

February 7, 2024

The Working Board Meeting of the Board of Commissioners for Island Hospital was called to order by Commissioner Bogosian at 12:00 pm on February 7th in the Cypress Room of Island Hospital.

Those present were Commissioners Chip Bogosian, MD, Warren Tessler; Jan Iversen, Lynne Lang, PhD and Paul Maughan, PhD. Also present were Elise Cutter, CEO; Julie Stewart, CFO, Dr. Jason Hogge, CMO, and Kim Graf, Executive Business Manager.

Not Present: Tammy Needham, DNP CCO, Rachel Mank, DO, COS

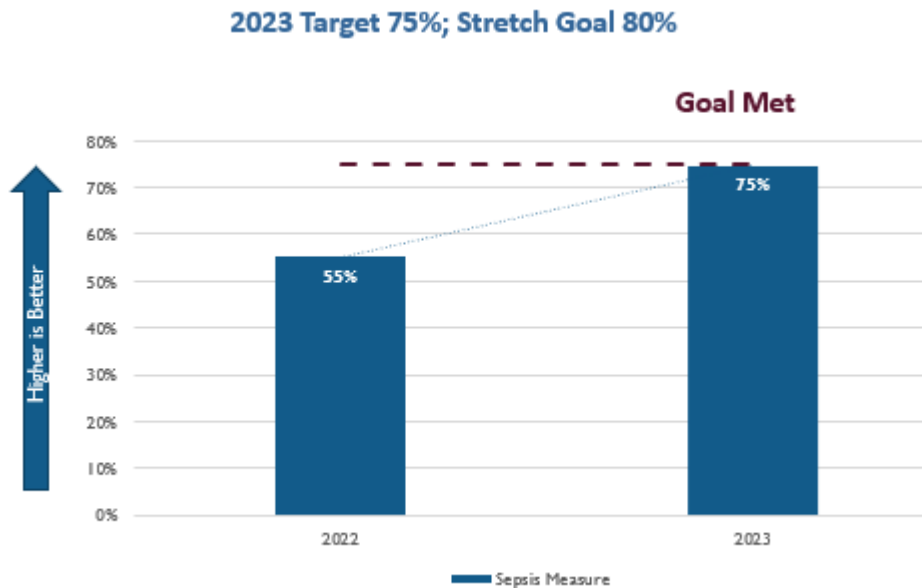
2023 Goal Results Presentation:

The senior leadership team reviewed the results of the 2023 CEO/Organizational Goals which centered around the four organizational focus areas of Clinical Excellence, Service Excellence, People and Sustainability.

Clinical Excellence:

Sepsis 2023 GOAL: Sepsis Measure (SEP-1) to meet 75% or higher compliance to Sepsis bundle for FY 2023 (stretch goal 80%)

Result:



Falls 2023 GOAL: Reduce Falls with Injury (inpatient/outpatient) < or equal to 9.

Result:

Falls Prevention

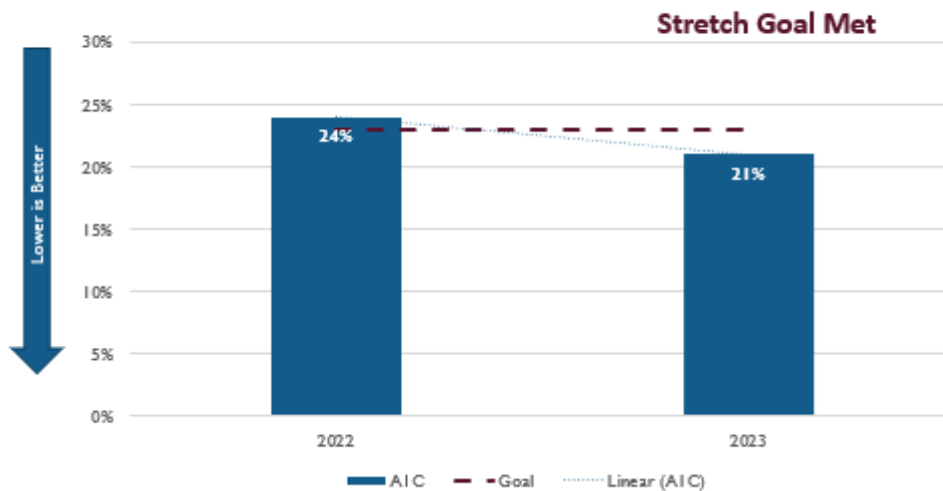
Stretch Goal Met

2022 Final	2023 Target Goal	2023 Stretch Target	2023 YTD
10 falls w/injury	9 falls w/injury	8 falls w/injury	1 fall w/injury

Diabetes 2023 GOAL: Hemoglobin A1c (HbA1c) (CMS-122)
 The percentage of patients aged 18-75 with diabetes who have hemoglobin A1c over 9 is less than or equal to a 5% improvement over FY22 (target 23%; stretch 22%).

