

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, May 26, 2021

Call to Order:

The meeting was called to order at 2:00pm 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, Tyler Freeman, Chief Financial Officer, Jon French, Chief Legal Officer, Jake Davidson, Chief Ancillary & Specialty Services Officer, Caitlin Harrison, Chief Human Resources Officer, Jenn Wharton, Chief Ambulatory and Medical Group Officer, Dr. Joseph Mattern, Chief Medical Officer, and Alyssa Rodrigues, Administrative Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

Approve Agenda:

Commissioner Buhler Rienstra suggested amending the motion to state under April Warrants and Adjustments instead of March Warrants and Adjustments under Required Approvals. Commissioner Dressler made a motion to approve the amended agenda. Commissioner Kolff seconded.

Action: Motion passed unanimously

Board Governance Education

The Commissioners watched a section of a recorded webinar title, "Governance Clinic" by James Orlikoff, President, Orlikoff and Associates, Inc, regarding board evaluations.

Discussion ensued.

Education Topic:

- 2022-2025 Strategic Plan Update

Mike Glenn, CEO, provided the 2022-2025 Strategic Plan Update.

Commissioners provided feedback which included:

Goal 1 – To attain health outcomes for all.

- Commissioner Kolff would like to see patient centered included in this goal.

1) Deliver care guided by the best evidence:

- Commissioner Kolff suggested using the word racism and updating sentence to say assess and address health equity *within* Jefferson Healthcare and our community.

2) Improve transitions of care

- Commissioner Kolff felt the phrase “ensure frictionless encounters” sounds more like a goal than a strategy

2) Harm No Patient

- Commissioner Kolff asked for Mike to send them the five principles of Highly Reliable Organizations.

Goal 2: Deliver a care experience that exceeds patient expectations

1) Define and fully embed radically convenient access to care.

- Commissioner Kolff suggested adding continuously identify and eliminate barriers to care

2) Develop and cultivate a Service Excellence Culture with all employees of Jefferson Healthcare.

- Commissioner Kolff asked to include the board in the first bullet, “Reinstitute Jefferson University for all staff and providers.”

3) Consistently deliver an outstanding experience with every encounter

- Commissioner Dressler asked if there should be something about patient satisfaction regarding the health issue they went to the provider for.
- Commissioner Kolff said the term “outreach” implies we are reaching out to them and add pending “resolution” of patient accounts.

Goal 3: To be an incredible place to work and practice. (No Changes)

Goal 4: to remain an independent, financially strong healthcare organization

4) Develop new facilities to grow existing services and introduce/expand new services to meet community need and maintain financial viability.

- Commissioner Kolff asked if the word facility should be plural

6) Continue to grow services to ensure the community can be served and Jefferson Healthcare remains viable.

- Commissioner Kolff asked if advocating for changing the healthcare system which undervalues CAH and rural hospital districts. Advocating at both the state and federal level as well as advocating a change in the system so that

healthcare is viewed as a right for everyone. These changes would help support to remain an independent, financially strong healthcare organization.

Goal 5: To support health and promote wellness in the communities we serve

- Commissioner Ready asked if the Community Health Improvement Plan was still part of the Strategic Plan. Mike will add to this goal.

Commissioners recessed for break at 3:19pm.
Commissioners reconvened from break at 3:30pm.

Minutes:

- April 28, 2021 Regular Session Minutes

Commissioner Dressler made a motion to approve the April 28, 2021 Regular Session minutes. Commissioner McComas seconded.

Action: Motion passed unanimously.

Required Approvals: Action Requested

- April Warrants and Adjustments
- Medical Staff Credentials/Appointments/Reappointments

Commissioner Dressler made a motion to approve the April Warrants and Adjustments and Medical Staff Credentials/ Appointments/ Reappointments. Commissioner Kolff seconded.

Action: motion passed unanimously.

Patient Advocate Report: Jackie Levin, RN

Jackie Levin, RN, Patient Advocate presented the 1st quarter Patient Advocate Report.

Discussion ensued.

Financial Report:

Tyler Freeman, CFO, presented the April Financial Report.

Discussion ensued.

Administrative Report

Mike Glenn, CEO, presented the May Administrative report.

Discussion ensued

CMO Report

Dr. Joe Mattern, CMO provided the CMO report which included COVID-19 Community Prevalence, Visitor Policy, COVID-19 Cases and Vaccine, Vaccine Hesitancy, Vaccine

Integration, COVID-19 De-escalation, Masking, Pre-Procedure Testing, Medical Staff Changes and Behavioral Health.

Discussion ensued.

Board Business:

- Board of Health Report

Commissioner Kolff provided a Board of Health report which included Needle Exchange Program, Grants for WIC families, pollution sources, promoting breast feeding, Entheogenic plant use by adults and Social Determinants of Health training.

Commissioner Buhler Rienstra thanked Commissioner Kolff for his work on the Board of Health as a representative of Jefferson Healthcare Board of Commissioners.

Commissioner Dressler thanked all the staff for what they do. Commissioner McComas seconded and shared he had enjoyed being able to participate in the activities of Hospital Week.

Commissioner Kolff was delighted to say he was happy Commissioner Dressler and Kolff will be able to be apart of the board for another six years.

Meeting Evaluation:

Commissioners evaluated the meeting.

Conclude:

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

Action: Motion passed unanimously.

Meeting concluded at 5:17pm.

Approved by the Commission:

Chair of Commission: Jill Buhler Rienstra _____
Secretary of Commission: Marie Dressler _____

Jefferson Healthcare Strategic Plan 2022-2025 (DRAFT)



Objective:

**To be the highest performing
rural healthcare system and
critical access hospital in the
country.**

Goals:

- 1. To attain excellent health outcomes for all.**
- 2. To deliver a care experience that exceeds patient expectations.**
- 3. To be an incredible place to work and practice.**
- 4. To remain an independent, financially strong healthcare organization.**
- 5. To support health and promote wellness in the communities we serve.**

Goal #1: To attain excellent health outcomes for all.

Strategies:

1. Deliver care guided by the best evidence.

- Provide evidence based, best practice clinical care.
- Enhance the use of technology for improving patient outcomes.
- Assess and address health equity with Jefferson Healthcare and our community.
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-

2. Improve transitions of care.

- Ensure effective, reliable and efficient handoffs, transition and patient discharges.
- Optimize the referral process.
- Ensure frictionless patient navigation.
-
-
-

Goal #1: To attain excellent health outcomes for all.

Strategies:

3. Harm No Patient

- Achieve zero preventable harms by implementing the five principles of Highly Reliable Organizations (HROs)
- Resume LEAN to ensure the availability and hospital wide deployment of continuous process improvement tools.
- Leverage data and analytics to evaluate the effectiveness of systems, predict gaps, and guide the delivery of care.
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Goal #2: To deliver a care experience that exceeds patient expectations.

Strategies:

1. Define and fully embed radically convenient access to care.

- Eliminate barriers to care.
- Leverage technology to enable patient to monitor, schedule and seek care online.
- Create a culture that promotes and an infrastructure that supports access to care.
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-
-

Goal #2: To deliver a care experience that exceeds patient expectations.

Strategies:

2. Develop and cultivate a Service Excellence Culture with all employees of Jefferson Healthcare.

- Reinstitute Jefferson University for all staff and providers.
- Develop a Jefferson Healthcare Service Excellence scorecard to monitor patient satisfaction performance and benchmark with other organizations.
-
-
-

Goal #2: To deliver a care experience that exceeds patient expectations.

Strategies:

3. Consistently deliver an outstanding experience with every encounter.

- Personalize the patients experience with every encounter.
- Deliver consistent, intuitive and inviting service standards across all of Jefferson Healthcare.
- Define patient care experience continuum starting with initial patient outreach ending with patient accounts.
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-

Goal #3: To be an incredible place to work and practice.

Strategies:

1. Attract and select high performers that exemplify the Jefferson Healthcare way.

- Define the Jefferson Healthcare way for patients, staff, providers and the community.
- Focus on interviewing and onboarding to always hire and develop the best candidate.
- Invest in diversity training.
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-

Goal #3: To be an incredible place to work and practice.

Strategies:

2. Develop and retain high performers.

- Invest in training and development that hardwires the Jefferson Healthcare experience.
- Ensure a culture and infrastructure that is professionally challenging and personally supportive for all employees.
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-
-

3. Ensure the organization has high performing leaders.

- Create and model high performance leadership principles.
- Invest in continuous training and development of all leaders.
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-
-

Goal #3: To be an incredible place to work and practice.

Strategies:

4. Support providers in a thriving, rewarding practice.

- Create optimal care teams.
- Implement technology that supports the provider practice.
- Redesign medical staff governance to bridge medical staff/medical group dynamics and promote effective medical staff leadership.
-
-
-

Goal #4: To remain an independent, financially strong healthcare organization.

Strategies:

1. **Respond to a changing healthcare environment.**
 - Create a roadmap to value-based care.
 - Create and operationalize COVID -19 financial recovery.
 -
 -
 -
2. **Identify and confront market forces that may challenge Jefferson Healthcare's independence.**
 -
 -
 -

Goal #4: To remain an independent, financially strong healthcare organization.

Strategies:

3. Improve value by improving the efficiency of care delivery.

- Reduce waste and unnecessary expense by ensuring leaders have a strong working knowledge of healthcare finances.
- Deliver training and tutorials that deepen our leaders' proficiency with healthcare finance; meet them where they are.
- Develop tools for comprehensive monthly reporting and analysis that drives action to improve.
-

4. Develop new facilities to grow existing services and introduce/expand new services to meet community need and maintain financial viability.

- Develop facility to meet immediate need for additional specialty clinic space and ambulatory surgery suites.
- Complete Master Site Plan to include concept designs for '65 building replacement project.
-

Goal #4: To remain an independent, financially strong healthcare organization.

Strategies:

5. Maximize capture rate of gross revenue (charges) and net revenues (cash).

- Develop toolkits for leaders and providers to understand the impacts of all steps of revenue cycle activities.
- Optimize clinical documentation and feedback for providers.
- Enhance active denial and error management strategies.
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-

Goal #4: To remain an independent, financially strong healthcare organization.

Strategies:

6. Continue to grow services to ensure the community can be served and Jefferson Healthcare remains viable.

- Expand the array of specialty services we offer to our community.
- Ensure the community seeks care locally by understanding and addressing their needs.
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-
-

Goal #5: To support health and promote wellness in the communities we serve.

Strategies:

1. Strengthen our position as an anchor of the community.

- Maintain and build new relationships with organizations that promote the community's health.
- Recognize the opportunity of anchor institutions and the impact they have on their community.
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-
-

Goal #5: To support health and promote wellness in the communities we serve.

