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

Time:	WELCOME	Who:
2:00pm	Call to Order	Commissioner Buhler Rienstra
	Approve Agenda	Board of Commissioners
FOCUS REPORT		
2:00pm	Medical Group Update	Jake Davidson, COO & Dr. Butterfield, CMO, Med Group
PUBLIC COMMENT		
2:30pm	Public comments are welcome orally, with a 3-minute limit, or may be submitted via email at commissioners@jeffersonhealthcare.org , 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.	
CONSENT AGENDA		
2:35pm	Minutes: Action Requested <ul style="list-style-type: none"> June 19, 2024 Special Session (pages 3-5) 	Board of Commissioners
2:40pm	Required Approvals: Action Requested <ul style="list-style-type: none"> Resolution 2024-13 Surplus Equipment (pages 6-9) Resolution 2024-14 Canceled Warrants (pages 10-18) Resolution 2024-15 Quarterly QAPI Report (pages 19-22) Resolution 2024-16 Medical Director Addendum: Infection Control (pages 23-25) May and June Warrants and Adjustments (pages 26-29) Medical Staff Credentials / Appointments / Reappointments (pages 30-32) 	Board of Commissioners
STANDING REPORTS		
2:45pm 3:00pm	<ul style="list-style-type: none"> Quality Report Financial Report 	Brandie Manuel, CPSQO Tyler Freeman, CFO
3:15pm	<i>Break</i>	
STANDING REPORTS		
3:30pm 3:45pm	<ul style="list-style-type: none"> Construction Report Administrative Report 	Jake Davidson, COO Mike Glenn, CEO

	BOARD BUSINESS	
4:05pm	<ul style="list-style-type: none">• Meeting Evaluation	Board of Commissioners
4:20pm	CONCLUDE	

DRAFT

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

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Time:	WELCOME	Who:
2:00pm	<p>Call to Order The meeting was called to order at 2:01pm by Board Chair Buhler Rienstra. Commissioners in attendance included Commissioners Dressler, McComas, and Kolff. Commissioner Ready was excused due to a planned vacation out of the country. Also, in attendance were Mike Glenn, CEO; Tyler Freeman, CFO; Jake Davidson, COO; Brandie Manuel, CPSQO; Tina Toner, CNO; Dunia Faulx, CPAO, Dr. Joe Mattern, CMO; Shannon Groff, Executive Assistant, and Tom Dingus from DZA. This meeting was officially audio recorded by Jefferson Healthcare.</p> <p>Commissioner Kolff recognized today's holiday, Juneteenth. His report included a poem and Jefferson Healthcare's Health Equity Committee work. Discussion ensued.</p>	Commissioner Buhler Rienstra
	FOCUS REPORT	
2:00pm	<p>Independent Auditors Report Tom Dingus presented the Independent Auditors Report, which included the agenda, the audited financial statements, financial indicators, assets, liabilities, and net positions. We discussed the operating results, non-operating results, cash flows, notes to financial statements, long term debt, lease and subscription liabilities, new patient service revenue, revenue by payor (gross and net) cost-based reimbursement, independent auditors report on internal control over financial reporting, compliance and other matters, hospital comparison, contractual adjustment percentages, bad debt as a percentage of net patient revenue, bad debt and charity care percentages, full time equivalent employees (FTE) salaries and benefits per FTE, net patient service revenue per FTE and auditor required communications with those charged with governance. Discussed ensued.</p>	Tom Dingus
	STANDING REPORT	
2:30pm	<p>OB Sustainability Report Tina Toner and Dr. Mattern presented the OB Sustainability Report which included key takeaways, the rural maternity care crisis, most rural hospitals in the US no longer deliver babies, 61 hospitals closing departments or ending services, we are committed to providing the</p>	Tina Toner and Dr. Mattern

	care our community needs as long as we can do so safely and sustainably, additional key takeaways, declining births at Jefferson Healthcare/Jefferson County, we cannot grow our way into financial sustainability, additional key takeaways, the OB sustainability team, quality/patient experience/risk/financial, key takeaways around our goal to manage risk, minimizing the risk in Obstetrics, and the OB sustainability task force recommendations. Discussion ensued.	
3:00pm	Patient Story Tina Toner, Chief Nursing Officer introduced Commissioner Kees Kolff who shared this month’s patient story which included a story from a patient that had a co-pay bill and letter attached, which was the charity care/financial assistance letter that gets sent out to our patients. Commissioner Kolff was appreciative of the letter we send to our patients and thanked them for our continued services and support to our community. Discussion ensued.	Tina Toner, CNO
PUBLIC COMMENT		
3:15pm	Public comments are welcome orally, with a 3-minute limit, or may be submitted via email at commissioners@jeffersonhealthcare.org , 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. A member of the public, Angela addressed the comment from Tom’s audit regarding the Medicare Advantage for profit insurance. On June 3 rd , there was an announcement “taking advantage” and she highly encouraged us to be abreast of the article.	
CONSENT AGENDA		
3:20pm	Minutes: Action Requested <ul style="list-style-type: none"> May 22, 2024 Regular Session Commissioner Dressler made a motion to approve the May 22, 2024 Regular Session Minutes. Commissioner Kolff seconded. Action: Motion passed unanimously	Board of Commissioners
3:25pm	Required Approvals: Action Requested <ul style="list-style-type: none"> Medical Staff Credentials / Appointments / Reappointments Commissioner Dressler made a motion to approve the Required Approvals. Commissioner McComas seconded. Action: Motion passed unanimously.	Board of Commissioners
STANDING REPORTS		
3:30pm	<ul style="list-style-type: none"> Financial Report Tyler Freeman, Chief Financial Officer, presented the May Financial Report, which included a preview of May 2024 and a preview of June 2024. Discussion ensued.	Tyler Freeman, CFO
3:45pm	<ul style="list-style-type: none"> Quality Report 	Brandie Manuel, CPSQO

