

**San Juan County Public Hospital District #2  
Dba Lopez Island Hospital District (LIHD)**

**Board of Commissioners - Regular Meeting**

**November 18, 2020**

**REMOTE MEETING DUE TO COVID-19**

**Zoom Video/Audio**

**4:30 – 6:30 pm**

**Minutes**

**Commissioners Present**

Albert Berger, Board Secretary  
Christa Campbell  
Iris Graville, Board President  
James Orcutt  
Steven Greenstein

**Staff**

Superintendent Anne Presson

**Commissioners Absent**

None

**I. Call to Order**

The meeting was called to order at 4:30 pm by the Chair, President Graville. President Graville started the meeting with a routine land acknowledgment, recognizing the Commissioners are meeting on the traditional land of the Coast Salish.

**II. Public Comment**

Due to the need for Commissioner Bordvick, representative from Lopez Island Fire & EMS (LIFE), to leave early, his report was moved to the start of the Agenda. Commissioner Bordvick reported that LIFE has hired their new Fire Chief, Adam Bigby. He will start full-time on 12/15/20, and is coming from Montesano, WA where he was a Fire Captain and paramedic. He has also served as a Commissioner on the Grays Harbor Board, and brings with him a wealth of experience and education.

There was also discussion around having Commissioner Greenstein take over as the LIHD representative at the monthly LIFE Board meetings. Commissioner Greenstein has been attending meetings and agreed to step into that role.

There was a consensus of the Board to have President Graville and Superintendent Presson write a thank you letter to interim Chief Ghiglione and welcoming letter to incoming Chief Bigby.

Karen Gilbert asked to make a Public Comment. She shared her involvement with the Lopez COVID Health Support Group, which is made up of retired RNs, PAs and NPs. The group was formed in the

Spring to help if additional staff became necessary. They also spent a lot of time making and distributing face masks and educating the community. They also helped Lopez Pharmacy in staffing the recent island-wide flu clinics, and have contacted the County Health Department to help with COVID testing, if needed.

She went on to ask if the Lopez Clinic felt it could handle the volume of testing should there be a sharp increase in demand. She wanted the Clinic to know the group was ready and willing to help in any way help is needed.

### **III. Consent Agenda**

The Consent Agenda contained Minutes from the September 23, 2020 Regular Board meeting. Commissioner Campbell asked for a word to be changed: Page 2, 4<sup>th</sup> Paragraph replace “how” with “if” as follows:

*Commissioner Campbell asked about the after-hours coverage when neither Dr. Wilson nor Wen are officially on-call. She was wondering if that was coordinated to make sure one or the other is on island.*

**MOVED by Commissioner Campbell, seconded by Commissioner Greenstein to approve the Consent Agenda as amended. VOTE: 5:0:0. Motion Carried.**

### **IV. UW Medicine Lopez Clinic & Lopez Island Physical Therapy Updates**

- a. **UW Medicine Lopez Island Clinic** – Mark Bresnick, UWNC Assistant Director North Region, was in attendance along with Debra Gussin, UWNC Executive Director.

Debra began by expressing appreciation that the contract between UW and LIHD was renewed for another three-year term, and that the UW is happy to have a clinic on Lopez. She then provided an overview from a leadership meeting she had attended earlier in the day regarding COVID-19. UW Medicine’s number one priority is to keep their workforce safe. They are doing a number of things to ensure that workforce safety remains a focus, and those efforts are even more important in the island clinics. If there was an exposure in the clinic, the island could lose its entire health care workforce. As such, Debra expressed her appreciation for the community support.

Debra went on to share some of the recent predictions for the pandemic. It’s expected to continue through March, with the biggest peak during the months of January-February. It’s important for everyone in the community to continue wearing masks and remain largely socially distanced. If that continues, the island should be able to mitigate spread. While there is likely to be a vaccine in the next few months, it will be prioritized for health care workers and first responders.

Debra summarized some of the safety measures being put into place, as well as the shift to more visits via telehealth. The Clinic will ask that patients come alone, as the number of people in the clinic will be monitored and minimized.

Crystal Rovente, Lopez Clinic Manager, reported that the testing volume has been managed effectively and anyone needing testing is accommodated. Testing is done by one of the RNs during a 2-3-hour window daily. She will continue to monitor the demand and move other types of visits out to allow for increased testing capacity, if needed. The Clinic might also need to start to segment and triage patients who are symptomatic versus asymptomatic. Should a provider become exposed, there is also the possibility of using other UW providers for telehealth support.

