

COVID-19 Notice

No in-person attendance allowed, pursuant to Governor Inslee's Proclamation 20-28.

<u>All</u> 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: 613756871#

Regular Session Agenda Wednesday, November 25, 2020			
Call to Order:	2:30		
Approve Agenda:	2:30		
Education Topic:	2:31		
Community Health Improvement Project (CHIP)- John Nowak, Co-Executive Director, CHIP; Lori Fleming, Co- Executive Director CHIP	_		
Break:	3:15		
Patient Story: Tina Toner, CNO	3:30		
Minutes:	3:35		
October 28 Regular Session Minutes (pgs. 2-6)			
 Required Approvals: Action Requested October Warrants and Adjustment (pgs. 7-12) Resolution 2020-17 Cancelled Warrants (pg. 13) Medical Staff Credentials/ Appointments/ Reappointments (pg. 14) 	3:40		
Patient Advocate Report: Jackie Levin, Patient Advocate	3:45		
Financial Report: Hilary Whittington, CAO/CFO			
Quality Report: Brandie Manuel, Chief Pt Safety and Quality Officer	4:05		
Administrative Report: Mike Glenn, CEO	4:15		
Board Business:			
Board of Health Report	4:30		
 Resolution 2020-16 Health Equity (pgs. 15-16) 	4:35		
CEO Evaluation schedule	4:40		
Meeting Evaluation:	4:45		
Conclude: This Regular Session will be officially recorded.	4:50		

This Regular Session will be officially recorded. Times shown in agenda are estimates only.

No Live Public Comment

In lieu of live comments, members of the public may comment on any agenda item or any other matter related to the District via a letter addressed to the Commissioners at 834 Sheridan Street, Port Townsend, Washington 98368, or via email to commissioners@jeffersonhealthcare.org.

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Jefferson County Public Hospital District No.2 Board of Commissioners, Regular Session Minutes Wednesday, October 28, 2020

Call to Order:

The meeting was called to order at 2:33pm 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, Dr. Joe Mattern, CMO, Dr. Kent Smith, Chief of Staff, Jenn Wharton, Chief Ambulatory and Medical Group Officer, and Brittany Huntingford, Administrative Assistant were also in attendance. This meeting was officially audio recorded by Jefferson Healthcare.

Approve Agenda:

Commissioner Dressler approved the agenda. Commissioner Kolff seconded. **Action:** Motion passed unanimously.

Education Topic:

- WSHA
 - o Cassie Sauer, President

Cassie Sauer, President from Washington State Hospital Association and Matt Ellsworth, Executive Director from Association of Washington Public Hospital Districts provided a presentation titled working together for the future of Health Care.

Commissioners recessed for break at 3:16pm. Commissioner reconvened from break at 3:30pm.

Patient Story:

Dr. Tracie Harris, Chief Medical Quality Officer and Tina Toner, Chief Nursing Officer presented the patient story.

Minutes:

• September 23, 2020 Minutes

Commissioner Kolff made a motion to amend the September 23, 2020 minutes to include the below amendment to what was written under Board Business. 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.
- 5. Commissioner Kolff commented on the number of new COVID-19 cases per hundred thousand in the past 2 weeks in Jefferson, Clallam, and Kitsap Counties.
- 6. The Health department encourages everyone to be safe to help keep schools open. Discussion ensued.

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 an extensive report from the Board of Health activities.

Discussion ensued.

Commissioner Kolff made a motion to approve the September 23, 2020 amended minutes. Commissioner McComas seconded.

Action: Motion passed unanimously.

October 21, 2020 Minutes

Commissioner McComas made a motion to approve the October 10, 2020 minutes. Commissioner Kolff seconded.

Action: Motion passed unanimously.

Required Approvals: Action Requested

September Warrants and Adjustments

- Resolution 2020-11 Cancelled Warrants
- Resolution 2020-12 Surplus Equipment
- Medical Staff Credentials/Appointments/Reappointments

Commissioner Kolff made a motion to approve the September Warrants and Adjustments, Resolution 2020-11 Cancelled Warrants, Resolution 2020-12 Surplus Equipment and Medical Staff Credentials/ Appointments/ Reappointments Commissioner Dressler seconded.

Action: Motion passed unanimously.

