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CASCADE MEDICAL
PARTNERS IN YOUR HEALTH

Minutes of the Board of Commissioners Special Meeting
Chelan County Public Hospital District No. 1
Arleen Blackburn Conference Room & Video Conference Connection
November 16, 2021

Present: Mall Boyd, President; Tom Baranouskas, Vice-President; Mary Helen Mayhew, Commissioner; Helen Rayfield, Commissioner; Bruce Williams, Commissioner; Diane Blake, Chief Executive Officer; Marianne Vincent, Chief Financial Officer; Leanne Lewis, Interim Chief Operating Officer; Melissa Grimm, Chief Human Resources Officer; Jill Barich, Executive Assistant; **Via Zoom**: Chad Schmitt, Virtual Chief Information Officer; Clint Strand, Director of Public Relations

Guests: Mogens Bach, Foundation Member; Duane Goehner, Community Member – via Zoom; Alex, Community Member - via Zoom

Topics	Actions/Discussions
CALL TO ORDER	▪ President Mall Boyd called the meeting to order at 9:01 AM
CONSENT AGENDA	▪ Tom Baranouskas moved to approve the consent agenda as presented. ▪ Helen Rayfield seconded the motion. ▪ Motion was approved.
COMMUNITY INPUT	▪ Duane Goehner commented on his attempts to dialogue with management and the board of commissioners and that he will be restarting his CM Citizens Action Committee.
INTRODUCTION of Leanne Lewis, Interim Chief Operating Officer	▪ The board introduced themselves to Leanne Lewis, Interim COO. ▪ Leanne is happy to be here and has found staff to be very gracious.
VALUES	▪ Diane Blake shared thoughts on three of our values and shared our definition of each.; Commitment, Community, Quality. The first week of November the Department of Health was onsite completing our licensing and Medicare Conditions of Participation surveys. Samantha Jerome, RN had just moved into the Director of Nursing position and these audits have a large focus on nursing. Debbie Kelly, RN, Interim Director of Nursing was also on site and was a great source of support for Samantha. Samantha has also been covering as an Endoscopy nurse when needed and the week of the DOH survey, a key staff member for the Endoscopy team was unable to get her car started. Patients had already completed their prep but procedures could not go forward without appropriate staffing, so Sam drove to East Wenatchee to pick up the team member.
FOUNDATION REPORT	▪ Mogens Bach, Foundation member reported they held their annual retreat a couple weeks ago. Their focus was looking at events and comparing them over time as well as considering future changes. The Home and Garden Tour changed this year to Garden and Art Tour. There were mixed reviews on this event. The Charm walk will not be held next year but Think Pink will continue.
PUBLIC RELATIONS UPDATE	▪ Clint Strand finished up the most recent Cascade Connects which includes an article he and Marlene Farrell wrote about the co-worker appreciation challenge. It was a very successful campaign and the comments will be shared throughout the facility. ▪ Clint has been working on finding appropriate wording about pediatric COVID vaccinations. Dr. Raiche wrote an op-ed that was published in the Wenatchee World and should be published in the Leavenworth Echo as well. ▪ Clint has also been revising the auto-attendant message for our phone system. ▪ He has also been working on an updated design for the new ambulance.
DISCUSSION/REPORT: OLD BUSINESS	
a. COVID-19 Update	▪ The COVID case rate is now at 587.5/100,000 for a 14-day period which is a decrease. ▪ Hospital capacity is still tight throughout the state. There is a lot of catch-up care for elective procedures that were postponed due to COVID surges. Confluence is regularly not accepting inter-facility transfers, but are considering our patients on a case-by-case basis. As of last night, Confluence had 32 COVID positive patients, regionally there are 44 COVID positive patients. The ICU patients are not vaccinated and the vast majority of hospitalized COVID patients are not vaccinated. There are beds available but not enough staff to cover more beds. ▪ Dr. Bob Lutz from DOH gave a report on a WSHA call. In Eastern Washington the case rate is 505/100,000 and Western Washington's rate is 352/100,000. ▪ Across the state emergency department visits are up for mental health issues.

