James L. Holly, M.D.

SETMA Strategic Planning Session February 5, 2013

Dr. Holly:

I want us to do one last exercise and then we are going to quit for the day, I think we have had a very productive day and I was reviewing in my own mind the outstanding issues that we are going to talk about in the future..

The good news is that we don't have any sharp divisions; we have a lot of things we can be proud of. We have a great future to look forward to. There are challenges because we are in the most regulated business in the world; but primary care is never going to go away and if anybody can learn how to adapt to the changing situations we can. We have done it now for 18 years and some of us for 35, 36 and 37 years and successfully. I believe we will be able to do it in the future and I think we are going to do fine. We are going to really fulfill our private motto of "We are going to do good, while we are doing well," I think we will continue to do well. Nothing pleases me more than, and I think sometimes you don't think that or feel that, but nothing pleases me more than we can give out checks to everybody. It is a wonderful thing to do.

What I would like for you to do now is I want you to put your thinking caps on and I want a brief summary statement from each one of you of what you are going to take away from today. What is the action item that is going to instruct you and how you are going to proceed in 2013. We are going to start in the middle and go out to the sides because I do not want to start with Rick or with Vijay. We are going to start with Bobbie and Vince, and we will go to Muhammad and Alan and around.

So Raydhana will get this down because I would like this be verbatim. Bobbie why don't you start and try to do it under 2 minutes and tell us what are you going to take away from today that will give you guidance and direction for the future.

Dr. Bobbie Colbert:

There are a number of things in looking at all of our strengths, current strengths and our current weakness and potential strengths and weaknesses. I think the thing that I take away most from this strategic planning session, is that SETMA is evolving and it is evolving and keeping up with current requirements of governmental requirements. We have to do that. At the same time we are keeping our motto statement intact. We are doing good as we do well. We will continue to

do that as long as we continue to keep our heads into the future and we are doing that. So I think that what I am taking away from this is that SETMA is evolving; its adapting and its doing the things that it needs to do to provide services for the community, while at the same time providing necessary things for its employees and its partners.

Dr. Holly:

Thank you.

Dr. Vincent Murphy:

I think that from what we are gathering from this meeting, SETMA has a lot of strengths. We have a lot of good doctors here and we all work hard. All the partners work hard and part of our strength is also some of our staff. I think we do need to make time and take an opportunity to maybe take some of the nurse practitioners to lunch, or maybe even just some of the staff. Or, take your immediate secretary or nurse to lunch just once in awhile to show some appreciation, to give some loyalty to them.

We also have some weaknesses; and we do need to address these weaknesses because they can come back to bite us. I think we are doing a good job as far as anticipating threats, anticipating some of these federal issues that are coming up. I think we're doing a good job anticipating these things and getting ready for them and I think that is a great thing. We need to think we are going in the right direction overall and we just need to keep working hard. Some of these people other people work hard too, like these nurse practitioners they work real hard and that can be a source of frustration. A lot of the nurse practitioners are not full as far as the number of patients. They are seeing and so they maybe not as stressed out as some of these other ones, but some of the older nurse practitioners are really pretty full and that is a lot of stress. So we need to kind of let them know we appreciate that.

Dr. Holly:

Ok

Dr. Muhammad Aziz:

I think first of all, I am very happy that what we have discussion today openly; it was the most open discussion we have ever had among our partners. That is refreshing and I think that in the future we continue doing this. Second, is that you revealed whatever our strengths are. We need to start appreciating our strengths and continue improving on that. Weaknesses, which we do have and if we point out to anybody personal or operational or organizational. I'd point it out and you could think yeah it was just for the betterment of SETMA; it was not pointed to anyone person. It is for the betterment of SETMA and I would try to work on to try to improve those weaknesses and try to find a solution for it. I would start if for myself; you know, the one thing you could list of the consistency is the one thing I am going to work on my own and I will work on that.

For organizational point of view, I was concerned by the nurse practitioner we have the best nurse practitioners we have, they all have you know the concerns with their job and all those things. So that I think that on the regular basis, I will personally go by and say hello, hi and

appreciate them, not that I am just patting them on their back, they are actually doing a good job. That's what I think we have to do.

Progress of SETMA, I think we should laterally do the lateral growth of SETMA going to other towns in Baytown, like some areas where and Mid-County we need to improve, Orange we need to improve also. The fourth thing is that other relationships with other community and another thing I think we continue to work on that. Especially with Altus ZT and all the, you know, we consider that whatever the business we are doing like St. Elizabeth is not really our friend, so they do a lot of business and we will try to modify where it helps all our entities. The last and not least, is that we have to do it every year and year and year again, and I promise to myself that I am going to help to improve the organizational structure of our organization starting for myself and then I will come to you and if you need any help and I will ask you for the help.

Dr. Holly:

Thank you.

Dr. Alan Leifeste:

As a summary statement you know for things that I learned today is the basic protect, grow and learn. SETMA is a dynamic biosystem while protecting what we have, we need to protect the things we have built, whether it be nurse practitioners, whether it be our staff, whether it be each other. You know, every time in our lives we are at different points and that we need to help everybody we have, so we can grow together. As a point for growth, you know we talked about simple things that could potentially do well. Like one of the last things we talked about were probably the most important things. We are paying assets that we don't own and we can consolidate them and actually have them paid off quickly. Growth to different regions, obviously, we will talk about that and potential of putting up flagship as Dr. Anwar says which is a potential something we need to look at I think. As far as learn, we didn't delve to much into it and we kind of left it out but you know we said we are getting older and Dr. Holly is going to be 70 this year. We are going to have to learn to take over and do some of the things he does and that's growth for us and also growth for him, to help teach us so the organization can grow.

Dr. Holly:

Ok

Dr. Caesar Deiparine:

We have discussed a lot of things which are all logical and yes it is nice with all this planning that we made but bottom line the way I see things is as long as we keep our group together, nobody back stabbing each other, we will always make it bottom line. We make all these plans, yes, we try to debate which is good which is not favorable for us, bottom line here, if we all stick together as is like what I saw on the previous SETMA before I even joined SETMA I actually approached Mark Wilson 8 years ago where I had a little bit of inkling of Bodo Brauer what I found in SETMA was hmm people are just back stabbing each other and I was right, all those people started going each others direction. As long as we stay together this way that we have our old kind of discussion on how to rectify things we won't fail.

Dr. Holly:

Brandon left so Richmond

Richmond Holly:

I think it has been a good day, kind of what you are saying Caesar and a little of what you said Dr. Anwar, not really what you said but my thoughts about it. You know I think a lot of the ACO and stuff like that, I think 10 years from now, they are going to have a new buzz word, they are going to have a new acronym, somebody is going to have a new concept to save the world and as long as we stick to our core competency, as long as we take care, one of the things I keep coming back to the book that Dr. Holly had us read about the Mayo Clinic what is best for the patient. You know that can really so focus you on the discussion or the debate or the argument what is best for the patient.

For me in my department, this year we did a lot in the last six months with security and HIPPA and all that stuff. The question was asked, when you finish are you done, well you know you are not done you kind of finish with Version 1.0 and you make sure you keep up with the regulations and we are going to do that. Also as we grow it is going to be important to move beyond Mom and Pop and have processes in place. So, knowledge isn't retained in an individual, knowledge is retained in a book or a database or something, so they can be reproduced, so we are working on that. The expansion, you know, this geographic expansion it certainly can be dealt with but it is new to us, it is probably going to mean contracting with local IT geeks to press buttons and stuff like that while we maintain the brain center back at whatever location.

You know one thing we didn't get to that I was, I don't want to use the word eager to get to because it certainly not something that anybody is excited about, but is the reduction of Dr. Holly's hours and that is going to mean that he is going to have to be willing to do so, which he is ignoring me right now, and because I think the reality is that he can be here for another 20 years, if he can go from 18 hours a day to 14 hours a day.

I said to Bobbie, we were outside and we were discussing some of the previous discussions, and I think somebody said reference that SETMA was like his child. None of us here would let somebody else raise our children, you know, and anybody that you allow to have input into your children you are going to have make sure that they are going to do as good or better job than you did. So there is going to have be a desire to step up and learn and a willingness to let go and allow somebody to put their own mark on it. When Bill Gates stepped down from Microsoft everybody what's going to happen, what's going to happen, what's going to happen and what the industry insiders knew was that nothing was going to happen because he had build a team, he had built an organization that could out live him and, you know, I think that's every person who has founded something's desire.

