**CASCADE MEDICAL**
PARTNERS IN YOUR HEALTH

Minutes of the Board of Commissioners Meeting
Cascade Medical Center – Arleen Blackburn Conference Room
Public Hospital District No. 1 – November 28, 2017

**Present**: Mary Helen Mayhew, Chair, Excused Absence; Bruce Williams, Vice-Chair; Mall Boyd, Commissioner; Helen Rayfield, Commissioner; Tom Baranouskas, Commissioner; Amy Webb, Chief Operating Officer; Jim Hopkins, Chief Financial Officer; Jill Barich, Executive Assistant.
**Guests**: Rachel Hansen, PR Coordinator;

| Topics | Actions/Discussions |
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| **CALL TO ORDER** | ▪ Vice Chairperson Bruce Williams called the meeting to order at 9:00 AM, following a board education session which was a view of the Risk Management Bootcamp attended by Mall Boyd and Amy Webb. Reviewed and discussed a case study that was presented at the conference and talked about how something similar could happen at our facility. |
| **PLEDGE OF ALLEGIANCE** | ▪ Pledge of Allegiance was recited. |
| **CONSENT AGENDA** | ▪ Tom moved to approve the consent agenda as presented.<br>▪ Mall seconded the motion.<br>▪ Motion was approved. |
| **COMMUNITY INPUT** | ▪ None. |
| **FOUNDATION REPORT** | ▪ The Foundation received an $11,000 grant from North Central Washington Foundation. NCW Foundation will also run a crowd sourcing campaign which could fund the remaining $4,000 that was requested for the grant.<br>▪ The Foundation held a nice Thank you for staff in November.<br>▪ Foundation Retreat was held in late October. They had a presentation about continuous givers and how to show them what their contribution did for the facility. |
| **VALUES** | ▪ Diane received an e-mail from Tricia Cunning who works in our Business Office. Earlier in the year, Tricia fell and broke her back. She shared with Diane how thankful she is for Joe and the PT staff for their positive support and help with her recovery. |
| **Provider Check-in: Dr. Merritt** | ▪ Dr. Merritt was unable to attend the meeting. |
| **PR Update** | ▪ Provider videos and the PT video first drafts will be ready by the end of the week.<br>▪ Patient Centered Medical Home – the clinic is working to become certified by July. Parts of this is communication with patients about how we will be revamping the clinic space and adding Behavioral Health.<br>▪ Fourteen patients received free mammograms during October's Breast Cancer awareness campaign. About $800 was received from donations from the Obertal Mall vendors.<br>▪ Google Reviews – we have been getting good google reviews. Tom recently saw a negative one that was at the top of the list. We don't have any control over what reviews are posted and the order of the reviews. |
| **COMMITTEE REPORTS** | |
| a. QI Committee | ▪ Quarterly reports were presented by Safety, Infection Control, Utilization Review, OICC, and risk management data was shared.<br>▪ Shawn Ottley presented on publically reported data.<br>▪ Changes were made to the committee work plan to remove the Rounding Report. We will ask the commissioners who have recently rounded if they learned anything interesting and to share that during Commissioner Comments during the regular Board meetings. |
| b. Governance Committee | ▪ Reviewed the Conflict of Interest Policy and will discuss it in more detail later in the meeting.<br>▪ December Board Meeting planning regarding Board Committee assignments for 2018.<br>▪ Board Succession Planning – There are a couple potential board member retirements with terms ending in 2019. The Board will need to plan for committee assignments and leadership for 2018 and 2019.<br>▪ The Governance committee may recommend the Board Chair, be the chair person for the Governance Committee.<br>▪ Reviewed the committee self-assessment survey.<br>▪ CEO 360 degree survey was reviewed as well as the timeline and the list of people to complete the 360 review.<br>▪ The Board Job Description and President Job Description may change to a Board |

