

Jefferson County Public Hospital District No.2
Board of Commissioners, Regular Session Minutes
Wednesday, July 25, 2018
Victor J. Dirksen Conference Room

Call to Order:

The meeting was called to order at 2:00pm by Board Chair Buhler. Also present were Commissioners Dressler, McComas, Ready, and Kolff by telephone. Mike Glenn, CEO, Hilary Whittington, Chief Administrative Officer/ Chief Financial Officer, Brandie Manuel, Chief Patient Care officer, Caitlin Harrison, Chief Human Resources Officer, and Alyssa Rodrigues, Administrative Assistant were also in attendance. This meeting was officially audio recorded by Jefferson Healthcare.

Education:

Brandie Manuel, Chief Patient Care Officer and Caitlin Harrison, Chief Human Resources Officer presented on the Methodology of Patient and Employee Satisfaction Scores.

Discussion ensued.

Break:

Commissioners recessed for break at 2:24pm.

Commissioners reconvened from break at 3:30pm.

Approve Agenda:

Commission Buhler made an amendment to the agenda to move the Resolution 2018-11 WRHC Interlocal Agreement to follow the Financial Report.

Commissioner Dressler made a motion to approve the agenda as amended.

Commissioner McComas seconded.

Action: Motion passed unanimously.

Patient Story:

Chief Nursing Officer, Joyce Cardinal read a patient story aloud. In April 2017 the patient had an abnormal screening mammogram and was called back to Diagnostic Imaging department to get a more definitive diagnostic mammogram with an ultrasound. Patient had a diagnostic mammogram and the radiologist recommended a biopsy with an MRI.

Later that year Diagnostic Imaging staff discovered that the patient had never followed up and obtained the further test. The technician contacted the patient and reminded her about the need for further investigation. The patient did then follow up in November when breast cancer was diagnosed and treated. Patient returned in April 2018 for her routine annual mammogram, the result being a normal post-surgery mammogram.

Randy Holeman, Director of Radiology stated that the Mammography department does a great job but used to be hindered by the manual tracking process, which could lead them to miss or overlook patients who failed to follow the radiologists' recommendations.

In April 2017 Diagnostic Imaging staff started using an EPIC tracking module which is a great addition, allowing the staff timelier reporting for exams and follow up. The electronic tracking system facilitated prompt follow up for this patient's care, which ultimately helped the patient get an earlier invasive cancer diagnosis and treatment. Without the electronic tracking system and diligence of the techs the patient may not have been seen for several more months.

Minutes:

- June 15 Special Session
- June 20 Special Session
- June 27 Special Session

Commissioner Kolff made an amendment to the June 20 Special Session to remove himself from the attendees list. Commissioner Dressler made a motion to approve the June 15 Special Session, June 20 Special Session, and June 27 Special Session as amended. Commissioner McComas seconded.

Action: Motion passed unanimously.

Required Approvals: Action Requested

- June Warrants and Adjustments
- Resolution 2018-09 Cancel Warrants
- Resolution 2018-10 Surplus Equipment
- Medical Staff Credentials/Appointments/Reappointments
- Medical Staff Policy

Commissioner McComas made a motion to approve Medical Staff Credentials/Appointments/ Reappointments, Medical Staff Policy, June Warrants and Adjustments, Resolution 2018-09 Cancel Warrants, Resolution 2018-10 Surplus Equipment. Commissioner Ready seconded.

Action: Motion passed unanimously.

Public Comment:

Public comment was made.

Financial Report:

Hilary Whittington, CFO/CAO gave the June financial report.

Discussion ensued.

Resolution 2018-11 WRHC Interlocal Agreement

Commissioner Dressler made a motion to approve Resolution 2018-11 WRHC Interlocal Agreement. Commissioner Ready seconded.

Action: Motion passed unanimously.

Quality Report:

Brandie Manuel, Chief Patient Care Officer, presented the Quality report.

Discussion ensued.

Administrative Report

Mike Glenn, CEO, presented the administrative report.

Discussion ensued.

Chief Medical Officer Report:

Dr. Joe Mattern, Chief Medical Officer, presented the CMO report which included updates on the credentialing committee retreat, ACO, MAT Training, med staff meetings, and staffing.

Board Business:

Commissioner Buhler distributed the Jefferson County Board of Health Minutes.

Meeting Evaluation

Commissioners evaluated the meeting.

Conclude:

Commissioner Dressler made a motion to conclude the meeting. Commissioner McComas seconded the motion.

Action: Motion passed unanimously.

Meeting concluded at 4:45pm.

Approved by the Commission:

Chair of Commission: Jill Buhler _____

Secretary of Commission: Marie Dressler _____



Patients, Providers and Employees

It's more than satisfaction.

July 25, 2018





How much do these surveys matter?

The answer? A lot.

Why is patient engagement so important?

Is it about money? No. Not yet.

It's who we are.

Patient engagement = Safer Patients

Research shows that patient engagement positively impacts patient engagement and improves patient safety!

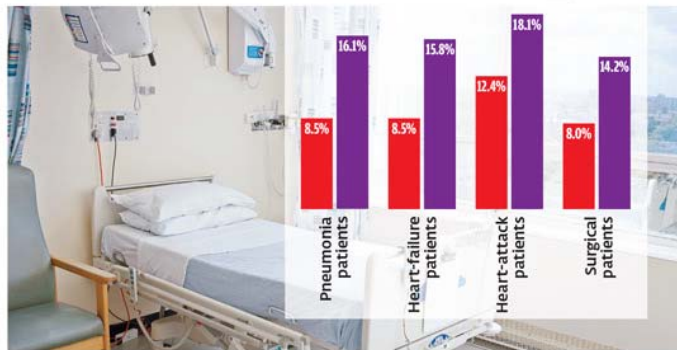


HOW YOUR HOSPITAL CAN MAKE YOU SICK

BY THE NUMBERS

The hospital you choose really matters

Death rates are much higher in some than in others.



