



COOK COUNTY HOSPITAL DISTRICT
BOARD MINUTES FOR OCTOBER 20, 2016

Call to Order –Kay Olson called the meeting of the Cook County Hospital District Board of Directors to order on October 20, 2016 at 9:03 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, Medical Staff Report and Labor Negotiation Update.

Closed Session Summary - The Quality Improvement/Peer Review Report from August 2016 and Medical Staff Reports from August 2016 were reviewed and discussed. An update regarding Labor Negotiation was also provided.

Reconvene - The North Shore Health Board reconvened in regular session at 9:32 a.m.

Roll Call

Members Present: Kay Olson, Justin Mueller and Randy Wiitala

Others Present: Kimber Wraalstad, Vera Schumann, Casey Bronikowski, Sandra Barkley, Dr. Milan Schmidt (p), Steve DuChien (p), Heidi Doo-Kirk (p), Shelly Peterson (p), Josh Christensen (p), John Geissler (p), Rory Smith (p)

Approval of Agenda – J. Mueller made a motion to approve the Agenda, R. Wiitala 2nd, all ayes.

Public Comments: None

Approval of Minutes for September 15, 2016 – K. Olson made a motion to approve the minutes for September 15, 2016, J. Mueller 2nd, all ayes.

Board Presentation – Cook County EMS Update – Steve DuChien, EMT
Steve DuChien, Ambulance Director, provided a report to the Board. He stated that in his 30 years of service, he has seen the Ambulance Service change for the better. They went from providing a Basic Life Support (BLS) ambulance service with around 160 calls per year, to 30 years later, offering a BLS service and a part-time ALS (Advanced Life Support) service. Year-to-date in 2016, there has been 444 calls. Approximately 1/3 of the calls are transferred to Duluth. Even with the steady increase of calls per year, the number of Volunteer EMT's has declined. When a BLS transfer is paged, the expectation is for two EMT's to respond. When an ALS transfer is paged, two EMT's and either one Paramedic or one RN responds. Beginning in November, Mr. DuChien is providing an EMT class and

the idea is that the trainees will come to work with the North Shore Health Ambulance Squad. Mr. DuChien then spoke about the narcotic and opioid use escalating in our community. The Ambulance uses Narcan to counteract the effects of potential overdoses. There are written protocols in place for the use of Narcan. Part of the protocol includes the administration of Narcan with at least two individuals on scene in case the patient becomes agitated. Since the summer of 2016, there have been five overdoses in Cook County. Narcan is obtained by the pharmacy and the Ambulance Department tracks the use of the medication and when it needs to be replaced. Any patient who receives Narcan is required to be transported to a health facility for evaluation.

Updates:

- a. **Clinic Board:** Dr. Schmidt stated that the clinic is currently being surveyed by the Health Resources and Services Administration; this is the federal agency that provides the Clinics funding.
- b. **County Board:** Heidi Doo-Kirk stated that their levy is currently set the maximum amount for their levy at 19.9%. Cook County Public Health and Human Services had eleven child welfare cases over the last week. Ms. Doo-Kirk thanked North Shore Health continued cooperation, public awareness and preparedness.
- c. **North Shore Health Care Foundation:** Ms. Olson announced Barb Heideman has resigned from the North Shore Health Care Foundation.
- d. **Board Members:** Randy Wiitala introduced himself and expressed his appreciation for his appointment to the Board. Mr. Wiitala was welcomed as the representative for District 5.
- e. **Correspondence:**

Old Business

- a. **2016 Strategic Plan Update:** Strategic Initiative 1 - Quality and Initiative 2 – Access were reviewed and discussed.
- b. **Facility Update:**
 - o **Change Order Review** – Ms. Wraalstad reviewed the recent Change Orders in detail.
- c. **Works of Art Project:** This project was initiated by previous board member Tom Spence. Ms. Olson and Ms. Wraalstad will move forward and contact the Art Colony and Johnson's Heritage Post so the project is not forgotten.
- d. **Other:** None

