MINUTES
MEDICAL UNIVERSITY HOSPITAL AUTHORITY
BOARD OF TRUSTEES MEETING
February 10, 2017

The Board of Trustees of the Medical University Hospital Authority convened Friday, February 10, 2017, with the following members present: Dr. Donald R. Johnson II, Chairman; Mr. William H. Bingham, Sr., Vice-Chairman; Mr. William A. Baker, Jr.; Ms. Terri R. Barnes; Dr. James Lemon; Ms. Barbara Johnson-Williams; Dr. E. Conyers O'Bryan, Jr.; Mr. Charles W. Schulze; Dr. G. Murrell Smith, Sr.; Mr. Michael E. Stavrinakis; Mr. Thomas L. Stephenson;

The following administrative officials were present: Dr. David Cole, President; Dr. Lisa Saladin, Interim Provost; Ms. Lisa Montgomery, Executive Vice President for Finance and Operations; Dr. Patrick Cawley, CEO, MUSC Health and Vice President for Health Affairs, MUSC; Mr. Jim Fisher, Vice President for Development and Alumni Affairs; Dr. Raymond Dubois, Dean, College of Medicine; Ms. Annette Drachman, General Counsel.

Item 1. Call to Order-Roll Call.

There being a quorum present, Chairman Johnson called the meeting to order. Ms. Jane Scutt called the roll and made the following announcement, “In compliance with the Freedom of Information Act, notice of meetings and agendas were furnished to all news media and persons requesting notification.”

Item 2. Secretary to Report Date of Next Meeting.

The date of the next regularly scheduled meeting is Friday, April 14, 2017.

Item 3. Approval of Minutes of the Regular Meeting of the Medical University Hospital Authority of December 9, 2016.

Board Action: A motion was made for the minutes to be approved. The motion was seconded, voted on and unanimously carried.

Item 4. Election of Trustee Emeritus of the Medical University Hospital Authority (MUHA).

Statement: Chairman Don Johnson stated that Dr. Stanley C. Baker, Jr., had been nominated to be become an Emeritus Trustee and asked for a motion to approve this action.

Board Action: A motion was made, seconded and unanimously voted to make Dr. Stanley C. Baker, Jr., an Emeritus Trustee.

RECOMMENDATIONS AND INFORMATIONAL REPORTS OF THE PRESIDENT

OLD BUSINESS: None.
Item 5. **General Informational Report of the President.**

**Statement:** Dr. Cole called on Dr. Cawley to introduce the speaker, Dr. Kenneth Catchpole. Dr. Catchpole presented on Human Factors which is the science of understanding the interrelationship between people and systems of work; and the practice of using that knowledge to build systems of work to enhance human performance, efficiency, safety and happiness. Dr. Catchpole explained that the study of Human factors offers huge potential for applications in healthcare, and the SmartState Endowed Chair in Clinical Practice and Human Factors is enabling MUSC to bring this important and innovative work to patients, staff and providers. Current projects include organizational approaches to teamwork training; the assessment of a smartphone app to improve communication and information sharing for trauma patients; work systems modelling of sterile processing to improve the reliability of surgical instrument cleaning; the study of the impacts on process and teamwork of surgical robotics; and the future design of ambulatory surgery operating rooms to maximize efficiency and function, while improving teamwork and reducing potential errors. Dr. Cole thanked Dr. Catchpole for his informative presentation and stated that this concluded his report.

**Recommendation of Administration:** That this be received as information.

**Board Action:** Received as information.

Item 6. **Other Business.**

None.

OPERATIONS, QUALITY AND FINANCE COMMITTEE. CHAIRMAN: DR. G. MURRELL SMITH, SR.  
(Committee minutes are attached.)

OLD BUSINESS: None.

NEW BUSINESS:

Item 7. **MUHA Medical Center Status Report.**

**Statement:** Dr. Smith stated that Dr. Cawley gave an update to the committee on the MUHA Organizational Goal performance year-to-date.

