

**CLERK'S SUMMARY OF MINUTES
FOR THE
OCTOBER 19, 2005
JOINT BOARD OF COUNTY COMMISSIONERS' AND PUBLIC HEALTH
TRUST MEETING**

The Miami-Dade County Board of County Commissioners (BCC) and the Public Health Trust (PHT) convened for a joint meeting at 10:00 a.m., on October 19, 2005, in the Commission Chambers, located at the Stephen P. Clark Center, 111 N.W. 1 Street, there being present BCC Chairman Joe A. Martinez, Commissioners Barbara Carey-Shuler, Dorrin Rolle, Rebeca Sosa and Javier Souto; Commissioners Bruno Barreiro, Carlos Gimenez, Sally Heyman and Barbara Jordan were late; Commissioners Jose "Pepe" Diaz, Natacha Seijas, Katy Sorenson, and BCC Vice Chairman Dennis C. Moss were absent; Public Health Trust (PHT) Chairman Larry Handfield; PHT Vice Chairman Carlos Planas, PHT Secretary Laurie Nuell, PHT Board of Trustees members: Ms. Michelle Austin, Dr. Kate Callahan, Mr. Walter Harvey, Mr. Angel Medina, Jr., and Dr. Kathie Sigler; PHT members: Mr. Ernesto de la Fe, Mr. John Copeland, Mr. David Kraslow, Mr. Ronald Silver and Ms. Rosy Cancela were excused; County Manager George Burgess, Deputy County Manager Pete Hernandez, Assistant County Attorney Eugene Shy; Public Health Trust President/CEO Marvin O'Quinn; and Deputy Clerks Diane Collins and Chiquita Polite (Prepared by Jovel Shaw).

OPENING REMARKS

BCC Chairman Martinez called the meeting to order at 10:28 a.m.

BCC Chairman Martinez informed those members present at today's proceeding that this meeting was a workshop session. He welcomed everyone to today's joint meeting. Chairman Martinez noted the BCC and PHT must ensure that the delivery of healthcare and improved healthcare to the citizens of Miami-Dade County. He noted his discussions with the PHT President/CEO O'Quinn to discuss the delivery of healthcare and the expansion of the healthcare system. He noted Miami-Dade County had a large number of uninsured citizens which included a majority of children. He noted the efforts by the Florida Legislature to have open enrollment year round for the Florida Kid Care Program.

Commissioner Sosa, Chairwoman of the BCC Community Outreach, Safety and Healthcare Administration Committee (COSHAC) welcomed everyone to today's meeting. She indicated that the COSHAC would be meeting on a regular basis with the PHT to make sure that the County had a world class healthcare system of the best quality for insured and the uninsured Miami-Dade County residents. Commissioner Sosa noted there were more and more indigent who need assistance. She noted it was very important that the BCC and the PHT work together on different objectives to provide sovereign immunity for JMH doctors to ensure that other counties carry responsibility when JMH receive their residents and treat their patients. She noted the nurses who work on a daily basis and the need to meet with PHT staff and the collective bargaining union

October 19, 2005

representatives to accomplish the common goals by identifying the problems with solutions.

PHT Chairman Handfield thanked BCC Chairman Martinez for inviting the PHT to join the BCC in coming together to share in the common goal to make sure that the PHT provide the best quality of healthcare to Miami-Dade County citizens. He noted as Chairman of the PHT he took pride in the efforts and the accomplishments made by the PHT in the last two years with PHT President/CEO O'Quinn. He noted tremendous improvements in the largest healthcare provider in this country. He noted the following two initiatives undertaken by the PHT as follows: (1) to improve accountability and (2) transparency at JHS institution. Mr. Handfield stated he realize effective governance was at the cornerstone of PHT which makes the PHT job more successful. Mr. Handfield stated each PHT member spends an average of 35 hours per month in making sure that JHS institution receives the best quality of care. He thanked Commissioners Rolle and Souto who attended the PHT meetings on a regular basis as voting members in overseeing the operational needs of the JHS. He also thanked Commissioner Sosa under her leadership for providing oversight and her support and guidance which she continues to give the PHT and the JHS. He recognized any transition in dealing with difficult issues the PHT has brought the issues to the forefront and when applicable took the necessary corrective action.

Mr. Handfield noted the importance that we all work together to continue to build upon world class medical institution by understanding our roles and represent not only the BCC as the elected body for Miami-Dade County but for the Miami-Dade County citizens. He pointed out last year the PHT/JHS provided over \$500 million in charity care for the uninsured and the underinsured in the County. He noted JMHI was the only level one trauma center for adults and children in Miami-Dade County. Furthermore, JMHI was the largest teaching hospital in the state of Florida in training the majority of tomorrow's doctors; and researching cures for various health matters. He pointed out also that JMHI was the only hospital in Miami-Dade County listed among the best hospitals in several specialties. He expressed thanks to our partners the University of Miami Physicians and the School of Medicine that provides the best quality of care regardless of a person's ability to pay. He thanked the BCC for this opportunity but more importantly he thanked the BCC for its support.

ADMINISTRATIVE PRESENTATIONS/COMMENTS

County Manager Burgess stated that most importantly as a collective group we are working together to try to address the financial challenges of the PHT is now facing in a way that it would be helpful to financial condition of the PHT; and for the County to make some adjustments to redirect funding to the County that was provided to the PHT. He noted in working with Mr. O'Quinn and his staff on the debt service obligations, the County was actually picking up expenses that would otherwise be a part of PHT operating budget. He noted the County has worked with the PHT in addressing their debts so that it has a strong credit rating. Mr. Burgess stated the County Administration was working with the PHT on the cash flow for their payments for employee health

October 19, 2005

Joint meeting between the Miami-Dade Board of County Commissioners and the Public Health Trust

Page 2 of 8

insurance managed from the County's Trust funds. He noted the County has provided significant assistance in turning around the negative cash flow into a positive year-end cash balance. He reiterated it was a collective effort between the two administrations. Mr. Burgess concluded by stating that there was an understanding of the issues and challenges for working together to address them. He noted County Executives has provided technical assistance to the PHT.

Mr. O'Quinn presented a Microsoft PowerPoint presentation which highlighted the future plans for the Jackson Health System, the impact JHS was currently experiencing, and some of the accomplishment and issues that the JHS has had in the past year.

Responding to BCC Chairman Martinez' inquiry regarding the increase in charity care, Mr. O'Quinn concurred with Chairman Martinez regarding the a combination of increases in the number of patients and in the cost for medical care. He explained the cost of providing services included salary expenses, supplies expense, pharmaceutical expenses which rise at 15% per year; therefore, all of these factors the cost for the actual delivery of services. He noted approximately 530,000 people in this County do not have health insurance and probably approximately 100,000 are underinsured.

Responding to Chairman Martinez' inquiry if more non- insured people determine the cost per ratio Mr. O'Quinn indicated he could provide the actual numbers and estimated on a national level it was a 45/55 split.

Mr. O'Quinn continued his presentation and noted the reform efforts that the governance of the PHT and the administration of the Trust have undertaken in the past year. He noted one of the issues discuss during his interview was the integrity and transparency of how the PHT operate in addressing issues rather than hiding those issues. He noted in the course of improving the relationship that existed between the senior management, the community, the County Administration and the County Commission which we have worked on very hard over the past two years. Mr. O'Quinn stated the PHT received public criticism on how the PHT makes its procurement decisions. Furthermore, he stated the PHT has never shied away from addressing those issues and addressing them in a public forum; and the PHT has put in place corrective action to deal with those issues. He noted the new procurement policies would be presented to the County Commission under the leadership of Mr. Theodore Lucas who has worked very hard with the PHT to unravel the number policies that the PHT had to make similar to the County's Procurement policies. In addition, we are launching a new project design to increase the number of local vendors which PHT contracted with for business. He pointed out the Chamber of Commerce would conduct a number of workshops to assist people in understanding how to do business with the PHT. In addition to that, the PHT has done some reorganization to deal with the issue of quality and if we are going to be a leader in academic medicine you must possess the highest quality. He stated we must be in the forefront in leading an academic medical center for driving change in setting new standards for quality of care. We have created an executive position who sole focus was improving the quality of operations within the institution. He noted the PHT as established a new board committee chaired by Dr. Kate Callahan who focused would be to discuss quality control at the

October 19, 2005

Joint meeting between the Miami-Dade Board of County Commissioners and the Public Health Trust

Page 3 of 8

highest level of the organization. Therefore, quality standards are set each year and monitored on a monthly basis. He pointed out a new quality initiative was launched this week throughout the institution and nationally in terms of improving the quality of care across the country. He noted on the issue of compliance, we have restructured the internal Audit Division as well as the Compliance Division and recruited a Vice President from outside the organization with extensive experience in this area. He indicated some of the responsibilities of the Vice President would be to conduct investigations, to develop a better quality compliance plan for the organization. He noted that position has a dual reporting relationship between the PHT Board Chairman and the PHT President/CEO; therefore, the Vice President operates independently and had the authority to investigate him anyone within the organization.

