

ALLIANCE GOVERNANCE BOARD**Wednesday, September 6, 2017****MINUTES****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; Minerva Butler, KCPHD#2 Commissioner; Jeanette Greenfield, KCPHD#2 Commissioner; Bob Malte, EH CEO; Renée Jensen, Sr. VP and EHM CAO; Scott Olander, EHM CFO; Deborah Jayne, EHM CNO; Lisa LaPlante, EHM CQO; Jack Handley, MD, EHM CMO; John Patz, DO, Medical Staff President and Sarah Macht, EHM Executive Assistant. Guests included Dr. Midori Larrabee, Hospitalist Medical Director. Al DeYoung, KCPHD#2 Commissioner, Absent & Excused

PUBLIC COMMENT

No one from the public wished to comment.

ACTION ITEMS**Consent Agenda**

Commissioner Balk presented the Consent Agenda which included the August 2, 2017, AGB Minutes and the July 2017 A/P and Payroll Voucher Summary.

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

Motion: Commissioner Greenfield moved to approve the August 2, 2017, AGB Minutes and the July A/P and Payroll Voucher Summary as presented. Commissioner Matuschak seconded the motion. **Motion carried unanimously.**

REPORTS & DISCUSSION**Quality Committee Report**

Ms. Walker presented the Board Quality Summary, Executive Dashboard, Patient Experience Summary and the Safety Summary to the AGB. She inquired if there were any questions from the AGB Directors on any of the data provided.

Commissioner Butler asked about the themes pertaining to the physician issues noted on the Board Quality Report. Ms. Walker reported that most of the issues are usually related to physician bedside manner or responsiveness. She assured the AGB that all issues related to physician behavior or clinical outcomes are referred to Dr. Handley and the Medical Staff Quality Committee. Dr. Handley is aware of this specific issue and is working with the physician involved to make improvements and meet expectations.

Commissioner Greenfield inquired about the number of overrides in Pyxis on the safety summary. Ms. Walker stated that these are related to overrides for IV fluids, and other non-narcotic medications. Currently a team is working with the staff on providing more accurate reasons as to why they need to over-ride these fluids so often so we can fix the processes that are causing this work around. This is not new data being collected, but it is now something that is being closely tracked and trended so that a better process can be developed. The team working on fluid override's is working on a new process and plan for education of staff.

Chief Medical Officer's Report

Dr. Handley reported that EHM recently interviewed a promising orthopedic surgeon who potentially could be a new addition to the hospital. Dr. Norling has been increasing his cases at EHM, performing 20 cases in August.

Chief Financial Officer Report

Mr. Olander presented the financial reports. Key points were:

- Overall below budget on gross revenue.
- Positive variance on outpatient revenue - partially due to Dr. Norling's surgical volume as well as ER volumes.
- Below budget on expenses for the month and are tracking closer to budget YTD for expenses.

Mr. Olander presented a summary for capital expenditures and construction projects. Overall total capital spending for 2017 through July is \$1,188,362.00. Projects that are currently in process include the MSTU renovation and the installation of the new sterilizers.

Mr. Olander reported that when the 2018 Inpatient PPS rules and rates were published, EHM learned that CMS had not extended the criteria that enabled EHM to benefit from the program. From 2005 to 2010 qualifying hospitals had to have fewer than 200 Medicare discharges and be located more than 25 road miles from the nearest PPS hospital. From 2011 to 2017 the criteria was fewer than 1600 Medicare discharges and be located more than 15 road miles from a PPS hospital. Effective for FY 2018 and subsequent years, in order to qualify as a low-volume hospital, a subsection (d) hospital must be more than 25 road miles from another subsection (d) hospital and have less than 200 discharges (that is, less than 200 discharges total, including both Medicare and non-Medicare discharges) during the fiscal year. This is a hit of greater than \$1.2 million for Monroe. The EHM executives have been contacting our senators and representatives to advocate for the expanded criteria to continue through 2018 and beyond.

Chief Administrative Officer's Report

Ms. Jensen introduced Deborah Jayne, who will be serving as the interim CNO until January which will allow time for the recruitment of a permanent CNO.

Ms. Jensen presented a few highlights from her report:

- Nurse staffing has been a reoccurring issue at EHM, at times causing closures to admissions. Ms. Jayne has been able to problem solve the nurse staffing issues. Ms. Jayne implemented a daily clinical staffing huddle, which has helped tremendously with communication on staffing issues as well as to help get ahead of the issues and fix them before they become a problem. Ms. Jayne stated her goal is to never have to close to admissions due to staffing.
- Ms. Jensen attended a Monroe City Council meeting to introduce herself to the community. Renee noted that this community wants EHM to be engaged and present in the community, not just via marketing, but by being present and involved at community events. Renee is working on a strategy on how to get EHM plugged in and involved in the community and how to get the community engaged with EHM.

- Ms. Jensen and Dr. Norling went to an introduction meeting at Providence. The group was very welcoming; many knew Dr. Norling and were excited he was doing surgeries at EHM.
- Several Town Hall meetings were held with the staff. The staff was very excited to attend and is looking forward to the future direction of organization.

Ms. Jensen presented the draft 2018-2020 Strategic Plan placemat. The next steps are to have an all-day leadership work session with the directors and managers to go over this plan and to develop all of the tactics and deliverables leading off of each placemat. Then, Ms. Jensen plans to present this plan in final at the December AGB meeting.

