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:**

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
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.
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

Positivity creates a positive outcome

- MTD net income $43,425 above budget
- YTD net income $82,419 above budget
- Visits 13% above budget

YTD net income $82,419 above budget
## September 2018 Operating Statistics

<table>
<thead>
<tr>
<th>STATISTIC DESCRIPTION</th>
<th>SEP ACTUAL</th>
<th>SEP BUDGET</th>
<th>% VARIANCE</th>
<th>YTD ACTUAL</th>
<th>YTD BUDGET</th>
<th>% VARIANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>FTEs - TOTAL (AVG)</td>
<td>543</td>
<td>585</td>
<td>7%</td>
<td>541</td>
<td>585</td>
<td>7%</td>
</tr>
<tr>
<td>ADJUSTED PATIENT DAYS</td>
<td>1,754</td>
<td>2,102</td>
<td>-17%</td>
<td>17,683</td>
<td>19,124</td>
<td>-8%</td>
</tr>
<tr>
<td>ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)</td>
<td>77</td>
<td>94</td>
<td>-18%</td>
<td>707</td>
<td>857</td>
<td>-18%</td>
</tr>
<tr>
<td>ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)</td>
<td>255</td>
<td>351</td>
<td>-27%</td>
<td>2,829</td>
<td>3,191</td>
<td>-11%</td>
</tr>
<tr>
<td>PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION</td>
<td>377</td>
<td>461</td>
<td>-18%</td>
<td>3,631</td>
<td>4,193</td>
<td>-13%</td>
</tr>
<tr>
<td>SURGERY CASES (IN OR)</td>
<td>90</td>
<td>99</td>
<td>-9%</td>
<td>879</td>
<td>901</td>
<td>-2%</td>
</tr>
<tr>
<td>SPECIAL PROCEDURE CASES</td>
<td>61</td>
<td>99</td>
<td>-38%</td>
<td>619</td>
<td>901</td>
<td>-31%</td>
</tr>
<tr>
<td>LAB BILLABLE TESTS</td>
<td>16,148</td>
<td>18,505</td>
<td>-13%</td>
<td>159,650</td>
<td>168,392</td>
<td>-5%</td>
</tr>
<tr>
<td>TOTAL DIAGNOSTIC IMAGING TESTS</td>
<td>2,514</td>
<td>2,945</td>
<td>-15%</td>
<td>23,816</td>
<td>26,805</td>
<td>-11%</td>
</tr>
<tr>
<td>MEDS DISPENSED</td>
<td>20,822</td>
<td>22,999</td>
<td>-9%</td>
<td>199,086</td>
<td>209,290</td>
<td>-5%</td>
</tr>
<tr>
<td>RESPIRATORY THERAPY PROCEDURES</td>
<td>2,869</td>
<td>3,647</td>
<td>-21%</td>
<td>28,032</td>
<td>33,191</td>
<td>-16%</td>
</tr>
<tr>
<td>REHAB/PT/OT/ST RVUs</td>
<td>7,974</td>
<td>6,849</td>
<td>16%</td>
<td>78,736</td>
<td>62,327</td>
<td>26%</td>
</tr>
<tr>
<td>ER CENSUS</td>
<td>1,027</td>
<td>1,095</td>
<td>-6%</td>
<td>9,444</td>
<td>9,967</td>
<td>-5%</td>
</tr>
<tr>
<td>TOTAL RURAL HEALTH CLINIC VISITS</td>
<td>5,135</td>
<td>7,055</td>
<td>-27%</td>
<td>49,549</td>
<td>64,201</td>
<td>-23%</td>
</tr>
<tr>
<td>TOTAL SPECIALTY CLINIC VISITS</td>
<td>3,109</td>
<td>3,342</td>
<td>-7%</td>
<td>28,480</td>
<td>30,399</td>
<td>-6%</td>
</tr>
<tr>
<td>HOME HEALTH EPISODES</td>
<td>48</td>
<td>66</td>
<td>-27%</td>
<td>570</td>
<td>601</td>
<td>-5%</td>
</tr>
<tr>
<td>HOSPICE CENSUS/DAYS</td>
<td>820</td>
<td>865</td>
<td>-5%</td>
<td>9,133</td>
<td>7,871</td>
<td>16%</td>
</tr>
</tbody>
</table>
# September 2018
## Income Statement Summary

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

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

- Review Performance Report
- Quality and Safety Focus Areas
- Service Focus Areas
- Next Steps
Quality

- Leader Rounding
- Just Culture
- Team Training

Target Zero: No Harm Events

Best Practices

Communication

Palliative Care

Culture of Safety

Evidence Based Medicine

Patient Centered Care

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

### Quality and Patient Safety

<table>
<thead>
<tr>
<th>Goals</th>
<th>Strategy</th>
<th>Initiatives</th>
<th>Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drive Best Practice Clinical Care</td>
<td>Achieve zero harm events</td>
<td>Zero avoidable healthcare acquired harm events</td>
<td></td>
</tr>
<tr>
<td>Achieve Excellent Quality Outcomes</td>
<td>Implement and adhere to evidence based practices.</td>
<td>90% or greater compliance with core measures.</td>
<td></td>
</tr>
<tr>
<td>Enhance Culture of Safety</td>
<td>Hardwire team training</td>
<td>100% attendance at TeamSTEPPS Training</td>
<td></td>
</tr>
<tr>
<td>Align care with patient goals</td>
<td>Implement a palliative care program</td>
<td>Weekly Rounding Compliance</td>
<td></td>
</tr>
</tbody>
</table>

