



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

850 GOV. CARLOS CAMACHO ROAD
OKA, TAMUNING, GUAM 96913
TEL: (671) 647-2444 or 647-2330
FAX: (671) 649-0145

BOARD OF TRUSTEES Official Resolution No. 2017-01

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Erika Alford, MD	Medicine	Endocrinology	September 30, 2018
Joleen Aguon, MD	Medicine	Pulmonary/CC	September 30, 2018
Martin Arrisueno, MD	Emergency Med.	Emergency Med.	September 30, 2018
Virgilio Petero, MD	Surgery	Urology	September 30, 2018
Dina Domalanta, MD	Pediatrics	Pediatrics	September 30, 2018

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on September 28, 2016 and the Joint Conference and Professional Affairs Committee on October 6, 2016, recommended approval of Active Medical Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 20th DAY OF OCTOBER 2016.

Certified by:

Attested by:

Eloy S. Lizama
Chairman, Board of Trustees

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-02

“RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Mohamad Alsabban, MD	Surgery	Pathology	September 30, 2017
Khaled Hamada, MD	Radiology	Radiology	September 30, 2017
Sarah Mina, DPM	Surgery	Podiatry	September 30, 2017
Dustin Prins, DPM	Surgery	Podiatry	September 30, 2017
Kozue Shimabukuro, MD	Pediatrics	Peds. Critical Care	September 30, 2017
Umair Yousufi, MD	Pediatrics	Peds. Cardiology	September 30, 2017

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.3; and

WHEREAS, the Medical Executive Committee on September 28, 2016 and the Joint Conference and Professional Affairs Committee on October 6, 2016, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all reappointments to Provisional Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Active Medical Staff as recommended; and, be it further


RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

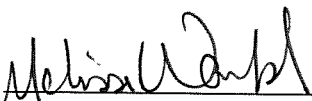
DULY AND REGULARLY ADOPTED ON THIS 20th DAY OF OCTOBER 2016.

Certified by:

Attested by:



Eloy S. Lizama
Chairman, Board of Trustees



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-03

“RELATIVE TO THE CREATION OF THE ADMINISTRATOR OF QUALITY, PATIENT SAFETY AND REGULATORY COMPLIANCE POSITION FOR THE COMPLIANCE OFFICE”

WHEREAS, the current Compliance Office and the Quality Management Department both work together to provide support to medical and hospital staff for the improvement of clinical care, patient safety and compliance and regulatory requirements; and

WHEREAS, the two areas coordinate activities to assure compliance with The Joint Commission, Centers for Medicare and Medicaid Services and other regulatory programs in order to make a difference in patient care and healthcare quality; and

WHEREAS, the current Compliance Office is staffed with incumbents holding positions that may not be properly classified; and

WHEREAS, for better operational efficiency and coordination of positions, the Compliance Office and Quality Improvement section will merge to become the Quality, Patient Safety, and Regulatory Compliance Department;

WHEREAS, the provisions of §6303.1, Chapter 6, Title 4 of the Guam Code Annotated have been met and no comments from the public were received; now, therefore be it

RESOLVED, that the Board of Trustees accepts the recommendation of the HR, BOT Subcommittee and approve the creation of the Administrator of Quality, Patient Safety and Regulatory Compliance position; and, be it further

RESOLVED, that the Hospital Administrator/CEO is directed to initiate the administrative processes to bring to fruition the utilization of this position; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 20th DAY OF OCTOBER 2016.

Certified by:

Attested by:

Eloy S. Lizama
Chairman, Board of Trustees

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-04

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
John Fegurur, MD	Surgery	Plastic Surgery	October 31, 2018
Byungsoo Kim, MD	Medicine	Cardiology	October 31, 2018
Alex Giambartolomei, MD	Medicine	Cardiology	October 31, 2018
Edna Santos, MD	Pediatrics	Pediatrics	October 31, 2018
Gladys Linsangan, MD	Pediatrics	Pediatrics	October 31, 2108
Ma. Cristina Manaloto, MD	Pediatrics	Pediatrics	October 31, 2018
Hieu Campus, MD	Family Practice	Family Practice	October 31, 2018

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on October 26, 2016 and the Joint Conference and Professional Affairs Committee on November 3, 2016, recommended approval of Active Medical Staff Membership reappointment for the above listed practitioner; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it

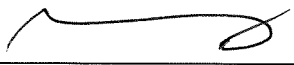
RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

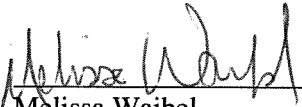
DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:



Eloy S. Lizama
Chairman, Board of Trustees

Attested by:



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-05

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Sherif Philips, MD	Medicine	Nephrology	November 30, 2018
Sunggeun Im, MD	Surgery	General Surgery	November 30, 2018
Gisella Sandy, MD	Surgery	General Surgery	November 30, 2018
Teresa Borja, DPM	Surgery	Podiatry	November 30, 2018
Saied Safabakhsh, MD	Medicine	Nephrology	November 30, 2018
Friedrich Bieling, MD	Ob/Gyn	Ob/Gyn	November 30, 2018
Jonathan Sidell, MD	Ob/Gyn	Ob/Gyn	November 30, 2018
Faye Jensen, MD	Ob/Gyn	Ob/Gyn	November 30, 2018
Michael Um, MD	Pediatrics	Pediatrics	November 30, 2018
Amanda del Rosario, MD	Pediatrics	Pediatrics	November 30, 2018

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on November 30, 2016 and the Joint Conference and Professional Affairs Committee on December 1, 2016, recommended approval of Active Medical Staff Membership reappointment for the above listed practitioner; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees

Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

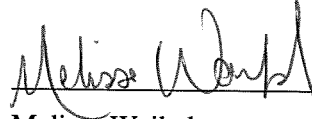
Certified by:



Eloy S. Lizama

Chairman, Board of Trustees

Attested by:



Melissa Waibel

Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-06

“RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Samir Ambrale, MD	Medicine	Hema/Oncology	October 31, 2017
Han-Ting Lin, MD	Medicine	Hema/Oncology	October 31, 2017
Daniel Medina, MD	Surgery	General Surgery	October 31, 2017
Daniel Hartmann, MD	Emergency Med.	Emergency Med.	October 31, 2017

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.3; and

WHEREAS, the Medical Executive Committee on October 26, 2016 and the Joint Conference and Professional Affairs Committee on November 3, 2016, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all reappointments to Provisional Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Attested by:

Eloy S. Lizama
Chairman, Board of Trustees

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-07

“RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Vanessa Miller, MD	Ob/Gyn	Ob/Gyn	November 30, 2017
Melany Hughes, MD	Surgery	General Surgery	November 30, 2017
Peter Pommerville, MD	Surgery	Urology	November 30, 2017
Stephen Roesler, MD	Surgery	Orthopedics	November 30, 2017
Alexander Wielaard, MD	Emergency Med.	Emergency Med.	November 30, 2017
Mary Anne Legaspi, MD	Emergency Med.	Family Medicine	November 30, 2017
Sarah Haley-Wien, DO	Emergency Med.	Emergency Med.	November 30, 2017
Kevin Arnold, DO	Emergency Med.	Urgent Care	November 30, 2017

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.3; and

WHEREAS, the Medical Executive Committee on November 30, 2016 and the Joint Conference and Professional Affairs Committee on December 1, 2016, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all reappointments to Provisional Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

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Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-08

“RELATIVE TO THE REAPPOINTMENT OF ALLIED HEALTH PROFESSIONAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Teresa Anderson, CNM	Ob/Gyn	Cert. Nurse Midwife	October 31, 2018

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.1; and

WHEREAS, the Medical Executive Committee on October 26, 2016 and the Joint Conference and Professional Affairs Committee on November 3, 2016, recommended approval of Allied Health Professional Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all appointments to Allied Health Professional Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Allied Health Professional Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioner listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Attested by:

Eloy S. Lizama
Chairman, Board of Trustees

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-09

“RELATIVE TO THE REAPPOINTMENT OF ALLIED HEALTH PROFESSIONAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Janet Nightingale, CNM	Ob/Gyn	Cert. Nurse Midwife	November 30, 2018
Matthew Marsh, PA-C	Ob/Gyn	Physician Assistant	November 30, 2018
Khampho Ohno, PA-C	Ob/Gyn	Physician Assistant	November 30, 2018

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.1; and

WHEREAS, the Medical Executive Committee on November 30, 2016 and the Joint Conference and Professional Affairs Committee on December 1, 2016, recommended approval of Allied Health Professional Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all appointments to Allied Health Professional Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Allied Health Professional Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioner listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Attested by:

Eloy S. Lizama
Chairman, Board of Trustees

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-10

“RELATIVE TO AMENDING THE MINIMUM QUALIFICATION REQUIREMENTS OF THE HOSPITAL PHARMACY TECHNICIAN I & II POSITIONS”

WHEREAS, on July 25, 2016, the Hospital Administrator/CEO approved the amendment of the Class Specifications of the Hospital Pharmacy Technician I and the Hospital Pharmacy Technician II positions;

WHEREAS, the amendment of the minimum qualification requirements are necessary to fill positions in meeting the objectives of the Pharmacy Department and the provisions of the Consolidated Cooperative Agreement between the Department of Correction and the Hospital for medical services inclusive of pharmaceutical care;

WHEREAS, recruitment efforts reveal an insufficient number of qualified applicants meeting the current minimum qualification requirements for both positions;

WHEREAS, the provisions of §6303.1, Chapter 6, Title 4 of the Guam Code Annotated have been met and no comments from the public were received; and

WHEREAS, the class specifications are hospital specific, thus there is no impact on any other agency outside the Authority; and

WHEREAS, the Human Resources Subcommittee on October 11, 2016 recommended approval of amending the class specifications for the Hospital Pharmacy Technician I and the Hospital Pharmacy Technician II positions; now, therefore be it

RESOLVED, that the GMHA Board of Trustees accepts the Human Resources Subcommittee’s recommendations and approves the amendments to the class specifications (the amendments have no effect on the compensation of the positions); and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Eloy S. Lizama
Chairman, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees

Hospital Pharmacy Technician I

NATURE OF WORK IN THIS CLASS:

This is routine sub-professional hospital pharmacy work. Employees in this class perform technical work independently on an ongoing basis and perform the full range of sub-professional duties under closer supervision.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Prepare medications and supplies for dispensing, including pre-packing bulk medications; compounding ointments, creams, oral solutions and other medications; compounding large volume intravenous mixtures; and compounding total parenteral nutrition solutions.

Wash and sterilize pharmacy apparatus and cleans shelves, counters and other work areas to maintain cleanliness and neatness.

Process charges for medications dispensed from pharmacy.

Issue floor stock requisitions for various wards.

Fill physician order or prescription under supervision of the pharmacist.

Fill patient medication cassettes and assist pharmacist in checking the cassette.

Transport medications to nursing units and exchange medication cassette and picking up orders, requisitions, collect unused medications back to pharmacy.

Prepare inventories, order, receive and stock medications and supplies.

Maintain records and prepare reports.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of pharmacy practices and techniques.

Knowledge of sterile preparation of IV medication under USP 797 and infection control guidelines.

Knowledge of arithmetic computation in order to calculate medication quantities.

Basic computer knowledge.

Ability to operate and maintain pharmaceutical apparatus, instruments, and equipment.

Ability to understand and follow oral and written instructions.

Ability to communicate effectively, orally and in writing.

Ability to maintain records and prepare reports.

MINIMUM EXPERIENCE AND TRAINING:

Graduation from high school and one year of hospital or retail/clinical pharmacy experience.

NECESSARY SPECIAL QUALIFICATIONS:

Possession of current registration as a pharmacy technician from the Guam Board of Pharmacy Examiners.


Possession of a U. S. Pharmacy Technician Certificate from a National Board; Pharmacy Technician Certification Board (PTCB) or the National Health Association (NHA).

Established: January 2014

Amended: November 2016

Pay grade: H

Hay Evaluation:	Know How	CI1	115
	Problem Solving	C2 (22%)	25
	Accountability	B1C	<u>29</u>
			169



Eloy S. Lizama
Chairman, Board of Trustees

12/06/16
Date

Hospital Pharmacy Technician II

NATURE OF WORK IN THIS CLASS:

This is complex sub-professional hospital pharmacy work. Employees in this class perform complex technical work independently on an ongoing basis and perform the full range of sub-professional duties under closer supervision.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all duties which may be performed).

Prepare medications and supplies for dispensing, including: pre-packing bulk medications; compounding ointments, creams, oral solutions and other medications; compounding large volume intravenous mixtures; and compounding total parenteral nutrition solutions.

Wash and sterilize pharmacy apparatus and cleans shelves, counter and other work areas to maintain cleanliness neatness.

Issue floor stock requisitions for various wards.

Fill physician order or prescription under supervision of the pharmacist.

Fill patient medication cassettes and assist pharmacy check the cassette.

Prepare inventories, order, receive, and stock medications and supplies.

Assist pharmacist on inventory and stock of narcotics.

Maintains records and prepares reports.

Prepare and mix Chemo Therapy Medication.

Provide drug information to nursing, medical staff and other professionals.

Perform monthly nursing unit inspections and collect quality assurance data.

Transport medications to nursing units and exchange medication cassettes and picking up orders, requisitions and collect unused medications back to the pharmacy.

Ensure the proper storage, security and integrity of all medications.

Assess operations status of pharmacy equipment, such as the laminar flow hood.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of pharmacy practices and techniques.

Knowledge of sterile preparation of IV medications under USP 797 guidelines and infection control guidelines.

Knowledge of the preparation of medications and supplies for dispensing, including: pre-packing bulk medications; compounding ointments, creams, oral solutions and other medications; Compounding large volume intravenous mixtures; Compounding total parental nutrition solutions.

Knowledge of arithmetic computations in order to calculate medication quantities.

Knowledge to perform calculations to obtain correct dosage.

Knowledge of drug interaction, including food-drug, drug-drug interactions.

Basic computer knowledge.

Ability to effectively supervise/provide guidance to lower level pharmacy support staff.

Ability to operate and maintain pharmaceutical apparatus, instruments, and equipment.

Ability to understand and follow oral and written instructions.

Ability to communicate effectively orally and in writing.

Ability to maintain records and prepare reports.

MINIUM EXPERIENCE AND TRAINING:

Graduation from High School and three (3) years of U. S. hospital pharmacy experience.

NECESSARY SPECIAL QUALIFICATIONS:

Possession of current registration as a pharmacy technician from the Guam Board of Pharmacy Examiners.

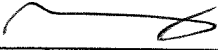
Possession of U.S. Pharmacy Technician Certificate from a National Board; Pharmacy Technician Certification Board (PTCB) or National Health Association (NHA).

Established: January 2014

Amended: November 2016

Paygrade: I

Hay Evaluation:	Know How	CI1	132
	• Problem Solving	C2 (22%)	29
	Accountability	C1C	<u>33</u>
	Total		194


Eloy S. Lizama
Chairman, Board of Trustees

12/06/16
Date



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BOARD OF TRUSTEES Official Resolution No. 2017-11

“RELATIVE TO THE CREATION OF THE PERFORMANCE IMPROVEMENT COORDINATOR AND PATIENT SAFETY OFFICER POSITIONS”

WHEREAS, the current Compliance Office and the Quality Management Department work together to provide support to medical and hospital staff for the improvement of clinical care, patient safety and compliance and regulatory requirements; and

WHEREAS, the two areas coordinate activities to assure compliance with The Joint Commission, Centers for Medicare and Medicaid services and other regulatory programs in order to make a difference in patient care and health care quality; and

WHEREAS, the current Compliance Office is staffed with incumbents holding positions that may not be properly classified; and

WHEREAS, for better operational efficiency and coordination of positions, the Compliance Office and Quality Management sections will merge to become the Quality, Patient Safety, and Regulatory Compliance Department; and

WHEREAS, the provisions of §6303.1, Chapter 6, Title 4 of the Guam Code Annotated have been met and no comments from the public were received; now, therefore be it

RESOLVED, that the Board of Trustees accepts the Human Resources Subcommittee’s recommendations and approves the creation of the Performance Improvement Coordinator and the Patient Safety Officer positions; and, be it further

RESOLVED, that the Hospital Administrator/CEO is directed to initiate the administrative processes to bring to fruition the utilization of these positions; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Eloy S. Lizama
Chairman, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees

Performance Improvement Coordinator

NATURE OF WORK IN THIS CLASS:

This is complex professional work involved in the coordination, development, implementation and evaluation of the hospital's overall performance improvement program.

An employee in this class is responsible for providing support in ensuring compliance with healthcare accrediting body standards and regulations; and identifying performance trends and recommending improvements.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Leads and directs analytical support for performance improvement initiatives.

Conducts analysis of changes in performance by monitoring trending sheets of performance indicators compiled and aggregated.

Assist in the systematic measurement and assessment of performance indicators.

Manages multiple projects and determines project scope; develops project plan strategies and implements work plans.

Coordinates the implementation of performance improvement programs for hospital work systems that meet the needs of patients and staff.

Participates on multi-disciplinary teams in the implementation of improvement efforts system-wide aligned to the organizations key initiatives.

Designs complex data analysis tools and provides staff education, assistance and consultation with these tools.

Aggregates data collected and prepares organization-specific reports, performance scorecards, dashboards, etc.

Provides training, education in performance improvement methodology.

Provides assistance in Failure Mode Evaluation Analysis (FMEA) and targeted audits.

Works with hospital departments and medical staff in developing performance improvement plans and identifying performance trends.

Works with hospital departments and medical staff in the investigation and data gathering of information and identifying unnecessary processes ensuring efficiency.

Prepares performance improvement reports and analyses of information and serves as a consultant for the hospital departments and medical staff on their analyses of information.

Conducts evaluations of the performance improvement program and recommends improvements.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Skill in the use of computer programs such as Word, Excel and PowerPoint.

