

MEETING MINUTES RECORD

Meeting: Board of Directors

Date: September 26, 2019 Location: Conference Center Start time: 6:30 pm Adjourn time: 8:05 pm

Members present: Steve O'Neill, Lynn Clayton, Charlie Mandile, CC Linstroth. Jessica Peterson White, Bob Shepley, MD, Sarah Carlsen, Pete Sandberg

Members excused: Fred Rogers

Members absent:

Staff Present: Steve Underdahl, Jerry Ehn, Scott Edin, Laura Peterson, Betsy Spethmann, Vicki Steven, Lisa Lang (Imaging), Bobbi Jenkins (recorder)

Others present: Brad Ness (City), David Emery (LWV)

Issue/Problem	Discussion/Conclusions	Action	Follow-up/Resolution																								
1. Call to Order and Approval of the Agenda	<p>The meeting was called to order by Steve O'Neill at 6:30 pm. There will be a Closed Session at the end of the regular session this evening.</p> <p>Items from the consent agenda were included on the portal:</p> <ul style="list-style-type: none"> • Meeting minutes (approved) <ul style="list-style-type: none"> ✓ 08/29/19 Board Meeting • Meeting minutes (accepted) <ul style="list-style-type: none"> ✓ 08/29/19 Community Relations Committee • 2020 Board Meeting Schedule • Annual Review of Quality & Performance Improvement Policy 	A motion was made by Lynn Clayton and seconded by Sarah Carlsen to approve the agenda as presented. Motion carried.	Closed.																								
2. Reports																											
• Hospital Chief of Staff Report	No report.	Information only.	Closed.																								
✓ Motion to Approve Applications for Medical Staff Membership/ Privileges	<p>Dr. Jeff Meland presented the applications for membership and privileges in Dr. Holt's absence (copies included on the portal). There were no issues with any of the medical staff files.</p> <p><u>Appointments:</u></p> <table border="1" data-bbox="386 1434 909 1575"> <thead> <tr> <th>Prac #</th> <th>Privilege</th> <th>Category</th> </tr> </thead> <tbody> <tr> <td>4005</td> <td>FM & OB</td> <td>Affiliate</td> </tr> <tr> <td>4003</td> <td>Anesthesia</td> <td>Active</td> </tr> </tbody> </table> <p><u>Reappointments</u></p> <table border="1" data-bbox="386 1617 909 1948"> <thead> <tr> <th>Prac #</th> <th>Privilege</th> <th>Category</th> </tr> </thead> <tbody> <tr> <td>3927</td> <td>Anesthesia</td> <td>Active</td> </tr> <tr> <td>3884</td> <td>Oral & Maxillofacial Surgery</td> <td>AH:D</td> </tr> <tr> <td>3723</td> <td>Anesthesia</td> <td>Affiliate</td> </tr> <tr> <td>3028</td> <td>General Surgery</td> <td>Active</td> </tr> </tbody> </table>	Prac #	Privilege	Category	4005	FM & OB	Affiliate	4003	Anesthesia	Active	Prac #	Privilege	Category	3927	Anesthesia	Active	3884	Oral & Maxillofacial Surgery	AH:D	3723	Anesthesia	Affiliate	3028	General Surgery	Active	A motion was made by Pete Sandberg and seconded by Jessica Peterson White to accept the recommendations from the Medical Executive Committee. Motion carried.	Closed.
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Issue/Problem	Discussion/Conclusions				Action	Follow-up/Resolution
	3503	Telemedicine	Telemedicine			
	7244	Radiology	Affiliate			
	3755	Cardiology	Affiliate			
	3803	Anesthesia	Active			
	3799	Oral & Maxillofacial Surgery	Affiliate			
	3659	Teleradiology	Telemedicine			
	7450	Oral & Maxillofacial Surgery	Affiliate			
	3923	Behavioral Health	AH:I			
	3757	H&P	H&P			
	3924	NP	AH:I			
	<u>Provisional Status</u>					
	<u>Prac #</u>	<u>Privilege</u>	<u>Adv</u>	<u>Extend</u>		
	3924	AH:I	X			
	3964	AH:I	X			
	3959	Telemedicine	X			
	<u>No Action Required</u>					
	<u>Voluntary Resignations</u>					
	<u>Prac #</u>	<u>Privilege</u>	<u>Category</u>			
	3778	Emergency Medicine	Active			
3. Strategic Discussion	Defer to Closed Session.				None.	Closed.
4. Presentations/ Discussion/ Action Items						
<ul style="list-style-type: none"> Approval to replace C-arm and Ultrasound machines 	<p>Lisa Lang, Director of Diagnostic Imaging, reviewed a request to replace the general-purpose ultrasound system and the C-Arm (copy of slides and supporting documentation was included on the portal). The ultrasound system is beyond life expectancy resulting in limited diagnostic quality exams that can be performed. Evaluation of replacement options included two major vendors on Premier Group Purchasing. Trade in of the old unit was incorporated in the RFP. The budgeted replacement of the unit</p>				<p>A motion was made by Pete Sandberg and seconded by Lynn Clayton to approve:</p> <ul style="list-style-type: none"> GE Logiq E10 ultrasound machine at a capital cost of \$147,782.20, and GE OEC Elite C-arm at a capital cost of \$194,995.50. Motion carried. 	Closed.

