

Jefferson County Public Hospital District No.2 Board of Commissioners Meeting Sheridan Conference Room Upper 915 Sheridan Building

This meeting will be held in person in the Sheridan Conference Room and on Teams. Please see the link below to access this meeting remotely.

<u>Audio Only:</u> dial Phone Conference Line: (509) 598-2842 When prompted, enter Conference ID number: 572 938 342#

#### Jefferson County Public Hospital District No. 2 Board of Commissioners, Regular Session Minutes Thursday, July 26, 2023

#### Call to Order:

The meeting was called to order at 2:00 pm by Board Chair Buhler-Rienstra. Present were Commissioners Buhler-Rienstra, Dressler, Kolff, McComas, and Ready. Also, in attendance were Mike Glenn, Chief Executive Officer, Tyler Freeman, Chief Financial Officer, Jake Davidson, Chief Operating Officer, Brandie Manuel, Chief Patient Safety and Quality Officer, Tina Toner, Chief Nursing Officer, and Christina Avila, Executive Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

#### Approve Agenda:

Commissioner Ready made a motion to approve the agenda. Commissioner Dressler seconded. **Action:** Motion passed unanimously.

#### Patient Story:

Tina Toner, Chief Nursing Officer, shared a patient letter giving praise for the care they received by Holly, Kylie, Dr. Pratt, and the 3<sup>rd</sup> floor staff during their stay. They mentioned that the television guide was incorrect. Tina noted that the television guide has since been revised and distributed. Discussion ensued.

<u>Team, Leader, Employee of the Quarter:</u> Caitlin Kura, Executive Recruiter, announced the Team, Leader, and Employee of the Quarter. The team of the quarter was Facilities. The leader of the quarter was Kelly O'Connell. The employees of the quarter were Olga Alexander and Elizabeth Maxey. Discussion ensued.

#### Public Comment:

No public comment was made.

#### Minutes:

June 29, 2023 Special Session Minutes

Commissioner Ready made a motion to approve the Special Session Minutes. Commissioner McComas seconded.

Action: Motion passed unanimously.

#### Required Approvals: Action Requested

- Resolution 2023-09 Surplus Equipment
- Resolution 2023-10 Cancelled Warrants
- June Warrants and Adjustments
- Medical Staff Credentials/ Appointments/ Reappointments

Board Chair Buhler-Rienstra requested a clarification of two warrants that were being canceled before inviting a motion to approve. Discussion ensued. Commissioner Ready made a motion to approve the Required Approvals. Commissioner Dressler seconded.

**Action:** Motion passed unanimously.

#### **Financial Report:**

Tyler Freeman, Chief Financial Officer, presented the June Financial Report. Discussion ensued.

<u>Quality Report:</u> Brandie Manuel, Chief Patient Safety and Quality Officer, presented the July Quality report including near-miss reporting, moving to safety-focused briefings instead of Covid-related briefings, and compliments for Express Clinic, Juan, Marcus, Dr. Carlson, and Dr. Kaatz. Discussion ensued.

#### Project Update:

Jake Davidson, Chief Operating Officer, presented the July project update. Discussion ensued.

#### Administrative Report

Mike Glenn, Chief Executive Officer, presented the July Administrative report and Dr. Mattern provided an ACO Board Update. Discussion ensued.

#### **Board Business:**

• Board of Health Report

Commissioner Kolff shared a Board of Health Report which included the expansion project and fairground kitchen space, and Dunia's report on climate change with the expansion project. Discussion ensued.

Foundation Update

Commissioner Dressler provided an update on the community tour in the oncology unit and Mike's presentation on the expansion project. Discussion ensued.

Meeting Evaluation

Commissioners evaluated the meeting.

#### Conclude:

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

Action: Motion passed unanimously.

The meeting concluded at 4:30 pm.

Approved by the Commission:

Chair of Commission: Jill Buhler Rienstra

Secretary of Commission: Marie Dressler



# PATIENT STORY

#### Jefferson General TV Channels as of 6/27/23

CHANNEL	NAME	COMMENTS
2	C-SPAN	US Govt Info
3	CBC Vancouver	Canada, Eh?
4	KOMO	ABC Seattle
5	KCTS9	PBS Seattle, usually 9
6	KONG	Secondary channel of KING5
7	KIRO	CBS Seattle
8	KCPQ13	Fox Seattle, usually 13
9	KING5	NBC Seattle, usually 5
10	KSTW / CW11	CW Network, usually 11
11	MeTV Seattle	"Classic" old TV shows
12	DayStar	Religious Network
13	ION TV	Entertainment and Family
14	FOX13+	Secondary channel of KCPQ
15	TBN	Religious Network
16	INSP	Old Western TV shows
17	Create	Secondary PBS channel
18	Universal Kids	Children's Programming
19	START TV	"Classic" crime dramas
20	Tru Crime Network	True Crime shows
21	Cozi TV	Vintage TV shows
22	LAFF	Vintage Comedy Shows
23	Charge!	Action/Adventure Programs
24	Charge!	Identical to 23
25	Music Choice	Нір Нор
26	Music Choice	R&B Classics
27	Music Choice	Adult Alternative
28	Music Choice	Rock Hits
29	Music Choice	Pop Hits
30	Music Choice	Solid Gold Oldies

# TEAM of the quarter | Q2

## Facilities Team | Facilities Department

"They have worked tirelessly to build out new spaces and are putting all the dominoes in place so that everyone else can continue to do their work throughout this transition and do it successfully."





