

Human Resource Committee Meeting

Jul 24, 2019 4:30 PM EDT

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NOTICE OF MEETING

NORTH BROWARD HOSPITAL DISTRICT

BOARD OF COMMISSIONERS

A Human Resource Committee meeting will be held on Wednesday, July 24th, 2019, immediately following the Building Committee meeting, at the Broward Health Corporate Spectrum Location: 1700 Northwest 49 Street, Fort Lauderdale, Florida, 33309. The purpose of this committee meeting is to review and consider any matters within the committee's jurisdiction.

Persons with disabilities requiring special accommodations in order to participate should contact the District by calling 954-473-7100 at least 48 hours in advance of the meeting to request such accommodations.

Any person who decides to appeal any decision of the District's Board with respect to any matter considered at these meetings will need a record of the proceedings, and for such purpose, may need to ensure that a verbatim record of the proceedings is made which record includes testimony and evidence upon which the appeal is to be based.

MINUTES

North Broward Hospital District Board Of Commissioners
1700 Northwest 49th Street, Suite #150, Ft. Lauderdale, 33309

**HUMAN RESOURCE COMMITTEE
Immediately Following
Compliance and Ethics Committee Meeting
March 21, 2019**

CALL TO ORDER 1:37 pm

COMMITTEE MEMBERS

- √ Commissioner Ray T. Berry/Chair
- √ Commissioner Andrew M. Klein
- × Commissioner Marie C. Waugh (absent)

ADDITIONALLY PRESENT Commissioner Christopher T. Ure, Commissioner Nancy W. Gregoire, Commissioner Stacy L. Angier, Gino Santorio/President/CEO, Alan Goldsmith/CAO, Alex Fernandez/CFO, Jerry Del Amo/Managing Senior Associate, Marian Wossum/Interim General Counsel Designee, Nigel Crooks/Chief Internal Auditor

PUBLIC COMMENTS None

APPROVAL OF MINUTES

1. Approval of Human Resource Committee meeting minutes, dated February 20, 2019

MOTION It was *moved* by Commissioner Klein, *seconded* by Commissioner Berry, to:

**APPROVE THE HUMAN RESOURCE COMMITTEE MEETING MINUTES,
DATED FEBRUARY 20, 2019.**

Motion *carried* unanimously.

TOPIC OF DISCUSSION Chair Berry announced that item two (2) would be heard first.

1. Consideration of Board Liaison's position and supervision (formerly item 2)

Mr. Santorio requested that the Board Liaison be brought back under the supervision of the President/CEO so that he could support her fully and ensure her position be more successful. He confirmed that the reassignment would allow the Board Liaison to integrate fully with the administrative team and that her job duties would be modified to solely focus on Board meeting prep, transparency initiatives and tracking of minutes.

MOTION It was *moved* by Commissioner Klein, *seconded* by Commissioner Berry, to:

MINUTES

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AUTHORIZE THE REASSIGNMENT OF THE BOARD LIAISON POSITION UNDER THE DIRECTION AND SUPERVISION OF THE CHIEF EXECUTIVE OFFICER.

Motion *carried* unanimously.

2. Board Subcommittee feedback General Counsel search (formerly item 1)

Discussion ensued regarding screening, scoring, and scheduling interviews for the final five candidates who would meet with regional leadership, medical leadership, executive leadership, and the Board for final consideration.

MOTION It was *moved* by Commissioner Klein, *seconded* by Commissioner Berry, that:

THE HUMAN RESOURCE COMMITTEE AUTHORIZE THE EXECUTIVE TEAM TO PUT TOGETHER AN INTERVIEW, VETTING AND SCORING PROCESS TO BE REPORTED TO THE BOARD DURING THE BOARD MEETING ON MARCH 27TH, AT WHICH TIME THE BOARD WILL PLACE ON THE AGENDA BOARD CONSIDERATION OF THOSE CANDIDATES FOR FURTHER INTERVIEW BY THE FULL BOARD.

Motion *carried* unanimously.

