

**BOARD OF COMMISSIONERS  
PUBLIC HOSPITAL DISTRICT NO. 1 OF PEND OREILLE COUNTY**

February 27, 2020

In Attendance: Commissioners: Terry Zakar, Lois Robertson, Robert Rosencrantz, and Susan Johnson, Tom Wilbur, CEO; Directors: Kim Manus, Pete Peterson, Chris Wagar, Susan Schwartz, and Walter Price; Controller, Diane Anderson, John Stuvenga, Chelsea Stumph, Tim Rumph, Michelle Nedved, Newport Miner, Jen Allbee, and Nancy Shaw.

Excused: Dr. Jeremy Lewis, Chief of Medical Staff; Commissioner Lynnette Elswick;

CALL TO ORDER:

Chairperson Terry Zakar called the meeting to order at 1:30 p.m.

READING OF LEGAL NOTICE:

The regular meeting legal notice was distributed as required.

APPROVAL OF AGENDA / CONSENT AGENDA:

Included were the meeting Agenda, Auditors Report and Uncompensated Report. The following consent agenda items were approved as presented by a motion made, seconded and passed:

Auditors Report: January 2020: Net Vouchers #215304 – #215661 and electronic warrants #2158 - 2180 in the amounts of \$1,616,901.45 and \$861,051.48, respectively, and an automatic loan payment deduction of \$40,000 for a grand total of \$2,517,952.93.

Bad Debt/Charity Care: all-inclusive January District Write-off's for \$238,583.61.

APPROVAL OF PREVIOUS MEETING MINUTES

The regular January 23, 2020 meeting minutes were approved by motion made, seconded and passed.

BUSINESS FROM THE AUDIENCE:

Coronavirus/Influenza Report – Chris Wagar reported that it is currently flu season, officially declared in the U.S. on October 1; she reminded everyone to access the Centers for Disease Control website for COVID-19 information. Chris explained that published influenza statistics are estimates, as influenza is non-reportable to the CDC. There were between 29-41M reported flu illnesses; 13-19M medical visits, 280-500K hospitalizations and 16-41,000 flu deaths. The mortality rate for the flu is 0.05-0.1%.

Chris explained this is the worst influenza season since 2009, though cases are declining at a more rapid rate than anticipated. However, the COVID-19 situation is evolving rapidly. The CDC is working towards emphasizing prevention and planning. Chris explained that the Coronavirus is related to the common cold. At this time, NHHS has been advised to screen patients by asking if they have recently traveled from China or have been exposed to others that have tested positively for the Coronavirus; if the indication is yes, the screening questions continue to include whether the patient has a fever and/or upper respiratory illness. If the patient continues to answer yes to these questions, they will be ushered to the negative air pressure room in the Acute Care Unit with full isolation precautions in place. A flow chart has been developed that includes evaluation procedures for the medical staff.

NHHS will consider potential impacts on the workforce, staffing levels, and masks and protective equipment supplies. Chris reported that NE Tri County Health District sends a weekly update with current information pertaining to our local facilities. The Health Care Coalition also sends a survey that addresses surge capabilities, staffing, supplies and number of new cases, (if any). It was noted that SHMC Providence has accepted 4 COVID-19 patients to a special unit they had built during the Ebola outbreak.

Walter Price added that the District is a member of the Premier Purchasing group. Supply updates are published 2-3 times weekly that are specific to Coronavirus supply/demand. At this time, there are no manufacturing supply locations under quarantine. In addition, there are no supply restrictions; however, there are stock limits in place. Price gouging is not an issue, a benefit to the District as a Premier member. Walter noted that any products that are back-ordered, or a missed shipment, our purchasing agent contacts the vendor directly to avoid interruptions in supplies.

Tom W. reported there are a great deal of patients housed in tertiary hospitals who have no acute medical needs but are awaiting discharge; delays are occurring due to a lack of bed space; and pending assessments by DSHS to find residential care settings. Tom W. encouraged those who are ill to remain at home, unless their condition is serious enough to warrant seeking medical attention.

