HARBOR REGIONAL HEALTH COMMUNITY HOSPITAL **BOARD OF DIRECTORS REGULAR MEETING** August 24, 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
- Dr. Charles Best, Chief of Staff
- Dr. Rachel Sell, Chief of Staff Elect ()
- (X) Cindy Reynolds, Exec. Asst.
- (X) Julie Feller, Exec Director HR
- (X) Jason Halstead, Dir. Quality, Risk, Compliance

Members of the Public

EDUCATION

Dr. Anne Marie Wong, Chief Medical Officer, provided an excellent Board Education on the Medicaid Transformation Project: Opioid Use Public Health Crisis. Of note: In an effort to improve community health and safety while advancing the patient experience, health of population, and reduction of per capita cost, the Cascade Pacific Action Alliance made funds available for projects that would address community health and safety. The organization has participated in this project since May 2018. Progress to CPAA is reported quarterly on completed milestones, progress, delays, challenges, and successes. Reviewed were the many accomplishments and partnerships in the chronic opioid use program. Although the CPAA project will end this year the goal is for the work flows and practices put into place to continue. The work group will continue to meet on a quarterly basis and will consider adding additional measures in the future.

CALL TO ORDER

Chairman Bruce called the meeting to order at 1:00p. 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 July 27, 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 August Medical Staff Credentials Report for Board review and approval.

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

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CHAIRMAN / COMMITTEE REPORTS

Chairman's Report

Mission Vision and Values

Mr. Chris Majors provided update from the Mission-Vision-Values Adhoc Committee. Minor yet important revisions were made to the Mission-Vision-Values draft. Of note; changing the value of Excellence to Responsiveness was made along with adding statements to each value for clarification.

<u>ACTION</u>: A motion was made by Commissioner Walsh, seconded by Commissioner Csernotta, and unanimously carried to approve the Mission, Vision, and Values as presented.

WSHA

WSHA continues to offer governance education for Board Commissioners. Special educations are on the calendar for September 10, 16, and 30.

Community Group Meeting Protocol

Chairman Bruce brought forward a new process for scheduling community group meetings. Regardless of how the initial request comes in, Community Group leaders will be directed to work with their District Commissioner representative to schedule presentations. The District Commissioners will work with Ms. Reynolds to coordinate the meeting onto the Hospital Administration's calendar if applicable. District Commissioners will also ensure that Chairman Bruce and At Large Commissioners are alerted to the request.

There are two city council meetings scheduled this fall; Montesano on September 14, 2021, and Ocean Shores on October 25, 2021.

COMMITTEE REPORTS

Board Quality Report

Commissioner Quigg provided report on the August 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
 - Nursing Outcomes
 - Medication Safety; an informative presentation was provided by the hospital dietitian relating to hypoglycemic events.
 - o Family Birth Center
 - o Blood Use; shortages in COVID testing supplies are being realized.
 - Human Resources; a national trend in staffing shortages is ongoing and having effects on the organization.
 - o Mortality Rate
 - Quality Risk and Compliance report which included monthly Grievance and Overdue Complaint Reports
 - DOH CAP Tracker YTD Review

CONFIDENTIALITY; The recognition of the sensitivity of quality control and quality improvement information is of primary importance. All Quality Improvement and/or Quality Control information, written or electronic, shall be entitled to all the privileges and immunities afforded under law including those privileges and immunities established under Washington's RCW 4.24 and 7.41.

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DOH Audit Report YTD Review

- The DOH Pharmacy Quality Assurance Commission conducted their periodic inspection.
 This state inspection is to occur every 2 years however it had been 6 years since the last state inspection. A separate CAP tracker was created specifically for Pharmacy and items were reviewed.
- As part of compliance to a DOH inspection finding the revisions to policy for Management of Restraints and Seclusion was approved.

Board Finance Report

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

Highlights for July 2021:

- (+/-) Outpatient Volumes
 - OP registrations 14% below target MTD; 11% below target YTD
 - ED visits 4% below target MTD; 15% below target YTD
 - OP surgical cases on target MTD; 8% above target YTD
 - Radiology visits on target MTD; 6% above target YTD
 - RHC visits 3% above target MTD; 6% above target YTD
- (-) Inpatient Volumes
 - Admissions 19% below target MTD; 15% below target YTD
 - Patient Days 21% below target MTD; 16% below target YTD
 - IP surgical cases 19% below target MTD; 17% below target YTD

Consolidated Financial Summary:

Net Operating Revenue: \$8,302,014
Total EBIDA Expenses: \$8,102,155
EBIDA Gain (Loss) \$199,859
Net Operating Gain (Loss): \$(201,406)
Net Income Gain (Loss): \$(139,249)

Financials / Statistics:

- Trends remain consistent.
 - Inpatient volumes well below target.
 - OP registrations are down overall. Primarily led by low hospital based outpatient services (ED, Ambulatory Infusion, wound care).
 - Staffing in all areas continues as a nation-wide problem. Rural based staff are
 moving to larger system facilities who are able to offer a much higher salary and large
 sign on bonuses.
 - o COVID continues to impact the organization with patients, supplies.
- Expenses are lower than budgeted in several areas.
- RHC visits are recovering. There is an accelerated trend with patients moving away from ED visits to outpatient clinic visits.
- Medicare/Medicaid dropped to 73% in the month.

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- Case Mix Index; continues to be elevated. Patients are presenting with a higher level acuity.
- Days Cash on Hand; decreased slightly. Medicare has been slow to reimburse.
- Days in AR; within range.
- Average daily census; trending down and does not include chemical dependency patients.
- ED visits; there is a gradual improvement since February.

Discussions were held on patient volumes which includes staff to patient ratios, patients seeking care at clinics vs. the ED, staffing variables through a potential wave of COVID positive cases, the vaccine mandate, filling open positions within the organization.

2022 budget assumptions will be presented at the September meeting.

GHCH Board Foundation Report

Commissioner Walsh provided report on the August Board Foundation meetings. Of note;

- Financial investments were reviewed by the Account Executive.
- Treasury report for July was provided.
- The Treasurer is working with the Accounting Department to review past restricted funds.
 Two funds in particular were highlighted.
- Public Relations will be working on ideas for a social media fundraising event.
- The Trust grant for the new MRI remains in process. Final outcome from the Trust is not expected until later in the year.

Executive Suite Summary Report

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

- COVID positive patients are increasing in the community and within the hospital.
- Vaccination is a priority. The Governor amended the Proclamation mandating that all
 healthcare workers be fully vaccinated by October 18. Exemptions are only available for
 religious or health reasons. The organization cannot opt out of participating in the mandate.
- It is anticipated the CDC will publish booster vaccine recommendations the end of this month.
- Union negotiations continue.
- Staffing turn over continues.

OLD BUSINESS

None.

NEW BUSINESS

Board Education

The September Board Education selection is an HRH Marketing Overview presented by Mr. Chris Majors, Director of Public Relations and Marketing.

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GOOD OF THE ORDER

None.

PUBLIC COMMENT - General Topics

Chairman Bruce reported no public 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 1:57pm.

MINUTES AND ATTACHMENTS APPROVED AND ADOPTED THIS 28th day of September, 2021.

ATTEST:

Cindy Reynolds

Executive Assistant

Commissioner Walsh

Becky Walsh

Board Secretary