

**HARBOR REGIONAL HEALTH COMMUNITY HOSPITAL  
BOARD OF DIRECTORS REGULAR MEETING  
April 26, 2022**

**COMMISSIONERS (Voting)**

- (X) Michael Bruce, District 2
- (X) Chris Thomas, District 1
- (X) Scott Dilley, At Large 2
- (X) Lynn Csernotta, District 3
- (X) 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
- (X) Dori Unterseher, CNO
- (X) Elizabeth Tschimperle, Exec. Dir. HMG
- (X) Chris Majors, Director Public Relations
- () Dr. Rachel Sell, Chief of Staff
- () Dr. Charles Best, Chief of Staff Elect
- () Cindy Reynolds, Exec. Asst.

Members of the Public

**EDUCATION**

An excellent Board Education was provided by Karyn Mirante, RN, Quality Clinical Data Abstractor; Code Sepsis.

**Absences**

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

**ACTION:** A motion was made by Commissioner Dilley, seconded by Commissioner Csernotta, and unanimously carried to excuse Commissioner Bickar.

**CALL TO ORDER**

Chairman Bruce called the meeting to order at 1:02p. 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 March 22, 2022.

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

**BOARD DISCUSSION AND ACTION**

**Chairman's Report**

Chairman Bruce led discussion on fall workshop options such as infrastructure planning, staffing needs, expansion of services, and training. Options discussed were to add a day during the October Safety Summit or to schedule a separate date for the workshop. An email will be sent requesting consensus.

**Medical Staff Credentialing**

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

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

## **COMMITTEE REPORTS**

### **Board Quality Report**

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

- 1) Standing items of monthly, quarterly, semi-annual reports were received and reviewed.
  - o Quality, Risk, Compliance, and Privacy
    - Quality;
      - \* DNV Survey final Corrective action Plan (CAP). Objective evidence will be submitted for any NCs received.
    - Risk;
      - \* Complaints/Grievances; the majority of the open items were completed however will not show until next month's report.
    - Compliance/Privacy;
      - \* There was one confidentiality violation in March. An investigation was conducted and the allegations were unsubstantiated.
  - o ED Left without Being Seen
    - A decrease is being seen in LWBS/Walkaways. A few additional staff members were hired which is believed to have supported the decrease.
    - The hospital continues to struggle to locate beds for mental health patients.
  - o HCAHPS
    - A significant increase has been seen in the majority of inpatient measures.
  - o Blood Use
    - A decrease has been seen in the number of transfusions throughout Q1.
  - o Physical Environment
    - Q4 2021 and Q1 2022 reports were presented. For each time frame, all data presented fell within set parameters.
    - All seven Physical Environment Management Plans for 2021 were deemed effective.
  - o Care Transitions
    - Patient volumes have declined however length of stay has increased throughout the course of the pandemic.

### **Board Finance Report**

Commissioner Dille provided report on the April Board Finance Committee meeting. Of note;

2021 Consolidated Financial Statements:

Report was received from the Auditors on the Independent Auditors and Consolidated Financial Statement with Supplementary Information for 2021 as well as the required Communications Letter. The Provider Relief Funds Audit will be performed later in the year.

Highlights for March 2022:

- (+) Outpatient Volumes
  - Total OP registrations up 5% from budget; down 4% from PY
  - RHC visits up 41% from budget; 9% from PY
  - OP surgical cases up 21% from budget; down 26% from PY
  - Radiology visits up 25% from budget; even with PY
- (-) Acute Inpatient Volumes
  - Admissions 10% below target
  - Patient Days 12% below target
- (-) Length of Stay
  - Medicare LOS 10% above target YTD; up 20% over PY YTD
  - Total LOS up 5% from YTD target; up 3% from PY

Consolidated Financial Summary:

Net Operating Revenue:	\$ 8,409,192
Total EBIDA Expenses:	\$ 8,581,383
EBIDA Gain (Loss)	\$ (172,191)
Net Operating Gain (Loss):	\$ (572,075)
Net Income Gain (Loss):	\$ (512,389)

Financials / Statistics:

- Drs. Strange and Teveliet appear to be fully up to speed at Hoquiam Clinic and are positively impacting clinic volumes.
- Inpatient admissions are driven by bed availability. Second Floor Unit remains closed and therefore we are capped for how many patients may be admitted daily. Second floor has been closed due to staffing constraints.
- Outpatient registrations improved in March.
- High traveler agency costs continue to negatively impact the organization. Retention and recruitment remains the organization's main focus.
- \$6M+ has been paid to date towards the 2020 Medicare Advance. It is anticipated the loan will be paid in full by the end of this year. A decrease in cash income will be seen over the next several months due to the required increase in the Medicare loan repayments.
- Days Cash on Hand; 85 days
- Days in AR; 61 days

**GHCH Board Foundation Report**

Commissioner Thomas provided report on the March and April Board Foundation meetings. Of note;

March 2022:

- January and February 2022 financial statements were reviewed.
- Report was received from the Adhoc Fundraising Committee. The team will be receiving a quote for an online software platform to use.
- Discussion was held on the potential of the Foundation providing scholarships. A software program that is available to the Foundation for use that can track details to the scholarship process will be reviewed.

April 2022:

- March 2022 financials were presented. Inflation has negatively impacted the Foundation investment accounts.
- Report was received from the Adhoc Fundraising Committee. The team met with an event representative who provides software to support virtual, in person, or hybrid events. The Fundraising team made recommendation to move forward with the software. Due to lack of quorum a vote was unable to be taken.
- A thank you note was received from the Family Birth Center staff for recent equipment funding requests that were approved for the OB Unit.
- GH College has worked diligently to obtain scholarships for the Certified Nursing Program; \$1500 each. This amount will cover the majority of the program costs. The next class starts on July 5<sup>th</sup>.

Executive Suite Summary Report

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

- Positive COVID cases were down earlier in the month however are trending up at this time.

OLD BUSINESS

None.

NEW BUSINESS

Board Education

The May Board Education selected was Reduction in Accounts Receivables presented by Mr. Kevin Hanson, Executive Director of Revenue Cycle.

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**

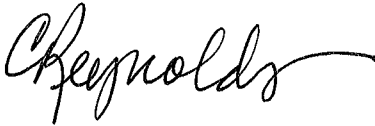
Chairman Bruce called for meeting adjournment.

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

The meeting adjourned at 1:51pm.

**MINUTES AND ATTACHMENTS APPROVED AND ADOPTED THIS 24<sup>th</sup> day of May, 2022.**

**ATTEST:**



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Cindy Reynolds  
Executive Assistant



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Commissioner Thomas  
Board Secretary