School Clinic Grant - Chris announced that Better Health Together had funding available to better manage social determinants of health. Dave Smith, Newport School District Superintendent, invited NHHS to participate in an effort to provide student medical appointments at the schools. Dr. Jones agreed; the initial grant funding ask was \$8K; however, after meeting with members of Better Health Together, the BHT Collaborative announced they would fund a grant for up to \$200K. This was very positive news and will enable expansion of the program. Commissioner Johnson noted that Lewis & Clark and Rogers school districts have a similar program; Chris noted that we have been in contact with their staff members. Tom W. stated this program stemmed from our initial Care Coordination Program 4-5 years ago to provide on-site vaccinations and support students with underlying health issues. An employee will likely be hired by the school district and transportation assistance is being considered.

Commissioner Johnson asked about the role of the school nurse; Tom W. responded that this would augment those services. He noted that Michelle Ells, a clinic care coordinator, had worked with the school nurse until funding ended and our internal CC need increased. Chris stated that a Coordinator will work closely with the school nurse for approximately half a day twice per month. Commissioner Rosencrantz asked if there are plans to collect data; Chris noted that the initial group will involve the Medicaid population. Tom W. stated that child immunizations will continue to be monitored and noted that our original goal outlined annual wellness checks and immunizations, as well as the school RN monitoring missed days by students with chronic health conditions; we will continue to work to track key information. Commissioner Robertson asked whether monthly reporting is required; Chris responded, stating that we will report the data that indicates allocated hours, tests, outcomes, salary/benefits paid, costs, etc.

Annual Safety Committee Review – Tim Rumph, Safety Committee Chairman presented the annual

2019 Highlights/2020 Goals:

- Expanded Hours for Phoenix Security - from 12 to 18 hours / day (3pm to 9am)
- Avade Workplace Violence Training/De-escalation Classes- offered to all (an 8 hour course)
- Expanded Safety Inspections - Managers were asked to conduct 1 safety inspection of their department per year. They have exceeded expectations.
- Continued Code Drills
- E.O.C. Introduced (Environment Of Care Plan)
- Digital SDS Management Tool Introduced- A digital SDS that is functional and will be made available to ALL employees

Tim reported that NHHS practice and conduct Emergency Code drills throughout the year and also review reported medication events and patient falls on a monthly basis. The Committee conducts departmental safety surveys. The following drills were conducted during 2019: 6 Code Stork (OB emergency), 11 Code Blue, 2 Code Gray, 2 Code Silver, Red, 2 Code Amber, and 1 Earthquake drill. Fire drills are conducted bi-monthly. Multiple generator system tests confirmed that the District is operating within guidelines.

Tim reviewed the total Labor & Industry information as follows:

L&I Claims- 19 Total claims

<u>Injury Categories</u>	<u>Total</u>	<u>Work days lost</u>
Outdoor (slipping on ice, etc.)	7	No loss
Patient Handling	6	(2 days)
Needle Sticks	1	No loss
Violence Patient to Staff	1	No loss
Misc (back strains from lifting)	15	(29 days)

Tim provided a recap of the 2020 Safety Committee Goals, noting work continued with the Education Dept. to conduct regular, documented Code drills, working with the Safety Task Force and Education to develop District-wide workforce violence training, monitoring compliance with regulations, monitoring effectiveness of the Nixle/Net Notify systems, and completion of the Annual Safety Risk Assessment.

Tim and the Committee were thanked for their efforts and the informative report.

COMMITTEE REPORTS:

Joint Conference - Dr. Lewis was not in attendance at the meeting; there was nothing significant to report.

Finance: Kim Manus noted we remain on track with budget; there was a slight increase in AR – a revenue cycle project involving various managers is addressing this. Staff members are being included in an effort to bring days in AR to 45 days – prior to transitioning to the new Epic platform, which is scheduled to “go live” January 21, 2021. Kim explained that Providence holds to a strict, structured schedule for implementation timelines. The tentative kick-off date is March 19<sup>th</sup>, with a 2<sup>nd</sup> planning

date in June. In the interim, online learning tools will be provided. Walter Price stated that we will be very diligent to maximize our resources and streamline efficiencies during the training period. He stressed that was why we enlisted the services of Bluetree Consultants; he is confident that many integration issues will be addressed by Bluetree prior to implementation.