	Brandie Manuel, Chief Patient Safety and Quality Officer presented the June Quality Report, which included the Family Birth Unit by the numbers, OB Quality committee goals, quality measures, continuous improvement with our qualitative blood loss measurement, in the words of our patients, providing a service that we are proud of, AND project and initiatives in Q2 2024. Discussion ensued.	
4:00pm	Break Commissioners recessed for break at 4:13pm Commissioners reconvened from break at 4:30pm	
STANDING REPORTS		
4:15pm	<ul style="list-style-type: none"> Construction Report Jake Davidson, Chief Operating Officer provided a construction update. Discussion ensued.	Jake Davidson, COO
4:30pm	<ul style="list-style-type: none"> Administrative Report Mike Glenn, Chief Executive Officer, and Dunia Faulx, Chief Planning and Advocacy Officer, presented the June Administrative report. Discussion ensued.	Mike Glenn, CEO
BOARD BUSINESS		
4:55pm	<ul style="list-style-type: none"> CEO Emergency Succession Plan Mike Glenn, Chief Executive Officer presented the CEO Emergency Succession Plan which includes appointing Jake Davidson, COO and Tina Toner, CNO. Commissioner Kolff made a motion to approve the CEO Emergency Succession Plan. Commissioner Dressler seconded. Action: Motion passed unanimously	Mike Glenn, CEO
5:10pm	<ul style="list-style-type: none"> Meeting Evaluation Commissioners evaluated the meeting.	Board of Commissioners
CONCLUDE		
5:25pm	Commissioner Dressler made a motion to conclude the meeting. Commissioner McComas seconded. Action: Motion passed unanimously. Meeting concluded at 5:38pm. This Special Session will be officially recorded. The times shown on the agenda are estimates only. Approved by the Commission: Chair of Commission: Jill Buhler Rienstra <hr/> Secretary of Commission: Marie Dressler	

JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

RESOLUTION 2024-13

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 #
Roche AccuChek Inform II Glucometers	See attached	See attached	N/A

APPROVED this 24 day of July 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: Laboratory Date: 6/21/2024

Equipment to be declared surplus: Roche AccuChek Inform II glucometers

Asset Number: see attached Serial Number: see attached

Model Number: _____

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: \$0

Jacob Stokes
Department Director Signature

Mark Ferguson
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 have discretion to allow this.

Sell to _____

Approved by Commission on _____ Resolution # _____

BioMed label numbers for Roche docking stations

BioMed #	Serial #
LAB03627	UU42052179
LAB03628	UU42052112
CR0021	UU42052518
LAB03654	UU42052514
LAB03648	UU42052542
LAB03698	UU42095490
LAB03647	UU42052544
LAB03644	UU42052543
LAB03673	UU42063692
SS0082	UU42089967
LAB03662	UU42048786
LAB03650	UU42052517
LAB03649	UU42052515
LAB03693	UU42089968
SN0004	UU42089950
LAB03694	UU42089979
N/A	UU42095511
N/A	UU42071080
LAB03646	UU42052541
LAB03695	UU42089980
LAB03645	UU42052539
LAB03653	UU42052516
LAB03655	UU42052540
LAB03651	UU42052519
LAB03691	UU42089951
LAB03696	UU42089966
LAB03626	UU42052182
LAB03692	UU42089969

28 total

BioMed label numbers for Roche glucometers

BioMed #	Serial #
LAB03643	UU14331658
LAB0093	UU14589476
LAB0021	UU14567091
CR0020	UU14331645
LAB014	UU14560408
LAB03630	UU14331599
LAB03683	UU14385390
LAB03637	UU14331646
LAB03629	UU14331602
LAB03686	UU14395896
LAB03661	UU14341415
SS0083	UU14403654
LAB0029	UU14572701
SN003	UU14403655
LAB03632	UU14331660
LAB03634	UU14331664
LAB03737	UU14503681
LAB03726	UU14476464
LAB03724	UU14461942
LAB0090	UU14583109
LAB3640	UU14331670
LAB0364	UU14331663
OB03106	UU14170732
23 total	

JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

RESOLUTION 2024-14

A RESOLUTION CANCELING CERTAIN WARRANTS IN THE AMOUNT OF \$3,112.29

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, the warrants indicated below in the total amount of \$3,112.29 to be canceled.

Date of Issue	Warrant #	Amount
May 4, 2023	298885	\$400.00
June 1, 2023	299430	\$83.50
June 1, 2023	299544	\$99.96
June 8, 2023	299555	\$100.00
June 8, 2023	299558	\$1,957.13
June 8, 2023	299559	\$350.00
June 8, 2023	299560	\$38.20
June 8, 2023	299556	\$83.50
Total		\$3,112.29

APPROVED this 24 day of July 2024.

APPROVED BY THE COMMISSION:

Commission Chair Jill Buhler Rienstra: _____

Commission Secretary Marie Dressler: _____

Attest:

Commissioner Matt Ready: _____

Commissioner Kees Kolff: _____

Commissioner Bruce McComas: _____

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: TYLER FREEMAN, CFO
RE: May 2024 WARRANT SUMMARY

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

General Fund Warrants & ACH Transfers	\$21,081,432.29	(Provided under separate cover)
Allowance for Uncollectible Accounts / Charity	\$708,016.00	(Attached)
Canceled Warrants	400.00	(Attached)

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: TYLER FREEMAN, CFO
RE: May 2024 GENERAL FUND WARRANTS & ACH
FUND TRANSFERS

Submitted for your approval are the following warrants:

GENERAL FUND:

307158 - 307959 **\$8,436,258.03**

ACH TRANSFERS \$12,645,174.26

\$21,081,432.29

YEAR-TO-DATE: \$123,225,475.09

Warrants are available for review if requested.

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: TYLER FREEMAN, CFO
RE: May 2024 ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS, ADMINISTRATIVE, AND CHARITY CARE WRITE OFFS

Submitted for your approval are the following:

	May	May YTD	May YTD BUDGET
Allowance for Uncollectible Accounts:	195,955.00	1,438,126.00	1,506,810.00
Charity Care:	388,009.00	1,923,705.00	1,424,888.00
Other Administrative Adjustments:	124,052.00	333,637.00	685,252.00
	<hr/>		
TOTAL FOR MONTH:	708,016.00	3,695,468.00	3,616,950.00
	<hr/> <hr/>		

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: TYLER FREEMAN, CFO
RE: May 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
05/04/2023	298885 FBO HOSPITAL DISTRICT #2	400.00

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: TYLER FREEMAN, CFO
RE: June 2024 WARRANT SUMMARY

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

General Fund Warrants & ACH Transfers	\$24,740,989.69	(Provided under separate cover)
Allowance for Uncollectible Accounts / Charity	\$1,460,364.00	(Attached)
Canceled Warrants	4,542.93	(Attached)

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: TYLER FREEMAN, CFO
RE: June 2024 GENERAL FUND WARRANTS & ACH
FUND TRANSFERS

Submitted for your approval are the following warrants:

GENERAL FUND:

307960 - 308684

\$6,636,380.89

ACH TRANSFERS

\$18,104,608.80

\$24,740,989.69

YEAR-TO-DATE:

\$147,966,464.78

Warrants are available for review if requested.

