

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

**September 25, 2018 – LCCH BOARD ROOM  
1:30 PM – 4:30 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, Secretary  
Mary Murphy, Commissioner  
Jordana LaPorte, Commissioner

**Others in Attendance:**

Steve Patonai, Interim CEO  
Vickie Bodle, CFO  
Donna Strand, CNO  
Brad Hankins, Clinic Administrator  
DeLynn Barnett, Director of HR  
Ty Witt, M.D., CMO  
List of attendees

**REVIEW OF MISSION:**

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

**PUBLIC COMMENTS:**

- Marianne Patton – Very excited about the ten 10 year vision, the three year health plan, and the new hospital foot print. This will turn the community to trust LCCHC and open up two way communication with the community.

**OTHER BUSINESS:**

- **CONSENT AGENDA:**

- A. Regular Board Minutes, August 28, 2018
- B. Board Retreat Minutes, Aug 8 & 9<sup>th</sup>, 2018.
- C. Vouchers/Warrants; \$570,550.07, payroll direct deposits: \$968,151.40. Write offs: Bad Debt-Hospital \$49,860.16; Bad Debt-Clinic \$3,529.73; Charity Care-Hospital \$85,830.07, Charity Care-Clinic \$218.47; Bankruptcy \$0.00: with combined total of \$139,438.43.

*A motion was made by M. Murphy to approve the Consent Agenda seconded by P. Gleasman and approved by Board of Commissioners.*

**OLD BUSINESS:**

- **Board Committee Members – Mary Signorelli, Board Chair**
  - Quality – Mary Murphy
  - Facilities - Mary Signorelli & Phyllis Gleasman
  - Finance - Jordana LaPorte & Fred Miller
  - Credentialing will not be a standing committee. Phyllis Gleasman will still review.
  - Affiliation Partnership – Phyllis Gleasman
  - Community Outreach – Jordana LaPorte and Mary Murphy

- Charters for all committees need to be addressed.
- **CEO Recruitment Update – Mary Signorelli**
  - The Board will meet in Executive Session later in this meeting to review the applications.
  - An algorithm was made by the Screening Committee and presented to the Board today.
- **USDA Update – Mary Signorelli**
  - We are closer than we have ever been for the USDA loan.
  - The USDA funding committee in Washington DC’s feedback was very supportive and they had just a few questions regarding the loan.
  - All information needs to be in USDA’s system by their fiscal year end, which is September 30, 2018.
  - A Resolution needs to be signed to grant Steve Patonai, Interim CEO as an agent of the Board of Commissioners, to sign all forms, related documents and agreements with the USDA loan.

*A motion was made by P. Gleasman to approve Resolution #591 giving Steve Patonai, Interim CEO the authority to sign all documents and agreements related to the USDA loan, seconded by F. Miller and approved by the Board of Commissioners.*

**Resolution #591 USDA Signature Authorization.**

**NEW BUSINESS:**

- **Board Bylaws Renewal – Steve Patonai, Interim CEO**
  - Board Bylaws need to be reviewed and signed every two years.
  - Mary Murphy and Phyllis Gleasman wanted this tabled until next month to give them time to review.
- **2019 Business Plan Draft – Steve Patonai, Interim CEO**
  - **Pillar of Performance:**
    - People
      - Increase Staff engagement and skillsets & Increase Physician engagement and involvement – 10 Year Vision Elements
      - Increase Staff engagement and skillsets & Increase Provider Engagement and Involvement – 2019 Goal
    - Service
      - Top 10% Patient Satisfaction in all areas Press-Ganey RHQN (WA CAHs and Clinics) – 10 Year Vision Element
      - Achieve RHQN top 10% “Likelihood to recommend” by year-end. – 2019 Goal
    - Quality & Safety
      - To 10% of all MBQIP Quality Measures (WA CAHs), be in the top 3 Ranking in ACO Quality Performance and have zero Preventable Patient Harm – 10 Year Vision Elements
      - Zero CAUTIs, Aero Primary C-Sections , “3<sup>rd</sup> Availables” less than 6 days & Less than 90% annual Wellness visits – 2019 Goals
    - Growth & Innovation
      - Strong Primary Care with convenient access/availability & be proactive in identifying higher acuity services and additional Specialties. – 10 Year Vision Elements
      - Increase access and availability to Primary Care & Specialists & explore partnership opportunities with other Hospitals and Health Systems – 2019 Goals
    - Finance (still working on the finance area)
      - Top 25% Operating Margin (WA CAHs) – 10 Year Vision Elements
      - \$TBD Cash Reserves for Unforeseen Needs, Increase Operating Margin to >2% by year-end & increase Cash Reserves to > \$ TBD by year-end. – 2019 Goal
    - Community
      - Comprehensive Outreach, Wellness, Education – 10 Year Vision Elements
      - Operationalize a Community Communications Plan & Increase Community Wellness/Education Offerings – 2019 Goal
- **EMS Update – Ray Eickmeyer – EMS Director**

