

**BOARD OF COMMISSIONERS
REGULAR MEETING
AUGUST 25, 2017**

The Regular Meeting of the Board of Commissioners of Public Hospital District No. 1, Skagit County, was held at Skagit Valley Hospital.

ATTENDANCE

Present were: Commissioners Julie Blazek, Al Dennis, Jim Hobbs, Bruce Lisser, Jeff Miller, and Clark Todd; Mike Liepman, President & Chief Executive Officer; Jim Geist, Executive Vice President & Chief Operating Officer; Tom Litaker, Regional Vice President & Chief Financial Officer; Dr. Connie Davis, Chief Medical Officer; Deborah Martin, Regional Vice President Human Resources; Dr. Mary Ann Hink, Chief Physician Officer; Dr. Kelley Cline/Skagit Regional Health Medical Staff; Dr. Rosana Go, President/Cascade Valley Hospital Medical Staff; Bill Hartley, Representative/PGC; Kari Ranten, Director of Marketing and Communications; and Joanie Whitener, Executive Secretary. Also present were SRH employees Lisa Norton, Renee Stone, Sandi Browne, Sarah Place, and Dr. Rob Zwick. Community members present were Eric Hall and Brian Hill.

CALL TO ORDER

The meeting was called to order at 8:00 a.m. by Mr. Lisser

EXCUSED ABSENCE

It was moved, seconded, and unanimously approved to excuse Peter Browning from the meeting.

**CUSTOMER/COMMUNITY
PERSPECTIVE**

PUBLIC COMMENT

Dr. Rob Zwick reported on the growth in patient numbers utilizing the Wound Care Center since its beginning. He shared his opinions on the need to maintain this department of the Hospital.

Brian Hill presented his views on the needs and direction that should be taken by the hospital and shared a personal patient experience.

SAFETY / PATIENT STORY

In recognition of patient safety Dr. Connie Davis reported on a patient's recent hospital experience that resulted in a good outcome and highlighted the improvements already made to the discharge planning process. The event also provided insight into the continued work needed to improve provider communication in the discharge process.

**INTERNAL PROCESS
PERSPECTIVE
SRH MEDICAL STAFF UPDATE**

Dr. Kelley Cline, Chief of Staff/Skagit Regional Health Medical Staff, updated the Board on SRH Medical Executive Committee activities, such as continued focus on increased provider communication which included communication between providers, nursing staff, and MAs to patients. She also reported on work directed at better continuity of care with regularly updated whiteboards and all patient inter-acting staff knowledgeable of the patient plans.

CVH MEDICAL STAFF UPDATE

Dr. Rosana Go, President/Cascade Valley Hospital Medical Staff, updated the Board on CVH Medical Executive Committee activities, which included work to improve provider communication and a review of the diabetes education program.

EXECUTIVE QUALITY OVERSIGHT COMMITTEE/ COUNCIL

Ms. Blazek reported that the Executive Quality Oversight Council met August 18, 2017, and three presentations were given. **Antibiotic Stewardship:** Will Grooms, SRH Pharmacy gave a presentation on the Antibiotic Stewardship Program for SRH and CVH. Since January of 2017, both hospitals have been meeting together to develop programs for dealing with antibiotic management. In the past, both SRH and CVH have been the highest in the State for Carbapenem use and high prescribers of other antibiotics compared to other hospitals in the State. Since the group has started meeting and developing corrective action plans which included updating order sets, pharmacy assistance with correct antibiotic selection and dosing, and Infectious Disease consultation have been successful in decreasing antibiotic usage and correct indications for antibiotics use. Trend reports provided by WSHA show these improvements and the group will continue to monitor. Future plans for the committee include expanding to include outpatient services and Skilled Nursing Facility participation on the committee.

Environment of Care and Facilities Darrin Gillis and Byron Clouatre provided an update on the EOC activities for 2017. The program for Hazard Surveillance rounding has been enhanced and standardized. The content for the rounds focus has been updated based on new requirements and the process now include place for documentation of corrective action plans. They also provided an update on Security including panic button testing with the Mt. Vernon Police, purchasing bullet proof vests, and completion of CPI training for all security staff. Risk vulnerability analysis is being done at all sites for security. **Culture of Patient Safety:** Sarah Place and Cindy Rodriguez provided a high level report on the Culture of Safety Survey conducted in July 2017. Response rates for CVH Hospital and Clinics was much higher than the response rates for SRH and SRC Clinics. CVH and clinics match or exceed most national benchmarks. SRH and SRC Clinics are below national benchmarks. Areas for improvement for both hospitals include “Hand Offs and Transitions Between Units”, “Non Punitive Response to Errors”, and in the clinics “Leadership Support for safety” and “Work Pressure and Pace”. The survey results will be presented to the Leadership Team and to the staff through employee forums.

FINANCIAL PERSPECTIVES

Mr. Litaker gave a review of the financials and reported a slight operating gain in July. He reported that progress was being made on appropriate invoicing. Regarding Premier, he stated information would be released to the departments in the next two weeks and data would be for SVH only.

REVISED AGENDA

It was moved, seconded, and unanimously carried to revise the agenda to consider the request from the Finance Committee to approve a lease from Provident Leasing Company.

