Agenda

Estes Park Health Board of Directors' Regular Meeting

Tuesday, January 26, 2020 4:00 - 6:00 pm Board Meeting

Estes Park Health, 555 Prospect Avenue, Estes Park CO 80517

Timberline Conference Room / https://attendee.gotowebinar.com/register/4024150297851195919

Regular Session			Procedure	Presenter(s)			
1	Call to Order/Welcome	1	Action	Dr. David Batey			
2	Approval of the Agenda	1	Action	Board			
3	Public Comments on Items Not on the Agenda	5	Information	Public			
4	General Board Member Comments	5	Information	Board			
5	Consent Agenda Items Acceptance:	2	Action	Board			
	5.1 Board Minutes						
	5.1.1 2021 EPH Board of Director's Regular Meeting Schedule						
	5.1.2 Board Special Executive Session Meeting Minutes December 7, 2020						
	5.1.3 Board Regular Meeting Minutes December 8, 2020						
	5.1.4 Board Special Executive Session Meeting Minutes December 9, 2020						
	5.1.5 Board Special Meeting Minutes December 10, 2020						
	5.1.6 Board Special Executive Session Meeting Minutes December 14, 2020						
	5.1.7 Board Special Executive Session Meeting Minutes December 22, 2020						
	5.1.8 Board Special Executive Session Meeting Minutes December 28, 2020						
	5.1.9 Board Special Executive Session Meeting Minutes January 11, 2021						
	5.1.10 Board Special Executive Session Meeting Minutes January 14, 2021						
	5.1.11 Board Special Executive Session Meeting Minutes January 18, 2021						
6	Presentations:						
	6.1 Estes Park Health - Current Status and 2021 Outlook	10	Discussion	Mr. Vern Carda			
	6.2 Estes Park Health Covid-19 Status Update	10	Discussion	Mr. Gary Hall, Ms. Pat Samples, Mr. Guy Beesley			
	6.3 Chief Operating Officer Report	10	Discussion	Mr Gary Hall			
	6.4 Resolution to Close the Estes Park Health Living Center	60	Discussion	Dr. David Batey			
7	7 Strategic Operations and Significant Developments:						
	Goals, Accomplished, Next Actions, Schedule, Issues						
	7.1 Executive Summary - Significant Items Not Otherwise Covered	3	Discussion	1			
8	Medical Staff Credentialing Report	2	Action	Board			
9	Review Action List Items and Due Dates	1	Discussion	Board			
	Potential Agenda Items for February 23, 2021 Regular Board Meeting	2	Discussion	Board			
11	Adjournment	1	Action	Dr. David Batey			
Total Regular Session Mins. 113							
Next Regular Board Meeting: Tuesday, February 23, 2021 4:00 - 6:00 pm							

Next Regular Board Meeting: Tuesday, February 23, 2021 4:00 - 6:00 pm



555 Prospect Ave. | P.O. Box 2740 | Estes Park, CO 80517

Estes Park Health Board of Directors 2021 Board Meeting Schedule

January 26, 2021 (4th Tuesday)

February 23, 2021 (4th Tuesday)

March 23, 2021 (4th Tuesday)

April 27, 2021 (4th Tuesday)

May 25, 2021 (4th Tuesday)

June 22, 2021 (4th Tuesday)

July 27, 2021 (4th Tuesday)

August 24, 2021 (4th Tuesday)

September 28, 2021 (4th Tuesday)

October 26, 2021 (4th Tuesday)

NO NOVEMBER MEETING

December 7, 2020 (1st Tuesday)

Meeting Location: Estes Park Health, Timberline Conference Room

Meeting Time: 4:00 – 6:00 pm



Special Executive Session Board Meeting Minutes – December 7, 2020

Board Members in Attendance

Dr. David Batey, Chair (via webinar)

Ms. Sandy Begley, Vice Chair (via webinar)

Dr. Steve Alper, Treasurer (via webinar)

Ms. Diane Muno, Secretary (via webinar)

Mr. Bill Pinkham, Member-at-Large (via webinar)

Other Attendees

Mr. Vern Carda, CEO (via webinar)

Mr. Tim Cashman, CFO (via webinar)

Ms. Pat Samples, CNO (via webinar)

Mr. Gary Hall, COO (via webinar)

Call to Order

The meeting was called to order at 4:08 p.m. by Dr. Batey, Chairman of the Board of Directors; there was a quorum present. Notice of the Special Executive Session Board meeting was posted in accordance with the SUNSHINE Law Regulation.

Dr. Alper motioned to move into Executive Session, pursuant to §§ 24-6-402(4)(e), C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f), C.R.S. for the purpose of discussing personnel matters. Ms. Muno seconded the motion, which carried unanimously.

With no further discussion to be conducted, Mr. Pinkham motioned to adjourn the Executive Session and concluded the meeting at 5:38 p.m. Dr. Alper seconded the motion, which carried unanimously.

David M. Batey, Chair
Estes Park Health Board of Directors



ESTES PARK HEALTH BOARD OF DIRECTORS' Meeting Minutes – December 8, 2020

Board Members in Attendance:

Dr. David Batey, Chair (via webinar)

Ms. Sandy Begley, Vice Chair (via webinar)

Ms. Diane Muno, Secretary (via webinar)

Mr. William Pinkham, Member-at-Large

Dr. Steve Alper, Treasurer (via webinar)

Other Attendees:

Mr. Vern Carda, CEO

Mr. Tim Cashman, CFO

Ms. Pat Samples, CNO

Mr. Gary Hall, CIO (via webinar)

Dr. Robyn Zehr, Assistant COS (via webinar)

Dr. John Meyer, CMO (via webinar)

Ms. Sarah Bosko, Hospice Home Health Director (via webinar)

Mr. Guy Beesley, EMS Director (via webinar)

Mr. Kevin Mullin, Estes Park Health Foundation Executive Director (via webinar)

Community Attendees (via webinar):

Randy Brigham, Larry Leaming, Wendy Rigby, Drew Webb, John Cooper and David Standerfer

1. Call to Order

The Board meeting was called to order at 4:04 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. Batey requested the following change to the agenda.