Issue/Problem	Discussion/Conclusions	Action	Follow-up/Resolution
	<p>included in the Critical 1 budget was \$200,000. The total capital cost from GE Logiq is \$147,782.20.</p> <p>The C-Arm system is beyond life expectancy and beyond end of support. Limited diagnostic quality images, increased repairs and at high risk for limited to no part availability.</p> <p>Replacement of unit necessary to provide diagnostic images for surgical and injection clinic cases. Evaluation of replacement options included two major vendors on Premier Group Purchasing. Budgeted replacement Critical 1 C-arm unit is \$225,000. The total capital cost of the C-Arm unit with GE OEC Elite is \$194,995.50.</p>		
<ul style="list-style-type: none"> Enterprise Risk Management Update 	<p>Laura Peterson updated the board on the Enterprise Risk Management (ERM) program status (copy of slides included on portal). The admin team, board and leadership team have been trained on ERM, and are currently identifying risks. Laura is facilitating discussions with departments that request her assistance. The next Board update will be in December.</p>	Information only.	Closed.
5. Executive and Committee Reports			
<ul style="list-style-type: none"> CEO Report 	<p>Steve Underdahl reported on the following:</p> <p><u>Strategic</u></p> <ul style="list-style-type: none"> Continue to wait for feedback from Sanford Health regarding details related to an EHR. The Northfield clinic and OB construction project has launched. The groundbreaking ceremony was held on September 12th. Many board members and City staff attended the event. Renovation is underway at the Faribault clinic. The move-in is scheduled on October 16-17. Patient-facing technology group is making progress. The name is being changed to "customer facing technology". There are two general categories: convenient priorities, such as self-scheduling, appointment reminders and concierge patient support center, and clinical 	Information only.	Closed.

Issue/Problem	Discussion/Conclusions	Action	Follow-up/Resolution
	<p>interaction priorities, including MyHealth information/capability, Evisits and virtual care. The team is working on a vision statement.</p> <ul style="list-style-type: none"> • More to come in the near future on Social Determinants of Health. • Working toward “friction-free – getting to say yes” • Strategic Relationships: <ul style="list-style-type: none"> ✓ Working on PERA White Paper edits with other municipal facilities. ✓ Collegial discussions with North Memorial. • Significant positive financial impact the last two months are attributed to good expense control. Labor and supply costs controls are key. <p><u>Operations</u></p> <ul style="list-style-type: none"> • August was a better month financially than anticipated. Q3 and Q4 will drive the financial results for the year. • The ED has focused on a project for the past few months to ensure we get paid for what we do. So far, they have found \$170,000 of missed or incomplete charges. Currently developing a plan for expanding this work to other departments. • The Mountlake ACO board meeting was held earlier this week. Performance metrics are trending well. We have one more year in Track 1 where we benefit from shared savings without risk. <p>There was board discussion regarding employee morale related to expense control and productivity tools used. The tools help align how busy we are with the staff needed. Important that we are proactive in our thinking and educate/communicate with leaders and staff to help everyone understand this new environment.</p> <p><u>Policy</u></p> <ul style="list-style-type: none"> • Calm before the storm. Anticipate a lot of discussion related to policy. 		
<ul style="list-style-type: none"> • Financial Report 	<p>Scott Edin reported on the August financials: <u>August Key Drivers</u></p>	Information only.	Closed.

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	<ul style="list-style-type: none"> • Ambulance runs were 12% over budget • Home Health visits were 2% over budget • Cancer Care & Infusion Center were 5% over budget • Inpatient days were 28% under budget • Outpatient visits were 8% under budget • Surgery cases were 15% under budget <p>August 2019 Financial Outcomes</p> <ul style="list-style-type: none"> • Net operating revenues were \$849K under budget • Operating expenses were 314K under budget • Net operating income was \$119K (\$535K under budget) <p>Payer mix was favorable, and overall we did a nice job of controlling expenses (\$314 under budget).</p>		
<ul style="list-style-type: none"> • Quality Committee Oral Report 	The Quality Committee met prior to the Board meeting this evening. A report, including the Board Quality Dashboard will be presented at the October board meeting.	Information only.	Closed.
6. Roundtable, Announcements and Questions	There were no roundtable, announcements or questions.	None.	Closed.
7. Pending Items	There were no pending items.	None	None.
8. Closed Session	The board concluded open session business at 7:45 pm. The Closes Session: <i>Strategic Planning (pursuant to Minn. Stat 144.581, subd 5 for the purpose of discussion of marketing activity related to the hospital's competitive position with other health care providers that offer similar goods and services.</i>	A motion was made by Lynn Clayton and seconded by Sarah Carlsen to go into Closed Session. Motion carried.	Closed.
9. Adjourn	The meeting was adjourned at 8:05 pm.	A motion was made by Jessica Peterson White and seconded by CC Linstroth to adjourn the meeting. Motion carried.	Closed.