

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: 383682973#

Jefferson County Public Hospital District No.2
Board of Commissioners, Regular Session Minutes
Wednesday, January 26, 2022

Call to Order:

The meeting was called to order at 2:03 pm by Board Chair Buhler Rienstra. Present by phone and video were Commissioners Dressler, Kolff, McComas and Ready. Also, in attendance was Mike Glenn, CEO, Tyler Freeman, Chief Financial Officer, Jon French, Chief Legal Officer, Jake Davidson, Chief Ancillary & Specialty Services Officer, Jenn Wharton, Chief Ambulatory and Medical Group Officer, Brandie Manuel, Chief Quality and Patient Safety Officer, and Brittany Huntingford, Administrative Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

Approve Agenda

Commissioner McComas made a motion to approve the agenda. Commissioner Dressler seconded.

Action: Motion passed unanimously.

Board Governance Education:

- 2022-2023 Final Strategic Plan

Mike Glenn, CEO, presented the 2022-2023 Strategic Plan.

Discussion ensued.

Commissioner Dressler made a motion to approve the 2022-2023 Final Strategic Plan. Commissioner Kolff seconded.

Action: Motion passed unanimously.

Education Topic:

- Annual Cancer Report

- Corey Quigley, Nursing Supervisor, Oncology and Infusion Services
- Tina Toner, Chief Nursing Officer

Corey Quigley, Nursing Supervisor, Oncology and Infusion Services and Tina Toner, Chief Nursing Officer presented the Annual Cancer Report.

Discussion ensued.

Break:

Commissioners recessed for break at 3:08 pm.

Commissioner reconvened from break at 3:30 pm.

Patient Story:

- Commissioner Kolff shared a patient story about positive interactions with the Patient Advocates. Tina Toner, Chief Nursing Officer presented the patient story which included a presentation about our staff Difference Maker Awards for 2021.

Minutes:

- December 15, 2021 Special Session Minutes
- January 05, 2022 Special Session Minutes

Commissioner McComas made a motion to approve the December 15, 2021 Special Session Minutes and January 5, 2022 Special Session Minutes. Commissioner Dressler seconded.

Action: Motion passed unanimously.

Required Approvals: Action Requested

- November and December Warrants and Adjustments
- Resolution 2022-01 Cancelled Warrants
- Resolution 2022-02 Surplus Equipment
- Medical Staff Credentials/Appointments/Reappointments

Commissioner Dressler made a motion to approve the November and December Warrants and Adjustment, Resolution 2022-01 Cancelled Warrants, Resolution 2022-02 Surplus Equipment, Medical Staff Credentials/ Appointments/ Reappointments.

Commissioner Kolff seconded.

Action: Motion passed unanimously.

Human Resources Report:

Caitlin Harrison, CHRO, presented Resolution 2022-03 Union Contract Ratification.

Commissioner Dressler made a motion to approve Resolution 2022-03 Union Ratification. Commissioner Kolff seconded.

Action: Motion passed unanimously.

Quality Report:

Brandie Manuel, CPSO, presented the January Quality Report.

Financial Report:

Tyler Freeman, CFO, presented the January Financial Report.

Administrative Report

Mike Glenn, CEO, presented the January Administrative report.

Board Business:

- Board of Health Report
- Adopt 2022 Board Book
- Adopt 2022 Board Calendar
- Adopt Committee Assignments

Commissioner Dressler made a motion to adopt the 2022 Board Book. Commissioner Kolff seconded.

Action: Motion passed unanimously.

Commissioner Dressler made a motion to adopt the 2022 Board Calendar.

Commissioner McComas seconded.

Action: Motion passed unanimously.

Commissioner Dressler made a motion to adopt the 2022 Committee Assignments.

Commissioner McComas seconded.

Action: Motion passed unanimously.

Commissioner Kolff shared a Board of Health report which included an update on Greg Brotherton, assuming the role of Chair of Board of Health and Commissioner Kolff assuming the role of Vice Chair, Omicron, CHIP proposal and a pause on the discussion of the climate crisis.

Meeting Evaluation:

Commissioners evaluated the meeting.

Conclude:

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

Action: Motion passed unanimously.

Meeting concluded at 5:25 pm.

Approved by the Commission:

Chair of Commission: Jill Buhler Rienstra

Secretary of Commission: Marie Dressler

Jefferson Healthcare Strategic Plan 2022-2023



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

- 1. Guide our community through the COVID-19 pandemic.**
- 2. Deliver the highest quality care.**
- 3. Be a great place to work.**
- 4. Provide services our community needs most.**
- 5. Improve the patient experience.**
- 6. Remain financially independent.**

Goal #1: Guide our community through the COVID-19 pandemic.

Strategies:

1. Keep our employees safe and well.
2. Provide necessary COVID-19 preventive, diagnostic and treatment services.
3. Maintain accessibility of inpatient and outpatient services.
4. Collaborate with public health and other partners to provide and promote pandemic-ending interventions like vaccinations, community masking and social distancing.

Goal #1: Guide our community through the COVID-19 pandemic

Strategies	Initiatives
Keep our employees safe and well	<ol style="list-style-type: none">1. Promote effective infection prevention and control measures.<ol style="list-style-type: none">a) Ensure adequate supply and use of personal protective equipment.b) Maintain a safe work environment.c) Provide effective contact tracing for employees.
Provide necessary COVID-19 preventive, diagnostic and treatment services	<ol style="list-style-type: none">1. Prevent and treat COVID-19 infections.<ol style="list-style-type: none">a) Promote vaccinations.b) Provide therapeutic treatments.2. Support COVID-19 testing .
Maintain accessibility of inpatient and outpatient services	<ol style="list-style-type: none">1. Promote prevention and pre-hospital care.2. Expand the use of telemedicine.3. Design a system that adjusts based on community prevalence of COVID-19.
Collaborate with public health and other partners to provide and promote pandemic-ending interventions (such as vaccines, masking, and distancing)	<ol style="list-style-type: none">1. Maintain active engagement with Jefferson Public Health.2. Collaborate with DEM to continue to provide services for our community.

Goal #2: Deliver the safest, highest quality care.

Strategies:

1. Deliver care that is guided by the best evidence.
2. Enhance our systematic approach to avoid medical errors.
3. Design the most effective performance improvement and quality management system.
4. Continue transition to value-based care.

Goal #2: Deliver the highest quality care.

Strategies	Initiatives
Deliver care that is guided by the best evidence	<ol style="list-style-type: none">1. Assess and address health equity.2. Enhance the use of infrastructure, technology, data, and analytics for improving patient outcomes.3. Promote excellent outcomes through the delivery of evidence-based care.
Design the most effective performance improvement and quality management system	<ol style="list-style-type: none">1. Ensure the availability and deployment of process improvement tools.
Enhance our systematic approach to avoid medical errors.	<ol style="list-style-type: none">1. Implement best practices in event reporting, investigation, analysis and mitigation.2. Promote a Learning Culture by sharing 'lessons learned' from system defects.
Continue transition to value-based care	<ol style="list-style-type: none">1. Explore the addition of value-based contracts.2. Top performance in MIPS Reporting.

Goal #3: Be a great place to work.

Strategies:

1. Recruit, retain and implement innovative solutions to address current staffing shortages.
2. Reconnect to purpose and promote wellness of our team.
3. Support and invest in our leaders.
4. Promote thriving and rewarding clinician practices.
5. Advance the work of transforming our culture.

Goal #3: Be a great place to work.

Strategies	Initiatives
Recruit, retain and implement innovative solutions to address current staffing shortages	<ol style="list-style-type: none">1. Use data to track recruiting and workforce shortages.2. Offer onsite training programs for multiple positions.3. Assess and track diversity in hiring and retention.4. Ensure total compensation is market based.
Reconnect to purpose and promote wellness of our team	<ol style="list-style-type: none">1. Develop and make available work life wellness tool kit and other resources.2. Create and complete an assessment tool to identify system healthcare fatigue at Jefferson Healthcare.
Support and invest in our leaders	<ol style="list-style-type: none">1. Create a leader onboarding curriculum.2. Create and require new leader orientation and training.3. Partner with a vendor (Huron) for ongoing leadership development.
Promote thriving and rewarding clinician practices	<ol style="list-style-type: none">1. Identify and implement practice enhancement tools.2. Invest in medical staff leadership resources.
Advance the work of transforming our culture	<ol style="list-style-type: none">1. Finalize agreement with Huron and fully implement the tools and resources aimed at transforming our organizational culture.2. Identify and introduce organizational development (OD) resources to Jefferson Healthcare's Leadership Team.

Goal #4: Provide services our community needs most.

Strategies:

1. Grow existing and identify new needed services.
2. Finalize the hospital replacement and campus modernization plan.
3. Promote population health to improve community wellness.

Goal #4 Provide services our community needs most.

Strategies	Initiatives
Grow existing and identify new needed services	<ol style="list-style-type: none">1. Enhance out business analytic platform.2. Implement a neurology clinic and geriatric consultative service.3. Expand cardiology services to include inpatient care support.4. Increase orthopedic surgery market share.
Finalize the hospital replacement and campus modernization plan	<ol style="list-style-type: none">1. Select a design/build team.2. Identify the scope, scale and estimated cost of necessary building replacement projects.3. Work with Jefferson Healthcare governance, medical staff leadership, community leaders and stakeholders, and the Public at Large to determine the most appropriate building replacement solution and cost viable method to pay for it.
Promote population health and the Community Health Improvement Plan (CHIP) to improve community wellness	<ol style="list-style-type: none">1. Maintain and build new relationships with organizations that promote the community's health.2. Recognize the opportunity of anchor institutions and the impact they have on their community.

Goal #5: Improve the patient experience.

Strategies:

1. Remove the friction between our patients and their care.
2. Guide patients through every encounter.
3. Advance the use of data and tools to monitor and improve patient engagement.
4. Facilitate kindness and compassion through training and service standards.

Goal #5 Improve the patient experience.

Strategies	Initiatives
Remove the friction between our patients and their care.	<ol style="list-style-type: none">1. Implement cross location scheduling to increase access across different service lines.2. Enhance use of technology and analytics to connect patients with health services.
Guide patients through every encounter	<ol style="list-style-type: none">1. Implement closed loop referrals and care navigation to support patients with transitions of care.
Advance the use of data and tools to monitor and improve patient engagement	<ol style="list-style-type: none">1. Leverage the use of patient engagement data to:<ol style="list-style-type: none">a) Connect staff at every level with patient feedback.b) Create improvement plans.c) Adjust existing plans as needed.
Facilitate kindness and compassion through training and service standards	<ol style="list-style-type: none">1. Personalize the patient or customer experience with every encounter through service standards.2. Improve teamwork across departments.

Goal #6: Remain financially independent.

Strategies:

1. Implement a COVID-19 financial and operational recovery plan.
2. Improve the value of services by increasing efficiency and reducing waste.
3. Maximize revenue capture rate by improving internal processes and working more efficiently with insurers.
4. Finalize a financial plan to support the hospital replacement and campus modernization plan.
5. Perform in value-based payment models.

Goal #6 Remain financially independent.

Strategies	Initiatives
Implement a COVID-19 financial and operational recovery plan.	<ol style="list-style-type: none">1. Revise financial reporting to capture relevant COVID-19 financial recovery indicators.2. Monitor cash reserves to ensure days cash on hand stays above 100 days.
Improve the value of services by increasing efficiency and reducing waste.	<ol style="list-style-type: none">1. Automate and reduce manual steps/additional touches where unnecessary.2. Review tools (EPIC, Infor, Kronos, etc.) to ensure we are realizing their fullest potential.3. Lean on supply chain tools and partners to ensure adequate supplies while minimizing waste and off contract spending.
Maximize revenue capture rate by improving internal processes and working more efficiently with insurers.	<ol style="list-style-type: none">1. Train throughout the full revenue cycle (starting with Registration).2. Engage third parties to collect data and identify areas of opportunity.3. Create joint operating committees and meet with payors on a regular basis.
Finalize a financial plan to support the hospital replacement and campus modernization plan.	<ol style="list-style-type: none">1. Support service line analysis efforts.2. Ensure cost report considerations are involved in the decision-making process.
Perform in value-based payment models.	<ol style="list-style-type: none">1. Explore, and, if appropriate recommend, participation in at least one value-based payment model.

Questions

JHC Board of Commissioners Report

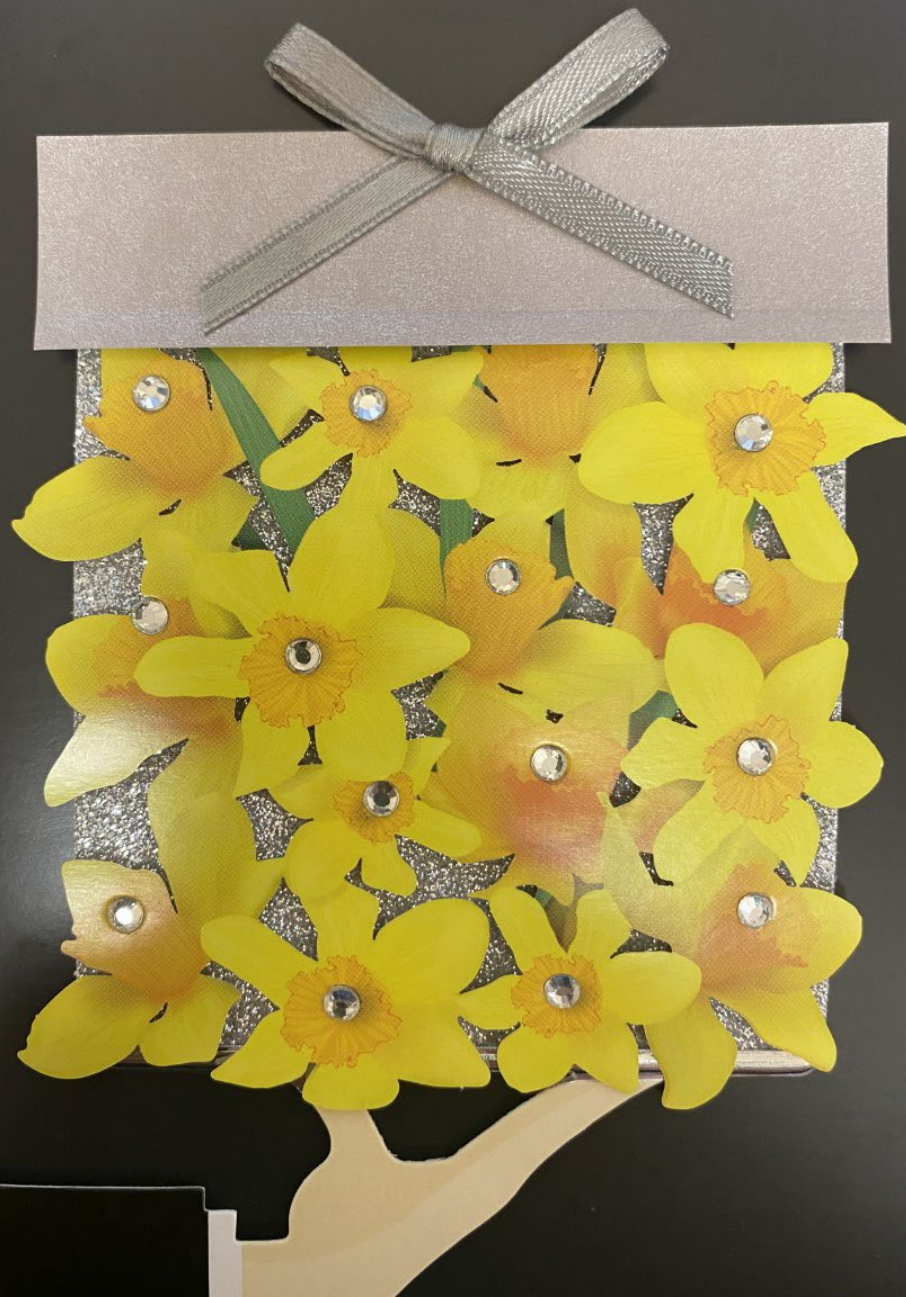
January 26, 2022
Oncology Clinic &
Infusion Center



Exceeding Expectations

In their own words- Gratitude and Appreciation from the patient perspective.





When we walked through the dark door that is cancer, we didn't know what to expect. What we found were caring nurses, fun loving receptionists, and thoughtful doctors. Thank you for being a wonderful part of our lives. You will all be missed.

~Letter received from JH Oncology Patient and Spouse

It's with a heavy heart that I am sharing with you how my husband fought bravely to the end! Although we would've liked to be back in Port Townsend, it was comforting to have our children and grandchildren by his side, holding his hand to bid him farewell.

Please share with your staff my grateful appreciation to them. They did everything to support him throughout the treatment at JHC. We could not have found a better group of wonderful and caring people!

Thank you SO MUCH too, for your help and kindness through this difficult journey.

~Letter received from JH Oncology Patient's Spouse

Thank you for your care during these last two years of my treatment. Although I have yet to see your smiles, I felt them during each appointment. You are an extraordinary team of people and we all benefit from your kindness and expertise.

~Letter from JH Oncology Patient

I'm writing to let you know how impressed I've been with the professionalism and terrific care I've been receiving at your infusion center. I've been many times now (every 6 months for my meds) and every time the nurses have been so incredibly caring and good at their jobs. I used to go to Harborview and was not happy when Regence stopped that. My doctor at Swedish set me up with a local Sequim neurologist and now I come here. Boy! Am I now happy about this change.

These days I consider going for my infusion like a visit on a cruise ship or something. Great view of the water, lunch served (veggie marinara today – yummy), unending Lorna Doone cookies and flavored water – and a minibreak from my house.

Today is no exception. Julia got the meds set in my vein superfast with no pain. The procedure started on time with no glitches. Jasmine brought my lunch, but with no dessert. When I said that she should tell the cafeteria to add desserts to the meal and I said I love hospital chocolate pudding, Jasmine found one for me!! Double yummy.

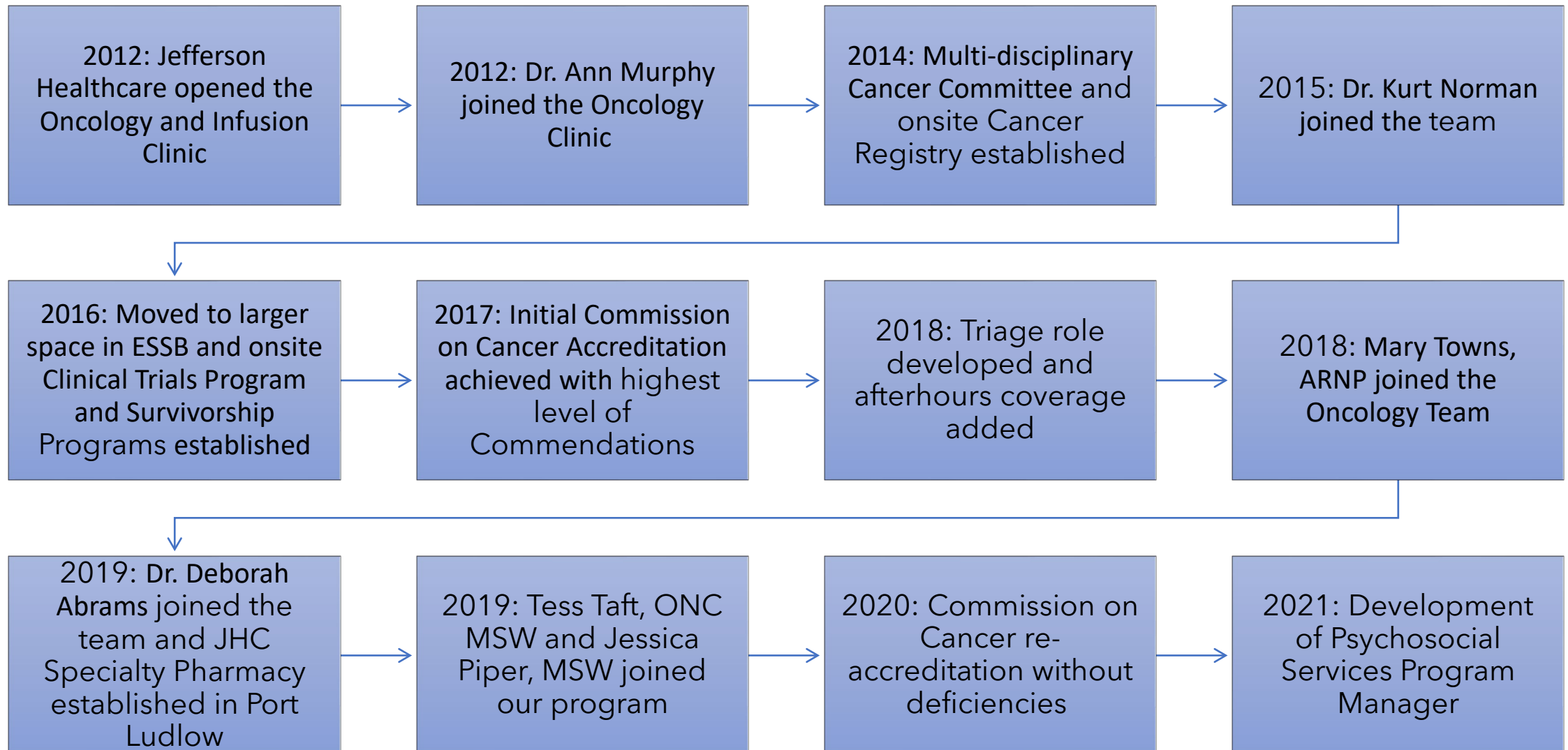
Also, the unit here seems like a very cohesive group with happy employees working together to make the patients' experience as pleasant as possible. Kudos to the charge nurse who sets the tone for everyone.

If Sequim starts an infusion center, I will beg my husband to do the drive to Jefferson because you all here are that good.

~Letter from JH Infusion Patient



History of JHC Oncology and Infusion



Our Provider Team



Dr. Ann E. Murphy



Dr. Kurt Norman



Dr. Deborah Abrams



Mary Towns, ANRP

Provider Shoutout



- Dr. Murphy is amazing!
- Dr. Murphy is the best!!! So grateful for her kind, brilliant, compassionate care!!!
- Dr. Murphy has been my doc since having my cancer about 5 years ago. I love seeing her every year. She has been so nice to me.
- Awesome in all respects. I've recommended Dr. Norman to friends.
- Dr. Norman is one of the best doctors I know. Very patient and compassionate.
- Dr. Norman is an exceptional physician in every regard.
- I was very impressed with the gentleness of Dr. Abrams; I wish all doctors were like her.
- Deborah has gone above and beyond to help me understand the preventative care needed and create an ongoing care plan w/ me that meets my needs.
- Dr. Abrams is very easy to talk to and understand.