Strategies:

2. Demystify healthcare economics.

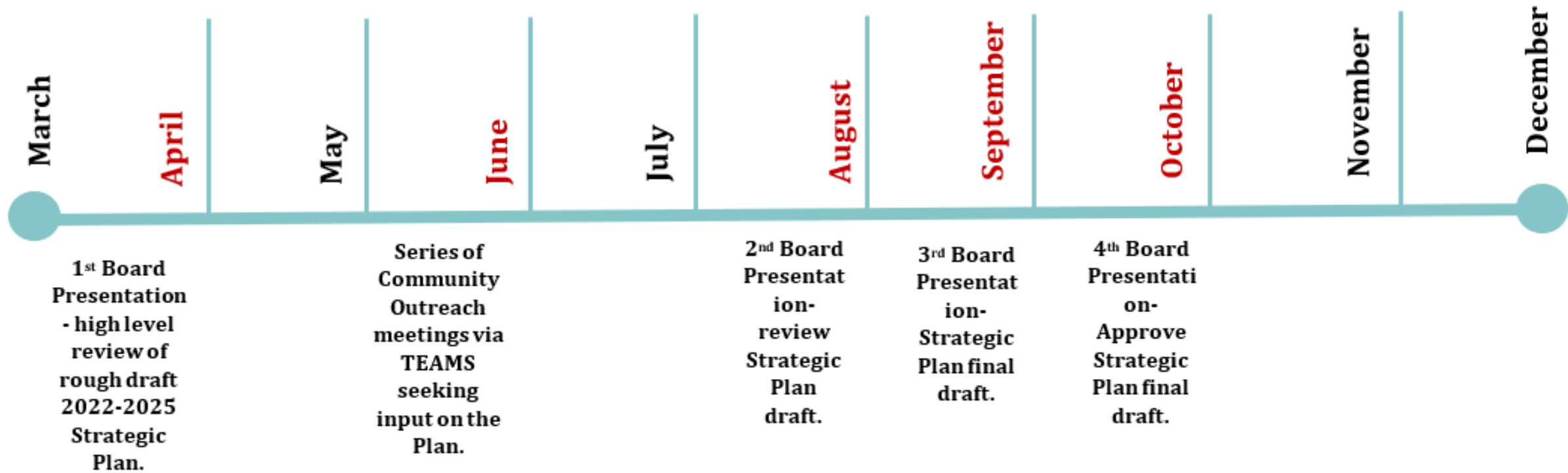
- Provide price estimation tools for patients.
- Optimize use of MyChart for improved engagement with patients and easier bill payment.
- Create a financial counseling/advocacy experience that informs and supports all patients.
-
-
-

Jefferson Healthcare Strategic Plan

Development and Completion Process

May 26	Present draft plan to Jefferson Healthcare Board of Commissioners
June 15	Virtual Community Forum
June 17	Virtual Community Forum
June 23	Present summary of Community Input and feedback to Board of Commissioners
June 29	Present draft plan to Jefferson Healthcare Leadership group
August 3	Full Day SLG Retreat
August 17	Full Day SLG Retreat
September 29	Present Draft plan to Board of Commissioners for final comments
October 27	Present plan to Board of Commissioners for approval

2022-2025 Strategic Plan Planning Process



Board of Commissioners Patient Advocate Q1 2021 Report

Jackie Levin, MS, RN
April 26, 2021

Patient Advocate Q1 2021 Report

Responsiveness
to Patient
Feedback

Distribution of
Care Provider
Concerns

LGBTQ Health
Equity Task
Force

Trends by
Service Area

Resolved
Common
Concerns

Responding to Patient Concerns, Q1 2021

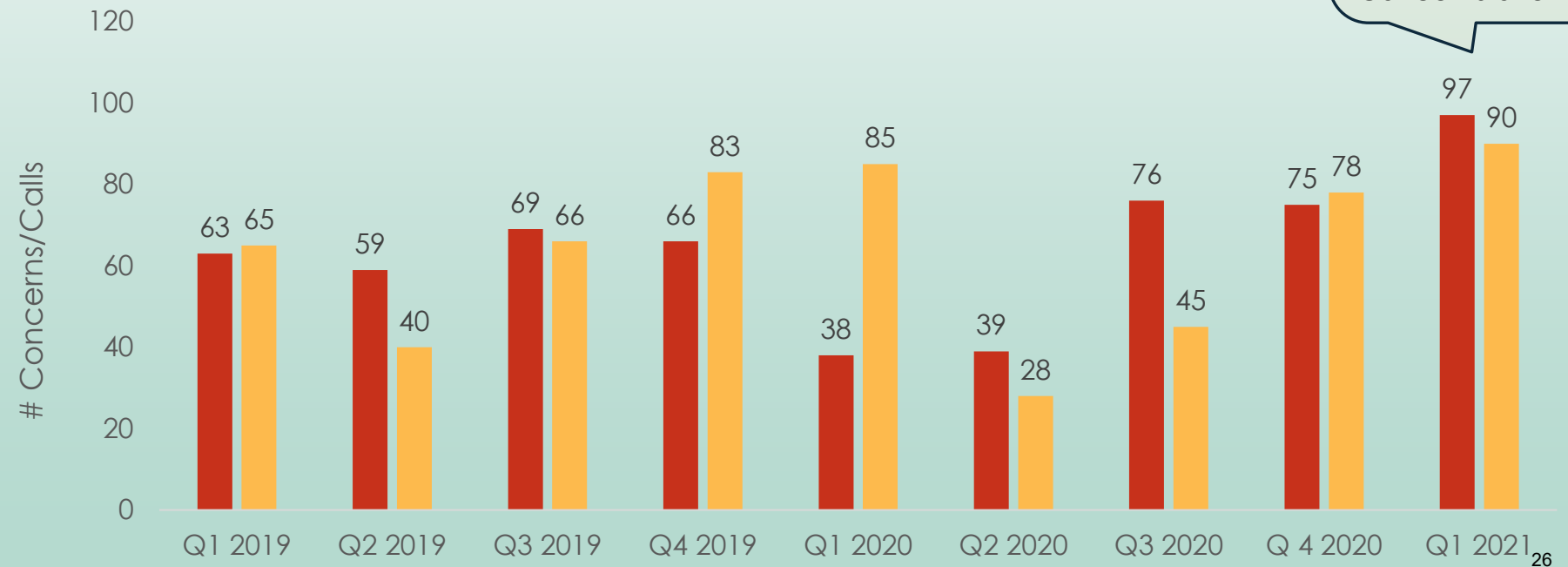
97

concerns reported

90

patient navigation
calls

15% increase in
Navigation Calls
over Q 4 '20
29 % increase in
Concerns over Q4 '20



Responding to Patient Concerns, Q4 2020

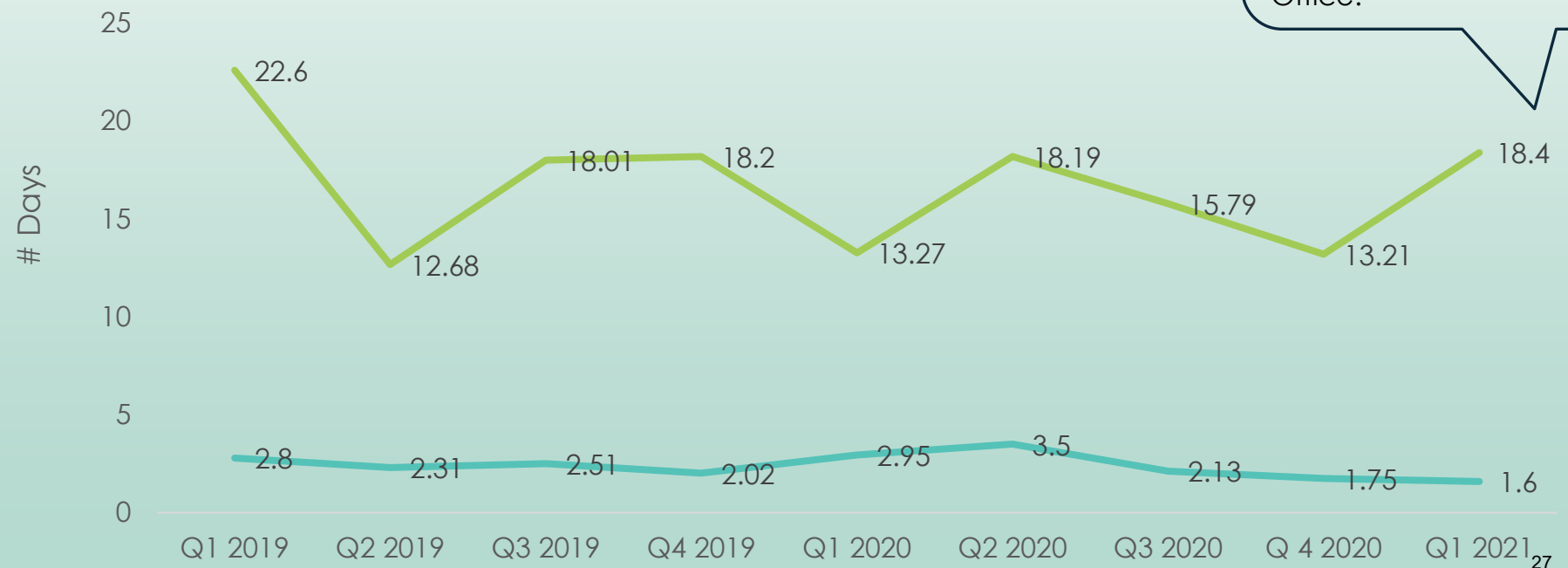
1.7

average days to
acknowledgement
High: 7 -- Low: 0

18.4

average days to
resolution
High: >30 (5) -- Low: 0

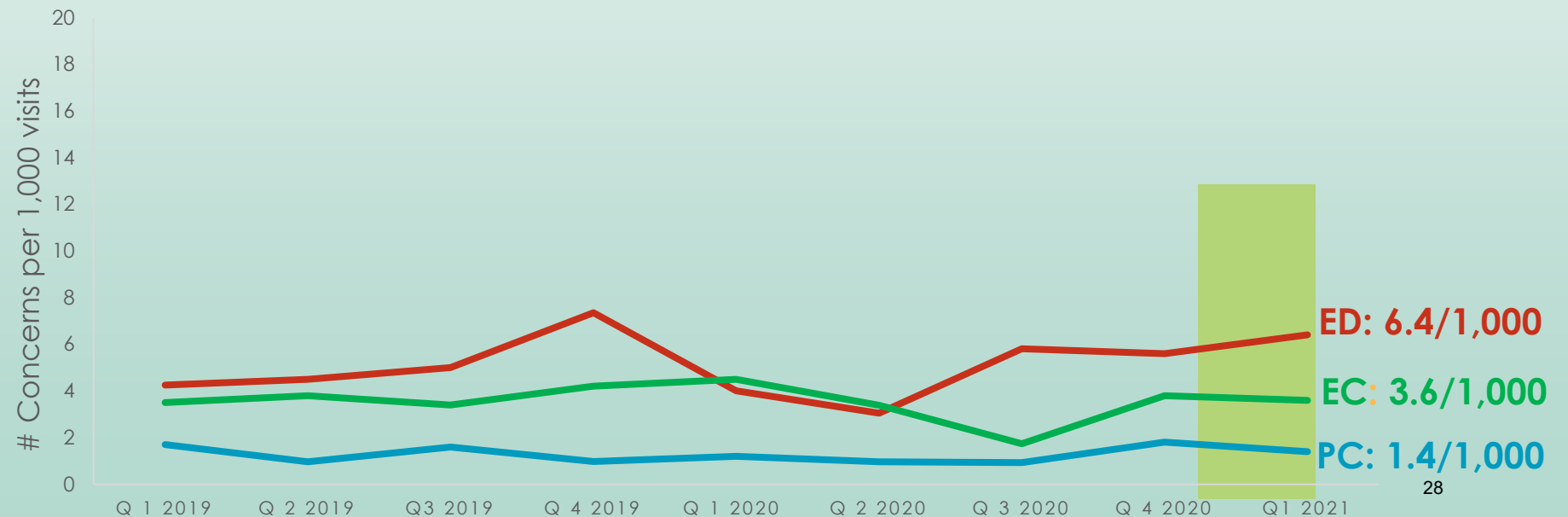
Average days to
resolution **increased by
5.2 days** (39%) with **22%
increase** in all calls to
Patient Advocate
Office.