- People & Partnership
  - EMS Staff have 5 Full time, 8 part-time & 16 Paramedics of which 8 are full time status.
  - High EMS employee satisfaction + High Performance Team Members.
  - Community Partnerships – Public Health, Regional & Local councils, Healthcare Coalition, NCACH, CCRD5, CCSO, etc.
- Service
  - Service Volumes increased from 1993 ~ 630 to 2017 ~ 1400 services.
  - 70% of the Service were in Chelan, 23% in Mason & Stehekin, & 7% supporting other districts, i.e. Orondo, etc.
  - 66 of EMS calls are for patients' great than 50 years old.
  - 82% of the time EMS arrives on-scene within 5 minutes. (National average is 8 minutes).
  - 11% Fall Rate-Highest reason for 911 calls. EMS responded to 155 people who fell in 2017.
- Quality & Safety
  - Survival Rate from Out-of-Hospital Cardiac Arrest is a surrogate for Top performing EMS systems.
  - Goal Oriented Care-Evidence based measurements (KPI's & Checklists)
  - High Medical Oversight with cohesiveness with the healthcare system.
  - LCCH EMS saved 17 lives in last 10 years, National average is 2 lives.
  - Cumulative ROSC (Return of spontaneous circulation) rate for LCCH EMS is at 80%, Washington State is at 44% and National is at 6%.
  - Cumulative Utstein Save (set of guidelines for reporting cardiac arrests) rate for LCCHC was at 60%, Washington St was at 38%, and the national average was at 10%.
- Prevention/Preparedness
  - LCCH EMS are the leaders in CPR training and AED community program (PAD)
  - EMS are the leaders in prevention – injury and disease prevention events and leader in preparedness through the Healthcare Coalition.
- Growth/Innovation
  - One of only two EMS agencies in all of Eastern Washington that can transport a highly infectious patient.
  - Hazmat Rescue – only EMS agency that can rescue in the North Central Region.
  - Community Para medicine – New service to the community in which only 1% of the nation has access to.

**STATE OF THE HOSPITAL REPORTS**

**– Medical Staff Report – Ty Witt, M.D., Medical Director**

- Medical Staff Bylaws are in the review stage and will be presented at the next Medical Staff meeting.
- A Credentialing Committee has been set up which includes, the Chief of Staff, the Past Chief of Staff and the Chief Medical Officer. They meet on the first Friday of the month to review the credentialing charts.
- The coding at the clinic has been review, and it is more through which should increase reimbursements.
- **Credentialing –**

- Joshua J. Burnell, M.D.	Provisional	Family Medicine - CVCH
- Kenneth Huang, ARNP	Provisional	Family Medicine/Urgent Care
- Linda Hollier	Reappointment	Physical Therapy
- Karen Caldemeyer, M.D.	Reappointment	Tele-Radiology
- Richard Hodge, M.D.	Reappointment	Tele-Radiology
- Shelly Jain, M.D.	Reappointment	Tele-Radiology
- Jamie Savatore, D.O.	Reappointment	Tele-Radiology
- David Ellis, CRNA	Locums	Anesthesia
- Michael L. Rimpler, CRNA	Locums	Anesthesia
- Jenni Griffith	MEDEX Student	Dr. Barstad/Hevly, ARNP
- Stephen Richardson	Medical Student	Dr. Bergeson
- John Horlebein, DPM	Provisional	Podiatrist

- (Approved once office location and office phone has been established, and approved with the recommendations of the Credentialing Committee and Medical Staff.)

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

*A motion was made by Phyllis Gleasman to include the credentialing process in the consent agenda, seconded by Fred Miller and approved by the Board of Commissioners.*

**- CEO Report – Steve Patonai, Interim CEO**

- Becker’s Hospital Review recognized Ross Hurd in the top 72 ITs in the country.
- Lee Tinsley resigned, his last day was Monday.
- Brad is our Clinic Administrator – 90% of his time will be at the clinic and 10% will be in wellness as primary care become the main focus.
- The new Organization Chart was presented to the Board.

*A motion by Mary Murphy to approve the Origination Chart as presented dated 9.25.18, seconded by Jordana LaPorte and approved by the Board of Commissioners.*

**Chief Financial Officer – Vickie Bodle, CFO**

- August’s financial statements closed with net loss of \$70,252 for the month.
- YTD’s financial statements closed with net loss of \$6,252.
- Combined AR days were at 57.

**Chief Nursing Officer –Donna Strand, RN, CNO**

- FDA will be here for their infection survey.

**- Chief Operations Officer – Brad Hankins, RN, COO**

**- Outpatient:**

- In the past 12 months we have screened for depression with 4,780 PHQ9s with 356 patients found with prior undiagnosed depression.

**EXECUTIVE SESSION** – The Board entered into Executive Session at 3:20 P.M. to discuss BE Smith/CEO Recruitment.

**REGULAR SESSION:**

- The Board of Commissioners reconvened into regular session at 4:05 P.M.
- Make a call to Chris at BE Smith and set up dates for six video interviews with the CEO candidates.
- Available dates for Board Members include, October 16, 17, 18 & 19<sup>th</sup>.
- Try to do onsite interviews the last week of October, or the first week of November.
- Available dates for Board Members include, October 31, November 1, 2, and 3rd.

**OTHER BUSINESS:**

- On a trial basis, the Board of Commissioners have decided to add a Public Comment session at the beginning and end of the Board meetings.

**MEETING ADJOURNED:**

- Meeting adjourned @ 4:30 P.M.

**Submitted:**

Fred Miller  
Board Secretary

10/23/18.  
Date

**Attest:**

[Signature]  
CEO

10/23/18  
Date