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 – March 19, 2019

Present: Bruce Williams, President; Mall Boyd, Vice-President; Mary Helen Mayhew, Commissioner; Helen Rayfield, Commissioner; Tom Baranouskas, Commissioner; Diane Blake, CEO; Jim Hopkins, Chief Financial Officer; Shawn Ottley, Chief Clinical Officer; Jill Barich, Executive Assistant

Guests: Rachel Hansen, PR Coordinator; DeAnna Griggs, RN, Director of Nursing; Joe Aponik, PT, Director of Rehab Services; Linda Kinder, CM Foundation

Topics	Actions/Discussions
CALL TO ORDER	▪ President Bruce Williams called the meeting to order at 9:03 AM, following a board education webinar entitled: Governance: The Rules of the Road.
PLEDGE OF ALLEGIANCE	▪ Pledge of Allegiance was recited.
CONSENT AGENDA	▪ Mall moved to approve the Consent Agenda. ▪ Helen seconded the motion. ▪ Motion was approved.
COMMUNITY INPUT	▪ None.
FOUNDATION REPORT	▪ Linda Kinder reported for the Foundation that the golf tournament is coming together. ▪ They possibly have two new members. ▪ Emily Groby has resigned her position but will be available to help with the transition to a new coordinator. ▪ Charm Walk will be May 11th, Mother's Day weekend. ▪ Golf Tournament will have a silent auction and dessert dash during the dinner. ▪ There is a Benevolent Night at Wok About Grill tonight.
VALUES	▪ Diane shared an email from a team member about Community. We recently had a patient who was about ready to go home, but a home visit needed to occur. The patient's home is somewhat remote and can only be accessed during the snowy weather via a vehicle with tracks. Due to the remote location and some potential issues for the patient, they requested a paramedic accompany the team. Brayden Kirk accompanied the team which re-assured everyone involved in the visit.
Provider Check-in: Dr. Jerome	▪ Chris Ellbogen our current UW Medical student has been here for about 4-5 weeks. ▪ We are close to getting bids on the shelled space in the clinic built-out. ▪ Providers are looking forward to the new COO joining the team. ▪ Dr. Kranz is out on sabbatical. He is doing some CME's and spending time skiing. ▪ Dr. Fosnaugh is seeing a lot of Dr. Kranz' patients and developing her practice. Most practices have busy schedules. ▪ Dr. Jerome will be participating in an ED Medical Director interview this week and working on in-patient coverage with Diane. ▪ Providers are working on improving inter-facility communication. ▪ INHS is sending someone out to do training on Centricity. The goal is to make the system work better for our everyone. ▪ Implementation of a new EMR in the next 3-5 years will be the one of the biggest challenges for our facility. ▪ Chris shared how positive his experiences has been and he has enjoyed the continuity of care our patients receive. He has seen some patients more than once during his rotation. ▪ Work needs to continue and evolve on the role of the clinic medical director position and how work processes flow.
QI Presentations: • **Rehab Services** • **Hospital Nursing**	▪ Joe Aponik spoke about his 2019 QI project for in-patient services. ▪ DeAnna Griggs shared her 2019 QI projects which were all items that came from our last DOH audit. In April the nursing team will be rolling out a Rapid Response Team to help identify patient declines prior to needing to call a code.
PR Update	▪ Suicide Prevention forums were held and there were about 25 people at the Plain workshop and 65 at the Leavenworth workshop. The event was recorded and will be available soon for people to view. ▪ Rachel is working on the roll-out of the 3D Mammography and a photo shoot is scheduled in the next couple weeks.