**Recommendation of Administration:** That the report be received as information.

**Recommendation of Committee:** That the report be received as information.

**Board Action:** Received as information.
Item 8. Medical University Hospital Authority (MUHA) Financial and Statistical Report

Statement: Dr. Smith stated that Mr. Mike Dacus, Interim Chief Financial Officer, provided a report to committee on the MUHA’s financial status through December 2016.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.


Statement: Dr. Smith stated that Dr. Scheurer provided a report to committee on the following:
- Quality Performance – Year to Date; Changes to Quality Goals
- 2017 Rankings Expected
- Baldrige Application Status
- Transparency – Patient Star Ratings and Open Notes Pilot
- Quality Area Highlight – Infection Prevention and Control Team
- Quality Registry Highlight – National Surgical Quality Improvement Program (NSQIP)
- Risks to Manage – Heater Cooler Devices

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.

Item 10. Update on MUSC Physicians.

Statement: Dr. Smith stated that Dr. Don Rockey, President, MUSC Physicians, gave a brief update on MUSC Physicians activities.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

Item 11. Legislative Update.

Statement: Dr. Smith stated that Mr. Mark Sweatman, Director of Government Relations, gave an update on legislative activities.

Recommendation of Administration: That this be received as information.
Recommendation of Committee: That this be received as information.

Board Action: Received as information.

**Item 12.** Other Committee Business.

None.

**Item 13.** Medical University Hospital Authority Appointments, Reappointments and Delineation of Privileges (Consent Item).

Statement: An updated list of appointments, reappointments and delineation of privileges to the medical staff for November and December 2016 were presented for approval. These have been recommended for approval by all appropriate committees.

Recommendation of Administration: That the appointments, reappointments and delineation of privileges to the medical staff be approved.

Recommendation of Committee: That the appointments, reappointments and delineation of privileges to the medical staff be approved.

Board Action: Dr. Smith moved that the list of appointments, reappointments and delineation of privileges to the medical staff be approved. The motion was seconded, voted on and unanimously carried.

**Item 14.** Revisions to Medical Staff Bylaws (Consent Item).

Statement: Revisions to the Medical Staff Bylaws were presented for approval.

Recommendation of Administration: That the revisions be approved.

Recommendation of Committee: That the revisions be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the revisions to the Medical Staff Bylaws.

**Item 15.** Revisions to the Medical Staff Rules and Regulations (Consent Item).

Statement: Revisions to the Medical Staff Rules and Regulations were presented for approval.

Recommendation of Administration: That the revisions be approved.

Recommendation of Committee: That the revisions be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the revisions to the Medical Staff Rules and Regulations.
Item 16. Revisions to the Medical Staff Credentialing Policy and Procedure Manual (Consent Item).

Statement: Revisions to the Medical Credentialing Policy and Procedure Manual were presented for approval.

Recommendation of Administration: That the revisions be approved.

Recommendation of Committee: That the revisions be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the revisions to the Medical Staff Credentialing Policy and Procedure Manual.

Item 17. Revised Medical University Hospital Authority Human Resources Policy No. 44: Grievance Procedure (Consent Item).

Statement: Approval was requested for the revised Medical University Hospital Authority Human Resources Policy No. 44: Grievance Procedure.

Recommendation of Administration: That the revised policy be approved.

Recommendation of Committee: That the revised policy be approved.

Board Action: Mr. Schulze made a motion to approve the revisions to the Medical University Hospital Authority Human Resources Policy No. 44: Grievance Procedure. The motion was seconded, voted on and unanimously carried.

Item 18. Medical Executive Committee Minutes (Consent Item).

Statement: Minutes of the Medical Executive Committee for November and December 2016 were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

Item 19. Medical Center Contracts and Agreements (Consent Item).

Statement: Contracts and Agreements signed, since the last board meeting, were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.
PHYSICAL FACILITIES COMMITTEE. CHAIRMAN: MR. WILLIAM H. BINGHAM, SR.
(Committee minutes are attached.)

OLD BUSINESS: None

NEW BUSINESS:

Item 20. MUSC Shawn Jenkins Children’s Hospital Report.

Statement: Mr. Bingham stated that Mr. Matt Wain gave an update on the following items related to the MUSC Shawn Jenkins Children’s Hospital and Women’s Pavilion.
• Stoplight Report
• Budget Review
• Project Timeline

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Report received as information.