OPEN DISCUSSION

Commissioner Sosa expressed that the Board needs to recognize the experience of Mr. O'Quinn and commended him on the progress since his acceptance of PHT President/CEO position. She noted everyone was working together to make a difference and to deal with the PHT/JHS deficit. She noted the County Commission members has engaged in procurement reform and approved of changes to the County's procurement process. She invited PHT members to review the proposed changes to the County's procurement. She indicated Mr. Lucas initiated some of the changes along with Ms. Miriam Singer, Director, Department of Procurement Management. She asked Mr. O'Quinn and the PHT members to review those changes and strongly recommended that the PHT adopt those changes that were made at the County level because in the future the PHT would be able to demonstrate to the community the integrity and the transparency that the community was asking for. Commissioner Sosa indicated that she would provide the PHT Chairman and its members along with the Administration a copy the proposed changes to the County's procurement.

Chairman Martinez welcomed Commissioner Sosa to address any issues/concerns presented by Mr. O'Quinn. Chairman Martinez noted BCC Vice Chairman Moss chaired the Governmental Structure Task Force that deals with procurement. He noted the Task Force has held 6 meetings. He asked that Mr. O'Quinn or his designee attend the next scheduled Task Force meeting.

BCC Chairman Martinez expressed a concern with lack of interpersonal skills by JHS staff and the potential loss of clients to the institution. He questioned if the reason for the lack of interpersonal skills was due to most clients are uninsured.

Responding to BCC Chairman Martinez' comments, Mr. O'Quinn stated it was a combination of issues causing the lack of interpersonal skills by staff and he was faced with this issue at a number of hospitals where he has worked in the past. He noted it takes a long time to overcome and change those cultural issues. Mr. O'Quinn stated selecting and hiring the right people was also important, and currently institutions are conducting a thorough job in selecting staff members for their institute. He pointed out that he tracked the patient's satisfaction scores since he became the PHT/JHS President/CEO. Mr.

October 19, 2005

O'Quinn noted the scores were low in the beginning, scores went up for period of time, and now the scores were low again. He noted currently a number of discussions are occurring to identify what effects staff morale.

Mr. O'Quinn noted that an organized program to improve the patient experience in an institution. He pointed out that staff must feel that they have support and the proper tools in order to perform their job. He stressed the need for training programs such as a customer service training program to impart among staff the importance of the experience that clients were having at the institution. Furthermore, staff who does not meet the behavior standards set by the organization would receive disciplinary action. Therefore, the message was that the organization was serious about its standards being demonstrated from the top to the bottom of the organization.

Commissioner Carey-Shuler stated the behavior and standard of care at JMH has improved overall. She expressed her concern with hearing that standards are going down again. She personally noted there have been folks who gone to JMH and shared their experience with her regarding the abruptness and rudeness exhibited by staff. Commissioner Carey-Shuler noted the Sylvester Cancer Center had a culture of caring and asked Mr. O'Quinn to review their standards of care to implement those standards at JMH. She stressed that the standards of performance and treatment by staff needs to be addressed by the organization in order for it to be a cultural change at JMH.

Responding to Commissioner Carey-Shuler's comments, Mr. O'Quinn agreed with Commissioner Carey-Shuler and noted the information was tracked and a campaign would be implemented to address this issue.

PHT member Carlos Planas expressed his appreciation to Mr. O'Quinn in his efforts to change the cultural of the administration. He also noted tremendous improvement at the Miami Children hospital.

Commissioner Sosa noted it was very important to have feedback. She suggested changes be made at the hospital to serve patients whether they have insurance or not. She expressed to the Administration the need to establish benchmarks.

Mr. Handfield expressed that today's dialogue was very crucial, but unfortunately it's probably culturally driven. He urged the Board to support the JHS/PHT when the necessary changes were implemented to enforce the change in the cultural at JHS. Following comments by Commissioner Heyman, Mr. O'Quinn noted the passage of legislation pertaining to Medicaid Reform last year. He stated the Florida Legislature had to obtain a waiver from the Federal Government to actually implement the plan. Mr. O'Quinn noted as the State largest Medicaid provider any changes in the plan may result in the less dollars to JHS/JMH which would have a tremendous impact on the institute.

Mr. O'Quinn informed the Board that the Miami-Dade Legislative Delegation has advised the PHT to not be apart of a pilot project which has been implemented in

Broward County and Duval County. He noted the pilot program would have a tremendous negative impact on the institution.

Commissioner Sosa asked the Administration to review the fiscal impact to JMH due to residents coming from other counties which was approximately \$7 to \$9 million per year, and the number Miami-Dade County residents going to other public hospitals were very limited and usually go to private hospitals. She asked Mr. O'Quinn to make sure this issue was included in the PHT priorities and noted her intent to make it a priority for the Community Outreach, Safety and Healthcare Administration Committee together with protection for the JMH doctors.

Mr. O'Quinn informed the Board that due to the large number of charity care the funding was not sufficient to sustain the organization going forward.

Commissioner Gimenez asked that future presentations outline realistic projections including the funding support provided by the Federal government, the profit made from paying clients, and the gap between the charity care and the County's contribution.

Mr. O'Quinn stated there would be a loss of approximately \$20 million this year.

Mr. O'Quinn informed the Board that in the year 2010 without the changes which are trying to be implemented the estimated loss could amount to \$141 million.

PHT member Dr. Michelle Austin, appeared before the Board, to discuss on whether employee performance and customer satisfaction would be linked to employee pay. She noted currently JHS/JMH was the leader in terms of employee salaries and compensation, but not a leader in customer service. Dr. Austin stated that the County should be realistic if financial issues exist at JHS/JMH which need to be addressed may negatively impact good customer service. She noted last year the PHT determine it could not terminate employees at will and the Administration had to revisit this issue.

Mr. O'Quinn informed the Board that the PHT was focusing on reducing at least \$100 million out of JHS/JMH expense base to assist in the future efforts for overall expense reduction.

Mr. O'Quinn stated after what happen with Hurricane Katrina, the PHT was in the process of re-examining the JHS/JMH hurricane readiness plan in how we would respond if Miami experience a catastrophe. He noted this plan was being re-written in conjunction with the Emergency Operation Center and the University of Miami.

Commissioner Gimenez noted a Sunshine Meeting had occurred to discuss the Avian Influenza Pandemic and wanted to make sure that the JHS/JMH was prepared to handle a possible outbreak of a very serious health issue.

Responding to Commissioner Gimenez' comments, Mr. O'Quinn noted that a number of meetings have been held with Commissioner Sosa on the Avian Influenza Pandemic

October 19, 2005

Joint meeting between the Miami-Dade Board of County Commissioners and the Public Health Trust

Page 6 of 8

issue. He stated that JHS/JMH had plans in place if there was a bio-terrorism attack JHS/JMH but those plans do not adequately deal with this type of issue. Mr. O'Quinn indicated this type of situation was more invasive and plans are being made to prepare for this type of situation. He noted the coordination with the Emergency Operation Center (EOC) and other hospital administrators as well as the Miami-Dade County Health Department to review the current plan and rewrite it, if necessary to reflect what would be done if this outbreak occurred in Miami-Dade County.

