



COOK COUNTY HOSPITAL DISTRICT
BOARD MINUTES FOR JULY 20, 2017

Call to Order – Kay Olson called the meeting of the Cook County Hospital District Board of Directors to order on July 20, 2017 at 8:59 a.m. in the meeting room.

Adjourn to Closed Session – The Board recessed from the regular session to a closed session for the Quality Improvement/Peer Review Report and Medical Staff Report.

Closed Session Summary - The Quality Improvement/Peer Review Report from June 2017 and the Medical Staff Report from June 2017 were discussed.

Reconvene - The North Shore Health Board reconvened in regular session at 9:28 a.m.

Roll Call

Members Present: Sharon Bloomquist, Justin Mueller, Steve Nielsen, Kay Olson, and Randy Wiitala

Others Present: Kimber Wraalstad, Vera Schumann, Casey Bronikowski, Dr. Milan Schmidt (p), Sandra Barkley, Heidi Doo-Kirk (p), Rita Plourde (p), Robert Willis (p), Jennifer Dowden (p), Rory Smith (p), Josh Kostiuk (p), Darrin Pursley (p), Mark Bellesbach (p), Patrick Loughrin (p)

Approval of Agenda – J. Mueller made a motion to accept the Agenda for July 20, 2017, S. Nielsen 2nd, all ayes.

Public Comments: None

Approval of Minutes for June 22, 2017 – S. Nielsen made a motion to approve the minutes for June 22, 2017, with one correction. J. Mueller 2nd, all ayes.

Updates:

- a. **Clinic Board:** Rita Plourde discussed the funding for the Clinic and Federally Qualified Health Clinics, in general. The Clinic is currently undergoing their annual audit with the turnaround time for audit results being approximately three months. Sawtooth Mountain Clinic now has behavioral health counselors on staff and patients have really been utilizing this new service. Ms. Plourde commented the Clinic is working very hard to maintain this service during these uncertain funding times and provided an example for unique billing and reimbursement rules.

- b. **County Board:** Commissioner Heidi Doo-Kirk provided a County Board update. There was an applicant who was offered a job as a public health nurse replacing Allison Heeren's position, however they declined the position due to distance from Minneapolis. Ms. Doo-Kirk informed the board that the Highway Engineer resigned. We will be collaborating with Lake County in the interim. Ms. Doo-Kirk reported she attended a sex-trafficking conference.
- c. **North Shore Health Care Foundation:** Steve Nielsen stated that the Strategic Planning process for the Foundation has been extended to the end of the year.
- d. **Board Members:** None
- e. **Correspondence:** None

Board Presentation – Corporate Integrity Program – Jennifer Dowden. Ms. Dowden gave an overview of the Corporate Integrity Program and explained the process that provides employees access to the Corporate Integrity policies and procedures, and new employees are also provided with this information. This program provides guidance in reaching legal and ethical solutions to the challenges faced in daily work activities. The program also provides guidance to the resources available to ensure compliance with applicable laws and regulations as well as to report areas of concern. The standards of conduct serve to assist in defining our ethical principles. All employees are responsible to honor our Mission, Vision, and Values Statements. The Corporate Integrity Program is an essential element for organizations as fraud does occur among physicians, nurses, pharmacists and other medical professionals.

Old Business

- a. **Facility Update:** Ms. Wraalstad provided the board with a brief facility update; more information will be discussed later with Boldt representatives.
 - Change Order Review:** Change Orders were reviewed and discussed.
- b. **Works of Art Project:** Tim Young, who was participating in this project, has resigned so we are currently looking for another facility employee to participate in this project.
- c. **Culture Survey:** Bob Willis, Human Resources Director, presented information regarding the Organizational Culture Inventory (OCI) he completed which shows the culture and behaviors at North Shore Health. This process was compared to the attitude assessment survey conducted by Jeff Thompson several years ago. The OCI program used by Mr. Willis is used by many Fortune 500 firms and the U.S. Military. In order for our facility to guide and lead change, the current culture has to be identified. When this OCI was completed, it showed that our culture is constructive, passive/defensive, and aggressive/defensive. Mr. Willis reviewed what these cultures mean. The short video "Who Moved My Cheese" was presented. Mr. Willis has implemented a Leadership Development Program to assist the Department Leaders in directing and supporting culture change. The Program includes use of the Myers-Briggs Type Indicator (MBTI), Thomas-Kilmann Conflict Mode Inventory, Situational Leadership Model and Daniel Goldman's Emotional Intelligence. Mr. Willis provided several examples of "type" preferences using Ms. Wraalstad, Ms. Schumann and he as examples. Leaders have preferred "type" and are encouraged to learn to work with each other by understanding the other individuals "type" preferences. It was suggested the Board be included in the Talent Management section of the 2017 Strategic Plan. Mr. Willis agreed to provide the MBTI to the Board Members and review their results at the August Board meeting.
- d. **Other:** No Report

