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CASCADE MEDICAL
PARTNERS IN YOUR HEALTH

Minutes of the Board of Commissioners Meeting
Chelan County Public Hospital District No. 1
Arleen Blackburn Conference Room & Video Conference Connection
September 29, 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; Pat Songer, Chief Operating Officer; Marianne Vincent, Chief Financial Officer; Jill Barich, Executive Assistant; Melissa Grimm, Senior Director of Human Resources; Clint Strand, Director of Public Relations

Guests: **Via Video Connection**: Marlene Farrell, Foundation Coordinator; Dr. Maxwell Moholy; Aisha Houghton, Social Worker; Sharon Waters, Community Member

Topics	Actions/Discussions
CALL TO ORDER	▪ President Mall Boyd called the meeting to order at 9:13 AM.
CONSENT AGENDA	▪ Bruce Williams moved to approve the consent agenda. ▪ Tom Baranouskas seconded the motion. ▪ Motion was approved
COMMUNITY INPUT	▪ Sharon Waters commented that she thinks it would be helpful for a member of the hospital leadership team to provide an update at a City Council Study Session or meeting.
PUBLIC RELATIONS Update	▪ Clint Strand is preparing for the Community Flu Clinic at Alpine Lakes Elementary on Saturday, October 3rd from 12:00 – 5:00. ▪ October is Breast Cancer Awareness month and we will be promoting mammograms.
FOUNDATION REPORT	▪ The mobile clinic campaign officially closes on September 30th. The goal was $20,000 in community support with an additional match of $20,000. The Benevolent night and virtual concert were both helpful. To date, the Foundation has raised $56,000 for this campaign. ▪ They are working on a grant for suicide prevention along with the school district. ▪ The Foundation will be providing baskets of treats to staff as a thank you. ▪ The Foundation will have a half day retreat next week via Zoom.
VALUES	▪ Diane Blake shared a note from a patient and the patient's family thanking staff for taking great care of the patient. This story reflects all of our Shared Values.
Social Determinants of Health	▪ Dr. Maxwell Moholy and Aisha Houghton, Social Worker, shared with the Board the work they are doing around Social Determinants of Health. ▪ Social Determinants of Health affects all aspects of a patient's health. The five domains that are tracked are: economic stability, education access, health care access, neighborhood and home, social and community context. ▪ Including Social Determinants of Health as part of the care for patients is important in that the patient is treated in the clinic but their SDoH may affect how they are able to maintain or improve their health. ▪ Our team is able to help patients connect to the resources they need in order to improve their health. We want patients to know that if they have issues, they can come to Cascade Medical to obtain help in connecting to available resources. ▪ The annual screening of patients asks questions on living situation, food security, transportation, access to utilities and interpersonal safety. ▪ Patients are connected immediately to either Dr. Moholy or Aisha if needed. ▪ Community Partners include Cascade School District, Lake Wenatchee Fire and Rescue, SAGE, Upper Valley MEND, Leavenworth Senior Center. ▪ Transportation is a big concern for a lot of patients, especially those in the Plain/Lake Wenatchee area and patients farther out on Highway 2. Some patients also are not able to connect to telehealth due to unreliable internet access and/or an unreliable device. ▪ Some of the needs identified by Dr. Moholy and Aisha to assist patients – bus tickets to Wenatchee for emergency housing, and clothing for people who come in without appropriate or enough.
COMMITTEE REPORTS	
a. Governance Committee	▪ The committee met last week and reviewed the Open Public Meetings and Conflict of Interest Policies. The Conflict of Interest policy will be discussed later in the meeting. There were no proposed changes in either policy. ▪ The upcoming CEO Review and process were discussed. The Committee is planning to keep the same questions we have used in recent years. Discussion was around