Commissioner Souto recommended that the JHS/JMH administration as soon as possible organize with the PHT members for a retreat or program by which staff was trained and familiarized with the Home Rule Amendment and Charter as it pertains to public health. He concluded his comments by urging that all PHT members had the Commission on Ethnicity and Public Trust Ethnicity training and the Charter; therefore, everyone knows where we are and the consequences for non-compliance.

Commissioner Rolle asked that when Mr. O'Quinn provides the information requested by Commissioner Gimenez could it include the factors which attributes to PHT deficient. He asked if it was unfunded mandates, charity care, and lack of Medicaid or other factors.

Responding to Commissioner Rolle's comments, Mr. O'Quinn noted it was two areas the first was charity care because currently the PHT incurring a 30% write-off across-the-board. He noted it was higher at JMHS but lesser at Jackson South. He noted the second was the cost structure for salaries and benefits are very high.

Commissioner Rolle noted he has had discussions with Mr. Handfield and Mr. Theodore Lucas and asked them to look very closely at the Miami-Dade County procurement policies to review the feasibility of PHT mirroring the County's procurement process. He concluded by stating that he was awaiting a follow-up from Mr. Lucas.

Commissioner Rolle noted discussions should occur at the PHT Board of Trustees meeting regarding the issues/concerns with the employees. He pointed that the quality of care should not be based on whether or not the County or the PHT negotiate fairly with the collective bargaining unions. Commissioner Rolle stated he did not support that message if it was being perceived that way.

Commissioner Barreiro stated as the County looked forward in the future throughout the entire Jackson Health system that we keep in mind the JMHS Health Plan. He asked the PHT to continue to work on the JMHS Health Plan due to the Florida Legislature intent to have all patients go through health plans.

Following further discussion regarding the unfunded mandates, Chairman Martinez asked Mr. Handfield to present and inform the County Commission Community Outreach, Safety and Healthcare Administration Committee of the County's funding contributions to the PHT. He reminded Mr. O'Quinn of his request for a breakdown of the number of charity care patients who were County residents versus non-residents.

October 19, 2005

Joint meeting between the Miami-Dade Board of County Commissioners and the Public Health Trust

Page 7 of 8

Chairman Martinez concluded the today's joint meeting by thanking everyone who was present and reminded everyone that the County Commission was mandated to conduct this meeting.

ADJOURNMENT

There being no further business to come before the Board, the meeting adjourned at 12:19 p.m.

RECEIVED BY CLERK

EXHIBIT

OCT 19 2005

LOG OF PROCEEDINGS ELECTRONICALLY RECORDED

Description	BOARD OF COUNTY COMMISSIONERS AND PUBLIC HEALTH TRUST		
Date	10/19/2005	Location	COMMISSION CHAMBERS SPCC
Time	Speaker	Note	
10:28:18 AM	CLERK OF THE BOARD	ROLL CALL	
10:28:29 AM		WELCOMED EVERYONE TO THE JOINT MEETING	
10:30:08 AM	SOSA	IT'S A PLEASURE TO BE HERE TODAY	
10:30:34 AM	HEYMAN	JUST ARRIVED	
10:30:46 AM	SOSA	THE MISSION AND THE OBJECTIVE IS THE WORLD CLASS SERVICES FOR THOSE THAT HAVE INSURANCE AND THOSE THAT DO NOT	
10:32:07 AM		WE HAVE THE BEST DOCTORS AND NURSES IN THE WORLD WE NEED TO WORK TOGETHER WITH STAFF AND THE UNION. NEED TO BRING SOLUTIONS	
10:32:36 AM	HANFIELD	THANKED CHAIR FOR INVITING THE PHT TRUST BOARD MEMBERS	
10:34:00 AM		TO IMPROVE ACCOUNTABILITY AND TRANSPARENCY	
10:34:58 AM		PHT TAKES THE RESPONSIBILITY VERY SERIOUSLY SPEND	
10:35:19 AM		SPEND	
10:35:25 AM		HOURS A MONTH TO HELP IMPROVE THIS PROJECT	
10:35:46 AM	JORDAN	JUST ARRIVED	
10:37:00 AM	HANFIELD	LARGEST TRAINING HOSPITAL IN THE STATE AND THE ONLY HOSPITAL IN MIAMI DADE COUNTY LISTED UNDER SPECIALITIES UNDER THE UM FOR THOSE THAT HAVE THE ABILITY TO PAY AND THOSE THAT DO NOT HAVE THE ABILITY TO PAY	
10:38:19 AM	BURGESS	THE MOST IMPORTANT THING FOR THIS GROUP TO HEAR IS THAT WE ARE ALL WORKING TOGETHER TO HELP THE FINANCIAL STRUGGLE	
10:40:32 AM		GOOD LINES OF COMMUNICATION WITH THE TRUST AND THE COUNTY WHICH IS THE MOST IMPORTANT THING GREAT RELATIONSHIP	
10:41:07 AM		ANY TECHINCAL ASSISTANT NEEDED HAVE PROVIDED IT	
10:41:25 AM	O'QUINN	THANK YOU MR. CHAIR HAVE A BRIEF PRESENTATION SHOWING ACCOMPLISHMENTS WITHIN THE PAST YEAR	
10:42:44 AM		SPECIALITIES THAT ARE RANKED AS THE THE BEST	
10:42:57 AM		TRUST JUST RECIEVED AN AWARD	
10:43:18 AM		MISSION WE ARE PROUD OF A SINGLE STANDARD OF CARE	
10:44:15 AM	MARTINEZ	HAS A QUESTION THE INCREASE IN CHARITY CARE	

10:44:35 AM	OQUINN	THE COST OF PROVIDING SERVICES SALARY EXPENSE, UTILIZATION, ETC
10:45:13 AM		500,000 DOES NOT HAVE HEALTH INSURANCE
10:45:35 AM	MARTINEZ	DO YOU HAVE THE NUMBERS OF PATIENTS YOU ARE SEEING NOW
10:45:51 AM	O'QUINN	WE DO HAVE THE NUMBERS
10:46:14 AM	**MARTINEZ	ARE WE SEEING MORE PEOPLE THAT ARE NOT INSURED SO THAT WE CAN FIGURE OUT THE RATIO COMPARED TO YEARS BEFORE
10:46:41 AM	O'QUINN	CAN GET YOU THOSE NUMBERS
10:47:08 AM	PRESENTATION	REFORM EFFORTS
10:50:55 AM	SOSA	WE NEED TO RECOGNIZE ALL OF THE ITEMS IN THE DIFFERENT FIELDS I COMMEND YOU FOR THAT IN THE PROCUREMENT AREA THE BCC HAS ENGAGED IN THE PROCUREMENT REFORM I WOULD LIKE TO PROVIDE YOU WITH A PACKAGE AND SOME OF THEM WERE INITIATED WITHIN THE COUNTY AND ASK THE BOARD TO LOOK AT THE RECOMMENDED CHANGES
10:52:58 AM		WILL PROVIDE THE CHAIRMAN WITH THE PACKAGE
10:53:23 AM	MARTINEZ	SOMETHING THAT YOU WOULD LIKE TO SPEAK ON NOW OR AT THE END
10:53:42 AM		THE VICE CHAIRMAN MOSS HAS THE TASK FORCE YOU MAY WOULD WANT TO CHECK WITH THE NEXT INTERGOVT MTG FOR YOU OR YOUR STAFF TO ATTEND THE MEETING
10:54:30 AM		QUESTION ON QUALITY INITIATIVE ARE TALKING ABOUT IMPROVING THE LEVEL OF SERVICES
10:54:48 AM	O'QUINN	TALKING ABOUT THRU OUT THE INSTITUTION PROCESS FOR PROCEDURES AND RIGHT DOWN TO THE SERVICES
10:56:00 AM	MARTINEZ	A LOT OF RUDE PEOPLE WORKING THERE BUT THE MEDICAL CARE MIGHT BE EXCELLENT
10:56:25 AM		WHAT IS IT?
10:56:40 AM	O'QUINN	IT'S A COMBINATION OF ISSUES IT TAKES A LONG TIME TO CHANGE THE CULTURAL ISSUES PART OF IT IS THAT SYSTEMS ARE NOT WORKING PROPERLY
10:57:40 AM		TRACK PATIENT SATISFACTION SCORES THEY WERE LOW THEN WENT UP AND THEN WENT BACK DOWN
10:58:08 AM		HAVE TO HAVE AN ORGANIZE PROGRAM
10:58:16 AM	MARTINEZ	DO YOU DO EVALUATION THERE
10:58:23 AM	O'QUINN	YES BUT WE HAVE TO DEVELOP SO OTHER MEANS
10:59:05 AM		CUST SVC TRAINING PROGRAM AND HAD TO PUNISH PEOPLE FOR NOT MAINTAINING THE STANDARDS REQUIRED
12:21:00 AM	MARTINEZ	ONE THING THAT WE DO IN THE COUNTY WHEN WE DO EVALUATIONS AND THERE IS A MERIT INCREASE ATTACHED TO IT

