

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

**June 16, 2015 – LCCH BOARD ROOM
1:30 PM - 2:30 PM**

MEETING MINUTES

CALL TO ORDER

Mary Signorelli called the meeting to order at 1:30 p.m.

Members Present:

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

Members Not Present:

Tom Warren, Chairman

Others in Attendance:

Kevin Abel, CEO
Vickie Bodle, CFO
Brad Hankins, COO
Troy Hawkins, Community Member
Mary Anne Patton – Community Member
Jane Jedwabny, Sanctuary Program Director
Francisca Ferrell, Community Member
Rose Weagant Olcott- GoLakeChelan

Katherine Jerald – Foundation Executive
DeLynn Barnett, HR Director
Carol Velasquez, CNO
Lee Tinsley, Utilization Review
Celeste Thomas, Marketing
Emit Aston, Foundation Member
Jerri Dion, BO Manager

REVIEW OF MISSION:

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

OTHER BUSINESS:

- Emit Aston, announced that the foundation donated \$500.00 for Senior Physical Therapy Exercise Classes.
- The Foundation Executive Committee is looking for a replacement for the Foundation’s Executive Director, Katherine Jerald who has taken another job opportunity. .
- The Foundation presented \$88,000 for scholarships this year.
- Healthy Lake Chelan Challenge will be held this Thursday, June 18th @ 2:00 P.M. 17 participants lost more than 20 lbs.

CONSENT AGENDA:

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

1. Board Minutes of May 26, 2015
2. Financial & Business Office Report
3. Vouchers/Warrants; \$558,877.10, in payroll direct deposits; \$394,696.72. Write offs: \$80,676.58 in bad debt, Charity Care: \$43,824.21, Bankruptcy: \$0.00, with combined total of \$124,500.79.
4. Policies and Procedures
 - Coagulation Quality Control
 - Dept. of Mammography Self-Referred Policy
 - Pathology Services for Blood Bank
 - Pre-Hospital Trauma Patient Diversion Policy
 - Physical Therapy Documentation
 - Youth Referral to Child Welfare Services
 - Infection Prevention & Control for Computers
 - Lactic Acid
 - Presence of Physician or Surgeon for Anesthesia
 - Physical Therapy Patients Medical Records

Employee Fund
Loaner Consignment Policy
Emergency Dept. Polices & Procedures (CAH)
Mental Health Notification to Parents or Guardians of Minors Policy
High Risk Admission and Suicide Precaution Guideline
Trauma Clinical Guideline: Initial Evaluation & Management of Blunt Thoracic Aortic Injury (TAI)

Consent Agenda Motion: P. Gleasman / Second: F. Miller & approved by Board of Commissioners.

SPECIAL REPORTS:

- **Compliance Presentation – Lee Tinsley**
 - Lee Tinsley, Compliance Officer presented a Compliance and Utilization Review program update. All contracts are reviewed each year to insure the payer or commissioned entity is not on the OIG excluded list. RAC audits are used to detect and prevent fraud and/or abuse of the system. Compliance is our, “Code of Conduct” with state and federal requirements. Utilization management provides high quality care at a reasonable cost to payers, and is required by Medicare. Medical records are reviewed to determine the severity of illness, intensity of services and discharge screens.
- **Long Term Care Benefits – Kevin Abel, CEO**
 - A long term care plan offered through Edward Jones is an optional plan for our caregivers. These plans are individually underwritten and are portable. There is a discount offered on these plans as a group. This plan has been reviewed by our Retirement Review Committee.

Long Term Care Benefits Motion: J. Wall / Second P. Gleasman & approved by Board of Commissioners.

STATE OF THE HOSPITAL REPORTS

- **Operating Report – Brad Hankins, COO**
 - Work has begun on the server room remodel.
 - Dr. Witt will move his office to Lake Chelan Clinic on July 1. His schedule will be, Monday-surgery, Wednesday – clinic at Lake Chelan Clinic, and Friday-procedures at LCCH.
 - The Lake Chelan Clinic x-ray system has been upgraded to digital radiology on May 27, 2015.
 - The walk-in clinic at Lake Chelan Clinic has gone to 10 hour days starting June 15th. They will also be open during lunch.
 - Meetings are in progress for the redesign of outpatient behavioral health program.
 - Provider days at Lake Chelan Clinic in May were 78 days due to vacations of the providers.
- **Quality Report & Patient Care Services – Carol Velasquez, CNO**
 - **Quality and Patient Safety –**
 - Four units for transfusion were typed and cross-matched, and all four units were transfused to one patient, for a C:T ration of 1:1 which met criteria for the procedure.
 - For the months of February and March, there were three cases that did not have updated H&Ps, which were reviewed at the Medical Staff meeting on June 9th.
 - June is patient safety month.
 - **Patient Care Services –**
 - The caregivers celebrated CNA week that ends June 17th with a potluck yesterday, June 15th.
 - We have a lease agreement with Olympus for upgraded endoscopic equipment for colonoscopies, which includes autoclavable camera heads. This lease agreement provides training onsite.
 - We have upgraded our towers for orthopedic surgery with a new Stryker lease.

- **Chief Financial Officer – Vickie Bodle, CFO**
 - May financial statements closed with net income at (\$60,853) for the month and (\$12,065) for the year.
 - The 2014 Medicare Interim Cost Report closed with an anticipated payment from Medicare to LCCH of \$835,000.
 - AR days 58.8 with hospital and clinic.

- **Chief Executive Officer –Kevin Abel, CEO**
 - **Bathroom Remodel** – We are adding showers with improved disabled access in two bathrooms on the third floor.
 - **EMS Awards** – The Greater Wenatchee Emergency Services Council held their annual awards presentation on May 26th. Raynor Baker won EMT of the Year award and Rinita Cook won EMS Educator of the Year.
 - **Accountable Communities of Health Board** – Kevin has been nominated to the North Central Accountable Communities of Health (ACH) board. Okanogan, Chelan, Douglas and Grant counties have joined together to form the North Central ACH. This will have an impact on the use of Medicaid by state Health Care Authority.

OLD & NEW BUSINESS

- **Action Items:** It was m/s/c to approve

A. Action Items:

I. Credentialing:

Brian Barstad, M.D.	Re-appointment	Active - Emergency Dept.
Sheila D. Smith, M.D.	Re-appointment	Consulting – Neurology
Alan J. Velander, M.D.	Re-appointment	Consulting - Neurology
Melissa M. Debayle, M.D.	Provisional	Consulting – Radiology
Frank J. Welte, M.D.	Provisional	Consulting – Radiology
Martin R Box	MD Student	Preceptor – Tobe Harberd, M.D.
Kate M. Osborne	PA Student	Preceptor – Kathy Hevly, ARNP

Credentialing Motion P. Gleasman / Second: F. Miller & approved by Board of Commissioners

MEETING ADJOURNED:

- Meeting adjourned @ 2:30 P.M.

Submitted:

Shelley L. Gleasman
Board Secretary

7/28/2015
Date

Attest:

Kevin Abel
Kevin Abel, CEO

7/28/15
Date