Educational Session Agenda
Wednesday, September 6, 2017

Call to Order: 3:30

Approve Agenda: 3:31

Patient Story: Brandie Manuel, Chief Patient Care Officer 3:32

Minutes: Action Requested 3:42
- August 16 Regular Session Minutes (pg. 2-4)

Required Approvals: Action Requested 3:50
- Medical Staff Credentials/Appointments/Reappointments (pg. 5)

Washington State Hospital Association Update: 3:55
- Chris Bandoli, Senior Vice President, Government Affairs

Strategic Plan 2017-2020: 4:25
- Mike Glenn, CEO and Katie Holmes, Consultant (pg. 6-12)

Board Reports: 4:45

Conclude: 4:55

This Regular Session will be officially audio recorded.
Times shown in agenda are estimates only.
Jefferson County Public Hospital District No.2
Board of Commissioners, Regular Session Minutes
Wednesday, August 16, 2017
Victor J. Dirksen Conference Room

Call to Order:
The meeting was called to order at 3:30pm by Commissioner Buhler. Present were Commissioners Buhler, Dressler, De Leo, Kolff, and Ready. Also present were Mike Glenn, Chief Executive Officer, Hilary Whittington, Chief Administrative Officer/Chief Financial Officer, Brandie Manuel, Chief Patient Care Officer, Lisa Holt, Chief Ancillary and Specialty Services Officer, Jenn Wharton, Chief Ambulatory and Medical Group Officer, Caitlin Harrison, Chief Human Resources Officer, Jackie Mossakowki, Executive Director, Nursing Services, Joe Mattern, MD, Chief Medical Officer, Kent Smith, DO, Medical Staff Director, and Alyssa Rodrigues, Administrative Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

Approve Agenda:
Commissioner Kolff made a motion to approve the agenda. Commissioner Dressler seconded.
Action: Motion passed unanimously.

Employee and Team of the Quarter:
Mike Glenn, CEO and Caitlin Harrison, CHRO introduced Employee of the Quarter, Mike Shaw and Team of the Quarter, Rehab Department.

Patient Story:
Brandie Manuel, Chief Patient Care Officer, explained some of the work that has happened at Jefferson Healthcare to improve access to primary Care and transitions of care since 2015 and shared a positive patient outcome form the work that has derived from the improved processes.

Minutes:
- August 2 Regular Session minutes
Commissioner Dressler made a motion to approve the August 2 Regular Session Minutes. Commissioner Ready seconded.
Action: Motion passed unanimously.

Required Approvals:
- July Warrants and Adjustments
- Resolution 2017-35 Cancel Warrants
Commissioner Dressler made a motion to approve July Warrants and Adjustment and Resolution 2017-35 Cancel Warrants as presented. Commissioner Kolff seconded the motion.
Action: Motion passed unanimously.
**Public Comment:**
No public comment was made.

**JeffCo Aquatic Coalition:** Jean Baldwin and Janis Fisler, JeffCo Aquatic Coalition Board Members presented a thank you from the Second Sunday Adult Swims and explained what they do and the increase of participation that they have seen at the pool. Jean Baldwin explained the health benefits of swimming and shared a story of a swimmer that goes to the pool.

Discussion ensued.

**Get with the Guidelines, Stroke Gold Plus Quality Achievement Award:**
Elizabeth Peterson, American Heart Association, Regional Director, Quality and Systems Improvement presented the American Heart Association, American Stroke Association, Get with the Guidelines, Stroke Gold Plus Award, and described what the achievement means.

**Jefferson County Proposition 1: Creating the Home Opportunity Fund Presentation to the Jefferson County Public Hospital District No. 2 Board of Commissioners:** No Action Requested
Bruce Cowan and Deborah Pederson, Citizens Committee, presented, explained, and asked for the support of the Jefferson County Public Hospital District #2 Commissioners for the Jefferson County Proposition 1: Creating the Home Opportunity Fund through passing Resolution 2017-36.

Discussion ensued.

**Public comment:**
Public comment was made.

**Financial Report:** Hilary Whittington, Chief Administrative Officer /Chief Financial Officer, presented the July financial report and Charge Comparison Review.

Discussion ensued.

**Administrator’s Report:** Mike Glenn, Chief Executive Officer, gave his administrator’s report regarding a Behavioral Health Update.

Discussion ensued.

Lisa Holt, Chief Ancillary and Specialty Services Officer gave a presentation on the Anti-Coagulation Services Update.

Discussion ensued.

Lisa Holt, Chief Ancillary and Specialty Services Officer announced that Jefferson Healthcare received a three year accreditation with commendation and earned the
highest level of commendation the state can be give in the first year of accreditation. She read aloud a few comments from the email received from the Commission on Cancer.

