

May 8, 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 May 8th 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, Kim Graf, Executive Business Manager and Courtney Nolasco, Administrative Specialist.

Not Present: Rachel Mank, DO, COS

## Introduction

Dr. Hogge was pleased to introduce Elizabeth Waring, MD. Elizabeth recently joined the Island 24<sup>th</sup> Street Primary Care Clinic as an OB/GYN. Elizabeth expanded on her personal and professional experience. All in attendance welcomed Elizabeth to Island Health Medical Staff.

## 2024 Goal Quarter 1 Presentation:

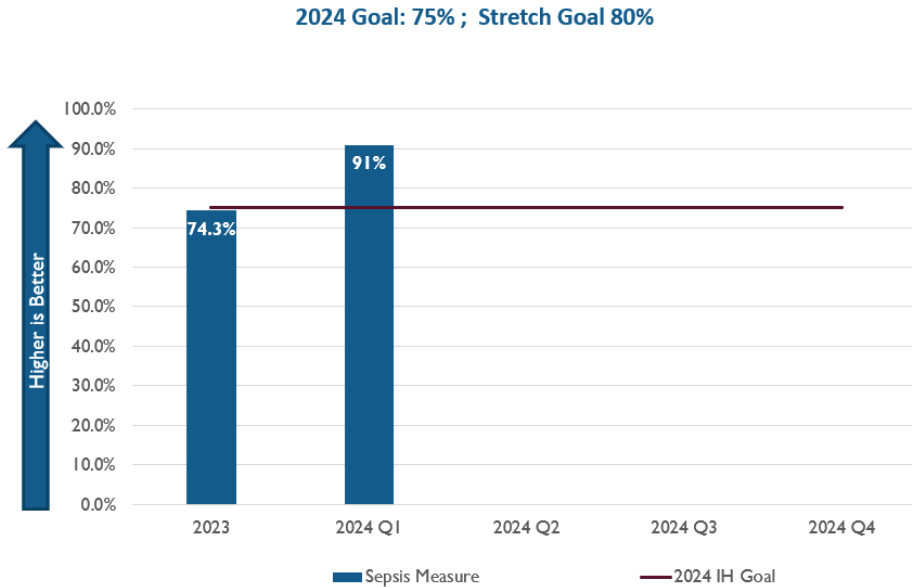
The senior leadership team reviewed the results of the 2024 Q1 CEO/Organizational Goals which centered around the four organizational focus areas of Clinical Excellence, Service Excellence, People and Sustainability.

Focus Area	FY24 Goal	Measure Direction	Target	Stretch Target	PRIOR YEAR
Clinical Excellence	Sepsis Measure (SEP-1) to meet 75% or higher compliance to Sepsis bundle for FY 2024	Higher is Better	75%	80%	YTD 2023: Oct 74%, cum- DNM
	Mammography Increase the % of women 50-74 who have had a mammogram to screen for breast cancer in the 27 months to 67%.	Higher is Better	67%	68%	YTD 2023: 65%
	Diabetes: Implement quality vantage Diabetes eQDM 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 12%	Lower is Better	12%	10%	YTD 12%
* Diabetic Retinopathy (CMS-131) The percentage of patients aged 18-75 with diabetes who are tested for retinopathy is greater than or equal to 50%	Higher is Better	50%	52%	End of October: 47%	
Service Excellence	HCAHPS Inpatient Overall Recommend This Hospital Achieve an annual average of HCAHPS Inpatient "Overall Recommend This Hospital" on inpatient satisfaction scores greater than or equal to 79%.	Higher is Better	79%	80%	YTD Nov 78%
	Outpatient Clinic Overall Willingness to Recommend Achieve an annual average of "Overall Willingness to Recommend" on satisfaction scores greater than or equal 95%.	Higher is Better	95%	96%	94.0%
People	Employee Engagement Score: Increase employee engagement score from 3.84 to 3.95	Higher is Better	3.95	4.03	3.84
	Medical Staff Engagement Score: Increase employee engagement score from 3.65 to 3.70	Higher is Better	3.70	3.75	3.65
Sustainability	Financial Ensure the Net Operating Margin meets or exceeds \$500,000	Higher is Better	\$500,000	\$750,000	Unaudited 2023 = (\$5,000,000)
	Days of Cash Keep total days of cash on hand higher than 150 days	Higher is Better	150	153	YTD Oct 2023 = 154
	Growth Increase Adjusted patient days to 31,411 in 2024	Higher is Better	31,411	35,378	YTD Nov 2023 = 27,897

