

Governing Board

Date: Thursday, March 25, 2021
Time: 1:30 p.m.
Location: Sprowel Creek Campus and Via Zoom Conferencing
Facilitator: Board President, Corinne Stromstad

Minutes

Special Note: Due to COVID-19, this meeting was held via teleconference.

The following people attended at Sprowel Creek Campus and via Zoom

Governing Board: Corinne Stromstad (in person), David Ordoñez (in person), Jessica Willis (Zoom), Katie McGuire (in person), and Alison Rivas (Zoom)

Not Present: None

Also in person: CEO Matt Rees, CNO Karin White, CQO Kristen Rees, CFO Paul Eves and Karen Johnson, Governing Board Clerk

Also via Zoom: COO Kent Scown, Outreach Manager Chelsea Brown, Remy Quinn, PFS and Keith Easthouse

- A. Call to Order – Board president Corinne Stromstad called the meeting to order at 1:31 p.m.
- B. Public Comment – none
- C. Board Member Comments – David Ordoñez will be moving out of the area by May 1, 2021.
- D. Announcements - none
- E. Consent Agenda
 1. Approval of Previous Meeting Minutes and Consent Agenda
 - a. Governing Board Meeting Thursday, February 25, 2021
 - b. Special Governing Board Meeting, Friday, March 19, 2021

Consent Agenda: The Board would like to have reports from Quality, Nursing and Medical Staff Committee submitted to them no later than the Thursday before the Board meeting for them to review. This is per the Consent Agenda policy.

Motion: Katie McGuire moved to approve the Consent Agenda and the Previous Minutes as submitted.

Second: David Ordonez

Ayes: Jessica Willis, Corinne Stromstad, and Katie McGuire, David Ordoñez

Noes: None

Not Present: None

Motion carried.

F. Correspondence, Suggestions or Written Comments to the Board – Jessica received a letter from a patient that had received a letter from JPCH with a lot of mistakes and felt embarrassed for the hospital. The patient had also come in 3 times for medical records. Matt Rees says this is a new letter to remind them of their wellness visit that is due and will check to make sure they are accurate going forward. Jessica Willis will respond to the patient.

G. Finance Report –Paul Eves

1. February, 2021 Finances –Paul Eves – See reports

- Zero Acute and 94 Swing Bed days.
- Outpatient Services: 197 ER and 346 clinic visits
- Inpatient review includes Acute, Swing beds and Skilled Nursing. Due to COVID we have to keep patients in acute for 2 weeks before moving to a Skilled Nursing due to Infection Prevention reasons. Due to this, it'll take longer to fill SNF beds.
- Non-operating revenue is \$50,000 this month
- Net loss is very small
- Cash in good position, as is the LAIF account
- Other receivables are \$3M and \$1.6 in net receivables
- Medicare accelerated payments – We'll have to start paying them in April, 2021 by them withholding 25% of our Medicare claims the first year, then 50% 2nd year. Then we'll be charged interest if we don't have it paid off at the end of the 2nd year of payoff. – This money is from Medicare giving us advanced payments at the beginning of COVID. No interest is charged in first 3 years.
 - **UPDATE on 3/26/21: Paul Eves has received updated information about the payments. We are being told now that 25% will be withheld from our Medicare claims for the first 11 months, then it increases to 50% for the next 6 months. We will have to make a decision how we want to handle this by month 16.**

- Medicare contingency – We may be able to keep it but it’s still a liability until we know for sure.
- We do have the IGT rate range contract. We will be making \$1.8M deposit next month, then we will receive a large IGT in the next 3-4 months.
- QIP explanation as related to potential income –Kristen Rees commented. We will report how many we will do, which is due June 15th. How much we get depends on how many all do, as there is only so much money to go around. What number we report will hold for 2 years, then we can choose again. If we don’t meet the minimum requirement, then we can’t report it. This will be discussed with Dr. Seth Einterz, Karin White, Matt Rees and Jennifer Baskin. Also, Kristen has met with clinic staff to discuss what ones are possible. Just the 2 metrics we’re required would bring in between \$700,000 and \$750,000. If we did 3, it’d bring in an extra \$10,000, and 4 extra would bring in an extra \$200,000 each. Any additional would be about \$200,000 each. Jessica Willis commented that we need to communicate well with staff so they don’t become overwhelmed with meeting the new metrics for money. Karin White stated she looks at these to advance the care of our patients, not for the money. Making sure our patients get the best quality care possible. Matt wants to incentivize the whole agency not just one or two departments.

Motion: Katie McGuire moved to approve the Financials as submitted for February, 2021.

Second: Alison Rivas

Ayes: David Ordoñez, Corinne Stromstad, Jessica Willis, Alison Rivas and Katie McGuire

Noes: None

Not Present: None

Motion carried.