Item 21. MUSC Shawn Jenkins Children’s Hospital Financial Update.

Statement: Mr. Bingham stated that Mr. Steve Hargett gave a report to the committee on the financing for the Shawn Jenkins Children’s Hospital, and this report was received as information.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Report received as information.


Statement: Mr. Bingham requested approval of the selection of Summit Healthcare Group for the financing of the North Charleston Ambulatory project and to move forward with due diligence and negotiations with Summit Healthcare Group.

Recommendation of Administration: That the selection of Summit Healthcare Group for the financing of the North Charleston Ambulatory project and to move forward with due diligence and negotiations with Summit Healthcare Group.

Recommendation of Committee: That the selection of Summit Healthcare Group for the financing of the North Charleston Ambulatory project and to move forward with due diligence and negotiations with Summit Healthcare Group.
Board Action: Mr. Bingham moved that the selection of Summit Healthcare Group for the financing of the North Charleston Ambulatory project and to move forward with due diligence and negotiations with Summit Healthcare Group. The motion was seconded, voted on and unanimously carried.

**Item 23.**

**MUSC Facilities Procurements/Contracts for Approval.**

**Statement:** Mr. Bingham requested approval of the following:

- Lease renewal is for 54,804 square feet of warehouse and office space located at 230 Albemarie Road to continue to provide space for Hospital Warehouse Surplus Operations, Pharmacy and the Department of Biomedical Engineering. The annual lease amount is $395,137.

- Lease renewal is for 8,981 square feet of space located at 4480 Leeds Place West to continue to provide space for several Therapeutic Service Groups including Sleep Lab, Speech Pathology, a Wheelchair Clinic and Pediatric Occupational Therapy and Physical Therapy. Annual lease amount is $76,248.69.

**Recommendation of Administration:** That the procurements/contracts be approved.

**Recommendation of Committee:** That the procurements/contracts be approved.

**Board Action:** A motion was made, seconded and unanimously voted to approve the procurements/contracts as presented.

**Item 24.**

**Other Committee Business.**

**Statement:** Mr. Bingham stated that Dr. Cawley gave a brief update on the status of the Certificate of Need (CON) for the Ambulatory Surgery Center.

**Recommendation of Administration:** That this be received as information.

**Recommendation of Committee:** That this be received as information.

**Board Action:** Received as information.

**Item 25.**

**Facilities Contracts Awarded (Consent Item).**

**Statement:** Facilities contracts awarded since the last meeting were presented for information.

**Recommendation of Administration:** That this be received as information.

**Recommendation of Committee:** That this be received as information.

**Board Action:** Received as information.
CHILDREN'S HOSPITAL COMMITTEE. CHAIRMAN: MR. MICHAEL STAVRINAKIS
(Committee minutes are attached.)

OLD BUSINESS: None.

NEW BUSINESS:


Statement: Mr. Stavrinakis stated that Dr. Andrew Stec, Director of Pediatric Urology, gave a presentation to the committee on Pediatric Urology services, accomplishment, clinical trials and research activities.

Recommendation of Administration: That the presentation be received as information.

Recommendation of Committee: That the presentation be received as information.

Board Action: Received as information.

Item 27. Shawn Jenkins Development Activity Report.

Statement: Mr. Stravrinakis stated Mr. Jim Fisher reported to committee that $106,570,020 has been raised for the Children's Hospital which is 85% of the goal of $125 million.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.

Item 28. Other Committee Business. None

AUDIT COMMITTEE. CHAIRMAN: THOMAS L. STEPHENSON, ESQ. (Committee minutes are attached)

OLD BUSINESS: None

NEW BUSINESS:


Statement: Mr. Stephenson stated that a report had been provided to committee by Ms. Susan Barnhart.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.
Board Action: Received as information.


Statement: Mr. Stephenson stated that a report had been provided to committee by Ms. Reece Smith.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

Item 31. Other Committee Business.

None.

OTHER BUSINESS FOR THE BOARD OF TRUSTEES

Item 32. Approval of Consent Agenda.