Kim explained that Bluetree Consulting is also assisting us with selection of our underlying enterprise resource platform (ERP: which includes the general ledger, HR and payroll platforms, purchasing and inventory management, budgeting, etc.) and total cost of ownership. Several demonstrations are scheduled with a goal to have a recommendation to the Commissioners at the next meeting.

Year-end 2019 financials are being processed for close-out and the Auditors will be on site for a full week in April. Kim explained that she is hopeful that the new accounting software will enhance our budget process. John Stuvenga and Diane Anderson of the AP dept. recently rolled out new FTE productivity trackers to department managers and provided a 5-year history of productivity measures, comparing with staffing, costs, etc.

Following a question from Commissioner Rosencrantz, Kim explained that the OR dept. met with finance staff and refined the baseline productivity statistic – it had been the number of surgical/scope procedures; however, as we are now performing orthopedic procedures (which take much longer), we went to a total surgery minutes statistic. Pete Peterson explained that counting only cases does not factor pre-op, OR time, post-op, sterile processing, call center. Kim added that the DOH's industry standard is based upon surgery minutes vs. procedure counts.

Kim announced the passing of Lisa Morse earlier this month. Lisa served the District for nearly 29 years as the Business Office Mgr. She will be missed.

Quality Assurance - Jen Allbee, Quality Mgr. stated that she included the 2020 Quality Plan in the packets and requested approval, an annual DOH requirement. **A motion made, seconded and passed unanimously approved the 2020 Quality Assurance Plan as presented.**

#### SUPERINTENDENT REPORT

Strategic Initiatives - Tom W. noted he our Leader group have continued focus on the 2020 operating goals and identifying our "big bullets" for the year. Top priorities/focus include: 1) EMR Replacement/Implementation, which is an infrequent (once every 20+ years) and monumental operational disruptor that requires great institutional time and resource until fully functioning in 2021; 2) provider recruitment/on-boarding to replace Dr. Kersting (in process) and Jennifer Eickstadt (under review), Dr. Vandersloot (coming in April), and a potential added FP (contemplated), and 3) capital planning remains under review. Tom continues reviewing options with our Med. Staff, updating our debt capacity, and will schedule a separate strategic planning session to address core goals in March, if schedules permit.

Board "Certification" - Tom noted that WSHA is offering a Board/Trustee certification based upon on the manual, "Questions Every Board Member Should be Able to Answer," via a series of 1-hour of online courses – it takes 12 credits to become certified. There is also the annual Trustee Summit on May 14 (provides 5 credits). Tom explained that practices are not necessarily universal and the session would provide an opportunity for our board members to learn specifics to our District's operations.

ACO Model v2 – During 2016-18 NHHS participated under an Accountable Care Organization (ACO), but ended it to focus on our HCA/1115 Medicaid waiver projects in 2019-20. We are now considering whether to join an ACO-v2 and noted that Caravan has an open invite to us to join under one of their mega-ACO's. The Rural Hospital Committee has also suggested that Washington Health Services prop up a clinically integrated network to host a WA, rural based ACO. Formation legalities are similar with participation under any of the models; the main difference is the Caravan ACO consists of networks that include 80K-150K lives, generally involving members from several states. Caravan has been a leader in the ACO market since 2012; and their premise is the larger the ACO, the lesser the year-over-year deviation, the lesser the risk of loss to the group. In fact, they believe the potential for loss is so low, they will guarantee and covered any ACO system losses. Tom noted that Providence, MultiCare, KP are involved in ACO's. We will continue discussion on these models over the next few months.

HCA/1115 Waiver Update – Our provider plan has been reviewed and submitted to Better Health Together, along with our community partners. We believe we can meet the plan targets and the funding that is ear marked for Pend Oreille County will make it back to NHHS and our POHC partners.

