OKLAHOMA STATE UNIVERSITY MEDICAL TRUST
REGULAR MEETING OF TRUSTEES

OSU Medical Center
744 W. 9th Street
Administrative Board Room – 2nd Floor

Thursday, June 1, 2017, at 3:30 P.M.

AGENDA

I. Call to order and establishment of a quorum – Chairman Hudson

II. Discussion, consideration and possible vote to approve the minutes of the April 13, 2017, meeting and any amendments made thereto by Trustees - Chairman Hudson (ATTACHMENT 1)

III. Report by President of OSU-CHS – Kayse Shrum, DO

IV. Report by Oklahoma State University Medical Center Chief of Staff – Michael Thomas, M.D.

V. Committee Reports
   a. Finance Committee – Trustee Haste (ATTACHMENT 2)
      i. Financial Reports
         1. March and April Year-To-Date Financials
         2. Discussion, consideration and possible vote to approve the FY2017-2018 Operating and Capital Budgets, subject to compliance with any competitive bidding and/or other legal requirements
         3. Discussion, consideration and possible vote to approve an allocation of funds in an amount not to exceed $650,000 for the capital purchases of laboratory equipment (the “Lab Project”) to allow the Hospital to perform laboratory services in-house that were previously performed through an outsourced service; and authorize Management to move forward with completion of the Lab Project, subject to compliance with any competitive bidding and/or other legal requirements
         4. Discussion, consideration and possible vote to approve the purchase of an electro convulsive therapy machine in an amount not to exceed $30,000 for the purpose of providing outpatient surgical procedures, subject to compliance with any competitive bidding and/or other legal requirements
         5. Discussion, consideration and possible vote to authorize OSU Medical Center Management to pursue an alternate blood provider and further authorize Management to move forward with an agreement, as a replacement contract with
its current blood provider, if there is a per unit savings of 0.1% or greater.

b. Joint Conference Committee – Trustee Shrum (ATTACHMENT 3)
i. Discussion, consideration and possible vote to approve, individually and collectively, the Organized Medical Staff Appointments and Credentials, Initial and Renewal, Staff Status Updates, Additional Privilege Requests and Resignations, as recommended by the Medical Executive Committee from its Meetings of April 19, 2017 and May 17, 2017, and further recommended by the Joint Conference Committee from its meeting of May 23, 2017

ii. Discussion, consideration and possible vote to approve the following policies: Disaster Plan; Policy 301-PI-100 Performance Improvement Plan; Policy 302-EC-310/303-EC-310 Patient Elopement – Code E; and Policy 301-RI-199 Patient’s Bill of Rights, as recommended by the Medical Executive Committee from its Meetings of April 19, 2017 and May 17, 2017, and further recommended by the Joint Conference Committee from its meeting of May 23, 2017

iii. Discussion, consideration and possible vote to approve the revisions to the Organized Medical Staff Bylaws for the following job descriptions to reflect that a nurse practitioner does not need a physician co-sign within 48 hours, and are authorized to write orders for blood products: APRN-Advanced Practice Nurse, APRN-Cardiovascular Nurse Specialist, APRN-Geriatric Clinical Nurse Specialist, APRN-Nephrology, APRN-CNP Radiology, APRN-Neonatology and Physician Assistant, as recommended by the Medical Executive Committee from its Meeting of May 17, 2017, and further recommended by the Joint Conference Committee from its meeting of May 23, 2017

iv. Discussion, consideration and possible vote to approve the revision to the Psychiatry Core Privilege Form that replaces ACGME as the accreditation for Allopathic Medical Schools to show the Liaison Committee on Medical Education, as recommended by the Medical Executive Committee from its Meeting of May 17, 2017, and further recommended by the Joint Conference Committee from its meeting of May 23, 2017

v. Discussion, consideration and possible vote to approve the New Performance Improvement Measures, Changed Measures and Retired Measures for the following Departments: Annual Performance Improvement Report for FY2016, Inpatient Wound Team, Wound Clinic, Environmental Services, and Cardiac Rehab (New Measures and Retired Measures), as recommended by the Medical Executive Committee from its Meetings of April 19, 2017 and May 17, 2017, and further recommended by the Joint Conference Committee from its meeting of May 23, 2017
VI. Report by Oklahoma State University Medical Center Administrator – Matt Adams  
   a. Board Education – Grievance Process  
   b. Administrator Update  

VII. New Business (Limited to Matters Not Known About and Which Could Not Have Been Reasonably Foreseen Prior to Posting of the Agenda) – Chairman Hudson  

VIII. Announcements (if any) – Chairman Hudson  

IX. Executive Session – Chairman Hudson  
   a. Discussion, consideration and possible vote to authorize and convene an Executive Session, as authorized by Title 25, Oklahoma Statutes, Section 307(B)(4), for the purpose of reporting confidential communications of the Hospital’s Risk Management Reports (Year End 2016 and March-April, 2017) and EMTALA Reports (March-April, 2017) to the Trust and Trust Counsel  
   b. Motion to Reconvene the Regular Trust Meeting  

X. Motion and Vote to Recess or Adjourn – Chairman Hudson