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: TYLER FREEMAN, CFO
RE: June 2024 ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS, ADMINISTRATIVE, AND CHARITY CARE WRITE OFFS

Submitted for your approval are the following:

	June	June YTD	June YTD BUDGET
Allowance for Uncollectible Accounts:	716,214.00	2,154,341.00	1,804,207.00
Charity Care:	478,362.00	2,402,066.00	1,706,116.00
Other Administrative Adjustments:	265,788.00	599,425.00	820,499.00
	<hr/>		
TOTAL FOR MONTH:	1,460,364.00	5,155,832.00	4,330,822.00
	<hr/> <hr/>		

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: TYLER FREEMAN, CFO
RE: June 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
06/01/2023	299430 FBO HOSPITAL DISTRICT #2	83.50
06/01/2023	299544 FBO HOSPITAL DISTRICT #2	99.96
06/08/2023	299555 FBO HOSPITAL DISTRICT #2	100.00
06/08/2023	299558 FBO HOSPITAL DISTRICT #2	1,957.13
06/08/2023	299559 FBO HOSPITAL DISTRICT #2	350.00
06/08/2023	299560 FBO HOSPITAL DISTRICT #2	38.20
06/08/2023	299556 FBO HOSPITAL DISTRICT #2	83.50

JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

RESOLUTION 2024-15

A RESOLUTION TO DECLARE THAT ALL COMMISSIONERS HAVE RECEIVED A COPY OF THE HOME HEALTH/HOSPICE/PALLIATIVE CARE SUMMARY OF QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT PLAN AND APPROVE OF THE CURRENT PLAN AND INSTRUMENTS NECESSARY TO EXECUTE THIS PLAN.

WHEREAS all commissioners have received a copy of the Summary of Home Health/Hospice/Palliative Care Quality Assurance and Performance Improvement (QAPI) Plan, and;

WHEREAS the plan is approved as written including instruments necessary to execute this plan,

NOW, THEREFORE, BE IT RESOLVED THAT:

- 1) Commissioners have read the Quality Assurance and Performance Improvement (QAPI) Plan provided to them, and approve of the plan and instruments necessary to execute this plan:

APPROVED this 24th day of July 2024.

APPROVED BY THE COMMISSION:

Commission Chair Jill Buhler Rienstra: _____

Commission Secretary Marie Dressler: _____

Attest:

Commissioner Bruce McComas: _____

Commissioner Kees Kolff: _____

Commissioner Matt Ready: _____

Meeting: HHH/PC QAPI Meeting**Date:** 07/10/2024**Time:** 1:00 pm- 1:45 pm**Location:** Microsoft Teams**Recorder:** Kalie Fountain, Executive Assistant

X	David Hunsley, Director	X	Linda Potter, Hospice Lead Registered Nurse	X	Lisa Porter, Clinical Operations Manager	x	Gina lery, Hospice Registered Nurse
E	Dr. Joseph Mattern, Medical Director	E	Sara Katz, P.A.- Palliative Care	E	Jill Katenbrink Newsome, Community Liaison/ Hospice Ancillary Program Manager	X	Linda Calderwood, Nurse Practitioner- Palliative Care
X	Kyra Berkovich, Office Coordinator- Palliative Care	x	Macrena Lewis, Hospice RN	x	Jenny Slater, HHH & PC MSW	x	Kimberly McIntosh, Hospice RN
X	Dune Mohr, Hospice RN						

Topic/Discussion

Review:

-Patient Satisfaction/Grievance/Comments/Compliments

The group reviewed patient satisfaction results. Hospice "Overall rating of care" at 97.1% above the national average and "Would recommend" increased from 80% Q4 2023 to Q1 2024 to 100%. Comments from patients ranking at 95% positive and few negative. The number of respondents can range quarter to quarter anywhere from 5 to 12 or 17. Currently working on statistics for visits in last days of life, data not available yet, but should be at next quarterly meeting. Key driver area of focus for Hospice was "How often do you get the help you needed from the Hospice team during evenings, weekends, or holidays?", lots of work done on this collaborating with Northstar and provided guidance for on-call. Score in this key driver reported in Q4 2023 at 60%, now reporting at 100% for Q1 2024. Another key driver team has worked on is "How often did the team keep you informed about when they would arrive to care for your family member?" Q4 2023 reported at 77.8%, increased to 83.3% Q1 2024. Bereavement key driver team focused on "In the weeks after your family member died, how much emotional support did you get from the hospice team?" Reporting at 100% in both Q4 2023 and Q1 2024.

Action: Continue to work on key driver "How often did the team keep you informed about when they would arrive to care for your family member?" Do an audit on how many yellow calendars are out there being utilized.

Action: Circle back with Northstar management to discuss wait time on hold for over 5 minutes, ensuring they're able to handle it, and identify what type of patient it is

-Incident Reports

David reported there are not many incident reports to review.

-Infection Control Log

This is still forthcoming, and data will be entered into RLDatix.

Review Progress of Current Hospice Goals

PIP Title: Visits in Final Days of Life

Statistics not available yet, will be reported at the next quarterly meeting

PIP Title: Get Care When Needed

Keep this on the docket until next quarter and if still reporting out at 100%, discuss moving on to another key driver

PIP Title: Bereavement Satisfaction

Headed in right direction for last 2 quarters reporting at 100%, will continue to keep on the docket to see how team continues to do

PIP Title: Patient informed about when staff would arrive

Yellow calendars are less helpful for Hospice when it's apt to change, MyChart is not an option. Team discussed manually notifying patients through Artera texting application. Bereavement doesn't come through on text. If appointments are changed less than 22 hours, a manual reminder will need to go out.

Action: To investigate whether there is a line within Artera for Hospice. Kyra, Krystal, Lindsey, Jill, Pandora, David to brainstorm how to remind patients about when bereavement is showing up.

Group wrapped up reviewing Hospice goals, reviewed additional key drivers, one on pain management, "Did your family member get as much help with pain as he or she needed?" The score dropped from Q2 2023 at 100% to 95% Q3 2023, down to 75% Q4 2023, and back up to 87.5% Q1 2024. Pain management could be difficult to track as it's too broad. Patient and family might not always agree on pain management needs. Suggestion to look at Macy catheters and locating infusion pumps for subq PC/continuous in this next quarter, the group will revisit.

Discussion of key driver "How often did your family member get the help he or she needed from the hospice team for feelings of anxiety or sadness?" Factor could be needing to hire someone for spiritual care, the group will put this on the backburner for now.

Review Current Home Health Goals

-Creating a Team Approach to Care Management

Case management has been implemented

-OASIS Accuracy

Currently working on

-Improvement in Ambulation

-Improvement in Dyspnea

-Fall Prevention

-Improvement in Management of Oral Meds

Group will work on move questions and education associated with ambulation, dyspnea, fall prevention, an improvement in management of oral meds over the next quarter to improve consistency and interrater reliability

-Nursing Consistency of Care

Group is working on plans of care with Michelle Haines to upgrade plans of care in Home Health so they are more user friendly for the most common diagnoses Home Health runs into.

Home Health stats reporting at 95% for “Rate care from home health providers” and “Would you recommend”. Lots of positive comments and a few negative comments. Not at the point to focus on specific key drivers for Home Health yet.

