

**BOARD OF COMMISSIONERS
REGULAR MEETING
MARCH 22, 2019**

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 Peter Browning, Frei Burton, Jim Hobbs, Bruce Lisser, and Gary Shand, and Julie Blazek joined by phone; Brian Ivie, President & Chief Executive Officer; Danny Vera, Regional Vice President & Chief Operating Officer; Paul Ishizuka, Regional Vice President & Chief Financial Officer, Dr. Joshua Griggs, Chief Quality Officer; Lisa Buller, Regional Vice President & Chief Information Officer; Michelle Sand, VP & Chief Nursing Officer, Cascade Valley Hospital; Dr. Connie Davis, Deborah Martin Regional VP, Human Resources; Dr. Rico Romano, Chief of Staff-Elect/Skagit Valley Hospital Medical Staff; Dr. James Fletcher, President/Cascade Valley Hospital Medical Staff; Brad Berg, Legal Counsel, and Joanie Whitener, Executive Secretary. Also present: Jola Barnett, Kari Ranten, Renee Stone, and Sandi Browne.

CALL TO ORDER

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

EXCUSED ABSENCES

It was moved, seconded, and unanimously carried to excuse

PUBLIC COMMENT

There was no public comment.

PATIENT STORY

On behalf of patient safety and satisfaction, Mr. Brian Ivie gave remembrance to the anniversary of the Oso slide and recognized again the great care provided by staff of Skagit Regional Health to the victims and families and communities affected by the disaster.

ACTION ITEMS

**ANNUAL ELECTION OF
OFFICERS**

It was moved, seconded, and unanimously carried to accept the following officers for a one-year term beginning March 23, 2018.
Peter Browning – President
Julie Blazek – Secretary

**MOTION TO AMEND THE
AGENDA**

It was moved, seconded and unanimously carried to amend the agenda to recognize outgoing Board President, Bruce Lisser.

BRUCE LISSER RECOGNITION

Board members expressed appreciation to outgoing President Bruce Lisser who served as the Board's leader for two years noting his leadership in the selection of a new CEO and his idea for a Board tour of the system's facilities.

**2019-2020 BOARD COMMITTEE
STRUCTURE**

It was moved, seconded, and unanimously carried to accept the 2019-2020 Board Committee structure as presented.

**RSLN #3877 DISSOLUTION OF
MIN-NS**

It was moved, seconded, and unanimously carried to approve Resolution #3877 and the dissolution of Medical Information Network – North Sound (MIN-NS).

REPORTS/PRESENTATIONS

**CHIEF QUALITY OFFICER
UPDATE**

Dr. Joshua Griggs, Chief Quality Officer provided a report on the recently released Centers for Medicare and Medicaid Services (CMS) star ratings. He reported that Skagit Valley Hospital received a one-star rating and Cascade Valley Hospital a three-star rating in the 2019 update of the Overall Hospital Quality Star Ratings program. Dr. Griggs stated these ratings were based on a complicated methodology around 60 measures using some older data dating from 2014 to mid-2017, and some data as recent as 2017-2018. He advised the category ratings ranged from readmission and mortality to effectiveness and timeliness of care. Dr. Griggs reported that since the last data periods used in the ratings, SRH had taken many significant actions and were on the right course on patient satisfaction, safety and quality. He added that our Key Performance Metrics for 2019 were aimed squarely at quality improvement.

Dr. Griggs further discussed the dry, cold weather in February which caused low humidity issues in the operating rooms at Skagit Valley Hospital. He advised a total of 17 surgical cases were moved to Cascade Valley Hospital, which proved to be a tremendous opportunity to introduce some surgeons to the excellent facilities and staff at Cascade. It was noted that a long-term retrofit project to solve the humidity issue was on the capital budget and construction schedule for this year.

FINANCE REPORT

Mr. Paul Ishizuka, Chief Financial Officer presented financial results for the first two months of 2019 which showed the organization was slightly below budget, in part as a result of the weather and three snowstorms during February. He advised that March numbers looked very strong

CREDENTIALS REPORTS

MOTION

It was moved, seconded, and unanimously carried to approve the March 22, 2019, SVH Credentials Committee Report.

**SVH MEDICAL STAFF
CREDENTIALS REPORT**

Dr. Romano's report dated March 22, 2019 included the SVH Medical Executive Committee recommendations for membership and privileges which is attached and made part of these minutes

MOTION

It was moved, seconded, and unanimously carried to approve the March 22, 2019, CVH Credentials Committee Report

**CVH MEDICAL STAFF
CREDENTIALS REPORT**

Dr. Fletcher's report included CVH Credentials Committee recommendations as contained in his report dated March 22, 2019, which is attached to and made part of these minutes.

REPORTS and DISCUSSION

SVH MEDICAL STAFF UPDATE

Dr. Rico Romano, Chief of Staff-Elect Skagit Valley Hospital Medical Staff, updated the Board on SVH Medical Executive Committee physician activities that included work to systemize the peer review and credentialing processes.

CVH MEDICAL STAFF UPDATE

Dr. Jim Fletcher, President/Cascade Valley Hospital Medical Staff, updated the Board on the recent activities of the CVH Medical Executive Committee that included developing physician relationships between the two hospitals and the positive outcome from the recent surgeries moved to CVH.