Nursing Staff



Corey Quigley, OCN, RN
Nursing Manager



Kay C Hobbs, AOCNS, RN



Jennifer Moyer, RN



Julia Smith, RN



Rick Fourmont, OCN, RN



Leitha Patton, OCN, RN



J G OCN, RN



Mary Ihlen, OCN, RN



Ayla Skipper, OCN, RN



Lynn Fosket, OCN, RN

Difference Maker!

JG is a stellar patient advocate. She goes beyond providing care for patients while they are in our clinic by thinking about what would best serve their needs once they've left the clinic, too. A patient was referred to our clinic for IV antibiotics; upon assessment, this patient had extremely poor venous access. JG collaborated with an ED provider for U/S guided PIV placement. When that line failed, she collaborated with pharmacy to change method of administration to IM. JG is one of those caregivers who walks the walk and talks the talk; she understands it takes a village to provide best patient care, and actively collaborates with her JH village to ensure best patient outcomes.



Caring Response to Covid

- Oncology/Infusion Staff with 100% participation in Covid vaccination prior to Governor Inslee's mandate.
- Lead Oncology RN, Ayla Skipper, developed medication administration policy and provided staff education for every Covid treatment offered at JH
- Infusion RN Team provided staffing to the Regen-Cov Clinic for Covid-positive patients at JH.



Cancer Care Beyond the Clinical



Oncology Psychosocial Services

Jessica Piper, MSW
Psychosocial Services Coordinator



Tess Taft, LICSW
Oncology Counselor





Psychosocial Services Program Development

- Launched E-Health Literacy Program to help patients navigate MyChart and virtual appointments
- Organized New Survivorship Support Group
 - *Added to current offerings of Breast Cancer, Bereavement, and Caregiver Support Groups
- Our two-person Social Work Team provided nearly 1000 patient visits in 2021.



JEFFERSON HEALTHCARE INTEGRATIVE
ONCOLOGY PROGRAM

AROMATHERAPY

TIEO (Therapeutic Inhaled Essential Oils) is a complementary therapy for patients experiencing chemo-induced nausea and vomiting and anxiety.

TWO SCENTS TO CHOOSE FROM



Queen(AGE)

Contains a blend of 100% pure and natural essential oils and is used in hospitals to calm patients that is associated with motion sickness, surgery and chemotherapy.

Peppermint | Ginger | Lavender | Spearmint



STILL

Contains a blend of 100% pure and natural essential oils to help alleviate stress and soothe the body and mind — safely, quickly and effectively.

Ylang Ylang | Bergamot | Lavender | Sweet Orange



- LASTS UP TO 3 WEEKS
- HANDS-FREE, DRIP-FREE
- 100% PURE ESSENTIAL OIL BLEND

AVAILABLE IN THE CLINIC TODAY
ASK YOUR INFUSION NURSE FOR MORE
INFORMATION

Complementary therapies are meant to be used in conjunction with conventional medicine.

MADE POSSIBLE BY GRANT FROM THE JEFFERSON HEALTHCARE
FOUNDATION

- Jessica Piper, Oncology MSW, was chosen to attend highly selective Integrative Oncology Program with the NIH and University of Michigan Medical School. Jefferson Healthcare is the first ever critical access hospital to be selected for this program!
- Oncology MSW studying impacts of treatment on female oncology patients' sexual health and developing supportive interventions. MSW to present findings to the JHC Cancer Conference, the multidisciplinary oncology teams with NIH, and cancer centers nationwide.
- Oncology MSW collaborated with Mary Ihlen, RN, OCN, to secure grant funding allowing us to trial offering Aromatherapy for alternative management of chemotherapy induced nausea and vomiting.

Psychosocial Program Development Plans for 2022

- Hired additional Oncology Social Worker to expand access to patient and family support services; Nerissa Whitlock, MSW, will join our team in February.
- Expanding into art and music therapy offerings to patients
- Seeking extramural funding from NIH and American Cancer Society for Integrative Oncology program growth and development and training opportunities for staff.
- Focusing on Health Equity in oncology care and addressing Barriers to Care, relating to transportation.
 - Outreaching to underserved populations in the Jefferson County Community to provide access to cancer screenings.
 - Working with community partners to help address transportation needs of our JH oncology patients.
- Bolstering support and education for caregivers through evidence-based interventions.

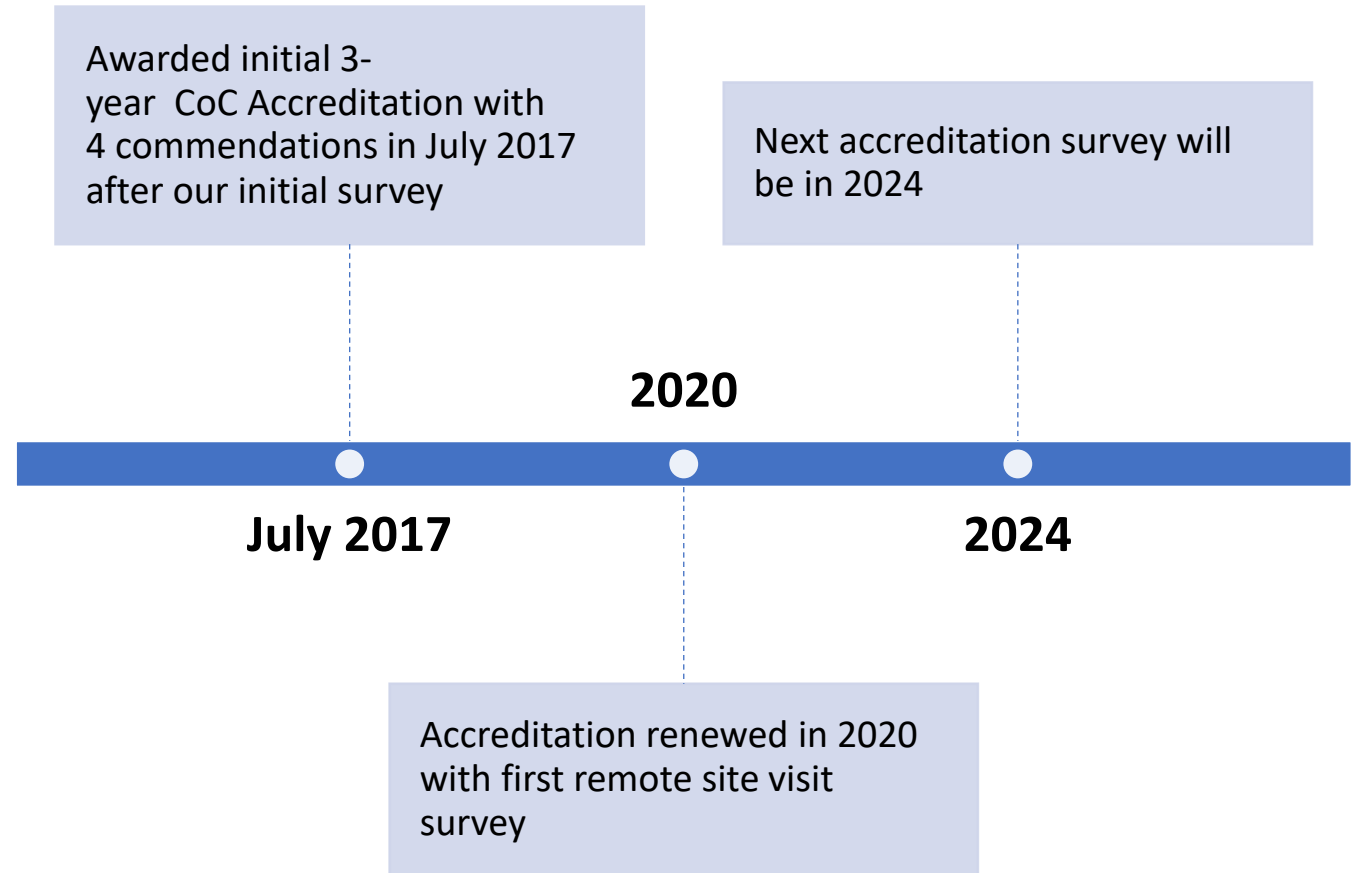


I am the
Difference
#jeffersonhealthcare

Difference Maker!

Jessica has been working in conjunction with the Hospice team since November of 2020 to provide supportive care and services for this patient. He initially presented with a complex social situation, lack of support systems and many different challenges related to his end-of-life needs. With all of Jessica's care and coordination, we will finally be able to make our patient feel safe, comfortable, and supported during the last leg of his life journey. Jessica has worked diligently to assist this patient with housing, caregiving, resource coordination, emotional support, building a trusting relationship and the overall management of his care. I am so impressed by Jessica's advocacy for our patient. Healthcare advocates like her, make me so proud to work for Jefferson Healthcare, she is walking the walk, each day. Sometimes the desire to help all those in need, with limited resources and in a rural community, can seem overwhelming. When we can help even one person at a time, to the extent that she has helped our patient, it confirms our commitment to providing award winning care at home.

