

Minutes of the Board of Commissioners Meeting Chelan County Public Hospital District No. 1 Administration Conference Room & Video Conference Connection May 26, 2020

Present: Via Video Connection: Mall Boyd, President; Tom Baranouskas Vice-President; Mary Helen

Mayhew, Commissioner; Helen Rayfield, Commissioner; Bruce Williams, Commissioner

On-Site: Diane Blake, Chief Executive Officer; Shawn Ottley, Chief Clinical Officer; Pat Songer, Chief Operating Officer; Jim Hopkins, Chief Financial Officer; Jill Barich, Executive Assistant

Guests: Via Video Connection: Rachel Hansen, PR Coordinator; Marianne Vincent, Director of Accounting;

Marlene Farrell, Foundation Coordinator

Topics	Actions/Discussions
CALL TO ORDER	■ President Mall Boyd called the meeting to order at 9:02 AM.
CONSENT AGENDA	 Tom Baranouskas moved to approve the consent agenda. Mary Helen Mayhew requested the Accounts Payable Warrants be pulled from the consent agenda for an explanation on the Change Healthcare Invoice. Bruce Williams seconded the motion. Motion approved The Change Healthcare invoice for a program, InterQual, that hospital staff use to determine if patients qualify for inpatient or observation status. This is an annual subscription amount. Helen Rayfield moved to approve the Accounts Payable Warrants. Tom Baranouskas seconded the motion. Motion was approved.
COMMUNITY INPUT	■ None
FOUNDATION REPORT	 Marlene has been helping with tracking community donations throughout the COVID response. The Foundation has received about \$12,500 in donations from the community during this time. They also set up a special COVID fund and have received about \$2,000 so far. Marlene has been working on grants, through the USDA and Murdock, with the assistance of Pat Songer and Jim Hopkins to help fund a mobile clinic. The USDA Grant has a requirement that the project be discussed at an open public meeting, to allow for the public comment. We will be discussing this at the June meeting.
VALUES	Diane shared a story called the Gardner's Badge, which is a story about attitude. The owner of a small garden center always wore a badge that read "Business is Great!" It helped the owner and his staff maintain a positive attitude and started many conversations with customers.
PROVIDER CHECK-IN: Dr. Jerome	 The clinic is working to get back to somewhat of a business as usual model that fits in with the Governor's proclamations. Processes and procedures in the clinic need to be reworked as they are feeling somewhat understaffed. Most patients are still feeling nervous about coming into the facility. Support staff is down to a one-to-one ratio and with additional needs for infection control that is more difficult. In order to maintain social distancing, appointments will need to be spread out more. Patients should be encouraged to come in for regular check-ups and physicals. Any patients with respiratory symptoms will be seen in the respiratory clinic. Providers are willing to see patients where they are comfortable, whether it is in person, telehealth or having patients come in for labs and then providers following up. People need to be vigilant with protecting themselves, especially as visitors return. Dr. Jerome has appreciated the collaboration with Sr. Leadership during this time. He asks commissioners to share the word with the community to be compliant with our facility requests to wear a mask and adhere to the temperature and symptom checks.
PR Update	 Rachel Hansen recently wrote an article about a retired Airforce pilot who flew 20,000 masks to Cascade Medical that came from WSHA. It was in the Echo a couple weeks ago and in the Wenatchee World last week.

- The Don't Delay Care campaign launched statewide last week. Regionally we collaborated with Confluence, Columbia Valley Community Health and Three Rivers Hospital to spread the word.
- We released a press release on Friday to let the community know that we have re-opened most of our services. It lets people know that things will be slightly different, with temperature checks at the door along with symptom checks.
- Last week we filmed a "Don't Delay Care" video in English and Spanish with Dr. Butruille, and a video with Dr. Kranz on why it is important for patients to wear a mask while in the facility. The videos will be online and on Facebook.

COMMITTEE REPORTS

- a. WSHA Hospital Governing Boards Committee
- Bruce Williams reported on the Hospital Governing Board Committee meeting.
- WSHA is continuing to work on board education.
- Some of the sessions that would have been presented at the Chelan conference will be taking place via video meetings.
- Discussed other board education topics such as telehealth, recovering from COVID-19, working better with public health.
- WSHA still wishes to celebrate those who achieved their board certification last year.
 Certificates will be sent out soon.