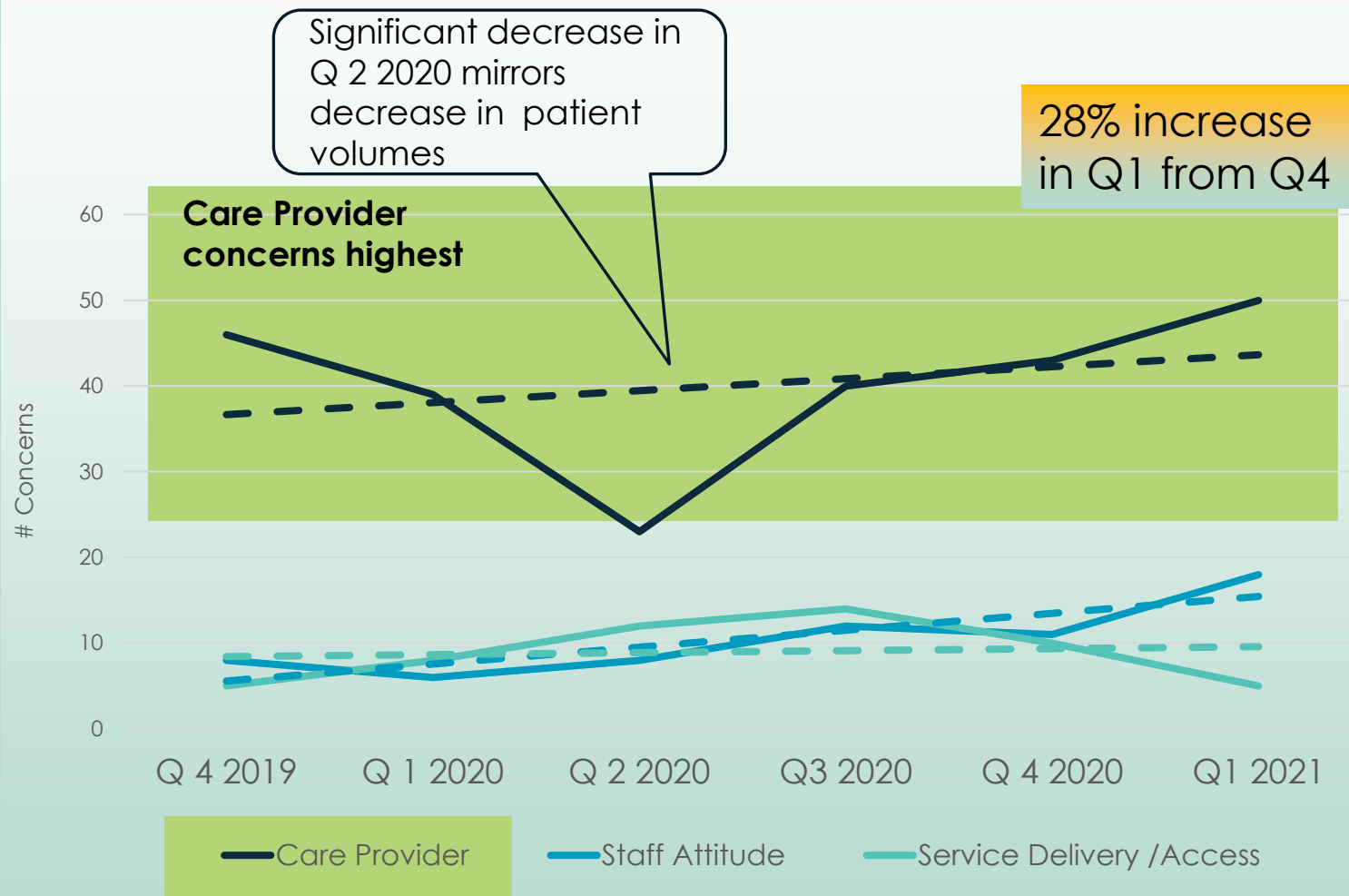
Concerns per 1,000 visits

ED, EC, PC

- ▶ 13% increase in Emergency Department concerns this quarter
- ▶ Express Clinic slight tic downward (5%)
- ▶ Primary Care reduced by 22%
- ▶ Provider communication remains main issue



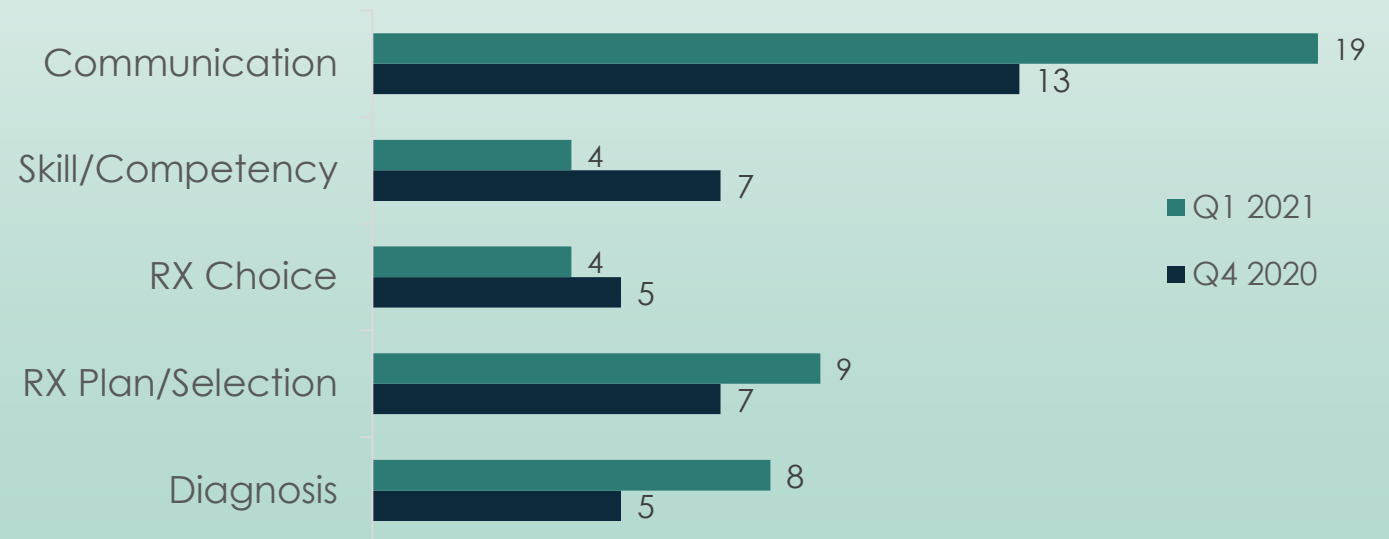
Types of Concerns



Types of Concerns: Care Providers

- **Care provider** concerns accounted **55% of patient concerns in Q1 2021**.
 - **28% increase from Q4**
 - **Actions Taken:**
 - Meeting the new providers ---learn our process
 - Practice Managers' support in concern process
 - Work with Executive Director Dan Z

Q1 2021 Care Provider Concerns by Type

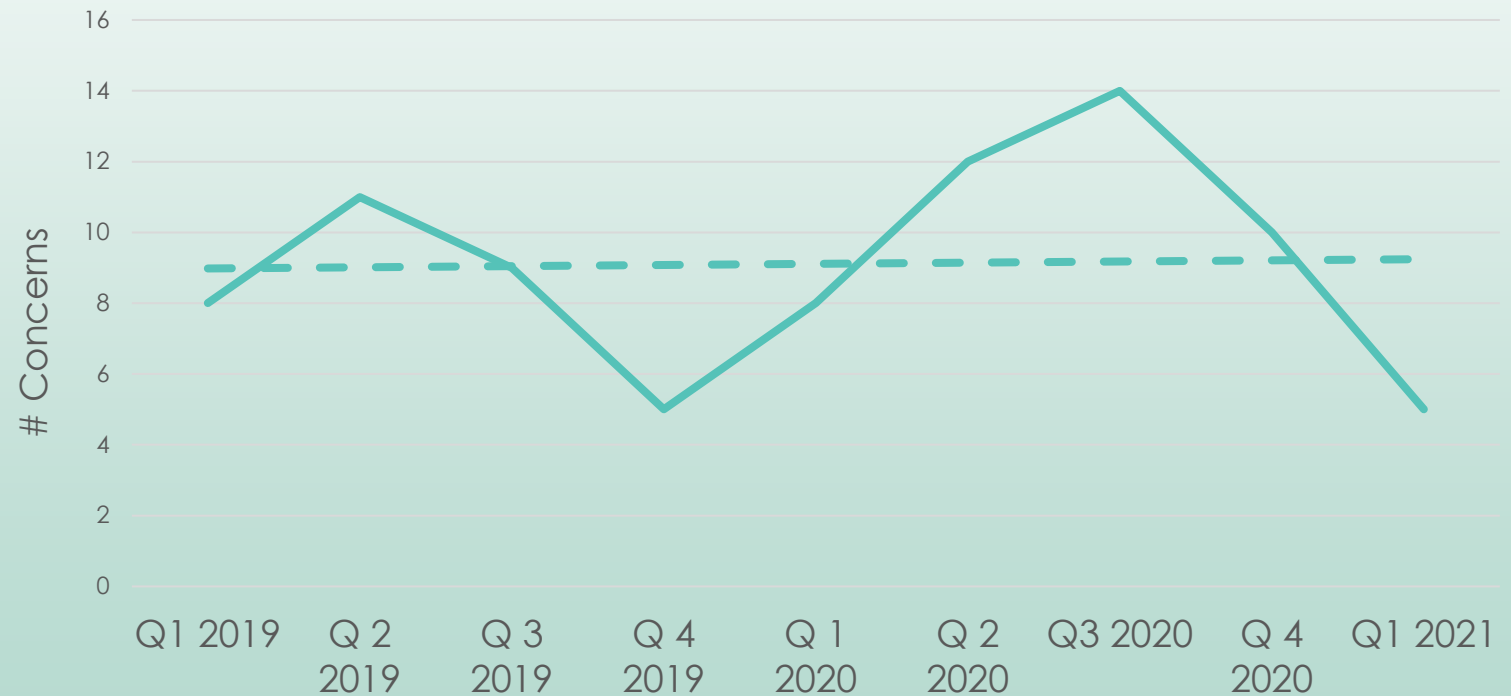


Types of Concerns:

Access & Service Delivery

► Focused on access-related concerns in Q1 2021

- Delayed Referral Processing
- Medication renewals
- Time to New Patient Appointments
- **Improved access for Transgender patients**