Other operations/projects - we continue to review the run rate and census for our AL\_EARC facilities; review parking expansion and way-finding, ER expansion, substance abuse disorder/management, telemedicine, and specialty services.

Ambulance/EMS District Formation - Tom noted that he was visited by one of the local fire chiefs this week to discuss ambulance transports/funding. He provided a 4-yr history of the ambulance service/EMS district formation and our District participation/ response to the Board. He noted that the District has no means/desire to manage/provide ambulance service; it is simply an untenable service without EMS funding in a rural setting. Tom believes the only truly sustainable option is to form an EMS District, as neither a private ambulance nor the individual fire districts can maintain the service.

Tom provided an overview of the State's EMS Trauma system and its oversight and licensing responsibility shared with the WA-DOH. The Dept. of Health is the licensing/survey authority; however, they work very closely with the local EMS Councils (made up of FD, City, FD, County, and ambulance service members) and their medical directors to issue BLS and ALS licenses and oversee ambulance and first response services. Tom noted he researched the matter in 2016, so the finer nuances may lost, but his absolute takeaway (remaining to this day) is that ambulance/EMS service should remain under a municipal umbrella, with the EMS Council member entities overseeing operations as a EMS District board. It is the only way to have even a fighting chance to maintain the services locally.

NHHS is the only local entity who has supported the local ambulance service and will continue to strongly urge the EMS Council members to reconsider EMS options. Tom stated he would discuss our alternatives with the Board, Dr. Jones, John Jackson, the County, Newport City, and Fire Chiefs. Tom noted that Pend Oreille County is one of only four counties in the State that has no EMS funding and, for perspective, in 2016, AMR was approached to provide ambulance service in the County; they said they would consider it if the "collective" EMS Council would pitch in \$400K and let AMR do the ambulance billing. The challenges and aspects of maintaining a viable ambulance service in the County was discussed amongst the group.

Home Health Visits – due to the an extreme shortage of home health nursing staff in this area, the State designated P.O County a shortage area and cleared the way for RHC billing.

**ACTION ITEM AGENDA**

**Annual Quality Assurance/Performance Improvement Plan** – as noted previously, a motion made, seconded and unanimously passed the 2020 Quality Plan was approved.

**Authorize Letter of Agreement – NHHS and Foundation** – Language revisions to the Foundation Letter of Agreement were accepted as presented, approving the 2020 Foundation Letter of Agreement.

**Capital Purchase – Cost Revision** - A motion made, seconded and passed unanimously approved a cost increase of \$2,350 for the Priority 1 capital purchase of a Ford transit van.

**Capital Purchase – OB Equipment** – Commissioner Rosencrantz requested additional information related to medical necessity for the OB equipment. Pete Peterson explained that Nitronox gas is used widely throughout the country and requires a physician order, and minimal patient orientation. Kim stated that reimbursement is based upon a “point” system; Commissioner Johnson noted that the intervention is becoming an industry standard. The OB providers reported that our clients are requesting the service and have been going to other hospitals that offer it. Pete stated that the gas is currently stocked. A motion made, seconded and passed unanimously approved the purchase of Porter Nitronox equipment in the amount of \$12,400 (includes tax and shipping).

**OTHER BUSINESS:**

There was no other business to discuss.

**EXECUTIVE SESSION**

As permitted by RCW 41.05, the meeting was moved to Executive Session at 4:10 pm. for approximately ½ hour to discuss personnel matters.

**RETURN TO OPEN SESSION**

The Commission returned to Open Session at approximately 4:35 pm. There was no action taken.

**NEXT MEETING DATE**

The next regular meeting of the Board of Commissioners is scheduled to occur on Thursday, March 26, 2020 at 1:30 pm. in the Sandifur meeting room.

**ADJOURNMENT**

There being no further business, the meeting adjourned at approximately 4:15 pm.

Minutes recorded by Nancy J. Shaw, Executive Administrative Assistant and Tom Wilbur, CEO.

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Terry Zakar, President  
Board of Commissioners

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Lois Robertson, Secretary  
Board of Commissioners

~ Approved; not signed ~  
@ 3/26/2020 virtual mtg