## Clinical Excellence:

**2024 GOAL: Sepsis Measure (SEP-1) to meet 75% or higher compliance to Sepsis bundle for FY 2024 (stretch goal 80%)**

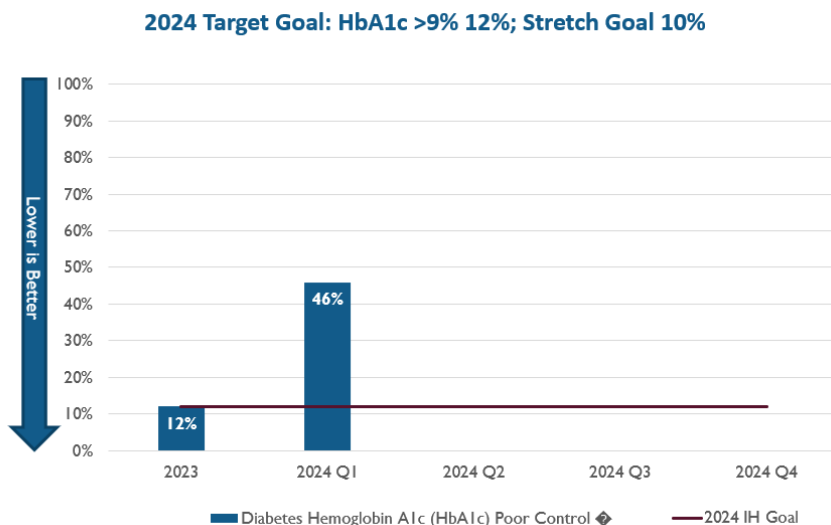
**Result:**



**DIABETES: Implement improvements to manage Diabetes for outpatients.**

**2024 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 12% with a stretch goal of 10%.**

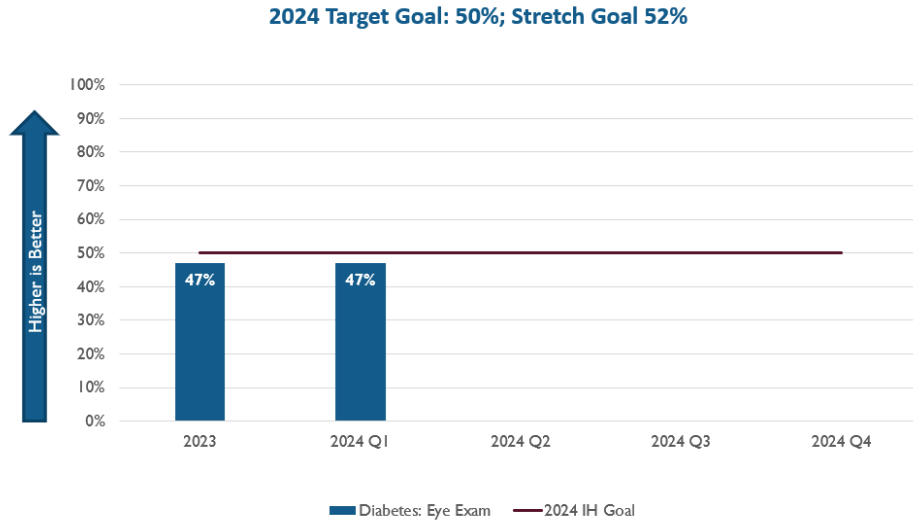
**Result:**



**2024 GOAL: Diabetic Retinopathy (CMS-131)**

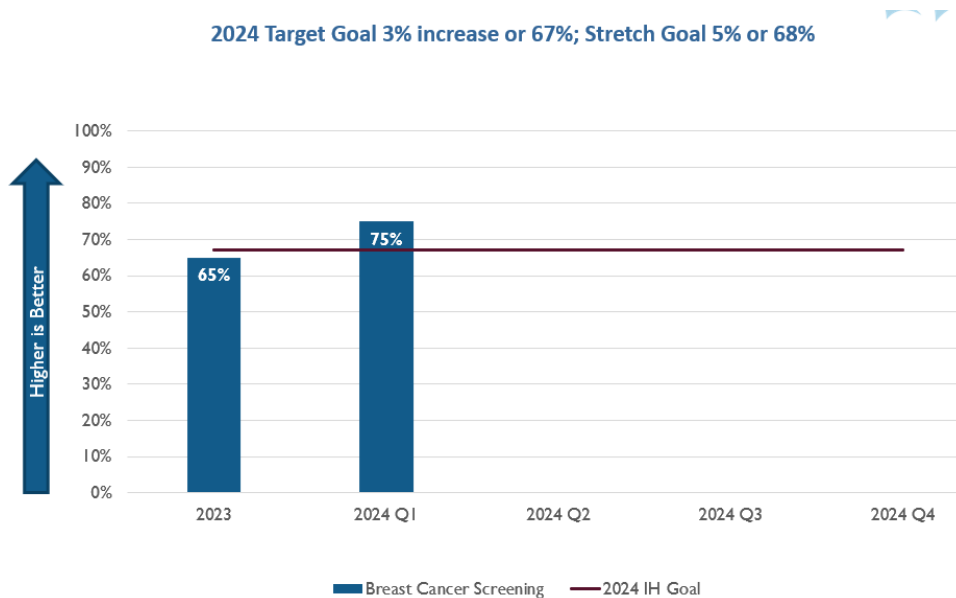
The percentage of patients aged 18-75 with diabetes who are tested for retinopathy is greater than or equal to a 50% with a stretch goal of 52%

**Result:**



**2024 GOAL: Increase the % of women 50-74 who have had a mammogram to screen for breast cancer in the 27 months prior to 67% with a stretch goal of 68%.**

