

**GRAYS HARBOR COMMUNITY HOSPITAL
BOARD OF DIRECTORS REGULAR MEETING
March 23, 2021**

COMMISSIONERS PRESENT

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

ABSENT

Andy Bickar, District 4

OTHERS PRESENT

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

Members of the Public

EDUCATION

Mr. Jason Halstead, Director of Quality, Risk and Compliance provided Board Education on Quality Management Oversight, Part 1, Defining Health Care Quality and Quality Measurement. Quality Measurement included requirements, results, measurements, programs and reporting.

Commissioner Quigg asked Mr. Halstead to share with Commissioners why quality management is important to the Board. Mr. Halstead articulated it is not only a regulatory requirement that the Governing Body receive and have oversight and direction of the hospital's quality management program but that it is beneficial for Commissioners to have knowledge of the hospital's measures so the information can be shared with the community.

Commissioners gave special thanks to Mr. Halstead for being here and his diligent work within the organization.

CALL TO ORDER

Chairman Bruce called the meeting to order at 5:58p. Due to the COVID Pandemic's ongoing restrictions, today's meeting was conducted via Zoom.

Absences

Commissioner Bickar provided notice he would not be in attendance at tonight's meeting.

ACTION: A motion was made by Commissioner Thomas, seconded by Commissioner Dilley, and unanimously carried to excuse Commissioner Bickar's absence.

CONSENT AGENDA

Submitted under the Consent Agenda were the Hospital Board Draft Minutes of February 23, 2021, and Policy A100 Organizational Plan for review and approval.

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

BOARD DISCUSSION AND ACTION

Medical Staff Credentialing

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

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

CHAIRMAN / COMMITTEE REPORTS

Chairman's Report

Annual Board Education

Annual Board Education was held via Zoom on March 1-2, 2021. During the education sessions, the 2022 Board priorities were finalized.

1. Unified and improved experience inside and out (patients, community image, Mission, Vision, Values, and efficiencies)
2. Expansion of Services
3. Continued budget restructuring as we move forward from a difficult year
4. Goals management

Hospital Finance 101

In the month of March, all Commissioners have attended a Hospital Finance 101 training as provided by CEO Jensen. This training can be used as credit towards the WSHA Governance Education hours. Commissioners were reminded to log their training dates/hours into the WSHA website.

Spring Board Retreat

A Spring Board Retreat is scheduled for May 2-4, 2021. Generalized agenda items were presented. Commissioners were asked to provide any agenda topics they would like to discuss at the retreat to Cindy Reynolds.

COMMITTEE REPORTS

Board Quality Report

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

- Patient Survey comments for the month were reviewed. This information is shared not only with the Board but with Department Directors as well.
- The Adhoc HCAHPS group continues to work on Quiet at Night.
- ED Left Without Being Seen; this is a 2021 Board priority. Work continues with Social Services and the CNO regarding patients who frequently visit the ED. An increase in patients with higher acuity is being seen. Dr. Mendelson reported patients are continuing to hold off in seeking health care due to COVID concerns which is resulting in patients being seen in the latter stage of the disease process. Dr. Mendelson noted, this is being experienced across the nation, not just in Grays Harbor.
- Compliance and Grievance monthly report was provided.
- DOH and DNV surveys were conducted. Action Plans were reviewed and discussed.
- Physical Environment; Commissioners were directed to the PE report. All goals were met in 2020 and reductions continue to be seen in all reported areas.

- FBC; this department has been heavily involved with the COVID response efforts within the organization.

Commissioner Quigg informed the Board the GH County Needle Exchange Program has been taken over by Willapa Behavioral Health. The agency is still in the process of identifying locations for distribution within the community and have reached out to the hospital for discussion.