	switching back to a 5-point rating scale from the 4-point rating scale used last year. Diane has some information which suggests it may be better to switch to a 5-point scale. ▪ The Governance Committee self-assessment survey will be completed in the next couple weeks. Other committee self-assessment survey's will also be coming out soon. ▪ The biennial Board Self-Assessment Survey will be sent in October to be completed by late October. Watch your email for this survey and complete as soon as possible. ▪ Community Partnerships – we are reaching out to the community in a number of ways in working with the school district, Confluence Health, City of Leavenworth, etc. ▪ CEO evaluation – The 4-point rating scale used last year is: Exceeds expectations, Meets expectations; Partially meets expectations; Far below expectations. The WHSA scale which Diane favors is: Outstanding - consistently exceeds standards; Highly Effective – often exceeds standards; Good - meets standards; Needs Improvement and Needs Significant Improvement. The Governance Committee and Diane are leaning more toward the 5-point scale. After discussion the board agreed to use the 5-point scale and include the definitions of each rating. ▪ Board Education – Commissioners like to have discussion of the webinars that have been presented that month. This could be prior to the board meetings or as part of the regular agenda. ▪ Mary Helen suggested everyone read the book "It's Your Ship" by Mike Abrashoff, WSHA Keynote speaker, to think about different ways we may be able to serve our community.
b. Medical Staff	▪ Mall Boyd attended the September Medical Staff Meeting and provided the following information: ▪ Dr. Kranz spoke about the Free Clinic and is very interested in getting it restarted. ▪ Dr. Raiche spoke about the work happening around the review of new EMRs. Diane is working on having Dr. Raiche speak to the Board about the EMR selection process. ▪ Wound care is a service some providers are interested in pursuing. Dr. Kevin Morris, who is a podiatrist and sees patients here every couple weeks, is willing to work with our providers and staff on training.
ACTION ITEMS: NEW BUSINESS	
a. Conflict of Interest Policy	• The Governance Committee and Management have proposed no changes to the policy. • Mary Helen Mayhew moved to approve the policy • Tom Baranouskas seconded the motion. • Bruce Williams commented that historically this policy has been approved in the body of the meeting to remind Commissioners to think about any appearance of conflicts of interest they may have. • There was no further discussion. • Motion was approved.
b. Resolution 2020-07 – Surplus Equipment	• Management is asking for approval to surplus four defibrillators. Three of these units will be traded in on new units and one will be disposed of due to being beyond useful life. • Bruce Williams moved to approve Resolution 2020-07 – Surplus Equipment. • Mary Helen Mayhew seconded the motion. • Motion was approved.
c. Credentialing Approvals	▪ Credentialing files for the following providers have been reviewed by the Medical Executive Committee, CEO, and a representative from the Board Quality Oversight Committee. All recommend the following appointments: o Adjunct Privileges (One-year appointment) ▪ Dr. Kenneth Lindsey o Provisional Teleradiolgy Privileges (One-year appointment) ▪ Dr. Geoffrey Fey ▪ Dr. Gulam Ashfaq Husain Khan • Bruce Williams moved to approve privileges for the above named providers. • Helen Rayfield seconded the motion. • Motion was approved.
DISCUSSION/REPORT: OLD BUSINESS	
a. COVID-19 Response Activities	▪ There have been some changes at the Chelan Douglas Health District with a new Interim Director, Nate Weed. There are additional resources from the CDC with some bilingual workers joining the team. ▪ There has been more community testing with the National Guard and Health Workers International.