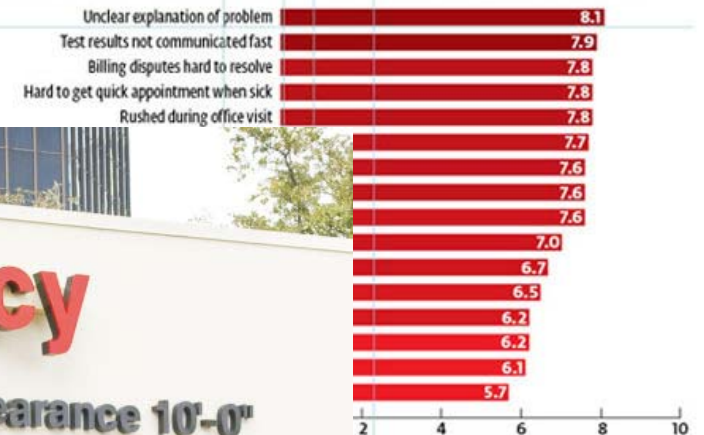
Compares the average death rates for high-rated and low-rated hospitals, for patients admitted with heart attack, heart failure, or pneumonia, and for surgery patients with serious, treatable complications. Data come from the Centers for Medicare & Medicaid Services for patients 65 and older.

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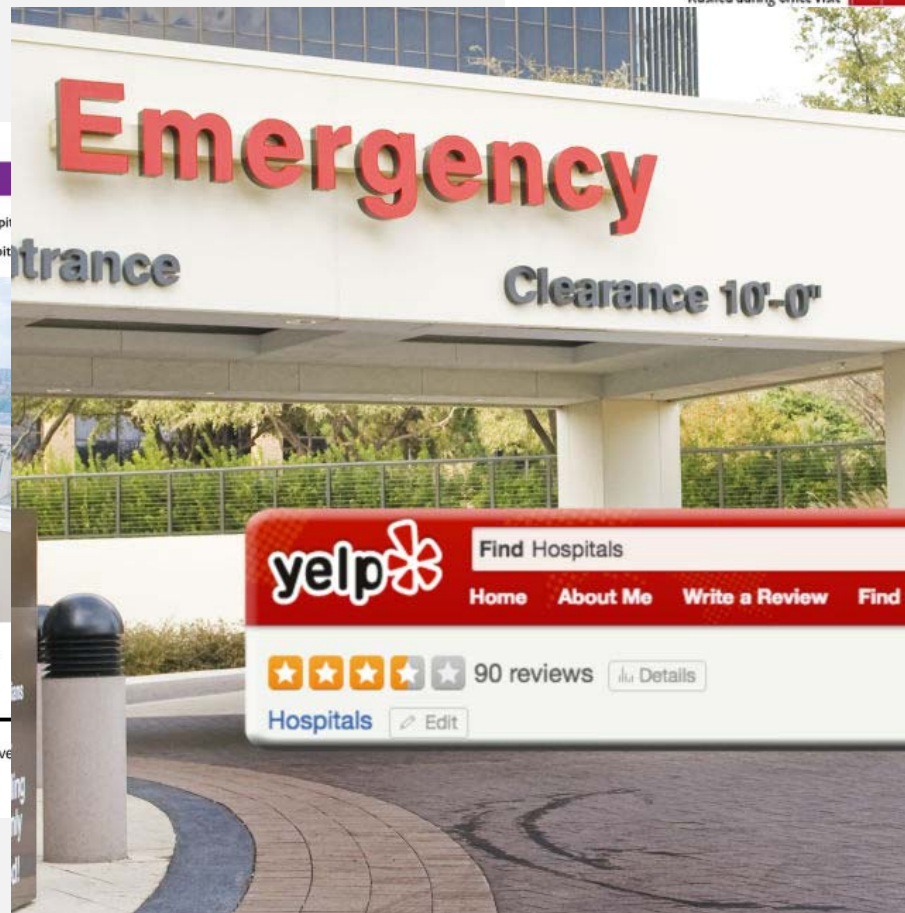
Gripe-o-meter

Scores are based on a 10-point scale, with 10 being most bothersome.



Differences of 0.4 points or less are not meaningful.

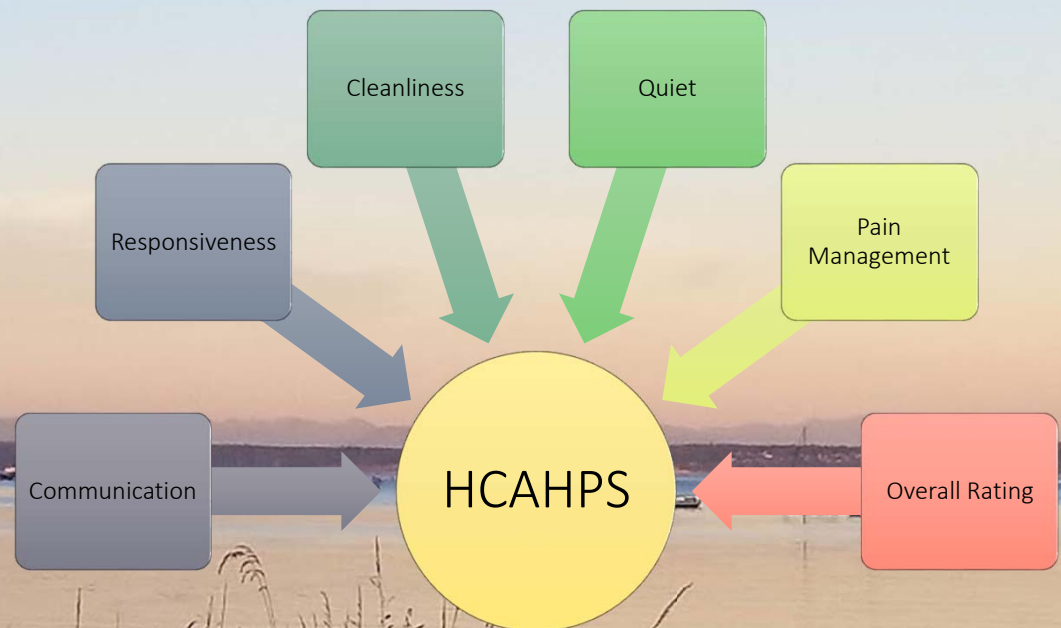
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More acronyms...a word about how they are reported.

- Hospital Consumer Assessment of Healthcare Providers and Systems = HCAHPS

- HCAHPS
- CGCAHPS
- OASCAHPS
- HHCAHPS
- Outpatient Rehab
- Outpatient Testing



What is
specifically
being asked?





How does the reporting work?

From survey to data and data to action...