Financial Reports

Vera Schumann provided the Board with the September 2016 Executive Summary and Financial Report. North Shore Health had an income from operations of \$7,725 performing \$98,002 ahead of budget. Gross hospital patient revenues of \$1,339,824 are \$321,850 or 32% greater than budget. Care Center revenues are at 9% ahead of budget. With the non-operating income and tax levy monies, there was a net gain of \$52,055 for the month. September acute patient days of 38 are 11 days or 41% ahead of budget with swing bed patient days of 61 running 9 days or 17% ahead of budget. Care Center resident days of 892 are 6% ahead of budget with occupancy of 80%. At or ahead of budget are Observation 9%, Emergency visits 22%, PT/OT 16%, Lab 45%, CT/MRI 78%, Home Health 0%, and Ambulance 52%. Behind budget is Colonoscopy 10%. Operating expenses are \$18,661 or 2% greater than budget. Areas with budget variances greater than 10% or in an amount greater than \$5,000 were reviewed. Year-to-date net income is \$1,052,002 with the year-to-date operating loss being \$60,623.

New Business

- a. **Unbudgeted Capital Equipment – Equipment Boom, OR:** The addition of an equipment boom and operating room lights for use in the new operating/procedure room space was reviewed. The use of an Equipment Boom would eliminate electrical, oxygen and vacuum lines running between the wall and patient and equipment and reduces the spaghetti of cords and tubing on the floor. There is a sixteen (16) week lead time for this equipment which is why the equipment purchase is being requested now versus being incorporated in the 2017 capital equipment budget. K. Olson made a motion to accept the recommendation to purchase the Equipment Boom Lights at the cost of \$45,181.75. J. Mueller 2nd. All ayes.
- b. **Unbudgeted Capital Equipment – Dish Machine:** The dish machine in the dietary department was purchase in 2003 and most recently has begun to malfunction. The many parts replacements will not be cost effective. The Dietary Department is requesting to purchase a new dish machine to be placed in the new dietary area. Marice Zimmer, Dietary Manager – recommends the purchase of a new dish machine at a cost not to exceed \$17,500. K. Olson made a motion to purchase the new dish machine for the Dietary Department. R. Wiitala 2nd, all ayes.
- c. **Other:** None

Management Report

Ms. Wraalstad briefly reviewed the topics included in the management report. Dr. Kelly Rhone, Medical Director, and Darcy Litzen, Client Development Officer, for Avera e-Emergency met with members of the Medical Staff, Bridget Sobieck, and Amy Lacina to share information about the e-Emergency telemedicine program. Feedback from those who attended the presentation was very positive and we are proceeding with ongoing discussions. The Helmsley Charitable Trust provides grants for organizations to implement the e-Emergency program and Ms. Litzen recommended North Shore Health submit a grant application when the grant cycle opens in late 2016 or early 2017. A grant will pay for equipment costs and a portion of the operating costs for three years. It generally takes four to six months following the receipt of a grant to complete implementation of the e-Emergency program. On Thursday, September 22, North Shore Health received notice that assets of Arrowhead Pharmacy were being sold. The pharmacy asset sale is scheduled to take place at the end of business day on Thursday, October 13, 2016, to Corey Malstom. This affects North Shore Health because of our contract with Arrowhead Pharmacy to provide our Pharmacy services. With the change in ownership, we are evaluating hiring the Pharmacists, DeeDee Larrock-Mugglely and Jill Kort, rather than contracting through a retail pharmacy. With our plans to provide chemotherapy, the large volume of medications many of our patients take and the increasingly complicated medication documentation process, the opportunity to hire the Pharmacists to provide great coverage can expand our services and provide greater assistance to the Physicians and Nursing Staff. We will directly contract with the Pharmacist during the next several months to allow for further review of options for obtaining Pharmacy coverage. Flu shots are available to all employees and are provided at no charge. Improving vaccination rates among health care workers is an important way to fight influenza infections overall and protect those most at risk. The 2017 renewal rates for health insurance from Blue Cross Blue Shield have been received. The rate increase for the VEBA plan is 19.5% for the next year. The actual experience rating is 28.9%, however, working with Blue Cross and removing the experience of two former members with large claims, the Northeast Service Cooperative (Service Coop) provided the calculated change in rates of 19.5%. In addition to the existing plan, the Service Coop is offering the same plan with the St. Luke's Health Plan. The program with the St. Luke's Health Plan will have a 10.4% increase. This year,

the Service Coop is allowing groups to offer dual option – the current CDHP 831 and the St. Luke's Health Plan without a penalty for maintaining two groups. The Insurance Committee has reviewed the renewal rates and other plan options with BCBS and has agreed both the current CDHP 831 and the St. Luke's Health Plan should be offered in 2017.

