

San Juan County Public Hospital District #2: Lopez Island Hospital District
Board of Commissioners
Regular Board Meeting
January 23, 2019
4:30 – 6:30 pm
Minutes

Commissioners Present

Albert Berger
Christa Campbell
James Orcutt
Rebecca Presley

Staff

Supt. Presson

Commissioners Absent

Iris Graville

I. Call to Order

The meeting was called to order by the new Board Chair, Commissioner Presley, at 4:32 pm.

II. Public Comment

Commissioner Presley asked the public attendees if anyone would like to participate in the Public Comment item. Lauren Stephens provided a report from the CWMA Board meeting. She was happy to share that there is a signed contract to move the LIPT practice to the space that was previously Green Dragon Nursery. The owner has hired an architect and applied for permits. The space will include two separate rooms for seeing patients and a shared workout area. The goal is to be in the space by early Spring. CWMA is underwriting the cost of the space and providing the practice with a highly subsidized rent.

III. Consent Agenda

Included in the Board packet under this item were Minutes from the December 13, 2018 Regular Board meeting and two sets of AP Voucher reports. **A motion was made by Commissioner Campbell, seconded by Commissioner Berger, and unanimously carried to approve the Consent Agenda.**

IV. Special Report

Mark Tompkins, Director of San Juan County Health & Community Services, joined the meeting to provide an overview of the various Community Health Needs Assessments that have taken place over the past several years. He went on to explain the County's upcoming effort to conduct a **Community Health Assessment (CHA)** and his desire to work collaboratively with the Hospital Districts to help engage the community. He stressed the importance of working together to have a large enough data set for the information to be meaningful, which has historically been a challenge.

Mark went on to provide an overview of the **Community Health Initiatives Consortium (CHIC)** and the various work groups within that group. There is also a group called the **Community Collaboration Committee (CCC)**, which has historically been run by Peace Island and includes policy makers from their larger organization, the County, Department of Health and the SJIPHD#1.

Commissioner Berger asked what would be involved in partnering with the County in the CHA, Nark indicated that he still needed to give it some thought but his initial thinking would be to make sure the PHD has the opportunity to express their concerns and issues during the planning stage. The PHD might also take part in hosting or leading some of the community engagement activities on the island.

Commissioner Campbell felt that as there are now two more PHDs in the County since the last CHNA was conducted by Peace Health, it would seem like having their full participation is vital. She would also like to see the CCC model revisited to cover the entire County.

The Board also discussed the value of participating in such a county-wide effort as it creates a stronger story if the PHD goes after grants to improve population health. Commissioner Berger also mentioned that contained in the PHDs Agreement with UW is a statement that UW will supply data to support the needs assessment. Mark agreed that while the county has some access to provider data it would be great to know what additional metrics could be obtained from UW.

Next steps in the process will be for Ellen Wilcox, who will be leading the CHA, to reach out to the Superintendent. It's likely the process will be in full swing by summer with a report in 2020.

A copy of the presentation summary is included at the end of these minutes.

V. Committee Reports

- a. **Finance Committee** – Commissioner Berger summarized the key financial highlights from the prior calendar year. These will be posted on the website and include the following:
 - i. We paid off the CWMA loan.
 - ii. We paid off the San Juan county loan.
 - iii. We fully initiated the Islanders Bank GO Loan which was taken later in the year than originally planned which minimized our 2018 interest payments as well as taking a principal amount that was less than what we originally negotiated. This will lower our debt financial burden and the resulting Cash Flows in years to come.
 - iv. By agreement of the Board, we initiated a Reserve Fund that we will start to put monies into in 2019.
 - v. We had a State of Washington Audit, and we came out with an excellent outcome.