DISCUSSION/REPORT: OLD BUSINESS

- a. WHSA Webinar The Post COVID Healthcare Landscape: Implications for Strategy
- Commissioners felt the information presented last week was very good.
- The presenter suggested that in order to help get out of this that all healthcare employees should be tested regularly. Currently we do not have enough tests to routinely test staff.
- The state has not been doing a great job of helping to get testing kits. Confluence was able to get 5,000 test kits from China, which WSHA assisted with. They have passed the quality test.
- It will be a huge challenge to recover from COVID.
- Budgeting will be challenging as revenues have dropped and expenses have increased.
 It is unknown if our payor mix change as a result of the pandemic.
- b. COVID-19 Response Activities
- Hospitals are now mostly able to get back to procedures if they can document that they have appropriate levels of PPE and screen patients appropriately. We are back to doing mammograms, treadmills and bone scans. We are not doing endoscopy yet and will be working on the workflow before opening up this service. When we do start this service, we will be doing fewer procedures to allow adequate time for the room to be disinfected and for patient recovery. In order for this program to breakeven financially we need to do the 5-6 procedures a day. The Finance Committee will be looking into this further.
- Rehab services is seeing patients in person again. They will be offering some telehealth visits, but we do not know the financial implications yet.
- A higher percentage of ED visits are patients who are sicker and likely delayed care.
- Long term, leadership is concerned with lower volumes throughout the facility.
- Schedules will be expanded as patient demands increase for rehab services.
- PPE update Hospitals throughout the state are working on a contingency basis. We are using masks for more than one use. Staff members are using these for a full day or until soiled. We anticipate this will be the norm for several months. We have enough stock of most PPE items for a couple months.
- WSHA is not advocating for universal masking of staff, just patients. If working with a patient within 6 feet, staff are wearing masks.
- Patients do sometimes question when they see other staff are not wearing masks.
- Supply chain is going to be an issue for some time.
- We anticipate the need for PPE to be increased as we move forward.
- Getting patient volumes back to pre-COVID levels may happen sooner in the clinic, but workflows will need to be adjusted to allow for patients to be spread out.
- Test kits we have about 700 tests, which is a good number for us. There have been questions about an outpatient test. We are finalizing the workflow for the antibodies test and will be able to provide that in the near future. Patients will need to see their provider and make the decision together if that is a good test for them.
- We will test an asymptomatic person if they have a known contact with a positive patient or it is a staff member who has been exposed.
- Shawn Ottley is meeting weekly with the City and Chamber in regards to the downtown core and street closures. There has been talk of Commercial Street being closed to one lane, which may have impacts on us.