Construction Update –

Shelly Peterson, Josh Christiansen, and Josh Kostick from Boldt Construction and John Geissler from DSGW were present to provide a construction update. The Construction Progress Report for September 2016 was presented. The following areas were highlighted and discussed in detail:

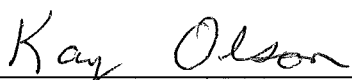
- Safety Risks and Concerns – No new reportable incidents
- Lost time – None
- Project Update
 - Phase 1 - Care Center (southeast and northwest)
 - Started Installation of Replacement Doors
 - Continue with Punchlist Items
 - Phase 1 - Care Center
 - Installed New Wall Footings and Foundations Walls
 - Installed New Underground Plumbing Rough-ins
 - Poured New Slab-on-Grade
 - Phase 1 - Hospital
 - Completed Installation of AVB Membrane
 - Continued Interior Metal Stud Installations
 - Continued Mechanical and Electrical In-Wall Rough-In
 - Continued In-Wall Backing Installations
 - Completed Footing Installations for Remaining Columns
 - Started Framing Bathroom Ceilings
 - Phase 1 – Hospital (Kitchen)
 - Completed Mechanical and Electrical In-Wall Rough-In
 - Completed Drywall Installations
 - Completed Taping and Finishing Installations
 - Completed Concrete Masonry Wall Separation
- Planned work
 - Phase 1 - Care Center (southeast and northwest)
 - Complete Puchlist Items
 - Phase 2 - Care Center
 - Install exterior wall framing & sheathing
 - Install roof trusses
 - Install roof sheathing and shingles
 - Install air-vapor barrier
 - Install exterior windows
 - Start installation of interior stud walls
 - Start mechanical, electrical and plumbing in-wall rough-ins
 - Phase 1 - Hospital
 - Complete demolition of existing 300 wing with exception to existing corridor
 - Complete roofing installations for Hospital Phase 1
 - Set Air Handling Unit #1
 - Continue interior stud wall framing installations

- Continue mechanical, electrical and plumbing in-wall rough-ins
- Continue in-wall blocking installations
- Continue framing bathroom ceilings
- Start drywall installations
- Install exterior aluminum windows
- Phase 1 – Hospital (Kitchen)
 - Install air handling units 2 & 5
 - Complete roofing installations for Hospital Phase 1
 - Install walk-In cooler & freezer
 - Install new kitchen hood
 - Install interior stud walls for Multi-Purpose Room
 - Complete drywall installations at South Corridor and Multi-Purpose Room
 - Install fiberglass reinforced wall panels
 - Install quarry tile and coved quarry tile base within walk-in cooler/freezer and kitchen
 - Install ceiling grid
 - Complete taping, finishing and painting installations
 - Start installation of new kitchen equipment
 - Demolition of hospital rooms 8 & 9
 - Continue installation of new footings for Main Entrance Vestibule
 - Continue installation of steel roof trusses at Main Entrance Vestibule
- RFIs – 113 requests for information to the Architect, 1 RFIs open at this time
- ASIs – Fifteen Architect’s Supplemental Instructions
- RFPs – 44 requests for proposals
- Submittals – Log reviewed
- Risks/Opportunities – Reviewed
- Field Manpower – Jobsite total – 39
- Equipment Onsite – Reviewed
- Financial Update
 - Pay application #13B4 (08-01-2016 to 08-31-2016) for \$54,364.20 was approved on October 6, 2016 and is waiting to be paid.
 - Pay application #14 (09-01-2016 to 09-30-2016) for \$586,807.67 was approved on October 6, 2016 and is waiting to be paid.
- Contingency Usage – The contingency log was reviewed in detail
- Communication Plan – 24 Notes from Boldt have been sent and the average Blog Site views are 16.8 per day.


Photos of the project and the project phasing were reviewed.

Adjourn

The regular meeting adjourned at 12:00 p.m.



 Chairman



 Clerk