### \*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, March 23, 2022

#### Call to Order:

The meeting was called to order at 2:01 pm by Board Chair Buhler Rienstra. Present by phone and video were Commissioners Dressler, Kolff, and McComas. Commissioner Ready was excused. Also, in attendance were Mike Glenn, CEO, Tyler Freeman, Chief Financial Officer, Jake Davidson, Chief Ancillary & Specialty Services 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 Kolff seconded.

**Action:** Motion passed unanimously.

#### **Board Governance Education:**

March Board Retreat Debrief

Discussion ensued.

#### **Education Topic:**

Population Health Update presented by Dunia Faulx, Executive Director Population Health, Analytics & Advocacy and Dr. Molly Parker, Chief Medical Officer, Population Health

Discussion ensued.

Home Health Hospice Quarterly Update presented by Tammy Tarsa, Executive Director Home Health Hospice

Discussion ensued.

#### **Break:**

Commissioners recessed for break at 3:18 pm. Commissioner reconvened from break at 3:30 pm.

#### Team, Employee, Provider of the Quarter:

Allison Crispen, Interim Chief Human Resources Officer announced the Employee of Quarter, Marisa Jenkins, Provider of the Quarter, Gary Forbes, MD, Team of Quarter, EVS, and Leader of the Quarter, Jacob Stokes.

#### Minutes:

- February 16, 2022, Special Session Minutes
- February 23, 2022, Regular Session Minutes

Commissioner Dressler made a motion to approve the February 16, 2022, Special Session Minutes and February 23, 2022, Regular Session Minutes. Commissioner Kolff seconded.

Action: Motion passed unanimously.

### **Required Approvals:** Action Requested

- February Warrants and Adjustments
- Resolution 2022-04 Cancelled Warrants
- Medical Staff Credentials/Appointments/Reappointments

Commissioner Dressler made a motion to approve the February Warrants and Adjustment, Resolution 2022-04 Cancelled Warrants, Medical Staff Credentials/ Appointments/ Reappointments. Commissioner McComas seconded.

**Action:** Motion passed unanimously.

#### **Financial Report:**

Tyler Freeman, CFO, presented the February Financial Report. Discussion ensued

### **Administrative Report**

Mike Glenn, CEO, presented the March Administrative report. Discussion ensued

#### **Board Business:**

- Board of Health Report
   Commissioner Kolff shared Jefferson County's current COVID rate, that the
   Board of Health discussed bi-laws and change in board of health membership,
   and additional COVID information.
- Agenda Evaluation Commissioners evaluated the agenda.

#### **Quality Report**

Brandie Manuel, CPSQO, presented an end-of-day DNV update.

#### Discussion ensued

### **Meeting Evaluation:**

Commissioners evaluated the meeting.

### **Executive Session:**

• Discuss the performance of a public employee Commissioners went into Executive Session for twenty-five (25) minutes at 5:20 pm. Commissioners came out of Executive Session at 5:45 pm. Action will be taken following the session.

No Public was present on the line.

Commissioner McComas made a motion to approve a compensation increase for CEO Mike Glenn. The motion included an increase for a total base pay compensation of Three Hundred Thousand dollars (\$300,000.00). Commissioner Kolff seconded.

**Action:** Motion passed with four Ayes and one opposed.

#### **Conclude:**

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

Action: Motion passed unanimously.

The meeting concluded at 5:53 pm.

### Population Health 2022

Dunia Faulx, MPH
Dr. Molly Parker, MD MPH
Tina Herschelman

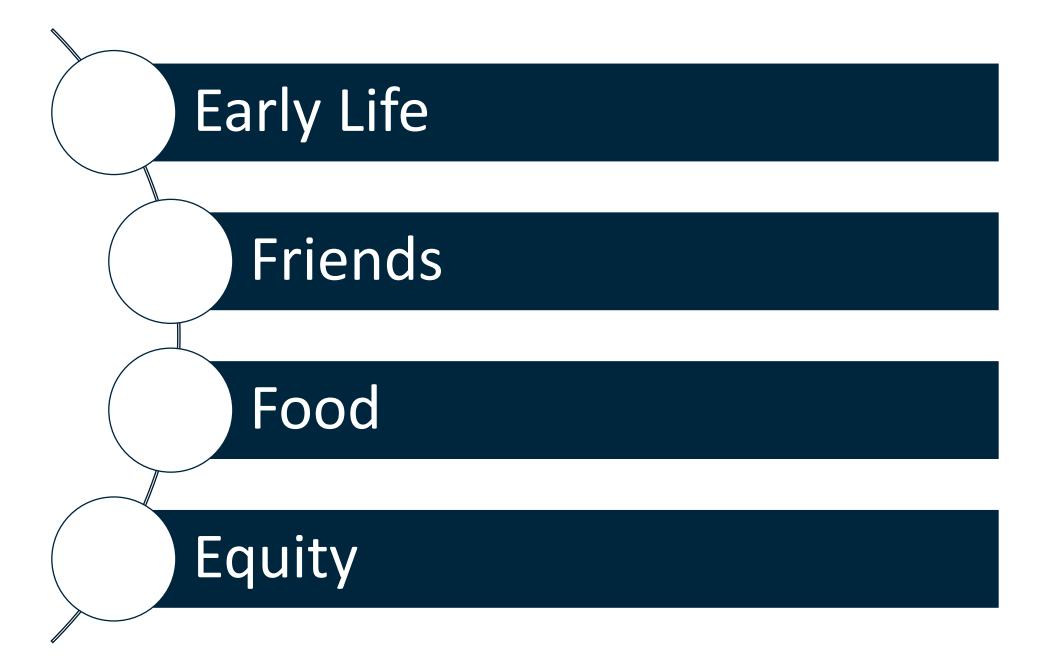
March 23, 2022



### JH Land Acknowledgement (2021)

We acknowledge that Jefferson Healthcare is on the ancestral and contemporary homelands of the S'Klallam, Chemakum, T'wana and other indigenous nations and we recognize the tribal governments' sovereignty across the region.

### Agenda

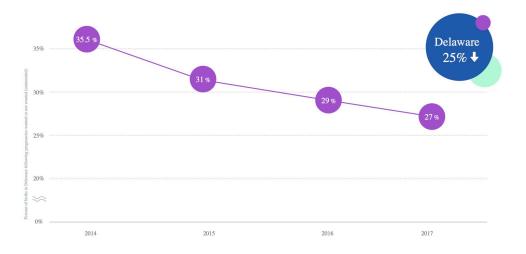


# Early Life

It lasts a lifetime.

## Early Life | Preparation

### 25% reduction in births from unintended pregnancies in Delaware



# upstream

## UNPLANNED PREGNANCY IN WA



the percentage of pregnancies in Washington that are unplanned

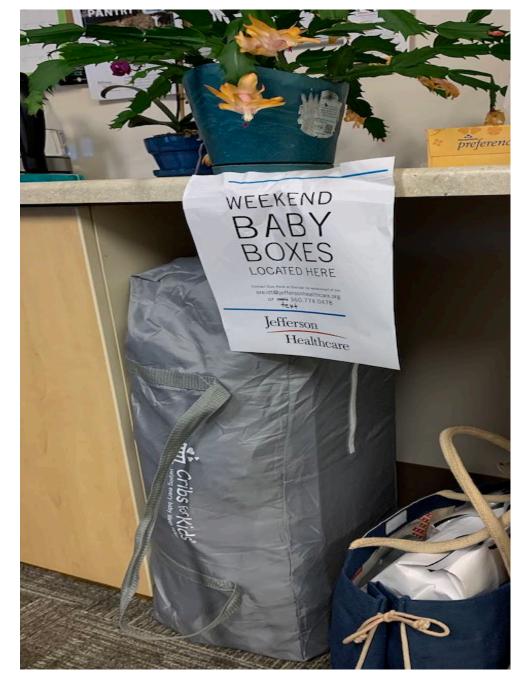


41%

Nearly half of unplanned pregnancies occur to women using contraception

Sources: Washington State
Department of Health, Guttmacher
Institute, Power to Decide

### Early Life | Supports Safe Sleep

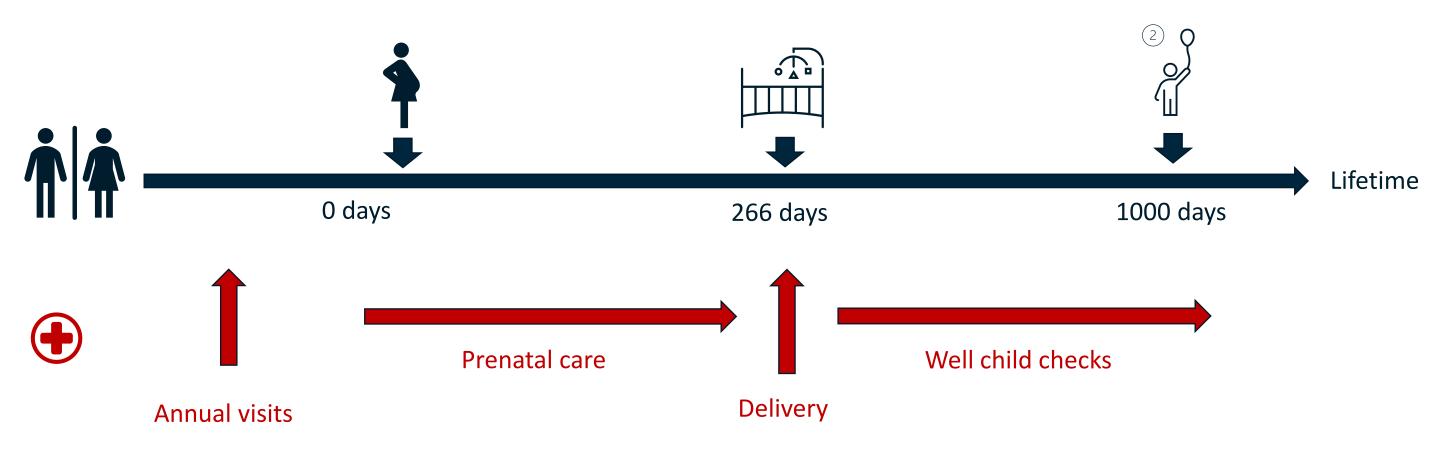




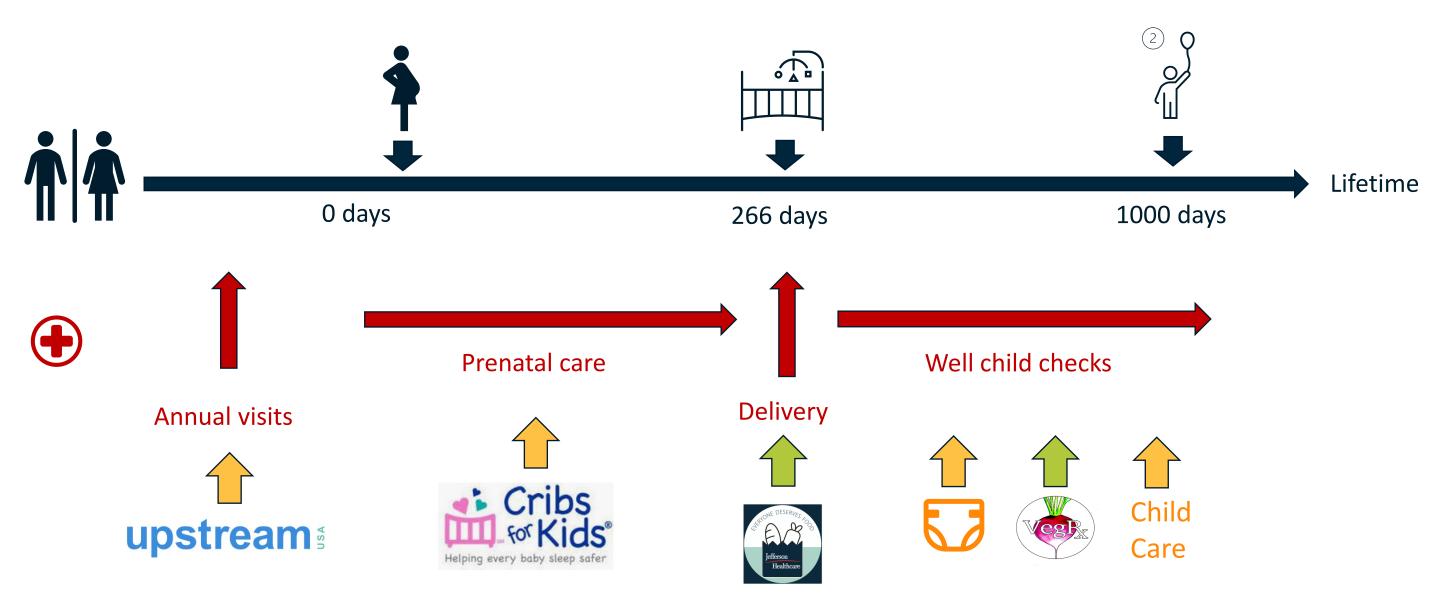


# Early life | Diaper Bank

### Early Life | Lasts a Lifetime



### Early Life Lasts a Lifetime



## Friends

"As a single parent of ... kids I can't tell you how important it's been to have the support of Jefferson Healthcare in terms of child care."



### **Summer 2021**

Caring For Our **Future**:

East Jefferson County Rural Child Care Report

### Fall 2021 to now

Facility funding development

- Washington State Department of Commerce
  - Jefferson County

### Spring 2022

Child care operator partner search

Request for Letters of Interest

## Friends | Employee child care support

2021 total \$55,817

\$4651 average per month

11-18 families per month

16-25 children per month

Median \$203 per child

Range \$45-877



## Food

Supporting our providers, patients, and community with food access initiatives.

### **Population Health** | Food Access Goals + Initiatives

Support Providers	Maintain list of SDOH resources on provider resource page
	Card of resources to give to patients during visits
Provide Resources to Patients	VegRx – 2021 most successful year ever! Going big(ger) in 2022!
	Grab & Go Food bags – Moved 3500 pounds of food! Funds from First Federal Foundation
	Little Free Pantry – Successful model for food distribution; 2022: re-engage JH staff to stock
	First-Days Food Bags – Successful program in FBC; thanks to Sunrise Rotary for funding
	COVID Inpatient Food Bags – Minimal utilization; will sunset the program; go-bags available
Partner with Community Organizations	2022 Work in Progress: Connect patients with low-income/free CSAs provided by local farms
	Delivery: Connect patients with free food bank delivery from PeddlerPT
	Continue to support food access offered through YMCA & local school districts
	Continue to connect the local healthcare system and the local food system

### Patient Testimonial | Oncology

"An oncology survivorship patient in her 70s was struggling to pay for her maintenance drugs and her other meds. With her cost of her treatment, she was really struggling to cover her basic needs. She shared that she had recently been going without food because she could not afford it. She said, "I can go to bed hungry as long as I have a bed to lay in", meaning she was to the point where she was having to choose between eating or paying her rent. We discussed ways to connect her to community services and resources, but I knew she needed immediate access to food. I excused myself and I grabbed one of the food bags from the closet and brought it to her. She opened the bag and began to cry. She said the only thing she had left to eat at home was a bag of rice. She expressed overwhelming gratitude. I called her a week later to follow up. She was happy because she was able to get her medications at a reduced rate, her meals on wheels had started, and since she had that bag of food, she didn't need to go to the grocery that week which allowed her to get caught up on bills. She said that walking out of the hospital knowing that she would not have to go to bed hungry, allowed her to have one less worry and it meant the world to her."

# Equity

Supporting equity initiatives across JH.

Build infrastructure to support health equity

Address multiple determinants of health

Eliminate racism and other forms of oppression

Partner with the community

Implement projects that will make a local difference

- ✓Include equity as a priority in the organization's strategic plan

  Demonstrate leadership commitment to improving health equity

  ✓Develop and communicate a shared vision for health equity
- ✓Equity Dashboard
- ✓Apply equity lens to existing improvement projects Staff and provider training
- Stratify clinical data by race, ethnicity, age, language, and payer

Underst:

- ✓Understand historical context for racism & other forms of oppression
- Recognize the original occupants of the land
- ✓Work with community partners to identify ways to improve equity
- ✓Work with community partners to ensure COVID-19 vaccine equity

Implement business practices that support racial equity including supporting local businesses owned by BIPOC community members

- ✓ Recognize contributions of BIPOC individuals to the healthcare field
- ✓Utilize our voice as an anchor institution to support BIPOC communities

HEALTH EQUITY 2021

### Institute for Healthcare Improvement: Pursuing Equity Closeout

In addition to our Health
Equity Committee, we have
dedicated analytics
resources and had an HR
person focused on
identifying resources for our
employees.

We were able to get equity built into the 2022 Strategic Plan under Patient Safety and Quality and the People pillars!



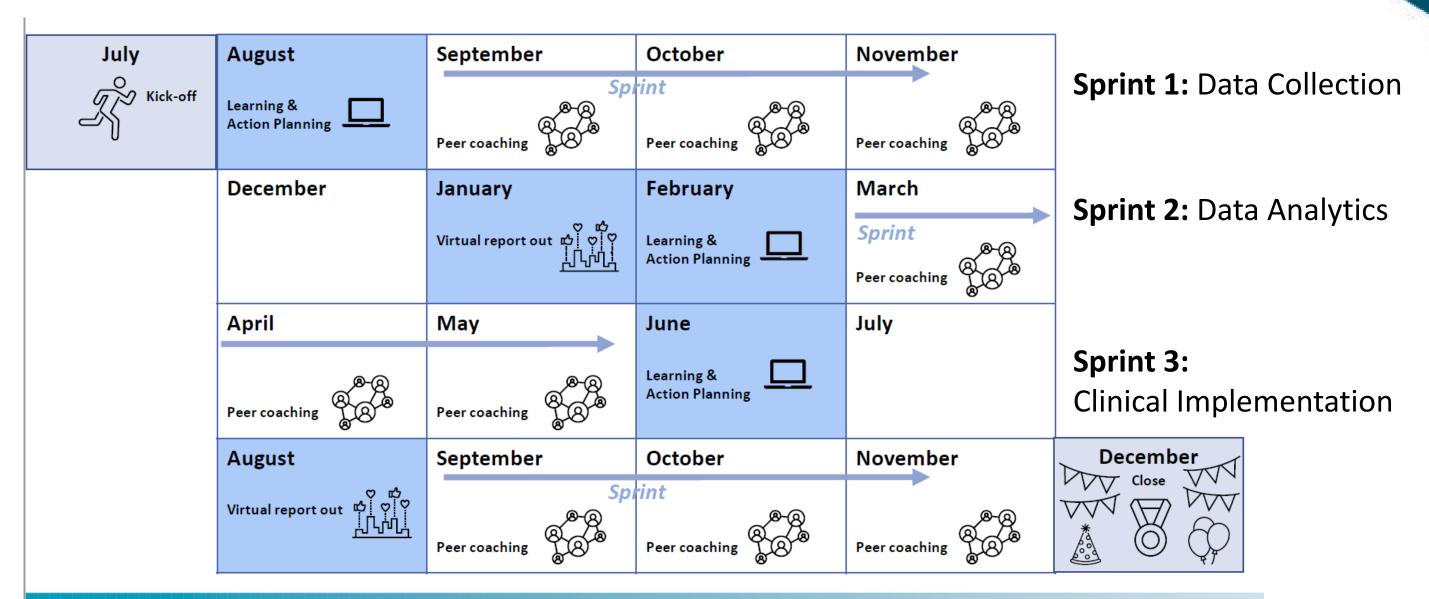
We partnered with the Jefferson County Immigrant Rights Advocates (JCIRA) to help their community get access to the COVID-19 Vaccine in early 2021.