American College of Surgeons Commission on Cancer Accreditation





JH Cancer Committee 2021 Program Highlights

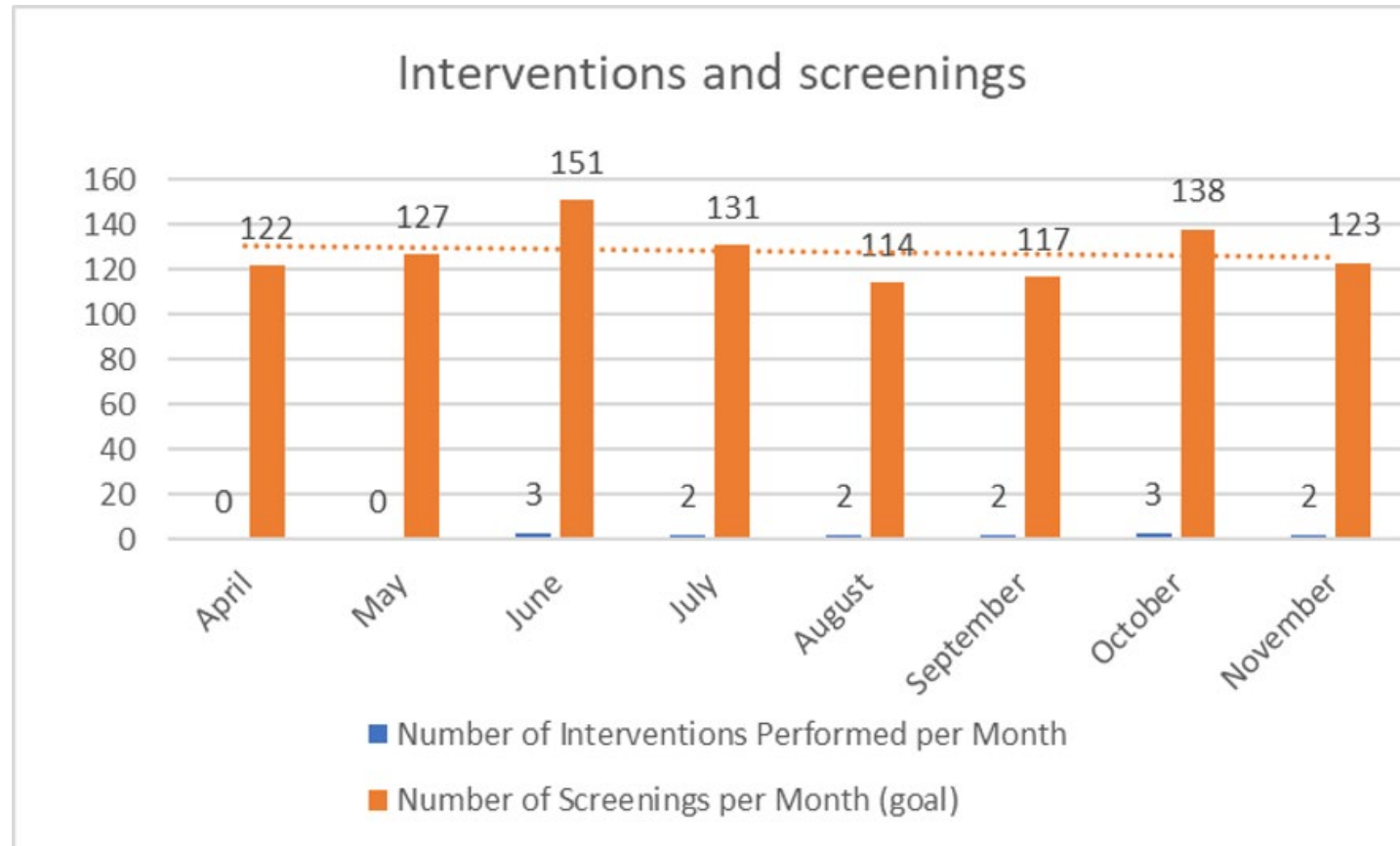
Cancer Committee Chair
Dr. Ann E Murphy



Quality Initiative and Community Outreach Project



PDSA to Improve Cervical Cancer Screening Rates



Multidisciplinary Cancer Conference



- Occurs twice monthly
- Multidisciplinary Attendance and Participation
- Fully remote via Teams during COVID-19. A benefit of remote attendance has allowed for increased Primary Care Provider Participation.
- 191 Total Cases Presented in 2021
 - Q1 44
 - Q2 51
 - Q3 58
 - Q4 38
- Cancer Conference Coordinator: Brittany Huntingford



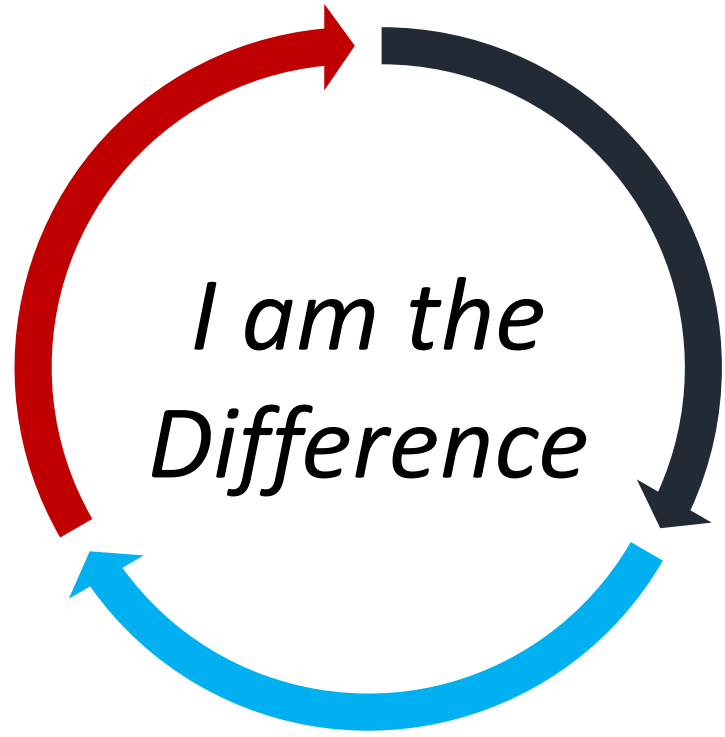
2021 Oncology & Infusion Visit Numbers

- 260 Oncology Clinic New Patient Consults
- 5045 Oncology Clinic Provider Visits
- 82 Radiation Oncology Provider Visits
- 9088 Infusion Center Visits

Looking Ahead to 2022

- **Oncology Clinic**
 - Focus on workflow standardization and efficiency
 - Expanding clinic into space currently occupied by Wound Care Services to meet patient volume needs
- **Radiation Oncology**
 - Beginning stages of Feasibility Study to assess offering Radiation Oncology Services on JH campus





2021 Difference Makers

THE MISSION OF JEFFERSON HEALTHCARE

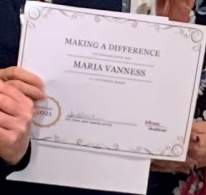
To hold the trust and the health
of our community through passionate
care, innovation and excellence.

ICU: Rooms 301 - 306

Upper Floor

COVER SPILL WITH CONE AND CALL

POP-UP
SAFETY CODE



January: Karah Ealy, RN
February: Maria VanNess, RN

Jefferson
Healthcare
jeffersonhealthcare.org

March: Gena McKinnon, RN



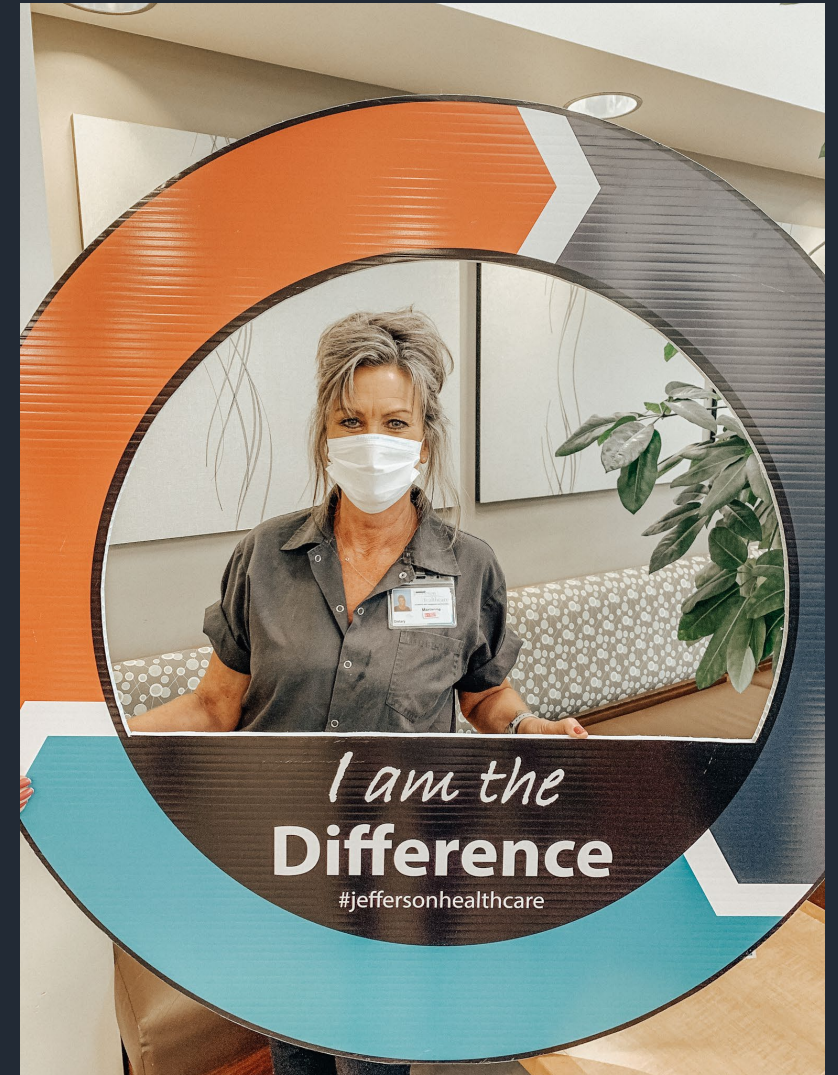
April: Jessica Piper, Psychosocial Services Manager

May: Starla Crowell, RN



June: Robin Bridge, RN

July: Amy Tichgelaar, House Supervisor



August: Marianne Muck,
Dietary Aide

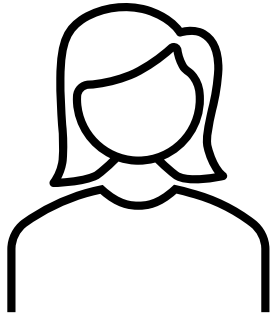


September: Laura Guimaraes, CNA

October: Michele Carson, Health Navigator



*November: Requested
not to be shared in a
public meeting.*



December: Kristy Davis, RN



Jefferson Healthcare

Patient Safety and Quality Report

Presented by Brandie Manuel, Chief Patient Safety and Quality Officer

January 26, 2022



Agenda



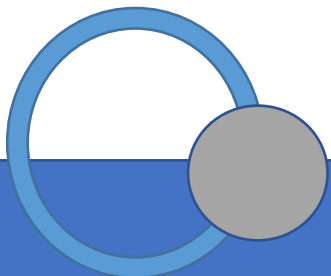
Patient Safety & Quality Overview

Goal: Provide the Highest Quality, Safest care in the Region

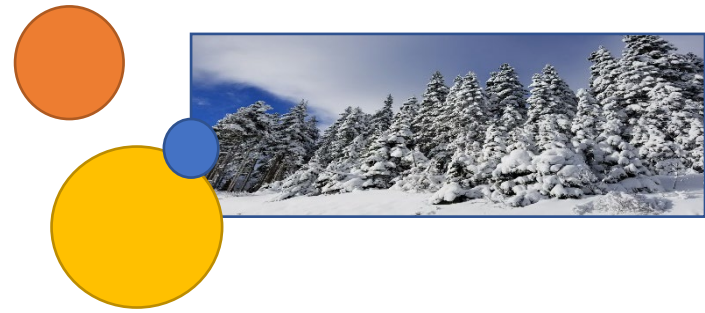
Strategies:

- Maintain zero preventable patient harm events
- Achieve excellent clinical outcomes
- Align Care with patient goals
- Enhance Jefferson Healthcare's Culture of Safety

- Patient Safety (December 2021):
 - Zero preventable harm cases reported
- Excellent Clinical Outcomes (Q3 2021):
 - Q3 IP Composite Stroke: 95%
 - Q3 Early Elective Delivery: 0%
 - Q3 Acute Myocardial Infarction/Chest Pain: 100%
 - Q3 Follow up interval for normal colonoscopy: 100%
- Opportunity* Patient Flow (Q3 2021):
 - Patient Throughput (ED)
 - Arrival to departure: 165 min (goal <130 min)
 - Arrival to departure (d/c home): 148 min (goal <120 min)
 - Time to Departure (psychiatric): 200 min
 - Time to ED Departure (Transfers): 322 min
- Patient Experience (Q3 2021 – except CGCAHPS):
 - CGCAHPS: 83.4%
 - Emergency: 73.1%
 - HCAHPS: 75%
 - HHCAHPS: 82.1%
 - OASCAHPS: 89.7%
 - OP Rehab: 75.4%
 - OP Testing: 82.4%



