

Wednesday, January 28, 2026



Audio Only: dial Phone Conference Line: (509) 598-2842
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Microsoft Teams meeting: Join on your computer or mobile app.
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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 above or in person in the Dirksen Conference Room at 834 Sheridan Street. Limited seating is available.

WELCOME	Who:
<p>Call to Order The meeting was called to order at 2:00pm by Board Vice Chair Dressler. Commissioners in attendance included Commissioners Rhoden, Kolff, McComas, and Ready. Also, in attendance were Mike Glenn, CEO; Jake Davidson, COO; Tina Toner, CNO; Brandie Manuel, CPSQO; Brittany Huntingford, Executive Assistant; and Skip Houser, Attorney of Budd Bay Law. Commissioner Dressler Welcomed new Board Member Patty Rhoden</p> <p>This meeting was officially recorded by Jefferson Healthcare.</p>	Commissioner Dressler
<p>Approve Agenda Commissioner Kolff motioned to accept the agenda with the following amendment, add a break before Board Business, Commissioner Kolff also requested that we hold the Board Business section until 3pm when East Jefferson Fire and Rescue and PT School District will arrive to speak about their Levy Lid Lifts and Bond requests Commissioner McComas seconded. Action: Motion passed as amended.</p>	Board of Commissioners
<p>Patient Story Tina Toner, Chief Nursing Officer, shared with the board a patient story for January, focused on Experience in the ED as well as in the In Patient Unit.</p>	Tina Toner, CNO
PUBLIC COMMENT	
<p>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.</p> <p>There was no public comment</p>	
ACTION REQUESTED	
<p>Election of Officers Commissioner Kolff made a motion to nominate Commissioner McComas as Board Chair, Commissioner Rhoden seconded. Action: Motion passed unanimously</p> <p>Commissioner McComas made a motion to nominate Commissioner Dressler as Board Secretary, Commissioner Kolff seconded.</p>	

<p>Action: Motion passed unanimously</p> <p>Minutes: Action Requested</p> <ul style="list-style-type: none"> December 17, 2025, Special Session Minutes January 15, 2026, Special Session Minutes Medical Staff Credentials / Appointments / Reappointments <p>Commissioner McComas asked if there are any amendments to be made. No discussion or amendments were made. The minutes from December 17th Special Session minutes, January 15th Special Session minutes and Medical Staff Credentials are approved as presented.</p> <p>Commissioner Ready made a motion to amend the November 19th Special Session minutes to clarify that the attorney Jeffry Myers retained by the commission in the current OPMA lawsuit does not and never did represent Commissioner Matt Ready personally, and that any prior implication otherwise was inadvertent and is hereby corrected for the record. Commissioner Kolff seconded.</p> <p>Action: Motion passes with 4 ayes and 1 abstention.</p>	
CONSENT AGENDA	
<p>Required Approvals: Action Requested</p> <ul style="list-style-type: none"> Resolution 2026-01 Canceled Warrants Resolution 2026-02 Surplus Equipment Resolution 2026-03 Q1 QAPI November & December Warrants and Adjustments Annual Hospice Report & Quarterly QAPI Plan <p>Commissioner Dressler made a motion to approve the Required Approvals. Commissioner Kolff seconded.</p> <p>Action: Motion passed unanimously.</p>	Board of Commissioners
STANDING REPORTS	
<ul style="list-style-type: none"> Quality Report <p>Brandie Manuel, Chief Patient Safety & Quality Officer, gave the January quality report which included a recap of 2025 focusing on Culture of Safety, 2025 Performance, 2025 Patient Experience, and a2025 Annual Summary. Discussion ensued.</p> <ul style="list-style-type: none"> Financial Report <p>Donna Lipskey, Controller, presented the November and December Financial Report which included a review of our statistics, income statement, cash and accounts receivable. Discussion ensued.</p> <ul style="list-style-type: none"> Administrative Report <p>Mike Glenn, Chief Executive Officer, welcomed Elise Wright, Population Health and Government Advocacy Manager, who provided an update on Advocacy with a focus on What we've been up to in the last month, What We're Watching.</p> <p>Commissioner Kolff moved that we pivot to the Board Business that we have the guest speakers for, Commissioner Ready seconded.</p> <p>Action: The motion passes unanimously.</p>	<p>Brandie Manuel, CPSQO</p> <p>Tyler Freeman, CFO</p> <p>Mike Glenn, CEO</p>
BOARD BUSINESS	