The Survey Process.

Surveys

- Files are submitted to our survey vendor, NRC Health
- Two wave methodology is used
- Surveys sent based on response rates

Data

- Returned surveys analyzed and entered into tool
- Service alerts when appropriate
- Data continues to be updated until survey period ends

Action

- Monthly reports to leadership
- Data is used to drive improvement and engage staff
- NRC reports the data to CMS for public reporting



Satisfaction is **not** our Goal

Satisfaction and Loyalty are very different.

Survey Results

- Are based on a loyalty score – not satisfaction
- A loyalty score is a score of 9 or 10, or 'always'
- A score of 8 means that I'm pretty happy, so why doesn't that count?



A decorative collage of hexagonal shapes on the left side of the slide. The largest hexagon is a solid blue. Below it are several smaller hexagons containing nature photos: a forest, a lake with a rock, and a body of water with a forested shore. The main background of the slide is a large photo of a calm lake reflecting a blue sky with white clouds, bordered by a forest.

Provider and Employee Engagement

"Always treat your employees exactly as you want them to treat your best customers." –Stephen R. Covey

Provider Engagement

Maslach Burnout Inventory

- Leading measure of burnout, designed specifically for Medical Personnel
- What/who does it assess?
 - The individual provider employed by Jefferson
 - Designated Groups
 - Hospital Providers
 - Medical Group Providers
 - Specialty Providers
- What does it address?
 - Emotional Exhaustion
 - Depersonalization
 - Personal Accomplishment
- Helps to build professional goals



Employee Engagement Survey

National Research Corporation (NRC) Picker

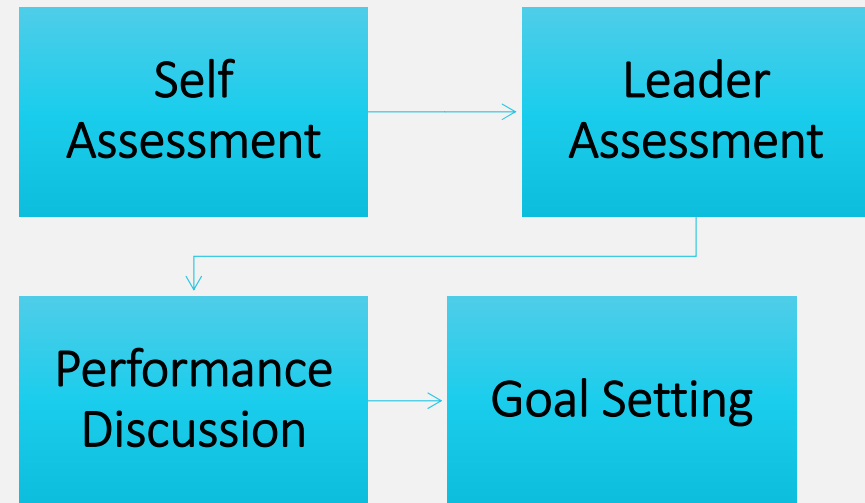
- Who?
 - All staff: leaders, providers, front-line
- Purpose and Design
 - Staff provides the organization with feedback
 - Benchmarking every two years
 - Gives organization guidance on where to focus
- Sample Questions:
 - Would you recommend us as a place to work?
 - Are you excited to come work?
 - Are you inspired to meet your goals at work?



Leader and Employee Evaluation

Annual Performance Evaluation

- For all staff members of Jefferson Healthcare
- Why? Aren't we doing lots of other ones??
 - Provides the opportunity for real evaluation of an employee's past year and opportunities for improvement
 - What does it address?
 - Organizational Values
 - Job Competencies
 - Job Standards
 - Leadership Skills
- Helps to build professional goals and development plans for staff



Finally – our why.

Engaged staff and providers are the foundation for creating engaged patients.





Questions?

Jefferson Healthcare

Finance Report

July 25, 2018

Hilary Whittington, CAO/CFO

June 2018

Education – the budget process

- ***Already happened:***

- budget schedule and capital assets planning tools sent to leaders

- ***Month of July:***

- meetings with leadership to review the budget process (Finance 360)

- ***Late July:***

- budget packets distributed to leaders

- ***Early August:***

- budget prep with leaders and their SLG members

- ***Mid-August to late September:***

- budget meetings

- ***Mid-September:***

- preliminary review of capital requests

- ***Early October:***

- capital rodeo and SLG budget review

- ***November 7:***

- “budget workshop” special meeting

- ***November 28:***

- operating and capital budget hearing

June 2018

Service Line Highlight – Surgery Center



Resources:

- Surgeon available for additional scope appointments
- Additional Endoscopy RN to handle service line increase



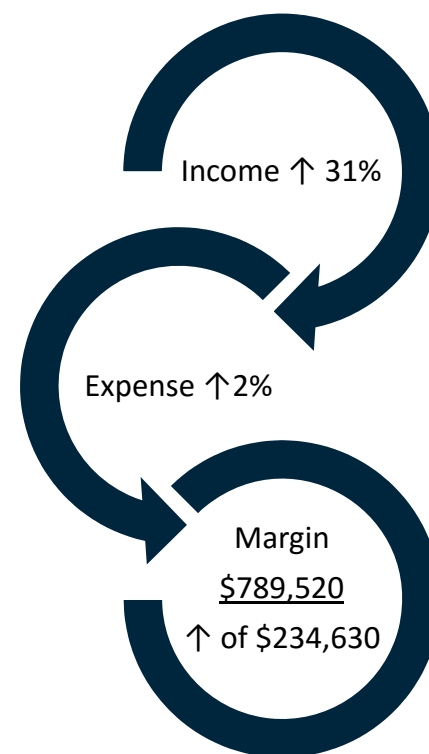
FTE Management:

- Cross training to increase efficiencies
- Effective use of low census and reduction of overtime



Teamwork and accountability:

- Working as a team to identify weaknesses, address issues and stay accountable.



