*COVID-19 Notice*
No in-person attendance allowed, pursuant to Governor Inslee’s Proclamation 20-28.
All meeting attendees, including Board of Commissioners, staff and members of the public must participate virtually. No physical meeting location will be provided.
To attend the meeting, dial Phone Conference Line: (509) 598-2842
When prompted, enter Conference ID number: 197938556

Jefferson County Public Hospital District No.2
Board of Commissioners, Regular Session Minutes
Wednesday, September 23, 2020

Call to Order:
The meeting was called to order at 2:30pm by Board Chair Buhler Rienstra. Present by phone and video were Commissioners Dressler, Kolff, McComas and Ready. Also, in attendance by phone were Mike Glenn, CEO, Hilary Whittington, Chief Administrative Officer/Chief Financial Officer, Jon French, Chief Legal Officer, Brandie Manuel, Chief Patient Safety and Quality Officer, Caitlin Harrison, Chief Human Resources Officer, Jenn Wharton, Chief Ambulatory and Medical Group Officer, Tina Toner, Chief Nursing Officer, and Brittany Huntingford, Kent Smith, DO, Chief of Staff, Administrative Assistant were also in attendance. This meeting was officially audio recorded by Jefferson Healthcare.

Approve Agenda:
Commissioner McComas approved the agenda. Commissioner Kolff seconded.
Action: Motion passed unanimously.

Education Topic:
- Employee Engagement Presentation
  - Caitlin Harrison, Chief Human Resources Officer

Caitlin Harrison, Chief Human Resources Officer presented the Employee Engagement presentation

Discussion ensued.

Commissioners recessed for break at 3:15pm.
Commissioner reconvened from break at 3:30pm.
Team of the Quarter:
Caitlin Harrison, CHRO presented Dr. Sarah Schmidt, Provider of the Quarter; Jess Cigalotti, Employee of the Quarter & Surgical Associates, Team of the Quarter

Minutes:
- August 26, 2020 Minutes
Commissioner Kolff made a motion to amend the August 26, 2020 minutes to include the addition of “per 100,000 population” in board reports. Commissioner Ready seconded.
Action: The amended motion passed unanimously.

Required Approvals: Action Requested
- August Warrants and Adjustments
- Resolution 2020-10 Cancelled Warrants
- Medical Staff Credentials/Appointments/Reappointments
Commissioner Ready made a motion to approve the August Warrants and Adjustments, Resolution 2020-10 Cancelled Warrants, and Medical Staff Credentials/ Appointments/ Reappointments Commissioner Dressler seconded.
Action: Motion passed unanimously.

Financial Report:
Hilary Whittington, CAO/CFO, presented the August Financial Reports.

Discussion ensued.

Quality Report:
Brandie Manuel, Chief Pt Safety and Quality Officer, presented the August Quality Report.

Discussion ensued.

Administrative Report
Mike Glenn, CEO, presented the Administrative report.

Discussion ensued.

Board Business:
- Health Equity Report Resolution Discussion
Commissioner Kolff suggests a resolution by the board to support this work. Commissioners Kolff and McComas will move forward and will have something specific for the boards review, comments, and potential adoption at the October meeting.

Board of Health report
Commissioner Kolff gave a report from the Board of Health activities. Jefferson Healthcare was applauded by Dr. Locke during a County Commissioner meeting
for our transparency, fostering an ideal relationship of cooperation. At the Board of Health key items were discussed:
1. Health department staff are facing similar pandemic challenges as are JHC staff.
2. Enforcement for violations of public health officer mandates are currently limited to criminal offences. This is being addressed with a new enforcement code.
3. Forest fire smoke causes increased asthma and heart disease. Commissioner Kolff would be curious to hear from the Emergency department if there had been a rise of cases here when we had the smoke.
4. COVID-19 testing options are increasing in the county, but how to use results is tricky.
6. The Health department encourages everyone to be safe to help keep schools open.

Discussion ensued.
• Agenda Evaluation
Commissioner Buhler Rienstra gave the board book overview of this topic. Commissioner Kolff suggested the board send written evaluations to Brittany with further discussion to be had at the October meeting.

Meeting Evaluation:
Commissioners evaluated the meeting.

Conclude:
Commissioner Kolff made a motion to conclude the meeting. Commissioner Ready seconded.
Action: Motion passed unanimously.

Meeting concluded at 5:10 pm.

