

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

**August 25, 2015 – LCCH BOARD ROOM
1:30 PM – 2:53 PM**

MEETING MINUTES

CALL TO ORDER

Tom Warren called the meeting to order at 1:30 p.m.

Members Present:

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

Others in Attendance:

Kevin Abel, CEO
Vickie Bodle, CFO
Brad Hankins, COO
Lee Tinsley, Utilization Review
Francisca Ferrell, Community Member

Mary Murphy, Community Member
DeLynn Barnett, Human Resources Director
Carol Velasquez, CNO
Karl Jonasson, EMS Director
Diane Witsil, Exec Assist to CEO

REVIEW OF MISSION:

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

OTHER BUSINESS:

- DeLynn Barnett reported to the Board that Senior Caregivers were physically on hand, day and night to support and engage with our caregivers on the weekend the Disaster Plan was executed due to the fires.
- The Foundation will be interviewing this week for the Executive Director position.

CONSENT AGENDA:

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

1. Board Minutes of July 28, 2015
2. Financial & Business Office Report
3. Vouchers/Warrants; \$765,788.61, in payroll direct deposits; \$713,776.18. Write offs: \$110,396.58 in bad debt, Charity Care: \$21,071.56, Bankruptcy: \$154.61, with combined total of \$131,622.75.
4. Policies and Procedures
 - Audiology Services
 - Nursing Services-Scheduling Swing Bed
 - Per Diem Relief Staff Requirements
 - LCC Radiology Services
 - LCC Appointment Status
 - LCC Follow Up Appointments
 - Accounting for Cash-Nutritional Services
 - Youth Referral to Child Welfare Services
 - Extravasation of Radiographic Contrast Material Policy
 - LCC Operations Protocol for Mid-Level Providers
 - Community Blood Pressure Checks
 - IV Therapy Policy
 - Sanctuary Philosophy of Treatment
 - LCC Laboratory Services
 - Lab Results, Diagnostic Consultation
 - LCC Patient Account Assignment
 - RHC Patient's Rights & Responsibilities

Consent Agenda Motion: M. Signorelli / Second: F. Miller & approved by Board of Commissioners.

- **Fire Update – Kevin Abel**
LCCH activated the disaster plan Friday afternoon, August 14, 2015, due to four fires in the Chelan Valley. We were on emergency power for about a day, plumbing issues arose due to a city pump being down and both the standard and emergency land lines for phones were down. The hospital remained open and the caregiver team managed the incident professionally. Vickie Bodle is presently working with the insurance companies for compensation for the emergency plan activation.
- **2ND Quarter Safety Dashboard – DeLynn Barnett**
LCCH is green on all the safety indicators with the exception of needle stick.
- **LCCH Facilities Steering Committee Update – Kevin Abel**
The first meeting of the LCCH Facilities Steering Committee was August 24th and we will continue to meet until the November 12th LCCH Board Retreat when a recommendation to the commission will be delivered. Members of the steering committee are Kevin A., Phyllis G., Mary S., Brad H., Carol V., Vickie B., Ken P., Dr. Witt and Barry Leahy.
- **2016 Budget Calendar – Vickie Bodle**
Vickie distributed a timeline for our Senior Team to work on the 2016 capital and operating budgets. The Senior Team will have a preliminary capital budget by Sept 4th with the final figures to be presented at the October 27th board meeting.
- **WSHA Legislative Summary – Kevin Abel**
The WSHA Legislative Summary booklet was distributed to all board members. This booklet concentrated on four areas of healthcare, with the issue of Mental Health as a top priority, followed by Care Transformation, Hospital Safety Net Assessment and Legislative Policies that affect our state health system.