Review Progress of Current Palliative Care Goal

PIP Title: Updating Referral Form

Updating referral form has been completed.

Next meeting: October 16, 2024 (Tentative)

DRAFT

JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

RESOLUTION 2024-16

A RESOLUTION APPROVING THE MEDICAL DIRECTOR ADDENDUM TO PROVIDER EMPLOYMENT AGREEMENT FOR JEFFERSON HEALTHCARE INFECTION CONTROL

WHEREAS this Medical Director Addendum supersedes any previous Medical Director Addendum.

NOW, THEREFORE BE IT RESOLVED THAT:

The Jefferson Healthcare Board of Commissioners approves of this Medical Director Addendum to the terms set forth in that certain Provider Employment Agreement with an effective date of January 01 ,2021, and agree that Provider shall serve as the Medical Director for the above-named service area at Jefferson Healthcare.

APPROVED this 24th day of July 2024.

APPROVED BY THE COMMISSION:

Commission Chair Jill Buhler Rienstra: _____

Commission Secretary Marie Dressler: _____

Attest:

Commissioner Matt Ready: _____

Commissioner Kees Kolff: _____

Commissioner Bruce McComas: _____

Medical Director, Infection Prevention and Control: In addition to the services described in the Provider Employment Agreement, Provider shall serve as the Medical Director of Infection Prevention and Control. Appointment to this position is based on the recommendation of medical staff and nursing leadership.

The Infection Control Officer shall be responsible for supporting infection prevention and control best practices across the organization by:

1. Serving as the Co-Chair of the Infection Control Committee meetings, which occur routinely, or appoints an appropriate medical staff designee to serve in his/her place when unable to do so.
2. Providing oversight for and implementation of the Infection Prevention Plan, in collaboration with leadership, Medical Staff, and the Infection Prevention Manager.
3. Provide subject-matter expertise on Infection Prevention/healthcare epidemiology, including the clinical review of healthcare associated infections.
4. Collaborate in a dyad relationship with the Manager of Infection Prevention and Control.
5. Addressing healthcare acquired infections and other infectious diseases, antibiotic use issues identified by the antimicrobial stewardship program, in collaboration with leadership from Patient Safety & Quality and Infection Control.
6. Participating in, and engaging staff in performance improvement activities related to infection prevention and control and reports progress to the Infection Control Committee.
7. Ensuring that systems are in place and operational for the tracking of infection surveillance, prevention, and control, and antibiotic use activities, to demonstrate the implementation, success, and sustainability of such activities.
8. Reviewing Epidemiological Reports to detect clustering of pathogenic organisms or increases in rates of infection in patient population.
9. Ensuring that policies and procedures and quality indicators are based on internal organizational risk assessment, evidence-based practices, and applicable rules, codes, guidelines, and requirements.
10. Informing hospital and Medical Staff leadership of acute issues and assists in the management and follow-up of Infection Control-related events when appropriate.
11. Recommending Infection Prevention quality indicators as part of the Medical Staff OPPE process.
12. Providing ongoing Medical Staff education and feedback regarding infection prevention practices, opportunities for improvement, and current trends. Recommends minimum contact hours or CMEs specific to Infection Prevention.

- 13. Participates in the Executive Quality Committee to ensure achievement of the organization’s achievement toward Infection Prevention and Control goals, objectives, outcomes, and improvement.

QUALIFICATIONS

1. Experience and Qualifications

- Minimum 5 years of direct patient care experience
- Knowledge of infection prevention and control including infectious diseases or the ability to communicate with a physician trained in infectious diseases.
- Experience in performance improvement preferred.
- Excellent interpersonal communication skills and presentation skills for both clinical and non-clinical audiences, in-group settings or one-on-one.
- Expertise in establishing physician relationships combined with the ability to manage an interdisciplinary team while appreciating and fostering collegial and peer participation from all disciplines.

2. Required certification / Licensing / Registration

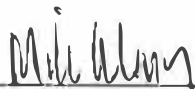
- MD/DO license in Washington State
- Board certification

3. Training requirements


- Shall have completed a basic course in infection prevention and control by a recognized body
- At a minimum, the Infection Prevention and Control Officer and all Infection Preventionists are required to have 8 hours of education, initially in orientation and then annually.

DISTRICT

PROVIDER



Mike Glenn, CEO



Tracie Harris, MD

10/13/21

Date

10/19/21

Date

Jefferson Healthcare

Gross Revenue

Inpatient Revenue

Outpatient Revenue

Total Gross Revenue

Revenue Adjustments

Cost Adjustment Medicaid

Cost Adjustment Medicare

Charity Care

Contractual Allowances Other

Administrative Adjustments

Allowance for Uncollectible Accounts

Total Revenue Adjustments

Net Patient Service Revenue

Other Revenue

340B Revenue

Other Operating Revenue

Total Operating Revenues

Operating Expenses

Salaries And Wages

Employee Benefits

Professional Fees

Purchased Services

Supplies

Insurance

Leases And Rentals

Depreciation And Amortization

Repairs And Maintenance

Utilities

Licenses And Taxes

Other

Total Operating Expenses

Operating Income (Loss)

Non Operating Revenues (Expenses)

Taxation For Maint Operations

Taxation For Debt Service

Investment Income

Interest Expense

Bond Issuance Costs

Gain or (Loss) on Disposed Asset

Contributions

Total Non Operating Revenues (Expenses)

Change in Net Position (Loss)