HEI Award
Application

June is Pride
Month

LGBTQIA+ Task
Force

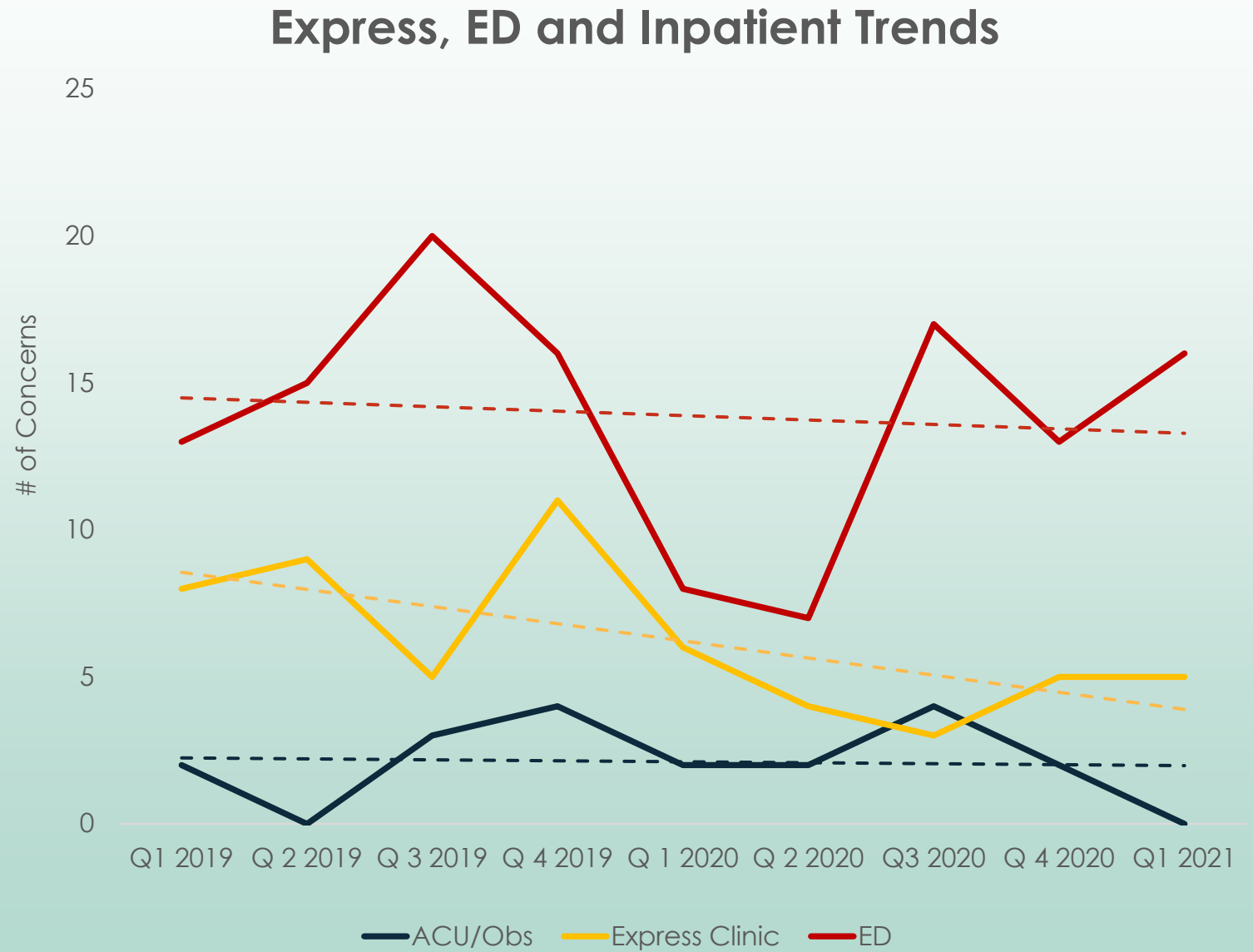


June 16th 2021
Pride Day at JH

Education:
Brown Bag Lunch 7/14/21
With Beau Ohlgren

LGBTQ Taskforce goals:
Front-line staff training
Increase community
representation TF & PFAC

