

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: 613 756 871

Jefferson County Public Hospital District No.2
Board of Commissioners, Regular Session Minutes
Wednesday, March 24, 2021

Call to Order:

The meeting was called to order at 2:04 pm 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, Jim Heilsberg, Interim Chief Financial Officer, Jon French, Chief Legal Officer, Jake Davidson, Chief Ancillary & Specialty Services Officer, Caitlin Harrison, Chief Human Resources Officer, Brandie Manuel, Chief Patient Safety and Quality Officer, Jenn Wharton, Chief Ambulatory and Medical Group Officer, and Brittany Huntingford, Administrative Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

Board Governance Education:

An update was given on the questions that Commissioner Ready had regarding his right to record Commission meetings personally.

Discussion ensued.

Commissioner Kolff moved that we do not send a request for outside legal council. Commissioner McComas seconded.

Discussion ensued.

Action: Motion passes four to one Commissioners Buhler Rienstra, Dressler, Kolff and McComas in favor. Commissioner Ready opposed.

Education Topic:

Population Health presented by Dunia Faulx, Director of Population Health and Dr. Molly Parker, Chief Medical Officer, Population Health

Discussion ensued.

Commissioners recessed for break at 3:11 pm.
Commissioners reconvened from break at 3:30 pm.

Approve Agenda:

Commissioner Dressler moved to approve the agenda. Commissioner McComas seconded.

Action: Motion passed unanimously.

Patient Story:

Tina Toner, CNO presented a patient story.

Minutes:

February 24, 2021 Regular Session Minutes
March 3, 2021 Special Session Minutes

Commissioner McComas moved to approve the February 24th Regular Session minutes and the March 3, 2021 Special Session Minutes Commissioner Ready seconded.

Action: Motion passed unanimously.

Required Approvals: Action Requested

Medical Staff Credentials/Appointments/Reappointments

Commissioner Dressler moved to approve the Medical Staff Credentials/ Appointments/ Reappointments. Commissioner McComas seconded.

Discussion ensued.

Action: Motion passed unanimously.

Financial Report:

Mike Glenn, CEO, presented the February Financial Reports.
Discussion ensued.

Quality Report:

Brandie Manuel, CPSQO, presented the February 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:

Board of Health report-

Commissioner Kolff shared details around the work done for the mass vaccination done over the previous weekend. Public Health has hired a new practitioner. Commissioner Kolff also shared details around the regionalization of public health.

Agenda Evaluation-

Discussion ensued.

Commissioner Dressler shared it meets her needs.

Commissioner McComas is satisfied with the agenda development and the process to add topics.

Commissioner Kolff shared his appreciation for the development of the agenda, likes the time from 2pm-2:30pm to talk as commissioners and opportunity to converse.

Commissioner Ready is satisfied with the agenda process and appreciates the work to put the agenda together and the presentations that are shared and feels the time spent in meetings is efficient and good use of time.

Commissioner Buhler Rienstra agreed with the comments of her fellow commissioners.

Meeting Evaluation:

Commissioners evaluated the meeting.

Conclude:

Commissioner Kolff moved to conclude the meeting. Commissioner McComas seconded.

Action: Motion passed unanimously.

Meeting concluded at 5:59 pm.

Approved by the Commission:

Chair of Commission: Jill Buhler Rienstra _____

Secretary of Commission: Marie Dressler _____

Population Health 2021 Update

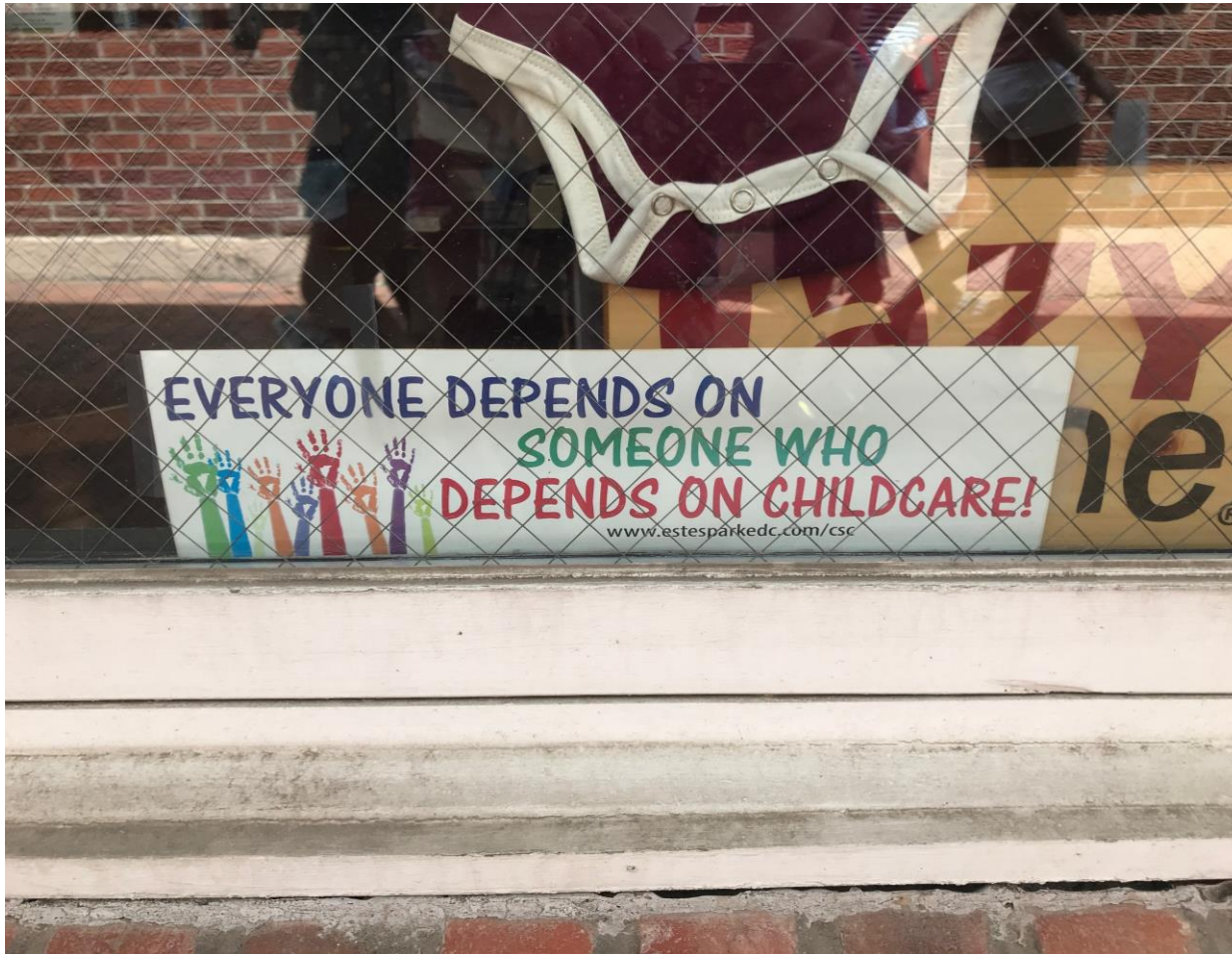
Dunia Faulx, MPH
Dr. Molly Parker, MD MPH

March 24, 2021

Agenda



Friends: Child Care



COVID-19 Subsidy

Jefferson Healthcare

- \$20,127.50
 - 13 Families
 - 20 Children
 - 3 Child Care Providers

More info

[Human Resources Covid-19 Resource Page](#)

Jefferson Healthcare Foundation

- \$56,650 from grants and individual donations
 - 17 Departments
 - 26 Families
 - 52 Children
 - 16 Caregivers

More info jeffersonhealthcarefoundation.org^{5/}

Friends: Social Isolation

Results from UW Social Isolation
Screening study with Sheridan
participants August 2019.