Budget Hearing for Fiscal Year 2021: Hilary Whittington, CAO/CFO

- 2021 Operations Budget Summary
- 2021 Capital Budget Summary
- Public Comment
- Commission Discussion

Commissioner Kolff approved resolution 2020-13 with property tax. Commissioner McComas seconded.

Action: Motion passed unanimously.

Commissioner Kolff approved resolution 2020-14 substantial need. Commissioner Dressler seconded.

Action: Motion passed unanimously.

Commissioner Kolff approved the 2021 Operations and Capital Budgets. Commissioner Dressler seconded.

Action: Motion passed unanimously.

No public comment was made

Financial Report:

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

Discussion ensued.

Quality Report:

Brandie Manuel, CPSQO, presented the September Quality Report.

Discussion ensued

Administrative Report

Mike Glenn, CEO, presented the Administrative report.

Discussion ensued

CMO Report:

Dr. Joe Mattern, CMO

Discussion ensued

Board Business:

• Resolution 2020-16 Health Equity-

Commissioner Kolff requested that this topic be tabled due to limited time available at this meeting.

Agenda Evaluation

Commissioner Dressler had no issues with the agenda, as there are opportunities to contact the chair when needed. No requests for changes at this time.

Commissioner Kolff also has no concerns around the agendas, he asked to clarify the process of agenda setting process, discussion ensued.

Commissioner Kolff asked for more time to discuss the Health Equity resolution at the next meeting.

Commissioner Buhler-Rienstra offered to add the Board of Health Report as a recurring item on the agenda moving forward.

Commissioner Ready brought forward the idea that he would like reports department directors. Commissioner Buhler-Rienstra stated that she is open to discussion on the subject.

Commissioner McComas noted that Commissioner Rounds with the CEO had been curtailed because of the COVID pandemic.

Board of Health report

Commissioner Kolff gave a report from the Jefferson County Board of health, Full details are available on their website or the recording of this meeting.

- Commissioner Dressler made note of the retirement of Carol Davis after 50 years of service, as well as the passing of former Assistant Director of Nursing, Patsy Newell.
- Appoint Independent Auditor

Commissioner Kolff made a motion to appoint Dingus, Zarecor and Associates as the independent auditor for 2021. Commissioner Dressler seconded.

• Action: Motion passed unanimously.

Commissioner Buhler Rienstra noted that the CEO evaluation forms would be passed out in November.

Meeting Evaluation:

Commissioners evaluated the meeting.

Commissioners recessed for break at 6:08pm.

Commissioner reconvened from break at 6:18pm.

Executive Session:

• Current or potential litigation

Commissioners went into Executive Session for thirty (30) minutes at 6:18pm. Commissioners came out of Executive Session at 6:48 pm. No action was taken following the session.

Conclude:

Commissioner Dressler made a motio	n to conclude the	meeting. Co	ommissioner
McComas seconded.		_	

Action: Motion passed unanimously.	
Meeting concluded at 6:49pm.	
Approved by the Commission:	
Chair of Commission: Jill Buhler Rienstra	
Secretary of Commission: Marie Dressler	

