

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

December 17, 2020

Due to CoVid-19 protocols, this meeting was offered via tele-conference. Those in attendance: Commissioners: Robert Rosencrantz, Lois Robertson, Terry Zakar, Lynnette Elswick and Susan Johnson; Directors: Tom Wilbur, Kim Manus, Joseph Clouse, Chris Wagar, and Walter Price; Others: Casi Densley, John Stuiwenga, Jane Tilley; Chelsea Stumph, Casey Scott, Jen Allbee, Jenny Smith, and Nancy Shaw.

CALL TO ORDER:

Terry Zakar, Chairperson, called the meeting to order at 12:03 p.m.

READING OF LEGAL NOTICE:

The regular meeting legal notice was distributed as required.

APPROVAL OF AGENDA / CONSENT ITEMS:

Included in the consent packet were the meeting Agenda, Auditors Report and Uncompensated Report. There were 2 additions to the Agenda: 1) Proposed changes to the District's Charity Care Policy, and 2) 2021 Cost of Living Increase.

APPROVAL OF PREVIOUS MEETING MINUTES

The regular meeting minutes of November 12, 2020 were approved by motion made, seconded and unanimously passed with the following correction: Pg. 6, Para. 4, should read **500 cc vs. 5,000 cc.**

The following consent agenda items were approved as presented by motion made, seconded and passed.

Auditors Report - November:

Warrants disbursed: #218968 through #219314	1,509,686.55
Electronic warrants: #002359 through #002374	232,357.29
Mountain West, Loan payment, disbursed 11/10/20	40,000.00
Total, warrants and disbursements	\$ 1,782,043.84
<u>Bad Debt/Charity:</u> November 2020, inclusive District Write-off	\$ 98,700.56

COMMITTEE REPORTS:

CoVid Update: Jenny Smith provided the latest, referring to a recent article appearing in the Newport Miner. Jenny explained that she was contacted by the reporter on Tuesday morning and was unable to clarify any information as she was working on vaccine clinic planning. The article referred to our ACU closure over the prior weekend; Jenny stated the information was relayed during the regular weekly phone call update by the health district to the County Commissioners.

Vaccine Plan – Jenny reported that Pfizer vaccines will arrive today (the press has been invited to take photos of the arrival); the vaccines are preservative-free and must be used within 5 days once unfrozen. She noted that KTI was granted priority distribution and, via KTI's commitment with the Tri-County Health District, placed NHHS in priority to receive shipments – thank you, KTI! Our vaccines will be issued per WA DOH priority guidelines which places healthcare workers, first responders (EMS, fire districts, etc.), and those living in residential care facilities in first (1.a) priority. The vaccination clinic will occur Friday, Saturday, and Monday and all interested individuals eligible under 1.a should receive the vaccination. Jenny noted the Moderna vaccine is also expected to arrive in the near future.

We have had several staff members test CoVid positive, but many are starting to return to work following quarantine guidelines. Jenny encouraged the Board members to send a positive message to our staff, especially those in the ACU, ER, Laboratory, and Clinic.

PPE – Jenny announced that we recently received 6,200 gloves under a County emergency allocation.

Non-emergent procedure/huddles now occur daily with a floor status update that includes WA-TRAC (the regional bed placement tool) status. At present, no elective overnight stay surgeries are being scheduled for the next month.

Jenny offered to include the Board members in her daily e-mail notifications and updates; noting that she is not always able to respond to reporter's questions in a timely manner. Tom explained that he and the medical staff confirmed the procedures to close the ACU - it is a joint-decision between the on-call MD, ED provider, and nurse charge using decision factors: ED/ACU census (including Covid rule-outs), deliveries in the queue, staff availability, and regional bed status and transfer capability – they only contact the Admin. On-call if they can't agree. This has been the same procedure for many years.

Chris clarified that the ACU closure was due to limited staffing and none of our patients were diverted or transferred during the downtime. She noted that any patients being tested to rule out CoVid must remain in a private room until test results are returned – which impacts our bed availability.

