

Jefferson County Public Hospital District No.2
Board of Commissioners, Special Session Minutes
Wednesday, October 24, 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, Ready, Kolff, and McComas. Also, present were Mike Glenn, CEO, Hilary Whittington, Chief Administrative Officer/ Chief Financial Officer, Jon French, Chief Legal Officer, Tina Toner, Chief Nursing Officer, Brandie Manuel, Chief Quality Officer, and Alyssa Rodrigues, Administrative Assistant were also in attendance. This meeting was officially audio recorded by Jefferson Healthcare.

Education:

Mary Kay Clunies-Ross, Sunshine Communications gave a presentation titled, "Board Discussion: The Community Conversation around Ballot Measures".

Discussion ensued.

Break:

Commissioners recessed for break at 3:07 pm.

Commissioners reconvened from break at 3:30 pm.

Approve Agenda:

Commissioner Buhler announced that the Employee of the Quarter has been moved to November and that pg. 21- 26 of the medical staff policies will be moved to a later date while medical staff works on verbiage. She also announced that public comment will be made after Required Approvals and the Sexual Assault Nurse Examiners recommendation presentation.

Commissioner Dressler made a motion to approve the amended agenda Commissioner McComas seconded.

Action: Motion passed unanimously.

Patient/Caregiver Story:

Tina Toner, CNO, provided a caregiver story which included introducing all the newly Certified Medical/Surgical Nurses from Jefferson Healthcare.

Minutes:

- September 19 Special Session

Commissioner Dressler made a motion to approve the September 19 Special Session Minutes. Commissioner McComas seconded.

Action: Motion passed unanimously.

Required Approvals: Action Requested

- September Warrants and Adjustments
- Resolution 2018-15 Cancel Warrants
- Medical Staff Credentials/Appointments/Reappointments
- Medical Staff Policy
- Resolution 2018-16 Meeting Change

Commissioner McComas made a motion to approve September Warrants and Adjustments, Resolution 2018-15 Cancelled Warrants, Medical Staff Credentials/ Appointments/ Reappointments, Medical Staff Policy except pages 21-26, and Resolution 2018-16 Meeting Change. Commissioner Dressler seconded.

Action: Motion passed unanimously.

Public Comment:

No public comment was made.

Financial Report:

Hilary Whittington, CFO/CAO presented the September Financial Report.

Discussion ensued.

Quality Report:

Brandie Manuel, Chief Quality Officer presented the September Quality Report.

Discussion ensued.

Administrative Report

Mike Glenn, CEO, presented the September Administrative report.

Mike Glenn, CEO, introduced Dr. Molly Parker who presented the Sexual Assault Nurse Examiners Task Force recommendation presentation.

Discussion ensued.

Public Comment

Public comment was made.

Commissioner Dressler made a motion to move forward with developing a Sexual Assault Nurse Examiners program at Jefferson Healthcare. Commissioner Ready seconded.

Action: Motion passed unanimously.

Commissioners recessed for break at 4:58pm
Commissioner reconvened from break at 5:04pm

Mike Glenn, CEO, introduced Aaron Vallat, Construction Manager. Aaron Vallat provided a presentation on Jefferson Healthcare's Dental Clinic construction project.

Mike Glenn, CEO, asked for authorization from Commissioners to go to bid.

Commissioner McComas made a motion authorizing administration to go out to bid for the Dental Clinic project with a not to exceed construction amount of \$900,000. Commissioner Dressler seconded.

Action: Motion passed unanimously.

Chief Medical Officer Report:

Dr. Joe Mattern, CMO, presented the Chief Medical Officer report which included physician recruitment, provider engagement, provider education, ACO, flu update, mental health and MAT, AIMS model, and pulmonology update.

Board Business:

Commissioner Kolff made a motion to appoint Dingus, Zarecor, and Associates as the board's independent auditor. Commissioner McComas seconded.

Action: Motion passed unanimously.

Commissioner Kolff provided announcements from the Public Health Board Minutes which included updates on E. coli, pending pertussis or measles outbreaks, and gun violence laws.

Commissioner Dressler introduced Kris Becker, Executive Director of the Jefferson Healthcare Foundation who explained the November 24 Festival of Wreaths, with Champagne Brunch, fundraising event at Port Ludlow Bay Club from 11am-2pm. She also noted that Santa Claus will be at the Bay Club in Port Ludlow from 9am to 10:30 am, taking pictures with children for no cost. Tickets to the event and all information is on the Jefferson Healthcare Foundation website.

Kris Becker also announced that the Jefferson Healthcare Foundation was the recipient of a grant from First Federal Bank Foundation to replace an infant warmer in the Family Birth Center.

Meeting Evaluation

Commissioners evaluated the meeting.

Conclude:

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

Action: Motion passed unanimously.

Meeting concluded at 5:51pm.

Approved by the Commission:

Chair of Commission: Jill Buhler _____

Secretary of Commission: Marie Dressler _____

JEFFERSON HEALTHCARE BOARD DISCUSSION

MARY KAY CLUNIES-ROSS

SUNSHINE COMMUNICATIONS

WWW.MKCRSUNSHINE.COM

DISCUSSION TOPICS

- Engaging the community in the consideration of new capital investments and/or health services
- The role of the board in that engagement
- The possible challenges

True mission: Communicating is listening.

Jefferson Healthcare

September 2018 Finance Report

October 24, 2018

Hilary Whittington, CAO/CFO

September 2018

Education – Pricing Review

- CMS 2019 IPPS final rule
 - Requires all hospitals to post on the internet its standard charges effective 1/1/19
 - How the charges are presented is up to the hospital, but must be machine readable (XML, CSV)
- What this means
 - Patients, press and competitors can all access prices, though the format may be chargemaster-like
 - Information may be confusing or misused
- Consideration of our competitors
 - Local: Olympic Medical Center, Harrison
 - Seattle area: Harborview, Overlake, Providence Everett, Swedish First Hill, UW, Virginia Mason
 - Tacoma area: Tacoma General, St. Joseph
- Process of pricing review
 - Analyze data and set criteria
 - Review with hospital department leaders (earlier this week)
 - Line by line review
 - Estimate effects for preliminary budget review (Nov 7), lock down by final budget review (Nov 28)
 - Design data and relevant documents (pricing philosophy memo) for our website
 - Upload new pricing into Epic by November 28