<ul style="list-style-type: none"> • Consider Jefferson County Fire Protection District No. 1 (East Jefferson Fire Rescue) Proposition No. 1 Levy Lid Lift & Proposition No. 2 Emergency Medical Services Levy Lid Lift <ul style="list-style-type: none"> ○ Public Comment <p>There was no public comment.</p> <p>Commissioner Kolff made a motion to support and endorse both Jefferson County Fire Protection District No. 1 (East Jefferson Fire Rescue) Proposition No. 1 Levy Lid Lift & Proposition No. 2 Emergency Medical Services Levy Lid Lift, Commissioner Ready seconded.</p> <p>Action: Motion passed unanimously.</p> <ul style="list-style-type: none"> • Consider Port Townsend School District No. 50 Proposition No. 1 Bonds to Renovate Aging Schools and Improve Safety <ul style="list-style-type: none"> ○ Public Comment <p>There was no public comment.</p> <p>Commissioner Kolff made a motion to support and endorse the Port Townsend School District No. 50 Proposition No. 1 Bonds to Renovate Aging Schools and Improve Safety, Commissioner Dressler seconded.</p> <p>Action: Motion passed unanimously.</p>	
<p>Break</p> <p>Commissioners recessed for break at 3:30 pm Commissioners reconvened from break at 3:40 pm</p>	
<p>STANDING BUSINESS</p>	
<p>Mike Glenn, Chief Executive Officer, also shared an update on the strategic plan with the addition of 2 tactics focused on population health as requested at the 01.15.2026 Board Retreat. CEO Glenn also shared updates on DC & Olympia, HR1 Mitigation Planning, Exciting Happenings, and the Employee Services Gala last week.</p> <ul style="list-style-type: none"> ○ Strategic Plan <p>Commissioner Dressler moved to accept the strategic plan with the two additions around population health as noted today and reviewed at the Board Retreat. Commissioner Rhoden seconded.</p> <p>Action: Motion passed unanimously</p>	
<p>BOARD BUSINESS</p>	
<ul style="list-style-type: none"> • Board Report <p>There were no board reports at this time</p> <ul style="list-style-type: none"> • Annual Agenda Assessment (as per board book) <p>This will be reviewed in March.</p> <ul style="list-style-type: none"> • Adopt Board Book <p>Commissioner Dressler moved to accept the board book as reviewed at the retreat. Commissioner Kolff seconded.</p> <p>Action: Motion passed unanimously.</p> <ul style="list-style-type: none"> • Resolution 2026-04 Regular Board Meeting Schedule for 2026 <p>Commissioner Kolff moved to accept Resolution 2026-01 Regular Board Meeting Schedule for 2026. Commissioner Ready seconded.</p> <p>Action: Motion passed unanimously.</p>	<p>Board of Commissioners</p>

<ul style="list-style-type: none"> • Review/Adopt Administrative Committee Assignments <p>Discussion ensued.</p> <ul style="list-style-type: none"> • Agenda Evaluation <p>Discussion ensued.</p>	
CONCLUDE	
<ul style="list-style-type: none"> • Conclude <p>Commissioner Kolff made a motion to conclude the meeting. Commissioner Dressler seconded.</p> <p>Action: Motion passed unanimously.</p> <p>Meeting concluded at 4:18pm.</p> <p>Approved by the Commission: Chair of Commission: Bruce McComas</p>  <p>Secretary of Commission: Marie Dressler</p> 	<p>Board of Commissioners</p>

This Regular Session will be officially recorded.

Patient Story

A big thank you to our Care Teams for all that you do!



Jefferson Healthcare

Patient Safety and Quality Report

Presented to the Board of Commissioners

January 28, 2026

01 Leadership
Facilitating and mentoring teamwork, improvement, respect, and psychological Safety. Ensuring accountability for acting in a safe manner.

05 Continuous Learning
Regularly collecting and learning from defects and successes

02 Transparency
Openly sharing data and other information concerning safe, respectful, and reliable care with team members and patients.

06 Engagement
Engaging those closest to the work in the analysis of data and systems and the improvement efforts.

03 Reliability
Applying best evidence and minimizing non-patient-specific variation, with the goal of failure free operation over time.

07 Teamwork and Communication
A shared mental model, including the anticipation of needs and problems and agreed upon methods to manage these, as well as conflict situations.

04 Improvement & Measurement
Improving work processes and patient outcomes using standard improvement tools, including measurements over time.

08 Psychological Safety
Creating an environment where people feel comfortable and have opportunities to raise concerns or ask questions.

Culture of Safety



Adapted from the Framework for Safe, Reliable, and Effective Care. IHI, 2017.

2025 Performance

Tactics	Goal	2025	Status
TeamSTEPPS Classes	1 per quarter	15	Goal Met
Good Catch Reports	≥ 30%	31%	Goal Met
Measure and assess our culture	Annual	Survey Complete	Goal Met
Improve our culture	Top quartile	82 nd PR <i>High quality care</i>	Goal Met
Just Culture	2025	Med Staff	Goal Met
Timely Investigation for adverse events	< 45 days (RCA)	100%	Goal Met
Implement RCA CAP	> 80% on time	Event 1: 55% Event 2: 60% Event 3: 72%	Not met
Share lessons learned	100% leader feedback	100%	Goal Met

Tactics	Goal	2025	Status
Active Engagement in Medical Staff Quality	>75% attendance by specialty	77.4%	Goal Met
Improve ease of use of OPPE Data	Quarterly updates	Goal Met	Goal Met
Patient Safety Performance	>80%	100%	Goal Met
Prevent Readmissions*	<8%	4%	Goal Met
Core Measure Performance	>80%	68%	Improving
Ambulatory Quality Performance	>80%	100%	Goal Met
Maintain Accreditation	100% accredited	100%	Goal Met
Implement and close Corrective Action Plans	On Time Closure	On Track	Goal Met

**Represents known readmissions*

2025 Patient Experience

- Top Quartile Performance:
 - JH Emergency Department
 - JH Urology Clinic
 - Dermatology Clinic
 - Plastics and Reconstruction
- Top Decile Performance:
 - OB/GYN Clinic
 - Sheridan Dental Clinic
 - Infusion Center
 - Pulmonology Clinic
 - Infectious Disease

“I was very pleased with the excellent care received from nurses, doctors and other top notch. The nurses and doctor were on point with my care. I definitely would recommend this hospital. A+ care.”