Remove Item 6.3 2021 EPH Budget Approval and Covid-19 Financial Impact

Ms. Muno motioned to approve the agenda with the change noted above. Ms. Begley seconded the motion, which carried unanimously.

3. Public Comments on Items Not on the Agenda

None.

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4. General Board Comments Not on the Agenda

The Board thanked the senior leadership team for all their efforts and dedication to the organization.

5. Consent Agenda Items

Mr. Pinkham motioned to approve consent agenda items 5.1.1, 5.1.2, 5.1.3, 5.1.4, 5.1.5 and 5.1.6 as presented. Ms. Muno seconded the motion, which carried unanimously.

6. Presentations

6.1 Estes Park Health Updates

Mr. Carda updated the Board on the following items:

- Covid-19 and the anticipated arrival of the vaccine
- Larimar County's current Red status level related to Covid
- Critical vs. non-critical staffing
- Social distancing and limited contact guidelines within the hospital
- Rotation of non-critical staffing outside of the building, while still allowing them to serve the needs of the organization

6.2 EPH Living Center Alternatives Task Force Update

Dr. Batey stated that the following:

- He hospital is under significant financial strain due to Covid and is exploring all areas for expense reductions. The Living Center was one service line that has been examined.
- The Board has conducted several Task Force meetings, a financial deep dive session, as well as discussion at several Board meetings.
- The Task Force has recommended a third-party entity run the Living Center.
- The Board has agreed to delay their decision on closure of the Living Center until the end of December 2020.
- The Task Force members hired Sam Radke to perform a financial review of the Living Center.
- Good Sam has agreed to accept all Living Center residents if EPH was to close to service line.
- The EPH Board decided that they no longer wish to operate the Living Center under EPH.
- The Board and the senior leadership team agreed to negotiate with the third-party regarding leasing the Living Center space and to complete the negotiations within 60-90 days.
- The sixth meeting of the Task Force will take place on December 9, where the Board has requested to see the results of Mr. Radke's financial review, information on the potential third-party operators, and a detailed project plan for operating the Living Center.

6.3 2021 EPH Budget Approval and Covid-19 Financial Impact

Per Board action, item was deferred to a future meeting.

6.4 Chief Nursing Officer Quarterly Report

Covid-19

- Swabbing clinic up and running, M-F, 8am to 5 pm
 - ➤ November
 - ➤ Average 45-60 a day
- Red Category for Larimer County
 - ➤ No visitation
 - ➤ Minimize/eliminate waiting in line/waiting rooms
 - > Must have 2 weeks PPE on hand
 - > Staff work at home if possible
 - Mask and social distancing

- > Evaluation process for elective surgery prioritization if bed capacity becomes a challenge
- Vaccination coming
- Participating in the Colorado combined Hospital Transfer program
 - > Partnering with all hospitals to proactively manage the bed usage, especially ICU
 - ➤ Have a collaborative relationship with UCH and will support us with Nurse/Physician support for our inpatient arena

Peri-operative Service Line

- New Peri-operative Director starts December 7th, Terri Neumann Bulgier
- Continue to develop service line and best practice

HCAPS-Patient Experience Survey

- YTD overall rating is 63.8%tile with quarter 3 at 81.0%tile and 4th quarter 100.0%tile
- Will be focusing on nurse communication, physician communication and care transition

Key Drivers	NRC 50th Percentile*	NRC 75th Percentile	Current YTD
Communication with Nurses	81.0%	83.7%	73.0% PR=6
Communication with Doctors	81.7%	84.6%	75.3% PR=11
Care Transitions	52.0%	56.4%	51.2% PR=44

Qtr 4 2020‡	Qtr 3 2020‡	Qtr 2 2020	Qtr 1 2020
100.0%µ	92.1%µ	53.3%µ	66.7%µ
100.0%μ	88.9%µ	58.3%µ	73.8%µ
66.7%µ	58.7%µ	40.7%µ	54.8%µ

> Action steps:

- Hourly rounding
- Bedside reporting
- Leader rounding
- Increasing social work coverage on M/S, ED and Birth Center to 6 days/week
- DNV Survey December 8th, virtually. Survey resulted in zero deficiencies or recommendations

Medical/Surgical Unit:

- Continue to build census
- Giving Remdesivir to Covid patients
- Using EMT role as Patient Care Technician and working well

Emergency Department/Urgent Care Center

- Limited hours working well
- Revisiting staffing matrix
- Prepared for high volume Covid patients
- Quality
- Refining report card for individual departments as well as national indicators
- Working on hand-offs across departments
- Living Center
- 2 tests with all negative results
- NHA role

Ouality

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- Working on hand-offs across departments
- Living Center

- 2 tests with all negative results
- NHA role

Living Center

- 2 tests with all negative results
- NHA role

6.5 Chief of Staff Quarterly Report

- We continue to see a rise in cases
- Difficult to transfer down valley
- Please use the Covid hotline to get tested and not the ER
- Use the ER for severe symptoms
- Vaccine is coming out soon
- EPH Medical staff strongly encourages all employees to get vaccinated
- Dr. Robyn Zehr will be the next Chief of Staff
- Dr. Bridget Dunn will be Vice Chief of Staff
- I will be Former Chief of Staff
- We want to thank Dr. Aaron Florence for serving as a Chief of Staff for the past 6 years

