



KITTITAS COUNTY PUBLIC HOSPITAL DISTRICT No. 1
BOARD OF COMMISSIONERS' REGULAR MEETING
KVH Conference Room A & B
February 22, 2018

BOARD MEMBERS PRESENT: Matt Altman, Liahna Armstrong, Bob Davis, Erica Libenow, Roy Savoian

KVH STAFF PRESENT: Julie Petersen, Libby Allgood, Carrie Barr, Mandee Olsen, Carrie Youngblood, Rhonda Holden, Vicky Machorro, Michele Wurl

MEDICAL STAFF PRESENT: Dr. Timothy O'Brien, Dr. Don Solberg

1. At 5:00 p.m., President Matt Altman called the regular meeting to order. President Altman asked for a moment of remembrance for Dr. William Waltner. Jim Allen presented an overview of Dr. William Waltner's career and service to the patients of Kittitas Valley Healthcare.

The Oath of Office was given to Roy Savoian, newly appointed Board of Commissioner, Position No. 4 for Kittitas County Public Hospital District No. 1.

2. **Approval of Agenda:**

ACTION: On motion of Erica Libenow and second of Bob Davis, the Board members unanimously approved the agenda.

3. **Consent Agenda:**

ACTION: On motion of Liahna Armstrong and second of Roy Savoian, the Board members unanimously approved the Consent Agenda.

4. **Safe Catch Awards:**

Mandee Olsen presented Safe Catch Awards to staff as follows: the clinical award was given to Debbie Ezell, Patient Care Technician in the Emergency Department, and the non-clinical award was given to Brandee Coates, Hailey Andreas, and Mandee Olsen in the Quality Improvement Department, and Linda Mullin, Receptionist in the Imaging Department.

President Altman recessed the meeting into a short 5-minute break.

5. **Presentation:**

Taya Briley, Executive Vice-president and general counsel of the Washington State Hospital Association, and Dr. Robert Kerr, KVH's peer review physician, gave a PowerPoint presentation regarding provider credentialing. They gave an overview of the credentialing process regarding the importance of gathering the proper information and verifying the information regarding each provider's education, employment and certification, references and searching databases as well as background checks. They noted that the credentialing of providers is an important responsibility for the Board members as they have the final approval for each provider. The Board will review the credentialing process at KVH.

6. **Public Comment/Announcements:**

None.

7. **Reports and Dashboards:**

The Board members reviewed the QI dashboards and summary.

ACTION: On motion of Liahna Armstrong and second of Erica Libenow, the Board members unanimously approved the Quality Assessment and Performance Improvement Policy as amended to include a patient and family member to serve on the QI Council.

ACTION: On motion of Erica Libenow and second of Liahna Armstrong, the Board members unanimously approved the 2018 Quality Assessment Performance Improvement Plan.

The Board members reviewed the CEO report with Julie Petersen. Julie Petersen introduced the new Director of Rehab Visions, Marcus Jaffe. Jack Schwartz gave an update on the OneSource conversion noting that there are still some unresolved issues, but that staff were overall doing well with the new program. Julie Petersen gave an update on the Radio Hill Phase 1 project, noting that the project is out to bid and is anticipated to be completed in June. She presented the timetable for building out a suite on the first floor of the Medical Arts Center. Julie announced that she is planning to invite Health Department staff to present county health data at a future Board meeting and that the Public Hospital District No. 2 Commissioners will be invited to attend the meeting. She reported that the hospital is looking into contracting with a cabulance service to assist with the transporting of patients.

Carrie Youngblood reported that the new employee survey, Tiny Pulse, is going very well and KVH employees seem to like the survey process, especially the part where they can compliment peers via the “Cheers” portion of the survey.

The Medical Executive Committee recommendation for provider appointments and reappointments was moved to executive session.

The Board members reviewed the Chief Medical Officer report. Lisa Potter presented an overview of phase 1 for a KVH Dermatology service.

Libby Allgood reported financials for January, noting that a very busy month for all departments resulted in strong revenue. Liahna Armstrong reported that the Finance Committee met to review the financials for January.

The Board members reviewed the operations report with Vicky Machorro, Carrie Barr, and Rhonda Holden. It was noted that staff are overall doing quite well with the Cerner program and process.

8. **Education and Board Reports:**

Julie Petersen announced that she and Bob Davis are planning to attend the AHA annual membership meeting in Washington, D.C., on May 6-9, 2018, and she encouraged any other interested Board members to attend as well.

9. **Old Business:**

None.

10. **New Business:**

None.

11. **Articles and Communication:**

The Board members reviewed the various clippings and correspondence items. At 8:15 p.m., President Altman announced that there would be a 10-minute recess followed by a 60-minute executive session regarding personnel and real estate. RCW 42.30.110(b)(g) He stated that there would be action after the executive session.

At 9:14 p.m., the meeting was reconvened into open session.

ACTION: On motion of Erica Libenow and second of Bob Davis, the Board members approved the initial appointments for Dr. Stacey Black, Dr. Arun Chhabra, Dr. Ram Nandigam, Marquette Washington, ARNP, and Jocelyn Judd, PA-C; and the reappointments for Dr. Phillip Menashe, Dr. John Anderson, Dr. Norman Shively, Dr. Lawrence Bub, Dr. John Hwang, Dr. David Stepanek, Dr. John Arias, and Dr. Nancy Wells as recommend by the Medical Executive Committee. Commissioner Roy Savoian abstained.

With no further action and business, the meeting was adjourned at 9:20 p.m.

CONCLUSIONS:

1. Motion passed to approve the Board agenda.
2. Motion passed to approve the Consent Agenda.
3. Motion passed to approve the Quality Assessment and Performance Improvement Policy as amended to include a patient and family member to serve on the QI Council.
4. Motion passed to approve the 2018 Quality Assessment Performance Improvement Plan.
5. Motion passed to approve the initial appointments and reappointments as recommended by the Medical Executive Committee.

Respectfully submitted,

Franki Storlie/Erica Libenow
Executive Coordinator/Secretary, Board of Commissioners