Diane is meeting weekly with regional leaders, coordinated by the Chelan Douglas Health District to have a unified communication around reopening. • The unified command meetings with the fire departments, sheriff's department, etc. is winding down. These have been moved to bi-weekly meetings and will most likely stop meeting. Diane will be meeting with Kaylin Bettinger with UV Mend about the Free Clinic. ■ DZA has been very helpful in guiding us with the relief funds we are receiving. They come with some guidance, but not all the requirements are clear. Marianne Vincent will be logging and tracking all the funds we receive and ensuring we don't have overlap. ■ There are still a lot of COVID meetings, both internally and regionally. There is some additional reporting that is also required. Staff morale is pretty high, but there is some concern about the level of stress for everyone from things at home and/or work. Dr. Moholy and Aisha Houghton are starting to do some lunch and learns to help people learn to manage stress. Shawn Ottley commented that staff are feeling very supported and thanks to Dr. Jerome for engaging with leadership to work our way through this. ■ Mall Boyd asked about other rural facilities – we are probably one of the only ones that has not furloughed anyone or cut salaries. Small rural facilities did receive more funds on a percentage basis than medium size rural facilities. The long-term effects are yet to be seen for some rural facilities. **DISCUSSION/REPORT: NEW BUSINESS** a. 2020 Strategic Plan Ethan Maffey, our new Director of Process Improvement facilitated a meeting for Sr. Leadership and Dr. Jerome to review and revise the Strategic Plan. The plan was adjusted, but things were really not taken off. Diane hopes to revisit this at the Board retreat. Sr. Leaders are working on a more systematic approach in driving the work on our plan. There are twenty-two goals on the plan, the community connections goals are being paused due to not being able to meet with community groups. They will be working on a process to effectively evaluate new service lines instead of evaluating the service lines this year. • A lot of work is moving ahead and Sr. Leaders hope to have a more finalized document in the near future. **ACTION ITMES: NEW BUSINESS** ■ The credentialing files Dr. Merritt and Dr. Jeong have been reviewed by the Medical a. Credentialing Approvals Executive Committee, CEO, and a member of the Board Quality Oversight Committee. There are no concerns, and all recommend approval of privileges. Mary Helen Mayhew moved to approve privileges for the following providers: o Dr. Tamara Merritt - Active Privileges - effective June 1, 2020 - May 31,2022 o Dr. Joanna Jeong - Teleradiology Privileges - effective June 1, 2020 - May 31, 2022 Helen Rayfield seconded the motion. Motion was approved. ■ We posted a negative margin of (\$400,000) for the month of April and (\$700,000) YTD. **April Finance Report** ■ Patient volumes in April had negative variances of 40% or more for most departments. May numbers are looking slightly better. Expenses were close to budget. • Other Operating Revenue is positive due to grants we have received. Cash Receipts are high as it includes funds received for COVID relief. ■ Days in AR went up due to the way this is calculated. The AR balance dropped. We have received several different types of funding for specific purposes through the Payroll Protection Program and CARES Act. We may have about \$400,000 payback on the Payroll Protection Program grant. DZA believes there will be some offsets on the cost report for 2020 and some portions of the money being received is being reserved. Our main goal is to continue providing services to our community with minimal impact to We do continue to have good cash balances, but there are still many unknowns. Hired a new Director of Accounting, Kathy Jo Evans. She has been cross training with **Administrator Report** Marianne Vincent. She is a great fit for our organization. Marianne Vincent and Jim

Hopkins will begin working together to transition duties over the next couple months.

	• We will be changing the company that read our CT and X-rays and will be moving away from Confluence for reading mammography studies. This was driven by Confluence doubling the price to read mammography studies. Scott did some research and found an organization who could read mammography as well as CT and X-rays. They are able to commit to a quicker turnaround time for all reads, including STAT reads. The medical
	staff is in favor of the change. ■ Diane is scheduled to give a presentation to Rotary on June 12 th .
	 We have now posted room capacities for social distancing in all of our conference rooms.
	 Lake Wenatchee Fire and Rescue Chief Mick Lamar is retiring. He will be replaced by Dave Walker who has been the Assistant Chief at Lake Wenatchee. That is expected to
	take affect at the beginning of June.
	Marlene Farrell is working on grants. Pat Songer is working with Chad Schmitt from
	Scaled Data, our Virtual Fractional Chief Information Officer on grants to support our infrastructure.
	 We celebrated National Healthcare Week a couple weeks ago. Staff felt celebrated and appreciated.
	 Staff and the Board appreciate the weekly updates Diane sends out on Fridays.
BOARD ACTION ITEMS	 Check e-mail at least three times per week, or more frequently if you are home and able. There is a Charity Care Webinar today at Noon. Don't forget to log your hour for Board Certification.
	 All signature pages are being sent via DocuSign today. Please watch your email and sign as soon as possible.
	■ The Governance Committee will be meeting next week.
	 Helen Rayfield scheduled to attend the Medical Staff meeting on June 4th.
STRATEGIC QUESTION / MEETING EVALUATION / COMMISSIONER COMMENTS	■ Very informative meeting today.
ADJOURNMENT	■ There being no further business, Tom Baranouskas moved to adjourn the meeting.
	 Helen Rayfield seconded the motion.
	■ The meeting was adjourned at 11:10 AM.

DocuSigned by:

Mall Boyd, President

Helen Rayfield

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Helen Rayfield, Secretary

DocuSigned by: