

Cascade Medical Center Board Minutes

July 21st, 2021

CMC Conference Room/Zoom

12:00 pm – 2:30 pm

Trustees present in person: George Greenfield, Jacque Zemlicka, Mary Tracey, Lesa Becker, and David Croshaw

Trustees attending remotely via Zoom: Rachel Smith and David Gough

Members absent and excused: none

Others present: Tom Reinhardt, David Donnahoo, Teri Coombs

Call to Order: Meeting called to order by George Greenfield at 12:00PM.

Mission Moment: Dr. Gough shared a letter regarding care patients received at CMC. Over the holiday weekend, the wife and husband were seen at different times in the Emergency Department. The husband wrote to say that from the moment they arrived all of the employees who took care of them were caring, compassionate, and thorough. Dr. Gough noted that the patients are very knowledgeable about health care and were very complementary about every aspect of the care and culture they experienced at CMC.

Approval of Agenda: A motion to approve the agenda as posted was made by Lesa Becker, seconded by David Croshaw; all members were in favor, motion passes.

BOT Minutes:

The minutes from the June 16th, 2021 Board Meeting were reviewed, there was a spelling error on page 4 to be corrected, “compete” to “complete”. A motion to approve the minutes with the change as noted was made by Jacque Zemlicka, seconded by Lesa Becker; all members were in favor, motion passes.

Operations Report:

Medical Staff Minutes:

Teri provided an update of the Medical Staff minutes for the month of July, which included the Pharmacy and Therapeutics Report, Utilization Review, diabetic management in the clinic, an update on the internal peer review process, the CEO report, walk-in clinic, improving vaccination rates and the Infection Control Committee report.

The Utilization Review and Volume Trends for the month of June 2021 were as follows:

UTILIZATION REVIEW:

- Total ER Visits: 165 (159 June 2020)
- Total OP Visits: 17 (18 June 2020)
- Total Physical Therapy Visits: 392 (273 June 2020)
- Total Clinic Visits: 517 (445 June 2020)
 - Dr. Ellsworth: 86
 - David Hill: 74
 - Dr. Camarata: 89
 - Heather Lewis: 87

Dr. Dardis: 18
 Courtney Hill: 76
 Allison Dwyer: 36
 Jamie Coffey-Kelly: 51

- Total Laboratory Visits: 364 (357 June 2020)
- Total Radiology Visits: 121 XR's, 50 CT's and 11 US's (131 XR's, 60 CT's, 17 US's June 2020)
 - Death – one, end of life CHF patient
 - Blood Transfusions – none
 - Average Length of Stay for Inpatients – there was one inpatient in the month of June, ALOS 90 hours (three observation patients)
 - Leaving Against Medical Advice – none
 - Left Without Being Seen – none

PEER REVIEW:

For the second quarter, six charts were sent to the IHA for Peer Review as part of CMC's Ongoing Professional Practice Evaluation program (OPPE).

EMERGENCY DEPARTMENT CALL BACKS:

139 patients called / 3 missed = 97.8% success rate

TRANSFERS:

All transfers were noted to be of appropriate mode. The following reasons were cited for services and/or equipment needed at CMC to keep patient here:

	<i>Transfers</i>		<i>Mode</i>
Surgery	3	Rotor	1
ENT		Fixed Wing	
Neurology		Ambulance	5
CCU	1	Private Vehicle	1
ICU	2	Ambulance Rendezvous	
Obstetric		Contracted Psych	2
PICU			
Psych	3		

INPATIENT CARE PLANS:

The one inpatient chart in the month of June contained a complete Care Plan.

Financial Report and Volume Trends:

David reviewed the Income Statement for the period ending June 30th, 2021. He noted that June was a strong month overall. He noted that CMC is ahead of budget and total operating expenses were under budget. The Operating Margin was slightly negative. Final CARES Act money expired on June 30th. He noted that the Net Income Margin was 9.1%.

David updated the Board regarding the CARES Act Provider Relief Funds Update. He noted that CMC is expecting to return \$594,291 of the CARES Act Provider Relief funds back to HRSA as unspent.

FY22 Budget

David presented the fiscal year 2022 budget proposal to the board. He discussed some of the methodology behind how the budget was developed. The proposed budget includes Net Income (Cash Basis) of \$433,455 less \$177,000 in planned Equipment/Improvements, for a Cash Flow provided of \$256,445 for the year.

Mary moved the proposed budget be approved for publication in a public notice. The motion was seconded by Jacque. The motion to publish the budget was approved by unanimous vote.

CEO Report, Old & New Business:

CEO Update:

Tom shared a comparison of established patient ED visits compared to non-established patient ED visits.