### EMPLOYEES of the quarter | Q2

# Olga Alexander | Laboratory

"Her positive presence and passion for Jefferson Healthcare is contagious."







### EMPLOYEES of the quarter | Q2

# Elizabeth Maxey | Laboratory

"Liz always goes above and beyond to help her team members out and ensure we can take care of our patients."





# LEADER of the quarter | Q2

# Kelly O'Connell | Dept

"She leads with humor, grace, and kindness. ... it's always let's see how we can find a solution that works for all."







# Jefferson Healthcare

June 2023 Finance Report

July 26th, 2023

Tyler Freeman, CFO

# June 2023 Operating Statistics

			JUNE	2023		- 1		JUNE	2022	
STATISTIC DESCRIPTION	MO ACTUAL	MO BUDGET	% VARIANCE	YTD - ACTUAL	YTD BUDGET	% VARIANCE	MO ACTUAL	% VARIANCE	YTD ACTUAL	% VARIANCE
FTEs - TOTAL (AVG)	611	688	11%	601	L 688	13%	592	-3%	609	1%
ADJUSTED PATIENT DAYS	3,195	2,943	9%	19,422	2 17,754	9%	3,737	-14%	16,540	17%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	96	104	-8%	519	630	-18%	105	-9%	635	-22%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	285	287	-1%	1,759	1,733	2%	278	3%	1,747	1%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	386	407	-5%	2,312	2,462	-6%	383	1%	2,392	-3%
SURGERY CASES (IN OR)	143	129	11%	768	3 779	-1%	130	10%	741	4%
SPECIAL PROCEDURE CASES	98	69	42%	517	7 414	25%	88	11%	394	24%
LAB BILLABLE TESTS	21,515	21,128	2%	126,590	) 127,472	-1%	21,378	1%	126,008	0%
TOTAL DIAGNOSTIC IMAGING TESTS	3,904	3,130	25%	21,583	18,884	14%	2,958	32%	18,170	16%
PHARMACY MEDS DISPENSED	27,158	19,256	41%	129,948	3 116,175	12%	19,800	37%	117,138	10%
RESPIRATORY THERAPY PROCEDURES	3,122	3,153	-1%	17,680	19,026	-7%	2,589	21%	18,270	-3%
REHAB/PT/OT/ST	8,531	9,153	-7%	49,944	55,221	-10%	8,919	-4%	51,189	-2%
ER CENSUS	1,233	1,033	19%	6,973	6,235	12%	1,142	. 8%	5,987	14%
DENTAL CLINIC	521	406	28%	2,901	L 2,447	19%	383	36%	2,390	18%
TOTAL RURAL HEALTH CLINIC VISITS	7,065	6,410	10%	41,219	38,668	7%	6,591	7%	36,434	12%
TOTAL SPECIALTY CLINIC VISITS	3,997	3,785	6%	23,334	22,833	2%	3,786	6%	21,532	8%