	▪ Community members are able to schedule COVID tests here. Test results for those that are sent out are coming back in about 24 hours. ▪ Incident rates for Chelan/Douglas Counties is down to 160 cases per 100,000 people. The goal is to get down to about 75 cases per 100,000 to begin requesting additional openings in our community. ▪ We are working with the health district on a contract to help with contract tracing. If a Cascade Medical patient is tested outside of our facility and tests positive, we would be notified so the PCP can communicate better with the patient and help with contract tracing. Currently people who test positive are being asked to contact anyone they have been around to encourage them to be tested and to quarantine. ▪ PPE - the state has a large stockpile of N95 masks. Most are a brand that facilities have not used, which then requires new fit testing before an employee can use them. Other facilities that have tried to fit test these masks, have been unsuccessful. The state is pushing for one time use of N95 masks, which would increase the number of masks needed. In order to obtain any of the state supply masks, inventory must be at a very low rate, which puts a strain on being able to fit test and knowing that staff may not be protected if the masks don't work for us. We may request some of these masks to see if we can obtain some with our current inventory levels. ▪ We have changed our masking policy and procedure masks are not to be taken off and put back on. At some facilities staff where taking them off and eating lunch in a shared lunchroom and then putting the mask back on, which resulted in a spread of COVID. We currently have a good supply of procedure masks and having staff change masks should not pose a problem for our inventory levels. ▪ We are staying in touch with Confluence about their ability to accept patients. They have been on divert about half of the time, due to having a high census of patients, but are able to take our critical patients (heart attacks, etc.). ▪ Rumors are floating around that people believe if everyone is wearing masks they don't need to get flu shots. We will continue to watch this and will encourage community members to get their flu shot. ▪ The Cascade School District is considering COVID testing in order to bring students back into the buildings. The Methow School District has a process for testing students and we will try to obtain information on their process. ▪ Thank you, Pat, for requesting a second machine from the state to process Rapid Tests. ▪ A few months ago we rented a condo in town to house staff if necessary. So far, we have used it to quarantine a department to allow them to continue working and we have used it to house an IT support person on a temporary basis. ▪ We are trying to be flexible with work schedules, as much as possible, to allow staff to assist their children with on-line learning. ▪ Thank you to Marianne and the accounting team for all their work tracking CARES Act funds. The rules are continuously changing and they are staying abreast of all the changes and how we use and account for those funds.
b. IT Steering Committee	▪ Scaled Data sent an employee out to assist after the departure of our IT Director. ▪ The EMR Committee plans to make a decision on a new system by the middle of October. ▪ Dr. Raiche will be attending the October Board meeting to talk about the system that is chosen and provide information on how the providers feel about this.
c. Retreat Check-in	▪ Management has the majority of the work from the retreat. ▪ The retreat did not change the direction of the strategic plan but supported that we are heading in the right direction.
DISCUSSION/REPORT: NEW BUSINESS	
a. Space Labs Upgrade Capital Purchase	▪ The Cardiac Monitoring upgrade is in the budget for 2020. ▪ This equipment will allow for better patient monitoring in the Emergency Department and Acute Care. This is a comprehensive package to allow nursing to monitor patients and not need to enter the patient rooms as frequently. ▪ This will also provide a central monitoring system in both Acute Care and Emergency Department. ▪ This system will connect with either of the EMR's that are being considered. ▪ Management will bring this proposal back to the board for approval in October.
b. 1st Review of 2021 Budget	▪ There is a placeholder in the 2021 budget for the EMR purchase.

