

**ALLIANCE GOVERNANCE BOARD****MINUTES****Wednesday, June 7, 2017****AGB CALL TO ORDER**

The Alliance Governance Board (“**AGB**”) meeting was called to order by Tony Balk at 3:00 pm in the Godard Room at EvergreenHealth Monroe (“**EHM**”). Present at the meeting were the following Directors and staff: Tony Balk, Chair and SCPHD#1 Commissioner; Steve Matuschak, SCPHD#1 Commissioner; Al DeYoung, KCPHD#2 Commissioner; Jeanette Greenfield, KCPHD#2 Commissioner; Bob Malte, EH CEO; Renee Jensen, Sr. VP and EHM CAO, Scott Olander, EHM CFO; Wendy Kesl, EHM CNO; Lisa LaPlante, EHM CQO; Jack Handley, MD, EHM CMO; John Patz, DO, Medical Staff President, Tina Mycroft, EH SVP & CFO; and Kris Burnham, EHM Executive Assistant. Guests included Shelly Simpson, RN, EHM Infection Control and Prevention, Connie Wittren, Director EHM Foundation, Kae Peterson, VP and Executive Director EH Foundation, Trisha West, EH Director Strategic Planning, Dr. Matt Sisk, Chief of Staff Elect, and Dr. Midori, Larrabee, Medical Director. James S. Fitzgerald, EH District General Counsel, was excused.

**PUBLIC COMMENT**

No one from the public wished to comment.

**INFECTION CONTROL ANNUAL REPORT**

Ms. Simpson presented the Infection Control Annual Report reporting on accomplishments for 2016 and the plan for 2017, which were based on the Annual Risk Assessment.

Statistics for the reportable diseases for 2016 were reviewed. Influenza was high at 150 cases, which included 2 deaths. Hand Hygiene compliance at year end for 2016 was 90.76% compliance. The goal is 93%. There was discussion with the Commissioners on why the goal is not 100%. It was asked that Ms. Simpson take the request for the goal of 100% to the Hand Hygiene Committee that meets monthly to ask for the change. Hand Hygiene is a focus for improvement in 2017, in addition to isolation protocol. Other key items noted:

- Improving Antimicrobial Stewardship for 2017 is being led by Kathy Arnold, EHM Pharmacy Manager.
- Flu vaccinations for employees 2016-2017 were reported at a 98% compliance rate. Missing staff were per diem or in process of termination. Providers flu vaccination rate was 71%. Ms. Simpson is working on getting better information to this medical staff. For 2017, masks will be required to worn by any employee or provider that did not receive a flu vaccine.

**EXECUTIVE SESSION**

At 3:21 pm Commissioner Balk announced the Board would proceed into an Executive Session as permitted by RCW 42.30.110 and 70.44.062 to consider and discuss litigation, personnel, property, quality improvement committee matters, and/or medical staff privileges. The Executive Session was scheduled for 5 minutes. Attendees of the Executive Session were: Tony Balk, Steve Matuschak, Al DeYoung, Jeanette Greenfield, Bob Malte, Renee Jensen, Tina Mycroft, Scott Olander, Wendy Kesl, Lisa LaPlante, Jack Handley MD, John Patz, DO, and Kris Burnham.

At 3:26 pm, the Executive Session concluded and the public meeting resumed.

**PUBLIC COMMENT**

No one from the public wished to comment.

**ACTION ITEMS**

**Medical Staff Credentialing Report**

Dr. Patz presented the May Credentialing Report in Executive Session. Dr. Patz indicated there are no other concerns and recommends approval of the Credentialing files. The following providers were recommended for approval:

**INITIAL APPOINTMENTS/PROVISIONAL**

APPLICANT	PRIVILEGES	MEMBERSHIP	COMMENTS	ACTION
Maidan, Ruben R., MD	Cardiology	Provisional/ Courtesy		

**PROVISIONAL ADVANCEMENTS**

APPLICANT	PRIVILEGES	MEMBERSHIP	COMMENTS	ACTION
Dorney, Michael E., MD	Internal Medicine	Provisional/ Active		