6.6 Estes Park Health Foundation Quarterly Report

Strategic Plan Implementation

- Develop a system to maximize the contacts and reach of EPH Directors, for the benefit of the Foundation
- Improve Institutional Communication
- Assess and Improve Onboarding Program for new EPHF Directors
- Improve Donor Retention to 57% per year by Year 3

Highlights of last quarter

- Executed Phase 3, Annual Campaign strategy
 - Phase 1 Building Modifications
 - Phase 2 Additional Testing Capabilities
 - o Phase 3 Vaccination & Testing Underserved
- Approved critical grant / additional RT-PCR assay testing system
- Recruited new Executive Assistant

General Update

Financial

6.7 Estes Park Health Covid-19 Status Update

Keeping Everyone Safe:

- We continue to focus on maximum safety at EPH. With the recent change to Level 4 (Red) in Larimer County, we've instituted or reinforced additional changes:
- No visitors allowed, except parent with child, and a personal caregiver if necessary, for an adult patient.
- Now booking appointment times for laboratory tests to avoid congregation in the lab area.
- For other waiting rooms, workflows to ensure that the patient is taken rapidly to an exam or procedure room.
- Employees who can work from home are working from home whenever possible during the Red status.

There are also some actions the public can take to help:

- Arrive as close to their appointment time as possible.
- Use e-Check-in on their My Health Connections patient portal.
- If potential COVID symptoms, we continue to require that they call EPH before coming to an entrance.

Covid Testing:

Our current swabbing process includes a Telehealth visit for personalized care and follow-up, along with a scheduled specimen collection date and time. Our streamlined process has safely been brought indoors and expanded to care for our public. Swabbing is Monday - Friday, 8 AM – 11 AM and 4 PM - 6 PM. Given current demand, results can take up to 24 hours. Our Foundation is working to purchase a second fast-turn analyzer to help with the volume and improve turnaround of delivery of results.

Covid Testing at EPH:

Our current swabbing process includes a Telehealth visit for personalized care and follow-up, along with a scheduled specimen collection date and time. Swabbing is Monday - Friday, $8\,AM-11\,AM$ and $4\,PM$ - $6\,PM$. Given current demand, results can take up to 24 hours. Our Foundation is working to purchase a second fast-turn analyzer to help with the volume and improve turnaround of delivery of results.

Don't Hesitate to Get Help:

If an individual is experiencing serious or life-threatening symptoms (chest pain, stroke symptoms, etc.), they should immediately come to EPH to get attention for that emergent condition.

Physician Clinic Open for Business:

Our physician clinic remains open to safely see patients, including for routine, non-acute appointments. And, of course, telehealth visits are also available.

Continue to Screen from Home:

One of the best safety measures that patients can take if they are concerned that they may have COVID-19 symptoms, or that they might have been exposed to an infected person, is to be screened over the phone.

7 Operations Significant Developments

7.1 Executive Summary – Significant Items Not Otherwise Covered None.

8 Medical Staff Credentialing Report

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

9 Review any Action Items and Due Dates

Special EPH Board Meeting – December 10 at 4:00 p.m.

10 Potential Agenda Items for January 26, 2021 Regular Board Meeting

None.

11 Adjournment

Dr. Alper motioned to adjourn the meeting at 5:25 p.m. Mr. Pinkham seconded the motion, which carried unanimously

David M. Batey, Chair



Special Executive Session Board Meeting Minutes – December 9, 2020

Board Members in Attendance

Dr. David Batey, Chair (via web)

Ms. Sandy Begley, Vice Chair (via web)

Dr. Steve Alper, Treasurer (via web)

Ms. Diane Muno, Secretary (via web)

Mr. Bill Pinkham, Member-at-Large (via web)

Other Attendees

Mr. Vern Carda, CEO (via web)

Mr. Tim Cashman, CFO (via web)

Ms. Pat Samples, CNO (via web)

Mr. Gary Hall, COO (via web)

Call to Order

The meeting was called to order at 5:30 p.m. by Dr. Batey, Chairman of the Board of Directors; there was a quorum present. Notice of the Special Executive Session Board meeting was posted in accordance with the SUNSHINE Law Regulation.

Dr. Alper motioned to move into Executive Session, pursuant to §§ 24-6-402(4)(e), C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f), C.R.S. for the purpose of discussing personnel matters. Mr. Pinkham seconded the motion, which carried unanimously.

With no further discussion to be conducted, Dr. Alper motioned to adjourn the Executive Session and concluded the meeting at 7:08 p.m. Ms. Muno seconded the motion, which carried unanimously.

David M. Batey, Chair



ESTES PARK HEALTH SPECIAL BOARD OF DIRECTORS' Meeting Minutes – December 10, 2020

Board Members in Attendance:

Dr. David Batey, Chair (via webinar)

Ms. Sandy Begley, Vice Chair (via webinar)

Ms. Diane Muno, Secretary (via webinar)

Mr. William Pinkham, Member-at-Large

Dr. Steve Alper, Treasurer (via webinar)

Other Attendees:

Mr. Vern Carda, CEO (via webinar)

Mr. Tim Cashman, CFO (via webinar)

Ms. Pat Samples, CNO (via webinar)

Mr. Gary Hall, CIO (via webinar)

1. Call to Order

The Special Board meeting was called to order at 4:05 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

Ms. Muno motioned to approve the agenda as presented. Dr. Alper seconded the motion, which carried unanimously.

3. Public Comments on Items Not on the Agenda

None.

4. General Board Comments

None.