Jefferson Healthcare	October 2020 Actual	October 2020 Budget	Variance Favorable/	%	October 2020 YTD	October 2020 Budget YTD	Variance Favorable/	%	October 2019 YTD
			(Unfavorable)				(Unfavorable)		
Gross Revenue Inpatient Revenue	3,122,322	4,332,539	(1,210,218)	-28%	31,767,030	42,347,079	(10,580,048)	-25%	37,687,867
Outpatient Revenue	20.754.502	19,812,290	942,212	5%	178,419,072	193,649,160	(15,230,089)	-8%	178,778,086
		,	, ,	- 7,0	,,	,,	(10,200,000)	- 7,0	,,
Total Gross Revenue	23,876,824	24,144,830	(268,006)	-1%	210,186,102	235,996,239	(25,810,137)	-11%	216,465,953
Revenue Adjustments									
Cost Adjustment Medicaid	2,064,564	2,221,644	157,080	7%	17,581,854	21,714,776	4,132,922	19%	18,822,283
ost Adjustment Medicare	8,956,055	8,252,447	(703,608)	-9%	74,245,516	80,661,017	6,415,501	8%	76,629,114
harity Care	173,225	233,516	60,291	26%	2,725,165	2,282,429	(442,736)	-19%	2,411,996
ontractual Allowances Other	2,475,142	1,883,515	(591,627)	-31%	20,171,078	18,409,838	(1,761,240)	-10%	17,303,467
dministrative Adjustments	(103,148)	110,246	213,394	194%	106,361	1,077,564	971,203	90%	892,909
lowance for Uncollectible Accounts	(844,675)	441,122	1,285,797	291%	755,477	4,311,607	3,556,130	82%	3,424,334
Total Revenue Adjustments	12,721,163	13,142,489	421,326	3%	115,585,451	128,457,231	12,871,780	10%	119,484,103
•	,,	,,	,5		,	,,	,,,, 00	, .	, ,
Net Patient Service Revenue	11,155,661	11,002,341	153,320	1%	94,600,651	107,539,008	(12,938,357)	-12%	96,981,850
ther Revenue									
40B Revenue	230,720	277,357	(46,637)	-17%	2,542,455	2,710,939	(168,484)	-6%	3,378,006
ther Operating Revenue	157,219	304,781	(147,562)	-48%	9,902,058	2,978,989	6,923,069	232%	3,053,103
Total Operating Revenues	11,543,600	11,584,479	(40,879)	0%	107,045,164	113,228,936	(6,183,772)	-5%	103,412,959
perating Expenses									
alaries And Wages	5,511,587	5,555,429	43,842	1%	53,287,617	54,299,839	1,012,222	2%	47,427,261
nployee Benefits	1,623,731	1,431,214	(192,517)	-13%	12,609,468	13,988,966	1,379,498	10%	11,696,088
ofessional Fees	111,888	194,246	82,358	42%	2,033,743	1,898,601	(135,141)	-7%	4,457,112
ırchased Services	887,659	715,639	(172,021)	-24%	7,099,807	6,994,792	(105,015)	-2%	6,183,250
upplies	2,431,713	2,110,911	(320,802)	-15%	20,667,436	20,632,456	(34,981)	0%	19,276,299
surance	75,159	58,565	(16,594)	-28%	797,908	572,430	(225,478)	-39%	562,247
eases And Rentals	12,892	15,461	2,569	17%	122,241	151,115	28,874	19%	1,311,439
epreciation And Amortization	518,202	549,517	31,314	6%	5,153,729	5,371,084	217,355	4%	3,911,424
epairs And Maintenance	66,465	107,679	41,214	38%	739,889	1,052,473	312,584	30%	603,404
tilities	97,687	105,814	8,127	8%	995,829	1,034,246	38,417	4%	960,185
censes And Taxes	52,821	56,552	3,730	7%	577,052	552,748	(24,304)	-4%	587,889
ther	228,896	227,418	(1,477)	-1%	1,567,882	2,222,832	654,949	29%	1,868,883
Total Operating Expenses	11,618,702	11,128,445	(490,257)	-4%	105,652,601	108,771,580	3,118,980	3%	98,845,481
Operating Income (Loss)	(75,102)	456,033	(531,136)	-116%	1,392,563	4,457,356	(3,064,792)	-69%	4,567,478
on Operating Revenues (Expenses)									
axation For Maint Operations	21,196	22,750	(1,554)	-7%	199,948	222,366	(22,418)	-10%	208,250
axation For Debt Service	18,322	18,837	(516)	-3%	171,804	184,118	(12,314)	-7%	194,548
vestment Income	7,496	28,103	(20,607)	-73%	176,582	274,687	(98,105)	-36%	465,302
erest Expense	(85,016)	(94,102)	9,086	10%	(908,025)	(919,769)	11,744	1%	(815,693)
ond Issuance Costs	-	-	· -	0%		-		0%	199,733
ain or (Loss) on Disposed Asset	-	-	-	0%	-	-	-	0%	-
ontributions	2,211	16,940	(14,729)	-87%	248,131	165,573.77	82,558	50%	(61,507)
Total Non Operating Revenues (Ex	(35,791)	(7,471)	(28,319)	-379%	(111,560)	(73,025)	(38,535)	-53%	190,633
	(,)	(, - ,	(-,)		, ,,,,,,	, -,,	(,-,-		
hange in Net Position (Loss)	(110,893)	448,562	(559,455)	-125%	1,281,003	4,384,331	(3,103,328)	-71%	4,758,111
•									

