

**REPORT OF THE MEDICAL CARE COMMISSION MEETING
HELD ON JUNE 21, 2006**

I. CALL TO ORDER AND ROLL CALL

Chairman Michael Dennis called the meeting of the Medical Care Commission to order at 9:30 a.m., on June 21, 2006, in the Police Department Briefing Room. On roll call, the following members of the commission were found to be present: Chairman Michael Dennis, Vice Chairman Robert Friedman, Commission Member Richard Furlaud, Commission Member Norman Goldblum, Commission Member Michael Stein, and Commission Member Norman Traverse. Also present for all, or a portion of the meeting were: Mayor Jack McDonald, Council Member Susan Markin, Fire-Rescue Division Chief - EMS Coordinator Brian Fuller, and Town Clerk Susan Eichhorn.

II. PLEDGE OF ALLEGIANCE

In the absence of a flag, Chairman Dennis requested that all those who held America near and dear to their hearts raise their right hands.

III. APPROVAL OF AGENDA

Vice Chairman Friedman moved approval of the Agenda. The motion was seconded by Commission Member Goldblum, and carried unanimously.

IV. APPROVAL OF COMMISSION REPORTS FOR THE MAY 23, 2006, AND MAY 30, 2006, MEETINGS

Vice Chairman Friedman moved approval of the Agenda. The motion was seconded by Commission Member Goldblum, and carried unanimously.

V. PRESENTATION OF SURVEY RESULTS BY PROFILE MARKETING RESEARCH

Chairman Dennis stated that two of the charges given to the Medical Care Commission were to evaluate the scope of medical services, and the quality of medical services available to the community. Extensive interviews have been conducted with clinical providers, site visits have been made to the major hospitals in the area, and one of the products of the Commission would be to provide an update on medical services – where they are, and how easily they may be reached. The good news was, that despite some alterations in hospital availabilities, there were alternatives within an acceptable transport range. In the case of quality evaluation, there was no better information base than the experience of our residents, so the Commission had decided early on that it would need to provide everyone the opportunity for input. A survey was formulated and mailed by mid-March, with approximately 5400 residences being successfully reached. Today, Judy Hoffman and Sean Houlihan, of Profile Marketing Research, would share the results of the survey.

Judy Hoffman, Profile Marketing Research, presented the results of the mail survey (Town of Palm Beach Medical Care Commission Resident Survey) that was sent out to 6,378 Town of Palm Beach residents. Follow up postcards were also sent as reminders to fill out and return the surveys. She reviewed the background and purpose of the survey, the methodology used, and the conclusions and implications. After a detailed review of the findings, Ms. Hoffman summarized that when it came to primary care physicians, it was seen that the majority of Palm Beach residents who participated in the survey did have primary care physicians. Many reported using the VIP/concierge level services. There was relatively high satisfaction in the level of service provided by primary care physicians, and some part time residents did report difficulty in finding a primary care physician. The majority did anticipate the need for routine medical care. It was most likely that respondents would use Good Samaritan, and JFK would also be utilized, along with St. Mary's. There was a direct linkage to geography of the Town of Palm Beach. If respondents were going to look outside of the area, they were more often looking for cardiac care or stroke treatment. The walk-in clinic concept in Palm Beach resulted in 1 in 6, who, given the choice, were immediately for that. Most people did not have a defibrillator and quite a few of those who did also did not know how to use them. There was an interest in CPR training. The majority of people did have vaccines. There was overwhelming positive support in terms of the Good Samaritan law.

Ms. Hoffman responded to questions from the members of the audience; whether responses were broken down by age on any of the questions [they were not]; inferences from the data received;

Chairman Dennis asked Mr. Hoffman if she would be able to re-orient the data to provide further information, if it was so desired?

Ms. Hoffman replied affirmatively.

In response to Commission Member Stein, Ms. Hoffman replied that the results were valid, and decisions could be made based on them. Information was now available in terms of what was known from the perspective of residents; some of the critical things learned were: there was interest in a walk-in facility in the Town of Palm Beach; Palm Beach residents who have had experience with area hospitals view those as problematic; they were not delighted with service levels provided, both in terms of service and staffing; there were some opportunities for outreach, in things like CPR. In terms of a walk-in clinic, Ms. Hoffman suggested that there may be some additional drill down work in terms of expected levels of service, if a clinic was established for Palm Beach residents.

Chairman Dennis commented that it would be beneficial for the Commission to review the results of the survey very carefully, look at the data in retrospect, and then come back with thoughtful deliberate suggestions and recommendations.

In response to Commission Member Furlaud, Ms. Hoffman replied that she would provide information regarding how to access some published healthcare surveys.

VI. COMMENTS FROM THE PUBLIC

Mr. Stanley Rumbough asked Ms. Hoffman if she believed the numbers of respondents to the survey were disappointing or good?

Ms. Hoffman replied that she was delighted with the response. Chairman Dennis noted that there was over 20% response.

Chairman Dennis thanked the newspaper for promoting the survey. He also commented that there was now base information to take to people who could effect change, and the data received would also help the Commission to somewhat modify its plan of action to include specific focus group discussions – small panels of people or experts, resulting in suggestions or recommendations that the Commission could make to offer help to local institutions.

Chairman Dennis distributed “Medical Care Commission” golf visors to all of the Commission members.

VII. SCHEDULING OF NEXT MEETING

This item was not addressed.

VIII. ANY OTHER MATTERS

Chairman Dennis read into the record a letter that he had written to Good Samaritan CEO Paul Echelard. He requested that the Commission deliberate whether or not to have the letter mailed to Mr. Echelard:

Several months ago we had a private conversation in your office and reviewed some of the programs, which your administration is considering implementing at Good Sam. The establishment of a teleradiology program was high on the list and, in your words, has been “on the table” and under deliberation for years.

Last week, Dr. Bruce Moskowitz made a very optimistic and admittedly idealistic presentation to the Medical Care Commission in which he stated repeatedly: “There is no reason why we cannot have(x, y, and z) at Good Sam. “X” was a teleradiology program. We logically asked why it has not happened if there was no reason why it cannot be effected. He indicated that the fundamental discussions have been completed and the only roadblock is simply getting the parties together at the same time to complete the transaction for having imaging interpretation in critical cases where the expertise is not available locally.

He further encouraged – entreated almost – our Commission to take a catalytic position in this situation. If you were able to provide us with the names of the principals in this equation and a brief summary of the obstacles (if any) which might be encountered we would be delighted to take an active role in the process.

I look forward to your reply.

Vice Chairman Friedman made a motion to accept the letter and that it be forwarded to Mr. Echelard at Good Samaritan Hospital. The motion was seconded by Commission Member Goldblum, and carried unanimously.

Mr. Echelard commented that Good Sam already had the technology in place, and were ready to identify who the expert would be to read the x-rays. He explained that Dr. Moskowitz was interested in setting up a specific relationship with some entity. He explained that Dr. Moskowitz wanted a contact with a group who would find a physician somewhere to read the x-rays.

IX. ADJOURNMENT

There being no further business, the Medical Care Commission Meeting of June 21, 2006, was adjourned at 11:00 a.m.

APPROVED:

Michael Dennis, M. D.
Chairman