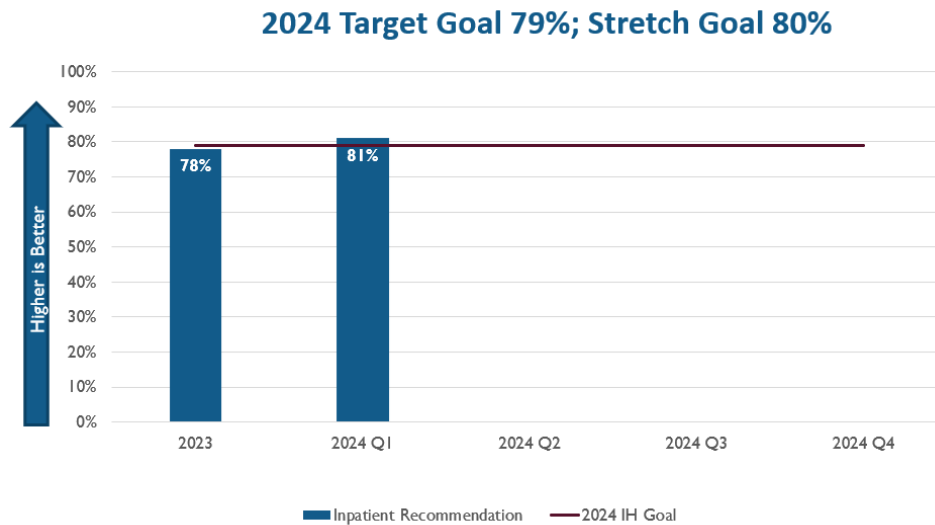
**Result:**



## Focus Area: Service Excellence

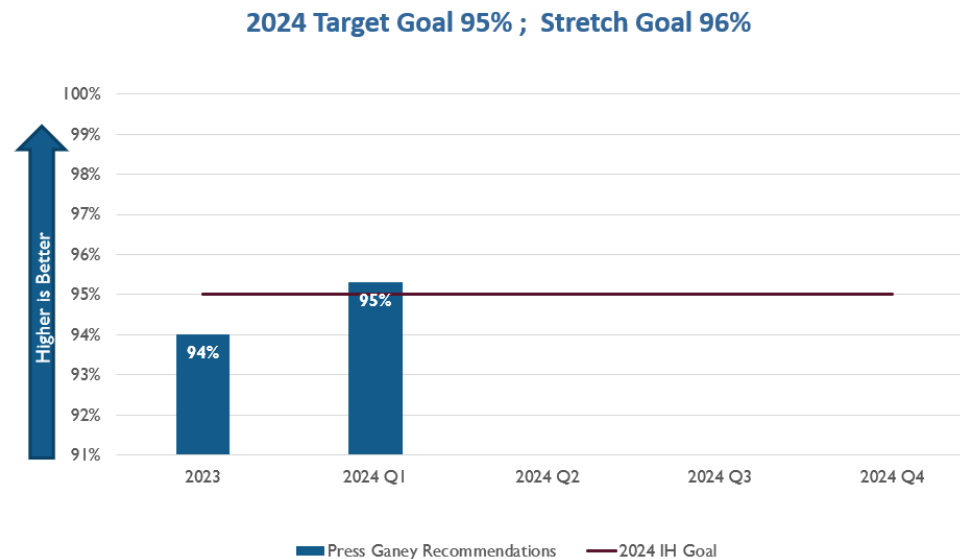
### Result:

**2024 GOAL:** Achieve an annual or quarterly average of HCAHPS Inpatient “Overall Recommend This Hospital” on inpatient satisfactions scores greater or equal to the 79% with a stretch goal of 80%.



**2024 GOAL:** Achieve an annual average of “Overall Willingness to Recommend” on satisfaction scores greater than or equal 95% for outpatient clinics (stretch 96%)

### Result:



## Focus Area: People

**2024 GOAL: Increase Employee Engagement score from 3.84 to 3.95 and a stretch goal of 4.03.**

**Result:**

### Island Health 2023 Engagement Survey Results Snapshot



#### Focus Areas:

Opportunity – Island Health	Domain
1. Focus on Quality/Patient Safety	Organization
2. Communication between departments/levels	Organization
3. Pay and Job Stress	Organization