Board Finance Report

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

Highlights for February 2021:

- (-) COVID-19 Impact
 - ED visits 27% below PY MTD, 29% below PY YTD
 - Radiology visits 20% below PY MTD 14% below YTD
 - RHC clinic visits 20% below PY MTD and 15% below YTD
- (-/+) Surgical Volumes
 - IP Surgical cases 17% below target MTD and 10% below target YTD
 - OP Surgical cases above target 11% MTD and above target 15% YTD
- (-) IP Acute Volumes
 - Admissions 13% below target MTD; 17% below target YTD
 - Patient Days 10% below target MTD and 12% below target YTD

Net Operating Revenue:	\$ 6,488,389
Total EBIDA Expenses:	\$ 7,082,234
EBIDA Gain (Loss)	\$ (593,845)
Net Operating Gain (Loss):	\$ (1,001,817)
Net Income Gain (Loss):	\$ (726,340)

Financials / Statistics:

- Similar trends continue for the month of February. ED volumes continue to decline, down 29% YTD. It continues to be assumed the decline is primarily related to the COVID pandemic. ED affects all other ancillary services; laboratory, diagnostic services, and admissions.
- RHC clinic visits trending below targets.
- A new orthopedic provider is on board.
- This month's expenses were reduced in relation to the volumes.

- COVID-19 direct expenses continue to be tracked. COVID drive through testing and administration of vaccinations by the hospital has decreased. Additionally, courier costs for COVID testing should continue to decrease dramatically with the addition of the new lab analyzer.
- Patient days down 10% for the month.
- Case mix index is elevated. Although volumes have decreased, patient acuity has increased. As was reported earlier this evening, patients are continuing to hold off seeking health care due to COVID concerns which is resulting in patients being seen in the latter stage of the disease process.
- Radiology visits are up from budget, down from prior year.
- Although we were under budget on expenses we maintained an operating loss.
- Cash on hand; 110 days. \$14M is the Medicare Advance and \$10M is the PPP loan. Discussion is being held at the Federal level relating to forgiveness of the Medicare Advance. Repayment of this loan starts April 2021. We did not qualify for a second PPP loan.
- Net AR looks very good. The Patient Financial Services and HMG teams continue to do great work at driving this down. We are now within the target range below 65 days.
- FTEs have come down slightly. Truven data continues to be collected and reported. For February, half of the FTE overage was COVID related.
- Mr. Hanson provided a brief Patient Financial Services update which included information on three main process improvement projects being worked on within the Patient Financial Services Department.

Commissioner Dilley added a brief discussion was held regarding the \$8 billion in potential federal funding relief for rural hospitals, however, no additional information of timing or methodology for distribution has been communicated.

GHCH Board Foundation Report

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

Highlights for February 2021:

Cash and Other Assets;	\$ 7,874,595
Revenue;	\$ 119,472
Expenses;	\$ 94
Net income (Loss);	\$ 119,378

Financial / Statistics:

- Revenue for the month was primarily due to the investment income.
- \$400k transferred from the money market account and deposited equally into investment accounts (\$200k each).
- \$100k was moved from the money market account to the credit union account to cover the disbursement to the hospital for the approved 2020 equipment purchases, \$193,515.00.

- \$176 in donations received in the month.
- Mr. Glasgow continues to work through classification of the restricted funds.
- Six Resolutions were approved for changing authorized signers on each of the financial accounts.
- A request for funding was approved to fund a portion of a new MRI machine. Disbursement will be made over a three year period.
- Discussion was held on a possible dedication of the new East Campus Monument sign to prior Foundation donors. The Foundation Board approved the dedication which will also require Hospital Board approval.
- The Foundation social media account will be set up to be able to accept donations directly through the account.

Executive Suite Summary Report

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

- Consideration will be given to future Capital campaigns.
- Conversations and work continues with Legislators regarding the Sole Community Hospital Budget Proviso 2021-22.

Commissioner Dilley asked for additional information on the rebranding project. Mr. Jensen reported the project roll out remains on schedule. Communications will go out to the community starting the week of April 5. Mr. Majors will provide an email update to the Commissioners following the meeting.

Commissioner Csernotta inquired whether the Cardiac Cath Lab was functional. Mr. Jensen reported the service is being provided. The Cardiac Clinic has yet to reopen as they are waiting on provider credentialing.

OLD BUSINESS

None.

NEW BUSINESS

Board Education

The April Board Education will be Infrastructure Needs of the Organization presented by Mr. David Bain, Director of Plant Services.

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 7:00 pm.

MINUTES AND ATTACHMENTS APPROVED AND ADOPTED THIS 27th day of April, 2021.

ATTEST:



Cindy Reynolds
Executive Assistant



Commissioner Walsh
Board Secretary