“Considering the condition I was in, the people and this hospital were and are amazing. They saved my life. Thank you.”

“After an emergency call to 911, they brought me to JHC Hospital in Port Townsend WA. I keep thinking how fortunate I am to have such great health care.”

2025 Annual Summary



Saw improvement across quality measures



Achieved national recognition for OB, Heart Failure, Patient Experience, and Stroke



Achieved top quartile performance across Culture of Safety key drivers



Awarded CAH Achievement of Excellence by WSHA



Saw a decrease across patient safety indicators and a decrease in patient throughput times

What questions do you have?



Jefferson Healthcare

December 2025 Finance Report
(November Financials & December Draft)

January 28, 2026

Donna Lipsky, Controller

November 2025

Income Statement Summary



	November 2025 Actual	November 2025 Budget	Variance Favorable/ (Unfavorable)	%	November 2025 YTD	November 2025 Budget YTD	Variance Favorable/ (Unfavorable)	%	November 2024 YTD
Operating Revenue									
Gross Patient Service Revenue	34,473,802	39,312,881	(4,839,079)	-12%	411,398,065	420,002,999	(8,604,935)	-2%	377,039,624
Revenue Adjustments	19,264,307	21,413,022	2,148,714	10%	228,337,365	228,768,103	430,737	0%	208,257,990
Charity Care Adjustments	363,292	448,553	85,260	19%	4,815,890	4,792,154	(23,736)	0%	4,406,234
Net Patient Service Revenue	14,846,202	17,451,307	(2,605,104)	-15%	178,244,809	186,442,742	(8,197,933)	-4%	164,375,400
Other Revenue	935,405	726,267	209,138	29%	9,339,269	7,988,939	1,350,330	17%	7,337,501
Total Operating Revenue	15,781,607	18,177,574	(2,395,967)	-13%	187,584,079	194,431,681	(6,847,603)	-4%	171,712,901
Operating Expenses									
Salaries And Wages	7,972,754	8,319,582	346,828	4%	88,268,548	91,577,725	3,309,177	4%	80,745,488
Employee Benefits	1,729,471	1,776,074	46,603	3%	19,289,726	20,305,128	1,015,402	5%	17,467,192
Other Expenses	7,242,917	7,490,715	247,798	3%	78,857,129	78,123,968	(733,161)	-1%	69,080,739
Total Operating Expenses	16,945,142	17,586,371	641,228	4%	186,415,403	190,006,821	3,591,417	2%	167,293,419
Operating Income (Loss)	(1,163,535)	591,203	(1,754,738)	-297%	1,168,675	4,424,861	(3,256,185)	-74%	4,419,483
Total Non Operating Revenues (Expenses)	(357,839)	261,896	(619,735)	-237%	2,871,843	2,880,851	(9,008)	0%	4,603,517
Change in Net Position (Loss)	(1,521,374)	853,099	(2,374,473)	-278%	4,040,518	7,305,711	(3,265,193)	-45%	9,023,000
Operating Margin	-7.4%	3.3%	-10.6%	-326.7%	0.6%	2.3%	-1.65%	-72.6%	2.6%
Total margin	-9.6%	4.7%	-14.3%	-305.4%	2.2%	3.8%	-1.60%	-42.7%	5.3%
Salaries & Benefits as a % of net pt svc rev	-65.4%	-57.9%	-7.5%	-13.0%	-60.3%	-60.0%	-0.33%	-0.6%	-59.7%