STATE OF THE HOSPITAL REPORTS

- **Operating Report – Brad Hankins, COO**
 - Construction continues on the server room.
 - The seal coating project for the hospital was completed.
 - The generator used during the fire was running at 20% capacity. It was discovered that more outlets designated to the generator needed to be added.
 - Lab hours at the clinic have been extended to 6:00 p.m.
 - Contract talks continue with the general surgeon, Tabettha Hale Bradley, M.D.
- **Quality Report & Patient Care Services – Vernita Nolan, RN – Quality**
 - **Quality and Patient Safety –**
 - There was one reported medication error with no adverse effect to the patient.
 - Restraints were used one time in the ED when other interventions failed.
 - There were 11 patients that left the Emergency Department without being seen; five occurred over 4th of July weekend, when we had 39 patients on Saturday and 29 patients on Sunday.
 - For transfusion review, nine units were typed and cross-matched, and two units were transfused, for a C:T ratio of 4.5:1. The transfusions met criteria for indications for the transfusion.
 - **Patient Care Services –**
 - Our percentage of BSN's has grown from 9% in 2011 to 40% as of this week, with four more nurses in process of earning their BSN. We continue to strive for the goal set by the IOM, which is 80% BSN or greater prepared nurses by 2020.
 - Lab volumes have grown significantly with the addition of the clinic. We added Hemoglobin A1Cs and have seen significant usage of that test.

- Kudos to caregivers on Med-Surg, OB, Perioperative Services, the Emergency Department, Sanctuary, Lab, Radiology, and Pharmacy, for additional hours, and excellent work to provide outstanding patient care during the peak of the fire activity in our community.
- Many thanks to our support departments, Facilities, Nutritional Services, IT, and Material to meet the needs of patient care and caregivers during this challenging period.
- **Chief Financial Officer – Vickie Bodle, CFO**
 - July financial statements closed with net income at \$95,252 for the month and \$274,159 for the year.
 - AR days 60.5 with hospital and clinic.
- **Chief Executive Officer –Kevin Abel, CEO**
 - **NCB Line of Credit** - We will be maintaining the \$1,000,000 line of credit with North Cascades Bank that was approved by the board last year due to the upcoming ICD-10 implementation that may impact accounts receivable.
 - **Rehabilitation Carpet** – Due to the fires, the installation of the carpet on August 15th had been cancelled. Installation is being rescheduled for September.
 - **Most Wired** - Lake Chelan Community Hospital and Clinics won the American Hospital Association Most Wired Award and is listed in the national AHA magazine.
 - **CRNA Recruiting** – The interview committee for the anesthetist is down to three candidates all with excellent experience. A job offer to the top applicant will be made this week.
 - **Insurance Broker** – We completed the evaluation of different insurance brokers as discussed during the July board meeting. The brokers that submitted bids included K&P, Alliant, AON, and Parker Smith and Feek. We selected Alliant as the new broker.
 - **CMO** – We have a provider who has open time on his contract and experience in leadership with providers, which we are negotiating with to become a Medical Director..

OLD & NEW BUSINESS

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

A. Action Items:

I. Credentialing:

Christopher E. Rickman, M.D.	Provisional Appt.	Tele-Radiology V-RAD
Joshua D. Morais, M.D.	Provisional Appt.	Tele-Radiology V-RAD
Christopher J. Hurt, M.D.	Provisional Appt.	Tele-Radiology V-RAD
Donald T.M., Nicell, MD	Provisional Appt.	Tele-Radiology V-RAD
Patricia A. Lowry, M.D.	Provisional Appt.	Tele-Radiology V-RAD
Steven A. Archibald, M.D.	Provisional Appt.	Tele-Radiology V-RAD
Helmuth F. Vollger, M.D.	Provisional Appt.	Tele-Radiology V-RAD
John W. Laughlin, PA-C	Reappointment	Behavioral Health

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

MEETING ADJOURNED:

- Meeting adjourned @ 2:53 P.M.

Submitted:

Phyllis L. Gleasman

 Board Secretary

9/22/2015

 Date

Attest:

Kevin Abel

 Kevin Abel, CEO

9/22/15

 Date