

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.

<u>Audio Only:</u> 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.

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# Regular Session Agenda

Wednesday, March 27, 2024			
Call to Order:	2:00		
Approve Agenda:	2:00		
<u>Cybersecurity Education</u> : Brandie Manuel, CPSQO	2:00		
Patient Story: Tina Toner, CNO	2:30		
Public Comment:  Public comments are welcome orally, with a 3-minute limit, or may be submitted via email at <a href="mailto:commissioners@jeffersonhealthcare.org">commissioners@jeffersonhealthcare.org</a> , or written and addressed to Commissioners at 834 Sheridan Street, Port Townsend, WA 98368. Written submissions must be received by 5:00pm the day prior to the meeting.			
Minutes: Action Requested  ◆ February 28 Regular Session (pages 3-6)	2:50		
Required Approvals: Action Requested  Resolution 2024-05 Surplus Equipment (pages 7-11) Resolution 2024-06 Canceled Warrants (page 12) February Warrants and Adjustments (pages 13-18) Medical Staff Credentials / Appointments/ Reappointments (pages 19-23)			
<u>Financial Report</u> : Tyler Freeman, CFO	3:00		
Quality Report: Brandie Manuel, CPSQO	3:15		

Jefferson Healthcare
Owned and Operated by Jefferson County Public Hospital District No. 2
834 Sheridan Street, Port Townsend, WA 98368
We are an equal opportunity provider and employer.





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Break:		3:30
Construction Report: Jake Davidson, COO		3:45
Administrative Report: Mike Glenn, CEO		4:00
<ul><li>Board Business:</li><li>Meeting Evaluation</li></ul>		4:25
Conclude:	Th - 4:	4:40

This Regular Session will be officially recorded. The times shown on the agenda are estimates only.



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# Jefferson County Public Hospital District No. 2 Board of Commissioners, Regular Session Minutes Wednesday, February 28, 2024

#### Call to Order:

The meeting was called to order at 2:00 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 McComas made a motion to approve the agenda. Commissioner Dressler seconded.

Action: Motion passed unanimously.

#### Methodology of Patient and Employee Satisfaction:

Brandie Manuel, Chief Patient Safety and Quality Officer, presented the Methodology of Patient and Employee Satisfaction, including why patient engagement data is important, patients as informed consumers, patient engagement focus areas, real time surveys, the process and the goal, how we are doing, ambulatory patient experience 2023, 2024 goals and projects, culture of safety surveys, linking surveys to our strategic plan, employee surveys; culture of safety and employee engagement, survey summary, lessons learned and focus areas, and action items (themes). Discussion ensued.

#### Patient Story:

Tina Toner, CNO shared a presentation including the Patient Rounding Initiative, why we round on patients, patient rounding successes, and next steps. Discussion ensued.

#### **Public Comment:**

Angela Gyurko, a member of the public, introduced herself as a member of the Health & Wellness Action Group, and shared that she does not believe there are enough senior exercise classes. She stated that she has tracked multiple class offerings in the area, and most are full and waitlisted. She shared that she will be sending out a local survey to ask if more people want to join classes and will communicate with Commissioner Kolff for this initiative. Board Chair Buhler-Rienstra thanked Angela for her comment.

#### Minutes:

- January 24, 2024 Regular Session Minutes
- February 07, 2024 Special Session Minutes

Commissioner Dressler made a motion to approve the January 24, 2024 Regular Session Minutes and February 07, 2024 Special Session Minutes. Commissioner Ready seconded.

**Action:** Motion passed unanimously

#### Required Approvals: Action Requested

- Resolution 2024-03 Surplus Equipment
- Resolution 2024-04 February Cancelled Warrants
- February Warrants and Adjustments
- Medical Staff Credentials/Appointments/Reappointments
- Medical Staff Bylaws
- Delineation of Privileges

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 January Financial Report. Discussion ensued.

#### Quality Report:

Brandie Manuel, Chief Patient Safety and Quality Officer, presented the February Quality Report, including cultivating a deeply rooted culture of safety, delivering care guided by the best evidence, eliminating health disparities, Quality Highlight: OB Quality Improvement and Teamwork, continuous improvement: qualitative blood loss measurement, the goal to be an award-winning, fully-accredited hospital: DNV Advanced Hip and Knee Replacement Certification (HKRC), and quality and safety projects and initiatives for Quarter 1, 2024. Discussion ensued.