Approved by the Commission:
Chair of Commission: Jill Buhler Rienstra

Secretary of Commission: Marie Dressler
A New Engagement Survey Vendor

- Better scoring scale
- Real time reporting for Leaders
- Built in Action Items & Action Planning
- Easier Data Analysis
  - “Hotspots”
  - Trends over time
  - More
Standard Question Scoring

• Likert Scale
  – Strongly Disagree
  – Disagree
  – Somewhat Agree/Somewhat Disagree
  – Agree
  – Strongly Agree
  – No Answer/Does not apply
• A total of **97** survey items are included in the engagement survey

• Data collected via internet

• Participation: **77%**, good strong numbers for a current population
  – The way the data is handled and acted upon has a significant impact on future survey participation

• Confidentiality is always maintained in reporting in order to protect the confidentiality of the respondents and the integrity of the process. Must meet minimum number of participants.
Satisfaction & Engagement
Engagement Index

Connection

- My work gives me a sense of personal accomplishment
- I feel proud to work for Organization

Advocacy

- I would recommend Organization as a good place to work

Commitment

- I plan to work at Organization for at least one year from now
- I don't consider looking for a new job elsewhere

Effort

- I am motivated to go beyond what is normally expected of me to help Organization be successful
<table>
<thead>
<tr>
<th>Actively Disengaged</th>
<th>Opportunity Group</th>
<th>Engaged Contributor</th>
<th>Actively Engaged</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employees who consistently view their work and the company unfavorably</td>
<td>Employees who are ambivalent about their work and workplace</td>
<td>Employees who are satisfied with their work and speak well of the company</td>
<td>Employees who take personal satisfaction in what they do and how they do it</td>
</tr>
<tr>
<td>Most likely to disparage and talk negatively about the company and leaders</td>
<td>Work just enough to get by and fly under the radar</td>
<td>Meet expectations of the job but not likely to take risks or go above and beyond</td>
<td>Likely to take personal risks and stretch themselves to do more and learn new things</td>
</tr>
<tr>
<td>Tend to blame the company and point finger at others</td>
<td>Do not actively contribute to the workplace</td>
<td>Tend to stay in their comfort zone</td>
<td>Learning and growing, helping the company to develop</td>
</tr>
<tr>
<td>Will quit, or stay and contribute to a negative environment if no change occurs</td>
<td>The main reason for staying is contractual and to get paid</td>
<td>Committed to their work</td>
<td>Love their work</td>
</tr>
<tr>
<td>View By Questions</td>
<td>Category text</td>
<td>N</td>
<td>Mean Score</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------</td>
<td>---------------------</td>
<td>----</td>
<td>------------</td>
</tr>
<tr>
<td>I can practice high quality medicine in my position</td>
<td>Provider Satisfaction</td>
<td>43</td>
<td>4.51</td>
</tr>
<tr>
<td>I would tell others that this organization is a good place to practice</td>
<td>Provider Satisfaction</td>
<td>39</td>
<td>4.49</td>
</tr>
<tr>
<td>Patient satisfaction is a top priority at this organization</td>
<td>Healthcare</td>
<td>629</td>
<td>4.39</td>
</tr>
<tr>
<td>I like the type of work I do</td>
<td>Job Satisfaction</td>
<td>641</td>
<td>4.39</td>
</tr>
<tr>
<td>My coworkers take the proper steps to ensure patient safety</td>
<td>Healthcare</td>
<td>614</td>
<td>4.37</td>
</tr>
<tr>
<td>Would you recommend Jefferson Healthcare for the care of your own friends and family?</td>
<td>Overall Impressions</td>
<td>626</td>
<td>4.31</td>
</tr>
<tr>
<td>I plan to be here at least 1 year from now</td>
<td>Culture</td>
<td>620</td>
<td>4.30</td>
</tr>
<tr>
<td>I feel proud to work for this organization</td>
<td>Culture</td>
<td>643</td>
<td>4.27</td>
</tr>
<tr>
<td>My work gives me a sense of personal accomplishment</td>
<td>Job Satisfaction</td>
<td>643</td>
<td>4.26</td>
</tr>
<tr>
<td>I am motivated to go beyond what is normally expected of me to help the organization be successful</td>
<td>Job Satisfaction</td>
<td>642</td>
<td>4.25</td>
</tr>
<tr>
<td>Jefferson Healthcare’s core values are well aligned with my own.</td>
<td>Overall Impressions</td>
<td>622</td>
<td>4.23</td>
</tr>
<tr>
<td>Patient-centered care is a deeply embedded value of our organization.</td>
<td>Overall Impressions</td>
<td>619</td>
<td>4.22</td>
</tr>
</tbody>
</table>
Highest/Lowest Favorable Items

- I can practice high quality medicine in my position (4.51) 98%
- My coworkers take the proper steps to ensure patient safety (4.37) 91%
- I would tell others that this organization is a good place to practice (4.49) 90%
- I like the type of work I do (4.39) 90%
- Patient satisfaction is a top priority at this organization (4.39) 90%