ADJOURNMENT 2:14 pm

MOTION It was *moved* by Commissioner Klein, *seconded* by Commissioner Berry, to:

ADJOURN THE HUMAN RESOURCE COMMITTEE MEETING.

Motion *carried* unanimously.

Respectfully submitted,
Commissioner Ray T. Berry, Secretary/Treasurer

Human Resources Committee Meeting

Presented by: Melanie Hatcher, SVP/CHRO

July 2019

Personal Leave Cash In

As a component of Employee Engagement, Broward Health is providing the opportunity to allow eligible employees to cash in up to 80 hours of their Personal Leave. This benefit allows dedicated employees to cash in their accrued Personal Leave time as they may forgo taking time off in support of their commitment to the organization. A cash in will also avoid employees losing time as a result of meeting max accrual and reduces liability for accrued time.

Personal Leave Cash In

- ▶ Historical cost for the PL Cash In (all Management included):

Year	PL Cash In Total
2001	\$ 4,168,462.31
2002	\$ 4,148,277.04
2003	\$ 1,634,461.86
2004	\$ 1,580,786.82
2005	\$ 2,873,795.41
2006	\$ 2,987,607.31
2007	\$ 3,097,434.54
2008	\$ 2,886,843.95
2009	\$ 3,152,301.63
2010	\$ 3,576,912.38
2011	\$ 3,788,828.20
2012	\$ 3,915,663.67
2013	\$ 3,986,618.56
2014	\$ 4,045,737.97
2015	\$ 4,018,533.47
2016	\$ 2,023,966.77

- ▶ Management will be ineligible due to the Management Time Off Program. Therefore we anticipate the cost to be lower than previous years.

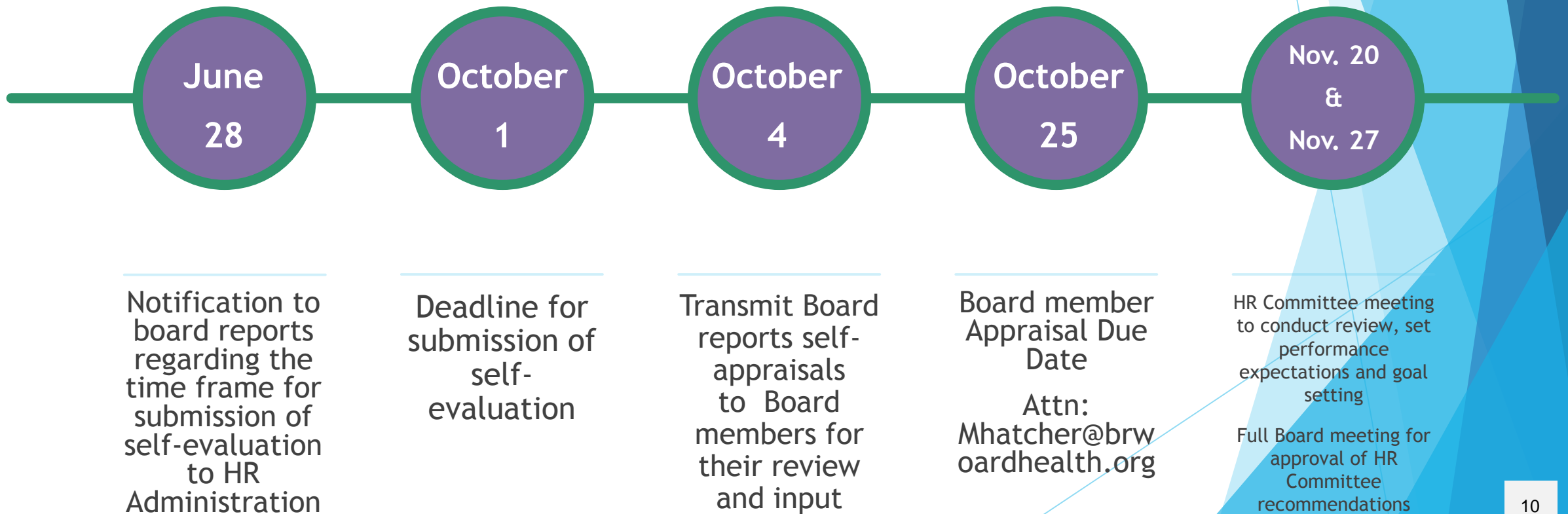
Management Annual Performance Evaluation