Result:

2023 Target Goal HbA1c >9% 23%; Stretch Goal 22%

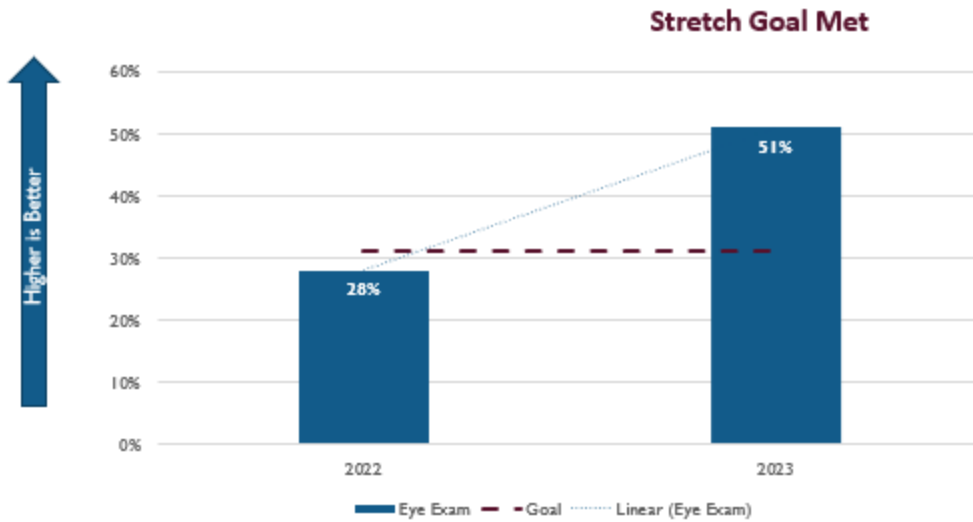


Diabetes 2023 GOAL: Diabetic Retinopathy (CMS-131)

The percentage of patients aged 18-75 with diabetes who are tested for retinopathy is greater than or equal to a 5% improvement over FY22 (target of 31%; stretch 32%).

Result:

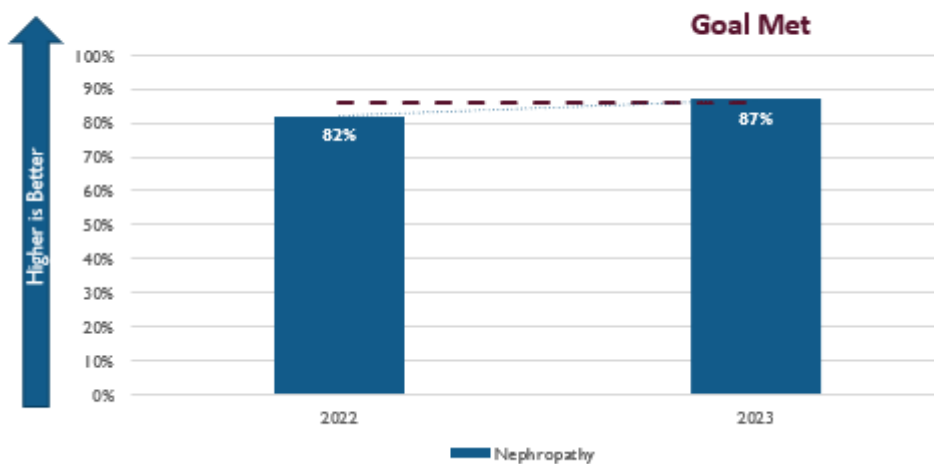
2023 Target Goal 31%; Stretch Goal 32%



Diabetes 2023 GOAL: Medical Attention for Nephropathy (CMS-134)
The percentage of patients aged 18-75 with diabetes receive a nephropathy screening test or documented evidence of nephropathy is a 5% improvement over FY22 (86%)

Result:

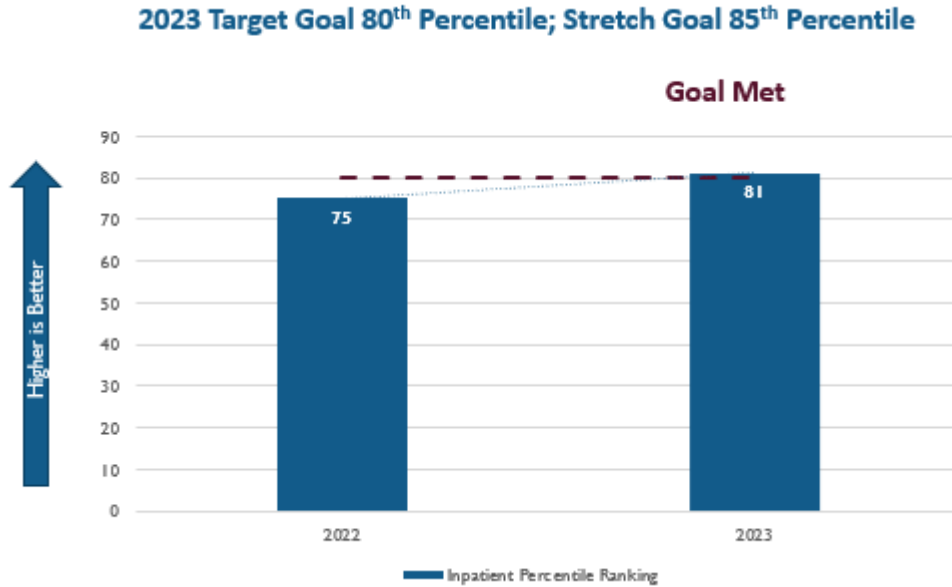
2023 Target Goal 86%; Stretch Goal 88%



Focus Area: Service Excellence

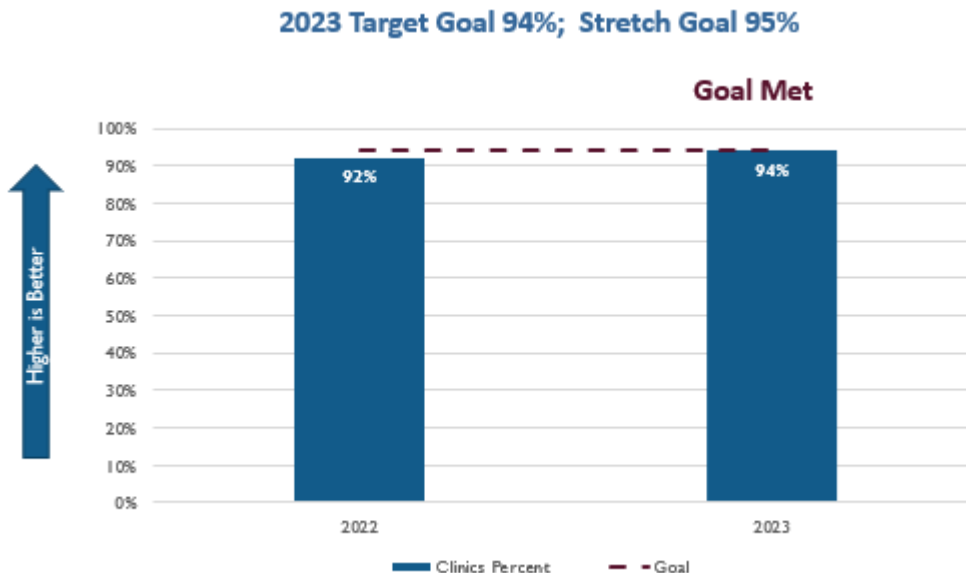
Result:

2023 GOAL: Achieve an annual or quarterly average of HCAHPS Inpatient “Overall Recommend This Hospital” on inpatient satisfactions scores greater or equal to the 80th percentile.