- Our patient loads are reasonable (2.00) 22%
- Our staff is knowledgeable about helping patients understand payment options (2.03) 26%
- Our check-in/admission process runs smoothly (2.29) 31%
- Wait times are kept to a reasonable length (2.33) 34%
- We are provided the resources needed to emotionally support our patients (2.74) 39%
Jefferson Healthcare data is compared to industry data collected by PE in 2019-2020 (the past year)
Provider Engagement

Actively Engaged: 55%
Engaged/Contributor: 24%
Opportunity Group: 21%
Intention to Stay

- Highly Likely to Stay: 57%
- Likely to Stay: 24%
- Likely to Leave: 5%
- Unsure: 14%
Provider Intention to Stay

- Highly Likely to Stay: 76%
- Likely to Stay: 24%
Jefferson Healthcare is a Great Place to Work

Would you recommend Jefferson Healthcare to others as a place to work? (2018)
- Definitely Yes: 53.1%
- Probably Yes: 37.4%
- Probably No: 8.9%
- Definitely No: 0.6%

I would recommend this organization as a good place to work (2020)
- Strongly Agree: 40%
- Agree: 36%
- Somewhat Agree / Somewhat Disagree: 19%
- Disagree: 3%
- Strongly Disagree: 2%
What JH Employees Enjoy Most
Taking Action and Communication

the keys to increasing engagement scores

Unique department level initiatives
• Developed by leaders & staff together
• Vote on Top 1-2 Priorities
• Develop 90 day Action Plan
• Ask for feedback
• Establish progress updates
• Evaluate the process
• Repeat.

Inclusive initiatives for the Hospital
• Be Well. Together
• Developed by Strategic Initiatives Group
• Communicated by CEO
Be well at home:
• Ensure access to childcare via Child Care SharePoint & Funding opportunities and supports
• Be off when you are off

Be well at work:
• Flexible or decreased schedules/hours
• Telecommuting
• Create/actively manage to professional behavior standards

Be focused on what is most important:
• Our first focus is to Keep all JH employees and patients safe
• The Strategic Leadership Group is inventorying our work to identify our top-10 most important initiatives to keep us focused through the end of the year

Be Well. Together
NEXT STEPS

• In progress:
  – Exit Surveys with People Element
  – Create action plans

• Upcoming:
  – Pulse Surveys with People Element
    • 90 day check in around November 9
  – 2021 Survey
Questions?
Employee of the Quarter

Jess Cigalotti

"Jess took the lead at the Covid clinic, figuring out workflows and supporting clinic providers. She is a great resource for all clinic staff."

Sheridan Clinic
Third Quarter 2020
"It is such an honor and privilege to work with not only the Surgical Associates family but also the Jefferson Healthcare family."
Provider of the Quarter

Dr. Schmidt

“Dr. Schmidt is incredible. She has a very calm demeanor. Patients and her clinical team love this about her as she is never phased.”

Sheridan Clinic
Third Quarter 2020
August 2020 Finance Report
September 23, 2020
Hilary Whittington, CAO/CFO
Education

CARES funding
Aka: Stimulus, Provider Relief funds, COVID band-aid

1. Cost Report Accounting
2. Demonstrating use of funds
August 2020  
Operating Statistics

<table>
<thead>
<tr>
<th>STATISTIC DESCRIPTION</th>
<th>AUGUST 2020</th>
<th>AUGUST 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MO ACTUAL</td>
<td>MO ACTUAL</td>
</tr>
<tr>
<td></td>
<td>BUDGET</td>
<td>% VARIANCE</td>
</tr>
<tr>
<td></td>
<td></td>
<td>%</td>
</tr>
<tr>
<td>FTEs - TOTAL (AVG)</td>
<td>592</td>
<td>625</td>
</tr>
<tr>
<td>ADJUSTED PATIENT DAYS</td>
<td>1,655</td>
<td>2,498</td>
</tr>
<tr>
<td>ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)</td>
<td>54</td>
<td>84</td>
</tr>
<tr>
<td>ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)</td>
<td>252</td>
<td>347</td>
</tr>
<tr>
<td>PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION</td>
<td>306</td>
<td>461</td>
</tr>
<tr>
<td>SURGERY CASES (IN OR)</td>
<td>98</td>
<td>118</td>
</tr>
<tr>
<td>SPECIAL PROCEDURE CASES</td>
<td>69</td>
<td>73</td>
</tr>
<tr>
<td>LAB BILLABLE TESTS</td>
<td>20,761</td>
<td>19,809</td>
</tr>
<tr>
<td>TOTAL DIAGNOSTIC IMAGING TESTS</td>
<td>2,932</td>
<td>3,103</td>
</tr>
<tr>
<td>PHARMACY MEDS DISPENSED</td>
<td>18,939</td>
<td>22,497</td>
</tr>
<tr>
<td>RESPIRATORY THERAPY PROCEDURES</td>
<td>2,154</td>
<td>3,963</td>
</tr>
<tr>
<td>REHAB/PT/OT/ST RVUs</td>
<td>7,701</td>
<td>9,192</td>
</tr>
<tr>
<td>ER CENSUS</td>
<td>974</td>
<td>1,096</td>
</tr>
<tr>
<td>DENTAL CLINIC</td>
<td>311</td>
<td>340</td>
</tr>
<tr>
<td>TOTAL RURAL HEALTH CLINIC VISITS</td>
<td>5,422</td>
<td>6,609</td>
</tr>
<tr>
<td>TOTAL SPECIALTY CLINIC VISITS</td>
<td>3,073</td>
<td>3,564</td>
</tr>
</tbody>
</table>
# August 2020

