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

FEBRUARY 26, 2019 – LCCH BOARD ROOM 1:30 PM – 4:00 PM

MEETING MINUTES

CALL TO ORDER:

Phyllis Gleasman called the meeting to order at 1:31 P.M.

Members Present:

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

Members Absent:

Mary Signorelli, Commissioner

Others in Attendance:

Steve Patonai, CEO
Vickie Bodle, CFO
Brad Hankins, Clinic Administrator
Kris Haasl, CNO
Lisa Greenlee
Diane Witsil
List of attendees

REVIEW OF MISSION:

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

CHAIR'S REPORT:

- Phyllis Gleasman introduced Kris Haasl, CNO and Kris provided a short summary of her bio.
- Phyllis stated they are working on the design/plan for the new hospital construction project.

PUBLIC COMMENTS:

Celeste Hankins stated there would be a Manson Family Fun & Fit Night on March 7.

CONSENT AGENDA:

- A. Regular Board Meeting Minutes, December 20, 2018
- B. Regular Board Meeting Minutes, January 22, 2019
- C. Affiliation/Partnership Minutes, January 14, 2019
- D. Community Committee Minutes, January 9, 2019
- E. Vouchers / Warrants \$491,594.79; payroll direct deposit \$477,668.67
- F. Write-Offs & Charity: Bad Debt-Hospital \$9,691.29; Bad Debt-Clinic \$11,423.87; Charity Care-Hospital \$71,532.46; Charity Care-Clinic \$108.00 Bankruptcy \$00.00; total \$92,755.62
- G. Credentialing

John Laughlin, PA
William Cagle, MD
Extension of Privileges
Behavioral Health
Brian Barlag, CRNA
Locums
Jannel Burton, OT
Re-appointment
Danielle Satow
MEDEX Student
Behavioral Health
Anesthesia
Occupational Therapy
Preceptor: B. Barstad MD

A motion was made by M. Murphy to approve the consent agenda, seconded by F. Miller, and approved by the Board of Commissioners.

OLD BUSINESS:

Nothing reported at this time

NEW BUSINESS:

Medical Staff Report

Not available today

Finance Committee Report - Fred Miller & Vickie Bodle, CFO

- Vickie Bodle reported financials for January are delayed due to coding backlog and should be available at the next Board Meeting.
- HRG and North Valley Hospital are providing assistance with the coding backlog.
- Cash on hand at end of January was approximately \$3.5M
- Fred Miller commented that property taxes are due at end of April and the hospital should start seeing bond funds in May.

Business Plan Progress Report - Steve Patonai, CEO & Celeste Hankins, Public Relations

- Steve Patonai provided an overview of how the Business Plan updates will be presented each month. Each Strategic Initiative will be labeled as: Green: on target to achieve Strategic Initiative; Yellow: uncertain to achieve Strategic Initiative by deadline; or Red: not currently on target to achieve. Strategic Initiative by deadline. Two pillars will be presented each month.
 - People Pillar presented by Steve Patonai, CEO
 - o Purchase/Develop and implement new Employee Satisfaction survey instrument: Green
 - o Develop and implement new Physician Satisfaction survey instrument: Yellow
 - o Develop/Implement Leadership Development program: Green
 - o Implement performance-based Employee annual evaluation/merit process: Red
 - Community Pillar presented by Celeste Hankins, Public Relations
 - Develop/Implement comprehensive Community Communications Plan aligned with Board Vision Elements: Green
 - o Conduct semi-annual "State-of-LCCHC" events/activities: Green
 - o Increase Wellness Outreach for high-risk adults: Green
 - o Develop/Implement Outreach Plan for Latino population: Yellow

Presentation: Community Action Updates - Celeste Hankins & Agustin Benegas

 Celeste Hankins, Public Relations, provided information on communication strategies while Agustin Benegas, Community Wellness, presented strategies on Wellness and Outreach in the community and discussed the Fitness Challenge starting on March 10, 2019.

STATE OF THE HOSPITAL REPORTS

Clinic Updates - Brad Hankins, RN, Clinic Administrator

- Community Paramedicine is being testing, full roll-out no later than April
- Our primary care no-show rate for January was 4.1%
- Third available average YTD is 5.9 days with a low of 3.8 days in the second week of February
- 2019 ACO foci are: annual wellness visits, behavioral health integration, HCC coding
- 2019 ACH foci are: transition of care, patient pre-management and community paramedicine

Quality & Patient Care Services - Kris Haasl, CNO

- Currently exceeding quality national benchmarks.
- Focusing on falls and CAUTI rates
- Quietness initiative at night

CEO Report - Steve Patonai, CEO

- Introduced Lisa Greenlee, Executive Assistant. Diane remains as Medical Staff Coordinator and will be assisting in the Business Office.
- Excited to have Kris Haasl as the new CNO.
- WIPFLi report shows Revenue Cycle opportunities.
- New CFO role will focus on operations management and expanding service lines. Candidate interviews are being scheduled.

OTHER BUSINESS:

None at this time

PUBLIC COMMENTS:

None at this time

EXECUTIVE SESSION:

 At 2:55PM Commissioner Chairman, Phyllis Gleasman announced Board would convene into Executive Session for discussion on CEO Evaluation Criteria. – RCW 42.30.110(g).

REGULAR SESSION:

- The Board of Commissioners reconvened into Regular session at 4:04 P.M.

MEETING ADJOURNED:

Meeting adjourned at 4:05 P.M.

Submitted: Fred Miller	Attest:
Board Secretary 3-26-19	CEO 7/4/19
Date	Date