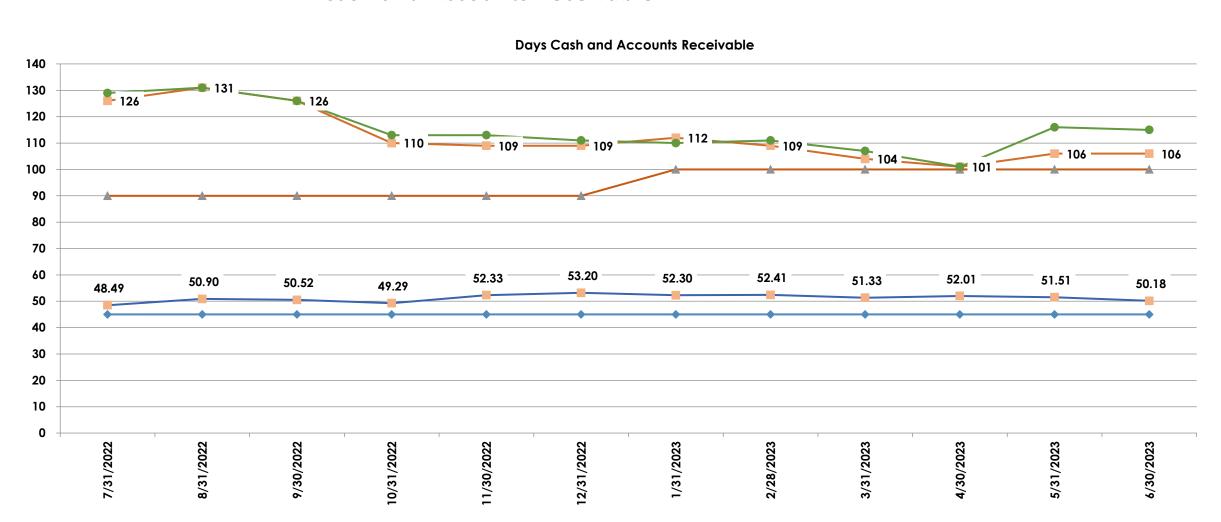
June 2023

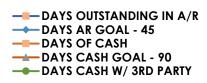
### **Income Statement Summary**

	June 2023 Actual	June 2023 Budget	Variance Favorable/ (Unfavorable)	%	June 2023 YTD	June 2023 Budget YTD	Variance Favorable/ (Unfavorable)	%	June 2022 YTD
Operating Revenue									
<b>Gross Patient Service Revenue</b>	31,619,121	28,540,100	3,079,021	11%	176,707,128	172,191,937	4,515,191	3%	156,383,484
Revenue Adjustments	17,513,825	15,336,271	(2,177,554)	-14%	95,474,296	92,528,835	(2,945,461)	-3%	84,218,908
Charity Care Adjustments	272,325	181,825	(90,500)	-50%	1,557,284	1,097,010	(460,273)	-42%	756,915
Net Patient Service Revenue	13,832,971	13,022,004	810,967	6%	79,675,549	78,566,092	1,109,457	1%	71,407,661
Other Revenue	1,306,432	438,037	868,396	198%	4,624,539	2,642,820	1,981,719	75%	4,517,348
Total Operating Revenue	15,139,404	13,460,041	1,679,363	12%	84,300,088	81,208,912	3,091,176	4%	75,925,009
Operating Expenses	6 286 069	6 676 973	390 903	6%	37 712 862	40 284 402	2 571 540	6%	36 788 259
Salaries And Wages	6,286,069	6,676,973	390,903	6%	37,712,862	40,284,402	2,571,540	6%	36,788,259
Employee Benefits	1,156,538	1,513,904	357,366	24%	8,982,410	9,133,886	151,475	2%	8,491,188
Other Expenses	5,904,791	4,878,862	(1,025,929)	-21%	34,472,141	29,435,800	(5,036,341)	-17%	28,552,124
Total Operating Expenses	13,347,398	13,069,738	(277,660)	-2%	81,167,414	78,854,088	(2,313,325)	-3%	73,831,571
Operating Income (Loss)	1,792,005	390,302	1,401,703	359%	3,132,675	2,354,824	777,851	33%	2,093,439
Total Non Operating Revenues (Expenses)	124,507	(1,674)	126,181	7537%	822,650	(10,101)	832,752	8244%	(99,456)
Change in Net Position (Loss)	1,916,513	388,628	1,527,884	393%	3,955,325	2,344,723	1,610,602	69%	1,993,982
Operating Margin	11.8%	2.9%	8.9%	308.2%	3.7%	2.9%	0.82%	28.2%	2.8%
Total margin	12.7%	2.9%	9.8%	338.4%	4.7%	2.9%	1.80%	62.5%	2.6%
Salaries & Benefits as a % of net pt svc rev	-53.8%	-62.9%	9.1%	14.5%	-58.6%	-62.9%	4.29%	6.8%	-63.4%

**June 2023** 

#### **Cash and Accounts Receivable**





### **July 2023**

Preview - (\*as of 0:00 7/26/23)

### -\$28,922,597 in Projected HB charges

Average: \$932,987/day (HB only)

• Budget: \$947,481/day

• 98.5% of Budget

### -\$11,918,277 in HB cash collections

Average: \$384,461/day (HB only)

• Goal: \$417,444/day

### -48.0 Days in A/R

#### –Questions



# Be a great place to receive care. Strategic Goal #1: Deliver the highest quality care.

Strategies	Initiatives					
Cultivate a deep-rooted culture of safety.	<ul> <li>1.Connect every employee to their role in patient safety and quality</li> <li>2.Develop a system of shared accountability by being accountable for systems and for responding to behavioral choices in a fair and just manner</li> <li>3.Identify and mitigate the root causes for safety events and near misses</li> </ul>					
Deliver care that is guided by the best evidence	<ul> <li>1.Promote active engagement of the medical staff in clinical quality monitoring and improvement</li> <li>2.Ensure that the highest standards of practice are met.</li> <li>3.Promote wellness and manage chronic disease</li> <li>4.Seek and maintain meaningful accreditation</li> <li>5.Enhance the use of technology, data and analytics to improve quality and safety</li> </ul>					
Eliminate health disparities	<ul><li>1.Implement a comprehensive equity program</li><li>2.Embed equity index into quality reporting</li><li>3.Actively work to eliminate health disparities</li></ul>					

## Quarter 2: Quality and Safety Performance

## Cultivate a deeprooted culture of safety

### Overall Perception of Safety baseline 66%

- Survey vendor finalized and survey launch date October 1st
- Increased feedback about events