Skill in developing and maintaining interpersonal relationships with healthcare professionals and hospital leadership.

Knowledge of the principles, practices and theories of professional nursing.

Knowledge of current clinical work systems.

Knowledge of The Joint Commission (TJC), Centers of Medicare and Medicaid Services (CMS), Conditions of Participation (CoP) standards and performance improvement techniques and methodologies.

Ability to collect and organize data.

Ability to evaluate and recommend and initiate changes to improve program effectiveness.

Ability to work effectively with employees and the public.

Ability to communicate effectively, orally and in writing.

Ability to work independently and within teams.

MINIMUM EXPERIENCE AND TRAINING REQUIREMENTS:

- A. One year of experience in direct clinical care activities and performance improvement work in a hospital setting; and a Master's degree in Healthcare Administration or Management, Health Science, Nursing or other healthcare related field. Or
- B. One year of experience in direct clinical care activities in a hospital setting; two years of performance improvement work experience in a hospital setting; and a bachelor's degree in Healthcare Administration or Management, Health Science, Nursing, or other healthcare related field.

NECESSARY SPECIAL QUALIFICATION REQUIREMENT:

Must obtain certification within three years from the effective date of hire and must maintain current certification in:

- A. As a certified Professional in Healthcare Quality (CPHQ) by the Healthcare Quality Certification Commission (HQCC); or
- B. Healthcare Quality Management (HCQM) by the American Board of Quality Assurance & Utilization Review Physicians (ABQAURP); or
- C. Six Sigma by SixSigma.us

Established:

Job Evaluation:

Know How: EI2 230


Problem Solving: E3 (38%) 87

Accountability: E1C 100

Total Points: 417

Pay Grade: N- General Pay Plan (GPP)

Approved:



Eloy S. Lizama
Chairman, Board of Trustees

Date: 12/06/16

PATIENT SAFETY OFFICER

NATURE OF WORK IN THIS CLASS:

An employee in this class is responsible for managing a hospital-wide patient safety program working collaboratively with other members of the Compliance and Quality Management Teams for the purpose of measurably improving patient safety and reducing patient harm.

An employee in this class will facilitate process improvements within the hospital that support the reduction of medical/health care errors and other factors that contribute to unintended adverse patient outcomes.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed; nor do the examples cover all duties which may be performed).

Plans, develops, implements, and monitors the hospital-wide patient safety program; conducts safety assessments; coordinates activities of patient safety and quality; and provides ongoing education to hospital staff.

Maintains and manages occurrence reporting systems across the organization and develops patient safety processes in order to achieve compliance with standards and reduce patient harm.

Gathers data detailing patient-related errors; conducts analyses detailing causes of errors; and coordinates patient safety data management for reporting out to the organization.

Develops program guidelines, policies, changes and interprets and explains program requirements to pertinent personnel.

Collaborates with individual patient care areas in order to ensure a safe environment for patients and staff.

Coordinates root cause analysis of patient safety events and assures implementation of resulting action plans.

Coordinates organizational response to regulatory standards related to patient safety including but not limited to Joint Commission National Patient Safety Goals.

Evaluates and improves the patient safety program based on internal needs and external requirements and standards.

Conducts surveys and assessments of patient safety and risks and develops annual patient safety goals.

Facilitates and coordinates process improvement teams that directly support patient safety goals, and develops initiatives to create an appropriate patient safety culture.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

- Skill in the use of nursing research and literature in daily practice (evidence based practice).
- Skill in developing and maintaining interpersonal relationships with a wide variety of healthcare professionals and hospital leadership.
- Knowledge of regulatory requirements pertaining to patient safety.
- Knowledge of care processes in a hospital setting.
- Knowledge of patient safety principles, methods, procedures and techniques.
- Knowledge and application of process improvement tools and techniques (statistical process control tools and team tools).
- Knowledge of regulatory and accrediting standards as they apply to patient safety.
- Ability to administer patient safety programs and develop patient safety standards to meet specific work situations.
- Ability to interpret, apply and enforce patient safety rules, regulations and other program guidelines.
- Ability to identify and define problems, collect data, establish facts and draw valid conclusions and evidence patient safety initiatives by means of measurable results.
- Ability to enter and abstract data using personal computer, as well as the ability to utilize data to facilitate the improvement and change in processes. (Microsoft Office).
- Ability to facilitate patient safety initiatives, effectively present data and promote a collaborative approach toward goal achievement.
- Ability to evaluate program effectiveness and recommend/initiate changes to improve program effectiveness.
- Ability to work effectively with employees and the public.
- Ability to communicate effectively, orally and in writing.
- Ability to make decisions in accordance with program guidelines.
- Ability to work independently and within teams.

MINIMUM EXPERIENCE AND TRAINING:

- A. Graduation from a recognized college or university with a Master's degree in Nursing; one year of experience in patient safety, quality improvement, or performance improvement activities in a hospital setting; and two years of experience in direct acute nursing care activities in a hospital setting; or
- B. Graduation from a recognized college or university with a bachelor's degree in nursing; two years of experience in patient safety, quality improvement, or performance improvement and two years of experience in direct acute nursing care activities in a hospital setting.

NECESSARY SPECIAL QUALIFICATION REQUIREMENTS:

- (A) Current license as a Registered Nurse from the Guam Board of Nurse Examiners.
- (B) Current Basic Life Support (BLS) certification.
- (C) Must obtain certification as a Certified Professional in Patient Safety (CPPS) by the Certification Board for Professionals in Patient Safety (CBPPS) within two years from the effective date of hire and must maintain current certification.

Established: _____

Job Evaluation:

Know How: E13 264


Problem Solving: E3 (38%) 100

Accountability: E2C 115

Total Points: 479

Pay Grade: N- O (Nurse Pay Plan)

Approved:



Eloy S. Lizama, Chairman, Board of Trustees

Date: 12/26/16



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-12

“RELATIVE TO ABOLISHING THE REDUCED HOURS OF WORK PROGRAM IN ITS ENTIRETY”

WHEREAS, the Board of Trustees passed Board Resolution 06-102, Relative to Full-time Physicians at the Guam Memorial Hospital Authority Reduced Hours of Work Policy Program on August 24, 2006; and

WHEREAS, the Reduced Hours of Work Policy Program was developed specifically for physicians and mirrored the TGI Thursday Program offered to full-time employees of the government of Guam pursuant to Public Law 25-72 to accommodate physicians by allowing more flexibility with their schedules; and

WHEREAS, the TGI Thursday Program is no longer available to full-time employees of the government of Guam such that it was intended for a specific budget period; and

WHEREAS, in effect, the Reduced Hours of Work Program is no longer available to full-time physicians of the Guam Memorial Hospital Authority; and

WHEREAS, it was recommended to and approved by the Human Resources Subcommittee at the November 29, 2016 meeting to abolish the Reduced Hours of Work Program in its entirety; now, therefore be it

RESOLVED, that the Board of Trustees accepts the Human Resources Subcommittee’s recommendations and approves the abolishment of the Reduced Hours of Work Policy Program; and, be it further

RESOLVED, that the Hospital Administrator/CEO is directed to take the necessary actions to abolish the Reduced Hours of Work Policy Program; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Eloy S. Lizama
Chairman, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-13

“RELATIVE TO AUTHORIZING THE ONLINE MERCHANT ACCOUNT WITH THE BANK OF GUAM IN SUPPORT OF THE EPAYMENT OF MEDICAL BILLS”

WHEREAS, the Guam Memorial Hospital Authority is a component unit of the Government of Guam whose sole responsibility is to provide and deliver quality health care to the people of Guam; and

WHEREAS, the Guam Memorial Hospital Authority has contracted for professional services to develop the software for GMHA customers/patients to access, inquire and pay their hospital billings on line through a secure web portal; and

WHEREAS, the Guam Memorial Hospital Authority has a banking relationship with the Bank of Guam and, as part of that relationship, has an existing bank account (0101-014714 for the Guam Memorial Hospital Authority) to receive such payments; now, therefore be it

RESOLVED, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to proceed with authorizing the establishment and use of this merchant account for the receipt of payments of medical bills from this portal; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Eloy S. Lizama
Chairman, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-14

“RELATIVE TO APPROVING TWO-HUNDRED TWENTY-THREE (223) NEW FEES”

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on December 17, 2015 and oral comments and written testimony have been solicited for the two hundred twenty-three (223) new fees comprised of the following Hospital departments: Room and Board, Central Supply Room, Radiology, Pharmacy, Operating Room and Respiratory; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now, therefore be it

RESOLVED, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to continue to proceed with the adjudication process of these 223 new fee items; and, be it further

RESOLVED, that the GMHA Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Eloy S. Lizama
Chairman, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-15

“RELATIVE TO APPROVING THIRTY-SEVEN (37) NEW FEES”

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on March 9, 2016 and oral comments and written testimony have been solicited for the thirty-seven (37) new fees comprised of the following Hospital departments: Radiology, Pharmacy and Special Services; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now, therefore be it

RESOLVED, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to proceed with the adjudication process of these 37 new fee items; and, be it further

RESOLVED, that the GMHA Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Eloy S. Lizama
Chairman, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-16

“RELATIVE TO APPROVING ONE-HUNDRED SEVENTEEN (117) NEW FEES”

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on July 6, 2016 and oral comments and written testimony have been solicited for the one-hundred seventeen (117) new fees comprised of the following Hospital departments: Radiology, Pharmacy, Operating Room, Laboratory and Special Services; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now, therefore be it,

RESOLVED, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to proceed with the adjudication process of these 117 new fee items; and, be it further

RESOLVED, that the GMHA Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Eloy S. Lizama
Chairman, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-17

“RELATIVE TO APPROVING SIXTY-ONE (61) NEW FEES”

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on September 29, 2016 and oral comments and written testimony have been solicited for the sixty-one (61) new fees comprised of the following Hospital departments: Emergency Room, Radiology, Pharmacy and Oncology services; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now, therefore be it

RESOLVED, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to proceed with the adjudication process of these 61 new fee items; and, be it further

RESOLVED, that the GMHA Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 6th DAY OF DECEMBER 2016.

Certified by:

Eloy S. Lizama
Chairman, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-18

“RELATIVE TO COMPLYING WITH A CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS) DETERMINATION THAT THE SKILLED NURSING UNIT (SNU) FACILITY IS IN NONCOMPLIANCE WITH A SPECIFIC LIFE SAFETY CODE VIOLATION AS DESCRIBED IN THIS RESOLUTION”

WHEREAS, the Centers for Medicare and Medicaid Services (henceforth referred as “CMS”) has determined that the Guam Memorial Hospital Authority (henceforth referred as “GMHA”) Skilled Nursing Unit (henceforth referred as “SNU”), a facility located in Barrigada, Guam, was not in substantial compliance with the Life Safety Code (henceforth referred as “LSC”) requirements (see attached CMS letter dated November 14, 2016); and

WHEREAS, more specifically, GMHA’s SNU Facility has a non-compliant exterior, ground floor area that is located just outside of its three (3) clinical wings that contain the skilled nursing care rooms, spaces, medical equipment and other appurtenances utilized by the SNU’s residents, families, visitors and employees. CMS determined that GMHA’s SNU does not have a “means of egress” in this part of the Facility and therefore, GMHA needs to procure construction services “to build a walkable surface that is an accessible means of egress (a path of travel) that leads to a public way or an area of refuge, an if needed obtain permits and approvals from local or state authorities;” and

WHEREAS, CMS has granted GMHA a “temporary waiver,” to complete the construction of such an emergency exterior walkway and area of refuge, that “will expire on May 31, 2017, or the next Life Safety Code survey, whichever comes first;” and

WHEREAS, GMHA’s Hospital Administrator/CEO is ultimately responsible for protecting the Life Safety of its SNU residents, families, visitors and employees so that GMHA can effectively meet and sustain its mission “to provide quality patient care in a safe environment;” and

WHEREAS, in order to complete this SNU Emergency Exterior Walkway Project, GMHA shall need to procure construction services that shall exceed \$25,000 and therefore is considered a large Capital Improvement Project that must be procured through the formal Invitation for Bid (IFB) process; and

WHEREAS, GMHA has residual General Obligation Bond Proceeds remaining from the completed Emergency Department and CCU/ICU Expansion Project and has communicated this remaining residual funds balance to the Guam Economic Development Authority (GEDA), as

well as GMHA's financial need to use these funds for this Project; now, therefore be it

RESOLVED, that the GMHA Board of Trustees fully supports the procurement of construction services to construct the required means of egress and area of refuge in order to remove this Life Safety Code deficiency as soon as possible for the health and well-being of GMHA's SNU residents, families, visitors, volunteers, contractors and employees; and, be it further

RESOLVED, that the GMHA Board of Trustees certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

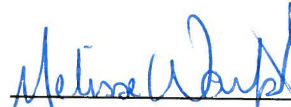
DULY AND REGULARLY ADOPTED ON THIS 19th DAY OF JANUARY 2017.

Certified by:



Eloy S. Lizama
Chairman, Board of Trustees

Attested by:



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-19

“RELATIVE TO APPROVING THIRTY-SIX (36) NEW FEES”

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on December 14, 2016 and oral comments and written testimony have been solicited for the thirty-six (36) new fees comprised of the following Hospital departments: Labor & Delivery, Radiology, Pharmacy and Respiratory; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now, therefore be it

RESOLVED, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to continue to proceed with the adjudication process of these 36 new fee items; and, be it further

RESOLVED, that the Chairperson certifies and the Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 19th DAY OF JANUARY 2017.

Certified By:

Eloy S. Lizama
Chairman, Board of Trustees

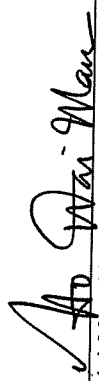
Attested By:

Melissa Waibel
Secretary, Board of Trustees


<p style="text-align: center;">GUAM MEMORIAL HOSPITAL AUTHORITY PUBLIC HEARING ON HOSPITAL FEES Wednesday, December 14, 2016 @ 2:00 P.M. DL Webb Conference Room</p>		ATTENDANCE	
		<p><u>Present:</u> Benita A. Manglona, Chief Financial Officer/ Presiding Hearing Officer Edward Birn, Assistant Chief Financial Officer Frumen Patacsil, Hospital QI Specialist</p>	<p><u>Guests Present:</u> Refer to attached Attendance Sheet</p>
AGENDA		DISCUSSION / RESPONSES	
		DECISION / ACTION	
I.	Introduction	Ms. Benita Manglona introduced herself at the public hearing as the Chief Financial Officer and the Presiding Hearing Officer for this public hearing and announced the commencement of this public hearing at 2:06 p.m.	Informational
II.	Opening Remarks	On behalf of the GMHA Board of Trustees, the Hospital Administrator/CEO and the GMHA employees, Ms. Manglona welcomed the attendees at this public hearing. She indicated that we had an agenda to follow and the public would be given an opportunity to ask questions later.	Informational
III.	Purpose of the Public Hearing	Ms. Manglona cited the enactment of Public Law 26-66 in December 2001 that removed the rate-setting jurisdiction from the PUC and gave it to the GMHA Board of Trustees. She also cited the Guam Code Annotated 10GCA §80109 that gave the authority to the Hospital to set its rates. In compliance with the Administrative Adjudication Law and further Guam Code Annotated directives, the Hospital did publish in The Guam Daily Post the announcement of this public hearing. The Hospital also sent the notice of this public hearing via facsimiles and electronic mails to various news media organizations, the Governor's Office, the Congresswoman, and to our elected Senators of the 33 rd Guam Legislature. In addition, letters were sent to the third party payers via electronic mails inviting them to this public hearing. The Hospital also posted the Notice of Public Hearing and the list of new fee items on its official website as mandated by public law.	Informational
IV.	Presentation of Proposed New Fees	Mr. Patacsil introduced himself being in charge of the Hospital Charge Library. He presented at this public hearing a total of 36 new fee items. These new fee items were submitted by different hospital departments from October to December 2016.	Informational

	<p>The summary of these new fee items were as follows:</p> <table border="1" data-bbox="219 651 446 1491"> <thead> <tr> <th>Fee Items</th> <th>Departments</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>2</td> <td>Labor & Delivery</td> <td>Supplies</td> </tr> <tr> <td>13</td> <td>Radiology</td> <td>Procedures</td> </tr> <tr> <td>17</td> <td>Radiology</td> <td>Supplies</td> </tr> <tr> <td>2</td> <td>Pharmacy</td> <td>Pharmaceutical items</td> </tr> <tr> <td>2</td> <td>Respiratory</td> <td>Supplies</td> </tr> <tr> <td colspan="3">TOTAL: 36 New Fee Items</td> </tr> </tbody> </table>	Fee Items	Departments	Description	2	Labor & Delivery	Supplies	13	Radiology	Procedures	17	Radiology	Supplies	2	Pharmacy	Pharmaceutical items	2	Respiratory	Supplies	TOTAL: 36 New Fee Items			(Refer to list of new fees provided at the public hearing)
Fee Items	Departments	Description																					
2	Labor & Delivery	Supplies																					
13	Radiology	Procedures																					
17	Radiology	Supplies																					
2	Pharmacy	Pharmaceutical items																					
2	Respiratory	Supplies																					
TOTAL: 36 New Fee Items																							
V.	<p>Testimonies from the Public</p> <p>Ms. Manglona noted that no attendees from the public at this public hearing had signed up for testimony.</p> <p>She stated that the public could submit a written testimony to the Hospital Administrator/CEO within five (5) days after this public hearing. These testimonies would be incorporated into the submission package to the 33rd Guam Legislature.</p>	Informational																					
VI.	<p>Questions and Answers on Proposed Fees</p> <p>Ms. Manglona commenced soliciting from the attendees for any questions they might have concerning the new fee items presented. It was noted that there were no questions from the attendees present at the public hearing.</p>	Informational																					
VII.	<p>Closing Remarks</p> <p>Ms. Manglona thanked everyone for making their time to attend this public hearing. The next public hearing will be scheduled in the next quarter.</p>	Informational																					
VIII.	<p>Adjournment</p> <p>The public hearing was adjourned at 2:10 p.m.</p>																						


