

**HARBOR REGIONAL HEALTH COMMUNITY HOSPITAL
BOARD OF DIRECTORS REGULAR MEETING
February 28, 2023**

COMMISSIONERS (Voting)

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

OTHERS (Non-Voting)

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

Members of the Public

EDUCATION

Board Education was presented by Dr. Anne Marie Wong, CMO; Quality Assurance Performance Improvement Plan for 2023.

CALL TO ORDER

Chairman Bruce called the meeting to order at 1:05p. Today's meeting was conducted via Zoom. A public location was provided at Timberland Regional Library in Aberdeen for viewing the meeting.

Absences

Commissioner Quigg provided notice he would not be in attendance during today's meeting.

ACTION: A motion was made by Commissioner Thomas, seconded by Commissioner Dilley, and unanimously carried to excuse Commissioner Quigg.

PUBLIC COMMENT

Chairman Bruce opened the meeting to receive public comment relating to agenda topics. No comments were brought forward.

CONSENT AGENDA

Submitted under the Consent Agenda were the Hospital Board Draft Minutes of January 24, 2023.

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

BOARD DISCUSSION AND ACTION

Medical Staff Credentialing

Submitted was the February Medical Staff Credentialing Report for Board review and approval.

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

Chairman's Report

2023 QAPI Plan

The 2023 Quality Assurance Performance Improvement Plan was presented and reviewed.

ACTION: A motion was made by Commissioner Dilley, seconded by Commissioner Csernotta, and unanimously carried to approve the 2023 QAPI Plan as presented.

Annual CEO Evaluation

Commissioners were asked to respond to the annual CEO Evaluation request when received.

Timecards

Commissioners were reminded to submit their completed February timesheets no later than tonight.

COMMITTEE REPORTS

Board Quality Report

Commissioner Csernotta provided report on the February Board Quality Committee meeting. Of note;

- Reports for standing items were received;
 - Quality, Risk, and Compliance;
 - * The monthly grievance report was reviewed.
 - * The MOUD Jails Program (Aberdeen and Hoquiam) is in full swing.
 - * New sepsis education which addresses the sepsis measures was created and distributed to Physicians, APPs and Nursing.
 - * 2023 Incentive measures will be finalized following receipt of the year-end report from Molina
 - * Internal audit Corrective Action Plans have been completed including updating policies, education, and identifying new processes.
 - Nursing Outcomes:
 - * Directors were given high credit for reaching and maintaining continued compliance with falls, pressure ulcers, alert values, restraint audits, and suicide risk.
 - Medication Review;
 - * All measures are being met (anticoagulants, hypoglycemic events, opioid, controlled substance events, ePrescribing) and the WSHA Top 10 Guidelines are being followed.
 - Physical Environment:
 - * The 2022 Annual Program Evaluation was conducted and all 7 Managements plans were deemed effective. An extraordinary amount of work is being

completed by Plant Services to ensure that the organization is in compliance with standards and the physical environment is safe for patients.

- Family Birth Center: Director
 - * Alice Skupnick has tendered her resignation effective 3/4/23.
 - * The department held a medication safety challenge event from March through December 2022. The 85% benchmark was set and met, a 40% improvement in scanning medication safety. The unit is currently sitting at 88.2%. Congrats!
- Revisions to Policy A100 Organization Plan were reviewed and approved. CNO Unterseher reported each department within the organization is responsible for reviewing and updating their portion of this policy.

Board Finance Report

Commissioner Dilley provided report on the February Board Finance Committee meeting. Of note;

Highlights for December 2022:

- (+) Inpatient Volumes
 - Acute admits up 9% from budget; up 10% from PYTD
- (+-) Outpatient Volumes
 - Emergency visits down 4% from budget; down 5% from YTD budget
 - Radiology visits down 9% from budget; even from YTD budget
 - RHC visits up 4% from budget; up 20% from PYTD

Consolidated Financial Summary:

Net Operating Revenue:	\$ 8,809,512
Total EBIDA Expenses:	\$ 8,683,904
EBIDA Gain (Loss)	\$ 125,608
Net Operating Gain (Loss):	\$ (275,890)
Net Income Gain (Loss):	\$ (370,864)

Financials / Statistics:

- Inpatient volumes were over budget.
- 1.72 Medicare CMI indicates sicker patients in December.
- Same expense issues through the entire year. Slight improvements on inflation although not significant enough to make an impact.
- A small decrease in investment portfolio.
- Exceeded gross revenue \$2.9M for the year.
- Operating expenses remained high primarily due to travel staff costs.
- \$7.2M net loss for the year.
- Cash on hand; <49 days End of year \$11M cash on hand. The Medicare loan was fully repaid.

Highlights for January 2023:

- (+) Inpatient Volumes

- Acute admits up 8% from budget; up 15% from PYTD
- Medicare CMI 1.60
- Total CMI 1.41
- (+) Outpatient Volumes
 - Emergency visits up 2% from budget; up 5% from PY January
 - Radiology visits up 1% from budget; up 34% from PY January
 - OP surgical cases up 12% from budget; up 76% from PY January
- (-) Utility Costs
 - Natural gas price spike in January increased overall utility costs by \$180K

Consolidated Financial Summary:

Net Operating Revenue:	\$ 9,556,851
Total EBIDA Expenses:	\$ 9,230,690
EBIDA Gain (Loss)	\$ 326,161
Net Operating Gain (Loss):	\$ (65,021)
Net Income Gain (Loss):	\$ 1,353,461

Financials / Statistics:

- Good improvements in most patient volumes year over year.
- RHC targets met.
- Stock market rebound in January which positively impacted the investment portfolio.
- Days Cash on hand; 45 days
- Days in AR; A slight uptick - increased due to Medicare claims system being off line for several weeks which caused delays. A decline in overall AR should be realized by March.

Chairman Bruce reported the 2022 ED visits were 20,280 and the RHC visits were 35,476.

GHCH Board Foundation Report

Commissioner Csernotta provided report on the February Board Foundation meetings. Of note;

- Quarterly portfolio review.
- December and January financials were reviewed.
- Invoices were approved for payment from funding requests that were approved in 2022.
- Restricted funds are under review.
- A request for funding was submitted and approved for a new steam sterilizer.
- The spring fundraising event planning continues to make progress. The date of the event is Friday, May 12. Donations for auction items are being accepted.

Executive Suite Summary Report

Submitted was the Executive Suite Summary Report, as well as the HMG Provider Report for February. CEO Jensen reported on current legislative activities and the organization continues to struggle with staffing. Revisions to the Safety Net assessment program are being reviewed at the state level.

OLD BUSINESS

None.

NEW BUSINESS

Board Education

No March Education will be provided due to 2024 Board Strategic Planning retreat.

GOOD OF THE ORDER

None.

PUBLIC COMMENT – General Topics

Chairman Bruce reported no public comments were received in advance of the meeting. Chairman Bruce opened the meeting to accept public comment on topics discussed in the meeting. No comments were brought forward.

ADJOURNMENT

Chairman Bruce called for meeting adjournment.

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

The meeting adjourned at 1:33pm.

MINUTES AND ATTACHMENTS APPROVED AND ADOPTED THIS 28th day of March, 2023.

ATTEST:



Cindy Reynolds
Executive Assistant



Commissioner Thomas
Board Secretary