**Chief Medical Officer Report:** Joe Mattern, MD, Chief Medical Officer gave an update on the Accountable Care Organization Update.

Discussion ensued.

**Board Reports:**
Commissioner Kolff read aloud an email that Mark Secord sent to Citizens for Healthcare Access Group regarding Delta Dentals network bylaws and the importance of voting no on the bylaw changes that eliminates all funding for Delta Dentals Arcora Foundation. Commissioner Kolff mentioned this foundation does good work for supporting access to dental care and improving oral health statewide. There is a call for the public to contact your dentist and spread the message “Please vote no on the proposed changes to Delta Dentals bylaws by submitting your proxy by August 25, preserve the important charitable work that Deltas foundation does to improve oral healthcare.”

Discussion ensued.

Commissioner Buhler distributed the July 20, 2017 Jefferson County Board of Health Minutes.

**Conclude:**
Commissioner Dressler made a motion to conclude the meeting. Commissioner Kolff seconded the motion.

**Action:** Motion passed unanimously.

Meeting concluded at 6:41pm.

Approved by the Commission:

President of Commission: Jill Buhler ________________________________

Secretary of Commission: Marie Dressler ________________________________
FROM: Barbara York – Medical Staff Services
RE: 8-22-2017 Medical Executive Committee appointments/reappointments and annual policy review recommendations for Board approval 9-6-2017

C-0241
§485.627(a) Standard: Governing Body or Responsible Individual
The CAH has a governing body or an individual that assumes full legal responsibility for determining, implementing and monitoring policies governing the CAH’S total operation and for ensuring that those policies are administered so as to provide quality health care in a safe environment.

Interpretive Guidelines §485.627(a)
It is the responsibility of the governing body (or responsible individual) to appoint, with the advice of the medical staff, the individual practitioners to the medical staff. After considering medical staff recommendations, and in accordance with established CAH medical staff criteria and State and Federal laws and regulations, the governing body (or responsible individual) decides whether or not to appoint new medical staff members or to continue current members of the medical staff.

Recommended appointment to the active/courtesy/allied health provisional staff with privileges as requested:

1. Alawi, Aws, MD – Neurology/Tele-Stroke
2. Massaro, Allie, MD - Neurology/Tele-Stroke
3. Neher, Timothy MD – Diag. Radiology – was granted temporary privileges 8/11-9/6/17 to cover Dr. Koenig on vacation
4. Schwartz, David, DO – General Surgery
5. Stirling, Eric, MD – IM/Hospitalist and Emergency Medicine Provider
6. Sumner, Peter, DO – Neurology/Tele-Stroke

Recommended re-appointment to the allied health staff with privileges as requested:

1. Stickler-Ivie, PA-C Orthopedic Clinic

Recommended re-appointment to the active medical staff with privileges as requested

1. O’Keeffe, Gemma, MD - Hospitalist

Recommended re-appointment to the courtesy medical staff with privileges as requested:

1. Cheng, Stephanie MD – Tele-Radiology
2. Murray, John MD – Emergency Medicine
3. Squire, Michael MD – Tele-Radiology
4. Ondersma, Ross MD – Diagnostic Radiology

Satisfactory completion of provisional status: n/a

No annual policy review for this meeting.
Mission: Jefferson Healthcare is working to serve our community with personalized care and medical excellence.

Vision: Jefferson Healthcare will be the community’s first choice for quality care by providing exceptional patient care to every person we serve.

Values:
• Compassion
• Stewardship
• Integrity
• Respect
• Excellence
• Teamwork
*Overarching Goals:*

Jefferson Healthcare will:
- become a Top 100 Critical Access Hospital.
- capture 60% market share in East Jefferson County.
- be locally owned and operated.
- improve its Robert Wood Johnson, Health of the Community score.

* These are administrative goals the Board may or may not elect to include in the plan.

**Quality and Safety**
Goal: *Provide the Safest, Highest Quality Care of Any Hospital in the Region.*

Strategies:
1. Drive **best practice clinical care**.
2. Enhance the **culture of safety**.
3. Achieve **excellent clinical outcomes**.
4. Aligns care with the **patient’s goals**.
Quality and Safety

Goal: **Provide the Safest, Highest Quality Care of Any Hospital in the Region.**

**Metrics**
- Composite quality and safety score (Outpatient and Inpatient Core Measures, ACO/MIPS performance)
- Readmission rate - Inpatient, ER and Home Health
- Antimicrobial stewardship
- Hospice length of stay