Recorded and Transcribed by:


 Wai-Man H. Chan "Candy"
 Administrative Assistant

Approved by:


 Benita A. Manglona
 Chief Financial Officer
 Presiding Hearing Officer

12/28/16
 Date



GUAM MEMORIAL HOSPITAL AUTHORITY
SUMMARY OF NEW FEE ITEMS/SERVICES
for Submission to the 33rd Guam Legislature
Public Hearing on December 14 , 2016

NO	CHARGE CODE	DESCRIPTION	FEE MODEL	DEPARTMENT
			RATE	
1	16-00291	LARYNGOSCOPE FIBEROPTIC	\$ 254.99	LABOR & DELIVERY
2	16-01463	PRESSURE INFUSOR BTA	\$ 105.87	LABOR & DELIVERY
3	20-42405	INCISIONAL BX SALIVARY GLAND	\$ 491.24	RADIOLOGY
4	20-43756	DUODENAL INTUB/ASPIRATE W/IMG	\$ 100.69	RADIOLOGY
5	20-47380	OPEN ABLATE LIVER TUMOR, RF	\$ 2,982.80	RADIOLOGY
6	20-47381	OPEN ABLATE LIVER TUMOR, CRYO	\$ 2,849.44	RADIOLOGY
7	20-47382	PERC ABLATE LIVER TUMOR, RF	\$ 4,118.23	RADIOLOGY
8	20-47383	PERC ABLATE LIVER TUMOR, CRYO	\$ 4,118.23	RADIOLOGY
9	20-47542	PERC BAL DILATE BILIARY TREE	\$ 271.40	RADIOLOGY
10	20-47543	PERC ENDOLUM BX BILIARY TREE	\$ 342.66	RADIOLOGY
11	20-48400	INJECT INTRAOP PANCREATOGRAPHY	\$ 222.68	RADIOLOGY
12	20-49082	ABD PARACENTESIS W/O IMAGE	\$ 482.83	RADIOLOGY
13	20-49446	CONVERT G-TUBE TO G-J PERC	\$ 1,088.00	RADIOLOGY
14	20-49450	REPLACE GASTRO/CECO TUBE PERC	\$ 482.83	RADIOLOGY
15	20-49451	REPLACE DUOD/JEJ TUBE PERC	\$ 482.83	RADIOLOGY
16	21-08503	CATHETER P/F 5F 110CM 10708503	\$ 114.28	RADIOLOGY
17	21-09406	CATHETER PIG 4FR 70CM G09406	\$ 85.47	RADIOLOGY
18	21-09489	NEEDLE YUEH 5FR 7CM G09489	\$ 146.97	RADIOLOGY
19	21-09490	NEEDLE YUEH 5FR 10CM G09490	\$ 170.50	RADIOLOGY
20	21-09803	CATHETER P/F 5F 100CM 13709803	\$ 651.34	RADIOLOGY
21	21-10050	SET DRAIN CATH 10.2FR G10050	\$ 766.92	RADIOLOGY
22	21-14045	CATHETER VER 4F 100CM 10714045	\$ 114.28	RADIOLOGY
23	21-18502	CATHETER C-2 4FR 65CM 10718502	\$ 114.28	RADIOLOGY
24	21-19503	CATHETER HH1 5F 100CM 10719503	\$ 114.28	RADIOLOGY
25	21-19708	CATHETER C2 5FR 65CM 10719708	\$ 114.28	RADIOLOGY
26	21-20405	CATHETER SO-2 5F 80CM 10720405	\$ 114.28	RADIOLOGY
27	21-20408	CATHETER SO-0 5F 80CM 10720408	\$ 114.28	RADIOLOGY
28	21-22102	CATHETER BER 5FR 65CM 10722102	\$ 114.28	RADIOLOGY
29	21-32201	CATHETER O/F 5FR 65CM 10732201	\$ 114.28	RADIOLOGY
30	21-32702	CATHETER KMP 5FR 40CM 10732702	\$ 114.28	RADIOLOGY
31	21-43870	SET INTRODUCER 5FR G43870	\$ 289.52	RADIOLOGY
32	21-88882	CATHETER MAHURKAR 12FR 13CM	\$ 647.37	RADIOLOGY
33	42-33210	MOXIFLOXACIN 400MG TABLET	\$ 45.12	PHARMACY
34	42-46305	MELATONIN 5MG TABLET	\$ 0.91	PHARMACY
35	53-19250	VEST SPU WRAP-MED	\$ 426.05	RESPIRATORY
36	53-19251	VEST SPU WRAP-LGE	\$ 426.05	RESPIRATORY

*****LAST ITEM*****

I certify that this listing of items comprises all fees required by law for submission at this time to be complete as presented here.

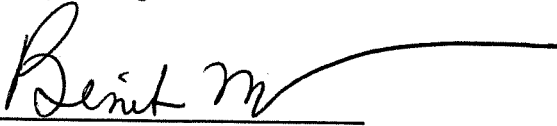


Frumen A. Patacsil
Hospital Quality Improvement Specialist

12/2/16
Date

1st Endorsement of Concurrence:

I concur and further certify that this listing of items are exempted under Section 9301(i) to Article 3, Chapter 9, Division 1 of Title 5 of the Guam Code Annotated and in compliance with Title 10 GCA Part 2 Division 4 Chapter 80 §80109



Benita A. Manglona
Chief Financial Officer

12/2/16
Date



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



850 GOV. CARLOS CAMACHO ROAD
OKA, TAMUNING, GUAM 96913
TEL: 647-2444 or 647-2330
FAX: (671) 649-0145

PUBLIC HEARING HOSPITAL NEW RATES, FEES AND CHARGES

Wednesday, December 14, 2016
GMHA Daniel L. Webb Conference Room
2:00 p.m.

Attendance Sheet

NO.	NAME	ORGANIZATION	CONTACT NO.
1	Candy Chan	GMHA Fiscal Secs	648-7958
2	Chuck Tanner	San Rodriguez	687 8827
3	Angela Gaminde	GMHA (RT)	647-2405
4	Edna Carbonell	STAYWELL	477 5091
5	Melanie Villarin	STAYWELL	477-5091
6	Fumen Patacill	GMHA - Fiscal	648 7945
7	Valerie Mendo	GMHA - Labor & Delivery	647-2292
8	Edward M. Bui	ARF	
9	Wayne Smita	GMHA - Fiscal	648 7576
10	Alexy Dacanay	SelectCare	479-7958
11	Lator Ibarez	SelectCare	479-7980
12	Benita Mangina	GMHA CFO	
13	Wangeleni P. Chan	GMHA Facility	ext 2288
14			
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16			
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PRESS RELEASE

FOR IMMEDIATE RELEASE – December 5, 2016

NOTICE OF PUBLIC HEARING

NOTICE IS HEREBY GIVEN that the Guam Memorial Hospital Authority (GMHA) will be conducting a Public Hearing on hospital new rates, fees and charges. Documents relating to this proceeding are available on our website at www.gmha.org under Public Information - GMHA Press Release – GMHA Public Hearing. Should you have any questions, please feel free to contact *Mr. Frumen Patacsil*, Hospital Quality Improvement Specialist at 648-7945 or *Ms. Benita A. Manglona*, Chief Financial Officer at 647-2367.

Date: Wednesday, December 14, 2016
Time: 2:00 p.m.
Place: GMHA Daniel L. Webb Conference Room, 1st Floor, Administration Wing, 850 Gov Carlos Camacho Road, Oka Tamuning, Guam.

Individuals requiring special accommodations should contact Toni Tenorio, ADA Coordinator, at 647-2218/2367 to make appropriate arrangements.

DISTRIBUTION:

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Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-20

“RELATIVE TO THE CREATION OF NEW POSITIONS FOR THE INFORMATION SERVICES DEPARTMENT AKA “IT DEPT” AND AN AMENDMENT OF THE HOSPITAL INFORMATION TECHNOLOGY ADMINISTRATOR POSITION”

WHEREAS, the current position classifications for Information Service positions within the government of Guam do not accurately depict the functions of the “IT Dept”; and

WHEREAS, as part of the organizational redesign of the “IT Dept” for better operational efficiency and services the creation of the Hospital Clinical/Systems Support Series of Positions and the Hospital IT Support Series of Positions, and the amendment of the Hospital Information Technology Administrator position will provide for a more cohesive, efficient and more service oriented organization; and

WHEREAS, the current “IT Dept” is staffed with incumbents holding positions that are not properly classified; and

WHEREAS, the redesign of the “IT Dept” will ensure continuity of the technical support and operations area of the Hospital by appropriately aligning the department especially in light of the many new technologies that have been implemented (i.e., Cerner LAB LIS System, the Optimum Revenue Cycle Management System, the Optimum Clinical OIMED System, etc.); and

WHEREAS, with the creation of the Hospital IT Technician I and II, and the Hospital Clinical/Systems Support I, II, and III, incumbents will be reclassified into these positions provided they qualify for the positions as reallocated. The effective date of the reallocations will be upon the successful passing of a drug screen. As for the Hospital IT Support Supervisor and the Hospital Clinical/Systems Support Supervisor, these positions will be filled via the competitive process; and

WHEREAS, the provisions of §6303.1, Chapter 6, Title 4 of the Guam Code Annotated have been met and no comments from the public were received; and

WHEREAS, the HR, BOT Sub-Committee on November 29, 2016 recommended approval of the creation of the positions and the amendment of the Hospital Information Technology Administrator position; now, therefore be it

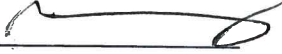
RESOLVED, that the Board of Trustees accepts the recommendation of the HR, BOT Sub-Committee and approve the creation of the *new IT positions and the amendment of the Hospital Information Technology Administrator* position; and, be it further

RESOLVED, that the Hospital Administrator/CEO is directed to initiate the administrative processes to bring to fruition the utilization of this position; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

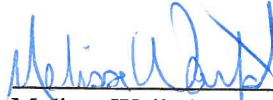
DULY AND REGULARLY ADOPTED ON THIS 19th DAY OF JANUARY 2017.

Certified by:



Eloy S. Lizama
Chairman, Board of Trustees

Attested by:



Melissa Waibel
Secretary, Board of Trustees

HOSPITAL CLINICAL/SYSTEMS SUPPORT SUPERVISOR

NATURE OF WORK IN THIS CLASS:

This position administers complex hospital clinical technology systems or specialized hospital information technology systems.

An employee in this class will be responsible for the supervision of staff as assigned to assist in the administration of the Hospital's clinical technology or other specialized hospital information technology systems; and for administering IT directives that encompass the development, deployment, maintenance and management of Hospital-wide Clinical IT; or other specialized hospital information systems in order to facilitate accurate and efficient standards compliant to direct and indirect patient care in a hospital computing environment.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Administer the Clinical Information Systems and Applications; or the Revenue Cycle Management and Financial Information Systems and Applications used throughout the hospital and serves as liaison between vendors and the hospital.

Assist Clinical or Operation's areas in the use of information systems for the advancement of accuracy, efficiency and compliance of direct patient care.

Manage Tier III Level of technical support in the areas of systems administration, technical, and management support and design; network security and infrastructure, user access and security; Change and Patch management; quality assurance; Disaster recovery and Business Continuity Management; regulatory compliance, risk management, and maintenance of information systems and technologies in a hospital computing environment.

Plan and establish system requirements and design specifics; participates in planning, directing and coordinating project activities which include the evaluation, deployment and management of current and future hospital IT systems across the organization.

Manage and conduct Risk Management safeguards and controls to ensure maximum and effective systems security of all Hospital Information Systems that store, process or transmit healthcare information.

Manage the security design, implementation, and maintenance of enterprise network testing by working with system engineers to design the test network, manage and configure firewalls and VPNs, support virtual evaluations; and assist in the design and development of integrated information systems interoperability.

Design, test, provision, and implement modern secure operating systems, networks, and database products for use in the hospital computing environment.

Conduct quality assurance pre-check and ensure equipment meets standard preset installation package.

Coordinate and communicate system procedural implementation to end users, coordinators, specialty managers and work teams and serves as liaison between users, vendor and IT Department.

Oversee the maintenance of hospital physical servers and coordinates problem resolution with IT staff.

Define, capture, analyze, archive and maintain hospital-wide master database files and patient information data. Provides end-user access to data extracts through custom query reporting method, data download, files transfer, Electronic File Transfer (EFT) and submission, transaction code set, Electronic Data Interface (EDI) standards used for electronic medical claims processing and remittance advice with contracted third party payers.

Manage and perform backup strategies to ensure complete hospital information systems and technology daily backups.

Manage and resolve system and application problems with end users by identifying issues and or source of program errors.

Maintain user's compliance of information security policies and procedures, and technical systems for confidentiality, integrity and availability of all organizational healthcare information systems in accordance with HIPAA Security and Joint Commission.

Conduct physical and electronic security audits.

Determine and recommend improvements of standards and implements changes. Develops and maintains relationships with system vendors.

Manage the installation of new clinical and technical support systems and releases; coordinates efforts to detect and correct system problems with newly installed application and updates between IT staff, functional end users and third party vendors.

Manage IT component of the RIS and LIS teams to insure interfaces and data flow required are functioning properly.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of the functions and capabilities of hospital and healthcare information technology processing.

Knowledge of the standard principles, methods, practices, techniques of information technology such as information systems planning, database design, programming and systems implementation.

Knowledge of VPN, Network Protocols, Management, Wiring and Hardware; and wireless Technology and Access Control Systems.

Knowledge of electronic communications and encryption protocols and compliance.

Knowledge of Windows Operating Systems, Windows and desktop software applications and support, Patch Management, and end-user compliance and controls.

Knowledge of HIPAA, the Privacy Act and Joint Commission regulations.

Knowledge of the principles and practices of computing programming, system analysis, and design.

Knowledge of computer hardware and software systems.

Knowledge of Wide Area Network (WAN) development enterprise and/or Voice Over Internet Protocol (VOIP) system development.

Ability to think logically and pay close attention to details.

Ability to make decisions in accordance with appropriate guidelines.

Ability to evaluate systems and processes and recommend adapting to cost savings electronic data processing techniques to improve program effectiveness.

Ability to ensure data integrity and apply system security and control standards.

Ability to work effectively with the public and employees.

Ability to communicate effectively, orally and in writing.

Skilled in planning and project management.

Skilled in analytical and critical thinking, in conjunction with route technical user support and resolution methods.

Skilled in supervision, planning, and project management.

Skilled in working with complex systems design, management, maintenance and configuration scenarios to ensure maximum efficiency, effectiveness, productivity and regulatory compliance.

MINIMUM EXPERIENCE AND TRAINING:

- A) Four (4) years of progressively responsible experience in administering hospital information technology and clinical systems; and graduation from a recognized college or university with a Master's degree in Computer Science, Information Science, or related fields.
- B) Three (3) years of progressively responsible experience in administering information and technology systems; or experience in information systems support, systems analysis, systems

design, and systems management ; two (2) years of supervisory or leadership experience; and graduation from a recognized college or university with a Bachelor's degree in Computer Science, Information Science, or related field.

HAY EVALUATION:

E13	264
E3 (38%)	100
E2C	<u>115</u>
	479

PAY GRADE-O



Eloy S. Lizama
Chairman, Board of Trustees

1/19/17

Date

HOSPITAL CLINICAL/SYSTEMS SUPPORT SPECIALIST III

NATURE OF WORK IN THIS CLASS:

This position provides complex/advanced technical lead support of hospital Clinical Systems or other specialized hospital Information Systems.

An employee at this level will provide support that encompasses the development, deployment, maintenance and management of Hospital wide Clinical IT systems and other specialized hospital Information Systems to facilitate accurate, efficient and standards compliant to direct and indirect patient care in a Hospital Computing Environment.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Facilitate the installation, implementation, support and administration of Clinical Information Systems and Applications or other specialized Hospital Information Systems.

Serve as project leader to plan and execute major Hospital Network Infrastructure upgrades, installations and configurations of hardware, software, network client workstations and peripherals.

Provide Tier III level technical support in the repair, configuration, software installation, problem determination and resolution, testing and provisioning of all personal computers and peripherals connected to the Hospital Wide Information System.

Participate with the design, development and implementation of solutions to system needs; communicate systems needs in a timely manner to appropriate staff.

Respond to and monitor service requests, analyze, diagnose, troubleshoot and coordinate resolution of clinical environment to resolve technical issues.

Organize and lead multiple projects and priorities within specified timelines.

Train Personnel on all Clinical Information Systems & Applications utilized by the Information Technology Department ; and serves as a direct liaison between IT and departments for project consultation, training, patch updates, testing environments.

Participate in strategic and operational planning to achieve hospital goals and coordinate the evaluations, deployment and management of current and future information technology systems across the organization.

Develop education and training materials for use by customers and end-users. Monitor, evaluate and record training activities and program effectiveness through exams and competency skill test.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of computers and electronics.

Knowledge of the functions and capabilities of Hospital Clinical Information Systems or other specialized Healthcare Information Technology Systems and processes.

Knowledge of the principles, practices and techniques of computer programming, systems support, systems analysis and help desk support.

Knowledge of transmission, broadcasting, switching, control and operation of telecommunications systems.

Knowledge of HIPAA, the Privacy Act and Joint Commission regulations.

Ability to manage time, organize processes and maintain documentation.

Ability to analyze and evaluate technical systems failures and find solutions.

Ability to perform risk management assessment and provide solutions, safeguards, and control.

Ability to evaluate systems and processes and recommend adapting to cost savings electronic data processing techniques to improve program effectiveness.

Ability to make decisions in accordance with appropriate program guidelines.

Ability to interpret and apply pertinent laws, regulations and other program guidelines.