June 2018

Operating Statistics

<u>STATISTIC DESCRIPTION</u>	<u>JUN ACTUAL</u>	<u>JUN BUDGET</u>	<u>% VARIANCE</u>	<u>YTD ACTUAL</u>	<u>YTD BUDGET</u>	<u>% VARIANCE</u>
FTEs - TOTAL (AVG)	540	585	8%	543	585	7%
ADJUSTED PATIENT DAYS	1,828	2,102	-13%	12,228	12,679	-4%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	71	94	-24%	492	568	-13%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	282	351	-20%	1,998	2,116	-6%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	353	461	-23%	2,537	2,780	-9%
SURGERY CASES (IN OR)	98	99	-1%	594	597	-1%
SPECIAL PROCEDURE CASES	76	99	-23%	414	597	-31%
LAB BILLABLE TESTS	16,518	18,505	-11%	108,334	111,644	-3%
TOTAL DIAGNOSTIC IMAGING TESTS	2,653	2,945	-10%	15,792	17,773	-11%
MEDS DISPENSED	20,248	22,999	-12%	136,646	138,760	-2%
RESPIRATORY THERAPY PROCEDURES	2,828	3,647	-22%	19,624	22,006	-11%
REHAB/PT/OT/ST RVUs	8,347	6,849	22%	51,289	41,323	24%
ER CENSUS	1,029	1,095	-6%	6,227	6,608	-6%
TOTAL RURAL HEALTH CLINIC VISITS	5,406	7,055	-23%	33,477	42,566	-21%
TOTAL SPECIALTY CLINIC VISITS	3,110	3,342	-7%	18,693	20,155	-7%
HOME HEALTH EPISODES	65	66	-2%	363	398	-9%
HOSPICE CENSUS/DAYS	1,103	865	28%	6,346	5,218	22%

June 2018

Income Statement Summary

	June 2018 Actual	June 2018 Budget	Variance Favorable/ (Unfavorable)	%	June 2018 YTD	June 2018 Budget YTD	Variance Favorable/ (Unfavorable)	%	June 2017 YTD
Operating Revenue									
Gross Patient Service Revenue	18,164,519	19,616,834	(1,452,316)	-7%	113,741,516	118,354,967	(4,613,451)	-4%	103,012,357
Revenue Adjustments	9,448,841	10,645,572	1,196,731	11%	62,213,774	64,228,322	2,014,548	3%	56,149,194
Charity Care Adjustments	204,815	120,948	(83,867)	-69%	1,300,908	729,722	(571,186)	-78%	484,307
Net Patient Service Revenue	8,510,862	8,850,314	(339,451)	-4%	50,226,833	53,396,923	(3,170,090)	-6%	46,378,857
Other Revenue	453,189	409,763	43,426	11%	2,646,742	2,472,241	174,502	7%	2,364,304
Total Operating Revenue	8,964,052	9,260,077	(296,025)	-3%	52,873,576	55,869,164	(2,995,588)	-5%	48,743,161
Operating Expenses									
Salaries And Wages	4,491,036	4,648,011	156,975	3%	26,610,959	28,043,017	1,432,058	5%	23,950,424
Employee Benefits	1,087,487	1,170,896	83,410	7%	6,598,993	7,064,412	465,419	7%	6,071,663
Other Expenses	3,204,641	3,273,691	69,050	2%	20,011,116	19,751,278	(259,838)	-1%	17,911,241
Total Operating Expenses	8,783,163	9,092,598	309,435	3%	53,221,068	54,858,707	1,637,639	3%	47,933,328
Operating Income (Loss)	180,888	167,479	13,410	8%	(347,492)	1,010,457	(1,357,949)	-134%	809,833
Total Non Operating Revenues (Expenses)	(37,470)	(28,917)	(8,553)	-30%	(46,139)	(174,465)	128,326	74%	383,485
Change in Net Position (Loss)	143,418	138,562	4,856	4%	(393,632)	835,992	(1,229,623)	-147%	1,193,317

June 2018

Projection

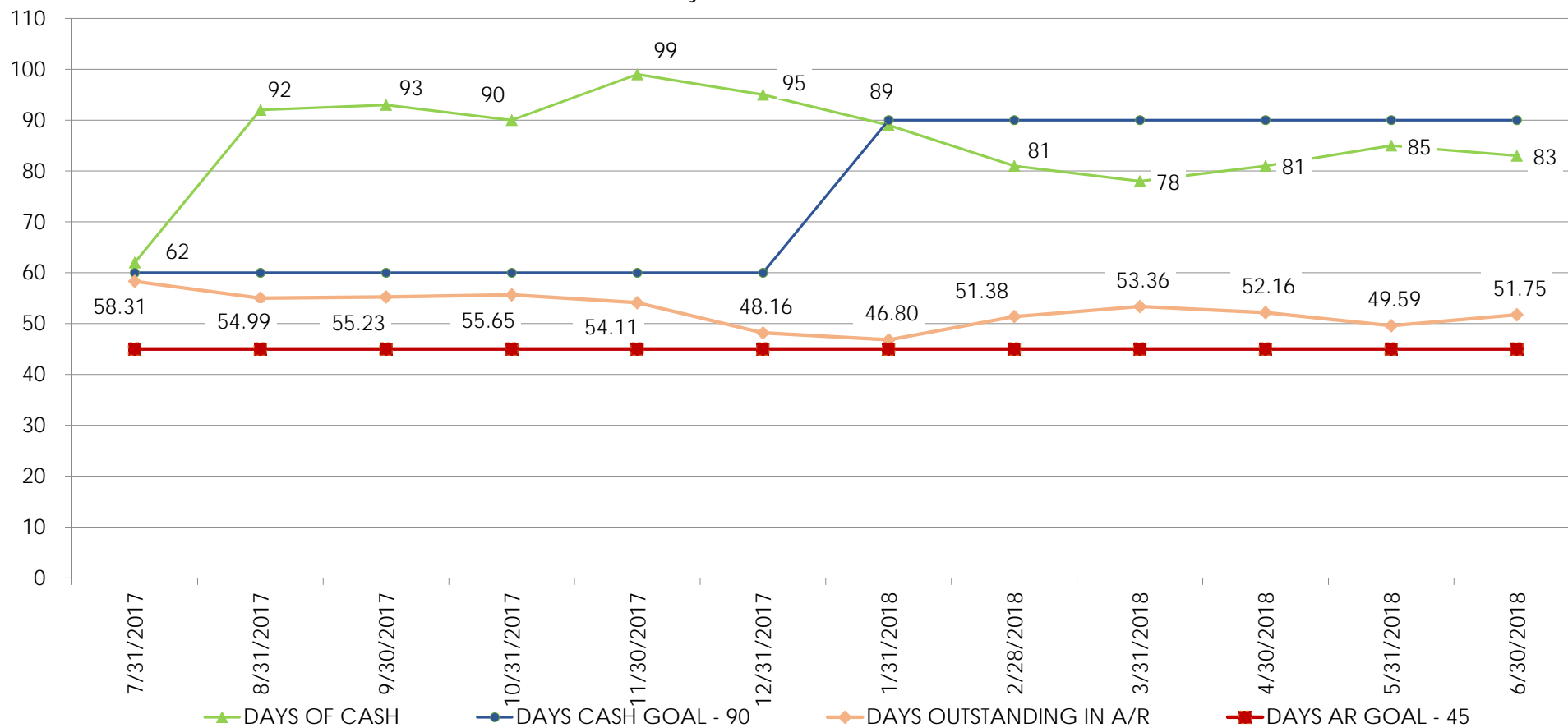
REV average	100.61%	90.99%	102.60%	93.03%	102.02%	106.30%	98.47%	103.98%	97.73%	105.94%	101.63%	102.00%
EXP average	96.97%	92.83%	99.79%	97.81%	100.41%	98.02%	97.77%	99.51%	97.74%	102.00%	103.30%	108.00%