RISKS FOR ISOLATION & LONELINESS



40-50% OF PARTICIPANTS

- Felt isolated from others *(often or some of the time)*
- Felt no one really knew them well *(often or some of the time)*
- Did not often feel part of a friend group
- Worried about being by themselves *(often or some of the time)*
- Could not often find companionship when they want it
- Missed having people around them



1 IN 5 PARTICIPANTS

- Avoided socializing because of difficulties understanding conversations
- Did not have the desired amount of contact with people they feel close to and can trust
- Were not content with their friendships and relationships

Friends | Social Isolation Screening Results

IN THE PREVIOUS MONTH BEFORE TAKING THE SURVEY



25%

had a negative change in
their health



32%

had an emotional loss (*e.g., death
of a family member or friend*)

IN THE PREVIOUS TWO WEEKS BEFORE TAKING THE SURVEY

14%

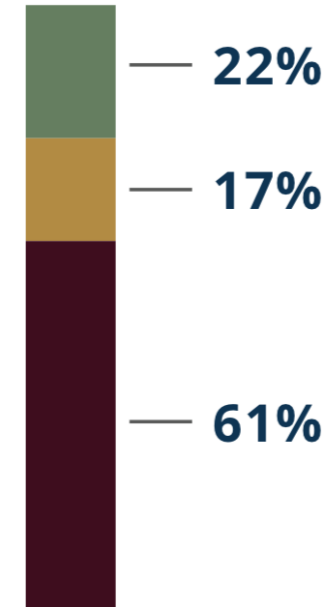
reported no face-to-face,
telephone, or written/email/text
contact with family members
or friends

34%

did not participate in
organizations such as social
clubs, residents groups, or
committees

55%

did not participate in religious
groups



22%

17%

61%

61%

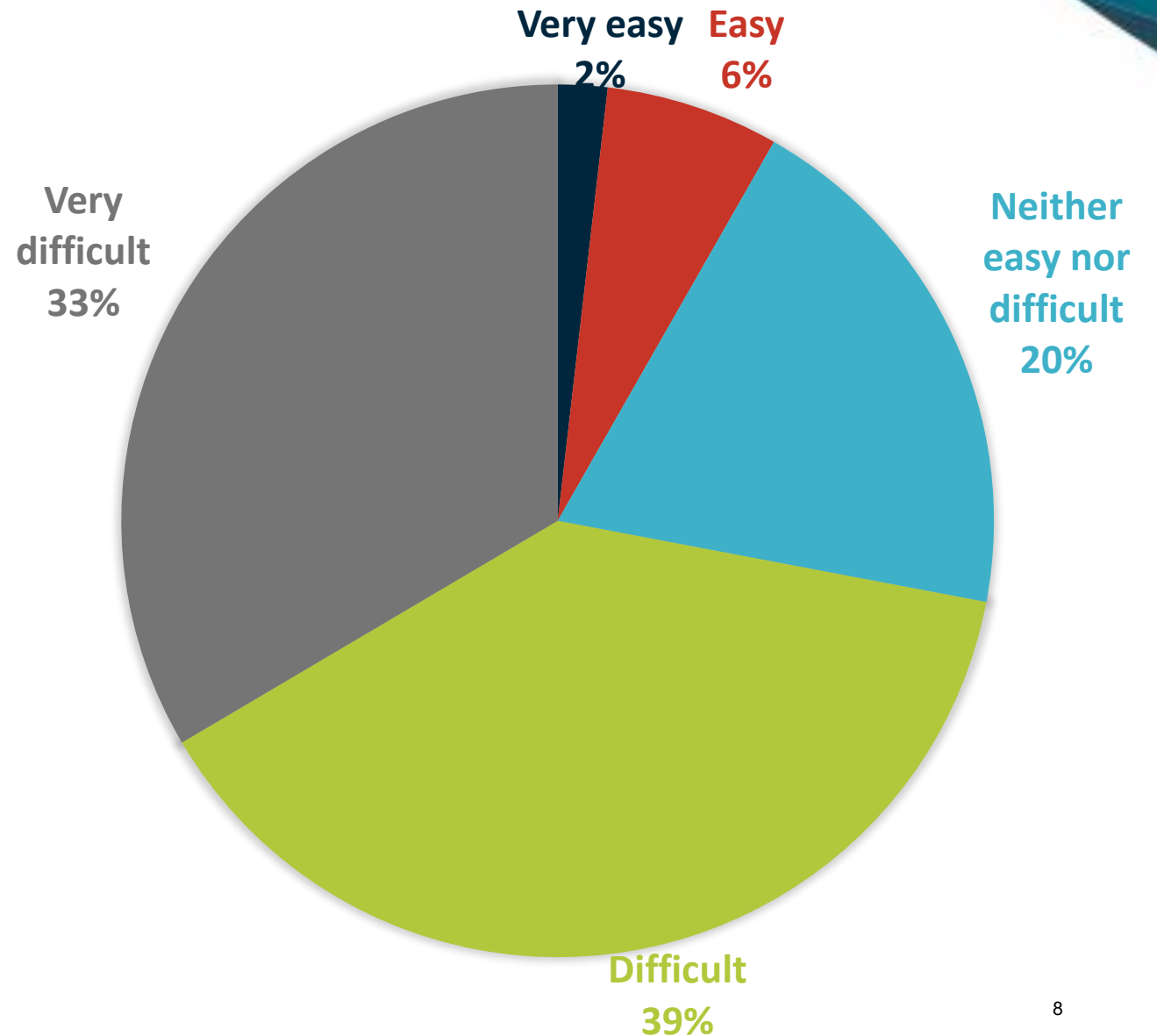
of participants
scored as high risk
on the 13-item
Upstream Social
Isolation Risk
Screener (U-SIRS)

Child Care

Department of
Commerce Grant

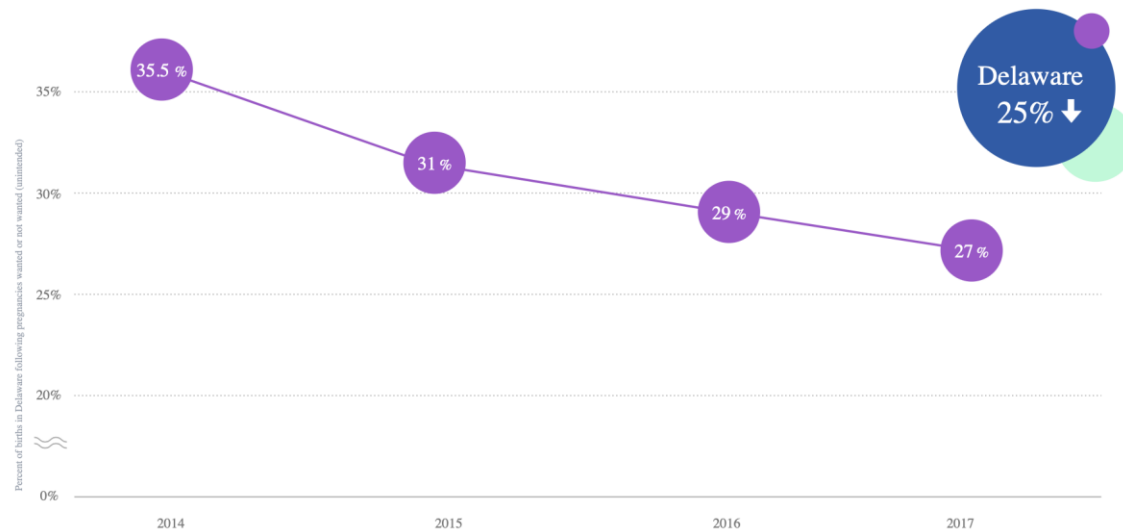
- Needs assessment underway
- Feasibility study up next

Ease of finding child care (n=218)



First 1000 Days: Upstream

25% reduction in births from unintended pregnancies in Delaware



Goal:
Facilitate contraception
access

- Coming this summer
- Training opportunities
- Resource development



Food

We are giving it out!

Equity

IHI Projects and some implementation science

Equity | Major themes

Patient-Centered Care

Trauma-informed

Inclusive

Minimize barriers

Employee Opportunities

Education

Representative workforce

Community

Influence of the social determinants

Partnerships

Organizational Culture

Hardwiring a just culture

Authentic interactions

Data and Analytics – Process and Platforms

COVID-19 Vaccine: Equity Implementation in Progress



Equity Partnerships



JCIRA

JCARF

ESL (Jefferson County)

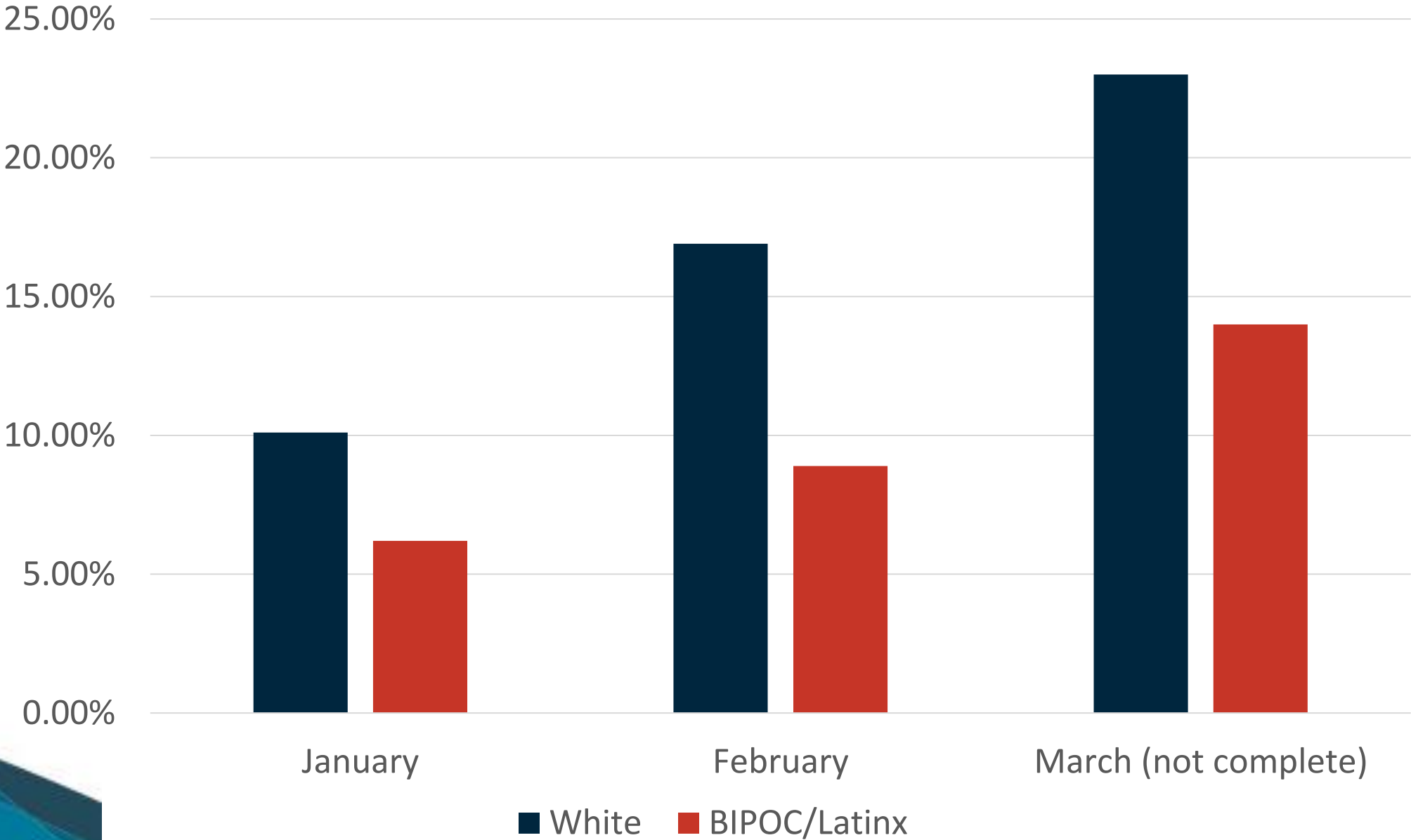
ESL (Peninsula College)