The Population Health team
has done a great job of
finding resources for patients
outside of what is typically
considered clinical care,
especially around food and
resources for early life.

During the COVID pandemic we stopped sending patients to collections.



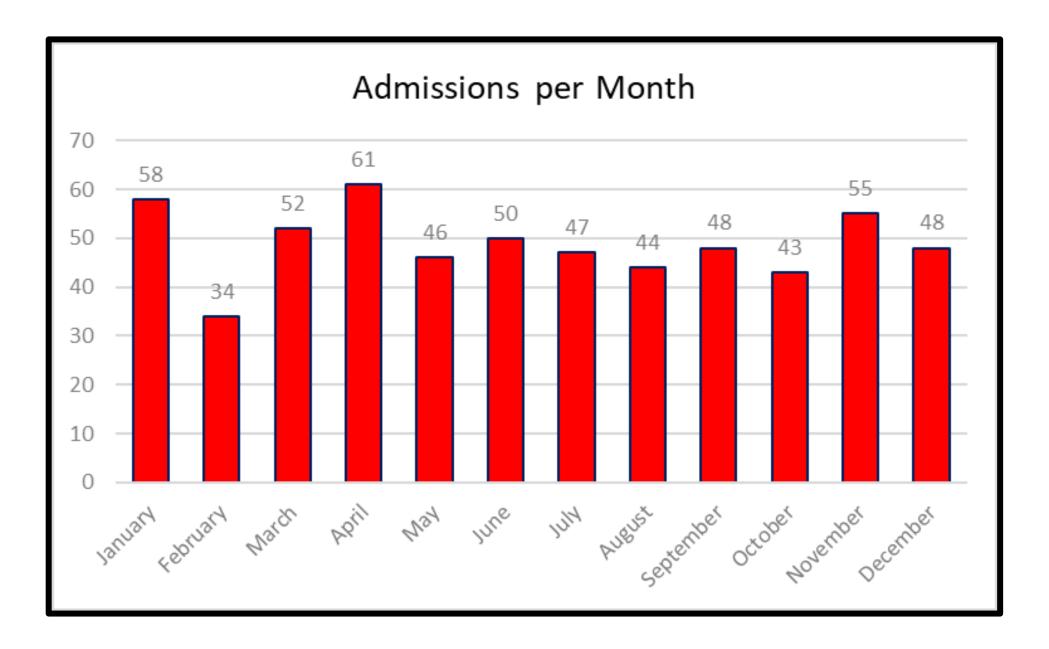
### WSHA Sprint 2



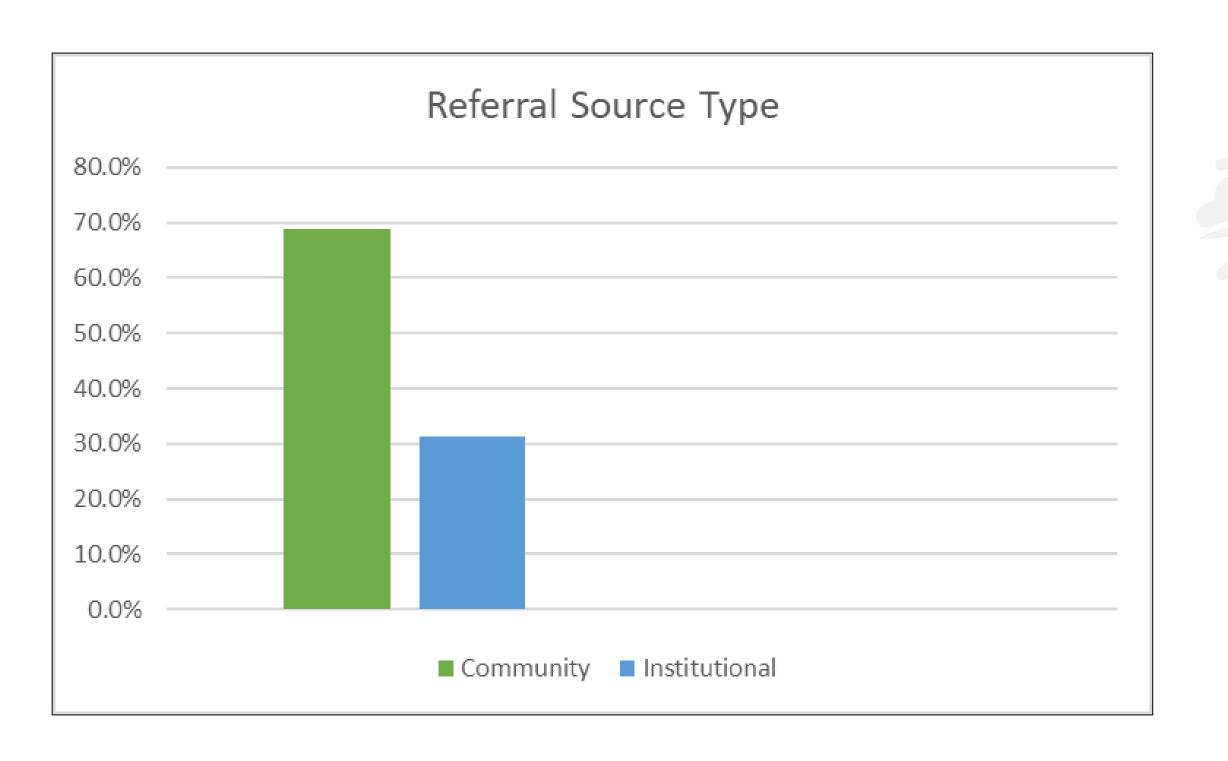


### Discussion

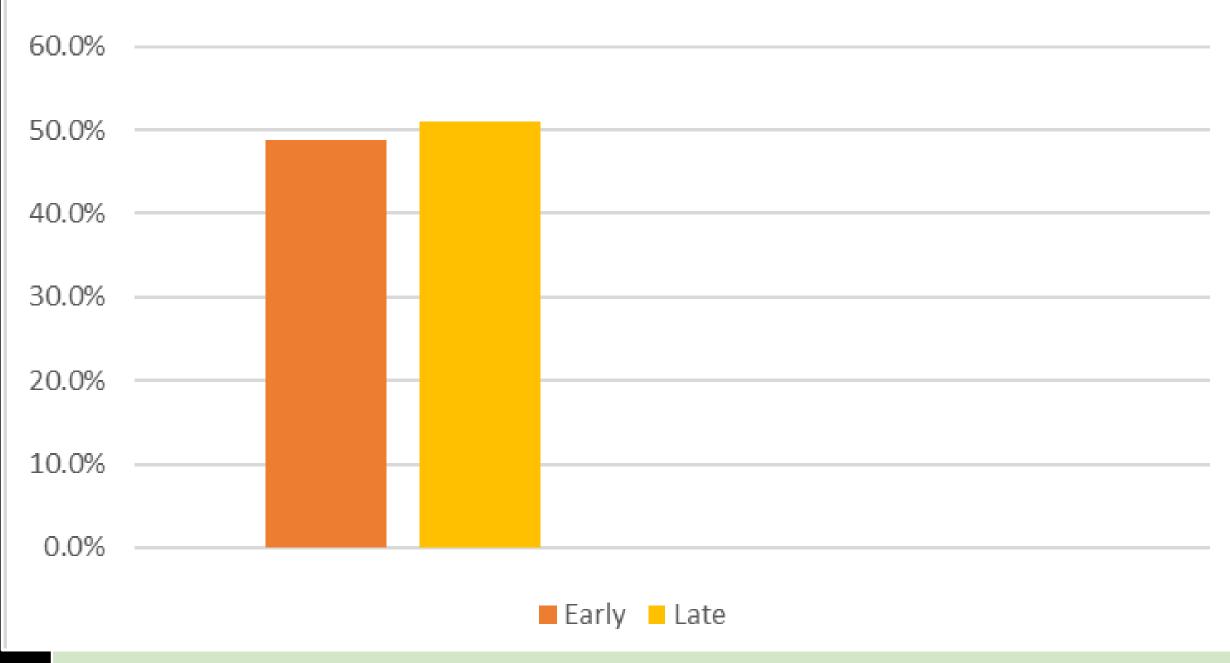
# Home Health

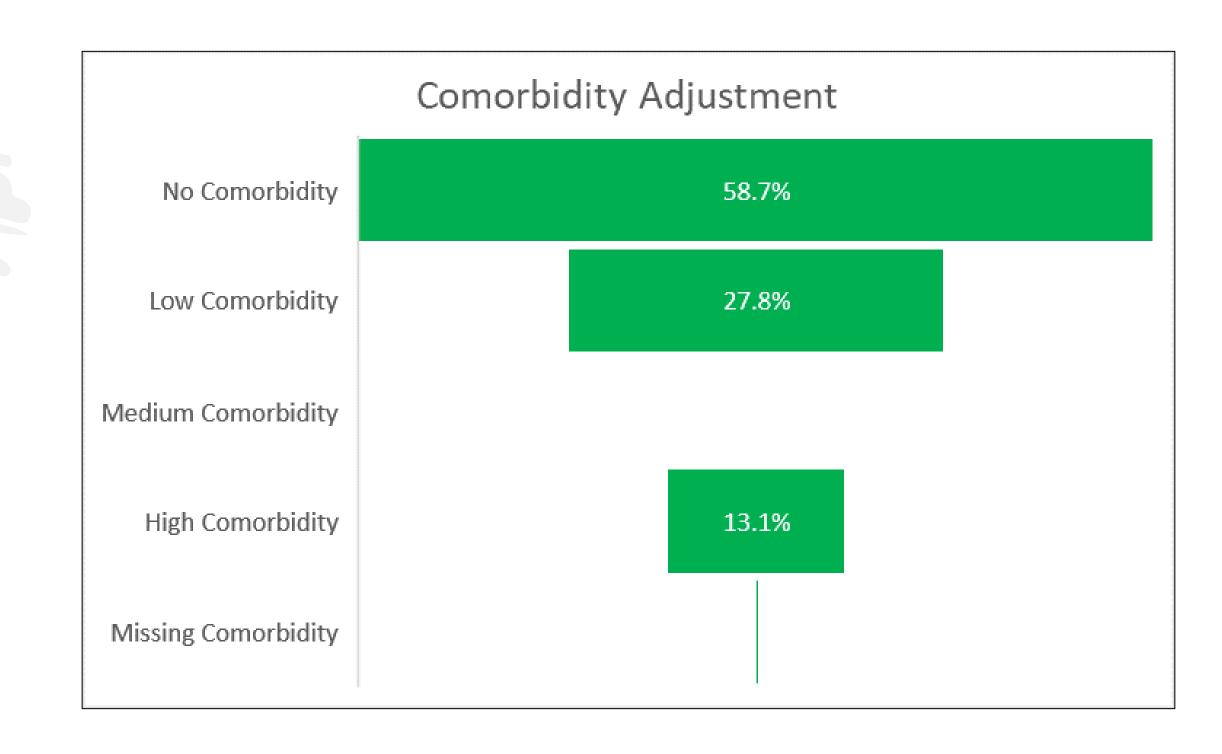


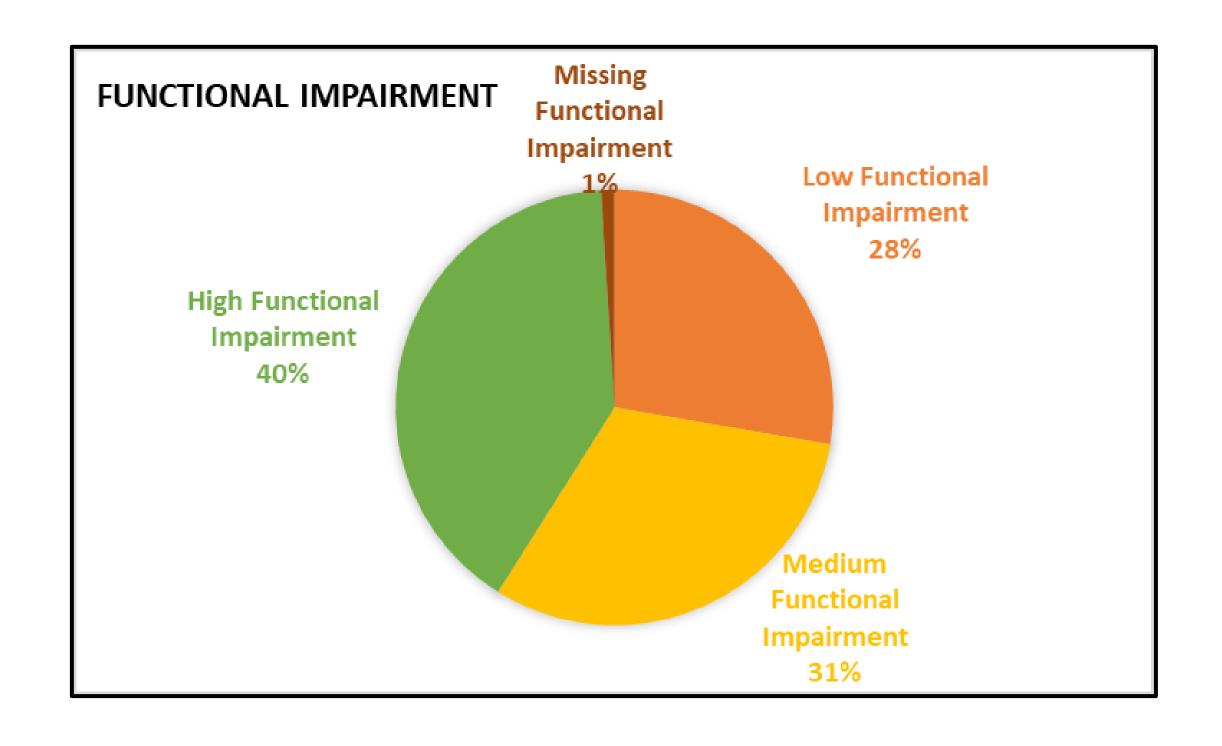
Total number of episodes for 2021 was 719

