GRAYS HARBOR COMMUNITY HOSPITAL
BOARD OF DIRECTORS REGULAR MEETING
September 20, 2018

COMMISSIONERS PRESENT
Michael Bruce, District 2
Miles Longenbaugh, District 3
Melanie Sturgeon, At Large 2
Robert Torgerson, At Large 1 (via conf. line)
Becky Walsh, District 5
Maryann Welch, District 1

OTHERS PRESENT
Niall Foley, Executive Director Finance
Tom Jensen, CEO, GHCH
Teresa Ramirez, Executive Assistant
Members of the Public

ABSENT
Andrew Bickar, District 4

EDUCATION

Dr. Joseph Stengel, Radiologist and PNWU Regional Assistant Dean, provided a presentation on Residency Programs (reference presentation for details). Of note:

Steps Grays Harbor Community Hospital has taken thus far toward a Residency Program:

- January 2016 – Began discussions with Multicare to explore RTT with TFM.
- February 2016 – Attended RTT Collaborative meeting in Denver.
- March 2016 – Met with Providence St Peters program in collaborative effort.
- June 2016 – Applied for Step 2 Grant.
- August 2016 – UW Dr Pauwels and TFM reps site visit and financial assessment.
- November 2016 – Idaho Family Medicine Consultant virtual site visit.
- November 2017 – Continued discussions with TFM/Multicare.
- Need for program director, full spectrum FM faculty and SCH challenges.
- March 2018 – Draft block schedule, curriculum and program director leads, need for more specific financial information.

Conclusions:

- GHCH is committed to increasing the quality and availability of care in the entire county and Harbor.
- Undergraduate and graduate medical education (GME) programs figure prominently in the plans.
- Financial considerations and lack of Family Medicine Champion have stalled progress on GME initiatives.
- Administration and Medical Staff are reinvigorated by community interest in GME on the Harbor.
- Careful planning and deliberate action is necessary to avoid regulatory and reimbursement pitfalls (CAP and PRA calculations).

Dr. Stengel reported that almost all rural training tracks include two residents over a period of two years; in total, four residents over a four year program. In addition, most providers practice within 50 miles of their residency program.

CALL TO ORDER

President Welch called the meeting to order at 6:45p.

President Welch appointed Commissioner Walsh as Interim Secretary for the evening, in the absence of Commissioner Torgerson.

Public Comment – Agenda Topics
President Welch opened the meeting to members of the public for comment regarding topics listed on the agenda.

CONSENT AGENDA

Submitted under the Consent Agenda were the Hospital Board Minutes of August 28, 2018.

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

BOARD DISCUSSION AND ACTION

Medical Staff Credentialing

Submitted was the Medical Staff Credentialing Report for August.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Longenbaugh, and unanimously carried to approve the appointment of Keith Knigge, DO, as Provisional Staff for a period of one year in the Specialty of Emergency Medicine.

ACTION: A motion was made by Commissioner Bruce, seconded by Commissioner Sturgeon, and unanimously carried to approve the appointment of Terry Li, MD, as Provisional Staff for a period of one year in the Specialty of Emergency Medicine.

ACTION: A motion was made by Commissioner Bruce, seconded by Commissioner Sturgeon, and unanimously carried to approve the reappointment of Scott Light, PA-C, as an Allied Health Professional for a period of two years in the Specialty of Emergency Medicine.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Sturgeon, and unanimously carried to approve the appointment of Katha Gazda, ARNP, as Provisional Staff for a period of one year in the Specialty of Family Medicine.

ACTION: A motion was made by Commissioner Longenbaugh, seconded by Commissioner Walsh, and unanimously carried to approve the appointment of Monica Hallak, ARNP, from Provisional Staff to an Allied Health Professional for a period of two years in the Specialty of Family Medicine.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Bruce, and unanimously carried to approve the appointment of Mindy Lewis, ARNP, as Provisional Staff for a period of one year in the Specialty of Family Medicine.

ACTION: A motion was made by Commissioner Torgerson, seconded by Commissioner Sturgeon, and unanimously carried to approve the reappointment of John Olsen, MD, as Courtesy Staff for a period of two years in the Specialty of IM/Cardiology.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Bruce, and unanimously carried to approve the appointment of Caroline Rinaudo, PA-C, as Provisional Staff for a period of one year in the Specialty of PA/Hospitalist.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Longenbaugh, and unanimously carried to approve the appointment of Corey White, DO, from Provisional to Courtesy Staff for a period of two years in the Specialty of Neurology.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Bruce, and unanimously carried to approve the appointment of Jeffrey Caverly, MD, from Provisional to Consulting Staff for a period of two years in the Specialty of Teleradiology.

