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

November 15, 2011 – LCCH BOARD ROOM 1:31 PM – 3:04 PM

MEETING MINUTES

CALL TO ORDER

Tom Warren, Chairman, called meeting to order at 1:31 P.M.

Members Present:

Tom Warren, Chairman

Phyllis Gleasman, Commissioner

Denny Evans, Secretary

Fred Miller, Commissioner

Members Not Present:

Jim Wall, Vice Chairman

Others in Attendance:

Kevin Abel, CEO

Celeste Thomas, Marketing/PR

Carol Velasquez, CNO

Mary Signorelli, Community Member

Jerri Dion, Business Office Manager Agustin Benegas, Quality Coordinator Terry Johnson, Environmental of Care Mgr Karl Jonasson, EMS

Emmit Aston, Foundation Representative Sue Young, Sterile Processing

Judy Moser, Credit Services DeLynn Cook, Director of Human Resources

REVIEW OF MISSION:

Our Business is Healthcare. Our Mission is to provide healing and wellness opportunities with care, compassion and dignity.

OTHER BUSINESS:

- Congratulations to Mary Signorelli who will be our new board member in January.
- Emmit Aston reported that the Foundation received a dividend for \$40,000 for the Bragg Account from an investment firm. This will be used for future scholarships.

CONSENT AGENDA:

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

- 1. Board Minutes of October 25, 2012.
- 2. Financial & Business Office Report
- 3. Vouchers/Warrants: \$625,768.59 in payroll direct deposits; \$503,179.05
- 4. Write-Offs: \$56,433.12 in bad debts for referral to collections agency(ies) per LCCH policy, Charity Care: \$59,206.64 Bankruptcy: \$345.45, with combined total of \$115,985.21
- 5. Policy & Procedure: 35.42 Colonoscopy Pricing Laboratory Addendum

SPECIAL REPORTS:

Replacement Hospital Update:

- The plans for the replacement hospital were displayed. We are still trying to get the square footage down to 70,000 sq ft.
- Suggestions:
- Canopies outside of materials delivery & ER
- Move conference rooms towards café.
- Review Home Health location.

Safety Dashboard

- For the third quarter of 2011 we had one (1) safety dashboard variance. The variance is related to one incident where a caregiver did not report a repetitive motion injury until 23 days post injury which brought our timeliness to report to 78% vs. our goal of 85%. We are above goals set in all other categories.
- Through the third quarter we have had nine claims filed and 23 incidents reported. These nine claims area slightly below our historical average.

STATE OF THE HOSPITAL REPORTS

Quality Report -Brad Hankins, COO

- In October, there were two patient falls in Med Surg, neither resulted in patient injury. Med Surg also had two medication errors that reached the patients, neither caused patient harm.
- The ER and the Sanctuary had no quality variances.
- We have had 20 patient falls, and 22 reported medical errors organization wide.
- Fourteen QMMs were submitted for October and all quality and/or safety patient complaints were related to payment issues.

Patient Care Services - Carol Velasquez, CNO

- Patient volumes increased in October compared to September. We had 12 births in October, as compared to 3 in September. YTD October, Sanctuary days are 3% lower, medical days are 31% higher, and swing bed days are 2½ time higher than YTD 2010. Surgeries and procedures are 5.6% higher, and births are 13% lower. Physical Therapy remains over 50% higher in PT units, and RT is at 94% more treatments than 2010 YTD. Wound care has provided 324 visits so far this year.
- We continue recruiting for the Occupational Therapist position. The OB team has developed an interim staffing plan to provide coverage for the night shift OB RN vacancy.
- We have given over 600 doses of influenza vaccine and continue to work on increasing the hospital caregiver vaccination rate.
- Our nursing caregivers' emphasis is continuing to focus on increasing patient safety by applying technology correctly and to report when systems do not work as intended.
- A meeting with Dr. Joshua Schkrohowsky was held last week to discuss his capital, minor equipment and supply needs and to develop a strategy for working with the vendors to assure collaboration and consistency.

Chief Medical Officer -John Kremer, MD

- Dr. Kremer shared that we are still on track with Dr. Dodson coming in May, and we are still currently looking for another Family Practice, MD to cover in ER.
- He reported on his seminar regarding the use of ultrasound to place stents.

Chief Financial Officer – Robert Wiegenstein, CFO

- October 2011 closed with net income at \$39,549 for the month under budget by \$13,169.
- Our YTD net income for the ten months was \$684,556 compared to a budget of \$766,441 under budget by \$81,885.
- The Net Operating Revenue (replacing Gross Patient Revenue) reflects actual revenue received of \$1,569,603, which is \$45,734 over budget due to Respiratory Therapy and Swing Bed volumes.

Chief Executive Officer - Kevin Abel, CEO

- The CEO's from the North Central Washington Council are expressing real concerns with the purposed State funding cutbacks in the rural communities.
- Aging and Adult Care of Central Washington has provided the LCCH social worker with a contact to facilitate caregiver support meetings.
- Agustin attended the national Planetree conference and will educate staff on the best practices used by other facilities.
- LCCH ordered three replacement hospital beds using funds from the AZ Wells donation along with capital equipment funds as designated in the capital plan.
- The Lake Chelan Community Apartments account has approximately \$20,000 set aside for capital improvements. LCCH is filling out the paperwork required by HUD to determine if the funds can be used to offset some of the costs of the replacement roof.
- The Washington State Auditor's Office has completed the 2010 financial audit. LCCH received a clean (unqualified) audit opinion.
- The Department of Retirement Systems suspended further action on the EMT/LEOFF retirement plan. Three hospital based EMS services with the backing of the Association of Washington Public Hospital Districts are taking the lead in a petition with the Department of Retirement Systems. LCCH will file a petition with the State but will not be one of the lead organizations in the review of this issue.
- There have been some changes in the Sanctuary. Jane Jedwabny will remain Director of the Sanctuary and will report to Dr. Pawlowicz. Dr. Pawlowicz has been named, "Chief of Behavioral Health Services" will report to the CEO.

OLD AND NEW BUSINESS

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

#489 Legal Holidays 2012

#490 Board of Commissioners Meeting Dates 2012

Credentialing the following Providers.

David F. Tague, MD Provisional Virtual Radiology
Jonathan W. Bold MD Provisional Virtual Radiology
Marcus W. Parker, MD Provisional Virtual Radiology
Virtual Radiology

MEETING ADJOURNED:

Meeting adjourned @ 3:04 P.M.

Board Secretary

Date

Attest:

| Con A |
| Kevin Abel, CEO |
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| Ca