Commissioner Rosencrantz requested notification of all correspondence being released to the Miner, Health District, etc. as a means to ensure the Board is informed of the latest information. Chris stated Health District/County meetings are open to the public on Mondays at 9:15 am. Robert specified that he would request a copy of any information that is being projected into the public domain – the other Board members agreed. Also, Robert requested roll call be taken at the beginning of the Board meetings to confirm those in attendance. Jenny was thanked for the informative report.

Joint Conference: Dr. Lewis was not in attendance; Tom W. announced that Dr. Aaron Reinke will be assuming the role of Chief of Medical Staff in 2021.

Finance: Casi Densley, Controller provided the November income statements and noted we went "live" with AP and supply chain modules this month. The data is preliminary for the month; a Treasurer's report is expected to be available at the next meeting. Casi noted the Paycom payroll system is now on-line and the team has been validating vouchers from various sources. Our loan forgiveness application (on \$4.8M PPP proceeds) will undergo a 5-month review/approval process via the FDA. The proceeds will not be recognized on the financial statements until the application is approved.

CARES Act Funding availability will be based upon 2019-2020 net patient service revenue comparisons. Casi noted the 2020 data is annualized from the 11 month actual; this month AP will evaluate accounts, perform write-offs as this will affect the Net Patient Service revenue which will affect recognizing the appropriate amount of CARES Act funding. She reported that CoVid expenses total \$205,000; a separate account has been established and will be evaluated to ensure all related expenses are being captured.

Quality Assurance/PI: Jen Allbee reported that our QHI data platform we share with WRHC providers (the software program we use to benchmark to other CAH facilities) will no longer be supported in 2021. Following WSHA's recommendation, the Collaborative chose another company, CoMagine (formerly Qualis Health) to contract with in 2021. The new network will be a collection of 60 hospitals across Washington, Oregon and Utah. Most of the data is pulled from CHARS (comprehensive hospital

abstract reporting system) and NHSN (National Health & Safety Network). Jen noted that data submitted to CoMagine will be stored under a new report format (Alliant Quality) that will provide resources for best practices and education and will be available once our information is submitted.

The goal of CoMagine and the hospital quality improvement effort in 2021 is to improve behavioral health outcomes, with a focus on decreasing opioid use/misuse by 12%, with an emphasis on our Medicare population. Other targets: 1) decrease opioid adverse events including death by 7%; 2) increase quality care conditions; 3) improve community-based care transitions for Medicare beneficiaries to reduce readmissions by 5%; 4) increase patient safety and reduce all harm in hospitals by 9% by 2024. Jen will provide new reports when the data is submitted and becomes available.

Community Paramedicine – Jen reported that the District was awarded a DOH/Medicare Rural Hospital Flexibility Grant for \$8K for a population health improvement project. We will be working with Pend Oreille Paramedics to pilot a small community paramedicine program in an effort to decrease ED visits and EMS response utilization within a 6-month period. Reducing ED utilization for non-emergent needs is a major priority for CMS. Jen noted that Pend Oreille Paramedics was chosen as the agency as a stand-alone EMS District; she noted that all other Districts are Fire Districts without paramedics.

Jen noted that we have seen a 19% increase in ED utilization over the past 5 years; ED visits typically cost four times more than a typical office visit. Jen explained that the ED log will be reviewed and those patients determined to have frequent visits would be eligible for paramedic follow-up and assessments. Commissioner Johnson asked if the ambulance team triages at the residence and determines whether the patient is in need of emergency transport?

Tom W. noted that many times the ambulance crew does assess that a patient does not require transport. The goals of the program are to ensure that those patients are connected to a care coordinator and to notify the attending provider of the amount of calls to the home in an effort to mitigate frequent or unnecessary transports to the hospital.

Jen noted that the top 5 diagnoses will be tracked for visit indication and evaluated further over a 6 month period. Nursing administration and quality personnel will identify patients that could benefit from home visits with paramedics providing health assessments, lab draws (as indicated), EKG's, medication review, identification of behavioral health issues and assessment of social determinants of health. The project will begin in January.