Finally, Debra acknowledged there are islanders who aren't as comfortable with or don't have reliable internet. As they think about contingency plans, the Clinic can consider what is called "Zoom to Room". This is where the patient comes into the clinic and is put in an exam room, and a provider conducts the visit via Zoom from another location.

There was consensus that Mark, Crystal and Superintendent Presson will work together to create a communication piece for the community. This will include reminders on mask wearing and any other changes coming as a result of the Governor's order and increased risk. Finally, the issue of being registered in advance to facilitate appointments and testing will be addressed.

Superintendent Presson asked again about the opportunity for UW to engage volunteer RNs. Mark didn't feel that was something that could be accommodated due to UW constraints on hiring; however, he agreed to continue to pursue the discussion internally.

Debra also touched on the integration of UWNC to UW Medicine, which is on track to take place as of January 1, 2021. She didn't feel that there will be much of an impact on the Lopez Clinic, and the current year's budget did take into account estimates on the cost impact.

Commissioner Berger noted that the Board is very pleased to have the CSA in place for the next three years. That said, the increase in the subsidy combined with the 1% limit on the District's revenue growth makes for an unsustainable situation by the end of the contact term. The Board would like to start thinking about ways to mitigate the impact and be able to sustain the relationship. Debra agreed on both counts and said that the largest expense in the budget is labor, and it's important to pay people appropriately. It's also a reality that benefit costs are going up every year. That said, she felt there could be ways to address the issue of long-term sustainability and suggested a work group come together to begin to think about ways to generate additional revenue and/or mitigate expenses. There are ways to use technology to become more efficient,

which is a silver lining of COVID. UW can also make sure they are collecting for all of the services performed in the clinic and other things that are done. There are more services billable to Medicare than the providers and RNs can focus on and thus bring in more revenue for all that they are doing.

Commissioner Berger revisited a discussion that he has had in the past with the UWNC Finance Director. That has to do with the specialty revenue that is generated by the urban Clinics in the network. The geography is hard to overcome; however, he asked if there were ways to increase the referrals into the larger network as a way to enhance the Clinic's financial position. Debra suggested they could look at increasing telehealth visits with Specialists; however, that wasn't going to increase revenue to the Lopez Clinic, and that's something she would like to focus on.

Dr. Wilson talked about the opportunity to maintain continuity of care with Lopez residents who leave in the winter. There was interest in this approach, yet it is not clear if telehealth can be billed if offered to a patient who is outside of WA. There was discussion around Medicare's change in reimbursement for Evaluation & Management. Debra indicated UW hadn't yet determined the impact, but initial assumptions are that it's possible the change, which compensates providers for the time spent outside of direct patient interaction, could generate additional revenue.

Finally, the question was asked whether the change with Orcas will have an impact on operations at the Lopez Clinic. Debra felt that the two clinics never really achieved some of UW's initial vision, which was to share resources in order to create economies of scale. As a result, she didn't foresee any impact on the Lopez Clinic. Mark reported there are some issues related to transport and lab that will need to be resolved. He's working on some ideas that could actually save money by reducing air flights. He also identified an issue with liquid nitrogen, and will still get this from Orcas Island but directly from the distributor rather than via the Orcas Clinic. In addition to operations, Matt is working with the providers to solve after-hours on-call coverage.

Overall, Mark expects the two clinics will continue to support each other, when possible. He feels UW and Island Hospital are working well together in the transition and expects they will maintain an ongoing relationship and will partner when opportunities exist.

In closing, Commissioner Campbell once again encouraged UW to consider participating in the Lopez Library Village Square broadcasts. Superintendent Presson will follow-up with the Clinic, and if there's interest, Commissioner Campbell will help coordinate.

- b. **LIPT** – Kim Foley, PT reviewed the changes taking place in the practice following Sunday's order from the Governor. Beginning November 23<sup>th</sup>, LIPT will be making the following changes:

- Returning to a reduced schedule allowing for only one therapist and one patient to be in the facility at any given time.
- Resuming Telehealth visits to accommodate the same patient load that is currently seen.
- Applying a mandatory two-week waiting time for the following circumstances:
  - 1) If you have been off island (mainland, or other islands) **for any reason** including Medical appointments in the last two weeks.
  - 2) If you have had any visitors from off island in the last two weeks or if you have participated in any gathering outside of your immediate household.
  - 3) If you or any member of your household has felt unwell at any time during the past two weeks.
- In-office physical therapy appointments will be limited to every other week. However, post-surgical patients may request a Telehealth visit prior to the initial in-office appointment. Anyone who currently has appointments every-other-week will be changed to a Telehealth visit.