2023 GOAL: Achieve an annual average of “Overall Willingness to Recommend” on satisfaction scores greater than or equal 94% for outpatient clinics. (stretch 95%)

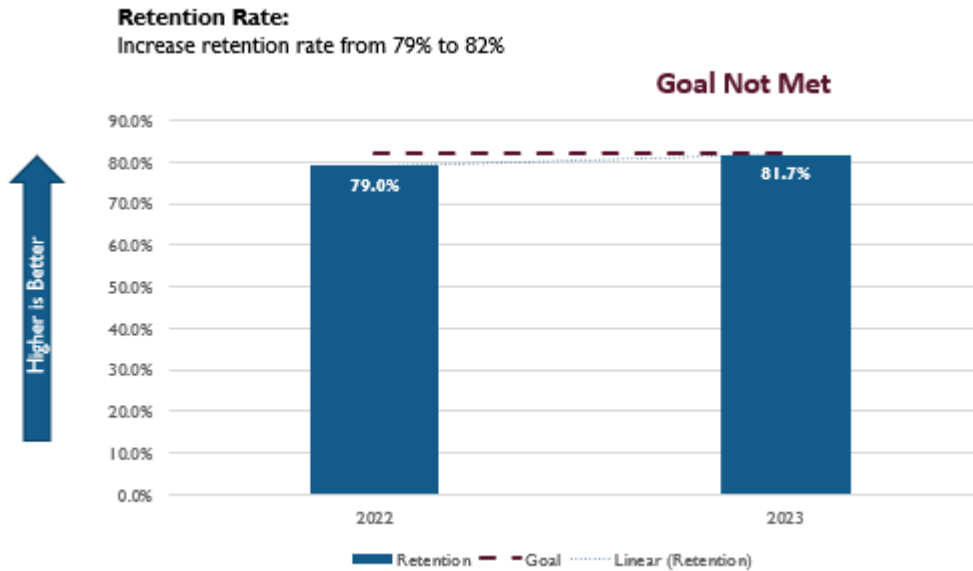
Result:



Focus Area: People

2023 GOAL: Increase retention rate from 79% to 82%

Result:



Focus Area: Sustainability

2023 GOAL: Ensure the Net Operating Margin meets or exceeds (\$2 million)

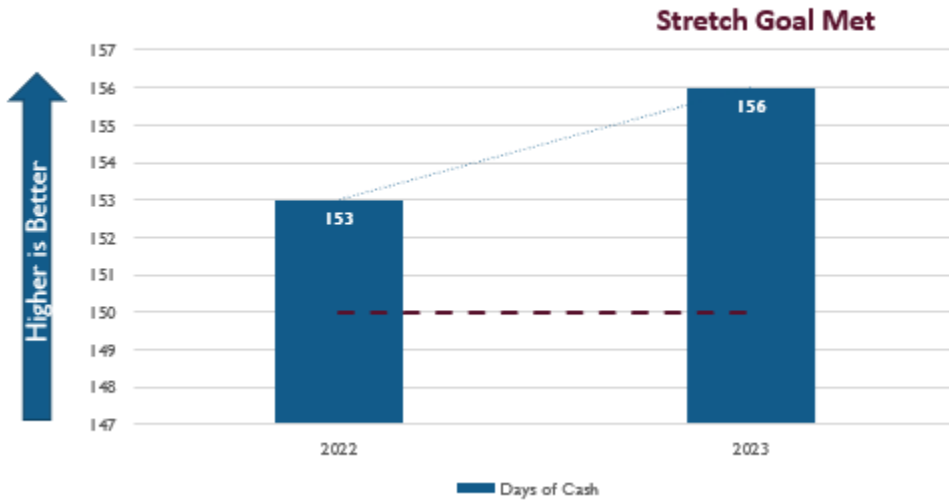
Result:



GOAL: Keep total days of cash on hand higher than 150 days with a stretch goal of 153 days.

Result:

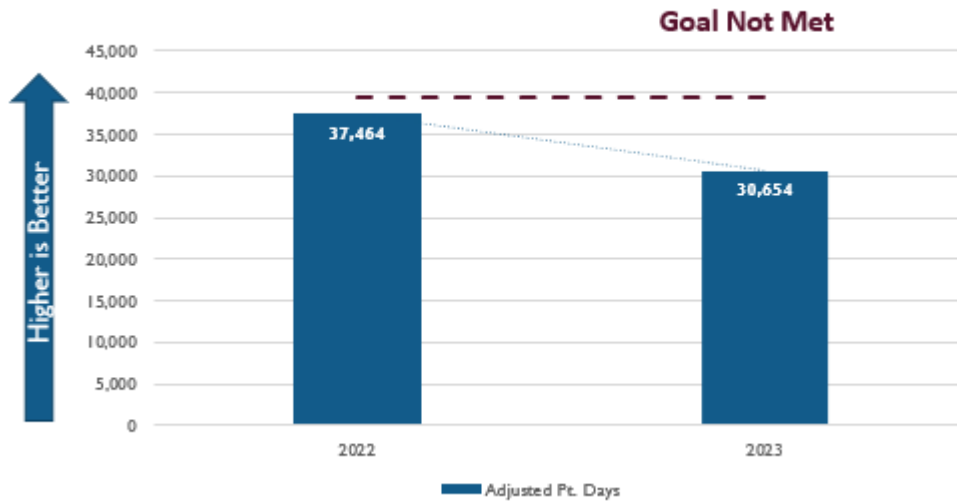
2023 Target 150 days; Stretch Goal 153 days