September 2018

Service Line Highlight – Infusion Center



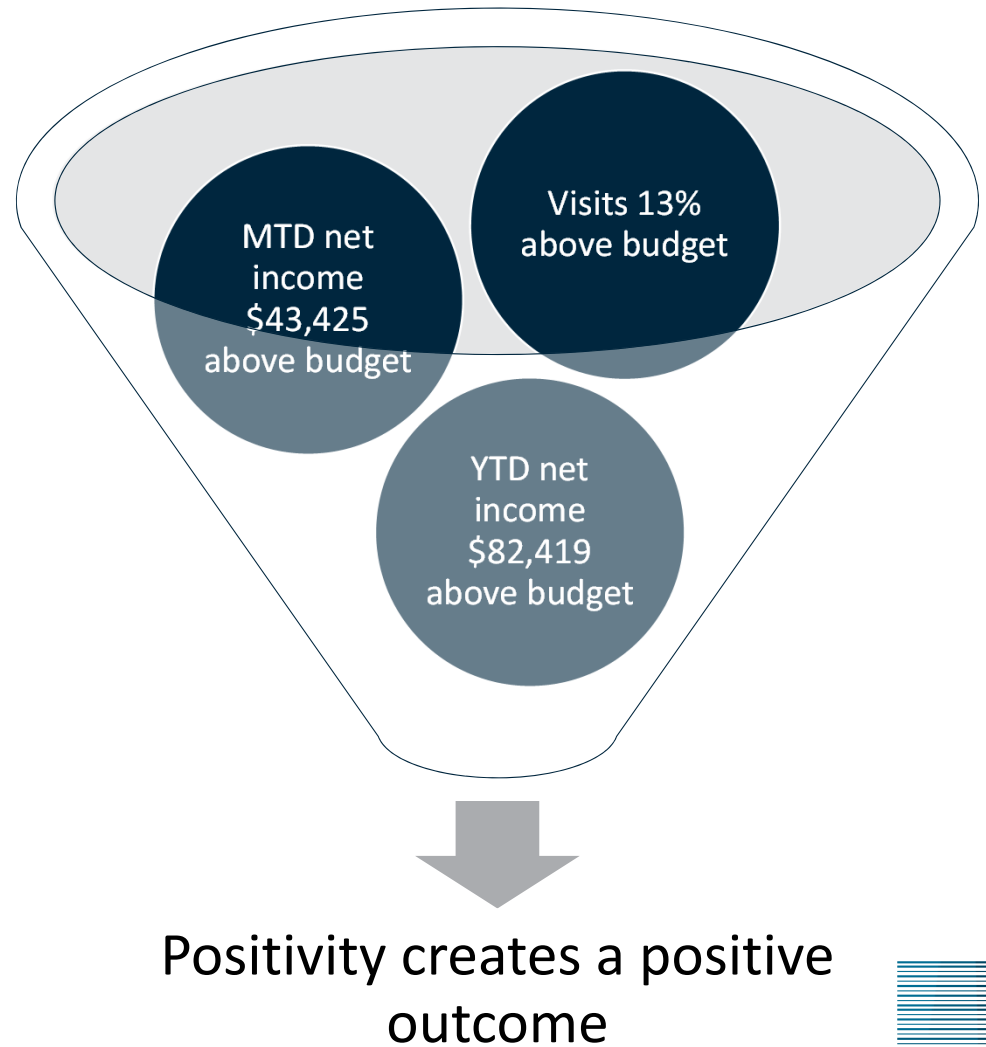
Increased care transfers



Team work and positivity



Community and cross-department cooperation



September 2018

Operating Statistics

STATISTIC DESCRIPTION

SEP ACTUAL SEP BUDGET % VARIANCE

YTD ACTUAL

YTD BUDGET

% VARIANCE

FTEs - TOTAL (AVG)	543	585	7%	541	585	7%
ADJUSTED PATIENT DAYS	1,754	2,102	-17%	17,683	19,124	-8%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	77	94	-18%	707	857	-18%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	255	351	-27%	2,829	3,191	-11%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	377	461	-18%	3,631	4,193	-13%
SURGERY CASES (IN OR)	90	99	-9%	879	901	-2%
SPECIAL PROCEDURE CASES	61	99	-38%	619	901	-31%
LAB BILLABLE TESTS	16,148	18,505	-13%	159,650	168,392	-5%
TOTAL DIAGNOSTIC IMAGING TESTS	2,514	2,945	-15%	23,816	26,805	-11%
MEDS DISPENSED	20,822	22,999	-9%	199,086	209,290	-5%
RESPIRATORY THERAPY PROCEDURES	2,869	3,647	-21%	28,032	33,191	-16%
REHAB/PT/OT/ST RVUs	7,974	6,849	16%	78,736	62,327	26%
ER CENSUS	1,027	1,095	-6%	9,444	9,967	-5%
TOTAL RURAL HEALTH CLINIC VISITS	5,135	7,055	-27%	49,549	64,201	-23%
TOTAL SPECIALTY CLINIC VISITS	3,109	3,342	-7%	28,480	30,399	-6%
HOME HEALTH EPISODES	48	66	-27%	570	601	-5%
HOSPICE CENSUS/DAYS	820	865	-5%	9,133	7,871	16%

