

HEALTH CARE ADVISORY BOARD

Meeting Summary
May 12, 2008

MEMBERS PRESENT

Marlene Blum, Chairman
Rose Chu, Vice Chairman
Bill Finerfrock, Vice Chairman
J. Martin Lebowitz, M.D.
John Clark
Francine Jupiter
Ellyn Crawford
Rosanne Rodilosso
Susan Conrad
Dave West

STAFF

Robin Mullet
Chris Stevens

GUESTS

Rosalyn Foroobar, Health Department
JoAnne Jorgenson, Health Department
Gloria Addo-Ayensu, M.D., Health Department
Jen Siciliano, Inova Health System
Rod Williams, Inova Health System
Barbara Doyle, Inova Mount Vernon Hospital
H. Patrick Walters, Inova Health System
Anne Rieger, Inova Health System
Rasha Ebeid, M.D., Attending Physician, Inova Fairfax Hospital OB/GYN Clinic
Albert Brito, M.D., Medical Director, Inova Pediatric Center

The meeting was called to order by Marlene Blum at approximately 7:40 p.m.

Approval of the Minutes

Marlene Blum noted that the spelling of Jen Siciliano's name was incorrect on the minutes. The minutes from March 24, 2008, were approved as corrected.

Housekeeping

Marlene Blum announced that she and Dr. Lebowitz both attended a reception for the Claude Moore Education and Research Center at Fairfax Hospital. The building, to be completed by the end of the year, is dedicated for medical education, clinical training, and research. Ms. Blum mentioned that the Research Center will be a benefit to the community.

Ms. Blum distributed a brochure on the Special Exception Application process. At the last HCAB meeting, a question was raised as to how long a special exception approval is

valid. The brochure addresses this issue and states that it is typically valid for 30 months; however, additional time can be granted.

Presentation by Inova

Ms. Blum provided some background information on the role of the County and the HCAB in reviewing Inova Fairfax Hospital and Inova Mount Vernon Hospital projects under the terms of the Lease Agreement between the Fairfax County Board of Supervisors and Inova. The lease states that “FHS shall advise the County about any structural changes, replacements or renovations to the Fairfax Hospital site and the Mount Vernon Hospital site that materially affect service delivery patterns and capacities as well as those which cost, in 1990 dollars, \$1,000,000 or more.” The Board of Supervisors has designated the HCAB as the recipient of this information. Over the past few years, project updates from Inova have not been coming to the HCAB. To address this lack of communication, Marlene Blum met with Don Harris, Jim Scott, and Jennifer Siciliano to review the process of bringing such projects to the HCAB. In addition, the threshold of \$1,000,000 in 1990 dollars had not been updated since 2003 – this too needed to be addressed. Also worth noting is that in the past, the HCAB often learned about Inova projects through the Certificate of Public Need (COPN) process. Once the HCAB learned about the project, Inova was invited to present the details. Several years ago, the General Assembly mandated that COPN information needed to be provided to the local governing board (hence, in Fairfax County, the Board of Supervisors). To comply with the mandate, the Health Systems Agency of Northern Virginia (HSANV) began sending their staff reports and notice of public hearings to the Chairman of the Board of Supervisors. These reports were not forwarded to the HCAB for review. The HSANV is now sending the reports to both the Chairman’s office, as well as to HCAB staff. Between Inova’s renewed commitment to bring forward projects to the HCAB and the receipt of COPN applications, there should not be another period of time when projects are not properly communicated to the County.

Inova Fairfax Hospital

Pat Walters, Vice President for Strategic Planning and System Development, presented an overview of the capital projects to be undertaken by Inova. Explaining the need for many of these projects, Mr. Walters discussed the aging infrastructure of both the original building and the tower on the campus of Fairfax Hospital. Current needs at Inova Fairfax Hospital include:

- Obstetrical services have exceeded the capacity of the Women’s and Children’s Building.
- The current operating rooms dedicated to women’s services do not meet the increasing demand.
- The Neonatal Intensive Care Unit (NICU) needs additional space to meet both an increase in demand and new regulations.
- Pediatric beds and services are currently spread across multiple locations on and off the hospital campus, often confusing families when trying to access care.

To remedy the above noted issues, projects in varying phases of development include:

- Replacing all Women's services, the NICU, and non-cardiac adult Medical-Surgical and Critical Care beds with a state-of-the-art Women's Hospital and Patient Tower. This will include 1 million gross square feet of new construction, consisting of 11 floors above ground.
- More private rooms throughout the entire campus.
- Renovations to the existing Tower Lobby and ground floor.
- The addition of 2 new entrances to the campus.
- Dedicated space for the Inova Fairfax Hospital for Children.

