

**CHELAN COUNTY PUBLIC HOSPITAL DIST NO. 2
LAKE CHELAB COMMUNITY HOSPITAL
MEETING OF THE GOVENING BOARD**

**May 23, 2017 – LCCH BOARD ROOM
5:30 PM – 7:56 PM**

MEETING MINUTES

CALL TO ORDER

Phyllis Gleasman called the meeting to order at 5:30 P.M.

Members Present:

Phyllis Gleasman, Vice Chair
Tom Warren, Commissioner
Fred Miller, Commissioner
Mary Murphy, Commissioner

Members Not Present:

Mary Signorelli, Chair

Others in Attendance:

Kevin Abel, CEO
Vickie Bodle CFO
Brad Hankins, COO
See list attached

Carol Velasquez, CNO
DeLynn Barnett, Director of HR
Ty Witt, M.D., CMO

REVIEW OF MISSION:

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

OTHER BUSINESS:

– COMMUNITY CONSENT AGENDA:

1. Board Minutes of April 25, 2017
2. Financial & Business Office Report
3. Vouchers/Warrants: \$715,377.84, payroll direct deposits: \$867,568.67. Write offs: Bad Debt-Hospital \$169,018.45, Bad Debt-Clinic \$3,566.81; Charity Care-Hospital \$23,564.60, Charity Care-Clinic \$0.00; Bankruptcy \$0.00: with combined total of \$196,149.86.
4. Policies & Procedures
 - Diversion Policy
 - Window Cleaning
 - Restraints Policy (CAH)
 - MS Personal Appearance Policy
 - Nutritional Services Hand Washing
 - Charity Care Program
 - Information Access Management §164.308(a)(4)(ii)(B)
 - OR Surgery in Progress – Internal Disaster Plan
 - Consideration of Trial of Labor after Cesarean (TOLAC)
 - Management & Use of Disposal of Multiple Dose Vials Policy (CAH)
 - Communications – Discharge
 - Mammography Procedure
 - OR Surgery in Progress-Internal Disaster Plan
 - IQCP Sure-Vue Serum Pregnancy
 - Sanctuary Suicide Risk Guidelines

Consent Agenda Motion made by Tom Warren to approve the Consent Agenda with the removal of the Sanctuary Suicide Risk Guidelines to have corrected and approve at June Board Meeting. & approved by Board of Commissioners.

SPECIAL REPORTS:

– General Contractor / Construction Manager

- Our architectural firm and Barry Leahy recommended the board use the General Contractor / Construction Manager (GC/CM) alternative public works delivery method for the replacement hospital project. Dick Bratton introduced himself and explained the GC/CM role in construction. The RCWs allow for the GC/CM approach to public work projects. A GC/CM is procured through a multi-part selection process that includes consideration and evaluation of the GC/CM bidder qualifications and experience together with cost. The GC/CM is selected earlier in design process and would allow LCCHC to work with the general contractor to evaluate the project during the design phase and then provide construction management services. The contract includes support for Project Review Committee application and presentation, GC/CM contract, GC/CM solicitation, RFP development, GC/CM selection process, final proposal, fee review, preconstruction work plan, and final GC/CM selection.

Mary Murphy made a motion to approve the GC/CM process followed by approval by the Board of Commissioners.

– Caravan Health ACO – Sue Dietz

- Sue Dietz presented an option to join the Caravan Health / National Rural Accountable Care Consortium Accountable Care Organization (ACO). LCCHC currently has a choice between joining an ACO, and participating in the MIPS program under MACRA for Medicare.
- Rural hospitals in Washington State that have already joined include Tri-State Memorial Hospital, Columbia County Health System, Coulee Medical Center, and Sunnyside Community Hospital and Clinics. Several other rural hospitals are considering joining this year. Joining the ACO now would allow the clinic to work on the ACO simultaneously with the Medicaid 1115 Transformation project that requires some of the same reporting and process redesign.

Motion made by Tom Warren to approve joining the ACO, followed by the approval by Board of Commissioners.

– Lake Chelan Community Hospital Foundation – Arlene Abbott

- The Foundation has a plan in place to raise two million dollars in donations for the replacement hospital. The Foundation is waiting for the Legislature to sign off on a budget that would allow the Foundation to seek matching donation grants. The timeline for the fund raising is three years.

– LCCHC 2016 Compilation & Revenue / Expense Review – Kevin Abel, CEO

- The compilation for 2016 closed with a net income of \$105,502. WIPFLi and the finance team completed the draft compilation. A finance subcommittee comprising of Fred Miller and Tom Warren will be formed to partake in a more detailed discussion on the revenue and expenses.

