

CLALLAM COUNTY PUBLIC HOSPITAL DISTRICT NO. 1  
FORKS COMMUNITY HOSPITAL

Board of Commissioners Meeting Minutes  
Community Health Conference Room  
September 26, 2017

Those present were Commissioners: Patricia Birch, Secretary; Sandy Schier, Commissioner; and Jerry George, Commissioner. Additional attendees included: Tim Cournyer, CEO; Paul Babcock, CFO; Andrea Perkins-Peppers, CIO; and Kirk Cole, Chief of Staff.

Daisy Anderson, President; attended via telephone.

Don Lawley, Vice President; was not present.

The meeting was called to order at 5:00 p.m. by Daisy Anderson.

**Public Comments:**

There were no public comments.

**Changes or Additions to the agenda:**

There were no changes or additions to the agenda.

**Community:**

The Board of Commissioners reviewed newspaper articles by the Forks Forum, Peninsula Daily News, biography on Dr. Lowery, and thank you cards from interviewed candidates.

**Department Report:**

Pam Brown, Director of West End Outreach Services presented a department update to the Board of Commissioners. Pam also introduced, Tanya MacNeil, who is the Administrative Services Manager for WEOS, but effective tomorrow Tanya will be the new Director as Pam is pursuing other opportunities. In lieu of replacing Tanya's position, Tanya will take on her duties and Pam's duties, but will be hiring a Clinical Manager to handle the Clinic side of WEOS. WEOS is part of the Salish Behavioral Health Organization, which is where the Medicaid dollars come from and the SBHO also services Jefferson and Kitsap County along with Clallam County. WEOS offers therapy for individuals, groups, couple, and family services. There is also case management for clients who need more help with daily activities and the Hope Center is available Monday –Friday, which provides services to the chronic mentally ill clients. They can use the Hope Center facility to shower, wash laundry, fitness routines, cooking sessions, daily activities, and computer use. WEOS has around twenty-one FTE's; five of those FTE's are therapists who also serve as a Designated Mental Health Professionals. WEOS has prescriber services, tele-psych for children, and 24-7 crisis services. WEOS provides a co-occurring group for clients that have a Chemical Dependency and a Mental Illness. One therapist also spends an afternoon at the Lapush Clinic and a day at Clallam Bay Medical Clinic to offer services to the surrounding areas.

**Medical Staff Meeting:**

The August 9, 2017, Medical Staff meeting minutes were reviewed. Jerry made a motion to approve the meeting minutes; Patty seconded, and the motion carried.

**ACTION:** It was moved, seconded, and passed to approve the Medical Staff meeting minutes from August 9, 2017, as presented.

**Medical Staff Privileges:**

The requests for privileges were reviewed for John Lowery, MD; Matthew Voorsanger, MD; Claire Nordeen, MD; Marc Astin, MD; Mariam Moghadam, MD; and Pam Brown, LMHC. Jerry made a motion to approve the Medical Staff privileges; Patty seconded and the motion carried.

**ACTION:** It was moved, seconded, and passed to approve the appointment of John Lowery, MD; Matthew Voorsanger, MD; Claire Nordeen, MD; Marc Astin, MD; and Mariam Moghadam, MD and the reappointment of Pam Brown, LMHC.

**Performance Improvement Committee:**

The July 17, 2017, Performance Improvement Committee meeting minutes were reviewed. Patty made a motion to approve the meeting minutes; Jerry seconded, and the motion carried.

**ACTION:** It was moved, seconded, and passed to approve the Performance Improvement Committee meeting minutes from July 17, 2017, as presented.

**Board of Commissioners Meeting:**

The Board of Commissioners meeting minutes from August 22, 2017, were reviewed. Patty made a motion to approve the meeting minutes; Jerry seconded, and the motion carried.

**ACTION:** It was moved, seconded, and passed to approve the Board of Commissioners meeting minutes from August 22, 2017.

**Vouchers:**

August 2017 Vouchers were reviewed. Patty made a motion to approve the vouchers; Jerry seconded, and the motion carried.

