



**Credentials:**

Initial Applications

Thomas C. Cummings, ARNP	Nurse Practitioner	Outpatient Clinic
Christina Ross, LISCW	Outpatient Behavioral Health	
Martha Svobda, LISCW	Outpatient Behavioral Health	

Resignations

Letizia Alto, MD	Telenoctrnlist	Active
Bhatt, Skand D., MD	Telenoctrnlist	Active
Alexandra Rhodes, MD	Pediatrics	Active
Glenn Sons, PA-C	Outpatient Clinic	Allied Health

Removal from Provisional

Bradley C. Christ, MD	Orthopedic Surgery	Active
Mary E. Goldmann, PA-C	First Assist	Allied Health
Terri L. Grosshans, PA-C	First Assist	Allied Health
Ryan J. Halpin, MD	Neurosurgery	Active
Angela M. Harold, PA-C	First Assist	Allied Health
Richard J. Lamour, MD	Orthopedic Surgery	Active
Andrew P. Manista, MD	Orthopedic Surgery	Active
Darrin J. Trask, MD	Orthopedic Surgery	Active
Jerome P. Zechmann, MD	Orthopedic Surgery	Active

By Proxy

Carson Van Sanford, MD	Telestroke
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**CNO:**

Staffing: ED- 0.6 FTE Monitor Tech; ICU- 0.6 FTE Monitor Tech, 0.9RN days, 0.6 RN days, 0.9 RN nights; BC- 0.9 RN nights; MSP- 0.9 CNA days; surgery- 2FTE RN days (PACU), 1 FTE surg tech. We have extended offers to 6/8 foreign nurses, all 6 have accepted. Our new Nurse Tech is expected to begin end of January dependent on state certification. As of December 8<sup>th</sup>, DNV has not returned for their expected revisit. We reached out to DNV and it was an oversight on their part. Morale remains stable. Staff are in good spirits based on leadership reports and rounding. Our use of agency remains high because of open positions, FMLA, and high census. Capacity: we've continued to experience very high census along with high acuity (very ill) patients that we would have historically transferred to a higher-level hospital.

Community: There is an opioid taskforce in Mason County who reached out looking for MGH participation. I've had three nursing leaders volunteer and are excited about the opportunity. I am currently working with Turning Pointe on their Sexual Assault recertification.

Collaborative: Continue as chair for the Chief Nurse Executive committee. We are currently working with CommonSpirit (formerly VM) on a nursing education model that can be a 'shared' education department throughout the collaborative. This is in the very early stages of development but there is high interest from CommonSpirit educators. Examples would be:

charge nurse, preceptor course, ACLS/BLS, TNCC, EKG, etc.

## **COO**

After 21 months we can finally say we have successfully moved all the satellite clinics into Mason Clinic. The move of the Women's Clinic was completed the weekend of December 3-6, and went as well as could have been expected, as did the first week in the new location.

As was mentioned previously the completion of the Patient Access Center (second floor of the former Shelton Family Medicine facility) is being delayed due to the arrival of some electrical components necessary to operate out of the new location. The latest update we received had the delay extended into the latter part of February. While this will impact the start of the Rehabilitation Services project, it still appears this project can be completed on time.

An update on Provider transitioning and recruiting. An offer was made and accepted with a Nurse Practitioner to join the Hoodspout Clinic. Sara Holt Knox, the NP that has been in Hoodspout, provided us with her intent to resign in March to take a sabbatical and pursue further educational opportunities. The new NP is fresh out of school and will start with us in January to work with Sara for a few months before she begins working directly with Dr. Burris. On Friday, December 10, we hosted an on-site visit with a Pediatrician who has been practicing in North Dakota since 2018. She is a former co-resident of Iris Malit, a Pediatrician who joined Mason Health in 2019. An update on this visit will be provided at the Commissioners meeting.

### **Meeting with Cerner CEO, Dr. Feinberg:**

Dean and I had the opportunity to participate in a small group of high performing Cerner clients to meet with the new Cerner CEO. Dr. Feinberg described his vision for Cerner (focus on operational excellence and clinician experience) while listening to input from the five hospitals represented on the call. Dean and I underscored our innovative relationship while highlighting opportunities for improvement. It was a good opportunity to deepen our relationship and build constructive pathways for improvement.

### **Washing State Healthcare Executive presentation:**

Mason Health was the featured presentation at the December virtual meeting of WSHE. Melissa Strong, Jennifer Capps, Mark Batty and Nicole Eddins had the opportunity to talk about how their Baldrige Capstone projects have helped lead to sustainability in the face of a pandemic. The discussion was moderated by Theron Post, executive director for Performance Excellence Northwest. All did an amazing job of representing the strong work and learning journey of Mason Health. This is a wonderful opportunity to share and give back to the healthcare industry.

### **Mason Leadership Training with Michael Nash:**

After a two-year hiatus we had in-person leadership training with Michael Nash on August 13<sup>th</sup> (socially distanced and masked at Little Creek Casino). We have been working with Michael Nash for over 13 years on integrating his "Minds & Health" program into our Mason Leadership System. We can definitively say this is not flavor of the month (or year) after more than a decade of work in this area. Even though most of the concepts are basic, consistent training provides an opportunity for reflection and renewal. It also ensures a common language and approach to leadership as we bring in new leaders to the organization.

## **CMO**

See Revenue Cycle SR Data PowerPoint