

Due to the presence of multiple respiratory illness, Jefferson Healthcare is still highly encouraging practice of infection protocols. You may choose to attend this meeting virtually by accessing the below information or can attend in person in the Sheridan Conference Room at 915 Sheridan Street. Limited seating available.

Audio Only: dial Phone Conference Line: (509) 598-2842

When prompted, enter Conference ID number: 572 938 342#

Microsoft Teams meeting: Join on your computer or mobile app.

This option will allow you to join the meeting live.

[Click here to join the meeting](#)

**Jefferson County Public Hospital District No. 2
Board of Commissioners, Regular Session Minutes
Wednesday, January 24, 2024**

Call to Order:

The meeting was called to order at 2:01 pm by Board Chair Buhler Rienstra. Commissioners in attendance included Commissioners Dressler, McComas, Kolff and Ready. Also, in attendance were Mike Glenn, CEO, Tyler Freeman, Chief Financial Officer, Jake Davidson, Chief Operating Officer, Molly Propst, Chief Human Resources Officer, Brandie Manuel, Chief Patient Safety and Quality Officer, Tina Toner, Chief Nursing Officer, Dunia Faulx, Chief Planning and Advocacy Officer, and Christina Avila, Executive Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

Approve Agenda:

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

Commissioner Kolff made a motion to amend the agenda to include a resolution of the Jefferson County Public Hospital District #2 Board Regarding the Fundamental Human Rights of all People in Conflict Zones. Commissioner Ready seconded. Commissioner Dressler declined the motion to amend the agenda. Discussion ensued. Commissioner Kolff stated that his request is not a friendly amendment. Discussion ensued.

Action: Motion passed with three ayes.

Election of Officers:

Commissioner Dressler motioned to nominate Jill Buhler-Rienstra for Board Chair. Commissioner McComas seconded. Discussion ensued.

Action: Motion passed unanimously.

Commissioner Kolff motioned to nominate Marie for Board Secretary. Commissioner McComas seconded. Discussion ensued.

Action: Motion passed unanimously.

Patient Story:

Tina Toner, CNO shared a patient letter which included compliments from a patient guardian of vulnerable adults in Jefferson County for the Watership team, Leslie Brooks for her work with special needs patients, staff accommodating schedules if transportation is an issue, and Stacey in the Watership Clinic for assisting with a safe transfer from wheelchair to vehicle. Discussion ensued.

Public Comment:

Member of the public Doug Milholland shared concerns about weapons being sold to Israel from our state. Board Chair Buhler-Rienstra thanked Mr. Milholland for sharing his concerns.

Member of the public Daniel shared a request for Jefferson Healthcare to partner with Palestinian relief funds or Red Cross, or to provide supplies, surgery, and medical treatment, and provide staff when allowed. Board Chair Buhler-Rienstra thanked Daniel for his comment.

Member of the public Lori Bernstein shared her wishes that people did not get upset over the language in the proposed resolution that was added to the meeting agenda. Ms. Bernstein shared that she lost family in the Holocaust and read an article and shared that all access to health facilities in Gaza has been lost. Board Chair Buhler-Rienstra thanked Ms. Bernstein for her comment.

Minutes:

- December 20, 2023 Special Session Minutes

Commissioner Dressler made a motion to approve the December 20, 2023 Special Session Minutes. Commissioner McComas seconded. Commissioner Kolff abstained.

Action: Motion passed unanimously

Required Approvals: Action Requested

- Resolution 2024-01 December Cancelled Warrants
- Resolution 2024-02 January Cancelled Warrants
- December and January Warrants and Adjustments
- Medical Staff Credentials/Appointments/Reappointments

Commissioner Kolff made a motion to approve the Required Approvals. Commissioner Dressler seconded.

Action: Motion passed unanimously.

Financial Report:

Tyler Freeman, Chief Financial Officer, presented the November and December Financial Report. Discussion ensued.

Quality Report:

Brandie Manuel, Chief Patient Safety and Quality Officer, presented the January Quality Report, including investing in our leadership team, investing in our medical staff, investing in our front line, Emergency Management Committee drills, culture of safety survey, care delivery awards, accreditation for Pulmonary Rehabilitation program and advanced hip/knee replacement, and 2024 focus areas. Discussion ensued.

Project Update: Jake Davidson, Chief Operating Officer provided a project update. Discussion ensued.

Administrative Report

Mike Glenn, Chief Executive Officer, and Dunia Faulx, Chief Planning and Advocacy Officer, presented the January Administrative report. Discussion ensued. Dunia requested a motion to approve the WSHA agenda.

Commissioner Kolff made a motion to approve the WSHA agenda. Commissioner Dressler seconded. Discussion ensued.

Commissioner Kolff made a motion to approve the WSHA agenda with charity care program update. Commissioner Dressler seconded. Discussion ensued.

Action: Motion passed unanimously.

CMO Report

Dr. Mattern provided a CMO report including respiratory illness trends, inpatient and outpatient visits, bylaw changes for Medical Executive Committee, telehealth provider updates. Palliative Care staff updates, and Epic upgrades. Discussion ensued.

Break

Commissioners recessed for break at 4:16 pm.

Commissioners reconvened from break at 4:26 pm.

Executive Session

Board Chair Buhler Rienstra announced that they will go into Executive Session for forty-five (45) minutes to discuss the Performance of a Public Employee as allowed by RCW 42.30.110 (g).

Action is expected to be taken following the Executive Session.

Commissioners went into Executive Session at 4:25 pm.

Board Chair Buhler-Rienstra returned to regular session and announced they will go back into Executive Session for fifteen (15) minutes, until 5:30 pm.

Board Chair Buhler-Rienstra returned to regular session and announced they will go back into Executive Session for fifteen (15) minutes, until 5:45 pm.

Commissioners returned to regular session at 5:45 pm.
No public was present on the line.
No action was taken.

Board Business:

- Board of Health Report

Commissioner Kolff stated that he would save time for this meeting and not share a Board of Health report this month, but he will provide a double report next month.

Commissioner Kolff made a motion to approve the resolution of the Jefferson County Public Hospital District #2 Board Regarding the Fundamental Human Rights of all People in Conflict Zones. Commissioner Ready seconded. Discussion ensued.