	▪ Three federal mandates – Medicare Conditions of Participation, OSHA Emergency Participation and one for Federal Contractors. ▪ There is a stay in place on the OSHA mandate and ten states have filed suit on the Medicare Conditions of Participation. ▪ Internally there are discussions around where to locate the respiratory clinic. It has been moved a couple times with the goal to improve the workflow. ▪ We continue to offer COVID vaccinations. Adult doses are administered in the morning and pediatric doses are administered in the afternoon. For patient safety it is better to offer them at different times. ▪ We have a few vendors who are refusing to sign the form stating the company has verified the vaccination status of staff. This will impact which of our vendors are able to have staff on-site. ▪ The CDC has recommendations out that recommend those travelling get tested. We are not doing travel testing but are referring people to Walgreen's. They are set-up for this and know what airlines are requiring.
b. MediTech Report	▪ We are progressing on outstanding items which pushed the go-live back to February. ▪ There will be a mock go-live in late December or early January. We will have an internal process to help identify internal issues prior to the MediTech mock Go-live. ▪ We are making progress and have a good schedule for ensuring we are prepared. ▪ Chad is also working on some cyber security pieces. ▪ There is a detailed schedule to ensure everyone is engaged in getting the system ready for February Go live.
DISCUSSION/REPORT: NEW BUSINESS	
a. Medical Assistant Apprentice Program	▪ Whitney Lak and Melissa Grimm are working to bring on more Medical Assistant Registered (MAR) staff. They need to be a Certified Nursing Assistant or have some medical training. Charter College has a program which costs about $23,000 and does not support employees who are working full time. Wenatchee Valley College's program is full time in the classroom for 9 months. ▪ Melissa found that Washington State has an apprentice program for MAR's and we have completed the application and been approved to be an apprentice site. This is a 12-15 month program. Students need 2000 paid hours, 300 unpaid hours for classroom time which employers are not allowed to pay students for. We have two slots for apprentices. One MAR has completed the application for the January 17th quarter start date. People can begin at the beginning of each quarter. For the June start we will be looking at non-clinical staff who may want to move into a clinical role. We will also reach out to a pool EMT who may be interested in the apprentice program. As soon as they are signed off by the mentor they can practice to the top of the MAC license. There are some skills that the clinic does not do, but the Lab and Radiology can provide that training. ▪ HRSA as a rural access hospital program for the Nurse Corps Loan Repayment Program. This program is for RN's.
b. CEO Review evaluation	▪ The Governance Committee has reviewed the documents and did not recommend any changes from last year. The rating was changed last year and Governance would like to see trends on the ratings for a couple years. ▪ The list of reviewers are staff who report to directly to Diane.
c. Set January Special Meeting date	▪ January 18th is the preferred date at 10:00 AM or later.
COMMITTEE REPORTS:	
a. Part Time Resident Advisory Council	▪ The committee was very interested in our upcoming Community Health Needs Assessment (CHNA). ▪ There was a question about would we ever open an urgent care clinic. ▪ The committee believes we should continue to look for new members even if we are meeting virtual in the Spring.
b. Medical Staff	▪ Melissa spoke with the medical staff about the Medical Assistant Apprentice Program. ▪ There was a good conversation around could we care for a COVID positive patient if we cannot find placement for them. We do have the necessary protocols and medication. The biggest challenge is nursing resources due to the amount of care needed and availability of staffing. ▪ There was also a discussion about closing the clinic the day after Thanksgiving. We will continue to look at this and determine a plan for next year.