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| | Expectations document. This will be worked on in 2018.<br>▪ Board/Provider check-in – we don't want to add to anyone's schedules, but will continue to look for ways to interact with providers. Will continue to have providers attend Board meetings, board members attend Med Staff meetings and possible board member involvement on the Medical Executive Committee. |
| c. Part-Time Resident Advisory Council | ▪ Rachel spoke to the council about the clinic becoming Patient Centered Medical Home certified and how to share that information with the community.<br>▪ The council is looking for new members, as the last group of original members have their second terms expiring in April 2018.<br>▪ The council encourages the Board to recruit and identify part time residents for the council. |
| **ACTION ITEMS: NEW BUSINESS** | |
| a. Conflict of Interest Policy | ▪ There were minor revisions for clarification purposes regarding discussions and votes if a commissioner has a conflict of interest. The policy now states they will excuse themselves from the meeting during the discussion and vote.<br>▪ A review of this policy is a good reminder to everyone, of what to be aware of with conflicts of interest.<br>▪ Tom moved to approve the revised Conflict of Interest Policy.<br>▪ Mall seconded the motion.<br>▪ Motion was approved. |
| b. Cascade Medical Succession Plan | ▪ Sr. Leadership has reviewed and updated the document based on current practices in the facility.<br>▪ This document was presented to Moody's when they were reviewing us for the Bond rating. They were impressed that we had this type of document.<br>▪ Mall moved to approve the CM Succession Plan<br>▪ Helen seconded the motion.<br>▪ Motion was approved. |
| c. Credentialing Approval | ▪ The Medical Executive Committee has reviewed the credentialing files for Dr. James Martin and Dr. Stacey Clark. They recommend approval of Provisional Privileges for Dr. Martin and Temporary/Locum Tenens Privileges for Dr. Clark.<br>▪ Mall moved to approve both providers for the recommended privileges.<br>▪ Helen seconded the motion.<br>▪ Motion was approved. |
| **DISCUSSION / REPORT: OLD BUSINESS** | |
| a. Community Leaders Dinner | ▪ The next Community Leaders Dinner is scheduled for December 7th.<br>▪ Tom is not able to attend that night as previously scheduled, so Bruce will attend instead.<br>▪ Mall will invite a couple more people to complete the invitation list.<br>▪ Rachel will send a reminder to all attendees of the date and time of the dinner.<br>▪ Commissioners are also encouraged to follow-up with the individuals they invited. |
| **DISCUSSION / REPORT: NEW BUSINESS** | |
| a. Nurse Staffing Plan | ▪ Amy Webb has been working with Kath and a committee of the nursing staff to develop a Nurse Staffing Plan.<br>▪ The proposed staffing changes will have minimal impact on expense, but this area is highly reimbursed by Medicare.<br>▪ This past year we have denied admission to several patients due to not having adequate staffing to care for them.<br>▪ Sr. Leaders have reviewed staffing levels at other facilities and we do have fewer nursing hours available than other facilities based on census.<br>▪ Sr. Leaders recommend moving forward with the proposed Plan 3. The Lead RN role will be clearly defined with responsibilities. Amy and Kath are working on a job description for this position.<br>▪ There are still other culture issues that need to be addressed in this area. |
| b. 2018 Meeting Dates | ▪ Commissioners reviewed the initial list of proposed meeting dates for 2018.<br>▪ Mall knows she has a conflict with the August 28th date and requests that meeting be moved to the third Thursday, which would be August 21st.<br>▪ We will review the list of dates again at the December meeting for additional comments. |
| c. CEO Annual Review Process | ▪ The timeline and list of individuals to complete the 360 CEO Review survey were in your packets.<br>▪ The review survey will be sent out via SurveyMonkey later this week. Please complete by December 15th. |

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| d. DOH CMS Survey | ▪ We were recently surveyed by the Department of Health on the Federal Critical Access Hospital regulations.<br>▪ There were no significant findings related to patient issues or safety.<br>▪ Lab and Radiology had no findings at all.<br>▪ The Final Report is due to us no later than December 4th.<br>▪ There was a big focus on Infection Control.<br>▪ Some of our policies need to be updated to ensure all of the discrimination classes are addressed.<br>▪ Some of the quality improvements that were discussed at the closing conference that we are addressing are:<br>o Water Management – we have started a plan, but did not have it completed.<br>o A drain in the kitchen is too level and could let water stagnate<br>o Medical Records – charting is fragmented.<br>o Endoscopy – The follow-up needs to be in the hospital chart and not just the clinic chart.<br>o Social Worker – we do not meet the requirement of the social worker for the Swing Bed Program. We may need to contract for some of those services.<br>o Emergency Preparedness Plan – we will be increasing our level of detail regarding how much water, food and other supplies we stock.<br>o Fire Marshall Inspection – we had a few minor changes that were addressed while they were on-site.<br>o The Final Report will detail out the regulations and what was not compliant. |
| **October Financial Report** | ▪ We posted a Positive Margin of $77,000 for October due to greater than budgeted net revenue, which offset high costs for professional fees.<br>▪ Our as-filed interim cost report indicates an underpayment from Medicare of $190,000 so far this year, which will likely result in positive adjustments to our year-ending financials.<br>▪ We can expect unbudgeted expenses in 2017 related to the bond refinancing; DZA is working on the journal entries for those transactions.<br>▪ We had good cash collections in October and accounts receivable days dropped.<br>▪ Swing Bed continues to be busy and October posted our busiest month this year for mammograms. |
| **Administrator Report** | ▪ Diane provided updates on the following:<br>o Intergovernmental transfers related to AWPHD and the Healthier Washington work<br>o WRHAP project, including likely funding in 2018<br>o Securing a proposal writer for the ACH proposal<br>o Participation in the Upper Valley MEND Free Clinic leadership group<br>o Educational details regarding EMS levy planning<br>o Diane's recent meeting with Kaylin Bettinger (Executive Director of Upper Valley MEND), and David Olson of Columbia Valley Community Health.<br>o Proposed Clinic remodeling projects<br>o Anticipated changes to 2018 employee benefits |
| **Executive Session: Performance of a Public Employee** [RCW: 42.30.110(1)(g)] | ▪ The Board moved into Executive Session at 12:05 PM for 30 minutes to review the performance of a public employee.<br>▪ The Board extended the executive session for 15 minutes at 12:35 PM.<br>▪ The Executive Session adjourned at 12:50 and the Board returned to open session. |
| **BOARD ACTION ITEMS** | ▪ Check your e-mail.<br>▪ Reviewed upcoming meetings and who is attending.<br>▪ Watch for the CEO review survey to arrive later this week. |
| **COMMISSIONER COMMENTS** | ▪ Mall relayed her recent experience of kindness and care to her family from our Ambulance crew as well as other community member who work in public service.. |
| **ADJOURNMENT** | ▪ There being no further business, Mall moved to adjourn the meeting.<br>▪ Helen seconded the motion.<br>▪ The meeting was adjourned at 12:55 PM. |

Mary Helen Mayhew, Chair

Helen Rayfield, Secretary