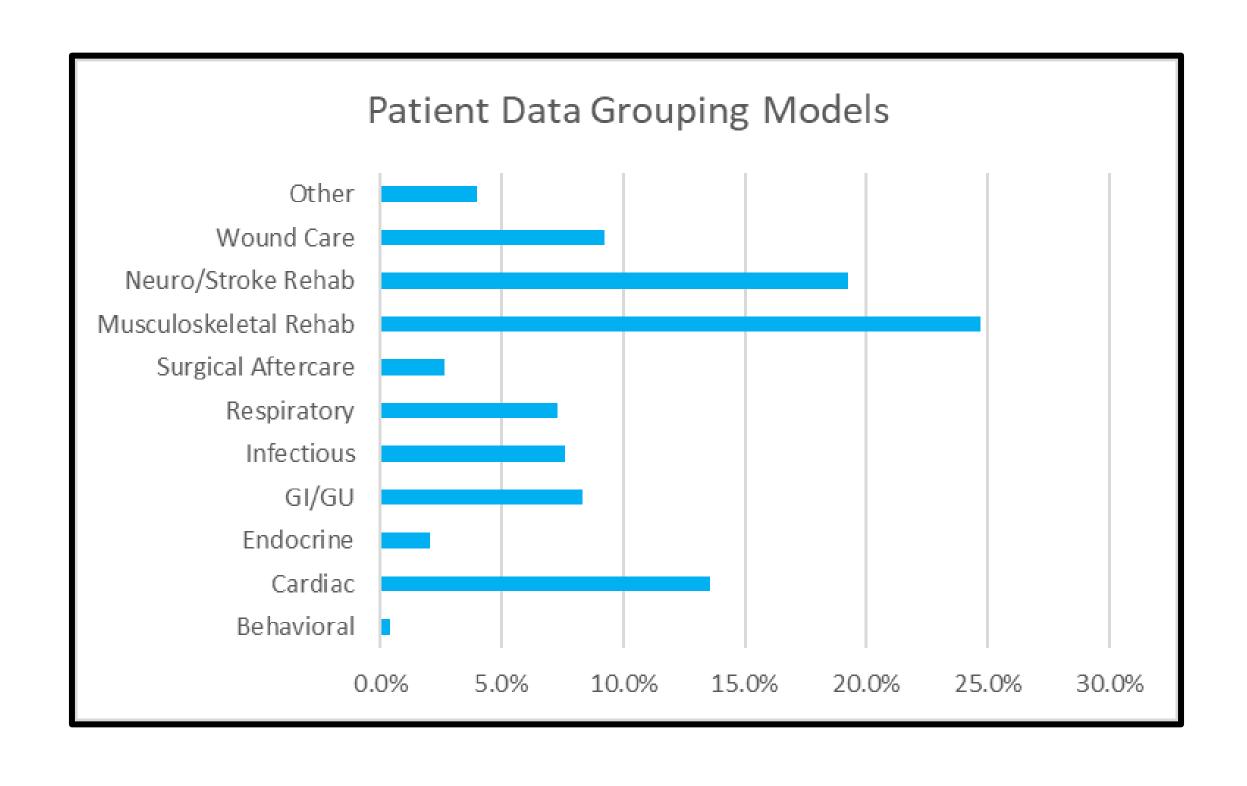


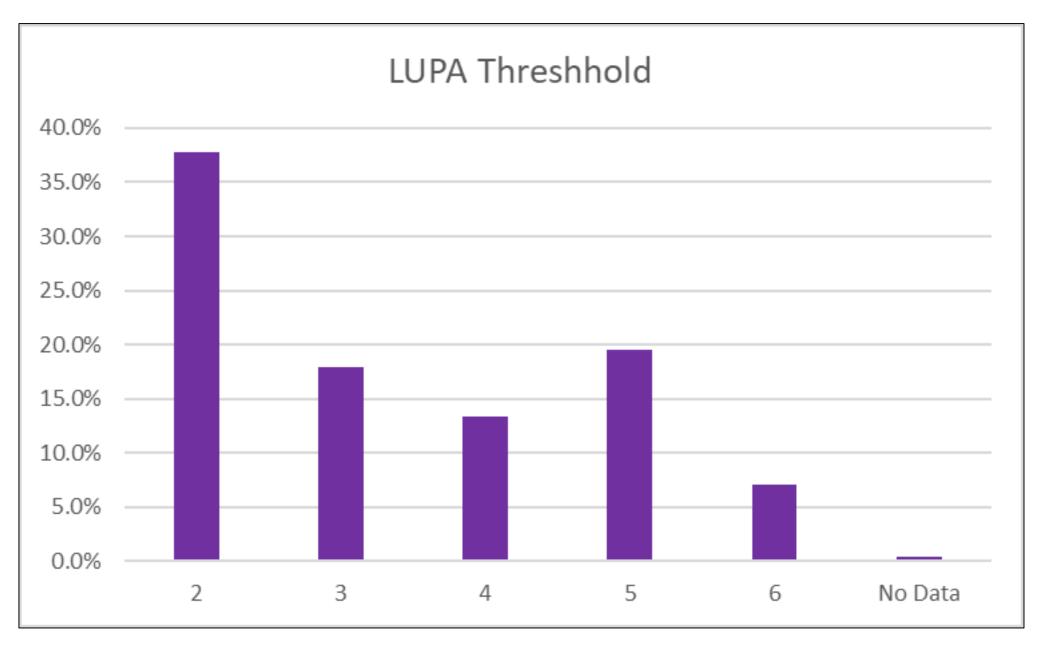






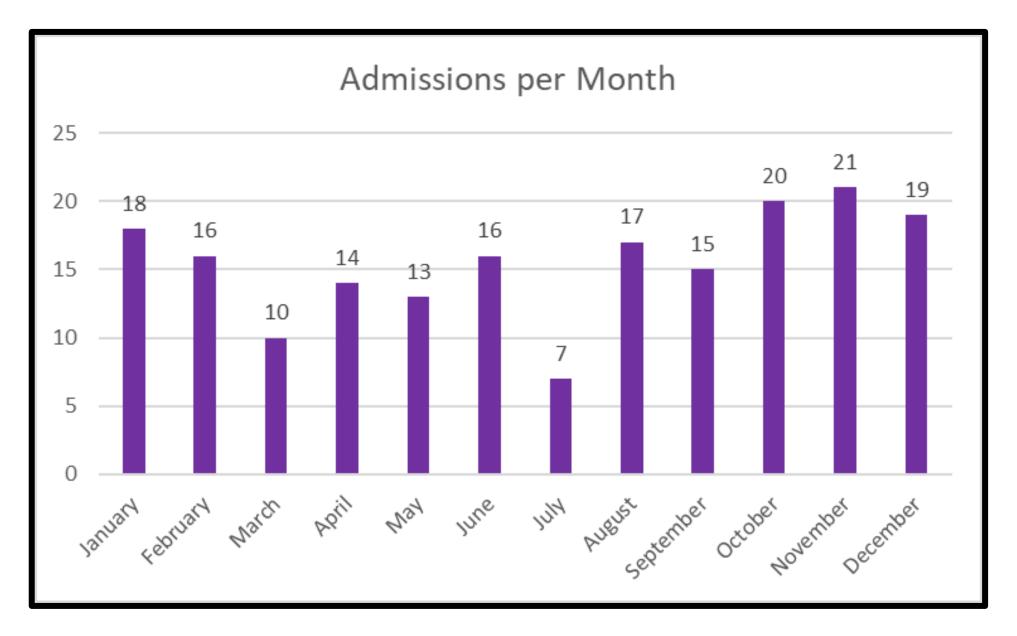






Total LUPA's = 12.2%





**Unduplicated Admissions 176** 

LOS Range from

Median LOS

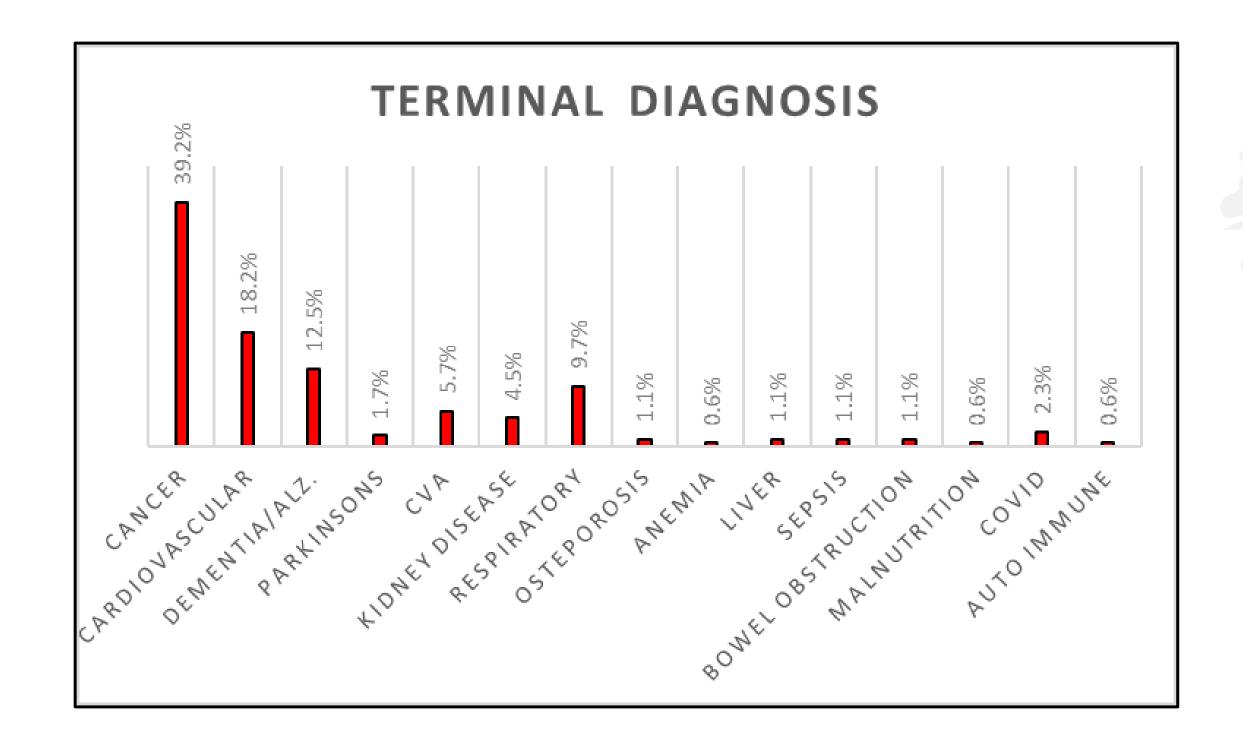
Average LOS

1 to 322

18.5

43.6

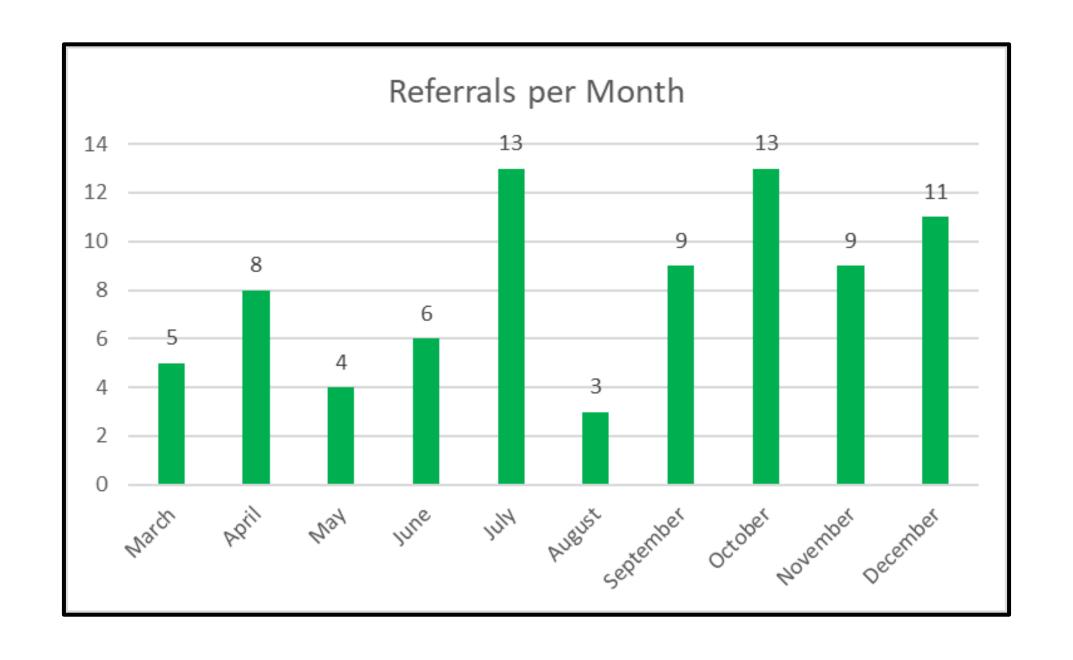