Action: Two ayes, two nays. Commissioner Dressler abstained. Resolution failed due to a lack of majority. Discussion ensued.

Commissioner Kolff made a motion for the Board to authorize two board members to create an adjusted resolution to present to the Board at a later time. Commissioner McComas seconded. Commissioner McComas offered to assist Commissioner Kolff with the adjusted resolution.

Action: Four ayes. Commissioner Dressler abstained. Motion passed.

Meeting Evaluation:

Commissioners evaluated the meeting.

Conclude:

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

Action: Motion passed unanimously.

Meeting concluded at 6:07 pm.

Approved by the Commission:

Chair of Commission: Jill Buhler Rienstra

Secretary of Commission: Marie Dressler

Approved via MS Teams
Approved via MS Teams



November-December 2023 Finance Report

January 24th, 2024

Tyler Freeman, CFO

November 2023

Operating Statistics

STATISTIC DESCRIPTION	NOV 2023						NOV 2022			
	<u>MO</u> <u>ACTUAL</u>	<u>MO</u> <u>BUDGET</u>	<u>%</u> <u>VARIANCE</u>	<u>YTD</u> <u>ACTUAL</u>	<u>YTD</u> <u>BUDGET</u>	<u>%</u> <u>VARIANCE</u>	<u>MO</u> <u>ACTUAL</u>	<u>%</u> <u>VARIANCE</u>	<u>YTD</u> <u>ACTUAL</u>	<u>%</u> <u>VARIANCE</u>
FTEs - TOTAL (AVG)	655	688	5%	621	688	10%	588	-11%	574	-8%
ADJUSTED PATIENT DAYS	3,548	2,943	21%	32,440	32,761	-1%	3,230	10%	29,488	10%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	87	104	-16%	900	1,162	-23%	88	-1%	1,142	-27%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	316	287	10%	3,342	3,197	5%	317	0%	3,195	4%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	407	407	0%	4,313	4,542	-5%	418	-3%	4,431	-3%
SURGERY CASES (IN OR)	145	129	12%	1,434	1,438	0%	107	36%	1,344	6%
SPECIAL PROCEDURE CASES	79	69	14%	925	764	21%	66	20%	784	15%
LAB BILLABLE TESTS	21,847	21,128	3%	236,033	235,224	0%	19,833	10%	228,588	3%
TOTAL DIAGNOSTIC IMAGING TESTS	3,709	3,129	19%	40,738	34,845	17%	3,324	12%	33,412	18%
PHARMACY MEDS DISPENSED	16,495	19,256	-14%	231,242	214,379	8%	22,246	-26%	215,311	7%
RESPIRATORY THERAPY PROCEDURES	3,103	3,153	-2%	31,672	35,108	-10%	3,184	-3%	33,084	-4%
REHAB/PT/OT/ST	7,631	9,153	-17%	90,566	101,899	-11%	7,412	3%	89,222	1%
ER CENSUS	1,179	1,033	14%	13,052	11,505	13%	1,126	5%	11,693	10%
DENTAL CLINIC	499	406	23%	5,297	4,515	17%	399	25%	4,542	14%
TOTAL RURAL HEALTH CLINIC VISITS	7,134	6,410	11%	77,117	71,355	8%	6,282	14%	67,656	12%
TOTAL SPECIALTY CLINIC VISITS	3,878	3,638	7%	41,677	41,949	-1%	3,555	9%	38,613	7%

December 2023

Operating Statistics

STATISTIC DESCRIPTION	DEC 2023						DEC 2022			
	MO	MO	%	YTD	YTD	%	MO	%	YTD	%
	ACTUAL	BUDGET	VARIANCE	ACTUAL	BUDGET	VARIANCE	ACTUAL	VARIANCE	ACTUAL	VARIANCE
FTEs - TOTAL (AVG)	647	688	6%	622	688	10%	587	-10%	576	-8%
ADJUSTED PATIENT DAYS	3,575	3,041	18%	36,015	35,802	1%	3,445	4%	32,933	9%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	66	108	-39%	966	1,270	-24%	113	-42%	1,255	-30%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	372	297	25%	3,714	3,494	6%	365	2%	3,560	4%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	444	422	5%	4,757	4,964	-4%	478	-7%	4,909	-3%
SURGERY CASES (IN OR)	144	133	8%	1,578	1,571	0%	130	11%	1,474	7%
SPECIAL PROCEDURE CASES	77	71	8%	1,002	835	20%	54	43%	838	16%
LAB BILLABLE TESTS	21,348	21,832	-2%	257,381	257,056	0%	20,386	5%	248,974	3%
TOTAL DIAGNOSTIC IMAGING TESTS	3,647	3,235	13%	44,385	38,080	17%	3,397	7%	36,809	17%
PHARMACY MEDS DISPENSED	23,074	19,897	16%	254,316	234,276	9%	30,067	-23%	245,378	4%
RESPIRATORY THERAPY PROCEDURES	3,353	3,259	3%	35,025	38,367	-9%	3,507	-4%	36,591	-4%
REHAB/PT/OT/ST	6,830	9,458	-28%	97,396	111,357	-13%	6,183	10%	95,405	2%
ER CENSUS	1,217	1,068	14%	14,269	12,573	13%	1,248	-2%	12,941	9%
DENTAL CLINIC	374	419	-11%	5,671	4,934	15%	317	18%	4,859	14%
TOTAL RURAL HEALTH CLINIC VISITS	6,657	6,623	1%	83,774	77,978	7%	5,917	13%	73,573	12%
TOTAL SPECIALTY CLINIC VISITS	3,336	3,757	-11%	45,013	45,842	-2%	2,955	13%	41,568	8%