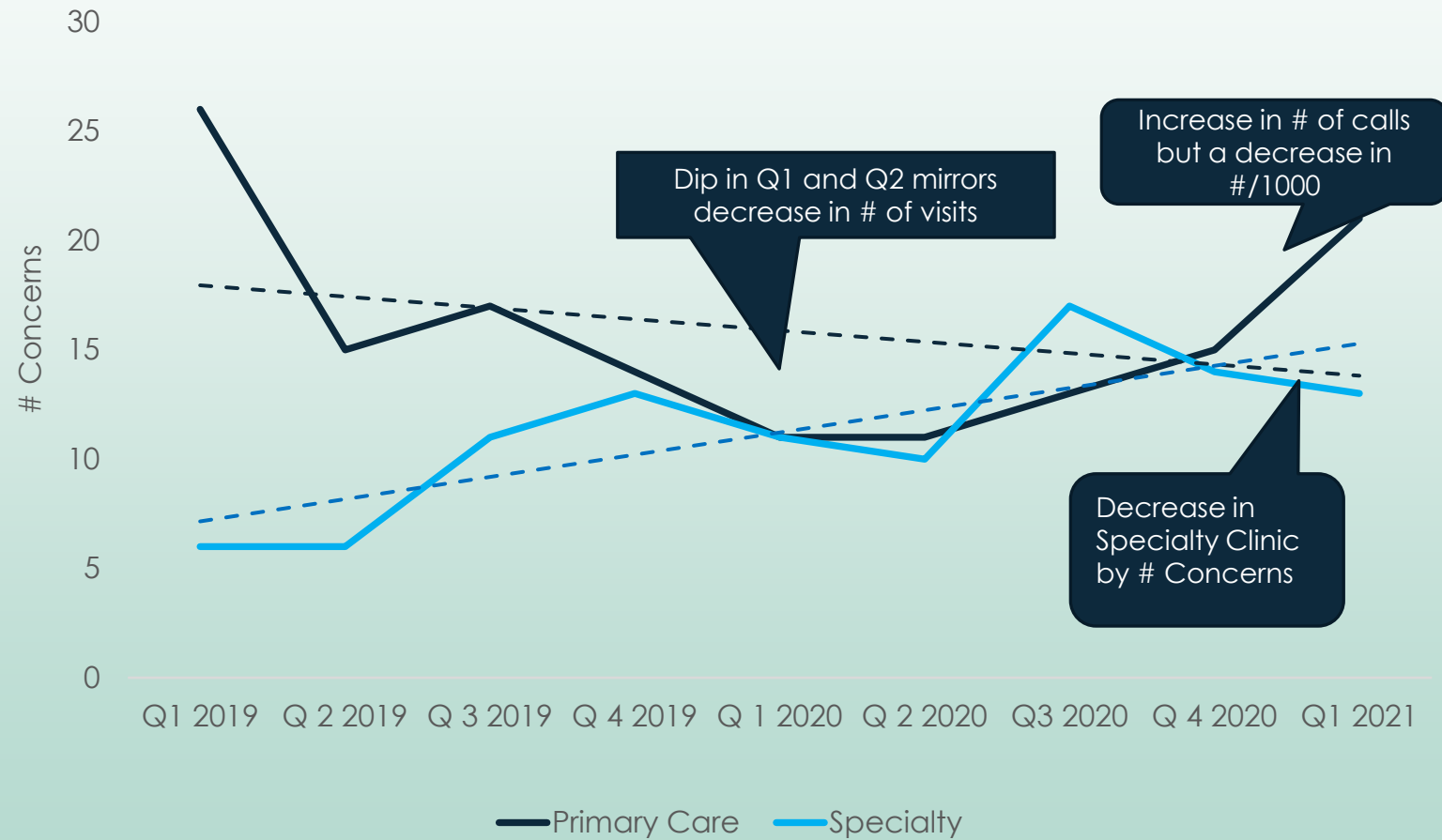
Service Area Trend



Service Area Trends

of Concerns

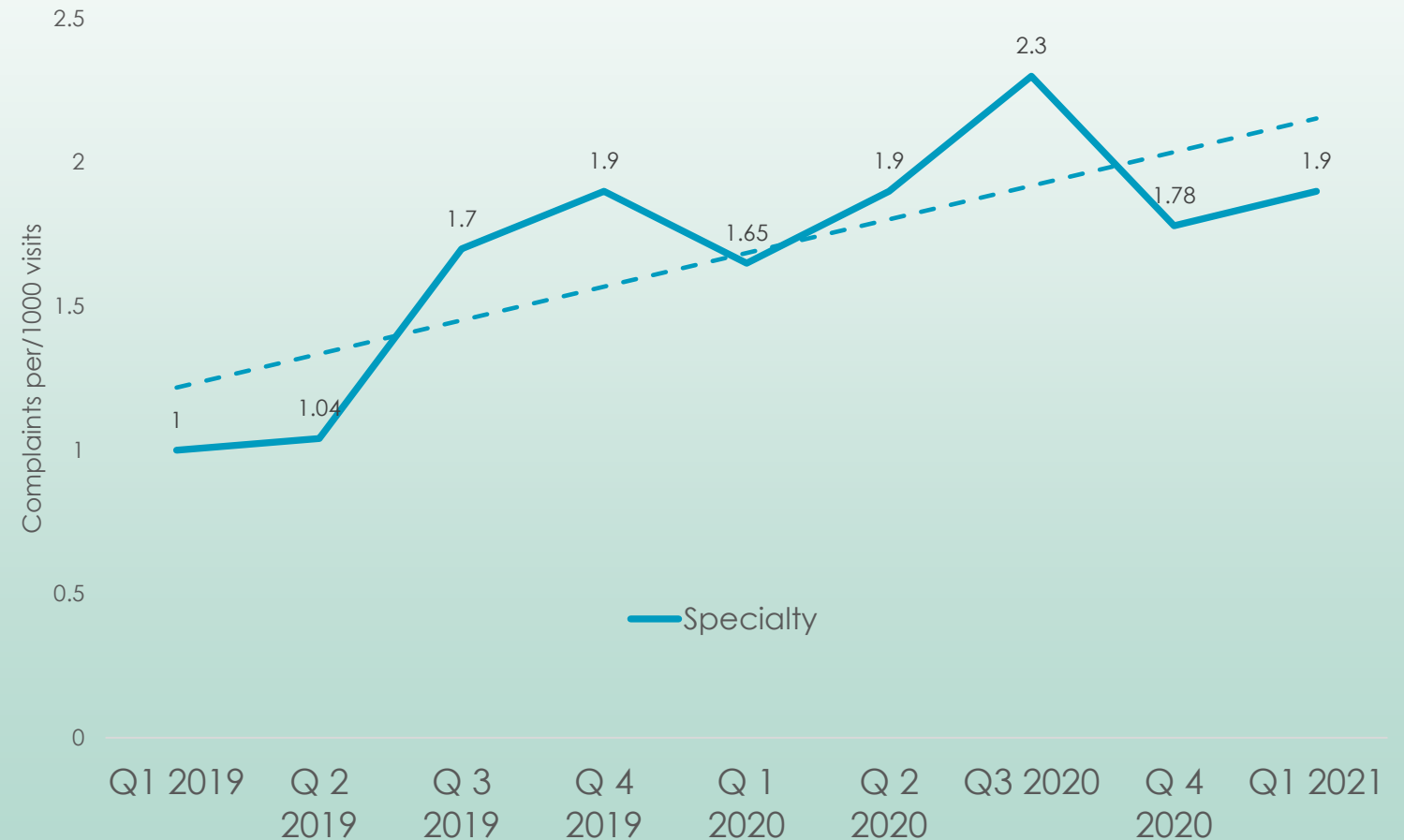
Primary and Specialty Clinic Trends



Service Area Trends

decrease

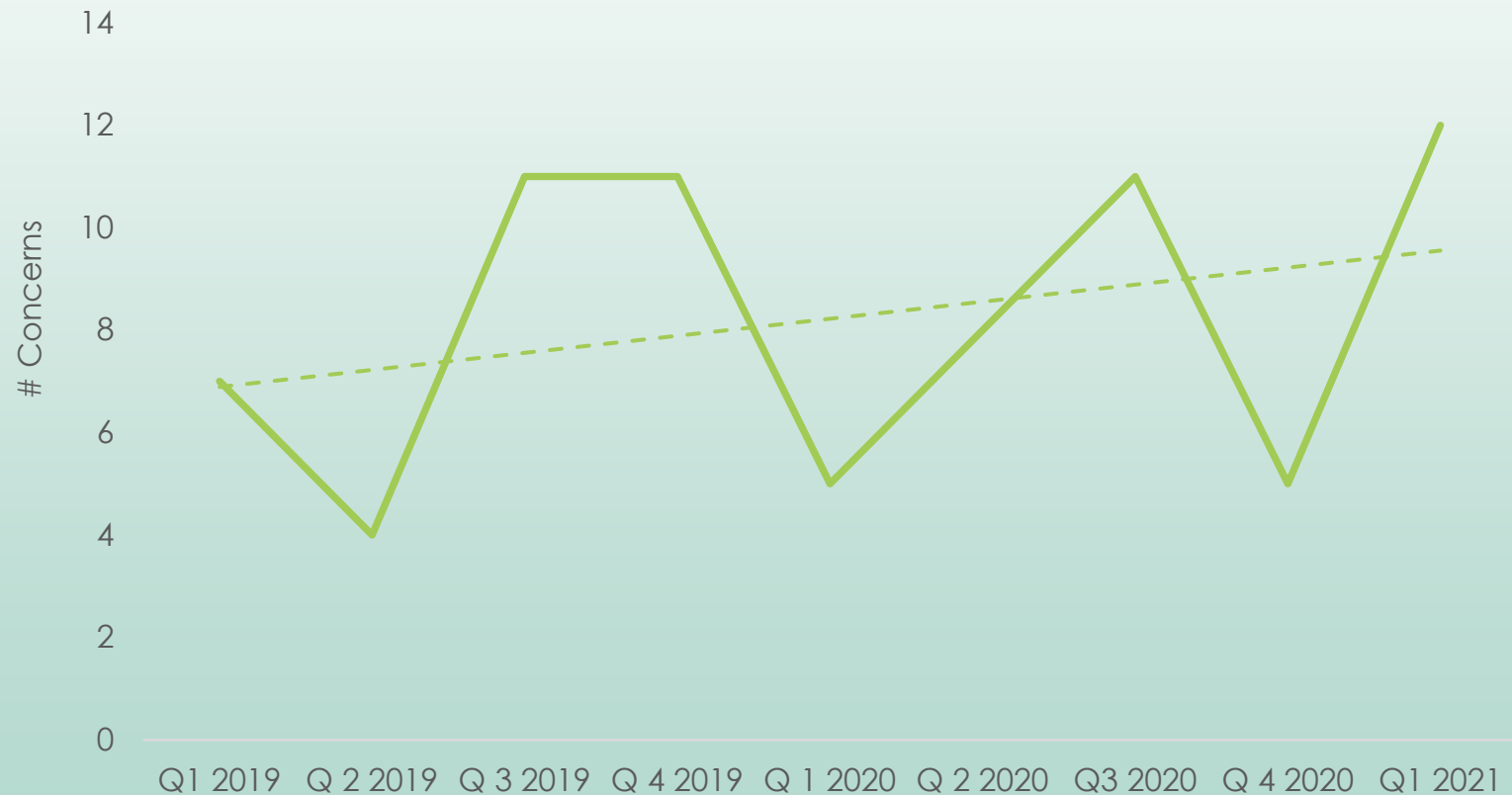
Specialty Clinic Concerns per 1,000 visits



Service Area Trends

Registration
Laboratory
Diagnostic Imaging
Rehab
Dietary
Billing

Ancillary and Other Services Trends



COVID-19 Common Concerns



Resolved: Common Pandemic Concerns

- ▶ Temporary Visitor Policy Update
- ▶ Screening Station Wait Times and Mask Issues
 - ▶ Interim Supervisor assisting with concerns
 - ▶ Temperature Screening Kiosk



Questions?



Jefferson Healthcare

April 2021 Finance Report

May 26, 2021

Tyler Freeman, CFO

April 2021

Operating Statistics

STATISTIC DESCRIPTION	APRIL 2021						APRIL 2020					
	MO ACTUAL	MO BUDGET	% VARIANCE	YTD ACTUAL	YTD BUDGET	% VARIANCE	MO ACTUAL	% VARIANCE	YTD ACTUAL	% VARIANCE	YTD ACTUAL	% VARIANCE
FTEs - TOTAL (AVG)	609	625	3%	615	625	2%	591	-3%	598	-3%	598	-3%
ADJUSTED PATIENT DAYS	2,864	2,161	33%	10,224	8,645	18%	1,238	131%	6,903	48%	6,903	48%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	68	73	-7%	261	293	-11%	50	36%	219	16%	219	16%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	256	320	-20%	996	1,280	-22%	136	88%	920	8%	920	8%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	338	415	-19%	1,335	1,662	-20%	187	81%	1,237	7%	1,237	7%
SURGERY CASES (IN OR)	143	123	16%	519	493	5%	39	267%	356	31%	356	31%
SPECIAL PROCEDURE CASES	68	75	-9%	264	299	-12%	6	1033%	206	22%	206	22%
LAB BILLABLE TESTS	21,799	20,874	4%	86,683	83,495	4%	11,069	97%	61,504	29%	61,504	29%
TOTAL DIAGNOSTIC IMAGING TESTS	3,162	3,046	4%	11,962	12,181	-2%	1,549	104%	9,652	19%	9,652	19%
PHARMACY MEDS DISPENSED	19,158	23,663	-19%	71,240	94,650	-25%	11,596	65%	68,183	4%	68,183	4%
RESPIRATORY THERAPY PROCEDURES	2,781	3,607	-23%	10,073	14,427	-30%	1,126	147%	10,058	0%	10,058	0%
REHAB/PT/OT/ST RVUs	9,194	8,920	3%	35,387	35,682	-1%	4,387	110%	28,581	19%	28,581	19%
ER CENSUS	881	1,074	-18%	3,407	4,295	-21%	657	34%	3,554	-4%	3,554	-4%
DENTAL CLINIC	424	385	10%	1,402	1,542	-9%	64	563%	937	33%	937	33%
TOTAL RURAL HEALTH CLINIC VISITS	6,081	6,261	-3%	23,725	25,044	-5%	3,486	74%	19,733	17%	19,733	17%
TOTAL SPECIALTY CLINIC VISITS	3,471	3,348	4%	14,077	13,392	5%	1,897	83%	10,749	24%	10,749	24%

April 2021

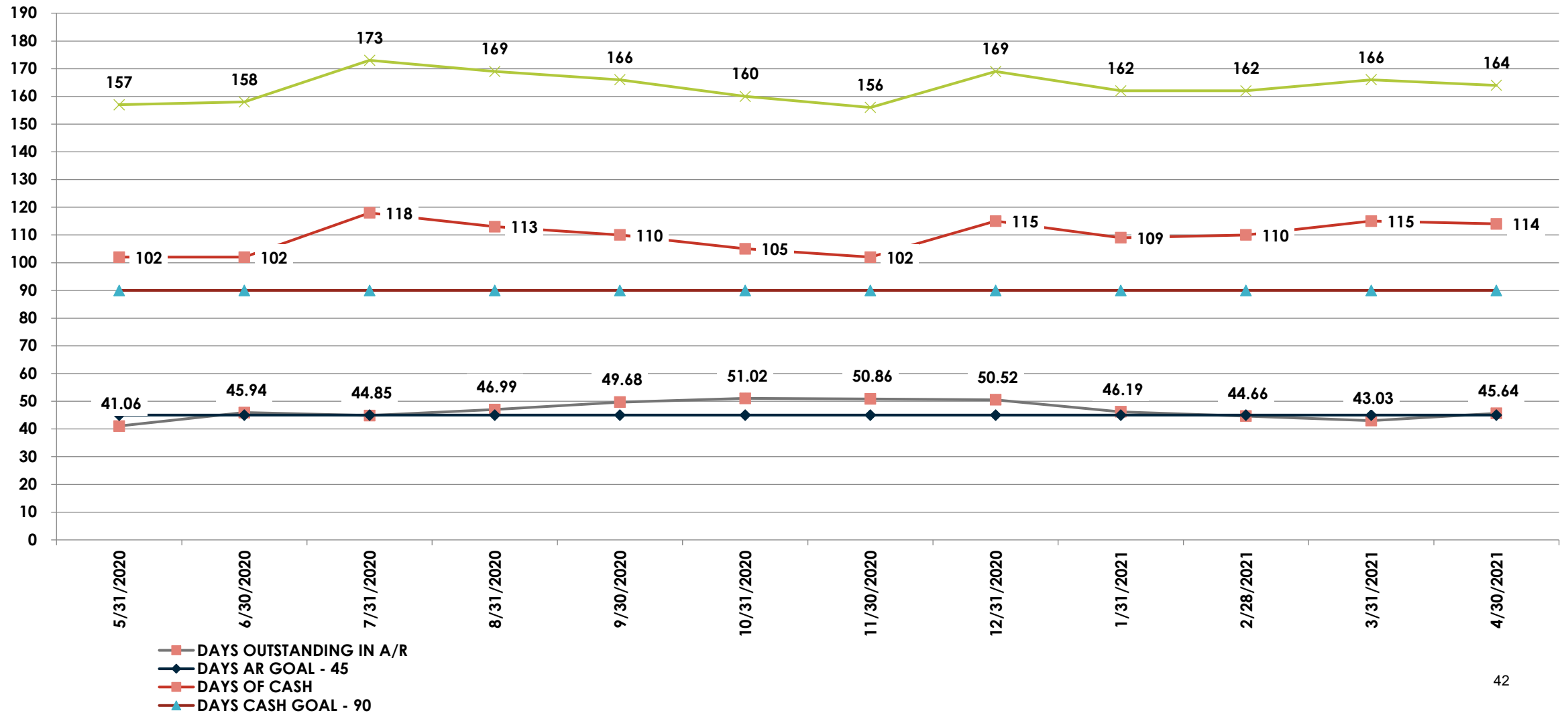
Income Statement Summary

	April 2021 Actual	April 2021 Budget	Variance Favorable/ (Unfavorable)	%	April 2021 YTD	April 2021 Budget YTD	Variance Favorable/ (Unfavorable)	%	April 2020 YTD
Operating Revenue									
Gross Patient Service Revenue	24,924,971	23,715,243	1,209,728	5%	95,840,651	94,860,974	979,677	1%	75,319,910
Revenue Adjustments	13,245,093	12,616,123	(628,970)	-5%	50,851,164	50,464,491	(386,673)	-1%	40,876,853
Charity Care Adjustments	252,919	225,526	(27,393)	-12%	1,227,535	902,102	(325,433)	-36%	941,028
Net Patient Service Revenue	11,426,960	10,873,595	553,365	5%	43,761,953	43,494,381	267,572	1%	33,502,029
Other Revenue	608,102	532,096	76,006	14%	1,986,436	2,128,385	(141,949)	-7%	4,590,137
Total Operating Revenue	12,035,062	11,405,691	629,371	6%	45,748,389	45,622,765	125,623	0%	38,092,166
Operating Expenses									
Salaries And Wages	5,946,034	5,609,938	(336,096)	-6%	23,276,968	22,439,754	(837,214)	-4%	21,264,550
Employee Benefits	1,507,747	1,439,719	(68,028)	-5%	5,745,527	5,758,875	13,347	0%	5,060,375
Other Expenses	3,623,111	4,013,083	389,972	10%	16,196,516	16,052,334	(144,181)	-1%	14,931,898
Total Operating Expenses	11,076,892	11,062,740	(14,152)	0%	45,219,011	44,250,963	(968,048)	-2%	41,256,823
Operating Income (Loss)	958,170	342,951	615,219	179%	529,378	1,371,803	(842,425)	-61%	(3,164,657)
Total Non Operating Revenues (Expenses)	34,129	(483)	34,612	7166%	(35,402)	(1,936)	(33,466)	-1729%	(55,971)
Change in Net Position (Loss)	992,299	342,468	649,831	190%	493,976	1,369,867	(875,891)	-64%	(3,220,628)
Operating Margin	8.0%	3.0%	5.0%	164.8%	1.2%	3.0%	-1.85%	-61.5%	-8.3%
Total margin	8.2%	3.0%	5.2%	174.6%	1.1%	3.0%	-1.92%	-64.0%	-8.5%
Salaries & Benefits as a % of net pt svc rev	-65.2%	-64.8%	-0.4%	-0.6%	-66.3%	-64.8%	-1.49%	-2.3%	-78.6%