Senior Food Banks



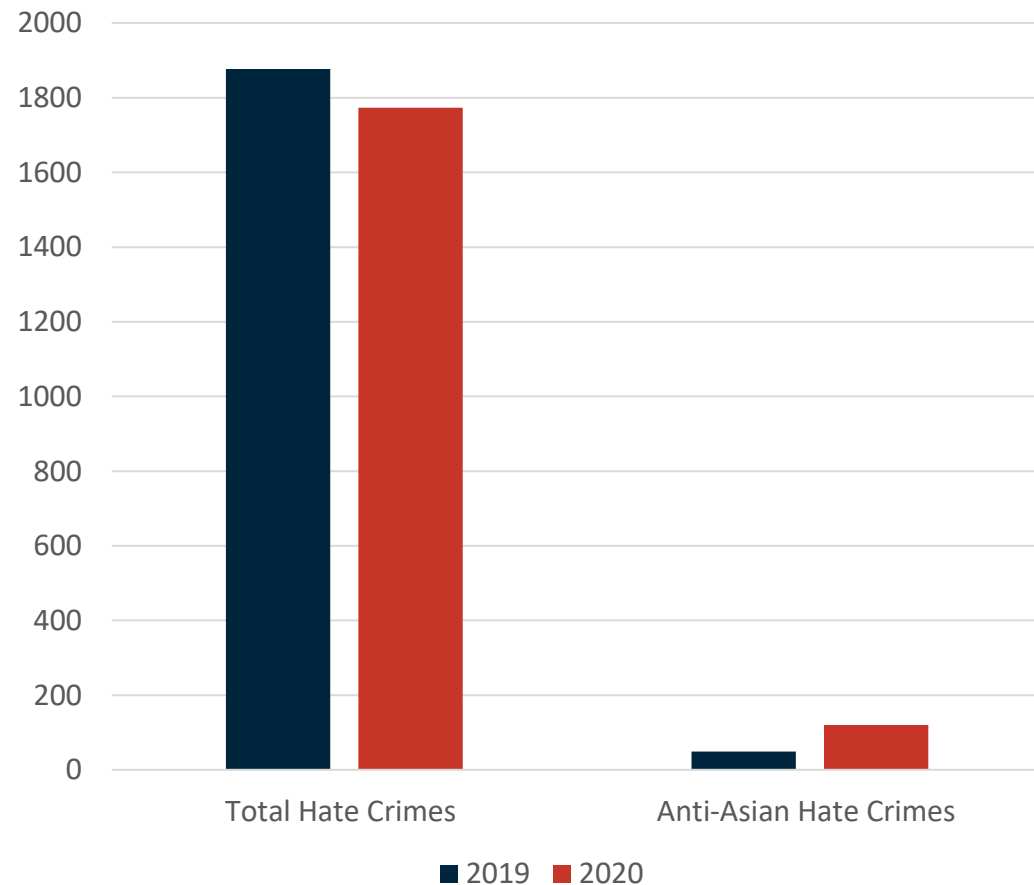
Dr. David Harris
Jefferson Healthcare

COVID-19 Vaccination Rates




Current Events

Center for the Study of Hate & Extremism
March 2021




#AAPI #StopAAPIHate

We stand in solidarity with the #AAPI community. Jefferson Healthcare rejects racism in all forms and stands with our Asian employees and community members.



Jefferson Healthcare is appalled at the horrific and continued acts of anti-Asian violence across our nation. The COVID-19 pandemic has highlighted the continued racism against members of the Asian American and Pacific Islander communities and has magnified anti-Asian rhetoric. We stand up for and are united with our Asian American and Pacific Islander employees and the broader community.

We at Jefferson Healthcare reject racism in all forms. We understand it is not enough to not be racist; we are working on what it means as a healthcare system to be actively anti-racist. We are committed to promoting equality in opportunity, equity in health outcomes and advancing inclusion in our community. While our efforts in this space are just beginning, we are committed to doing this work in a meaningful, intentional and enduring way.



Employee of the Quarter

Rachel Barbieto

Rachel is a support technician for our Clinical Informatics help desk... But she has gone far beyond this role in how she's helped the COVID Vaccine team operationalize their scheduling of thousands of patients to receive the vaccine. She is constantly optimizing operations ... and she has proved to be an exceptional asset to other teams.



Clinical Informatics

First Quarter 2021

Team of the Quarter

COVID Vaccine Team

Kathel Barbieto

Dr. Steve Butterfield

Dunia Faulx

Jaimie Hoobler

Dr. Joe Mattern

Jessie Michaels

Susi Reidt

Alyssa Rodrigues

Jenn Wharton

Amy Yaley

"They have spent exhaustive hours as a team, coordinating, planning, and leading efforts to administer vaccines for our staff, our patients, and for our entire community. ... all while continuing our commitment to health equity and barrier reductions for ALL community members."

First Quarter 2021

Provider of the Quarter

Dr. Chance Irick

"Dr. Irick brings a deep commitment to community in his work ... and works hard to keep up on everything new to ...Emergency Medicine. In service to our most vulnerable populations, he shows exceptional understanding of the resources available to him on the Peninsula and is able to guide patients toward them."

Emergency Department
First Quarter 2021

COMMISSION MEETING

PATIENT STORY

March 24, 2021

FINANCIAL SERVICES OFFICE

THANK YOU, FINANCIAL COUNSELORS!



Jefferson Healthcare

February 2021 Finance Report

March 24, 2021

Mike Glenn, CEO

February 2021

Operating Statistics

| STATISTIC DESCRIPTION | FEBRUARY 2021 | | | | | | FEBRUARY 2020 | | | | | |
|--|---------------|-----------|------------|---------------|------------|------------|---------------|------------|---------------------|------------|--|--|
| | MO ACTUAL | MO BUDGET | % VARIANCE | YTD ACTUAL | YTD BUDGET | % VARIANCE | MO ACTUAL | % VARIANCE | YTD ACTUAL | % VARIANCE | | |
| FTEs - TOTAL (AVG) | 614 | 625 | 2% | 614 | 625 | 2% | 607 | -1% | 595 | -3% | | |
| ADJUSTED PATIENT DAYS | 2,538 | 2,017 | 26% | 4,975 | 4,251 | 17% | 1,932 | 31% | 3,872 | 28% | | |
| ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS) | 43 | 68 | -37% | 130 | 144 | -10% | 59 | -27% | 123 | 5% | | |
| ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS) | 194 | 299 | -35% | 485 | 629 | -23% | 305 | -36% | 593 | -22% | | |
| PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION | 268 | 388 | -31% | 661 | 817 | -19% | 393 | -32% | 782 | -18% | | |
| SURGERY CASES (IN OR) | 102 | 115 | -11% | 229 | 242 | -5% | 117 | -13% | 246 | -7% | | |
| SPECIAL PROCEDURE CASES | 67 | 70 | -4% | 121 | 147 | -18% | 73 | -8% | 159 | -31% | | |
| LAB BILLABLE TESTS | 19,187 | 19,482 | -2% | 40,264 | 41,052 | -2% | 17,510 | 10% | 36,176 | 10% | | |
| TOTAL DIAGNOSTIC IMAGING TESTS | 2,746 | 2,842 | -3% | 5,656 | 5,990 | -6% | 2,906 | -6% | 5,861 | -4% | | |
| PHARMACY MEDS DISPENSED | 12,988 | 22,085 | -41% | 32,946 | 46,536 | -29% | 20,716 | -37% | 41,694 | -27% | | |
| RESPIRATORY THERAPY PROCEDURES | 2,113 | 3,366 | -37% | 4,725 | 7,093 | -33% | 3,248 | -35% | 6,795 | -44% | | |
| REHAB/PT/OT/ST RVUs | 7,885 | 8,326 | -5% | 16,238 | 17,545 | -7% | 8,055 | -2% | 17,413 | -7% | | |
| ER CENSUS | 782 | 1,002 | -22% | 1,636 | 2,112 | -23% | 1,034 | -24% | 2,080 | -27% | | |
| DENTAL CLINIC | 274 | 360 | -24% | 577 | 758 | -24% | 336 | -18% | 675 | -17% | | |
| TOTAL RURAL HEALTH CLINIC VISITS | 5,321 | 5,843 | -9% | 10,862 | 12,315 | -12% | 5,714 | -7% | 11,770 | -8% | | |
| TOTAL SPECIALTY CLINIC VISITS | 3,508 | 3,125 | 12% | 6,779 | 6,585 | 3% | 3,056 | 15% | 6,321 ²⁵ | 7% | | |