Jefferson										
Healthcare	OCTOBER 2020			OCTOBER 2019						
STATISTIC DESCRIPTION	<u>MO</u>	MO	<u>%</u>	YTD	YTD	<u>%</u>	<u>MO</u>	<u>%</u>	YTD	<u>%</u>
<u> </u>	<u>ACTUAL</u>	BUDGET	VARIANCE	<u>ACTUAL</u>	BUDGET	VARIANCE	<u>ACTUAL</u>	VARIANCE	<u>ACTUAL</u>	VARIANCE
FTEs - TOTAL (AVG)	621.05	625.21	1%	599.67	625.21	4%	571.74	-9%	567.77	-6%
FTES - PRODUCTIVE (AVG)	546.40	559.80	2%	531.46	559.80	5%	501.35	-9%	506.75	-5%
ADJUSTED PATIENT DAYS	2,586 50	2,498 84	4%	12,761 571	24,581 828	-48%	2,160 55	20%	15,540 705	-18% -23%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS) ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	283	347	-40% -18%	2,520	3,415	-31% -26%	312	-9% -9%	3,202	-23% -27%
SWING IP PATIENT DAYS (MIDNIGHT CENSUS)	12	30	-60%	152	292	-48%	20	-40%	158	-4%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	345	461	-25%	3,243	4,535	-28%	387	-11%	4,065	-25%
BIRTHS	12	10	20%	78	100	-22%	9	33%	93	-19%
SURGERY CASES (IN OR)	120	118	2%	1,031	1,160	-11%	120	0%	1,083	-5%
SURGERY MINUTES (IN OR)	15,083	15,669	-4%	133,106	154,163	-14%	13,924	8%	139,444	-5%
SPECIAL PROCEDURE CASES	69	73	-5%	570	718	-21%	70	-1%	684	-20%
LAB BILLABLE TESTS	22,406	19,809	13%	184,611	194,892	-5%	18,532	21%	184,834	0%
BLOOD BANK UNITS MATCHED	-	46	-100%	309	453	-32%	41	-100%	442	-43%
MRIS COMPLETED	191	196	-3%	1,747	1,933	-10%	181	6%	1,829	-5%
CT SCANS COMPLETED	562	516	9%	4,620	5,075	-9%	546	3%	4,884	-6%
RADIOLOGY DIAGNOSTIC TESTS	1,501	1,560	-4%	13,709	15,351	-11%	1,480	1%	14,741	-8%
ECHOs COMPLETED	165	139	19%	1,303	1,368	-5%	124	33%	1,266	3%
ULTRASOUNDS COMPLETED	322	337	-4%	2,896	3,312	-13%	331	-3%	3,184	-10%
MAMMOGRAPHYS COMPLETED	208	313	-34%	1,972	3,084	-36%	249	-16%	2,336	-18%
NUCLEAR MEDICINE TESTS	43	42	2%	349	414	-16%	39	10%	370	-6%
TOTAL DIAGNOSTIC IMAGING TESTS	2,992	3,103	-4%	26,596	30,537	-13%	2,950	1%	28,610	-8%
PHARMACY MEDS DISPENSED ANTI COAG VISITS	19,871 438	22,497 390	-12% 12%	185,404 3,760	221,346 3,837	-16% -2%	21,409 428	-7% 2%	219,118 3,908	-18%
RESPIRATORY THERAPY PROCEDURES	2,375	3,963	-40%	24,154	38,987	-38%	3,003	-21%	35,344	-4% -46%
PULMONARY REHAB RVUs	137	220	-38%	1,244	2,160	-42%	234	-41%	2,201	-77%
PHYSICAL THERAPY RVUs	7,511	7,653	-2%	62,697	75,296	-17%	7,618	-1%	72,289	-15%
OCCUPATIONAL THERAPY RVUs	1,249	1,107	13%	10,891	10,896	0%	939	33%	9,857	9%
SPEECH THERAPY RVUs	269	212	27%	2,237	2,082	7%	246	9%	2,157	4%
