



**STRATEGIC PLANNING COMMITTEE MEETING**  
**MONDAY, January 12, 2015**

**HCP Conference Center located at Highland Care Pavilion**  
1411 East 31<sup>st</sup> Street Oakland, CA 94602  
Marla Cox, Clerk of the Board  
(510) 535-7515

**MINUTES**

**THE MEETING WAS CALLED TO ORDER AT 3:32PM**

**ROLL CALL WAS TAKEN AND THE FOLLOWING TRUSTEES WERE PRESENT:**

Kinkini Banerjee, Tracy Jensen, Michele Lawrence, Jim Lugannani and Barry Zorthian, MD.  
Excused: Jim Falaschi

**TAB #1 ACTION: Approval of Minutes**

Upon motion made and seconded, the November 17, 2014 Minutes were approved.

**TAB #2 REPORT: Chief Strategy Officer Report**

- **Alameda Health Partners (AHP)**  
Randy Rolfe, Interim President, AHP provided an update to the committee on the work of Alameda Health Partners. Mr. Rolfe outlined the priorities of AHP; 1. AHS Physicians; communicating the benefits to physicians; Increased Physician Participation by developing physician champions, appointing additional Board members and developing trust among all. 2. Operational Infrastructure-Business Requirements; developing a financial infrastructure and physician contracting.
- **Managed Care**  
Carladenise Edwards, Ph.D. Chief Strategy Officer provided an update on managed care contracting. Her report included a review of the shifts in payor mix and the changes to HealthPac funding. AHS is in negotiations with 11 payors and has completed contracts with 13 payors across different sites in the system.
- **Facilities Planning Update**  
Mark Fratzke, Chief Operations Officer provided an update regarding the Acute Tower Replacement (ATR), the pending demolition of the H building, and AHS need for Office Space. Mark thanked Ann Ludwig, John Chapman and Dave Warmouth for their diligent work with the County regarding the opening of ATR. Mark reported that the ATR project is on time and on budget. Due to the demo of the H building, there will be a need to relocate 250+ employees before May of 2016. Mark reported that there is an estimated need for approximately 80,000 square feet. The committee discussed the need for employees to be under one roof and possibility of using technology to stay connected. Mark expressed that many of our old buildings have no air conditioning and have many employees cramped into small space. AHS is in discussion with the County about co-location options and other ways to address this need. The committee requested clarity around how this will be funded.

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- **Information Technology Update**  
The committee briefly discussed the Siemens/Cerner merger and the need to wait on the merger before receiving any further updates.
  
  - **Strategic Plan Dashboard**  
Dr. Edwards outlined Strategic Plan highlights for Q1/2 FY15 (Areas discussed: Access, Sustainability, Integration, Experience, Network and Workforce). Committee discussion ensued. Dan Boggan, Interim CEO stated that over the next 3-months the committee will see a much tighter ambulatory plan. The organization has made a lot of progress and continues to move goals forward. Carladenise acknowledged the Quality team for their work for The Joint Commission survey.
  
  - **Health Equity**  
Dr. Edwards introduced the committee to Mini Swift, MD the head of AHS' Health Equity Council. The Health Equity Council is a group comprised of Trustees and employees that convene on a regular basis to monitor, direct and promote activities within AHS aimed at eliminating health disparities. Dr. Edwards shared that Daniel Boggan served as the co-chair during his role as a trustee along with Wright Lassiter, former AHS CEO. Mr. Boggan stated that it is important for AHS to ensure there is equity in everything that we do and that AHS continues to serve as a model for health equity. Dr. Swift stated AHS has a commitment to reducing health disparities and we need to continue to think about how we can contribute to this important work at the local and national level. The Health Equity Council started in 2009. There are 5 areas a healthcare organization can influence when addressing issues of equity. They include 1) diversity in governance and leadership, 2) quality outcomes, 3) community partnerships, 4) diversity in our workforce, and 5) culturally and linguistically appropriate services. To date, AHS has been focusing on the accurate collection of race and ethnicity and language data; creating equity reports; looking at staff capabilities and using that data to improve how care is delivered across the system. The presentation was given to provide the committee with background on the Health Equity Council, as it is at a point where the work should begin to transition into the operations of the organization, but lacks leadership due to the retirement of Trustee Boggan from the Board and resignation of Wright Lassiter as CEO. Trustee Banerjee requested that future reports on how AHS is doing in the area of health equity and addressing health disparities be brought to the strategy committee. Committee discussion ensued.

**TAB #4 DISCUSSION: Strategic Priorities**

**A. 18-Month Strategic and Operational Priorities**

Dr. Edwards presented to the committee a strategic framework leadership used to develop the 18 month strategic priorities. The committee discussed the relevance of this information and how accountability for accomplishing goals is addressed by Board and leadership. Dr. Edwards shared that the executive team meets weekly to discuss the organization's priorities and that the goals are incorporated into the performance management system. Committee discussion ensued. Mr. Boggan explained that the team will have measurable objectives and timelines and every major goal will have work plans that will allow progress to be measured. Due to time constraints, Trustee Banerjee recommended that a future meeting be held that only focuses on goals, so more time is allotted for meaningful discussion.

**TAB #6 INFORMATION: 2015 Committee Annual Work Plan/Issue Tracking & Follow-up**


Trustee Banerjee asked the committee to provide input regarding the annual work plan.

**Public Comments – None**

**Board of Trustees Remarks – None**

**ADJOURNMENT: 6:24pm**

Respectfully Submitted by:

  
Marja D. Cox  
Clerk of the Board

APPROVED AS TO FORM:

Reviewed by:   
Mike Moyer  
Interim General Counsel