In order to attract and retain the high caliber of talent required to meet our organization's goals and reward employees for their contributions to Broward Health's success, salary increases are awarded in relation to proven performance.

Management Annual Performance Evaluation

- ▶ Historically a market review was conducted and based on the data a flat percentage was recommended for review and approval by the Board. All Leaders with a passing score (depending on their start date) would be eligible to receive the approved percentage increase. The last merit performance market based adjustment on was approved October 14, 2016 and effective November 13, 2016 for 2.4%.
- ▶ Beginning this year, Broward Health Leadership will be eligible to receive annual merit increases. Only Leaders who have met expectations during their performance evaluation period for the fiscal year will be eligible for the rate increase. All eligible employees will receive a 1, 2 or 3% merit increase consistent with their evaluation score. This will follow the same format as staff merit evaluations.

NBHD Board Reports: 2019 Annual Performance Appraisals Timeline



SUMMARY OF REQUEST

DATE: *July 31, 2019*

FACILITY: *Broward Health*

REQUEST: *Approval of the Fiscal Year 2020 Balanced Scorecard Metrics, Targets, and Points*

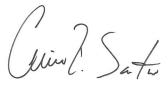
PURPOSE: *The balanced scorecard is our strategic performance management tool. The metrics and targets and points for the metrics on the balanced scorecard need to be updated and approved annually by the Board. The Management Incentive Plan payout will be based on the performance of the approved balanced scorecard.*

CAPITAL REQUIRED: *Not Applicable.*

FISCAL IMPACT: *Not Applicable.*

BUDGET STATUS: *Budgeted.*

LEGAL REVIEW: *Not Applicable.*

APPROVED:  _____ DATE: _____
Gino Santorio, 07/21/2019 13:05 Eastern Daylig
Gino Santorio, President/CEO BH

MEMORANDUM

TO: Board of Commissioners

FROM: Gino Santorio, President/CEO BH

DATE: July 31, 2019

SUBJECT: Approval of the Fiscal Year 2020 Balanced Scorecard Metrics, Targets, and Points

BACKGROUND

The balanced scorecard is the Broward Health’s strategic management tool. The balanced scorecard is comprised of five categories or pillars: People, Quality, Growth, Finance, and Service. Within each pillar there are metrics associated with the pillar. Each metric has a performance target and eligible points associated with that metric. The total points for all metrics on the balanced scorecard equal 100. At the start of each fiscal year management will propose updated metrics, targets, and points for those metrics to be included in the upcoming year’s balanced scorecard. Throughout the year, the balanced scorecard will be updated with actual results for the approved metrics and compared to the approved target for the metric, the eligible points will be awarded for the metrics where actual performance met or exceeded the approved target on a fiscal year to date basis.

ACTION/PROJECT DESCRIPTION

Approval of the following metrics, targets and points to serve as Broward Health’s fiscal year 2020 balanced scorecard.

Pillar	KPI	Metric	Target	Eligible Points
Quality	HACs	Foreign Objects Retained After Surgery	0.0300	3.125
Quality	HACs	Air Embolism	0.0000	3.125
Quality	HACs	Blood Incompatibility	0.0000	3.125
Quality	HACs	Falls and Trauma	0.7500	3.125
Quality	VBP	MRSA	0.8150	3.125
Quality	VBP	CDIFF	0.8520	3.125
Quality	VBP	CLABSI	0.7840	3.125
Quality	VBP	CAUTI	0.8280	3.125
Service	HCAHPS (Top % Box)	Global Rating Hospital	76.16%	3.125
Service	HCAHPS (Top % Box)	Communication w/Nurses	82.85%	3.125
Service	HCAHPS (Top % Box)	Response of Hospital Staff	67.40%	3.125
Service	HCAHPS (Top % Box)	Willingness to Recommend	76.87%	3.125
Service	Patient Flow	Request to Occupy for ED <120 minutes	120	3.125
Service	Patient Flow	Pull Time	35	3.125
Service	Patient Flow	Transport Response Time < 20 minutes	20	3.125
Service	Patient Flow	EVS Turn Time	53	3.125