They don't want it to end with them, they want it to go on and so I want to see you cut back a little bit so that you don't burn out 2 years from now and die from stress, because you're value we could go around this table and SETMA would not be where it is today without Rick, without Margaret, without Imtiaz, without Dr. Colbert, everybody here. But your value is not in going and seeing a patient at the hospital at 3:00 in the morning, its meeting with GTPA, negotiating contracts, planning, visioning, that's your value. So at least that's my opinion.

Dr. Holly:

Dean.

Dr. Dean Halbert:

I don't want to belabor. The first thing I thought about when you asked what our kind of summary take home point was here, the gorilla in the room to me is the leadership void in 15 years when you finally retire, what'll that make you 90, 85 sorry my math is horrible. Anyway and you that's the first thing the big gorilla in the room to me. I kind of share Imti's optimism in a way, there's no one person that could do it, I mean there's only man's zeal, there's only one Holly that can do that all of that but I do think a small army of men can fill each nitch somehow. The question is who does what, who has that aptitude, a lot of us, I mean I don't, everybody is known well that I want nothing to do with that. That I'm a horse, you know, a solider. I go in there and work, work, work, although we may have to learn that. What Imiti's point earlier was that we are getting better at that. We are kind of learning as we go. Sure if 10 years ago none of us could have even dreamed to have done that but I think that some of us are going to have, that it may not be a real aptitude for some of us but we may have to do it. The other thing as far as I think we need to try to keep the best employees and I think that that's important for us. I think that's how we keep the best patient's. In recruiting, I think we need to figure that out and Beaumont is a tough place.

Richmond Holly:

One question, I would love somebody to answer at a later date. How long before we're really in trouble with a call stand point. From an ability, you know, with all the Orange, the Lumberton, how long before we're in bad shape.

Dr. Dean Halbert:

I think it was two weeks ago.

Rick Bryant:

Have we put Dr. Le on the schedule yet?

Dr. Leifeste:

He is on with Dr. Holly.

Dr. Holly:

Michael.

Dr. Murphy:

Dr. Castro doing call.

Dr. Leifeste:

No.

Dr. Halbert:

I was on with Dr. Holly.

Dr. Aziz:

Brandon

Dr. Holly:

Since August of 2007, Vinc and I have been on call weekends by ourselves and from now until we get somebody back, its Dr. Anwar and whoever is on with you. Everything the two of you like me, will watch carefully and if you end up with 40 patients.

Dr. Murphy:

We'll be just fine.

Dr. Holly:

Okay Michael you're next

Dr. Aziz:

No, no Brandon.

Dr. Holly:

Oh Brandon.

Brandon Sheehan:

Mostly I was just to say something that with the first part that earlier spoke to me or got me to thinking was just us needing not us but me sincerely recognizing employees that are kind of under us, especially as we have that low turnover rate where they have been here longer and longer and they start getting more disgruntled about things that just kind of build up over time. Speaking from my experience as far as I might not told them that I appreciate them as much especially like with those working nights and those kind of things. As we have taken more call and those kind of things. Just that we have a commitment to grow and grow better by being mindful. We do have a lot of weakness but to be critical and evaluate ourselves and just to continue to be a source of relief and help in the jobs that we do as support staff to make your life's easier because you do make so many decisions that a lot of people don't ever think about, worry about and that there is a lot more going on and their just coming to the hospital and seeing a few hospital patients and that is what sometimes gets lost with the staff that I have.

Dr. Holly:

Brandon I think that, I wanted to say this earlier and I'll say it now. You have done a very superb job becoming leader of your team and I have watched you grow, mature and I remember when I first met you I thought you were a kid and you were to me and still are, but you have done a great job and I appreciate that. Due to how old I'm getting, there is one other thing else and I wanted follow up for that and for the life of me I can't think, I will think of it again in a minute. And so now we are back to Imti.

Dr. Syed Anwar:

Well I thought today was a great day. I hope I share this feeling but I do believe that we are at the verge of greatness. I divide issues into two sides into two ways, in my simple brain. One is the operational side and one is the business development side and I think to achieve great things you have to have a combination of both. We talked about getting employee satisfaction and this and that. That is an ongoing process and 200 years from now we will still doing that. But I think the greatness of SETMA is that we have very good messaging and we have very good product. I think it behooves us to take it to other places, other people, other geographies, maybe other countries. I like to think big, nothing wrong trying to think big. In terms of personnel, I couldn't find a better group of people that I would like to work with. I think everybody brings their own skill sets, everybody helps offset their deficiencies.