February 2021

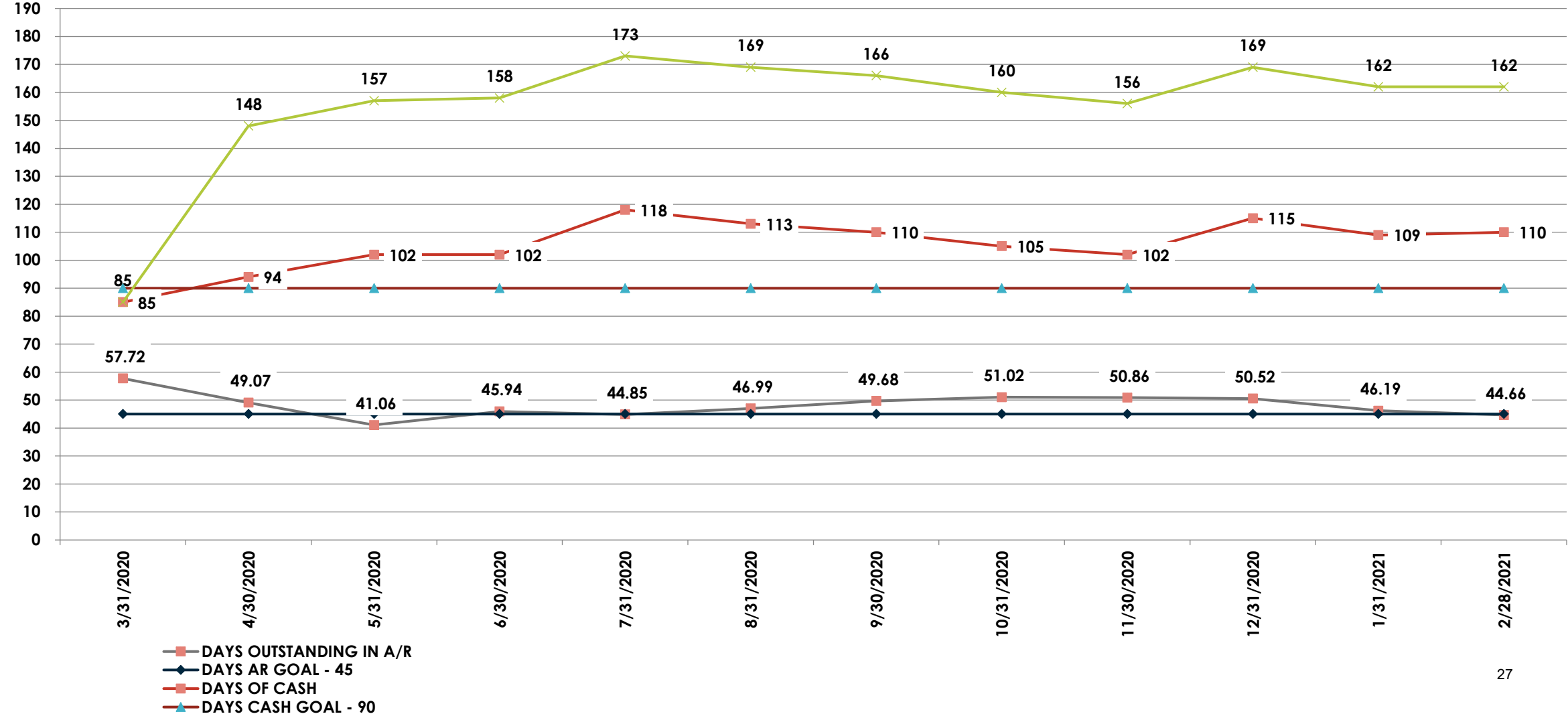
Income Statement Summary

| | February 2021 Actual | February 2021 Budget | Variance Favorable/ (Unfavorable) | % | February 2021 YTD | February 2021 Budget YTD | Variance Favorable/ (Unfavorable) | % | February 2020 YTD |
|---|-------------------------|-------------------------|---|----------------|----------------------|--------------------------------|---|----------------|----------------------|
| Operating Revenue | | | | | | | | | |
| Gross Patient Service Revenue | 20,806,599 | 22,134,228 | (1,327,629) | -6% | 44,722,092 | 46,639,979 | (1,917,887) | -4% | 44,695,906 |
| Revenue Adjustments | 11,978,356 | 11,775,048 | (203,308) | -2% | 24,651,744 | 24,811,707 | 159,963 | 1% | 24,217,888 |
| Charity Care Adjustments | 269,882 | 210,490 | (59,392) | -28% | 574,656 | 443,533 | (131,123) | -30% | 433,672 |
| Net Patient Service Revenue | 8,558,361 | 10,148,690 | (1,590,329) | -16% | 19,495,692 | 21,384,739 | (1,889,047) | -9% | 20,044,346 |
| Other Revenue | 418,763 | 496,623 | (77,860) | -16% | 836,130 | 1,046,456 | (210,326) | -20% | 1,161,847 |
| Total Operating Revenue | 8,977,124 | 10,645,313 | (1,668,189) | -16% | 20,331,822 | 22,431,195 | (2,099,373) | -9% | 21,206,193 |
| Operating Expenses | | | | | | | | | |
| Salaries And Wages | 5,568,514 | 5,235,942 | (332,572) | -6% | 11,498,922 | 11,032,879 | (466,043) | -4% | 10,628,277 |
| Employee Benefits | 1,324,345 | 1,343,737 | 19,392 | 1% | 2,900,269 | 2,831,447 | (68,822) | -2% | 2,712,533 |
| Other Expenses | 3,743,879 | 3,745,545 | 1,666 | 0% | 7,520,990 | 7,892,398 | 371,408 | 5% | 7,560,259 |
| Total Operating Expenses | 10,636,738 | 10,325,224 | (311,514) | -3% | 21,920,181 | 21,756,724 | (163,457) | -1% | 20,901,069 |
| Operating Income (Loss) | (1,659,614) | 320,089 | (1,979,703) | -618% | (1,588,359) | 674,471 | (2,262,830) | -335% | 305,124 |
| Total Non Operating Revenues (Expenses) | (26,375) | (451) | (25,924) | -5748% | (64,170) | (951) | (63,219) | -6648% | (17,467) |
| Change in Net Position (Loss) | (1,685,989) | 319,638 | (2,005,627) | -627% | (1,652,529) | 673,520 | (2,326,049) | -345% | 287,657 |
| Operating Margin | -18.5% | 3.0% | -21.5% | -714.8% | -7.8% | 3.0% | -10.82% | -359.8% | 1.4% |
| Total margin | -18.8% | 3.0% | -21.8% | -725.5% | -8.1% | 3.0% | -11.13% | -370.7% | 1.4% |
| Salaries & Benefits as a % of net pt svc rev | -80.5% | -64.8% | -15.7% | -24.2% | -73.9% | -64.8% | -9.03% | -13.9% | -66.6% |

February 2021

Cash and Accounts Receivable

Days Cash and Accounts Receivable



February 2021

Board Financial Report

| Department | Account | Description | Feb Actual | Feb Budget | Feb Variance | 2021 YTD Actual | 2021 YTD Budget | YTD Variance |
|-------------|---------|--------------------------------|------------|------------|--------------|-----------------|-----------------|--------------|
| | | | | | | | | |
| BOARD | 600010 | MANAGEMENT & SUPERVISION WAGES | 4,526 | 4,218 | (307) | 8,889 | 3284 | 8,857 |
| | 601100 | BENEFITS FICA | 333 | 256 | (77) | 540 | (124) 7 | 664 |
| | 601150 | BENEFITS WA F&MLA | 6 | 6 | (0) | 13 | 4,071 | 13 |
| | 601400 | BENEFITS MEDICAL INS-UNION | 4,880 | 4,219 | (660) | 8,890 | (869) 229 | 9,759 |
| | 601600 | BENEFITS RETIREMENT | - | 207 | 207 | 436 | 436 8 | - |
| | 601900 | BENEFITS EMPLOYEE ASSISTANCE | 0 | 8 | 8 | 16 | 16 | 0 |
| | 602300 | CONSULT MNGMT FEE | - | 1,500 | 1,500 | 3,161 | 1,661 | - |
| | 602500 | AUDIT FEES | - | 3,466 | 3,466 | 7,304 | 3,838 7,304 | - |
| | 604200 | CATERING | - | 82 | 82 | 172 | 90 172 | - |
| | 604500 | OFFICE SUPPLIES | - | - | - | - | - | - |
| | 604850 | COMPUTER EQUIPMENT | - | - | - | - | - | - |
| | 606500 | OTHER PURCHASED SERVICES | - | 767 | 767 | 1,616 | 849 1,616 | - |
| | 609400 | TRAVEL/MEETINGS/TRAINING | - | 1,151 | 1,151 | 2,425 | 1,274 2,425 | - |
| BOARD Total | | | 9,745 | 15,880 | 6,135 | 33,461 | 14,781 | 19,293 |