5. 2021 EPH Budget Approval

The Board reviewed and discussed the 2021 budget. Ms. Muno motioned to approve the 2021 EPH budget as submitted. Dr. Alper seconded the motion, which carried unanimously.

6 Adjournment

Mr. Pinkham motioned to adjourn the meeting at 5:58 p.m. Ms. Begley seconded the motion, which carried unanimously.

David M. Batey, Chair
Estes Park Health Board of Directors





Special Executive Session Board Meeting Minutes - December 14, 2020

Board Members in Attendance

Dr. David Batey, Chair (via web)

Ms. Sandy Begley, Vice Chair (via web)

Dr. Steve Alper, Treasurer (via web)

Ms. Diane Muno, Secretary (via web)

Mr. Bill Pinkham, Member-at-Large

Other Attendees

Mr. Vern Carda, CEO (via web)

Mr. Tim Cashman, CFO (via web)

Ms. Pat Samples, CNO (via web)

Mr. Gary Hall, COO (via web)

Call to Order

The meeting was called to order at 4:09 p.m. by Dr. Batey, Chairman of the Board of Directors; there was a quorum present. Notice of the Special Executive Session Board meeting was posted in accordance with the SUNSHINE Law Regulation.

Dr. Alper motioned to move into Executive Session, pursuant to §§ 24-6-402(4)(e), C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f), C.R.S. for the purpose of discussing personnel matters. Mr. Pinkham seconded the motion, which carried unanimously.

With no further discussion to be conducted, Dr. Alper motioned to adjourn the Executive Session and concluded the meeting at 5:28 p.m. Ms. Begley seconded the motion, which carried unanimously.

David M. Batey, Chair



Special Executive Session Board Meeting Minutes – December 22, 2020

Board Members in Attendance

Dr. David Batey, Chair (via web)

Ms. Sandy Begley, Vice Chair (via web)

Dr. Steve Alper, Treasurer (via web)

Ms. Diane Muno, Secretary (via web)

Mr. Bill Pinkham, Member-at-Large (via web)

Other Attendees

Mr. Vern Carda, CEO (via web)

Mr. Tim Cashman, CFO (via web)

Ms. Pat Samples, CNO (via web)

Mr. Gary Hall, COO (via web)

Call to Order

The meeting was called to order at 4:35 p.m. by Dr. Batey, Chairman of the Board of Directors; there was a quorum present. Notice of the Special Executive Session Board meeting was posted in accordance with the SUNSHINE Law Regulation.

Ms. Muno motioned to move into Executive Session, pursuant to §§ 24-6-402(4)(e), C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f), C.R.S. for the purpose of discussing personnel matters. Mr. Pinkham seconded the motion, which carried unanimously.

With no further discussion to be conducted, Dr. Alper motioned to adjourn the Executive Session and concluded the meeting at 6:12 p.m. Ms. Begley seconded the motion, which carried unanimously.

David M. Batey, Chair



Special Executive Session Board Meeting Minutes – December 28, 2020

Board Members in Attendance

Dr. David Batey, Chair (via web)

Ms. Sandy Begley, Vice Chair (via web)

Dr. Steve Alper, Treasurer (via web)

Ms. Diane Muno, Secretary (via web)

Mr. Bill Pinkham, Member-at-Large (via web)

Other Attendees

Mr. Vern Carda, CEO (via web)

Mr. Tim Cashman, CFO (via web)

Ms. Pat Samples, CNO (via web)

Mr. Gary Hall, COO (via web)

Call to Order

The meeting was called to order at 4:04 p.m. by Dr. Batey, Chairman of the Board of Directors; there was a quorum present. Notice of the Special Executive Session Board meeting was posted in accordance with the SUNSHINE Law Regulation.

Dr. Alper motioned to move into Executive Session, pursuant to §§ 24-6-402(4)(e), C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f), C.R.S. for the purpose of discussing personnel matters. Ms. Muno seconded the motion, which carried unanimously.

With no further discussion to be conducted, Dr. Alper motioned to adjourn the Executive Session and concluded the meeting at 5:37 p.m. Mr. Pinkham seconded the motion, which carried unanimously.

David M. Batey, Chair



Special Executive Session Board Meeting Minutes – January 11, 2021

Board Members in Attendance

Dr. David Batey, Chair (via web)

Ms. Sandy Begley, Vice Chair (via web)

Dr. Steve Alper, Treasurer (via web)

Ms. Diane Muno, Secretary (via web)

Mr. Bill Pinkham, Member-at-Large (via web)

Other Attendees

Mr. Vern Carda, CEO (via web)

Mr. Tim Cashman, CFO (via web)

Ms. Pat Samples, CNO (via web)

Mr. Gary Hall, COO (via web)

Call to Order

The meeting was called to order at 4:06 p.m. by Dr. Batey, Chairman of the Board of Directors; there was a quorum present. Notice of the Special Executive Session Board meeting was posted in accordance with the SUNSHINE Law Regulation.

Ms. Muno motioned to move into Executive Session, pursuant to §§ 24-6-402(4)(e), C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f), C.R.S. for the purpose of discussing personnel matters. Dr. Alper seconded the motion, which carried unanimously.

With no further discussion to be conducted, Ms. Begley motioned to adjourn the Executive Session and concluded the meeting at 5:09 p.m. Mr. Pinkham seconded the motion, which carried unanimously.

