GRAYS HARBOR COMMUNITY HOSPITAL
BOARD OF DIRECTORS REGULAR MEETING
November 27 2018

COMMISSIONERS PRESENT
Andrew Bickar, District 4
Michael Bruce, District 2
Miles Longenbaugh, District 3
Melanie Sturgeon, At Large 2
Becky Walsh, District 5 (via conf. line)
Maryann Welch, District 1

OTHERS PRESENT
Niall Foley, Executive Director Finance
Tom Jensen, CEO, GHCH
Teresa Ramirez, Executive Assistant
Members of the Public

GUEST
Rosemarie Majeski

PATIENT STORY

Ms. Majeski was present at the Board meeting to share about her husband's most recent experience. Ms. Majeski shared that she and her husband have supported the Hospital over the years and have received the best care on the nursing units. During a most recent hospital stay, Dr Troeh was wonderful in arranging care for a PICC line placement. Ms. Majeski also brought forward two areas of focus that she requested be addressed:

- Provide staff availability every day of the week, including weekends, for the placement of PICC lines.
- Provide staff in the Wound Care Center who are able to change wound VACs.

Ms. Brandt, CNO, shared that three nurses have just recently been sent through certification training, with one nurse already signed off to begin providing services. In addition, wound VAC education will be provided to all nurses the first part of December.

President Welch spoke on behalf of the Commissioners regarding their strong belief in Grays Harbor Community Hospital and its presence within the community, and thanked Ms. Majeski for sharing improvement opportunities with the Board and Hospital.

CALL TO ORDER

President Welch called the meeting to order at 6:09p.

Public Comment – Agenda Topics
President Welch opened the meeting to members of the public for comment regarding topics listed on the agenda.

CONSENT AGENDA

Submitted under the Consent Agenda were the Hospital Board Minutes of October 23, 2018.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Sturgeon and unanimously carried to approve the Consent Agenda.

BOARD DISCUSSION AND ACTION

Medical Staff Credentialing

Submitted was the Medical Staff Credentialing Report:

ACTION: A motion was made by Commissioner Bickar, seconded by Commissioner Bruce, and unanimously carried to approve the appointment of Justin Fuehrer, DO as Provisional Staff for a period of one year in the Specialty of Emergency Medicine.

ACTION: A motion was made by Commissioner Bruce, seconded by Commissioner Bickar, and unanimously carried to approve the reappointment of Cara Bardwell, PA-C as an Allied Health Professional for a period of two years in the Specialty of IM/Hospitalist.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Bickar, and unanimously carried to approve the reappointment of Leo Kesting, MD as Courtesy Staff for a period of two years in the Specialty of Neurology/ Telestroke.

ACTION: A motion was made by Commissioner Sturgeon, seconded by Commissioner Bickar, and unanimously carried to approve the reappointment of James Lechner, MD as Consulting Staff for a period of two years in the Specialty of IM/HEM/Oncology.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Bruce, and unanimously carried to approve the appointment of Nida Momin, MD as Locum Staff for a period of one year in the Specialty of IM/Hospitalist.

ACTION: A motion was made by Commissioner Sturgeon, seconded by Commissioner Walsh, and unanimously carried to approve the reappointment of Xingwei Sui, MD as Consulting Staff for a period of two years in the Specialty of IM/HEM/Oncology.

ACTION: A motion was made by Commissioner Bruce, seconded by Commissioner Walsh, and unanimously carried to approve the reappointment of Scott Werden, DO as Consulting Staff for a period of two years in the Specialty of IM/Cardiology.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Sturgeon, and unanimously carried to approve the reappointment of Gregory Allen, MD as Courtesy Staff for a period of two years in the Specialty of Radiation Oncology.

ACTION: A motion was made by Commissioner Bruce, seconded by Commissioner Walsh, and unanimously carried to approve the appointment of Jose Ospina, MD, PHD from Provisional to Consulting Staff for a period of one year in the Specialty of Teleradiology.

ACTION: A motion was made by Commissioner Sturgeon, seconded by Commissioner Walsh, and unanimously carried to approve the reappointment of James Raymond, MD as Courtesy Staff for a period of two years in the Specialty of Radiation Oncology.

ACTION: A motion was made by Commissioner Bruce, seconded by Commissioner Walsh, and unanimously carried to approve the appointment of Melissa Ching, MD as Locum Staff for a period of one year in the Specialty of OB/GYN.

Resignations were noted:

- Hans Geisse, MD in the Specialty of IM/Addiction Medicine
- Benjamin Goold, MD in the Specialty of Family Medicine
- Trenton Sensiba, DO in the Specialty of Internal Medicine

CHAIRMAN'S REPORT

Employee Forums
President Welch reported that she and Commissioners Walsh, Bruce, and Sturgeon attended employee forums.