2. PFS report – February, 2021 –Paul Eves/Marie Brown - No report

3. HRG report –February, 2021 –Matt Rees – (see separate printout)

- February closed at 78.7 AR days. The AR days trend is going up which is not good. We’re working with HRG to resolve it.
- The Denial management is trending downward which is good.

H. Chief Nursing Officer’s Reports – Karin White

- See report

I. Quality Assurance Performance Improvement Committee Report [H&S Code § 32155]–Kristen Rees, Chief Quality and Compliance Officer – (Jan., April, July, Oct.)

J. Administrator's Report – Matt Rees, CEO

1. Human Resources Quarterly Report – Rachel Wells (Jan., April, July, Oct.)
2. Foundation Report – Chelsea Brown - (May, Aug., Nov., Feb.)
3. Strategic Plan Spotlight – Radiology Mobile MRI's – Lora Simone
 - a. Willets and St. Joseph Health in Eureka are the closest MRI's available.
 - b. We're looking at renting a unit for 1-2 days per month and Lora has been in contact with someone who is working on getting us a quote.
 - c. This unit is like a semi-trailer that's pulled into the parking lot. Nothing metallic is allowed near it. This operates by magnets changing directions and requires a faraday cage.
 - d. According to OSHPD if you have 3 radiological services inside your facility then you need separate showers and bathrooms.
 - e. The State of California says if you apply for a service (MRI), they have 100 days to come and inspect us (within the 100 days). So the application needs to be submitted closer to when we have the MRI in place.
 - f. We're looking at the hookups that will be needed, how long the cords are and how many referrals are we getting.
 - g. The contrast being used in MRIs is called gadolinium, which is a heavy metal your body can't get rid of. So we're looking at other ways to get the images without using the contrast.
4. Matt:
 - a. We're continuing on doing what we can for the community. We're giving as many vaccines as possible. We are not able to bill for the vaccine at this time, but we're hoping to in the future. Right now our billing company says no one is getting paid. Vaccine itself was free, so can't bill for it. We've collected from only 3 patients and will have it refunded to them. Remy was instructed to pull report. We will bill insurance company but not patients in the future.
 - b. Tanya, our new FNP in the clinic can see Medicare patients now. She was working at the dialysis clinic in Eureka.
 - c. We've been doing COVID tests and vaccines for the high school.
 - d. Dietary staffing has been stable and had a new dishwasher installed.
 - e. IT has been working on new software for pharmacy. Garberville Pharmacy is on track for June 1st opening.
 - f. Outreach is well on way to reaching the goal of \$5M in donations.
 - g. Demonstration of a mobile dialysis unit was provided for staff. It runs about \$45,000 for each unit. We're looking into how many locally that are on dialysis. We will have medical director and a nurse to oversee the program. Tanya would be the

provider for it. Other providers could pick it up if we lost her, for example the Medical Director and a nurse. The ER doctors could use it, easy to use after training.

- h. Matt will talk to Ernie about Measure Z money.
- i. The new van for the mobile clinic has arrived. Just got license plates today. The current placement of the tables would make it hard to intubate someone. We're still looking at possibly using it short-term to replace the COVID tent. The current tent was for a short-term emergency, and was from emergency preparedness money to keep infectious diseases out of hospital/SNF. We will need to replace the tent soon.
- j. We had a state survey yesterday and were found to be deficiency free. They saw the tent and impressed with it.
- k. Property behind the hospital: The County tore it down. We'll decide later when it's up for sale if we're interested in buying it.
- l. We're working on a plan to incentivize employees to be vaccinated (for COVID). We're thinking of taking away hazard pay and would pay them a bonus instead. And, if they need to be on site, then requiring them. Bonus will be the amount of April's hazard pay. This plan has gone to legal counsel and we're waiting for their comments. David Ordonez doesn't like the sounds of it. If they have health reasons for not being vaccinated, then they would not be excluded from the bonus. ADA rules come into effect, so if they have a medical reason they can't get the COVID vaccine. We have some people who could continue to work off site. We'd go position by position to decide if they should be on or off site.
- m. We've been working on the Strategic Plan, and the SoHum Healthy Living Club will be highlighted next month. Rob and Ryan will be here April 8th and 9th.

K. Old Business - none

L. New Business

- 1. Approval of Resolution 21:03, Policies and Procedures –
 - Policies and Procedures Packet “A” and “B”
 - Consent agenda policy was discussed. They must have the reports a week before. Clarification: The written reports to the Board are to be submitted to the Board a week before the Board meeting if you want it to be on the Consent Agenda, which is the way it's supposed to work. If it's not, they it'll be discussed as part of the meeting, but that is not ideal, as the Board members are not given enough time to read it ahead of time to formulate questions/comments.