David M. Batey, Chair



Special Executive Session Board Meeting Minutes – January 14, 2021

Board Members in Attendance

Dr. David Batey, Chair (via web)

Ms. Sandy Begley, Vice Chair (via web)

Dr. Steve Alper, Treasurer (via web)

Ms. Diane Muno, Secretary (via web)

Mr. Bill Pinkham, Member-at-Large (via web)

Other Attendees

Mr. Vern Carda, CEO (via web)

Mr. Tim Cashman, CFO (via web)

Ms. Pat Samples, CNO (via web)

Mr. Gary Hall, COO (via web)

Call to Order

The meeting was called to order at 8:06 a.m. by Dr. Batey, Chairman of the Board of Directors; there was a quorum present. Notice of the Special Executive Session Board meeting was posted in accordance with the SUNSHINE Law Regulation.

Mr. Pinkham motioned to move into Executive Session, pursuant to §§ 24-6-402(4)(e), C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f), C.R.S. for the purpose of discussing personnel matters. Dr. Alper seconded the motion, which carried unanimously.

Due to an unexpected power loss an official adjournment was not recorded.

David M. Batey, Chair
Estes Park Health Board of Directors



Special Executive Session Board Meeting Minutes – January 18, 2021

Board Members in Attendance

Dr. David Batey, Chair (via web)

Ms. Sandy Begley, Vice Chair (via web)

Dr. Steve Alper, Treasurer (via web)

Ms. Diane Muno, Secretary (via web)

Mr. Bill Pinkham, Member-at-Large (via web)

Other Attendees

Mr. Vern Carda, CEO (via web)

Mr. Tim Cashman, CFO (via web)

Ms. Pat Samples, CNO (via web)

Mr. Gary Hall, COO (via web)

Call to Order

The meeting was called to order at 4:04 p.m. by Dr. Batey, Chairman of the Board of Directors; there was a quorum present. Notice of the Special Executive Session Board meeting was posted in accordance with the SUNSHINE Law Regulation.

Ms. Muno motioned to move into Executive Session, pursuant to §§ 24-6-402(4)(e), C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f), C.R.S. for the purpose of discussing personnel matters. Dr. Alper seconded the motion, which carried unanimously.

With no further discussion to be conducted, Mr. Pinkham motioned to adjourn the Executive Session and concluded the meeting at 6:03 p.m. Ms. Muno seconded the motion, which carried unanimously.

David M. Batey, Chair



EPH COVID-19 Status & Vaccine Update January 26, 2021

COVID Vaccine: General Status (per State hierarchy)

COVID Vaccine: Mobile Clinic

COVID Vaccine: Community Clinics

COVID Vaccine: Helping Educate People About Vaccine Impact and Aftermath

COVID Status: Swabbing Clinic

COVID Status: Social Distancing, Masks, EPH Visitor status, etc.

Other COVID Questions?



COO/CIO Report to Park Hospital District Board of Directors

January 26, 2021 Gary Hall

- **Diagnostic Imaging:** Business as usual. We added weekend day ultrasound coverage for a few weeks now, per physician requests. We continue to get onsite radiologist support from our contracted firm on the Front Range, Colorado Imaging Associates (CIA).
- Lab: We expect CAP in February. We are installing two new, redundant Sysmex hematology analyzers right now. We expect the second, and therefore redundant, Diasorin COVID analyzer in February, which will double our capacity, or more properly, allow us turnaround closer to expected by clinicians and patients. Lab director Cynthia's last day is February 10. We have several paths to interim and permanent lab directors through various agencies. We're working every angle to get back to full staffing with appropriate bench strength, certifications, and safety nets.
- **Pharmacy/Pyxis:** On Jan 22, we received a high-volume Helmer refrigerator to allow storage of high volume of vaccine doses. New pharmacy director Robert Stackhouse starts on March 8.
- Rehab: Steadily growing work at the UCC facility. They reopened Fridays due to volume.
- **Dietary/EVS/Facilities:** Taking care of business. While capital will be severely limited in 2021, there are some Facilities items being studied for 2021. We completed our multi-year surgical services air-handler HVAC work. OR is now independent of the rest of the hospital for air management. We are working with a water management expert to create a true water management process for perpetuity.
- **Epic Archives:** The year-long project to move the legacy electronic charts into the "Epic Archive" section is fundamentally complete. There's some last fine-tuning. We will be shutting down some expensive aspects of our legacy EHRs by mid-year, with an annualized savings of about \$400K.
- **IT/Cybersecurity:** The federal government and some hardware/software companies have had malicious intrusions in 2020, and in 2021, we're still seeing significant and highly sophisticated attacks on major players in the cyber/hardware/software fields. It is a tough time. Eternal vigilance.
- Vaccine: My task is to provide the IT and Facilities and informatics requirements to create and run the clinics (onsite, mobile, community) and to provide marketing communications via social media and other outlets. The challenges of the changing, and sometimes politically charged, environment makes this an interesting job.
- **DNV:** Working to be as ready as possible for the re-accreditation survey. There are some additional challenges to get prepared, related to the reduction in force and other factors, but we'll continue to work in that direction.
- **Hospital Outpatient Services:** The "new" front-of-house area (the old rehab area) is very popular for patient convenience, airiness, view, etc., with our patients and staff, for chemo/infusion, coumadin clinic, respiratory therapy, cardiac rehab. Wound Care will start up in the old Specialty Clinic area now, with Dr. Woodard continuing to provide those services in addition to being part of our "in-house" surgeon services.
- **Safety/Emergency Preparedness:** Continuing to provide oversight of the Safety Management plan of EPH, which covers Life Safety (fire and other items), Security, Radiologic Safety, Hazardous Waste Safety, and Emergency Preparedness. Action on all fronts continues to ensure we're as safe as can be.