I think Dr. Holly has his nitch. He has his place. So does Dr. Colbert, also Dr. Leifeste, whatever. I do believe that I just hope that we are brave enough and you know muster enough gumption to think big. People have done well in our life times, they were just like human beings just like us, born the same way, they are dying and will die the same way and I think after 15 years of doing this, talking to these people that I have access to, they are not any brighter than us, they are not any smarter than us and they sure as hell don't work any harder than us.

I have no reason to believe that we cannot grow SETMA to be a force to reckon with, if not in national level very at least at the state level and I am just putting where my heart is, that's what drives me. Seeing patient's everyday and probably will do until I retire but what motivates me is to do something that is unique, that is to grow, make the product better and along the way find people, partners, organizations that will take us to that level and that's where I stand and that's what I believe in.

Dr. Holly:

Thank you. Michael.

Dr. Michael Thomas:

I want to thank you first of all to arrange this meeting, it is the first time for me to be together and openly talk and discuss things. I really appreciate it. On the strengths and we talked a lot about strength and very briefly what I took away from strength SETMA is what I call the culture of SETMA, teamwork and the different personalities and actually put down here, I call it a mini-America because in America statistically I think half of the people who arrive now live here are not born here and look around the table that's us. So we are really in a way a mini-America and it's great to see that coming from all different cultures and backgrounds, we can work together and be successful. On the weaknesses, on the threats and so forth, there will be more to say because I think that's were we kind of focus on. One thing clearly mentioned was the federal regulations, the accountable care act of the reimbursement that will have an impact on our operations, at what extent I don't think anybody

in this room right now knows exactly and so my feeling is similar to Dr. Holly, let's be careful I mean let's just consolidate what we have and in terms of going out, I am risk taker, I like what Imti says but I also know there is timing for everything and I think right now I don't feel the timing is to go out and take big risks.

The second thing on the weakness or strengths is the age of provider. I didn't realized that but it was brought up and we have to look at new providers and that's kind of a challenge to us because we just don't get them very easily. The third is the leadership continuity which we briefly touched but I would, I don't know how it is going to be and I think it would be important to develop a concept of how we are going to proceed with that.

This is part of planning, it may be awkward for some people and maybe particularly for you Dr. Holly, but I think it is important to openly talk about what would be if Dr. H is not here, who would be and how would be and who would do it. I know I have my own opinion but I think it would be, we need to get together and talk about that. The other thing I didn't know was the nursing home potential threat and I am willing to put my little piece of kind of help in with infectious disease thing and so anybody if you go out to the nursing home tell Dr. Thomas is interested in helping you with your infection control, call infection control there and see what happens. In terms of opportunities, clinics and new clinics and real estate, are certainly opportunities. I see two, clinics I would like to see our present clinics particularly the Nederland office expand to full capacity. Develop Orange maybe. Maximize what we have and then maybe move from there. I don't know where to go, I'm kind of like going to Winnie, I am not sure whether Kountze is a small place but that's really beneficial.

I would be good to go Baytown certainly because Baytown has a good payor mix and I think its medically sort of kind of underserved, but I don't have any idea how in detail to do that. Real estate, I love real estate, I own real estate but I am not a fan of putting a flagship on Dowlen Road because I just don't see the location. Either people just drive by, its not going to be an eye-catcher while College Street or maybe other areas would be a better place. Ideally, SETMA 2 would be a great place particularly with the hospital plus the HEB, I think that would be kind of the place I would envision. That's it.

Dr. Holly:

Thank you. Pat.

Pat Crawford:

Well this was my first time here and so it was interesting for me to see the different personalities and all today, so I have enjoyed it.

Dr. Holly:

I'm going to see you around a psychiatry practice, so she is going to make some recommendations.

Pat Crawford:

SETMA has many strengths and number one being the providers that actually care about their patients and also their staff. That's not saying everywhere in this area. I see the strength as the good, you are all able to adapt to the current and future changes in the healthcare. You are ready for it and moving toward it. You have a very strong governing board with the ability to work together in spite of your differences of opinion and different personalities and I didn't see any primadonnas in the room today.

