

May 11, 2022

The Working Board Meeting of the Board of Commissioners for Island Hospital was called to order by Commissioner Iversen at 12:00 pm on May 11th in the Cypress Room of Island Hospital and via WebEx.

Those present were Commissioners Warren Tessler; Jan Iversen, Lynne Lang, PhD and Paul Maughan, PhD. Also present were Elise Cutter, CEO; Carol Northup, RN CNO, Julie Stewart, CFO, Dr. Jason Hogge, CMO, Kim Graf, Administration and Briana Alzola, Anacortes American.

No Present: Rob Carter, COS

Public Comment:

No Comments

Q1 Organizational Goal Review:

The Senior Leadership Team (Elise Cutter, Carol Northup, Julie Stewart, Jason Hogge) and Patty Codd, Director of Results Management reviewed the Q1 Organizational Goals. Highlighted were the following:

Service Excellence:

Restraints: Carol Northup, RN reported-

Goal:

Restraint: Initial Face-to-Face Composite Measure compliance at 73% compliance or higher. Including:

- *F2F within 1 hour of restraint initiation
- *Immediate Situation
- *Documented Reaction To intervene
- *Documented Medical Condition
- *Documented Behavioral Condition
- *Need to continue or terminate documented

Q1 Results:



Sepsis: Dr. Hogge reported-

Goal:

Sepsis Measure (SEP-1) to meet 68% or higher compliance to Sepsis bundle for FY 2022

Q1 Results: This goal has just started to be tracked and will be reported out in Q2 Organizational Goal Update at the July Working Board Meeting. Dr. Hogge provided an overview of sepsis remarking on the definition, incidence, causes of sepsis, stages of sepsis and treatments for sepsis. There was a review of the process for treating sepsis patients and remarks on how sepsis will be tracked.

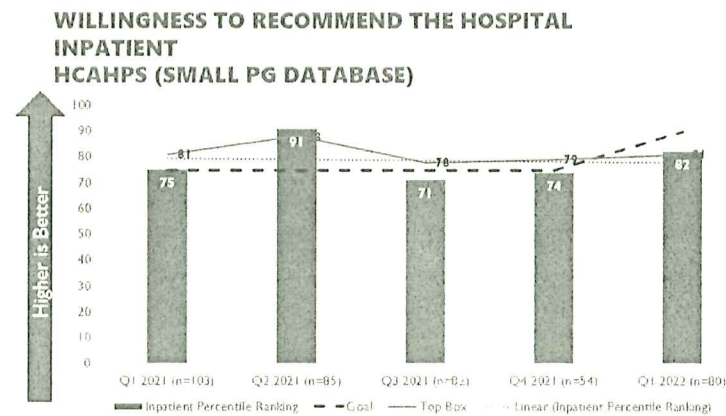
Willingness to recommend Hospital Inpatient: Carol Northup, RN reported-

Goal:

HCAHPS Inpatient Overall Willingness to Recommend

Achieve an annual or quarterly average of HCAHPS Inpatient “Overall Willingness to Recommend” on inpatient satisfactions scores greater or equal to the **90th percentile**.

Q1 Results:



FOR USE IN ISLAND HOSPITAL'S QUALITY PROGRAM CONFIDENTIAL AND PROTECTED PURSUANT TO RCW 4.24.250 AND RCW 79A.1300

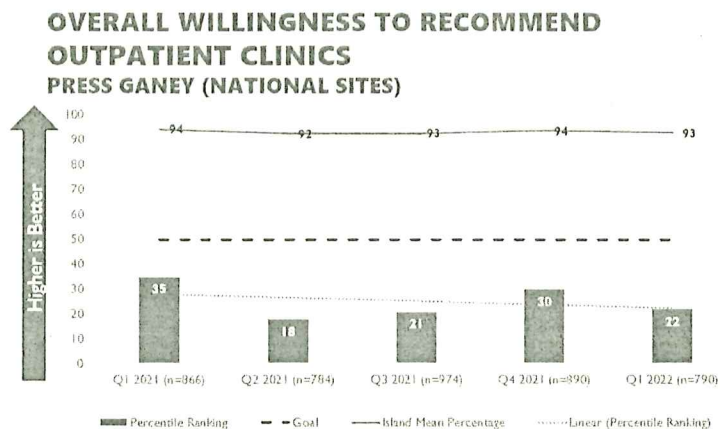
Willingness to recommend outpatient clinics overall: Patty Codd reported:

Goal:

Outpatient Clinic Overall Willingness to Recommend

Achieve an annual average of “Overall Willingness to Recommend” on satisfactions scores greater than or equal to the **50th percentile**.

Q1 Results:



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Clinical Excellence

Diabetes: Dr. Hogge and Patty Codd reported:

Goal:

Diabetes: Improve performance of three (3) Diabetes eCQM as measured by:

- Hemoglobin A1c (HbA1c) Poor Control >9% (CMS-122) eCQM at 35% compliance or lower.
- Eye Exam (CMS-131) eCQM at 25% compliance or higher
- Medical Attention for Nephropathy (CMS-134) eCQM at 83% compliance or higher.