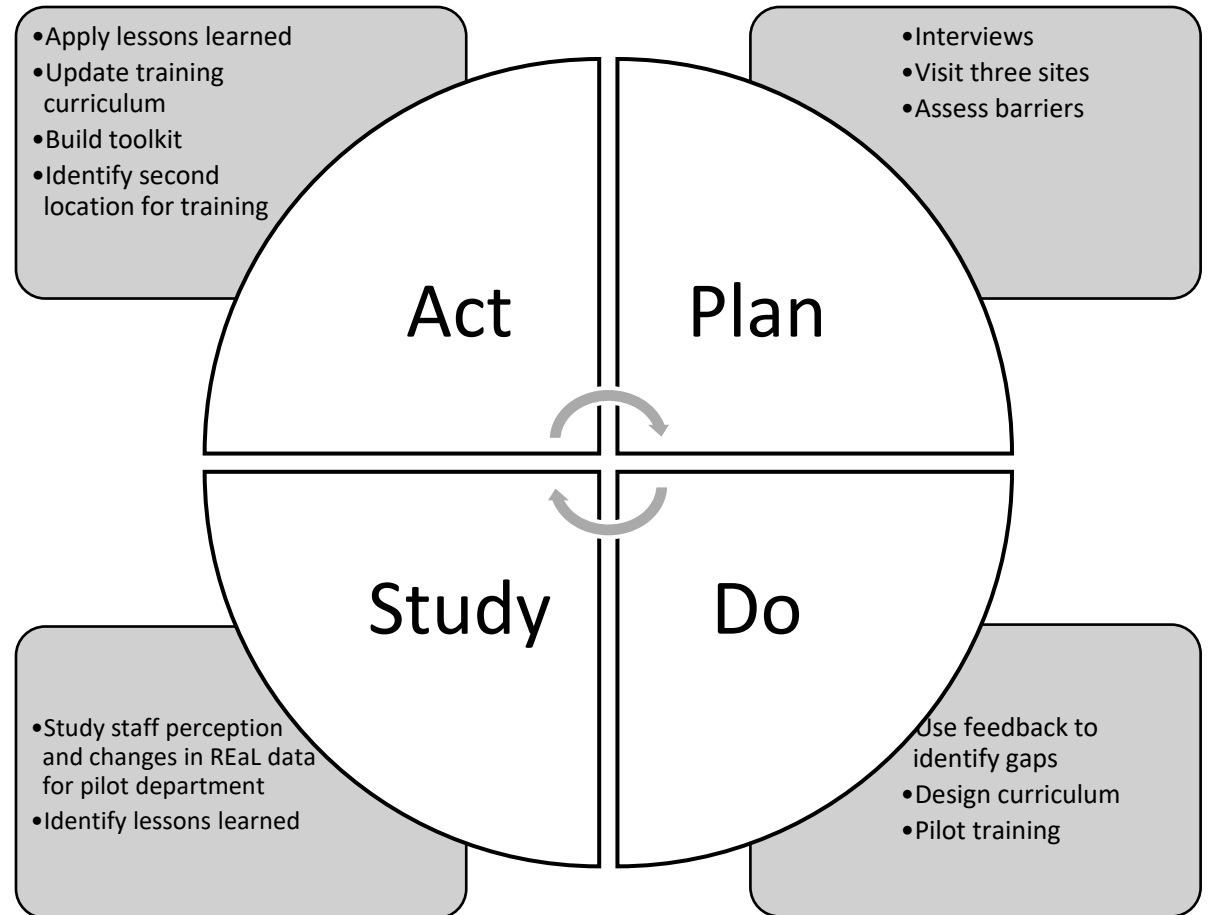
Quality Highlight: REaL Training



What we've learned (so far):

- Inconsistent process/emphasis on asking for race, ethnicity, and language data
- Belief that once a patient is 'in the system', the information does not need to be re-assessed
- Staff missing the connection to the 'why'
- Lack of standard onboarding and training materials in all departments
- Staff Concerns: offending patients, assuming patients don't want to answer, don't want to put anyone 'on the spot'
- **Lesson Learned:** Education and Training for all employees is critical to advancing our work in equitable care

NEXT STEPS: Continue Epic training, focus on employee education, planning for Black History Month, selection of clinical quality equity measures



Patient Safety & Quality Overview

Quality and Safety		Goals	Strategy	Initiatives	Targets
		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%

2022 Projects and Focus Areas



Patient Safety & Quality:

- OB Quality Committee Kickoff
- Surgical Quality/Hip and Knee Replacement Committee
- Patient Safety & Quality Leadership Council
- Health Equity Clinical Focus Areas
- 2021 MIPS Reporting
- Culture of Safety

Infection Control and Prevention:

- COVID-19 Management
- Hand Hygiene
- Prevention of Healthcare-Acquired Infections
- Keeping our employees well/ PPE
- Ongoing program evaluation and reporting

Technology:

- Provider Technology Team
- CyberSecurity/Information Security
- Arch Collaborative/Klas Survey
- Enhanced use of Technology for Patient Care and Operations
- Data and Analytics Engagement

Accreditation:

- DOH Survey Corrective Action Plan
- DNV/ISO Survey
- Infection Control and Prevention
- Hip and Knee Certification Application
- 2022 Internal Audit planning

Service Excellence:

- Real Time Surveys – Q1 2022
- Coordination of Care
- Leverage MyChart/Epic to better connect patients with their care
- Advanced tools for patient engagement analysis and service recovery

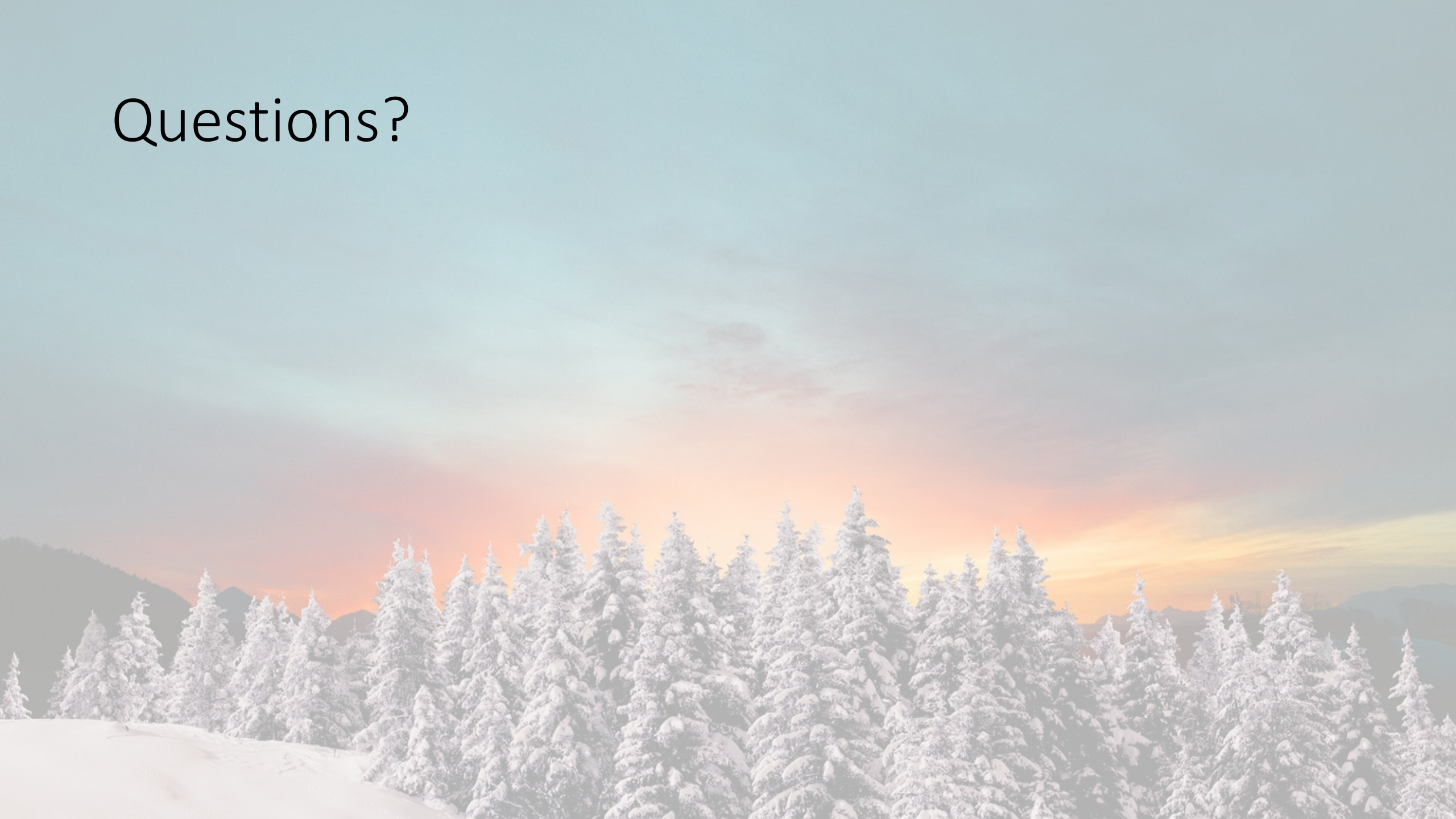
Patient Perspective: In the Words of Our Patients...

I have spent so much time at your hospital: in **admissions**, in the **lab**, in **radiology**, in **physical therapy**, and in **cognitive therapy**. Every single person I have come across has truly been wonderful. It is just remarkable that all of your employees, visiting staff and volunteers I've encountered have been so skilled, professional, kind, helpful, and compassionate. I don't know how you have assembled so many beautiful and caring people in one organization.

There were days I did not want to continue living. My life was lost as I knew it. I don't know if she could sense that, but she (**Megan D.**) went above and beyond to help me. She sent me a list of counselors in the area. She contacted a care coordinator to help me keep track of all my medical appointments and tests. She repeatedly surprised me with her ability to assess what my immediate needs were and would help me plan how to address them. Thanks in great part to Megan, I am able to function again and care for myself. Though I have new limitations, I am now equipped with tools to help me each day. I am so very fortunate to have had Megan's help. There are millions of long haulers like me who I fear will never cross paths with a cognitive therapist let alone one like Megan. And I am acutely aware of how many people around the world are without the medical care they desperately need.

Please accept my most sincere thanks for the role you have played in Jefferson Healthcare's excellent care for me. What you all do makes a difference. I count myself so fortunate to live in Jefferson County and know that my loved ones can receive such outstanding medical care so close to home.

Questions?