EXECUTIVE QUALITY OVERSIGHT COMMITTEE/ COUNCIL

Mr. Browning reported that the Executive Quality Oversight Council met March 15, 2019, and were presented with the following: **DOH Lab Inspection** - Jola Barnett discussed DOH SVH lab survey findings from their scheduled visit this March. Although the surveyors did see some gaps, they noted great improvements and recognized the hard work, given what they were left with after the transition from LabCorp. They noted that there were some documentation errors, such as missing temperature logs on the refrigerator. The quality control was done but it was not checked off by the scientist or the manager, which is an expectation of the DOH. Likewise, the calibrations were done but quality control was not consistently being performed. All of these items are correctable and action plans are being formulated. **Stroke Survey Update** - Sarah Place, Director of Quality Management–SVH, provided an update on the Stroke Survey that was completed on March 7th & 8th. There were 3 NC- findings which included quality monitoring, patient education and medication management and 2 NC-2 findings, which involved stroke downtime order sets and a decrease in door-to-needle time in less patients. Corrective action plans have been submitted and are underway. **CMS Star Update** - Dr. Josh Griggs, Chief Quality Officer, discussed the CMS Star rating, which was downgraded from 2 stars to 1. The ratings were based on re-calculation of scores from the same historic data previously presented, some dating back to July of 2014, with the newest data being May of 2018. The broad areas where Skagit Valley Hospital is below average are our mortality rate, safety of care, our readmission rate and patient experience. Nearly all the metrics where SVH is under performing are already included in our 2019 operating plan. **Infection Prevention – Risk Assessment** - Dr. Gary Preston, Chair, Infection Control Committee, provided an updated risk assessment on infection prevention at both SVH and CVH. Data was presented on a variety of clinical indicators. For 2019 it is recommended that we continue to work on improving Epic reporting and workflow, focus on antibiotic stewardship, and the Target Zero metrics. **Hospice QAPI 2018 Summary and 2019**

Plans - Christine Nidd, Manager of Quality, Hospice of NW, provided a review of 2018 and plans for 2019. Hospice of the NW is ranked # 1 in the nation for the best place to work in healthcare, as well as the top Hospice place to work in Washington. The turnover rate is very low and CAHP reporting (equivalent to DNV) showed zero reportable findings. 2018 focused on decreasing wait times for patient calls by moving to a Total Triage answering service which enabled callers to speak directly to a nurse.

AMENDMENTS TO CONSENT AGENDA

MOTION

It was moved, seconded, and unanimously carried to remove from the Consent Agenda Dr. Josh Hawkins' informational letter stating his intent to take a sabbatical in 2020 as it did not require Board approval.

MOTION

It was moved, seconded, and unanimously carried to remove the Marketing Interlocal Agreement from the Consent Agenda for additional discussion.

MARKETING INTERLOCAL AGREEMENT

Marketing and Communications Director, Ms. Kari Ranten explained to the Board the benefits of the Marketing Interlocal Agreement for Skagit Regional Health that included staying connected in the community and growing with the changing environment

MOTION

It was moved, seconded, and carried with one abstention to approve participation in the Marketing Interlocal Agreement.

CONSENT AGENDA

It was moved, seconded, and unanimously carried to approve the "consent" agenda. The consent agenda included the February 22, 2019 Regular Board Meeting minutes, , SRH Write-offs for SRH, resolutions for SVH Investments and Surplus Equipment, and Vouchers and Payroll as noted below:

MEETING MINUTES

The minutes of the February 22, 2019 regular Board Meeting minutes were approved as recorded.

WRITE-OFFS

SRH WRITE OFFS: Financial Assistance - \$763, 241
Bad Debt Write Off - \$2,078, 592

VOUCHERS AND PAYROLL

AHS Accounts Payable vouchers #000031239-000031240 were approved as presented.

SVH Accounts Payable vouchers were approved as presented:
General SVH #261786 - 264450
Refund Mgr #49338 - 49363
General CVH #902800 - 902801
Payroll vouchers #060695 - 060800
Payroll, EFT – Direct Deposit

LEGAL REPORT

Mr. Brad Berg stated legislative issues and updates would be reported at the April Board meeting. Mr. Berg also stated that Resolution #3877 should be revised to correctly identify Skagit District Public Hospital #2.

**MOTION – CORRECTION TO
RSLN #3877**

It was moved, seconded, and unanimously carried to re-approve Resolution #3877 as corrected.

**CHIEF EXECUTIVE OFFICER &
EXECUTIVE TEAM REPORT**

Mr. Brian Ivie shared information on current activities in the organization that included industry environment regarding staffing, census challenges at both hospitals, the semi-annual meeting with PHD #3, and statewide challenges surrounding patient care and mental health issues. Dr. Connie Davis shared an update on the ACOG data and Mr. Danny Vera reviewed the Key Performance Metrics.

COMMISSIONER ROUNDTABLE

Roundtable was held.

EXECUTIVE SESSION

The meeting went into an Executive Session at 9:50 a.m. to discuss with legal counsel matters pursuant to RCW 42.30.110 (1) (g). The Board anticipated 60 minutes for Executive Session.

REGULAR SESSION

The meeting reconvened into Regular Session at 10:35 a.m.

MOTION

It was moved, seconded, and unanimously approved to ratify the UFCW/Lab MOU agreement.

ADJOURN

The meeting adjourned at 10:36 a.m.

ATTEST: 

