



**ESTES PARK HEALTH
BOARD OF DIRECTORS'
Meeting Minutes – May 18, 2020**

Board Members in Attendance:

Dr. David Batey, Chair
Ms. Sandy Begley, Vice Chair (via webinar)
Dr. Monty Miller, Treasurer
Ms. Diane Munro, Secretary
Mr. William Pinkham, Member-at-Large
Dr. Steve Alper, Member Elect

Other Attendees:

Mr. Vern Carda, CEO
Mr. Tim Cashman, CFO
Ms. Pat Samples, CNO
Mr. Gary Hall, CIO (via webinar)
Mr. Randy Brigham, CHRO
Dr. John Meyer, CMO (via webinar)
Dr. Nicholas Mize
Dr. Scott Chew
Dr. Amanda Luchsinger (via webinar)
Ms. Leslie Roberts, Emergency Department Director (via webinar)
Ms. Lesta Johnson, Quality Director (via webinar)
Ms. Mandy Feldman, Physician Clinics Director
Ms. Barbara Valente, Urgent Care Director (via webinar)
Mr. Alan Omland, IT (via webinar)
Mr. Don Shelley, IT (via webinar)
Ms. Sarah Sheppard, Circuit Rider LLC (via webinar)
Mr. Kevin Mullin, Executive Director, Estes Park Health Foundation (via webinar)
Ms. Peggy Savelsberg, Executive Assistant, Estes Park Health Foundation (via webinar)

Community Attendees (via webinar):

Dr. Larry Leaming, Bill Solms, Aaron Alberter, Michael Costanzo, Wendy Rigby, Sandy Chockla, Patrick Martchink, Mary Ann Franke, Belle Morris, James and Gail Cozette, Andy Selig, Sharon Coleman, Donna McCleary and Alice Cooper

1. Call to Order

The Board meeting was called to order at 4:01 p.m. by Dr. Batey, Chairman of the Board of Directors; there was a quorum present. Notice of the Board meeting was posted in accordance with the SUNSHINE Law Regulation.

2. **Approval of Agenda**

Dr. Miller motioned to approve the agenda as submitted. Mr. Pinkham seconded the motion, which carried unanimously.

3. **Public Comments on Items Not on the Agenda and Thanking Monty Miller for his Service**

Dr. Leaming thanked Dr. Miller for his exceptional leadership, service and dedication to EPH.

4. **General Board Comments and Farewell Comments and Thanking Monty Miller for his Service**

Dr. Miller thanked everyone and expressed his appreciation to the Board, administration and hospital personnel for their efforts in moving the organization forward with numerous initiatives driven by the strategic plan that was implemented during his tenure on the Board.

Each Board member thanked Dr. Miller for his service and the tremendous impact he made as a representative for EPH.

5. **Swearing In Elected Board Members, Election of Board Officers**

Ms. Diane Muno, Mr. Bill Pinkham and Dr. Steve Alper were sworn in as Directors for the EPH Board of Directors.

The following recommendation was made for the Board Officer positions:

Chairman = Dr. David Batey

Vice Chair = Ms. Sandy Begley

Treasurer = Dr. Steve Alper

Secretary = Ms. Diane Muno

Member-at-Large = Mr. Bill Pinkham

Mr. Pinkham motioned to approve the Board Officer positions as outlined above. Dr. Alper seconded the motion, which carried unanimously.

6. **Introduction of Pat Samples, Interim CNO**

Mr. Carda introduced Ms. Pat Samples, Interim CNO to the Board.

7. **Consent Agenda Items**

Ms. Muno motioned to approve consent agenda items 7.1.1, 7.1.2, 7.1.3, 7.1.4 and 7.2 as presented. Mr. Pinkham seconded the motion, which carried unanimously.

8. **Presentations**

8.1 **May 5, 2020 Estes Park Health Board Elections Update**

The election was very positive and had a strong turnout. Challenges that arose during the process were mostly related to work-from-home closures of offices, limited staffing such as newspapers and County officials working remotely.