#### Communication (Patient Perspective)

- •Inpatient MD/RN Communication: (goal > 75.5) 68.3\*
- •Emergency: (goal > 89.3) 75.0
- •Ambulatory: (goal > 89.3) 89.8

### Frequency of events reported (increase from Q1):

- 109 total events reported
- 29 near miss events reported

### Deliver care guided by the best evidence

#### Inpatient

- 30-day Inpatient Readmissions\*
   6% in 2nd Quarter
- IP Stroke\*: 8/8 measures met

#### **OB** Quality

- Early Elective Deliveries 0%
- Newborn complications: 0%

#### Ambulatory

- •Stroke Care\* reports in progress; Time to CT\* (goal < 25 min)
- •Wellness 17.3% (MAWE); Well Child 31.2%
- •Colonoscopy follow up\* 100%

# Eliminate health disparities

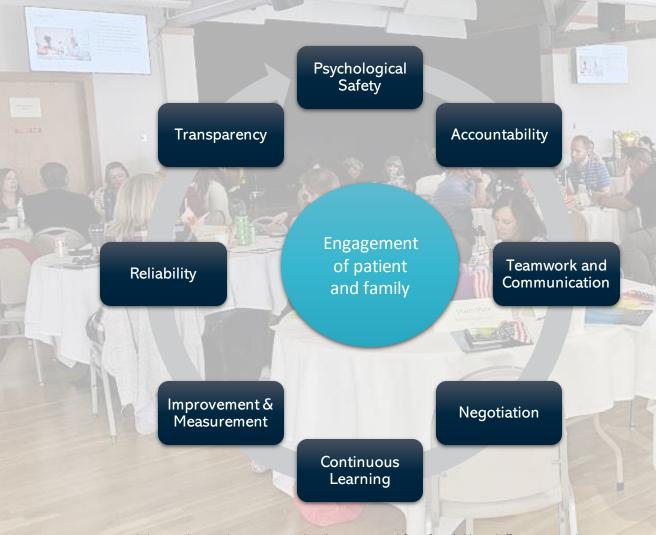
# Implement a comprehensive equity program

- Preparing for program certification/accreditation
- Review of standards/programs in progress

# Embed equity index into quality reporting:

• New metrics added: Maternal Morbidity and Mortality and Restraint Utilization

# Quality and Safety Highlight: Cultivate a deep-rooted culture of safety.



### Our leaders at work:

- Optimizing technology/system integration
- Standardizing workflows for patient safety event management
- Leader training and support for safety events
- Transparency and timely sharing of lessons learned
- Increased situational awareness, communication and teamwork
- Accountability: Daily status reports for event review/follow up

# Quality and Safety Highlight: Cultivate a deep-rooted culture of safety.

I would like to express my gratitude to both of you for promptly reporting the near miss event in which a safety practice of two RN checks on allergy vials helped identify an error from the provider's office. This practice of 2 RN check is a new process and your quick adoption of the practice helped prevent potential harm to our pediatric patient! Hooray!

#### You are both Safety Superstars!



Congratulations and thank you for your commitment to providing the best and safest care for our patients!

Dani

2022 Safety Events



**Near Miss** Reporting increased from 17% to 25%

May to July 2023

median days until event closure 46 less than last reporting period

Anonymous Reporting decreased from 85% to 68%



# Be a great place to receive care.



# Jefferson Healthcare In the words of our patients.

#### Hospital Visit:

- Excellent care by doctors nurses. Discharge instructions and explanation of further care & referral were precise and complete. Hospitalist provided explanations and excellent care, answered questions during daily visits.
- My experience was extraordinary! I couldn't have been more satisfied. Beautiful care, respectful, joyful staff. Food was amazing! If you have to been in the hospital - I give this one 5 stars!



#### Physician/APP Specific:

- Dr. Dr. Carlson and his assistant were terrific. Extremely caring, knowledgeable and on-time. They're awesome. treated me like a human being, and he did very well in taking care of me
- It's always a good experience wit Dr Harris and his nurse assistants. Appointments never feel hurried and I feel heard and included. Dr Harris is always very thorough and seems truly interested in helping to figure out issues
- Dr Katz took time with me we discussed my health issues then listened to me cry for a few minutes

#### ED/Express Clinic:

- You have an awesome team. Expand the hospital, we need you!
- Your hospital and staff are Fantastic. Top rate. And human. I am so grateful to have you close by. Please never lose your humanness. Thank you for taking care of me.
- EC: Everyone was wonderful, from the initial check in to the Dr. They were all so nice, caring yet professional. It was a very good experience. I just moved to the community and was so impressed with how I was treated.