Jefferson Healthcare

December 2021 Finance Report

January 26, 2022

Tyler Freeman, CFO

November 2021

Operating Statistics

STATISTIC DESCRIPTION	NOVEMBER 2021						NOVEMBER 2020			
	MO ACTUAL	MO BUDGET	% VARIANCE	YTD ACTUAL	YTD BUDGET	% VARIANCE	MO ACTUAL	% VARIANCE	YTD ACTUAL	% VARIANCE
FTEs - TOTAL (AVG)	599	625	4%	598	625	4%	628	5%	605	1%
ADJUSTED PATIENT DAYS	2,653	2,161	23%	29,959	24,063	25%	2,656	0%	21,575	39%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	104	73	42%	929	814	14%	53	96%	624	33%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	309	320	-3%	3,052	3,561	-14%	261	18%	2,781	9%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	413	415	0%	4,093	4,623	-11%	314	32%	3,557	13%
SURGERY CASES (IN OR)	134	123	9%	1,398	1,373	2%	98	37%	1,129	19%
SPECIAL PROCEDURE CASES	68	75	-9%	807	833	-3%	75	-9%	645	20%
LAB BILLABLE TESTS	20,453	20,874	-2%	238,989	232,395	3%	19,074	7%	203,685	15%
TOTAL DIAGNOSTIC IMAGING TESTS	2,717	3,046	-11%	33,760	33,901	0%	2,637	3%	29,233	13%
PHARMACY MEDS DISPENSED	21,290	23,663	-10%	219,689	263,444	-17%	16,485	29%	201,889	8%
RESPIRATORY THERAPY PROCEDURES	3,181	3,607	-12%	31,297	40,154	-22%	2,134	49%	26,288	16%
REHAB/PT/OT/ST RVUs	7,548	8,920	-15%	93,824	99,318	-6%	7,402	2%	84,933	9%
ER CENSUS	964	1,074	-10%	10,768	11,955	-10%	787	22%	9,853	8%
DENTAL CLINIC	414	385	8%	4,401	4,291	3%	296	40%	2,968	33%
TOTAL RURAL HEALTH CLINIC VISITS	5,957	6,261	-5%	66,512	69,707	-5%	5,237	14%	56,102	16%
TOTAL SPECIALTY CLINIC VISITS	3,288	3,348	-2%	37,153	37,275	0%	3,362	-2%	33,698	9%

December 2021

Operating Statistics

STATISTIC DESCRIPTION	DECEMBER 2021						DECEMBER 2020					
	MO ACTUAL	MO BUDGET	% VARIANCE	YTD ACTUAL	YTD BUDGET	% VARIANCE	MO ACTUAL	% VARIANCE	YTD ACTUAL	% VARIANCE		
FTEs - TOTAL (AVG)	599	625	4%	598	625	4%	621	4%	606	1%		
ADJUSTED PATIENT DAYS	2,437	2,233	9%	32,396	26,296	23%	3,133	-22%	24,709	31%		
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	95	76	25%	1,024	890	15%	58	64%	682	33%		
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	240	331	-27%	3,292	3,892	-15%	221	9%	3,002	9%		
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	350	430	-19%	4,443	5,053	-12%	294	19%	3,851	13%		
SURGERY CASES (IN OR)	113	127	-11%	1,511	1,500	1%	149	-24%	1,278	15%		
SPECIAL PROCEDURE CASES	66	77	-14%	873	910	-4%	62	6%	707	19%		
LAB BILLABLE TESTS	20,946	21,570	-3%	259,935	253,965	2%	19,835	6%	223,520	14%		
TOTAL DIAGNOSTIC IMAGING TESTS	2,891	3,147	-8%	36,651	37,048	-1%	2,820	3%	32,053	13%		
PHARMACY MEDS DISPENSED	19,139	24,451	-22%	238,828	287,895	-17%	17,829	7%	219,718	8%		
RESPIRATORY THERAPY PROCEDURES	3,243	3,727	-13%	34,540	43,881	-21%	2,436	33%	28,724	17%		
REHAB/PT/OT/ST RVUs	6,742	9,218	-27%	100,566	108,536	-7%	7,640	-12%	92,573	8%		
ER CENSUS	974	1,110	-12%	11,742	13,065	-10%	811	20%	10,664	9%		
DENTAL CLINIC	388	398	-3%	4,789	4,689	2%	300	29%	3,268	32%		
TOTAL RURAL HEALTH CLINIC VISITS	5,772	6,470	-11%	72,284	76,177	-5%	5,632	2%	62,809	13%		
TOTAL SPECIALTY CLINIC VISITS	3,187	3,460	-8%	40,340	40,735	-1%	3,380	-6%	37,078	8%		

November 2021

Income Statement Summary

	November 2021 Actual	November 2021 Budget	Variance Favorable/ (Unfavorable)	%	November 2021 YTD	November 2021 Budget YTD	Variance Favorable/ (Unfavorable)	%	November 2020 YTD
Operating Revenue									
Gross Patient Service Revenue	24,877,881	23,715,243	1,162,637	5%	273,618,785	264,029,710	9,589,074	4%	231,732,596
Revenue Adjustments	12,093,896	12,616,123	522,227	4%	145,714,782	140,459,500	(5,255,281)	-4%	124,462,529
Charity Care Adjustments	265,096	225,526	(39,570)	-18%	3,688,744	2,510,851	(1,177,894)	-47%	3,258,543
Net Patient Service Revenue	12,518,889	10,873,595	1,645,294	15%	124,215,259	121,059,359	3,155,899	3%	104,011,524
Other Revenue	805,907	532,096	273,810	51%	7,577,986	5,924,004	1,653,982	28%	12,931,078
Total Operating Revenue	13,324,796	11,405,691	1,919,105	17%	131,793,245	126,983,364	4,809,881	4%	116,942,602
Operating Expenses									
Salaries And Wages	5,670,912	5,609,938	(60,974)	-1%	63,583,523	62,457,314	(1,126,209)	-2%	59,259,794
Employee Benefits	1,147,980	1,439,719	291,739	20%	14,547,690	16,028,868	1,481,178	9%	13,688,630
Other Expenses	4,754,098	4,013,084	(741,015)	-18%	47,959,197	44,678,998	(3,280,199)	-7%	44,455,943
Total Operating Expenses	11,572,990	11,062,741	(510,250)	-5%	126,090,410	123,165,180	(2,925,231)	-2%	117,404,368
Operating Income (Loss)	1,751,806	342,951	1,408,855	411%	5,702,835	3,818,184	1,884,651	49%	(461,766)
Total Non Operating Revenues (Expenses)	(12,371)	(484)	(11,887)	-2456%	(164,362)	(5,388)	(158,974)	-2950%	74,323
Change in Net Position (Loss)	1,739,435	342,467	1,396,968	408%	5,538,473	3,812,795	1,725,677	45%	(387,443)
Operating Margin									
Operating Margin	13.1%	3.0%	10.1%	337.2%	4.3%	3.0%	1.32%	43.9%	-0.4%
Total margin	13.1%	3.0%	10.1%	334.8%	4.2%	3.0%	1.20%	40.0%	-0.3%
Salaries & Benefits as a % of net pt svc rev	-54.5%	-64.8%	10.4%	16.0%	-62.9%	-64.8%	1.93%	3.0%	-70.1%

December 2021

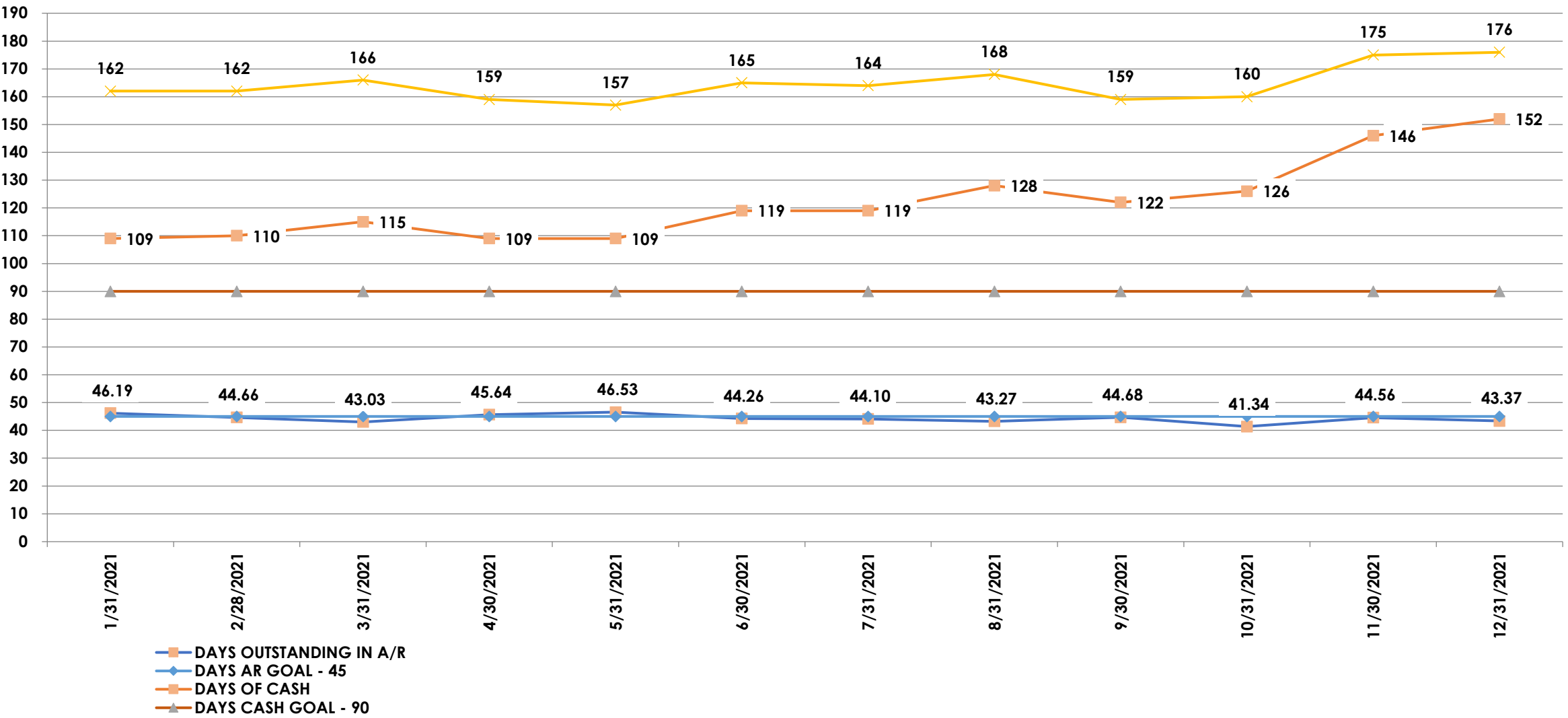
Income Statement Summary

	December 2021 Actual	December 2021 Budget	Variance Favorable/ (Unfavorable)	%	December 2021 YTD	December 2021 Budget YTD	Variance Favorable/ (Unfavorable)	%	December 2020 YTD
Operating Revenue									
Gross Patient Service Revenue	24,395,077	24,505,752	(110,675)	0%	298,013,861	288,535,462	9,478,399	3%	256,135,793
Revenue Adjustments	12,468,115	13,036,660	568,545	4%	158,182,897	153,496,160	(4,686,737)	-3%	136,470,558
Charity Care Adjustments	183,518	233,043	49,525	21%	3,872,263	2,743,894	(1,128,369)	-41%	2,858,135
Net Patient Service Revenue	11,743,443	11,236,048	507,394	5%	135,958,701	132,295,408	3,663,293	3%	116,807,100
Other Revenue	1,092,958	549,833	543,126	99%	8,670,945	6,473,837	2,197,108	34%	15,262,648
Total Operating Revenue	12,836,401	11,785,881	1,050,520	9%	144,629,646	138,769,245	5,860,401	4%	132,069,748
Operating Expenses									
Salaries And Wages	5,909,552	5,796,936	(112,615)	-2%	69,493,075	68,254,251	(1,238,824)	-2%	65,363,393
Employee Benefits	1,177,522	1,487,709	310,188	21%	15,725,212	17,516,577	1,791,365	10%	14,861,023
Other Expenses	4,370,160	4,146,853	(223,307)	-5%	52,329,357	48,825,851	(3,503,506)	-7%	48,574,648
Total Operating Expenses	11,457,233	11,431,499	(25,734)	0%	137,547,643	134,596,679	(2,950,964)	-2%	128,799,064
Operating Income (Loss)	1,379,168	354,382	1,024,786	289%	7,082,003	4,172,566	2,909,437	70%	3,270,684
Total Non Operating Revenues (Expenses)	(21,700)	(500)	(21,200)	-4239%	(186,062)	(5,889)	(180,173)	-3059%	31,306
Change in Net Position (Loss)	1,357,468	353,882	1,003,586	284%	6,895,940	4,166,677	2,729,263	66%	3,301,991
Operating Margin	10.7%	3.0%	7.7%	257.3%	4.9%	3.0%	1.89%	62.9%	2.5%
Total margin	10.6%	3.0%	7.6%	252.2%	4.8%	3.0%	1.77%	58.8%	2.5%
Salaries & Benefits as a % of net pt svc rev	-60.3%	-64.8%	4.5%	6.9%	-62.7%	-64.8%	2.15%	3.3%	-68.7%