April 2021

Cash and Accounts Receivable

Days Cash and Accounts Receivable



April 2021

Board Financial Report

Department	Account	Description	Apr Actual	Apr Budget	Apr Variance	2021 YTD Actual	2021 YTD Budget	YTD Variance
BOARD	600010	MANAGEMENT & SUPERVISION WAGES	2,633	4,520	1,887	15,943	18,079	2,136
	601100	BENEFITS FICA	206	275	69	1,173	1,098	(75)
	601150	BENEFITS WA F&MLA	4	7	3	23	26	4
	601400	BENEFITS MEDICAL INS-UNION	4,880	4,521	(359)	19,518	18,082	(1,436)
	601600	BENEFITS RETIREMENT	-	222	222	-	886	886
	601900	BENEFITS EMPLOYEE ASSISTANCE	0	8	8	0	33	33
	602300	CONSULT MNGMT FEE	-	1,607	1,607	-	6,429	6,429
	602500	AUDIT FEES	-	3,714	3,714	-	14,855	14,855
	604200	CATERING	-	87	87	-	350	350
	604500	OFFICE SUPPLIES	-	-	-	-	-	-
	604850	COMPUTER EQUIPMENT	-	-	-	-	-	-
	606500	OTHER PURCHASED SERVICES	-	822	822	-	3,288	3,288
	609400	TRAVEL/MEETINGS/TRAINING	-	1,233	1,233	-	4,932	4,932
	BOARD Total		7,722	17,014	9,292	36,657	68,057	43 31,400

May 2021

Preview — (*as of 0:00 5/25/21)

- **\$24,450,000 in Projected HB charges**
 - Average: \$788,710/day (HB only)
 - Budget: \$766,899/day
 - 102.8% of Budget
- **\$9,192,459 in HB cash collections**
 - Average: \$296,531/day (HB only)
 - Goal: \$338,386/day
- **36.3 Days in A/R**
- **Questions**

Jefferson Healthcare

Administrative Report

May 26, 2021

Mike Glenn, CEO

COVID-19 VACCINATIONS

Doses administered

Total # doses given & recorded (all time).
As of 5/24/2021

25,071

Patients receiving 1st dose

Patients receiving at least their 1st dose.
As of 5/24/2021

12,996

Patients completing series

Patients receiving all doses in a series. As
of 5/24/2021

12,045

Wasted (all time)

% Doses unviable (40 doses). Uses vials-to-
doses factors. As of 5/24/2021

0.13%

Latest inventory (Pfizer)

Vials from physical inventory. As of
5/24/2021

368 vials

Latest inventory (Moderna)

Vials from physical inventory. As of
5/24/2021

457 vials

Latest inventory (Johnson)

Vials from physical inventory. As of
5/24/2021

91 vials

Doses on hand (all vendors)

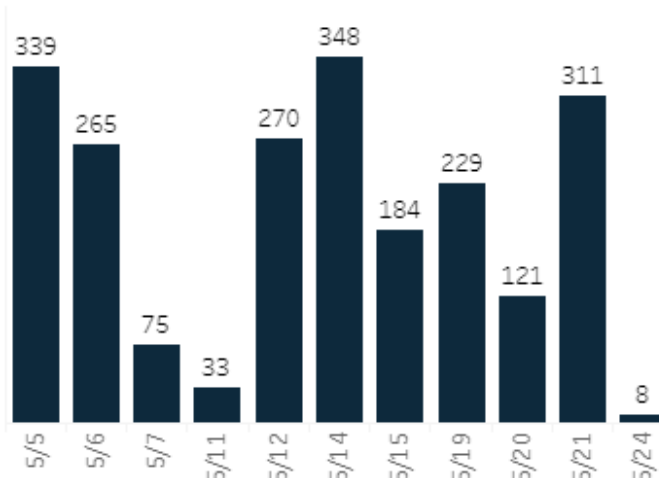
Uses vials-to-doses factors. As of
5/24/2021

7,233

ADMINISTRATIONS

Daily vaccinations (last 4 weeks)

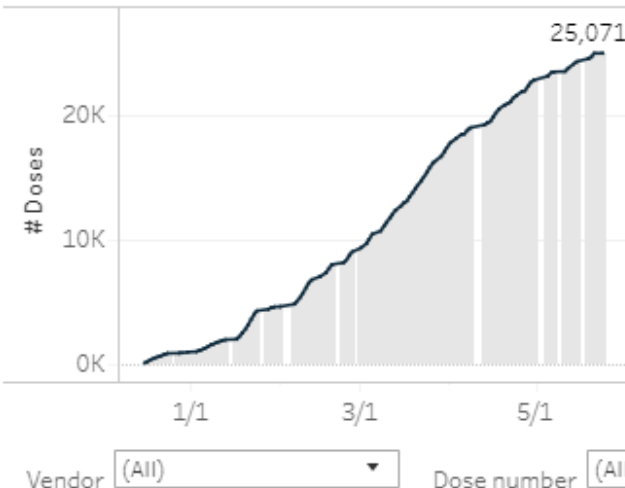
Doses administered & recorded by day. As of
5/24/2021



Doses administered

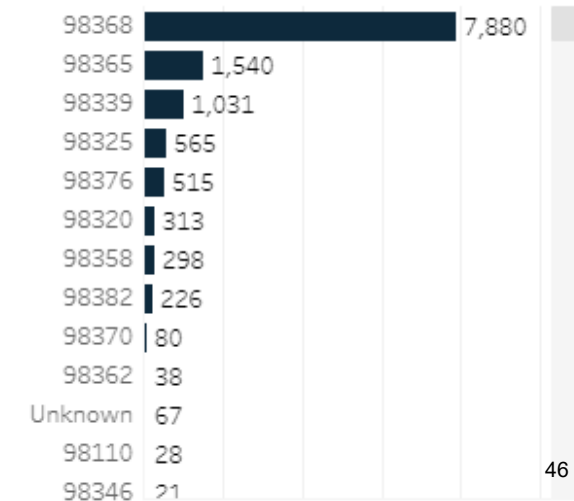
[View larger →](#)

Cumulative # doses administered up through each
date. Hover for detail. As of 5/24/2021



Vaccinations by Zip Code

Distinct patients receiving one or more
doses (all time). As of 5/24/2021

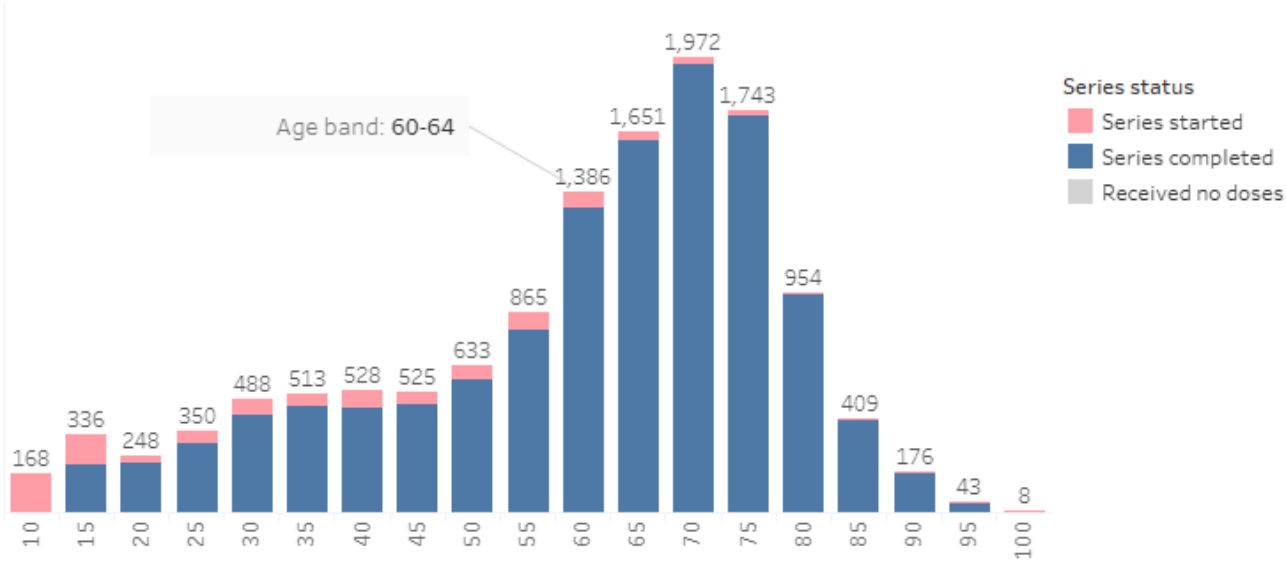


COVID-19 VACCINATIONS AND INVENTORY

INVENTORY

Patients by 5-year age bands

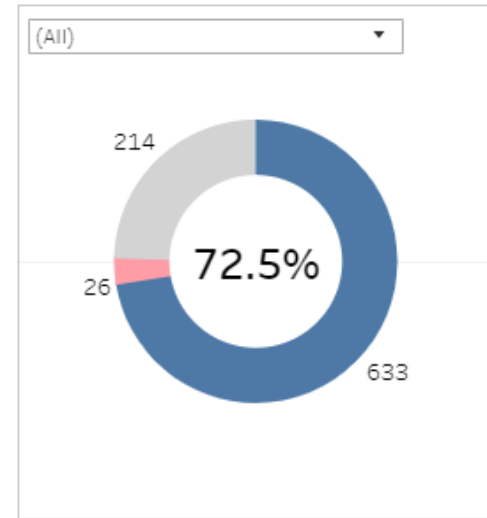
Distinct patients receiving one or more doses (all time). Bands start at the age shown and run through the next band. Hover for detail. As of 5/24/2021