2023 GOAL: Increase Adjusted patient days by 5% over 2022 with a stretch goal of 7%.

Result:

2023 Target 39,337 days; Stretch Goal 40,086 days



	Organizational Quality Goals 2023				Approved by Board VI123		Final Results	
Focus Area	FY23 Goal	Measure Direction	Target	Stretch Target	2022 FINAL YTD	Rating	2023 Final	Met Target Met Stretch Not Met
Clinical Excellence	Sepsis Measure (SEP-1) to meet 75% or higher compliance to Sepsis bundle for FY 2023	Higher is Better	75%	80%	55%	8.3%	75%	Met Target
	Reduce Falls: Patient Falls with injury (inpatient/outpatient) < or equal to 9.	Lower is Better	9	8	10 falls w/injury: 9 minor harm, 1 major harm	8.3%	1	Met Stretch
	Diabetes: Implement quality vantage for three (3) Diabetes eCOM as measured by: * Hemoglobin A1c (HbA1c) (CMS-122) The percentage of patients aged 18-75 with diabetes who have hemoglobin A1c over 9% is less than or equal to a 5% improvement over FY22.	Lower is Better	23%	22%	24%	2.8%	21%	Met Stretch
	* Diabetic Retinopathy (CMS-131) The percentage of patients aged 18-75 with diabetes who are tested for retinopathy is greater than or equal to a 5% improvement over FY22. * Medical Attention for Nephropathy (CMS-134) The percentage of patients aged 18-75 with diabetes receive a nephropathy screening test or documented evidence of nephropathy is a 5% improvement over FY22.	Higher is Better	31%	32%	28%	2.8%	51%	Met Stretch
Service Excellence	HCAHPS Inpatient Overall Recommend This Hospital Achieve an annual or quarterly average of HCAHPS Inpatient "Overall Recommend This Hospital" on inpatient satisfaction scores greater than or equal to the 80th percentile. (All PG Database)	Higher is Better	80th	85th	75% Percentile based on Small PG Database	12.5%	81st	Met Target
	Outpatient Clinic Overall Willingness to Recommend Achieve an annual average of "Overall Willingness to Recommend" on satisfaction scores greater than or equal 94%.	Higher is Better	94%	95%	92%	12.5%	94%	Met Target
People	Retention Rate: Increase retention rate from 79% to 82%	Higher is Better	82.0%	84.0%	79%	25.0%	81.7%	Not Met
Sustainability	Financial Ensure the Net Operating Margin meets or exceeds (\$2 million)	Higher is Better	(\$2,000,000)	(\$1,900,000)	(\$12,475,157)	6.3%	\$ (6,361,299)	Not Met
	Days of Cash Keep total days of cash on hand higher than 150 days Growth Increase Adjusted patient days by 5% over 2022	Higher is Better	150	153	153	6.3%	156	Met Stretch
		Higher is Better	39,337	40,086	37,464	12.5%	30,654	Not Met

Elise reviewed the 2023 Statistics highlighting the following:

2023 Statistics

Individuals Served: 43,115

Emergency (ED) Visits: 17,972

Walk-In Clinic Visits: 11,208

Babies Delivered: 455

Inpatient Surgeries: 883

Outpatient Surgeries: 3,992

Health Education Events: 67

Diabetes Screening A1C: 6,549

Mammograms: 4,461

Medicare Wellness Visits: 2,109

Well-child Checks: 4,652

Vaccines (ages 0-18): 7,842

ADJOURNMENT:

There being no further business, Commissioner Bogosian called for the meeting to be adjourned at 12:50pm.