11:01:11 AM	O'QUINN	WE HAVE THAT SAME MERIT STRUCTURE
11:01:31 AM		LEADERSHIP HAS TO COM
11:01:38 AM	CAREY-SHULER	JUST ON THAT NOTE I MUST SAY THAT IT HAS IMPROVED AND I AM SORRY TO HEAR THAT IT HAS GONE DOWN AGAIN
11:02:44 AM		HOW WONDERFUL ONE IS TREATED AT SLYSTER CARE MAYBE YOU SHOULD PARTNER WITH THEM TO FIND OUT WHAT THEY ARE DOING THERE
11:03:22 AM	OQUINN	I AGREE WITH YOUR COMMENTS AND WE ARE ADDRESSING THOSE ISSUES
11:03:56 AM	CARLOS PLANAS	PARKING MUST GIVE QUDOS BECAUSE WHAT HE HAS DONE IT'S BEEN HARD CHANGES WE NEED TO CHANGE TO BE MORE FAVORABLE AND I THINK THEY HAVE MADE SIGIFINCANT CHANGES ESPECIALLY IN THE CHILDREN'S HOSPITALS
11:05:39 AM	SOSA	THERE'S NO WAY THAT A PERSON CAN BE IN EVERY PLACE EVERY WHERE
11:06:08 AM		IT'S IMPORTANT OF FEEDBACK SHARED AN EXPERIENCE HAD AT JACKSON
11:07:17 AM		DESERVE THE SAME TREATMENT I THINK THAT ADMINISTRATION HAS TO ESTABLISH BENCHMARKS
11:07:49 AM	HANFIELD	I THINK THIS IS A VERY PERSONABLE DIALOUGE BUT I THINK THAT IT IS CULTURALLY DRIVEN
11:08:43 AM		SUPPORT AS COMMISSIONERS BECAUSE WHEN WE MAKE THE NECESSARY CHANGES WE NEED YOUR SUPPORT BECAUSE IT IS GONG TO BE HARD
11:09:21 AM		HAS TO BE SOME ENFORCEMENTS
11:09:43 AM	HEYMAN	HAVE TWO ISSUES ADOPTED A DIRECTIVE ON LEGISLATIVE ISSUES
11:12:20 AM	O'QUINN	THAT IS CONCLUSIVE THE WAIVER HAS BEEN OUT FOR REVIEW AND AS THE STATE LARGEST MEDICAID PROVIDER
11:14:47 AM	HEYMAN	TO THAT VERY ISSUE BUT CONCERNED WAS RAISED
11:16:13 AM	MARTINEZ	IF YOU DON'T MIND
11:16:19 AM	SOSA	THAT WAS APPROVED BY THE COMMISSION THE COMMITTEE CAN NOT OVERRIDE THE DECISION OF THE BCC
11:17:21 AM		I AM GOING TO MAKE THIS A PRIORITY PLS REVIEW AND MY STAFF WILL SEND YOU THE PAPERWORK
11:17:53 AM	HEYMAN	LAST ISSUE QUALITY CARE MY CONCERN IS PRESENTLY ON THE TABLE PEOPLE WHO ARE WORKING FOR YOU SALARY BUDGETS AND INCREASES
11:19:44 AM	CAREY-SHULER	QUALITY OF CARE IF YOU DO NOT INCREASE THE SALARY U WILL NOT GET THE QUALITY OF CARE

11:21:25 AM	O'QUINN	WILL GO THRU FINANCIAL LINES WE ARE IN THE MIDDLE OF NEGOGIATIONS
11:21:54 AM	GIMINEZ	IS CONCERNED WITH THE WAY THINGS ARE GOING THERE AND I AM GETTING INFORMATION FROM THE UNIONS AND THE ATTITUDES THERE IS THAT IT IS NOT THE BEST PLACE TO WORK WOULD LIKE TO SEE THE ADMINISTRATION AND EMPLOYEES WORKING TOGETHER
11:23:20 AM	O'QUINN	CONT WITH PRESENTATION
11:27:20 AM	GIMINEZ	WHEN YOU SAY THAT THIS IS YOUR BUSINESS LINE
11:27:36 AM		HOW MUCH REVENUE DO YOU GET OUT OF FEDERAL SOURCES
11:27:50 AM	O'QUINN	100 MILLION DOLLARS FROM THE FEDERAL
11:29:12 AM	GIMINEZ	WOULD LIKE TO SEE REALISTIC STUFF
11:29:35 AM		WOULD LIKE TO SEE THE TRUE GAP WOULD LIKE TO SEE THE TRUE BOTTOM LINE
11:30:39 AM	BARRIERO	DC CONTRIBUTION
11:30:49 AM	O'QUINN	HALF PENNY AND IT'S A LOCAL MATCH
11:34:11 AM	BARRIERO	IMPORTANT TO SEE THE ENTIRE BOTTOM LINE
11:34:27 AM	O'QUINN	WILL BE A LOSS OF 140 MILLION IN 2010
11:34:44 AM	JORDAN	JUST WANTED TO ASK IN THE MTG THAT YOU HAD YOU GAVE OUT THE BUDGET ON 9/9/05 I JUST WANTED TO POINT OUT THAT THE PACKAGE WAS PROVIDED
11:35:43 AM	MICHELLE AUSTIN	EMPLOYEE SATISFACTION WOULD BE LINKED TO CUSTOMER SATISFACTION FUTURE WOULD NOT IMPROVE SATISFACTION
11:36:50 AM		HAVE TO REVISIT THE ISSUE AND THERE IS A PRICE TO PAY
11:37:23 AM	O'QUINN	ON THE LAST SLIDE OF THE PRESENTATION
11:37:58 AM		FOCUSED ON RIGHT NOW REVENUE GROWTH AND IMPROVE EFFICIENCY
11:41:17 AM		CRITICAL ROLE IN THE HURRICANE PREPAREDNESS
11:42:17 AM		RE-WRITING PLANS TO IMPLEMENT HURRICANE CATSPHROPHE STANDARDS
11:43:21 AM	MARTINEZ	SHOULD NOT BE GETTING INVOLVED WITH THE PHT NEGOGATIONS
11:44:04 AM	CAREY-SHULER	TOTALLY AGREE WE SHOULD NOT BE INVOLVED IN PHT
11:45:24 AM		SOMETHING HAS TO GIVE
11:46:06 AM		HOW DO THE QUALITY OF CARE
11:47:00 AM	O'QUINN	WE ARE IN NEGOGATIONS AND OUR ATTITUDE HAS NOT BEEN AGGRESSIVE WE JUST HAVE PLACED ON THE TABLE VERY HARD TERMS
11:47:44 AM		THIS IS NOT A WAR CAN NOT IMPOSE OUR WILL ON ANYONE
11:48:56 AM	GIMINEZ	ONE MORE COMMENT THE ENVIRONMENT IS NOT THE BEST IT CAN BE IN THE WORKING RELATIONSHIP WITH MANAGEMENT AND EMPLOYEES

