passed and it is extremely important now especially with the pandemic that we have a compliance officer.

**Action Items:**

- **Hiring of Compliance Officer should be a priority. Report on filling the role will be provided at next board meeting.**

**CORPORATE SECRETARY: Tova Carmichael**

- To date, Corp. Sec has distributed over 2,500 donated meals to staff. We are starting to get PPE donated which is given to staff directly.
- We recently received a donation from the NFL Players Coalition in the amount of \$250,000 to support our staff during our COVID response.

- Also received a donation of \$14,500 from the Nora Roberts Foundation. Corp. Secretary acknowledged Dir. Speight and the Crudup Food Pantry for serving our fiscal agent to accept the donation.

Discussion:

- Chairwoman mentioned that the boards should consider how the funds should be used at the hospital.
- CFO added that we are doing an analysis of how best to process and use the funds.
- Corp. Sec. added that she spoke to Dir. Scales at DC Department of Grants and Partnerships and will work with CFO to make sure we process the donations properly.
- Chair May explained that we are not a non-profit and in some regard we are considered a government agency so we have to work with the DC Dept. of Grants and Partnership to accept the donation. Echoed the appreciation to Dir. Speight for serving as a conduit for the donation on behalf of the hospital.
- CFO recognized the secretary for her efforts. What Corp. Sec. is doing for us we have never had before. She is coordinating food and communications and keeping us informed. You can see the effort she is putting in her work through her report.
- Chair May echoed the acknowledgment and encouraged the Board to read the newsletter that is released on Fridays. We also appreciate someone working on our communication with the public.
- Dr. Dawson asked about the crisis management firm kglobal.
- Corp. Sec. reported that kglobal has been brought on board and have been assisting with response to media inquiries regarding our recently deceased staff member and the tracing process when we have staff exposures inside the hospital. Noted that a few members of the kglobal team listening to the board call so they can work with us to make additional improvements.

Motion to approve Corp. Sec. reports by Dir. Speight, second by Dir. Donald.  
Unanimous approval.

**Note: There was no vote of HR report.**

## **COMMITTEE REPORTS**

### **PERFORMANCE IMPROVEMENT: Dr. Fair**

- Thank you to the board members who participated on the call.
- DC Health Survey seems to have gone well and the plan of correction was submitted very quickly which is great. Will discuss more in closed session. Thanks to hospital staff including Dr. Isabel Shepard who worked on the POC.
- Applause for making sure that case management and social workers are on board and making the improvements that we have been asking for, for quite some time.
- Asked CEO to discuss ICU renovation but GC asked discussion be saved for closed session.
- Thanks to Dir. Ashenafi for his support chairing the committee in Dr. Fair's absence.

### **GOVERNANCE COMMITTEE: Dr. Dawson**

- Committee met a few times during the pandemic but the discussion is best reserved for closed session.

### **FINANCE COMMITTEE: Wayne Turnage**

- Committee met on Monday and we are trying to get our hands around the budget and noted all hospitals are losing revenue due to end of elective surgeries. Also UMC is one of the hospitals the Mayor has asked to put together a COVID surge plan which will have an impact on expenses. We have until May 15<sup>th</sup> to have the beds operational.
- If you look at the activities that drive revenue and expenses they are all going in the wrong direction with the addition of the activities required by COVID. WE are not looking at a loss of \$5.5 million but Lillian will provide more detail in her report.
- Board may be aware that DHCF was asked by the Mayor to work on the allocation of \$25 million for the hospitals adding surge beds.
- CA has decided to go forward with an allocation based on the number of surge beds and based on their formula UMC received a notice of grant award in the range of \$3.6 mil which should help but you will learn that they still need \$31 mil from the city.
- CFO discussed the February Financial Report – the February meeting was converted to a special meeting just to discuss COVID. February is for perusal but we will report in March.
- The March report shows that everything is going in the wrong direction. Our admissions are all down and in our finance committee Dir. Donald asked what impact COVID has had on our surgery dept. yesterday, the manager of the surgery dept. that 40% of the reduction is due to COVID. At the same time our expenses are much