	May 2024 Actual	May 2024 Budget	Variance Favorable/ (Unfavorable)	%	May 2024 YTD	May 2024 Budget YTD	Variance Favorable/ (Unfavorable)	%	May 2023 YTD
Gross Revenue									
Inpatient Revenue	3,332,437	3,721,745	(389,307)	-10%	17,881,514	18,248,554	(367,040)	-2%	16,337,953
Outpatient Revenue	31,325,398	29,253,285	2,072,113	7%	153,001,949	143,435,462	9,566,487	7%	128,750,053
Total Gross Revenue	34,657,836	32,975,030	1,682,806	5%	170,883,464	161,684,016	9,199,448	6%	145,088,007
Revenue Adjustments									
Cost Adjustment Medicaid	2,684,440	2,607,748	(76,692)	-3%	11,549,159	12,786,378	1,237,219	10%	11,400,455
Cost Adjustment Medicare	14,110,809	11,836,686	(2,274,123)	-19%	67,669,495	58,037,944	(9,631,551)	-17%	51,468,891
Charity Care	388,009	290,602	(97,407)	-34%	1,923,705	1,424,888	(498,817)	-35%	1,284,959
Contractual Allowances Other	2,989,896	2,894,639	(95,257)	-3%	14,951,792	14,193,070	(758,722)	-5%	12,727,011
Administrative Adjustments	124,052	139,755	15,703	11%	333,637	685,252	351,615	51%	694,883
Allowance for Uncollectible Accounts	195,955	307,310	111,355	36%	1,438,126	1,506,810	68,684	5%	1,669,230
Total Revenue Adjustments	20,493,160	18,076,741	(2,416,420)	-13%	97,865,913	88,634,341	(9,231,572)	-10%	79,245,429
Net Patient Service Revenue	14,164,675	14,898,289	(733,614)	-5%	73,017,550	73,049,674	(32,124)	0%	65,842,578
Other Revenue									
340B Revenue	315,496	505,503	(190,007)	-38%	1,368,984	2,478,597	(1,109,613)	-45%	2,046,243
Other Operating Revenue	207,236	428,596	(221,360)	-52%	1,099,192	2,101,505	(1,002,312)	-48%	1,271,864
Total Operating Revenues	14,687,407	15,832,389	(1,144,982)	-7%	75,485,726	77,629,776	(2,144,050)	-3%	69,160,685
Operating Expenses									
Salaries And Wages	7,126,232	7,585,544	459,312	6%	36,853,466	37,193,637	340,171	1%	31,426,793
Employee Benefits	1,655,839	1,747,688	91,848	5%	8,252,945	8,569,307	316,362	4%	7,825,872
Professional Fees	659,765	205,419	(454,346)	-221%	2,397,864	1,007,216	(1,390,648)	-138%	3,448,586
Purchased Services	1,207,714	1,302,296	94,581	7%	5,626,538	6,385,449	758,911	12%	4,973,904
Supplies	3,336,240	3,107,851	(228,389)	-7%	15,541,546	15,238,112	(303,433)	-2%	14,244,417
Insurance	153,488	152,618	(870)	-1%	706,107	748,320	42,214	6%	654,573
Leases And Rentals	62,159	55,093	(7,066)	-13%	363,641	270,133	(93,508)	-35%	114,646
Depreciation And Amortization	406,054	437,672	31,619	7%	2,182,871	2,146,006	(36,866)	-2%	2,131,110
Repairs And Maintenance	137,345	135,900	(1,445)	-1%	483,323	666,347	183,025	27%	470,747
Utilities	113,018	136,899	23,881	17%	571,969	671,248	99,279	15%	525,982
Licenses And Taxes	36,892	88,315	51,423	58%	471,239	433,029	(38,210)	-9%	476,592
Other	360,462	311,710	(48,753)	-16%	1,372,373	1,528,382	156,009	10%	1,527,091
Total Operating Expenses	15,255,209	15,267,004	11,795	0%	74,823,881	74,857,187	33,306	0%	67,820,312
Operating Income (Loss)	(567,802)	565,384	(1,133,187)	-200%	661,845	2,772,589	(2,110,743)	-76%	1,340,372
Non Operating Revenues (Expenses)									
Taxation For Maint Operations	40,157	45,205	(5,048)	-11%	220,189	221,650	(1,460)	-1%	218,545
Taxation For Debt Service	-	-	-	0%	-	0	-	0%	0
Investment Income	1,182,839	207,344	975,495	470%	2,863,102	1,016,656	1,846,447	182%	0
Interest Expense	(595,408)	(417,744)	(177,664)	-43%	(2,924,597)	(2,048,293)	(876,304)	-43%	789,580
Bond Issuance Costs	-	(134,249)	134,249	100%	-	(658,251)	658,251	100%	344,369
Gain or (Loss) on Disposed Asset	-	-	-	0%	-	-	-	0%	-
Contributions	1,337,892	855,803	482,089	56%	2,533,351	4,196,197	(1,662,846)	-40%	34,684
Total Non Operating Revenues (Expenses)	1,965,481	556,360	1,409,121	253%	2,692,046	2,727,958	(35,912)	-1%	1,387,179
Change in Net Position (Loss)	1,397,678	1,121,744	275,934	25%	3,353,891	5,500,546	(2,146,656)	-39%	2,727,551

