

COOK COUNTY HOSPITAL DISTRICT BOARD MINUTES FOR MARCH 24, 2016

Call to Order —Kay Olson called the meeting of the Cook County Hospital District Board of Directors to order on March 24, 2016 at 8:59 a.m. in the meeting room.

Adjourn to Closed Session – <u>The Board recessed from the regular session to a closed session for the Quality Improvement/Peer Review Report, Medical Staff Report and Labor Negotiation Update.</u>

Closed Session Summary - The Quality Improvement/Peer Review Report, Medical Staff Report and Labor Negotiation Update from February were reviewed and discussed.

Reconvene - The Cook County Hospital Board reconvened in regular session at 9:32 a.m.

Roll Call

Members Present: Sharon Bloomquist, Howard Abrahamson, Kay Olson, Tom Spence, and Justin Mueller

Others Present: Kimber Wraalstad, Vera Schumann, Sandra Barkley, Casey Bronikowski, Dr. Milan Schmidt (p), Bridget Sobieck (p), Barb Heideman, Brian Larsen (p),

Approval of Agenda – J. Mueller made a motion to approve the agenda, T. Spence 2nd. All ayes.

Public Comments: None

Approval of Minutes for February 18, 2016 – Ms. Olson pointed out that on page 3, a sentence stated "September acute patient..." and this should read "February..." Also on page 3, under New Business, a. Public Health Purchase of Service Contract – ...charge amount was changed in 2016. This should read ...was changed in 2015. <u>T. Spence made a motion to approve the minutes of February 18, 2016 as corrected, J. Mueller 2nd. All ayes.</u>

Updates:

- **Clinic Board:** Dr. Schmidt provided an update in Rita Plourde's absence. The *What the Health* event took place on March 23, 2016. Dr. Schmidt stated that it was effective and fun and also, there was pie. The event is part of the 'Moving Matters' initiative with the goal to see the community become active and healthy.
- **County Board:** Heidi Doo-Kirk was not available for an update. Ms. Doo-Kirk, along with all of the Cook County Commissioners, was attending a Cross Borders session in Thunder Bay.
- **North Shore Health Care Foundation:** Barb Heideman began by reviewing the grants that the NSHCF has awarded most recently. The Cook County Emergency Services received a grant for \$3000.00 for their annual comprehensive training

- North Shore Health Care Foundation: Barb Heideman began by reviewing the grants that the NSHCF has awarded most recently. The Cook County Emergency Services received a grant for \$3000.00 for their annual comprehensive training program. The Cook County Human Services multi-disciplinary team training program received a grant for \$2200.00, and finally, Care Partners received a grant for \$8000.00 for core mission support as they begin to establish their own entity. There was a meeting with Sawtooth Mountain Clinic, Kay Olson, Kimber Wraalstad and Committee Members of NSHCF. The meeting was to explore opportunities for the foundation to support the two primary health care institutions. It has been decided that a series of informational meetings including the NSHCF, Sawtooth Mountain Clinic and North Shore Health to discuss the general challenges facing healthcare in particular, what we may face in Cook County, how the foundation may help, etc. The next obstacle is to establish meeting dates. Ms. Heideman will start coordinating with members of the meetings but stated that the next meeting may be held towards the end of April.
- **Board Members:** Sharon Bloomquist stated that she had a Cook County resident come to her with concerns that they were not able to receive certain lab tests here at Cook County Hospital, and needed to travel to Silver Bay, or further. There was a brief discussion explaining why this may be the case. It would be patient specific and dependent upon what the labs were ordered. For example, if a patient is having surgery and need a blood transfusion type and cross, that specific test must be completed at the facility or associated facility performing the surgery. Ms. Bloomquist inquired on what training our RN's would need once our chemo hood is installed. Bridget Sobieck, Director of Nursing – Cook County Hospital, replied that currently, there are no RN's that are certified because we do not offer the service. Once we are nearing the opportunity to offer that service, we can send a select few RN's to Duluth for the chemo certification. The selected RN's would take a class in Duluth, and then take the certification exam; the certification is a one day certification. They would also need to intern in the infusion center in Duluth and learn the pharmacist aspect and types of chemo involved. Ms. Olson spoke about the joint Hospital, Clinic and Foundation meeting that she attended. It was recommended that we 'tell our story', that we share how we got from here to there. Ms. Olson stated that the Board Members and employees should start thinking about how we began before the facility project, with the planning phase, and start to tell the story of how and why we are moving to where we are and where we are going.