Ability to ensure data integrity; apply systems security and control standards and methodologies.

Ability to work effectively with the public and employees.

Ability to communicate effectively, orally and in writing.

Skilled in systems design, systems support, application development, and system implementation in a healthcare computing environment.

Skilled in working with complex systems design, management, maintenance, and configuration scenarios, to ensure maximum efficiency, effectiveness, productivity and regulatory compliancy.

MINIMUM EXPERIENCE AND TRAINING:

- A) Three (3) years of progressively responsible experience in Hospital Information Clinical Systems and technology; or experience in specialized technical support, help desk support, and systems management; and graduation from a recognized college or university with a bachelor's degree in Computer Science, Information Science, or related field; or

- B) Any equivalent combination of experience and training beyond the bachelor's degree which provides the minimum knowledge, abilities and skills.

Hay Evaluation:

E12	200
E3 (33%)	66
EIC	<u>76</u>
	342

PAY GRADE - M



Eloy S. Lizama
Chairman, Board of Trustees

1/19/17

Date

HOSPITAL CLINICAL/SYSTEMS SUPPORT SPECIALIST II

NATURE OF WORK IN THIS CLASS:

This position provides intermediate technical support of hospital Clinical Systems and applications or other specialized hospital Information Systems.

An employee at this level will provide Tier III level specialized technical support and services for Hospital Information Systems that include the Revenue Cycle Management Application Suite; General Financial Application Support; Hospital Client/Server applications; website management and Clinical Systems all in a hospital computing environment.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Provides specialized technical support and services for hospital Information Systems that include, healthcare advanced technologies and methodologies, Revenue Cycle Management Application Suite, General Financial Application Support, Hospital Client/Server applications, Website Management, Hospital Network Infrastructure, Data Warehouse Server, Email Communications, Electronic and digital Security, Network Filtering Services, Spam and Website Content Management, and Central Repository and workflow applications to more than 500 Hospital end users and Business Associates.

Provide access level authorization to GMHA email users and maintain enrollment log

Configure, monitor, and problem isolation and resolution to all Document Management technologies, Scan to Desktop technologies, and Network wide shared resources

Analyze, evaluate, diagnoses, and find solutions to problems related to the operating systems, hospital information systems, System Servers, Information Systems, Security Appliances, and technologies in a healthcare environment.

Install, maintains, and troubleshoots Hospital Local Area Network, VPN Tunnels, Wireless Repeaters, Security Appliances, to include network drops, termination points, and configurations of network devices and workstations.

Develop, implement, test, and maintain server level disaster recovery processes and procedures

Conduct Network administration maintenance daily, monthly, and yearly maintenance tasking as established by network wide policies and procedures.

May provide training to less experienced support technicians and IT specialists in system administration, system monitoring and reporting, system security access and controls.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of computers and electronics.

Knowledge of the functions and capabilities of Hospital Clinical Information Systems or other specialized Healthcare Information Technology Systems and processes.

Knowledge of the principles, practices and techniques of computer programming, systems support, systems analysis and help desk support.

Knowledge of transmission, broadcasting, switching, control and operation of telecommunications systems.

Knowledge of HIPAA, the Privacy Act and Joint Commission regulations.

Ability to manage time, organize processes and maintain documentation.

Ability to analyze and evaluate technical systems failures and find solutions.

Ability to evaluate systems and processes and recommend adapting to cost savings electronic data processing techniques to improve program effectiveness.

Ability to make decisions in accordance with appropriate program guidelines.

Ability to manage time, organize processes and maintain documentation.

Ability to interpret and apply pertinent laws, regulations and other program guidelines.

Ability to ensure data integrity; apply systems security and control standards and methodologies.

Ability to work effectively with the public and employees.

Ability to communicate effectively, orally and in writing.

Skilled in working with complex systems design, management, maintenance, and configuration scenarios, to ensure maximum efficiency, effectiveness, productivity and regulatory compliancy.

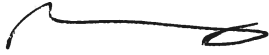
MINIMUM EXPERIENCE AND TRAINING:

- A) Two (2) years of progressively responsible experience in Hospital Information Clinical Systems and technology; or technical support, help desk support, and systems management; and graduation from a recognized college or university with a bachelor's degree in Computer Science, Information Science, or related field; or
- B) Any equivalent combination of experience and training beyond the bachelor's degree which provides the minimum knowledge, abilities and skills.

Hay Evaluation:

EI2	175
D3 (29%)	50
DIC	<u>57</u>
	282

Pay Grade – K



Eloy S. Lizama, Chairman, Board of Trustees

1/19/17
Date

HOSPITAL CLINICAL/SYSTEMS SUPPORT SPECIALIST I

NATURE OF WORK IN THIS CLASS:

This position provides entry-level Tier III technical support of hospital Clinical Systems and Applications or other specialized hospital Information Systems.

An employee at this level will perform basic system administration duties on critical IT systems, applications and other servers including installing, repairing, maintaining, upgrading and providing general support in a hospital computing environment.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Evaluate, test, and deploy all software and hardware upgrades to server infrastructure.

Provide monthly, semi-annually, and yearly custom reports for Patient Revenue, General Financial, Clinical, and Ancillary departments as needed.

Perform software and hardware installation on desktop computers as guided by established default software load packages and procedures.

Monitor servers, applications and services on a proactive basis using a combination of tools to ensure high availability and Service Level Agreements.

Perform regular and on-demand mission critical server system backups and recoveries.

Assist in developing, implementing, testing and maintaining server level disaster recovery plans.

Assist upper level Support Specialists in day to day application and training support as needed.

Collect and review systems data for capacity and planning purposes.

Work closely with the MIS team to provide end-user support and issue resolution.

Assist with in the research, and evaluate and recommend system technologies to support business needs and requirements.

Provide entry level day-to-day application support on the GMH Revenue Cycle Management Application Suite or clinical systems and applications.

Create and maintain documentation for all application server systems processes and procedures.

Assist with the coordination, support, and goals of the GMHA Administrative, Fiscal, and Operations and Clinical division technological advancements, compliance, and objectives.

Maintain network administration, domain user creation and permissions logs and remote user configuration permission logs.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of computers and electronics.

Knowledge of the functions and capabilities of Information Technology (IT) Systems or other specialized Healthcare Information Technology Systems and processes.

Knowledge of the principles, practices and techniques of computer programming, systems support, systems analysis and help desk support.

Ability to analyze and evaluate technical systems failures and find solutions.

Ability to evaluate systems and processes and recommend adapting to cost savings electronic data processing techniques to improve program effectiveness.

Ability to make decisions in accordance with appropriate program guidelines.

Ability to interpret and apply pertinent laws, regulations and other program guidelines.

Ability to ensure data integrity; apply systems security and control standards and methodologies.

Ability to prepare technical reports, standard operating procedures, user documentation and technical reference manuals.

Ability to work effectively with the public and employees.

Ability to communicate effectively, orally and in writing.

Skilled in systems design, systems support and system implementation in a computing environment.

MINIMUM EXPERIENCE AND TRAINING:

- A) Two (2) years of experience in Information Technology (IT), specialized technical support, help desk support, or systems management work; and graduation from a recognized college or university with an Associate's degree in Computer Science, Information Science, or related field; or
- B) Any equivalent combination of experience and training which provides the minimum knowledge, abilities and skills.

Hay Evaluation:

DI2	152
D3 (29%)	43
DIC	<u>50</u>
	245

Pay Grade-J



Eloy S. Lizama, Chairman, Board of Trustees

11/19/17

Date

HOSPITAL IT SUPPORT SUPERVISOR

NATURE OF WORK IN THIS CLASS:

This position oversees the help desk of the IT department and manages the daily operational support and security of electronic data processing, the security of information and systems; and the technical support staff and services in a Hospital computing environment.

An employee in this class is responsible for overseeing the technical support services of the hospital on a twenty-four (24) hour, seven (7) days a week operation.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Oversee the IT Help Desk and manage the daily operations of information systems and technologies of the hospital.

Oversee the access of secured hospital information and ensures the compliance of security policies, procedures, and technical systems.

Manage all procedures related to the identification, prioritization, and resolution of end user help requests, including the monitoring, tracking, and coordination of Help Desk functions.

Provide technical assistance and support related to computer systems, hardware, or software. Respond to queries, runs diagnostic programs, isolates problem, and determines and implements solution.

Oversee the installation; configuration and testing of all virtual think client stations, personal computers and peripherals, network workstations and scanning devices.

Conducts quality assurance pre-check and ensures equipment meets standard preset installation package requirements.

Oversee the maintenance and monitors all hospital physical servers.

Assists in the maintenance of and ensures the Hospital-wide Master Database and Patient Information Data is defined, captured, analyzed, reported, stored, secured and archived with accuracy and confidentiality.

Assists end-users by providing access to data extracts through custom query reporting method, data download, files transfer, electronic files transferring (EFT) and submission, transaction code set, electronic data interface (EDI) standards used for electronic medical claims processing and remittance advice with contracted third party payers.

Oversee and perform backup strategies to ensure complete hospital information system and technology daily backups are performed. Monitors Disaster Recovery and reports issues as arises.

Oversee the hospital and third party applications and Access Key System user profiles for end-user security and specific authorization levels.

Prepare and maintains technical reports, standard operating procedures, user documentation procedures and technical reference manuals.

Assist in the conduct of assessments of risks associated with IT investments and in the coordination and development of risk management of hospital information systems, databases, technologies and the development of corrective action plans to mitigate against all risks.

Oversee the assessment of the inventory of all computer and network equipment, software subscriptions and unusable equipment.

Monitor, maintain and troubleshoots Clinical Applications and Systems and technical support systems to ensure optimum system availability and reliability.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of electronic data processing.

Knowledge of computer operating capabilities.

Knowledge of computer operations and techniques.

Knowledge of the functions and capabilities of hospital and healthcare information technology processing.

Knowledge of HIPAA, the Privacy Act and Joint Commission regulations.

Ability to administer electronic data processing systems and activities.

Ability to supervise the work of others.

Ability to make decision in accordance with appropriate program guidelines.

Ability to identify and correct computer and peripheral failures and find solutions.

Ability to evaluate systems and processes, and recommend cost savings electronic data processing techniques to improve program effectiveness.

Ability to ensure integrity of data and apply systems security and control standards.

Ability to work effectively with the public and employees.

Ability to communicate effectively, orally and in writing.

Ability to prepare reports.

Skilled in the operation of computer and peripheral data processing equipment.

Skilled in planning and project management.

Skilled in PC repair, Windows Operating Systems, Office Suites, to include the use of diagnostic tools, standard repair methods and procedures.

MINIMUM EXPERIENCE AND TRAINING:

- A) Three (3) years of progressively responsible experience in Hospital Information Systems and technology, help desk support, assisting in systems management or systems administration, with two years of supervisory experience, and/or graduation from a recognized college or university with an Associate's degree in Information Technology, Management Information Systems or related field; or
- B) Two (2) years of experience in Hospital Information Systems and technology, help desk support, assisting in systems management or systems administration; three (3) years of supervisor experience; and graduation from a recognized college or university with and Associate's degree in Information Technology, Management Information Systems or related field.
- C) Any equivalent combination of experience and training which provides the minimum knowledge, abilities and skills.

Hay Evaluation:

EI3	200
D3 (33%)	66
D2C	<u>76</u>
	342

Pay Grade-M



Eloy S. Lizama
Chairman, Board of Trustees

1/19/17

Date

HOSPITAL IT SUPPORT TECHNICIAN II

NATURE OF WORK IN THIS CLASS:

This is moderately complex technical work in providing support services for clinical systems and applications or other specialized information systems in a hospital computing environment.

An employee in this class provides electronic data processing technical support, end-user help desk support on information systems and technologies and may provide lead work to other technicians.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Perform, monitor, document and manage system backup strategies for clinical systems and applications or other specialized information systems and technologies, including tape libraries, archival management, off-site backup storage and retrieval management in a hospital computing environment.

Process scheduled jobs and print reports when required.

Perform Initial Program Load (IPL) to reset system storage to allow optimum performance of the AS400 computer system.

Perform end of month procedures and conducts back up files to tape cartridge.

Diagnose moderately technical issues and evaluate, assess and repair virtual stations, personal computers, dumb terminals, computer peripherals and other hardware or software connected to a hospital network or AS400 computer systems.

Install, configure and test all virtual stations, personal computers, dumb terminals and network stations.

Conduct quality assurance pre-checks and ensure equipment meets standard preset installation packages.

Assist with the installation and troubleshooting of a hospital Local Area Network, VPN Tunnels, Wireless Repeaters, Security Appliances, network drops, termination points and configurations of network devices and workstations.

Monitor and maintain the Hospital physical servers; coordinate with system technicians for problem resolution as necessary; and work as part of a team to monitor the server for 24 hour operation.

Monitor, install and maintain operating and security systems software and related equipment.

Setup laptops, projectors and IP Phones for employee training, Webex and Skype conferences.

Enable AS400 user profiles and enroll users into the Order Communications application for user of iMed and AS400 systems.

Access software updates, drivers, knowledge bases and frequently asked questions resources on the Internet to aid users in problem resolution.

Respond to hospital user requests for technical support assistance in person, via telephone or electronic media.

Conduct research on technical issues and resolves or redirect problems to appropriate technical resources.

Train users to work with new computer

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of the practices, procedures and techniques of electronic data processing.

Knowledge of the operation of computer electronic equipment.

Knowledge of computer electronics.

Knowledge of computer peripheral equipment operation.

Ability to follow oral and written procedures of a technical nature.

Ability to read, interpret and work from blueprints, sketches and diagrams.

Ability to work effectively with the public and employees.

Ability to understand and follow oral and written instructions.

Ability to communicate effectively, both orally and in writing.

Ability to identify and correct computer and peripheral failures and find solutions.

Skill in the maintenance and repair of computer equipment and systems.

MINIMUM EXPERIENCE AND TRAINING:

- A) Three (3) years of progressively responsible experience in Hospital Information Systems and technology, help desk support, or IT technical support and graduation from a recognized college or university with an Associate's degree in Information Technology, Management Information Systems or related field; or
- B) Any equivalent combination of experience and training which provides the minimum knowledge, abilities and skills.

Hay Evaluation:

DI2	152
C3 (25%)	38
CIC	<u>43</u>
	233

Pay Grade – J



Eloy S. Lizama
Chairman, Board of Trustees

1/19/17
Date

HOSPITAL IT SUPPORT TECHNICIAN I

NATURE OF WORK IN THIS CLASS:

This is routine to moderately technical work in providing support services for clinical systems and applications or other specialized information systems in a hospital computing environment.

An employee in this class provides electronic data processing technical support, end-user help desk support on information systems and technologies.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Respond to incoming requests from end users in person, via telephone and or electronic media for routine technical support assistance for clinical systems and applications or other specialized information systems in a hospital computing environment.

Identify and organize end user support calls according to priority and forward tickets to higher-level support personnel.

Assist in configuring software to ensure automation and routing workflows support timely resolution including, receipt, prioritization documentation and distribution.

Participate in continuous improvement of IT support policies, procedures and guidelines.

Maintain help desk trouble calls in log book or electronic ticketing system.

Troubleshoot minor hardware and support malfunctions and corrects them as directed by established troubleshooting policies and procedures.

Assist upper level Support Technicians in the installation of hardware, software and network assets as needed.

Process disposition of antiquated and unusable computer equipment and prepare equipment for survey based on established policies and procedures.

Conduct hardware and software inventory as directed and assist with yearly computer hardware and software asset inventory as needed.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of the practices, procedures and techniques of electronic data processing.

Knowledge of the operation of computer electronic equipment.

Knowledge of computer electronics.

Knowledge of computer peripheral equipment operation.

Ability to follow oral and written procedures of a technical nature.

Ability to read, sketches and diagrams.

Ability to work effectively with the public and employees.

Ability to understand and follow oral and written instructions.

Ability to communicate effectively, both orally and in writing.

Ability to identify and correct routine computer and peripheral failures and find solutions.

Skill in the routine maintenance and repair of computer equipment and systems.

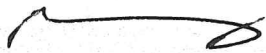
MINIMUM EXPERIENCE AND TRAINING:

- A) Two (2) years of experience in Hospital Information Systems and technology, help desk support, or IT technical support and graduation from a recognized college or university with an Associate's degree in Information Technology, Management Information Systems or related field; or
- B) Any equivalent combination of experience and training which provides the minimum knowledge, abilities and skills.

Hay Evaluation:

CI1	115
C2 (19%)	22
CNII	<u>29</u>
	166

Pay Grade-H



Eloy S. Lizama
Chairman, Board of Trustees

1/19/17

Date

HOSPITAL INFORMATION TECHNOLOGY ADMINISTRATOR

NATURE OF WORK IN THIS CLASS:

This position provides vision and leadership in developing, designing and implementing Information Technology (IT) initiatives and directs the planning, implementation and managerial oversight of Hospital IT systems in support of business operations improve upon cost effectiveness, services, quality, business development, and security of information and systems.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Administer the Hospital's Management Information Systems (MIS) Department and personnel and resources in order to provide hospital-wide Information Technology management support and services. Healthcare Information Technology and Advanced Patient Care Systems support and services, Data Processing Operations and Database Management services, systems analysis and programming services. Local Area Networking and Database security services, webpage management services, and help end user services and support to more than 620 hospital end users and business associated 24 hours, 7 days a week.

Participate in hospital strategic and operational governance processes of the business organization as a member of the management team. Formulate and deploy long-term strategic plans for acquiring and enabling efficient and cost-effective information processing and communication technologies.

Lead Information Technology strategic and operational planning to achieve Hospital goals by fostering innovation, prioritizing Information Technology initiatives, and coordinating the evaluations, deployment, and management of current and future Information Technology systems across the organization. Manage Information Technology department operational and strategic planning, including business requirements, project planning, and organizing and negotiating the allocation of resources.