November 2025

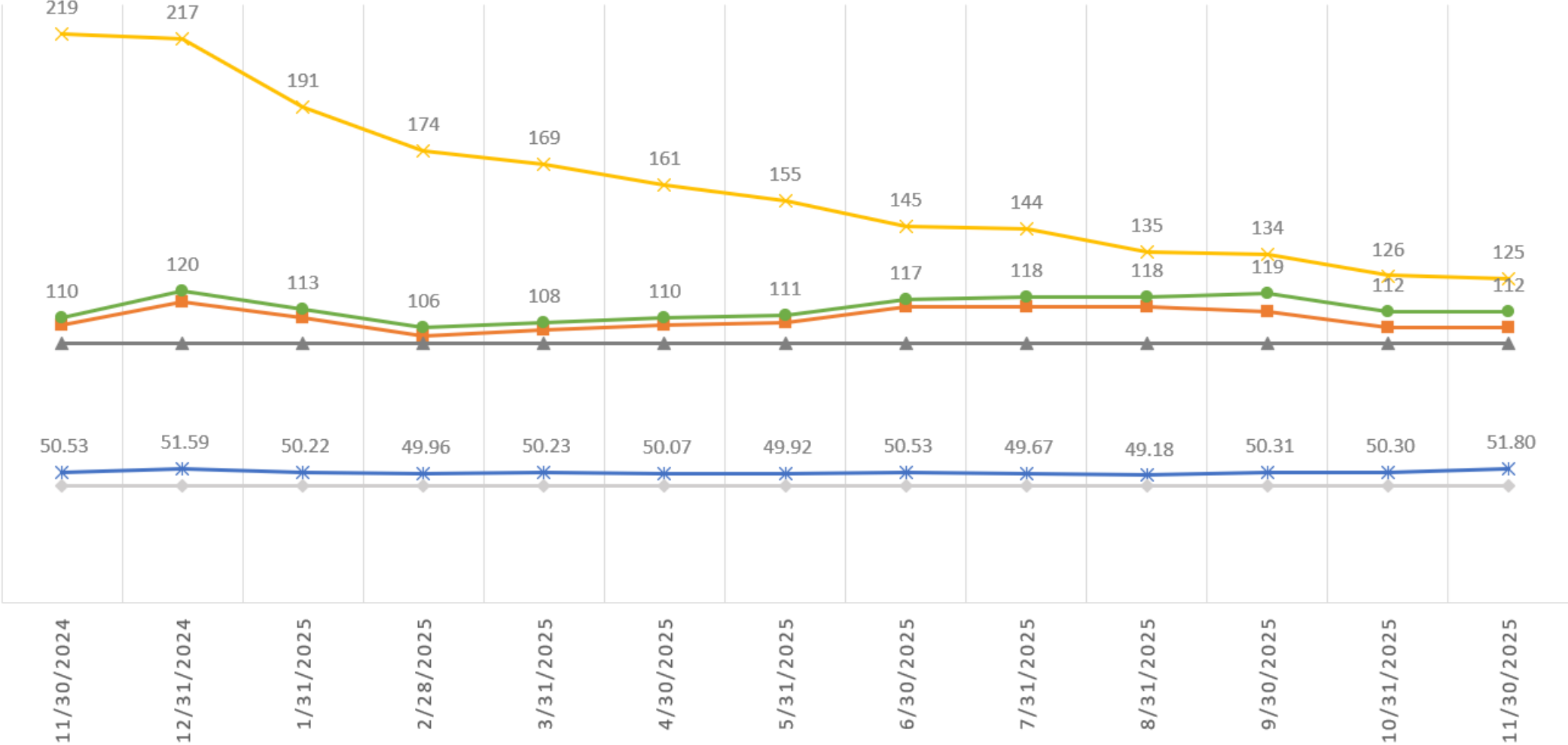
Operating Statistics

<u>STATISTIC DESCRIPTION</u>	<u>NOVEMBER 2025</u>						<u>NOVEMBER 2024</u>			
	<u>MO ACTUAL</u>	<u>MO BUDGET</u>	<u>% VARIANCE</u>	<u>YTD ACTUAL</u>	<u>YTD BUDGET</u>	<u>% VARIANCE</u>	<u>MO ACTUAL</u>	<u>% VARIANCE</u>	<u>YTD ACTUAL</u>	<u>% VARIANCE</u>
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	52	62	-16%	726	686	6%	59	-12%	589	23%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	340	353	-4%	3,787	3,935	-4%	286	19%	3,781	0%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	453	436	4%	4,981	4,850	3%	357	27%	4,522	10%
SURGERY CASES (IN OR)	128	179	-28%	1,520	1,645	-8%	120	7%	1,452	5%
ENDOSCOPY SERVICES CASES	107	105	2%	1,160	1,174	-1%	99	8%	1,165	0%
TOTAL DIAGNOSTIC IMAGING TESTS	3,432	3,808	-10%	43,742	42,395	3%	3,688	-7%	43,495	1%
PHARMACY MEDS DISPENSED	22,480	22,633	-1%	260,277	251,978	3%	20,201	11%	239,945	8%
RESPIRATORY THERAPY CHARGE UNITS	2,291	2,877	-20%	21,947	32,027	-31%	1,748	31%	26,947	-19%
REHAB/PT/OT/ST	8,513	8,645	-2%	97,637	96,246	1%	7,525	13%	93,555	4%
ER CENSUS	1,243	1,332	-7%	14,888	14,824	0%	1,223	2%	14,077	6%
DENTAL CLINIC	484	613	-21%	5,315	6,827	-22%	432	12%	5,026	6%
TOTAL RURAL HEALTH CLINIC VISITS	6,535	7,793	-16%	79,599	86,760	-8%	6,839	-4%	78,259	2%
TOTAL SPECIALTY CLINIC VISITS	3,680	4,267	-14%	41,129	46,513	-12%	3,175	16%	40,134	2%

November 2025

Cash and Accounts Receivable

* DAYS OUTSTANDING IN A/R ◆ DAYS AR GOAL - 45 ■ DAYS OF CASH ▲ DAYS CASH GOAL - 90 ✕ DAYS CASH W/ PROJECT FUNDS ● DAYS CASH W/ 3RD PARTY



