

**CHELAN COUNTY PUBLIC HOSPITAL DISTRICT No. 2  
LAKE CHELAN COMMUNITY HOSPITAL  
MEETING OF THE GOVERNING BOARD**

**April 28, 2015 – LCCH BOARD ROOM  
1:34 PM 3:03 PM**

**MEETING MINUTES**

**CALL TO ORDER**

Tom Warren called the meeting to order at 1:34 p.m.

**Members Present:**

Tom Warren, Chairman  
Jim Wall, Commissioner  
Mary Signorelli, Vice Chairman  
Fred Miller, Commissioner  
Phyllis Gleasman, Secretary

**Others in Attendance:**

Kevin Abel, CEO  
Vickie Bodle, CFO  
Mary Murphy, Community Member  
Les Cooper, Past Foundation President  
Vernita Nolan, RN, Quality

Katherine Jerald – Foundation Executive  
DeLynn Barnett, HR & Risk Management  
Lee Tinsley, Utilization Review  
Celeste Thomas, Marketing  
Karl Jonasson, Director EMS

**REVIEW OF MISSION:**

- Our Mission is to provide patient-centered, quality healthcare with compassion and respect.

**OTHER BUSINESS:**

- DeLynn Barnett, announced that May 11<sup>th</sup>–May 15<sup>th</sup> is Hospital Week. The staff breakfast is Tuesday, May 12<sup>th</sup>, from 6:30-8:30 and the Potluck will be Thursday, May 14<sup>th</sup> at noon. Kevin Abel will be presenting the service awards to our caregivers.

**CONSENT AGENDA:**

It was m/s/c to approve the Consent Agenda as presented:

1. Board Minutes of March 24, 2015
2. Financial & Business Office Report
3. Vouchers/Warrants; \$853,056.19, in payroll direct deposits; \$1,206,979.31. Write offs: \$80,911.81 in bad debt, Charity Care: \$27,028.70, Bankruptcy: \$0.00, with combined total of \$107,940.51.
4. Policies and Procedures
  - Loaner Consignment Policy
  - Linen Shortage
  - Worksite Hazard Analysis
  - Online Medical Control Policy (CAH)
  - Stairway Cleaning
  - Birthing Room Cleaning Policy
  - Hemoglobin A1C (new)
  - Crash Cart Contents & Maintenance
  - No Show Policy (new)
  - Nutritional Screening & Consult Documentation
  - Para Transport of Patients Policy
  - Accident Prevention Program
  - Field Diversion Policy
  - First Aid Response Plan
  - Fluid Warmers Policy
  - EMS Personal Appearance Policy
  - Continuous Nebulizer Therapy (new)
  - Universal Precautions Policy

Physician Orders for Life-Sustaining Treatment (POLST) Policy  
Heat Related Illness Prevention – Outdoor Work Policy  
Reporting of Adverse Medical Device Incidents Policy (EOC) (CAH)  
*Consent Agenda Motion: J Wall/Second: F Miller & approved by Board of Commissioners*

#### **SPECIAL REPORTS:**

- **Capital Updates – Vickie Bodle, CFO**
  - The Senior Team rank and sort the departments' requests according to the established criteria and prioritize to come up with final items for the 2015 capital budget. A review of the approved board budget was conducted. The defibrillator has been earmarked by Guild B to be purchased by the Home Tour Funds.
  
- **Organization Structure – Kevin Abel, CEO**
  - The organization structure was submitted for the Board's for review and approval. We combined Med/Surg with OB under one manager, ER and OR under one manager and adjusted Sanctuary due to the new medical director. The organization chart for 2015 was approved by the Board.  
*Organization Chart Motion: Mary Signorelli/Second Phyllis Gleasman*
  
- **Washington State University Medical School – Kevin Abel, CEO**
  - Representatives from Washington State University visited LCCH and requested that we support the creation of a WSU Medical School. The school would have a focus on rural healthcare. The Board signed Resolution #551 to confirm their support. The campus would be held in Spokane at WSU's Medical Science Campus.
  
- **First Quarter Dashboard – Vernita Nolan, RN, Quality Director**
  - On the Quality Dash Board we were meeting or exceeding the indicators. Overall HCAHPS percentages improved over last quarter.