#### Break

Commissioners recessed for break at 3:25 pm. Commissioners reconvened from break at 3:40 pm. <u>Construction Report:</u> Jake Davidson, Chief Operating Officer provided the February Construction Report. Discussion ensued.

#### Administrative Report

Mike Glenn, Chief Executive Officer, and Dunia Faulx, Chief Planning and Advocacy Officer, presented the February Administrative report. Discussion ensued.

#### **Executive Session**

Board Chair Buhler Rienstra announced that they will go into Executive Session for fifteen (15) minutes until 4:50 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 4:35 pm.

Commissioners returned to regular session at 4:50 pm. No public was present on the line.

Commissioner McComas made a motion to adjust Mike Glenn's PTO plan to be in alignment with SLG PTO with a one-time cash out of up to 240 hours. Commissioner Kolff seconded.

**Action:** Motion passed unanimously

Tyler Freeman asked the board to clarify the proposed PTO plan for Mike Glenn. Discussion ensued.

Commissioner Kolff made a motion for Mike Glenn to cash out 240 hours PTO, shift to 120 hours having cash value, and automatically cash out up to 120 hours at year end of separation, with any hours over 120 being lost at year end or separation. Commissioner McComas seconded.

Action: Motion passed with four ayes and one abstention.

#### **Board Business:**

• Board of Health Report

Commissioner Kolff shared a Board of Health Report including Bonnie and Chief Black Fire Cares team presentation, Women's Choice Awards and invitation to Healthcare Podcast series, and Jefferson Healthcare Foundation website providing zoom information for a presentation from Mike Glenn. Discussion ensued.

#### Foundation Update:

Commissioner McComas provided a foundation update including Port Ludlow sessions and fundraisers, receiving \$400,000 grant from Murdock, and the Foundation continuing to participate in local events. Discussion ensued.

Commissioner Dressler informed the group that a grant of \$500 dollars was awarded for food bags for new moms by the Sunrise Rotary.

#### Retreat Follow Up:

Board Chair Buhler-Rienstra informed the group that Via provided a summary which included a recommendation for a quarterly generative meeting and suggested holding the first generative meeting in March as a special session. Discussion ensued.

#### Meeting Evaluation:

Commissioners evaluated the meeting.

#### Conclude:

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

Action: Motion passed unanimously.

Meeting concluded at 5:12 pm.

Approved by the Commission:

Chair of Commission: Jill Buhler Rienstra

Secretary of Commission: Marie Dressler \_\_\_\_\_

#### JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

#### RESOLUTION 2024-05

# A RESOLUTION TO DECLARE CERTAIN EQUIPMENT SURPLUS TO THE NEEDS OF JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2 AND TO AUTHORIZE THE DISPOSAL OF SAID EQUIPMENT

WHEREAS the item(s) of equipment enumerated below are obsolete and otherwise surplus to the District, and;

WHEREAS said equipment now represents an unnecessary cost to the District to retain and store it, NOW, THEREFORE, BE IT RESOLVED THAT:

1) The following equipment be declared surplus to the needs of Jefferson County Public Hospital District No. 2 and will be disposed of in compliance with state law:

Description	Asset #	Serial #	Model #
Therapeutic Ultrasound	PT 0008;13- 00399	T1993	INT001
Oftrasound	00399		
TRS4000	WE0011	420785	TRS4000
Exerciser			
Fuji Film	2009	97250160 2009	CR-IR 362
Digitizer FCR			
x95000			

APPROVED this 25<sup>th</sup> day of March 2024.

APPROVED BY THE COMMISSION:

Commission Chair Jill Buhler Rienstra:

Commission Secretary Marie Dressler:

Attest:

Commissioner Bruce McComas:

Commissioner Kees Kolff:

Commissioner Matt Ready:

# Jefferson County Public Hospital District #2 Surplus Equipment Form

Department: Physical Therapy Date: 3/15/2024
Equipment to be declared surplus: The rapeutic Ultrasound
Asset Number:
Model Number: INT 001
Justification for declaring surplus: (check all that apply)
☐ No longer supports current software
☑ End of life, useful life exhausted
☑ Not supported by original manufacturer, parts not available
Cost of parts to repair exceeds cost of new equipment
☐ Technology outdated
Removed or altered during remodeling process
V Other Broken - no parts/repairs possible
Department/Director Signature  Department/Director Signature  Department/Director Signature
Recommended Disposition:
Send to surplus storage until if not pulled for service dispose n appropriate manner.
Use as trade-in and return to vendor
Send to recycler*
Placed with third party reseller
Send to landfill*
If another party wishes to take equipment from District at no cost the CEO shall ave discretion to allow this.
Sell to
approved by Commission on Resolution #

