

**HARBOR REGIONAL HEALTH COMMUNITY HOSPITAL  
BOARD OF DIRECTORS REGULAR MEETING  
July 27, 2021**

**COMMISSIONERS (Voting)**

- (X) Michael Bruce, District 2
- (X) Becky Walsh, District 5
- (X) Chris Thomas, District 1
- (X) Scott Dilley, At Large 2
- (X) Lynn Csernotta, District 3
- (X) David Quigg, At Large 1
- () Andy Bickar, District 4

**OTHERS (Non-Voting)**

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

Members of the Public

**EDUCATION**

Ms. Melanie Brandt, Chief Nursing Officer, provided Board Education on HarborCrest Substance Abuse Disorder Treatment Center. Of note; HarborCrest provides the following services for ages 18 and older;

- Inpatient and outpatient treatment services
- DUI assessments
- Urine Drug Screening
- Buprenorphine clinic
- CUP Program (chemical use in pregnant women)
- Parenting classes

The program provides 24/7 physician coverage, 24/7 nursing-medically managing patients through detox, counseling sessions, AA/NA meetings, outside speakers, alumni speakers, and group sessions. Members of the team include Physicians, Directors, RNs, CNAs, Counselors, Specimen Techs, and Volunteers.

Ms. Brandt fielded questions from the Commissioners.

**CALL TO ORDER**

Chairman Bruce called the meeting to order at 6:02p. 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 June 22, 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 July Medical Staff Credentials Report for Board review and approval.

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

## **CHAIRMAN / COMMITTEE REPORTS**

### **Chairman's Report**

#### **Mission Vision Values**

Chairman Bruce brought forward the Commissioners have reviewed the Mission, Vision, Values Refresh Committee draft as presented last month. Commissioner Dilley stated the draft presented by the committee was very good and requested the Refresh Committee consider adding "innovation" to the core values. He explained the intent is not only technology based but a mindset in making continual improvements to ensure the success of the hospital.

**ACTION:** A motion was made by Commissioner Dilley, seconded by Commissioner Quigg, and unanimously carried to request the Mission, Vision, Values Refresh Committee review and consider the addition of "innovation" as a core value.

Chairman Bruce indicated, as a member of this committee, he would abstain from participation to allow Commissioner Dilley to participate during the review to which Commissioner Dilley accepted.

#### **Adhoc Bylaw Committee**

Chairman Bruce brought forward it is time to reconvene the Adhoc Bylaw Committee. Previous members were Chairman Bruce, Commissioner Quigg, and Commissioner Thomas. Commissioner Dilley will replace Commissioner Quigg. The current Bylaws will be sent to all Commissioners. All Commissioners were asked to review the Bylaws and submit any suggested changes to the Adhoc Committee.

## **COMMITTEE REPORTS**

### **Board Quality Report**

Commissioner Quigg provided report on the July 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
  - o HCAHPS
  - o Physical Environment
  - o Infection Control
  - o Medical Executive Committee
  - o Quality Risk and Compliance which included monthly Grievance and Overdue Complaint Reports
  - o Department of Health Audit Report
  - o Department of Health Corrective Action Tracker
- 2) The Committee realizes the importance of continual improvement in collecting data and works to understand the data that is collected.

- 3) HCAHPS Patient Survey has implemented a new report platform.
- 4) There has been a significant amount of interaction with Department of Health over these last several months. Commissioners are encouraged to reach out to CEO Jensen if they have specific questions relating to the investigations.
- 5) ED LWBS is below 3%. Commissioner Quigg expressed appreciation and thanks for Ms. Brandt and her knowledge about the Emergency Department's process improvement.
- 6) For Q2 Workplace Violence occurrences had a spike primarily due to ED psych patients.

### **Board Finance Report**

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

#### **Highlights for June 2021:**

- (+/-) Outpatient Volumes
  - OP registrations 12% below target MTD; 11% below target YTD
  - ED visits 9% below target MTD; 16% below target YTD
  - OP surgical cases above target 4% MTD; 10% above target YTD
  - Radiology visits 12% above target MTD; 7% above target YTD
  - RHC visits 10% above target MTD; 6% above target YTD
- (-) Inpatient Volumes
  - Admissions 14% below target MTD; 14% below target YTD
  - Patient Days 20% below target MTD; 17% below target YTD
  - IP surgical cases 25% below target MTD; 17% below target YTD