November 2023

Income Statement Summary

	November 2023 Actual	November 2023 Budget	Variance Favorable/ (Unfavorable)	%	November 2023 YTD	November 2023 Budget YTD	Variance Favorable/ (Unfavorable)	%	November 2022 YTD
Operating Revenue									
Gross Patient Service Revenue	31,427,360	28,540,100	2,887,260	10%	332,521,070	317,746,447	14,774,623	5%	290,162,346
Revenue Adjustments	17,399,147	15,336,271	(2,062,876)	-13%	180,909,971	170,743,817	(10,166,154)	-6%	155,977,931
Charity Care Adjustments	250,251	181,825	(68,426)	-38%	3,138,227	2,024,318	(1,113,910)	-55%	1,312,216
Net Patient Service Revenue	13,777,962	13,022,004	755,958	6%	148,472,872	144,978,313	3,494,559	2%	132,872,199
Other Revenue	353,910	438,037	(84,127)	-19%	6,731,692	4,876,806	1,854,885	38%	8,428,091
Total Operating Revenue	14,131,872	13,460,041	671,831	5%	155,204,564	149,855,119	5,349,445	4%	141,300,290
Operating Expenses									
Salaries And Wages	6,934,001	6,676,973	(257,028)	-4%	70,949,513	74,336,963	3,387,450	5%	66,768,967
Employee Benefits	1,370,107	1,513,904	143,797	9%	16,123,042	16,854,795	731,753	4%	15,607,837
Other Expenses	5,946,937	4,878,862	(1,068,075)	-22%	65,173,939	54,317,996	(10,855,943)	-20%	56,252,881
Total Operating Expenses	14,251,046	13,069,739	(1,181,307)	-9%	152,246,494	145,509,754	(6,736,740)	-5%	138,629,685
Operating Income (Loss)	(119,174)	390,302	(509,476)	-131%	2,958,070	4,345,365	(1,387,296)	-32%	2,670,605
Total Non Operating Revenues (Expenses)	18,230	(1,675)	19,905	1188%	1,156,297	(18,640)	1,174,937	6303%	225,619
Change in Net Position (Loss)	(100,943)	388,627	(489,570)	-126%	4,114,367	4,326,726	(212,359)	-5%	2,896,224
Operating Margin									
Operating Margin	-0.8%	2.9%	-3.7%	-129.1%	1.9%	2.9%	-0.99%	-34.3%	1.9%
Total margin	-0.7%	2.9%	-3.6%	-124.7%	2.7%	2.9%	-0.24%	-8.2%	2.0%
Salaries & Benefits as a % of net pt svc rev	-60.3%	-62.9%	2.6%	4.2%	-58.6%	-62.9%	4.25%	6.8%	-62.0%