ACTION: A motion was made by Commissioner Sturgeon, seconded by Commissioner Walsh, and unanimously carried to approve the appointment of Surender Kurapati, MD, from Provisional to Consulting Staff for a period of two years in the Specialty of Teleradiology.

ACTION: A motion was made by Commissioner Longenbaugh, seconded by Commissioner Bruce, and unanimously carried to approve the appointment of Jose Ospina, MD, PhD, from Provisional to Consulting Staff for a period of two years in the Specialty of Teleradiology.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Bruce, and unanimously carried to approve the appointment of Kevin Blackmon, MD, as a Locum for a period of one year in the Specialty of Anesthesiology.

ACTION: A motion was made by Commissioner Torgerson, seconded by Commissioner Longenbaugh, and unanimously carried to approve the reappointment of Jonathan Gifford, MD, as Active Staff for a period of two years in the Specialty of General Surgery.

ACTION: A motion was made by Commissioner Sturgeon, seconded by Commissioner Walsh, and unanimously carried to approve the reappointment of Salam Hallak, MD, as Active Staff for a period of two years in the Specialty of General Surgery.

ACTION: A motion was made by Commissioner Walsh, seconded by Commissioner Bruce, and unanimously carried to approve the reappointment of Robert Hovancsek, DPM, as Active Staff for a period of two years in the Specialty of Podiatry.

ACTION: A motion was made by Commissioner Sturgeon, seconded by Commissioner Walsh, and unanimously carried to approve the appointment of Joseph Stuart, MD, as a Locum for a period of one year in the Specialty of Anesthesiology.

Resignations were noted:

- Eric Jahn, PA-C in the Specialty of Emergency Medicine.

CHAIRMAN'S REPORT

Navigant Steering Committee; President Welch shared some highlights from the meeting she attended:

- Positive feedback has been received about the Contact Call Center that is up and running for most of the clinics, other than the specialty clinics at this time.
- Pharmacy has been stellar in developing initiatives to save money, e.g. 340B program, etc.
- Emergency Department continues to work on throughput. The Left Without Being Seen rate is pretty high and will be a target of focus.
- It has been nice to see Medical Staff actively participating in the Navigant Steering Committee meetings.

Board Participation; President Welch expressed appreciation for Commissioner's active participation during Employee Forums, radio talk shows, and the annual GHCH Taco Feed.

COMMITTEE REPORTS

Board Quality Report

Commissioner Walsh provided report on the September Board Quality Committee meeting. Of note:

- Grace Gordon, Interim Director of Quality, Risk & Compliance was introduced to the Committee.
- Ms. Long, Patient Advocate, shared that she has been coordinating communication between departments in order to address patient questions and concerns, and expressed appreciation of staff resolving issues in a timely manner.
- Ms. Gordon proposed a new template for data reports, in an effort to reduce the volume of information being submitted and to narrow the focus toward the most important organizational data. This will allow for more meaningful conversations at the Committee and Board level.
- ED Operations; Barbara Pierce, Navigant Subject Matter Expert, provided a presentation to the Steering Committee on the steps she would like to focus on next. The first priority is to address *Left Without Being Seen. Median Time for Decision to Admit/ED Departure* and *Median Time for Overall Length of Stay* have improved significantly.
- Sepsis; The Sepsis national benchmark will increase to 51% next month. Overall Sepsis Mortality rate continues to trend down, and is well below National average of approximately 15-16%.
- Medication Safety; The majority of medication "events" are documentation-related. The lack of wireless capability/bedside scanning throughout the hospital, has a negative impact on documentation-related issues. Adverse Drug Reactions continues to come in at zero events.
- Nursing Report; There have been no falls with injury since September, 2017.
- Performance Improvement; Efforts will be made to ensure that every performance improvement project has established measures in place, in order to assess whether improvement was achieved from implemented initiatives.
- Utilization Review; The decrease in Length of Stay related to observation status has shown improvement, due to staff's increased understanding of inpatient/observation status. A renewed dedication has been undertaken to focus more intently on CMI. CMI reviews have expanded from solely Medicare charts to all payor charts. The level of staff cooperation has been great, as adjustments continue to be made since the reduction in staff took place.
- The new report format will include an analysis, a summary, and recommendations.

Measures noted for stellar performance were reported as Sepsis Bundle compliance, overall sepsis mortality, pressure ulcer incidents, falls without injury, and surgical site infections.