#### **Consolidated Financial Summary:**

Net Operating Revenue:	\$ 8,412,422
Total EBIDA Expenses:	\$ 8,001,139
EBIDA Gain (Loss)	\$ 411,283
Net Operating Gain (Loss):	\$ 11,148
Net Income Gain (Loss):	\$ 407,790

#### **Financials / Statistics:**

- Most volumes remain below target. Recovery from the pandemic has been inconsistent and slower than expected.
- Radiology visits, Primary Care and Specialty Care visits are exceeding target and leading the slow recovery.
- June one-time items received:
  - \$300,000 HHS funds for RHC COVID-19 testing and mitigation support; a one-time targeted payment.
  - \$128,000 PY HMG RHC reconciliation settlement (pickup); a final payment from the State for clinics who were a part of the Medical Group before becoming designated as a RHC.

- Continue to spend funds for COVID mitigation efforts (staffing, PPE).
- Days Cash on Hand; remains flat. This is due to tax revenue receipts and being current on AP. Long-term outstanding AP has been paid down.
- Days in AR; a slight increase in AR was related to a delay in insurance credentialing and delays at Medicare.
- Staffing challenges remain in clinical areas and some non-clinical. These challenges do impact ability to accept patients.
- HMG clinic visits remain consistent. RHCs visits have been fluctuating slightly but showing a steady improvement.
- Additional CARES Act stimulus funds are available however it is unknown if or when any federal distribution will be received.
- A Resolution 2021-02 was brought forward and approved to recommend to the full Board. This resolution would authorize the investment of PHD No. 2 funds in the Local Government Investment Pool (LGIP). It would also authorize the CEO and CFO to make investment decisions on behalf of the PHD Board.
- The 2022 Budget Assumptions will be brought forward in September for review of the Finance Committee.

Commissioner Quigg inquired whether the hospital was compensated for COVID mitigation (i.e. COVID testing, supplies, etc.). Mr. Foley responded the hospital did receive CARES ACT funding support which was targeted to offset lost revenue and to help cover some costs relating to PPE. The hospital was able to bill primary insurance providers for the COVID test however any out of pocket costs to the patient were written off.

#### **GHCH Board Foundation Report**

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

- May Financial Statistics were presented and reviewed.
- A request for funding was submitted and approved for new signs in multiple locations throughout the organization.
- Legal counsel will be sought on potentially changing the name of the Foundation to more closely align with the new hospital brand.

Commissioner Thomas provided report on the July Board Foundation meeting. Of note;

- No quorum was met so business that required voting was not able to be conducted.
- A quarterly financial investment review was provided by the Account Executive. No changes or adjustments were recommended, overall the investments are doing good.
- June Financial Statistics were presented and reviewed. It was noted there are funds available to support funding requests.
- West campus monument signs are being installed this week and a dedication ceremony will be scheduled for the East campus monument signs once installed.

### Executive Suite Summary Report

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

- Staffing remains a concern in all departments. Second floor has been closed due to volumes and staffing ratios.
- Union negotiations continued last week and included a mediator. The hospital remains hopeful for a completed contract.

Commissioner Walsh commented the closure of units has been a standard practice and operating procedure in the majority of hospitals for many years. This provides opportunity to refresh the closed floor (cleaning, painting, upgrading, etc.).

### OLD BUSINESS

None.

### NEW BUSINESS

#### Board Education

New laws have been enacted affecting law enforcement and the use of force within their scope of duty. These changes will affect security within the organization. It was determined local law enforcement will be invited to provide the August Board Education relating to these new laws.

### GOOD OF THE ORDER

No report.

### PUBLIC COMMENT – General Topics

Chairman Bruce reported a follow up letter to the Commissioners was received from Nurse Brogan. This letter was forwarded to the full Commission and follow up phone calls were made to confirm that Commissioners had received and reviewed the letter. Nurse Brogan's letter will be part of the record of official meeting minutes.

Chairman Bruce addressed the public stating the public comment section of the meeting was designed for comments to be made to the Commission. The Commission does take public comments seriously and hears the passion within those comments. The public was encouraged to continue to send their comments to the Board. If any person has questions, they should contact CEO Tom Jensen, CNO Melanie Brandt, or CMO Dr. Anne Marie Wong to schedule an appointment.

### ADJOURNMENT

Chairman Bruce called for meeting adjournment.

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

The meeting adjourned at 6:57 pm.

**MINUTES AND ATTACHMENTS APPROVED AND ADOPTED THIS 24<sup>th</sup> day of August, 2021.**

**ATTEST:**



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Cindy Reynolds  
Executive Assistant



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Commissioner Walsh  
Board Secretary