# Jefferson County Public Hospital District #2 Surplus Equipment Form

Department: <u>WE-8770</u> Date: <u>3/8/2024</u>
Equipment to be declared surplus: TRS 4000 EXERCISER
Asset Number: WE 0011 Serial Number: 420785
Model Number: TRS 4000
Justification for declaring surplus: (check all that apply)
☐ No longer supports current software
☑ End of life, useful life exhausted
Not supported by original manufacturer, parts not available
Cost of parts to repair exceeds cost of new equipment
☐ Technology outdated
Removed or altered during remodeling process
✓ Other Broken - not repairable
Depreciated value:
MF Janhlingan 3/8/202
Department Director Signature Materials Director Signature
Recommended Disposition:
Send to surplus storage until if not pulled for service dispose in appropriate manner.
Use as trade-in and return to vendor
Send to recycler*
Placed with third party reseller
Send to landfill*
If another party wishes to take equipment from District at no cost the CEO shall nave discretion to allow this.
Sell to
Approved by Commission on Resolution #

# Jefferson County Public Hospital District #2 Surplus Equipment Form

Department: Diagnostic Imaging Date: 3.11. 2024
Department: Diagnostic Imaging Date: 3.11, 2024  Equipment to be declared surplus: Full film digitizer FCR x95000  Asset Number: 2009 Serial Number: 97250160 2009
Asset Number: 2009 Serial Number: 97250160 2009
Model Number: CR-1P 362
Justification for declaring surplus: (check all that apply)
No longer supports current software
☐ End of life, useful life exhausted
Not supported by original manufacturer, parts not available
Cost of parts to repair exceeds cost of new equipment
Technology outdated
Removed or altered during remodeling process
Other
Depreciated value:
Department Director Signature  Materials Director Signature
Recommended Disposition:
Send to surplus storage until if not pulled for service dispose n appropriate manner.
Use as trade-in and return to vendor
Send to recycler*
Placed with third party reseller
Send to landfill*
If another party wishes to take equipment from District at no cost the CEO shall ave discretion to allow this.
Sell to
approved by Commission on Resolution #

Manufacturer FUJIFILM Corporation

26-30, NISHIAZABU 2-CHOME, MINATO-KU. TOKYO 106-8620, JAPAN

FUJI COMPUTED RADIOGRAPHY MODEL CR-IR 362

> 50-60Hz 120-240V~

> > 7A



WITH RESPECT TO ELECTRIC SHOCK FIRE AND MECHANICAL HAZARDS ONLY IN ACCOMPANCE WITH IN BOSON I CAN CSA CZZ 2 NO 60(1

97250160 SN

405N101664

# **FUJIFILM Corporation**

26:30, NISHIAZABU 2-CHOME, MINATO-KU. TOKYO 106-8620, JAPAN

MODEL

CR-IR 362

SERIAL No.

97250160

MANUFACTURED

DECEMBER 2009

FFTPH

Complies with FDA performance standards for laser products except for deviations pursuant to Lasor Notice No 50, dated (July 26, 2001).

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#### JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

#### **RESOLUTION 2024-06**

# A RESOLUTION CANCELING CERTAIN WARRANTS IN THE AMOUNT OF \$3,602.69

WHEREAS warrants of any municipal corporation not presented within one year of their issue, or, that have been voided or replaced, shall be canceled by the passage of a resolution of the governing body;

### NOW, THEREFORE BE IT RESOLVED THAT:

In order to comply with RCW 36.22.100, warrants indicated below in the total amount of \$3,602.69 be canceled.

Date of Issue	Warrant #	Amount
02/29/2024	296927	2.69
02/29/2024	297157	3,600.00
Total		\$3,602.69

APPROVED this 25th day of March 2024.

APPROVED BY THE COMMISSION:
Commission Chair Jill Buhler Rienstra:
Commission Secretary Marie Dressler:
Attest:
Commissioner Matt Ready:
Commissioner Kees Kolff:
Commissioner Bruce McComas:

TO: BOARD OF COMMISSIONERS

FROM: TYLER FREEMAN, CFO

RE: February 2024 WARRANT SUMMARY

The following items need to be approved at the next commission meeting:

General Fund Warrants & ACH Transfers Allowance for Uncollectible Accounts / Charity

Canceled Warrants

\$25,463,606.11

(Provided under separate cover)

**\$557,160.00** (At 3,602.69 (At

(Attached) (Attached)

TO: BOARD OF COMMISSIONERS

FROM: TYLER FREEMAN, CFO

RE: February 2024 GENERAL FUND WARRANTS & ACH

**FUND TRANSFERS** 

Submitted for your approval are the following warrants:

**GENERAL FUND:** 

304492 - 305920 \$10,265,647.29

ACH TRANSFERS \$15,197,958.82

\$25,463,606.11

YEAR-TO-DATE: \$53,145,167.06

Warrants are available for review if requested.