JH employees

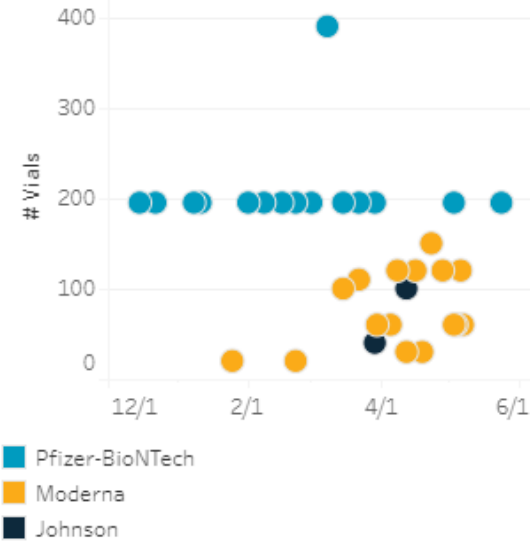
[View details →](#)

Series status for 873 current employees. KPI indicates the percent of employees who are fully vaccinated. Latest completion date 5/20/2021



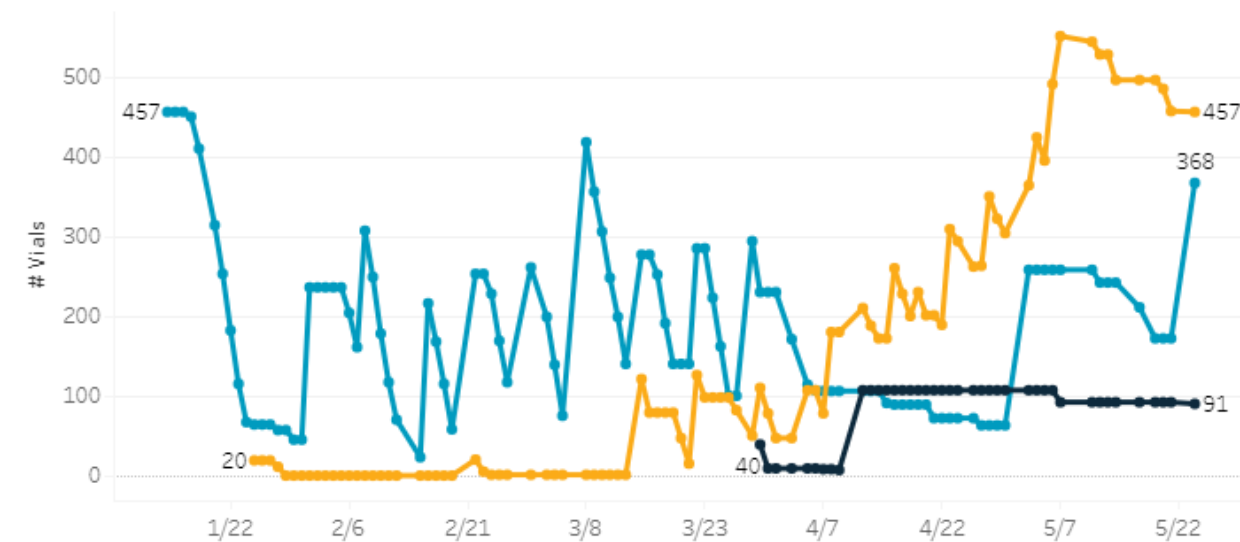
Shipments received

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



Daily inventory (since 1/14)

Vials reported in physical inventory at end of day by vendor. Color indicates vendor. Hover for detail. As of 5/24/2021





Testing Update

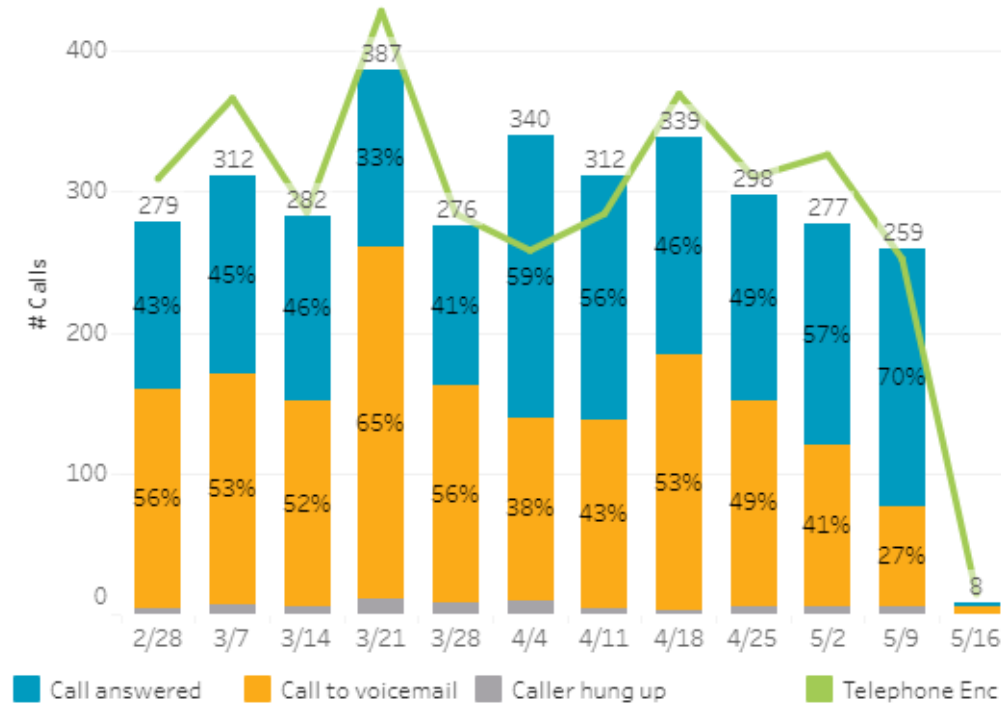
Tests	
Total Tested	20,194
Negatives	19,873
Positives	321
Percentage Positive	1.6%
Employee Tests	8 positive, 492 negatives

Jefferson Healthcare Volumes

COVID-19 Phone Line and Clinic Visit Volumes

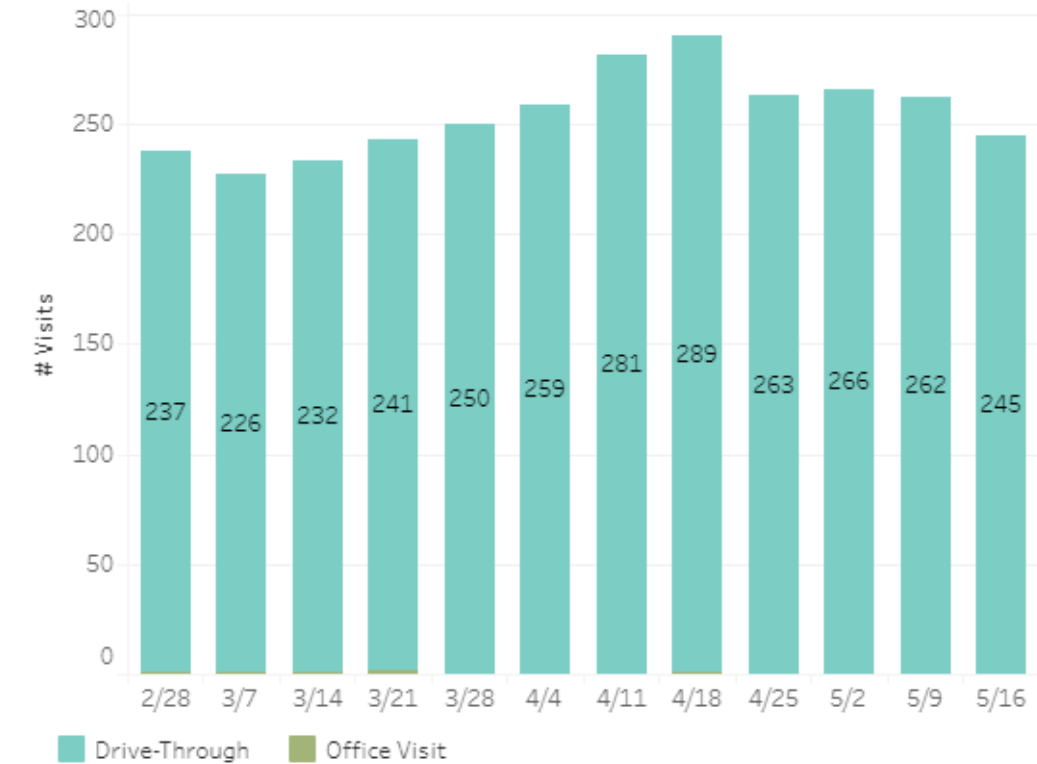
Respiratory nurse line calls and telephone encounters - by week

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



Respiratory Clinic visit volumes - by week

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



Total call volume since launch of triage line

Inbound Calls	203,981
Calls Answered	154,654
# Telephone Encounters	53,752

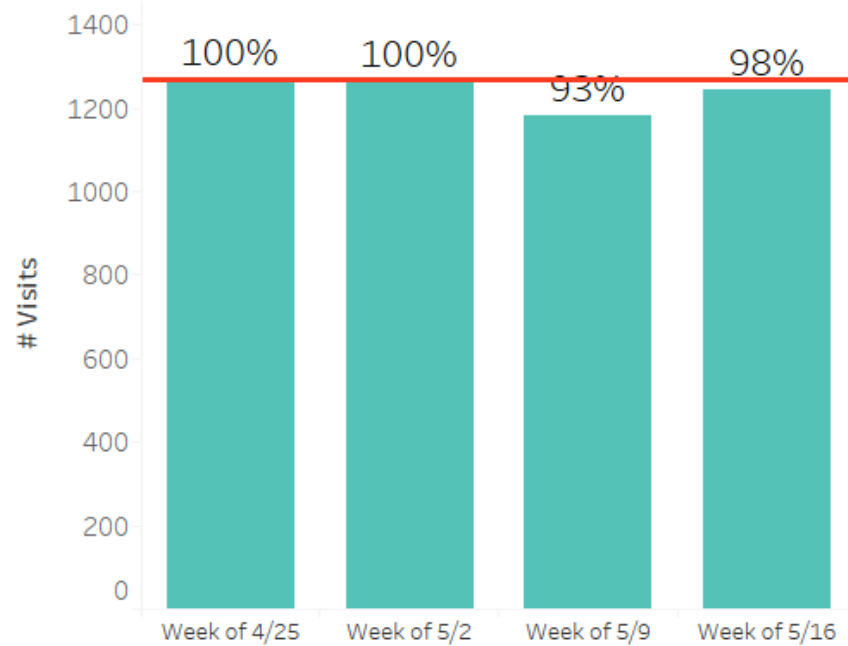
Total Respiratory Evaluation Clinic visits - all time

Drive-Through	11,640
Office Visit	4,316
Total	15,956

Jefferson Healthcare Volumes

Primary Care variance to budgeted visits

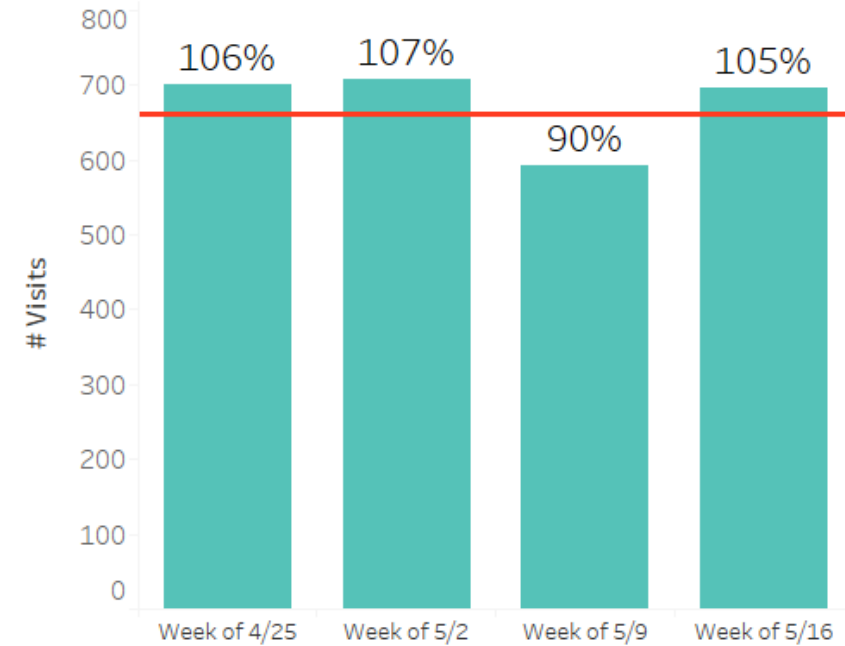
Visit volumes in the five primary care and Dental clinics. Red line indicates weekly visit budget based on 2021 annual budgets. The labels are % volume to budget for the selected clinics.