HR Update: Joseph Clouse, HR Director, distributed his monthly report. UR Case Management resumes are being reviewed and we received several resumes for the Compliance Officer position. An interview is scheduled on January 4 with an interested CNO candidate; in addition, resumes are being reviewed for Referral Coordinator and Social Worker. The Patient Access Representative, HIM Tech and Cook positions are filled. NA-C, LPN's and RN positions remain open.

Paycom – Joseph explained that the last pay period was the first time the new Paycom time and attendance system was utilized. The transition was successful with only minor corrections. Joseph thanked Casey Scott for his assistance in the effort. The focus will be on year-end reporting, onboarding, compensation module and the performance management module.

Joseph shared a PowerPoint slide presentation that highlighted milestones and photos during 2020.

EPIC Update – Tom thanked Walter and the IT Dept. for their efforts installing our PC's, work stations, scanners and equipment for the EPIC conversion. The dress rehearsal was a success and our "go live"

date remains January 23rd. Kim added that members of Providence reported that they were very pleased with the efforts of our IT dept. and that the EPIC dress rehearsal was the most successful they have seen of any facility to date.

ACTION ITEM AGENDA

Observance of 2021 District “Legal Holidays” – per RCW 1.16.050, municipal corporations must list the legal holidays observed for each calendar year. There were no changes to the standard six recognized District legal holidays.

ACTION: Resolution No. 2020-13 was approved unanimously.

2021 Commissioner Assignments/Confirmations. Following discussion, a motion made, seconded and passed unanimously confirmed and approved the 2021 Commissioner Board nominations:

Board Positions:

Chair: Terry Zakar Vice Chair: Lynnette Elswick Secretary: Lois Robertson

Committee Appointments:

Personnel/Insurance: Susan Johnson	Compliance: Lynnette Elswick, Terry Zakar
Finance: Lynnette Elswick, Robert Rosencrantz	Medical Staff: Lois Robertson, Lynnette Elswick
Capital/Facilities: Robert Rosencrantz, Lynnette Elswick	
Quality/PI: Terry Zakar	Ethics: Lois Robertson, Susan Johnson
Marketing: Terry Zakar	Safety: Susan Johnson

All appointments will be effective January 1, 2020.

2021 Non Contract Staff Compensation Component Updates. Per the plan, there are 2 wage components proposed for 2021. 1) A 2% Annual Cost of Living Wage Adjustment; 2) Milliman Marketing Survey and Hiring scale adjustments.

ACTION: a motion made, seconded and passed unanimously approved adjustments to the **Non-Contract** Staff Compensation Components. All adjustments are effective beginning the first full pay period in January 2021.

Changes to District Charity Care Policy. Kim Manus explained changes were made to the policy due to the need to clarify that patients must exhaust all other funding sources before they will be eligible for Financial Assistance. After review of the policy with WSHA, it was established that it would be beneficial to clarify the message to our patients. Once the Board approves the policy, it will be submitted to the Dept. of Health for a 30 day period review; otherwise the policy will be effective 30 days following submission to the DOH.

ACTION: a motion made, seconded and passed unanimously approved changes to the District's Charity Care Policy.

CEO Annual Evaluation: to be discussed and determined during Executive Session.

SUPERINTENDENT REPORT

Tom presented an overview of NHHS leader's collective group of 2019-2020 core strategic goals and accomplishments. He noted the group continues to build trust, clarify our purpose, align systems and unleash our collective talents around our key strategic goals: 1) to maintain our local autonomy and 2) to develop local/regional affiliations that: a) make functional and/or business sense to NHHS and b) integrate systems to improve health/care delivery to our local clients.

Our autonomy will be maintained by improving targets in three areas: 1) quality outcomes (measurable, science based); 2) customer service (patient survey); 3) and financial metrics (net margin/cash flows).