TO: BOARD OF COMMISSIONERS FROM: TYLER FREEMAN, CFO

RE: February 2024 ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS, ADMINISTRATIVE, AND CHARITY CARE WRITE OFFS

Submitted for your approval are the following	Submitted	for your	approval are	the following:
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	February	February YTD	February YTD BUDGET
Allowance for Uncollectible Accounts:	205,672.00	1,158,645.00	594,793.00
Charity Care:	347,670.00	680,306.00	562,456.00
Other Administrative Adjustments:	3,818.00	157,062.00	270,494.00
TOTAL FOR MONTH:	557,160.00	1,996,013.00	1,427,743.00

TO: BOARD OF COMMISSIONERS

FROM: TYLER FREEMAN, CFO

RE: February 2024 WARRANT CANCELLATIONS

State law requires you to pass a resolution canceling any warrants which are not presented to the Treasurer for payment within one year of issue.

DATE	WARRANT	AMOUNT
2/29/2024	296927 FBO HOSPITAL DISTRICT #2	2.69
2/29/2024	297157 FBO HOSPITAL DISTRICT #2	3,600.00

Jefferson	February	February	Variance	0/	February	February	Variance	0/	February
Healthcare	2024 Actual	2024 Budget	Favorable/ (Unfavorable)	%	2024 YTD	2024 Budget YTD	Favorable/ (Unfavorable)	%	2023 YTD
Gross Revenue			(0)			110	(5		
Inpatient Revenue	3,598,298	3,481,632	116,666	3%	7,579,919	7,203,376	376,542	5%	7,140,674
Outpatient Revenue	28,777,760	27,365,976	1,411,783	5%	58,107,042	56,619,261	1,487,781	3%	48,988,190
•									
Total Gross Revenue	32,376,058	30,847,608	1,528,450	5%	65,686,961	63,822,638	1,864,323	3%	56,128,864
Revenue Adjustments									
Cost Adjustment Medicaid	1,502,077	2,439,506	937,429	38%	3,942,142	5,047,254	1,105,112	22%	4,419,040
Cost Adjustment Medicare	13,112,805	11,073,029	(2,039,776)	-18%	25,047,389	22,909,715	(2,137,675)	-9%	19,529,683
Charity Care	347,670	271,854	(75,816)	-28%	680,306	562,456	(117,850)	-21%	357,589
Contractual Allowances Other	3,033,475	2,707,888	(325,586)	-12%	5,677,250	5,602,527	(74,723)	-1%	5,416,928
Administrative Adjustments	3,818	130,739	126,921	97%	157,062	270,494	113,433	42%	137,078
Allowance for Uncollectible Accounts	205,672	287,484	81,812	28%	1,158,645	594,793	(563,852)	-95%	658,604
Total Davisson Adicatos anto	40 005 540	40.040.400	(4.005.047)	00/	20 000 705	24 007 040	(4.675.555)	<b>F</b> 0/	20 540 000
Total Revenue Adjustments	18,205,516	16,910,499	(1,295,017)	-8%	36,662,795	34,987,240	(1,675,555)	-5%	30,518,922
Net Patient Service Revenue	14,170,542	13,937,109	233,433	2%	29,024,165	28,835,398	188,768	1%	25,609,942
Net i duent dei vice Nevenue	14,170,542	13,337,103	200,400	2/0	23,024,103	20,033,330	100,700	1 /0	25,005,542
Other Revenue									
340B Revenue	272,958	472,890	(199,932)	-42%	535,716	978,393	(442,677)	-45%	577,868
Other Operating Revenue	178,741	292,391	(113,650)	-39%	437,406	604,947	(167,542)	-28%	283,604
	,	,	(1.13,333)		,	,	(,,		
<b>Total Operating Revenues</b>	14,622,240	14,702,390	(80,150)	-1%	29,997,287	30,418,739	(421,451)	-1%	26,471,413
Operating Expenses									
Salaries And Wages	6,685,758	7,096,154	410,396	6%	14,419,529	14,681,699	262,170	2%	13,131,380
Employee Benefits	1,596,546	1,634,934	38,388	2%	3,375,139	3,382,621	7,482	0%	2,977,344
Professional Fees	640,215	192,166	(448,049)	-233%	1,123,739	397,585	(726,153)	-183%	455,141
Purchased Services	927,935	1,218,277	290,341	24%	1,979,172	2,520,572	541,400	21%	1,959,490
Supplies	3,191,570	2,907,344	(284,225)	-10%	6,216,484	6,014,814	(201,670)	-3%	5,041,184
Insurance	135,139	142,772	7,633	5%	280,836	295,390	14,553	5%	175,009
Leases And Rentals	155,038	51,539	(103,499)	-201%	211,479	106,631	(104,847)	-98%	35,586
Depreciation And Amortization	424,053	409,435	(14,618)	-4%	848,107	847,107	(999)	0%	909,564
Repairs And Maintenance	87,294	127,132	39,838	31%	162,680	263,032	100,352	38%	178,196
Utilities	112,682	128,067	15,385	12%	255,398	264,966	9,568	4%	238,710
Licenses And Taxes	81,765	82,617	852	1%	181,354	170,932	(10,422)	-6%	143,494
Other	210,319	291,599	81,280	28%	528,466	603,309	74,843	12%	458,721
T-1-1-0	44.040.045	44 000 000	22.704	00/	00 500 000	00 540 650	(22.704)	00/	05 700 040
Total Operating Expenses Operating Income (Loss)	14,248,315 373,925	14,282,036 420,354	33,721 (46,429)	0% -11%	29,582,383 414,904	29,548,659 870,079	(33,724) (455,175)	0% -52%	25,703,819 767,595
oporating moonio (2000)	0.0,020		(10,120)	1170	,	0.0,0.0	(100,110)	0270	,
Non Operating Revenues (Expenses)									
Taxation For Maint Operations	45,008	42,288	2,720	6%	90,016	87,493	2,523	3%	47,523
Taxation For Debt Service	-	-	-	0%	-	0	-	0%	36,693
Investment Income	413,355	193,967	219,388	113%	871,382	401,311	470,071	117%	32,555
Interest Expense	(582,297)	(390,793)	(191,504)	-49%	(1,164,594)	(808,537)	(356,058)	-44%	(142,371)
Bond Issuance Costs	-	(125,587)	125,587	100%	-	(259,836)	259,836	100%	-
Gain or (Loss) on Disposed Asset	-	-	-	0%	-	-	-	0%	-
Contributions	-	800,590	(800,590)	-100%	14,970	1,656,393	(1,641,423)	-99%	22,307
			<b></b>			. ==			
Total Non Operating Revenues (Expenses)	(123,934)	520,465	(644,399)	-124%	(188,225)	1,076,825	(1,265,051)	-117%	(3,293)
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					2021	
Change in Net Position (Loss)	249,991	940,819	(690,829)	-73%	226,679	1,946,904	(1,720,226)	-88%	764,302