	<p>higher, some are due to COVID and we are trying to identify those because some of them will be reimbursable. But if we continue we will not have a balanced budget and we will not be able to make payroll which will trigger the control board. Mazars will go into detail during closed session to tell us how that mitigation will happen.</p> <ul style="list-style-type: none"> <li>• Directed attention to page 3 of the March report. In March, if everything remains the same way it is we will be losing \$7 mil dollars. We accepted \$4 mil from denials and collected half of the revenue from GW. So by the end of the year, we will be losing only \$453,000, however Mazars has a plan to realize \$10.4 mil from initiatives that will allow us to get back to where we were with \$9.9 mil.</li> <li>• Chairwoman asked if the rest of the initiatives on this sheet we should expect that we are going to stay at 0% on the rest of them? CFO said no, next month we will see where we are based on the plan that Mazars will put in place. Legal has saved quite a bit but they have also had increased costs, agency staffing will continue to grow because we have to use agency staff for all our needs.</li> <li>• Kai shared the upcoming Finance Committee dates.</li> <li>• Chairwoman asked DM Turnage if the District understands our potential payroll issues.</li> <li>• DM Turnage said yes but he has not seen precise numbers yet. The District understands the hospital is not doing well. Will wait for Lillian to provide a precise number. CFO added that as of right now, we have 52 days of payroll but as we go forward we will be able to recalculate. Beyond the COVID all our cash needs are met but we need cash for COVID expenses.</li> <li>• GC noted that committee will have contracts to present during closed session. Contracts and POs sent in the month of March were distributed to the board this morning.</li> <li>• Chairwoman asked again for a description of what was procured and where the vendors are physically located. This information is not included on the dashboard for the POs but was included on the contracts dashboard. Tamika Hardy agreed to add that information going forward. Chairwoman noted that even during the pandemic it is important for the team to stay focused on supporting our local economy even more so than we have been in the past.</li> </ul> <p>Motion to accept committee reports: Motion by Dir. Jacobs, second by Dr. Fair. Unanimous vote for approval.</p>
<b>Public Comment</b>	N/A
<b>Other Business</b>	N/A
<b>Closed Session</b>	Motion to enter closed session by Dir. Donald, second by Dir. Ashenafi.

	<ul style="list-style-type: none"> <li>GC asked if the emergency resolution could be discussed before entering closed session and Chairwoman noted there was a pending motion on the floor.</li> </ul> <p>Notice to close read by GC Waters at 1:43. Unanimous roll call vote to enter closed session.</p> <ul style="list-style-type: none"> <li>Tammi Hawthorne, Kai Blisset, Trenell Bradley, Lillian Chukwuma,</li> <li>Cheyenne, Faith and CEO to join during closed session.</li> <li>Recess at 1:47.</li> <li>Closed Session began at 1:55</li> </ul> <p>Motion to terminate closed session by Dir. Donald, second by Dir. Ashenafi. Motion to terminate closed session passed unanimously at 4:46 pm.</p>
<b>Announcements</b>	<ul style="list-style-type: none"> <li>During closed session the board approved contracts for emergency gas services and approved the Audit Committee's recommendation regarding a sole source contract with Mazars.</li> </ul> <p>Chair May - Vote on Resolution – Extend Emergency – Takes the Board through May 26 or 27<sup>th</sup> to allow us to stay under an emergency alongside the current emergency declaration in the District of Columbia until our May board meeting.</p> <ul style="list-style-type: none"> <li>Dr. Dawson asked if this gives the hospital the right not to do elective surgeries.</li> </ul> <p>Motion to extend emergency by Dir. Sherman, second by Dir. Jacobs. Approved by unanimous vote.</p>
<b>Adjourned.</b>	<p>Motion to adjourn by Dir. Speight, second by Dir. Donald.</p> <p>The Board meeting was adjourned at approximately 4:56 pm by Chair May.</p>



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## **General Board Meeting**