December 2025 – Draft

Income Statement Summary



	December 2025 Actual	December 2025 Budget	Variance Favorable/ (Unfavorable)	%	December 2025 YTD	December 2025 Budget YTD	Variance Favorable/ (Unfavorable)	%	December 2024 YTD
Operating Revenue									
Gross Patient Service Revenue	39,600,960	40,648,461	(1,047,501)	-3%	450,999,025	460,651,460	(9,652,435)	-2%	414,801,108
Revenue Adjustments	21,591,506	22,140,485	548,979	2%	249,928,871	250,908,587	979,716	0%	228,575,958
Charity Care Adjustments	508,324	463,791	(44,533)	-10%	5,324,215	5,255,946	(68,269)	-1%	4,795,356
Net Patient Service Revenue	17,501,129	18,044,185	(543,055)	-3%	195,745,939	204,486,927	(8,740,988)	-4%	181,429,794
Other Revenue	1,183,820	726,267	457,553	63%	10,523,089	8,715,206	1,807,883	21%	8,465,068
Total Operating Revenue	18,684,949	18,770,452	(85,502)	0%	206,269,028	213,202,133	(6,933,105)	-3%	189,894,863
Operating Expenses									
Salaries And Wages	8,717,222	8,582,939	(134,283)	-2%	96,985,770	100,160,664	3,174,894	3%	88,852,790
Employee Benefits	1,889,796	1,820,999	(68,797)	-4%	21,179,522	22,126,126	946,605	4%	19,182,901
Other Expenses	7,336,874	7,586,191	249,317	3%	86,194,004	85,710,159	(483,845)	-1%	77,108,890
Total Operating Expenses	17,943,892	17,990,129	46,237	0%	204,359,296	207,996,950	3,637,654	2%	185,144,581
Operating Income (Loss)	741,057	780,323	(39,266)	-5%	1,909,732	5,205,184	(3,295,451)	-63%	4,750,282
Total Non Operating Revenues (Expenses)	(344,655)	261,896	(606,550)	-232%	2,527,188	3,142,746	(615,558)	-20%	4,894,176
Change in Net Position (Loss)	396,403	1,042,218	(645,816)	-62%	4,436,921	8,347,930	(3,911,009)	-47%	9,644,458
Operating Margin	4.0%	4.2%	-0.2%	-4.6%	0.9%	2.4%	-1.52%	-62.1%	2.5%
Total margin	2.1%	5.6%	-3.4%	-61.8%	2.2%	3.9%	-1.76%	-45.1%	5.1%
Salaries & Benefits as a % of net pt svc rev	-60.6%	-57.7%	-2.9%	-5.1%	-60.4%	-59.8%	-0.56%	-0.9%	-59.5%