Financial Reports

Vera Schumann presented the June 2017 Executive Summary and Financial Report. North Shore Health generated loss from operations of \$177,134 for the month of June, performing \$23,240 behind budget. Gross hospital patient revenues of \$1,247,216 are \$105,182 (9%) ahead of budget. Care Center revenues are \$31,332 (11%) less than budget for the month of June. With the non-operating income and tax levy monies, there was a net loss of \$136,941 for the month. June acute patient days of 25 are 2 or 9% greater than budget. Swing bed patient days of 44 are 9 or 17% less than budget. Care Center resident days of 964 are 56 days or 6% less than budgeted with occupancy at 87% compared to budget of 92%. Care Center days were budgeted according to Care Center phase 2 and 3 completion schedule at the time of budgeting. Completion dates have been significantly delayed. Volumes at or ahead of budget for the month are Emergency 20%, Colonoscopy 10%, PT/OT 6%, CT/MRI 56% and Ambulance 0%. Volumes behind budget are Observation 55%, Laboratory 7%, and Home Care 21%.

New Business

- a. **SISU Medical Systems and SISU Medical Solutions, LLC Membership:** North Shore Health has successfully migrated to St. Luke's Hospital and Citon for IT Network Host/Support. The membership with SISU had been maintained in case we needed further support. At this time, Kimber Wraalstad recommended that North Shore Health terminate our membership in SISU Medical Systems and SISU Medical Solutions, LLC, effective July 31, 2017. S. Bloomquist made a motion to accept Ms. Wraalstad's recommendation to terminate our membership with SISU, S. Nielsen 2nd, all ayes.
- b. **2017 Strategic Plan:** The 2017 strategic plan draft was reviewed and discussed. The addition regarding the Employee Recognition program requested during the June meeting was included in the plan. S. Nielsen made adopt the 2017 Strategic Plan as presented, J. Mueller 2nd, all ayes.
- c. **Collection Policy Review:** The Collection Policy, Financial Assistance Policy, Community Care Program, Uninsured Discount Policy, Bad Debt Collection Policy, Debt Collection Agency Policy, Debt Collection Litigation/Garnishment Policy, Zero Tolerance Policy and Patient Payment Plan Policy were reviewed by Ms. Schumann. Copies of the documents were provided to all Board members and it was noted North Shore Health works with Collection agencies that primarily work as health care collectors and adopt the Zero Tolerance Policy. The policies have been updated with our name change and 2017 poverty guidelines. J. Mueller made a motion to accept the updated policies, S. Nielsen 2nd, all ayes.
- d. **25 Questions – What is the intent of 25 questions?:** A lengthy discussion was held regarding the purpose of the 25 Question agenda item. It was agreed this agenda item provided a learning opportunity however it was questioned if this was the best use of Board time and if the questions and discussion would result in actionable items. Rather than eliminate the agenda item completely, it was suggested the question be generated from the Strategic Plan Action Items being reviewed that month. It was agreed to proceed using the Strategic Plan to generate the question.
- e. **Other:** Mr. Mueller reviewed the Minnesota Hospital Association Summer Trustee Conference he attended.

Management Report

The residents whose rooms were in the former 200 hallway were moved into the new 200 hallway on Monday, June 26. Even more exciting, we are now using our first household kitchen and getting a glimpse into how the household model will look and feel. The Engineer from the Minnesota Department of Health completed his survey on May 17 and we submitted documentation responding to his comments on May 31. A survey was anticipated from the Fire Marshal and the State Surveyors but after discussion between the offices, it was decided the two additional surveys were not necessary. An Open House to share the renovation progress will be held on July 28, 2017. Tours will include the new Ambulance Bay, Emergency Department, Hospital Rooms and the first Care Center Household. Postcards were sent to all Cook County Postal Customers and advertising will be placed in the Northern Wilds and the Cook County News Herald. A link to the poster is also on our website. The Avera e-Emergency System implementation is proceeding on schedule. Work is beginning on the 2018 operating and capital budget. The preliminary budget will be presented to the Board on November 16, 2017.

Construction Update –

Darrin Pursley and Josh Kostiuk from Boldt Construction were present to provide a construction update.