11:49:57 AM	O'QUINN	I AGREE WITH YOUR PHILOSOPHY
11:50:14 AM	GIMINEZ	SUNSHINE MTG CONCERNING OUTBREAK WITH THE FLU IS JACKSON IS PREPARED
11:50:47 AM	O'QUINN	WE'VE HAD A NUMBER OF MTG BUT IT DOES NOT HAVE A PLAN FOR THIS BUT WE ARE IN THE PLANNING STAGES WE HAVE DIFFICULT MEDICAL QUESTIONS
11:54:12 AM	SOUTO	THE CHARTER OF THE COUNTY
11:56:58 AM		RETREAT OR PROGRAM TO BE TRAINED ON THE CHARTER
12:04:48 PM	ROLLE	MOVE JACKSON TO FISHER ISLAND I WELCOMED THIS MEETING I WOULD LIKE TO SEE THE TRUE BOTTOM LINE AND WHAT IS THE BIGGEST FACTOR THAT CONTRIBUTES TO THAT DEFICIT
12:05:46 PM	O'QUINN	IT'S IN TWO AREAS COST STRUCTURE IS VERY HIGH SALARIES
12:07:30 PM	ROLLE	WHATEVER THE BOTTOM LINE IS WE NEED TO KNOW SO THAT WE CAN SELL IT TO THE PUBLIC WE WOULD LIKE TO HELP YOU SELL WHAT THE PROBLEM IS
12:08:09 PM	***	PROCRUMENT LOOK VERY CLOSELY AT THE PROCRUMENT SO THAT PHT COULD MIRROR CLOSELY ASKED MR. LUCAS TO GET BACK WITH ME
12:09:37 PM		THE PROBLEM WITH THE EMPLOYEES
12:11:20 PM		HANDLED THE NEGIOATIONS WITH THE PHT AT THE PHT NOT HERE WITH THE COMMISSION
12:11:55 PM	BARRIERO	LOOK FORTH IN THE FUTURE PLS KEEP IN MIND JMH HEALTH
12:12:44 PM	O'QUINN	WE ARE BEEFY UP THE PLAN
12:13:05 PM	HANSFIELD	ONE OF THE THINGS THAT I WANT TO MAKE SURE WAS CLARIFIED UNFUNDED MANDATES TO OFTEN WE DO NOT GIVE THE NET RESULTS AND I WOULD NOT US TO LEAVE HERE UNDER THE IMPRESSION THE WE RECEIVE THOSE FUNDS 160 MILLION
12:14:36 PM	O'QUINN	THE PROGRAM THAT THE TRUST HAS PICKED UP OF THE LAST FEW YEARS
12:14:58 PM		WE ARE WORKING TOGETHER TO MAKE A TRANSFER
12:15:13 PM	HANSFIELD	WHAT IMPACT WOULD THAT HAVE TO TRUST GOING FORWARD
12:15:23 PM	O'QUINN	IT WOULD LESSEN OUR BOTTOM LINE AND THE IMPACT ITS NOT ENOUGH TO SOLVE ALL OF THE PROBLEMS
12:15:56 PM	HANFILED	THANKED THE BOARD FOR THE OPPORTUNITY
12:17:03 PM	MARTINEZ	ONE THING PLS BRING UP THE AMT THAT THE COUNTY GAVE YOU DEDUCT THE MONEY THAT YOU GET PLS
12:17:48 PM		THE NUMBE OF PATIENTS THRU THE NUMBER OF YRS HOW MANY OF THOSE ARE MIAMI DADE COUNTY RESIDENTS VS. OUTSIDE OF THE COUNTY

12:19:06 PM

MTG ADJOURNED



Jackson
HEALTH SYSTEM



UNIVERSITY OF
Miami

**Miami-Dade Board of County Commissioners
and the Public Health Trust**

**JOINT MEETING AGENDA
Wednesday, October 19, 2005
10:00 A.M.**

RECEIVED BY CLERK

EXHIBIT

OCT 19 2005

Opening Remarks

The Honorable Joe A. Martinez
Chairman, Board of County Commissioners

The Honorable Rebeca Sosa
Chairperson
Community Outreach, Safety and Healthcare Administration Committee
Board of County Commissioners

Mr. Larry Handfield, Esq.
Chairperson
Public Health Trust

Administrative Presentations/Comments

Mr. Marvin O'Quinn
President/CEO, Public Health Trust

Mr. George Burgess
County Manager
Miami-Dade County

Open Discussion

Adjournment



Jackson
HEALTH SYSTEM



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and the Public Health Trust**

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County Manager
Miami-Dade County

Open Discussion

Adjournment





**OFFICE OF THE CHAIR
JOE A. MARTINEZ, CHAIRMAN
BOARD OF COUNTY COMMISSIONERS
DISTRICT 11**

Memorandum

To: Honorable Vice-Chairman Dennis C. Moss and
Members of the Board of County Commissioners

Larry Handfield, Chairperson and
Members of the Board of Trustees, Public Health Trust

From: Joe A. Martinez, Chairman 

Date: October 11, 2005

Re: Board of County Commissioners and Public Health Trust Joint Meeting

Section 25-A of the Code of Miami-Dade County requires that the Trust shall formally present its annual recommendations for health care delivery in its designated facilities at an annual, joint meeting to be called by the Chairman of the Board of County Commissioners and to be held between the Commission and the Trust.

As such, the Board of County Commissioners and the Public Health Trust will be holding a joint meeting on Wednesday, October 19, 2005 from 10:00 a.m.-12:00 p.m., in the Commission Chambers. This joint meeting will allow for open discussion as it pertains to important countywide healthcare matters and other related issues.

A preliminary agenda is attached for your review.

If you have any questions please do not hesitate to contact Lynn Westall, County Manager's Office at (305) 375- 1630 or Thomas Marko, County Manager's Office at (305) 375-1253.

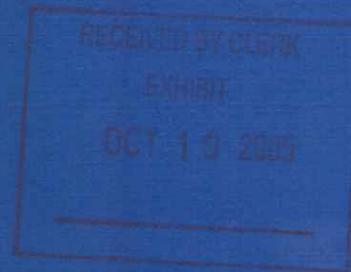
JM/sk

Cc: George Burgess, County Manager
Murray A. Greenberg, County Attorney
Pete Hernandez, Deputy County Manager
Eugene Shy, Assistant County Attorney



Joint Board of County Commission

Public Health Trust Meeting
October 19th, 2005



Jackson
HEALTH SYSTEM



VISION

- World Class Medical Excellence

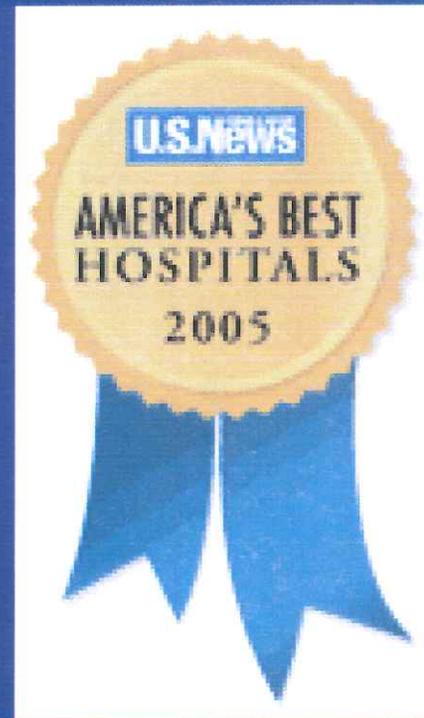


Jackson
HEALTH SYSTEM



Eight Specialties Listed Among Best in the Nation

- Digestive Disorders
- ENT
- Geriatrics
- Hormonal Disorders
- Kidney Disease
- Neurosurgery
- Ophthalmology
- Urology