December 2025 - Draft

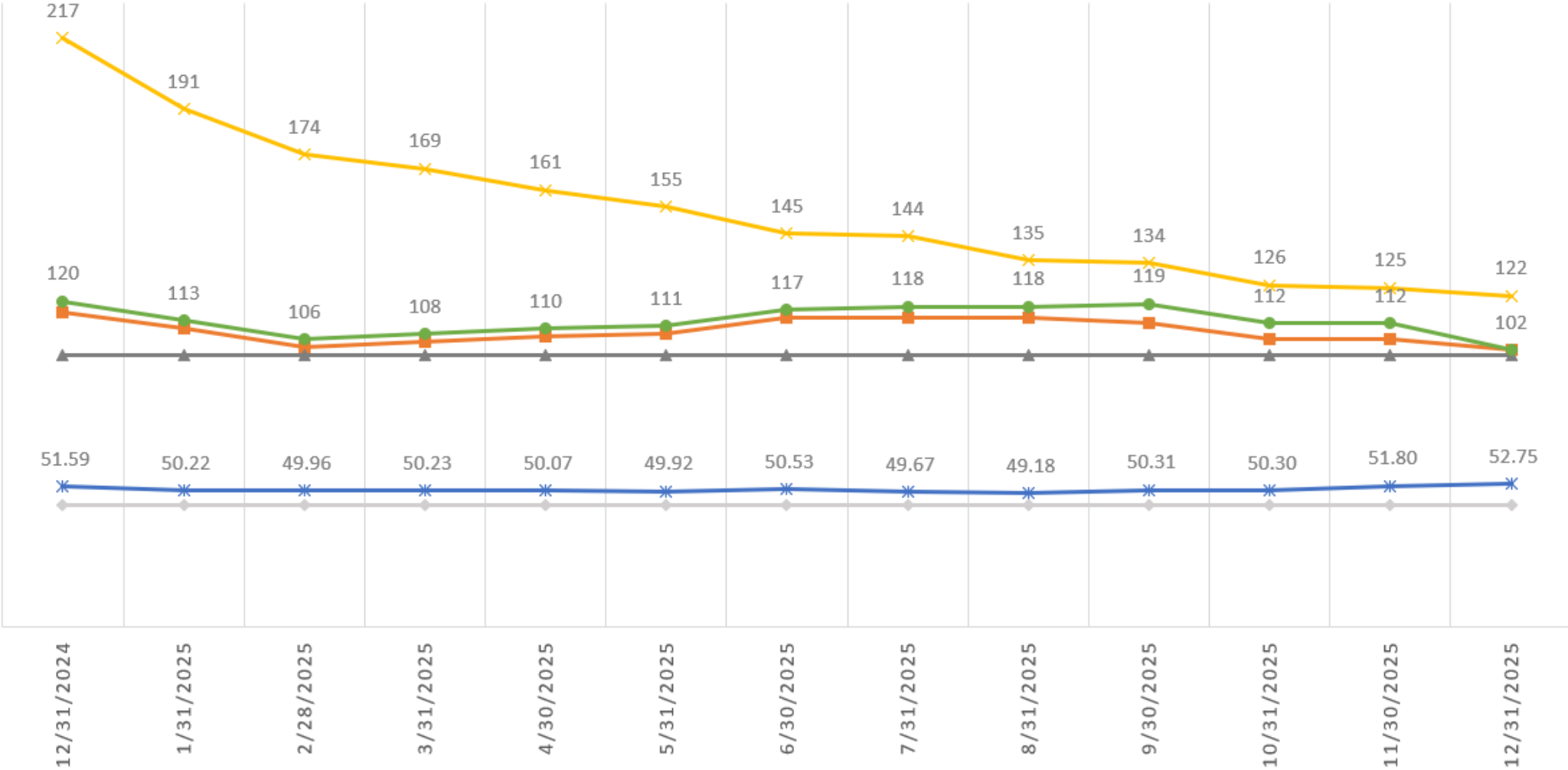
Operating Statistics

<u>STATISTIC DESCRIPTION</u>	<u>DECEMBER 2025</u>						<u>DECEMBER 2024</u>			
	<u>MO ACTUAL</u>	<u>MO BUDGET</u>	<u>% VARIANCE</u>	<u>YTD ACTUAL</u>	<u>YTD BUDGET</u>	<u>% VARIANCE</u>	<u>MO ACTUAL</u>	<u>% VARIANCE</u>	<u>YTD ACTUAL</u>	<u>% VARIANCE</u>
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	77	64	20%	803	750	7%	94	-18%	683	18%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	409	365	12%	4,201	4,300	-2%	406	1%	4,187	0%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	508	450	13%	5,494	5,300	4%	500	2%	5,022	9%
SURGERY CASES (IN OR)	149	185	-19%	1,669	1,830	-9%	135	10%	1,587	5%
ENDOSCOPY SERVICES CASES	97	109	-11%	1,257	1,283	-2%	89	9%	1,254	0%
TOTAL DIAGNOSTIC IMAGING TESTS	4,034	3,935	3%	47,777	46,330	3%	4,135	-2%	47,630	0%
PHARMACY MEDS DISPENSED	26,403	23,387	13%	286,680	275,365	4%	24,611	7%	264,556	8%
RESPIRATORY THERAPY CHARGE UNITS	3,408	2,973	15%	25,333	35,000	-28%	2,008	70%	28,955	-13%
REHAB/PT/OT/ST	9,281	8,933	4%	106,918	105,180	2%	7,555	23%	101,110	6%
ER CENSUS	1,315	1,376	-4%	16,202	16,200	0%	1,379	-5%	15,456	5%
DENTAL CLINIC	567	634	-11%	5,882	7,461	-21%	420	35%	5,446	8%
TOTAL RURAL HEALTH CLINIC VISITS	7,452	8,053	-7%	87,051	94,813	-8%	7,104	5%	85,363	2%
TOTAL SPECIALTY CLINIC VISITS	4,127	4,409	-6%	45,256	50,922	-11%	3,399	21%	43,533	4%

December 2025

Cash and Accounts Receivable

—*— DAYS OUTSTANDING IN A/R —◇— DAYS AR GOAL - 45 —■— DAYS OF CASH —▲— DAYS CASH GOAL - 90 —×— DAYS CASH W/ PROJECT FUNDS —●— DAYS CASH W/ 3RD PARTY



January 2026

Preview – (*as of 0:00 01/27/26)

- **\$ 40,233,467 in Projected HB charges**
 - Average: \$1,245,297/day (HB only)
 - Budget: \$1,342,866/day
 - 92.7% of Budget
- **\$ 14,388,307 in HB cash collections**
 - Average: \$483,335/day (HB only)
 - Goal: \$623,806/day
- **54.0 Days in A/R**
- **Questions**

Jefferson
Healthcare

Jefferson
Healthcare

Administrative Report

Mike Glenn, CEO
January 2026

Jefferson
Healthcare

Jefferson
Healthcare

Government Advocacy Update

January 2026

JH Advocacy

What We've Been Up To



Site visit with new
HCA Director
Ryan Moran

- Jan 5
- Dental care, labor & delivery, Medicaid MCO negotiation, patient Medicaid navigation support

State of Reform

- Jan 8
- Mike Glenn, Dr. Molly Parker, Elise Wright

Meetings with State
Legislators

- Representative Bernbaum – Dec 29
- Representative Tharinger – Jan 8
- Senator Chapman – Jan 16

Medicaid changes
presentation

- JCF Human Services Collab – Jan 13

340B bill testimony

- Mike Glenn – Friday Jan 16 (SB 5981) & Tuesday Jan 20 (HB 2145)

JH Advocacy

What We're Watching



State

- Leg Session – short and fast
 - Jan 12 – March 12
- Gov budget – heavy on cuts
- RHTP Update

Federal

- Enhanced Premium Tax Credits – dead
- Midterm year = politics > policy
- CDS paperwork submitted to USDA

JH Advocacy

What's Coming Up



State Hospital Advocacy Day

- Jan 29
- Commissioner McComas, Mike Glenn, Elise Wright

Meetings with HCA

- Jan 30
- Damon & Elise
- Onsite HCA Medicaid navigation support

Broadening Advocacy

- Internal JH Advocacy Committee
- 24th LD Advocacy Group

Questions?



