

**CHELAN COUNTY PUBLIC HOSPITAL DIST NO. 2
LAKE CHELAN COMMUNITY HOSPITAL & CLINICS
MEETING OF THE GOVERNING BOARD**

**August 28, 2018 – LCCH BOARD ROOM
1:30 PM – 3:42 PM**

MEETING MINUTES

CALL TO ORDER

Mary Signorelli called the meeting to order at 1:30 P.M.

Members Present:

Mary Signorelli, Chair
Phyllis Gleasman, Vice Chair
Fred Miller, Commissioner
Mary Murphy, Commioner
Jordana LaPorte, Commissioner

Others in Attendance:

Steve Patonai, Interim CEO	Rich Ulhorne, Media
Vickie Bodle, CFO	Kim Reeves, Foundation Dir.
Donna Strand, CNO	Christy Nielsen, Pharmacist
Brad Hankins, COO	Celeste Thomas, Marketing
DeLynn Barnett, Director of HR	Lee Tinsley, UR
Tom Anglin, Foundation Board Chair	Jerry Isenhardt, Media
Courtney Wallace, Patient Safety/Quality Dir.	Mary Pat Scofield, Community Member
Sarah Cushing, Community Member	Barry Leahy, Consultant

REVIEW OF MISSION:

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

PUBLIC COMMENTS:

- Kim Dunbar, Foundation Executive Director announced that the MJ Murdock Trust awarded a \$300,000 grant towards new Radiology equipment for the new hospital. The Foundations focus will be putting together a planning committee to focus on raising additional monies for equipment and naming opportunities.
- Tom Anglin, Foundation Board Chair thanked Kim, Arlene, Vickie, and Donna for all their hard work to make the Grant possible.

OTHER BUSINESS:

CONSENT AGENDA:

- A. Regular Board Minutes, July 24, 2018
- B. Special Meeting July 13, 2018.
Special Meeting July 19, 2018
Special Meeting July 20, 2018
Special Meeting August 2, 2018
Special Meeting August 6, 2018
Special Meeting August 9, 2018
Special Meeting August 13, 2018
Special Meeting August 16, 2018
- C. Vouchers/Warrants

A motion was made by P. Gleasman to approve the Consent Agenda with the exclusion of the Regular Board Minutes from July 24th, as requested by Mary Murphy as she was not present for the meeting. It was seconded by F. Miller and approved by Board of Commissioners.

A motion was then made by Fred Miller to approve the Regular Board Minutes from July 24, 2018, as was seconded by Phyllis Gleasman and approved by the Board of Commissioners with Mary Murphy abstaining from the motion.

EXECUTIVE SESSION – The Board entered into Executive Session at 1:37pm to discuss BE Smith/CEO Recruitment. Board returned to Regular session at 2:25pm.

CHAIR REPORT – Mary Signorelli: After further evaluation of the two candidates the Board made a decision to continue recruitment efforts focusing on additional qualifications. A screening committee will be put together that consists of Steve Patonai, Mary Murphy and Phyllis Gleasman.

A motion was then made by Jordana LaPorte to approve the screening committee and was seconded by Mary Murphy and approved by the Board of Commissioners.

OLD BUSINESS:

– **CEO Recruitment Update – Mary Signorelli, Board Chair**

- Board Retreat – Mary Signorelli turned the meeting over to Steve to discuss the Retreat. Steve shared the six Pillars of Performance: People; Service; Quality & Safety; Growth & Innovation; Finance & Community. He stated that the Leaders will be meeting to develop goals within each of the Pillars. Phyllis Gleasman would like to add Proactive to Identifying Needs under Growth & Innovation. Mary Signorelli would like to add Semi-Annual State of Hospital Community Meetings under People and/or Community. The Board will be given updates quarterly.