We have continued to set and achieve on our Wildly Important Goals "WIGS" and to build upon targets that enhance our services/systems. Historically, our annual planning framework/rhythm was to assess performance/update WIG's and general targets in Q4; close the year and reset with our entire leader group (30 members) in March/April, wrap leadership development/training and economic assessments around the plans, and cascade targets to the leader/line level; each manager "trickling down" goals/objectives for the coming year using a measurable system to track results/outcomes.

Tom noted that due to the pandemic and system conversions (Epic/Premier) in 2020 our Leadership group was unable to reset, which grounded our ongoing process and effectively put a year "on hold." He noted the slide deck he was using was the Nov. 2019 presentation to our manager group that he used to "set" the outline and general targeting for 2020.

He noted we are on track with our ACO model (v.21') and will slide into the metric/monitoring starting in Q2, post Epic. Chris and Dr. Tessa Reinke will be leading the charge. Tom noted that he will focus his efforts on developing the rural v.2022 ACO version. We will fire up and refocus on capital/facilities planning, and recruitment efforts on our specialty service and MH_SUD. Tom's "big bullets" are to update our provider contracts (noting changes to STARK rules and CMS, RBRVS w/RVU's) in 2021; Tom plans to produce a value-based provider contract (that makes fiscal sense).

Commissioner Johnson requested periodic updates for RMV and Clinic operations. Tom noted our RMV targets will be to achieve ADC > 90; there being a total of 95 beds between the two facilities, and look to open our last 18-bed neighborhood in RMV-AC post pandemic. Our 2020 plan was to hire NAC's, certify them for medication delegation, shift RN's to LPN's, and work to fill up the 4th neighborhood in Q4. We were close to census targets (pandemic limited) and maintained our guaranteed State rate of 80% for all DSHS clients – which held our daily rates at the max. allowable with DSHS.

EXECUTIVE SESSION

As permitted by RCW 41.05, the meeting was moved to Executive Session at 1:58 pm. for approximately 1 hour to discuss personnel (CEO review) and credentialing matters.

RETURN TO OPEN SESSION

The Commission returned to Open Session at approximately 2:45 pm.

The Board reviewed their annual CEO performance assessment with Tom and determined goal setting/target achievement for 2020. The Board established 2020 incentive compensation in the amount of \$49,629, to be paid after December 31, 2020, and providing that Tom remains continuously employed by the District through that date.

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Tom's contract was updated to the current date with no "effective" changes – CEO annual salary remains \$243,360, effective January 3, 2021; the contract terminates December 31, 2023.

The CEO incentive compensation and revised employment contract were passed via **Resolution No. 2020-14**, via motion made, seconded and unanimously approved.

Per the recommendation of the Medical Staff Executive Committee, the Commissioners approved:

Provisional to Courtesy Appointments – 12/19/2020 – 12/19/2022:

Off Site Radiology:

Dwane Brittain, MD
Robert Frost, MD
Jace Hilton, MD
Sean Jones, DO
Richard Nguyen, MD
Suzanne Shaw, MD
David Thayer, MD

Gurpreet Dhillon, MD
Timothy Gormely, MD
Chet Hunter, DO
Sean Koskinen, MD
Isaac Reece, MD
Stephanie Simonson, MD
Bryce Turlington, MD

Tyson Finlinson, DO
Pushpender Gupta, MD
Edward Iuliano, DO
Douglas Murrey, MD
Casey Schmitz, MD
Michael Stewart, MD
Roy Zimmer III, MD

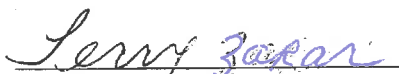
NEXT MEETING DATE

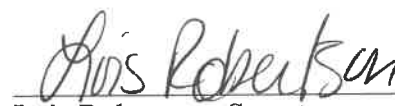
The next regular meeting of the Board of Commissioners will occur on Thursday, January 28, 2021 at 10:00 am. in the Sandifur meeting room. The meeting will be available via ZOOM.

ADJOURNMENT

There being no further business, the meeting adjourned at approximately 3:00 pm.

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


Terry Zakar, President
Board of Commissioners


Lois Robertson, Secretary
Board of Commissioners