Strategic Plan Final
Review

DC & Olympia

HR1 Mitigation
Planning

Exciting Happenings

- Mobile Dental & Health Unit, it's here! 1st stop Brinnon
- New Dermatologist, Dr. Dowlati
- PT Retail Pharmacy, on the drawing board

Employee Service
Gala



CEO Update

2026 Strategic Plan, Goals, and Tactics

Strategic Leadership Team

January 5, 2026

Our Strategic Pillars

Quality

People

Service

Growth

Finance



QUALITY PILLAR

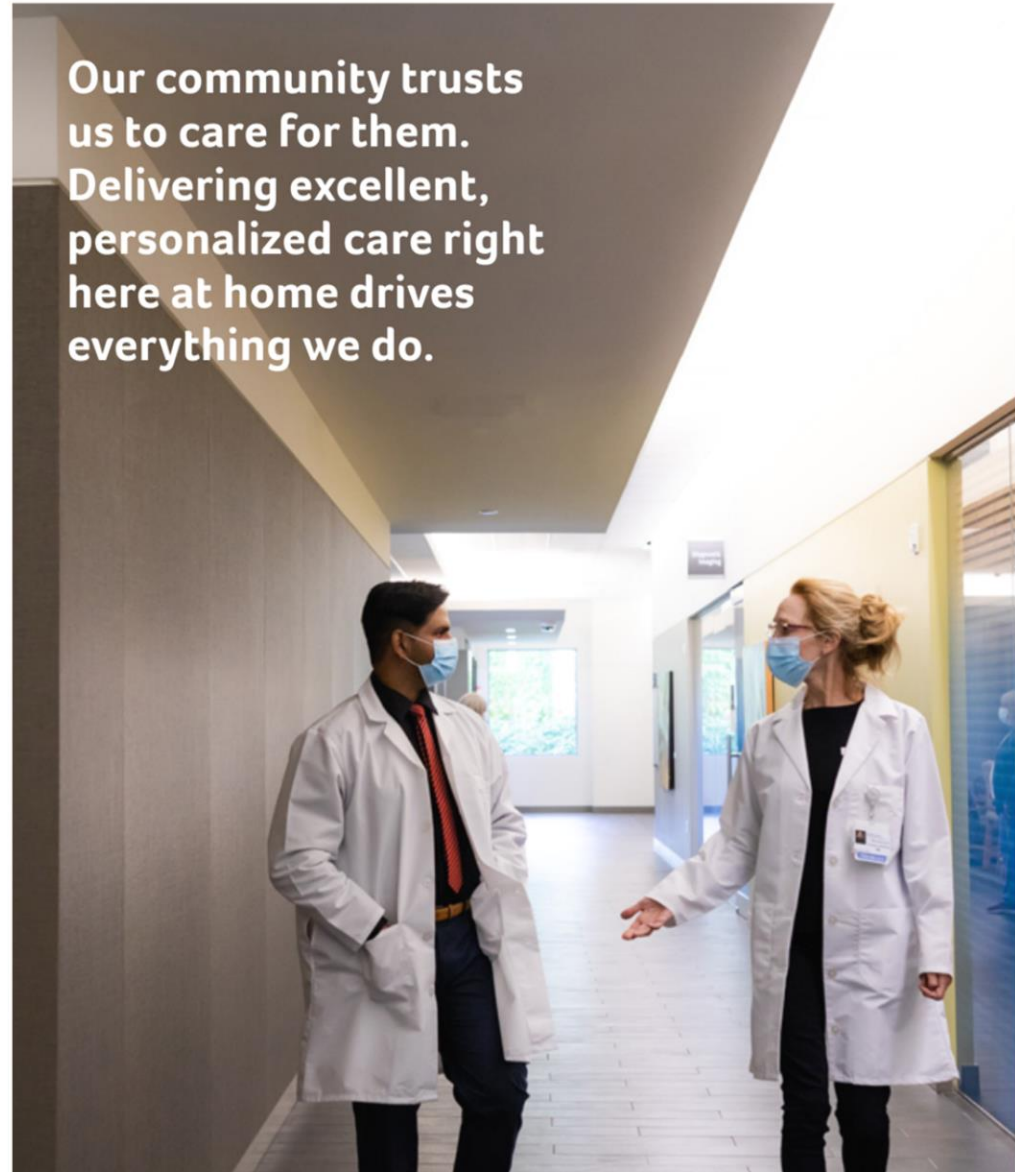
GOAL:

We will be the first choice for health care.

We will do this by:

- Hardwiring High Reliability
- Eliminating Patient Harm
- Elevating Clinical Excellence

Our community trusts us to care for them. Delivering excellent, personalized care right here at home drives everything we do.