**Income Statement Summary**

<table>
<thead>
<tr>
<th>Description</th>
<th>August 2020 Actual</th>
<th>August 2020 Budget</th>
<th>Variance Favorable/ (Unfavorable)</th>
<th>%</th>
<th>August 2020 YTD</th>
<th>August 2020 Budget YTD</th>
<th>Variance Favorable/ (Unfavorable)</th>
<th>%</th>
<th>August 2019 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>21,853,081</td>
<td>24,144,814</td>
<td>(2,291,733)</td>
<td>-9%</td>
<td>162,794,884</td>
<td>190,043,070</td>
<td>(27,248,186)</td>
<td>-14%</td>
<td>171,540,856</td>
</tr>
<tr>
<td>Revenue Adjustments</td>
<td>11,600,311</td>
<td>12,908,965</td>
<td>1,308,654</td>
<td>10%</td>
<td>90,655,457</td>
<td>101,606,055</td>
<td>10,950,598</td>
<td>11%</td>
<td>93,004,759</td>
</tr>
<tr>
<td>Charity Care Adjustments</td>
<td>222,691</td>
<td>233,516</td>
<td>10,825</td>
<td>5%</td>
<td>1,836,018</td>
<td>1,837,995</td>
<td>1,977</td>
<td>0%</td>
<td>1,916,187</td>
</tr>
<tr>
<td>Net Patient Service Revenue</td>
<td>10,030,079</td>
<td>11,002,334</td>
<td>(972,254)</td>
<td>-9%</td>
<td>70,303,410</td>
<td>86,599,020</td>
<td>(16,295,610)</td>
<td>-19%</td>
<td>76,619,910</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>262,594</td>
<td>582,137</td>
<td>(319,544)</td>
<td>-55%</td>
<td>11,401,570</td>
<td>4,581,985</td>
<td>6,819,585</td>
<td>149%</td>
<td>5,602,191</td>
</tr>
<tr>
<td><strong>Total Operating Revenue</strong></td>
<td>10,292,673</td>
<td>11,584,471</td>
<td>(1,291,798)</td>
<td>-11%</td>
<td>81,704,980</td>
<td>91,181,006</td>
<td>(9,476,026)</td>
<td>-10%</td>
<td>82,222,102</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>5,304,103</td>
<td>5,555,425</td>
<td>251,323</td>
<td>5%</td>
<td>42,546,191</td>
<td>43,726,578</td>
<td>1,180,387</td>
<td>3%</td>
<td>37,953,055</td>
</tr>
<tr>
<td>Employee Benefits</td>
<td>1,162,133</td>
<td>1,431,213</td>
<td>269,081</td>
<td>19%</td>
<td>9,779,721</td>
<td>11,265,034</td>
<td>1,485,313</td>
<td>13%</td>
<td>9,440,076</td>
</tr>
<tr>
<td>Other Expenses</td>
<td>4,157,028</td>
<td>4,141,799</td>
<td>(15,229)</td>
<td>0%</td>
<td>30,798,502</td>
<td>32,599,968</td>
<td>1,801,466</td>
<td>6%</td>
<td>30,823,043</td>
</tr>
<tr>
<td><strong>Total Operating Expenses</strong></td>
<td>10,623,263</td>
<td>11,128,437</td>
<td>505,174</td>
<td>5%</td>
<td>83,124,414</td>
<td>87,591,580</td>
<td>4,467,166</td>
<td>5%</td>
<td>78,216,174</td>
</tr>
<tr>
<td>Operating Income (Loss)</td>
<td>(330,590)</td>
<td>456,034</td>
<td>(786,624)</td>
<td>-172%</td>
<td>(1,419,434)</td>
<td>3,589,426</td>
<td>(5,008,859)</td>
<td>-140%</td>
<td>4,005,928</td>
</tr>
<tr>
<td>Total Non Operating Revenues (Expenses)</td>
<td>587</td>
<td>(7,471)</td>
<td>8,058</td>
<td>108%</td>
<td>24,903</td>
<td>(58,805)</td>
<td>83,708</td>
<td>142%</td>
<td>129,164</td>
</tr>
<tr>
<td>Change in Net Position (Loss)</td>
<td>(330,003)</td>
<td>448,563</td>
<td>(778,566)</td>
<td>-174%</td>
<td>(1,394,531)</td>
<td>3,530,620</td>
<td>(4,925,151)</td>
<td>-139%</td>
<td>4,135,092</td>
</tr>
</tbody>
</table>

