

# The Virgin Islands Consortium

## JFL Works On Patient Move-Out Plan In Event Of Storm; No Action Taken During Meeting As Board Struggles With Quorum

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ST. CROIX -- Acting Juan F. Luis Hospital CEO Dyma Williams during a hospital board meeting on Tuesday outlined a series of actions taken to better prepare JFL to handle disaster emergencies in an effort to avert the mishaps the hospital experienced following Hurricanes Irma and Maria in 2017, especially with patient transfers.

But even with all the hospital's plans, no action was taken on Tuesday because the board yet again failed to meet quorum. A previously announced meeting was canceled because of the same issue.

The days of the district boards are numbered. During his State of the Territory Address in January, Governor Albert Bryan said he would forward legislation to the 33rd Legislature that seeks to change the current structure of the governing boards of USVI hospitals from three to one. Currently, there's a board that governs the Juan F. Luis Hospital, another governing the Schneider Regional Medical Center, and a third, the territorial board, which governs both medical facilities.

"As required by law, it is essential that we move to have our hospitals operate under one single hospital board," Mr. Bryan said. "We will be sending legislation to unify our hospital system finally." A timeline for the legislation was not mentioned in the address.

On the patient move-out plans, Ms. Williams said, "Now that we have the green light [from FEMA], we are part of the assessment and schematic with APTIM specific to how we would conduct a massive move-out of patients, because there are some services that we have to keep in play while we are planning the transition. There is consideration given to having a separate Request for Proposal (R.F.P.) issued for a company that does massive patient movement from one facility to another. We must be mindful that we will have to continue to provide a service during the transition process." APTIM is one of two prime contractors used by the Government of the Virgin Islands for construction work following the 2017 storms. The other is AECOM.

J.F.L.'s emergency management council met last week with Mr. Bryan and members of his cabinet for all things emergency response in the territory. J.F.L.'s team has initiated weekly meetings to prepare for emergency response, according to hospital officials.

"We have reviewed our past hurricane response efforts. We are focused on lessons learned. We received a grant of \$73,000 and will utilize it for all things communication resources to include satellite phones, hand held radios – we have already procured eight and have twelve more coming – extenders and repeaters, to extended Wi-Fi connection in the hospital needed to effectively utilize our electronic equipment, so that we can communicate internally and with VITEMA, the police department, and first responders external to the organization. We also created a territory evacuation plan," explained Ms. Williams.

She said the hospital has a new software electronic tracking tool provided by JPAT used for patient transfers in a disaster emergency. "The patient is given a bar coded identification band that has the capacity to track them when they are evacuated, from the time they leave the territory until they arrive at their destination," Ms. Williams said. She said while the federal government has provided training on how to effectively use the tool, "now that the new hurricane season is approaching, there has been an update to the JPAT module, so the federal government is slated to return to the territory to give us refresher training. We will complete this training so that we are best prepared in the event that we have to evacuate our patients from the territory."

Along with the tracking tool, a clearly labeled hard copy of the patient's record is provided, Ms. Williams said, along with a full color photo. She said patient identification is easily cross-checked with the three mediums in place, so the hospital knows where the patient is at all times.

"We also have a four-week food supply for our patients and staff, along with water and other necessary supplies until help arrives, said Ms. Williams.

Patients that are dependent on medical equipment will be the first evacuated post-hurricane landfall, and in terms of providing outpatient dialysis after the storm, the hospital is working on a modular solution that houses up to twelve patients.

Shenel Moorehead, JFL acting chief financial officer, outlined J.F.L.'s financial standing to date. The hospital received a Community Disaster Loan (C.D.L.) of \$42 million.

- \$39 million - J.F.L. funded payroll and operating expenses from 2018 to early 2019
- \$3 million - Government - to cover the debt service reserve.
- \$17.6 million loss – FY 2014 to 2018 (average yearly loss)
- J.F.L. paid G.E.R.S. \$3 million in August of 2018 and expects to become current with payments by summer 2019.
- J.F.L. has paid out \$11.9 million to vendors \$4 million of which VITEMA has reimbursed. VITEMA is currently review the remaining balance pending reimbursement.

Ms. Moorehead clarified that the \$17.6 million average yearly loss is a result of "uncompensated care." "We are an acute care facility, and the only medical facility on the island, we cannot turn patients away. Uncompensated care includes self-pay patients (no medical insurance), unreimbursed Medicaid, unreimbursed Medicare patients, or even insured patients that have no residual insurance coverage. The government is mandated by law to cover the revenue gap resulting from the patient's inability to pay," she said.

Ms. Williams added to the financial discussion by assuring that, not only was the monthly WAPA bill being paid, but the total amount of \$266,00 includes \$50,000 in excess of actual bill and the difference is applied to the past due balance.

According to a staffing update handout, Dr. Raymond Cintron and Dr. Angel Lake informed that J.F.L. currently employs 34 active physicians and 15 privileged physicians. The hospital's Allied Health staff consists of 4 physician's assistants and 2 certified nurse anesthetists (1 contract and 1 per diem), and 6 midwives.

There is still a need for an additional twenty-five 25 physicians, especially in internal medicine, pediatrics, and the Emergency Room, the hospital said.

JFL is working recruit additional medical staff to meet their physician staffing needs, especially an intensivist and in internal and emergency medicine.

Acting Chairwoman Olivine Anne Treasure touched on air ambulance insurance. "For it to work the patient must first have major medical insurance in place. The hospital is under no obligation to pay for transport patients, only for arranging the transportation. The patient is obligated cover their own cost. Under federal law, the hospital is unable to pay for transportation," she said. "It is our goal to minimize off-island transfers. It should be a choice, not a necessity."

Several recommendations made by the Performance Improvement Committee of the J.F.L. District Governing Board and requires the Territorial Board's approval include:

- Dr. Angelo Galiber, MD, application for reappointment of medical staff privileges for a period of two years to commence on May 31, 2019 to May 30, 2021, in the Radiology Department: Specialty of Diagnostic Imaging, as recommended by J.F.L. Medical Executive Committee.
- Dr. William Ross, MD change to Affiliate Category for the period of April 30, 2019 to December 2, 2019, as recommended by J.F.L. Medical Executive Committee.
- Territorial board approval of the revised JFL Hospital-wide influenza Policy, as recommended by J.F.L. Medical Executive Committee.
- Territorial board approval of the revised JFL Diagnostic Imaging Policy and Procedure Manual, as recommended by J.F.L. Medical Executive Committee.
- Changes to Manual Code A-2, Page 2-4 starting with sentence2
- Changes to Manual Code H-4, page 1 of 1
- Territorial board approval the JFL Change Order Policy and Change Order Form and that it be added to the JFL Contract Management Process on behalf of J.F.L. leadership.

Board members in attendance included Physician Representative and Acting Chairwoman, Olivine Anne Treasure; Fay John-Baptiste, Nurse Representative; and Aracelis B. Walcott.