

Board of Commissioners

Date | time 5/30/2023 6:00 PM | Location zoom meeting

Meeting called by Jerry Kennedy

Type of meeting Regular Board meeting

Note taker Leha Neilsen, Executive

Support Coordinator

Timekeeper Leha Neilsen

Board Members: Jerry Kennedy, Commissioner and Board Chair | Commissioner Kris Hare, Commissioner and Board Secretary | Brad Parrish, Commissioner | Geary Oliver, Commissioner | Clea Pryor, Commissioner |

Please Read: Previous meeting minutes pg. 3

Agenda Items

Topic		Presenter	Time allotted
	Call to Order	Jerry Kennedy	2 mins
	Introductions and Announcements	Jerry Kennedy	
	Mission, Vision and Values	Board of Commissioners	5 mins
	Approve previous meeting minutes	Motion requested	2 mins
	April 2023 meeting		
	Public Comments		5 mins
	2022 Financial Audit review with DZA	Tom Dingus	30 mins
	Chief Executive Officer report	Ramona Hicks	20 mins



Chief Financial Officer report	Kelly Hughes	20mins
Mesirow reports		
Financial Resolutions	Motion Requested	10 mins
Resolution 1229 – Petty Cash Locations		
Resolution 1230 – Payment of Warrants April 2023		
Resolution 1231 – Charity Care April 2023		
Resolution 1232 – Bad Debt April 2023		
Resolution 1233 – Additional Funding to the 2023 Budget – Endoscope repair		
Chief Medical Officer report	Dr. Sam Hsieh	20 mins
Board Committee Reports	Board of Commissioners	5mins
Next Meeting date and time Board of Comm		
June 26 @ 6:00pm Executive Session: RCW 42.30.110(1)(g) Credentialing Approval of May Credentialing	Jerry Kennedy Motion requested	
Adjournment	Motion requested	



Agenda Details

Drafted previous meeting minutes | April 24, 2023

5 MINS	APPROVAL OF N	MINUTES	BOARD OF COMMISSIO
Discussion	ussion The 2023 March Board minutes were distributed prior to the meeting.		
Conclusions	Commissioner Kris Hare moved for approval of minu Motion carried.	utes that were presented. The motion was seco	nded by Commissioner Brad Parrish.
Action items		Person responsible	Motion carried
Approval of previous meeting minutes		Kris Hare & Brad Parrish	Unanimously
5 MINS DISCUSSION	 CEO UPDATE Dr. Jacob Chaffee recently received the Hidden Hero award. Dr. Chaffee was awarded this award because he has gone above and beyond in the past few years with his work in the pandemic, he has been a huge asset to our incident command team and was instrumental in employee and patient advocacy during this time, ensuring that we offer the best care we can give. Dr. Castrodale received the UW Alumni Service award, this comes after 20 years of giving back to the community. Please congratulate him when you see him. 1.7 Governance Policy was distributed prior to the meeting and reviewed. This policy was approved by the Board unanimously. Add language about not being able to fire a provider without Board approval. Ramona will make the changes suggested and present it to the HR committee at the next meeting. Ramona presented the newest organizational chart for the organization, this new org chart is elevating and recognizing work that is being done at the senior leadership level. Ramona explained the changes that have been made and the new jobs that the senior leadership level. 		
CONCLUSIONS	A motion was made by Commissioner Clea Pryor; t	The monort was seconded by kins hare. Monort	suniou.
ACTION ITEMS		PERSON RESPONSIBLE	MOTION CARRIED
 Approval of Governance Policy 1.7 Approval of Organizational chart as presented 		Geary Oliver and Brad Parrish Clea Pryor and Kris Hare	Unanimously Unanimously
10MINS	CFO UPDATE		KELLY HUGHES

Statement of Confidentiality: Quality Assurance data, records, and knowledge, including minutes, collected for or by individuals or committees, or committees assigned peer/professional review functions are confidential, not public records, and not available for court subpoena in accordance with RCW sections 70.41.200, 43.70.510, 4.24.250, 74.42.640, 18.20.390, 70.56.020, and 70.56.040