**Operating Margin**  
-3.2% 3.9%  -7.1%  -181.6% -1.7% 3.9% -5.67% -144.1% 4.9%  
**Total margin**  
-3.2% 3.9%  -7.1%  -182.8% -1.7% 3.9% -5.58% -144.1% 5.0%  
**Salaries & Benefits as a % of net pt svc rev**  
-64.5% -63.5%  -1.0%  -1.5% -74.4% -63.5% -10.93% -17.2% -61.9%
August 2020
Cash and Accounts Receivable

Days Cash and Accounts Receivable

- Days Outstanding in A/R: 52.38 to 46.99
- Days AR Goal - 45:
- Days of Cash: 87 to 113
- Days Cash Goal - 90:

Graph shows trends from 1/31/2020 to 8/31/2020.
<table>
<thead>
<tr>
<th>Dept#</th>
<th>Department</th>
<th>Rev/Exp</th>
<th>Account</th>
<th>Account Description</th>
<th>Aug Actual</th>
<th>Aug Budget</th>
<th>Aug Variance</th>
<th>2020 to Date Actual</th>
<th>2020 to Date Budget</th>
<th>2020 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>4,503.00</td>
<td>5,204.00</td>
<td>701.00</td>
<td>33,635.00</td>
<td>40,960.00</td>
<td>7,325.00</td>
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<tr>
<td>601100</td>
<td>BENEFITS</td>
<td>FICA</td>
<td></td>
<td>343.00</td>
<td></td>
<td>323.00</td>
<td>(20.00)</td>
<td>2,571.00</td>
<td>2,540.00</td>
<td>(31.00)</td>
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<tr>
<td>601150</td>
<td>BENEFITS</td>
<td>WA F&amp;MLA</td>
<td></td>
<td>7.00</td>
<td></td>
<td>-</td>
<td>(7.00)</td>
<td>49.00</td>
<td>-</td>
<td>(49.00)</td>
</tr>
<tr>
<td>601400</td>
<td>BENEFITS</td>
<td>MEDICAL INS-UNION</td>
<td>4,880.00</td>
<td>4,271.00</td>
<td>(609.00)</td>
<td>39,003.00</td>
<td>33,617.00</td>
<td>(5,386.00)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>601600</td>
<td>BENEFITS</td>
<td>RETIREMENT</td>
<td>-</td>
<td>260.00</td>
<td></td>
<td>260.00</td>
<td>-</td>
<td>2,048.00</td>
<td>2,048.00</td>
<td>0.00</td>
</tr>
<tr>
<td>601900</td>
<td>BENEFITS</td>
<td>EMPLOYEE ASSISTANCE</td>
<td>-</td>
<td>10.00</td>
<td></td>
<td>10.00</td>
<td>-</td>
<td>75.00</td>
<td>75.00</td>
<td></td>
</tr>
<tr>
<td>602300</td>
<td>CONSULT</td>
<td>MNGMT FEE</td>
<td>-</td>
<td>2,117.00</td>
<td></td>
<td>2,117.00</td>
<td>-</td>
<td>16,667.00</td>
<td>16,667.00</td>
<td></td>
</tr>
<tr>
<td>602500</td>
<td>AUDIT FEES</td>
<td>-</td>
<td>3,557.00</td>
<td>3,557.00</td>
<td></td>
<td>3,557.00</td>
<td>-</td>
<td>28,000.00</td>
<td>(2,900.00)</td>
<td></td>
</tr>
<tr>
<td>604200</td>
<td>CATERING</td>
<td>-</td>
<td>125.00</td>
<td>125.00</td>
<td></td>
<td>125.00</td>
<td>105.00</td>
<td>985.00</td>
<td>880.00</td>
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<td>604500</td>
<td>OFFICE SUPPLIES</td>
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<td>25.00</td>
<td>-</td>
<td>197.00</td>
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<td>604850</td>
<td>COMPUTER EQUIPMENT</td>
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<td>-</td>
<td>657.00</td>
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<tr>
<td>606500</td>
<td>OTHER PURCHASED SERVICES</td>
<td>-</td>
<td>834.00</td>
<td>834.00</td>
<td></td>
<td>834.00</td>
<td>(27.00)</td>
<td>6,567.00</td>
<td>6,594.00</td>
<td></td>
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<tr>
<td>609400</td>
<td>TRAVEL/MEETINGS/TRAINING</td>
<td>-</td>
<td>1,669.00</td>
<td>1,669.00</td>
<td></td>
<td>1,669.00</td>
<td>5,578.00</td>
<td>13,133.00</td>
<td>7,555.00</td>
<td></td>
</tr>
<tr>
<td><strong>Exp Total</strong></td>
<td></td>
<td></td>
<td>9,733.00</td>
<td>18,478.00</td>
<td>8,745.00</td>
<td>111,814.00</td>
<td>145,446.00</td>
<td>33,632.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>BOARD Total</strong></td>
<td></td>
<td></td>
<td>9,733.00</td>
<td>18,478.00</td>
<td>8,745.00</td>
<td>111,814.00</td>
<td>145,446.00</td>
<td>33,632.00</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
September 2020
Preview — (*as of 0:00 09/23/20)