#### OP testing and Rehab:

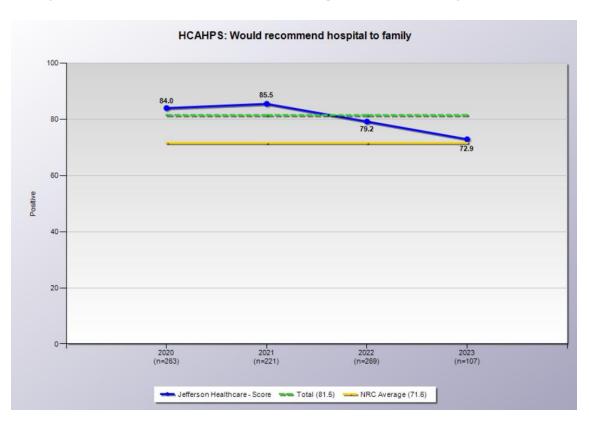
- Very pleasant, considering no one enjoys a mammogram
- The only bad thing is the waiting room chairs are not comfortable on my body
- Juan is an excellent lab tech and I've never been disappointed when getting my labs drawn by him.
- Marcus was very professional, a good listener and explained things very well. I'd say 11 out of 10

#### Medical Group:

- I was surprised at how smooth my appt. Went. Very professional. I might say I had to wait almost a year for my appt. That's not good.
- Thankful the clinic is close to home with a local pharmacy too.
- Nice, friendly, local
- i love every one of the health care team i have here!!

# Service: Be a Great Place to Receive Care

### **Inpatient Overall Rating (annually)**



#### **Ambulatory: Would you recommend**

QUESTION: NPS: Facility would recommend							
Question Pod	YTD	Last 3 Months	Last Month	n-size	Score	Bench- mark	Gap
OP-Oncology	90.5	90.9		11	90.9	76.9	14.0
OP-Rehab	88.4	86.7	80.2	255	86.7	76.9	9.8
MP-Facility Focused	85.2	85.9	85.4	3,551	85.9	76.9	9.0
OP-Testing	85.9	85.5	81.9	1,973	85.5	76.9	8.6
Emergency	66.9	68.9	67.7	373	68.9	76.9	-8.0

#### Positive Feedback:

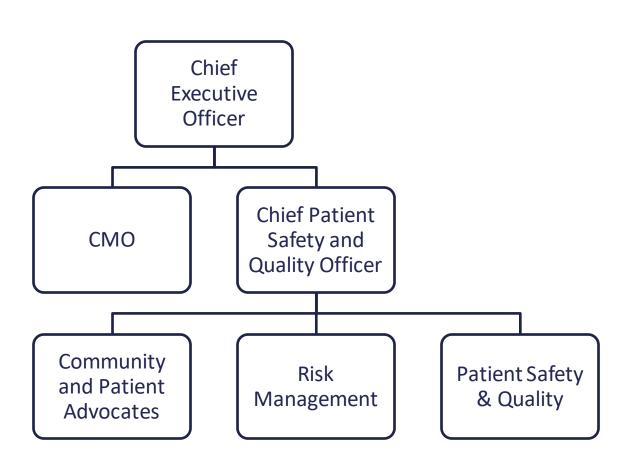
- Recognition
- Courtesy/Respect
- Presence

#### **Detractors:**

- Wait time
- Communication
- Scheduling
- Pain



# Service Update: Community and Patient Advocacy



#### What is changing:

- First point of contact for our community:
  - Including key messages/changes/updates proactively
- Streamlined/integrated reporting
- Increased communication and teamwork: Weekly huddles and monthly meetings

#### What is *not* changing:

- Champions of the patient experience
- Point of contact for patient concerns, feedback and grievances
- Support for care navigation/way-finding
- Support for timely resolution process and leader support in closing patient feedback/ grievances.



# Service: Be a Great Place to Receive Care

### Community Advocacy Focus Areas

Name of Initiative	Action(s)					
Guide patients	Analyze patient feedback trends and navigation needs/requests; identify one pilot department, and work with leadership to improve patient wayfinding.					
Coach and Empower Leaders	Support and encourage leader-led real time service recovery, including review and closure of tickets in NRC Health.					
Leverage existing data	Continuous monitoring of RealTime Feedback and assignment of feedback to leaders. Send thank you notes for exceptional service.					
Training and education of Service Standards	Develop curriculum for patient facing (particularly patient access) staff members and implement training. Create standard competencies and include these in annual training requirements.					
Ensure equitable access to care	Evaluate patient feedback by race/demographics; participate in the HEC; include training regarding equity in service training. Re-launch the patient and family advisory Council (version 2.0).					
Care for our caregivers (Human Connection and Alignment and buy-in)	Celebrating our wins! A larger emphasis will be placed on appreciating the care team with tangible, real feedback that is positive and complimentary.					