	31	28	31	30	31	30	31	31	30	31	30	31			
For Month Ending:	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	FORECAST	FORECAST	FORECAST	FORECAST	FORECAST	FORECAST	ANNUAL	ANNUAL	ANNUAL
June 30, 2018	1	2	3	4	5	6	7	8	9	10	11	12			(FAVORABLE)/ UNFAVORABLE
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	FORECAST	BUDGET	VARIANCE
Total Gross Revenue	(19,970,547)	(17,590,835)	(20,080,894)	(18,004,518)	(19,930,210)	(18,164,524)	(18,666,119)	(19,668,113)	(18,578,736)	(20,087,336)	(19,385,676)	(19,484,551)	(229,612,059)	(238,671,719)	9,059,661
Total Revenue Adjustments	10,818,721	9,674,103	11,526,445	10,301,093	11,540,665	9,653,656	10,423,393	9,982,919	10,252,429	11,084,930	10,697,729	10,752,291	126,708,374	130,992,796	(4,284,422)
Net Patient Service Revenue	(9,151,826)	(7,916,732)	(8,554,449)	(7,703,425)	(8,389,545)	(8,510,868)	(8,242,726)	(9,685,194)	(8,326,306)	(9,002,406)	(8,687,947)	(8,732,259)	(102,903,684)	(107,678,923)	4,775,239
Total Operating Revenues	(9,572,397)	(8,243,708)	(8,977,805)	(8,242,706)	(8,872,916)	(8,964,057)	(8,677,083)	(10,142,868)	(8,758,630)	(9,469,834)	(9,139,049)	(9,185,661)	(108,246,714)	(112,664,383)	4,417,670
Total Operating Expenses	9,299,007	8,342,935	9,396,690	8,694,861	8,704,434	8,783,168	8,671,972	8,798,366	8,636,609	8,990,511	9,123,338	9,567,022	107,008,913	110,626,717	(3,617,804)
Operating (Income) Loss	(273,390)	99,227	418,885	452,155	(168,482)	(180,889)	(5,111)	(1,344,502)	(122,021)	(479,323)	(15,711)	381,361	(1,237,800)	(2,037,666)	799,865
Total Non Operating Revenues	16,518	37,247	(2,428)	(55,428)	12,760	37,469	7,518	7,627	7,487	7,794	7,909	8,294	92,767	351,822	(259,055)
(Income) or Loss	(256,872)	136,474	416,457	396,727	(155,722)	(143,420)	2,407	(1,336,875)	(114,534)	(471,529)	(7,802)	389,655	(1,145,033)	(1,685,844)	540,811

June 2018

Cash and Accounts Receivable

Days Cash and Accounts Receivable



June 2018

Board Financial Report

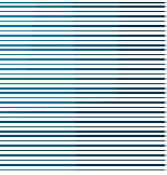
Dept.	Department Description	Rev/Exp	Account	Account Description	June Actual	June Budget	June Variance	2018 to Date Actual	2018 to Date Budget	2018 to Date Variance
8612	BOARD	Exp	600010	MANAGEMENT & SUPERVISION WAGES	4,218.00	4,498.00	280.00	26,778.00	27,135.00	357.00
			602300	CONSULT MNGMT FEE	1,546.00	-	(1,546.00)	13,026.00	-	(13,026.00)
			602500	AUDIT FEES	14,651.00	3,288.00	(11,363.00)	37,239.00	19,836.00	(17,403.00)
			604200	CATERING	83.00	159.00	76.00	616.00	962.00	346.00
			604500	OFFICE SUPPLIES	-	24.00	24.00	1.00	144.00	143.00
			604800	MINOR EQUIPMENT	-	-	-	591.00	-	(591.00)
			604850	COMPUTER EQUIPMENT	-	80.00	80.00	-	481.00	481.00
			606500	OTHER PURCHASED SERVICES	-	822.00	822.00	(250.00)	4,959.00	5,209.00
			609400	TRAVEL/MEETINGS/TRAINING	1,121.00	1,644.00	523.00	8,634.00	9,918.00	1,284.00
		Exp Total			21,619.00	10,515.00	(11,104.00)	86,635.00	63,435.00	(23,200.00)
	BOARD Total				21,619.00	10,515.00	(11,104.00)	86,635.00	63,435.00	(23,200.00)

July 2018

Preview – (*as of 11:59pm 07/23/18)

- **\$18,048,750 in HB charges**
 - Average: \$601,686/day (HB only)
 - Budget: \$642,350/day
- **\$7,387,500 in HB cash collections**
 - Average: \$258,944/day (HB only)
 - Goal: \$289,057/day
- **53.6 Days in A/R**
- **Questions**

Resolution: WRHC interlocal agreement



Patient Safety & Quality Report

July 25, 2018

Brandie Manuel

Chief Patient Care Officer

Agenda



Current Performance

- Acute Care
- Emergency
- Clinics
- Outpatient (Home Health, Testing, Rehab)

Department Highlight: Emergency Department

Current Activities and Strategies

Patient Experience: Inpatient (HCAHPS)

Overall the inpatient setting continues to do well in comparison with peer hospitals, exceeding the NRC Average score.

