

**HARBOR REGIONAL HEALTH COMMUNITY HOSPITAL  
BOARD OF DIRECTORS REGULAR MEETING  
May 25, 2021**

**COMMISSIONERS PRESENT**

Michael Bruce, District 2  
Becky Walsh, District 5  
Chris Thomas, District 1  
Scott Dilley, At Large 2  
Lynn Csernotta, District 3  
David Quigg, At Large 1

**ABSENT**

Niall Foley, CFO  
Commissioner Andy Bickar, District 4

**OTHERS PRESENT**

Tom Jensen, CEO  
Dr. Anne Marie Wong, CMO  
Melanie Brandt, CNO  
Elizabeth Tschimperle, Exec. Dir. HMG  
Chris Majors, Director Public Relations  
Dr. Charles Best, Chief of Staff  
Dr. Rachel Sell, Chief of Staff Elect  
Cindy Reynolds, Exec. Asst.

Members of the Public

**EDUCATION**

Mr. Jason Halstead, Director of Quality, Risk and Compliance provided Board Education on Quality Management Oversight, Part 2, Quality Management Oversight. Of note; brief recap was provided from Part 1 of the presentation. Part 2 included Regulatory Oversight and the Quality Management Oversight system and how the Governing Body provides oversight.

**CALL TO ORDER**

Chairman Bruce called the meeting to order at 6:00p. Due to the COVID Pandemic's ongoing restrictions, today's meeting was conducted via Zoom.

**CONSENT AGENDA**

Submitted under the Consent Agenda were the Hospital Board Draft Minutes of April 27, 2021.

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

**BOARD DISCUSSION AND ACTION**

**Medical Staff Credentialing**

Submitted was the May Medical Staff Credentials Report for Board review and approval.

**ACTION:** A motion was made by Commissioner Dilley, seconded by Commissioner Walsh, and unanimously carried to approve the May Credentials Report.

**CHAIRMAN / COMMITTEE REPORTS**

**Chairman's Report**

**County Wide Mass Vaccination**

Chairman Bruce expressed appreciation and thanks for the many individuals who were involved in the success of the county wide mass vaccination project. Special mention was made that Commissioners Walsh and Thomas both volunteered their time during the project.

## **COMMITTEE REPORTS**

### **Board Quality Report**

Commissioner Quigg provided report on the May Board Quality Committee meeting. Of note;

- 1) Standing Items of monthly, quarterly, semi-annual reports were received and reviewed.
  - o ED Left without Being Seen
    - Melanie Brandt, CNO, is acting as the interim ED Director until a new Director is in place.
  - o Medication Safety
  - o Nursing Outcomes
    - Falls with injury saw a slight uptick in March. Falls continue to be reviewed for trend identification, seizure precautions have been identified and added, and compliance with post fall huddles has improved.
  - o Cath Lab Quality Assurance
    - The Cath Lab Field Ops. Mgr. reported how the service line is making improvements.
  - o Care Transitions / Utilization Review
  - o Mortality
  - o Quality Risk and Compliance which included monthly Grievance Report
    - ED Patient Surveys went live on April 1, 2021 with an opt-in rate of 21.5% in the first month (April). A significant increase in patient participation is anticipated.

### **Board Finance Report**

Commissioner Thomas provided report on the May Board Finance Committee meeting. Of note;

#### **Audit Report 2020**

Received was the Independent Auditors and Consolidated Financial Statements with Supplementary Information for 2020, as well as the required Communications Letter.

The letter of communication was issued to the Governing Body. There were no disagreements with Management, or internal control issues. Accounting estimates were deemed reasonable. There were no adjustments made by the Auditors however one adjustment was made by Management; a debt write off due to the cyber-attack. Auditors reported that Management decisions are scrutinized and reviewed month to month and the estimates have sound backing behind them. This was a very clean audit.

#### **Highlights for April 2021:**

- (-) Outpatient Volumes
  - OP registrations 9% below target MTD; 6% below target YTD
  - ED visits 6% below target MTD; 20% below target YTD
  - OP Surgical cases below target 2% MTD; 17% above target YTD
- (-) IP Acute Volumes

- Admissions 6% below target MTD; 14% below target YTD
- Patient Days 16% below target MTD and 16% below target YTD
  
- (+) COVID Expenditures
  - Continued decline in direct COVID expenditures from height of pandemic response
  - COVID related FTEs down to 6 in April

**Consolidated Financial Summary:**

Net Operating Revenue:	\$ 7,230,680
EBIDA EXPENSES:	\$ 7,352,126
EBIDA Gain (Loss)	\$ (121,446)
Operating Gain (Loss):	\$ (539,714)
Net Income Gain (Loss):	\$ (280,404)

**GHCH Board Foundation Report**

Commissioner Walsh provided report on the May Board Foundation meeting. Of note;

- Financial investment quarterly update was received.
- Two requests for funding were approved;
  - New monument signs for West and East campuses
  - Quiet At Night Project; Engineering materials
- Treasurer's Report for April was received.
- Discussion was held in consideration of changing the name of the Foundation to align more closely with the new Harbor Regional Health rebrand.
- Thank you letters were received from recipients of the Foundation Medical Scholarships.
- Farewell was bid to Gordon Glasgow who served on the Hospital Foundation for 12 consecutive years.

**Executive Suite Summary Report**

Submitted was the Executive Suite Summary Report, as well as the HMG Provider Report for May. Of note;

- Hospital and Nurses Week was celebrated this month.
- The Spring Employee Forum was conducted via Zoom and was recorded for those who were unable to participate.
- The Budget proviso passed. Letters will be written to Legislators thanking them for their support.
- Thank you letters were sent to presenters of the Spring Board Education Retreat.

**OLD BUSINESS**

None.

**NEW BUSINESS**

**Board Education**

The June Board Education will be HarborCrest Behavioral Health presented by Melanie Brandt, CNO.

**GOOD OF THE ORDER**

None.

**PUBLIC COMMENT** – General Topics

Chairman Bruce reported no public questions or comments were received in advance of the meeting.

**ADJOURNMENT**

Chairman Bruce called for meeting adjournment.

All Board members were in unanimous agreement to adjourn the meeting.

The meeting adjourned at 6:41pm.

**MINUTES AND ATTACHMENTS APPROVED AND ADOPTED THIS 22<sup>nd</sup> day of June, 2021.**

**ATTEST:**



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Cindy Reynolds  
Executive Assistant



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Commissioner Walsh  
Board Secretary