# Referral to Admission Breakdown

- 90 Referrals
- 61 Total Admissions
- 18 Non-admits
- 3 Deceased Prior to admission
- 6 Scheduled
- 1 Holding/1 Pending
- 16 Discharged to hospice
- 2 Discharged back to PCP
- 2 Discharged due to a move
- 3 Deceased on palliative care
- 38 Current Census



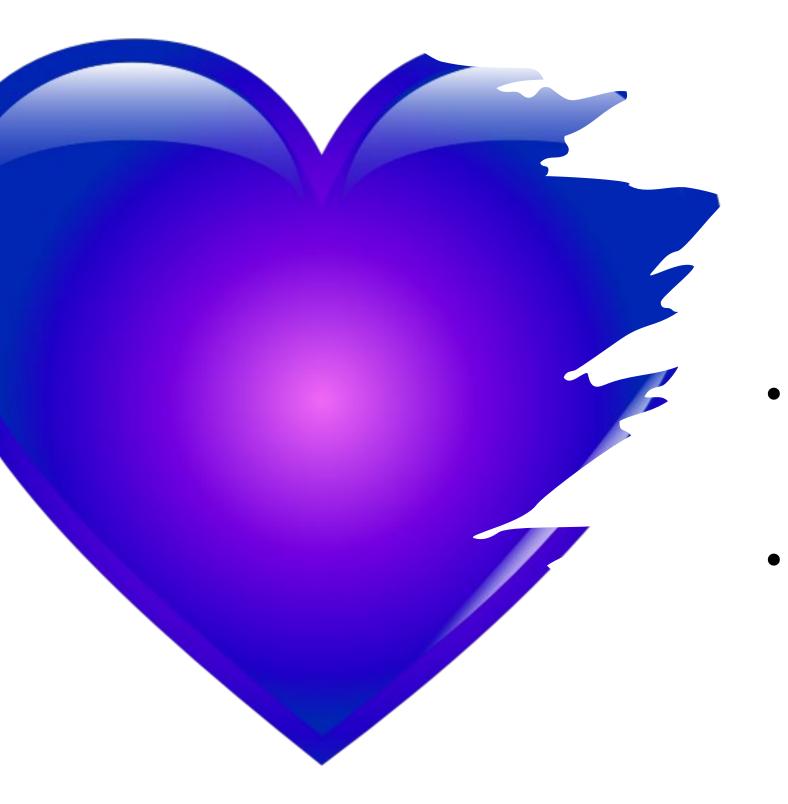
#### LOS...