Statement: Approval of the consent agenda was requested.

Recommendation of Administration: That the consent agenda be approved.

Board Action: It was moved, seconded and unanimously voted that the consent agenda be approved.

Item 33. New Business for the Board of Trustees. None.

Item 34. Report from the Chairman. None.

There being no further business, the meeting of the Authority Board of Trustees was adjourned.

Respectfully submitted,

Mark C. Sweatman, Secretary

MCS:jls
Attachments
Medical University Hospital Authority  
Hospital Operations, Finance and Quality Committee  
February 9, 2017

Attendees:
Dr. Murrell Smith, Chair  
Mr. Bill Baker  
Ms. Terri Barnes  
Mr. Jim Battle  
Mr. William Bingham, Sr.  
Dr. Donald Johnson II  
Ms. Barbara Johnson-Williams  
Dr. James Lemon  
Mr. Michael Stavrinakis  
Mr. Tom Stephenson  
Dr. David Cole  
Ms. Lisa Montgomery  
Dr. Ray Dubois  
Dr. Patrick Cawley  
Mr. Jim Fisher  
Dr. Lisa Saladin  
Mr. Mark Sweatman  
Dr. Danielle Scheurer  
Mr. Mark Scheurer  
Dr. Darlene Shaw  
Mr. Matt Wain  
Mr. Steve Hargett  
Mr. David McLean  
Mr. Mike Caputo  
Ms. Susan Barnhart  
Mr. Greg Weigle  
Dr. Don Rockey  
Ms. Sheila Champlin  
Ms. Gina Ramsey  
Ms. Heather Woolwine  
Mr. Patrick Wamsley  
Dr. Scott Reeves  
Mr. Jerry Mansfield  
Ms. Courtney Waggoner  
Ms. Lauren Sausser

The meeting was called to order at 8:01 a.m. by Dr. Murrell Smith, Chair.

Item 7.  
Medical University Hospital Authority Status Report

Dr. Pat Cawley, CEO, MUSC Health, gave an update to the committee on the MUHA Organizational Goal performance year-to-date.  
- Service - not yet hitting our target but have shown improvement over last year.  
- People - employee/physician surveys are taking place now  
- Finance – currently hitting target  
- Growth – doing well in most areas except for Length of Stay (LOS) – new initiative being headed up to work on improving LOS

Action: Report received as information.

Item 8.  
Medical University Hospital Authority Financial and Statistical Report

Mr. Mike Dacus, Interim CFO, gave an update on MUHA’s financial status through December 2016. Highlights include:  
- Gross Revenue is up 10% year over year  
- Net Revenue is up 2% year over year  
- Operating Margin is at 2.2% which is down primarily due to pension expense  
- Days in A/R at 55  
- Days Cash on Hand at 41 and continuing to improve

Action: Report received as information.

Item 9.  
Report on Quality and Patient Safety

Dr. Danielle Scheurer presented the Quality pillar goal performance and serious safety event rate. She reported that the federal calculations for hospital acquired infections changed in January 2017 and has skewed current ratios. Due to this change in calculations, she recommended changing the Quality pillar goals for hospital acquired infections from ratios
to whole numbers of infections, and setting the new “level 3” at a 10-14% reduction in any single infection. She updated the Board on the Rankings to expect in 2017. She reported that the state Baldrige application will be turned in next week. On Transparency, she noted the patient star ratings are now live on the physician directory website, and the Open Notes pilot continues with good feedback from patients and providers. She highlighted the current work of the Infection Prevention and Control team, and the background and performance in the National Surgical Quality Improvement Program (NSQIP). Lastly, she informed Board regarding the current risks of “heater cooler” devices at MUSC, which are in use here and in 60% of US cardiac surgeries and have been associated with rare and unusual infections from atypical mycobacterium. MUSC has not found any infections, and is evaluating the risks and benefits of other device brands. She will update the Board at the next meeting regarding this issue.

Action: Report received as information.