- vi. During the year we made payments to Lopez Island Physical Therapy which included an accelerated payment schedule to help them with the start-up of this business.
 - vii. We made our contractual payments to UWNC. The payment schedule was renegotiated to semi – annual payments from Quarterly, which helped very much with our cash flow and the times of influx of monies to the district from property tax revenues. Our next payment will occur approximately in May 2019 based on the UWNC Q1 and Q2 (July thru Dec. 2018) financial report from UWNC.
 - viii. Overall, the District ended 2018 in very good financial shape.
 - ix. Looking ahead, the Board needs to start thinking about a future contract with UW. Current contract expires 3 years from the commencement date of Sept. 25, 2017, or Sept. 25, 2020. The current Clinical Services Agreement contains an automatic renewal for an additional three years. If UWNC wanted to terminate for convenience, they can do this at any time with one-year notice. This means if either side did not want to continue the relationship beyond 9/25/2020 (which has an automatic 3-year renewal) notification would be required by 9/25/2019. This becomes something the Board needs to start to consider later in the year.
- b. **Quality Committee** – Commissioner Orcutt reported that he and Charlie Janeway had a good meeting with the representatives from UW. They met for two hours and still ran out of time. The Committee requested follow-up information that was just received, and Commissioner Orcutt felt he needed more time to review the material before providing a summary to the Board. There was consensus to have the Committee complete their review and 30 minutes will be allocated to the February Agenda for a formal presentation.

Commissioner Orcutt mentioned that the group had a brief discussion about the concerns we continue to hear around access to the Clinic. In fact, the reports they reviewed didn't contain patient satisfaction and access data. Those are areas the Board would like to better understand. What likely won't be in the UW report, and an area in question, is specific to people who have been turned away or weren't able to access the clinic for one reason or another. There was a discussion around the value of assigning a community liaison to work as an ombudsman who could assist people that need help navigating the system. Some felt the Superintendent could play that role; however, others wondered if it needed to be someone who was more separated from the Clinic. Charlie Janeway felt that not everyone in the community understands the role of the Superintendent and might not see her as an avenue for help. Perhaps this could be the topic for the next Health Matters 2.0 article from the PHD.

There was also a discussion around whether having a community meeting would be a good way to solicit feedback from the community. Commissioner Campbell said she was willing to help investigate the best approach to gathering feedback since this is such a

critical issue and something that continues to be a perceived barrier to care. It will be brought back to the February meeting for continued discussion.

- c. **Communications Committee** – Commissioner Graville was absent, yet Superintendent Presson shared that the Committee is on target to have the next issue of Health Matters 2.0 published in late February. She has already spoken with Sound Publishing for all three entities to have dedicated space, and having the material published in the Islands' Weekly was well received and affordable.

The Superintendent also shared that it's the intent of the Committee to bring Lopez Fire & EMS into the mix and all four entities will have dedicated space. She'll be working with Chief Havner to determine the theme of the Lopez Fire/EMS article.

VI. Operations Report

- a. **Monthly Financials** - Superintendent Presson presented the financial reports from San Juan County's financial management system for the month of December 31, 2018, which also represents the year-end data. As was reported during the Finance Committee update, the District ended the year in a strong financial position and on target with projections.

A small amount of Property Tax revenue came in during the month, as did a small amount of revenue from Leasehold Tax and \$500 associated with the Medicaid Transformation project. As a reminder, that payment is associated with the work underway to improve outcomes and reduce costs for Medicaid patients. PHDs throughout the State are all involved in that work in various ways through the Accountable Communities of Health. Finally, there was \$500 recorded as insurance recoveries from Orcas Island PHD. This is reimbursement for health insurance premiums paid to PEBB for the Superintendent.

The Superintendent mentioned that as the District builds reserves, she can work with the County Treasurer to invest money in governmental funds. She will ask if investment income is subject to federal taxes. Year-to-date revenues were just under \$200,000 less than budget as a result of the District not taking the expected funds from the General Obligation (GO) Bond. There was more transferred to the Debt Service Fund to pay off the CWMA loan, which was also not planned when the 2018 budget was adopted. On the expense side, several budgeted items for professional services came in well under budget. The first Principal payment on the GO Bond was made in early December and the cost of the debt service for the bond was lower in 2018 due to the delay in taking funds and the reduced draw.