September 2018

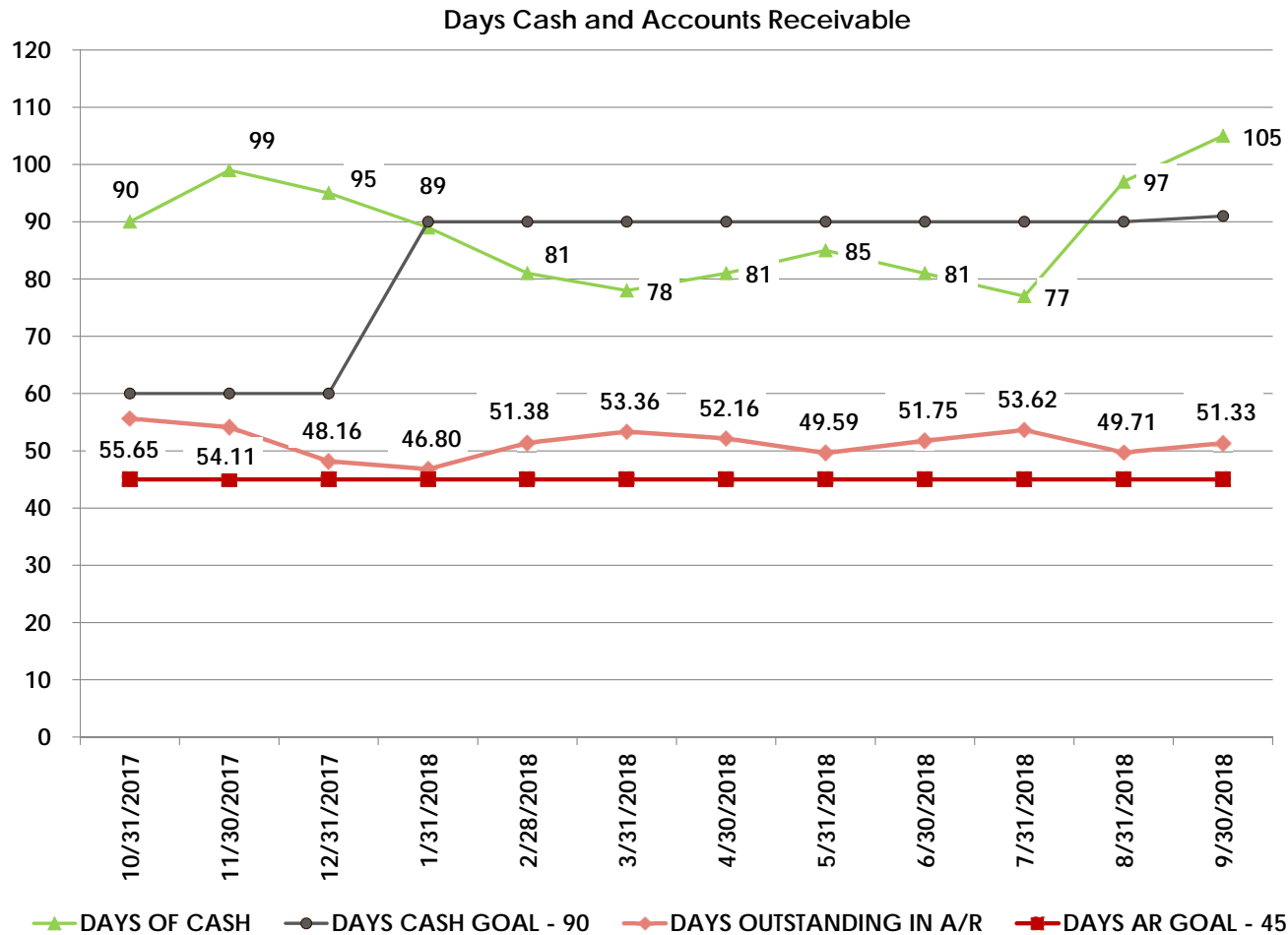
Income Statement Summary



	September 2018 Actual	September 2018 Budget	Variance Favorable/ (Unfavorable)	%	September 2018 YTD	September 2018 Budget YTD	Variance Favorable/ (Unfavorable)	%	September 2017 YTD
Operating Revenue									
Gross Patient Service Revenue	17,355,275	19,616,834	(2,261,559)	-12%	169,638,922	178,513,296	(8,874,374)	-5%	155,273,409
Revenue Adjustments	9,007,346	10,645,572	1,638,226	15%	91,185,665	96,874,764	5,689,098	6%	84,168,101
Charity Care Adjustments	131,113	120,948	(10,164)	-8%	1,935,256	1,100,630	(834,626)	-76%	816,455
Net Patient Service Revenue	8,216,816	8,850,314	(633,498)	-7%	76,518,000	80,537,902	(4,019,902)	-5%	70,288,853
Other Revenue	574,108	409,763	164,344	40%	4,321,730	3,728,850	592,880	16%	3,847,323
Total Operating Revenue	8,790,924	9,260,077	(469,153)	-5%	80,839,730	84,266,751	(3,427,021)	-4%	74,136,176
Operating Expenses									
Salaries And Wages	4,452,193	4,648,011	195,818	4%	39,954,754	42,296,927	2,342,173	6%	36,483,324
Employee Benefits	993,578	1,170,896	177,318	15%	9,677,613	10,655,163	977,549	9%	9,075,740
Other Expenses	3,550,352	3,273,691	(276,662)	-8%	29,820,258	29,790,603	(29,656)	0%	27,165,071
Total Operating Expenses	8,996,123	9,092,598	96,475	1%	79,452,625	82,742,692	3,290,067	4%	72,724,135
Operating Income (Loss)	(205,199)	167,479	(372,678)	-223%	1,387,104	1,524,059	(136,954)	-9%	1,412,041
Total Non Operating Revenues (Expenses)	5,989	(28,917)	34,906	121%	(52,022)	(263,143)	211,121	80%	258,718
Change in Net Position (Loss)	(199,210)	138,562	(337,772)	-244%	1,335,082	1,260,915	74,167	6%	1,670,759

September 2018

Cash and Accounts Receivable



PHD unemployment comp
trust dividend received

9/04/18: \$ 131,453

OCH ACH funding received

9/20/18: \$ 201,450

Medicare settlement received

9/24/18: \$1,445,000

September 2018

Board Financial Report

Dept.	Department Description	Rev/ Exp	Account	Account Description	September Actual	September Budget	September Variance	2018 to Date Actual	2018 to Date Budget	2018 to Date Variance
8612	BOARD	Exp	600010	MANAGEMENT & SUPERVISION WAGES	7,534.00	4,498.00	(3,036.00)	43,790.00	40,928.00	(2,862.00)
			602300	CONSULT MNGMT FEE	1,546.00	-	(1,546.00)	22,266.00	-	(22,266.00)
			602500	AUDIT FEES	-	3,288.00	3,288.00	37,239.00	29,918.00	(7,321.00)
			604200	CATERING	-	159.00	159.00	957.00	1,451.00	494.00
			604500	OFFICE SUPPLIES	-	24.00	24.00	50.00	218.00	168.00
			604800	MINOR EQUIPMENT	-	-	-	591.00	-	(591.00)
			604850	COMPUTER EQUIPMENT	-	80.00	80.00	-	726.00	726.00
			606500	OTHER PURCHASED SERVICES	-	822.00	822.00	(250.00)	7,479.00	7,729.00
			609400	TRAVEL/MEETINGS/TRAINING	7,849.00	1,644.00	(6,205.00)	17,233.00	14,959.00	(2,274.00)
			Exp Total		16,929.00	10,515.00	(6,414.00)	121,876.00	95,679.00	(26,197.00)
			BOARD Total		16,929.00	10,515.00	(6,414.00)	121,876.00	95,679.00	(26,197.00)

October 2018

Preview – (*as of 11:59pm 010/23/18)

- **\$19,675,531 in HB charges**
 - Average: \$610,828/day (HB only)
 - Budget: \$642,350/day
- **\$8,069,746 in HB cash collections**
 - Average: \$257,340 /day (HB only)
 - Goal: \$289,057/day
- **53.6 Days in A/R**
- **Questions**