REHAB/PT/OT/ST RVUs	9,166	9,192	0%	77,069	90,434	-15%	9,037	1%	86,504	-12%
ER CENSUS	931	1,096	-15%	9,066	10,784	-16%	1,133	-18%	10,705	-18%
EXPRESS CLINIC	548	974	-44%	5,870	9,580	-39%	902	-39%	8,066	-37%
SOCO PATIENT VISITS	161	155	4%	1,409	1,527	-8%	173	-7%	1,538	-9%
PORT LUDLOW PATIENT VISITS	513	736	-30%	5,427	7,239	-25%	602	-15%	6,491	-20%
SHERIDAN PATIENT VISITS	2,683	2,714	-1%	21,811	26,701	-18%	2,380	13%	25,492	-17%
DENTAL CLINIC	383	340	13%	2,672	3,342	-20%	208	84%	977	63%
WATERSHIP CLINIC PATIENT VISITS	1,139	1,099	4%	9,419	10,815	-13%	1,047	9%	10,551	-12%
TOWNSEND PATIENT VISITS	516	591	-13%	5,332	5,811	-8%	542	-5%	5,533	-4%
TOTAL RURAL HEALTH CLINIC VISITS	5,943	6,609	-10%	51,940	65,015	-20%	5,854	2%	58,648	-13%
OFF-SITE LAB	1,408	-	0%	6,592	-	0%	-	0%	-	100%
DISASTER CLINIC	96	-	0%	1,365	-	0%	<u> </u>	0% 0%	-	100%
TOTAL COVID RESPONSE CARDIOLOGY CLINIC VISITS	1,504 517	365	42%	7,957 3,510	3,593	0% -2%	243	113%	2,587	100% 26%
DERMATOLOGY CLINIC VISITS DERMATOLOGY CLINIC VISITS	645	514	25%	5,947	5,055	18%	520	24%	5,141	14%
GEN SURG PATIENT VISITS	300	310	-3%	2,412	3,054	-21%	302	-1%	3,293	-37%
ONCOLOGY VISITS	633	547	16%	5,248	5,381	-2%	459	38%	4,288	18%
ORTHO PATIENT VISITS	760	739	3%	6,411	7,270	-12%	571	33%	5,862	9%
SLEEP CLINIC VISITS	162	244	-34%	1,551	2,400	-35%	109	49%	1,195	23%
UROLOGY VISITS	197	255	-23%	1,601	2,509	-36%	290	-32%	2,308	-44%
WOMENS CLINIC VISITS	185	234	-21%	1,408	2,298	-39%	163	13%	1,925	-37%
WOUND CLINIC VISITS	245	356	-31%	2,248	3,505	-36%	292	-16%	2,771	-23%
TOTAL SPECIALTY CLINIC VISITS	3,644	3,564	2%	30,336	35,065	-13%	2,949	24%	29,370	3%
SLEEP CENTER SLEEP STUDIES	52	71	-27%	493	702	-30%	71	-27%	628	-27%
INFUSION CENTER VISITS	729	855	-15%	7,050	8,415	-16%	815	-11%	7,493	-6%
SURGERY CENTER ENDOSCOPIES	75	79	-5%	621	777	-20%	87	-14%	756	-22%
HOME HEALTH EPISODES	55	85	-35%	519	833	-38%	77	-29%	763	-47%
HOSPICE CENSUS/DAYS	1,193	1,017	17%	10,865	10,008	9%	1,235	-3%	9,796	10%
CARDIAC REHAB SESSIONS	74	170	-56%	712	1,671	-57%	27	174%	246	65%
DIETARY TOTAL REVENUE	56,594	96,755	-42%	615,494	951,943	-35%	80,051	-29%	777,832	-26%
MAT MGMT TOTAL ORDERS PROCESSED EXERCISE FOR HEALTH PARTICIPANTS	1,974	2,376 796	-17%	19,455 1,240	23,381	-17%	2,298 820	-14%	21,119	-9%
LALINGISE FOR REALITI PARTICIPANTS	_	796	-100%	1,240	7,836	-84%	820	-100%	7,562	-510%