### **Program Goals:**

Make it easier for our community to engage with our healthcare system

Guide patients through every encounter

Prioritize a culture of compassion and kindness

Support our leaders and care for our caregivers







### Level 1 Floor Plan





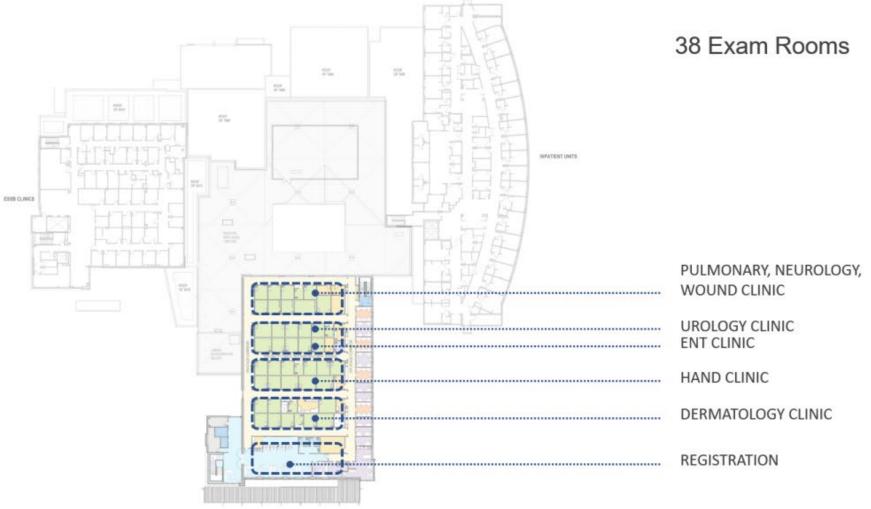








### Level 2 Floor Plan













# **Key Transitions Timeline**

- Dietary and Kitchen- Complete
- Human Resources- Complete
- Modular and Orchard lot work- August 1<sup>st</sup>
  - Modular Complete- September 20th
- Administration- August-September
- Express- August 24th
- OBGYN- September 16<sup>th</sup>
- Abatement- October 16<sup>th</sup>
- Mobile MRI Operational- October 27th

# Pre GMP Cost- Design

- Spent prior to July: \$5,230,049.45
  - June Invoice: \$576,673.28
- Total Paid \$4,653,376.16
  - We have been under budget by finding many savings opportunities that allowed up to reinvest
- Remaining \$6,591,139.49
  - Amendment 4 Early procurement for long lead time items: \$5,109,469
- Modular and Laydown: \$600,000



# Total Construction Cost (GMP)



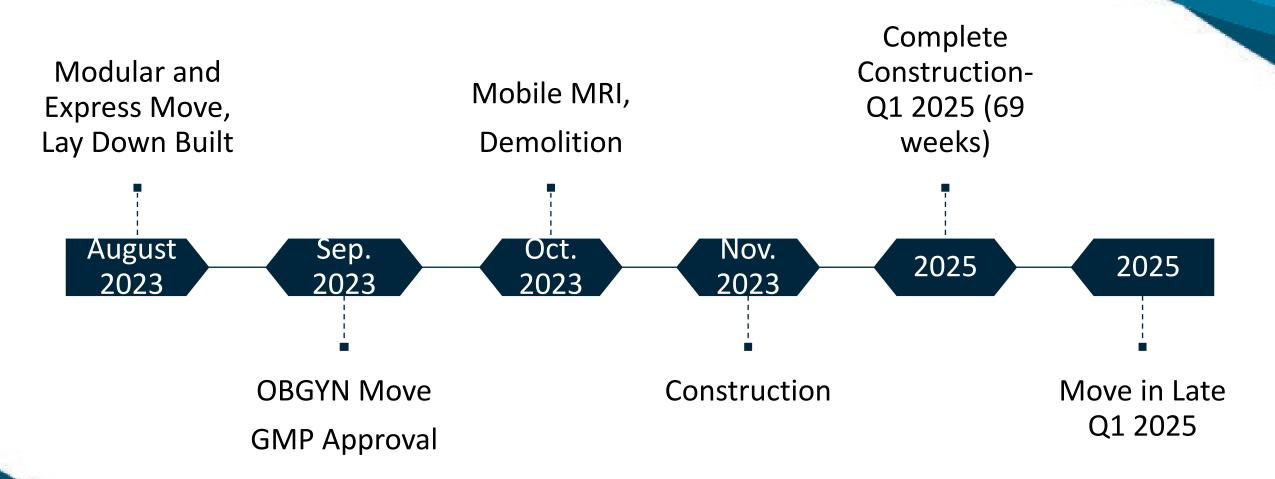
• Construction \$56,571,672

• Soft Costs \$13,501,112

• Contingency \$2,535,247

• Other Construction Items \$11,243,667

• Projected GMP \$83,851,698





# Sources of Funding

- Federal Government
  - Radiation Oncology FY 2023: \$2.5 Million
  - Specialty Services FY 2024: \$2 Million (pending)
- Washington State
  - Reproductive Health FY 2023: \$4 Million
  - Jefferson Healthcare Foundation: \$2.5 Million (in process)
- Cash/Capital
- Funding
  - Bank Placement and Public Offering

# August 23<sup>rd</sup> Board Meeting

- Seek an approval to a resolution delegating authority to Mike to approve the final terms of the bonds to be sold on the public market
  - Brad Berg is drafting up with past similar forms we have used.
  - The resolutions will describe the terms of the bonds and will set maximum parameters with respect to:
    - Principal amount of bonds
    - Interest rate
    - Maturity
    - Redemption rights
    - Period during which the bonds can be issued

# September 27<sup>th</sup> Board Meeting

- Seek an approval of our Guaranteed Maximum Price and our Notice to Proceed.
  - Abbott will present us with Guaranteed Maximum Price on July 31st.
  - We will do a deep review with our legal counsel then negotiation with Abbott through August. Focused mostly on the Exhibits and Assumptions as part of the pricing.
  - Reminder on GMP: Outside of Jefferson initiated change orders, Abbott holds all the risk in the construction being on budget. Any savings, we get.
- Seek an approval to a resolution delegating authority to Mike to approve the final terms of the bonds to be privately placed with a bank.