December 2021

Cash and Accounts Receivable

Days Cash and Accounts Receivable



November 2021

Board Financial Report

Department	Account	Description	Nov Actual	Nov Budget	Nov Variance	2021 YTD Actual	2021 YTD Budget	YTD Variance
BOARD	600010	MANAGEMENT & SUPERVISION WAGES	4,198	4,520	322	44,216	50,320	6,103
	601100	BENEFITS FICA	274	275	0	2,843	3,057	214
	601150	BENEFITS WA F&MLA	5	7	1	34	73	39
	601400	BENEFITS MEDICAL INS-UNION	3,210	4,521	1,311	49,520	50,329	809
	601600	BENEFITS RETIREMENT	-	222	222	-	2,466	2,466
	601900	BENEFITS EMPLOYEE ASSISTANCE	7	8	1	18	91	72
	602300	CONSULT MNGMT FEE	-	1,607	1,607	3,750	17,893	14,143
	602500	AUDIT FEES	-	3,714	3,714	57,900	41,347	(16,553)
	604200	CATERING	-	87	87	-	974	974
	604500	OFFICE SUPPLIES	-	-	-	-	-	-
	604850	COMPUTER EQUIPMENT	-	-	-	-	-	-
	606500	OTHER PURCHASED SERVICES	728	822	94	728	9,151	8,423
	606,700	MARKETING	322	-	(322)	322	-	(322)
	609,300	DUES AND SUBSCRIPTIONS	(120)	-	120	-	-	-
	609400	TRAVEL/MEETINGS/TRAINING	1,350	1,233	(117)	2,311	13,726	11,415
	609999	CLEARING	-	-	-	-	-	-
BOARD Total			9,974	17,014	7,040	161,642	189,426	27,784

December 2021

Board Financial Report

Department	Account	Description	Dec Actual	Dec Budget	Dec Variance	2021 YTD Actual	2021 YTD Budget	YTD Variance
BOARD	600010	MANAGEMENT & SUPERVISION WAGES	1,499	4,670	3,171	45,716	54,990	9,274
	601100	BENEFITS FICA	206	284	78	3,049	3,341	292
	601150	BENEFITS WA F&MLA	4	7	3	38	80	42
	601400	BENEFITS MEDICAL INS-UNION	3,744	4,671	928	53,263	55,000	1,737
	601600	BENEFITS RETIREMENT	-	229	229	-	2,695	2,695
	601900	BENEFITS EMPLOYEE ASSISTANCE	6	8	2	24	99	75
	602300	CONSULT MNGMT FEE	-	1,661	1,661	3,750	19,554	15,804
	602500	AUDIT FEES	-	3,838	3,838	57,900	45,185	(12,715)
	604200	CATERING	-	90	90	-	1,064	1,064
	604500	OFFICE SUPPLIES	-	-	-	-	-	-
	604850	COMPUTER EQUIPMENT	-	-	-	-	-	-
	606500	OTHER PURCHASED SERVICES	-	849	849	728	10,000	9,272
	606700	MARKETING	-	-	-	322	-	(322)
	609300	DUES AND SUBSCRIPTIONS	-	-	-	-	-	-
	609400	TRAVEL/MEETINGS/TRAINING	-	1,274	1,274	2,311	15,000	12,689
	609999	CLEARING	-	-	-	-	-	-
BOARD Total			5,459	17,581	12,123	167,101	207,008	39,907

January 2022

Preview — (*as of 0:00 1/26/22)

- **\$24,857,062 in Projected HB charges**
 - Average: \$801,841/day (HB only)
 - Budget: \$882,907/day
 - 91% of Budget
- **\$9,552,971 in HB cash collections**
 - Average: \$285,774/day (HB only)
 - Goal: \$390,700/day
- **44.1 Days in A/R**
- **Questions**

Jefferson Healthcare

Administrative Report

January 26, 2022

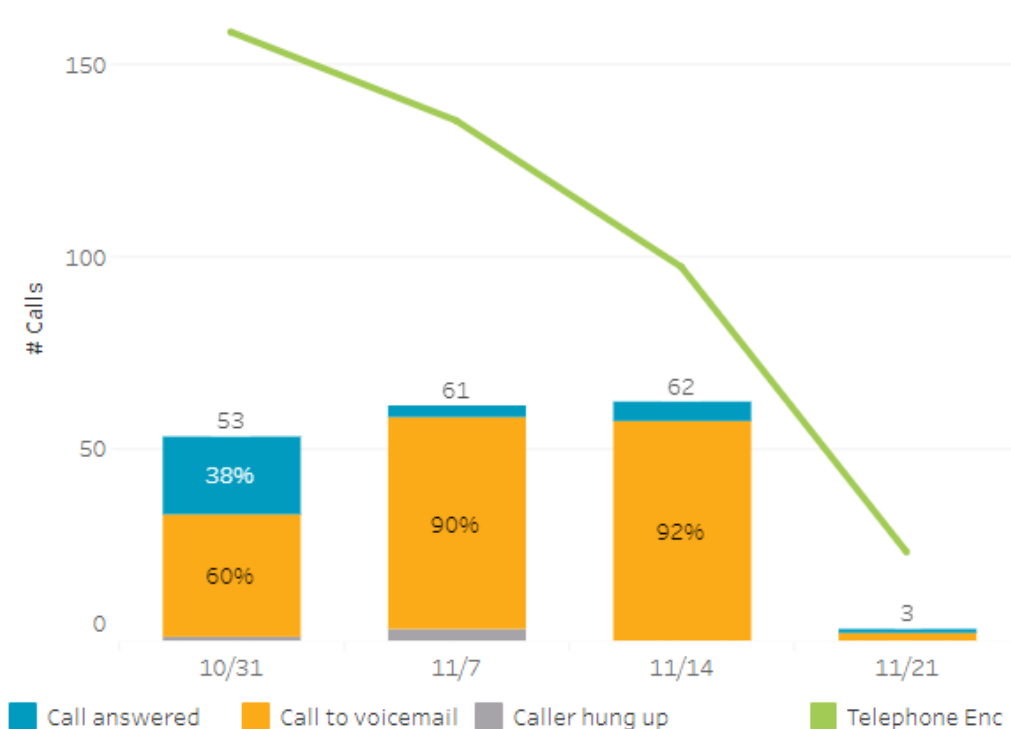
Mike Glenn, CEO

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.

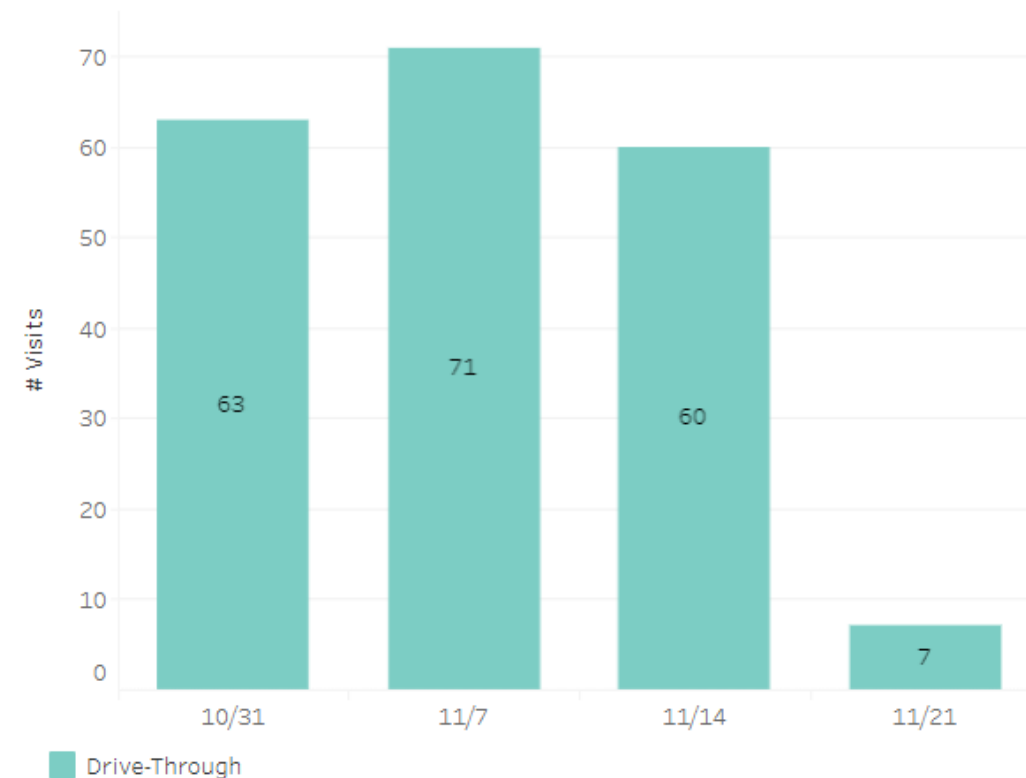


Total call volume since launch of triage line

Inbound Calls	316,424
Calls Answered	242,354
# Telephone Encounters	66,666

Respiratory Clinic visit volumes - by week

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



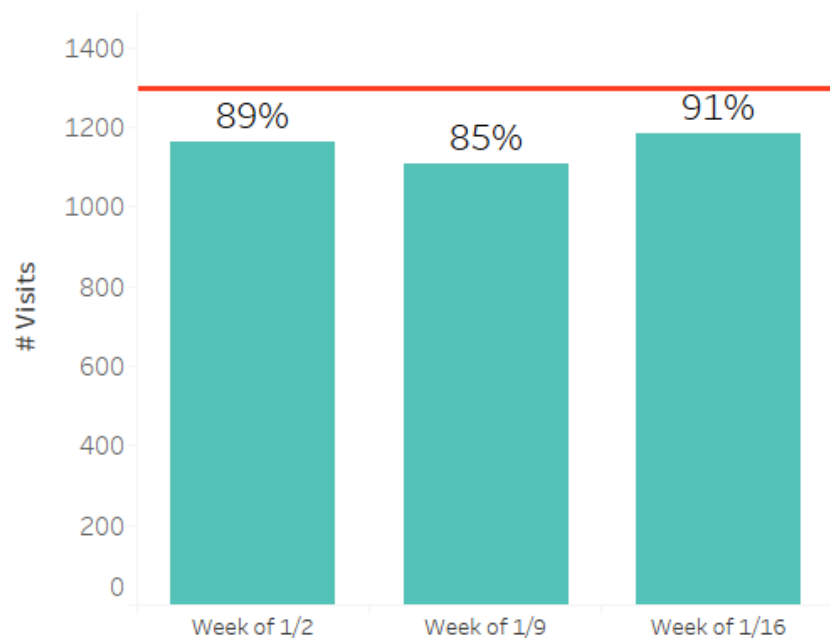
Total Respiratory Evaluation Clinic visits - all time

Drive-Through	14,707
Office Visit	4,822
Total	19,529

Jefferson Healthcare Volumes

Primary Care variance to budgeted visits

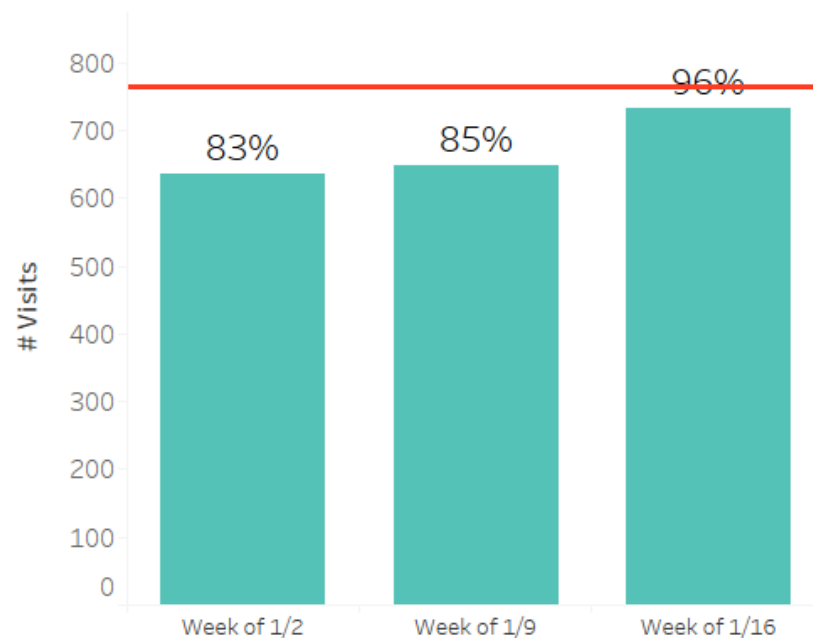
Visit volumes in the five primary care and Dental clinics. Red line indicates weekly visit budget based on 2022 annual budgets. The labels are % volume to budget for the selected clinics.