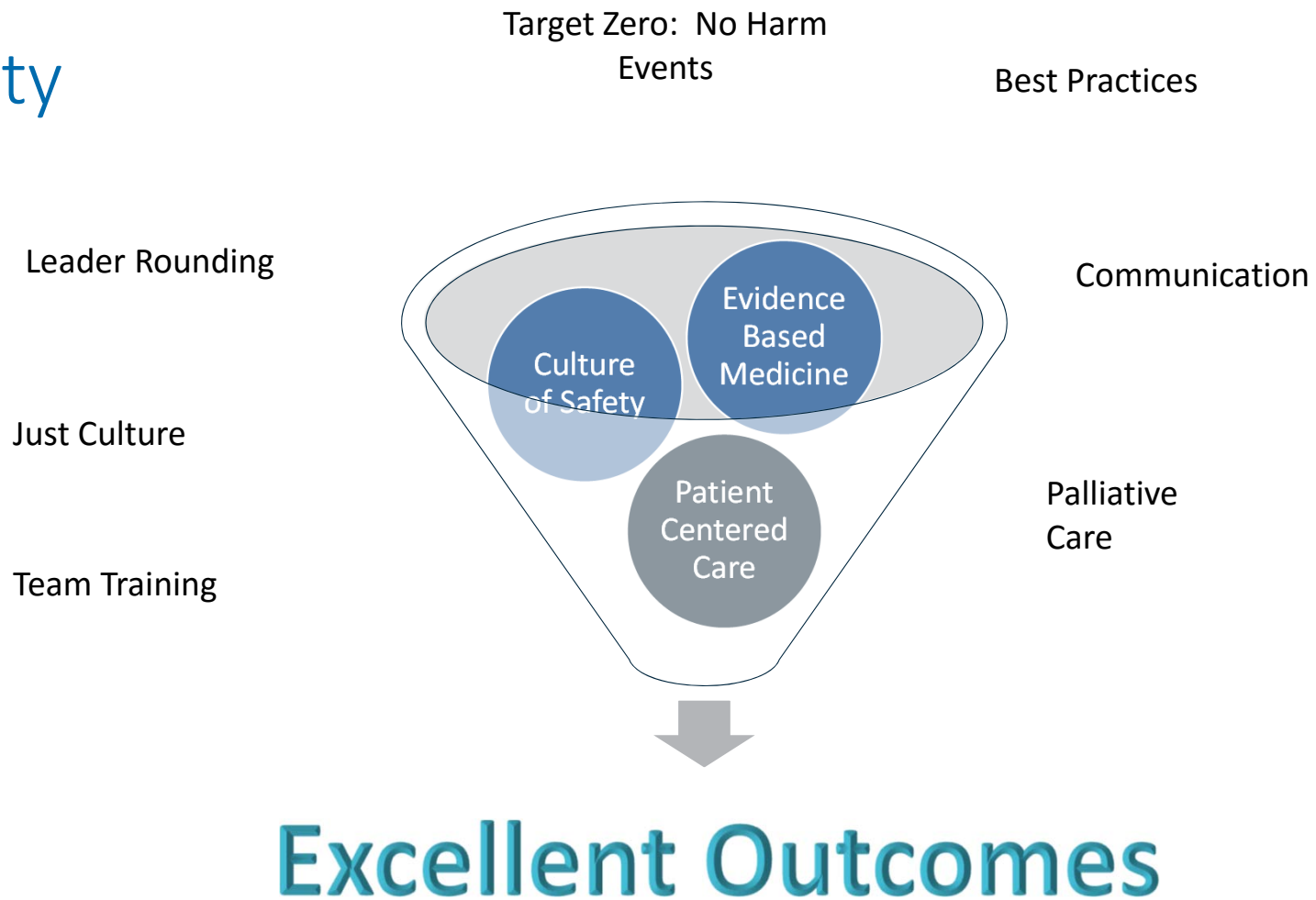
Jefferson Healthcare

Patient Safety and Quality Report
Tuesday, September 26, 2017

Agenda



Quality



Jefferson Healthcare	Goals	Strategy	Initiatives	Targets
Quality and Safety	Provide the Highest Quality, Safest Care	Drive Best Practice Clinical Care	Achieve zero harm events	Zero avoidable healthcare acquired harm events
		Achieve Excellent Quality Outcomes	Implement and adhere to evidence based practices.	90% or greater compliance with core measures
		Enhance Culture of Safety	Hardwire team training	100% attendance at TeamSTEPPS Training
			Leader Rounding	Weekly Rounding Compliance
		Align care with patient goals	Implement a palliative care program	Readmission rate < 8%

Quality and Patient Safety

Overall, Jefferson Healthcare is performing well in Quality and Patient Safety – with two focus areas for improvement: antimicrobial stewardship and treatment of sepsis

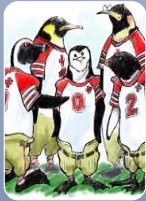
Quality Focus Areas

Antimicrobial Stewardship



Leadership support

- Monitoring Antibiotics
- Commitment and accountability
- Assigning resources
- Establishing Antimicrobial Stewardship as a priority



Teamwork

- Dedicated pharmacy time
- Inclusive of clinical expertise
- Collaboration with Quality and Infection Control



Systems-Based Approach

- Education and Training
- Protocols and Antibigram
- Reporting and Feedback

Current Performance

- 83.2% reduction in fluoroquinolone use
- 50.9% reduction in clindamycin use
- 24.2% reduction in penicillin use
- 86.8% reduction in carbapenem use
- 15.2% increase in cephalosporin use
 - WSHA reports 24.1% increase in cephalosporin use among rural hospitals
- 10.2% reduction in overall days of therapy

Treatment of Sepsis

Summary of Second Quarter Performance:

- Twenty-six records were reviewed
- Four records met inclusion criteria
- *Failures identified:*
 - Timing of antibiotic (one case)
 - Timing of lactic acid (one case)
 - Order for lactic acid (two cases)
- *Case Review:*
 - No trends related to provider
 - All cases were admitted through the ER during the night shift
 - One case was an emergent surgery
- *Possible causes:*
 - Handoff communication
 - Use of standard order templates

3-Hour Bundle

- **Measure Lactate**
- Obtain blood cultures
- Administer broad spectrum antibiotics
- Fluid resuscitation (septic shock)
- Apply vasopressors if hypotensive

6-Hour Bundle

- Apply vasopressors
- Maintain fluid resuscitation in the event of persistent arterial hypotension
- **Remeasure lactate if initial lactate was elevated**

Next Steps:

- *Sepsis Task Force*
- *Case Review and Feedback*
- *Order Sets: Collaboration CI/Hospitalist Team*

Best Practice Highlight: Orthopedics

Evaluates complications during and after a patient's admission: ***Most complications are preventable***

Requires a minimum of 30 cases over three years and five cases in the current year

A five star rating means that Jefferson Healthcare is a top performer in adhering to best practices, and preventing complications in the treatment Hip Fracture



Service

Jefferson Healthcare	Goals	Strategy	Initiatives	Targets
Service	Deliver an Experience that Exceeds Expectations	Improve Care Navigation	Manage care transitions	100% development and Implementation of Transitions of Care bundle
			Referral Management	25% improvement over baseline - referral closure
		Radical Convenience to Care	Implement Access Standards	73.2% PR - Access to care dimension Post IP stay (1-14 days); New patient 30 days; estab. Patient < 10 days
			Enhance services	Identify top three needed services
		Consistently Deliver an Outstanding Experience with Every Encounter	Implement service excellence standards	Top quartile scores: Likely to recommend, quiet at night, confidence in provider, communication (MD/RN)
			Promote shared decision	Participation in ACP classes
		Create informed healthcare consumers	Build an estimation tool	100% implementation of estimation tool, training, and communication

