



LCCH STRATEGIC BOARD MEETING

Lakeside Lodge

November 18, 2014

9:49-2:21

CALL TO ORDER

Tom Warren called the meeting to order at 9:49 A.M.

Members Present:

Tom Warren, Chairman
Mary Signorelli, Vice Chairman
Phyllis Gleasman, Secretary

Members Present by Phone:

Jim Wall, Commissioner

Members Not Present: Fred Miller, Commissioner

Others in Attendance:

Kevin Abel, CEO
Vickie Bodle, CFO
DeLynn Cook, HR & Risk Management
Brad Hankins – COO
Carol Velasquez, CNO
Mike Mackey, Port of Chelan, Commissioner

Katherine Jerald – Foundation Executive
Agustin Benegas-QA/RM Assistant/Planetree
Ross Hurd, CIO
Celeste Thomas, Marketing/PR
Les Cooper, Lake Chelan Community Foundation
Richard Uhlhorn, GoLakeChelan.com

Public Comment:

- Linda Sydlowski-Tesch suggested being a part of a community committee for hospital issues.
- No other comments were received at this time from the community members present.

Introduction:

- Kevin reviewed the overall agenda with attendees and introduced to the community at large that the strategic meeting is an annual event usually in July / August, but with the election it was moved to November.

Facilities / Infrastructure

- Election Discussion: Kevin reviewed the election results of the two levies for remodel of the hospital and the two levies in 2012 and 2014 for a replacement facility.
- Recent election was 58%, 2146 votes in favor of new facility and 42%, 1568 not in favor per the November 12, 2014 update.
- Voter turnout at 66% in Chelan County.
- Kevin reviewed LCCH debt capacity provided by the accounting firm WIPFLI.
- Research options:
 - Build Clinic at the proposed site to free up space at the hospital.

- Research other entities owning the building at our site, and the hospital lease.
- Research merging with a larger healthcare organization.
- Research procurement of land at existing hospital site.
- Replacement Hospital election.
- USDA – HUD 242 option is limited.
- Conclusion of options: Take one year to research other options available.

Community Relations / Wellness

- Foundation: Katherine introduced the Foundations goals.
 - Support and pass hospital levy
 - Review & revise LCCH financial policies
 - Increase financial support across programs
 - Raise \$1.5 M to support hospital construction, equipment, & programing
 - Increase the capacity of the Foundation to support LCCH by raising funds through grant opportunities.
 - Increase awareness of LCCH Foundation as a value-added community entity.
- Agustin reported on Planetree and Wellness.
 - Chaplain program is going strong and is received well within the staff and patients.
 - Recruitment of volunteers to work in the hospital, which would also establish a good relationship within the community.
 - Kids Wellness / Get Fit – Maxx the mascot to engage with kids about fitness and better life choices.
 - Parent and kids exercise program in the evening at the community gym.
 - Thursday evening at the library for health, fitness, and eating right.
 - Reaching out to the Latino community.
- The community health needs assessment was completed in collaboration with community partners. The success of the program comes down to access and affordability.
- The board will examine whether to continue with the Planetree program or move to an internal healing healthcare model.

Finance and Regulatory

- Ross shared with us the “meaningful use” standards defined by the Centers of Medicare and Medicaid Services (CMS) Incentive Programs that governs the use of electronic health records and allows eligible providers and hospitals to earn incentive payment by meeting specific criteria. LCCH met the 1st Stage of meaningful use (MU). Stage 2 has been attested, the objectives have been met and approved with payment within the Medicare segment and IT is actively working with the Medicaid portion of Stage 2.
 - Educate providers to their objective goals.
 - MU reports with the eligible providers is going according to plan and doing well.
 - Continue the development of a patient portal.
 - Work with more facilities to get the correct direct messaging addresses so we can share electronic transition of care of patient records with more physicians across the state.
 - Continue to closely monitor Stage 2 objectives through webcasts, discussions and conferences
- 2014 excess margin was at 1.52% which within the norm of CAH in the state of Washington of 1.55%; current ratio was 2.77% with CAH-Washington @ 2.50%; days cash-on-hand were at 44.66; AR days were 55.94 above the HFMA stats.

- The Board agreed to maintain the finance goals.

Medical Staff/Physician Survey

- Carol discussed feedback from the physician survey.
- Primary Provider goals for 2014:
 - Adapt and implement team based care.
 - Adapt and implement open access scheduling
 - A fully functioning and reconciled EMR.
- Specialists, except Dr. Witt in surgical procedures have shown growth in their practices over 2014..
- Major Specialist goals:
 - Orthopedic mid-level to assist Dr. Schkrohowsky.
 - Expansion into sports medicine in our orthopedic service line.
 - Increased referrals and utilization of general surgery and gynecology.
- Dr. Jones performed approximately 33 cases in 2014, and we are actively looking at Dr. Kevin Morris, DPM coming in January for podiatry services.

Staff Development

- Dee went over the caregiver survey which was overall very favorable. Each manager will be given their results for their department so they can focus on areas of opportunity
- Leadership classes thru “Manager on the Move” will take place every other month to establish communication, leadership, team building, and empowerment for the managers.

Quality & Safety

- Dee introduced the dashboard metrics of being self-insured.
 - There are 83 hospitals currently reporting to the Washington Trust.
 - In timeliness of claims filed within the 12 day goal, we are at 91%
 - Our frequency rate currently average 8 employees out of 100 per quarter
 - Our needle stick frequency rate is averaging 1.44 per quarter
 - LCCH has had 3 people on time loss to date and no severity events to date
- Carol presented the statistics of our patient care, quality & safety report:
 - Monthly Hospital Infection Control & Safety Rounds: Demonstrates an overall improvement with fewer violations. We still have challenges with lack space & items stored in hallways.
 - Reporting & Benchmarking: HCAHPS reports from HealthStream® have demonstrated improvement in patient satisfaction overall. We plan to expand survey scope to include Out-Patient Services and Emergency Department 2015.
 - Patient & Family Centered Care: Nurse Practice Council implementing its first initiative, i.e., structured Hourly Rounding, with goals that improved patient and family satisfaction, caregiver satisfaction, and patient safety. Culture of Safety will be a major focus for the coming year.

Regional Issues

- Washington State Health Care Authority believes the health system transformation in Washington State depends on effectively coordinating and integrating the health care delivery system with community services, social services, and public health by establishing a pathway to define a regional structure to support and increase accountability for better health, better care and reduced costs. Along with Department of Social and Health Services (DSHS) have jointly

decided on common Regional Services Areas (RSAs) for Medicaid purchasing of physical and behavioral health care beginning in 2016.

- North Central Washington NCW Behavioral Health site is recommended to be in Wenatchee
- Support the relationship between Behavioral Health with Family Medicine
- Funding Diabetics prevention

Meeting Adjourned: 2:21 P.M.

Submitted:

Phyllis L. Gleason
Board Secretary

12/16/14
Date

Attest:

Kevin Abel
Kevin Abel, CEO

12/16/14
Date