c. Governance Committee	▪ There is a lot of work for next year's Governance committee. ▪ The committee reviewed the self-assessment survey and everyone was aligned. Succession planning is a big topic as well as Board education. ▪ Discussed changes in board committee assignments which will be discussed in December and assigned in January. ▪ Discussed a Resident Advisory Board and will look to the Governance committee to continue to explore this idea. If this is created it would take the place of community leader dinners. ▪ Diane has begun interviewing firms to assist with our CHNA and Strategic Plan and mission statement. We do have some COVID funding available for this work. ▪ Board education will be WSHA webinars but the committee is also encouraging commissioners to find interesting articles and lead an education session on something they have read or information from outside networking.
d. Quality Oversight Committee	▪ QOC has pushed some work to next year. There has been a lot of progress made, but some items have been pushed due to the number of priorities on everyone's plate. ▪ Reviewed the committee self-assessment survey and began working on the work plan for 2022.
e. WSHA Board	▪ Bruce is now on the WHSA board, along with Diane who is now the chair. ▪ The committee is mostly hospital CEO's from both large and small organizations. ▪ The three-year strategic plan was approved at the meeting. Policy and advocacy are big items of focus. ▪ Staffing and workforce shortages are concerns throughout the state. They will be looking for state funding for behavioral health and nursing education. ▪ There was a good discussion amongst CEO's on staffing ▪ State Advocacy Days will be virtual on February 1-2, 2022. ▪ Vaccine mandate is a very divisive topic and one of the most challenging issues the board has faced.
ACTION ITEMS: NEW BUSINESS	
a. Quality Assessment and Improvement Program	▪ The entire policy was rewritten and for that reason not presented in track changes. ▪ Bruce Williams moved to approve the Quality Assessment and Improvement Program Policy. ▪ Tom Baranouskas seconded the motion. ▪ Motion was approved.
b. Resolution 2021-06 2022 Budget Approval	▪ Helen Rayfield moved to approve Resolution 2021-06 approving the 2022 budget. ▪ Tom Baranouskas seconded the motion. ▪ Our attorney provided the language on the resolutions. This resolution repeals Resolution 2021-05 approved at the October board meeting. It did not contain all the necessary language. This resolution also includes language on the additional EMS funds the county is collecting to correct the error in collections from 2020. ▪ Motion was approved.
c. Resolution 2021-07 Regular Property Tax Levy Approval	▪ Tom Baranouskas moved to approve Resolution 2021-07, Regular Property Tax Levy. ▪ Mary Helen Mayhew seconded the motion. ▪ Motion was approved.
d. Resolution 2021-08 EMS Property Tax Levy Approval	▪ Tom Baranouskas moved to approve Resolution 2021-08 EMS Property Tax Levy. ▪ Helen Rayfield seconded the motion. ▪ Motion was approved
e. Resolution 2021-09 Approving signers on warrant accounts	▪ Tom Baranouskas moved to approve Resolution 2021-09 to update the list of approved warrant signers. ▪ The resolution removes the Chief Clinical Officer and adds the Chief Human Resources Officer. ▪ Mary Helen Mayhew seconded the motion. ▪ Motion was approved.
f. CM Succession Plan	▪ This is the organizational succession plan which is a living document that changes as staff changes. ▪ The board is currently made up of retired community members. Board meetings during the workday may make it harder for someone who works to attend, although the board has experimented with evening meetings in the past and had no better attendance. It may be time to consider this again. The composition of the board is important and having commissioners with different skill sets and from all geographic areas of the district is important.