March 2021

Preview — (*as of 0:00 3/24/20)

- **\$31,113,727 in Projected HB charges**
 - Average: \$794,222/day (HB only)
 - Budget: \$766,899/day
 - 104% of Budget
- **\$11,845,781 in HB cash collections**
 - Average: \$382,122/day (HB only)
 - Goal: \$338,386/day
- **42 Days in A/R**
- **Questions**

Jefferson Healthcare

Patient Safety and Quality Report

Presented by Brandie Manuel, Chief Patient Safety and Quality Officer

March 24, 2021

Agenda

- Patient Safety and Quality Overview
- Partnership for Patients Highlight
- Service: In the Words of our Patients
- Current Projects

Patient Safety & Quality Overview

| | Goals | Strategy | Initatives | Targets |
|--------------------|--|------------------------------------|---|--|
| Quality and Safety | Provide the Highest Quality, Safest Care | Drive Best Practice Clinical Care | Achieve zero harm events | Zero avoidable healthcare acquired harm events |
| | | Achieve Excellent Quality Outcomes | Antimicrobial Stewardship | Zero cases of hospital acquired C.Diff |
| | | | Implement and adhere to evidence based practices. | Avoid the over-use of antibiotics when not medically indicated |
| | | Enhance Culture of Safety | Workplace Violence Prevention (Initiative) | 90% or greater compliance with core measures |
| | | | Leader Rounding | Zero Incidents of Workplace Violence |
| | | Align care with patient goals | Implement a palliative care program | Weekly Rounding Compliance |
| | | | | Readmission rate < 12% |

Hospital Metrics

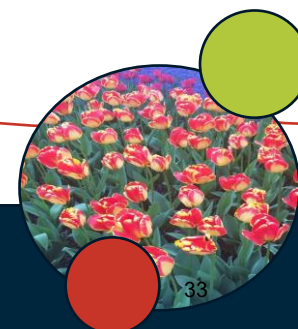
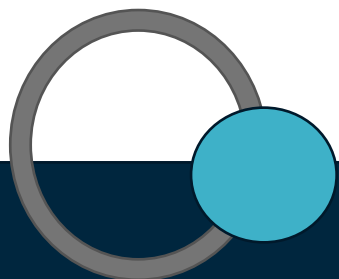
Click Measure to Go To Trend

↓ Improving ↑ Worsening → No Change

| | | | |
|---------------------------|----------|-------|---|
| ADE Anticoagulants | QBS | 0.00% | → |
| ADE Hypoglycemic | QBS | 0.00% | → |
| ADE Opioids | QBS | 0.00% | → |
| Antimicrobial Stewardship | QBS | 544 | ↓ |
| Falls With Injury | QBS | 0.00 | → |
| C DIFF | NHSN | 0.00 | → |
| CAUTI Rate | NHSN | 0.00 | ↓ |
| CLABSI Rate | NHSN | 0.00 | → |
| MRSA | NHSN | 0.00 | → |
| UR Central Line | NHSN | 0.09 | ↑ |
| UR Urinary Catheter | NHSN | 0.20 | → |
| UR Ventilator | NHSN | 0.00 | ↓ |
| VAE | NHSN | | → |
| SSI Rate | NHSN SSI | | → |

Overall Performance:

- Medication Safety:
 - Zero adverse drug events reported
 - Inpatient days of therapy decreased (antimicrobial stewardship)
 - Ambulatory antibiotic stewardship pilot completed
- Patient Safety:
 - No change in Falls with injury – drill completed last week
 - Pressure ulcers – zero reportable hospital acquired pressure ulcers
- Infection Prevention:
 - C.Diff – no change (zero reported)
 - CAUTI Rate – zero cases
 - CLABSI Rate – zero cases
 - SSI Rate – no changes



Patient Perspective: In the Words of Our Patients...

- **Dr. Barger's** office & staff are greatest, professional, known in my life time. Absolutely the first!
- I had a trainer who cared about my improvements He was knowledgeable about my condition and made sessions fun and interesting. This facility is tops - large with windows that show the mountains and waters of Port Townsend. I love it!
- I appreciated the kindness shown to me. I felt sincere.
- Thank you, Jefferson Healthcare, and the EMT personnel for helping me. I appreciate your care and courtesy. You are the best!
- I always receive excellent care from **Dr. Harris**.
- I thought **Ms. Ernst ARNP** was great! I have a appt in July! I'm so happy that JHC has a provider like Ms. Ernst to help me!!
- I'm always grateful & appreciative of the time Dr. Mattern spends with me. Even when very busy, he never seems "too rushed" for me & my care. Thanks!
- Always kind. Full understanding of what needed to be done.
- When giving directions to the PT department don't tell them to go to the "water side". The water side is both to the east and to the south. Tell them to go to the "east side" over looking down town. Also, all staff need to be mindful of their comments and thoughts relating to patients.
- It was great to see the extra cleaning and procedures in the facility during this pandemic. It made me feel safe.



Best healthcare I have EVER had. Thank you!

Current Projects



Projects and Teamwork

Performance Improvement: Reducing the time to CT for stroke patients

Health Equity: IHI Pursuing Equity

Medical Staff: chart closure and provider Mastery

Emergency Management: Post Acute Patient Surge Tabletop



Quality

Ongoing: Merit-based Incentive Payment System (MIPS) Reporting, Core Measures, Patient Engagement

Closing the Referrals Loop

Clinical Quality Teams: Stroke, Restraints, Medication Safety, Fall Prevention, Pressure Ulcer Prevention

Cancer Committee Study of Quality: Cervical Cancer Screening

Accreditation Coordination and Management



Medication Safety

Bar Code Medication Administration expansion

Risk assessment of medication security

Analysis of override data

Medication Safety Team

Questions?



Jefferson Healthcare

Administrative Report

March 24, 2021

Mike Glenn, CEO

Admin Report

Testing and PPE data

Jefferson Healthcare Volumes

Vaccination volumes and data

Update on our health and community equity work

Master Site Plan- A Four Phased approach

Other

Update 03/24/2021

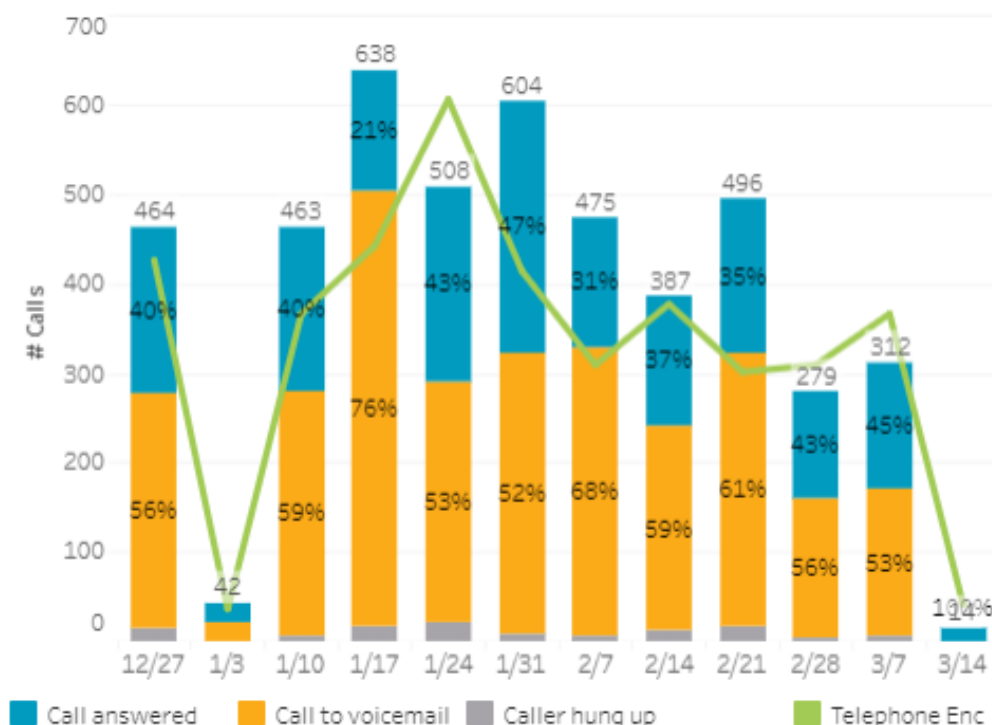
| Tests | |
|---------------------|---------------------------|
| Total Tested | 17,206 |
| Negatives | 16,939 |
| Positives | 267 |
| Percentage Positive | 1.5% |
| Employee Tests | 7 positive, 462 negatives |

| PPE Inventory | | | | | | |
|--------------------------|-----------------|--------|--------|----------------|----------|----------|
| Location | Procedure Masks | N 95 | Gowns | Eye Protection | CAPR S/M | CAPR M/L |
| JH Department Inventory | 13,168 | 1,856 | 1,656 | 721 | 1,640 | 1,840 |
| JH General Stores | 135,620 | 58,760 | 18,050 | 1,435 | 360 | 1600 |
| State Allocation | 0 | 0 | 5,900 | 0 | 0 | 0 |
| JH Donations | 4,067 | 0 | 0 | 0 | 0 | 0 |
| JH COVID SURGE STOCKPILE | 30,400 | 4,660 | 9,000 | 500 | 0 | 0 |
| Total | 183,255 | 65,276 | 34,606 | 2,656 | 2,000 | 3,440 |