Develop and maintain an appropriate Information Technology organizational structure that supports the needs of the Hospital.

Establish Information Technology departmental goals, objectives, operating and security policies and procedures.

Act as an advocate for the Hospital's Information Technology vision via regular written and in-person communications with the organization's executives, department heads and end users.

Identify opportunities for the appropriate and cost-effective investments of financial resources in Information Technology systems and resources, including staffing, sourcing, purchasing and in-house development.

Develop, track and control the information technology annual operating and capital budgets.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of functions and capabilities of information technology processing.

Knowledge of functions and capabilities of Hospital and Health Care Information Technology processing.

Knowledge of the principles, practices and techniques of computer programming and systems analysis.

Knowledge of the principles and techniques of computer programming and systems analysis.

Knowledge of the principles, practices and techniques of HIPAA Privacy and Security.

Ability to administer electronic data processing systems and activities.

Ability to administer electronic Health Level Seven (HL7) and Protected Health Information (PHI).

Ability to evaluate systems and processes and recommend adapting to cost savings electronic data processing techniques to improve program effectiveness.

Ability to make decisions in accordance with appropriate program guidelines.

Ability to interpret and apply pertinent laws, regulations and other program guidelines.

Ability to prepare cost estimate information for computer services.

Ability to work effectively, orally and in writing.

Skilled in systems design and data processing.

Skilled in supervision, planning, budget forecasting, project management, job scheduling, and personnel productivity.

MINIMUM EXPERIENCE AND TRAINING:

- A) Four (4) years of progressively responsible experience in computer systems programming and analysis work, two years of managerial experience and graduation from a recognized college or

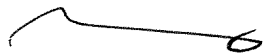
university with a Master's degree in Computer Science, Management Information Systems, or related field; or

- B) Five (5) years of progressively responsible experience in computer systems programming and analysis work, two years of managerial experience and graduation from a recognized college or university with a Bachelor's degree in Computer Science, Management Information Systems or related field; or
- C) Eight (8) years of progressively responsible experience in computer systems programming and analysis work, including two years of supervisory experience and graduation from High School or completion of a General Equivalent Diploma (GED) program.

Hay Evaluation:

E+II3	304
E4 (43%)	132
E1P	<u>152</u>
	588

Pay Grade: Q



Eloy S. Lizama
Chairman, Board of Trustees

1/19/17
Date



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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FAX: (671) 649-0145

BOARD OF TRUSTEES Official Resolution No. 2017-21

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Aaron Johansen, MD.	Emergency Med.	Emergency Med.	January 31, 2019
Seung Huh, MD.	Emergency Med.	Emergency Med.	January 31, 2019
Gene McColgin, MD.	Emergency Med.	Emergency Med.	January 31, 2019
Esther Park-Hwang, MD.	Ob/Gyn	Ob/Gyn	January 31, 2019
Milliecor Fojas, MD.	Pediatrics	Pediatrics	January 31, 2019
Tim Arakawa, MD.	Medicine	Endocrinology	January 31, 2019
Chen Huang, MD.	Medicine	Hema/Oncology	January 31, 2019
Qi Chen, MD.	Radiology.	Radiology	January 31, 2019

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on January 25, 2017 and the Joint Conference and Professional Affairs Committee on February 20, 2017 recommended approval of Active Medical Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 23rd DAY OF FEBRUARY 2017.

Certified by:

Eloy S. Lizama

Chairman, Board of Trustees

Attested by:

Melissa Waibel

Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-22

“RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Eric LeVeen, MD.	Surgery	General Surgery	January 31, 2018
Michael Lee, MD.	Emergency Med.	Emergency Med.	January 31, 2018
Ratchnee France, MD.	Emergency Med.	Emergency Med.	January 31, 2018
Alexandra Jacob, MD.	Pediatrics	Pediatrics	January 31, 2018
Brinda Rengaraju, MD.	Medicine	Internal Medicine	January 31, 2018
Rengaraju Ramasamy, MD.	Medicine	Internal Medicine	January 31, 2018
Marcin Czerniakow, MD.	Medicine	Internal Medicine	January 31, 2018
Brigido Legaspi, MD.	Medicine	Internal Medicine	January 31, 2018

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.3; and

WHEREAS, the Medical Executive Committee on January 25, 2017 and the Joint Conference and Professional Affairs Committee on February 20, 2017, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioners; and

WHEREAS, all reappointments to Provisional Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 23rd DAY OF FEBRUARY 2017.

Certified by:

Attested by:

Eloy S. Lizama
Chairman, Board of Trustees

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-23

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE ASSOCIATE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Marlon Ramilo, MD	Medicine	Cardiology	January 31, 2019

WHEREAS, the above listed practitioners met the basic requirements for Active Associate Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.6; and

WHEREAS, the Medical Executive Committee on January 25, 2017 and the Joint Conference and Professional Affairs Committee on February 20, 2017 recommended approval of Active Associate Medical Staff Membership reappointment for the above listed practitioner; and

WHEREAS, all reappointments to Active Associate Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Associate Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 23rd DAY OF FEBRAURY 2017.

Certified by:

Attested by:

Eloy S. Lizama
Chairman, Board of Trustees

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-24

“RELATIVE TO THE CREATION OF THE HOSPITAL MEDICAL STAFF SUPERVISOR AND AMENDMENT OF THE HOSPITAL CREDENTIALS COORDINATOR POSITIONS”

WHEREAS, the current incumbent is in a position that is not properly classified and thus does not depict the duties and responsibilities of the new position, Hospital Medical Staff Office Supervisor; and

WHEREAS, due to the creation of the Hospital Medical Staff Office Supervisor position changes to the Hospital Credentials Coordinator position is necessary; and

WHEREAS, the changes and the creation of the Hospital Medical Staff Office Supervisor position will properly align the positions within the Medical Staff Office; and

WHEREAS, with the creation of the Hospital Medical Staff Office Supervisor position, the incumbent will be reclassified into the position provided the minimum qualification requirements are met. As for the Hospital Credentials Coordinator, there is no impact on the incumbent of the position; and

WHEREAS, the provisions of §6303.1, Chapter 6, Title 4 of the Guam Code Annotated have been met and no comments from the public were received; and

WHEREAS, the Board of Trustees Human Resources Subcommittee on January 17, 2017 recommended approval of the creation of the Hospital Medical Staff Office Supervisor position and the amendment of the Hospital Credentials Coordinator, now, therefore be it

RESOLVED, that the Board of Trustees accepts the recommendation of the Board of Trustees Human Resources Subcommittee and approves the creation of the Hospital Medical Staff Office Supervisor position and the amendment of the Hospital Credentials Coordinator position; and, be it further

RESOLVED, that the Hospital Administrator/CEO is directed to initiate the administrative processes to bring to fruition the utilization of this position; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 23rd DAY OF FEBRUARY 2017.

Certified by:

Eloy S. Lizama
Chairman, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees

Hospital Medical Staff Office Supervisor

NATURE OF WORK:

Plans, organizes and controls the functions within the Medical Staff Office to provide assistance to the medical staff which enables them to fulfill their duties as outlined in the Medical Staff Bylaws, Rules and Regulations. This position reports to the Associate Administrator Medical Services.

ILLUSTRATIVE EXAMPLES OF WORK:

Oversees and ensures that Medical Staff and Allied Health credentialing and reappointment process is performed according to established procedures and in compliance with Medical Staff Bylaws and Rules and Regulations, JCAHO standards, and state and federal law.

Maintains primary responsibilities for the direction and coordination of all medical staff support services, monitoring functions, credentialing, re-credentialing, privileging, peer review, ongoing professional practice evaluations and medical education.

Assures compliance with regulatory and accreditation requirements; federal and local requirements; and CMS and Joint Commission standards; and identifies areas of non-compliance to medical staff and administrative leadership.

Identifies need for changes to medical staff bylaws, rules and regulations, and departmental rules and regulations or to current practices in order to assure compliance. Advises medical staff leadership on matters pertaining to these documents.

Coordinates, arranges, and attends medical staff department and Committee/Executive meetings. Maintain close communication with Medical Staff Officers and Department Chairpersons to insure expeditious follow-through of actions and changes that were approved.

Assures that medical staff meetings are appropriately staffed and content of meetings meet regulatory and accreditation requirements.

Develop and oversees the processes and timely performance of the Focused Professional Practice Evaluations and Ongoing Professional Practice Evaluations and works with the Education Department regarding training for Physicians and prepares improvement plans.

Serves as a liaison between Medical Staff and the Hospital's executive management, alerting both to opportunities for improvement or hospital/physician issues that need to be addressed.

Supervises the establishment and maintenance of a complete credentials file for each applicant and member of the Medical Staff and Allied Health Staff.

Assists with identifying, analyzing and responding to physician concerns, implementing strategies to enhance communications with physicians and other health care providers.

Acts as system administrator for Healthstream ECHO Medical staff Database.

Supervises preparation of applications for review by Credentials Committee.

Manages and supervises credentials and administrative support staff.

Responsible for creation and oversight of the GMH House Call/Consultation schedule.

Participate in Quality Improvement (QI) activities and assist in the formulation of QI indicators.

Identifies need for revisions and additions to Medical Staff documentation through knowledge of regulatory standards and requirements and Hospital requirements and brings them to the attention of the Hospital and Medical Staff Director.

Responsible for assisting in the development and maintenance of a close working relationship between the medical staff and administration to provide unity of purpose in the accomplishment of short and long-range goals.

Recognizes legal implications of committee and department actions regarding medical staff membership and/or privileging, quality improvement or risk management issues and brings to the attention of the Hospital Administrator and/or Chief of Staff.

Assists the Medical Staff Director and President Elect; prepares reports and coordinates preparation of agenda items for Committee meetings.

Prepares and monitors the annual Medical Staff Office budget.

Serves as a resource during medical staff committee meetings.

Responsible for orientation and training of all medical staff office personnel.

Prepares and submits reports regarding departmental activity.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge and understanding of the mission statement of Guam Memorial Hospital.

Knowledge of accreditation standards, medicolegal issues, medical terminology, state and federal regulations, management and supervision, medical organization and medical staff and department bylaws, rules and regulations, credentialing procedures, hospital policies and procedures.

Knowledge of all applicable regulatory and accreditation requirements, including federal and state requirements and Joint Commission standards.

Knowledge of Joint Commission and Centers for Medicare and Medicaid Services requirements.

Knowledge and ability to prepare and review budgets.

Knowledge of computer usage.

Ability to analyze and handle administrative details, schedule and plan the work of others, and anticipate secretarial/administrative needs.

Ability to supervise the work of others.

Ability to deal effectively and tactfully with various levels of hospital personnel and the Medical Staff.

Ability to make decisions in accordance with appropriate program guidelines.

Ability to interpret and apply pertinent laws, regulations and other program guidelines.

Ability to work effectively with the public and employees.

Ability to communicate effectively, orally and in writing.

MINIMUM EXPERIENCE AND TRAINING:

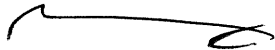
- (A) Two (2) years of progressively responsible experience in medical staff credentialing and graduation from a recognized college or university with Bachelor's degree in Public Administration, Business Administration or related field; or
- (B) Three (3) years of progressively responsible experience in hospital office experience and two (2) years of supervisory experience and graduation from high school; or
- (C) Any equivalent combination of experience and training which provides the minimum knowledge, abilities and skills.

Established: FEBRUARY 2017

JOB EVALUATION:

Know How:	EI3	175
Problem Solving:	D3 (33%)	66
Accountability:	D2C	76
Total Points:		317
Pay Grade:	L	

Approved:



Eloy S. Lizama
Chairman, Board of Trustees

Date: 2/23/17

Hospital Credentials Coordinator

NATURE OF WORK IN THIS CLASS

This is highly responsible work in coordinating and providing support of Medical Staff and Allied Health Care Professional credentialing including the processing of new applications, request for temporary privileges, proctoring of new members and biennial reappointments.

An employee in this class reports to the Hospital Medical Staff Office Supervisor.

ILLUSTRATIVE EXAMPLES OF WORK (Any one position may not include all the duties listed, nor do the examples cover all duties which may be performed).

Processes all medical staff credentialing and re-credentialing/privileging documents in accordance with Medical Staff Bylaws, rules and regulations, Joint Commission and CMS standards, and hospital policy and procedures.

Obtains required primary verification and schedules interviews as requested by appropriate department Chairs.

Maintains current medical staff credential and committee files; and prepares status reports for the Credentials Committee.

Maintains individual files for all medical staff members and allied health professionals regarding citizenship and professional conduct issues.

Prepares reports as requested by medical staff leadership and/or hospital administration.

Provides staff support to credentials committee to which she/he has been assigned including correspondence, staffing and scheduling of meetings, agenda preparation, minutes recording, follow up, and interdepartmental communication.

Establishes and maintains effective working relationships with personnel throughout the hospital and community (administration, officers of the medical staff, department/committee chairpersons, and quality assurance reviewers, nursing staff, physicians' office staff and representative from outside agencies).

Works on and maintains ECHO computerized credentialing system. Prepares and maintains up-to-date medical staff and allied health professionals roster to include addresses, telephone numbers, and specialty and staff status; distributes same to appropriate departments.

Performs other related duties as assigned.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS

Knowledge of politically and legally sensitive issues and hospital organizational structure and protocol.

Knowledge of computers, data entry, retrieval and report formatting.

0.209

Ability to work effectively, to interface and communicate in an articulate manner with medical staff and administrators.

Ability to maintain confidentiality.

Ability to record and transcribe minutes.

Ability to maintain records and prepare reports.

Ability to communicate effectively, both orally and in writing.

MINIMUM EXPERIENCE AND TRAINING

- A) One year of hospital credentialing experience; one year of administrative/secretarial experience; graduation from a two year business school or two years of college education with courses in administrative/business or related field and graduation from high school; or
- B) Four (4) years of administrative/secretarial experience and graduation from high school; or
- C) Any equivalent combination of experience and training which provides the minimum knowledge, abilities and skills.

Established: OCTOBER 1991

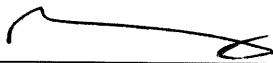
Amended: FEBRUARY 2017

JOB EVALUATION:

Know How:	DI2	132
Problem Solving:	C3 (25%)	33
Accountability:	C1C	43
Total Points:		208

Pay Grade: I

Approved:



Eloy S. Lizama
Chairman, Board of Trustees

Date: 2/23/17



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BOARD OF TRUSTEES Official Resolution No. 2017-25

“RELATIVE TO APPROVING FORTY-SIX (46) NEW FEES AND UPDATING EIGHT THOUSAND FIVE HUNDRED FIFTEEN (8,515) PROFESSIONAL FEES”

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on February 24, 2017 and oral comments and written testimony have been solicited regarding the forty-six (46) new fees relating to the following Hospital departments: Intensive Care Unit, Radiology, Pharmacy, Respiratory and Special Services; and

WHEREAS, a Public Hearing was also held to update Eight Thousand Five Hundred Fifteen (8,515) Professional Fees; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and the updated professional fees and found the same to be in order; and

WHEREAS, a call for an e-mail vote of the GMHA Board of Trustees was conducted on March 29, 2017 with a deadline to respond by March 31, 2017, and approval was returned unanimously; now, therefore be it

RESOLVED, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to continue to proceed with the adjudication process of these forty-six (46) new fee items and the updated eight thousand five hundred fifteen (8,515) professional fees; and, be it further

RESOLVED, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

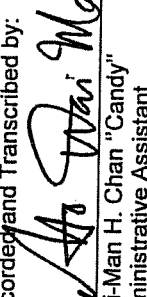
Attested By:


Eloy S. Lizama
Chairman, Board of Trustees

Melissa Waibel
Secretary, Board of Trustees

AGENDA		DISCUSSION / RESPONSES		ATTENDANCE	
<p>GUAM MEMORIAL HOSPITAL AUTHORITY PUBLIC HEARING ON HOSPITAL FEES Friday, February 24, 2017 @ 2:30 P.M. DL Webb Conference Room</p>				<p>Present: Edward Birm, Assistant Chief Financial Officer/ Presiding Hearing Officer Frumen Patacsil, Hospital QI Specialist Dr. Nicole Dhanraj, Chief of Radiology Jason Boyd, Chief Hospital Pharmacist Belle Rada, Hospital Unit Supervisor Walfredo Santos, Hospital UR Specialist</p>	<p>Guests Present: Refer to attached Attendance Sheet</p>
I.	Introduction	Mr. Edward Birm introduced himself at the public hearing as the Assistant Chief Financial Officer and the Presiding Hearing Officer for this public hearing and announced the commencement of this public hearing at 2:35 p.m.			Informational
II.	Opening Remarks	On behalf of the GMHA Board of Trustees, the Hospital Administrator/CEO, the Chief Financial Officer and the GMHA employees, Mr. Birm welcomed the attendees at this public hearing. He indicated that we would follow the agenda and the public would be given an opportunity to ask questions later.			Informational
III.	Purpose of the Public Hearing	Mr. Birm cited the enactment of Public Law 29-02, Chapter V, Part IX, Section 2, §3131 on May 18, 2007, that all government departments and agencies shall conduct a public hearing, on an annual basis prior to April 1, on existing fee schedules and shall regularly adjust existing fees, pursuant to the Administrative Adjudication Act, or implement new fees for the purpose of cost recovery. Mr. Birm also cited the enactment of Public Law 26-66 in December 2001 that removed the rate-setting jurisdiction from the PUC and gave it to the GMHA Board of Trustees. He also cited the Guam Code Annotated 10GCA §80109 that gave the authority to the Hospital to set its rates. In compliance with the Administrative Adjudication Law and further Guam Code Annotated directives, the Hospital did publish in the Guam Daily Post the announcement of this public hearing. The Hospital also sent the notice of this public hearing via facsimiles and electronic mails to various news media organizations, the Governor's Office, the Congresswoman, and to our elected Senators of the 34 th Guam Legislature. In addition, letters were sent to the third party payers via electronic mails inviting them to this public hearing. The Hospital also posted the Notice of Public Hearing, the list of new fee items, the updated Professional Fee Schedule and the existing fee schedule on its official website as mandated by public law.			Informational