Service

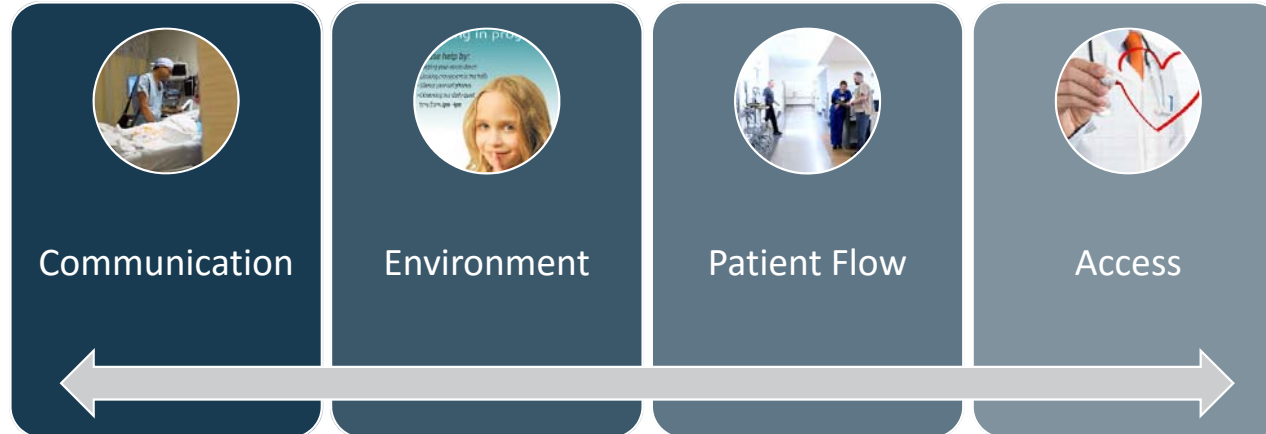
Transitions of Care

Willingness to recommend

MD/RN Communication

Rate overall care

Quiet Environment



Coordination of Care

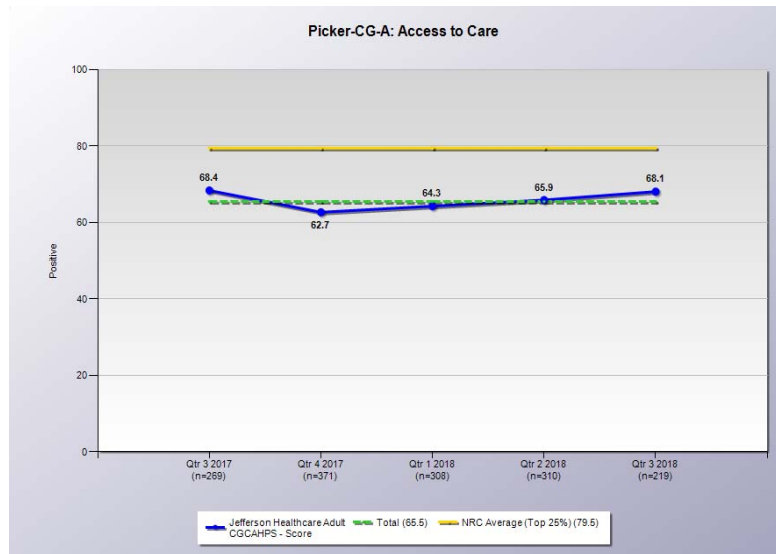
Clean Environment

Ability to get an appointment

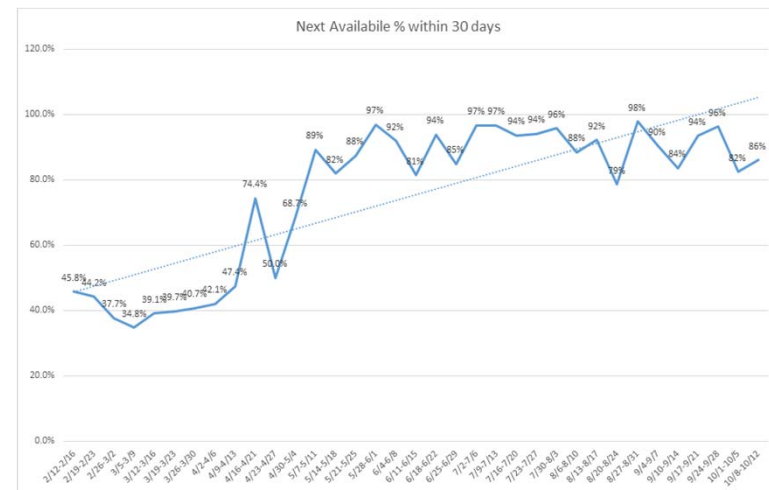
Trust in provider

Service: *Medical Group: Access*

Medical Group: Patient Perception

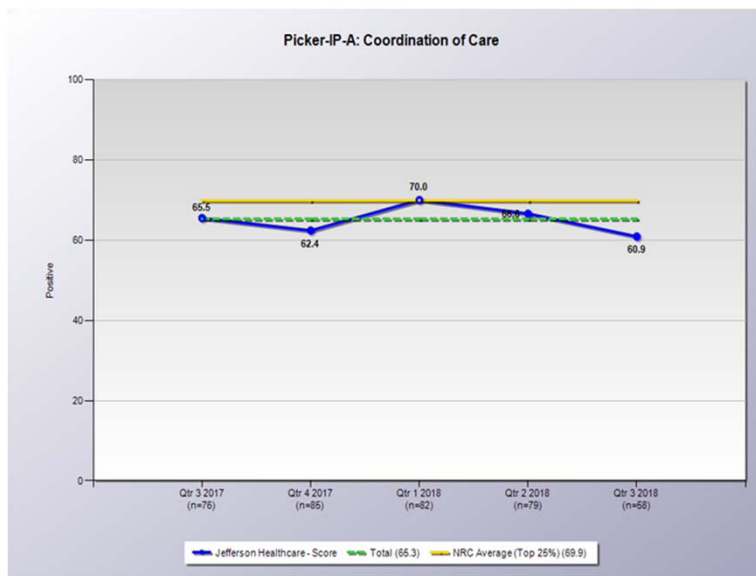


Access: New Patient Appointments

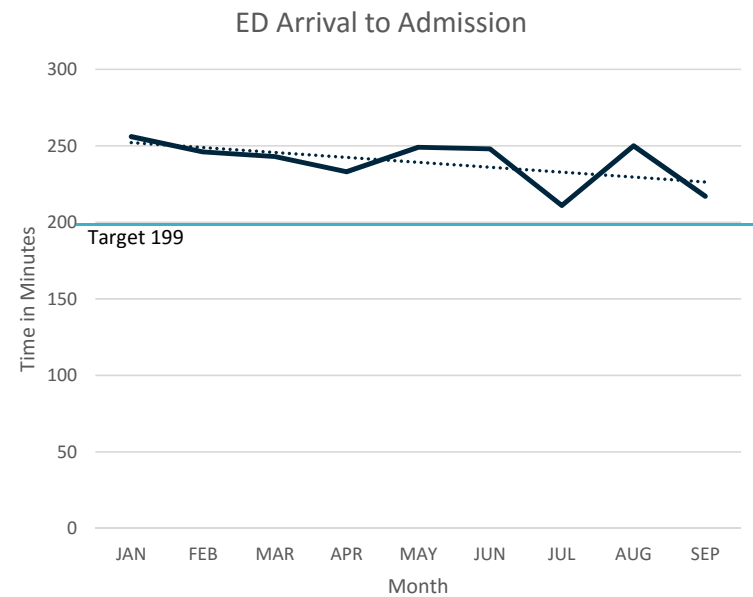


SERVICE: *Acute Care Units: Patient Flow*

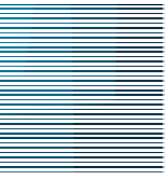
Acute Care: Patient Perception



Patient Flow: ED to IP Unit



Questions?