- Range is from 1 to 195 days
- Median is 20 days
- Average is 34.9 Days

### Visits per Patient

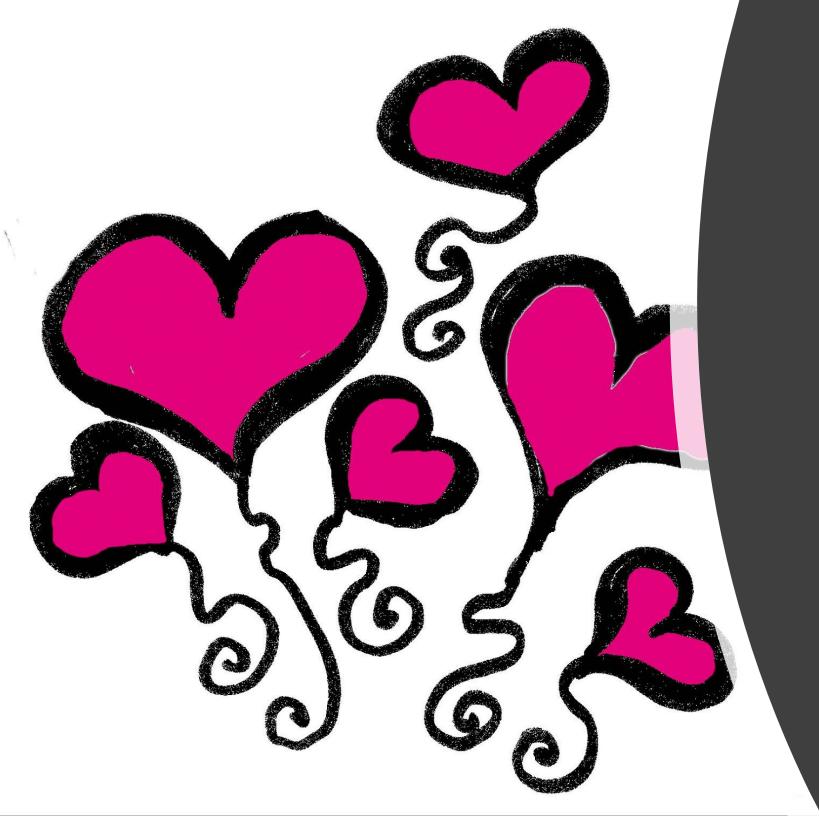
Average is 4.4





# 26% of Palliative Care Patients Transitioned to Hospice

- Non-Palliative Care hospice patients – Average LOS is 39.5 days
- Palliative Care hospice patients
  - Average LOS is 51.6 days



60% of Palliative Care patients that transitioned to Hospice chose to keep the hospice medical group (ARNP) as their attending provider while on Hospice



#### **Home Health QAPI 2022**

#### Patient Satisfaction:

- Overall Satisfaction and Willingness to recommend (VBP)
  - Care of the Patient Measures
    - Informed
    - Treated gently
    - Courtesy and respect
  - Specific Care Issues:
    - Medications
      - Ask to see/ Med review
      - Purpose /When to take/Side effects
- Standardized patient education
  - HH Patient Guide
- Wound Care Team
  - Lymphedema Management
- Administration
  - Supplies
  - AR
- OASIS Accuracy
  - OASIS Certification
  - Prep for OASIS E
  - Ongoing RN Education- OASIS Certification
  - Self-care and mobility measures (VBP)

- Case Management: A Team Approach
  - Pre-Admit Care Plans
  - Post Admit Care Plans for Patient
  - RN Consistency
  - 48 hour and 5 Day compliance
  - Financial management
  - Discharge planning and Discharge Criteria
  - Transitions of Care
    - HH to Hospice Transitions
    - HH to Outpatient
    - HH to PC
- Value Based Purchasing
  - Reducing Rehospitalization/Emergency Dept
    - Managing Fall Risk
  - Management of oral medications
  - Improvement in Dyspnea
- Access to Care
  - Scheduling
  - Automated Confirmation Calls

#### **Hospice QAPI 2022**

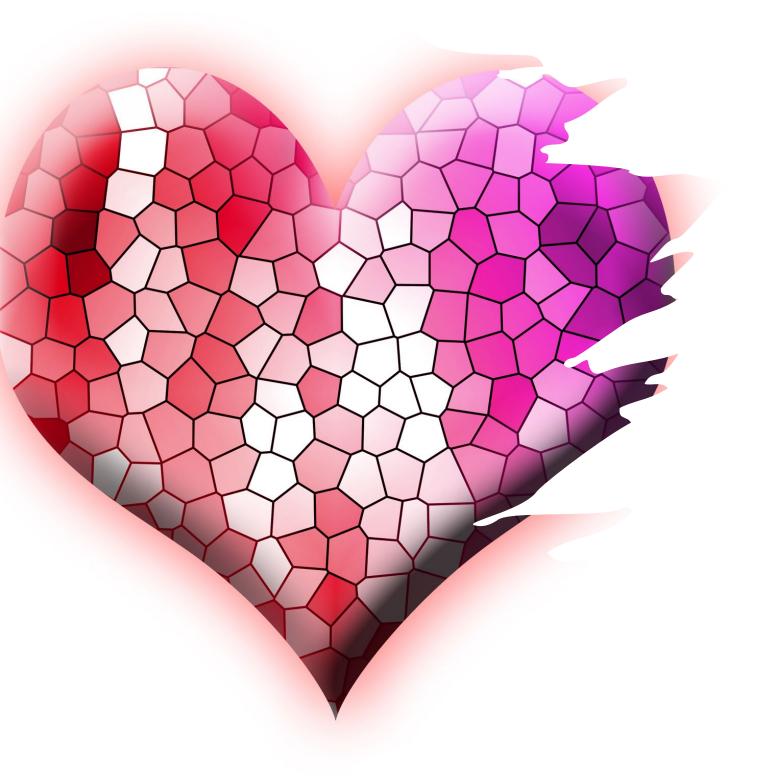
- Patient Satisfaction
  - Keep you informed when you would arrive
  - Discuss side effects of pain medication
- Physical Comfort/Symptom Management
  - PCA/Pain Pumps Implementation 1 Q 2022
  - Constipation
  - Anxiety
- Access and Coordination of Care
  - Community Liaison
  - Scheduling
  - Hospice Case Management
  - HH to Hospice Transitions
- Appropriate Care at End of Life
  - Management of the Short Length of Stay admission
    - Admitted when death is imminent

- Staff Satisfaction
  - Communication
  - Hospice and Palliative Care Certification
- Documentation and Compliance
  - New Quality Measures for 2022
  - Preparation for HOPE assessment tool
- Bereavement Program
  - Mailings
- Administration
  - Supply Management
  - CTI/Orders Process

#### **Palliative Care**

#### 2022

- Quality Measures
  - Outcome Measures
- Program expansion
  - MA/LPN
  - Second Provider



#### New Employees Hired in 2021

• RN's 9

• OT 1

• MSW 1

• HH Aide 1

• CTS/PAR 3

• Admin. 2

• ARNP1

Total Turnover of 35%

**Current Staffing** 

- Open 1.0 FTE RN (3)
- Open 0.6 FTE RN (1)
- Open Per Diem RN (3)
- Open 2.0 HH Aide (2)
- Open 0.6 or 0.8 MA/LPN (1)
- Open 1.0 PAR (1)



# Employee of the Quarter

# Marisa Jenkins

"Marisa ... anticipates what the next workday will entail and prepares for it at the end of every day. She makes sure her teammates are always comfortable by reaching out to them asking what they need, or if she can help. It gives a genuine feeling of caring and warmth. ...

[Marisa] treats every one that comes through the doors with the equality she would treat her own mother. ...

I don't think I've worked with someone who was as caring and genuinely eager to help others. Her attitude isn't just "positive" it radiates through the department and becomes contagious."

# Care Team Specialist II- Rehab

First Quarter 2022





## Provider of the Quarter

# Gary Forbes, MD

"Dr. Forbes shows great professionalism when working with other teams like pharmacy and Covid nurses ...

Dr. Forbes is one of two providers in the medical group that is prescribing "Oral Therapeutics" for our Covid positive patients.

He volunteered to do this and work through the kinks of the process. He was just happy we were able to help the patient.

Dr. Forbes from day one of this project has given great feedback on what works and what doesn't, how we can help streamline the process for both the providers and the patients."

Medical Group
First Quarter 2022





# Team of the Quarter

# EVS Team

"...This group of employees receive an assignment or work area everyday work and are often called away. I have seen them leave their regularly scheduled work to come to the ACU often. They come willing and with a smile. Always ready to help. Often, we think of EVS as "housekeeping" this group of employees is so much more. They are at the ready to help with a mess and ...to help move things about the unit ... Each and every member of our EVS staff is always on top of it! They are always quick to respond, even when they are slammed. They are so appreciated!"

First Quarter 2022





# Leader of the Quarter

# Jacob Stokes

A few accolades from Jacob's staff:

"He works tiring endless night shifts ... to ensure coverage and patient care"
"He is always there for us no matter what. His door is always open, and I
know that if I have a problem Jacob will listen and will come up with a
solution. I witnessed many situations when people were upset and went to
talk to Jacob and came out smiling knowing that everything is going to be ok."