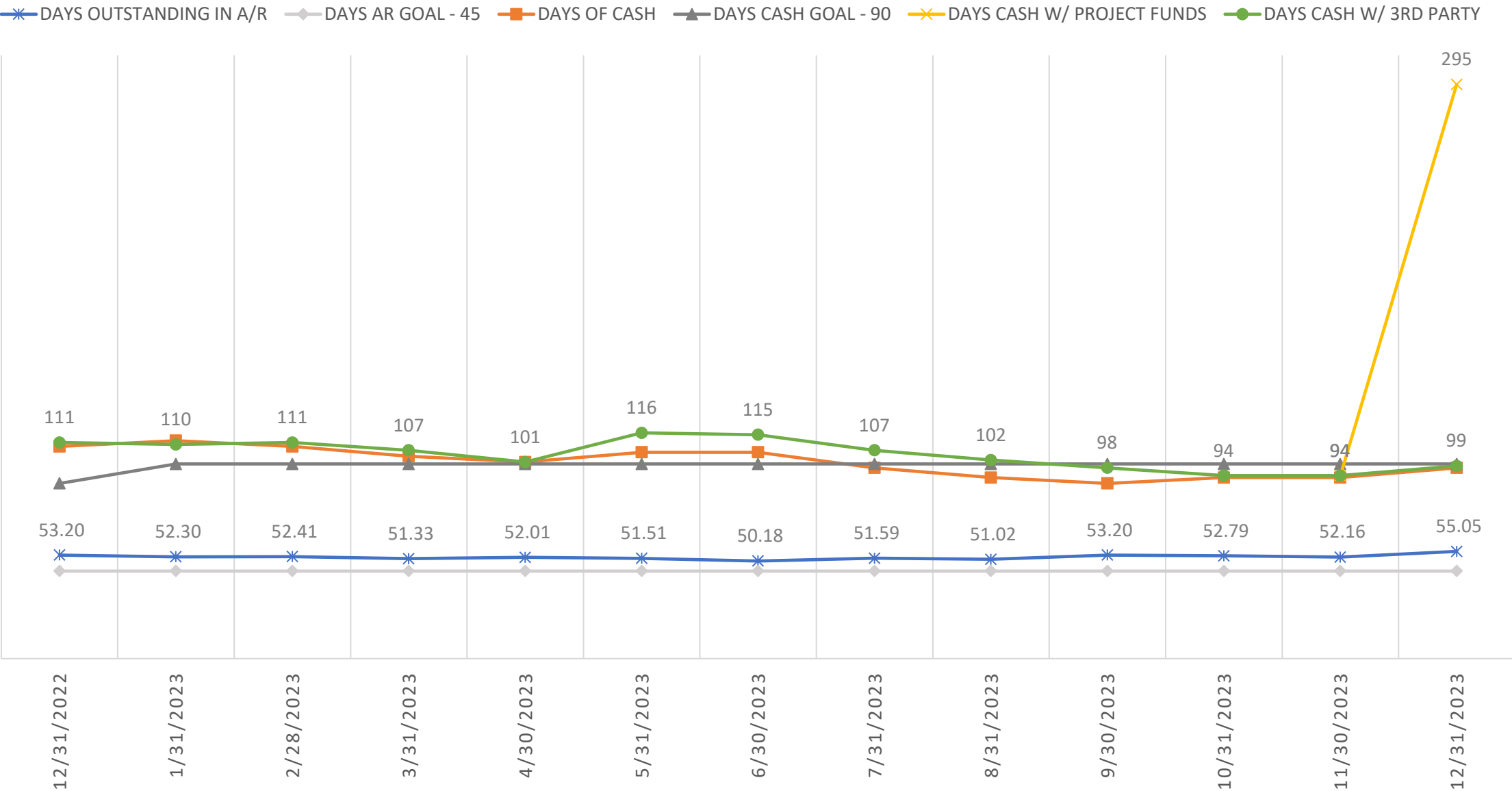
December 2023

Income Statement Summary

	December 2023 Actual	December 2023 Budget	Variance Favorable/ (Unfavorable)	%	December 2023 YTD	December 2023 Budget YTD	Variance Favorable/ (Unfavorable)	%	December 2022 YTD
Operating Revenue									
Gross Patient Service Revenue	31,468,312	29,491,436	1,976,876	7%	363,989,382	347,237,884	16,751,498	5%	318,713,627
Revenue Adjustments	17,716,442	15,847,479	(1,868,963)	-12%	198,626,412	186,591,297	(12,035,116)	-6%	166,504,379
Charity Care Adjustments	356,851	187,886	(168,965)	-90%	3,495,078	2,212,203	(1,282,875)	-58%	3,280,565
Net Patient Service Revenue	13,395,019	13,456,071	(61,052)	0%	161,867,891	158,434,384	3,433,507	2%	148,928,683
Other Revenue	9,246	452,637	(443,391)	-98%	6,740,937	5,329,444	1,411,493	26%	8,395,706
Total Operating Revenue	13,404,265	13,908,708	(504,443)	-4%	168,608,828	163,763,828	4,845,001	3%	157,324,389
Operating Expenses									
Salaries And Wages	7,827,018	6,899,538	(927,480)	-13%	78,776,532	81,236,502	2,459,970	3%	73,833,256
Employee Benefits	1,598,455	1,564,367	(34,088)	-2%	17,721,497	18,419,162	697,665	4%	16,248,266
Other Expenses	6,094,656	5,041,490	(1,053,166)	-21%	71,268,595	59,359,487	(11,909,108)	-20%	61,474,287
Total Operating Expenses	15,520,129	13,505,395	(2,014,734)	-15%	167,766,623	159,015,150	(8,751,473)	-6%	151,555,809
Operating Income (Loss)	(2,115,864)	403,313	(2,519,177)	-625%	842,205	4,748,677	(3,906,472)	-82%	5,768,580
Total Non Operating Revenues (Expenses)	(1,179,062)	(1,730)	(1,177,332)	-68054%	(22,765)	(20,370)	(2,395)	-12%	349,679
Change in Net Position (Loss)	(3,294,926)	401,583	(3,696,509)	-920%	819,441	4,728,308	(3,908,867)	-83%	6,118,259
Operating Margin	-15.8%	2.9%	-18.7%	-644.4%	0.5%	2.9%	-2.40%	-82.8%	3.7%
Total margin	-24.6%	2.9%	-27.5%	-951.4%	0.5%	2.9%	-2.40%	-83.2%	3.9%
Salaries & Benefits as a % of net pt svc rev	-70.4%	-62.9%	-7.5%	-11.9%	-59.6%	-62.9%	3.28%	5.2%	-60.5%

December 2023

Cash and Accounts Receivable



January 2024

Preview — (*as of 0:00 1/12/24)


- **\$ 31,384,117 in Projected HB charges**
 - Average: \$1,012,391/day (HB only)
 - Budget: \$1,059,286/day
 - 95.6% of Budget
- **\$12,306,210 in HB cash collections**
 - Average: \$396,975/day (HB only)
 - Goal: \$478,596/day
- **55.2 Days in A/R**
- **Questions**

Jefferson Healthcare

Patient Safety and Quality Report

Presented by Brandie Manuel, Chief Patient Safety and Quality Officer

January 24, 2024



Strategic Goal #1:

Deliver the highest quality care.

Strategies	Initiatives
Cultivate a deep-rooted culture of safety.	<ol style="list-style-type: none">1.Connect every employee to their role in patient safety and quality2.Develop a system of shared accountability by being accountable for systems and for responding to behavioral choices in a fair and just manner3.Identify and mitigate the root causes for safety events and near misses
Deliver care that is guided by the best evidence	<ol style="list-style-type: none">1.Promote active engagement of the medical staff in clinical quality monitoring and improvement2.Ensure that the highest standards of practice are met.3.Promote wellness and manage chronic disease4.Seek and maintain meaningful accreditation5.Enhance the use of technology, data and analytics to improve quality and safety
Eliminate health disparities	<ol style="list-style-type: none">1.Implement a comprehensive equity program2.Embed equity index into quality reporting3.Actively work to eliminate health disparities



2023 Year in Review

Cultivate a Deeply Rooted Culture of Safety

37% increase in event reporting

24% Near Miss reporting

284 day decrease in time to close events

Culture of Safety Survey Completed (last survey was in 2019)

Deliver Care Guided by the Best Evidence

OB Quality:

- Early Elective Delivery 0%
- Cesarean Birth 34.4%
- Maternal Morbidity (includes transfusions) 2.7% (top quartile 2.2%)
- Newborn complications 14.1 per 1,000 deliveries (top quartile 16.9 per 1,000 deliveries)

Get with the Guidelines*:

- Stroke Achievement Measures 100%
- Heart Failure Achievement Measures 96%
- A.Fib Achievement Measures 98%

Ambulatory Core Measures*:

- Chest Pain: time to transfer 27 min; thrombolytics in < 30 min **0%**
- ED Throughput **163.1 min** (goal 84 min)
- Colonoscopy follow up 100%