**Targets**
- 90%
- Decrease over 2016 baseline
- Reduce inappropriate antibiotic use by 10%
- 3 months

People

Goal: **Recruit and Retain an Engaged, High Performing Workforce.**

**Strategies:**
1. **Hire** for fit.
2. **Develop** an engaged workforce.
3. Create a **culture of high performance**.
4. Promote a **thriving, rewarding provider practice** that nurtures the provider patient relationship.
People
Goal: **Recruit and Retain an Engaged, High Performing Workforce.**
Strategies:

**Metrics**
Create a People composite score made up of the following measures:
- Employee/provider engagement
- Employee-Would you recommend as place to work…
- Provider-Likelihood to continue affiliation- ……………
- Turnover rate or retention rate- ………………………
- Burnout rate- *(Maslach Inventory)* ………………………
- Time to fill open positions- ……………………………

**Targets**
- Top Quartile
- Top Quartile
- 10%
- Establish a base line year 1.
- Set baseline year one, target improvement over baseline.

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Service
Goal: **Deliver an Experience that Exceeds Patients’ and Families’ Expectations.**
Strategies:
1. Create an infrastructure that support **radically convenient access** to care.
2. Consistently deliver an **outstanding experience** with every encounter.
3. Improve **care navigation** for patients and their families.
4. Create **informed healthcare consumers** in the community.
Service
Goal: **Deliver an Experience that Exceeds Patients’ and Families’ Expectations.**

Metrics
Create a service composite score consisting of:
- Patient Satisfaction scores – Overall scores
- Likely to recommend
- Quiet at night
- Confidence and Trust in Provider
- Consistency of Communication
- Provider/Nurse
- Able to get appointment
- PICKER Access to care dimension
- Patient Advocate Reports
- Percent completed referrals

Targets
- Inpatient 75th percentile (PICKER)
- Top Quartile
- Top Quartile
- Top Quartile
- Top Quartile

Targets
- 30 days new patient, 1-14 days post hospital, 0-10 days established patient.
- 10% improvement over baseline by 2018, 25% by 2020
- 7 days open, 30 days close
- Set baseline year 1

Community Health
Goal: **Support a Healthier Community for Jefferson County**

Strategies:
1. **Work with partners** to implement CHIPS.
2. **Provide leadership** in the completion of a Community Health Assessment.
3. Advance an Employee Health program.
4. **Engage community partners** in advancing programs that support the community’s health.
5. Develop a community impact report.
Community Health

Goal: **Support a Healthier Community for Jefferson County**

**Metrics**
- Community Health assessment report
- Number or percent of ED transfers out of county
- Number or percent of preventative annual wellness visits
- Vaccination rates
- Increase the percent of women receiving prenatal care in first trimester

**Targets**
- On track with timeline 2018 CHA/CHIP
- Decrease from 2016 baseline
- Increase from 2016 baseline
- 90% children 19-35 months fully immunized by 2020
- 90% of JHC employees receive annual flu vaccine
- By 2010 13-15-year-olds meets Healthy People goals
- 90% of adults 65 or older will have at least one Pneumococcal Vaccination

Sustainability

Goal: **Position Jefferson Healthcare to Thrive as an Independent Organization in a Rapidly Changing Environment.**

**Strategies:**
1. Align the transition from Fee for Service to Value-Based care with reimbursement models.
2. Actively manage resources to ensure the long-term financial health of Jefferson Healthcare.
3. Pursue technology and facility solutions that advance care and operations.
4. Be a value oriented, financially high performing organization.
5. Continue to leverage the partnership with Washington Rural Health Collaborative.
6. Grow by expanding current services and developing new clinical programs and services.
**Sustainability**

**Goal:** Position Jefferson Healthcare to Thrive as an Independent Organization in a Rapidly Changing Environment.

**Metrics**

Create sustainability composite score made up of the following:

- Number of negative quarters (baseline 1 in 4) ............
- Days of Account Receivable .............................................
- Percent of net revenue for salaries, wages and benefit- (baseline is 64.7%) .........................................................
- Days of cash .................................................................
- Percent of departments meeting contribution margin budget. .................................................................
- Productivity .................................................................

Participate in at least one value based or cost saving activity through WRHC annually.

<table>
<thead>
<tr>
<th>Metrics</th>
<th>Targets</th>
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<tbody>
<tr>
<td>Number of negative quarters</td>
<td>Zero</td>
</tr>
<tr>
<td>Days of Account Receivable</td>
<td>Less than 45</td>
</tr>
<tr>
<td>Percent of net revenue for salaries, wages and benefits (baseline 64.7%)</td>
<td>62% (90-12/2018, 100-12/2019, 110-12/2020)</td>
</tr>
<tr>
<td>Days of cash</td>
<td>90% quarterly</td>
</tr>
<tr>
<td>Percent of departments meeting contribution margin budget</td>
<td>Greater than 95%</td>
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<tr>
<td>Productivity</td>
<td></td>
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**Questions & Comments**