Cascade Medical Center Board Minutes
August 18th, 2021
CMC Conference Room/Zoom
12:00 pm – 2:30 pm

Trustees present in person: George Greenfield and David Croshaw

Trustees attending remotely via Zoom: Rachel Smith, David Gough, Mary Tracey and Lesa Becker

Members absent and excused: Jacque Zemlicka

Others present: Tom Reinhardt, David Donnahoo, Teri Coombs and Sarah Hasbrouck

Call to Order: Meeting called to order by George Greenfield at 12:05PM.

Mission Moment: Rachel shared feedback she had received from a patient of Dr. Camarata. The patient appreciated that Dr. Camarata offered solution alternatives to medications to address her anxiety in addition to medication, like meditation, even showing her an app that could be utilized on her phone, before proceeding straight to medications as the solution. The patient felt like Dr. Camarata wanted to help her work through her anxiety rather than just medicating it, and for that, she was very appreciative.

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

BOT Minutes:

The minutes from the July 21st, 2021 Board Meeting were reviewed, there was a grammatical error on page 4 to be corrected, “weather” to “whether,” and the term “rate” should be changed to “mandate” in the same paragraph. A motion to approve the minutes with the change as noted was made by Mary Tracey, seconded by George Greenfield; all members were in favor, motion passes.

Public Hearing of the FY22 Budget:

David Donnahoo informed the member of the board that the budget had been posted in the Star News as required. There were no members of the public present in person or on the Zoom link for questions or comments. The motion to approve the FY22 Budget as presented to the public was made by Lesa Becker, seconded by David Croshaw; 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 August, 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, vaccination rates and the Infection Control Committee report.

There was discussion about reportable diseases, specifically the shigella toxin that was diagnosed in a patient that was transferred to a higher level of care. The discussion focused on the great job done by the
providers who had seen the patient and provided very specific return precautions that ultimately created the positive outcome in this case.

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

**UTILIZATION REVIEW:**
- Total ER Visits: 217 (214 July 2020)
- Total OP Visits: 15 (31 July 2020)
- Total Physical Therapy Visits: 446 (338 July 2020)
- Total Clinic Visits: 505 (491 July 2020)
  - Dr. Ellsworth: 113
  - David Hill: 97
  - Dr. Camarata: 72
  - Heather Lewis: 77
  - Dr. Dardis: 18
  - Courtney Hill: 79
  - Allison Dwyer: 23
  - Jamie Coffey-Kelly: 26
- Total Laboratory Visits: 544 (385 July 2020)
- Total Radiology Visits: 136 XR’s, 56 CT’s and 1 US’s (163 XR’s, 87 CT’s, 8 US’s July 2020)
  - Death – two; one cardiac arrest following the fireworks, one cardiac arrest in the ED
  - Blood Transfusions – none
  - Average Length of Stay for Inpatients – there were two inpatients in the month of July,
    ALOS 68.13 hours (two observation patients)
  - Leaving Against Medical Advice – one, walked out during provider assessment due to not
    being prescribed narcotics
  - 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 Provider Evaluation (OPPE). All six charts have been reviewed by outside providers and reported accordingly.

**EMERGENCY DEPARTMENT CALL BACKS:**
180 patients called / 0 missed = 100% 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:

<table>
<thead>
<tr>
<th>Transfers</th>
<th>Mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgery</td>
<td>Rotor</td>
</tr>
<tr>
<td>ENT</td>
<td>Fixed Wing</td>
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<tr>
<td>Neurology</td>
<td>Ambulance</td>
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<tr>
<td>CCU</td>
<td>Private Vehicle</td>
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<tr>
<td>ICU</td>
<td>Ambulance Rendezvous</td>
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<tr>
<td>Obstetric</td>
<td>Contracted Psych</td>
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<tr>
<td>PICU</td>
<td></td>
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<tr>
<td>Psych</td>
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**INPATIENT CARE PLANS:**
The two inpatient charts in the month of July contained a complete Care Plan.
Financial Report and Volume Trends:

David reviewed the Income Statement for the period ending July 31st, 2021. He noted that July was a record setting month for revenue, as visit volumes for the ED, Physical Therapy and Lab rose to all-time highs. He noted that CMC is ahead of budget and total operating expenses were under budget. The Operating Margin is at 16.1%, versus the budgeted 14.1%, with Net Income exceeding budget by over $90k for July. Fiscal YTD Net income is $693k, or $712k favorable to budget, and far ahead of the previous year.