Jefferson Healthcare

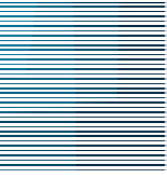
Administrative Report

October 24, 2018

Mike Glenn, CEO

Jefferson County S.A.N.E Service Proposal

Dr. Molly Parker



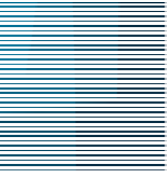
Jefferson Healthcare

Sexual Assault Nurse Examiner Proposal

Board of Commissioners Meeting
October 24, 2018

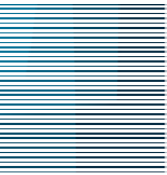
Overview

- Background
- Process
- Proposal overview
- Next steps



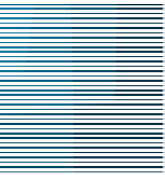
Sexual Assault Nurse Examiner

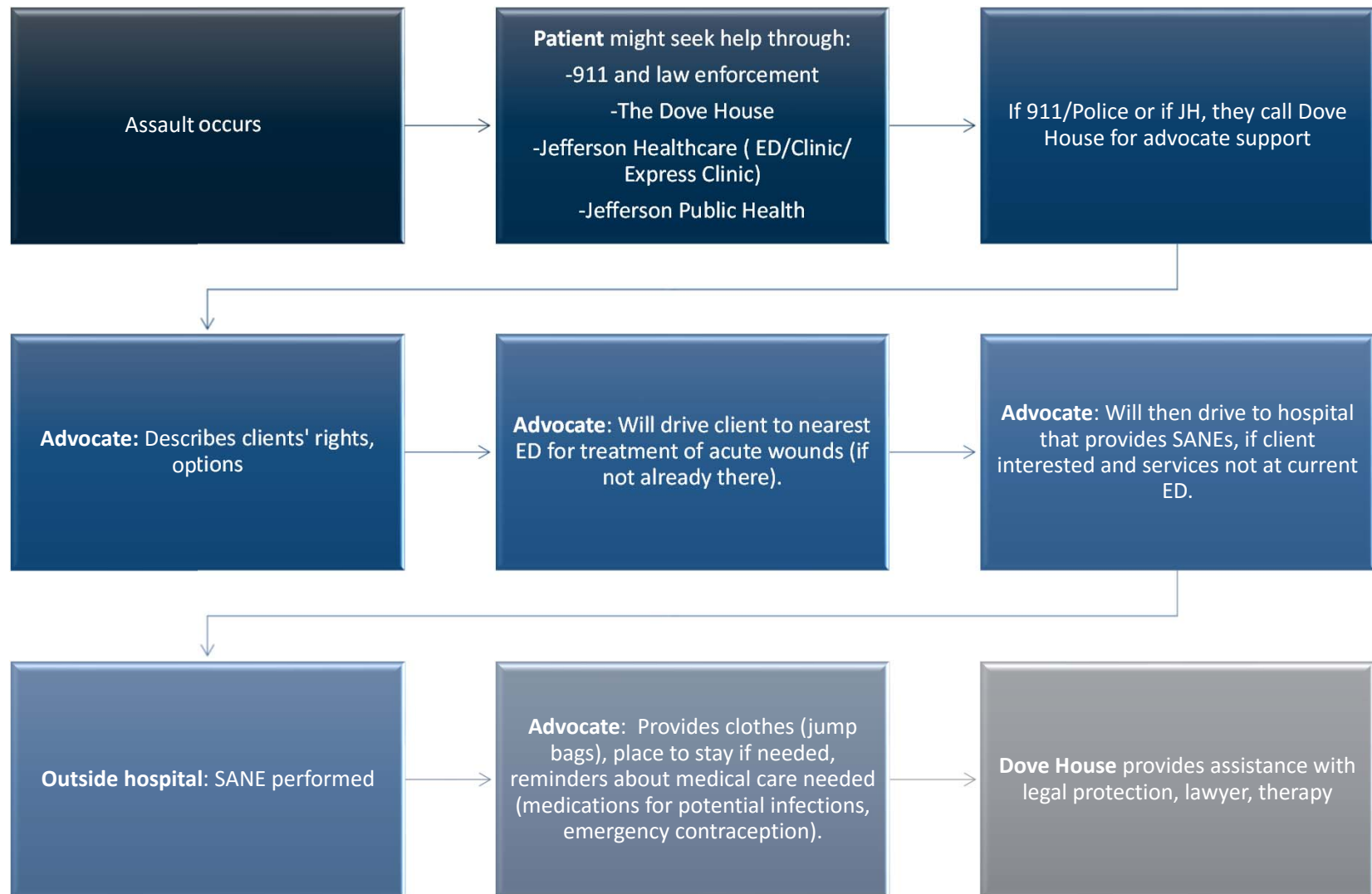
A health professional trained to conduct an examination, collect forensic evidence, and provide expert testimony for victims of sexual assault.



Current situation

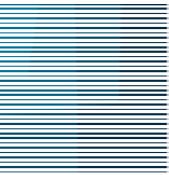
- 4-10 people need exams per year
- No SANE program in Jefferson County
 - Current options are 1 hour by car
- Fewer victims seek exams due to travel and time





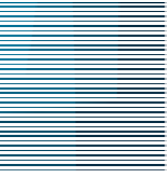
Process

- Thirteen committee members
- Three meetings
- Data review
- Key informant interviews
- State resources
- Personal experiences
- Stakeholder meetings
- Community meeting



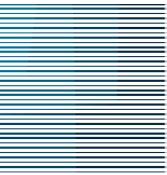
Process: Committee Goal

Evaluate the feasibility of developing and maintaining a high quality, effective SANE Program at Jefferson Healthcare



Requirements for a successful program

- Quality
- Effectiveness
- Consistent availability
- Sustainable



To create a successful program

- Quality
 - Training
 - Preceptor program
 - Case review
 - Work with partners with feedback, coaching
- Effective
 - Standard policies and protocols
- Available
 - Move from employed volunteer-response to on-call system
- Sustainable
 - Identify funding sources
 - Partnerships

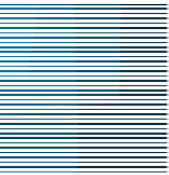
Proposal

Prepare

- Identify a program coordinator
- Identify funding to support the program
- Develop policies and protocols
- Train nurses

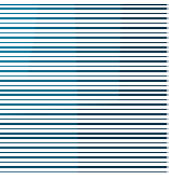
Implement

- Experienced nurses proctor new nurses
- Year 1: employed volunteer-response program
- Evaluate scope
- Year 2: graduate into an on-call program



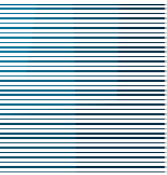
Program coordinator role

- Policies and protocols
- Equipment and space
- Coordinate training
- Develop call system
- Develop and coordinate quarterly community case review with partners (Dove House, police and sheriff, prosecuting office)
- Participate in community outreach efforts
- Program evaluation
- Assist with funding identification



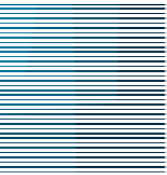
Training

- Harborview Center for Sexual Assault and Traumatic Stress program
 - In-person training
 - Monthly case reviews
 - Consult for difficult cases
- Proctoring until ready