Eliminate Health Disparities

Wellness exams:
BIPOC/Hispanic/Latino 34.5%; White 34%

Prescription Drug Monitoring:
BIPOC/Hispanic/Latino 88.3%; White 85.9%

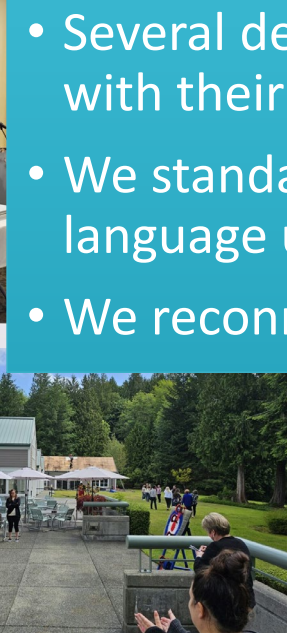
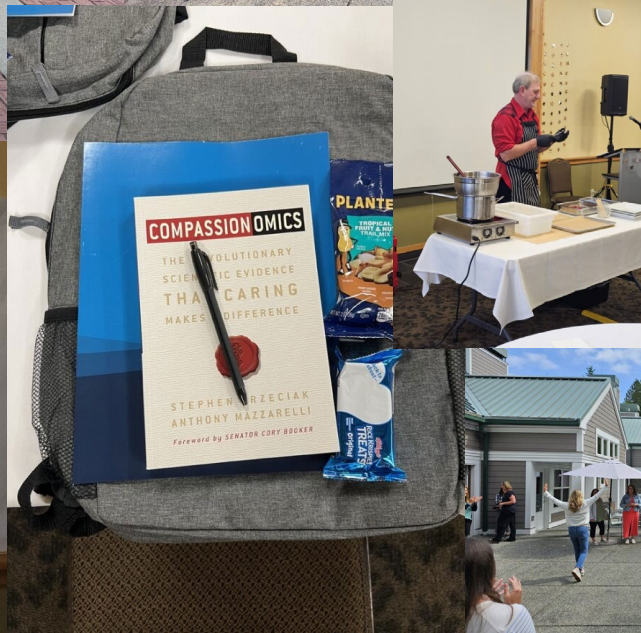
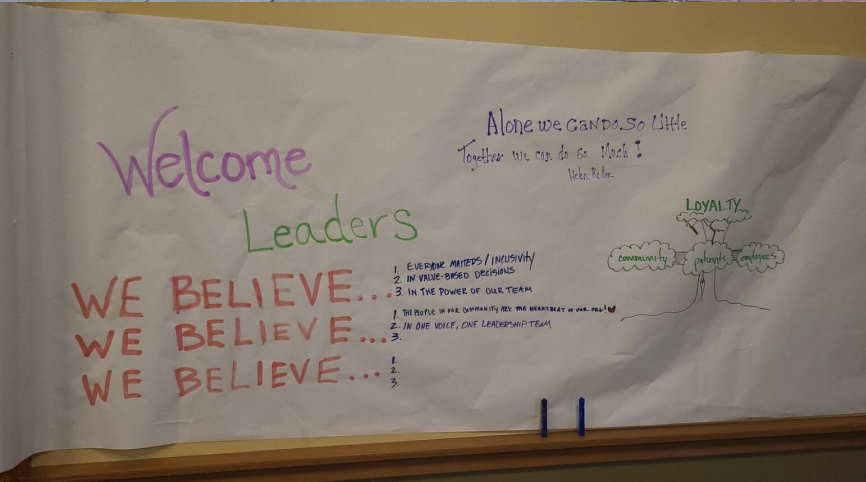
Breast Cancer Screening:
BIPOC/Hispanic/Latino 63.3%; White 62.4%

**December reporting in progress*

Investing in our Leadership Team



- In 2023, we held four Leadership Development Institute events (one per quarter).
- There were three active book clubs, led by our leaders.
- Several departments began book clubs with their own teams.
- We standardized the tools and the language used to discuss goals.
- We reconnected.





Investing in our Medical Staff

- Medical Director Leadership Development
- Medical Staff Symposium
- Bylaws revision
- General Medical Staff Meetings/Engagement



Investing in our front line.

- RN Residency Program
- Apprenticeship Programs
- Workforce Development
- Training, competencies, drills



The Great Shakeout Earthquake Drill

THANK YOU

Colleen Rodrigues
Clinic Manager Watership,
Townsend and BH



DECONTAMINATION TENT VISUAL SETUP GUIDE

COMMAND COPY:

1. Truck & Trailer Hookup
2. Deploying the Tent
3. Setting up the Water Heater / Boiler
4. Turning on the Fire Hydrant
5. Final Checklist
6. Area Map

Individual sets are available in the Decontamination Tent binder for each Team Leader

Culture Drills

Practice makes
better

Systems + Structure
- Staffing, Space

Difficult Discussions
Speaking up/Safety

Prioritize (high-risk)

High Reliable systems

Bomb Threat Drill Exercise: Phone Call Recipient
BOMB THREAT DRILL (OFF-SITE): HOUSE SUPERVISOR
DATE: 05/16/23
LOCATION: *Jefferson Peach-Evanston*
OBSERVER: *Jennifer Peach-Evanston*

YOUR ROLE
Your role as the Observer for the House Supervisor is to:

1. Observe the House Supervisor's actions
2. Record the times
3. Identify which items from the checklist were done
4. Make notes of anything that went awry or anything that should be discussed during the debrief

SUPPORT
This drill is designed to be an educational experience, rather than a "Pop Quiz". Please support the House Supervisor through this process by answering any questions they may have, reassuring them that this is just a drill and it's ok to make mistakes. Coach them through the process if they get stuck, but try to let them "drive" the experience.

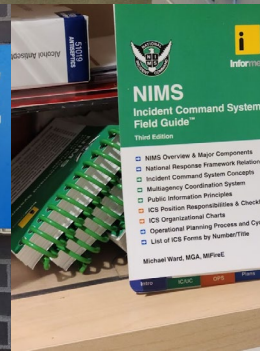
CHECKLIST

Did the House Supervisor:	Notes
<input checked="" type="checkbox"/> Remain calm during the exercise	
<input checked="" type="checkbox"/> Notify Facilities Director	0913- Notified Facilities - to facilities call
<input checked="" type="checkbox"/> Notify Security	0910- Spoke to Brian to be alerted to call
<input checked="" type="checkbox"/> Notify Administrator on Call	0912- Notified Tyler

DRILL INFORMATION
Name of the House Supervisor: *Stevie Pruitt / Danielle*



AMBULANCE
ENTRY ONLY



The Emergency
Management
Committee
conducted 11 drills
in 2024.

Highlight: Cultivate a deep-rooted culture of safety.

Next steps:

- December 2023: Results shared with the leadership team
- January 2024: Results shared with employees and training/drop-in sessions held with our leaders
- February 2024: Action plans (developed with employees and providers) implemented.
 - Discuss with leadership
 - Implement the plan
 - Provide monthly updates to employees
 - Review 90-day plans with leadership
- Next survey recommended: March 2025



Highlights:

- 563 Responses
- Biggest changes:
 - Nonpunitive response to error 75% (was 50% in 2019)
 - Feedback about error 86% (was 65%)

Promote:

- This organization provides high quality care
- Mistakes have led to positive change
- I feel free to raise safety concerns

Focus:

- Communication between departments
- Teamwork between management and employees
- Make every effort to deliver error-free care.