The Construction Progress Report for July 2017 was then presented. The following areas were highlighted and discussed in detail:

- Safety Risks and Concerns – None since the last meeting.
- Lost time – None
- Project Update
 - Phase 1 - Care Center (southeast and northwest)
 - No new update, continuing with punch list items.
 - Phase 2 - Care Center
 - Residents occupied on the Care Center 200 wing on 6-26-17. The remaining areas moved 6-27 through 6-30.
 - Phase 3 - Care Center
 - Selective demolition occurred from 7-5 to 7-7.
 - Mass demolition occurred from 7-10 to 7-18.
 - Concrete slab removal.
 - Begin installation of new shear wall foundations and underground plumbing.
 - Phase 1 - Hospital (Inpatient Wing)
 - Zone 1**
 - Substantially complete with punch list items.
 - Zone 2:**
 - Completed Trumpf installation of OR Lights and Boom and ceiling tile installations.
 - Phase 2 – Hospital (ER)
 - Completed installation of exterior brick for Ambulance Garage and new vestibule.
 - Completed all interior floor, wall and ceiling finishes.
 - Completed installation of sliding and swing doors.

- Completed all MEP finishes.
 - Installed the Trumpf exam lights.
 - Begin Pharmacy hood installation.
 - Temporary relocation of Clean Linen.
 - Completed construction and wiring of the Low Voltage System Server Room.
 - Completed Ambulance garage area.
 - Complete epoxy flooring. Concrete and asphalt paving @ the garage area the week of 7-31-17.
 - Area will be ready for the public open house on 7-28-17.
 - State inspection scheduled for 8-2-17.
 - Siemens CT installation planned for the week of 8-7-17.
- Sitework
 - Excavated and installed retaining wall @ 5th street and excavated partial retaining wall @ main entrance.
 - Complete final grade parking lot along 5th avenue.
- Main Entrance
 - Backfilled foundations and place finish grade topsoil along Care Center Phase – 1
 - Erected structural steel and roof deck @ new phase 1 foundations.
 - Tied in phase 1 roof area to existing roof area to improve waterproofing of the area.
- Planned work for August
 - Phase 1 and 2 - Care Center (southeast and northwest)
 - Continue to coordinate punch list Items as areas are available and convenient for Residents.
 - Phase 3 - Care Center
 - Complete installation of underground plumbing and new slab on grade concrete.
 - Begin erection of the new building shell.
 - Phase 1 – Hospital (Inpatient Wing)
 - **Zone 1 and 2:**
 - Assist in occupancy of the Hospital and OR areas.
 - Phase 2 – Hospital (Emergency Department)
 - Complete punch list and HVAC testing and balancing.
 - Install Siemens CT the week of 8-7.
 - Pharmacy Hood certification,
 - Complete epoxy floor finish in Ambulance Garage.
 - State occupancy inspection.
 - ED Department/Patient move.
 - Pharmacy Department move.
 - Phase 3H – Hospital (Radiology)
 - Interior demolition following patient move.

- Phase 4H – Hospital (Physical Therapy)
 - Interior demolition following patient move.

- Phase 6H – Hospital (Lab)
 - Start interior build-out following water tightness of area.

- Site Work
 - Complete final grading and seeding along 5th street and 5th avenue.
 - Complete curbing and install base coarse of asphalt @ parking lot area.
 - Complete 80' of retaining wall @ the main entry area.
 - Complete exterior concrete and asphalt paving @ ED area.

- Main Entrance Area
 - Demolition of patient rooms 7 & 8 and tunnel to allow phase 2 area construction.
 - Continue excavation and foundation installation.

- RFIs – 170 requests for information to the Architect, 3 RFIs open at this time
- ASIs – Twenty-four Architect's Supplemental Instructions
- RFPs – 97 requests for proposals
- Submittals – Log reviewed
- Risks/Opportunities – Reviewed
- Field Manpower – Jobsite total – 61
- Equipment Onsite – Reviewed
- Financial Update
 - Pay application #23 (06-01-2017 to 06-30-2017) for \$751,784.79 was approved on July 6, 2017 and is waiting to be paid.
- Change Orders – Thirteen Change Orders have been submitted and approved
- Contingency Usage – The contingency log was reviewed. The contingency amount has been fully used and exceeded.
- Communication Plan – The average Blog Site views are 13 per day.

Photos of the project and the project phasing were reviewed.

Adjourn

The regular meeting adjourned at 1:17 p.m.

Kay Olson
Chairman

Sharon Bloomquist
Clerk