Motion: Katie McGuire moved to approve **Resolution 21:03** Policies and Procedures Packets “A,” Information Services Manual and Radiology/CT Exams with IV Contract and “B” Governing Board policies as submitted.

Second: Jessica Willis

Ayes: David Ordoñez, Alison Rivas, Jessica Willis, Katie McGuire, and Corinne Stromstad.

Noes: None

Motion carried by roll call.

M. Meeting Evaluation – If you’re not going to be at the meeting in person let Karen Johnson know. For the future meetings, print the agendas only and make only 1 packet. We’ll show everything on the screen. The Board members should have tablets (or available to them if they don’t already) they can use also. David Ordonez likes the minutes and how they flow.

N. Parking Lot

1. Governing Board retreat is on hold for now.

O. Next Meeting Thursday, April 29, 2021

1. QAPI Meeting Thursday, April 8, 2021 at 1:00 p.m. ~ Corinne will attend. Call and remind her. Kristen says to change it to 1:30 p.m., but this may conflict with the Manager’s Meeting.
2. Med Staff Meeting Wednesday, April 21, 2021 at 1:00 p.m. ~ Katie McGuire

P. Adjourn to Closed Session – 3:19 p.m.

Q. Closed Session opened at 3:36 p.m.

1. Approval of Previous Closed Session Minutes

- a. Closed Session Governing Board Meeting February 4, 2021
- b. Closed Session Special Governing Board Meeting March 19, 2021

Motion: Katie McGuire moved to approve to approve the Consent Agenda and the Previous Minutes as submitted.

Second: Jessica Willis

Ayes: David Ordoñez, Corinne Stromstad, Alison Rivas, Jessica Willis and Katie McGuire

Noes: None

Not Present: None

Motion carried.

2. Compliance and Risk Report [H&S Code § 32155] – Kristen Rees, MPH, CPHQ
3. Clinic Service Review [H&S Code § 32155] – Karin White, CNO
4. Medication Safety Committee Report [H&S Code § 32155] – Karin White, CNO
5. Medical Staff Appointments/Reappointments [Gov. Code § 54957]
 - a. Nghi Man Lu, M.D. – Reappointment – Diagnostic Teleradiology, 3/25/2021 – 3/24/2023

- 6. Personnel matter – CEO evaluation – pursuant to Government Code § 54957
- 7. Personnel matter – Chief Quality and Compliance Officer evaluation – pursuant to Government Code § 54957
- 8. Next Meeting Thursday, April 29, 2021

R. Adjourned Closed Session at 4:50 p.m.

S. Resumed Open Session at 4:50 p.m.

- 1. The following action was taken at closed session
 - a) Personnel matter – CEO evaluation – pursuant to Government Code § 54957

T. Adjourned Open Session at 4:50 p.m.

Abbreviations

<i>ACHD</i>	Association of California Healthcare Districts	<i>ACLS</i>	Advanced Cardiac Life Support Certification
<i>AR</i>	Accounts Receivable	<i>BLS</i>	Basic Life Support Certification
<i>CAIR</i>	California Immunization Registry	<i>CEO</i>	Chief Executive Officer
<i>CFO</i>	Chief Financial Officer	<i>CMS</i>	Centers for Medicare and Medicaid Services
<i>CNO</i>	Chief Nursing Officer	<i>COO</i>	Chief Operating Officer
<i>CPHO</i>	Chief Quality and Compliance Officer	<i>EMR</i>	Electronic medical record
<i>ER</i>	Emergency Room	<i>FTE</i>	Full Time Equivalent/Full Time Employee
<i>HIM</i>	Health Information Management	<i>HRG</i>	Healthcare Resource Group
<i>HVAC</i>	Heating, Ventilation and Air Conditioning system	<i>IGT</i>	Intergovernmental transfer
<i>IT</i>	Information Technology	<i>JPCH</i>	Jerold Phelps Community Hospital
<i>LVN</i>	Licensed Vocational Nurse	<i>MPH</i>	Master of Public Health
<i>OBS</i>	Observation	<i>PALS</i>	Pediatric Advanced Life Support Certification
<i>PFS</i>	Patient Financial Services	<i>QAPI</i>	Quality Assurance Performance Improvement
<i>QIP</i>	Quality Improvement Project	<i>RN</i>	Registered Nurse
<i>SHCC</i>	Southern Humboldt Community Clinic	<i>SHCHD</i>	Southern Humboldt Community Healthcare District
<i>SNF</i>	Skilled Nursing Facility	<i>SWG</i>	Swing beds
<i>D.O.</i>	Doctor of Osteopathic Medicine		