**ACTION:** It was moved, seconded, and passed to approve the August 2017 General A/P vouchers numbered 095040 to 095443 in the amount of \$1,279,818.27 and the General P/R vouchers numbered 545694 to 545791 in the amount of \$99,482.72.

**Write Offs:**

September 2017 write offs were reviewed. Sandy made a motion to approve the write offs; Jerry seconded, and the motion carried.

**ACTION:** It was moved, seconded, and passed to approve the September 2017 Write-offs totaling \$51,948.72.

**Old Business:**

#### **4-Plex, 61 Ash Ave:**

Tim was able to negotiate the 4-plex down to \$260,000 and the seller has accepted. The appraiser valued the building at \$279,000. Tim would like to use the MOB bond (medical office bond) to purchase the apartment, since there are funds left over from the Bogachiel Clinic. Jerry made a motion to approve purchasing the 4-plex with funds from the MOB bond; Sandy seconded, and the motion carried.

**ACTION:** It was moved, seconded, and passed to approve the purchase of the 4-plex using the MOB bond funds totaling \$260,000.

#### **New Business:**

##### **ISO 9001: 2015 Board Update**

We had a DNV survey in August. DNV comes every 12-18 months. Deborah has not received the official DNV report back, but we are expected to have six nonconformities, which consist of:

- NC – 1: Privileging of our medical staff
- NC – 1: Operative report in chart prior to patient transferring to new department
- NC – 2: Med Staff and midlevel performance data review reflected in Med Staff minutes
- NC – 2: Contracted Services Evaluations
- NC – 2: H-tank securage
- NC – 2: Completion of anesthesia pre-assessment
- There are also four areas of OFI (Opportunity for Improvements).

##### **ISO 9001: 2015 FAQ**

This was the last year we would be surveyed under the ISO 9001: 2008 guidelines, which focused on six areas: document control, record control, and control of non-conforming products, internal audits, corrective action, and preventive actions. The next ISO 9001:2015 will focus on scope, normative reference, terms & definitions, context, leadership, planning, support, operation, performance evaluation, and improvement.

##### **Partnership for Patients and Family Engagement (engagement resources for PFE)**

The WSHA has recommended that hospitals participate in the Patient and Family Engagement. PFE consists of five metrics:

- Metric #1: Planning Checklist for Scheduled Admissions
- Metric #2: Shift Change Huddles/Bedside Reporting with Patients and Families
- Metric #3: Accountable Leader or Program Area
- Metric #4: Having a Patient and Family Advisory/Engagement Council (PFAC/PFEC) or a Patient/Family Representative on the Quality Improvement team
- Metric #5: Patient and Family on Hospital Governing and/or Leadership Board (hospital governance)

##### **OB Triage in the ED during FCH OB Department Closure**

Deborah passed around the policy and procedure of OB triage in the ED during FCH OB department closure, which was reviewed by the Board of Commissioners.

### **Discussion on County Bank Account**

Tim received an email from Kay Stevens from Clallam County. There have been fraudulent checks issued from the hospital account. Kay recommended that the hospital close the current bank account and open a new one, due to there being fraudulent issues with the same account in 2015. Patty made a motion to close the current bank account and open a new account per Kay Stevens's recommendations; Jerry seconded, and the motion carried.

**ACTION:** It was moved, seconded, and passed to approve Tim close the current bank account and open a new account.

### **December Board of Commissioners Meeting**

The December meeting is scheduled for December 26<sup>th</sup> and Tim has requested since the meeting is the day after the holiday that they consider moving, canceling, or keeping the current schedule. Tim asked the Board to consider the options and have a discussion at the October meeting.

### **Tim Cournyer, CEO reported:**

#### **Barbara Schmidt**

Barbara Schmidt has accepted the Clinic Administrator position and starts on October 16, 2017.

#### **Dr. Elizabeth Morgan**

Tim has presented Dr. Morgan with a sample employment offer. She has responded to the package but is still looking at other offers; one is in her home state. She would like to have in writing to have two-4 day weekends a month and also would like additional C-section training.

Tim also reached out to the Ingles, which are a father/son FP/OB combo.