Challenges

- Retention
- Developing and maintaining experience
- Funding

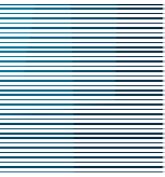


Budget

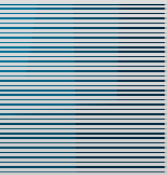
Jefferson Healthcare			
Pro Forma Financials for SANE Program #3			
28-Aug-18			
Assumptions	Year 1	Year 2	Year 3
Coordinator	0.2	0.1	0.1
Nursing Staff	0.05	0.05	0.05
Preceptor	0.05		
Total number of new FTES	0.30	0.15	0.15
Number of Cases	10.00	12.00	14.00
Profit and Loss	Year 1	Year 2	Year 3
Reimburse from State for SANE Exam	\$5,000	\$6,000	\$7,000
Net Revenue	5,000	6,000	7,000
Staffing Expenses			
Coordinator	16,640	8,652	8,998
Nursing	4,160	4,326	4,499
Nurse Preceptor (Year 1)	4,160	0	0
Nursing on call		35,000	35,000
General and Administrative			
Office Supplies	200	200	200
Medical Supplies	400	416	433
Travel and Education	10,448	3,118	3,118
Start up costs	4,700		
Net Income	(\$35,708)	(\$45,712)	(\$45,248)

Jefferson Healthcare	
Pro Forma Financials for SANE	
28-Aug-18	
Miscellaneous Start Up Cost Breakdown	
Miscellaneous Start up costs breakdown	
Cart	1,500
Camera	1,000
Training Materials for SANE Nurses	500
Swab Dryer	700
total start up costs	\$4,700

Questions?



Thank you!



Population Health Department

WSHA's Community Health Leadership Award- Silver
Jefferson Healthcare Population Health: Housing, Food and Friends



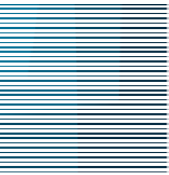
Presentation at National Conference, Roots Causes Conference in New Orleans.
“Housing, Food, and Friends: One Rural Hospitals Approach to Population Health.”



ACHIEVING HEALTH EQUITY THROUGH CROSS-SECTOR COLLABORATION

Jefferson Healthcare Dental Clinic Presentation

- Dental Clinic design.
- Project cost estimate.
- Motion authorizing administration to bid project.



JHC Dental Clinic

Making History in Jefferson County



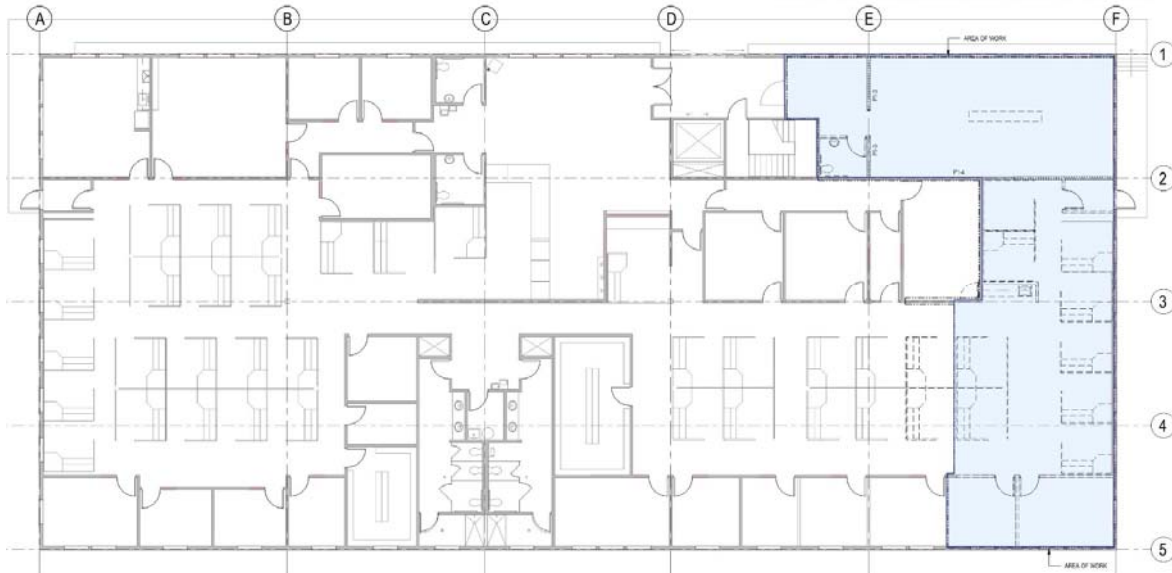
**COATES DESIGN
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Responsible Architecture.

JEFFERSON DENTAL CLINIC
OCTOBER 23, 2018
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Reception &
Waiting Image