COMMITTEE REPORTS

Board Quality Report

Commissioner Walsh provided report on the November Board Quality Committee meeting. Of note:

- Quality Report; Medication Mgt. is being analyzed related to the handling of controlled medications. Quantros has become more simplified and education is being provided to leadership. Professional & General Liability applications have been completed, with a hopeful savings to be realized this year. The revised Compliance Charter will be submitted to the Committee in December. Dr. Wong, Ms. Brandt, and Ms. Johnson attended DNV training. It is anticipated that DNV will provide a much improved survey process. DNV originated in Norway and has been in existence many years. Their approach is much more collaborative. They survey every year vs. every three years.
- ED Operations; "Left Without Being Seen" data is showing a downward trend to the lowest it has been in the last year. "Door to Doctor" time has decreased and is well below state and national averages. Door to Department is the lowest it has been over the last year. These figures reflect success in process improvement plans.
- Core Measures; Median Time to EKG for AMI - data collection/reporting is challenging, as some of the documentation resides within ambulance records. CT Results for Acute Stroke w/in 45 Minutes - providers are 100% compliant.
- Diagnostic Discrepancies; There were no diagnostic discrepancies to report. Pathology is exceeding the Cellnetix goal of having < 5% discrepancy rate.
- Resuscitation Results; Code Blue survival rates are low, which is not unique to our institution. Commonly fewer than 20% of patients who suffer cardiac arrest will survive to discharge. Early recognition of patient deterioration coupled with an effective system for a rapid and effective response (Rapid Response Team) improve patient outcomes, prevent cardiac arrest and increase the chance of survival. Staff education and mock codes continue.
- Moderate/Deep Sedation; Documentation standardization work is underway. Education is being developed.
- Human Resources Report; A significant decline in the number of employees/FTE'S occurred this past year. The Turn-Over rate increased due to the aforementioned, as well as employees' uncertainty of long term financial security. Some senior leaders volunteered to be laid off in order to salvage another employee's position. Changes were made within Housekeeping, as new employees were quitting soon after hire because the work was too hard. Now, new employee candidates participate in job shadowing prior to hiring. Improvements have been realized thus far. Travelers decreased in March; however crept back up due to turn-over of highly qualified and skilled staff, and the challenges in replacing their positions. Some employees who were laid off continue to remain on the hospital's health insurance for a defined period of time in order to address maintenance health issues before their insurance is discontinued. Some employees are choosing to remain on COBRA; however, it is anticipated that the number will drop after rates increase in 2019.

Submitted was Policy A100 Organizational Plan, as recommended by Board Quality for Board approval. Commissioner Walsh provided brief review:

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Bickar, and unanimously carried to approve A100 Organizational Plan.

Board Finance Report

Commissioner Longenbaugh provided report on the November Board Finance Committee meeting. Of note:

October highlights:

- (+) Outpatient Volumes
  - Clinic visits 4% above target
  - Clinic WRVUs 9% above target
  - Hospital Radiology visits 4% above target
- (-) Surgical Volumes
  - IP minutes 6% below target; cases 16% below target
  - OP minutes 7% below target; cases 9% below target
- (-) IP Volumes
  - Acute admits met target
  - CDU admits 38% below target

October Consolidated Financial Summary

Total Revenue:	$ 31,187,243
Revenue Deductions:	$ 23,413,855
Net Operating Revenue:	$ 8,360,057
Total Expenses:	$ 8,559,173
Net Income:	$ (503,476)
Year to Date:	$ (5,375,821)

Financials

- ED visits were down 3% below budget.
- Bad Debt; $2M in self-pay was moved over into Bad Debt. There have been an increased number of charity care applications, with high volumes anticipated to continue.
- Work is ongoing to reduce professional fees by eliminating certain position and rotating out interim leadership positions.
- Cash on hand is down to 15-17 days. A new revenue collections vendor is being on-boarded, which will create more streamlined functions and save the organization money.
- Gov't payor mix continues to hover between 75-80% MC/MD.

President Welch inquired about the year-to-date loss. Mr. Foley clarified that the loss of $300k was related to losses in investment funds. He also indicated that November and December are typically the better months for increased volumes, so year-end financials will be dependent on this trend.

Board Recruiting Report

Commissioner Longenbaugh reported that three candidates have been interviewed. A recommendation to the Board will be made at the December Board meeting.

Foundation Board Report

Commissioner Bruce provided report:

- The Foundation welcomed Commissioner Bickar as a new member.
- Policy FD001 (Foundation) Spending Policy was approved at the Foundation Board meeting, with a copy distributed to Board members.
- CNO Brandt brought forward two requests; 1) Equipment for laparoscopic or hysteroscopy procedures, and 2) fluid warmer for Endoscopy.
- Two letters were distributed from GH College scholarship recipients.

ADMINISTRATION

Executive Suite Summary Report

The Executive Suite Summary and HMG Recruiting Report will be combined with the December report and submitted at next month's meeting.

OLD BUSINESS

None

NEW BUSINESS

2019-2020 Strategic Plan and 2019 Operational Plan

Submitted for Board approval was the 2019-2020 Strategic Plan and 2019 Operational Plan. President Welch requested that Commissioners review the documents and be prepared for discussion and action at the December meeting.

Board Education

December; DNV Accreditation process.

GOOD OF THE ORDER

None

PUBLIC COMMENT – General

President Welch opened the meeting to members of the public for comment.

ADJOURNMENT

The meeting adjourned at 6:44p.

MINUTES AND ATTACHMENTS APPROVED AND ADOPTED THIS 20th day of December, 2018.

ATTEST:

Teresa Ramirez
Recording Secretary

Commissioner Longenbaugh
Board Secretary