	▪ Volume forecasts for each department are noted in the budget packet. We are projecting growth in Swing Bed, Emergency Department, Clinic, but these growth numbers are actually decreases compared to 2019 volumes. ▪ Charges will be increased by 5% across the board. Professional fees do not include nursing agency costs. ▪ There is a plan to increase FTE's by 3 –Environmental Services – 1; Clinic – 1, which is a replacement of the clinical practice manager position which was never replaced; Lab – 1; and removal of 1 Admin FTE (CCO) which is being moved to a QA position as a holding spot as we determine actual area of need in the future. ▪ Capital budget additions are forecast at over $1.1 million. Sr. Leadership will be reviewing this and will be trying to trim this down. ▪ IT support expenses are being increased to support implementation of the new EMR. ▪ The proposed margin for 2021 is $258,615, which does not include any salary increases. ▪ Capital budget – there is an item on the capital list to add CT and X-Ray to the generator. There are several areas of the hospital that are not connected to the generator in the event of a power failure. We will develop a plan to upgrade the electrical at one time to connect all areas that make sense. This work will probably be pushed out a year or two.
August Finance Report	▪ For August, we posted a Margin of $61,000, and YTD net variance at ($46,000). We are in a good position thanks to federal funds we received. ▪ Net Patient revenue is ($437,000) – HHS has just recommended that facilities use the 2019 net patient revenue to report shortfalls for 2020. ▪ Professional fees are up partially due to audit fees and nurse registry fees. ▪ Cash receipts were below budget. ▪ TruBridge has been hired to code for us in the absence of an HIM Director, but so far the entire month of September has not been coded or billed for ambulance and in-patient departments. We hope to get this going soon. ▪ Days in Net AR has risen due to our increase in AR with increased volumes.
Administrator Report	▪ FFCRA (Family First Corona Virus Relief Act) provides federal paid leave for some staff, which the federal government provides via a tax credit. We opted out of this program for a few reasons as we were unable to take the tax credit and we have other generous leave options. It would also create a division on who is be able to use this leave. The regulations on this have been changed and we are now required to offer it to some staff (HR, and some other departments that have been determined to be non-essential workers at a hospital). If we do have a request we will not receive any subsidy from the federal government. ▪ We are hosting a Flu shot clinic on Saturday, October 3rd at Alpine Lakes Elementary from 12:00 – 5:00 PM. ▪ We have reached out to the members of our Part Time Resident Advisory Council to find out who is interested in attending via a Zoom meeting on October 24th. ▪ Advocacy – The 340B drug program provides funding for the operations of rural facilities. We have received around $100,000 through this program. Some pharmaceutical companies are finding loopholes to opt out of the program. We are advocating with Dr. Kim Schrier to take a look at this and work with the pharmaceutical companies. Diane Blake has also reached out to Representative Steele to schedule a Zoom meeting that also includes Dr. Rutherford. ▪ It is still unknown if there will be a special legislative session after the November election or if they will wait for the regular session in 2021. ▪ We are working through the plan for Information Technology and Health Information Management with the departure of those directors. Our IT Department consisted of Charles Amstutz, as the IT Director, and an additional IT Tech. After looking at the needs of the facility, management will be looking to replace the Director position with a very skilled Technician. Scaled Data will be providing leadership for this department with Chad Schmitt as our Virtual Fractional Chief Information Officer. We have started recruiting for the HIM Director position and Melissa Grimm will do the initial screening of candidates. Marianne Vincent has been working with TruBridge to get coding support started. ▪ Dr. Kranz is retiring at the end of 2020. Dr. Fosnaugh was brought in a couple years ago to absorb the patients from Dr. Kranz' practice. At this point, the data shows we do not need an additional provider to care for these patients. However, due to Dr. Fosnaugh's maternity leave we may bring in a couple pool providers to help fill days when provider staffing levels are low.

	▪ We have a great group of providers and this was seen a couple weeks ago when a pool Emergency Department provider was unable to work a 14 hour shift due to a health emergency by a family member. Diane Blake reached out to our providers and had great response from our team. Dr. Jonathan Kim, pool ED provider, let Diane know he could work the shift if needed. Dr. Butruille and Dr. Merritt ultimately split the shift to ensure we had coverage for that shift. ▪ Parking – The city is installing parking meters throughout town. We are working with the City Administrator on a Memorandum of Understanding to install parking meters at the spaces on our property that are available to patients and then to the public after hours. We have sent the agreement to legal for review and believe this will be signed so we can move forward with this project. ▪ When Confluence is on divert, we at times need to find other facilities to take patients. Frequently Ballard or Lifeline will transport patients to hospitals farther away. There have been some instances where Ballard and Lifeline are not available to transport and our ambulance staff feel they need to be here to support our community. This has created challenges with transporting patients to farther hospitals.
BOARD ACTION ITEMS	▪ Check e-mail at least three times per week, or more frequently if you are home and able. ▪ All signature pages are being sent via DocuSign today. Please watch your email and sign as soon as possible. ▪ Helen Rayfield will attend the Medical Staff Meeting on Thursday, October 1st.
STRATEGIC QUESTION / MEETING EVALUATION / COMMISSIONER COMMENTS	▪ None
ADJOURNMENT	▪ There being no further business, Helen Rayfield moved to adjourn the meeting. ▪ Tom Baranouskas seconded the motion. ▪ The meeting was adjourned at 11:47 AM.

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Mall Boyd, President

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