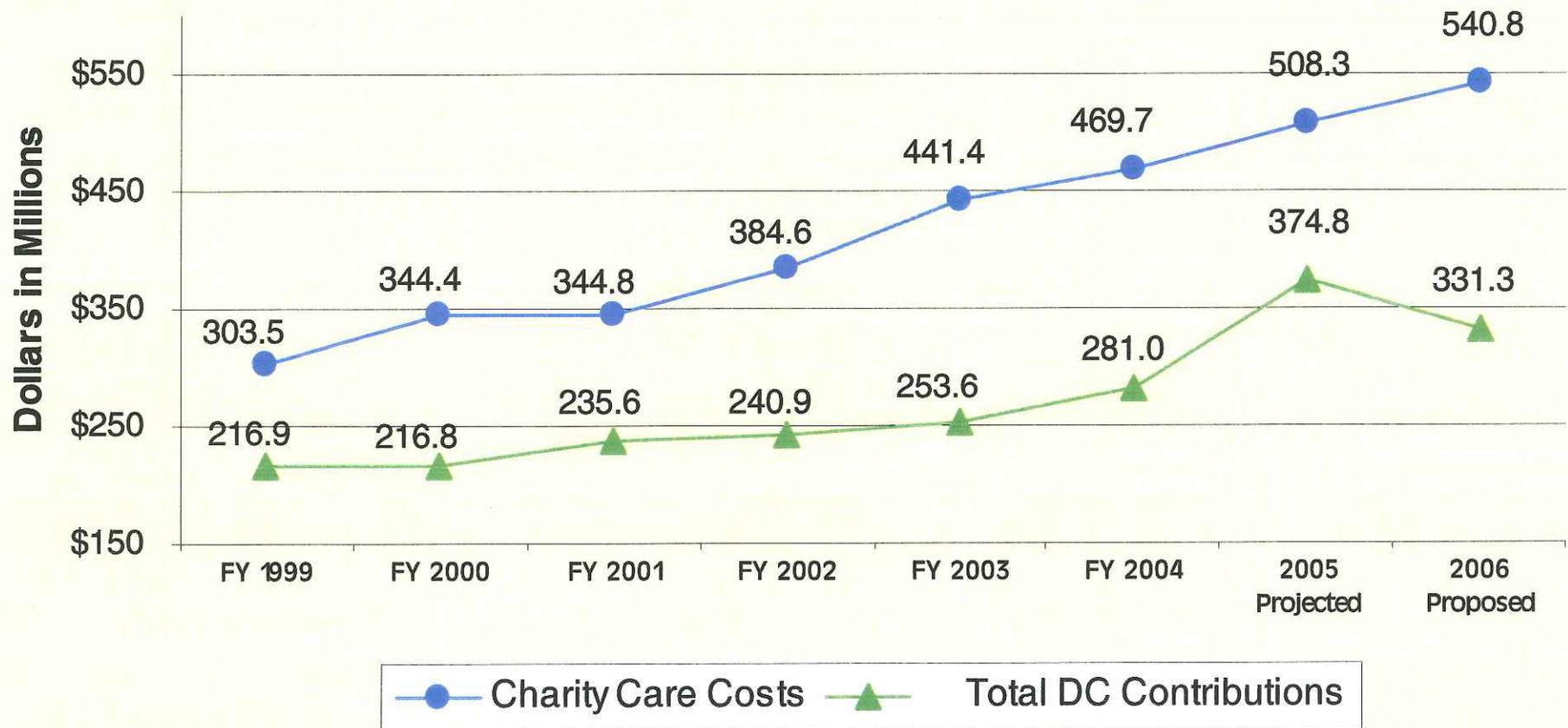


MISSION

- One Single Standard of Care



Charity Care vs. Tax Dollars



Public Health Trust
Charity Care - DC Funding
FY 1999 – FY 2006 Proposed

Jackson
HEALTH SYSTEM



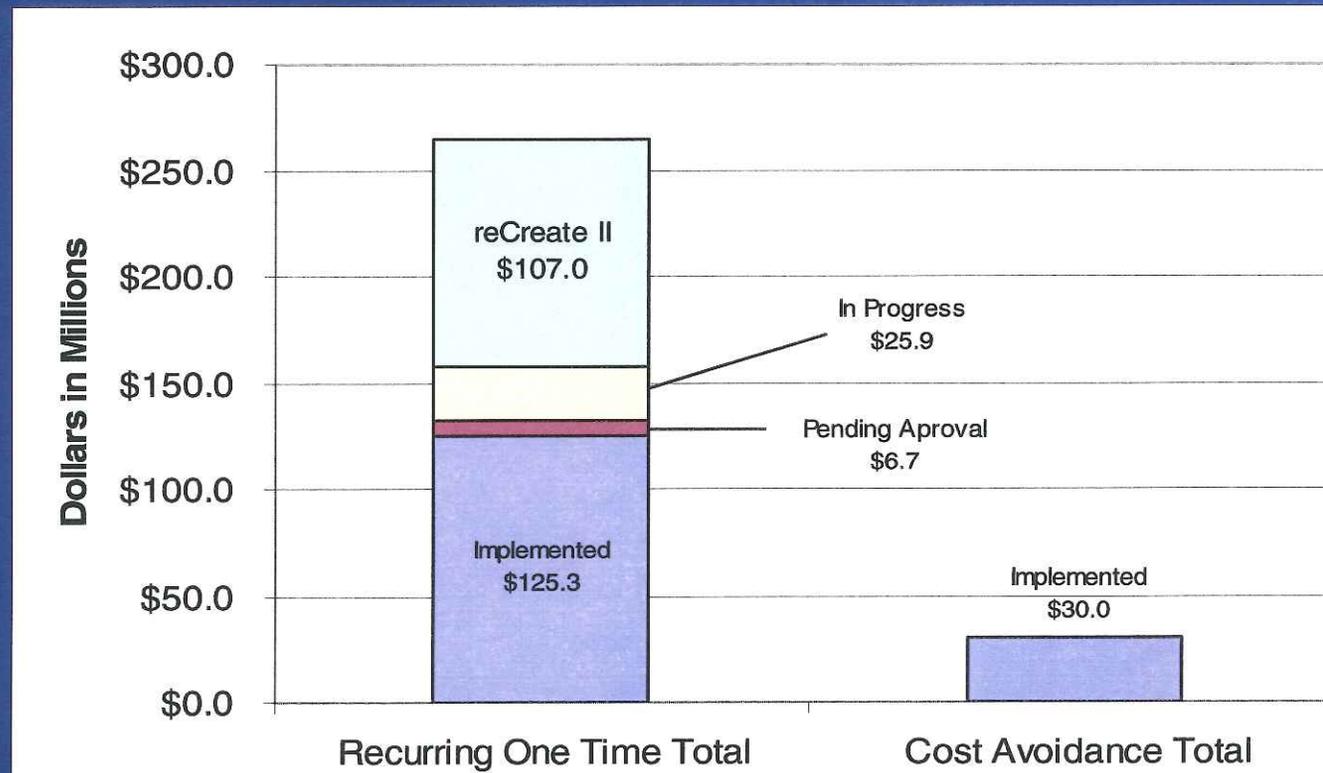
REFORM EFFORTS

- New Procurement Policy
- Increase Local Preference
- Quality Initiative
- Compliance

Streamlining Costs Project ReCreate

Implemented vs. In Progress—Through July 2005

\$155.3 M of benefit has been implemented to date (Recurring, One-time and Cost Avoidance Annualized Benefit)