PROVIDER UNKNOWN:

You didn't seem to look hard enough.

Pat Crawford:

As far as what I would take away for my department, I hope that we can continue to grow and to mold into what we need to be to be a valuable asset to the organization. I want to be sure that we are good stewards of the finances for the SETMA Foundation, because I think that's why the greatest things that you all do in giving to others.

Dr. Holly:

Thank you. Jim.

Unknown provider:

No Jon was up.

Dr. Holly:

Jon, I'm sorry.

Richmond:

He's so little.

Dr. Holly:

I'm looking straight for him, I'm looking straight at you.

Dr. Aziz:

Who could miss the skull.

Jonathan Owens:

This was my first time for a meeting like this too, so I'm glad to be here and I'll be short and sweet. I think our strengths are that we have a lot of diversity those who are willing to do a lot of hard work and it has gotten us to where we are today and we are in a greater place, but the journey is not over and as we discussed today, one of our biggest uncertainties is what revenue and reimbursement will be in our future and where there is no money, there is no mission and we have to have that to survive. So I think personally what I take away from that is what's going to keep afloat in the future is going to be Medical Home, NCQA, proving to the ACL that we are doing good work. So its up to me to make sure that our systems are working for our employees and that we are doing good work and capturing and proving that we are doing good work and we are able to continue to prove that to everybody we need to, to get the reward that we deserve.

Dr. Holly:

About, Jon, you're 33 (Jon: 32 Almost 33) 32, close to 33 and you have been with SETMA how long (Jon: just 15 years, just turned) 15 years. You will remember the deal that I made, I didn't tell any of about it, he was college and I said if we pay you a salary and pay your room and board and your tuition will you go to school half-time and work for us half-time because he could work electronically, and he agreed to. He went to his dad and all of you known Jon's dad has since passed away. He said if they're going to pay you a good salary, going to pay your tuition and your room and board and you're asking me should you take this, why are you sitting here, go say Yes and of course it got him off of daddy's nickel, so that was really good. But it has been good relationship and I appreciate you very much, what you've done, all of you.

Dr. Holly:

Next is Margaret.

Margaret Ross:

Jon's a baby, I've been a nurse for 30 years. I've worked at SETMA for a third of my nursing career. St. Elizabeth outside of Rick who was my immediate supervisor for most of those years.

Dr. Holly:

He told me nemesis

Dr. Anwar:

My sympathies

Richmond:

You poor thing.

Margaret:

They didn't necessarily value the managers input, you know, it was always their way. So I think that that's definitely a plus for our organization. That everybody's opinion counts. I do think that our partners are definitely committed to the patient and to the employees and that excellence

is not a destination but a process that we are always going to continue on. So for me, we will definitely work within our departments on communication and documentation and making sure we have everything that we need captured in that medical record. Motivating those complacent employees, be it through recognition or whatever means we have do

(Dr Holly:

Intimidation) Yeah, to get that accomplished and I will definitely work on that. I think that my job is to work with my managers to make sure that their willing and capable to make decisions for future. They are all younger than I am, so if we're talking about our age, we all have to mentor someone else to take on our rolls. So that's something that I'll definitely start with them.

Dr. Holly:

Thank you. Now, Jim.

Dr. James Shepherd:

I'd like to thank Dr. Holly and the partners for inviting me here today. It's been very interesting and very constructive. Although this is my first year with SETMA, I feel I've worked with SETMA for 15 years through GTPA and I am very optimistic about SETMA's future. I think as to the succession I think that will take care of itself. I retired and I didn't enjoy it and I think Larry will enjoy it much less than I did. So once you see him cutting back and taking time but I think he'll still be a vital part of SETMA for a long time to come. Wishing you good health. I think our core business is to get our heads down, see our patient's, deliver excellent care and improving year by year and I think SETMA is very well placed in the new regulations environment. No one else I know is doing this. I think that when the dust settles, SETMA, will come out on top and I think people will be standing in line to be associated with SETMA. The future is very good.

Richmond:

We need a toast after that comment.

Dr. Holly:

Rick.