- b. **2019 Meeting Location** – Since the Board changed the day and time of their meeting, we aren't able to meet at the Library. There was consensus of the Board to host their 2019 Regular Board meetings in the meeting room at the Lopez Island Fire & EMS.
- c. **UW Highlights** – the Superintendent asked Chief Havner to provide an update from his meeting with UW. Also included in the meeting were: Caleb, Mark Bresnick from UW and Crystal Rovente and Erica Taylor from the Clinic. They discussed the backroom and other patient/clinic issues.
 - i. The Knox Box, which will house the key to the Clinic, has been installed.
 - ii. CWMA owns all of the durable equipment in the back room (Lifepak, patient beds, med carts, etc.).
 - iii. Lopez Fire and EMS staff will develop a list of "scenarios" for their use of the room and a list of equipment needs.
 - iv. Lopez Fire and EMS staff will start attending the clinic's monthly in-clinic review meetings, which are the 2nd Tuesday of the month.
 - v. With Dr. Sullivan's pending approval, clinic staff will have an open invite to the appropriate segment of Lopez Fire/EMS 1st Tuesday run review.
 - vi. The above two items are intended to work out patient care issues.
 - vii. The Lopez Clinic is holding internal trainings to streamline the "rapid check-in" process for both registered and non-registered patients. Clinic staff only need THREE pieces of information to check a person into the system (NAME, ADDRESS and PHONE NUMBER).
 - viii. UW is looking into cases where 911 was called instead of treating the patient.

Overall, it seems as though discussions are positive and there is improved collaboration between Lopez Fire/EMS and the UW Clinic. If UW is going to take responsibility for maintaining supplies in the back room, there needs to be assurance that the room will always be stocked. There was discussion around who any lease agreement would be between as CWMA leases the entire space to UW, so it might be that UW executes a sub-lease agreement with Lopez Fire/EMS/UW will need to review their contract with CWMA. CWMA has authorized Marty Clark to work with LIFE/UW on their behalf.

- d. **Kaiser Air Transport Denials** – the Superintendent and Chief Havner continue to work closely to resolve the issues around air transport denials. Superintendent Presson noted that Airlift Northwest is not experiencing the same level of denials as Island Air. It appears part of the reason is Airlift Northwest tends to get the more critically ill/injured patients so medical necessity isn't as much in question. Chief Havner will be sending a letter to anyone who has been air transported since August with information on what to do if the claim is denied. There was agreement that an education campaign about the

membership benefits would be helpful, as most people have no idea what they are truly purchasing.

VII. Old Business

- a. **Bylaws** – The Superintendent walked the Board through the latest round of edits to the Bylaws. The only change that was requested was on Attachment A, page 12, item C. The current statement reads that “Commissioners are responsible for altering the Chair to any known absence to be considered an excused absence” and there was consensus to add OR SUPERINTENDENT to this sentence. **A motion was made by Commissioner Campbell, seconded by Commissioner Orcutt, and unanimously carried to approve the Updated Bylaws as amended with the change to Attachment A, item C as noted.**
- b. **Revised Public Records Policy** – Superintendent Presson walked the Board through the revised Public Records Policy. She pointed to the significant number of recommendations made to the original policy by the Attorney General’s office, and identified how each was addressed in the updated document. Since this was a first review of the dramatically updated material, it will be brought back to the February meeting for action after the Commissioners have had time to read through thoroughly. The one item the Board asked to check on is related to Section 4, item 4.1. **There is a sentence that says “...the requestor SHOULD point out the public records request by labeling the front page...” and the Board felt the language should be stronger to replace SHOULD with MUST. The Superintendent will see if that’s a change that is acceptable.**

VIII. New Business

Nothing to report.

IX. Commissioner Comments

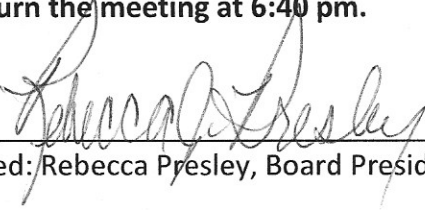
There were no additional comments.

X. Upcoming Meetings

Commissioner Presley reminded the Board that the next regular meeting will be Wednesday, February 27th at 4:30 pm. Commissioner Berger noted that he will be traveling and unable to attend the February meeting. Chief Havner shared that the Lopez Fire/EMS will host an open house on January 26th at the village Fire Station from 1-3 pm. He encouraged the Commissioners to attend. Finally, Superintendent Presson mentioned that she is holding March 7/8 for BoardDocs training. Unfortunately, it appears neither Commissioner Campbell nor Commissioner Berger will be available that week. The Superintendent will schedule with the other Commissioners and arrange for a webinar later in March with those who aren’t able to attend in person.

XI. Adjourn

Commissioner Presley asked if there was any further business to discuss, comments or questions from the Board. Hearing none she asked for a motion to adjourn the meeting at 6:40 pm. **A motion was made by Commissioner Berger, seconded by Commissioner Campbell, and unanimously carried to adjourn the meeting at 6:40 pm.**

A handwritten signature in cursive script, appearing to read "Rebecca Presley", is written over a horizontal line.