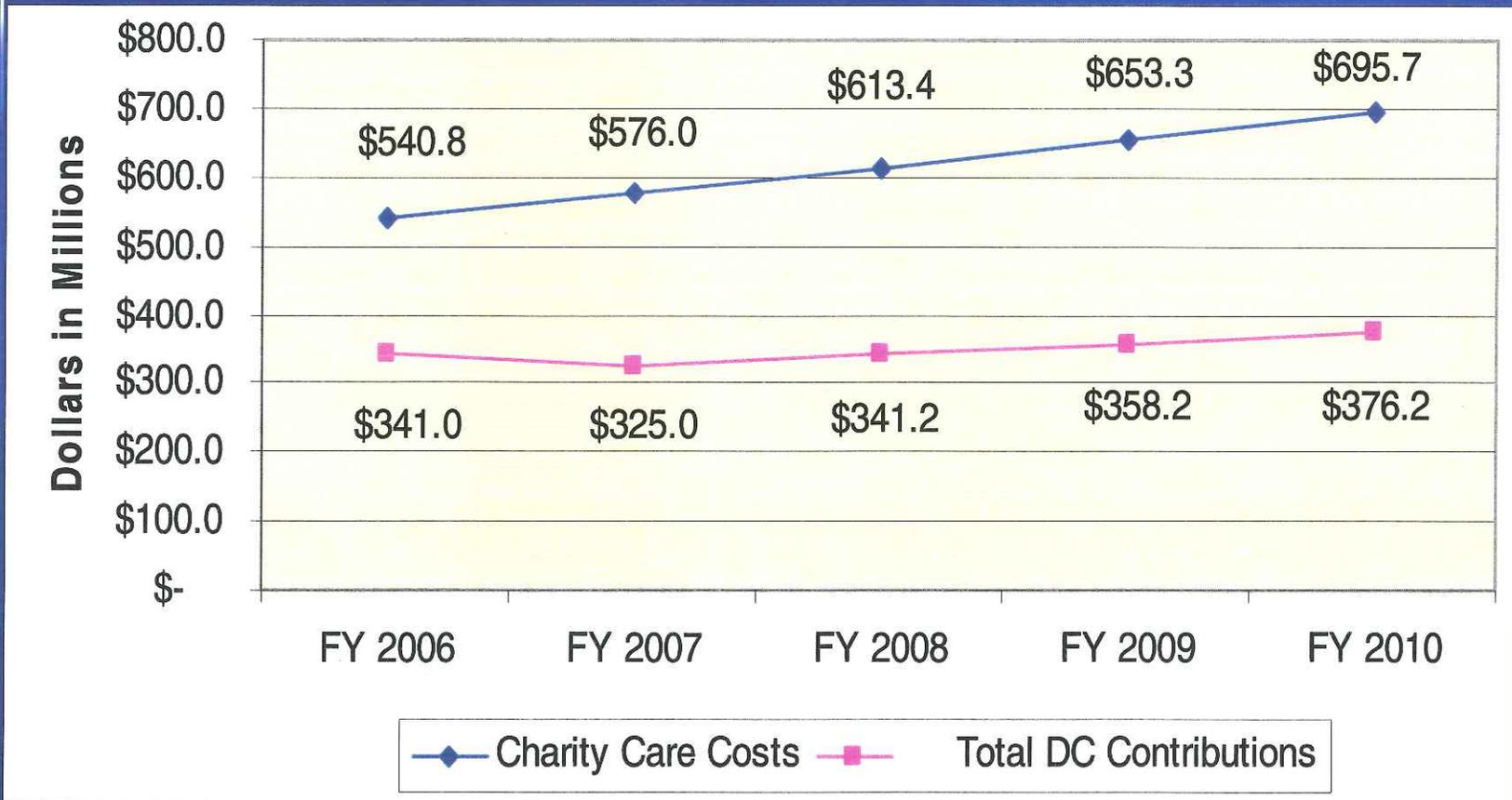


Note: From June 2004 through July 2005

Jackson
HEALTH SYSTEM



Charity Care Costs in excess of Dade County Contributions Projected FC 06-10



The Future

- Revenue Growth
 - Jackson South Community Hospital Expansion
 - Selective Promotion of Key Services
 - International Health Program Growth
 - Improving Access into Jackson
- Improve Efficiency
 - Clinical and Administrative Information Systems
- Implementation of GOB Projects
- Continued Overall Expense Reduction



Jackson Health System Jackson Memorial Hospital Medical Specialties Education/Outreach Site Search Camp

- ▶ [Homepage](#)
- ▶ [Back](#)
- ▶ [Larry R. Handfield](#)
- ▶ [Carlos Planas](#)
- ▶ [Laurie Nuell](#)
- ▶ [Michelle Austin](#)
- ▶ [Kate Callahan](#)
- ▶ [Rosy Cancela](#)
- ▶ [John H. Copeland III](#)
- ▶ [Ernesto A. de la Fe](#)
- ▶ [Walter James Harvey](#)
- ▶ [David Kraslow](#)
- ▶ [Angel Medina, Jr.](#)
- ▶ [Kathie Sigler](#)
- ▶ [Senator Ron Silver](#)
- ▶ [Board Members](#)
- ▶ [PHT By-laws](#)
- ▶ [Ad Hoc Auditor Adjustment Report Committee \(as needed\)](#)
- ▶ [Ad Hoc Special Compensation Committee \(as needed\)](#)
- ▶ [PHT Board Calendar](#)
- ▶ [Compensation & Evaluation Committee](#)
- ▶ [Executive Committee](#)
- ▶ [Exofficio Members, Board of Trustees](#)
- ▶ [Facilities Development Committee](#)

Board Members



The current Board of Trustees of the Public Health Trust consists of the following members:

Chairperson Larry Handfield, Esq. e-mail	Vice Chairperson Carlos Planas e-mail	Secretary Laurie Nuell e-mail	Ernesto A. de la Fe

Trustees:



- ▶ [Fiscal Affairs, Purchasing and Budget Committee](#)
- ▶ [How Members are Appointed](#)
- ▶ [Information System Committee](#)
- ▶ [Meeting Agendas](#)
- ▶ [Meeting Minutes](#)
- ▶ [PHT Committee Overview](#)
- ▶ [PHT Corporate Map](#)
- ▶ [PHT Staff](#)
- ▶ [Purpose of the Public Health Trust](#)
- ▶ [Primary Care & Managed Care Committee](#)
- ▶ [Quality Improvement and Joint Conference Committee](#)
- ▶ [Strategic Planning and Program Planning Committee](#)
- ▶ [Trust/County AOA \(annually\)](#)
- ▶ [Trust/UM Annual Operating Agreement](#)
- ▶ [CBO Applications](#)



[Michelle Austin, Esq.](#)

[e-mail](#)



[Kate Callahan, Ph.D.](#)

[e-mail](#)



[Rosy Cancela](#)

[e-mail](#)



[Walter James Harvey, Esq.](#)

[e-mail](#)



[David Kraslow](#)

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[Angel Medina, Jr.](#)

[e-mail](#)

[Senator Ron Silver](#)

[e-mail](#)

Ex-Officio Members

- Carlos Alvarez, Mayor, Miami-Dade County
- [George Burgess](#), Manager, Miami-Dade County
- [John G. Clarkson, M.D.](#), Sr. Vice President, Medical Aff University of Miami Miller School of Medicine
- [D. Jane Mass, R.N.](#), Sr. Vice President, Chief Nursing (

- Marvin O'Quinn, President & CEO
- Robert Schwartz, M.D., Professor, Family Medicine & C
Executive Committee of the Medical Staff
- Nilda Peragallo, Dr. Ph., R.N., FAAN, University of Mia
Nursing & Health Studies

[2004-2005 Committees](#)

**Patient Advocacy Partnership:
Healthcare Professionals'
Vision for Quality Care
Jackson Memorial Hospital**

RECEIVED BY CLERK

EXHIBIT

OCT 19 2005



October 19th, 2005

**Presented to
Miami-Dade Board of County Commissioners
& the Public Health Trust**

Hon. Joe Martinez, Chairman, and Members
Miami-Dade Board of County Commissioners
Stephen P. Clark Center
111 NW 1st Streets
Miami, FL 33128

Hon. Larry Handfield, Chairman, and Members
Public Health Trust, Board of Trustees
Jackson Memorial Hospital
1611 NW 12th Avenue
Miami, FL 33136

Dear Chairs Martinez and Handfield,

Almost exactly 14 years ago, the people of Miami-Dade County expressed themselves unequivocally at the polls in favor of protecting and improving their precious public resource: a public health system, Jackson Memorial Hospital. Prior to that, the people of the county had witnessed a dangerous erosion in the quality of the health care available to our community because of the lack of resources devoted to JMH. In 1991, the thousands of nurses in the newly organized RN local of SEIU played a major role in mobilizing the community and formed a pact with the people of this county to offer the highest quality health care for all the people in the county, whatever their economic status.