Date: May 27, 2020

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# **Consent Agenda**



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## General Board Meeting

Date: May 27, 2020

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# CMO REPORT

*Presented by:*

Raymond Tu, MD

Chief Medical Officer



**Not for Profit Hospital Corporation- Chief Medical Officer Report  
April 2020**

**Respectfully Submitted: Raymond Tu**

COVID-19 Readiness. The medical staff has been very involved with COVID-19 preparation meetings. Leadership wishes to acknowledge Dr. Yacoub, Dr. Momoh, Dr. Fallouh and Dr. O'Connell for their hands on participation throughout the surge plan process. These front line leaders provided critical information for UMC to have an effective surge response. At various meetings with DC Hospital Association, DC area hospitals and various government authorities UMC was noted to be an engaged, well prepared and prepared partner during each step of the surge plan. Hospital clinical leaders have participated in multiple construction walk troughs and table top discussions for staffing, resources, designing of protocols as the Command Center/Triage Plan to outline patient triage, patient flow, treatment, and staffing. Discussions and follow up with DC State Health Planning and Development Agency on March 26 detailing expansion plans were accepted on April 8<sup>th</sup> with a Declaration by Dr. Nesbitt and DC Health. Our hospital annual survey plan of correction was submitted to DC Heath with participation of all stakeholders; in particular, we wish to acknowledge the medical staff office, pharmacy, clinical services as the operating room, Patient Care Services, case management and social work. Working with area hospitals, Infection Control Patient Care Services, the COVID-19 cohorting patient placement policy was implemented, improving patient throughput. The UMC universal masking policy was authored, reviewed and implemented with infection control, nursing, human resources, legal and Quality approval. A workflow for COVID-19 patients in radiology was designed in collaboration with Mr. Mabout, Dr. Charafeddine and multiple stakeholders; the improvements and implementation are ongoing and have improved workflow.

In anticipation of using the 6<sup>th</sup> and 7<sup>th</sup> floor for COVID-19 surge beds, Dr. Momoh, medical director of the UMNC and Regina Kim, UMNC Administrator invested tremendous effort to work with surrounding facilities as BridgePoint, and many others to place our nursing home residents. Our DC Health and State Health Planning Agency request for certificate of need waiver was submitted and approved by Dr. Nesbitt and DC Health with a DC Health Declaration.

Case Management and Social Work. The restructure of the case management and social work team with multidisciplinary rounding began under Dr. Cynthia Morgan Director of Case Management and Social Work. The number of observation patients has reduced. Daily case assessments are completed. The educational modules with the emergency department, behavioral health and hospitalists have introduced the team approach and the resources available. Viewing of notes by case management, social work, nursing in the emergency department and behavioral health has improved timely planning with Case Management Team A at the 5<sup>th</sup> floor office for Hospitalists team 1-3, Case Management Team B at the 8<sup>th</sup> floor



office for Hospitalists Team 4-5, Private Practice, Case Management Team C for the Emergency Department, and Case Management team D for the weekend provide 24/7 coverage. A dedicated emergency department social worker phone number 202-384-8953 was implemented to streamline requests. Daily Case Management and Social work shift reports are passed to the incoming team to assure follow up. Medical record completeness has improved significantly with reminders and updates posted and communicated to providers.

Analytics. COVID-19 has increased hospital admissions in April that have continued into May. We began to see gradual increase in patients under investigation for COVID-19 in the hospital and increased inpatients later confirmed COVID-19 positive. The Critical Care services under Dr. Yacoub have experienced increased COVID-19 related cases which continue into May. April was notable for 395 admissions compared to 426 in 2019, 187 admissions in observation, 105 admissions converted from observation to inpatient, 1.92 days average length of stay in observation compared to 2.56 in 2019 according from analytics from UMC IT. Behavioral health admissions increased 9.65% to 125 compared to 114 in 2019. Clinic visits decreased 69% compared to last year concordant with the COVID-19 policy. UMC Analytics reported average length of stay improved in April to 1.82 from 2.11 days in March. The average daily census was 93 compared to 87 in March. There were 50 surgical procedures in March decreased 73% compared to 2019 concordant with the COVID-19 policy. In April there were 283 providers with 5 in anesthesia, 9 in critical care, 63 in emergency medicine, 3 in gynecology, 108 in medicine, 1 in pathology, 13 in behavioral health, 56 in radiology and 24 in surgery.



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## **General Board Meeting**

**Date: May 27, 2020**

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# **Medical Chief of Staff Report**

*Presented by:* Marilyn  
McPherson-Corder  
Medical Chief of Staff



**REPORT OF THE CHIEF OF STAFF  
MARILYN MCPHERSON-CORDER, M.D.  
APRIL 2020**

1. There have been on-going meetings held within the last month in preparation for the COVID-19 surge at UMC. Ms. Colene Daniel, CEO, has included the MEC and the entire hospital staff in these plans in accordance with the District of Columbia mandate. These plans were major, involving input from all of the entities of the hospital: nursing, medical staff, structural engineering, maintenance and security, etc. “All hands-on deck.” The hospital has transformed the 3<sup>rd</sup> floor that was once the nursery and ob/gyn units to a COVID Med/Tele floor with a surgical operating room and an overflow ICU. I am proud to say that the entire hospital staff came together in this endeavor to prepare the hospital to provide standard of care to the residents of East of the River as we fight the war against this virus.
2. The Medical Affairs Department is expediting the credentialing process for providers to come on board to assist with the surge as needed.
3. Several action items for the Board of Director’s review and approval (see attached).