Signed: Rebecca Presley, Board President

SPECIAL REPORT FROM SAN JUAN COUNTY HEALTH & COMMUNITY SERVICES

What is a Community Health Needs Assessment (CHNA)?

A Community Health Needs Assessment (CHNA) is a health assessment that identifies key health needs and issues of a community through a systematic, comprehensive data collection and analysis process. The process includes proactive community engagement across multiple sectors, in addition to analyzing state, regional and local health indicator data. The goal is to identify the community's key health needs.

In San Juan County, three CHNA's have been completed since 2013:

- In 2013, Island Hospital published a Community Health Needs Assessment that included San Juan County. Primary health needs were mental health and substance abuse. Secondary health needs were access to health care and obesity. Community engagement included interviews and small group meetings with stakeholders (e.g. Lopez Island Medical Clinic, Island Hospital, & San Juan County Health & Community Services)
- In 2014, PeaceHealth published a Community Health Needs Assessment. The three priority focus areas identified were health promotion and disease prevention; care coordination; and increased behavioral health outreach and services. Community engagement included group meetings with stakeholders (e.g. San Juan County Public Hospital District #1, San Juan Island Family Resource Center, San Juan County Health & Community Services, San Juan Island EMS, San Juan Island Community Foundation, San Juan Island School District, Compass Health, and San Juan Island Public Library).
- In 2016, PeaceHealth completed a "refresh" of the 2014 CHNA. Community health priorities identified in the refresh included; effective information exchange and care coordination; immunizations; increased behavioral health services; outpatient palliative care service; and development of an online resource guide. Community engagement for the refresh included convening a meeting of the Consortium and an on-line survey for Consortium members unable to attend the meeting.

PeaceHealth intends to conduct an update to their CHNA starting in 2019.

San Juan County Health and Community Services (SJCH&CS) intends to conduct a comprehensive countywide Community Health Assessment starting in 2020. This assessment will involve collecting, analyzing and presenting a comprehensive set of health indicators for the county. SJCH&CS will be holding stakeholder meetings and community forums across the county to obtain input and identify the key health needs.

What is the Community Health Improvement Plan?

A Community Health Improvement Plan (CHIP) is a comprehensive set of initiatives and strategies aimed at addressing the health needs identified in the CHNA. CHIP's typically include the top three to five priority health needs, responsive initiatives/strategies to address the identified health needs, the target population, partners and metrics to measure success.

PeaceHealth developed CHIP's as part of both CHNA's. The San Juan County Community Health Initiatives Consortium (Consortium) is currently implementing both CHIP's.

What is the San Juan County Community Health Initiatives Consortium and the Community Collaboration Committee?

The Consortium is a community collaboration formed in 2015 for the purpose of implementing the health initiatives identified in the Community Health Improvement Plan (CHIP). The goal of the Consortium is to improve health outcomes of San Juan County residents countywide.

The Consortium utilizes workgroups to implement the CHIP strategies. These workgroups develop and implement specific action plans and identify measures of success to achieve the CHIP objectives and goals. The groups include participants from provider organizations and individuals countywide. The workgroups report on accomplishments, remaining goals, ideas for improvement and ways to move forward into the next year.

Currently the Consortium workgroups include:

1. Vulnerable Populations
2. Immunizations
3. Behavioral Health (Note: The Local Oversight committee has replaced this workgroup)
4. Community Resource Guide (Note: Guide is up and running. Workgroup is meeting only as needed)

The Community Collaboration Committee (CCC) was formed in 2016 to provide a platform for healthcare leaders to engage, communicate and take collaborative action on identified health needs and issues including those identified in the CHIP. The CCC is composed of Board members from PeaceHealth Community Health Board, San Juan Island Hospital District Board #1, and San Juan County Board of Health, as well as staff from all three organizations. The CCC receives progress reports and resource requests from the Consortium.

Why is Participation Important?

The success of the Consortium depends on the participation from the community, service organizations and individuals. Countywide participation is crucial for increasing communication and collaboration across service organizations to reach community health objectives and goals. The purpose is to meet not only short-term goals, but also to promote systems change, foster community and cultivate networks.