Existing Clinic
Building



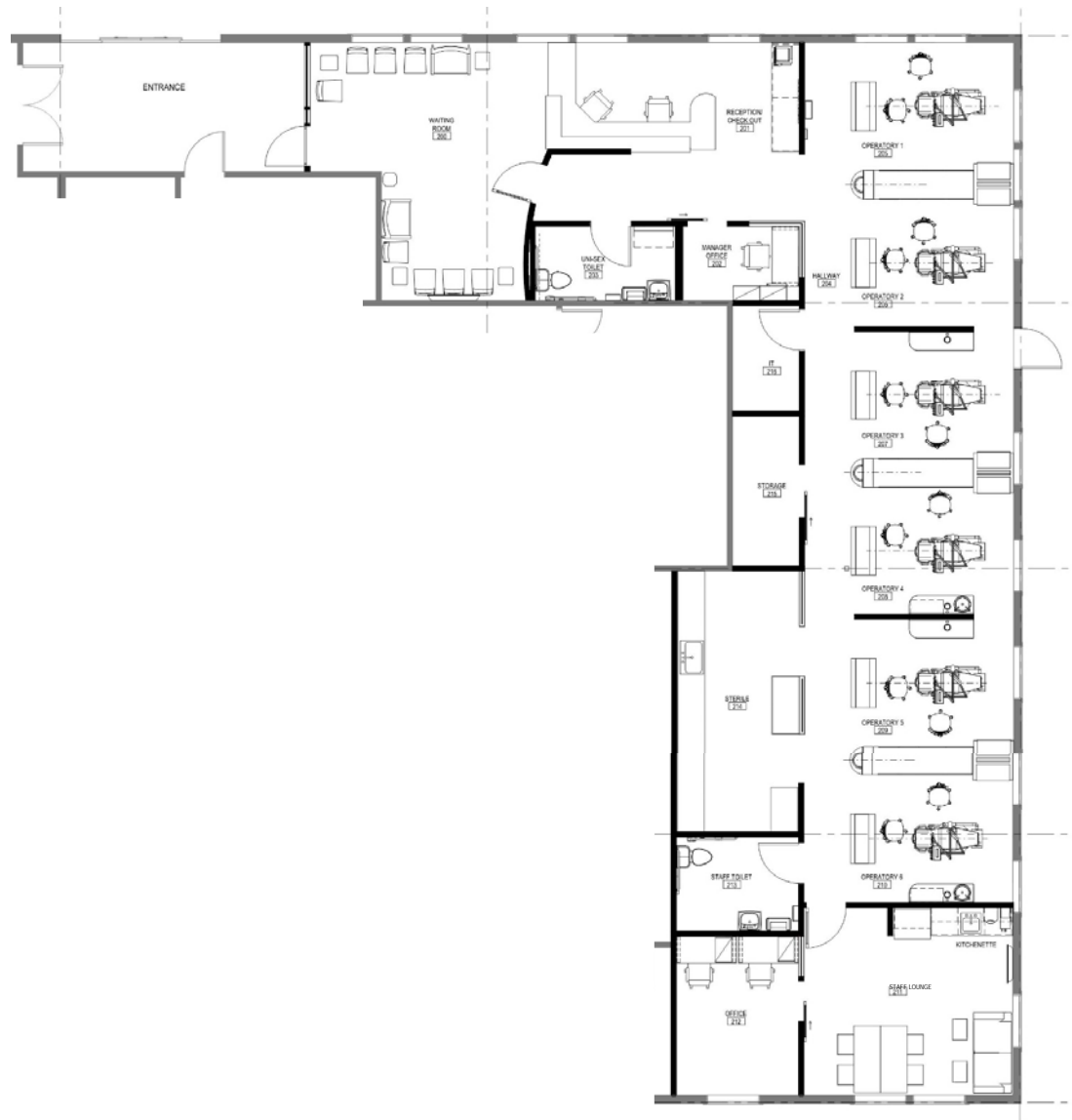
Existing Floor Plan



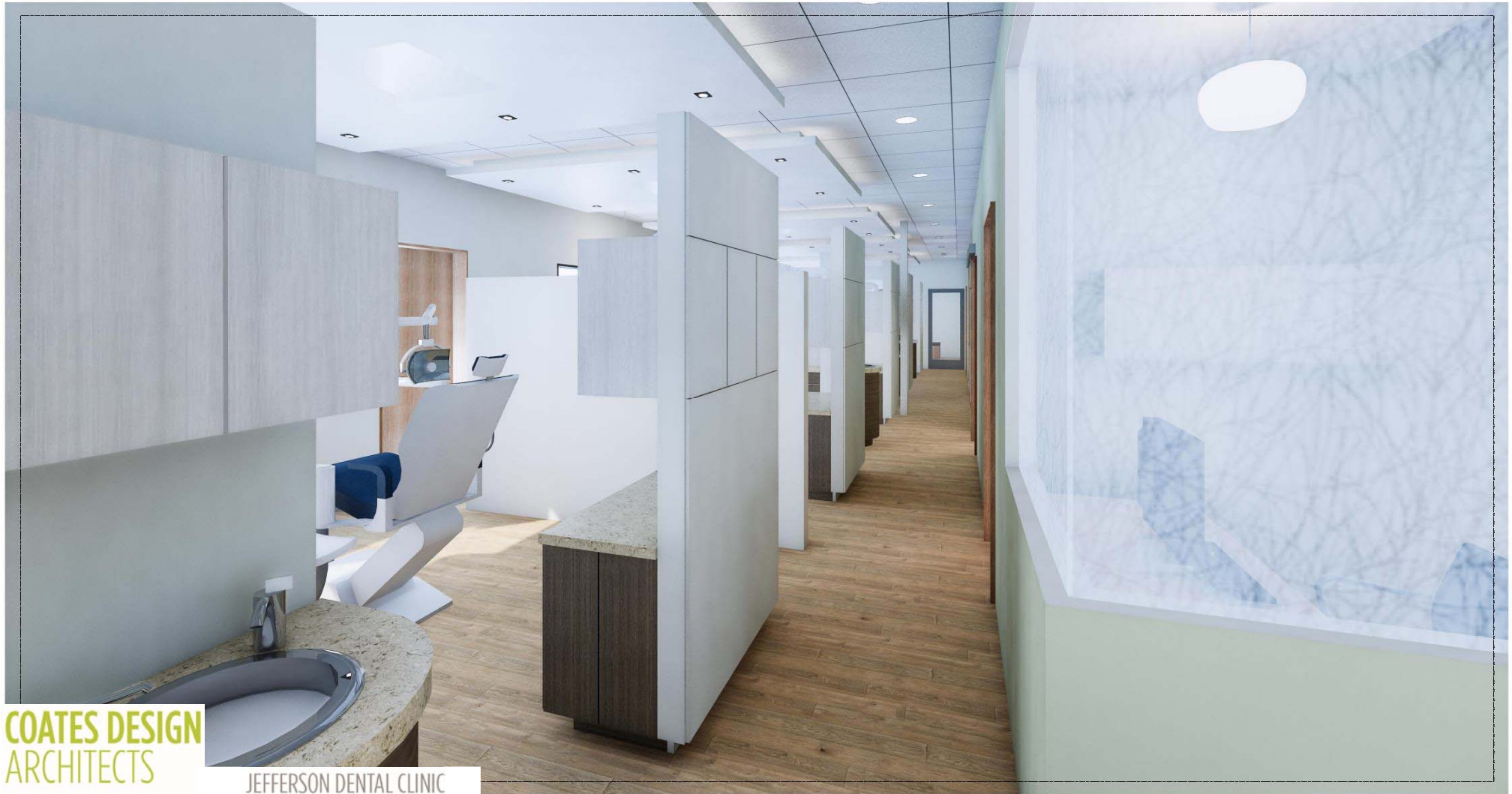
New Dental Clinic Floor Plan

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New Dental Clinic
Floor Plan



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Operatory Hall
Image



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Operatory
Image



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Responsible Architecture.

JEFFERSON DENTAL CLINIC

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Staff Lounge
Image

Timeline:

Bid Set Received 10/23/2018

Board Approval (pending)

If Board approves:

Bid Documents will be published on the

Washington State Builder's Exchange Website 10/26/2018

Advertisement for Public Bid will publish in the

Daily Journal of Commerce 10/29/2018 and 11/05/2018

Mandatory Contractor pre-construction walk through 11/13/2018 at 10:30 AM

Bids are due no later than 4:00 PM on 11/27/2018

Bids will be opened at 4:30 PM 11/27/2018

Construction is estimated to start the first week in January

Construction must be substantially complete by 05/17/2019

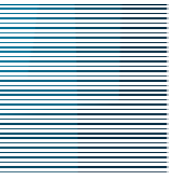
Introduction of New Providers

Active

- Kate Ernst, ARNP, Dermatology
- Jordan Giesler, PA, Orthopedics
- Sergei Pavlov, CRNA
- Shayna Lemke, DO, Hospitalist
- Frank Rosenbloom, MD, Hospitalist
- Francis Wiser, DO, Hospitalist

Coming Soon

- Mitra Jafari, MD, JHSA
- Brittany Yahraus, PA-C, Express Clinic
- Deborah Adams, MD, Oncology
- Mary Towns, ARNP, Oncology
- Kelsea Peterman, DO, JHSA
- Elizabeth Olinger, ARNP, South County
- Christine Doyle, NP, Primary Care



Questions