Delivering Care Guided by the Best Evidence.



The American Heart Association and
American Stroke Association proudly recognizes

**Jefferson Healthcare
Port Townsend, WA**

Get With The Guidelines® - Stroke GOLD

Achievement Award Hospital

The American Heart Association recognizes this hospital for its continued success
in using the **Get With The Guidelines®** program.
Thank you for applying the most up-to-date evidence-based treatment guidelines
to improve patient care and outcomes in the community you serve.*

Nancy Brown
Chief Executive Officer
American Heart Association

Michelle A. Albert, MD, MPH, FACC, FAHA
President
American Heart Association

*For more information, please visit Heart.org/GWTGQualityAwards.



The American Heart Association proudly recognizes

**Jefferson Healthcare
Port Townsend, WA**

**Get With The Guidelines® - Heart Failure GOLD PLUS with Target:
Heart Failure Honor Roll and Target: Type 2 Diabetes Honor Roll**

Achievement Award Hospital

The American Heart Association recognizes this hospital for its continued success
in using the **Get With The Guidelines®** program.
Thank you for applying the most up-to-date evidence-based treatment guidelines
to improve patient care and outcomes in the community you serve.*

Nancy Brown
Chief Executive Officer
American Heart Association

Michelle A. Albert, MD, MPH, FACC, FAHA
President
American Heart Association

*For more information, please visit Heart.org/GWTGQualityAwards.





Jefferson Healthcare Ranked in the **top 5%** for Outpatient Experience



Jefferson Healthcare Ranked in the **top 2% in the nation** for minimally invasive surgeries.



Jefferson Healthcare Ranked in the **top 100 Best Hospitals** for Patient Experience



HEALTHCARE CERTIFICATE

Certificate no.:
C593267

Initial certification date:
03 April, 2023

Valid:
03 April, 2023 – 03 April, 2026

This is to certify that the management system of

Jefferson County Public Hospital District No. 2

834 Sheridan, Port Townsend, WA, 98368-2443, USA

has been found to comply with the requirements of the:

Advanced Hip & Knee Replacement Certification (AHKRC)

The DNV Advanced Hip & Knee Replacement Certification is designed to recognize excellence in orthopedic surgery within the scope of hip and knee arthroplasty and related procedures inclusive of initial diagnostic services, surgical services, and therapies related to hip and knee replacement care. This advanced certification recognizes that an organization has demonstrated compliance with the DNV Advanced Hip & Knee Replacement Certification Requirements.

The DNV Advanced Hip and Knee Replacement Certification Requirements are informed by the ERAS® Society Orthopaedic guidelines, the guidelines of the American Academy of Orthopaedic Surgeons, the American Association of Hip and Knee Surgeons Clinical Practice Guidelines, and relevant requirements of the CMS Conditions of Participation for Hospitals.

Place and date:
Cincinnati, OH, 05 April, 2023



For the issuing office:
DNV Healthcare USA Inc.
4435 Aicholtz Road, Suite 900, Cincinnati,
OH, 45245, USA

Kelly Proctor
Management Representative

Lack of fulfillment of conditions as set out in the Certification Agreement may render this Certificate invalid.
CERTIFYING UNIT: DNV Healthcare USA Inc., 4435 Aicholtz Road, Suite 900, Cincinnati, OH, 45245, USA
TEL: +1 513-947-6343, www.dnv.us/assurance/healthcare



American Association of Cardiovascular and Pulmonary Rehabilitation

Certifies that

Pulmonary Program

Jefferson Healthcare

834 Sheridan

Port Townsend, Washington 98368

has met strict standards of practice and been awarded certification through
the American Association of Cardiovascular and Pulmonary Rehabilitation.

This certificate shall expire on

August 31, 2026



Ash Walker, DHSc, MA, ACSM-CEP, FAACVPR
AACVPR President

Tonja Bell, MS, CCRP, FAACVPR
Program Certification Committee Chair

In addition to the many accreditations and certifications maintained by Jefferson Healthcare, in 2023 we added two new ones:

- Our Pulmonary Rehabilitation program earned accreditation through the American Association of Cardiovascular and Pulmonary Rehabilitation
- We officially became the first Critical Access Hospital in the state of Washington to earn the DNV Certification in Advanced Hip and Knee Replacement

Congratulations and thank you to the teams who earned these designations!

2024 Focus areas.

We have more work to do.

Our leaders, care givers, advance practice clinicians, and physicians are hard at work evaluating our processes to improve where we can and hardwire the things that are working well.

This year, we continue to focus on improving the systems that:

- Improve patient outcomes through certification as a Geriatric Emergency Department.
- Improve safety, reliability, and the patient experience by continuing to streamline our referrals process.
- Remove the barriers to safe and effective patient flow and improve throughput.
- Improve teamwork and communication as we re-introduce TeamSTEPPS training.
- Support a culture of safety and shared learning - by sharing feedback about opportunities through updated reporting

**Geriatric
Emergency
Department**

**Referral
Optimization and
Patient Access**

Targeting Zero:

- To be Continued

**Patient Flow and
Throughput**

**Antimicrobial
Stewardship**

Our mission - to hold the trust of our community - is more than words on the wall for our care teams. It is personal.

A note of thanks and sincere gratitude to the care givers, surgeons, and team members across Jefferson Healthcare, who provide the best care possible – every day.

What Questions do you Have?