– 1115 Medicaid Transformation Project –

- The North Central Washington Accountable Community of Health Board of Directors designated six projects that they will implement through the Medicaid Transformation Demonstration. The six projects are; bi-directional integration of physical and behavioral health through care transformation, community-based care coordination, transitional care, diversion interventions, addressing the opioid use public health crisis, and the chronic disease prevent and control.

STATE OF THE HOSPITAL REPORTS

– Operations & Outpatient – Brad Hankins, COO

– Operations:

- Tyco/Simplex/Grinnel installed sprinkler heads in areas the Fire Marshall found on the last inspection. We have applied for an exemption for the one area.

- The hot water heater for the hospital had temperature control issues. The thermostat and the main controller were both replaced.
- The #2 compressor went out in the new chiller. We are in the process of changing out the compressor and are waiting for filters and supplies to start the project.
- We have to replace a compressor on one of the five ton air-conditioners on the roof of the Emergency Room area. We are waiting for parts and supplies for this project.
- The lab will be receiving their new hematology machine. The new machine uses four times as much power as the old machine. We are in the process of moving equipment to ensure there is enough power source.
- **Outpatient:**
 - Our primary care/specialty medical no-show rate for April was 4.8%.
 - Third available are currently at 10 days.
 - We performed 59 OR procedures and surgeries in March 2017 compared to 59 procedures in March 2016. Through the end of April 2017, we performed 246 procedures and surgeries compared to 203 for the same time period in 2016
 - Work continues on opioid prescribing, depression screenings, and analytics/quality reporting. We are moving forward with an experimental mini-pod with Dr. Guffey's and Dr. Ellingson's practices.
 - Orthopedic encounters continue to increase with 930 encounters for the year through April 2017 compared to 679 for the same time period in 2016.
 - General surgery encounters are now averaging 40 per month and we are currently averaging 11 general surgeries per month.
- **Quality & Patient Safety – Kevin Abel, CEO**
 - **Quality :**
 - Several experienced nurse leaders have applied for the Chief Nursing Officer position. The first interview were conducted by phone conference in April and early May. Three top candidates were chosen for a second interview during the last two weeks of May.
- **Medical Staff Report – Ty Witt, M.D., CMO**
 - Dr. Witt referred his review to the Medical Staff minutes enclosed in the packets.
- **Chief Financial Officer – Vickie Bodle, CFO**
 - April's financial statements closed with net income of negative (\$280,454) for the month. Areas of revenue difference include; Medical Observation, Emergency Department, Respiratory Therapy, and EMS. Increased expense of \$22,100 for the locums expense and recruitment with the new physician assistant.
 - Combined AR days for the hospital and clinic for the month was at 71.4 days.
 - The insurance company will be sending a check to LCCHC in the amount of \$77,000 for interruption of service during the 2015 fire.
- **Chief Executive Officer – Kevin Abel, CEO**
 - IT conducted the migration from Ipswich as our email provider to Microsoft 360 during the month of May. Ipswich was no longer compatible with the newer versions of the Microsoft operating systems.
 - Karl who has been on FMLA for the past twelve weeks will be formally leaving the organization after thirty years of service. The team is working on a retirement event. The EMS position has been opened and we will begin the interview process.
 - WIPFLi has submitted the necessary documentation to determine eligibility for the USDA loan, submitted the Preliminary Architectural Report, and other miscellaneous forms. They are

preparing the Environmental Assessment required by USDA which is different than the Phase 1 and Phase 2 Environmental study done on the site. The process will require WIPFLi/LCCHC to send letters to various agencies for comment on the site. This comment period can take up to 30-60 days depending on USDA's review of the site drawings and our preliminary architectural report.

- Collins Woerman is providing support work for the USDA funding and is waiting on the information on the funding dates to complete the initial project timeline.

OLD & NEW BUSINESS:

- **Action Items:**

A. Credentialing:

Vanessa Willey, CRNA		Addition of Privileges
Lorena Boyd, ARNP	CVCH	Allied Privileges
Aspan Ohson, M.D.	VRAD	Consulting – Tele-Radiology
Ted Dodge, M.D.	Confluence Health	Consulting – Cardiology
Matthew Newman, M.D.	Confluence Health	Consulting – Cardiology
Geoffrey Harms, M.D.	Confluence Health	Consulting – Cardiology
Holly Hensley, M.D.	Swedish Med Ctr.	Consulting – Tele Stroke
Tom Kushner, D.O.	Swedish Med Ctr.	Consulting – Tele Stroke

A motion from Tom Warren moved that the above applicants were reviewed and had met the requirements and recommendation for clinical privileges and Medical Staff appointment. This was followed by the Board of Commissioners.

BOARD EDUCATION:

- NCWACH Selected Projects was delayed until next month.

MEETING ADJOURNED:

- Meeting adjourned @ 7.56P.M.

Submitted:



Board Secretary

Date

6/20/17

Attest:



Kevin Abel, CEO

Date

6-20-2017