Health Services Authority ("HSA")
Minutes of Meeting of Directors
9 June 2026 at 5:30pm
Hibiscus Conference Room, George Town, Grand Cayman

In Attendance:

Directors Appointed by Cabinet
Chairman, Mr. Timothy Ridley ("Chairman")
Deputy Chairman, Dr. O. Neely Panton ("ONP")
Director, Mrs. S. Michelle Coleman ("MC")
Director, Mr. Buck Grizzel ("BG")
Director, Ms. Petrina Moore ("PM")
Director, Mr. Peter Spratt ("PS")

Ex-Officio non-voting Directors
Deputy Chief Officer – Ministry of Health, Environment and Sustainability ("MHES") Representative, Mrs. Exie Tomlinson-Panton
Representative of Ministry of Finance ("MOF"), Accountant General, Mr. Matthew Tibbetts
Medical Director and Ex-Officio non-voting Director, Dr. Delroy Jefferson ("MD")
Chief Executive Officer and Ex-Officio non-voting Director, Ms. Lizzette Yearwood ("CEO")

By Invitation:
Deputy Chief Executive Officer, Dr. Vinton Douglas ("DCEO")
HSA Legal Counsel (In-house), Mr. Garcia Kelly ("LC")
Board Secretary, Ms. Claudine Dubrey

Guests:
Chief Medical Officer – MHES, Dr. Hilary Wolf ("CMO")
Chief Nursing Officer – MHES, Mrs. Felicia McLean ("CNO")
Chief Financial Officer – HSA, Mrs. Sheila Thomas ("CFO")
Senior Chief Financial Officer – HSA, Dave van Duynhoven ("SNCFO")

The Chairman confirmed a quorum was present and declared the meeting duly constitutional at 5:39pm.
The Chairman proposed that the Board appoint Ms. Claudine Dubrey as the new Board Secretary. He thanked Mrs. Veerila Elliott for her years of excellent service. The motion was unanimously approved.
APPROVAL OF MINUTES OF MEETING OF 30 APRIL 2026
The Board unanimously approved the Minutes of the Meeting held on 30 April 2026.
DECLARATIONS – CONFLICTS OF INTEREST
No conflicts were declared.

MATTERS ARISING

The Action items arising from the Board meeting on 30th April 2026 were reviewed and updates provided on their status. Outline of these and additional action items are attached at Appendix A.

MATTERS FOR DISCUSSION

Referral Reform Presentation

The Chairman asked the CMO to share details of the Ministry's plans to modernize the Cayman Islands referral system.

The CMO's presentation addressed the following points:

1. the case for change – examining current system failures;
2. the proposed reform model – featuring three-agency framework with clear non-overlapping roles;
3. the governance and legal position – establishing criteria, protocols and accountability frameworks;
4. the anticipated benefits – examining the benefits of reform and the consequences of inaction;
5. the implementation plan – featuring a two-phase implementation plan;
6. the key risks and mitigations – providing a risk register summary; &
7. the Board considerations – the request that is being made of the HSA Board of directors.

A discussion ensued with Board members seeking clarity on a variety of issues.

The Chairman thanked the CMO for her presentation.

The Board unanimously endorsed the proposal and requested that the CMO liaise with the relevant parties and revert with a plan to solve the issues.

HEARTs Update

The CNO presented an overview of the proposed HEARTS pilot programme.

She addressed the:

1. HEARTS protocol;
2. HEARTS Pilot Plan;
3. Schedule;
4. STEPS BP (Blood Pressure) Care Cascade; &
5. Eligibility and Access.

The Board unanimously approved the proposed programme and directed that the Senior Executives of the HSA develop the programme without prejudicing the financial position of the HSA.

Joint Commission International (JCI) Accreditation Update

The CEO stated that the HSA had been formally re-accredited by JCI following the recent survey.

The assessors provided guidance on the opportunities for improvement. The assessors pointed out that 1100 required standards were reviewed and only 22 opportunities for improvement were identified. This was a sixty-seven percent (67%) reduction compared with the results of the 2023 survey.

The survey outcome reflects substantial progress in quality, patient safety and operational compliance.

The Chairman congratulated the team on this achievement.

2025 Financials

The SNCFO provided the Board with an update on the year-end audit results. He addressed the following: -

1. The HSA secured a qualified audit opinion for 2025;
2. The Auditor General was unable to obtain sufficient, timely and appropriate audit evidence for the inventory balance and cost of sales within the statutory deadline;
3. The management team demonstrated the accuracy of the stock count values but could not provide a reliable report showing purchases, usage and slow-moving costs within the audit testing timeframe;
4. The HSA accepted the qualification and agreed to use the time to address ongoing system-related matters, based on prior experience and commitments made to parliament;
5. The HSA was committed to improving inventory reporting, procurement-to-usage reconciliations and audit evidence production ahead of the next year-end cycle.