# Jefferson Healthcare

**Administrative Report** 

July 26, 2023

Mike Glenn, CEO

# Advocacy | State

- District and next-door-district transitions for legislative session 2024 continue.
- Developing advocacy priorities for 2024 legislative session. Will be a lighter session after the whirlwind of the last few years.
- Planning our summer advocacy event coupled with an early groundbreaking presentation.
- Paperwork begins for the State funding allocation for Reproductive and Gynecological Health services.

POLITICS

Christine Rolfes will be new Kitsap County commissioner, resign from Senate



Nathan Pilling

District 24 senator eyes state lands role

Van De Wege wants to manage resources

By Peninsula Daily News

Representative Mike Chapman announces campaign for 24th District Senator

July 12, 2023 7:33AM PDT







# Advocacy | Federal

- Rural Advocacy Days is around the corner. Planning meetings have begun with staff; board representatives will begin to see meetings shortly.
- Developing a (relatively) light federal policy agenda that highlights rural healthcare access.
- Labor-H Bill (Senate LHHS) due to be marked up 7/27. Will know more about Expanding Senior Care proposal by the end of the week.

# Value Based Purchasing

A Monthly Review

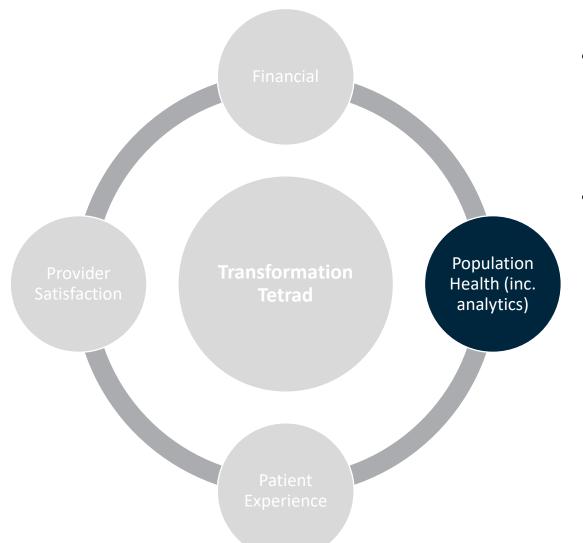
July 2023

# Jefferson Accountable Care, LLC

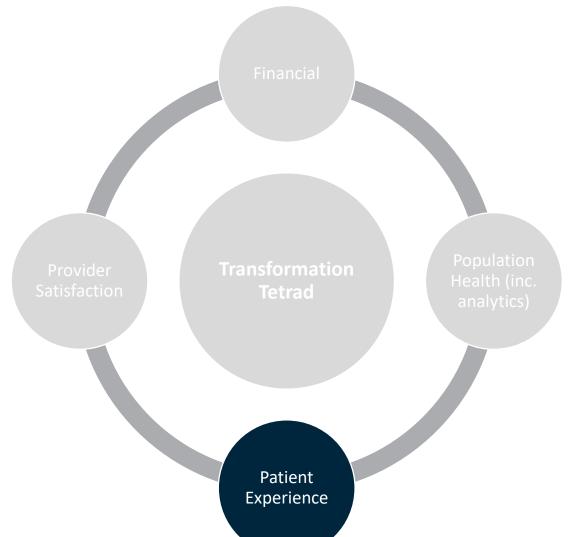
Jefferson Healthcare is committed to innovative, patient-centered and physician-and-APP-driven models for care transformation.

Jefferson Accountable Care is made up of over 8,000 Medicare-covered lives in our community.

Jefferson Accountable Care solely consists of Jefferson Healthcare patients and is operated by Jefferson Healthcare staff.

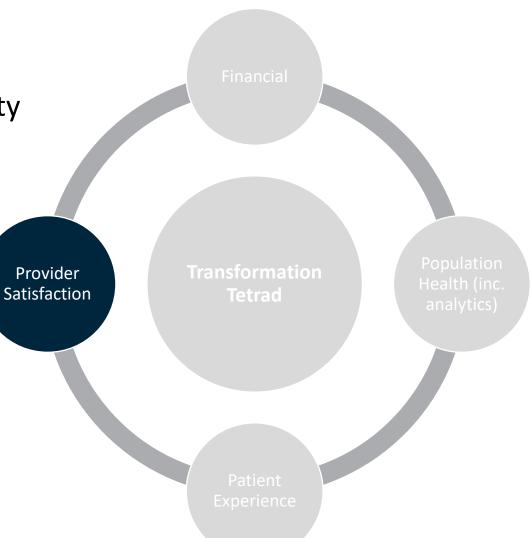


- The Data and Analytics team has created an ACO utilization dashboard.
- This will be important as we begin care coordination efforts to support providers in caring for their patient panels.