TO: BOARD OF COMMISSIONERS
FROM: HILARY WHITTINGTON, CAO/CFO
RE: OCTOBER 2020 WARRANT SUMMARY

The following items need to be approved at the next commission meeting:

General Fund Warrants & ACH Transfers Allowance for Uncollectible Accounts / Charity Canceled Warrants **\$15,715,238.88** (Provided under separate cover) **(\$774,598.00)** (Attached)

\$1,010.00 (Attached)

TO: BOARD OF COMMISSIONERS

FROM: HILARY WHITTINGTON, CAO/CFO

RE: OCTOBER 2020 GENERAL FUND WARRANTS & ACH

FUND TRANSFERS

Submitted for your approval are the following warrants:

GENERAL FUND:

268616 269420 \$4,543,351.21

ACH TRANSFERS \$11,171,887.67

\$15,715,238.88

YEAR-TO-DATE: \$174,093,832.10

Warrants are available for review if requested.

TO: BOARD OF COMMISSIONERS FROM: HILARY WHITTINGTON, CAO/CFO

RE: OCTOBER 2020 ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS, ADMINISTRATIVE, AND CHARITY CARE WRITE OFFS

Submitted for your approval are the following:

	ОСТ	OCT YTD	OCT YTD BUDGET
Allowance for Uncollectible Accounts:	(844,675.00)	755,477.89	4,311,607.00
Charity Care:	173,225.00	2,725,164.95	2,282,429.00
Other Administrative Adjustments:	(103,148.00)	106,360.82	1,077,564.00
TOTAL FOR MONTH:	(\$774,598.00)	\$3,587,003.66	\$7,671,600.00

TO: BOARD OF COMMISSIONERS FROM: HILARY WHITTINGTON, CAO/CFO

RE: OCTOBER 2020 WARRANT CANCELLATIONS

State law requires you to pass a resolution canceling any warrants which are not presented to the Treasurer for payment within one year of issue.

DATE WARRANT AMOUNT
10/17/2019 259608 \$ 10.00
10/31/2019 260080 \$ 1,000.00

TOTAL: \$ 1,010.00

JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

RESOLUTION 2020-17

A RESOLUTION CANCELING CERTAIN WARRANTS IN THE AMOUNT OF \$1,010.00

WHEREAS warrants of any municipal corporation not presented within one year of their issue, or, that have been voided or replaced, shall be canceled by the passage of a resolution of the governing body;

NOW, THEREFORE BE IT RESOLVED THAT:

In order to comply with RCW 36.22.100, warrants indicated below in the total amount of \$1,010.00 be canceled.

Date of Issue	Warrant #	Amount
10/17/2019	259608	10.00
10/31/20109	260080	1,000.00
Total		\$1,010.00

APPROVED this 25 th day of November 2020.
APPROVED BY THE COMMISSION:
Commission Chair Jill Buhler Rienstra:
Commission Secretary Marie Dressler:
Attest:
Commissioner Matt Ready:
Commissioner Kees Kolff:
Commissioner Bruce McComes

FROM: Medical Staff Services

RE: 11/19/2020 Medical Executive Committee appointments/reappointments for

Board approval 11/25/2020

C-0241

§485.627(a) Standard: Governing Body or Responsible Individual

The CAH has a governing body or an individual that assumes full legal responsibility for determining, implementing and monitoring policies governing the CAH'S total operation and for ensuring that those policies are administered so as to provide quality health care in a safe environment.

Interpretive Guidelines §485.627(a)

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

Recommended provisional appointment to the active/courtesy/allied health/locum tenens staff:

- 1. Servin-Obert, Shannon, DO Emergency
- 2. Biccum, Katherine, DO Additional privileges for EGD/Colonoscopy
- 3. Lee, David Teleradiology
- 4. Espinosa-Morales, Aixa Teleneurology
- 5. Sampson, Topaz Telepsych
- 6. Bergren, Ryan Telepsych
- 7. Odunsi, Oluwatobiloba- Telepsych

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

- 1. Frank Torres, MD Cardiology
- 2. David Chuljian, DDS Dental

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

- 1. Stambaugh, Lloyd E III, MD Teleradiology
- 2. Vanderheiden, Scott, MD Teleradiology
- 3. Yeatman, Carter Fitzhugh, MD Teleradiology
- 4. Bork, David, MD Teleradiology
- 5. Krol, Christopher, MD Teleradiology
- 6. Mayhle, Mark, MD Teleradiology
- 7. Marlow, David, MD Teleradiology
- 8. Nathan, Diane, MD Teleradiology
- 9. Neubauer, Nancy MD Teleradiology
- 10. Snyderman, Steven, MD Telepsychiatry

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

- 1. Koomen, Anne, ARNP Behavioral Health
- 2. Hoogestraat, Jenna, PA Primary Care
- 3. Yeater, Elizabeth, ARNP Sleep Medicine

Medical Student Rotation:

- 1.Tessa Moore end of September December
- 2. Josefine Wallace September December

90-day provisional performance review completed successfully:

N/A

Resignations:

N/A



RESOLUTION 2020-16

A RESOLUTION OF THE JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2 (JEFFERSON HEALTHCARE) BOARD OF COMMISSIONERS REGARDING DISPARITY IN HEALTH EQUITY CAUSED BY RACISM AND OTHER FORMS OF DISCRIMINATION