Rick Bryant:

Well, first of all I want to start out by just saying thank you to Dr. Holly and to the rest of the partners. This is probably the most enjoyable position that I have ever had. You give me the resources I need to do my job and for the most part you leave me alone. You let me do and I hope that I've done a good job for you and when I don't I want you to tell me. Secondly, I want to thank the people who aren't here and just so that everybody understands that sometimes me or Margaret and Pat, Richmond and Jon, I don't think I'm missing anybody else, and Brandon, sorry Brandon, Ray. You know we do have a great team, okay. You look at Gary Martin, you look at Sabrina Weston, you look at Darcy Farnsworth or your look at Nicole Cole, you look at all of the clinical coordinators, and whatever. These people are dedicated to us and we wouldn't

be what we are without those people. So I just wanted to give them a little recognition. I don't think I've really heard a lot today that I went Oh, my gosh, other than may be the threat of the nurse practitioner, that bothered me a little bit.

(Dr. Holly:

The nursing homes, you said nurse practitioners)

Rick:

I'm sorry, yeah, I was thinking about Scott in a little bit I guess.

Richmond:

The nurse practitioners in the nursing homes.

Rick:

Yeah, well actually that's true. The nurse practitioners going to the nursing homes, that's a big threat. But other than that, I think it was really a good dialogue. I do think we need to expand. I believe that even though we're a little risky at first in terms of bricks and mortar, I think that the need to look at that a little more to see if that does make some sense for us somewhere down the road, and I will work toward that in. I think we need to expand our ancillary services. I am looking forward to once we get into Lumberton, once we get the new space down in Mid County as well as the new office in Orange, being able to provide that one-stop shopping that we talked about, I think that is important for our organization to continue to do that. And I think that the last thing that I took away from this and this isn't something that started today, Dr. Holly and I have talked for the last 5 years, Richmond has been part of that conversation, that hey you won't be here 20 years from now, okay, I can guarantee you that you may be physically living but you probably won't be doing what you are doing right now. I would rather that you take the initiative to start planning for that now versus 10 years or 5 years or 15 years or whatever down the road, because we don't know what's going to happen. You know the way it looks I'm actually going to leave this organization before you will and I've already started to kind of get an idea of what I think it's going need you know once that takes place, and I think that to be fair to everybody else that's going to be here, you need to do that as well.

Dr. Holly:

I've put in on the agenda.

Richmond:

And skipped it.

Dr. Holly:

That's all you all talk about. I have a nitch, I'm going look that word up to make sure I really understand it.

Unknown provider:

You're just a nitch guy

Rick:

And I think that your personality, your not going to feel, Richmond said it you've got to let go and I think we will be okay and I'm going to look at I may be on my boat 10 years from now and going hey what's SETMA doing, but I think its going to last far beyond me, far beyond you, but if we put the process in place now, you know I think it would behoove us all.

Dr. Holly:

Ok. Vijay.

Dr.. Vijay Kumar:

I'm the last one, but I've just come back to SETMA. It is a really enjoyable. You know I got out for 5 years and I realized what I missed. That's why it's a whole new gist. The thing that I'm the only specialist here, at the meeting here but I like it if you can go out.

Dr Leifeste:

Michael might disagree.

Dr. Vijay Kumar:

I'm sorry Michael. What I'm saying is that you known, its just also can do the revenues there is no doubt about. Being a ______ is not a bad idea. We can discuss anything but I would like anyway, ______ it will be willing ______

Unknown Provider:

When you get two more rheumatologist.

Dr. Kumar:

When I can get one of these we have to look at them, Dr. Holly said that _______ but they don't have to spend money if we don't have money. But the thing is you are looking a revenue from everybody and all, everything is black and white. We can go________so I'm not saying one thing_____Overall you known I'm committed to SETMA , I'm totally dedicated and ask______but I will not be able to see everybody, but I will also go to nurse ______ for any provider. If you think something_______anytime they just pick up a phone and call me and we will______, I can discuss on the phone also. But I am really enjoying working and its really, really good for me I feel within the last. My hair has started growing back.

Dr. Holly:

Raydhana—you've listened to this whole thing.

Unknown provider:

Thought she was going to give up.

Dr. Holly:

You know all the warts.