Current areas of focus:

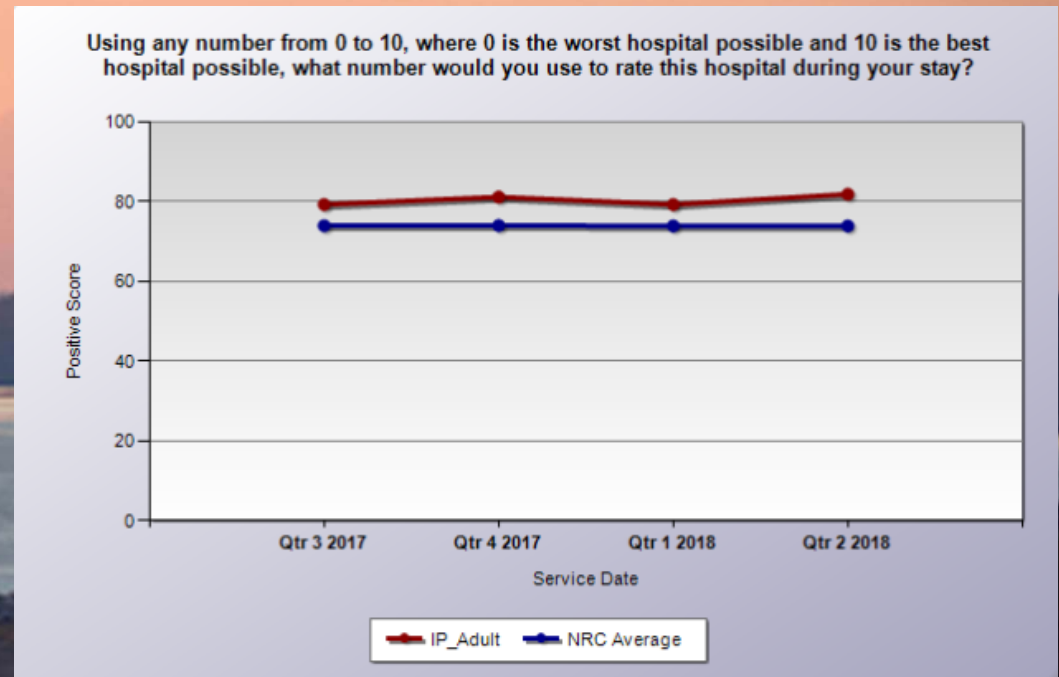
- *Communication*
- *Quiet at Night*

Patient Comments:

"After receiving care at both Jefferson then XXX, I felt more like a family member than a bed #. I have great respect & appreciation for all the caregivers I met during my stay!"

"I was treated very well & with compassion esp. by the nursing staff. I was grateful for the care I received during a very stressful time."

"I got the best care at this hospital than any hospital I've been to."



		Qtr 3 2017	Qtr 4 2017	Qtr 1 2018	Qtr 2 2018
IP_Adult	Positive Score	79.2%	81.1%	79.2%	81.8%
	n-Size	77	90	77	55
NRC Average	Positive Score	73.9%	74.0%	73.9%	73.9%
	n-Size	591,252	587,636	585,224	585,224

Emergency Department

The Emergency Department has continued to make improvements, and in the second quarter has exceeded the top Quartile score.

Focus areas:

- Communication
- Wait times/Throughput

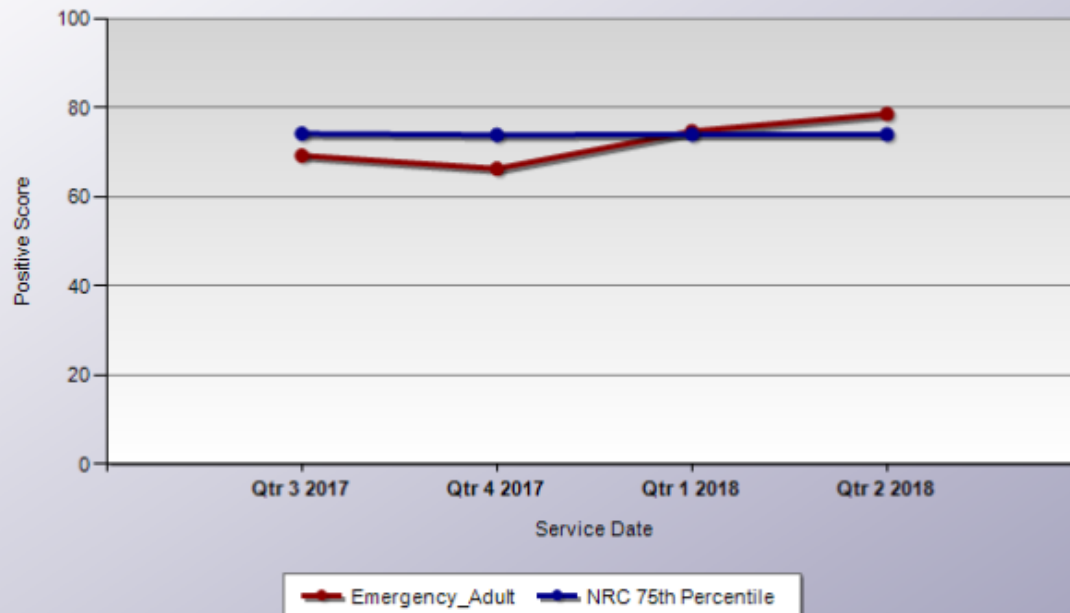
Patient Comments:

"I have avoided your ER due to a bad previous experience... You can thank Dr. Nick, for changing my opinion some."

"Dr. Sherman was excellent!"

"Everyone was very friendly and caring and helpful!"

