

Willapa Harbor Hospital
Minutes of the Governing Board
March 23, 2021

Board Members Present: Gary Schwiesow, Dave Vetter, Kathy Spoor, Jeffrey Nevitt and Toni Williams

Board Members Absent:

Others Present: Matthew Kempton, CEO, Scot Attridge, CFO, Chelsea MacIntyre, CNO, Renee Clements, COO and Paula Lorenz, minute's secretary.

Others Absent:

I. Call to Order:

The meeting was called to order at 5:32pm

Toni Williams made a motion to approve the February 23, 2021 regular meeting minutes as written. Jeffrey Nevitt 2nd, motion carried.

Agenda: No additions

Executive Session: There will be an executive session held to discuss facility issues that is expected to take approximately 25 minutes.

Audience: None

II. Consent Agenda

Kathy Spoor made a motion to approve the consent agenda. Toni Williams 2nd, motion carried.

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|----------------------|----------|--------------|
| Vouchers/Warrants: | February | \$864,690.23 |
| Payroll/Payable: | February | \$652,223.58 |
| Write-offs: Bad Debt | February | \$ 95,792.54 |

III. Reports and Presentations:

Administration – Matthew Kempton, CEO

- Wins
 - We have hired a full-time Director of Pharmacy, Jae Kim. He has been our interim Pharmacist, has over 20 years of experience, and is excited to be part of the Willapa Harbor Hospital team.
- Follow Up Items
 - The new payroll implementation has been challenging, but significant progress has been made.
- Medical Staff Report
 - The medical staff have no concerns at this time. They are looking forward to the implementation of the 3D Mammography scans for their patients. Working to develop protocols for hand-off of patients between ER providers and the

hospitalists. Dr. Hill has reached out to the CNO to review the current disaster plan and see if he sees any areas that he feels need updating.

Patient Quality of Care – Chelsea MacIntyre, CNO

- Projects
 - COVID testing volumes are low and our positivity rate has been extremely low. We may reduce our testing to two days per week.
- Case Management
 - Working with DOH to relaunch our swing bed program
- COVID vaccines
 - We held our first onsite vaccine clinic last Friday and administered 109 vaccines. We are trying to schedule another 130 patients for the vaccine clinic this Friday.
 - This has been great public outreach and brought back patients that may not have returned otherwise.
- Education
 - We are educating nursing on ultrasound bladder scan for a machine that we may be able to get with a grant instead of purchasing under budgeted capital
- Wins
 - March endoscopy procedures are on par with pre-COVID records.

Financial – Scot Attridge, CFO, February 2021 Financial Statements

- Gave a financial presentation to the board.
- See Financials attached
- Gave an update on the CaresAct repayment status and PPP loan forgiveness status.

Operations – Renee Clements, COO

- Willapa Medical Clinic
 - Volumes are maintaining, there were providers out again in March
 - New ARNP for the weekend clinic started March 13th, great feedback
 - Working on filling positions in both weekend and week day clinics
 - Working on new process improvements for rooming patients and to increase CAHPS scores.
 - Working to increase clinic visit and to increase ancillary visits in the hospital from clinic patients.
- Lab
 - Sandra Montgomery, Interim Lab Manager has accepted employment as our permanent Lab Manager.
- Radiology
 - 3D Mammography was installed March 15th, the physicist was onsite the next day to calibrate and sign off on the equipment. There was an unforeseen issue with the current PACS system and they do not work together. Am working with FUJI to correct the issue until the old/current PACS system is replaced. Currently offering only 2D mammography to our patients.
 - We have had shortages in our Ultrasound coverage, Baylee Laymen has agreed to work part time for us and is cross training in echo.

- Quality/Risk
 - High-risk areas is Restraint Utilization, monitoring and documentation. We are working on new processes and policies.
- Alder House
 - The condition of license was removed, the 60-day closure notification was given to the DOH, DSHS, residents and staff. Relocation is going well for the residents. Some staff were offered positions at other organizations.

IV. New Business

- PACS Replacement Proposal
 - At previous Board meetings, we discussed the need to replace the old PACS system that is end of life and almost out of storage. We budgeted \$275,000 in this year's capital budget to replace it. We received proposals from three vendors; Fuji, Canopy Partners and Evident. We have reviewed all of the functions, costs, storage, etc. Cloud recovery is a requirement for disaster recovery. The executive team and Radiology Manager recommend that we purchase Fuji PACS. The service and maintenance are less than our current service and maintenance costs, total capital cost would be \$60,738, much lower than the budgeted amount.
Kathy Spoor made a motion to approve the proposal of capital purchase from Fuji to replace the current PACS system. Dave Vetter 2nd, motion carried.
- Mobile Compounding Lab

Several months ago, we approved a resolution for capital funding that included the mobile compounding lab. We have made a down payment with a schedule to build a modular building and install it onsite by February of this year. L&I has not approved the project so the build has not even started. Site prep fees have increased by more than \$58,000, not including electrical. We have been looking at options to build something to bring us up to USP 797 and USP 800 code. The company we are looking at first is able to use a room within the hospital to make it compliant. We have contacted the modular building company to find out how to cancel the agreement. We have also worked with our attorneys to see if we can cancel the agreement, as there is no cancellation cause. The company has offered to cancel the agreement with the stipulation that they keep the charges for work they have completed as well as the amount that they would have gained which is a total of \$420,000. If we go to the internal build out we would save a total of approximately \$300,000, even if this modular company after contract cancellation keeps this \$420,000.

Follow Up: The Board asked Matt to have the potential new vendor come onsite to inspect the identified room in the hospital to ensure that the quoted work will bring us up to code and will meet DOH requirements. Also to confirm that if the work to be done in the identified room within the building will be grandfathered in codes or if it will require us to bring the building up to code. Then we will hold a special meeting to make a decision on whether to cancel the current contract. Proposals to build the compounding lab inside the hospital will be reviewed at the April Board meeting.

V. Continued Business

➤ Facility Master Plan (FMP)

- There is a heightened need to have a facility master plan now due to the coming closure of the Alder House. The hospital owns the land and the Alder House Board owns the building. We need to determine if we need the land or building in the near future or to replace the facility in the near future. There is a new proposal from the FMP company which is based on an hourly rate that is not to exceed and may be lower. Total maximum cost would be \$52,000 and will be done by end of August.

Kathy Spoor made a motion to move forward with the contract with Healthcare Collaborative Group for the development of a facility master plan, not to exceed \$52,000. Jeff Nevitt 2nd, motion carried.

VI. Appointments/Reappointments

➤ Appointments:

- None

➤ Reappointments:

- None

VII. Adjournment: The meeting was adjourned at 7:27pm to Executive Session to discuss personnel issues. It was expected to take 25 minutes. Executive Session opened at 7:28pm. After some discussion, the Executive Session was closed at 7:53pm and returned to regular session. With no further business, the meeting was adjourned at 7:54pm.

Submitted:

Kathy Spoor, Secretary to the Board