COVID-19 Phone Line and Clinic Visit Volumes

Respiratory nurse line calls and telephone encounters - by week

Last 12 weeks of respiratory phone line call data (bars) and telephone encounters created (line), excluding partial weeks.

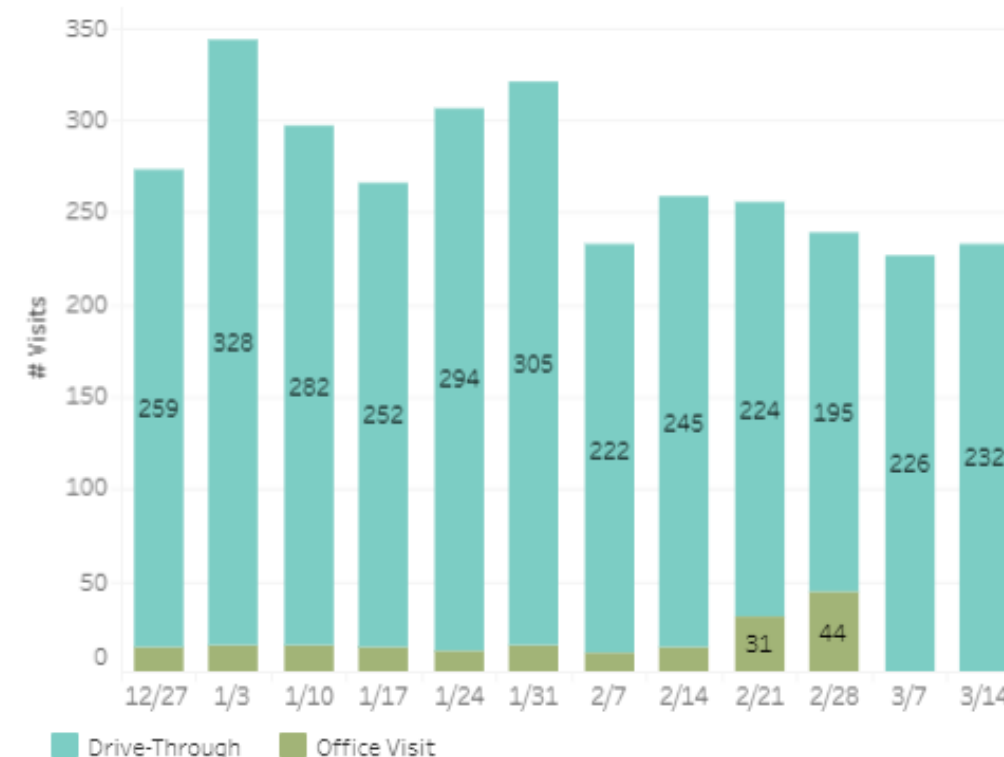


Total call volume since launch of triage line

| | |
|------------------------|---------|
| Inbound Calls | 166,591 |
| Calls Answered | 123,240 |
| # Telephone Encounters | 24,403 |

Respiratory Clinic visit volumes - by week

Last 12 weeks of visits in the Respiratory Eval Clinic, excluding partial weeks.

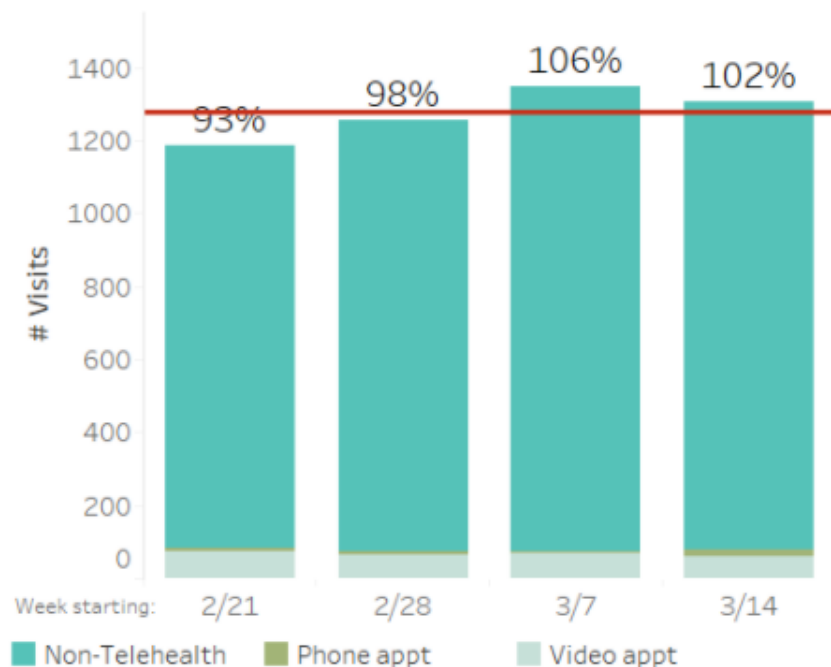


Total Respiratory Evaluation Clinic visits - all time

| | |
|---------------|--------|
| Drive-Through | 9,194 |
| Office Visit | 4,379 |
| Total | 13,573 |

Primary Care variance to target visits

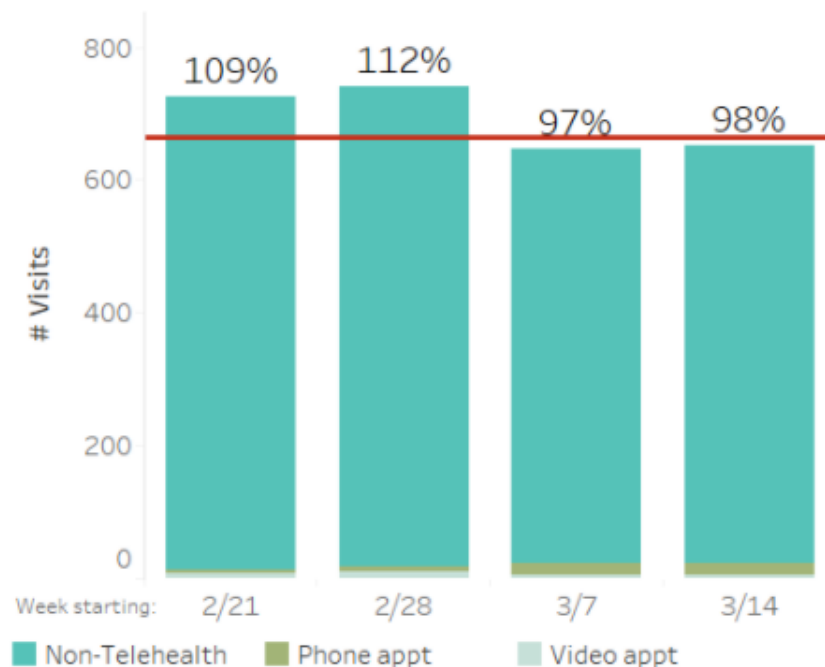
Visit volumes in the five primary care and Dental clinics. Red line indicates weekly visit target based on 2021 annual targets. The % labels are the variances of actual to target visits.



Includes visits in: Sheridan, Watership, Townsend, Port Ludlow and South County primary care clinics and the Dental clinic.

Specialty clinic variance to target visits

Visit volumes in Medical Group's specialty clinics. Red line indicates weekly visit target based on 2021 annual targets. The % labels are the variances of actual to target visits.