STATISTIC DESCRIPTION

STATISTIC DESCRIPTION	MAY 2024						MAY 2023			
	MO	MO	%	YTD	YTD	%	MO	%	YTD	%
	ACTUAL	BUDGET	VARIANCE	ACTUAL	BUDGET	VARIANCE	ACTUAL	VARIANCE	ACTUAL	VARIANCE
FTEs - TOTAL (AVG)	694	696	0%	676	696	3%	602	-15%	601	-12%
FTEs - PRODUCTIVE (AVG)	620	619	0%	610	619	1%	553	-12%	550	-11%
ADJUSTED PATIENT DAYS	3,912	3,041	29%	19,669	14,909	32%	3,606	8%	16,227	21%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	45	88	-49%	307	431	-29%	97	-54%	423	-27%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	326	295	11%	1,768	1,446	22%	232	41%	1,442	18%
SWING IP PATIENT DAYS (MIDNIGHT CENSUS)	2	25	-92%	72	125	-42%	11	-450%	28	61%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	373	408	-9%	2,147	2,002	7%	340	10%	1,893	12%
BIRTHS	8	7	14%	34	33	3%	9	-11%	28	18%
SURGERY CASES (IN OR)	122	134	-9%	692	657	5%	132	-8%	625	10%
SURGERY MINUTES (IN OR)	17,803	18,067	-1%	97,134	88,587	10%	18,258	-2%	86,876	11%
SPECIAL PROCEDURE CASES	128	88	45%	531	429	24%	100	28%	419	21%
LAB BILLABLE TESTS	23,588	21,873	8%	115,088	107,249	7%	21,496	10%	105,075	9%
BLOOD BANK UNITS MATCHED	35	45	-22%	207	220	-6%	35	0%	216	-4%
MRIs COMPLETED	265	242	10%	1,223	1,189	3%	259	2%	1,166	5%
CT SCANS COMPLETED	753	649	16%	3,507	3,182	10%	624	21%	3,082	12%
RADIOLOGY-DEXA	212	128	66%	770	630	22%	137	55%	701	9%
X-RAYS COMPLETED	1,739	1,584	10%	8,704	7,768	12%	1,839	-5%	8,886	-2%
ECHOs COMPLETED	210	192	9%	994	941	6%	192	9%	944	5%
ULTRASOUNDS COMPLETED	451	369	22%	2,008	1,808	11%	417	8%	1,799	10%
MAMMOGRAPHS COMPLETED	274	320	-14%	1,340	1,570	-15%	351	-22%	1,514	-13%
NUCLEAR MEDICINE TESTS	39	35	11%	166	170	-2%	39	0%	174	-5%
TOTAL DIAGNOSTIC IMAGING TESTS	3,943	3,519	12%	18,712	17,258	8%	3,858	2%	18,266	2%
PHARMACY MEDS DISPENSED	21,265	23,412	-9%	108,922	114,793	-5%	20,648	3%	102,790	6%
ANTI COAG VISITS	337	365	-8%	1,596	1,792	-11%	369	-9%	1,807	-13%
RESPIRATORY THERAPY PROCEDURES	2,368	2,926	-19%	14,285	14,347	0%	2,754	-14%	13,560	5%
PULMONARY REHAB	131	109	20%	463	535	-13%	98	34%	453	2%
CARDIAC REHAB SESSIONS	208	202	3%	855	990	-14%	181	15%	906	-6%
PHYSICAL THERAPY	8,003	6,924	16%	35,094	33,949	3%	7,577	6%	31,680	10%
OCCUPATIONAL THERAPY	700	1,273	-45%	4,507	6,240	-28%	1,360	-49%	6,409	-42%
SPEECH THERAPY	242	288	-16%	1,120	1,414	-21%	340	-29%	1,431	-28%
REHAB/PT/OT/ST	9,284	8,796	6%	42,039	43,128	-3%	9,556	-3%	40,879	3%
ER CENSUS	1,312	1,240	6%	6,000	6,081	-1%	1,261	4%	5,740	4%
EXPRESS CLINIC	1,310	1,160	13%	5,879	5,686	3%	1,190	10%	5,681	3%
SOCO PATIENT VISITS	193	228	-15%	904	1,117	-19%	203	-9%	646	29%
PORT LUDLOW PATIENT VISITS	513	764	-33%	2,840	3,746	-24%	722	-29%	3,354	-18%
SHERIDAN PATIENT VISITS	3,325	2,822	18%	14,769	13,835	7%	2,834	17%	13,594	8%
DENTAL CLINIC	530	491	8%	2,281	2,410	-5%	537	-1%	2,380	-4%
WATERSHIP CLINIC PATIENT VISITS	1,282	1,284	0%	5,860	6,297	-7%	1,370	-6%	5,922	-1%
TOWNSEND PATIENT VISITS	607	535	13%	2,874	2,624	10%	542	12%	2,579	10%
TOTAL RURAL HEALTH CLINIC VISITS	7,760	7,284	7%	35,407	35,715	-1%	7,398	5%	34,156	4%
CARDIOLOGY CLINIC VISITS	499	628	-21%	2,395	3,080	-22%	547	-9%	2,770	-16%
DERMATOLOGY CLINIC VISITS	677	757	-11%	3,153	3,713	-15%	758	-11%	3,765	-19%
GEN SURG PATIENT VISITS	364	342	6%	1,795	1,679	7%	351	4%	1,579	12%
ONCOLOGY VISITS	433	680	-36%	1,952	3,335	-41%	547	-21%	2,615	-34%
ORTHO PATIENT VISITS	757	631	20%	3,342	3,094	8%	625	21%	2,984	11%
SLEEP CLINIC VISITS	230	197	17%	1,016	965	5%	208	11%	840	17%
UROLOGY VISITS	125	211	-41%	1,042	1,037	0%	286	-56%	1,115	-7%
OB/GYN CLINIC VISITS	391	331	18%	1,827	1,625	12%	342	14%	1,581	13%
WOUND CLINIC VISITS	158	187	-16%	674	916	-26%	215	-27%	789	-17%
HANDS/PLASTICS	113	226	-50%	931	1,108	-16%	232	-51%	1,129	-21%
TOTAL SPECIALTY CLINIC VISITS	3,747	4,190	-11%	18,127	20,552	-12%	4,111	-9%	19,167	-6%
SLEEP CENTER SLEEP STUDIES	57	58	-2%	250	284	-12%	55	4%	273	-9%
INFUSION CENTER VISITS	764	905	-16%	3,356	4,438	-24%	909	-16%	4,362	-30%
SURGERY CENTER ENDOSCOPIES	76	76	0%	365	374	-2%	58	31%	271	26%
HOME HEALTH EPISODES	73	77	-5%	398	377	6%	72	1%	347	13%
HOSPICE CENSUS/DAYS	780	1,175	-34%	4,037	5,759	-30%	1,455	-46%	5,596	-39%
DIETARY MEALS SERVED	6,841	9,801	-30%	33,598	48,057	-30%	9,128	-25%	47,526	-41%
MAT MGMT TOTAL ORDERS PROCESSED	1,924	1,701	13%	9,276	8,340	11%	1,633	18%	7,486	19%

Gross Revenue

Inpatient Revenue
Outpatient Revenue

Total Gross Revenue

Revenue Adjustments

Cost Adjustment Medicaid
Cost Adjustment Medicare
Charity Care
Contractual Allowances Other
Administrative Adjustments
Allowance for Uncollectible Accounts

Total Revenue Adjustments

Net Patient Service Revenue

Other Revenue

340B Revenue
Other Operating Revenue

Total Operating Revenues

Operating Expenses

Salaries And Wages
Employee Benefits
Professional Fees
Purchased Services
Supplies
Insurance
Leases And Rentals
Depreciation And Amortization
Repairs And Maintenance
Utilities
Licenses And Taxes
Other

Total Operating Expenses
Operating Income (Loss)

Non Operating Revenues (Expenses)

Taxation For Maint Operations
Investment Income
Interest Expense
Bond Issuance Costs
Gain or (Loss) on Disposed Asset
Contributions

Total Non Operating Revenues (Expenses)

Change in Net Position (Loss)