Jefferson										
Healthcare	FEBRUARY 2024			FEBRUARY 2023						
STATISTIC DESCRIPTION	MO ACTUAL	<u>MO</u> BUDGET	<u>%</u> VARIANCE	<u>YTD</u> ACTUAL	<u>YTD</u> BUDGET	<u>%</u> VARIANCE	MO ACTUAL	<u>%</u> VARIANCE	YTD ACTUAL	<u>%</u> VARIANCE
FTEs - TOTAL (AVG)	660	696	5%	666	696	4%	598	-10%	598	-11%
FTES - PRODUCTIVE (AVG)	600	619	3%	596	619	4%	543	-10%	548	-9%
ADJUSTED PATIENT DAYS	3,611	2,845	27%	7,128	5,885	21%	3,080	17%	6,663	7%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	55	82	-33%	141	171	-18%	82	-33%	166	-15%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	339	277	22%	724	572	27%	336	1%	656	9%
SWING IP PATIENT DAYS (MIDNIGHT CENSUS)	22	24	-8%	36	49	-27%	11	50%	11	69%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	416	383	9%	901	792	14%	429	-3%	833	8%
BIRTHS	7	6	17%	11	13	-15%	8	-13%	13	-18%
SURGERY CASES (IN OR)	124	126	-2%	258	260	-1%	120	3%	257	0%
SURGERY MINUTES (IN OR)	18,152	16,948	7%	37,833	35,064	8%	16,236	12%	35,020	7%
SPECIAL PROCEDURE CASES	86	82	5%	187	170	10%	80	8%	153	18%
LAB BILLABLE TESTS	22,236	20,518	8%	45,840	42,451	8%	19,615	13%	41,714	9%
BLOOD BANK UNITS MATCHED	33	42	-21%	77	87	-11%	53	-38%	92	-19%
MRIs COMPLETED	249	227	10%	482	470	3%	224	11%	441	9%
CT SCANS COMPLETED	649	609	7%	1,328	1,260	5%	615	6%	1,232	7%
RADIOLOGY-DEXA	82	121	-32%	178	249	-29%	111	-26%	271	-52%
X-RAYS COMPLETED	1,721	1,747	-1%	3,576	3,615	-1%	1,643	5%	3,409	5%
ECHOs COMPLETED	182	180	1%	376	372	1%	181	1%	382	-2%
ULTRASOUNDS COMPLETED	349	346	1%	721	716	1%	342	2%	677	6%
MAMMOGRAPHYS COMPLETED	271	300	-10%	511	621	-18%	273	-1%	574	-12%
NUCLEAR MEDICINE TESTS TOTAL DIAGNOSTIC IMAGING TESTS	25 3,528	33	-24%	7,232	7,370	-10%	3,411	14%	65	-8% 3%
		3,563	-1%			-2%		3% 4%	7,051	5%
PHARMACY MEDS DISPENSED	20,979	21,961	-4%	44,193	45,437	-3%	20,253		41,812	
ANTI COAG VISITS	302	343	-12%	634	709	-11%	346	-13%	728	-15% 17%
RESPIRATORY THERAPY PROCEDURES	2,824	2,745	3%	6,533	5,679	15%	2,662	6%	5,394	
PULMONARY REHAB	87	102	-15%	163	212	-23%	104	-16% -10%	164	-1% -25%
CARDIAC REHAB SESSIONS	149	189	-21%	282	392	-28%	166	13%	352	9%