- $22,596,054 in Projected HB charges
  - Average: $723,987/day (HB only)
  - Budget: $760,420/day
  - 95% of Budget

- $8,989,379 in HB cash collections
  - Average: $299,610/day (HB only)
  - Goal: $335,524/day

- 43.1 Days in A/R

- Questions
Agenda

Patient Safety and Quality Overview

Quality Highlight: Infection Control & Prevention

Service: In the Words of our Patients

Current Projects
DNV Certification in Infection Prevention

Quality Management System, including policies and environment of care

Emergency Management

Measurement, Surveillance and clinical excellence

Staff, training, job descriptions, and medical staff

Non-Conformities and Opportunities for Improvement

- Condition Level NC-1: Zero
- NC-1 Non-conformities: 2
  - Quality Management System
  - Reprocessing of Medical Equipment
- NC-2 Non-conformities: 5
  - Measurement, monitoring and analysis
  - Medical staff
  - Job descriptions and performance evaluations
  - Infection Prevention Risk Assessment
  - Hand hygiene analysis and feedback

“This is the safest I’ve felt in six months.”
Infection Prevention and Control

Risk Assessment and Focus areas for 2020

<table>
<thead>
<tr>
<th>Goal</th>
<th>Plan</th>
<th>Measurement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevent procedural infections due to inadequate endoscope reprocessing</td>
<td>Add ATP testing program to endoscopy sites, implement on time scope reprocessing program and offer feedback.</td>
<td>• Post procedure infections • Number of devices that need to be reprocessed</td>
</tr>
<tr>
<td>Prevent Healthcare Acquired infections</td>
<td>Hand hygiene: enhance leader engagement, increase surveillance, feedback, and coaching</td>
<td>• Number of HAI's • Compliance with hand hygiene • Survey data</td>
</tr>
<tr>
<td>Increase preparedness to respond to infection-related emergency</td>
<td>Enhance practices in emergency management and ensure EM training.</td>
<td>Completion of one active EM drill related to infectious disease (pandemic, community outbreak, exposure to bioterrorism agents)</td>
</tr>
<tr>
<td>Assess and improve Infection Prevention Systems</td>
<td>Audit/evaluate IPC processes, and apply for DNV CIP.</td>
<td>Obtain DNV Certification in Infection Prevention</td>
</tr>
</tbody>
</table>

2020 Performance

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>Q1 2020</th>
<th>Q2 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Line infections</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Catheter Associated Infections</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Surgical Site Infections</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>C. Diff Hospital Onset</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>
Patient Perspective: In the Words of Our Patients

• Wonderful, personal, healing
• I was being treated for possible covid-19. All staff followed excellent procedures - I was isolated, they had PPE - the covid test was negative & I was very appropriately treated for pneumonia - well done emergency staff!
• Laura Wulff is an outstanding person and physician. I trust and admire her and respect her advice. She is compassionate and kind also. Thank you.
• Dr. Haycox is an excellent doctor.
• I had a total hip replacement. Dr. Naumann did a superb job. All staff were great. I had a very positive experience.
• Dr. Meyersen is one of the best MD's I have ever seen. JGH is lucky to have him!
• With Wes' help, I've moved from uncontrolled to controlled diabetes.