Building Update

January 2024



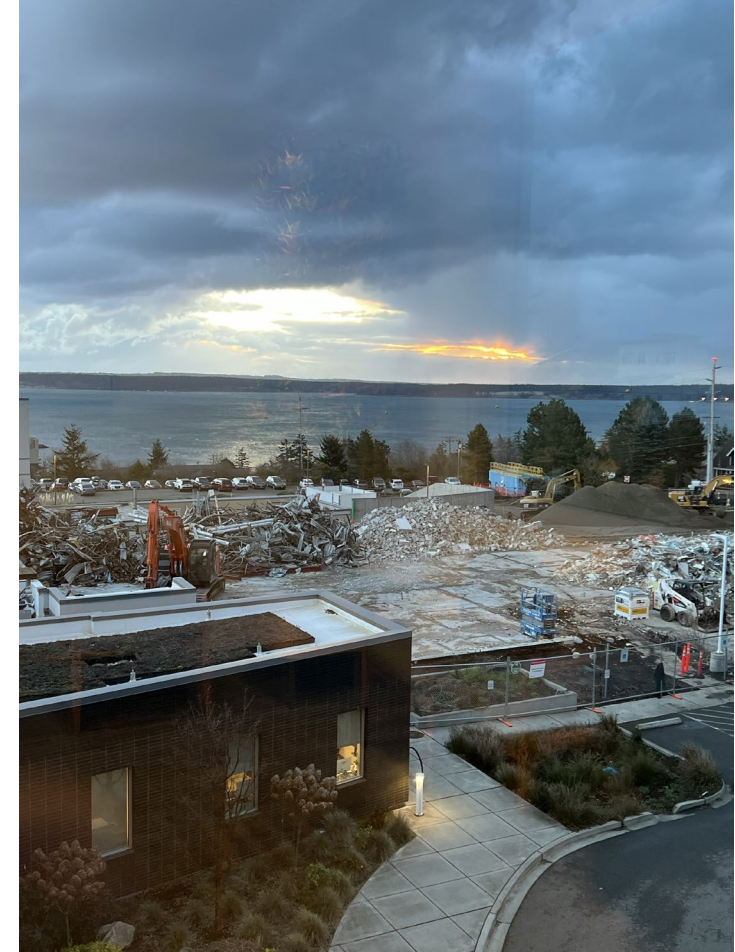
View from Sheridan Ave + 7th St

Construction Update- Demo has begun





Construction Update- Demo continued





Construction Update- Where we are this week

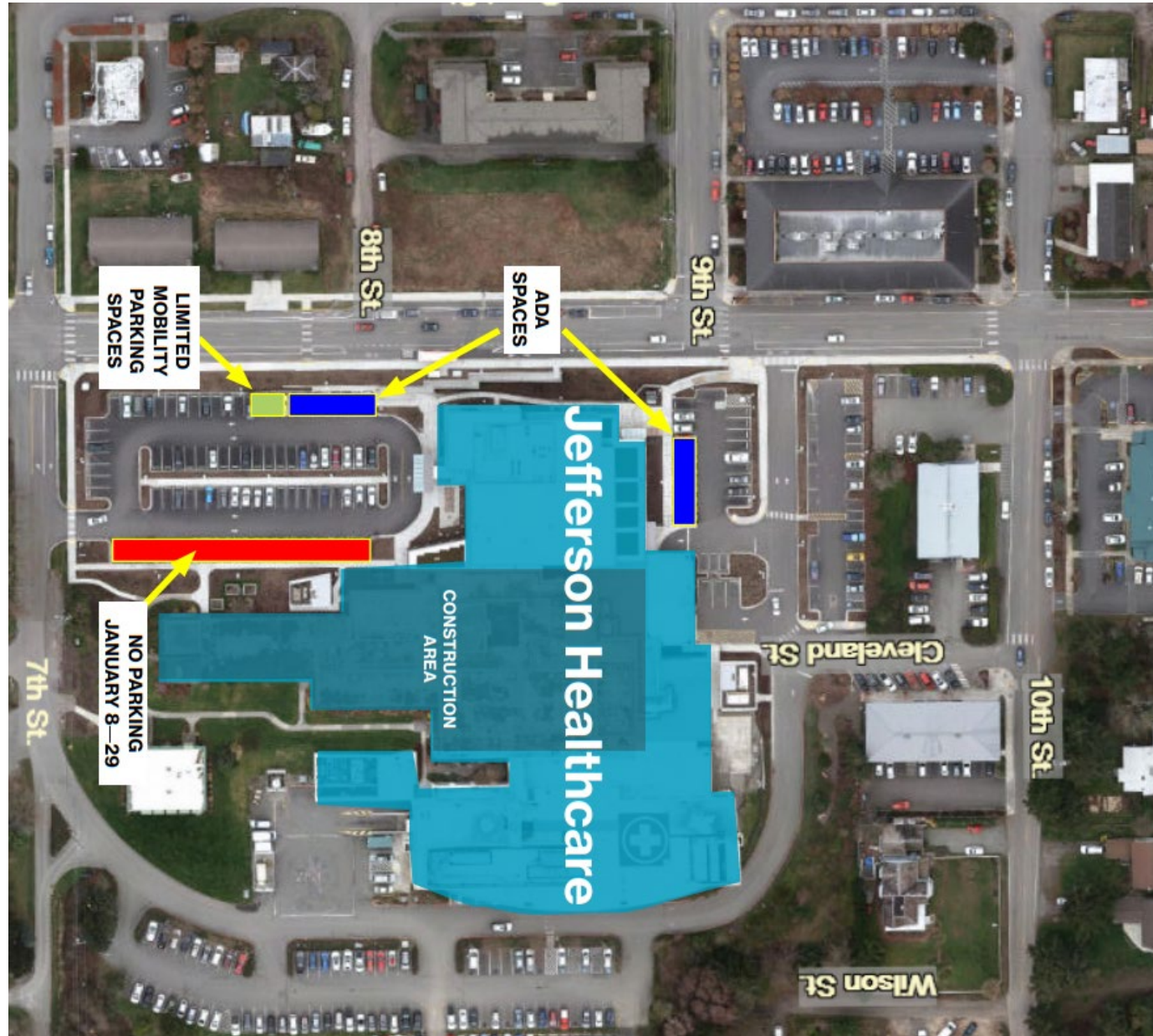


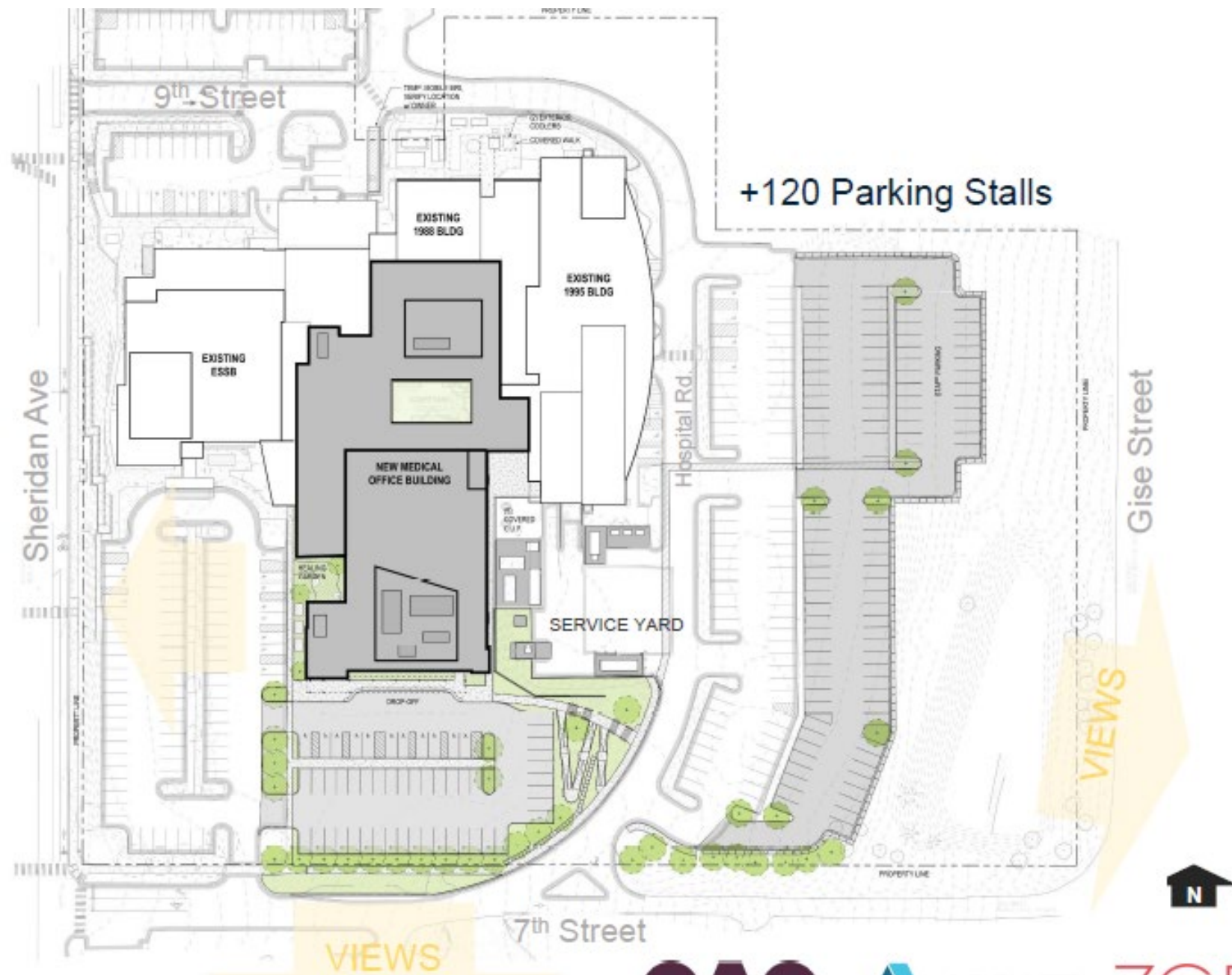


Construction Update- The project over time



Parking: Now, Why, & Future Potential Issues







Aerial Looking NE

Jefferson Healthcare

Administrative Report

January 24, 2024

Mike Glenn





Value Based Purchasing

A Monthly Review
January 2024

JAC Administrative Updates

- The 2023 Second notification went out at the end of December. We received 4 phone calls, all of which were positive, and one email.
- These are annual notifications, so we will need to do the first 2024 notification within the next month.
- We will be submitted our Quality Data and Interoperability Data in February for the 2023 Performance Year.
- Our VBC Director has transitioned to a new role, so I am again the point of contact for all things ACO.

Advocacy

January 2024

Advocacy | State Agenda

- Ensure access to care is not threatened by reduction in payments to hospitals.
- Allow hospitals and providers to continue to merge, affiliate and engage in business transactions.
- Allow EMS personnel to work in hospitals with a new credential.
- Support modernization of state medical record retention law. (*Current law: maintain medical records for at least 10 years following the most recent discharge*)
- Support an enhanced rate for rural hospital OB programs.
- Expand Medicaid access for adults to partial hospitalization and intensive outpatient mental health services.