Board Finance Report

Commissioner Longenbaugh provided report on the September Board Finance Committee meeting. Of note:

August Financial Highlights

(+) Expense Reductions
- Realizing savings in key initiative areas such as: workforce, supplies, and agency
- Truven Productivity at 100% of 25th percentile target for the month and 99% YTD

(+) Reimbursement Improvements
- Realizing lifts from Rural Health Clinic conversion and Medicaid rate increase

(+)(-) Volumes
- IP and OP volumes at or better than prior year August; however, continue below budget

August Consolidated Financial Summary

Total Revenue:	$ 31,041,482
Revenue Deductions:	$ 22,666,426
Net Operating Revenue:	$ 8,676,000
Total Expenses:	$ 8,594,780
Net Income:	$ 118,009

Financials Report
- Salary expenses are trending downward.
- Acute Admits were trailing by 8% all year; however, only trailing by 4% in August.
- Expenses came in at $268K below the prior August.
- FTE levels are normalizing to approximately 530, compared against 646 last year.
- RHC Reimbursement; The hospital will be receiving $216 per Medicare encounter and $138 per Medicaid encounter.
- Amerigroup has committed that all claims will be pushed out by noon today. They fronted the hospital a $125K payment. It is anticipated that $600K-$800K will be received within the next two weeks.
- Left Without Being Seen decreased slightly in August.
- Outpatient Surgery volumes declined due to the loss of two anesthesiologists and moving to two ORs. Locums are being used to help with some of the coverage.
- Conversations continue to be held with KeyBank and Assured Guaranty regarding refinancing the debt. A conference call is scheduled between all parties next week. The Forbearance letter has been signed and Moss Adams has provided a draft clean audit.
- A Productivity Report was displayed, reflecting current month and year-to-date figures. The established benchmark is against other like-size hospitals. Directors are required to submit a countermeasure plan if their departments are not meeting the benchmark. Truven offers comparative data against a gamut of benchmarks, e.g. supplies, surgery costs, etc.
- Policy PA612 Property Tax Credit was submitted. Patients living within the district may receive a credit in the amount of the public hospital district portion of their property taxes paid over the previous 12 months from their related date of service, up to a maximum annual credit of $600.00.
- The 2019 Budget Assumptions were presented. Mr. Foley budgets conservatively against upward or downward trends, which sets the organization on a more stable track in avoiding significant adjustments to the budget. The budgeting process is changing this year, with Financial Services developing departmental budgets to be provided to directors. Directors

can then submit for consideration, priority "asks" for their departments. Board Finance approved the Budget Assumptions, which will be presented during the October Board meeting, prior to the November Budget Hearing.

ADMINISTRATION

Executive Suite Summary Report
Submitted was the Executive Suite Summary for September, which included the updated HMG Recruiting Report.

- Recruiting Report; Noted was the recruitment of:
  - Anesthesiologist, Shente Hsu, MD who is expected to begin practicing in January.
  - Nurse Practitioner of Gastroenterology, Robert Wright, to begin practicing in December.
  - Pediatrician, Katie Myhre, MD, to begin practicing in December.
- Mr. Jensen expressed appreciation of the significant amount of work Mr. Foley has undertaken, and for leaders overall, in accomplishing the amount of improvements being realized in such a short period of time, with the support and facilitation of Navigant's expertise.

OLD BUSINESS

None

NEW BUSINESS

Board Education
- (Oct) Jackson Physician Search
- (Nov) Opioids – Anne Marie Wong, MD, CMO

GOOD OF THE ORDER

None

PUBLIC COMMENT – General
President Welch opened the meeting to members of the public for comment.

Robert Hatley; Mr. Hatley serves on the Montesano City Council, and expressed that he and the Council supports GHCH. The issue of concern is the need for providers in Montesano. Summit Pacific has given the Council an opportunity to bring in more providers through the residency program. The council is looking for a win-win.

Glen Ramisky; Mr. Ramisky expressed appreciation in being able to hear about the facts of the Residency Program through Dr. Stengel's presentation. He shared about his own challenges in finding a medical provider in the community. He encouraged that decisions in the end be made based on facts as they are shared at city council meetings and in other venues. Mr. Ramisky was complimentary of the great job being accomplished by GHCH.

ADJOURNMENT

The meeting adjourned at 7:27p.

MINUTES AND ATTACHMENTS APPROVED AND ADOPTED THIS 23rd day of October, 2018.

ATTEST:

Teresa Ramirez
Recording Secretary

Commissioner