Peggy Means provided a financial overview. The practice continues to improve efficiencies in patient flow while meeting required safety standards. They averaged 9.2 patients per working day in October and are averaging 9.7 per day so far in November. The wait time for a new evaluation is down to ten days. It's possible patient volumes in December could be lower than expected due to deferred surgical referrals as it's likely facilities will be delaying elective surgeries due to COVID.

Net Revenue per visit has continued to be lower than last year, averaging \$73 per visit in 2020 versus \$78 per visit in 2019. Some of this is due to telehealth visits, which do not allow charging for modalities like ultrasound, electric stimulation procedures and supplies. Those other services added \$4/visit in revenue.

The practice will request support from LIHD in December for the losses generated in October and November in order to cover December payroll. It is anticipated that the losses for these two months will be greater than the \$7,364 which is the budgeted amount remaining for the year.

## V. Committee Reports

- a. **Finance Committee** – Commissioner Berger reviewed the final 5-year financial projections report from the LIHD Accountant. He walked the Commissioners through the various reports, with a summary that the District is in good shape over the next couple of years; however, the Ending Cash becomes precarious by the 2024 Fiscal Year.

As discussed earlier, it will be important to find ways to mitigate the rate of increase of the UW subsidy.

Commissioner Campbell suggested that next year the Board revisit some of the expense items that have been kept constant. This includes revisiting the contribution to health premiums which was touched on previously as not having been increased since 2018. She also felt it might be a good idea to revisit the Reserve Policy and see if the assumptions made around how much would be sufficient still hold.

- b. **Quality Committee** – There was no report from the Quality Committee.
- c. **Communications Committee** – There was no report from the Communications Committee.

## VI. Old Business

- a. **San Juan County Community Based Long-Term Care (LTC) Network** – In the essence of time, Superintendent Presson shared that she had additional conversations with the other Network partners and consultant. She is comfortable taking on the role of Network Director and moving the work forward.
- b. **Communicating Sensitive Information** – Commissioners were asked to revisit the Policy and send feedback to Commissioner Campbell. An updated draft will be brought to the December Board meeting.

## VII. Operations Report

Since the budget information was presented last week, there wasn't anything of interest to report on the financial reports through October 31, 2020.

Superintendent Presson has shared a document from the Community Collaboration Committee (CCC), which is a meeting of the governing boards of Peace Island Medical Center (PIMC), SJC Board of Health and SJC Public Hospital District#1.

PIMC has community benefit funds that they provide to projects in the community related to their Community Health Needs Assessment. This report describes how the PIMC funding will be used. There is also a wealth of information about how the vulnerable populations work group has evolved since 2013. One of the important initiatives was the expansion of the transportation service to Lopez. This information will also serve as helpful background and would also inform the work of the Planning Grant group

Superintendent Presson offered to summarize the information shared at the Board of Health meeting earlier in the day, as the CEO of Skagit Regional Health and his Board Chair answered questions about the possible sale of Hospice of the NW.

**VIII. New Business**

There was no New Business to report.

**IX. Community Partner Updates**

- a. **CWMA** –Lauren Stephens did not have any report from CWMA.

**X. Public Comment**

Erica Taylor, RN from UW Clinic, shared some thoughts on communicating about COVID testing protocols. It is important the community realize there could be shortages of PPE and other materials again, and setting expectations when it is/is not reasonable to be tested. It was suggested that sharing the San Juan County guidelines would be a good reminder. Dr. Wilson also shared that there are more home testing options available, including those sold at Amazon and Costco. People can be directed to those sources if they are just looking for a test without having been exposed or meeting another category.

**XI. Commissioner Comments**

Commissioner Greenstein reported that he had attended the recent LIFE Board meeting. As was reported earlier, the most significant item was the hiring of the new Chief.

**XII. Upcoming Meetings**

The next Regular Meeting of the LIHD is scheduled for December 18<sup>th</sup>. Superintendent Presson will bring the usual year-end items and planning for 2021. This includes the discussion of Board Officers, which she is seeking input on individually. In regard to the Calendar, she suggested the Board will want to consider holding two meetings per month for part of the year when strategic planning gets underway. There was discussion around the day/time of day for meetings. She will survey the Commissioners and come to the next meeting with a recommendation.

**XIII. Adjourn**

**MOVED by Commissioner Berger, seconded by Commissioner Orcutt to adjourn the Regular meeting at 6:41 pm. VOTE: 5:0:0. Motion Carried.**