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## General Board Meeting

Date: May 27, 2020

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### CNO Report

*Presented by:*  
Jacqueline Payne-Borden  
Chief Nursing Officer

# Nursing Board Report

## April 2020

Nursing Administration/Patient Care Services continually strives to provide safe, effective, evidenced based care in a collaborative manner. During this uncertain time of the COVID-19 pandemic it is certain that now more than ever we need to think, perform and deliver care like a team; "Team UMC."

- Nursing Administration continued to work jointly with all C-Suite Officers including OCFO on plans for the best approach to increase bed capacity to help city provide beds for pending surge of COVID-19 patients. Staffing patterns for various disciplines and support services have been projected should we have to resort to a crisis level posturing.
- Worked diligently from a nursing perspective to ensure adequate supplies/inventory to include linens were procured timely for the planned surge areas.
- This writer remains assigned to the ongoing DC Medical Surge Planning Clinical Staff Work Group facilitated by Dr. Sharon Lewis. Primary discussions related to e.g. planning of safe transfer of stable COVID-19 positive patients from hospitals to hospital or to Alternate Care Sites (ACS) during surge and staffing of various disciplines. District of Columbia Board of Nursing is an integral part of this work group; discussed the possibility of using Graduate Nurses to supplement staff during pandemic. The DC Board of Nursing would be the liaison between the hospitals and Graduate Nurses. United Medical Center and Howard University Hospitals were the two DC hospitals eager to engage and utilize Graduate Nurses during the pandemic. Post- pandemic UMC would use the opportunity as a recruitment strategy when the Graduate Nurses were successful with the NCLEX nursing licensure exam.
- Nursing contributed to the Plan of Correction (POC) in response to DC Health's post survey report. All departments are implementing corrective measures, and systematically monitoring and documenting outcomes.
- Collaborated with Human Resource Department team re: transition of Skilled Nursing Facility (SNF) to support the hospital during potential surge. Discussions included competency and job descriptions. The date for the staff's transition to acute care will be determined by when all the SNF residents are safely placed in an alternate facility.
- UMC's internal Staffing Resource Personnel remains steadfast in attempts to secure supplemental staff which is progressively difficult. At the end of March, were grateful to secure a Perioperative RN traveler for a 13 week contract.
- Staff remains appreciative of Ms. Toya Carmichael for the ongoing coordination and often times actual serving of donated meals donated by local vendors.

Respectfully submitted,  
Jacqueline Payne-Borden, PhD, RN  
Chief Nursing Officer



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## **General Board Meeting**

**Date: May 27, 2020**

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# **Executive Management Report** (Materials reserved for closed session)

*Presented by:* Colene Y.  
Daniel Chief Executive  
Officer



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**General Board Meeting**

**Date: May 27, 2020**

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**CORPORATE  
SECRETARY  
Report**

*Presented by:* Toya  
Carmichael  
VP Public Relations/  
Corporate Secretary



## **CORPORATE SECRETARY REPORT**

**TO:** NFPHC Board of Directors

**FROM:** Toya Carmichael  
VP Public Relations / Corporate Secretary

**DATE:** May 22, 2020

### **GENERAL UPDATE**

The Public Relations team grew this week with the addition of Kenneth Whitaker who previously served UMC for five years as the Assistant Activities Coordinated for the SNF. Jessie Armstrong, a GW Graduate Student in the School of Nursing also joined the team this week as a part-time volunteer who focus on social media. Please be sure to follow UMC on Facebook, Twitter, and Instagram.

### **CRISIS MANAGEMENT FIRM**

Public Relations and Crisis Management engaged kglobal to assist UMC with finalizing an employee and visitor screening process. The process is near completion but appropriate staffing is required before the process can be implemented. The crisis management firm has also assisted with drafting content for the weekly COVID-19 newsletter, press releases, and media responses.