DRAFT 2021 01Jan 17 2300

PARK HOSPITAL DISTRICT

RESOLUTION 2020-11

A RESOLUTION OF THE BOARD OF DIRECTORS OF THE PARK HOSPITAL DISTRICT TO CLOSE THE ESTES PARK HEALTH LIVING CENTER

- 1. WHEREAS, As a result of the Covid-19 pandemic in 2020, Estes Park Health (EPH) had
 - 1.1. Experienced significant, multimillion dollar financial losses in 2020;
 - 1.2. The multimillion dollar financial losses were expected to continue from 2020 into 2021, and the changes in medical care that produced the losses were likely to continue indefinitely;
 - 1.3. As a result, EPH initiated urgent evaluation of all services to identify and implement significant cost reduction actions to be able to continue operating through and beyond year 2021; and,
- 2. **WHEREAS**, The EPH Living Center (EPHLC) service had lost money for at least the last 15 years, with increasingly significant financial losses in more recent years, and then experienced additional significant losses that were associated with the Covid-19 pandemic; and,
- 3. **WHEREAS**, All of the experts consulted by the EPH Board of Directors (EPH Board) and EPH Senior Leadership Team (EPH SLT) had consistently concluded that the Estes Park Health Living Center operation was not financially viable given:
 - 3.1. While EPHLC may have been the right size in 1984 when it was created, it is currently too small to be financially viable in the current competitive environment 36 years later;
 - 3.2. The number of EPHLC residents has been declining, resulting in decreasing revenue;
 - 3.3. The high percentage of EPHLC residents paid by Medicaid with Medicaid generally paying only 70% of the costs of providing services;
 - 3.4. Increasing costs associated with the increasing necessity to use contract labor to satisfy staffing requirements. This is a national and Estes Park issue that has increased nursing home costs;
 - 3.5. Increasing costs associated with increased regulatory compliance requirements;
 - 3.6. Increased costs associated with mitigating the effects of the Covid-19 pandemic (PPE, etc.); and,
- 4. **WHEREAS**, At the August 31, 2020 Monthly Board meeting, the EPH Board and EPH SLT initiated a series of interactions with the Estes Park Community about alternatives for the EPHLC because:
 - 4.1. EPHLC has provided an important service for some members of the Estes Park Community;
 - 4.2. It was important for the community to understand the causes of EPHLC's increasing financial losses and the reasons for predictions of increasing financial losses in the future;
 - 4.3. It was important to be sure that all possible EPHLC alternatives were identified and thoroughly and fairly evaluated; and,
- 5. **WHEREAS**, the EPH Board and EPH SLT held a series of three, open-to-the-public Tele-Townhalls to discuss the past, present, and future of the EPHLC and its alternatives. Recordings of these and all other public EPHLC meetings were placed on the EPH website: https://eph.org/about-us/board-of-directors/meeting-information/; and,
- 6. **WHEREAS**, As of the August 31, 2020 meeting, the target for a decision on alternatives for the Living Center was mid-October 2020; and,
- 7. **WHEREAS**, At the 30-Sep-2020 "Deep Dive EPH and Living Center Financial Meeting," a group of community members invited the EPH Board and EPH SLT to collaborate on evaluating a third-party operating

- approach for the EPHLC, with the request that a decision on the Living Center be delayed from mid-October until the third-party alternative could be evaluated; and,
- 8. **WHEREAS**, While the financial realities of the EPHLC had not changed, the EPH Board and EPH SLT decided that, to ensure that all possible alternatives were identified and thoroughly evaluated, and for the Estes Park Community to be confident that all possible alternatives were being identified and thoroughly evaluated, that the EPH Board and EPH SLT would accept the invitation to collaborate with certain conditions; and,
- 9. **WHEREAS**, At the first meeting EPHLC Alternatives Evaluation Taskforce on 13-October, the "Proposal to Collaborate" stated:
 - 9.1. A need to proceed with a sense of urgency because of the challenging financial realities EPH and the EPHLC were encountering;
 - 9.2. Proposed forming a Taskforce "To accomplish timely progress on addressing this important issue;"
 - 9.3. And agreed: "If substantial progress is made by the Task Force, and there are no significant changes in EPHLC census (census remains at 20 residents or above), the EPH Board of Directors would defer a decision of the status of EPHLC until December 31, 2020;" and,
- 10. **WHEREAS**, In the second Taskforce meeting on November 11, 2020, because it seemed likely that a Skilled Nursing Facility like EPHLC in the Estes Valley would always have financial losses, the possibility was discussed of holding a referendum in early February 2021 to assess Estes Valley property owners' willingness to subsidize EPHLC's financial losses through a property tax and/or sales tax; and,
- 11. WHEREAS, In the third Taskforce meeting on November 18, 2020, the following issues were discussed:
 - 11.1. Because of the ongoing EPHLC financial losses, the EPH Board and Senior Leadership Team did not support continuing to operate EPHLC within EPH;
 - 11.2. While the EPH Board and EPH SLT agreed to evaluate the possibility of a third party operating an Estes Valley Skilled Nursing Facility, supporting the third-party option would require a comprehensive business plan for the operation with expectations of long-term success;
 - 11.3. With regard to the possible early February 2021 referendum to assess Estes Valley property owners' willingness to subsidize EPHLC's financial losses through a property tax and/or sales tax, the EPH Board did not support using EPH funds to fund a referendum assessing community support for property tax and/or sales tax to subsidize the third party Skilled Nursing Facility alternative;
 - 11.4. The community members of the Taskforce were also unwilling to fund with their money a possible early February 2021 referendum to assess Estes Valley property owners' willingness to subsidize the third party Skilled Nursing Facility alternative;
 - 11.5. Some members of the Taskforce announced that Sam Radke had been hired to provide an independent assessment of EPH and EPHLC finances with his report to be delivered by 5:00 pm December 7, 2020; and,
- 12. **WHEREAS**, At the fourth Taskforce meeting on November 25, 2020, community members of the Taskforce asked whether the EPH Board and EPH SLT would be agreeable to enter negotiations with a third party for use of the space currently occupied by EPHLC; and,
- 13. **WHEREAS**, In the fifth Taskforce meeting on December 2, 2020, as a part of willingness to enter negotiations with a third party for use of the space currently occupied by EPHLC, the EPH Board and EPH SLT reiterated the need for a comprehensive Skilled Nursing Facility business plan with high likelihood of success. An additional requirement was that all costs of maintaining or modifying the space, and all costs of operating the Skilled Nursing Facility would be the responsibility of the third party; and,
- 14. **WHEREAS**, In the sixth Taskforce meeting on December 9, 2020, the EPH Board and EPH SLT asked for information on:
 - 14.1. Was there an evaluation project plan with tasks, timing, and resourcing. No plan was provided; and,