	▪ Mary Helen Mayhew moved to approve the CM Succession Plan. ▪ Tom Baranouskas seconded the motion. ▪ Motion was approved.
g. 2022 Organizational Objectives	▪ The objectives are for the third year of our current strategic plan. Some 2021 goals have been rolled to 2022. ▪ Reviewed the long-term objective and the goals for 2022 for each of the four pillars: • Patient and Family Centered. • Financial Stewardship • Our People • Community Connections ▪ Mary Helen Mayhew moved to approve the 2022 Organizational Objectives. ▪ Bruce Williams seconded the motion. ▪ Motion was approved.
September Finance Report	▪ September's Net Margin was $360,000 compared to a budgeted Net Margin of $8,000. ▪ The budget did not include the additional EMS levy funds not collected in 2020 that are being collected over three years beginning in 2021. ▪ Gross revenue is $1.2 million YTD. We received $120,000 from the Murdock Foundation for a grant for the mobile clinic. ▪ Salaries and benefits are over budget partially due to an additional EMT shift that was unbudgeted for most of 2021 and the Temp Desk staff member which was unbudgeted. Professional fees are over budget for IT work, Accounting Temp and HIM outsourced work. The margin through September is $1.5 million. ▪ Cash receipts on patient accounts were strong and we received funds from the Foundation. ▪ Days in Net AR went down slightly. ▪ We received the interim cost report from DZA. We have a positive settlement of about $400,000, but with the Rural Health Clinic cap Medicare is not going to pay out any settlements due the complexity of calculating the cap. We have a settlement payment for our in-patient settlement of about $200,000. When the full cost report is completed in 2022, we will likely receive a settlement from Medicare. ▪ The Single Audit for CARES Act funds may take place in December. The documentation for this audit has already been completed. ▪ Marianne has talked with Kami Matzek of DZA about the 2022 Engagement Letter. ▪ Before the end of the month the budget will be submitted to the County. ▪ We will begin to see additional expenses with double time on some nursing shifts.
Administrator Report	▪ The Department of Health exit conference was good. We have not received our report yet and expect it any day. A work plan will be developed to correct noted deficiencies. ▪ Recruitment – several COO interviews have been completed. The ideal candidate has not been identified but we will include a couple candidates for second interviews. The process will be paused until after the first of the year to see if any new candidates apply. ▪ We received a signed contract from Samantha Linn, PA-C who will be the outreach provider. She is bilingual and knows sign language. She is a new graduate, but the providers are willing to put the work into mentoring her. She will work in the clinic for several months before going out in the mobile clinic. Her agreement commences December 1st and we will be working to ensure things are in place for when she starts at some time in early December. ▪ We have begun recruitment for a full-time Emergency Department (ED) physician. Dr. Barstad who was part-time resigned at the end of August. We are working on pulling some clinic providers from night Emergency Department schedule which will open up enough hours for another full-time ED provider. ▪ Dr. Jerome, Dr. Stirling, Dr. Richardson and Diane are continuing to meet to work through the process of how to build the provider schedule for the Emergency Department, clinic and hospital. The current plan being discussed would have an ED provider cover Mondays and the PA will see patients in the clinic. We are beginning Q1 with Dr. Richardson not covering the ED at night. This should allow him to open up his practice to new patients. ▪ The Medical Staff will be trialing meeting from 7:00 – 9:00 AM on the first Thursday of the month. The meeting will be compressed to meet the time constraints. ▪ Diane has attended four Our Valley Our Future meetings over the past eight weeks. The group took 30 priorities and ranked them and recommended twelve for focus. A lot of

	them affect social determinants of health. All of the healthcare facilities will be completing CHNA's about the same time and they will work on collaborating to see if there are similar areas of focus. ▪ We continue to participate in workforce expansion work with WSHA. Melissa just completed a survey to help understand what facilities are doing. The needs that have been identified are: more funding for teaching; higher wages for nursing educators; more teachers available and more rotations available for nursing students. Facilities need to connect with schools to determine what types of rotations are needed. ▪ In the legislature – there is proposed legislation around charity care and providing free care to anyone 200% of the federal poverty level of below. The proposed legislation would change that to 400% of the federal poverty level which would encompass a lot of the patients that rural facilities care for. There will be opportunity for WSHA to weigh in on this early in the session. It is very different for urban versus rural areas. Currently this only applies to hospital services, but the new legislation would expand this to all services provided by the facility. We currently extend the write off to patients in our rural health clinic. ▪ Our State Healthcare Authority is interested in redesigning payments. There is a model from Medicare called CHART, which is much like the other methods which have been considered. One or two hospitals in our region may be interested in a trial in our region. There was a webinar at a time when no one on our staff could attend. This model is currently optional and Diane will watch the webinars after they are released. She will continue to stay connected and get details on the plan. ▪ We are staying connected with the City on their healthy community work. The goal is to get agencies connected to provide information on projects that affect community health. ▪ The week of Thanksgiving Diane will be off Wednesday through Friday. ▪ The team has raised a lot of money for the Community Cupboard with a goal of $5500.
BOARD ACTION ITEMS	▪ Complete your timecards for November. ▪ There is a webinar on the post COVID board agenda at Noon today. ▪ Check e-mail at least three times per week, or more frequently if possible. ▪ Signature pages are being sent via DocuSign today. Please sign as soon as possible. ▪ Please provide Jill dates when you will be out of town and not checking email.
STRATEGIC QUESTION / MEETING EVALUATION / COMMISSIONER COMMENTS	▪ Reviewing the objectives for next year was very helpful.
ADJOURNMENT	▪ There being no further business, Tom Baranouskas moved to adjourn the meeting. ▪ Bruce Williams seconded the motion. ▪ The meeting was adjourned at 11:52 AM.

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