The March Finances were distributed prior to the meeting – see handouts Financial update for March, now that Shawn is the Senior Director of this team he will be doing a lot of the reporting out. Kelly will give the overview and Shawn will give the data reports, his team will continue to put these reports together. We did talk with Clea about what the reports need to look like at the Board meeting, we will only be going over the Financial Discussion update, but are happy to dive into more information if requested. We will be having Tom, from DZA reporting at our next meeting on the 2022 Audited financials Mesirow report for 2022 Qtr. 4 - none of our accounts were on the watch list. In March CMC saw a gain of \$522,394 with a YTD gain of \$765,314 Cash flow for March 2023 o Deposited from operations: \$3,856,424 Paid out: \$3,216,004 Operational cash gain/loss: \$640,420 Month end total cash \$6,999,842 AR: 54 in March Days of cash on hand: 70 Kelly reviewed the income statement, board charts and the balance sheet. **Financial Resolutions:** Resolution 1222 - Budget amendment requesting an additional \$25,000 for syringe pumps **Resolution 1223 -** Budget amendment requesting an addition \$30,000 for surgical equipment. Resolution 1224- Budget amendment requesting and additional \$64,000 for OB/Trauma equipment (real mom, grant funding) Resolution 1225 - Payment of Warrants March 2023 - Accounts Payable Warrants #606110298 through #606110701 **RESOLUTIONS** totaling \$1,965,320.80 Payroll Warrants totaling \$896,140.71 for March 2023. Resolution 1226 - Charity Care - March 2023 - Commissioners were provided Charity Care cases in the amount of \$98,276.91 identified in the attached listings for the months of March. Resolution 1227 - Bad Debt March 2023-Commissioners were provided with Bad Debts in the amount of \$107,221.90. for March. Resolution 1228 - Budget amendment requesting an additional \$45,000 for preventative maintenance for the parking lot. Commissioner Geary Oliver moved for approval on all financial resolutions. The motion was seconded by Commissioner Clea Pryor Motion **CONCLUSIONS** carried. **ACTION ITEMS** PERSON RESPONSIBLE MOTION CARRIED Resolutions 1222 - 1228 Geary Oliver Clea Pryor |X|2 MINS CMO UPDATE DR. HSIFH

DISCUSSION	 Approval of Medical Staff bylaws last approval was 2007, this has been a long time coming, over the last two years Dr. Hsieh, Dr. Chaffee and the MEC have worked on rewriting the bylaws. The work is not done and will be revamped every two years. Commissioner Kris Hare moved to approve the 2023 MedStaff bylaws as presented. Commissioner Parrish seconded the motion. Motion carried.
	 Jerry Thanked the MEC team for taking this task on.

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	Clinic - a mock survey has been completed and went very well, shout out to Shoshannah and Kelly for all their hard work on			
	this. o Working on no shows and standardize workflows, Jessica is working on referral numbers to see if we can bring additional services like Ortho and Gyn			
	Hospital – a UR Committee has been formed, this team is ensuring admissions are being done correctly, this is a mandatory committee.			
	 CMC is working to hire a 3rd party review company to review our cases. We are in the final stages of reviewing this company and hope to hire them in the coming weeks. Dr. Knox is back to rounding in the hospital. 			
	OB - We are working with the park services to get a trauma model to build a simulation lab here at CMC, we have the location, set up and residents to come and test it out. Working to hire an additional FP/OB			
	 Surgery - Bravo is apart of Forgut, if we do not move forward with forgut we can still use this tool. This is to find out if a person has reflux, this will be a great tool for Dr. Hsieh's practice, and will help improve patient satisfaction. 			
	 We are in the final stages of the Performa, we would be the only center doing this procedure in Eastern Washington 			
	Wound Care – Dr. Hsieh and Rachel L were scheduled to meet with Dayton, but this has since been cancelled. Dr. Hsieh going to look at their hyperbaric chamber, this has been extremely fruitful for the Dayton Hospital. If we could get a hyperbaric chamber here we would be the only ones within a 90-mile radius. however, they suggested that we do this on our own, we are already doing everything they would do for us.			
	 Rachel Lewis and Brian Lee will be heavily involved in this process. Surgery - we are talking to a company called DOPL, they are looking to bring on Al procedures, they want to help us provide access. 			
	 They specialize in robotics, and are offering for us to trial a pilot program these procedures would be noninvasive, robotic Ultrasound - we are currently in need of these services. Dr. Hsieh and Ramona are in the beginning stages of this project. ER - the providers are working hard we have hired Josh Mayfield as a per diem Provider, the medical staff is thrilled to have hin back in the ER. MISC - Suki, is a Al product that helps elevate some of the dictation for providers, this program didn't work for us in the beginning but they have recently come out with a version 2 that does meet our needs. Dr. Hsieh continues to review this and see if this is a good fit for CMC. 			
CONCLUSIONS	 Board Approval of the 2023 MedStaff Bylaws 			
ACTION ITEMS		PERSON RESPONSIBLE	MOTION CARRIED	
Commissioner Kris Hare moved to approve the Bylaws. The motion was seconded by Commissioner Brad Parrish. Motion carried		Kris Hare & Brad Parrish		
20 MINS QUALITY UPDATE SHARON GILMORE				
DISCUSSION	• The following quality plans were approved by the Quality Management Committee and are being presented for approval • Emergency Preparedness (PE.1.6) • Environment Management (PE.1) • Hazardous Material Management (PE.1.5) • Infection Prevention (IC.1) • Quality Management (QM.3) • Safety Program (PE.3) • Utility Systems (PE.1.8)			



	 Utilization Review (UR.1) Commissioner Kris Hare moved to approve the of Clea Pryor. Motion Carried. Our DNV accreditation has been made official, Sharon purveyed annually. A huge kudos to all the staff and all the and Melissa continue to work hard in their roles and are 	oresented the certificate! This meets C he work they have done in the last yea	:MS guidelines and we will be
CONCLUSIONS	Approval of the quality plans as presented		
ACTION ITEMS		PERSON RESPONSIBLE	MOTION CARRIED
A motion was made by Kris Hare to approve the presented quality plans. The motion was seconded by Clea Pryor. Motion Carried		Kris Hare & Clea Pryor	
5 MINS NEXT MEETING DATE AND TIME			BOARD OF COMMISSIONERS
DISCUSSION	The next meeting date is on the Memorial Day holiday, per the Board Bylaws the Board will meet on the following day at 6pm.		
CONCLUSIONS	Next meeting May 30 th at 6pm		
ACTION ITEMS		PERSON RESPONSIBLE	MOTION CARRIED
A motion was made by Commissioner Geary Oliver to move the next meeting to Tuesday, May 30 th . The motion was seconded by Commissioner Brad Parrish. Motion Carried		Geary Oliver and Brad Parrish	
2 MINS	CREDENTIALING		BOARD OF COMMISSIONERS
DISCUSSION	Commissioner Brad Parrish made a motion to approve the credentialing as presented. The motion was seconded by Commissioner Clea Pryor. Motion carried.		
CONCLUSIONS	 Credentialing privileges were approved for the following providers Joshua Mayfield, PA Laura Fralich, MD 		
ACTION ITEMS		PERSON RESPONSIBLE	MOTION CARRIED
Approval of Credentialin	ng .	Brad Parrish & Clea Pryor	
Adjournment	Meeting was adjourned at 7:43PM		

Agenda Details: [short overview of agenda item – Approval/motion requested]

COULEE MEDICAL CENTER

DOUGLAS, GRANT, LINCOLN, & OKANOGAN COUNTIES PUBLIC HOSPITAL DISTRICT #6

Vision

To be an organization where all people are equal and where the complete well-being of those we serve is our ultimate objective.

Mission

To inspire excellence, as we care for our patients, honor our profession and serve our community.

INSPIRE • CARE • HONOR • SERVE

Values

Integrity

We serve with integrity by doing what is right, regardless of the difficulty encountered.

Compassion

We offer comfort and security to our patients, families and community by providing hope through heartfelt concern.

❖ Respect

We respect all cultures, beliefs and opinions. We uphold a positive attitude of respect and courtesy.

Competence

We strive to be life-long seekers of wisdom and clinical expertise to ensure our patients receive the highest quality of care. We encourage and support education and the professional growth of staff.

Professionalism

We practice the art of professionalism that embodies appearance, action, communication, competence and respect.

❖ Financial Viability



We strive for balance in providing efficient, innovative, quality care by being responsible stewards of our resources.

Staff Development Goal

To develop a well-trained and competent workforce, who feel prepared and ready to perform their duties in a safe and respectful atmosphere.

1a: Customer service – build upon previous training.

1b: Training and education – develop staff to their fullest potential.

1b1: Annual education and all required trainings

1b2: Orientation

1b3: Customized for professional growth

Safety Goal

To enhance the overall patient and employee experience in a safe and effective manner, while striving for continual quality improvement.

2a: Technology Solutions – Assess, improve and sustain safety and quality of Electronic Health Record and all other technological tools and devices.

2b: Quality – Assess, improve and sustain all quality initiatives throughout the organization.

2c: De-escalation training - Ensuring a safe environment for patients and employees.

2d: Facility security - Assess, improve and sustain security measures.

Employee Experience Goal

To create an environment of respect and recognition of every employee's role in the organization to produce a culture of engagement and satisfaction.

3a: Employee empowerment - Hearing your voice and supporting employee councils.

3b: Retention – Valuing our current workforce through boosting morale, motivation and recognition.

3b1: Encourage and provide opportunities for growth 3c: Recruitment – Carefully evaluate need and fit for positions. 3d: Space – Identify each department's immediate and future needs.

3d1: New building expansion to enhance patient care services – Identify funding opportunities and meet financial benchmarks.

Patient Retention and Recruitment Goal

To meet and exceed the wellness needs of those we care for to ensure the long term viability of our organization.

4a: Patient and patient family experience – Getting it right the first time, from patient presentation to discharge and beyond.

4a1: Encourage and embrace patient feedback to learn, improve and grow.

4b: Service lines – Enhance current services while exploring new opportunities.

4c: Marketing - Tell our story and grow our services.