

BOARD OF HOSPITAL COMMISSIONERS

January 25, 2022

Those in attendance were Hospital Commissioners Gayle Weston (teleconference) and Don Wilson (teleconference). Also present were Eric Moll, Mason Health CEO (teleconference); Mark Batty, Mason Health COO (teleconference); Melissa Strong, Mason Health CNO (teleconference); Dr. Dean Gushee, CMO (teleconference); Robert Johnson, Legal Counsel (teleconference) and Shelly Dunnington, Senior Executive Assistant (teleconference).

Excused absent: Darrin Moody, Commissioner

Gayle Weston called the regular meeting of the Board of Commissioners to order at 8:00 a.m.

It was moved, seconded, and voted to approve January 11, 2022 minutes as presented.

Consent Agenda

It was moved, seconded, and voted to approve January 25, 2022 consent agenda.

Commissioner's Committee Report & Calendar

Don Wilson attended BOHC on January 11, 2022 and met with Eric Moll 1:1 on January 21, 2022.

Gayle Weston attended BOHC on January 11, 2022, WSHA Advocacy briefing on January 19, 2022, Finance Committee on January 20, 2022, and met with Eric Moll 1:1 on January 24, 2022

Public Comments – None

Legal Counsel –

Rob Johnson shared the long-term tax has moved through the legislative approved and now is at the Senate for a vote. Once this is approved, we will no longer have to collect the long term and hold it.

CEO's Report

- a. Update on Rehab Project - Eric Moll provided an update on the Rehab project design error. Eric shared their open communication, which allows the ability to learn how to communicate better in the future. The delay will be about two months. The permitting should be completed around March 14, 2022. We will not be redesigning the entry into Shelton Family Medicine Building where Rehabilitation will be moving. They will design the changes based on our budget. With the delay being two months, this allowed Skanska to stay on the project. Gayle asked about a small scale opening for the Patient Access Center. Mark and Jennifer Capps will be working on the opening. There will be supervisors and 36 workstations in this PAC.
- b. WSHA Advocacy Update - WSHA would like them to focus on one bill the nurse staffing bill. The two other bills they will discuss if time allows are merger and acquisition that allows oversight with the attorney general office and next bill is prohibition facility fee for provider base clinic, we will advocate for this bill if we have time. Eric Moll shared how proud he was with Mel's testimony last week to the house of legislature. Mel Strong shared her testimony to the House of Representatives on the nurse staffing bill HB 1868.

WSHA Advocacy Update (continued)

- We recently had a patient who passed away in our ED waiting for transport to a larger, tertiary, trauma center last week. The patient passed away from internal bleeding. Capacity and staffing were barriers to our transfer. We rationalized the death as another inadvertent and tragic death linked to the multiple issues related to Covid. This Bill has the potential to create this type of scenario OUTSIDE a national emergency. For example: If Harborview are maxed with staffing ratios and cannot accept patients, what happens to the rest of the system and to rural communities that depend on rural hospitals to 'stabilize' and ship? We are seeing what will happen now. The moral injury our rural nurses are feeling is because we CAN'T get patients to an appropriate level of care quickly and they have to helplessly watch their neighbors die, this bill would create situations where hospitals would need to go on divert because of staffing.

Mel shared this is staffing ratio and is defined in this bill but not sure where the ratio came from. Our current ratio is 1 in 4 during the day and 1 in 5 in the evening. If nurse staffing bill is passed, we ask where we will get the nurses to fill these positions.

Monthly Reports – None

Old Business -

- a. COVID Update - Mel Strong provided an update on COVID. In December, we tested 92 employees with 27 employees positive. In the first 20 days in January, we tested 187 employees with 65 tested positive. We currently have 19 staff out with COVID related symptoms. We are currently on Contingent Staffing. We have been running short on various supplies but have started getting some supplies in over the last few days. This is the highest Mason County has been. We currently have 8 inpatient COVID positive.

New Business – None

Administration Roundtable

Rick Smith gave an update on Alliant who handles our benefits. The FDA has mandated our benefits cover any over the counter COVID in home test. The over the counter COVID 19 coverage and we decided on the pharmacy and medical coverage option. We did not limit or access to these tests. The eligibility is up to 8 OTC tests per individual. The cost will be between \$50,000 - \$140,000 annually. HMA and Alliant have put some material out to education our employees.

We have a large cancellation load so when we get back to full capacity our surgery department and OPS will be really busy. We are averaging lower in ED but this has been offset by higher average inpatient census 20.8 and average length of stay is 4.8 which is a 1 day longer before COVID. As of last Thursday, we were trending below budget by 1.7% by gross revenue due to no surgeries. Revenue Cycle Team is doing a good job tracking getting bills processed and posted. We will see some higher expenditure in the Capital Equipment that will be purchased the first quarter. We are looking at needing 3 to 6 months lead to order the SWITCH equipment, which is already at the end of life so we will be getting this equipment order process.

Administration Roundtable (continued)

Mark Batty shared that Patient Access Center is scheduled to be turned over to us on February 25. We will begin moving staff that day or the following Monday. Prior to that we will have a ribbon cutting, provide tours to the staff and do emergency exit and fire hazard training.

After 18 months, talks with the Shelton School District have resurfaced on the topic of a school-based clinic. Three of us from Mason toured a similar clinic in Belfair to see what services they offered, number of patients they saw and what supplies they used. Within the next week to 10 days, we anticipate a follow up meeting with Shelton School representatives to discuss expectations and what we feel we can offer in this type of setting. Options for housing this clinic could be within our YMCA space or at one of the school buildings.

Mel Strong shared that Congressman Kilmer's staff will be reaching out to Deena with the Shelton School District Health Science Academy and South Puget Sound on a MA program to help with workforce struggles Eric Moll asked about the HRSA grant for workforce. Mel Strong will know more information once she talks to the grant writer from the Rural Health Collaborative.

Dean Gushee shared we had our first hosted organization to review Cerner last week, which was Forks. We do have other organization that would like to come and do a site visit, but we are not scheduling site visits at this time. Skyline will be moving over to our domain, and we will be working closely so that they have a successful conversion.

Dean Gushee shared we have started setting up meeting to discuss system standard of care. We are putting the framework starting with committee members. This way we are active vs. reactive. All the Governance is put in place. One being the Cerner Governance and the second one is Physician Governance and has been very productive and good information that has been helpful. Jennifer Dorcy is handling most of the meeting and capturing the information coming out of the meeting and sharing the information that comes of them.

Dr. Anderson and Dr. Gushee will be going to a Horty Springer conference, which are very helpful to the new providers of the Medical Executive Committee.

Adjourned at 9:40 a.m.

PUBLIC HOSPITAL DISTRICT NO. 1
OF MASON COUNTY, WASHINGTON

BY: _____

Attest: _____