PHYSICAL THERAPY OCCUPATIONAL THERAPY	6,179 1,089	6,495 1,194	-5%	12,691 1,985	13,438 2,470	-6%	5,470 1,280		11,491 2,751	
SPEECH THERAPY	230	270	-9% -15%	1,985	560	-20% -20%	294	-15% -22%	499	-39% -12%
REHAB/PT/OT/ST	7,734	8,250	-6%	15,567	17,072	-9%	7,314	6%	15,257	2%
ER CENSUS	1,111	1,163	-4%	2,245	2,407	-7%	1,096	1%	2,162	4%
EXPRESS CLINIC	1,103	1,088	1%	2,180	2,251	-3%	1,148	-4%	2,194	-1%
SOCO PATIENT VISITS	199	214	-7%	381	442	-14%	100	99%	177	54%
PORT LUDLOW PATIENT VISITS	711	717	-1%	1,461	1,483	-1%	669	6%	1,299	11%
SHERIDAN PATIENT VISITS	2,625	2,647	-1%	5,774	5,476	5%	2,418	9%	5,282	9%
DENTAL CLINIC	399	461	-13%	853	954	-11%	444	-10%	898	-5%
WATERSHIP CLINIC PATIENT VISITS	1,172	1,205	-3%	2,354	2,492	-6%	1,063	10%	2,255	4%
TOWNSEND PATIENT VISITS	576	502	15%	1,141	1,039	10%	468	23%	1,004	12%
TOTAL RURAL HEALTH CLINIC VISITS	6,785	6,834	-1%	14,144	14,137	0%	6,310	8%	13,109	7%
CARDIOLOGY CLINIC VISITS	497	589	-16%	1,059	1,219	-13%	586	-15%	1,069	-1%
DERMATOLOGY CLINIC VISITS	742	710	5%	1,459	1,470	-1%	759	-2%	1,451	1%
GEN SURG PATIENT VISITS	312	321	-3%	685	665	3%	274	14%	577	16%
ONCOLOGY VISITS	397	638	-38%	806	1,320	-39%	460	-14%	1,010	-25%
ORTHO PATIENT VISITS	631	592	7%	1,307	1,225	7%	587	7%	1,170	10%
SLEEP CLINIC VISITS	161	185	-13%	366	382	-4%	139	16%	321	12%
UROLOGY VISITS	235	198	19%	494	410	20%	240	-2%	493	0%
OB/GYN CLINIC VISITS	326	311	5%	671	643	4%	260	25%	609	9%
WOUND CLINIC VISITS	132	175	-25%	244	362	-33%	125	6%	256	-5%
HANDS/PLASTICS	187	199	-6%	401	411	-2%	208	-10%	470	-17%
TOTAL SPECIALTY CLINIC VISITS	3,620	3,918	-8%	7,492	8,107	-8%	3,638	0%	7,426	1%
SLEEP CENTER SLEEP STUDIES	42	54	-22%	90	112	-20%	57	-26%	110	-22%
INFUSION CENTER VISITS	693	849	-18%	1,460	1,757	-17%	824	-16%	1,761	-21%
SURGERY CENTER ENDOSCOPIES	68	72	-6%	143	148	-3%	49	39%	112	22%
HOME HEALTH EPISODES	63	72	-13%	157	149	5%	69	-9%	139	11%
HOSPICE CENSUS/DAYS	868	1,102	-21%	1,772	2,280	-22% -38%	948	-8% -44%	2,007	-13% -66%
DIETARY MEALS SERVED	5,363	9,194	-42%	11,871	19,022		9,533		19,758	-66% 22%
MAT MGMT TOTAL ORDERS PROCESSED	1,906	1,595	19%	3,762	3,301	14%	1,483	29%	2,950	22%