<p>IV. Presentation of Proposed New Fees</p>	<p>Mr. Patacsil introduced himself being in charge of the Hospital Charge Library. He presented at this public hearing a total of 8,615 existing Hospital fees, which were already adjudicated by the Legislature. Due to the volume of the existing fee schedule, we were unable to prepare copies for all attendees. The fee schedule is available on our website at www.gmha.org under Patient Portal – GMHA Fee Schedule. It is in PDF format and may be downloaded.</p> <p>Mr. Patacsil then proceeded to present the 46 new fee items. These new fee items were submitted by different hospital departments from December 2016 to February 2017. The summary of these new fee items were as follows:</p> <table border="1" data-bbox="470 609 682 882"> <thead> <tr> <th>Fee Items</th> <th>Departments</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>7</td> <td>Intensive Care Unit</td> <td>Supplies</td> </tr> <tr> <td>12</td> <td>Radiology</td> <td>Supplies</td> </tr> <tr> <td>4</td> <td>Pharmacy</td> <td>Pharmaceutical items</td> </tr> <tr> <td>3</td> <td>Respiratory</td> <td>Supplies</td> </tr> <tr> <td>20</td> <td>Special Services</td> <td>Supplies</td> </tr> <tr> <td colspan="3">TOTAL: 46 New Fee Items</td> </tr> </tbody> </table> <p>In addition, we also updated 8,515 professional fees, which are available on our website under Patient Portal – GMHA Professional Fee Schedule.</p>	Fee Items	Departments	Description	7	Intensive Care Unit	Supplies	12	Radiology	Supplies	4	Pharmacy	Pharmaceutical items	3	Respiratory	Supplies	20	Special Services	Supplies	TOTAL: 46 New Fee Items			<p>Informational</p> <p>(Refer to list of new fees provided at the public hearing)</p>
Fee Items	Departments	Description																					
7	Intensive Care Unit	Supplies																					
12	Radiology	Supplies																					
4	Pharmacy	Pharmaceutical items																					
3	Respiratory	Supplies																					
20	Special Services	Supplies																					
TOTAL: 46 New Fee Items																							
<p>V. Testimonies from the Public</p>	<p>Mr. Birm noted that no attendees from the public at this public hearing had signed up for testimony.</p>	<p>Informational</p>																					
<p>VI. Questions and Answers on Proposed Fees</p>	<p>He stated that the public could submit a written testimony to the Hospital Administrator/CEO within five (5) days after this public hearing. These testimonies would be incorporated into the submission package to the 34th Guam Legislature.</p>	<p>Informational</p>																					
<p>VII. Closing Remarks</p>	<p>Mr. Birm commenced soliciting from the attendees for any questions they might have concerning the fees presented. It was noted that there were no questions from the attendees present at the public hearing.</p>	<p>Informational</p>																					
<p>VIII. Adjournment</p>	<p>Mr. Birm thanked everyone for making their time to attend this public hearing. The next public hearing will be scheduled in the next quarter.</p> <p>The public hearing was adjourned at 2:42 p.m.</p>	<p>Informational</p>																					

Recorded and Transcribed by:

 Wai-Man H. Chan "Candy"
 Administrative Assistant

Approved by:

 Edward M. Birm
 Assistant Chief Financial Officer
 Presiding Hearing Officer

3/13/17
 Date



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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PUBLIC HEARING HOSPITAL NEW RATES, FEES AND CHARGES

Friday, February 24, 2017
GMHA Daniel L. Webb Conference Room
2:30 p.m.

Attendance Sheet

NO.	NAME	ORGANIZATION	CONTACT NO.
1	Candy Chan	GMHA Fiscal	648-7958
2	Frumen Patasio	GMHA Fiscal	6487945
3	Walfredo Sandoz	GMHA Fiscal	648 7967
4	JASON BOYD	GMM PR	x2254
5	N. Sharij	Rad	2177
6	Gary Partida	Sen. Espaldon	727-3639
7	Belle Kade	GMHA - Prog Support	647-2488
8	Edward M. Sui	GMHA Fiscal	647-2342
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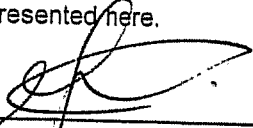
GUAM MEMORIAL HOSPITAL AUTHORITY
SUMMARY OF NEW FEE ITEMS/SERVICES
for Submission to the 34th Guam Legislature
Public Hearing on February 24, 2017

NO	CHARGE CODE	DESCRIPTION	FEE MODEL RATE	DEPARTMENT
1	17-02054	SET CATH RADIAL ART 3FR 5CM	\$ 151.46	INTENSIVE CARE UNIT
2	17-04891	SET CHEST TUBE T-Q 16FR 14CM	\$ 620.69	INTENSIVE CARE UNIT
3	17-05154	TRAY CATHETER CV 5-LUMEN	\$ 675.72	INTENSIVE CARE UNIT
4	17-05948	SET MONITORING FEM/AORTIC	\$ 151.46	INTENSIVE CARE UNIT
5	17-23646	INTRODUCER INTUBATE 14FR 65CM	\$ 433.79	INTENSIVE CARE UNIT
6	17-53177	TRAY INTRO TRACHEO 5FR 29CM	\$ 853.86	INTENSIVE CARE UNIT
7	17-56535	SET PNEUMOTHORAX 14FR 29CM	\$ 673.42	INTENSIVE CARE UNIT
8	21-02972	SET INTRO MICROPUNCT 4FR G02972	\$ 417.15	RADIOLOGY
9	21-20605	ARTHROCENTESIS, INTRMD, W/O US	\$ 231.00	RADIOLOGY
10	21-27045	CATH BER 5FR 65CM 11722704	\$ 333.33	RADIOLOGY
11	21-30933	CATH BAL PTA4-18-150-2-4 30933	\$ 810.50	RADIOLOGY
12	21-34319	CATH BAL PTA4-18-150-3-4 34319	\$ 810.50	RADIOLOGY
13	21-34321	CATH BAL PTA4-18-150-3-8 34321	\$ 810.50	RADIOLOGY
14	21-35015	CATH BER 4FR 100CM 11723501	\$ 333.33	RADIOLOGY
15	21-55045	CATH MPA 5FR 100CM 10735504	\$ 139.04	RADIOLOGY
16	21-56015	CATH MPA 5FR 65CM 10735601	\$ 139.04	RADIOLOGY
17	21-96065	CATH SW1 5FR 100CM 10719606	\$ 114.28	RADIOLOGY
18	21-96075	CATH SW2 5FR 100CM 10719607	\$ 114.28	RADIOLOGY
19	21-98035	CATH PIG 5FR 100CM 13709803	\$ 651.37	RADIOLOGY
20	42-00471	DEXMEDETOMIDINE 400MCG/100ML P	\$ 220.06	PHARMACY
21	42-20102	ISOVUE 370-76% 100ML BTL	\$ 29.42	PHARMACY
22	42-33080	SUBOXONE 2MG/0.5MG TABLET	\$ 7.83	PHARMACY
23	42-33081	SUBOXONE 8MG/2MG TABLET	\$ 10.27	PHARMACY
24	53-38241	MASK CPAP FULL FACE-MED	\$ 619.00	RESPIRATORY
25	53-38242	MASK CPAP FULL FACE-SML	\$ 619.00	RESPIRATORY
26	53-38243	MASK CPAP FULL FACE-LGE	\$ 619.00	RESPIRATORY
27	93-08351	CATHETER JL4 6FR 0.38X100CM	\$ 67.53	SPECIAL SERVICES
28	93-08352	CATHETER JR4 6FR 0.38X100CM	\$ 67.53	SPECIAL SERVICES
29	93-10024	RADIAL TR BAND 24 W/ INFLATOR	\$ 293.08	SPECIAL SERVICES
30	93-10025	RADIAL TR BAND 29 W/ INFLATOR	\$ 293.08	SPECIAL SERVICES
31	93-10510	GLIDESHEATH SLENDER 6FR	\$ 636.56	SPECIAL SERVICES
32	93-24501	MULTIPACK CARDIAC 6FR 5-0.038"	\$ 362.51	SPECIAL SERVICES
33	93-33181	GLIDEWIRE STR .018"X150CMX3CM	\$ 371.24	SPECIAL SERVICES
34	93-33182	GLIDEWIRE ANG .018"X150CMX3CM	\$ 373.02	SPECIAL SERVICES
35	93-33184	GLIDEWIRE ST AN .018"X80CMX3CM	\$ 373.02	SPECIAL SERVICES
36	93-38103	CATHETER RCB 6FR .038X100CM	\$ 337.63	SPECIAL SERVICES
37	93-38124	CATHETER PIGTAIL 6FR 110CM	\$ 331.18	SPECIAL SERVICES

38	93-38163	CATHETER ANGIO WR 6FR 100CM	\$ 66.73	SPECIAL SERVICES
39	93-80941	CATHETER JL5 JUDKINS LT 100CM	\$ 202.76	SPECIAL SERVICES
40	93-81161	CATHETER JR5 JUDKINS RT 100CM	\$ 202.76	SPECIAL SERVICES
41	93-81211	CATH TIG RADIAL 6FR 100CM	\$ 293.08	SPECIAL SERVICES
42	93-81212	CATH JACKY RADIAL 6FR 100CM	\$ 293.08	SPECIAL SERVICES
43	93-81213	CATH AMPLATZ LT SML AL1 100CM	\$ 202.76	SPECIAL SERVICES
44	93-81214	CATH AMPLATZ LT MED AL2 100CM	\$ 202.76	SPECIAL SERVICES
45	93-81241	CATHETER PIGTAIL STR 6FR 100CM	\$ 202.76	SPECIAL SERVICES
46	93-81242	CATHETER PIGTAIL ANG 6FR 100CM	\$ 202.76	SPECIAL SERVICES

*****LAST ITEM*****

I certify that this listing of items comprises all fees required by law for submission at this time to be complete as presented here.




Frumen A. Patacsil
Hospital Quality Improvement Specialist

2/13/17
Date

1st Endorsement of Concurrence:

I concur and further certify that this listing of items are exempted under Section 9301(i) to Article 3, Chapter 9, Division 1 of Title 5 of the Guam Code Annotated and in compliance with Title 10 GCA Part 2 Division 4 Chapter 80 §80109



Benita A. Manglona
Chief Financial Officer

2/13/17
Date

2/13/17



Guam Memorial Hospital Authority
Aturidåt Espetåt Mimuriåt Guåhan

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FAX: (671) 649-0145



PUBLIC HEARING
HOSPITAL NEW RATES, FEES AND CHARGES

Friday, February 24, 2017
GMHA Daniel L. Webb Conference Room
2:30 p.m.

AGENDA

- I. Introduction of Public, GMHA Management and Staff
- II. Opening Remarks
- III. Purpose of the Public Hearing
- IV. Presentation of Fees
- V. Testimonies from the Public
- VI. Questions and Answers on Fees
- VII. Closing Remarks by the Presiding Hearing Officer
- VIII. Adjournment

Thank You For Your Active Participation



Guam Memorial Hospital Authority

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PRESS RELEASE

FOR IMMEDIATE RELEASE – February 14, 2017

NOTICE OF PUBLIC HEARING

As mandated by Public Law 29-02, Chapter V, Part IX, Section 2, §3131, NOTICE IS HEREBY GIVEN that Guam Memorial Hospital Authority (GMHA) will be conducting a Public Hearing on existing hospital rates, fees, and charges. GMHA will also include the annual update of its professional fees in this public hearing. Documents relating to this proceeding are available on our website at www.gmha.org under Patient Portal – GMHA Fee Schedule.

Pursuant to Public Law 26-66, GMHA will also introduce at this public hearing the hospital's new rates, fees, and charges. Documents relating to this proceeding are available on our website at www.gmha.org under Public Information - GMHA Press Release – GMHA Public Hearing. Should you have any questions, please feel free to contact *Mr. Frumen Patacsil*, Hospital Quality Improvement Specialist at 648-7945 or *Ms. Benita A. Manglona*, Chief Financial Officer at 647-2367.

Date: Friday, February 24, 2017
Time: 2:30 p.m.
Place: GMHA Daniel L. Webb Conference Room, 1st Floor, Administration Wing, 850 Gov Carlos Camacho Road, Oka Tamuning, Guam.

Individuals requiring special accommodations should contact Toni Tenorio, ADA Coordinator, at 647-2218/2418 to make appropriate arrangements.

DISTRIBUTION:

Board of Trustees
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GMHA President of the Medical Staff
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BOARD OF TRUSTEES Official Resolution No. 2017-26

“RELATIVE TO CORRECTING ACCOUNTS RECEIVABLE TO REFLECT ACTIVE BALANCES”

WHEREAS, the Guam Memorial Hospital Authority (“the Hospital”) is a public corporation and an autonomous instrumentality of the Government of Guam; and

WHEREAS, the Hospital’s financial records as of September 30, 2016 show \$309,033,736 (Three hundred nine million thirty-three thousand seven hundred thirty-Six Dollars) receivable from government, insurer and self-pay entities; and

WHEREAS, the Hospital has not been consistent in applying the accounts receivable allowance when collection from government, insurer or patient is deemed unlikely; and

WHEREAS, the Hospital staff have reviewed the accounts receivable as of September 30, 2016 and are recommending approximately \$220 million (Two hundred twenty million) of doubtful accounts receivable as found in Appendix A be removed from the Hospital’s detailed accounts receivable trial balance; and

WHEREAS, a call for an e-mail vote of the GMHA Board of Trustees was conducted on March 29, 2017 with a deadline to respond by March 31, 2017, and approval was returned unanimously; now, therefore be it


RESOLVED, that the Board of Trustees hereby approves that the Hospital authorize the Chief Financial Officer to apply the allowance to the balances in the detailed trial balance; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this resolution.

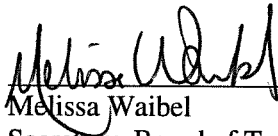
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Attested By:



Eloy S. Lizama
Chairman, Board of Trustees



Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-27

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Michael W. Cruz, MD.	Surgery	General Surgery	March 31, 2019
Ricardo B. Eusebio, MD.	Surgery	General Surgery	March 31, 2019
Glenn Cunningham, MD.	Surgery	Orthopedic Surgery	March 31, 2019

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on March 22, 2017 and the Joint Conference and Professional Affairs Committee on April 6, 2017 recommended approval of Active Medical Staff Membership reappointment for the above listed practitioner; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it


RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

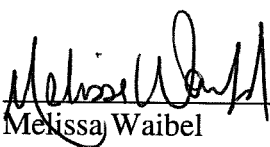
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified by:



Eloy S. Lizama
Chairman, Board of Trustees

Attested by:



Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-28

“RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Linh Tieu, DO	Pediatrics	Pediatrics	March 31, 2018
Anu Vijayakumar, MD	Medicine	Internal Medicine	March 31, 2018

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.3; and

WHEREAS, the Medical Executive Committee on March 22, 2017 and the Joint Conference and Professional Affairs Committee on April 6, 2017, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Provisional Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Provisional Medical Staff as recommended; and, be it further


RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

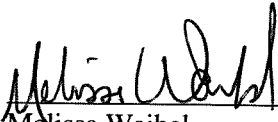
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified by:

Attested by:



Eloy S. Lizama
Chairman, Board of Trustees



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-29

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE ASSOCIATE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
James W. Murphy, MD.	Emergency Med.	Emergency Med.	March 31, 2019

WHEREAS, the above listed practitioners met the basic requirements for Active Associate Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.6; and

WHEREAS, the Medical Executive Committee on March 22, 2017 and the Joint Conference and Professional Affairs Committee on April 6, 2017 recommended approval of Active Medical Staff Membership reappointment for the above listed practitioner; and

WHEREAS, all appointments to Active Associate Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Active Associate Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified by:

Eloy S. Lizama
Chairman, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-30

“RELATIVE TO COMMENDING NERISSA G. AGAG FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with NERISSA G. AGAG who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at GMHA in the position of a Medical Equipment Technician, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, the Board of Trustees does extend its recognition and gratitude to NERISSA G. AGAG on the occasion of her retirement, and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to NERISSA G. AGAG and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-31

“RELATIVE TO COMMENDING MOHAMMAD T. ASHRAF FOR HIS DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout his employment at the Guam Memorial Hospital Authority (GMHA), he dedicated himself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with MOHAMMAD T. ASHRAF who showed integrity whenever he worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since his employment at GMHA in the position of Accounting Technician I, his duties were conducted with commitment, pride and loyalty; and

WHEREAS, the Board of Trustees does extend its recognition and gratitude to MOHAMMAD T. ASHRAF on the occasion of his retirement, and best wishes to his family and does hope he will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to MOHAMMAD T. ASHRAF and a copy shall be placed in his personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-32

“RELATIVE TO COMMENDING FRANCES G. BROWN FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with FRANCES G. BROWN who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Hospital Rehabilitation Technician I, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to FRANCES G. BROWN on the occasion of her retirement; and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to FRANCES G. BROWN and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

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BOARD OF TRUSTEES Official Resolution No. 2017-33

“RELATIVE TO COMMENDING ELEUTERIO V. CAMAT FOR HIS DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout his employment at the Guam Memorial Hospital Authority (GMHA), he dedicated himself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with ELEUTERIO V. CAMAT who showed integrity whenever he worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since his employment at Guam Memorial Hospital Authority in the position of an Emergency Room Technician, his duties were conducted with commitment, pride and loyalty; and


WHEREAS, that the Board of Trustees does extend its recognition and gratitude to ELEUTERIO V. CAMAT on the occasion of his retirement and best wishes to his family and does hope he will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to ELEUTERIO V. CAMAT and a copy shall be placed in his personnel file.