#### **Dr. Moghadam**

Dr. Moghadam spent six weeks at the Clinic in the summer and then her assignment was complete. Dr. Clarke, who replaced her, is leaving, and Dr. Moghadam agreed to come back for an indefinite period of time.

### **Chemical Dependency**

West End Outreach Services will be suspending Chemical Dependency services due to being out of compliance. The program has decreased in size due to a competitor in town and budget cuts to the program. One employee was leaving to work closer to home, one employee can transition over to Mental Health Case Manager, and one will be laid off. WEOS has a memorandum of understanding with Cedar Grove counseling to transition all clients. Weos will continue with her Co-occurring groups.

### **Generator Update**

The generator is in transit and should be installed and running by the end of October.

### **WRHAP Update**

The next WRHAP meetings are November 8<sup>th</sup> and 9<sup>th</sup> and Tim will be attending these meetings. There are two WRHAP projects; clinic APM, which meets on the 8<sup>th</sup> and, followed by the LTC group that meets on the 9<sup>th</sup>.

### **WSHA – Legislative Summary and Policy Review**

Tim encouraged the Board to read the article in the BOC packets from the Washington State Hospital Association regarding Legislative Summary and Policy Review.

### **Finance:**

Paul Babcock, CFO, presented the August and year-to-date financial report, which was reviewed and discussed.

- Total patient revenue has increased from the prior August by \$289,244.
- Total patient revenue for August was \$3,732,492.
- Total revenue deductions for August were \$1,415,743.
- Total revenue deductions year to date \$12,578,146.
- Net patient revenue for August was \$2,210,483.
- Net patient revenue year to date is \$16,960,412.
- Miscellaneous income for August was \$174,177.
- Miscellaneous income year to date was \$1,461,694.
- Net A/R days are 45.07.
- Net operating income for August was \$1,880.
- Net income year to date is \$171,256.
- Total cash at the end of August was \$4,734,955.

August's gross patient revenue of \$3,732,492 is above the prior year August by \$289,244 with Outpatient revenues below the prior August by (\$64k), but above in Inpatient, the Clinics, and in ER revenues. ER volumes were down over July, as well as Surgeries and Births. August gross patient revenue was an increase compared to the prior month of \$245,103, but missed budget by (\$110,546).

Acute care inpatient average daily census for August was 1.7 patients per day compared to a budget of 2.5 patients per day, and prior month of 1.4 patients per day. Swing Bed average daily census was 2.9 patients per day compared to a budget of 2.9 and prior month of 2.6 patients per day. Custodial Swing Bed had an average daily census of 8 compared to a budget of 8 and a prior month of 8. Long Term Care average daily census totaled 12 patients per day compared to a budget of 11.8 and prior month of 12 patients per day. Newborns totaled 3 for the month, compared to a budget of 6 and prior month of 5. There were 18 total surgical cases in month including 5 inpatient cases. August surgical activity included: 15 surgeries and 3 scope procedures. Total surgical volume was slightly lower than July volume. ER visits totaled 440, an average of 14 patients per day, compared to a budget of 16 patients per day, and prior month of 17 patients per day. Clinic visits totaled 1,818 for month compared to a budget of 1,775 and prior month of 1,498.

### **Clinic Graphs:**

The Board reviewed the Bogachiel Medical Clinic and Clallam Bay Medical Clinic graphs for August 2017.

**Ambulance Report:**

Tim Cournyer presented the Ambulance report through September 2017. To date, there have been 536 calls dispatched, 298 patients transported to Forks Community Hospital, 65 inter-facility transfers, 37 cancellations, 96 refusals, 18 lift assist only, and 36 non-ems related dispatch calls.

Daisy Anderson announced that the Board is convening to executive session pursuant to RCW 42.30.110(1) (g)-To review the performance of a public employee.

**Executive Session:** The Board convened to executive session at 6:24 p.m. for fifteen minutes.

The Board reconvened to open meeting at 6:38 p.m.

There being no further business to discuss, the meeting was adjourned at 6:39 p.m.

The Board of Commissioners next meeting is scheduled for October 24, 2017 at 5:00 p.m.

Minutes recorded by Laci Johnson, Executive Assistant.

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Patricia Birch, Secretary