Hardwire High Reliability

- Empower front line staff members
- Promote sensitivity to operations
- Embed high reliability from the bedside to the boardroom

Eliminate Patient Harm

- Achieve and maintain best-in-class performance on key harm metrics
- Enhance our culture of safety
- Strengthen Workforce Safety and Communication Competencies

Elevate Clinical Excellence

- Proactively seek and provide evidence based, best practice in everything that we do.
- Co-Design care with the patient in mind
- Leverage technology to improve quality and safety

Tactics:

- Improve health outcomes by advancing population health initiatives
- Conduct leader rounding and model behavior that supports a culture of safety.
- Embrace a mindset of continuous improvement.
- Use real-time dashboards and analytics to guide decisions and interventions.
- Leverage technology for early detection of risks, proactive interventions, and improved transitions of care.
- Support unit-based improvement teams and peer learning.
- Implement and hardwire evidence-based care bundles and standard protocols.
- Identify and close equity gaps in outcomes and experience
- Reduce variation in care delivery through checklists, protocols, and automation.
- Build a just, transparent, and learning-focused culture.
- Design safer systems and environments for care delivery.

SERVICE PILLAR

GOAL:

Make healthcare work better.

We will do this by:

- Offering convenient care, without the hassle.
- Delivering an extraordinary experience

We are committed to delivering high quality health services focused on compassion, accessibility and equitable care.



**Offer
convenient
care, without
the hassle.**

- Eliminate unreasonable wait times and delays.
- Streamline the patient journey
- Redesign physical and digital environments.

**Deliver an
extraordinary
experience**

- Master empathetic communication
- Personalize every interaction

Tactics:

- Explore, promote and provide sustainable population health initiatives for vulnerable populations
- Improve patient flow and transform the waiting experience.
- Leverage technology to optimize scheduling, patient portals, and telehealth
- Ensure same day response times
- Offer ease of access
- Empower and train staff in communication, service excellence and service recovery
- Implement Service Recovery for on-the-spot resolution.

PEOPLE PILLAR

GOAL:

Be a great place to work.

We will do this by:

- Attract, develop, and retain the industry's best talent.
- Promote employee engagement through shared mission and accountability
- Provide career pathways that promote employee advancement



**The health of our region
is fueled by our people.
We recruit and retain
talented people so we
can continue to deliver
excellent care.**

We will be a great place to work and practice.

Attract, develop, and retain the industry's best talent.

- Recognize and reward value-driven behaviors.
- Reduce voluntary turnover outside the organization.
- Embed high reliability from the bedside to the boardroom

Promote employee engagement through shared mission and accountability

- Promote employee engagement through shared mission and accountability
- Sustain continuous, meaningful feedback loops between leaders and employees.

Provide career pathways that promote employee advancement

- Invest in professional fulfillment and growth.
- Empower clinicians through shared governance.

Tactics:

- Implement a values-based recognition program
- Conduct and distribute a total rewards assessment with all staff members.
- Expand EAP offerings and wellness challenges
- Establish clearly defined performance metrics and offer individual coaching.
- Introduce quarterly performance check in meetings.
- Create individualized development plans for employees.
- Formalize coaching and performance improvement.
- Create clear internal growth opportunities within the organization.
- Leverage clinician input on policies and strategic initiatives.

GROWTH PILLAR

GOAL:

We will expand local care.

We will do this by:

- Increase utilization to fill unused capacity
- Develop Services that outpace growing Expenses
- Future-proof infrastructure for emerging technologies and care models

To meet the increasing needs of our community, we must expand our services and continue to invest in advanced technology and facilities.



Campus modernization project begins summer of 2023

We will expand local care.

Increase utilization to fill unused capacity

- Increase access by increasing capacity.
- Capture >80% of Market Share for service lines and specific procedures

Develop Services that outpace growing Expenses

- Improve payor mix
- Scale successful innovative care pilots

Future-proof infrastructure for emerging technologies and care models

- Develop a one, five, and ten-year Master Site Plan (on and off campus)
- Develop a three-year Digital Transformation Roadmap

Tactics:

- Establish a Capacity Command Center
- Improve efficiency, patient flow, and throughput
- Utilize analytics and technology to fully optimize scheduling and capacity
- Expand community-based outreach care models.
- Expand or enhance high-margin service lines that attract commercially insured patients
- Position the hospital as a preferred provider for employee health plans
- Implement remote monitoring for patients and expand virtual care options
- Conduct facility condition assessments and space utilization studies
- Map digital infrastructure and patient experience journeys
- Launch quick wins: digital front door, telehealth expansion, wayfinding upgrades
- Implement enterprise-wide EHR optimization and interoperability

FINANCE PILLAR

GOAL:

Remain financially independent.

We will do this by:

- Maintain a robust financial and operational foundation.
- Diversify and expand alternative payment streams.

Financial stability allows us to remain independently governed, locally operated and singularly focused on meeting the needs of our county.



We will remain financially independent.

robust financial and operational foundation

- Optimize operations to manage costs
- Ensure responsible financial stewardship for sustainable care.
- Advance care through innovative technology

Diversity and expand alternative payment streams

- Grow alternative payment models
- Expand funding sources
- Maximize community and philanthropic engagement

Tactics:

- Improve efficiency and manage costs
- Monitor and improve operating margin
- Align staffing with patient demand
- Improve cash flow and collections
- Manage budget variances
- Increase value-based care contracts
- Improve patient outcomes and cost efficiency
- Expand fundraising and grants
- Explore new service lines or partnerships
- Maximize education and volunteer programs
- Expand donors