David also presented the Capital Budget Plan draft to 2028.

CEO Report, Old & New Business:

CEO Update:

Tom shared slides providing updates on the various projects including the continued bathroom remodel between patient rooms 3 and 4, Physical Therapy will be receiving upgraded flooring and will remove the old carpet, as it has become a trip hazard.

Tom shared that we have received two separate grants, one to purchase a RetinaVue Scanner for the clinic to assist with Diabetic Eye Exams, as well as a grant to study healthy aging within our community. He also reminded the members of the board about the Foundation Golf Tournament the weekend of August 21st.

Tom presented the new “Use of Social Media in Marketing and Communications” plan. The plan describes the use of social media as both a marketing tool, as well as a way for CMC to provide the public with important health information. The CEO or an alternative representative will review all content prior to posting to ensure it is appropriate and grammatically accurate.

Tom also shared that he has enlisted the assistance of a consultant to review our current payer contracts and provide direction as to potential opportunities for negotiations with the payers. Discussion occurred about the specific consultant, and the need to ensure there are no conflicts of interest.

COVID Infection & Vaccination Rates:

Tom provided slides relating to the current COVID-19 Infection and Vaccination rates for the area. Vaccination rates for the 83611 Zip Code were significantly lower (42.3%) than the other areas of Valley County (61.48%). Tom and Dr. Ellsworth discussed that with the increased number of hospitalized COVID-19 patients statewide has made it more difficult for the providers to transfer patients to other health systems with ICU’s, sometimes having to keep patients longer within our facility until an ICU bed becomes available.

The CMC Employment and COVID Prevention plan was also discussed. CMC is not requiring employees to be vaccinated against COVID-19 at this time. All employees are required to wear masks at all times within the buildings, regardless of vaccination status. Those employees who are not vaccinated will be required to test weekly for COVID-19 at their shift and provide those results to Human Resources. Additionally, any new staff will be required to be vaccinated or submit proper medical or religious exemption forms.
It should be noted that member Mary Tracey is uncomfortable not requiring the vaccines for every employee, and asked for her opinion to be noted within these minutes.

**Medical Staff Bylaws:**

Tom presented a change to the Medical Staff Bylaws relating to the supervision of Physician Assistants and Nurse Practitioners as suggested by our legal counsel to reflect the updated Idaho Board of Medicine requirements relating to Collaborative Oversight. A motion to approve the updated bylaws, as long as our liability carrier is in favor of the new language, was made by Mary Tracey, Rachel Smith seconded this motion; all members were in favor, motion passes.

**Physical Therapy Policies:**

Tom presented the board with the updated Physical Therapy Policies. He noted that the Medical Staff did review and approve these at the Medical Staff Meeting on August 11th.

**Committee Reports:**

**Finance Committee:**

Members:
Mary Tracey, Chairperson
Jacque Zemlicka
David Donnahoo
Tom Reinhardt

The Finance Committee did not meet and does not have anything to 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 meet and provided an update on the discussion about Process Improvement surrounding increased community educational opportunities for vaccine information and questions. They did state that the clinic will offer free visits with providers for anyone with questions or concerns to come and privately meet with their preferred provider. The committee also asked for additional ideas on how to best provide education to the communities.

One ask that resulted from this discussion was to begin a QAPI project on PPE Compliance, proper use and disposal, as well as preservation of resources.
Strategic Planning Committee:

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

The Strategic Planning Committee did not meet and has nothing to report other than it will be meeting again in September.

Executive Session:

An Executive Session was not held during the August 18th Board of Trustees Meeting.

Other/Next Steps:

Agenda Topics for Next Meeting:
1. COVID Vaccine Mandate for Employees
2. Compliance to Safety Measures
3. Letter to the Editor for Star News Publication from the members of the BOT.

Adjournment: A motion to adjourn the meeting was made by David Gough, seconded by Lesa Becker. All members were in favor, motion passes. Meeting adjourned at 2:46 PM.