Q1 Results:

This goal has just started to be tracked and will be reported out in Q2 Organizational Goal Update at the July Working Board Meeting. Patty Codd remarked on the processes to track the Diabetes Goal remarking on the system tools, workflow processes, data drivers and remarked on how the metrics will be tracked.

People Goal:

Goal:

Voluntary Turnover

Reduce Island Hospital voluntary turnover from FY21 27.1% to 23% or less in FY22.

Q1 Results:

Will be reported out in June

Sustainability Goal:

Financial: Julie Stewart reported-

Goal:

Financial

Achieve a 0% or higher operating financial margin within the overall performance of the organization.

Q1 Results:

	2022 YTD Actual	2022 YTD Budget	2021 YTD Actual
REVENUES			
Net Patient Revenues	\$ 23,889	\$ 27,320	\$ 24,509
Other Revenues	503	529	212
Total Revenues	\$ 26,392	\$ 27,850	\$ 24,721
	89.0%	89.3%	89.8%
EXPENSES			
Wages & Benefits	16,636	15,988	14,047
Purchased Services & Pro Fees	4,639	3,036	3,219
Supplies	3,244	4863	3,369
Drug Expense	2,109	2,314	2,095
Depreciation	1,306	1,263	1,307
All Other Expense	686	737	623
Total Operating Expenses	\$ 28,630	\$ 27,850	\$ 24,679
Net Operating Margin	(2,238)	(1)	42

Impacts:

- Governor's ban on non-urgent procedures
- Increased labor costs, both employed and contracted

Growth- Julie Stewart reported:

Goal:

Growth

Increase Adjusted patient days by 5% over FY21.

Q1 Results:

Adj. Pt. Days	2021	2022	Inc/(Dec)
YTD March	7,730	9,324	21%

Impacts:

- Increase in inpatient days of 29% over 2021
- Increase in length of stay from 2.8 to 3.2
- Increase in hospital outpatient ancillary revenue of 14% over 2021

Strategic Objectives and Facility Vision

Elise Cutter presented the 2022 strategic objectives and facility vision. Highlighted were the following:

- Review of Strategic Objectives & Vision:
 - **Improve the patient experience for those accessing our services**
 - Direct patients to a main entrance for registration and create intentional patient spaces with them in mind.
 - Enhanced way finding internally and externally clearly directing patients where to go
 - Direct patients to a main entrance for registration and create intentional patient spaces with them in mind.
 - Enhanced way finding internally and externally clearly directing patients where to go
 - **Identify under-utilized space and identify potential uses**
 - Capacity to expand
 - Identify space better suited for patients to access clinical care
 - **Meet space demand for outpatient specialty services and primary care**
 - Improve the patient experience by grouping like practices together
 - Create formal entrances to add clarity to wayfinding
 - Ensure ample patient parking
 - Create a multi specialty clinic with ample procedure rooms and capacity to expand current services
 - Expand primary care clinic space as the specialty clinics vacate into specialty clinic zones to accommodate additional primary care providers
 - **Create space for future surgical growth and technology**
 - Expand outpatient procedure capacity
 - Ensure adequate space for the addition of new technologies
 - Improve facilities to support optimized workflows
 - Patient privacy enhancements
 - **Improve the security and flow of emergency services (internal/external)**
 - Secure the Emergency Department for patient and staff safety
 - The Emergency entrance is no longer “an entrance” to the hospital
 - Keep sick away from healthy
 - Relocate helipad closer to the emergency room to avoid long transportation of patients
 - Based on prior analysis, rooftop helipads are found to be more secure and safer for patient transportation
 - Update Emergency Department interior
 - Ensure patient only parking for Emergency Department patients closest to the entrance

- **Create a cohesive look and feel to the organization through establishing an interior master plan**
 - Improve patient flow
 - New interior wayfinding
 - Update paint and flooring
 - Color coded seating to easily identify spaces and their purpose
 -
- **Seek opportunities to maximize on campus expansion**

It is anticipated that the various projects if done one (1) year at a time will take approximately ten (10) years to complete. There was brief discussion of expansion beyond ten (10) years noting expansion could possibly include allowing for a parking deck and new medical office building.

Next Steps:

1. Board approval of the objective and strategic facility vision
2. Develop financial plan to support the objectives and vision
3. Finalize initial projects and timeline
4. Begin detailed design phase

After review and discussion, Commissioner Lang made motion to approve the strategic objectives and facility vision as presented. Commissioner Bogosian seconded the motion. Commissioners Bogosian, Iversen, Lang, Tessler and Maughan all voted aye and the motion carried.

Action Item: No Action Items

ADJOURNMENT:

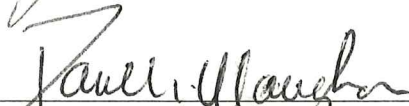
There being no further business, Commissioner Iversen called for the meeting to be adjourned at 1:24pm.




 Jan Iversen President/Commissioner




 Chip Bogosian, MD Secretary/Commissioner



 Paul Maughan, PhD Commissioner



 Warren Tessler Commissioner



 Lynne Lang, PhD, Commissioner