"Jacob is a great leader, technologist, and a caring supervisor. I witnessed many techs (including myself) coming back to JH's lab because of Jacob and his leadership.

"For the first time in my almost 20 years long career, I feel appreciated and valued."



# Director, Laboratory First Quarter 2022



# Jefferson Healthcare

February 2022 Finance Report

March 23, 2022

Tyler Freeman, CFO

# February 2022 Operating Statistics

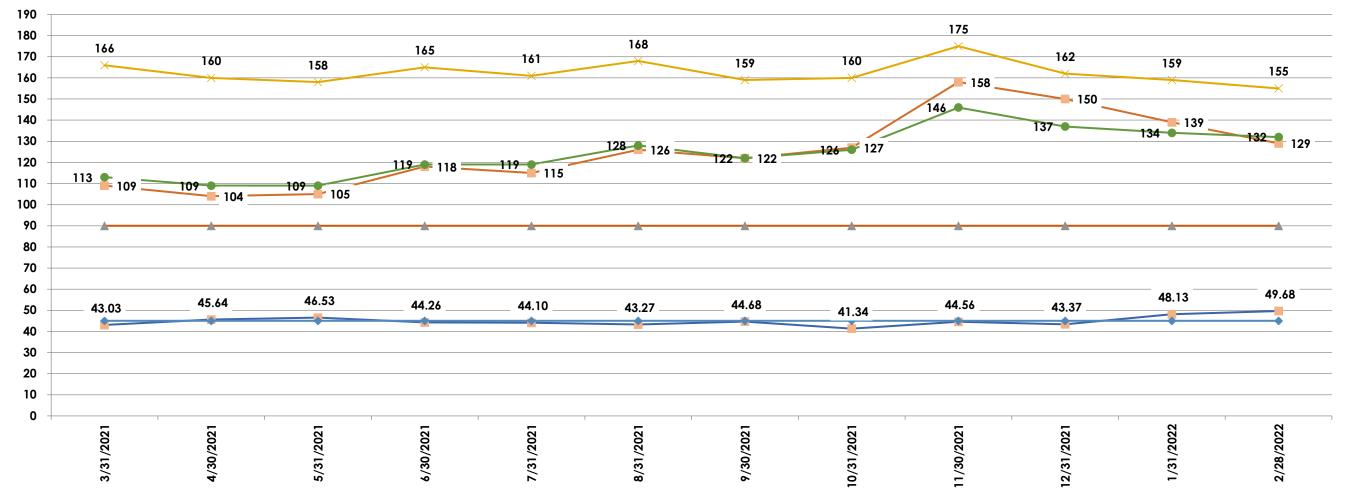
	FEBRUARY 2022					FEBRUARY 2021				
STATISTIC DESCRIPTION	MO ACTUAL	MO BUDGET	% VARIANCE	YTD ACTUAL	YTD BUDGET	% VARIANCE	MO ACTUAL	% VARIANCE	YTD ACTUAL	% VARIANCE
FTEs - TOTAL (AVG)	571	625	9%	571	. 625	9%	614	7%	614	7%
ADJUSTED PATIENT DAYS	2,549	2,538	0%	5,222	5,347	-2%	2,527	1%	4,964	5%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	110	68	62%	218	144	51%	43	156%	130	40%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	292	250	17%	642	526	22%	193	51%	484	25%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	402	333	21%	860	701	23%	267	51%	660	23%
SURGERY CASES (IN OR)	96	125	-23%	206	264	-22%	102	-6%	229	-11%
SPECIAL PROCEDURE CASES	43	71	-39%	75	150	-50%	67	-36%	121	-61%
LAB BILLABLE TESTS	19,995	20,108	-1%	43,230	42,370	2%	19,187	4%	40,264	7%
TOTAL DIAGNOSTIC IMAGING TESTS	3,002	2,934	2%	5,970	6,179	-3%	2,746	9%	5,656	5 5%
PHARMACY MEDS DISPENSED	17,879	19,207	-7%	38,563	40,471	-5%	15,966	12%	36,265	6%
RESPIRATORY THERAPY PROCEDURES	3,135	2,705	16%	7,141	5,701	25%	2,113	48%	4,725	34%
REHAB/PT/OT/ST RVUs	7,087	8,844	-20%	14,765	18,635	-21%	8,240	-14%	16,812	-14%
ER CENSUS	848	891	-5%	1,820	1,877	-3%	782	2 8%	1,636	10%
DENTAL CLINIC	403	389	4%	778	819	-5%	274	47%	5 577	26%
TOTAL RURAL HEALTH CLINIC VISITS	5,402	5,889	-8%	11,108	12,411	-10%	5,355	5 1%	10,925	2%
TOTAL SPECIALTY CLINIC VISITS	3,299	3,543	-7%	6,573	7,464	-12%	3,397	-3%	6,507	1%

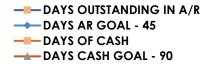
#### February 2022 Income Statement Summary

	February 2022 Actual	February 2022 Budget	Variance Favorable/ (Unfavorable)	%	February 2022 YTD	February 2022 Budget YTD	Variance Favorable/ (Unfavorable)	%	February 2021 YTD
Operating Revenue									
<b>Gross Patient Service Revenue</b>	21,958,141	24,930,850	(2,972,709)	-12%	46,923,916	52,532,862	(5,608,946)	-11%	44,722,092
Revenue Adjustments	10,028,947	13,431,864	3,402,917	25%	23,472,491	28,302,856	4,830,365	17%	24,651,745
Charity Care Adjustments	167,246	191,048	23,802	12%	278,199	402,564	124,365	31%	574,656
Net Patient Service Revenue	11,761,948	11,307,938	454,010	4%	23,173,226	23,827,442	(654,216)	-3%	19,495,691
Other Revenue	913,174	503,935	409,239	81%	1,746,786	1,061,862	684,924	65%	836,131
Total Operating Revenue	12,675,122	11,811,873	863,249	7%	24,920,012	24,889,304	30,708	0%	20,331,822
Operating Expenses									
Salaries And Wages	6,571,590	5,931,618	(639,971)	-11%	12,491,072	12,498,767	7,695	0%	11,391,954
Employee Benefits	1,433,423	1,378,883	(54,539)	-4%	2,918,380	2,905,504	(12,876)	0%	2,892,085
Other Expenses	4,613,580	4,198,874	(414,705)	-10%	8,909,892	8,847,629	(62,263)	-1%	7,508,250
Total Operating Expenses	12,618,593	11,509,376	(1,109,216)	-10%	24,319,344	24,251,900	(67,444)	0%	21,792,289
Operating Income (Loss)	56,529	302,497	(245,967)	-81%	600,668	637,404	(36,736)	-6%	(1,460,467)
Total Non Operating Revenues (Expenses)	(14,973)	2,979	(17,952)	603%	(46,856)	6,277	(53,133)	846%	(64,171)
Change in Net Position (Loss)	41,556	305,476	(263,920)	-86%	553,812	643,681	(89,869)	-14%	(1,524,638)
1									
Operating Margin	0.4%	2.6%	-2.1%	-82.6%	2.4%	2.6%	-0.15%	-5.9%	-7.2%
Total margin	0.3%	2.6%	-2.3%	-87.3%	2.2%	2.6%	-0.36%	-14.1%	-7.5%
Salaries & Benefits as a % of net pt svc rev	-68.1%	-64.6%	-3.4%	-5.3%	-66.5%	-64.6%	-1.85%	-2.9%	-73.3%

# February 2022 Cash and Accounts Receivable







#### February 2022 Board Financial Report

Department	Account	Descrption	Feb Actual	Feb Budget	Feb Variance	2022 YTD Actual	2022 YTD Budget	YTD Variance
							_	
BOARD	600010	MANAGEMENT & SUPERVISION WAGES	4,827	4,177	(651)	10,971	8,801	(2,171)
	601100	BENEFITS FICA	528	295	(233)	813	621	(192)
	601150	BENEFITS WA F&MLA	7	5	(2)	17	10	(7)
	601400	BENEFITS MEDICAL INS-UNION	2,676	5,039	2,363	5,981	10,617	4,636
	601600	BENEFITS RETIREMENT	-	-	-	-	-	-
	601900	BENEFITS EMPLOYEE ASSISTANCE	8	-	(8)	17	-	(17)
	602300	CONSULT MNGMT FEE	-	-	-	-	-	-
	602500	AUDIT FEES	-	4,219	4,219	-	8,890	8,890
	604200	CATERING	-	75	75	-	158	158
	604500	OFFICE SUPPLIES	-	-	-	-	-	-
	604850	COMPUTER EQUIPMENT	-	-	-	-	-	-
	606500	OTHER PURCHASED SERVICES	-	153	153	14,564	323	(14,240)
	606700	MARKETING	-	-	-	-	-	-
_	609300	DUES AND SUBSCRIPTIONS	-	-	-	-	-	
	609400	TRAVEL/MEETINGS/TRAINING	-	729	729	-	1,536	1,536
	609999	CLEARING	-	-	-	-	-	-
BOARD Total			8,046	14,691	6,645	32,362	30,956	(1,406)

#### March 2022 Preview – (\*as of 0:00 3/23/22)

#### • \$29,101,957 in Projected HB charges

Average: \$938,773/day (HB only)

• Budget: \$882,907/day

• 106% of Budget

#### • \$11,956,889 in HB cash collections

• Average: \$385,706/day (HB only)