- 14.2. Whether results of Sam Radke assessment of EPH Living Center financials was available. The Sam Radke report was due December 5 and was not available; and,
- 14.3. What funding approaches were being considered for the third-party Skilled Nursing Facility. There was no information on this topic; and,
- 15. WHEREAS, In the seventh Taskforce meeting on December 16, 2020, the following issues were raised:
 - 15.1. Was there an evaluation project plan with tasks, timing, and resourcing. No plan was provided; and,
 - 15.2. Was the Sam Radke assessment of EPH Living Center financials available? The Sam Radke report was due December 5 and was not available; and,
 - 15.3. What third-party organizations were being considered? No information was provided; and,
 - 15.4. Was there a comprehensive business plan for the third-party operating alternative? There was none; and,
 - 15.5. Was EPH required to lease the EPHLC space at Fair Market Value?; and,
 - 15.6. What were the constraints on EPH transferring any of its property tax proceeds to the third-party operating alternative for the EPHOC?
- 16. WHEREAS, In the eighth Taskforce meeting on December 23, 2020, the following issues were discussed:
 - 16.1. Fair Market Value assessment by Pinnacle Healthcare Consulting; and,
 - 16.2. Fair Market Value assessment by Peggy Lynch, a local Realtor; and,
 - 16.3. Discuss Hall Render legal opinion that EPH must charge Fair Market Value for any space leased and could not transfer EPH property tax proceeds to a third-party operating an alternative Skilled Nursing Facility; and,
 - 16.4. From 1968 at EPH creation to the present, historic property tax ballot language found so far does not specifically mention EPHLC.; and,
 - 16.5. Was there an evaluation project plan with tasks, timing, and resourcing. No plan was provided; and,
 - 16.6. Was the Sam Radke assessment of EPH Living Center financials available? The Sam Radke report was due December 5 and was not available; and,
 - 16.7. What third-party organizations were being considered? No information was provided; and,
 - 16.8. Was there a comprehensive business plan for the third-party operating alternative? There was none; and,
- 17. **WHEREAS**, In the ninth Taskforce meeting on January 13, 2021, At the ninth Taskforce meeting on January 13, 2021, a comprehensive business plan with a high likelihood of success for a Skilled Nursing Facility run by an independent third-party was not produced. The financial 'Pro Forma" discussed at the meeting did not indicate a high likelihood of financial success. The number of residents in EPHLC had fallen to 16, an unsustainable level. Furthermore, on December 30, 2020, we had provided community Taskforce members with a list of core business questions that required clear answers for us to believe the third-party operating alternative was viable. Discussing the answers to these questions was the primary focus of the ninth Taskforce meeting, and we received no clear answers or no answers to the core business questions.

The following are specific concerns about the proposed third-party operating alternative:

17.1. Organization and Management

- 17.1.1. It was announced that Gerald Mayo was in the process of establishing "Prospect Park Living Center, Inc." (PPLC, Inc), a new nonprofit that had not yet achieved IRS nonprofit status. PPLC, Inc was to play an undefined role in the third-party operating scenario. It was not clear, but it seemed possible that the intent was for Gerald Mayo and PPLC, Inc. to be in-charge of the third-party operation. Gerald Mayo had recruited Dr. Guy P Van der Werf and Mark Igel to be PPLC, Inc. Board members; and,
- 17.1.2. Hanlon, Bush Investments, LLC (HBI), a for-profit company that runs Rehabilitation and Nursing Center of the Rockies, a 96 bed nursing facility in Fort Collins, was introduced as an organization with an undefined role in the third-party operating alternative. HBI was represented at the meeting by Tony Hanlon; and,
- 17.1.3. Among other unanswered core business questions were: Who would manage the skilled nursing center? PPLC, Inc. or HBI?, Who would have the Colorado State license to operate the facility?,

Who would be held liable for operations and have professional liability insurance?, Who would be the Medical Director?, Who would coordinate with the State regulators?, Who would assume financial risk for the operation and what were their financial assets?, Who would provide startup capital and what were their financial assets?, Who would finance the projected significant operational financial losses and what were their financial assets?, Who would lease the space?, Who would be responsible for maintaining the physical plant?, Who would staff the facility?, Who were the people in the organization structure and service provider positions and what were their qualifications and experience?; and,

17.2. Financial Projections

17.2.1. Based on actual Estes Park Health Living Center experience, the financial "Pro Forma" significantly overestimated revenues and significantly underestimated expenses; and,