• Correspondence: None

Board Presentation – Bladder Scanner Presentation – Bridget Sobieck, RN Ms. Sobieck demonstrated the bladder scanner. First, she shared the existing bladder scanner, a small hand-held device. The device was first purchased by the North Shore Health Care Foundation for the Care Center in 2007, with the Hospital and ER frequently borrowing it. It is used by gently rolling the hand-held device over a patient's bladder. The old device can only tell the volume on a very small digital screen and it is a very basic tool. The new machine also has a hand-held scanner; however, it is attached to a small LCD monitor. Ms. Sobieck stated that the new scanner has many more capabilities than the previous scanner. The new scanner will show you where the urine is within the bladder. Also, if a patient has a catheter, it will show the location of the tip of the catheter. The scanner has an internal memory which is utilized for patients who need multiple scans.

Old Business

- **a. 2015 Strategic Plan Update:** Strategic Initiative 2. Facilities was reviewed and discussed.
- **b. Facility Update:** The Facility Project is moving along in full swing. We are now to a point where we are beginning the relocate and phasing process. The Construction Management with a guaranteed maximum price (GMP) contracting method and the use of the contingency fund was discussed. A full Construction Update was provided later in the meeting.
- c. Other: None

Financial Reports

Vera Schumann presented the February 2016 Executive Summary and Financial Report. There was a loss in operations of \$82,978 for the month of February, performing \$15,681 ahead of budget. Gross hospital patient revenues of \$968,107 are \$17,987 or 2% greater than budget. Care Center revenues are running 20% greater than budget. With the non-operating income and tax levy monies, there was a Net Loss of \$13,083 for the month. February acute patient days of 6 are 18 days or 75% behind budget with Swing Bed days of 14 running 36 days or 72% behind of budget. Care Center resident days of 804 are 1% behind budget with occupancy of 75%. At or ahead of budget are Emergency Visits 6%, Colonoscopy 20%, CT/MRI 4%, and billable Ambulance Runs 25%. Below budget were the following areas: observation 36%, PT/OT modalities 18%, Laboratory 7%.

New Business

- **a. Ratification SEIU Contract:** The 2016-2017 SEIU contract has been ratified by their membership with the following changes: 2.25% wage increase, retroactive to the beginning of 2016, 2.0% increase for 2017, TMA wage was \$0.20 above base wage increased to \$0.50 above base wage, the On-Call wage increase from \$4.75 to \$5.00 per hour, there were some contract cleanup items such as the word 'Hospital' was altered to 'Employer'. T. Spence made a motion to accept the 2016-2017 SEIU Contract, H. Abrahamson 2nd. All ayes.
- b. Strategic Planning Topics: Mr. Spence stated he would like to restructure the Strategic Planning retreat and process. To date, the Board Members have listened to reports and information and then honed down to the areas that they defined as important. What the board has done to date does not always allow the Board to address their vision of the organization, come to consensus and then leave implementation to management. The current practice has been to set a lengthy list of goals at the board's yearly strategic planning session and then get monthly updates about the status of chosen initiatives. Mr. Spence commented with healthcare operating as a revolving door, he would like to receive more in-depth information on specific items. What the Board determines as topics of priority, Mr. Spence would then like to see Administration act accordingly by bringing in Speakers and working collaboratively on the priority Strategic Initiatives defined by the Board. Three topics that Mr. Spence would like to see addressed include: 1) Telemedicine: Telemedicine has taken off in several rural communities. We are one of the most rural hospitals in the Midwest. Implementing telemedicine would reduce the need for our residents to travel outside of our county. We had an examined forecast completed and it showed very clearly that telemedicine should be at the top of the list when considering new services.

2) Health Care Services for Seniors: The Economic Development Authority (EDA), and NSHCF recently commissioned a survey on assisted living. There is valuable information to be considered within the survey. If the EDA, NSHCF, the City of Grand Marais and Cook County are going to go ahead and discuss Health Care Services for Seniors; should we be at the table? We need to determine whether we have something to offer – Can we develop a model for Health Care Services for Seniors that is comprehensive and compliments other services offered in the County – or will those groups be duplicating services that we offer?

3) Marketing Initiative: When we are ready to fully open up and celebrate our expansion and remodel, we need to use this opportunity to celebrate and reintroduce to the community the services we have available. What can we do from June, 2017 through December, 2017 to re-introduce North Shore Health? Will we be on top of new concepts and new services when they are available so that people will *want* to come here rather than pass us by to head down the road? Ms. Olson requested Quality be added as a strategic item, which all agreed.