Capital improvement projects for Inova Fairfax Hospital at or above \$1,000,000 in varying stages of implementation include the following:

- Replacement and relocation of the main pharmacy. The projected final cost is \$3.57 million.
- Relocation of the existing morgue to new space constructed in the Inova Health and Vascular Institute (IHVI) underground parking garage for a cost of \$2.4 million.
- Fit-up of shell space for 52 patient beds on the 4th floor IHVI unit and the addition of 2 new air handling units to support the increased load for the 4th floor patient unit. Projected cost is \$12.6 million.
- Fit-out of 12,000 square feet of space on the top level of the Claude Moore Education and Research Center to consist of lab space, specimen banking, exam rooms, and research offices. Cost is anticipated to reach \$3.6 million.
- Conversion of the old Cath/EP space on the ground floor of the Critical Care Wing to pediatric pre-op and recovery bays, as well as a pediatric waiting area. Projected cost is \$4.95 million.
- Installation of fluoroscopy (cardiac cath lab equipment) into a cardiovascular operating room. Projected cost is \$6 million.

A question was raised as to how these projects at Inova Fairfax Hospital will be funded. In response, Mr. Walters said that approximately one-half of the costs will be covered by savings and the other half will be financed through increased debt. In response to a follow-up question, Mr. Walters stated that he does not anticipate any unusual increases in the rates.

With respect to the new building, a special exception application will come to the HCAB in the fall. At that time, much more information will be made available to the HCAB by Inova.

A question regarding the pharmacy replacement project was asked. It was noted that in the past, the hospital argued in favor of multiple sites for accessing needed medications. Under this new project, it appears as if that concept is no longer considered valid. Mr. Walters explained the central storage pharmacy is the only component being changed. The satellite pharmacies currently located throughout the hospital will not be changed.

The COPN currently under review by the HSANV impacts the Woodburn Surgery Center. Mr. Walters explained that the center currently operates as a department of the

hospital. The application seeks to convert ownership from the hospital to a joint-venture surgery center, similar to many others licensed under Medicare. It is believed that this type of joint-venture leads to increased efficiencies. The COPN application will be discussed at a HSAHV public hearing on June 2.

In review, the new building on the campus of Fairfax Hospital requires two different types of approvals – the first is the State COPN process (increase in beds) and the second is a Special Exception or Zoning review by the local governing authority. While the HCAB may make a recommendation to the Board of Supervisors on a COPN application, leading to the Board of Supervisors making a recommendation to the State Commissioner of Health, local input is not a requirement of the COPN process. However, Special Exception and Zoning applications do require HCAB review and recommendation.

Inova Mount Vernon Hospital

Barbara Doyle, CEO of Inova Mount Vernon Hospital, provided an overview of the projects at Inova Mount Vernon Hospital. These include one capital project and one non-capital project:

- Capital Project - Expansion and renovation of the first floor (previously reviewed, and recommended approval, by the HCAB in June, 2006 as part of the Special Exception Application process). Projected final cost is \$14 million.
- Non-Capital Project - Addition of a Long Term Acute Care Hospital (LTACH) within the current facility.

Ms. Doyle explained that a COPN was granted at the end of 2007 for a 50 bed-unit. The development of this unit is viewed as a creative solution to providing services within the community while improving the financial viability of the hospital. There will be no physical changes to the hospital plant.

Several HCAB members expressed concern that current Medical-Surgical beds are being converted for this new use. Dr. Lebowitz pointed out that the medical-surgical census at Mt. Vernon is under-utilized. Mr. Walters pointed out that while the state has granted COPN approval, several internal processes need to occur before final plans for this unit are in place. Multiple concerns were also raised regarding the fact that the addition of a long term acute care hospital is a significant change in service delivery and that Inova filed and received a Certificate of Public Need for a 50 bed –unit without having been reviewed by the HCAB. It was also noted by one of the HCAB members that the community is very concerned that the hospital is being closed piece by piece and raises the question, ‘will it still be a hospital five years down the road?’ Ms. Doyle stated that Mt. Vernon Hospital is here to stay and she is committed to growing the hospital for success. When asked if the unit would operate under the Inova Charity Care policy, Ms. Doyle responded that the unit would be operated under the Charity Care policy.

Several members expressed appreciation of the concept, but also expressed concern that this project had moved forward without County or community input despite the requirements of the Lease Agreement.

Capital Project Notification Threshold

Mr. Walters presented information on the new threshold. He reported that the TURNER index is now being used and projects the \$1,000,000 in 1990 dollars to now be \$1,996,986 (or roughly \$2 million). The previous data used to develop the threshold used three different indexes; it is now recommended that the TURNER index be used. Mr. Walters asked the HCAB how often they would like to receive updates on Inova projects. After some discussion, it was decided that projects that affect service delivery AND cost over \$2 million (in 2007 dollars) come before the HCAB. An example of something that may cost over \$2 million that the HCAB would not be interested in reviewing would be a parking garage (unless it directly affected service delivery).

Jennifer Siciliano stated that she is committed to maintaining an open dialogue with the HCAB and will make certain that the appropriate projects are brought before the board in a timely manner.