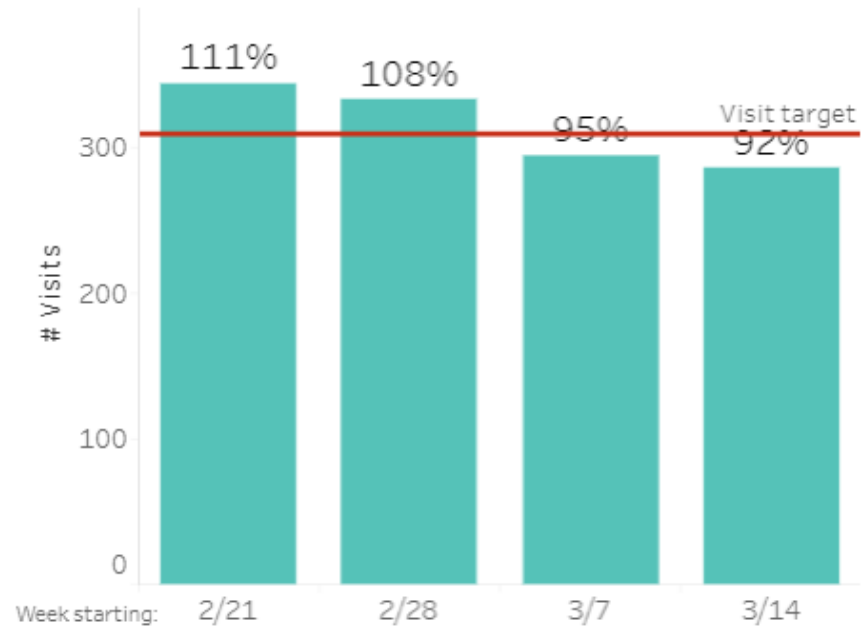


Includes visits in: JHSA clinic, Sleep Medicine, Urology, Women's Clinic, Wound Care and the Port Townsend components of Cardiology, Dermatology and Orthopedics (Port Ludlow components, if any, are not included).

Oncology/Infusion variance to target visits

Visit volumes in Oncology Clinic and Infusion Center. Red line indicates weekly visit target based on annual targets. The % labels are the variances of actual to target visits.

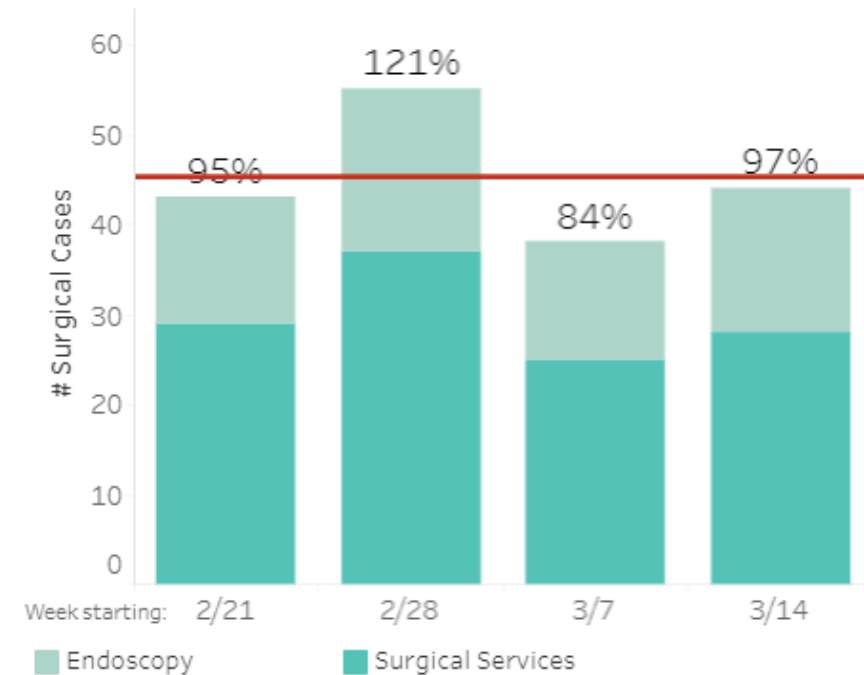
Note: This chart was previously called "Hospital Outpatient variance to target visits" and included Wound Clinic, Sleep Clinic and Sleep Study.



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.

Includes surgical cases performed in the hospital OR. Does not include the endoscopy suite at JHSA.



Emergency Department and Express Clinic Volume

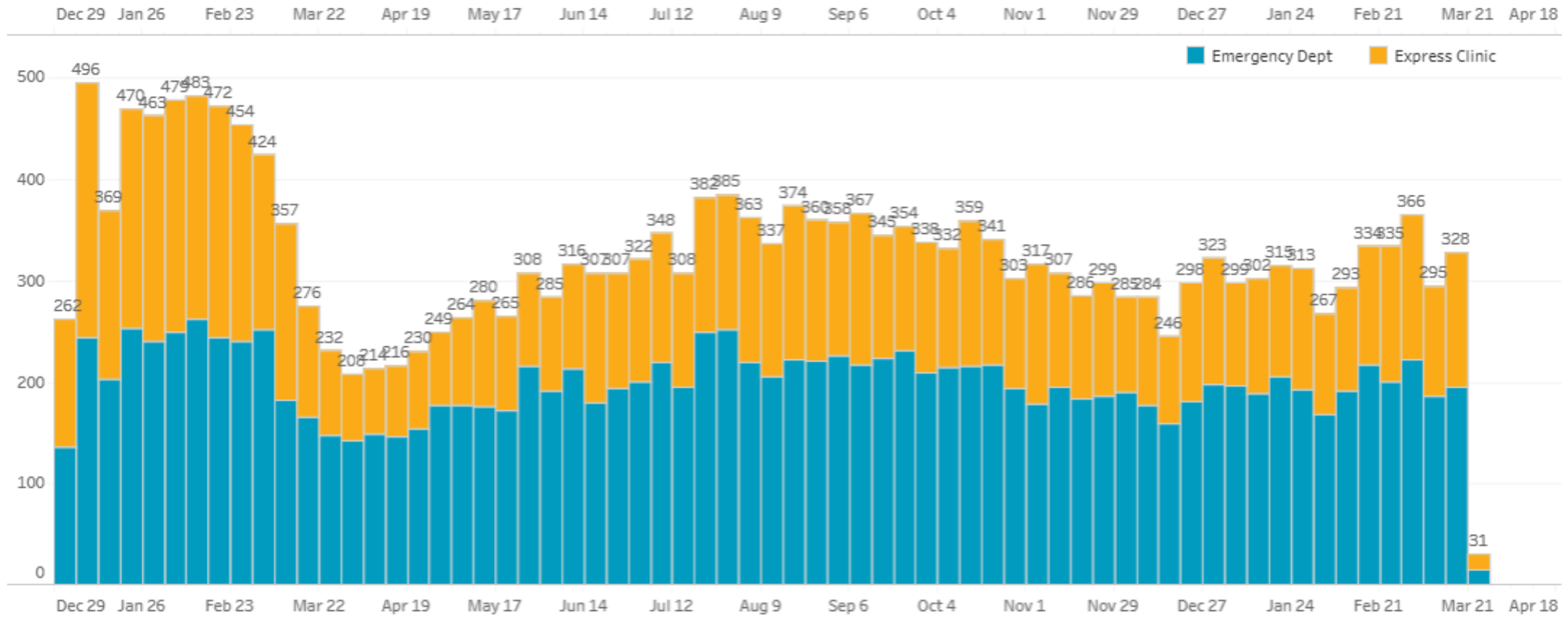
Week in Focus
Hover over a week below to view underlying data.

| 9/20/2020 | |
|----------------|-----|
| Total | 354 |
| Express Clinic | 122 |
| Emergency Dept | 232 |

Total Visits, 1/1/2020 to 3/21/2021
Select a department to bring in focus.

| Emergency Dept | Express Clinic |
|----------------|----------------|
| 12,889 | 8,196 |

Volumes by Arrival Department and Week, 2020 - 2021



COVID-19 VACCINATIONS

ADMINISTRATIONS

Doses administered
Total # doses given & recorded (all time).
As of 3/23/2021

15,085

Patients receiving 1st dose
Patients receiving at least their 1st dose.
As of 3/23/2021

9,294

Patients completing series
Patients fully vaccinated. As of
3/23/2021

5,791

Wasted (all time)
% Doses unviable (12 doses). Uses vials-to-
doses factors. As of 3/23/2021

0.07%

Latest inventory (Pfizer)
Vials from physical inventory. As of 3/23/2021

286 vials

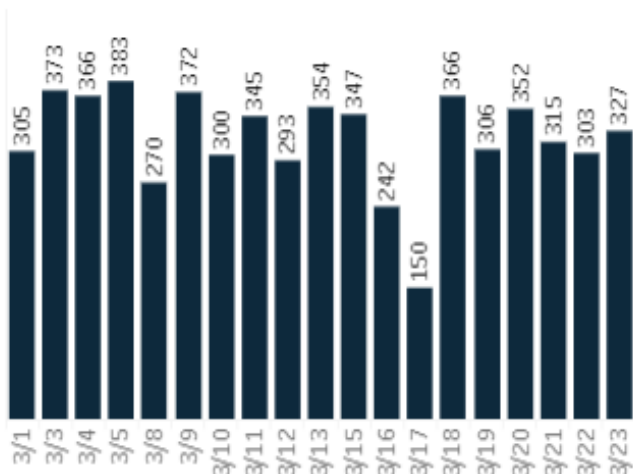
Latest inventory (Moderna)
Vials from physical inventory. As of 3/23/2021