Item 10. Update on MUSC Physicians

Dr. Rockey announced that Dr. Bruce Elliott has stepped down as the Interim Chief Physician Executive and Dr. Scott Reeves has been named Interim Chief Physician Executive. Dr. Rockey reported that a search committee has been established for the recruitment of a permanent replacement.

Action: Recommend approval.

Item 11. Legislative Update

Mr. Mark Sweatman gave a brief report on legislative activities.

Action: Received as information

Item 12. Other Committee Business.

None.

CONSENT AGENDA

Item 13. Medical University Hospital Authority Appointments, Reappointments and Delineation of Privileges

The committee reviewed the appointments, reappointments and delineation of privileges requests for the months of November and December. These have been recommended for approval by all appropriate committees.

Action: Recommend approval.

Item 14. Revisions to Medical Staff Bylaws.

The proposed revisions to the Medical Staff Bylaws were submitted to the committee and reviewed by all appropriate groups. The committee recommended approval.
Item 15. Revisions to the Medical Staff Rules & Regulations

The proposed revisions to the Medical Staff Rules and Regulations were submitted to the committee and reviewed by all appropriate groups. The committee recommended approval.

Action: Recommend approval.

Item 16. Revisions to the Medical Staff Credentialing Policy and Procedure Manual

The proposed revisions to the Medical Staff Credentialing Policy and Procedure Manual were submitted to the committee and reviewed by all appropriate groups. The committee recommended approval.

Action: Recommend approval.

Item 17. Revised Medical University Hospital Authority Human Resources Policy No. 44: Grievance Procedure.

The revised Medical University Hospital Authority Human Resources Policy No. 44: Grievance Procedure was presented to committee for approval.

Action: Received as information.

Item 18. Medical Executive Committee Minutes.

The Medical Executive Committee minutes November and December 2016 were reviewed by the committee.

Action: Received as information.

Item 19. Medical Center Contracts and Agreements

Contracts and agreements entered into since the last board meeting were presented.

Action: Received as information.

There being no further business, the committee adjourned at 8:50 a.m.

Respectfully Submitted

Jane L Scutt
MUHA Physical Facilities Committee
February 9, 2017
Minutes

Board Members Attending:
Mr. William H. Bingham, Sr., Chair
Mr. William A. Baker, Jr.
Ms. Terri R. Barnes
Mr. Jim Battle
Dr. Donald R. Johnson II
Ms. Barbara Johnson-Williams

Dr. James Lemon
Dr. E. Coneyers O’Bryan, Jr.
Mr. Charles Schulze
Dr. G. Murrell Smith, Sr.
Mr. Michael E. Stavrinakis
Mr. Tom Stephenson

Mr. Bill Bingham, Chair, called the meeting to order at 8:50 a.m.

REGULAR ITEMS


Mr. Matt Wain gave an update on the MUSC Shawn Jenkins Children’s Hospital and Women’s Pavilion and presented the following to the committee:

- Stoplight Report - Mr. Wain reported that most areas are currently on time and on target.
- Budget Review – Mr. Wain reported that the budget is currently only target where we expected at this point in the project.
- Project Timeline – The topping out ceremony has been adjusted from December to October 2017 which means the project at the moment is slightly ahead of schedule. This currently puts the project at a fourth quarter 2019 finish.

Action: Report received as information.


Mr. Steve Hargett reported that the financing for the Children’s Hospital is in place and we have spent about $58 million to date on the project.

Action: Report received as information.


Mr. Steve Hargett requested approval of the selection of Summit Healthcare Group for the financing of the North Charleston Ambulatory project and to move forward with due diligence and negotiations with Summit Healthcare Group.

Action: Recommend approval.

Item 23. MUHA Facilities Procurements/Contracts for Approval.

Mr. Greg Weigle, Chief Facilities Officer, presented the following facilities procurements/contracts for approval.
• Lease renewal is for 54,804 square feet of warehouse and office space located at 230 Albemarle Road to continue to provide space for Hospital Warehouse Surplus Operations, Pharmacy and the Department of Biomedical Engineering. The annual lease amount is $395,137.