One (1) additional UOCAVA (Uniformed and Overseas Citizens Absentee Voting Act) ballot was received after election day and before the end of the day on May 13. Therefore, one additional vote was registered for the following candidates: Monty G. Miller (826), Aaron Alberter (673), and Stephen Alper (943). This change will be noted on the form for the Canvass Board to certify but does not change the outcome of the election.

8.2 COVID-19 Status Update

Mr. Hall, Dr. Meyer, Dr. Luchsinger and Ms. Samples updated the Board on the following items:

- EPH service lines, while challenged via COVID-19, remain open and committed to servicing the Estes valley.
- COVID-19 hot line remains open
- EPH has dedicated many hours to preparing for a first and second wave of COVID-19 and are completing the following activities:
 - Impact of RMNP opening May 27
 - EPH clinic is opening and surgeries are reconvening
- CDC is granting permission to allow one visitor to enter with each surgical patient
- COVID-19 testing for symptomatic patients is taking place on Mondays, Wednesdays, and Fridays
- Three negative pressure rooms are being added to the Emergency Department

8.3 COVID-19 Possible Financial Impacts on Estes Park Health

Mr. Carda stated that the mission during the coronavirus pandemic is to keep Estes Park Health strong so that it can continue to effectively serve the healthcare needs of the community and visitors.

Keeping Estes Park Health strong means not only ensuring we are financially sound, but it also means preserving one of our most important assets, which is our human resources. In particular, physicians, healthcare providers, and all staff that support the operations so that we can continue to provide outstanding patient care activities and strive to live our Mission, Vision & Values.

Most Estes Park Health (EPH) revenue streams including inpatient revenues and outpatient revenues have been significantly reduced or as is the case with elective surgeries halted via COVID-19. This rapid shutdown in revenue streams has resulted in fiscal challenges for EPH.

EPH must take action to reduce operational expenses and take action to jumpstart patient visits in the clinic and open elective surgeries. If we are successful in expense reduction and providing for unmet healthcare needs to community members, we will navigate this economic downturn in a financially responsible manner while maintaining key services until operational volumes return to previous levels.

To accomplish financial recovery while maintaining the capacity to deliver key services, EPH will utilize a phased “preservation approach.”

This is the alternative to making significant workforce cuts and/or utilizing other drastic program, contract, or expense reductions to accomplish EPH financial recovery. Our phased preservation approach will give us some time to evaluate local economic recovery and how the healthcare system will need to evolve.

From the onset of the pandemic, EPH has focused on preserving its cash reserves. So, although income from operations is important, EPH believes that days cash on hand in this situation is the most important measure. Therefore, EPH will strive to stay above 90 days cash on hand.

Maintaining greater than 90 days cash also means we will remain in compliance with our loan covenant requirements.

EPH will utilize a phased preservation approach to keep cash reserves at or above 90 days with the first phase concentrating on:

- Examine departmental level expenses and implement cost savings
- Examine organizational contracts and implement cost savings
- Initiate recovery and restarting of revenue streams including elective surgery

8.4 Urgent Care Center Status Update

Opening day is scheduled for May 27, pending any delays from the State. The Certificate of Occupancy has been received and staff training is underway. A sneak peak video was recorded last week and will be released soon.

8.5 Alarado Outpatient Clinic Status Update

The move in date for the Specialty Clinic and the Rehabilitation department is scheduled for May 28, with an opening date scheduled for June 1.

8.6 Chief Nursing Officer Report

Ms. Samples provided a brief update on her first few weeks at the organization.

8.7 Chief Human Resource Officer Report

Engagement scores from 2/2020

▪ Employee (75%)	<u>2018</u>	<u>2019</u>
Overall engagement	3.99	4.04
▪ Physician (EPH 85%)	<u>2018</u>	<u>2019</u>
Overall engagement	3.78	4.17

Urgent Care Staffing

Positions filled; special New Employee Orientation sessions were conducted

COVID-19 related items

- Employee support
 - Modified PTO/ESL plan to allow access to accrued hours more easily
 - Exposure shelter availability at YMCA
 - Childcare resources at YMCA
 - Virtual stress management sessions with local EAP provider
- Expense reduction and monitoring
 - Reduce/eliminate contract labor
 - Re-assess all current posted openings

Living Center Administrator

Matt Gordon, the new Living Center Administrator begins 05.26.20.