**2024 GOAL: Increase Medical Staff Engagement score from 3.65 to 3.70 and a stretch goal of 3.75.**

**\*Request we defer to 2025**

## Focus Area: Sustainability

**2024 GOAL: Ensure the Net Operating Margin meets or exceeds \$500,000 with a stretch goal of \$750,000.**

**Result:**



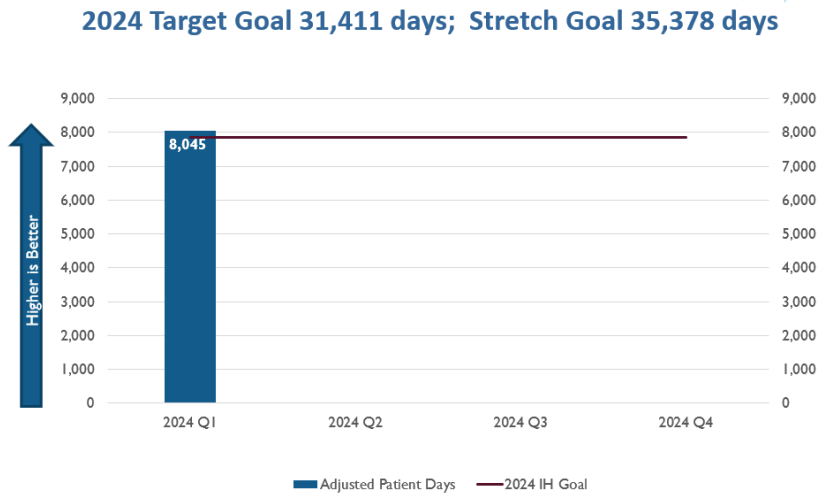
**GOAL: Keep total days of cash on hand higher than 150 days with a stretch goal of 153 days.**

**Result:**



**2024 GOAL: Increase Adjusted patient days to 31,411 with a stretch goal of 35,378.**

**Result:**



Commissioner Iversen remarked on the accessibility of the progress of the goals.

**Action items:** Revise medical staff engagement and employee engagement to bi-annual goals. 2024 Goal will be Employee Engagement.

**ADJOURNMENT:**

There being no further business, Commissioner Bogosian called for the meeting to be adjourned at 1:03pm.