PROVIDENT LEASING COMPANY

The Finance Committee requested approval of a 5 year lease from Provident Leasing Company which included a maximum \$2M line of credit but on \$1M would initially be used to purchase monitoring equipment for Skagit Valley and Cascade Valley Hospitals. The current equipment is at the end of its life and is a patient safety issue. The new equipment would have an expected 12 year life span.

It was moved, seconded, and unanimously carried to approve the lease with Provident Leasing Company.

QUALITY OBJECTIVES:

CONSENT AGENDA

It was moved, seconded, and unanimously carried to approve the "consent" agenda. The consent agenda included the Celebration Memo, Medical Staff Credential Reports for SVH and CVH, the July 26, 2017, meeting minutes, Strategic Planning and Transformation Committee Report, SRH monthly financial statement, Write-offs for SVH, SRC, CVH and CVC, Investment resolution for SVH, Surplus Equipment resolution, and Vouchers and Payroll as noted below:

CELEBRATIONS

Retirement celebrations in August:

- Lucinda Howson retired 8/2/17 from the Business Office with 19 years of service
- Dr. Laurence Lee retired 8/4/17 from the Urology Department with 7 years of service
- Mary Rios retired 8/18/17 from the Medical Staff Office with 14 years
- Sandra Young retired 8/17/17 from Oncology Department with 18 years
- Nina Mirante retires as Staff Nurse-SOU 8/26/17 with 30 years

SVH MEDICAL STAFF CREDENTIALS REPORT

Dr. Cline's report dated August 25, 2017 included the SVH Medical Executive Committee recommendations for membership and privileges which is attached and made part of these minutes. Dr. Cline's report was approved by the Board.

CVH MEDICAL STAFF CREDENTIALS REPORT

Dr. Go's report included CVH Credentials Committee recommendations as contained in her report dated August 25, 2017, which is attached to and made part of these minutes. Dr. Go's report was approved by the Board.

MEETING MINUTES

The minutes of the July 26, 2017, regular Board meeting were approved as recorded.

STRATEGIC PLANNING AND TRANSFORMATION COMMITTEE

The Strategic Planning and Transformation Committee report for August 15, 2017 was accepted.

FINANCIAL STATEMENTS

The SRH Financial Statements for July were reviewed.

WRITE-OFFS

SVH WRITE OFFS: Bad Debts - \$1,386,474.45
Charity Care - \$561,160.93
Bankruptcy - \$32,469.99
Liens - \$ -0-

SRC WRITE OFFS: Bad Debts - \$112,040.82
Charity Care - \$26,086.39
Bankruptcy - \$26,350.44

CVH WRITE OFFS: Bad Debts - \$422,293.95
Charity Care - \$25,330.49
Bankruptcy - \$-0-

CVC WRITE OFFS: Bad Debts - \$13,937.07
Charity Care - \$ -0-
Bankruptcy - \$-0-

RESOLUTION 3685 - APPROVING INVESTMENT FUNDS BY AGENT

Resolution 3685 investments authorized and directed by agents of the District, including resolutions 3680, 3681, and 3683.

RESOLUTION 3686 - SURPLUS EQUIPMENT

Resolution 3686 to remove surplus equipment from the fixed asset listing as noted on the original resolution.

VOUCHERS AND PAYROLL

AHS Accounts Payable vouchers #000031211-000031211 were approved as presented.

SVH Accounts Payable vouchers were approved as presented:

- General SVH #221437-223005
- Refund Mgr #37865-38422
- General CVH #901838-901982
- Payroll vouchers #058879-058969
- Payroll, EFT – Direct Deposit

LEGAL COUNSEL REPORT

Mr. Furlong reported his recent work included revisions to the By Laws for expected review this fall and routine matters as needed.

**PHYSICIANS GOVERNANCE
COMMITTEE**

Mr. Bill Hartley, representing the Physician Governance Committee, reported of the PGC's positive focus on Epic and the expected efficiencies it would create. He also stated discussions continued on ways to increase access to primary care.

**CHIEF EXECUTIVE OFFICER &
EXECUTIVE TEAM REPORT**

Mr. Liepman and the Senior Executive Team gave reports on recent activities in healthcare including extended clinic hours, new growth, new providers, Epic training, and work on staff-patient engagement.

COMMISSIONER ROUNDTABLE

Roundtable was held.

The meeting went into Executive Session at 9:53 a.m. to discuss purchase, sale or lease of real property, the discussion of which in open session would negatively affect for the district the cost and terms and to review the performance of a public employee pursuant to RCW 42.30.110 (c) and subsection (h).

EXECUTIVE SESSION

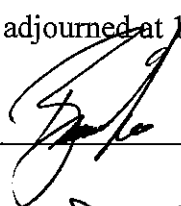
The Board anticipated 60 minutes for Executive Session. At 10:55 the Board anticipated an additional 20 minutes.


REGULAR SESSION


The meeting reconvened into Regular Session at 11:15 a.m. No action was taken as result of the Executive Session.


ADJOURN

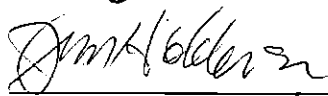
The meeting adjourned at 11:16 a.m.

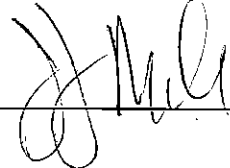












ATTEST:

