

**GRAYS HARBOR COMMUNITY HOSPITAL
BOARD OF DIRECTORS REGULAR MEETING
August 22, 2017**

COMMISSIONERS PRESENT

Andrew Bickar, District 4
Miles Longenbaugh, District 3
Pete Scroggs, At Large
Robert Torgerson, At Large 1
Maryann Welch, District 1

OTHERS PRESENT

Tom Jensen, CEO, GHCH
Joe Vessey, CFO, GHCH
Teresa Ramirez, Executive Assistant, GHCH

Members of the Public

ABSENT

Armando Juarez, Jr, District 2
Becky Walsh, District 5

BOARD EDUCATION

Kris Morrison, Director of Quality, Risk & Compliance, provided education through a video on Sepsis.

CALL TO ORDER

President Welch called the meeting to order at 1:17p.

Absences

Commissioner Walsh and Commissioner Juarez provided notice that they would not be in attendance during today's meeting.

Action: A motion was made by Commissioner Bickar, seconded by Commissioner Torgerson and unanimously carried to approve Commissioner Walsh and Commissioner Juarez' absence.

Public Comment – Agenda Topics

President Welch opened the meeting to members of the public for comment regarding topics listed on the agenda.

CONSENT AGENDA

Minutes

- Minutes of July 25, 2017 Hospital Board meeting.
- Minutes of July 18, 2017 Board Quality Committee meeting.
- Minutes of July 20, 2017 Board Finance Committee meeting.

Action: A motion was made by Commissioner Torgerson, seconded by Commissioner Longenbaugh 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 Scroggs, seconded by Commissioner Bickar, and unanimously carried to approve appointment of Kirpal Clark, MD, as Provisional Staff for a period of one year in the Specialty of Emergency Medicine.

ACTION: A motion was made by Commissioner Bickar, seconded by Commissioner Longenbaugh, and unanimously carried to approve appointment of Erin Lystad, PA-C, as Provisional Allied Health Professional for a period of one year in the Specialty of Emergency Medicine.

ACTION: A motion was made by Commissioner Torgerson, seconded by Commissioner Bickar, and unanimously carried to approve appointment of Paula Moreno, PA-C, as Provisional Allied Health Professional for a period of one year in the Specialty of Emergency Medicine.

ACTION: A motion was made by Commissioner Bickar, seconded by Commissioner Torgerson, and unanimously carried to approve appointment of Patrick Paulsen, PA-C, as an Active Allied Health Professional for a period of two years in the Specialty of Emergency Medicine.

ACTION: A motion was made by Commissioner Longenbaugh, seconded by Commissioner Torgerson, and unanimously carried to approve appointment of Trenton Scheibe, MD, as Provisional Staff for a period of one year in the Specialty of Emergency Medicine.

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

It was noted that Michelle Stone, DO, was removed from the revised Credentials Report due to pending State License.

ACTION: A motion was made by Commissioner Torgerson, seconded by Commissioner Longenbaugh, and unanimously carried to approve appointment of Brian Fox, DO, as Provisional Staff for a period of one year in the Specialty of Family Medicine.

ACTION: A motion was made by Commissioner Scroggs, seconded by Commissioner Torgerson, and unanimously carried to approve appointment of Bonita Baker, MD, as Active Staff for a period of two years in the Specialty of IM/Hospitalist.

ACTION: A motion was made by Commissioner Scroggs, seconded by Commissioner Longenbaugh, and unanimously carried to approve appointment of Brian Gutshall, DO, as Active Staff for a period of two years in the Specialty of IM/Hospitalist.

ACTION: A motion was made by Commissioner Bickar, seconded by Commissioner Scroggs, and unanimously carried to approve appointment of Brian Samuel Wairiri, MD, as Active Staff for a period of two years in the Specialty of Radiology.

Resignations were noted for Antonio Capps, MD, in the specialty of Emergency Medicine, and for Young Bin, Choi, MD, in the specialty of Telestroke/Neurology.

Commissioner Longenbaugh inquired, and it was clarified, that all Emergency Medicine providers are contracted through TeamHealth vs. the Hospital.

COMMITTEE REPORTS

Board Quality Report

Commissioner Longenbaugh provided report on the August Committee meeting, with information encompassing:

- The Department of Health Survey, whose final report will be provided in approximately 10 days.
- Patient compliments of staff. In addition, unresolved grievances are now down to only four.
- A recommendation was made that Cybersecurity be considered for future Board education.
- Increased security coverage and de-escalation training has had a positive impact on decreasing code grays.
- HCAHPS Report; *Overall Rating* and *Would You Recommend* variances do not indicate any significant trends. Exploration is underway in obtaining feedback from patients prior to being discharged from the hospital, in order to more proactively address issues. CMS is removing their requirement of pain questions being included in patient satisfaction surveys, due to the association of increased prescribing of narcotics for pain.
- ED Wait Times; Left Without Being Seen (LWBS) and Door to Doc numbers are positively decreasing. Leaving Against Medical Advice (AMA) is increasing and is most attributable to mental health patients. Throughput efforts continue, with next steps to include coordination conversations with TeamHealth. The TV monitor indicating ED wait times is now fully operational. The rough draft of the ED brochure is being introduced to staff tomorrow for feedback.
- Nursing Report; Medications and Discharge Information outcomes are at or above the national average, most attributable to the implementation of CipherHealth Discharge Phone Calls. GHCH outcomes are better than national averages. Nurses Care; A higher level of engagement is being established. In coordination with the Kelly Corcoran, the Nursing Division will be assigning a group of staff to each initiative to identify ways to hardwire processes, in order to improve scores.
- Blood Utilization; Appropriate Blood Use is at 100% and there have been no Transfusion Reactions. Blood Product Wastage is challenging to address and work is underway with the vendor regarding more effective inventory control, in order to avoid expiration of the blood product.
- Infection Control; Surgical Site Infections (SSI) remain below the national baseline – excellent overall rate. Catheter use has increased, resulting in an increase in Catheter Associated UTI's. Policy review will be undertaken, as well as action planning to reduce catheter use. Central Line Bloodstream Infection – GHCH won the *National Best Practice/Benchmark Met*.
- Sepsis; Many initiatives are underway to address Sepsis and raise awareness among staff and the community; Development of a Sepsis Multi-Disciplinary Committee and drafting of an article/materials for Sepsis Awareness month.
- Readmissions are at or below state averages. The implementation of CipherHealth Discharge Phone Calls is having a positive impact on readmissions.

Board Finance Report

Commissioner Scroggs provided report on the August Committee meeting, with information encompassing:

- Chief Leonard Johnson and Fireman Adam Bigby from Fire District No. 2 provided a presentation to the Committee. Information was provided on patient transfer services being provided by the Fire District, as well as information on ALS and BLS transports. County-wide statistics are being gathered on ALS transports. Chief Johnson is also heading up

coordination efforts between all fire district departments to better utilize staff overall for patient transfers.

- Financials;

Total Revenue:	\$30,080,377
Revenue Deductions:	\$22,249,380
Net Operating Revenue:	\$ 8,107,039
Total Expenses:	\$ 9,115,125
Net Income:	\$ (858,303)
- Bond covenants; Distributed was the June Bond Covenant report. The Debt Service Coverage Ratio of 2.83, Excess Margin of 2.72% and Cushion Ratio of 2.72, are all above the minimum required. Days Cash on Hand is at 45.9. The increase in AR was due to a shortage of inpatient coders. At the end of July there was \$14.5M in claims awaiting coding, and it is now down to \$8.3M, with an increase in cash receipts anticipated shortly. Mr. Vessey clarified that at times coding has been outsourced due to challenges with monitoring productivity, which is the industry norm. Due to attrition, coders have decreased from 13-14 to the current six or seven, with the rest being outsourced.
- Report was given on initiatives being explored related to inpatient vs. observation beds.

Chairman's Report

Information was distributed on WSHA's Annual Member Meeting and Governance Education Day being held in Seattle on October 12th and 13th. Commissioners were requested to contact Teresa if they wish to attend.

ADMINISTRATION

Executive Suite Summary

Submitted was the Executive Suite Summary Report. Of note:

- USDA; Conference calls continue with local and federal representatives. It is hopeful that the hospital will hear from a USDA representative next week
- It was noted that the Hospital is being recognized for excellent performance in the reduction of hospital infections. For the last four quarters GHCH sustained excellent performance, resulting in zero infections, and will be receiving the **CALNOC Award** for:
 - Best Performance in Preventing Hospital Acquired Infections – C. Difficile Total Facility
 - Best Performance in Preventing Hospital Acquired Infections – MRSA Total Facility
- It was noted that the HMG Recruiting Report is now being included with the Executive Report.

OLD BUSINESS

None

NEW BUSINESS

Education Planning

Revenue Cycle Improvement Initiatives – Antone Eek, Patient Accounts Director

PUBLIC COMMENT – General

President Welch opened the meeting to public comment from members of the community regarding issues that were not part of the agenda.

NEXT MEETING

Tuesday, September 26, 2017 at 6:00p in Conference Room C, West Campus.

ADJOURNMENT

The meeting was adjourned at 1:57p.

APPROVED AND ADOPTED THIS 26th day of September, 2017.

ATTEST:


Teresa Ramirez
Recording Secretary


Bob Torgerson
Secretary