17.2.2. Overestimated Revenues:

17.2.2.1. The two key determinates of revenues and resulting financial viability are 1) the number of residents and 2) the percent of residents that are Medicaid since Medicaid pays only 70% of the cost of care. The current number of EPHLC residents on January 13, 2021 was 16, 12 of which were Medicaid. At the "modeled low census" of 17 residents, the projected "Pro Forma" loss is \$1.4 million. At the "modeled high census" of 35, the projected "Pro Forma" profit is \$37,000. In discussion, there was no documented basis for where the increase in census would come from (Estes Park? Front Range?), how much time would be required to reach census targets, the projected financial loss that would occur, and how the financial loss would be covered. The per-day reimbursement rates used in the "Pro Forma" were higher than EPHLC experience and claims that the per-day rates could be easily raised were not credible, so the per-day reimbursement rates were another source of revenue overestimation; and,

17.2.3. Underestimated Expenses:

- 17.2.3.1. At EPHLC, about 75% of total expenses are personnel-related. In the current "Pro Forma," the number of personnel projected to serve 35 residents is smaller than the number of personnel EPHLC actually uses currently to serve 16 residents. The need for contract labor, significantly more expensive than employee labor, is a national issue as well as an EPHLC issue that has strained nursing home finances. The contact labor levels used in the "Pro Forma" are only 2/3 of EPHLC's actual contact labor levels. Even using contract labor, EPHLC has ongoing challenges recruiting and retaining required staffing levels; and,
- 17.2.3.2. One impact of significantly underestimated expenses is an underestimation of the number of residents needed to "breakeven" financially. The "Pro Forma" estimates "breakeven" at 34.6 to 36.6 average daily census. The "Stroudwater" report (2020, page 21) by a national accounting firm determined that EPHLC needed an average daily census of 45 to "breakeven" financially, a level above the current EPHLC maximum capacity of 38 residents; and
- 17.2.3.3. Even with significantly overestimated revenues and significantly underestimated expenses, the "Pro Forma" projects a \$1.4 million loss in the first year. The "Pro Forma" does not provide an estimate of how long this significant loss will continue or from where the financing will come to cover the loss; and,
- 17.2.3.4. The claim that the financial viability of the third-party operating alternative depends upon the base lease amount is not supported by the "Pro Forma." The "Pro Forma's" projected base lease of \$158,330 is about 11% of the total projected first year loss of \$1.4 million, and this is likely an underestimated loss given the significantly overestimated revenues and significantly underestimated expenses in the "Pro Forma;" and,
- 17.2.3.5. Among other challenges for the third-party operating alternative, Tony Hanlon from HBI stated that the nursing home could not survive financially unless EPH sent all of their post-acute Medicare patients to the nursing home. EPH is facing ongoing significant financial challenges and will not send post-acute Medicare patients to the third-party nursing home; and,

- 18. **WHEREAS**, the Estes Park Health Board of Directors and Senior Leadership Team have been working with the Estes Park Health Living Center Alternatives Evaluation Taskforce since mid-October 2020 in an attempt to find a viable approach to keeping the Living Center in operation through an independent third-party operating alternative. To date:
 - 18.1. A comprehensive business plan with a high likelihood of success for a Skilled Nursing Facility run by an independent third-party has not been provided; and,
 - 18.2. The financial 'Pro Forma" discussed at the ninth Taskforce meeting did not indicate a high likelihood of financial success. Instead, it projected ongoing significant financial losses with no identification of how the losses would be paid for; and,
 - 18.3. The number of residents in EPHLC had fallen to 16, a number not sustainable; and,
 - 18.4. The Estes Park Health Board of Directors and the Senior Leadership Team asked list of core business questions that required satisfactory answers to support the belief that the third-party operating alternative was viable. Satisfactory answers to the core business questions have not been provided;

19. NOW THEREFORE BE IT RESOLVED BY THE BOARD OF DIRECTORS OF THE PARK HOSPITAL DISTRICT THAT:

- 19.1. Estes Park Health submit on or about Wednesday, February 3, 2021, a Nursing Home Proposed Facility Closure and Resident Transfer Plan for the Estes Park Health Living Center to the State of Colorado Department of Public Health and Environment, Health Facilities and Emergency Medical Services Division.
- 19.2. That as soon as the Nursing Home Proposed Facility Closure and Resident Transfer Plan for the Estes Park Health Living Center is approved by the Environment Health Facilities and Emergency Medical Services Division, that Estes Park Health announce a target closing the Estes Park Health Living Center 60 days later than the date of the closing and resident transfer plan announcement.
- 19.3. That Estes Park Health will then proceed with plans to close Estes Park Health Living Center.
- 19.4. The timing of these plans may be modified based on Covid-19 pandemic developments.

Dated: February 2, 2021

BOARD OF DIRECTORS OF THE PARK HOSPITAL DISTRICT

By:	
Attest:	
Sandy Begley, Vice Chair	Stephen Alper, Treasurer
Diane Muno, Secretary	Bill Pinkham, At Large



Park Hospital District Board Timberline Conference Room January 26, 2021

CREDENTIALING RECOMMENDATIONS

Credentials Committee approval: December 30, 2020

Present: Drs. Zehr (Chair), Florence, Meyer, Steve Alper, and Andrea Thomas

Medical Executive Committee approval: January 6, 2021

Reappointments

Clapp, Terra, CRNA Locum Tenens, Anesthesia Kadivar, Fatemeh, M.D. Courtesy, Diagnostic Radiology Martin, Eric, M.D. Courtesy, Internal Medicine Paradis, Trent, M.D. Courtesy, Diagnostic Radiology Riley, Meghan, M.D. Courtesy, Pathology Salisbury, Catherine, M.D. Courtesy, Pathology Schneider, Juli, M.D. Active, Internal Medicine Winter, Leslie, M.D. Courtesy, Otolaryngology

Resignation (FYI Only)

Mott, Kevin, M.D. Courtesy, Dermatology