People	Productivity	Productive Hours Per APDs	Approved Budget	5.000
People	Turnover	Turnover	17.50%	10.000
Growth	Net New Providers	Net New Providers	Approved Budget	5.000
Finance	Net Gain/(Loss) from Ops	Net Gain/(Loss) from Operations	Approved Budget	30.000
				100.000

FINANCIAL/BUDGETARY IMPACT

There is no financial impact of approving the balanced scorecard metrics, targets, and points.

JUSTIFICATION

The management incentive compensation plan approved in February 2019, directs that the incentive payout will be based on the performance of the approved Balanced Scorecard total system targets and the balanced scorecard is subject to review and approval annually by the Board.

STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to adopt the proposed metrics, targets, and points for the FY2020 Broward Health balanced scorecard.

Pillar	KPI	Metric	FY2018 Actual
Quality	HACs	Foreign Objects Retained After Surgery	0.0000
Quality	HACs	Air Embolism	0.0000
Quality	HACs	Blood Incompatibility	0.0000
Quality	HACs	Falls and Trauma	0.1600
Quality	VBP	MRSA	1.5552
Quality	VBP	CDIFF	0.5119
Quality	VBP	CLABSI	0.8427
Quality	VBP	CAUTI	0.7838
Service	HCAHPS (Top % Box)	Global Rating Hospital	72.10%
Service	HCAHPS (Top % Box)	Communication w/Nurses	79.10%
Service	HCAHPS (Top % Box)	Response of Hospital Staff	63.70%
Service	HCAHPS (Top % Box)	Willingness to Recommend	72.80%
Service	Patient Flow	Request to Occupy for ED <120 minutes	NA
Service	Patient Flow	Pull Time	NA
Service	Patient Flow	Transport Response Time < 20 minutes	NA
Service	Patient Flow	EVS Turn Time	NA
People	Productivity	Productive Hours Per APDs	24.40
People	Turnover	Turnover	16.65%
Growth	Net New Providers	Net New Providers	n/a
Finance	Net Gain/(Loss) from Ops	Net Gain/(Loss) from Operations	48,036,938

FY2019 Actual	FY2019 Target	Proposed FY20 Target
0.0000	0.0300	0.0300
0.0000	0.0000	0.0000
0.0000	0.0000	0.0000
0.1777	0.7500	0.7500
1.2440	0.8150	0.8150
0.4536	0.8520	0.8520
0.8900	0.7840	0.7840
1.3650	0.8280	0.8280
74.30%	73.95%	76.16%
80.30%	80.44%	82.85%
63.90%	65.44%	67.40%
74.00%	74.64%	76.87%
157.00	NA	120.00
33.00	45.00	35.00
16.45	20.00	20.00
53.45	60.00	53.00
24.90	25.40	Approved Budget
17.80%	15.70%	17.50%
22	13	Approved Budget
Pending	127,070,864	Approved Budget

Comments
Bill - 2018 we didn't track these metrics - PLC opened August 2018
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Bill - 2018 we didn't track these metrics - PLC opened August 2018
The FY19 actual is not final, although there is a very low probability that it will change.
Trended data provided reflects the adjustment to the industry standard calculation. South East Market is at 18.5%, with a +2.3%. Local Market is presenting unique challenges with the expansion of non profit, non public entities resulting in offers over the local market data. The previous target was based on a 3 year trend using the prior methodology.
Still pending final numbers for FY19.