**FROM:** Medical Staff Services

**RE:** 3/15/2024 Medical Executive Committee appointments/reappointments for

Board approval 03/27/2024

#### C-0241

§485.627(a) Standard: Governing Body or Responsible Individual

The CAH has a governing body or an individual that assumes full legal responsibility for determining, implementing and monitoring policies governing the CAH'S total operation and for ensuring that those policies are administered so as to provide quality health care in a safe environment.

#### Interpretive Guidelines §485.627(a)

It is the responsibility of the governing body (or responsible individual) to appoint, with the advice of the medical staff, the individual practitioners to the medical staff. After considering medical staff recommendations, and in accordance with established CAH medical staff criteria and State and Federal laws and regulations, the governing body (or responsible individual) decides whether or not to appoint new medical staff members or to continue current members of the medical staff.

#### Recommended provisional appointment to the active/courtesy/allied health/locum tenens staff:

- 1. Murphy, Lexa, PhD Child Psychology
- 2. Flanders, Ingrid, FNP -Family Nurse Practitioner Express Clinic
- 3. Pairitz, Anita, MD Tele-Psychiatry Array
- 4. Neil Jariwala, MD Tele-Psychiatry Array
- 5. Jason Friedman, MD Tele-Neurology Eagle
- **6.** Costa, Ruxandra, MD Tele-Neurology Providence

#### Recommended re-appointment to the active medical staff with privileges as requested:

- 1. Harris, Tracie, MD Hospital Medicine Internal Medicine
- 2. Haycox, Claire, MD Dermatology

#### Recommended re-appointment to the courtesy medical staff with privileges as requested:

- 1. Lowenkopf, Theodore, MD Teleneurology
- 2. Oveian, Margarita, MD Teleneurology
- 3. Blum, Elyse, MD Skagit Radiology

#### Recommended re-appointment to the allied health staff with privileges as requested:

- 1. Christensen, Sara, PA-C Certified Physician Assistant
- 2. Jeffery Choffel, RPA Skagit

#### **Recommended Temporary Privileges:**

1. N/A

#### **Recommended POCUS Privileges:**

1. N/A

#### **Medical Student Rotation:**

1. Shelly Zinghang

FROM: Medical Staff Services

**RE:** 3/15/2024 Medical Executive Committee appointments/reappointments for

Board approval 03/27/2024

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#### **Disaster Privileging**

1. N/A

#### 90-day provisional performance review completed successfully:

1. N/A

#### **Resignations:**

- 1. Moll, Steven, DO Family Medicine Retired 2/4/24
- 2. Koomen, Anne, ARNP Allied Health Resigned 2/2/2024 per HR

#### **Policy and Privilege Review**

#### **Policies**

- 1. Telepsychiatry Delineation of Privileges Updated
- 2. Psychology PhD & PsyD Delineation of Privileges Updated

#### **Privileges**

3. N/A

## Jefferson Healthcare Delineation of Privileges Psychology PhD. and PsyD

To be eligible to request core privileges in psychology, the following minimum threshold criteria must be met:

#### Basic Education:

- Successful completion of a doctorate degree in psychology (PhD or PsyD) from a program accredited by the American Psychological Association; AND
- APPIC-Accredited Internship
- One year of formal postdoctoral fellowship in clinical psychology; OR
- Two years of supervised postdoctoral work If required by Washington state or state doctorate degree was earned

#### Certification:

- Maintenance of Washington State licensure
- Board Certification by OR Board Eligible for the American Board of Professional Psychology (ABPP)

#### Initial requirements:

Applicant must provide documentation of provision of psychology services to at least 15 patients representative of the scope and complexity of the privileges requested during the previous year (waived for applicants who completed training during the previous year.