8.8 Clinical Quality Report

Patient Safety

- The Living Center continues to monitor falls

- Inpatient Medication Management
- COVID-19 training
- EPH Weekly News Safety Corner
- Medication scanning, hand hygiene
- Good Catch Award: 1Q20 Lab and HHC staff

Performance Improvement

NRC

- CAHPS surveys for Inpatients and Home Health Care
 - Implementation complete
 - Data now available
- Real time feedback for Emergency Department and all Outpatient Services including Physician's Clinic
 - Good feedback received with increase in comments compared to Press Ganey
 - Leaders learning to use the tool
- Colorado Health Care Policy and Financing (HCPF) plan for Hospital Transformation Program
 - Program has been put on hold due to COVID-19 priorities
 - Six Measures have been identified and approved by SLT

DNV Survey and Plan of Correction

- Survey went well overall
- 1 NC-1 nonconformity requiring submission of evidence of correction
- 9 NC-2 condition level tags to be reviewed at the next survey March 2021
- ISO Stage 1 Audit Report expected for ISO certification in 2021

8.9 Colorado End of Life Options Act Policy Review

Dr. Batey reviewed the Tele Town Hall Board meeting on May 13. The Board reviewed its current policy stamen and decided to retain the current policy statement.

The following is a recap of information covered at the May 13 meeting.

- Estes Park Health offers patients a full range of end-of-life journey options including services addressing:
 - Colorado Advance Directive
 - Pain Management
 - Palliative Care
 - Hospice
 - Colorado End of Life Options Act
- EPH medical staff who may have direct involvement in CEoLOA activities (Primary Care and potentially involved specialties) can:
 - Provide information on CEoLOA
 - Provide CEoLOA referrals if requested
- EPH CEoLOA Policy does not permit self-administration of aid-in-dying medication on Estes Park Health premises including:
 - The Emergency Department
 - The Inpatient Hospital
 - The Estes Park Health Living Center (EPHLC)

- EPHLC is a skilled nursing facility whose physical plant hinders patient privacy in self-administration of aid-in-dying medication

8.10 Public Health Centered Care Committee

Dr. Chew updated the Board on the Public Health Centered Care concept and how it differs from the Patient Centered Care concept.

The Public Health Centered Care Committee is recommending that EPH adopt philosophies proposed by the University of Pittsburgh and by the State of Colorado to develop policy and procedure to guide the organization in its transition to Patient Centered Public Health.

EPH's Public Health Centered Care Triage Team will consist of:

- An ethics or palliative care expert
- An attending physician familiar with critical care
- A representative of the nursing staff or in case of scarcity in this regard a representative of the administration

Note: As a smaller institution, identifying 3 individuals from the institution not directly involved in the initial care of specific patients can be difficult.

When is the Public Health Centered Triage Team activated?

Minimum Operating Capacity (MOC):

- The MOC is initially predetermined by the Triage Team and is based on available human resources, medication resources, and medical intervention resources.
- The MOC is fluid and may be altered if these resources change, but in general it is important to have the MOC defined in advance for any crisis.

After MOC has been met, and triage has begun:

- Daily reassessments of patients, patient load, and allocation of resources must be looked at by the Triage Team
- Calculations of SOFA must be recalculated, and reallocation of resources for care with the maximal benefit as a goal.

An official policy will be presented at the June Board meeting for review and approval.

9. Operations Significant Developments

9.1 Executive Summary

No report.

10. Medical Staff Credentialing Report

Ms. Muno motioned to approve the Medical Staff Credentialing report as submitted. Ms. Begley seconded the motion, which carried unanimously.

11. Review any Action Items and Due Dates

None.

12. Potential Agenda Items for June 29, 2020 Regular Board Meeting

- COVID-19 Status Update
- Colorado End of Life Policy Approval

- Public Health Centered Care Policy Approval

13. Adjournment

Mr. Pinkham motioned to adjourn the meeting at 6:36 p.m. Dr. Alper seconded the motion, which carried unanimously



David M. Batey, Chair

Estes Park Health Board of Directors