OB/GYN Clinic and Pediatric Clinic Relocation

Anne Rieger reported that the Fairfax Hospital has been working with the County Health Department to relocate the OB/GYN clinic to better serve patients. In addition, the need for improved space for the Inova Pediatric Clinic was also identified as a need. As such, these two clinics will be relocated to 6400 Arlington Blvd., near Seven Corners, doubling the amount of their current space. Inova will be entering into a 10-year lease. Two design teams have been brought in to maximize the available space.

An Electronic Medical Record (EMR) is being looked at. The goal is for the EMR to originate with the Health Department (for shared patients) and the record would “travel” to the OB/GYN clinic when the patient is transferred for care.

Neither a COPN nor Special Exception application is needed for this project.

Dr. Ebeid, Attending Physician at the OB/GYN clinic, presented encounter data at the clinic. In response to a question, an encounter is identified as any type of visit (social work, dietician, physician visit, nurse visit, etc.). The OB/GYN clinic provides over 54,000 outpatient prenatal, obstetrical, gynecological and surgical visits annually. This represents a sharp increase from previous years. Inova staff was not able to explain the sharp increase.

One of the charts included in the presentation referenced charity provided to clients at 100% of the Federal Poverty Guidelines. Anne Rieger will look-into whether or not this is a typo as several people stated that under the Inova Charity Care policy, persons at or below 200% of the Federal Poverty Guidelines receive a 100% write off, with a sliding fee scale implemented for persons between 201% and 300%.

Dr. Brito, Medical Director of the Inova Pediatric Center (IPC), provided an overview of the IPC. Currently, 3.5 F.T.E. pediatricians, 1 family counselor and 1 social worker are employed by the center. The need for increased space was discussed. Also noted was

that nearly forty percent of the patients do not follow-up on their lab work. The new site will house an on-site lab. This is very exciting to the staff.

Marlene Blum expressed the HCAB's appreciation for bringing this project to the HCAB in such a timely manner.

Mr. Walters was asked about the merger with Prince William Hospital. Mr. Walters stated that the merger agreement between Prince William Hospital and Inova was signed some time ago, but the Federal Trade Commission is blocking the merger pending an Administrative Review Process. Mr. Walters expressed that both parties are disappointed with the current decision.

A motion was made to send a memorandum to the Board of Supervisors stating that under the terms of the Lease Agreement, the HCAB received a presentation by Inova on various projects (to include all projects EXCEPT the new building on the campus of Fairfax Hospital). In addition, the Board should be apprised of the planned move by the OB/GYN and Pediatric Clinics. In addition, Inova provided an update on the capital project notification threshold and annual updates will be forthcoming. Included in this memo to the Board should be an emphasis on the community concerns associated with the LTACH. Worth noting is that significant decisions have been made with regards to the delivery of service and the community is concerned.

The motion was seconded.

During discussion of the motion, it was decided that the motion should include mention of the length of time when no projects were brought before the HCAB resulting in so many projects under review now.

The motion passed 9 – 1, with Dr. Lebowitz voting against.

FY2009 Budget

JoAnne Jorgenson provided a brief update on the final FY09 Health Department budget. In total, the agency's budget decreased by \$2.3 million. The agency will only need to implement a 4% cut in limited term positions, which will allow seasonal pool inspection staff, restaurant inspection staff and some Clinic Room Aide positions to be filled. The agency has met with the County Executive to begin discussions around changing the types of staff currently employed and re-aligning services. Ms. Jorgenson distributed the agency's "Lines of Business" summary. The chart, which was handed out, contains red and black print: those items typed in red are non-mandated services and those in black are mandated. Ms. Jorgenson will return in the fall to discuss the Lines of Business more fully.

School Health Report

Rosalyn Foroobar reported that a presentation on school health had been recently made to the Human Services Council and was well received. The Council supported the recommendations in the report, particularly with respect to moving towards an acuity-based system rather than a ratio-based system of staffing. The school health work group has begun looking at the Police Resource Officer model – which is similar to the Clinic Room Aide model in that agency from one staff provide services in a host environment.

Community Advisory Committee

Rose Chu reported that the current vendor for the CHCN program has brought many challenges in the past six months but that a new vendor will begin on July 1. It was suggested that the new vendor, Molina Healthcare of Virginia, be invited to a future HCAB meeting. Chris Stevens will follow-up on this.

HCAB Nominating Committee

Rosanne Rodilosso, Tim Yarboro, and Francine Jupiter have agreed to be on the nominating committee for the upcoming HCAB election of officers. Ms. Rodilosso will be the Chair. The slate of candidates will be presented at the June 9th meeting, at which time, elections will be held.

Other Business

Staff reminded everyone that the June 9th meeting would be held in the Pennino Building, directly across the street from the Government Center. Staff promised to send multiple reminders about the different meeting location.

Staff was asked to speak with Dean Montgomery at the HSANV as to why the Woodburn Surgery Center needs a COPN.

There being no further business, the meeting adjourned at 10:15 p.m.