Raydhana Prudhomme:

I guess it's the first thing that I really admire is the appreciation that so many of the providers mentioned about their staff. I have seen that at all of their meetings that I have attended and the first thing that Dr. Anwar just constantly tells everyone is about his nurse and all his staff and is it's a really good feeling to hear a provider put his nurse above everything that he does and quickly says that I'm not who, I couldn't do what I do if I didn't have my nurse. Also the fact, that a lot of the physicians have immediately addressed whatever they have to do to make sure that its their staff and employees are happy and content. They are going to do what they have do immediately. It wasn't any question whatsoever or a thing they say Okay this is what were going to do. I am so glad that I'm going to have everyone in this room supporting me when we start making these changes with

Dr. Holly because, you know, Richmond and I are probably going to get the ______ and you know we have been trying for a long time. Richmond and I have talked and I have fussed at Dr. Holly so many times so.

Dr. Holly:

I told them no.

Unknown provider:

Maybe some intervention.

Raydhana:

We're trying. Rick thank you so much for what you just said about starting now because we have been putting thoughts_____. We will be glad everyone in this room knows that they have to every now and then check on me to make sure I still have a job.

Dr. Holly:

It's interesting to put her on the spot and she wasn't on the spot. To think that there sits Dr. Prudhomme, thanks Raydhana. I know you care deeply about this practice.

In March of 1995, when we first had a conversation about forming a group, I told the two people that came to me, I said You don't want me in your group. I said, I have convictions and I will

not compromise on and I expect to be in solo practice my whole life because I don't expect anyone else to adhere to what I believe. And they said well tell us what it is and we'll adhere to it. And I told them and they said, you write down. One thing is that as you well know I'm not Volstead Act supporter but I don't consume alcohol and I don't allow it in my home or my family or in this practice, and they agreed that they would abide by that. You know, Mark was the principle one and he said You tell us how and I wrote the language and the lawyers said and you know you can't use Listerine in this practice and was the way you wrote this and we laughed about that. And I'm totally absolutely totally opposed to abortion, and they said will you write language and they agreed.

Two things happened because of that. One is that I expected to practice alone and I wasn't suffering, I had done it for 21 years and the first year I was in practice, I took call 24 hours a day, 7 days a week. Saw my patient's everyday, 7 days a week. But, there are, one of the things that happens out of pride, is people become slothful, they become lazy because they think they deserve more for less for longer for more than other people. And so because of that pride and arrogance, they become lazy. The opposite of that is that humility will breed diligence because it comes from gratitude and I was deeply grateful because they were willing to take a pretty strong stand, understanding that I was serious and I would not compromise on those issues and there were several others, but those were the two key issues. And so because of my gratitude, I worked very hard to make this thing as successful as I could.

The second thing that happened was, I recognized that of the four of us, there was only one that was willing to set aside his interests for the benefit of the whole and that ultimately to me as what leadership is all about and that is that it's not about me, me, me, my, my, my, Now I'm unashamedly, if you've got a better way to do it than I suggest, tell it to me and I'll adopt your way. Until you do, let's do it my way. It's not out of arrogance, it's just out of something's got to happen. You know if everybody sits around contemplating their belly button, nothing gets down. But even that, I manipulated my way in being the managing partner because I thought I could set aside. Well it turned out very quickly that there was one guy who was a crook. Turned out quickly that another guy is just totally self-centered and he wanted to just get as much as he could, for as little as he could, for as long as he could. And the other one had a temper that was just uncontrollable. And that is the founding principles that have generated SETMA. I think we have done a wonderful thing that we all can be proud of. We have not done a shameful thing. I don't know of a dishonest, disrespectful thing that has been done in this practice. Where we have been confronted with difficult issues, we have handled them with honesty, with morality, with ethics and legality. We went through a 7 year suit when the government couldn't pin anything on because there was nothing to pin.

I'm going to take away from this exactly what that I'm aware of. I've been married 48 years, I know I'm the easiest person to live with but I know I've been a good friend to everyone of you. I can look at each one of you in your face, and I've been through a crisis with everyone of you except for a couple of new people, hard crisis, difficult problems and I supported you and cared about you and continue to do that and will. A couple of years ago I changed my schedule. (Richmond: Hadn't taken a Friday off yet.) In name only, but I am going to come to your pretty soon with some changes in schedule but, I'm 69 I intend to practice until I'm 75 full time. At that time I'll discuss with you, 5 and 1/2 years from now, I will discuss with you how we will change my schedule to do what we'll call part-time or whatever, but because I don't think I could ever do part-time work, I just may take more time off. I deeply care about you. I want you to be successful. I want you to be more successful when I'm gone. You know the apostle Paul and

apostle Peter, both said that After I am gone I want you to succeed. I want you to do this and this and this.