- Partnering with Medical Group and Primary Care to support improvement in quality metrics.
- Beneficiary notification will go out August.

 Using this opportunity to support an expanded care team model to truly wraparound care.



• If shared savings are realized, we will have funding to reinvest into our systems. We will develop a proposal and present to the Board for approval.

**Financial** 

# Admin Report

• Introduction, Molly Propst, Chief Human Resources Officer

Meet Our Chief Human Resources Officer!

#### MOLLY PROPST, M.S., SHRM-SCP



START DATE: TUESDAY, AUGUST 1<sup>ST</sup>

EDUCATION: CULVER-STOCKTON COLLEGE, B.A. IN PSYCHOLOGY & MUSIC, AND ILLINOIS STATE UNIVERSITY, M.S. IN PSYCHOLOGY WHY JEFFERSON HEALTHCARE: I LIVED IN THE TACOMA AREA IN THE EARLY 2000'S. I ENJOYED LIVING IN THE PACIFIC NORTHWEST AND WHEN MY KIDS AND I MADE THE DECISION TO RELOCATE FROM MISSISSIPPI, WE FELT THE AREA WOULD BE IDEAL. I HAD VISITED THE OLYMPIC PENINSULA MANY YEARS AGO AND WAS SOMEWHAT FAMILIAR WITH PORT TOWNSEND, SO THE CHRO OPENING AT JH GRABBED MY INTEREST. AS I RESEARCHED THE ORGANIZATION, I WAS IMPRESSED WITH YOUR ACCOMPLISHMENTS EVEN DURING THE MOST CHALLENGING OF TIMES IN THE HEALTHCARE INDUSTRY. THEN, WHEN I VISITED IN PERSON, JH EMPLOYEES PROVED TO BE AMONG THE MOST AUTHENTIC, CARING, AND DEDICATED PEOPLE I HAVE HAD THE PRIVILEGE TO MEET. IT WAS CLEAR FROM MY DIRECT EXCHANGES WITH EMPLOYEES AND FROM OBSERVING YOU INTERACT WITH EACH OTHER THAT YOU CARE DEEPLY ABOUT EACH OTHER AND YOUR PATIENTS. I BELIEVE IT IS IMPORTANT FOR EACH OF US TO FIND FULFILLMENT AND JOY AT WORK AND THAT ONE OF THE CRITICAL ASPECTS TO ACCOMPLISHING THIS IS CHOOSING AN ORGANIZATION THAT SHARES YOUR VALUES. JH DELIVERS THIS FOR ME, INCLUDING THE LEADERSHIP TEAM'S VALUE OF ITS WORKFORCE. I AM SO EXCITED TO GET TO BE A PART OF IT AND ACCOMPLISH EVEN MORE GREAT THINGS TOGETHER!

HOMETOWN: IRONTON/ARCADIA, MISSOURI

**FUN FACT**: I DON'T FLUENTLY SPEAK ANY LANGUAGES OTHER THAN ENGLISH, BUT I CAN SING IN SEVERAL LANGUAGES INCLUDING ITALIAN, FRENCH, GERMAN, LATIN, AND SPANISH.

PERSONAL INTERESTS: I GREW UP JUST SOUTH OF ST. LOUIS, MISSOURI, AND AM STILL AN AVID ST. LOUIS CARDINALS AND ST. LOUIS BLUES FAN. I AM AN ANIMAL LOVER AND HAVE BEEN ACTIVE IN RESCUE ORGANIZATIONS, INCLUDING BEING A FOSTER HOME FOR DISPLACED ANIMALS ALL MY ADULT LIFE. MY TWO KIDS---BOTH OF WHOM ARE RELOCATING WITH ME TO PORT TOWNSEND---ARE ALSO ANIMAL LOVERS AND WE EACH HAVE OUR OWN PET. MINE IS A 120-POUND GREAT DANE NAMED ASHBY GRACE WHO THINKS SHE IS A LAPDOG.

HOW DO YOU SPEND A DAY OFF: I HAVE BEEN LIKENED TO A HUMMINGBIRD AND ENJOY BEING ACTIVE. I TEND TO SPEND A LOT OF MY FREE TIME OUTSIDE SWIMMING, KAYAKING, AND GARDENING. IN THE NOT-SO-DISTANT PAST I RAN LONG DISTANCES AND ASHBY GRACE MAKES A GREAT RUNNING BUDDY. I ALSO SPEND FREE TIME PLAYING THE PIANO, SINGING, AND MAKING MUSIC WITH OTHERS INCLUDING MY OLDEST SON WHO PLAYS THE GUITAR.



# Admin Report

- Radiation Therapy
- Expanding Telehealth Services
- Other

# Questions