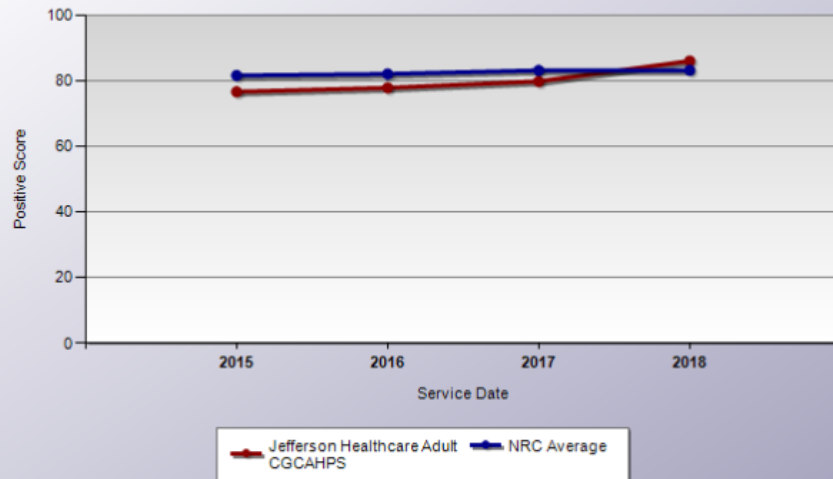
Using any number from 0 to 10, where 0 is the worst facility possible and 10 is the best facility possible, what number would you use to rate this emergency department?



		Qtr 3 2017	Qtr 4 2017	Qtr 1 2018	Qtr 2 2018
Emergency_Adult	Positive Score	69.2%	66.3%	74.7%	78.6%
	n-Size	91	89	79	70
NRC 75th Percentile	Positive Score	74.2%	73.9%	74.0%	74.0%
	n-Size	260,546	256,485	247,562	247,562

Outpatient Clinics (Primary Care and Specialty Clinics) - CGCAHPS

Using any number from 0 to 10, where 0 is the worst provider possible and 10 is the best provider possible, what number would you use to rate this provider?



		2015	2016	2017	2018
Jefferson Healthcare Adult CGCAHPS	Positive Score	76.6%	77.8%	79.8%	86.0%
	n-Size	1,531	1,051	1,351	600
NRC Average	Positive Score	81.6%	82.1%	83.1%	83.2%
	n-Size	216,936	82,199	64,553	67,324

The clinics have demonstrated consistent improvement in their overall rating – with an average score exceeding the NRC Average in the Second Quarter.

Primary Care Focus:

- Patient Access

Specialty Clinic Focus:

- Communication

Patient Comments:

Primary Care

"Corey Asbell has been extremely important in my health issues the last few years + I appreciate his knowledge, attitude, and direction!"

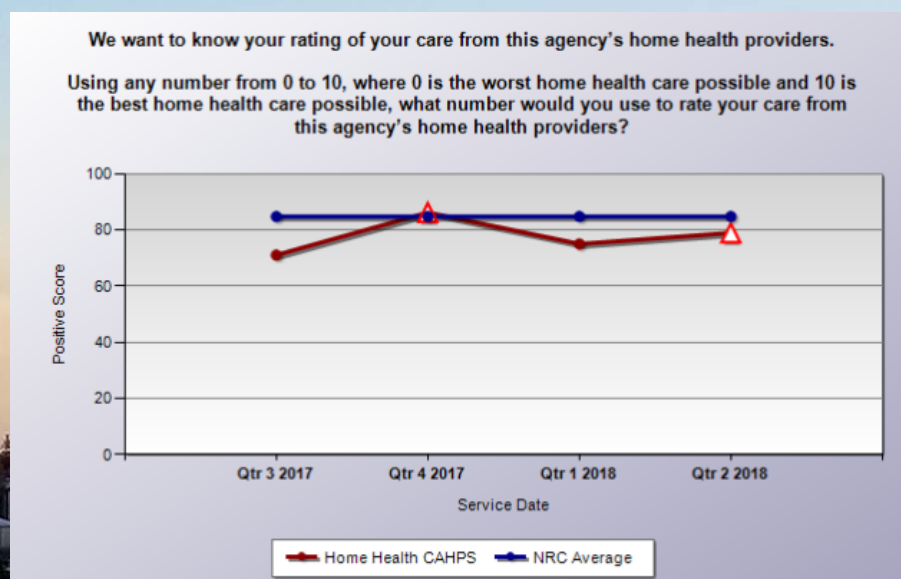
"Excellent nurse - professional + knowledgeable"

Specialty Clinics:

"Dr. Naumann has excellent bedside manners. He listens well and respects my decisions, while explaining my options thoroughly."

Great Staff - kind & compassionate.

Home Health (HHCAHPS)



		Qtr 3 2017	Qtr 4 2017	Qtr 1 2018	Qtr 2 2018
Home Health CAHPS	Positive Score	71.1%	86.2% μ	75.0%	78.9% μ
	n-Size	38	29	40	19
NRC Average	Positive Score	84.8%	84.8%	84.8%	84.8%
	n-Size	59,992	58,100	56,376	56,376

Second quarter showed improvement, though YTD is slightly lower than 2017

Focus Areas:

- Communication
- Medication Reconciliation

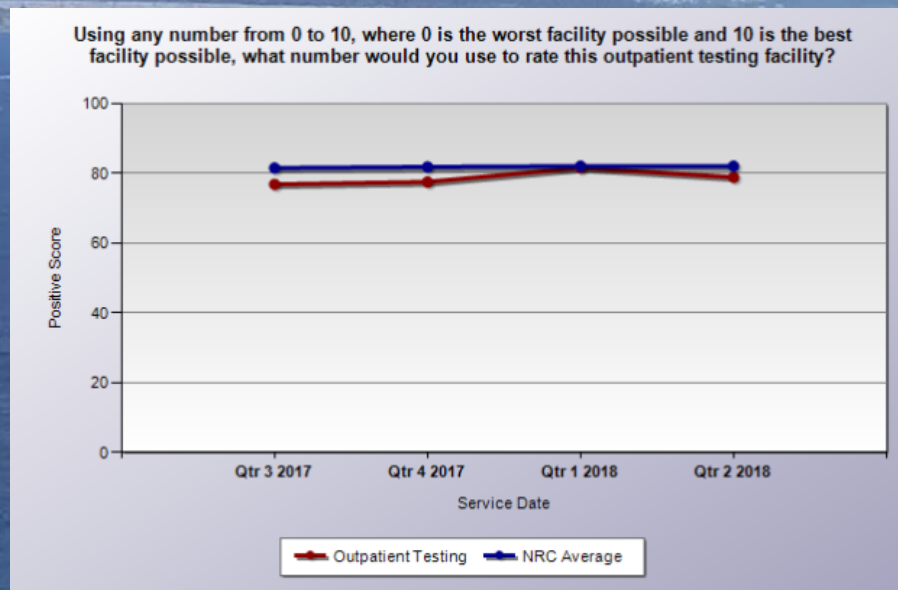
Patient Comments:

"My 2 PTs were a real plus to my home recovery. Always encouraging me to press forward, but not too fast. Some of the tools they have given me I hope to use forever."