“The care was exemplary on all levels. Standards are important and everyone worked as a team to maintain them.”
Current Projects

Projects and Teamwork

- Transitions of Care: Closing the Referrals Loop
- Performance Improvement: Reducing the time to CT for stroke patients
- Surgical Safety: Informed Consent, Infection Control, Specimen labeling
- Internal Audit: Workplace Violence Prevention
- Health Equity
- Medical Staff Leadership (‘Greeley’)

Quality

- Ongoing: Merit-based Incentive Payment System (MIPS) Reporting, Core Measures, Patient Engagement
- Cancer Committee Study of Quality: Cervical Cancer Screening compliance
- Emergency Management: COVID19
- Continued partnership with Public Health
- Accreditation Coordination and Management

Medication Safety

- AHRQ and Johns Hopkins University – Ambulatory Antimicrobial Stewardship
- Bar Code Medication Administration in the Medical Group
- Medication Safety Team
Questions?
Administrative Report

September 23, 2020

Mike Glenn, CEO
# COVID-19 Response Update

## Testing

<table>
<thead>
<tr>
<th>Tests</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Tested</td>
<td>6,977</td>
</tr>
<tr>
<td>Negatives</td>
<td>6,910</td>
</tr>
<tr>
<td>Positives</td>
<td>67</td>
</tr>
<tr>
<td>Percentage Positive</td>
<td>.96%</td>
</tr>
</tbody>
</table>
| Employee Tests            | 2 positive  
                          | 223 negatives  |
## COVID-19 Response Update

### PPE Inventory

<table>
<thead>
<tr>
<th>Location</th>
<th>Procedure Masks</th>
<th>N 95</th>
<th>Gowns</th>
<th>Eye Protection</th>
<th>PAPR Hood</th>
</tr>
</thead>
<tbody>
<tr>
<td>JH Department Inventory</td>
<td>9,876</td>
<td>896</td>
<td>1,634</td>
<td>866</td>
<td>34</td>
</tr>
<tr>
<td>JH General Stores</td>
<td>41,115</td>
<td>16,418</td>
<td>15,950</td>
<td>890</td>
<td>0</td>
</tr>
<tr>
<td>State Allocation</td>
<td>0</td>
<td>0</td>
<td>5,900</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>JH Donations</td>
<td>4,067</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>JH COVID SURGE STOCKPILE</td>
<td>30,400</td>
<td>4,660</td>
<td>9,000</td>
<td>500</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total Total</strong></td>
<td><strong>85,458</strong></td>
<td><strong>21,974</strong></td>
<td><strong>32,484</strong></td>
<td><strong>1,178</strong></td>
<td><strong>34</strong></td>
</tr>
</tbody>
</table>
Jefferson Healthcare Operations Update

Primary Care variance to target visits
Visit volumes in the five primary care and Dental clinics. Red line indicates weekly visit target based on annual targets. The % labels are the variances of actual to target visits.

Specialty clinic variance to target visits
Visit volumes in Medical Group’s specialty clinics. Red line indicates weekly visit target based on annual targets. The % labels are the variances of actual to target visits.
Surgical case variance to target cases

Surgical case volumes in the hospital OR. Red line indicates weekly combined case target based on annual targets for endoscopy and surgical services. The % labels are the variances of actual to target surgical case volume.
Jefferson Healthcare Operations Update

Emergency Dept and Express Clinic Volumes

Volumes by arrival department in 2020
Health Equity Update

- IHI pursing Equity initiative
Other

• Org chart
  • Rehire Chief Ancillary Services Officer
    • Oversee most of Ancillary Services

• Region MAT Clinic update
Pursuing Equity:
A Learning and Action Network
to Close Equity Gaps in Health Care

October 2020 – March 2022
Our Approach

The Pursuing Equity Learning and Action Network is designed to foster systemic action by health systems to get measurable results and achieve improvements in equity. The IHI team will mobilize experts in improvement science and health equity to work in close partnership with the participating organizations. Learning activities will be delivered virtually and in person. IHI will:

- Build a network that learns together, in which all participating organizations are committed to testing changes, sharing what does and does not work, tracking progress and sharing data, adapting ideas, joining workgroups to learn from each other on specific topics, and building relationships;

- Engage leading subject matter experts in equity, as well as those who have tested and demonstrated promising results, to deliver case-based discussions on applying systems improvement methods to equity;

- Provide improvement coaching to support ongoing application of tools and methods for improvement;

- Deploy an information infrastructure to support data-driven testing and learning from all participating sites;

- Build community and trust among participating organizations;
Expectations of Participating Teams

The following are requested from organizations interested in joining the Pursuing Equity Learning and Action Network:

- A written letter of support from the CEO committing to supporting advancement of equity across the five components of the IHI framework;
- One senior leader and one alternate senior leader identified to participate in a quarterly leadership call and to provide a written reply of their reflections on the team’s quarterly report;
- Identification of a multidisciplinary team to participate in the network and work across the five components of the framework, including at least one community partner and one representative from the health system’s quality department;
- Team participation in all network meetings over the 18-month period, including regular virtual calls and team travel to participate in the in-person workshops (workshop travel is covered by the participating organization);
- Identification of high-priority clinical areas where inequities exist, which will be the focus of the organization’s equity improvement work (i.e., the network’s focus on equity is intended to strengthen critical existing work rather than create a new, siloed equity improvement project);
- Quarterly reports that include data submission on changes tested, learning, process data, and outcomes data to be shared with the network and with your designated senior leader;
- Participation in approximately three calls with program improvement staff to provide your feedback on how IHI can improve your experience and learning in the network;
- Willingness to share learning, challenges, and data transparently and publicly; and
- A required commitment from all participating organizations to advancing their understanding of and action to remediate racial inequities at multiple levels, from structural to individually-mediated.
During the two-year initiative, the eight teams made strides to institutionalize a culture of health equity, including making health equity a strategic priority, conversations and actions to address structural racism, gaining buy-in to advance equity, and testing numerous changes to improve equity in both their health systems and their communities. IHI highlighted key lessons and results from the two-year Pursuing Equity initiative in several guidance documents and case studies from each participating team. Our aim is now to build on those lessons and expand the network with other like-minded health systems that are ready to do the tough and rewarding work personally, in our teams, in our health systems, and in our communities to close equity gaps in health care.

IHI’s vision is that everyone has the best care and health possible. Achieving this vision requires a focus on equity. The 18-month Pursuing Equity Learning and Action Network (Oct 2020 - March 2022) will underscore the urgency of eliminating inequities, provide improvement methods and tools for testing and learning our way to solutions, create a network for sharing learning across organizations, and disseminate our results, challenges, and most effective improvements. At the end of the initiative, participating teams will have built knowledge and skills across the five-component framework (e.g., in measurement to advance equity, in making equity a strategic priority), and will be actively working to apply improvement methods to narrow clinical inequities. IHI has a long track record of convening organizations in innovative collaboratives to pursue bold aims to challenging problems such as reducing readmissions and advancing the Triple Aim.
Our Strategy

IHI Framework for Health Care Organizations to Improve Health Equity

Achieving equitable care processes and outcomes requires an approach focused on action and learning. It is essential to address institutional structures, areas where health care systems have direct influence, and areas where the health care system can support equity in the community. Informed by the first two years of Pursuing Equity, our current theory of change for improving equity includes five components, as described below. IHI will continue to update and refine this theory based on the continued learning in the Pursuing Equity Learning and Action Network.

- **Make Health Equity a Strategic Priority**
  Organizational leaders commit to improving health equity by including equity in the organization’s strategy and goals. Equity is viewed as mission critical – that is, the mission, vision, and business cannot thrive without a focus on equity.

- **Build Infrastructure to Support Health Equity**
  Operationalizing a health equity strategy requires dedicated resources, including human resources and data resources, as well as an organizational infrastructure.

- **Address the Multiple Determinants of Health**
  Health care organizations must develop strategies to address the multiple determinants of health, including health care services, organizational policies, the organization’s physical environment, the community’s socioeconomic status, and healthy behaviors.

- **Eliminate Racism and Other Forms of Oppression**
  Health care organizations must look at their systems, practices, and policies to assess where inequities are produced and where equity can be proactively created.

- **Partner with the Community to Improve Health Equity**
  To support communities to reach their full health potential, health care organizations must work in partnership with community members and with community-based organizations that are highly engaged with community members.
## Timeline for Pursuing Equity Activities

<table>
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<tr>
<th>Pursuing Equity Activity</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
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<tbody>
<tr>
<td></td>
<td>Oct</td>
<td>Nov</td>
<td>Dec</td>
</tr>
<tr>
<td>In-Person Workshops</td>
<td>●</td>
<td></td>
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<tr>
<td>All Team Calls</td>
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<td>●</td>
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<tr>
<td>Clinical Workgroup Calls</td>
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<td>●</td>
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<tr>
<td>Addressing Racism</td>
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<td>●</td>
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<td>Workgroup Calls</td>
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<tr>
<td>Measurement Calls</td>
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<td>Leadership Calls</td>
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<td></td>
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<tr>
<td>IHI National Forum</td>
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<tr>
<td>Special Events</td>
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Questions