#### **STATE OF THE HOSPITAL REPORTS**

- **Operating Report – Brad Hankins, COO**
  - Dr. Schkrohowsky's office and staff moved April 14<sup>th</sup> to the clinic and has done a great job assimilating the specialty into Lake Chelan Clinic.
  - Third available options at Lake Chelan Clinic are at a clinic average of eight days, down from an average of 21 days in September, with an average of 16 encounters per provider per day, while walk-in encounters have increased to 20 to 25 per day.
  - Lake Chelan Clinic productivity in March resulted in 1528 encounters with 99 provider days.
  - Dr. Morris' clinic continues to grow and generates one to two surgeries per week.
  
- **Quality Report & Patient Care Services – Vernita Nolan, RN, Quality Director**
  - **Quality and Patient Safety** – A representative of Washington State Hospital Association was on-site this past month to review the process related to a portion of our external reporting via MBQIP (Medicare Beneficiary Quality Improvement Process). An updated CMS State Operations manual has been received, which will be reviewed and shared with affected departments to assure the latest revisions to the standards are being followed.
  - **Nurses Week: May 6<sup>th</sup> – May 12<sup>th</sup>.**
  - **Patient Care Services** – There has been issues with the X-ray machines and hematology instrument over the last couple weeks. All of these devices are now fully functional. Senior Staff approved a replacement DR (Radiology) console for Lake Chelan Clinic, which will improved reliability and will provide enhanced imaging capability, including image stitching, to support orthopedic care.

- **Chief Financial Officer – Vickie Bodle, CFO**
  - March financial statements closed with net income at (\$26,046) for the month and (\$95,305) for the year. The primary concern was deductions from revenue.
  - The 2012 Medicare Cost Report closed with an anticipated payment from Medicare to LCCH of \$412,000.
  - AR days 56.7 with hospital and clinic.

**Chief Executive Officer –Kevin Abel, CEO**

- Columbia Valley Community Health’s Chelan land sale is closing. A letter of support has been written by Kevin Abel showing support for the new site.
- Lake Chelan Community Hospital EMS, nutritional services, wellness and clinic representatives participated in the Chelan Middle School Health Fair April 8th.
- LCCH is participating in the North Central Washington Accountable Community of Health that is grant funded. The goals are better health, better care, and lower cost as measured at the population level.
- Health Information Management is leading the implementation of ICD 10 for LCCH. Clinical training is being scheduled and formal implementation is October 1<sup>st</sup>.
- Heritage Heights is looking at a strategic planning process to fill gap left when Regency transfers its licensed beds to Wenatchee. Process may include focus groups, market study and community conversations.
- Diane will send out email to commissioners regarding which date is best in November for the Board Retreat. WSHA Conference in Chelan, June 21<sup>st</sup>-24<sup>th</sup>.

**OLD & NEW BUSINESS**

- **Action Items:** It was m/s/c to approve
  - A. Action Items:
    - 1. Resolutions
      - Res #550 Interlocal Rental Space Agreement CCFD #7 *Motion: P Gleasman/Second: M Signorelli*
      - Res #551 Support of Washington State University Medical School *Motion: F Miller/Second: J Wall*
      - Res #552 Closure of LCCA Bank Accounts *Motion: M Signorelli/Second: F Miller*
      - Res #553 MRSC Roster Small Public Works *Motion: P Gleasman/Second: M Signorelli*
    - 2. Credentialing:
 

Brett M. Shaffer, M.D.	Provisional	Emergency Medicine
Holly E. Hensley, M.D.	Provisional	Swedish – Tele Stroke
Walter T. Kushner, D.O.	Re-Appointment	Swedish – Tele Stroke
Ravi S. Menon, M.D.	Re-Appointment	Swedish – Tele Stroke
Jordan S. Reichman, M.D.	Re-Appointment	Swedish – Tele Stroke

*Credentialing Motion: P Gleasman/Second F. Miller*

**MEETING ADJOURNED:**

- Meeting adjourned @ 3:03 P.M.

**Submitted:**

*Phyllis L Gleasman*  
 \_\_\_\_\_  
 Board Secretary

*5/26/2015*  
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**Date**

**Attest:**

*Kevin Abel*  
 \_\_\_\_\_  
 Kevin Abel, CEO

*5/26/2015*  
 \_\_\_\_\_

**Date**