The SNCFO also outlined the HSA's planned financial improvement roadmap: -

1. Securing lower-cost medications;
2. Reducing denials and receivables;
3. Strengthening workflows; and
4. Monitoring compliance weekly.

The SNCFO noted there were clear inefficiencies, and the proposed changes would address these. The SNCFO stated that the organization was moving in the right direction with the integration of the Oracle fusion system. The SNCFO stressed that the aim was to complete the integration by the end of the summer.

2026-2027 Budget & Financial Performance

Executive Summary

The CFO presented an executive summary of the HSA's 2026-2027 budget and financial performance. The summary addressed the following categories:

1. Four (4) month deficit;
2. Year-to-date earnings;
3. Year-to-date operating costs;
4. Cash position;
5. Capital Expenditure (CAPEX); &
6. Qualified audit outcome.

The CFO noted that management had moved to implement the following primary levers to improve financial performance:

1. Automation projects;
2. Revenue cycle improvements; &
3. Cost saving measures.

The presentation of the CFO further addressed the following topics:

1. Key Performance Indicators;
2. Revenue performance;
3. Accounts Receivable;
4. Expense Performance; &
5. Personnel Costs.

Credit & Debit Balance Write-Off Update

The CFO provided an update regarding the approach to be taken regarding credit and debit balance write-offs. The HSA had received advice from the Attorney General's Chambers ("AGC") regarding the applicability of the principle of "bona vacantia".

It was made clear by the AGC that the principle of bona vacantia does not apply to the HSA and the applicable legislation is the Limitation Act which limits recovery claims after six years. To that end, legal risk is minimal where customers were made aware of overpayments. The finance team therefore proposes that balances may reasonably be treated as time-barred where they have remained unclaimed for more than six (6) years and reasonable notification efforts were made.

The CFO therefore proposed that credits over seven (7) years are to be used to clear unpaid charges over 7 years. The HSA will retain detailed write-off support for audit testing.

The Board unanimously resolved that:

The HSA write-off unclaimed credit balances older than six (6) years, where reasonable efforts have been made to contact the customer/patient, provided that supporting audit records and detailed write-off schedules be retained.

MOU – School Health Nurse & Home Care Nurses Expansion

The CFO also provided the Board with an overview of the proposed MOU between MHES and the HSA to expand the services of School Health Nurses and Home Care Nurses. The aim of the programme is to secure the services of three (3) additional school nurses and 2 additional home care nurses.

The MHES is expected to secure supplementary funding for this program.

MHES has given its written commitment to the program with the HSA expected to commence recruitment using the existing approved budget for initial activities and the MHES to secure supplemental funding during 2026 and reimburse salaries, benefits, recruitment, training, onboarding and related operational costs monthly.

Clinical HOD Governance

The MD addressed the process for appointing Heads of Department ("HODs"):

1. Basis of the role and what is expected of the HOD;
2. Comparison between election and selection models;
3. Implications of prioritizing Caymanian status;
4. Recommendation of a balanced defensible approach that supports both organizational performance and national workforce objectives.

The MD proposed the adoption of a balanced defensible approach that supports both organizational performance and national workforce objectives.

The Board unanimously approved the resolution that the HSA Physician Bylaws be amended to change the process whereby heads of departments are appointed from a purely election-based approach to an approach where nomination is given by their peers supplemented by interviews and appointment by Senior Management, and that the Bylaws also be amended to remove term limits.

The MD also provided the Board with a presentation setting out the appointment process of physicians in the following categories:

1. HSA Employed Physicians; &
2. Privileged Physicians.

The Board was provided with an overview of the differences between the two categories of physicians permitted to work at the HSA. The comparison was done across the following categories:

1. Recruitment;
2. Background checks;
3. Qualification verification;
4. Primary source verification;
5. Regulatory approval;
6. Employment Status;
7. Clinical Oversight;
8. Scope of Practice; &
9. Liability & Governance.

Private Ophthalmologist

The MD provided an outline of a proposal for collaboration between the HSA and a private ophthalmologist. Dr. Foley, a respected private physician, is willing to partner with the HSA. Currently the HSA does not have a vitreo-retinal surgeon (one has been recruited and is expected to join within the next 3 to 5 months) or vitreo-retinal equipment.

The benefits to the HSA would be the revenue associated with pre-operative care, anaesthesia and post-operative care.

The concerns surrounding the project are:

1. Capacity and scheduling;
2. Private equipment governance;
3. Supplies and implants; &
4. Staff/Privileging.

The Board indicated its support for the motion and underscored the need for the agreement to make express provision for insurance surrounding the equipment and the exclusion of the HSA from all liability associated with the use of the equipment.

The Board unanimously approved the resolution supporting the proposal for collaboration with Private Ophthalmologists subject to the review and signing of an agreement which makes express provision for insurance involved in the use of the equipment and the HSA's exclusion from liability for the use of the equipment.