Ms. Jensen reported that planning for OB services is ramping up. She will be meeting with facilities planners this week and they are going to be walking through the old OB department to look at what the vision for the space may be. EHM will begin looking at the cost and timeline of re-opening OB. Our physician recruiter is actively looking at candidates for the program.

Chief Executive Officer’s Report - EvergreenHealth System Updates

Mr. Malte reported on the following:

- EHK has had a few meetings with an Edmonds practice that is interested in becoming part of a larger system. One of the group’s questions was could they deliver at EHK or EHM. Mr. Malte suggested it could be a possibility that these physicians could deliver in Monroe. Discussions surrounding this practice are still occurring and nothing is final. Mr. Malte will keep the AGB updated on next steps, if any.
- Mill Creek Urgent Care and Primary Care is doing very well – it has been open for 5-6 weeks now.
- The EvergreenHealth Monitor was sent to over 25,000 homes in Monroe.
- The Aetna contract is signed and was effective August 15th. There are plans to market this to the community.
- Effective January 1, 2018, EvergreenHealth (including EHM) will be part of the Boeing ACO.

AGB BUSINESS

Medical Staff Credentialing Report

Dr. Patz indicated there are no concerns and recommends approval of the Credentialing files. The following providers were recommended for approval:

INITIAL APPOINTMENTS/PROVISIONAL

APPLICANT	PRIVILEGES	MEMBERSHIP	COMMENTS	ACTION
Davis, Daniel W., DO	Anatomic & Clinical Pathology	Provisional/ Courtesy		
Lee-Garrard, Helan, DO	Family Medicine	Provisional/ Courtesy		
McQuinn, Garland H., MD	Diagnostic Radiology	Provisional/ Courtesy		
Myers, Chelsey A., PA-C	Physician Assistant/ Emergency Medicine	Provisional/ Courtesy		

PROVISIONAL ADVANCEMENTS

APPLICANT	PRIVILEGES	MEMBERSHIP	COMMENTS	ACTION
Patel, Jigish S., MD	Diagnostic Radiology	Courtesy		
Tran Morin, Ashley, MD	Emergency Medicine	Active		

REAPPOINTMENTS

APPLICANT	PRIVILEGES	MEMBERSHIP	COMMENTS	ACTION
Borjeson, Jonathan C., DO	General Surgery/ Wound Care & Hyperbaric Medicine	Active		
Chepuri, Vinaya B., MD	Cardiology	Courtesy		
Gallinger, Harlan R., MD	Emergency Medicine	Active		
Harris, Eric A., MD	Cosmetic Surgery	Courtesy		
Hawkins, Robert., MD	Diagnostic Radiology	Courtesy		
Hibbert, James G., MD	Colorectal Surgery	Courtesy		
McMillan, Sarah, MD	Cosmetic Surgery	Courtesy		
Raney, Mark S., DO	Family Medicine	Active		
Smith, Budge H., MD	Cardiology	Courtesy		
Wu, Li Lin, CRNA	Certified Registered Nurse Anesthetists/Anesthesia	Allied Health		

RESIGNATIONS

APPLICANT	PRIVILEGES	MEMBERSHIP	COMMENTS	ACTION
Mazurek, Kelly G., MD	Internal Medicine	Provisional/Courtesy		
Mpare, Sarah A., ARNP	Registered Nurse Practitioner/ Family Medicine	Courtesy		
Zitrin, Jaron B., MD	Diagnostic Radiology	Courtesy		

Commissioner Balk called for a motion for approval.

Motion: Commissioner Greenfield moved to approve the June 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 Matuschak seconded the motion. **Motion carried unanimously.**

Dr. Patz reported that the primary care clinic will be losing a provider at the end of the year, but EHM has interviewed a candidate that could be a great fit for the community. The Recovery Center is recruiting for a third provider that will step into a leadership role and so that Dr. Patz will have more time to devote to his clinical career. Dr. Larrabee has been given a grant from the Medical Staff and will begin a healthcare business and leadership course to invest in her future leadership role within the EH system & Monroe.

AGB Self- Evaluation- Discussion

Included in the packet was the self-evaluation that has been used in the past. Commissioner Balk asked the AGB Directors if they would like to use this evaluation tool and when they would like to complete it. Since the CAO has only been at the organization for a few months and many of the questions refer to her, would the AGB like to fill this out now, or delay to the end of the year to give more time for assessment?

It was recommended that the survey be used and put into survey monkey. On all questions, a box "unable to assess" be added.

Rolling Agenda

The rolling agenda was presented. Mr. Malte wanted to make sure the SCPHD#1 Commissioners were invited to the EvergreenHealth system Budget Hearing on November 10th.

COMMUNICATIONS

There were no comments of questions from the Directors about the Communications Summary.

EXECUTIVE SESSION

At 4:52 pm Commissioner Balk announced that the AGB would not break into executive session.


ADJOURN

There being no further business, Commissioner Balk adjourned the meeting at 5:00 p.m.

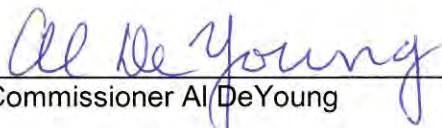
ATTEST: ALLIANCE GOVERNANCE BOARD



Commissioner Anthony Balk, Chair



Commissioner Jeanette D. Greenfield,
Secretary



Commissioner Al DeYoung



Commissioner Stephen Matuschak



Bob Malte, EvergreenHealth CEO