### **COVID COMMUNITY SUPPORT**

UMC received and deposited a check in the amount of \$14,500 from the Nora Roberts Foundation. These funds were used to purchase UMC logo face covers, meals, and other UMC logo items for distribution to staff which began during National Hospital Week celebrated May 10-16<sup>th</sup>. We now have a regular schedule of day and times for donated meals to streamline distribution and avoid competition with hospital cafeteria. Collected approximately \$300 from donors to purchase meals directly from the cafeteria. The list of donors and pictures from the last month are included in the weekly newsletter. Thank you to Maxine Lawson, Ron Anderson, Angela Titus, Tonia Johnson, Cheron Rust and the entire Food & Nutrition Team for volunteering several hours over the last



two weeks to distribute donated meals. On May 20, 2020 UMC was visited by Ambassador Emily Haber of Germany who accompanied a team from the German Embassy when they delivered the first of seven deliveries of donated meals for UMC staff. Finally, UMC is currently receiving voluntary pastoral services from Father Sass and Father Jan of Our Lady Queen of Peace Catholic Church in Ward 7, these services are available throughout the week to both patients and staff. Public Relations team is still working to obtain additional services from non-denominational and various faith leaders.

### **PUBLIC RELATIONS**

**Weekly Newsletter** – Distributed every Friday via all staff email and included on UMC website. If Board members would like to include a special note, please send by Thursday of each week.

**News Media**– The attached press release regarding the Nora Roberts Foundation Donation was issued on May 21, 2020. Currently tracking news articles and social media mentions which are now listed in weekly newsletter.

**UMC Activities** – As previously stated UMC celebrated National Hospital Week from May 10-16<sup>th</sup>. Special thanks to Yvette Boyd, Assistant to the CEO, Lloyd Wynn and the entire Food & Nutrition Staff, Chanell Morris, and CEO Daniels for their assistance with preparation and execution of the week's activities.



**FOR IMMEDIATE RELEASE**

May 21, 2020

**CONTACT:**

Toya Carmichael-[TCarmichael@United-MedicalCenter.com](mailto:TCarmichael@United-MedicalCenter.com), (202) 574-6000.

**The Not-for-Profit Hospital Corporation (“United Medical Center”)**

***Donation to Support Hospital’s COVID-19 Response Effort***

UMC is excited to announce today that it has received a donation of \$14,500 from the Nora Roberts Foundation. This generous support will help the UMC team continue its lifesaving work during the coronavirus pandemic.

“We are humbled and sincerely appreciative that the Nora Roberts Foundation has chosen to support UMC, especially at this critical time,” stated NFPHC Board Chairman LaRuby May at UMC. “Healthcare resources in underserved communities like ours are stretched like never before, making the timing of this gift especially important.”

The \$14,500 contribution will be used to help UMC’s first responders obtain necessary personal protective equipment (PPE) and support other employee support services, allowing caregivers to focus on the medical needs and prevention education efforts.

The foundation, created in 2001 by successful businesswoman and best-selling author, Nora Roberts as an avenue of support for organizations promoting and encouraging literacy, children, the arts and humanitarian efforts. These areas, particularly important to her and her family, still serve as the focus of the foundation.

For more information about Nora Roberts, please visit the website: [www.noraroberts.com](http://www.noraroberts.com)

“The outpouring of support for UMC has been amazing,” added hospital CEO Colene Daniels. “Our first responders and hospital support staff have come together at a time when our community needs us most.”

For more information on the district’s response to COVID-19 visit <https://coronavirus.dc.gov/>.

For UMC specific inquiries contact: Toya Carmichael, VP of public relations / Corporate Secretary.



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## **General Board Meeting**

**Date: May 27, 2020**

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# **Executive Committee Report**

- No materials to distribute.
- Meeting scheduled for May 21, 2020 was postponed.



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## **General Board Meeting**

**Date: May 27, 2020**

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## **Audit/ MAC Committee Report**

- No meeting was held, next meeting scheduled for June 22, 2020.



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## **General Board Meeting**

**Date: May 27, 2020**

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# **Performance Improvement Committee Report**

- Last meeting was held on Tuesday, May 26, 2020.



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## **General Board Meeting**

**Date: May 27, 2020**

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# **Audit Committee Report**

- NFPHC 2018-2019 Audit Report (will be posted on UMC website. Emailed upon request)
- Last meeting was held on Monday, March 23, 2020.



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## **General Board Meeting**

**Date: May 27, 2020**

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# **Governance Committee Report**

- Last meeting was held on Friday, May 1, 2020.



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## **General Board Meeting**

**Date: May 27, 2020**

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# **Finance Committee Report**

- Meetings were held on Friday, May 1, 2020 and Tuesday, May 26, 2020.