But that's all going to be proof for the pudding. I've been very pleased that we can have this conversation today. You know, we can have different opinions, neither of which are wrong. Imti is not wrong about what he wants to do about the building, because it's not a matter of right or wrong, but it's a matter of timing. There are issues that neither of us have the answers to. Once we get those answers, we will wisely move forward. SETMA has made only two major financial mistakes and they were neither one, our favorite one cost us \$85,000 and the other hasn't cost us a lot of money but we've put a lot energy in to it. So we don't want to make a big one, we don't want to make one that really hurts us. I will die loving this place.

I just got an e-mail and this is why it's on my mind. It's this final scene of the movie Macarthur, I hope you've seen it, where he is standing at the,_______this place, I've seen it personally but, at WestPoint and he said that when I pass over the river my last thought will be of The Corps, The Corps, The Corps,______. Sends chill bumps up your. My last thought won't be of you but my third to last thought will. I genuinely love you, each one of you and everyone of you. And I want to you be extraordinarily successful. Being wise, being wonderful good people, do great things because you do do them the right way as well as the right thing and I think that this day is going to be a very important day in our history. If we take from this our mutual commitment to support one another, care for one another and also for one another's family.

The only ill felling I have toward any of you is Mrs. Holly and I attend to have Imtiaz's children taken away from him and given to us. (Dr. Anwar: Between 10 and 2 you can, all he does his sleep) But neither did this boy nor does he today. But you know I haven't done this in a long time but I want to and I hope you will indulge me, because I have often said when I lead in public prayers that you pray as you've been taught and I will pray as I have been taught and I would like to lead us in our closing prayer on this special day and if you will indulge me, I don't intend to be proselytizing but simply thank God for the wonderful 18 years we've had and in two years I will have spent half my medical career with SETMA.

I will have practiced medicine for 40 years and so (UNKNOWN PROVIDER: I've got you beat) and my goal has always been for you to never have another job. (UNKNOWN PROVIDER: That's my goal too) (Dr. Aziz: We're on the same page) (Dr. Anwar: I can say I think Richmond is probably gets a little bit, 100 percent of my career is at SETMA, I don't know anything outside SETMA to be honest, that's why I get emotional) (Dr. Leifeste: if you leave he'll kill you, just saying)(Unknown provider: or commit suicide)

Dr. Holly Prayer

Father

We've been here for secular purposes, yet not so secular for I feel that each one of us in our belief system and in our personal commitment to that system, that we have been practicing our faith as we have been practicing medicine. I think that for each of the people that are here, each one of them critical to the furtherance of the mission that you have given to us. Father, I have felt everyday of my life in SETMA that I am doing what you want me to do.

Imperfect as I am, that we have been following your purposes and your mission for us, that your blessings have been upon us. There have been many who worked as hard as we have, there have been many that have dreamed as greatly as we have and many that have risked as much as we have and yet they've not succeeded. Deuteronomy 8 says: Think not that it's by your hand or your power or your might that you've gotten this great wealth, but it's a gift from God.

And so we acknowledge that Father, we acknowledge that we are the beneficiaries of your benevolence, we are the recipients of your grace and mercy and we receive that gratefully and I pray, Father, that in the coming years that when we approach our 25th anniversary in a mere 7 years and then our 50th anniversary in a mere 32 years that, Father, whomever of us are here will remember our beginnings as we read over these documents from 1995, 1996, 1997, 1998, that we will remember the struggles and the risks and the challenges, the obstacles that SETMA went through and all that we overcame because of your mercy and grace.

And I pray, Father, that whatever persons belief that they will be warmed and encouraged and strengthened and that they will be, Father, given a sense of personal worth because of their work here at SETMA. I pray that our children and our wives, our husbands, our friends, our family and every member of SETMA's family will sense that same benefit from this day. We love you and we really love what you have given us a chance to be part of. We pray we will ever be faithful to the mission and the vision that you have given to us. For it is in the name of Jesus Christ Our Lord in my belief system and in the belief systems of my friends and brothers and sisters that they will pray as they have been taught that we pray. Amen. God bless you. Thank you.