**Provide the Highest Quality, Safest Care**
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 Antibiogram
- 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

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

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

Transitions of Care

MD/RN Communication
Rate overall care

Communication
Environment
Patient Flow
Access

Coordination of Care

Clean Environment

Ability to get an appointment

Willingness to recommend

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**

*ED Arrival to Admission*

-Time in Minutes*

Target 199

<table>
<thead>
<tr>
<th>Time in Minutes</th>
<th>JAN</th>
<th>FEB</th>
<th>MAR</th>
<th>APR</th>
<th>MAY</th>
<th>JUN</th>
<th>JUL</th>
<th>AUG</th>
<th>SEP</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>200</td>
<td>200</td>
<td>200</td>
<td>200</td>
<td>200</td>
<td>200</td>
<td>200</td>
<td>200</td>
<td>200</td>
</tr>
</tbody>
</table>

*Picker-IP-A: Coordination of Care*

-Q1 2017 (n=78) | Q2 2017 (n=86) | Q3 2017 (n=80) | Q4 2017 (n=81) | Q1 2018 (n=79) | Q2 2018 (n=80) | Q3 2018 (n=79) | Q4 2018 (n=80) | Q1 2019 (n=79) | Q2 2019 (n=80) | Q3 2019 (n=79) | Q4 2019 (n=80) | Q1 2020 (n=78) | Q2 2020 (n=80) | Q3 2020 (n=79) | Q4 2020 (n=80) | Q1 2021 (n=79) | Q2 2021 (n=80) | Q3 2021 (n=79) | Q4 2021 (n=80) | Q1 2022 (n=78) | Q2 2022 (n=80) | Q3 2022 (n=79) | Q4 2022 (n=80) | Q1 2023 (n=79) | Q2 2023 (n=80) | Q3 2023 (n=79) | Q4 2023 (n=80) | Q1 2024 (n=78) | Q2 2024 (n=80) | Q3 2024 (n=79) | Q4 2024 (n=80) |
Questions?
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
Assault occurs

Patient might seek help through:
- 911 and law enforcement
- The Dove House
- Jefferson Healthcare (ED/Clinic/Express Clinic)
- Jefferson Public Health

If 911/Police or if JH, they call Dove House for advocate support

Advocate: Describes clients' rights, options

Advocate: Will drive client to nearest ED for treatment of acute wounds (if not already there).

Advocate: Will then drive to hospital that provides SANEs, if client interested and services not at current ED.

Outside hospital: SANE performed

Advocate: Provides clothes (jump bags), place to stay if needed, reminders about medical care needed (medications for potential infections, emergency contraception).

Dove House provides assistance with legal protection, lawyer, therapy
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

<table>
<thead>
<tr>
<th></th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordinator</td>
<td>0.2</td>
<td>0.1</td>
<td>0.1</td>
</tr>
<tr>
<td>Nursing Staff</td>
<td>0.05</td>
<td>0.05</td>
<td>0.05</td>
</tr>
<tr>
<td>Preceptor</td>
<td>0.05</td>
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<td></td>
</tr>
<tr>
<td>Total number of new FTEs</td>
<td>0.30</td>
<td>0.15</td>
<td>0.15</td>
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<tr>
<td>Number of Cases</td>
<td>10.00</td>
<td>12.00</td>
<td>14.00</td>
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## Profit and Loss

<table>
<thead>
<tr>
<th></th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reimburse from State for SANE Exam 1</td>
<td>$5,000</td>
<td>$6,000</td>
<td>$7,000</td>
</tr>
<tr>
<td>Net Revenue</td>
<td>5,000</td>
<td>6,000</td>
<td>7,000</td>
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## Staffing Expenses

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<tr>
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<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
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<tbody>
<tr>
<td>Coordinator</td>
<td>16,640</td>
<td>8,652</td>
<td>8,998</td>
</tr>
<tr>
<td>Nursing</td>
<td>4,160</td>
<td>4,326</td>
<td>4,439</td>
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<tr>
<td>Nurse Preceptor (Year 1)</td>
<td>4,160</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Nursing on call</td>
<td>15,000</td>
<td>15,000</td>
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## General and Administrative

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<th></th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
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</thead>
<tbody>
<tr>
<td>Office Supplies</td>
<td>200</td>
<td>200</td>
<td>200</td>
</tr>
<tr>
<td>Medical Supplies</td>
<td>400</td>
<td>416</td>
<td>433</td>
</tr>
<tr>
<td>Travel and Education</td>
<td>10,448</td>
<td>3,118</td>
<td>3,118</td>
</tr>
<tr>
<td>Start up costs</td>
<td>4,700</td>
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</table>

## Net Income

<table>
<thead>
<tr>
<th></th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net Income</td>
<td>($35,708)</td>
<td>($45,712)</td>
<td>($45,248)</td>
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## Miscellaneous Start Up Cost Breakdown

<p>| | |</p>
<table>
<thead>
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<th></th>
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<tbody>
<tr>
<td>Cart</td>
<td>1,500</td>
</tr>
<tr>
<td>Camera</td>
<td>1,000</td>
</tr>
<tr>
<td>Training Materials for SANE Nurses</td>
<td>500</td>
</tr>
<tr>
<td>Swab Dryer</td>
<td>700</td>
</tr>
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</table>

**Total start up costs**  
$54,700
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.”
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
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