NEW BUSINESS:

- Board Committees – Mary Signorelli, Board Chair: The current standing Board Committees are Quality, Facilities, Finance, Credentialing. The Board would like to add Affiliation/Partnering and Community. It is requested that Charters be made for the Finance, Affiliation/Partnering, and Community committees. Mary Signorelli would like to be on the new committee and requested that the CEO be as well.
- Board Resolution #590 Governing Board Compensation: The increased in compensation is mandated by law.
A motion was then made by Mary Murphy to approve Resolution #590 and was seconded by Fred Miller and approved by the Board of Commissioners.
- Hospital Construction Project/USDA update – Steve Patonai: We were told last week that our USDA application was going to a funding committee this week and received an email today that stated it will be in front of the funding committee mid-September. A call has been made to the USDA office to discuss and we are currently waiting for a call back.
- Barry Leahy stated that we picked a contractor last September for a 44M project with 74,000 square feet. There has been no movement with the contractor as we are waiting approval on the USDA loan. Once the loan has been approved and the contractors meet to finish the design, a functional plan will need to be approved by the Department of Health which could take up to a year. He stated we have the best site for the new hospital and the best team. Due to the delay there will be a 3% increase on soft costs and 5%-6% increase on hard costs.

STATE OF THE HOSPITAL REPORTS

- **Medical Staff Report – Ty Witt, M.D., Medical Director** - Tabled until next Board meeting.

– **Credentialing –**

John Laughlin, PA	Re-appointment	Behavioral Health
Michael S. Bergman	Locums	Anesthesia
Rachel Lundgren, M.D.	Provisional	Vascular Studies

Justin Kappel, M.D.
Benjamin C. Fleming
Jay Berkes
Anita Powell
Catherine Clift

Resident
Medical Student
Medical Student
MEDEX
ARNP Student

Keri Bergeson, M.D.
Keri Bergeson, M.D.
Megan Guffey, M.D.
Kathy Hevly, ARNP/ Brian Barstad, M.D.
Brian Barstad, M.D.

Phyllis Gleasman made a motion to approve the credentialing as presented, seconded by Fred Miller and approved by the Board of Commissioners.

– CEO Report – Steve Patonai, Interim CEO

- The Memorandum of Understanding has been signed by CVCH and the University of Washington and will begin in the spring of 2020.

Chief Financial Officer – Vickie Bodle, CFO

- July's financial statements closed with net income of \$414,504 for the month.
- YTD's financial statements closed with net income of \$64,000.
- Combined AR days was at 63.

Chief Nursing Officer – Donna Strand, RN, CNO

- Lab positions continue to be difficult to fill. We are looking at having lab students through the fall to be able to fill our open position.
- We starting using the Charging & Scanning module in CPSI
- We are lined up to meet Meaningful Use 3 by October 2018
- Our OB volumes increased in July and August

– Chief Operations Officer – Brad Hankins, RN, COO

– Operations

- Construction is finished in Sanctuary showers
- Painting moves to MSU patient rooms
- We have intermittent issues with the elevator hydraulics and are waiting for a quote on a cooling system.
- 108 repair requests since last report

– Outpatient:

- Our primary care/specialty medical no-show rate for July was 5.8%
- Third availables are currently at 13.5 days
- Recruitment continues for three RN's and two MA's
- Ken Huang, ARNP moved from a locums Walk-in position to the mid-level on Dr. Harberd's team
- ACH change plane complete and submitted to NCACH July 31st and we received a 93%. Number two to NCACH. Next is to set measurements.
- Dr. Ellingson and Dr. Harberd's team each have mid-level. We go to 20 minute standardized visits September 4th and we are recruiting for support to fully integrate
- Coding improvement/training continues with good results

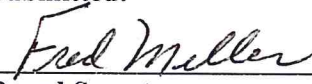
OTHER BUSINESS:

- Board of Commissioners would like dates for pre-budget workshops

MEETING ADJOURNED:

- Meeting adjourned @ 3:42 P.M.


Submitted:



Board Secretary
9/25/18.

Date

Attest:



CEO
9/25/18

Date