• Lease renewal is for 8,981 square feet of space located at 4480 Leeds Place West to continue to provide space for several Therapeutic Service Groups including Sleep Lab, Speech Pathology, a Wheelchair Clinic and Pediatric Occupational Therapy and Physical Therapy. Annual lease amount is $76,248.69.

Action: Recommend approval.

Item 24. Other Committee Business.

At the request of Dr. Johnson, Dr. Cawley gave a brief update on status of the Certificate of Need (CON) for the Ambulatory Surgery Center.

Action: Report received as information.

CONSENT ITEMS FOR INFORMATION:

Item 25. Facilities Contracts Awarded

Facilities contracts entered into since the last meeting were presented for information.

Action: Report received as information.

With no further business, the meeting was adjourned at 9:12 a.m.

Respectfully submitted,

Jane L. Scutt
Medical University Hospital Authority  
Shawn Jenkins Children's Hospital Committee Minutes  
February 9, 2017

Board Members Attending:

Mr. Michael Stavrinakis, Chair  
Mr. Bill Baker  
Ms. Terri Barnes  
Mr. Jim Battle  
Mr. William Bingham, Sr.  
Dr. Donald Johnson II  
Ms. Barbara Johnson-Williams  
Dr. James Lemon  
Dr. Conyers O'Bryan  
Mr. Charles Schulze  
Dr. Murrell Smith  
Mr. Tom Stephenson

The meeting was called to order by Mr. Stravrinakis at 9:15 a.m.

**Item 26. Children’s Clinical Overview**

Dr. Andrew Stec, Director of Pediatric Urology, gave a presentation to committee on the following:

- The Department of Pediatric Urology’s academics and research activities over the current year.
- Pediatric Urological Clinical Trials (2 active and 1 closed)
- Services provided by Pediatric Urology
- Notable accomplishments
- Pediatric Urology Growth Since 2011

*Action: Report received as information.*

**Item 27. Shawn Children’ Children’s Hospital Development Activity Report**

Mr. Jim Fisher reported that $106,570,020 has been raised for the Children’s Hospital Building Campaign which is 85% of the goal of $125 million. Mr. Fisher also gave an updated on naming opportunities for the Children’s Hospital.

*Action: Report received as information.*

**Item 28. Other Committee Business**

None.

With no further business, the meeting was adjourned at 9:27 a.m.

Respectfully submitted,

Jane L. Scutt
Medical University Hospital Authority
Audit Committee
February 9, 2017
Minutes

Board Members Attending:
Mr. Tom Stephenson, Chair          Dr. James Lemon
Mr. Bill Baker                       Dr. Conyers O’Bryan, Jr.
Ms. Terri Barnes                     Mr. Charles Schulze
Mr. Jim Battle                       Dr. Murrell Smith, Sr.
Mr. Bill Bingham                     Mr. Michael Stavrinakis
Dr. Don Johnson II
Ms. Barbara Johnson-Williams

Mr. Tom Stephenson, Chair, called the meeting at 11:28 a.m.


Mr. Stephenson stated that the results of the audits were mailed to the board members and if there were questions, Ms. Susan Barnhart would be happy to address them.

Recommendation of Committee: That this be received as information.

Item 30. Compliance.

Mr. Stephenson stated that the compliance update was including in the Internal Audit’s report that was mailed to the board members and if there were questions, Ms. Reese Smith would be happy to address them.

Recommendation of Committee: That this be received as information.

Item 31. Other Committee Business.

None.

With no further business, the meeting was adjourned at 11:30 a.m.

Other Business for the Board of Trustees

Following the adjournment of the Audit committees, Dr. O’Bryan made the motion to go into closed session to discuss the following items pursuant to section 30-4-70 of the South Carolina Code:
• Negotiations incident to proposed contractual arrangements concerning graduation and sponsorship opportunities;
• Legal advice pertaining to pending, threatened, or potential claims or other matters covered by the attorney-client privilege, settlement of legal claims, or the position of the public agency in other adversary situations involving the assertion against the agency of a claim; and
• Discussion of matters relating to the proposed expansion of services.

Board Action: The motion was seconded, voted on and unanimously carried to move into closed session.

Respectfully submitted,

Jane L. Scutt