Attorney General's Chambers (AGC) Advice: Term Limits/Work Permits

The CEO and LC provided the Board with an overview of the HSA's current position considering changes made to the Immigration Transition Act. The following points were noted:

1. The Cayman Islands Government (CIG) has implemented terms limit conditions on its employees;
2. The HSA has been exempted from work permit conditions (since 2003);
3. The AGC provided initial advice which suggested that the HSA is exempt from term limit conditions;
4. In an updated opinion the AGC indicated that term limit conditions will now apply to employees of the HSA on 31st May 2027 or the end of their current contract of employment (whichever is the greater);
5. The HSA believes it is important to clarify these matters because they can have an adverse impact on patient care.

The following next steps were highlighted:

1. Senior Management Team (SMT – including Chief Human Resources Officer ("CHRO") will review the advice; and
2. Report to be provided to the Board on likely impact on the HSA based on the advice.

Based on the advice, the HSA currently maintains its autonomy over work permit matters. However, should there be a recommendation to change this, the HSA would require the guidance of the Board but wishes to retain its autonomy in light of the potential financial impact (cost of work permit processing) this might have.

Board Manual Framework

LC provided the Board with an update on the status of the Board Manual. The Board was advised that the first draft of the manual has been done. It seeks to cover such matters as:

1. Board responsibilities;
2. Governance processes;
3. Accountability models; &
4. Ethical standards.

Director MC enquired whether the model made provision for directors to raise concerns with the Minister. LC advised that the legislation is silent on this but a proposed draft of a process addressing this concern will be made and provided to the Board.

The next steps identified for the Manual are:

1. Board review and feedback,
2. Formal approval/adoption;
3. Orientation for Directors and SMT;
4. Annual review and continuous update;
5. Integration into Board operations and committee reporting.

LC gave an undertaking to provide a draft to the Board at least (3) weeks before the next Board meeting.

Hurricane and Ebola Preparedness

The CEO provided the Board with an overview of the National Framework established to deal with ebola and hurricane preparedness which is led by the Hazard Management Cayman Islands and National Emergency Operations Centre.

The Board was provided with the details of the HSA's Hurricane preparations. Of note, was the indication that the HSA ensures that it has six (6) months of medical supplies on hand. Staffing is also in place for staffing the emergency medical centres.

Regarding ebola preparedness plans, the risk to the Cayman Islands remains low, and the plan is to keep the situation under review and update readiness actions as necessary.

ANY OTHER BUSINESS

Half Yearly Report

The DCO reminded the Board that the half-yearly report was due.

COVID-19 Receivables

The DCO advised that the COVID-19 receivables were recoverable from Ministry of Finance. The MHES will speak to the MOF to ensure that the COVID-19 receivables are paid.

US Consulate Lease Smith Road Centre

The CEO advised the Board of the current discussions taking place with US Consulate regarding its lease at the Smith Road Centre. The Board was provided with background relating to the matter.

The CEO advised that the space is currently needed to support future healthcare expansion and operational growth. The HSA's Specialist Clinic services need to be expanded to meet the growing patient demand and reduce appointment wait times.

JCI Celebration & DG Farewell

The Board was reminded of the JCI Celebration and DG Farewell being held on June 25th, 2026, in Grand Cayman between 3p.m. and 5p.m. at the Hibiscus Conf Room.

On June 27th 2026 JCI Celebration will be held in Cayman Brac between 6:00p.m. and 8p.m. on the Faith Hospital Grounds.

CLOSE OF MEETING

The Chairman declared the meeting closed at 10:27p.m.

Timothy Ridley, Chairman

Date: 25/6/26
DD / MMM / YYYY

Health Services Authority ("HSA")
Minutes of Meeting of Directors
9 June 2026 at 5:30pm
Hibiscus Conference Room, George Town, Grand Cayman

APPENDIX A

ACTION ITEMS: ONGOING

ITEM	UPDATE	STATUS
Ministry Meeting RE: Public Health Transition	Meeting held	Ongoing
CIG receivables (covid 19)	Sent to ministry	Complete. Awaiting Response
Board Manual Framework	Next meeting	Work in Progress
Revenue Cycle Improvements to Billings and Accounts receivable	Next meeting	Work in Progress
Debits and Credits write off next meeting	Next meeting	Work in Progress
E&Y presentation	Circulated	Complete
Emergency Room ("EMR") demos	CIO to Update Director PS	Complete

ACTION ITEMS: NEW

ITEM	UPDATE	STATUS
Referral System Reform: HSA to liaise with CMO	Next meeting	
HEARTS Pilot Project: HSA to liaise with CNO/MHES on funding.	Next meeting	
CFO to present on Strategies for Dealing with Revenue Leakage	Next meeting	
MOU – School Health Nurse & Home Care Nurses Expansion	Next meeting	
Term Limits/Work Permits Update	Next meeting	