**REAPPOINTMENTS ADVANCEMENTS**

APPLICANT	PRIVILEGES	MEMBERSHIP	COMMENTS	ACTION
Bell, James E., MD	Diagnostic Radiology	Courtesy		
Boone, Christopher R., MD	Orthopedic Surgery	Active		
Brown, Alan B., MD	Orthopedic Surgery	Courtesy		
Fu, Aaron Y., MD	Diagnostic Radiology	Courtesy		
Holm, Michelle J., MD	Emergency Medicine	Active		
Koenig, Marc G., MD	Diagnostic Radiology	Courtesy		
Lin, Kenneth C., MD	Orthopedic Surgery	Courtesy		
Merickel, Charles R., MD	Anatomic & Clinical Pathology	Courtesy		
Millan, Juan A., MD	Diagnostic Radiology	Courtesy		
Shaw, Hillary L., MD	Diagnostic Radiology	Courtesy		



APPLICANT	PRIVILEGES	MEMBERSHIP	COMMENTS	ACTION
Siegal, Justin A., MD	Diagnostic Radiology	Courtesy		
Stefanec, Milan, MD	Anesthesiology	Active		
Wade, Timothy V., MD	Anatomic & Clinical Pathology	Courtesy		
Watson, Ashley E., MD	Anatomic & Clinical Pathology	Courtesy		

## OTHER

APPLICANT	PRIVILEGES	MEMBERSHIP	COMMENTS	ACTION
Gordon, Michelle L., MD	Internal Medicine			

## RESIGNATIONS

APPLICANT	PRIVILEGES	MEMBERSHIP	COMMENTS	ACTION
Hagan, Scott L., MD	Internal Medicine			

Commissioner Balk called for a motion for approval.

**Motion:** Commissioner DeYoung moved to approve the May Medical Staff Credentialing Report as presented and to approve the New Appointments, Reappointments, Status Changes, and Privileges pertaining to the EvergreenHealth Monroe Medical Center Medical Staff and AHPs, as stated above. Commissioner Greenfield seconded the motion. **Motion carried unanimously.**

## Consent Agenda

Commissioner Balk presented the Consent Agenda which included the May 3, 2017, AGB Minutes and the April A/P and Payroll Voucher Summary.

There being no questions regarding Consent Agenda, Commissioner Balk called for a motion to approve it as presented.

**Motion:** Commissioner Greenfield moved to approve the May 3, 2017, AGB Minutes and the April A/P and Payroll Voucher Summary as presented. Commissioner Matuschak seconded the motion. **Motion carried unanimously.**

## REPORTS & DISCUSSION

### April 2017 Financial Review

Mr. Olander reported the month of April had mixed results, but still remained a solid month. Inpatient and ED volumes were weak. Wound Care continues to have high volumes. The Net Operating Gain for the month was \$255,264 and Net Gain of \$296,087.

Mr. Olander distributed a 2017 Financial Forecast. This forecast reviews the financial assumptions projected for the time of Dr. Swenson's deployment including new information with a revised target during deployment. The clear plan for coverage will maintain elective and urgent orthopedic surgery volumes as well as cover ED orthopedic call.

Dr. Handley added that Dr. Norling will work in the EHM Orthopedic Clinic and perform surgery for patients and ED admissions. Dr. Boone has agreed to cover the entire ED orthopedic on call service during Dr. Swenson's absence. The hospitalist team will admit and co-manage and patients through the ED coordinating with the orthopedic surgeon.

There was discussion about the Recovery Center volumes. Mr. Malte inquired how the marketing referral coordinator was working out. Commissioner Balk shared that the District Board had requested there be a 6-9 month marketing evaluation to see if the coordinator an impact for the Recovery Center. The evaluation should be in September or October.

### **Foundation Annual Report**

Connie Wittren, EH Foundation Director, presented the EHM Foundation Annual Report. The presentation included a statistical recap of 2016. Campaign progress in 2016 for the 2 largest campaigns, the renovation for the Recovery Center and the 3-D Mammography unit, was reviewed. Other key items noted:

- A \$50,000 grant was received from the Norcliffe Foundation. This is the largest grant EHM Foundation has received.
- An open house at the Recovery Center was given for the donors who gave to the Recovery Center renovation project. This event was very successful.
- The Foundation has begun making gratitude calls to personally connect and thank donors for their contributions.
- Three new Foundation Board members are coming on board in 2017.
- Ms. Wittren has plans to schedule a board retreat later in 2017 to establish Foundation goals and direction. The retreat will include Administration.