Today Local 1991 of SEIU is proud to represent the more than 4000 RNs, Physicians, and Health Care Professionals who work for Jackson Health Systems are key providers of medical care there. Our members and the other unionized health care workers of JMH have achieved the excellence in healthcare delivery, winning recognition throughout the country. This recognition was not the achievement of one year or two, but was built over many years, with the leadership and consistent support of the Miami-Dade Board of County Commissioners and the oversight of the Public Health Trust.

The experiences of the last crisis are fresh in our collective memory and we are determined to prevent any deterioration in the quality of care which has won JMH its just recognition. Improving the quality of care can in fact help the hospital overcome its current challenge by serving as a magnet for private patients and public and foundation investments in innovative care. For these reasons we are launching the Patient Advocacy Partnership and extend to the Board of County Commissioners, the Public Health Trust, and the people of Miami-Dade County our commitment to independently monitor the quality of care provided to patients in our hospital and clinics, to inform the community of areas in which improvement is necessary and to advocate for solutions to problems and the achievement of excellence in health care delivery.

This first prospectus outlines the initial plans of the Patient Advocacy Partnership. We look forward to working with you and commend you on your support of Jackson Health Systems and your ongoing efforts to address the health care needs of our county.

Yours in Unity for Quality of Care,



Martha Baker, RN
President, SEIU Local 1991



Laura Van Sant, MSW
Vice President, SEIU Local 1991

Patient Advocacy Partnership: Introduction

Origin:

Following thwarted efforts to provide input regarding faltering systems at JMH and with the intention of improving and securing the level of patient care, SEIU Local 1991 has designed the Patient Advocacy Partnership. This community wide project, utilizing diverse research methods and considering previously submitted proposals, will create an open dialogue and implementation system for integrating quality care issues into all levels of the JMH health system.

Objective:

In order to provide an excellent standard of care to patients, shorten length of stay, and prevent adverse outcomes to patients, the Patient Advocacy Partnership will work to provide a more efficient, functional, and integrated infrastructure.

Patient Advocacy Partnership: Project Structure

Phase One - Supportive Data for Quality Issues

Through collecting the anecdotal evidence from the hospital frontlines, we begin the project from the point of contact with patients. Workers have already begun to provide first hand reports of the hospital system's weaknesses and strengths. The most accurate accounts of the hospital's successes and failings come directly from Nurses, Doctors and other Healthcare Professionals. These employees see patients as their priority and go above and beyond the call of duty to ensure that quality care is administered. This information will be supplemented with statistical and financial data that we have requested from JMH management.

Phase Two - Partnership Model Research

Throughout the United States the face of healthcare administration is changing. This fact is borne out by research of national trends and leading models of collective decision making within hospital administration. Examining effective cooperative management programs can assist us in the successful implementation of this process. Information gathering from around the country can also provide a diversity of material from which to draw specific items and customize potential structures of power sharing to JMH's particular organizational culture.

Phase Three - Design and Implement Partnership Working Groups

Teams comprised of employee leaders and interested community organizations and individuals can evaluate specific issue areas. These groups can work to make concrete suggestions within the areas of sustainability, patient satisfaction and safety, community accountability and cost effectiveness.

Patient Advocacy Partnership: Priority Items

Within their work environment, Nurses and Healthcare Professionals shall have the following available to them to effectuate quality patient care:

1. Patient admission, including paperwork, key plate, and placement in computer will occur within 1 hour of the decision to admit the patient, so that the patient will appear on the unit census for the appropriate shift to maintain accurate census and staffing.
2. Trained transporter will be available within 30 minutes of request.
3. Clean patient rooms within 1 hour of patient discharge.
4. Terminal room cleaning, within 1 hour, when the patient with multi-drug resistant infection is transferred.
5. Stat lab results within 1 hour.
6. Prescribed drugs placed on profile within 1 hour of prescription being written.
7. Supplies and equipment to care for the patient, e.g. functioning patient lights, fetal monitors, fax machines, fax cartridges, toner, paper supplies, wall units for meds, meals for new admissions, clean linen, lift assistance for patients, functioning thermometers, blood pressure machines, cardiac monitors, beds, chairs, stretchers, wheelchairs, air conditioning, clean air conditioning ducts, and timely filling of omni cell for each shift.
8. Adequate support staff so that RNs are available to perform RN duties.
9. Placement of patients on inpatient units appropriate to their diagnosis and care needs, e.g. telemetry unit, if monitoring is needed.
10. Patient assignments to nurses will be adjusted downward when the nurse is acting as preceptor or orientee. For new graduates, that ratio will be adjusted further.
11. Interpreter available within 30 minutes of request (Spanish, Creole).
12. All same day surgery patients scheduled for a given day receiving that surgery/procedure performed on that date.
13. Access to appropriate treatment areas and monitoring facilities for emergent patients within 1 hour of patient's presentation to the ECC.
14. Appropriate placement of security cameras to insure patient confidentiality. (E.g. labor and delivery).

Patient Advocacy Partnership: Priority Items

Within their work environment, Attending Physicians shall have the following available to them to effectuate quality patient care:

1. An independent compliance officer shall be provided to act as their liaison with the administration to help resolve issues involving lab, radiology, interpreter services, bed placement, transportation, clinic follow-up, expeditious care, and other barriers to providing excellent patient care. As the physicians are a varied group from many different inpatient and outpatient areas, with varied time schedules, this will be a centralized person whose duty will be to resolve barriers to providing good care as noted by the physicians and maintain objective records of incidents and examples. The officer will meet with the administration as often as necessary to resolve problems and also report to the county commission. This will also allow physicians not to take time away from patient care duties. The physicians will be able to funnel in what they perceive as problems to this compliance officer via email and meet en masse quarterly to see what progress is made.
2. The hospital needs to be fully functional 24/7, holidays included, with appropriate staffing for all patient care areas. The 3 and 4 day holidays back up the ER and the inpatient system, increase adverse outcomes, increase costs, and prolong length of stay.
3. All inpatients and ECC patients should leave the hospital with their follow-up appointments in hand to the appropriate outpatient specialty or subspecialty clinics (within 2 weeks of discharge for appropriate patients requiring close follow-up, at the discretion of the attending physician). Corrections will have consultation services, within two weeks if necessary, available for their incarcerated patients.
4. Corrections' physicians shall have available: functioning EKG machine with appropriate paper, aerosol nebulizer machine, medical housing and basic First Aid supplies.
5. All areas require 12 lead EKG tracing within 10 minutes of ordering a stat EKG.
6. Ability not to meet benchmarks in the clinics if appropriate patient care is at issue within the professional judgment of the physician.
7. ECC physicians shall have available:
 - a) Access to appropriate treatment areas and monitoring facilities for emergent patients within 1 hour of patient's presentation to the ECC.
 - b) Ability to transfer the responsibility of the patient's care in the ECC to an admitting team within 1 hour of the decision to admit the patient.
 - c) Ability to send the patient to the OR within 1 hour of scheduling an emergent operation.
 - d) Functional portable otoscope/ophthalmoscope on wheels for the ECC.
 - e) An I-link ultrasound to check central line placement or for codes.



MEMORANDUM
BOARD OF COUNTY COMMISSIONERS

TO: The Honorable Joe Martinez, Chair
Honorable Members, Board of County Commissioners

DATE: October 17, 2005

FROM: Katy Sorenson
Commissioner, District 8

A handwritten signature in black ink, appearing to read "Katy Sorenson", is written over the printed name and extends to the right towards the subject line.

SUBJECT: Absence

Please be advised that I will not be attending the Board of County Commissioners and Public Health Trust Joint Meeting on Wednesday, October 19, 2005. I will be in Tallahassee conducting county business.

Thank you.



C: Kay Sullivan, Clerk of the Board of County Commissioners
Murray Greenberg, County Attorney

"AUDIOVOX"

Jonathan
255 young 195

~~XXXXXXXXXX~~
Gainesville, Florida

2:30 pm
Terri

2:30 pm (4:45)

~~XXXXXXXXXX~~
Tuesday }
Thursday }

Chiquita
plates

~~December~~

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11/23

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Universal