HARBOR REGIONAL HEALTH COMMUNITY HOSPITAL BOARD OF DIRECTORS REGULAR MEETING November 22, 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
- () 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
- (X) Cindy Reynolds, Exec. Asst.

Members of the Public

EDUCATION

No Board Education was provided.

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. A public location was provided at Timberland Regional Library in Aberdeen for viewing the meeting.

Absences

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

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

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 October 25, 2022.

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

BOARD DISCUSSION AND ACTION

Medical Staff Credentialing

Submitted was the November 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 November Credentials Report.

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Hospital Resolution 2022-02

Resolution; Submitted was Resolution 2022-02 Authorizing a revolving Petty Cash Fund and naming Custodian of Said Fund. The resolution establishes Controller Angela Thiery, as the designated custodian of the Petty Cash Fund and lists the locations in which the funds will reside.

<u>ACTION</u>: A motion was made by Commissioner Quigg, seconded by Commissioner Csernotta, and unanimously carried for the approval of Resolution 2022-02 Authorizing a revolving Petty Cash Fund and naming Custodian of said fund.

Chairman's Report

Form 990 Acknowledgement

Chairman Bruce called for Commissioners acknowledgement of receiving and reviewing the 2021 Form 990. Commissioners present confirmed receipt and review of the Form 990.

ACTION: A motion was made by Commissioner Dilley, seconded by Commissioner Quigg, and unanimously carried to submit 2021 Form 990 to appropriate taxing authorities.

COMMITTEE REPORTS

Board Quality Report

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

- Mr. Halstead has worked with many of the Directors to develop patient survey reports. The
 nursing directors now have the ability to conduct follow up on negative comments directly with
 patients, which has been effective. We are seeing an influx of positive comments on both the ED
 and Inpatient Surveys.
- The organization has updated its Standards of Business Conduct. This is a Compliance and Business Ethics policy that includes the organizations Code of Ethics and Business Conduct. Updates included:
 - Accountability Standards
 - Trust and Credibility Statement
 - Promoting Patient Experience
 - o Acceptance of Business Courtesies and Gifts
 - Work Product Ownership
- Patient Safety Committee has two new workgroups:
 - o Hypoglycemic Events workgroup has been meeting and developed improvement actions related to policy revisions and medication order set improvements.
 - Medication Scanning Workgroup has conducted evaluations of medication scanning.
 They are revitalizing reports that will facilitate specific staff training and education. The

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> workgroup is also evaluating implementing scanning in multiple outpatient departments of the hospital.

- Survey on Patient Safety Culture (SOPS). Each year the hospital conducts a survey of patient safety culture and reviews the results, which helps direct the patient safety committee. This year a survey was sent to the hospital staff and a new survey was developed based on the Agency for Healthcare Research and Quality (AHRQ) survey for outpatient clinics.
- The following reports were received based on the committees report schedule:
 - Medication Safety: The new Pharmacy Director, Wendy Cahill provided a report on anticoagulation, hypoglycemia, and opioid safety which are all within acceptable measures. Additionally, Pharmacy will work with Quality and Nursing to encourage reporting of medication related errors.
 - o Family Birth Center:
 - PC-01 Elective Delivery and PC-02 C-Section Births have both been above the national benchmark this year.
 - The department will soon be getting an upgraded fetal heart surveillance monitoring system.
 - Nursing Outcomes:
 - Patient falls continues to be within range. There have been no reportable falls with injury for third quarters.
 - Nursing has been conducting skin rounding on patients to mitigate serious pressure ulcers, which has paid off with no adverse outcomes.
 - There are no concerns with current Restraint and Suicide Risk audits that are being conducted.
 - o Medical Executive Committee:
 - The CMO, Dr. Wong, provided an overview of the organizations OPPE/FPPE and peer review results for quarter three. There are no current concerns with outcomes.

Board Finance Report

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

Highlights for October 2022:

- (+) Rural Health Clinic Visits
 - Visits up 16% from prior year October; up 23% from PYTD
- (+) Outpatient Specialty
 - Radiology visits up 5% from budget; 2% from YTD budget
 - OP surgical cases up 11% from budget
- (-) 2018 Medicare Cost Report NPR
 - \$1.1M payable booked in October against a reserve of \$200K

Consolidated Financial Summary:

Net Operating Revenue: \$8,207,824 Total EBIDA Expenses: \$8,236,309 EBIDA Gain (Loss) \$ (28,785) Net Operating Gain (Loss): \$ (429,458) Net Income Gain (Loss): \$ (48,637) Grays Harbor Community Hospital Board of Directors November 22, 2022 Page 4 of 5

Financials / Statistics:

• The Medicare Advance has been paid in full.

GHCH Board Foundation Report

The Foundation Board will not meet until November 28. The November report will be provided at the December Hospital Board meeting.

Executive Suite Summary Report

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

Greater Grays Harbor Inc held a Healthcare Forum at the Log Pavilion on November 1st that
was well represented by the community and the organization's Commissioners. HRH,
Summit Pacific, and GH County Public Health were guest presenters.

OLD BUSINESS

None.

NEW BUSINESS

Board Education

There will be no education in December.

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 1:20pm.

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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MINUTES AND ATTACHMENTS APPROVED AND ADOPTED THIS 27th day of December, 2022.

ATTEST:

Cindy Reynolds Executive Assistant Commissioner Thomas Board Secretary