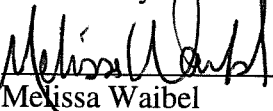
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:



Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:



Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

850 GOV. CARLOS CAMACHO ROAD
OKA, TAMUNING, GUAM 96913
TEL: (671) 647-2444 or 647-2330
FAX: (671) 649-0145

BOARD OF TRUSTEES Official Resolution No. 2017-34

“RELATIVE TO COMMENDING NIDA V. CASTRO FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with NIDA V. CASTRO who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Ward Clerk, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to NIDA V. CASTRO on the occasion of her retirement, and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to NIDA V. CASTRO and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-35

“RELATIVE TO COMMENDING LYN P. CERIA FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with LYN P. CERIA who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Medical Laboratory Technician II, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to LYN P. CERIA on the occasion of her retirement, and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to LYN P. CERIA and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-36

“RELATIVE TO COMMENDING DORIS JEAN A. CRUZ FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment.” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with DORIS JEAN A. CRUZ who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of an Accounting Technician Supervisor, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to DORIS JEAN A. CRUZ on the occasion of her retirement and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to DORIS JEAN A. CRUZ and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-37

“RELATIVE TO COMMENDING PERLITA E. CRUZ FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with PERLITA E. CRUZ who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Hospital Rehabilitation Technician III, her duties were conducted with commitment, pride and loyalty; and


WHEREAS, that the Board of Trustees does extend its recognition and gratitude to PERLITA E. CRUZ on the occasion of her retirement and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to PERLITA E. CRUZ and a copy shall be placed in her personnel file.

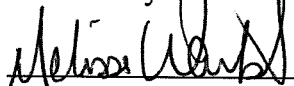
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:



Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:



Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-38

“RELATIVE TO COMMENDING LUZ C. DAVID FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with LUZ C. DAVID who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Hospital Licensed Practical Nurse I, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to LUZ C. DAVID on the occasion of her retirement and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to LUZ C. DAVID and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-39

“RELATIVE TO COMMENDING MERCEDITA I. ESTIRA FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with MERCEDITA I. ESTIRA who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Staff Nurse II, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to MERCEDITA I. ESTIRA on the occasion of her retirement and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to MERCEDITA I. ESTIRA and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

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BOARD OF TRUSTEES Official Resolution No. 2017-40

“RELATIVE TO COMMENDING ROWENA FUERTES FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with ROWENA FUERTES who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Staff Nurse II, her duties were conducted with commitment, pride and loyalty; and


WHEREAS, that the Board of Trustees does extend its recognition and gratitude to ROWENA FUERTES on the occasion of her retirement, and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to ROWENA FUERTES and a copy shall be placed in her personnel file.

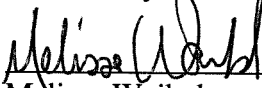
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:



Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-41

“RELATIVE TO COMMENDING ELEANOR M. NAUTA FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with ELEANOR M. NAUTA who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Staff Nurse II, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to ELEANOR M. NAUTA on the occasion of her retirement, and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to ELEANOR M. NAUTA and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

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TEL: (671) 647-2444 or 647-2330
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BOARD OF TRUSTEES Official Resolution No. 2017-42

“RELATIVE TO COMMENDING GREGORY C. PAULINO FOR HIS DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout his employment at the Guam Memorial Hospital Authority (GMHA), he dedicated himself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with GREGORY C. PAULINO who showed integrity whenever he worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since his employment at Guam Memorial Hospital Authority in the position of a Hospital Pharmacy Technician II, his duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to GREGORY C. PAULINO on the occasion of his retirement, and best wishes to his family and does hope he will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to GREGORY C. PAULINO and a copy shall be placed in his personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

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OKA, TAMUNING, GUAM 96913
TEL: (671) 647-2444 or 647-2330
FAX: (671) 649-0145

BOARD OF TRUSTEES Official Resolution No. 2017-43

“RELATIVE TO COMMENDING CECILIA C. QUITUGUA FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with CECILIA C. QUITUGUA who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Hospital Environmental Services Supervisor, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to CECILIA C. QUITUGUA on the occasion of her retirement, and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to CECILIA C. QUITUGUA and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

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TEL: (671) 647-2444 or 647-2330
FAX: (671) 649-0145

BOARD OF TRUSTEES Official Resolution No. 2017-44

“RELATIVE TO COMMENDING CHRISTINA L.B. QUITUGUA FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with CHRISTINA L.B. QUITUGUA who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Computer Operator Supervisor, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to CHRISTINA L.B. QUITUGUA on the occasion of her retirement, and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to CHRISTINA L.B. QUITUGUA and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

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BOARD OF TRUSTEES Official Resolution No. 2017-45

“RELATIVE TO COMMENDING VICENTE J. QUITUGUA FOR HIS DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout his employment at the Guam Memorial Hospital Authority (GMHA), he dedicated himself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with VICENTE J. QUITUGUA who showed integrity whenever he worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since his employment at Guam Memorial Hospital Authority in the position of a Guard, his duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to VICENTE J. QUITUGUA on the occasion of his retirement, and best wishes to his family and does hope he will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to VICENTE J. QUITUGUA and a copy shall be placed in his personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

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BOARD OF TRUSTEES Official Resolution No. 2017-46

“RELATIVE TO COMMENDING MARYLENE K. ROBANG FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with MARYLENE K. ROBANG who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Nurse Aide II, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to MARYLENE K. ROBANG on the occasion of her retirement, and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to MARYLENE K. ROBANG and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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TEL: (671) 647-2444 or 647-2330
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BOARD OF TRUSTEES Official Resolution No. 2017-47

“RELATIVE TO COMMENDING PATRICIA S. SANCHEZ FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with PATRICIA S. SANCHEZ who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Medical Records Clerk, her duties were conducted with commitment, pride and loyalty; and

WHEREAS, that the Board of Trustees does extend its recognition and gratitude to PATRICIA S. SANCHEZ on the occasion of her retirement, and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to PATRICIA S. SANCHEZ and a copy shall be placed in her personnel file.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-48

“RELATIVE TO COMMENDING SABINA I. TAIJERON FOR HER DEDICATION AND COMMITMENT TO THE GUAM MEMORIAL HOSPITAL AUTHORITY (GMHA)”

WHEREAS, throughout her employment at the Guam Memorial Hospital Authority (GMHA), she dedicated herself to meeting the hospital’s mission “To provide quality patient care in a safe environment,” and related services to the people of Guam; and

WHEREAS, the Authority is privileged to work with SABINA I. TAIJERON who showed integrity whenever she worked with the various customers ensuring that all needs, concerns and are in the best interest for the Authority and people of Guam we serve; and

WHEREAS, since her employment at Guam Memorial Hospital Authority in the position of a Staff Nurse II, her duties were conducted with commitment, pride and loyalty; and


WHEREAS, that the Board of Trustees does extend its recognition and gratitude to SABINA I. TAIJERON on the occasion of her retirement, and best wishes to her family and does hope she will enjoy many successes in the future; now, therefore be it

RESOLVED, that the Chairman certifies and the Secretary attests the adoption of this Resolution; and, be it further

RESOLVED, that thereafter shall be presented to SABINA I. TAIJERON and a copy shall be placed in her personnel file.

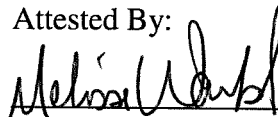
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:



Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:



Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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BOARD OF TRUSTEES Official Resolution No. 2017-49

“RELATIVE TO COMPLETING GMHA RFP NO. 001-2016, HOSPITAL ROOFTOP SOLAR PV PROJECT FUNDED BY THE DEPT. OF THE INTERIOR (DOI), OFFICE OF INSULAR AFFAIRS’ EMPOWERING INSULAR COMMUNITIES (EIC) GRANT PROGRAM, GUAM-EIC-2015-2”

WHEREAS, the GMHA’s hospital energy consumption averages 634,200 kilowatts per month and 7,610,400 kilowatts per annum, which translate to electric bills at the Guam Memorial Hospital averaging \$200,000 per month and \$2.4M per annum; and

WHEREAS, the GMHA recognized the importance and benefit of reducing its dependence on fossil fuel by utilizing alternate, renewable, more eco-friendly forms of energy generation infrastructure such as Solar PV Systems; and

WHEREAS, on May 13, 2015, the U.S. Dept. of the Interior (DOI), Office of Insular Affairs (OIA) Empowering Insular Communities (EIC) Grant Program, Guam-EIC-2015-2, awarded the GMHA a competitive grant in the amount of \$500,000 to procure and employ cost saving, energy efficiency measures at the Guam Memorial Hospital; and

WHEREAS, pursuant to the terms and conditions of the Grant, the GMHA decided, with the guidance and assistance of the DOI OIA and the National Renewable Energy Laboratory (NREL), that the EIC Grant Program Funds were best utilized to procure professional Design-Build Construction Services for the installation and commission of a Hospital Rooftop Solar Photovoltaic (PV) System, and other cost saving, energy efficiency measures at the Guam Memorial Hospital; and

WHEREAS, pursuant to the terms and conditions of the Grant, the GMHA collaborated with DOI OIA and NREL to develop a scope of work for the installation and commission of a Hospital Rooftop Solar Photovoltaic (PV) System, which was advertised as part of GMHA’s Request for Proposal (RFP) No. 001-2016 Hospital Rooftop Solar PV Project on May 6, 2016; and

WHEREAS, on September 7, 2016, after GMHA’s RFP Evaluation Committee completed its review, evaluation, and recommendation, the Hospital Administrator/CEO then selected the most qualified offeror to complete the Design-Build Construction Services under GMHA RFP No. 001-2016; and

WHEREAS, on September 20, 2016, the procurement was stayed before award due to an offeror’s protest; and

WHEREAS, on October 12, 2016, the stay was lifted after the offeror withdrew its protest; and

WHEREAS, after successful negotiation, a formal contract was executed by the most qualified offeror on January 6, 2017; and

WHEREAS, pursuant to the terms and conditions of the Grant, the GMHA collaborated with DOI OIA, NREL, and the Army Corps of Engineers to develop and obtain approval for GMHA's Record of Environmental Consideration (REC); and

WHEREAS, on January 13, 2017, the DOI OIA issued an Authorization to Proceed (ATP) with Design-Build Construction Services to the GMHA; indicating GMHA met all terms and conditions of the EIC Grant Program to date; and

WHEREAS, the GMHA submitted the formal contract for review to the Office of the Attorney General of Guam on January 23, 2017, and the complete RFP package on February 8, 2017; now, therefore be it

RESOLVED, that the GMHA Board of Trustees supports and fully approve GMHA RFP No. 001-2016 procurement of Design-Build Construction Services for the installation and commission of a Hospital Rooftop Solar Photovoltaic (PV) System; and, be it further


RESOLVED, that the Hospital Administrator/CEO is directed to utilize the EIC grant funds toward the prompt completion of the installation and commission of a Hospital Rooftop Solar Photovoltaic (PV) System; and, be it further

RESOLVED, that the Chairperson certifies and the Secretary attests to the adoption of this Resolution.

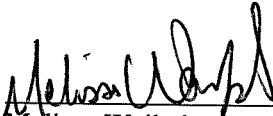
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified by:

Attested by:



Eloy S. Lizama
Chairman, Board of Trustees



Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

850 GOV. CARLOS CAMACHO ROAD
OKA, TAMUNING, GUAM 96913
TEL: (671) 647-2444 or 647-2330
FAX: (671) 649-0145

BOARD OF TRUSTEES Official Resolution No. 2017-50

“RELATIVE TO THE SIGNING OF A REMOTE DEPOSIT CAPTURE AGREEMENT WITH BANK OF GUAM”

WHEREAS, Guam Memorial Hospital Authority’s (GMHA) primary banking deposit account is maintained at the Bank of Guam; and


WHEREAS, GMHA desires to utilize hardware and software offered by Bank of Guam to deposit checks to its bank account by remote deposit; now, therefore be it

RESOLVED, the Hospital Administrator/CEO is authorized to sign Bank of Guam Remote Deposit Capture Agreement with Bank of Guam; and, be it further

RESOLVED, that the GMHA Board of Trustees certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

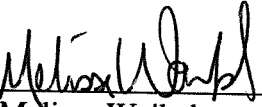
DULY AND REGULARLY ADOPTED ON THIS 1st DAY of JUNE 2017.

Certified by:



Eloy S. Lizama
Chairman, Board of Trustees

Attested by:



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-51

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Eugene De Guzman, M.D.	Medicine	Nephrology	April 30, 2019
Alix Chenet, M.D.	Medicine	Internal Medicine	April 30, 2019
Young Chang, M.D.	Medicine	Internal Medicine	April 30, 2019
Jeffrey Cruz, M.D.	Medicine	Internal Medicine	April 30, 2019
Kamala Thanapandian, M.D.	Ob/Gyn	Ob/Gyn	April 30, 2019

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on April 26, 2017 and the Joint Conference and Professional Affairs Committee on May 24, 2017 recommended approval of Active Medical Staff Membership reappointment for the above listed practitioner; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it


RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

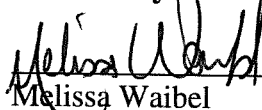
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified by:



Eloy S. Lizama
Chairman, Board of Trustees

Attested by:



Melissa Waibel
Secretary, Board of Trustees



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

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BOARD OF TRUSTEES Official Resolution No. 2017-52

“RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Miran Rabati, MD.	Radiology	Radiology	April 30, 2018

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.3; and

WHEREAS, the Medical Executive Committee on April 26, 2017 and the Joint Conference and Professional Affairs Committee on May 24, 2017, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Provisional Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Provisional Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all hospital and medical departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified by:

Attested by:

Eloy S. Lizama
Chairman, Board of Trustees

Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-53

“RELATIVE TO THE APPOINTMENT OF ACTIVE ASSOCIATE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Alan Garvin, MD.	Medicine	Cardiology	April 30, 2019

WHEREAS, the above listed practitioners met the basic requirements for Active Associate Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.6; and

WHEREAS, the Medical Executive Committee on April 26, 2017 and the Joint Conference and Professional Affairs Committee on May 24, 2017 recommended approval of Active Medical Staff Membership appointment for the above listed practitioner; and

WHEREAS, all appointments to Active Associate Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Active Associate Medical Staff as recommended; and, be it further


RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

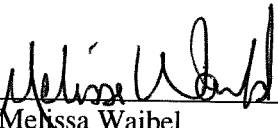
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified by:

Attested by:



Eloy S. Lizama
Chairman, Board of Trustees



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-54

“RELATIVE TO THE REAPPOINTMENT OF ALLIED HEALTH PROFESSIONAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Sheri Foote, CNM.	Ob/Gyn	Cert. Nurse Midwife	April 30, 2019
Jeanelle Martinez, CNM.	Ob/Gyn	Cert. Nurse Midwife	April 30, 2019

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.1; and

WHEREAS, the Medical Executive Committee on April 26, 2017 and the Joint Conference and Professional Affairs Committee on May 24, 2017, recommended approval of Allied Health Professional Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all appointments to Allied Health Professional Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Allied Health Professional Staff as recommended; and, be it further


RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioner listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

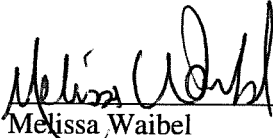
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified by:

Attested by:



Eloy S. Lizama
Chairman, Board of Trustees



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-55

“RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Fernan De Guzman, MD.	Anesthesia	Anesthesia	May 31, 2019
Hugo Koo, MD.	Medicine	Cardiology	May 31, 2019
Juwen Lin, MD.	Medicine	Internal Medicine	May 31, 2019

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on May 24, 2017 and the Joint Conference and Professional Affairs Committee on May 24, 2017 recommended approval of Active Medical Staff Membership reappointment for the above listed practitioner; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it


RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

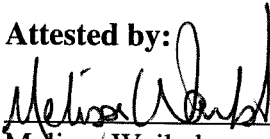
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified by:



Eloy S. Lizama
Chairman, Board of Trustees

Attested by:



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-56

“RELATIVE TO THE REAPPOINTMENT OF ALLIED HEALTH PROFESSIONAL STAFF PRIVILEGES”

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Ramona Domen, CRNA.	Anesthesia	Anesthesia	May 31, 2019

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.1; and

WHEREAS, the Medical Executive Committee on May 24, 2017 and the Joint Conference and Professional Affairs Committee on May 24, 2017, recommended approval of Allied Health Professional Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all appointments to Allied Health Professional Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Allied Health Professional Staff as recommended; and, be it further


RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioner listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

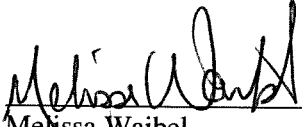
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified by:

Attested by:



Eloy S. Lizama
Chairman, Board of Trustees



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES
Official Resolution No. 2017-57

“RELATIVE TO APPROVING A TWO (2) PERCENT JOB DIFFERENTIAL PAY PILOT PROGRAM FOR NURSES IN THE ADULT INTENSIVE CARE UNIT (ICU) NEEDED TO ATTRACT NURSES INTO A UNIT HIGHLY SPECIALIZED IN CARING FOR CRITICALLY ILL ADULT PATIENTS”

WHEREAS, the Assistant Administrator of Nursing Services presented to the BOT-HR Subcommittee the need to attract nurses into a highly skilled adult nursing unit, whereby a differential pay is proposed to incentivize nurses to train in the adult ICU; and

WHEREAS, the adult ICU is distinguished from normal hospital wards by a higher staff-to-patient ratio and access to advanced medical resources and equipment that is not routinely available elsewhere. Common conditions that are treated within adult ICUs include; ARDS, trauma, multiple organ failure and sepsis; and

WHEREAS, currently there is no differentiation in pay between an adult ICU nurse and a regular nurse working in another unit. As a result, recruitment and retention has been extremely difficult as there continues to be a shortage of adult critical care nurses locally and nationwide; and

WHEREAS, the staffing pattern in the adult ICU budgeted is 30 licensed nurse positions to sustain care for a 14 bed adult ICU. To date, the total number of nurses in the ICU is 17; and

WHEREAS, the current adult ICU at the Guam Memorial Hospital has a capacity of 14 patient beds. However, the staffing shortage only allows a maximum occupancy of six (6) patient beds; and

WHEREAS, the overtime in the adult ICU totaled \$70,000 in 2016 to present. Overtime in 2015 was \$30,000. The staff vacancy in the adult ICU in 2015 was 29%. In 2016 it dropped to 26%. For first quarter 2017, the vacancy rate increased significantly at 43%; and

WHEREAS, the Assistant Administrator of Nursing Services proposes a two (2) percent (pay for hours worked) Job Differential for nurses working in the adult ICU unit; and

WHEREAS, the GMHA Nursing Division will continue to collect data on staff recruitment in the adult ICU for reporting purposes during the annual review of the program. This data will be used to justify the need to continue or discontinue the differential program; and

WHEREAS, pursuant to 4GCA §6229.10 Job Incentives. Whenever possible, nursing and other healthcare professionals shall be given job incentives, including, but not limited to, educational opportunities and improved work environment; and

WHEREAS, the proposal of the job differential pay for the two (2) percent (pay for hours worked) differential was presented to and favorable review was made by the BOT Human Resources Sub-Committee; respectively recommending approval by the full Board of Trustees; now, therefore be it

RESOLVED, that the Board of Trustees accepts the recommendation of the Human Resources Committee and approves the two (2) percent (pay for hours work) Job Differential pay for nurses assigned to the adult ICU unit as a pilot program to be reviewed after one year of implementation; and, be it further

RESOLVED, that the Hospital Administrator/CEO is directed to initiate other administrative processes to effectuate the action and advise the appropriate individuals of this action; and, be it further

RESOLVED, that the Board of Trustees Chairperson certified and the Board of Trustees Secretary attests to the adoption of this resolution.