Clinical Experience (Reappointment): Applicant must provide documentation of provision of clinical services to a representative sample of patients within the scope and complexity of the privileges requested during the previous 24 months.

Core	Privileges	in F	sych	ology

Description: Work directly with patients, as well as groups (families, patients of similar psychopathology), using a wide range of assessment and intervention methods to promote mental health and to alleviate discomfort and maladjustment.

Includes the assessment, diagnosis and treatment for mental, physical, emotional, and behavioral disorders using psychological testing and mental status examination for patients ages \_\_\_\_\_ - \_\_\_\_ years old.

### Assessment, diagnosis, and treatment methods include:

- Biofeedback
- Hypnosis
- Interpretation of psychometric testing (MMPI)
- Administration and interpretation of neuropsychological testing

# Jefferson Healthcare Delineation of Privileges Psychology PhD. and PsyD

## TO BE COMPLETED BY APPLICANT:

I request the privileges checked above and attest that I have met the requirements for these privileges. I have crossed out any methods for which I do not have requisite training or recent experience, or currently do not perform or request. I understand that by making this request I am bound by the applicable bylaws, policies and procedures of the hospital and the Medical Staff and hereby stipulate that I meet the threshold criteria for each privilege requested.

Signature	Date
Board Date	

### Jefferson Healthcare Tele-Psychiatry Consultations Delineation of Privileges

To be eligible to request TELECONSULT privileges in psychiatry, the following minimum threshold criteria must be met:

#### **Basic education:**

Doctor of Medicine or Doctor of Osteopathy Degree (MD/DO) from an accredited program.

#### Formal training and experience at initial appointment:

- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited post-graduate training program in psychiatry.
- Current certification or active participation in the examination process leading to certification in Psychiatry by the American Board of Psychiatry and Neurology or the American Osteopathic Board of Neurology and Psychiatry. Must have current re-certification, if required by certifying board.

Applicants for initial appointment may be requested to provide documentation of the number and types of clinical cases during the past 24 months.

#### **Reappointment requirements:**

Governing Board Approval Date

Current demonstrated competency and an adequate volume of experience with acceptable results in the privileges requested for that past 12-24 months based on results of quality assessment/improvement activities and outcomes.

req	quested for that past 12-24 months based on results of quanty assessment/improvement activities and outcomes.
Psychiat	try Core Privileges for adult: Requested
	Via video conferencing providing tele-consultation for patients of all ages presenting with mental, behavioral, addictive, or emotional disorders, e.g. psychoses, depression, anxiety disorders, substance use disorders, developmental disabilities, sexual dysfunction, and adjustment disorders. Patients ages years old.
<b>Psychiat</b>	try Core Privileges for children and adolescents: Requested
	Via video conferencing providing tele-consultation for patients of all ages presenting with mental, behavioral, addictive, or emotional disorders, e.g. psychoses, depression, anxiety disorders, substance use disorders, developmental disabilities, sexual dysfunction, and adjustment disorders. Patients ages years old.
Requiren	ments:  Additional post-graduate training in child and adolescent psychiatry or documentation of 2 years work experience specific to the care and treatment of children and adolescents
Addictio	on Psychiatry Core Privileges:
Requ	nested
·	Via video conferencing providing tele-consultation for patients with mental problems related to addictive disorders and the special and emotional problems related to addiction and substance use disorders (alcoholism and other drug dependencies, such as psychoactive drug use and addiction), utilizing all forms of psychological and social treatment, including medications.
Requiren	nents:
-	Additional post-graduate training in addiction psychiatry or documentation of 2 years work experience specific to the care and treatment of addictive disorders.
procedure	the privileges checked above and attest that I have met the requirements for these privileges. I have crossed out any es that I do not currently perform or request. I understand that by making this request I am bound by the applicable bylaws, and procedures of the hospital and the Medical Staff and hereby stipulate that I meet the threshold criteria for each privilege.
Physician	n Signature Date
•	

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