"Excellent care from great staff."

"I think this is my second survey! Problems getting medicare to pay!"

Outpatient Testing



		Qtr 3 2017	Qtr 4 2017	Qtr 1 2018	Qtr 2 2018
Outpatient Testing	Positive Score	76.8%	77.5%	81.5%	78.8%
	n-Size	207	200	222	137
NRC Average	Positive Score	81.5%	81.8%	82.0%	82.0%
	n-Size	348,439	356,998	345,834	345,834

- Second quarter slightly lower than the First Quarter
 - Highest scores in Imaging
- Focus Areas:
 - Follow up
 - Communication

Patient Comments:

"Glad we have Jefferson Healthcare here in Port Townsend!!"

"Most of the 'front office' staff could use some inspiration and enthusiasm. Clearly the facility is yet to get its 'sea legs.'"

"This is about the best care I've ever received. No complaints."

Highlight: *Emergency Department*



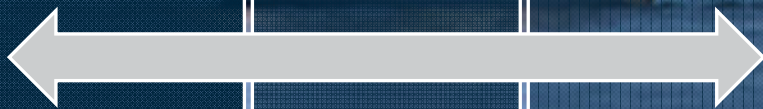
Engagement



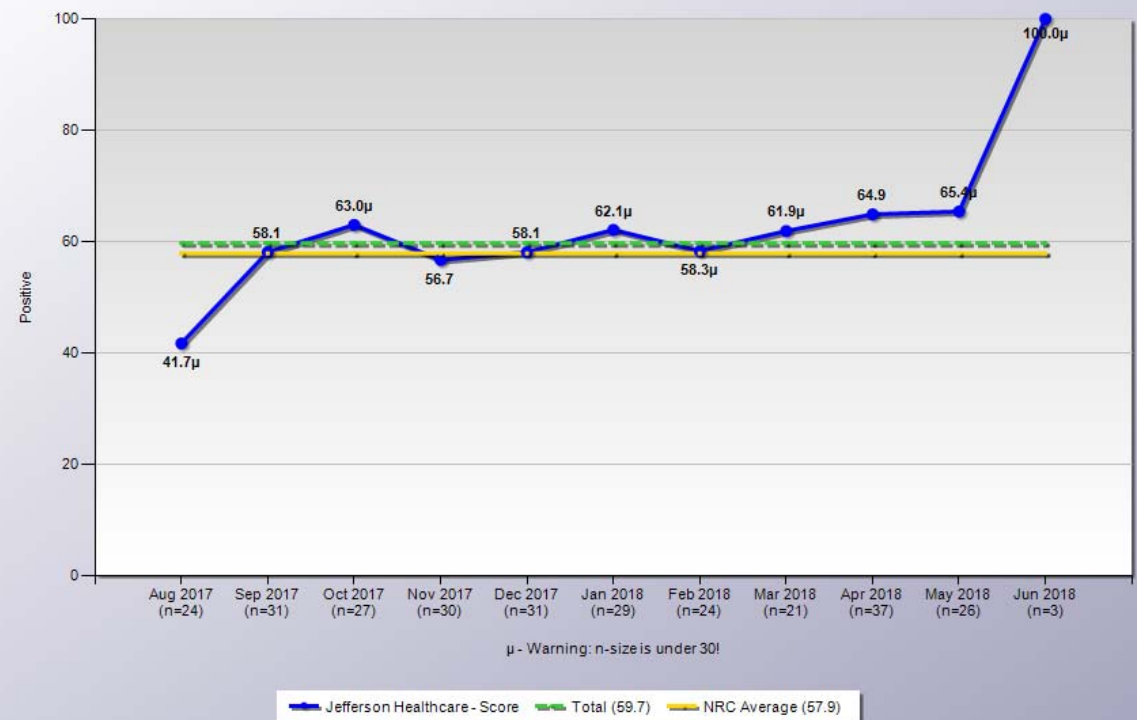
'Flipped the Status Quo'



Communication,
Feedback,
transparency



ED-A: Saw provider in a timely manner



- Time from arrival to provider decreased by 5 minutes in June.
- Throughput times (arrival to discharge) for patients being discharged decreased by 16 minutes in June.
 - Continues to be a work in progress

Strategies and Next Steps



Engagement

- Staff Members
- Leaders
- Providers
- PFAC



Patient Led Care

- Patient Directed Goals
- Improved Communication
- Shared Decision Making
- TeamSTEPPS training and application



Best Practice Alerts

- Service Excellence Committee
- Input from Leaders
- Connecting with the 'why'

Jefferson Healthcare

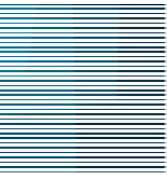
Administrative Report

July 25, 2018

Mike Glenn, CEO

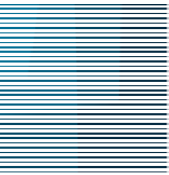
Chief Nursing Officer Recruitment Process

- Interviewed 3 outstanding CNO candidates.
- Reviewing interview feedback, notes, and observations.
- Asking follow up questions.
- Plan to select final candidate and schedule 2nd interview.



Labor Negotiations

- 3 labor agreements expire in October 2018.
- Jefferson Healthcare negotiating team has been reviewing agreements and preparing for negotiating sessions.
- Meeting dates have been proposed and are in the process of being finalized.



Port Ludlow Expansion of Services

- Port Ludlow Clinic
 - 3.75 Primary Care Providers
 - Orthopedic Clinic
 - Cardiology Clinic
 - Dermatology Clinic



- Other
 - Considering establishing a retail pharmacy in Port Ludlow.
 - Provide specialty drugs to oncology and dermatology program.
 - Provide local retail pharmacy option for residents at Port Ludlow.



Jefferson Healthcare Summer Calendar

July 28

**Employee
Appreciation
Event**



August 4

**Port Hadlock
Days**

August 10-12

**Jefferson
County Fair**

August 19

**All County
Picnic**



August 26

Port Ludlow Days

**Contact Alyssa Rodrigues or
Tina Herschelman for more information.**

Questions