	June 2024 Actual	June 2024 Budget	Variance Favorable/ (Unfavorable)	%	June 2024 YTD	June 2024 Budget YTD	Variance Favorable/ (Unfavorable)	%	June 2023 YTD
Gross Revenue									
Inpatient Revenue	3,267,837	3,601,688	(333,851)	-9%	21,149,351	21,850,242	(700,891)	-3%	20,091,222
Outpatient Revenue	29,772,912	28,309,631	1,463,281	5%	182,774,861	171,745,093	11,029,768	6%	156,615,906
Total Gross Revenue	33,040,749	31,911,319	1,129,430	4%	203,924,212	193,595,335	10,328,878	5%	176,707,128
Revenue Adjustments									
Cost Adjustment Medicaid	824,651	2,523,627	1,698,976	67%	12,373,810	15,310,005	2,936,195	19%	14,109,770
Cost Adjustment Medicare	13,216,955	11,454,857	(1,762,097)	-15%	80,886,449	69,492,801	(11,393,648)	-16%	63,312,700
Charity Care	478,362	281,228	(197,134)	-70%	2,402,066	1,706,116	(695,950)	-41%	1,557,284
Contractual Allowances Other	2,527,145	2,801,264	274,119	10%	17,478,937	16,994,333	(484,603)	-3%	15,496,586
Administrative Adjustments	265,788	135,247	(130,540)	-97%	599,425	820,499	221,075	27%	748,924
Allowance for Uncollectible Accounts	716,214	297,397	(418,818)	-141%	2,154,341	1,804,207	(350,134)	-19%	1,806,316
Total Revenue Adjustments	18,029,114	17,493,620	(535,494)	-3%	115,895,028	106,127,961	(9,767,066)	-9%	97,031,579
Net Patient Service Revenue	15,011,634	14,417,699	593,936	4%	88,029,185	87,467,373	561,811	1%	79,675,549
Other Revenue									
340B Revenue	252,944	489,197	(236,253)	-48%	1,621,928	2,967,793	(1,345,866)	-45%	2,815,882
Other Operating Revenue	721,417	352,871	368,546	104%	2,065,802	2,140,751	(74,949)	-4%	1,640,395
Total Operating Revenues	15,985,995	15,259,766	726,229	5%	91,716,914	92,575,917	(859,003)	-1%	84,131,826
Operating Expenses									
Salaries And Wages	6,759,706	7,340,850	581,143	8%	43,613,172	44,534,487	921,314	2%	37,712,862
Employee Benefits	1,457,044	1,691,310	234,267	14%	9,709,989	10,260,617	550,629	5%	8,982,410
Professional Fees	675,449	198,793	(476,656)	-240%	3,073,313	1,206,009	(1,867,304)	-155%	4,393,011
Purchased Services	1,057,406	1,260,286	202,880	16%	6,683,945	7,645,735	961,791	13%	6,094,302
Supplies	2,896,493	3,007,597	111,104	4%	18,438,039	18,245,709	(192,330)	-1%	17,013,749
Insurance	143,828	147,695	3,866	3%	849,935	896,015	46,080	5%	783,985
Leases And Rentals	(21,727)	53,316	75,042	141%	341,914	323,449	(18,465)	-6%	162,868
Depreciation And Amortization	694,439	423,554	(270,885)	-64%	2,877,311	2,569,559	(307,751)	-12%	2,570,063
Repairs And Maintenance	106,028	131,516	25,488	19%	589,351	797,863	208,513	26%	517,540
Utilities	144,759	132,483	(12,276)	-9%	716,728	803,731	87,003	11%	665,629
Licenses And Taxes	308,517	85,466	(223,051)	-261%	779,756	518,495	(261,261)	-50%	491,702
Other	275,544	301,654	26,110	9%	1,647,917	1,830,036	182,120	10%	1,779,293
Total Operating Expenses	14,497,488	14,774,520	277,032	2%	89,321,369	89,631,707	310,338	0%	81,167,414
Operating Income (Loss)	1,488,508	485,247	1,003,261	207%	2,395,545	2,944,211	(548,665)	-19%	2,964,413
Non Operating Revenues (Expenses)									
Taxation For Maint Operations	44,038	43,747	291	1%	264,227	265,397	(1,169)	0%	262,255
Investment Income	520,323	200,656	319,667	159%	3,383,425	1,217,311	2,166,113	178%	958,208
Interest Expense	(593,122)	(404,268)	(188,854)	-47%	(3,517,719)	(2,452,561)	(1,065,157)	-43%	(439,020)
Bond Issuance Costs	-	(129,918)	129,918	100%	-	(788,169)	788,169	100%	-
Gain or (Loss) on Disposed Asset	-	-	-	0%	-	-	-	0%	-
Contributions	86,280	890,096	(803,817)	-90%	2,374,439	5,399,918	(3,025,480)	-56%	209,470
Total Non Operating Revenues (Expenses)	57,518	600,312	(542,794)	-90%	2,504,372	3,641,895	(1,137,523)	-31%	990,912
Change in Net Position (Loss)	1,546,026	1,085,559	460,467	42%	4,899,917	6,586,105	(1,686,189)	-26%	3,955,325