• Goal: \$390,700/day

#### • 46.8 Days in A/R

Questions

# Jefferson Healthcare

Administrative Report

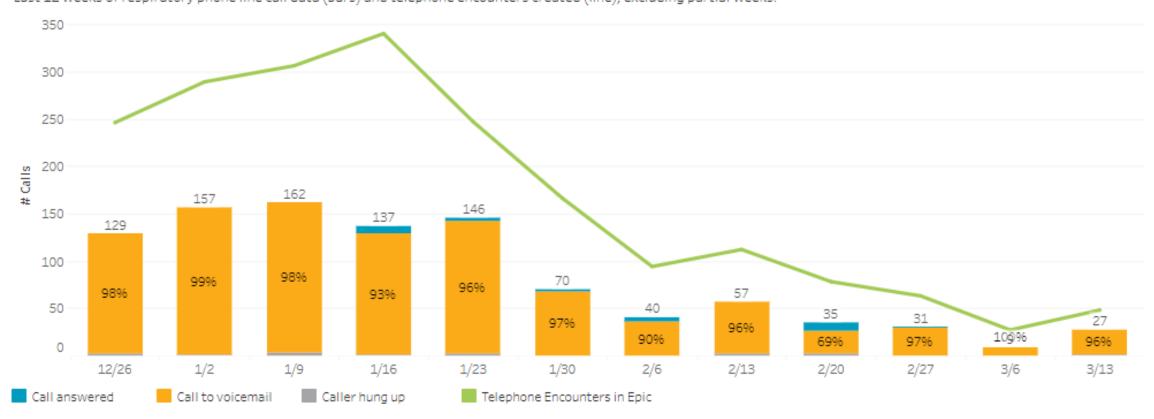
March 23, 2022

Mike Glenn, CEO

#### 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
Calls to the Respiratory Eval/COVID-19 nurse line since March 2020.
This chart is updated weekly.

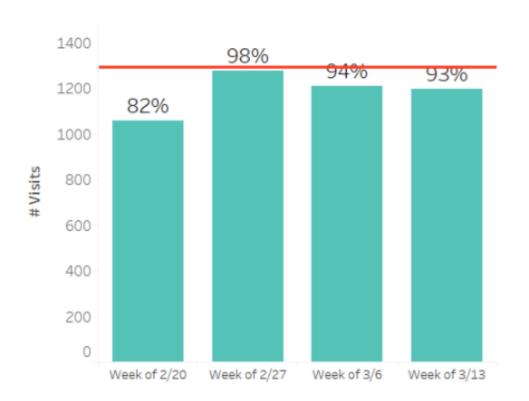
Inbound Calls	382,608
Calls Answered	296,113
Telephone Encounters Created	33,309

Total Respiratory Evaluation Clinic vists - all time Visits to the Respiratory Eval Clinic (7th Street) and drive-through testing station from March 2020 through November 2021 when both locations were closed.

Drive-Through	18,065
Total	18,065

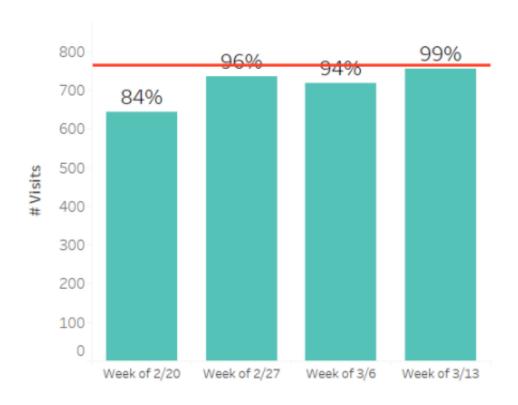
#### Primary Care variance to budgeted visits

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.



#### 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.



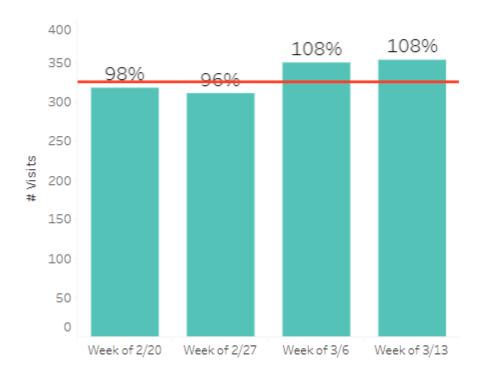
Includes visits in: Sheridan, Watership, Townsend, Port Ludlow and South County primary care clinics and the Dental Clinic.

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.

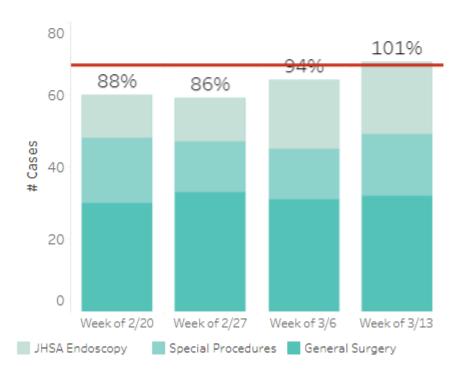


#### Surgical case variance to target cases

Surgical case volumes. 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.



Emergency Department and Express Clinic Volume

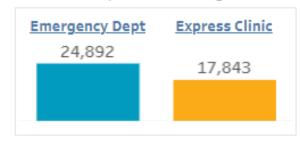
Volumes by Arrival Department and Week, 2020 - 2021

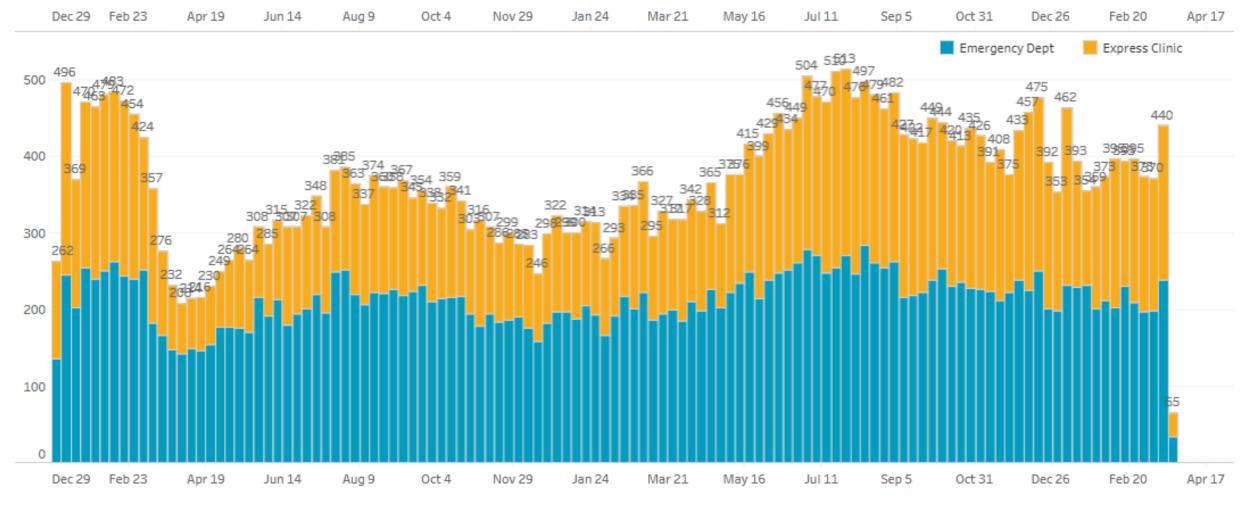
#### Week in Focus

Hover over a week below to view underlying data.

	7/11/2021
Total	470
Express Clinic	222
Emergency	248

Total Visits, 1/1/2020 to 3/21/2022 Select a department to bring in focus.





## Advocacy | State

Legislative session adjourned Thursday, March 10.

#### Bills that passed session

- SHB 1616: Concerning the Charity Care Act
- SHB 1735: Modifying the standard for use of force by peace officers.
- E2SSB 5600: Concerning the sustainability and expansion of state registered apprenticeship programs
- 2SSB 5736: Concerning partial hospitalizations and IOP treatment for minors.

# Bills that did not pass this session

- E2SHB 1868: Improving worker safety and patient care by addressing staffing needs, overtime, meal and rest breaks (nurse ratios)
- SHB 1741 Addressing affordability through health care provider contracting.
- HB 2083: Addressing consent to long-term care placement and services.

## Advocacy | State Budget

- Health care workforce education and pipeline
  - Supports an additional 180 nursing education slots at the UW and community colleges. \$5m
  - Funding support for a BSN program at Eastern Washington University. \$6.2m
  - Simulation labs. \$15.2m
- Difficult to discharge and long length of stay
  - Invest in the long-term care system. \$269.3m
- Behavioral health
  - Significant investments in behavioral health. \$206.8m
- Washington Medical Coordinating Center
  - Fully funded through the remainder of this biennium

## Advocacy | Federal

- Congressionally Directed Funding (earmarks) have opened for Representative Kilmer and Senators Cantwell and Murray.
  - Ask will focus on purchasing a linear accelerator for oncology.
  - Also green technology for the new building.

## **Administrative Update**

 Agreement with design team/general contractor for campus expansion planning process

 Organizational improvement work- Huron activity and scheduled leadership development institute

DNV is in the house. Annual 3-day survey

AHA/WSHA common themes

# Agreement with Design Team/Contractor for Campus Expansion Planning and Design Process

- Abbott Construction/ZGF
  - Seattle based, deep healthcare design and construction experience
  - Project launch meeting March 9<sup>th</sup>, internal stakeholder design meetings March 22, 24, Workshop 1 scheduled for April 5<sup>th</sup>.
  - Community interactive meetings begin in April
  - Budget

Q2	Q3	Q4	Total
920,000	640,000	GMP established, additional fees based on size and scope of the project	1,560,000
2022 budget		3,000,000	

## High Level Goals of The Project

Replace and/or retrofit our vulnerable buildings

Relocate and expand mission-critical infrastructure and services

 Improve, modernize and expand clinical space to meet the needs of our community

 Finance with Jefferson Healthcare cash reserves, debt, and (if necessary) community support.

## Other

# Questions