Tom shared the results of the Emergency Preparedness Survey for June. CMC corrective action includes:

- A system to track staff and patients in case of evacuation or Shelter in Place
- A protocol for Shelter in Place
- The process for requesting an 1135 waiver, and for declaring CMC's role in a 1135 blanket waiver emergency
- Emergency Preparedness training for all staff
- Changes to the testing of the Generator

Tom shared the results of the Fire Life Safety Survey for June. CMC corrective action includes:

- Changes to the testing of the Generator
- Adding smoke density sensitivity testing of sprinkler sensors
- Repairing basement sprinkler paint overspray
- Inspecting two fire doors
- Implementing a water management plan (legionella testing plan)
- Repairing the oxygen master alarm bulb at the Nurse's station, installing a pressure gauge sensor inside the hospital, raising the light switch in the oxygen storage room, oxygen training for all staff, and labeling full / in use / empty oxygen cylinders.

Tom shared an update on improving and expanding services.

- We are currently upgrading rooms 3 and 4 to enable Swing bed patients to have improved access to the bathroom as well as painting and redecorating.
- The laboratory has a new refrigerator, the ED has a new tele-robot and we obtained a new autoclave (equipment/supply sterilizer) for the hospital.
- Physical Therapy is going to have new flooring and new equipment
- In September, Physical Therapy will begin seeing patients on Saturdays
- Telewound begins on August 1st with St. Alphonsus
- St. Luke's will be offering a foot clinic at the Senior Center
- The Mammography bus, Mobile Echo, and Cardiology Clinic will continue
- St. Luke's will begin offering an Orthopedic Clinic at CMC (Date TBD)

Tom shared the postcard recently sent to Cascade, Donnelly and Yellow Pine residents.

Tom reviewed current COVID trends including positive results by day and positivity trends by month. He shared a comparison of CMC positivity rates compared to St. Luke's McCall. He noted that Valley County is 59% vaccinated while Cascade is at 41%. He encouraged Board members to communicate with friends and family who are not vaccinated in an attempt to raise vaccination rates.

Tom shared the discussion that Leadership and the Medical Staff had last week regarding whether or not to require the COVID vaccination as a condition of employment. He noted that 75% of the staff is vaccinated. After discussion, the Leadership and Medical Staff decided that CMC will not mandate the COVID vaccine for staff at this time. Rather, we will work harder to encourage and educate staff of the benefits and importance of becoming vaccinated. The Board discussed their opinions regarding mandating the vaccine. It was decided that they will revisit the employee vaccination rate at the September Board meeting.

Regarding the hospital expansion or replacement plan, CMC will need financing for an expansion or replacement. This could entail a USDA Loan, grants, and fund raising. Tom would like to reconvene the Strategic Planning Committee in September once the financial picture is clearer.

Committee Reports:

Finance Committee:

Members:

Mary Tracey, Chairperson
Jacque Zemlicka
David Donnahoo
Tom Reinhardt

The Finance Committee met to review the proposed 2022 Budget, and reviewed a summary of the CARES Act Provider Relief Fund expenditure report.

Quality Assurance, Performance Improvement and Compliance Committee:

Members:

Lesa Becker, Chairperson
Rachel Smith
David Gough
Aline Lee
Tom Reinhardt
Teri Coombs
Sarah Hasbrouck
Dr. Camarata

The Quality Assurance, Performance Improvement and Compliance Committee did not meet in June.

Strategic Planning Committee:

Members:

David Gough
Mary Tracey
David Croshaw
Tom Reinhardt
Jack Knoblock
Karolyn Plehal
Ann Young

The Strategic Planning Committee plans to reconvene in September.

Executive Session:

An Executive Sessions was held during this meeting in accordance with IDAPA 74-206(1)(b) to discuss Personnel. A motion was made by Rachel Smith to enter into an Executive Session to discuss Personnel; David Croshaw seconded the motion. A role call was taken of all members; motion to enter into Executive Session unanimously carries. Members entered into Executive Session to discuss Personnel at 2:13 PM.

The members exited executive session at 2:29 PM. A motion was made by Lesa Becker to exit the Executive Session, all in favor, motion passes. No decisions were made in or following the Executive Session.

Other/Next Steps:

Agenda Topics for Next Meeting:

1. Social media strategy / draft policy for use of social media channels
2. Capital budget
3. CMC position on staff COVID vaccines

Adjournment: A motion to adjourn the meeting was made by Mary Tracey, seconded by Lesa Becker. All members were in favor, motion passes. Meeting adjourned at 2:29 PM.