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 weekly visit budget based on 2022 annual budgets. The labels are % volume to budget for the selected clinics.



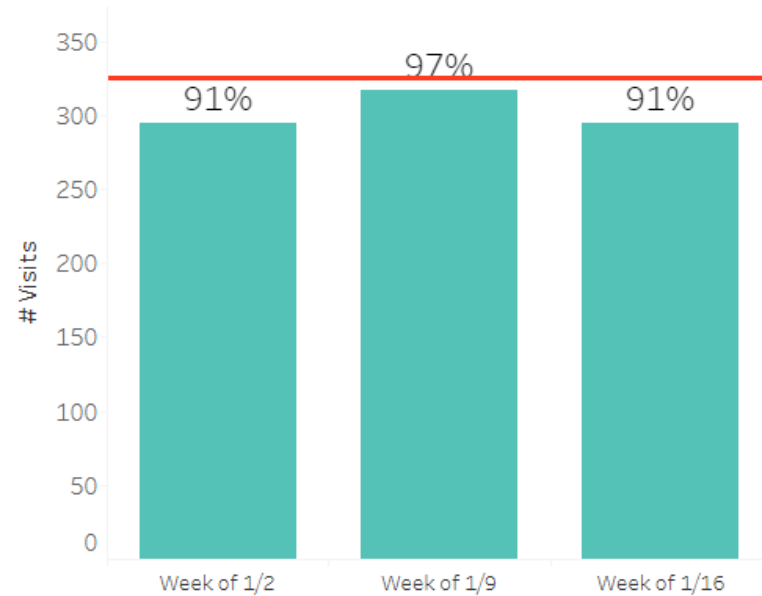
Includes visits in: JHSA clinic, Sleep Medicine, Urology, Women's Clinic, Wound Care and the Port Townsend components of Cardiology, Dermatology and Orthopedics (Port Ludlow components, if any, are not included).

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.

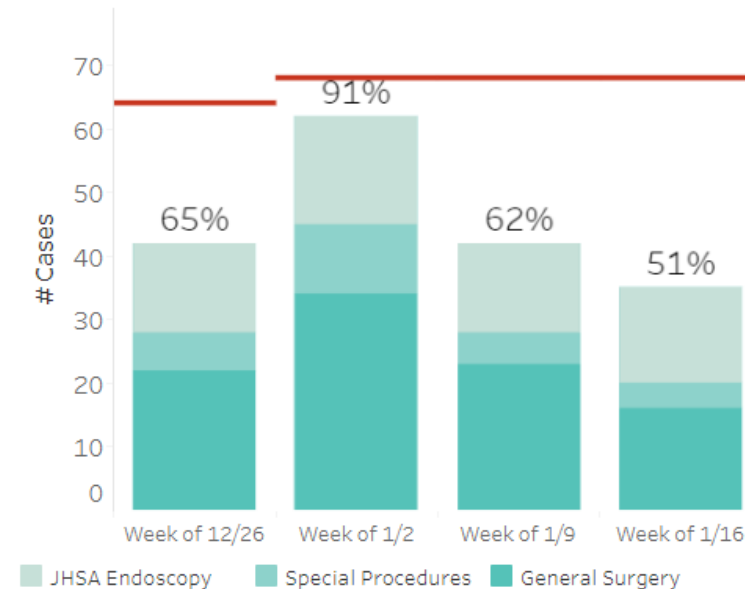


Surgical case variance to target cases

Surgical case volumes. 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.

Case counts vary slightly from surgery statistics reported by Finance. In this chart, "Hosp Endoscopy" refers to any endoscopy procedure performed in the Hospital, not just those performed in the OR Special Procedures Room.

This chart now includes surgical cases performed both in the hospital OR *and* in 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.

	1/2/2022
Total	462
Express Clinic	230
Emergency	232

Total Visits, 1/1/2020 to 1/23/2022

Select a department to bring in focus.

Emergency Dept

23,197

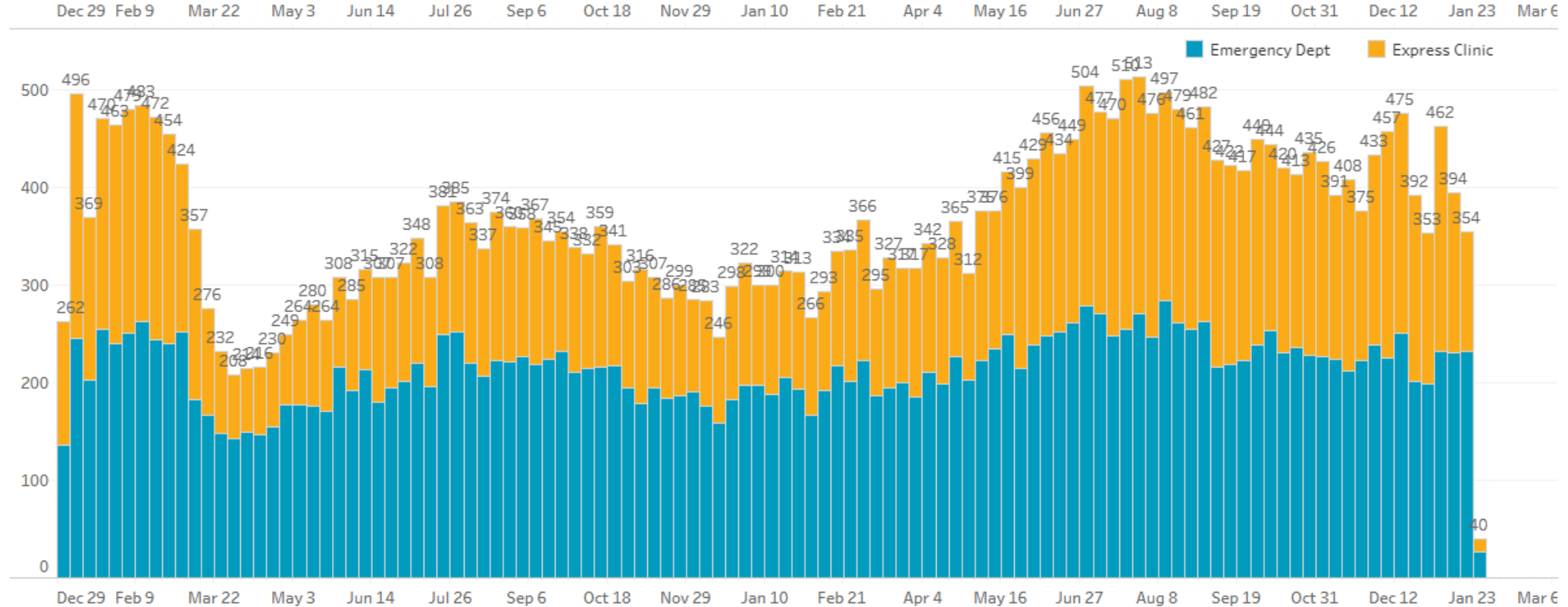


Express Clinic

16,416



Volumes by Arrival Department and Week, 2020 - 2021



Advocacy Update

- Advocacy Meetings- Jefferson Healthcare
 - Representative Tharinger
 - Senator Van De Wege
- Advocacy Meetings- WSHA
 - Representative Chapman
 - Representative Tharinger
- Other

CHIP Update



CHIP OVERVIEW AND PROPOSAL PRESENTED TO
HOSPITAL DISTRICT #2 - COMMISSIONER BOARD

BACKGROUND

The original Community Health Improvement Plan (CHIP) partnership, an innovative collaboration between Jefferson Healthcare (JCH), the City of Port Townsend and Jefferson County Public Health (JCPH), has been devoted to identifying the most pressing health priorities and actions leading to health improvements for individuals, families, and communities across Jefferson County. This partnership recognizes that community health improvement is not a one-time effort, but an ongoing process that looks broadly at factors impacting our population's health and uses the community health assessment (CHA) data to identify priority issues, develop and implement strategies for action, and establish accountability to ensure measurable health improvement.

2016-2019 CHIP partnership focused on four Jefferson County health priorities, which were identified through a rigorous community data assessment study completed in 2014, and ranked at data assessment meetings in 2015-2016. The four health priorities are:

- Access to care
- Access to mental health and substance abuse services
- Immunizations
- Healthy eating, active living and chronic disease prevention

The hiring of two .5 FTE Co-Executive Directors for CHIP, to direct and manage this work, was approved by the Joint Board (the Board of County Commissioners and the Board of Public Hospital District #2). Co-Executive Directors Lori Fleming and John Nowak, with funding from JCPH and JHC respectively, were aligned to build and facilitate four workgroups focusing on the CHA's four priority areas. The workgroups included stakeholder and interested parties who collaboratively developed each workgroup's purpose statement, goals, objectives, and strategies. This effort resulted in the writing of the first CHIP which was adopted by the Board of Health and the Board of Public Hospital District #2 in October 2016. This 2016 CHIP is the current Plan that exists today.

In 2019 a new Community Health Assessment (CHA) was conducted and another community stakeholder group was assembled to thoroughly vet the data. After several meetings, the priorities were established and workgroups structured on the stakeholder group's recommendation to form age-bands delineated by [Youth Age](#), [Working Age](#), and [Older Age](#). These age-band teams are populated by relevant agency, organization and community stakeholders and advocates. These groups have developed strategic frameworks, that when completed/approved, will serve as a roadmap to improve the health of the community members represented in the focus of each age band. (See pages 4-9 for more detail.) Prior to his retirement, Co-Executive Director Nowak was focused on developing content for the [2021 CHIP update](#). He and Fleming met monthly from January to August 2021 with the three age-band teams to strategize action around the [2019 Community Health Assessment \(CHA\)](#) results.

- Operational Transition

- Lori Fleming, Director
- Allison Berry, MD Jefferson County Health Officer

- Governance Transition

- Proposal to endorse Jefferson County Public Health Board as CHIP Governing Body

- Financial Contribution

- \$25,000.00

COVID Update

Questions