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

Specialty clinic variance to budgeted visits

Visit volumes in Medical Group's specialty clinics. Red line indicates week visit budget based on 2021 annual budgets. The labels are % volume to budget for the selected clinics.



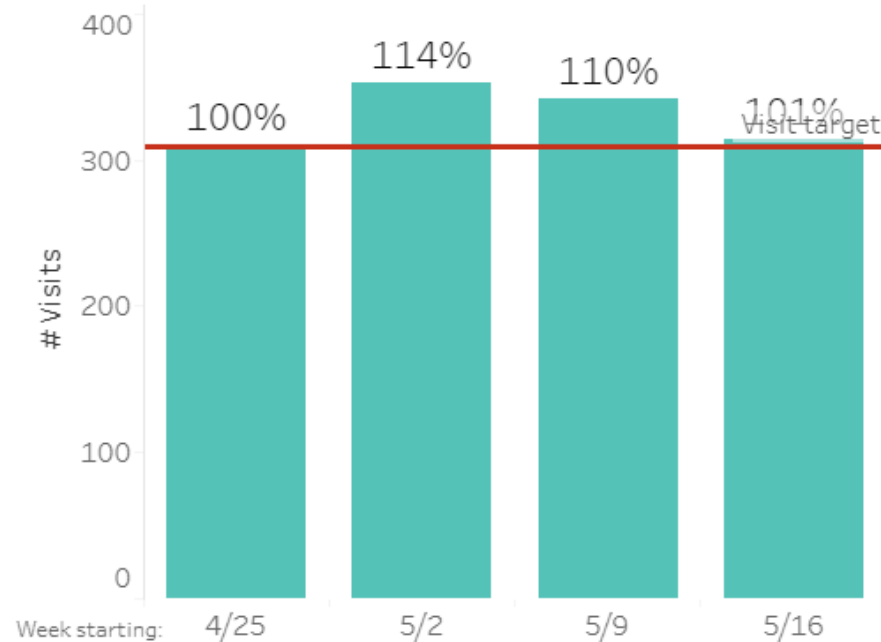
Includes visits in: JHSA clinic, Sleep Medicine, Urology, Women's Clinic, Wound Care and the Port Townsend components of Cardiology, Dermatology and Orthopedics (Port Ludlow components, if any, are not included).

Jefferson Healthcare Volumes

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.

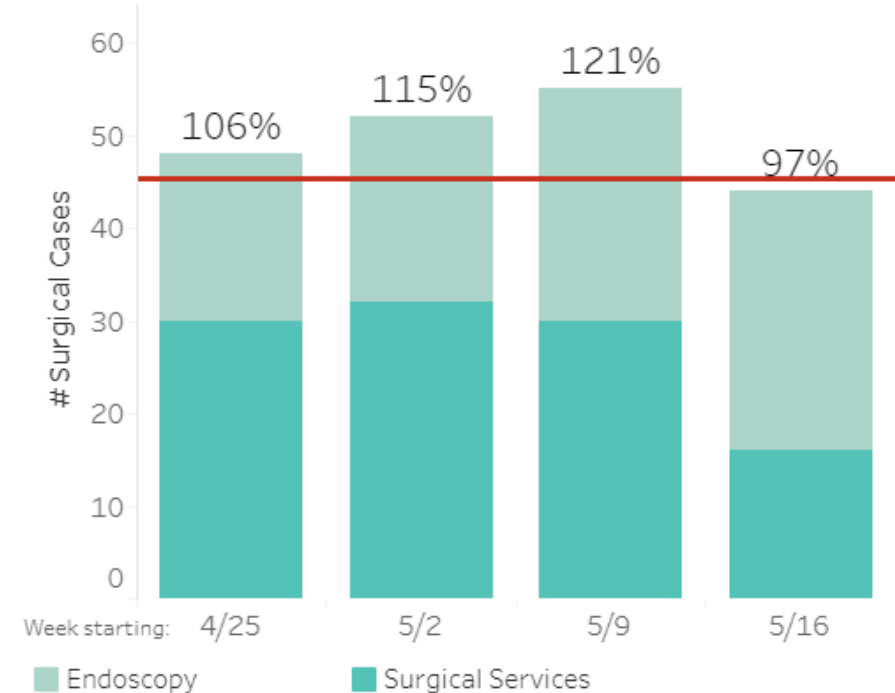
Note: This chart was previously called "Hospital Outpatient variance to target visits" and included Wound Clinic, Sleep Clinic and Sleep Study.



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.



Jefferson Healthcare Volumes

Emergency Department and Express Clinic Volume

Week in Focus

Hover over a week below to view underlying data.

9/27/2020	
Total	338
Express Clinic	128
Emergency Dept	210

Total Visits, 1/1/2020 to 5/23/2021

Select a department to bring in focus.

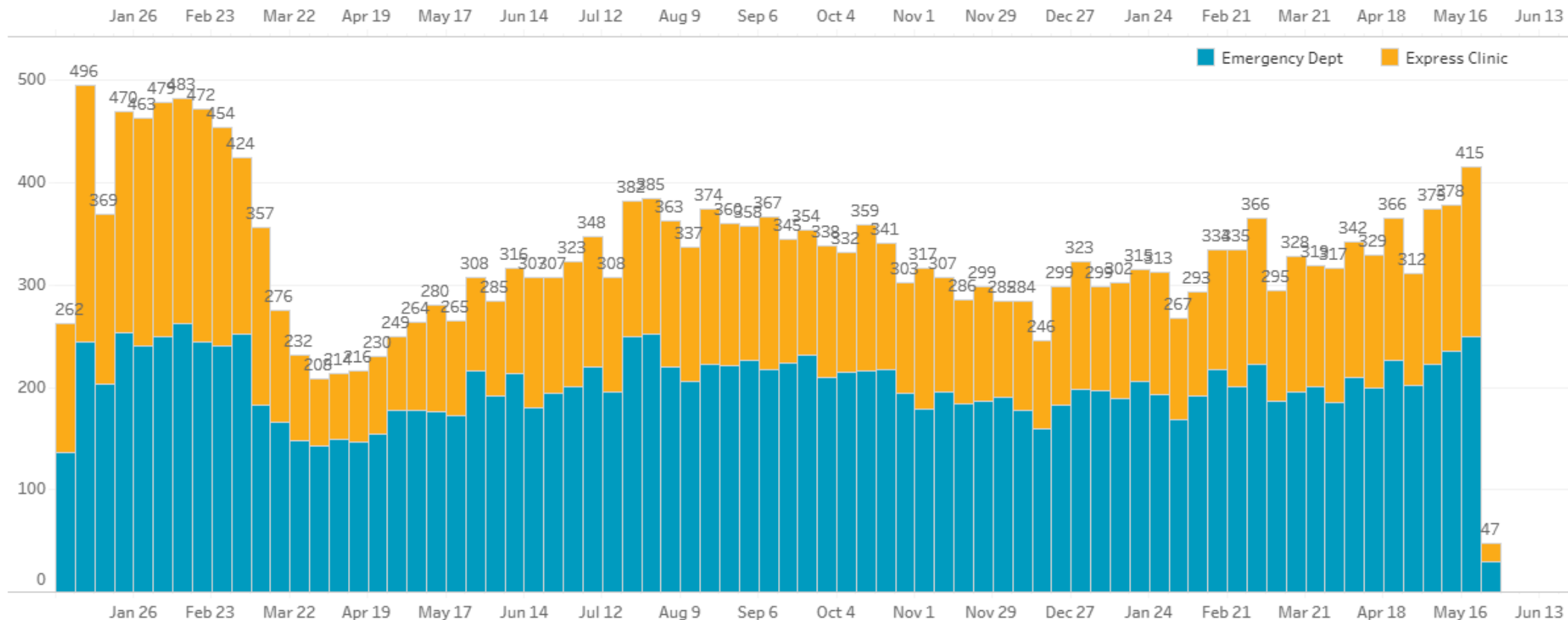
Emergency Dept

14,836

Express Clinic

9,420

Volumes by Arrival Department and Week, 2020 - 2021



Transition of COVID Services

Jefferson Healthcare/ Jefferson County Partnership

- Compensation for unreimbursed expenses
- Mass Vaccination Sites
 - Jefferson Healthcare Immunization Clinic
- Testing
 - Clinical
 - Community
- COVID Educational Services
 - Nurse Consult Line



Board of County Commissioners
1820 Jefferson Street
PO Box 1220
Port Townsend, WA 98368

Kate Dean, District 1 Heidi Eisenhour, District 2 Greg Brotherton, District 3

May 13, 2021

Mike Glenn, Chief Executive Officer
Jefferson Healthcare
834 Sheridan Street
Port Townsend, WA 98368

RE: County Grant Agreement for Unreimbursed COVID-19 Mass Vaccination Clinic Costs

Dear Mike,

Thank you and Jefferson Healthcare for your heroic and fast action to stand up mass vaccination clinics to protect the people of Jefferson County at a critical time during this COVID-19 pandemic. I am writing to confirm the County's intent to backfill Jefferson Healthcare's vaccination clinic cost reimbursement shortfalls using CARES Act funds for an amount up to \$350,000 in documented unreimbursed vaccination program costs.

Interim County Administrator Mark McCauley will be coordinating with Jennifer Wharton to prepare the grant agreement, which we intend to enter with Jefferson Healthcare after May 17, 2021.

On behalf of the people of all Jefferson County, I want to thank Jefferson Healthcare for stepping up during the COVID-19 pandemic in this critical way, to protect the health and wellbeing of the community. Because of your actions, Jefferson County has among the highest vaccination rates and lowest COVID transmission rates in Washington State. Your actions have saved lives.

Yours in partnership and gratitude,

Kate Dean, Chair
Jefferson County Board of County Commissioners
Commissioner District 3

Jefferson Healthcare COVID Vaccination Plan

- Express Clinic
- Emergency Department
- Other Clinics

Juneteenth (June 19)

A week of black history inspired music, food and education to celebrate this impactful day in our history.

Questions