WHEREAS, the Jefferson Healthcare Board of Commissioners acknowledges that disparities in health equity caused by racism and other forms of discrimination represent a crisis throughout this country; and

WHEREAS, the Board additionally adopts the following findings, facts, statements and good faith beliefs:

- Discrimination, including racism, has deep and harmful impacts that unfairly disadvantage many, including Black, Indigenous and People of Color ("BIPOC"), and unfairly advantages others.
- 2. Discrimination harms every person in our society and is a root cause of poverty and economic inequality.
- 3. Nationally, health care has played a role in perpetuating structural disadvantages and there is an opportunity for health systems to help dismantle racism and other forms of oppression within their systems.
- 4. The Rev. Dr. Martin Luther King, Jr. memorably and truthfully stated that "injustice anywhere is a threat to justice everywhere."
- 5. The great civil rights leader and Congressman, Hon. John Lewis, who passed away on July 17, 2020, wrote in an essay that was published on the day of his funeral:

"Like so many young people today, I was searching for a way out, or some might say a way in, and then I heard the voice of Dr. Martin Luther King, Jr. on an old radio. He was talking about the philosophy and discipline of nonviolence. He said we are all complicit when we tolerate injustice. He said it is not enough to say 'it will get better by and by.' He said each of us has a moral obligation to stand up, speak up and speak out. When you see something that is not right, you must say something. You must do something. Democracy is not a state. It is an act, and each generation must do its part to help build what we called the Beloved Community, a nation and world society at peace with itself."

- 6. Whether intended or not, racism and other forms of discrimination can become ingrained in institutional policies and practices, creating differential access to opportunities and resources, causing disparate outcomes in all aspects of life and ultimately affecting personal health.
- 7. The legacy of discriminatory policies and practices often continues even after those policies and practices have been changed.
- 8. Data collected by public health agencies over decades has demonstrated how marginalized communities, including BIPOC communities, are affected by more acute impacts, such as gun violence, and chronic impacts such as higher rates of cardiovascular disease and diabetes, maternal and infant mortality, underweight babies and shorter, less healthy lives overall.
- 9. Those affected by discrimination or marginalization, including BIPOC residents of Jefferson County, are more likely to experience inequities in social determinants of health,



- including education, access to jobs, earning power, adequate and safe housing, higher rates of policing and involvement in the criminal justice system, and overall quality of life.
- 10. Jefferson Healthcare is the public hospital district for east Jefferson County, Washington and thus has a mandate to serve all, without discrimination or marginalization.
- 11. The administrative leadership and staff of Jefferson Healthcare are committed to providing health equity by eliminating racism and all other forms of discrimination in the organization.
- 12. Through the Institute for Healthcare Improvement (IHI), Jefferson Healthcare has entered into an extended initiative, *Pursuing Equity Learning and Action Network*, which includes the following five components:
 - a. Making health equity a strategic priority;
 - b. Building infrastructure to support health equity;
 - c. Addressing the multiple determinants of health;
 - d. Eliminating racism and other forms of oppression; and
 - e. Partnering with the community to improve health equity.
- 13. The Jefferson County Public Health Department has also committed to eliminating racism and other forms of discrimination in order to promote health equity, and is an invaluable partner in developing and using quantitative data specific to Jefferson County to enhance health equity for all Jefferson County residents.

NOW, THEREFORE, BE IT RESOLVED:

We, the Board of Commissioners of Jefferson County Public Hospital District No. 2, declare that:

- We are against racism and discrimination in any form.
- We fully support Jefferson Healthcare staff in their commitment to address discrimination and in their work with the Institute for Healthcare Improvement, and we will do our part to participate in that program.
- We will strive to eliminate all forms of discrimination in our policies, practices, and procedures in to reduce and eventually eliminate disparities in health equity in our system.
- We as individual Commissioners commit to ongoing work to eliminate racism and advance
 health equity, including participating in racial equity training, being responsive to local
 residents impacted by racism and other forms of discrimination, and holding one another
 accountable to addressing biases of all kinds.
- We believe everyone should have a fair and just opportunity to be healthy.

ADOPTED this day of November 2020.	
Jill Buhler-Reinstra, Chair	
ATTEST:	
Marie Dressler, Secretary	