Management Report

A reception honoring Eleanor Waha as the Leading Age Minnesota's District B Volunteer of the Year was held on February 25, 2016 at Cook County Care Center. Since Eleanor was not able to attend the Leading Age reception in St. Paul on February 10, 2016, she was presented with the award, Cook County Hospital District Board Resolution and a Volunteer t-shirt. To Eleanor, the most meaningful gift was the necklace presented by the Residents and Employees thanking Eleanor for all of her service. The event was quite a success with well over 100 people at the Care Center to congratulate Eleanor on her well deserved award as the District B Volunteer of the Year! The educational sessions with Marilyn Oelfke, RN and Culture Change Consultant regarding Culture Change and the Household Model of care were quite successful. Many groups, including the Residents, Resident family members, Physicians, Employees (RNs, LPNs, NARs, Housekeeping, Dietary, Activities, Department Managers) and the Culture Change Group had the opportunity to meet with Marilyn to discuss care transformation. Marilyn spoke about the goal to change the environment of Care Centers to one where the Residents are in their "home" and direct the activities of their life. The goal is to become a facility where people choose to live rather than have to live. The CliftonLarsonAllen audit team was onsite March 7-11. 2016, to complete the audit fieldwork. The audit went well and at this time, the only proposed audit entries were related to PERA underfunding. The information to complete these entries did not become available until mid February when the PERA actuarial report was completed. At this time, there were no additional audit entries anticipated. The Registration Desk has expanded hours. Employees are at the Hospital Registration Desk from 7:00 a.m. until 8:30 p.m., seven days a week. In response the the Minnesota Coalition Against Sexual Assault report, "Medical Forensic Response in MN - How are we doing?", the Minnesota Attorney General is requesting information from all hospitals regarding the provision of forensic sexual assault examinations and subsequent billing practices.

Break for Lunch: 11:48 a.m.

Reconvene: 12:12 p.m.

Construction Update — Mike Ellingson and Mike Knudsen, Boldt; Chip Jacobs, FJJ and John Geissler, DSGW were present to provide a construction update. Shelly Peterson was present via the telephone. Mr. Ellingson and Mr. Knudsen presented the March 2016 Progress Report for the Building Project. The following areas were highlighted:

- Safety Risks and Concerns None this month
- Lost time None
- Project Update
 - Care Center (southeast)
 - Installed interior door frames
 - Started wall backing and drywall
 - Sprayed weather barrier
 - Started Fire Sprinkler rough-in
 - Completed electrical rough-in
 - Care Center/Hospital (northwest)
 - Poured concrete slab
 - Installed roofing
 - Completed wall sheathing
 - Started drywall lid
 - Started Fire Sprinkler rough-in
 - Started spraying weather barrier
 - o Site
 - Set new generator
 - Mezzanine
 - Framed the exterior walls
 - Installed the roof trusses and roofing
 - Set the air-handling units
 - Set electrical panels and transformers
 - o Boiler Room
 - Set the switchgear
 - Installed floor drain and sump
 - Completed owner training of new boilers
- Planned work for April 2016
 - Care Center (southeast)
 - Install backing and drywall
 - Start finished
 - Continue fire sprinkler rough-in
 - Care Center/Hospital (northwest)
 - Continue interior framing
 - Continue fire sprinkler rough-in
 - Begin mechanical in-wall rough-in
 - Begin electrical in-wall rough-in
 - Site
 - Begin hospital
 - Complete electrical wiring of the new generator
 - Mezzanine
 - Begin electrical panel rough-in
 - Begin mechanical ductwork installation

- o Boiler Room
 - Continue working on electrical panels
- RFIs 45 requests for information to the Architect, 5 RFIs open at this time
- ASIs Twelve Architect's Supplemental Instructions
- RFPs Eleven requests for proposals, 1-7 have been submitted and reviewed, others are waiting for pricing and review
- Submittals Log reviewed
- Risks/Opportunities Reviewed
- Field Manpower Jobsite total 27
- Equipment Onsite Reviewed
- Communication plan and blog site Reviewed
- Financial Update
 - Pay application #7 (02-01-2016 to 02-29-2016) for \$668,345.67 was approved on March 3, 2016.
- Contingency Usage The contingency log was reviewed in detail. Chip Jacobs from FJJ presented the detailed information requested at the last meeting regarding the dates for the code issues. After further discussion, Mr. Spence stated he had not further questions.

Adjourn

The regular meeting adjourned at 1:10 p.m.

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