99 vials

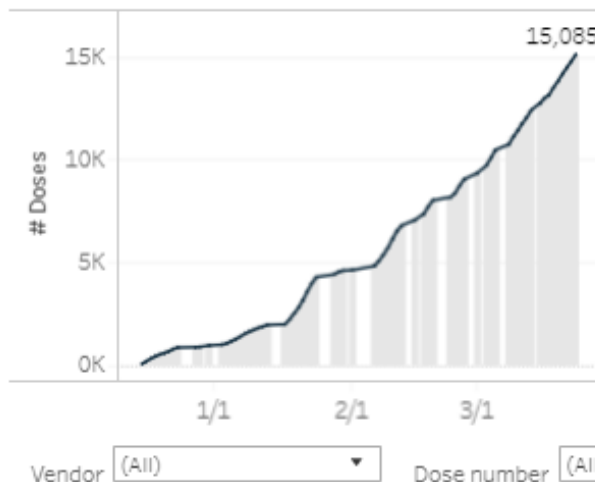
Doses on hand (all vendors)
Doses available from latest inventory. Uses vials-to-
doses factors. As of 3/23/2021

2,706

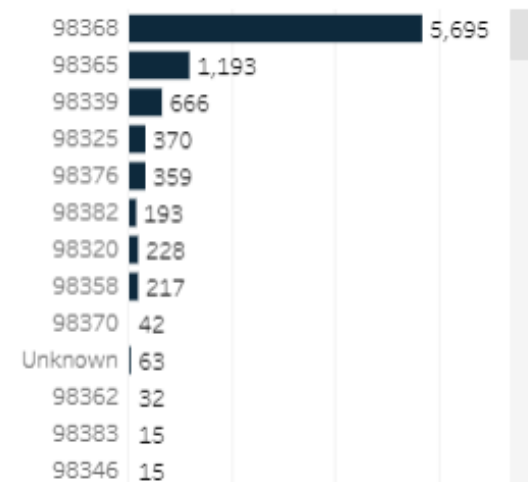
Daily vaccinations (last 4 weeks)
Doses administered & recorded by day. As of
3/23/2021



Doses administered
Cumulative # doses administered up through each
date. Hover for detail. As of 3/23/2021



Vaccinations by Zip Code
Distinct patients receiving one or more doses
(all time). As of 3/23/2021

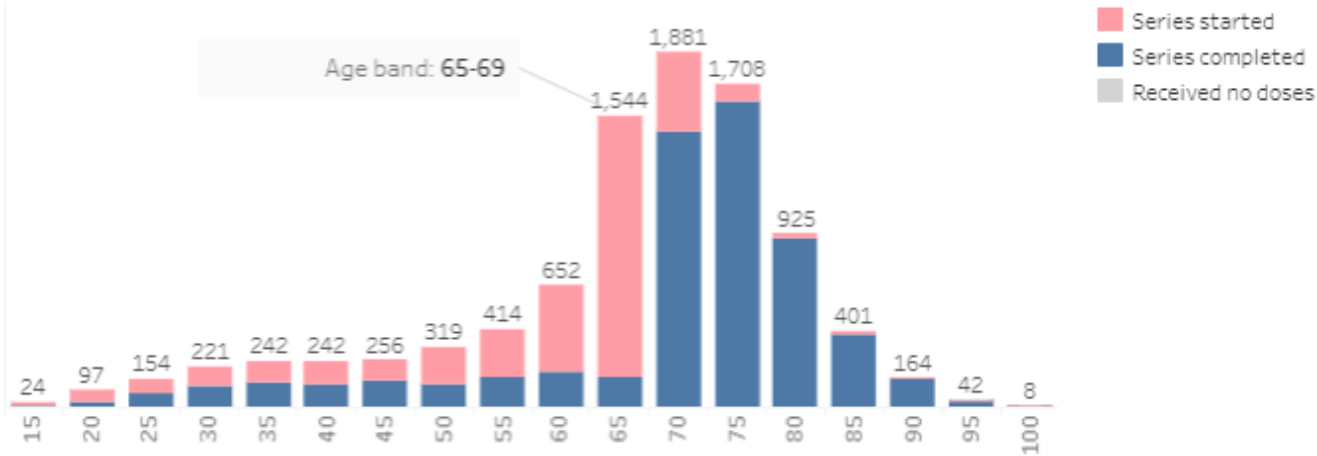


COVID-19 VACCINATIONS AND INVENTORY

INVENTORY

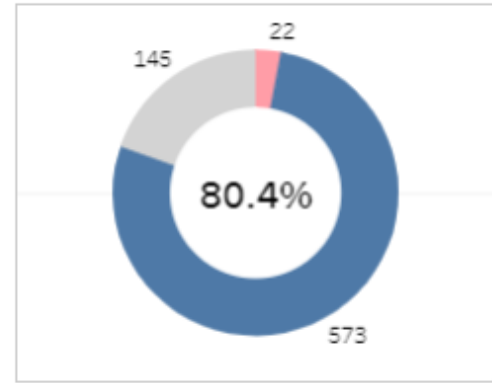
Patients by 5-year age bands

Distinct patients receiving one or more doses (all time). Bands start at the age shown and run through the next band. Hover for detail. As of 3/23/2021



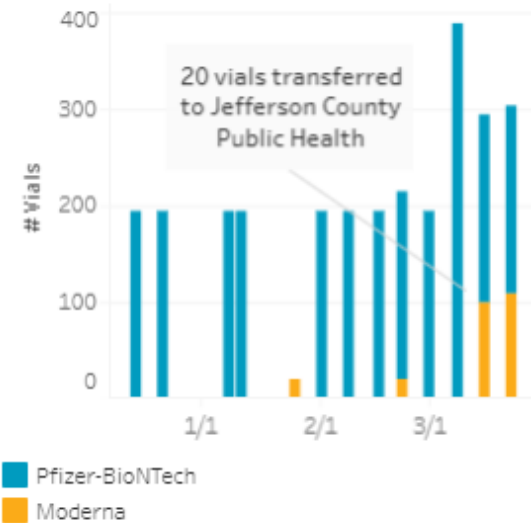
JH employees

Series status for 740 patient- and non patient-facing full employees. KPI indicates the percent of employees receiving at least one dose. As of 3/23/2021



Shipments received

Vials by date of receipt at JH. Color indicates vendor. Hover for detail



Update on health and community equity work

Master Site Plan- A Four Phased Approach



Jefferson Healthcare 2019-2020 Master Site Plan

- Jefferson Healthcare engaged Coates and Associates and Health Facilities Planning to facilitate a master site planning process.
- The process included input from hospital staff, medical staff, local leadership and the communities we serve.
- The goal of the process was to develop a plan that addresses facility improvement and expansion needs and identifies new services opportunities, existing services growth opportunities and overall community sentiment toward Jefferson Healthcare.

The MSP process

- Health Facilities and Planning reviewed and presented extensive Jefferson County demographic data and health services utilization rates by service line.
- The process also identified existing and new service growth opportunities and technological innovations which may impact care delivery systems.
- The process identified 3-5 expanded and new facility configurations sized and scaled to meet JHC space needs for 10-20 years

Additional Comments

- The timing of this work was not ideal, given we were tasked with creating Jefferson Healthcare's future at the same time we were stepping into Covid response activities. (completely different brain spaces!)
- The final product was BIG in scope, scale, ambition and expense and may be tied to a successful bond campaign. This created concern, because JH has immediate mission critical space needs.
- I am proposing a 4 phased MSP that allows for immediate planning and development of critical space while continuing to plan and position for a more comprehensive solution.

4 Phase Master Site Plan

| Phase | Term | Project | Goals | Estimated Cost | Funding Source |
|-------|------|---|--|---------------------------|----------------|
| 1 | Now | Expand Surgery pre-op/recovery space | Improve surgery throughput, productivity and patient/provider experience | TBD | JH |
| 1 | Now | Expand Diagnostic Imaging capacity | Increase mammography and ultrasound space and capacity | \$50,000 - \$100,000 | JH |
| 2A | 2Q21 | On campus 25-30k sf MOB/ OP Surgery center | Build space for dermatology/women's clinic/urology/general surgery/OP surgery suites/other | \$20,000,000-\$25,000,000 | JH |
| 2B | TF | Retrofit JHSA | Space for existing/expanding services | TBD | JH |
| 2C | TF | Retrofit existing dermatology space to medical oncology space | Increase space for medical oncology services | TBD | JH |

4 Phase Master Site Plan

| Phase | Term | Project | Goals | Estimated Cost | Funding Source |
|-------|------|---|---|----------------|----------------|
| 3A | 2023 | Complete required 88 building code compliance work | Comply with current life/safety codes, continue to operate in building, add space | TBD | TBD |
| 3A | 2023 | Develop linear accelerator vault, MRI space, other | Add Rad Onc program, improve MRI space and experience | TBD | TBD |
| 3B | 2023 | 65 building replacement and expansion | Replace out of compliance space with new and improved space | TBD | TBD |
| 4 | 2023 | On sight primary care, aquatics and wellness center | Improve PC space and experience, add wellness center and community services | TBD | TBD |
| 5 | TBD | Oops... I forgot about that | Address that very important thing | TBD | TBD |

Next Steps

- Complete analysis for phase 1 and 2A projects and return to the board with recommended next steps

Date:

April 28, 2021

Questions