### **Medical Executive Committee Report**

Dr. Patz reviewed the May meeting of the Medical Executive Committee. Highlights included:

- Dr. Larrabee has added a new nutritional order set, which was approved at MEC.
- The CT unit was down for 4 days causing unnecessary transfers and diversions. Ms. Jensen and Ms. LaPlante added they are working on a CT plan, possibly purchasing a portable CT unit as back up. Replacement of the current unit will also be reviewed.
- Volumes in the Wound Center continue to be steady.
- Dr. Handley has revised bylaws, policies and procedures and brought to MEC for approval.
- Dr. Qiu has started as a new anesthesia provider working with Dr. Chiou.

### **Chief Administrative Officer's Report**

Ms. Jensen shared she is looking forward to serving the Monroe community. During her first few weeks, Ms. Jensen has focused on gathering information and learning as much as possible about the organization including rounding with staff and leaders. She will work to develop a clear understanding on how Monroe and Kirkland can work towards a common vision to maximize the affiliation to serve the community.



### **Chief Medical Officer's Report**

Dr. Handley has been working to align the EHM privileging form to be compatible with the EH privileging form. Dr. Handley is working on nursing staff issues in the OR. Dr. Handley reported Dr. Hibbert, colorectal surgeon, will be adding another day in Monroe to schedule.

### **EvergreenHealth Updates**

Mr. Malte reported on the following:

- The EH 2016 Annual Report is scheduled to be distributed soon.
- The EH Summer Monitor Special Edition will be going out to 25,000 home in Monroe.
- The Integrated Strategic and Financial Plan had been deferred until Ms. Jensen was onboard, but now will be ramped up.

Ms. Greenfield requested an update on OB. It has been about 6 months since there was a report. Mr. Malte said this can be brought to the next AGB meeting.

### **Quality Sub-Committee Report**

There were no comments or questions from the Commissioners about the Board Quality Committee Summary.

### **Executive Summary / Dashboard**

Ms. LaPlante reviewed the April Quality and Safety Summary noting there were 74 SafeLinQ reports. This is a high number and staff and physicians are continuing to report. April had 6 Security events. Security is being watched closely and are looking at increasing presence of security guards.

These items were also noted:

- Under Employee Safety, needle sticks were 0.
- A total of 5 falls were reported, 1 with minor injury and 4 with no injuries.
- 5 complaints were received and 2 grievances.

### **Board Retreat Debrief**

Tricia West was present to give the Board Retreat Debrief. Translate learnings into 2018-2020 Strategic Plan. The retreat identified four key steps to succeed in healthcare in the future; reduce cost structure, have sustainable risk strategy, build consumer loyalty and elevate physician network performance. There will be a meeting in July to further map out and refine the strategy.

Commissioner Greenfield emphasized the need to continue to develop leaders so we keep the culture and so we have leaders to step up into the roles at the hospital and for the Boards. Same as succession planning.

### **NEW BUSINESS**

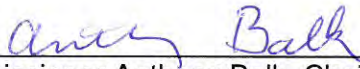
#### **Rolling Agenda**

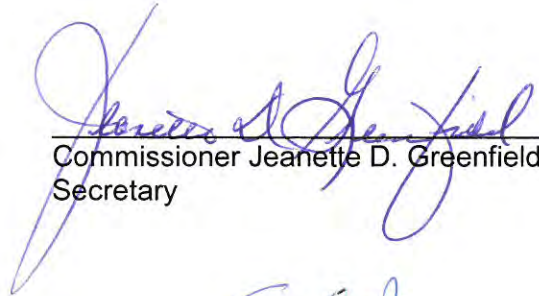
There were no further questions on the Rolling Agenda.

### **ADJOURN**

There being no further business, Commissioner Balk adjourned the meeting at 4:51 p.m.

**ATTEST: ALLIANCE GOVERNANCE BOARD**

  
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Commissioner Anthony Balk, Chair

  
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Commissioner Jeanette D. Greenfield,  
Secretary

  
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Commissioner Al DeYoung

  
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Commissioner Stephen Matuschak

  
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Bob Malte, EvergreenHealth CEO