COMMITTEE REPORTS	
a. Governance Committee	▪ Reviewed the policies that were approved in the consent agenda. ▪ Reviewed and revised the education plan. More of the WSHA education webinars are proposed to be used for our board education. ▪ Board Strategic Thinking – we have added a strategic question topic at the end of the agenda today for everyone to think together about what strategic questions were discussed in today's meeting. ▪ Discussed briefly the board retreat which is scheduled for July 18th, which will be tied to the Community Health Needs Assessment. ▪ Discussed the upcoming Community Leader's dinner and how we want to tie the meeting with our Community Health Needs Assessment.
b. Finance Committee	▪ Reviewed December 2018 preliminary results and February 2019 results. ▪ The Finance dashboard will stay the same as last year. ▪ Finance will look at some education to provide to the board at the retreat on how our financial history can help us plan for the future. ▪ USI, our insurance brokers, presented our insurance plans and discussed the coverage and any rate increases for 2019. Will consider having the insurance brokers present to the full board next year. ▪ DZA will be on-site for our Audit the first week of April. The exit conference will be April 4th in the morning. Helen will attend due to Mary Helen being out of town.
ACTION ITEMS: NEW BUSINESS	
a. Resolution 2019-02 Surplus Equipment	▪ Mall moved to approve resolution 2019-02 – surplus equipment ▪ Tom seconded the motion. ▪ Motion was approved.
b. Provider Credentialing	▪ Mall moved to approve the following privileges: o Provisional Adjunct Privileges: ▪ Dr. Megan Guffey ▪ Corey Rubinfeld, PA-C o Temporary/Locum Tenens privileges approved prior to the meeting due to timing: ▪ Dr. Robert Rookstool ▪ Dr. Jianming Song ▪ Tom seconded the motion. ▪ Motion was approved.
DISCUSSION / REPORT: NEW BUSINESS	
a. DOH Hospital Survey	▪ DOH was on-site March 5 – 8th for our licensure survey, which included our fire life safety survey. ▪ The written report was received on March 18th and we have 10 days to respond with our written plan of correction to the deficiencies. ▪ Citations are around staff training, QI reporting, HIM getting documentation in the EHR, laundry sorting area and process, documentation on pain response, lab hood which was just out of certification, fire doors need to be closed, elevator monthly testing, annual fire door testing, space heaters in the hospital must be of medical grade, receptacles in patient areas must be of medical grade or tested monthly as well as power strips. ▪ Shawn will be developing a score card for the items cited and will be presenting it quarterly at the QI meeting and at the quarterly Board Quality Oversight committee meeting. ▪ Our report will be submitted to the State by next Tuesday, March 26th.
b. Clinic Shell space build-out	▪ The last area in the clinic that has not been completed yet, will be built out into a conference room that can be used for staff meeting as well as patient group meetings and work spaces for several staff members who currently work in that area. This is a Small Works process with the anticipated cost around $50,000. ▪ Management anticipates having bids by the next meeting for approval.
c. Foundation Golf Tournament sponsorship	▪ Medical Staff, Administration and leadership team have all agreed to sponsorship for this year's golf tournament. ▪ In the most recent years commissioners have committed to $125 each and joined the others for one large sponsorship. ▪ Commissioners agreed to support the tournament as in years past. ▪ Make checks payable to CM Foundation and submit them to Jill.
December 2018 preliminary Finance Report	▪ December had a small positive margin. We were behind budget which included the unbudgeted OPEB expense of $324,000 for the year.

	▪ Cash receipts were ahead of budget for December and we were $2 Million ahead of budget for the year. The spikes during the year are due to tax receipts. ▪ Days in Net AR are going up, but the balance is staying fairly steady. This is due to staffing issues in the business office.
February 2019 Finance Report	▪ February volumes were below budget. Several departments were slower than anticipated. ▪ YTD we are behind budget for net margin. ▪ Cash receipts are behind budget so far this year by about $675,000. ▪ Days in AR went down slightly, but are still higher than management would like.
Administrator Report	▪ Mall and Diane attended the Paramedic Lecture Series event Saturday night. ▪ Emily Groby has resigned and will be leaving the end of March. ▪ Suicide Prevention Forums were held in Plain and Leavenworth. Dr. Moholy and Katie Walker, Social Worker both attended the Plain and Leavenworth talks. Someone from the school district did give a shout out to Cascade Medical for collaboration in working with students who may be in crisis. ▪ There has been some positive movement in the ED Medical Director position. Dr. Jerome and Dr. Gentles will be interviewing a candidate tomorrow along with Diane. There is another provider who is from Portland and has some ties to our area who may be interested in filling in some shifts and possibly working more in future years. There is a third physician who is interested in the ED Provider position, but not interested in the medical director position at this time. ▪ Community Leaders Dinner is scheduled for June 19th. This will be discussed in detail at a future board meeting. ▪ We have a signage company here reviewing our signage and getting patients to the correct areas of our facility. ▪ The Foundation had applied for a grant for the mammography unit through the Murdock Foundation, but due to the timing of our need to purchase the unit right away, they pulled out of that grant. They are a good source for a large grant in the future. ▪ Diane and Javier met with PACE Engineering about the parking lot design. Our contract allowed for two meetings with the city. We have exceeded that number so we anticipate additional costs for this project. ▪ We should be receiving funds for IGT through AWPHD. There are about three more years of funding left and some things are changing which will provide funding for additional years. ▪ Advisory Council meeting has been moved to April 13th from April 27th. ▪ Diane will be attending the Peshastin Council meeting on May 9th to connect with them and ask who we should be connecting with in their community for our Community Health Needs Assessment. ▪ We are working through the CHNA to do the work in three stages. Stage 1 is data collection. They will then meet with us to determine what additional data we may need and determine what areas we want to focus. The goal is to have both of those complete prior to the board retreat to help us focus for the future. The CHNA will then be written with areas where we will focus our efforts. ▪ Kudos to Scott Mitchell, Director of Radiology in switching out the mammography unit.
BOARD ACTION ITEMS	▪ Checks for Foundation Golf Tournament Sponsorship for $125 to Jill. ▪ Advisory Council Meeting – April 13th ▪ Check e-mail regularly
Strategic Question discussion	▪ Community Health Needs Assessment, ▪ Comments from Dr. Jerome about the need to replace our EHR. ▪ DOH survey plan with a goal to be proactive in future surveys. ▪ One of managements plans this year is to develop an IT steering committee to begin the process of identifying a new HER.
COMMISSIONER COMMENTS	▪ None
ADJOURNMENT	▪ There being no further business, Mall moved to adjourn the meeting. ▪ Tom seconded the motion. ▪ The meeting was adjourned at 12:21 PM

Bruce Williams, President

Helen Rayfield, Secretary