Jefferson Healthcare

STATISTIC DESCRIPTION

STATISTIC DESCRIPTION	JUNE 2024						JUNE 2023			
	MO	MO	%	YTD	YTD	%	MO	%	YTD	%
	ACTUAL	BUDGET	VARIANCE	ACTUAL	BUDGET	VARIANCE	ACTUAL	VARIANCE	ACTUAL	VARIANCE
FTEs - TOTAL (AVG)	685	696	2%	678	696	3%	611	-12%	604	-12%
FTEs - PRODUCTIVE (AVG)	610	619	1%	610	619	1%	547	-12%	550	-11%
ADJUSTED PATIENT DAYS	4,505	2,943	53%	24,174	17,852	35%	3,195	41%	19,422	24%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	65	85	-24%	372	516	-28%	96	-32%	519	-28%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	364	285	28%	2,132	1,731	23%	280	30%	1,722	19%
SWING IP PATIENT DAYS (MIDNIGHT CENSUS)	14	25	-44%	66	149	-56%	5	64%	33	50%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	443	395	12%	2,570	2,396	7%	381	16%	2,274	12%
BIRTHS	6	7	-14%	40	40	0%	8	-25%	36	10%
SURGERY CASES (IN OR)	138	130	6%	830	787	5%	143	-3%	768	7%
SURGERY MINUTES (IN OR)	18,282	17,484	5%	115,416	106,071	9%	19,778	-8%	106,654	8%
SPECIAL PROCEDURE CASES	98	85	15%	629	514	22%	98	0%	517	18%
LAB BILLABLE TESTS	22,032	21,168	4%	137,120	128,416	7%	21,515	2%	126,590	8%
BLOOD BANK UNITS MATCHED	34	43	-21%	241	264	-9%	44	-23%	260	-8%
MRIs COMPLETED	264	235	12%	1,487	1,423	4%	266	-1%	1,432	4%
CT SCANS COMPLETED	727	628	16%	4,234	3,810	11%	675	8%	3,757	11%
RADIOLOGY-DEXA	149	124	20%	919	754	22%	158	-6%	859	7%
X-RAYS COMPLETED	1,778	1,533	16%	10,482	9,302	13%	1,969	-10%	10,855	-4%
ECHOs COMPLETED	155	186	-17%	1,149	1,127	2%	189	-18%	1,133	1%
ULTRASOUNDS COMPLETED	405	357	13%	2,413	2,165	11%	379	7%	2,178	10%
MAMMOGRAPHS COMPLETED	270	310	-13%	1,610	1,880	-14%	375	-28%	1,889	-17%
NUCLEAR MEDICINE TESTS	31	34	-9%	197	204	-3%	31	0%	205	-4%
TOTAL DIAGNOSTIC IMAGING TESTS	3,779	3,407	11%	22,491	20,665	9%	4,042	-7%	22,308	1%
PHARMACY MEDS DISPENSED	21,930	22,657	-3%	130,852	137,450	-5%	21,374	3%	124,164	5%
ANTI COAG VISITS	283	354	-20%	1,879	2,145	-12%	350	-19%	2,157	-15%
RESPIRATORY THERAPY PROCEDURES	2,135	2,832	-25%	16,420	17,178	-4%	2,890	-26%	16,450	0%
PULMONARY REHAB	133	106	25%	596	641	-7%	122	9%	575	4%
CARDIAC REHAB SESSIONS	177	195	-9%	1,032	1,186	-13%	219	-19%	1,125	-9%
PHYSICAL THERAPY	7,433	6,700	11%	42,527	40,649	5%	6,879	8%	38,559	9%
OCCUPATIONAL THERAPY	837	1,232	-32%	5,344	7,472	-28%	1,104	-24%	7,513	-41%
SPEECH THERAPY	264	279	-5%	1,384	1,693	-18%	271	-3%	1,702	-23%
REHAB/PT/OT/ST	8,844	8,512	4%	50,883	51,641	-1%	8,595	3%	49,474	3%
ER CENSUS	1,366	1,200	14%	7,366	7,282	1%	1,233	11%	6,973	5%
EXPRESS CLINIC	1,232	1,122	10%	7,111	6,809	4%	1,165	6%	6,846	4%
SOCO PATIENT VISITS	195	220	-11%	1,099	1,337	-18%	134	46%	780	29%
PORT LUDLOW PATIENT VISITS	513	739	-31%	3,353	4,486	-25%	706	-27%	4,060	-21%
SHERIDAN PATIENT VISITS	2,932	2,731	7%	17,701	16,566	7%	2,720	8%	16,314	8%
DENTAL CLINIC	412	476	-13%	2,693	2,885	-7%	521	-21%	2,901	-8%
WATERSHIP CLINIC PATIENT VISITS	1,122	1,243	-10%	6,982	7,540	-7%	1,243	-10%	7,165	-3%
TOWNSEND PATIENT VISITS	518	518	0%	3,392	3,142	8%	576	-10%	3,155	7%
TOTAL RURAL HEALTH CLINIC VISITS	6,924	7,049	-2%	42,331	42,765	-1%	7,065	-2%	41,221	3%
CARDIOLOGY CLINIC VISITS	514	608	-15%	2,909	3,688	-21%	601	-14%	3,371	-16%
DERMATOLOGY CLINIC VISITS	622	733	-15%	4,221	4,446	-5%	868	-28%	4,633	-10%
GEN SURG PATIENT VISITS	289	331	-13%	2,084	2,010	4%	346	-16%	1,925	8%
NEUROLOGY VISITS	29	8	263%	87	49	78%	-	-	-	-
ONCOLOGY VISITS	413	658	-37%	2,365	3,994	-41%	539	-23%	3,154	-33%
ORTHO PATIENT VISITS	628	611	3%	3,970	3,705	7%	673	-7%	3,657	8%
RHEUMATOLOGY VISITS	10	4	150%	32	24	33%	-	-	-	-
SLEEP CLINIC VISITS	186	190	-2%	1,202	1,155	4%	176	6%	1,016	15%
UROLOGY VISITS	188	205	-8%	1,230	1,241	-1%	200	-6%	1,315	-7%
OB/GYN CLINIC VISITS	304	321	-5%	2,131	1,945	10%	375	-19%	1,956	8%
WOUND CLINIC VISITS	136	181	-25%	810	1,096	-26%	160	-15%	949	-17%
HANDS/PLASTICS	135	219	-38%	1,066	1,327	-20%	204	-34%	1,333	-25%
TOTAL SPECIALTY CLINIC VISITS	3,454	4,069	-15%	22,107	24,680	-10%	4,142	-17%	23,309	-5%
SLEEP CENTER SLEEP STUDIES	65	56	16%	315	340	-7%	59	10%	332	-5%
INFUSION CENTER VISITS	753	876	-14%	4,554	5,314	-14%	928	-19%	5,290	-16%
SURGERY CENTER ENDOSCOPIES	60	74	-19%	425	448	-5%	60	0%	331	22%
HOME HEALTH EPISODES	69	74	-7%	467	451	4%	86	-20%	433	7%
HOSPICE CENSUS/DAYS	837	1,137	-26%	5,515	6,896	-20%	1,217	-31%	6,813	-24%
DIETARY MEALS SERVED	6,650	9,485	-30%	40,248	57,542	-30%	10,333	-36%	57,858	-44%
MAT MGMT TOTAL ORDERS PROCESSED	1,656	1,646	1%	10,932	9,986	9%	1,700	-3%	9,186	16%

FROM: Medical Staff Services
RE: 7/16/24 Medical Executive Committee appointments/reappointments for Board approval 7/24/2024

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. Jackson, Tamara, PA-C - Orthopedic Surgery of the Hand
2. Ur, Rebecca, MD - Vascular Surgery
3. Huckabee, Jennifer, MD - Tele-Radiology - RealRads
4. Ramirez, Kelly, MD - Tele-Neurology/Neurology
5. Romba, Meghan, MD – Tele-Neurology - Providence
6. Olinger, Jill, MD - LOCUMS - Dermatology

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

1. Abhold, Sarah, DO - Primary Care
2. Abar, Farnoush, MD - Medical Oncology

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

1. Pulkurthy, Satyavardhan, MD - Cardiology
2. Judd, Lilith, MD – Teleneurology - Providence
3. Fortna, Ryan, MD – Pathology - NW Pathology
4. Kansara, Amit, MD - Teleneurology - Providence
5. Ogami, Kyle, MD - Teleneurology - Providence
6. Hsi, Richard, MD - Radiation Oncology
7. Pham, Anthony, MD - Radiation Oncology

Recommended re-appointment to the LOCUMS with Privileges as requested.

1. N/A

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

1. Erickson, Todd, CRNA - Anesthesiology

Recommended Temporary Privileges:

1. N/A

Recommended POCUS Privileges:

1. N/A

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Medical Student Rotation:

1. Shelly Zinghang 7/1/24 to 8/2/24 – Dr. Hong
2. Megan Bland 5/29 to 8/31 – Dr. Luqman

Disaster Privileging

1. N/A

90-day provisional performance review completed successfully:

1. Wilford, Boone, ARNP - Oncology
2. McGruder, Jr., Robert, ARNP - Cardiology/Stress Tests
3. Kundra, Ajay, MD - Oncology
4. Lee, Ashley, MD - Skagit Radiology

Resignations:

1. Wilford, Boone, ARNP – Resigned 6-28-24
2. Alexandra Murphy PhD – Psychology - Resigned 5/26/24

Policy and Privilege Review

Annual review of polices

1. Medical Staff Peer Review
2. OB Patient Management in ACU
3. Physician Supervision of Physician Assistants
4. Practitioner Proctoring Policy
5. Practitioner Re-Entry Policy
6. Practitioner Rights in the Credentialing Process
7. Telemedicine Services
8. Initial Appointment Processing
9. Reproductive Health Care

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Bi-Annual Review of Privileges

N/A

DRAFT