- Increase post-acute care capacity for patients who are ready to be discharged.
- Improve timeliness of guardianship proceedings and availability of guardians for hospitalized patients.
- Support a Medicaid increase to Medicare levels for professional services.

Advocacy | State

- State legislative session is in full swing
- Lots of moving bills that are changing by the hour
 - Guardianship and Conservatorship Bill
 - Health Care Contracting Bill
 - Mergers and Acquisitions Bill
 - Sustainable Small-Volume OB Unit Bill
- Mike, Marie, and Jill will be attending Advocacy Days in Olympia at the end of the month.

Advocacy | Federal

- Continuing to remain hopeful for appropriations. CR was extended to March (passed last week).
 - March 1 and March 8 are the next cliffs for federal funding.
- Rural Health Policy is in the works
 - House Ways and Means committee is working on a rural health proposal to address geographic payment differences, sustainable financing, aligning sites of service, healthcare workforce, and innovative payment models.

Admin Report

- Very busy start to 2024.
 - Patient volumes continue to trend up
 - Employees and patients acclimating to project
 - Launching our 2024 Performance Improvement Projects
- Expanding our Telehealth and Retail Pharmacy footprint
- 2024 Year in Review Podcast will be live soon.
- State of Reform Panel went well.

Engaging the Port Ludlow Community

- 1/24: “Cooking for One” with Chef Stark and Lindsay Dykes
- 2/21: “Geriatrics: The Signs of Aging” with David Hunsley, HHH and Palliative Care Director
- 4/24: Supplements and Prescription Interactions
- 6/18: Osteoporosis



Questions