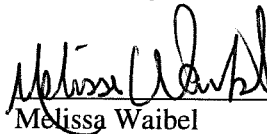
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:



Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:



Melissa Waibel
Secretary, Board of Trustees



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BOARD OF TRUSTEES Official Resolution No. 2017-58

“RELATIVE TO THE CREATION OF THE LONG TERM CARE ADMINISTRATOR (SNF)”

WHEREAS, for many years the Skilled Nursing Facility has been without a licensed Administrator; and

WHEREAS, Guam law requires that “A nursing home shall be administered by a licensed Nursing Home Administrator”. This is pursuant to §12201, Chapter 12, Title 10 GCA.; and

WHEREAS, Guam law also requires that “No nursing home shall operate except under the supervision of a nursing home administrator “aka” Long Term Care Administrator unless he/she is a holder of a sufficient nursing home administrator’s license pursuant to §15102, Chapter 15, Title 10 GCA; and

WHEREAS, the creation of a new position will satisfy the requirements of §§12201 and 15102, and furthermore will also satisfy the requirements of Joint Commission and will bring the SNU into compliance. This creation will also provide for a more sound classification of the position at the facility; and

WHEREAS, the **Long Term Care Administrator (SNF)** position will be responsible for the administrative and clinical supervisory work in the coordination of program services, facility maintenance, compliance and operational aspects of the Skilled Nursing Facility; and

WHEREAS, the provisions of §6303.1, Chapter 6, Title 4 of the Guam Code Annotated have been met and no comments from the public were received; and

WHEREAS, the HR, BOT Sub-Committee on April 18, 2017 recommended approval of the creation of the Long Term Care Administrator position; now, therefore be it

RESOLVED, that the Board of Trustees accepts the recommendation of the HR, BOT Sub-Committee and approves the creation of the **Long Term Care Administrator (SNF)** position in the classified service; and, be it further

RESOLVED, that the Hospital Administrator/CEO is directed to initiate the administrative processes to bring to fruition the utilization of this position; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees

Long Term Care Administrator (SNF)
(Proposed Creation)

NATURE OF WORK IN THIS CLASS:

The Long Term Care Administrator is responsible for the administrative and clinical supervisory work in the coordination of program services, facility maintenance, compliance and operational aspects of the Skilled Nursing Facility.

An employee in this class manages all departments by providing leadership and strategic direction and will report directly to the Hospital Administrator/ Chief Executive Officer of the Guam Memorial Hospital Authority.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all duties which may be performed).

Manage the daily operations of the administrative, clinical, facilities, compliance and operational aspects of the Skilled Nursing Facility.

Plan, organize, and supervise, and monitor the delivery of care to residential patients and establish priorities for strategic planning and development and coordinates activities and resources necessary to achieve objectives.

Ensure that nursing services are planned, implemented and evaluated to maximize resident quality of life and quality of care with the integration of resident rights with all aspects of resident care.

Ensure that the facility is in compliance with and adheres to the latest healthcare regulations for high-quality service.

Coordinate the development and evaluation of resident care goals and policies with healthcare teams.

Oversee various federally regulated documentation and clinical requirements of the MDS and Restorative Nursing Programs.

Attend meetings and collaborates with physicians, therapists, families, and local governing boards.

Establish and implement new and existing policies and procedures ensuring the quality of care for residents admitted to the Skilled Nursing Facility.

Observe, monitor, and evaluate outcomes of all the facility programs, policies and procedures to ensure effectiveness and to fulfill administrative and professional responsibility.

Ensure the coordination and collection of data for performance and quality improvement activities of the facility.

Maintain the fiscal accountability and management of the Skilled Nursing Facility in conjunction with Hospital Administration and the Budget and Accounting Offices.

Conduct and chair staff and department meetings, and attend resident care conference and medical staff meeting.

Must be on-call for emergencies.

MINIMUM KNOWLEDGE, SKILLS, AND ABILITIES:

Knowledge of Long Term Care operational standards set forth in Federal and State regulations.

Knowledge of performance management and effective leadership skills.

Knowledge of Centers for Medicare and Medicaid Services (CMS) regulations.

Knowledge of budget and financial processes.

Knowledge of basic computer systems and Microsoft Office Suite.

Excellent verbal and written communication skills.

Skill in effective supervision, conflict management, and team building.

Skill in interpersonal relations and team building, self-directed and flexible in fulfilling obligations.

Ability to develop and administer skilled nursing programs of the hospital.

Ability to evaluate program effectiveness and implement recommended changes in organizational policies and procedures to enhance effectiveness.

Ability to maintain records, reports and other statistical data.

MINIMUM EXPERIENCE AND TRAINING:

- A) Two (2) years of experience in a healthcare setting plus two (2) years of experience in an Administrator or supervisory capacity within a sub-acute or long term care facility and a Bachelor's degree in public health administration, health care administration, health science, public administration, business administration or other related field; or
- B) Two (2) years of experience in a healthcare setting plus one year of experience in an Administrator or supervisory capacity within a sub-acute or long term care facility and a Master's degree in long term care administration, public health administration, health care administration, health science, public administration, business administration or other related field.

NECESSARY SPECIAL QUALIFICATIONS:

1. Current license to practice as a Nursing Home Administrator by the Guam Board of Allied Health Examiners or from another U. S. jurisdiction provided that the standards for licensure are equivalent to those prevailing on Guam.
2. Certification in Nursing Home Administration (CNHA) from the American College of Health Care Administrators (ACHCA) or other equivalent entity.

3. Valid Basic Life Saving certification.

Proposed Job Evaluation:

FI3	304
E4 (43%)	132
E1P	152
TOTAL POINTS:	588
Pay Grade:	Q
Pay Plan:	GPP



Eloy S. Lizama
Chairman, Board of Trustees

6/04/17

Date



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan

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BOARD OF TRUSTEES Official Resolution No. 2017-59

“RELATIVE TO THE AMENDMENT OF THE HOSPITAL ENVIRONMENTAL SERVICES I POSITION”

WHEREAS, current minimum requirements of the Hospital Environmental Services I position is not yielding enough eligible applicants consistent with the number of job vacancies of the position; and

WHEREAS, the most current List of Eligibles for the position contains only nine eligible applicants and is not nearly enough to fill the current number of vacancies; and

WHEREAS, twenty-six (26) of the thirty-five (35) applicants that applied for the Hospital Environmental Services position did not meet the current minimum requirements; and

WHEREAS, the proposed amendment of adding hotel housekeeping experience to the current requirements may expand the pool applicants for the position; and

WHEREAS, the provisions of §6303.1, Chapter 6, Title 4 of the Guam Code Annotated have been met and no comments from the public were received; and

WHEREAS, the HR, BOT Sub-Committee on April 8, 2017 recommended approval of the minimum requirements of the Hospital Environmental Services I position; now, therefore be it

RESOLVED, that the Board of Trustees accepts the recommendation of the HR, BOT Sub-Committee and approves the amendment of the minimum requirements of the Hospital Environmental Services I position; and, be it further

RESOLVED, that the Hospital Administrator/CEO is directed to initiate the administrative processes to bring to fruition the amendment to this position; and, be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees

Hospital Environmental Services Technician I

NATURE OF WORK IN THIS CLASS:

This position performs routine hospital environment of care work containing micro-organisms of infectious diseases from environmental and equipment surfaces.

ILLUSTRATIVE EXAMPLES OF WORK: (Any one position may not include all the duties listed, nor do the examples cover all the duties which may be performed).

Clean and disinfect low to moderate risk areas, such as patient rooms occupied by persons with emerging infectious diseases.

Sweep, mop, and wax floors; clean walls, windows, equipment and furniture; dust and vacuum rooms; empty waste baskets and cleans all high touch areas.

Clean rooms in low and moderate-risk areas such as, administrative and common areas, waiting rooms, Medical/Surgical Nursing Units, Occupational Therapy, General Pharmacy, Out-Patient Departments, Laboratory, Pathology, and the Mortuary.

Utilize the appropriate chemicals and supplies according to procedures.

Report safety hazards as appropriate. Transport trash and hazardous waste to appropriate disposal areas.

Follow all infection control practices including hand hygiene techniques, standard precautions and isolation precautions.

Observe safety precaution at all times.

Complete annual education requirements as directed.

Maintain patient confidentiality at all times.

Attend annual reviews and departmental in-service training as scheduled.

Inspect, maintain and secure daily log of supplies and deliver supplies to the Skilled Nursing Facility.

May be assigned collateral duties as de-con and hazmat responders.

Report to work during times of Condition of Readiness as a responder.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Ability to learn and apply the standard methods, practices, tools and equipment involved in the environment of care work.

Ability to apply National Patient Safety Standard goals.

Ability to learn and understand infection control practices.

Ability to learn and practice Environment of Care standards.

Ability to operate and care for hospital environment of care tools and equipment.

Ability to perform hazardous physical tasks.

Ability to apply safe and sanitary work practices on the job.

Ability to work effectively with the public and employees.

Ability to understand and follow instructions.

MINIMUM EXPERIENCE AND TRAINING:

- a) Six months of experience in housekeeping work in a commercial or institutional environment (i.e., a hospital/healthcare, hotel setting, or other commercial industry setting); and graduation from high school or successful completion of a General Education Development (GED) test or any equivalent of a general education high school program, apprenticeship program or successful completion of a certification program, from a recognized, accredited or certified vocational technical institution, in a specialized field required for the job.

Established: July 1980

Amended: July 2009

June 2017

KH: BI1 76

PS: A2 (14%)10

ACCT: A1A 12


TOTAL: 98

PAY GRADE: D



Eloy S. Lizama

Chairman, Board of Trustees



Date



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



850 GOV. CARLOS CAMACHO ROAD
OKA, TAMUNING, GUAM 96913
TEL: (671) 647-2444 or 647-2330
FAX: (671) 649-0145

BOARD OF TRUSTEES Official Resolution No. 2017-60

“RELATIVE IN APPROVING THE CREATION OF THE DIRECTOR, HOSPITAL BUSINESS DEVELOPMENT & STRATEGIC PLANNING POSITION IN AN UNCLASSIFIED SERVICE FOR THE GUAM MEMORIAL HOSPITAL AUTHORITY”

WHEREAS, the Guam Memorial Hospital Authority is committed to providing quality healthcare services; and

WHEREAS, based on the needs of the hospital, the Hospital Administrator/CEO in collaboration with the Personnel Services Administrator, the Hospital Administrator requested to create the Director, Hospital Business Development & Strategic Planning position; and

WHEREAS, the Personnel Services Administrator in dialogue with the Hospital Administrator/CEO presented to the BOT–HR Sub-Committee their recommendations of the position; and

WHEREAS, the Hospital Administrator/CEO shall determine the compensation for the position of the Director, Hospital Business Development & Strategic Planning at a assigned salary grade and step in compliance with the Government of Guam Competitive Wage Act of 2014 pay policy; and

WHEREAS, the Authority recognizes the need to regulate the salary compensation for such services; and

WHEREAS, favorable reviews were made by the BOT–HR Sub-Committee at their meeting on May 23, 2017, respectively recommending approval by the full Board of Trustees; now, therefore be it

RESOLVED, that the Board of Trustees, recognizes that the Hospital Administrator/CEO has full responsibility for Director, Hospital Business Development & Strategic Planning position; and


RESOLVED, that the Board of Trustees accepts the recommendation of the BOT–HR Sub-Committee and approves the creation of the Director, Hospital Business Development & Strategic Planning position and salary established by the Board in the Unclassified Service; and, be it further

RESOLVED, that the Hospital Administrator/CEO is directed to initiate other administrative processes to effectuate the recruitment efforts of the position; and be it further

RESOLVED, that the Chairman certifies and the Secretary attests to the adoption of this resolution.

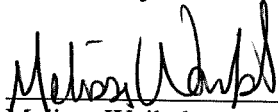
DULY AND REGULARLY ADOPTED ON THIS 1st DAY OF JUNE 2017.

Certified By:



Eloy S. Lizama
Chairperson, Board of Trustees

Attested By:



Melissa Waibel
Secretary, Board of Trustees

**DIRECTOR, HOSPITAL BUSINESS DEVELOPMENT & STRATEGIC PLANNING
(UNCLASSIFIED)**

NATURE OF WORK: This is highly professional responsible work in developing an appropriate business model, moving from a government-based system. This will enable the island's only public safety net hospital to create new opportunities as well as enhance existing processes and/or services across the hospital spectrum to realize financial stability. Develop and implement a comprehensive internal and external marketing plan which would increase revenues. Uphold the mission and values established by the Board of Trustees.

Demonstrates entrepreneurial mindset with financial acumen – focused on growing the organization.

This position shall report directly to the Hospital Administrator.

ILLUSTRATIVE EXAMPLES OF WORK: (These examples do not list all of the duties that may be assigned; any one position may not include all the duties listed.)

Identifies and recommends the selection of primary targets of opportunities for new initiatives or joint ventures.

Plans and coordinates reviews and assessments and participates in necessary negotiations that may lead to new initiatives or joint ventures.

Works with the department and division heads to evaluate initiatives for presentation to and review by the Hospital Administrator.

Provides leadership for the development of the Hospital's new business strategy and ensures the successful implementation of tactical elements of the organization's business initiatives.

Contributes to the Hospital's annual budgetary processes.

Assists senior leadership in ensuring that all activities and operations are carried out in compliance with local, national and federal regulations and laws governing business and healthcare operations.

Responsible for efforts undertaken in the planning, development, implementation and tracking business development plans and making recommendations as needed as well as serving as an advisor and consultant on existing programs and plans.

Assists in developing a hospital foundation to identify financial resources to be used to support the hospital's uncompensated care as well as the organization's capital needs.

Monitors external and internal environment for development of new market segments.

Participates in analysis of agency operations to assist policy changes or restructuring.

Assists in directing, planning, and implementing policies, objectives, and activities to ensure continued operations, to maximize returns on investments, and to increase productivity.

Evaluates and prepares proposals for sustainability projects, for review considering factors such as cost effectiveness, technical feasibility, and integration with other initiatives.

MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:

Knowledge of economic and accounting principles and practices, the financial markets, banking and the analysis and reporting of financial data with a focus on hospital/healthcare related data.

Knowledge of business and management principles involved in strategic planning, leadership techniques and resource allocation,

Knowledge and ability to conceptualize and develop effective business strategies for expansion of revenue generating hospital services.

Knowledge of the healthcare industry with specific emphasis on financials.

Knowledge of external factors affecting the healthcare industry.

Knowledge and ability to analyze new markets and recommend best opportunities for Executive Management and Board consideration and approval.

Ability to make work decisions in accordance with laws and rules and regulations.

Ability to identify complex problems and review related information to develop and evaluate options and implement solutions.

Ability to establish and maintain effective working relationships with others.

Ability to communicate effectively orally and in writing.

DESIRABLE QUALIFICATIONS:

A) Graduation from a recognized university with a Master's degree in Marketing, Finance or Business Administration or related field plus six (6) years of experience working in marketing and finance of which four (4) years was in a business management level in a hospital or healthcare organization, or related business entity or

B) Graduation from a recognized university with a Bachelor's degree in Marketing, Finance, or Business Administration or related field plus seven (7) years working in marketing and finance of which four (4) years was in a business management level in a hospital or healthcare organization, or related business entity, or

C) Any combination of education and experience related to Hospital business development and financial planning that provides the skills to achieve the desired goals.

DESIRED SELECTIVE FACTOR:

One (1) year of experience working in endowment activities specializing in hospitals, healthcare organizations or other related entities.

KH: FII3 400
PS : E4(50) 200
ACCT: E4 C 200
800

PG: S (step 1 – 70,873 (34.07) max step 7 – 88,591 (42.59))

Benchmark: 5-9 years: \$72,045 - \$119,016 no longer applicable, step 7 is now max for Unclassified without a contract.

(Director of Business Development) hospital setting