

**BAY AREA HOSPITAL DISTRICT BOARD MEETING**  
**April 9, 2024, MINUTES**  
*Bay Area Hospital Myrtle Conference Room @ 6:05 pm*

**BOARD EDUCATION SESSION – Strategic Options Education-Juniper Advisory**

**CALL TO ORDER**

Mr. Troy Cribbins, Board Chairperson, called the Bay Area Hospital (BAH) District Board meeting to order at 6:06 pm. A quorum was present.

**BOARD ATTENDANCE**

Troy Cribbins, Tom McAndrew, MD; Barb Taylor; Patrice Parrott; Carma Erickson-Hurt

**ABSENT**

**STAFF ATTENDANCE**

Brian Moore, CEO; Jennifer Collins, CNO; Kelli Dion, CQO; Kate Pina, interim Human Resources Director; Lee Saltzgaber, MD, CMO; Mary Lou Tate, CFO; Calvin Thomas, interim COO (*via Teams*); Kim Winker, Marketing & Communications Director; Dr. Paavani Atluri, COS (Chief of Staff) (*via Teams*); Denise Bowers, EA

**LEGAL COUNSEL**

Megan Kronsteiner, Esq.

**GUEST PRESENTERS**

Linda Howard, The Fox Group  
Larry Tramutola

**PUBLIC ATTENDANCE AND INPUT**

Several members of the public were in attendance; Chairperson Cribbins opened the floor for public comment.

A member of the public gave feedback on their recent experience at Bay Area Hospital. Their constructive criticism regarding the admitting vs. observation process and the importance of clear communication with patients and their families at the time of the decision to stay overnight. Additionally, their concern about staff not identifying visitors in the hallways raises awareness of potential security issues.

**REPORT OF THE BOARD CHAIRPERSON COMMENTS – Mr. Troy Cribbins**

Chairperson Cribbins appropriately acknowledged the feedback and expressed gratitude for the public comment, emphasizing the importance of addressing the issues raised. The hospital values feedback from patients and their families as they strive to provide the best possible care. The closing remark from the member of the public, expressing gratitude for the hospital's continued presence and care and reinforcing the importance of the hospital's mission in the community.

**BOARD COMMENTS**

The board agreed with Chairperson Cribbins on the importance of clear communication with patients and their families. The board agreed that they should have a follow-up with this individual.

**FIRST QUARTER COMPLIANCE REPORT – Ms. Linda Howard, The Fox Group**

Ms. Linda Howard reviewed the 1<sup>st</sup> Quarter Compliance Report as presented in the packet.

**Action Taken by the Board:**

Dr. Tom McAndrew moved to approve the 1<sup>st</sup> Quarter Compliance Report as presented in the board packet; Ms. Barbara Taylor seconded. The motion carried on a call of vote.

**TRAMUTOLA CONSULTING**

Mr. Larry Tramutola reviewed the memo that was sent out to the board in the packet on the survey that is being prepared to send out to our constituents. The purpose of the survey is to:

- Learn the public's overall perception of Bay Area Hospital. This poll will be done among registered voters of the district;
- Discover what services we provide are important to voters;
- Discern the feasibility of a possible tax election and what level of support they may be willing to contribute to support those services at Bay Area Hospital.

The poll will go live the first part of next week, and results will be available in 2 to 3 weeks. This will be an extensive report, with cross sections of age, gender, political party, and geography of the district. Questions were asked and answered. The board requested a one-sheet page of talking points to refer to when addressing questions from the public as they arise.

**CONSENT AGENDA**

The consent agenda included:

- Board Meeting Minutes of March 12, 2024
- Board Education Session Minutes of March 12, 2024
- Board Work Session Minutes of March 13, 2024
- Quality Approved Minutes of February 28, 2024
- Finance Approved Minutes of February 27, 2024
- Balanced Scorecard

**Action Taken by the Board:**

Ms. Barbara Taylor moved to approve the Consent Agenda as presented in the board packet with the correction of one typo. Ms. Carma Erickson-Hurt seconded, and the motion carried on a call of vote.

**QUALITY AND PATIENT SAFETY COMMITTEE (QPSC) REPORT – Ms. Patrice Parrott**

Ms. Parrott reviewed the Quality Executive Summary as presented in the packet; these were the highlights:

- **The Joint Commission (TJC) 2024 Tracer Schedule**  
**Key Point:** Ms. H. Thoma explained and reviewed the 2024 Tracer schedule to ensure survey readiness. 30 Tracers were completed in the first quarter leading to 50 tasks. **Action:** 16 tasks are pending, and 34 are complete.
- **Quality and Patient Safety Report Card**  
**Key Point:** One catheter-associated urinary tract infection in February. No central line bloodstream infections or surgical site infections in February. PSI-90 and readmission met their goals for January. Mortality did not meet its goal for January. PSI-90 met its goal for February 2024.
- **Standardized Infection Ratio (SIR) and Standardized Utilization Ratio (SUR)**  
**Key Points:** Bay Area Hospital was 71% below the national baseline for Catheter Acquired Urinary Tract Infections SIR while being 2% higher than the national baseline for catheter utilization rate (SUR). Bay Area Hospital was 72% below the national baseline for Central Line Acquired Blood Stream Infection (CLABSI) SIR while being 76% above the national baseline for the central line utilization ratio

(SUR). There was one methicillin-resistant *Staphylococcus aureus* (MRSA) event in 2023 which was greater than predicted. *C. Difficile* SIR was 10% greater than the national baseline.

- The QPSC requested a review of readmission data, and Ms. Dion provided the requested information at the QPSC meeting.

## **CHIEF EXECUTIVE OFFICER REPORT – Mr. Brian Moore, CEO**

### *Introduction of new Human Resources leader*

Mr. Moore introduced Ms. Kate Pina, our interim Human Resources Director. Ms. Pina is an Oregon native who left the area during her military service and has since relocated to Oregon to be closer to family. Ms. Pina has over 20 years of experience in the HR profession and comes to us most recently from helping Friendship Place in the DC area.

### *Board Follow-up*

Mr. Moore addresses a follow-up item from the last board meeting on discharge delay; he reports that one meeting has occurred to gather data, and a second one will be scheduled shortly. These discharge constraints are related to nurse staffing – more to come.

### *Physician Matters*

#### **Pediatric Hospitalist**

Mr. Moore is working collaboratively on the Pediatric Hospitalist programs with community partner CEO's of the local clinics and Advanced Health; they are meeting weekly. The next step is to outline models and solutions around changes to the existing programs. In-kind donations are needed. Dr. DeLeon will be out in June and a solution for call coverage must be found. Drs. Molteni and DeLeon will be moving to part time if a solution is not identified.

#### **Physician Enterprise**

Mr. Moore shared that an email had been sent to the board introducing Ms. Gretchen Nichols, our Vice President of Operational Excellence, who will be working closely with our employed providers to enhance our multispecialty medical group. As a nurse and former hospital CEO, Ms. Nichols has extensive experience in leading and improving complex healthcare organizations. One aspect of her role includes helping us identify, define, and implement improvements throughout the organization. As our group of employed physicians, nurse practitioners, and physician associates has grown, we have recognized the need for a new structure that supports clinic operations, revenue cycle improvements, and better patient care and experience. We also want to ensure that our providers have a voice in how the group operates and that we are engaged and aligned in our strategic goals and vision. We hope this will improve engagement and satisfaction.

#### *Revenue Cycle Department Strategy – Ms. Mary Lou Tate*

Ms. Tate reported that, after identifying gaps in the revenue cycle team, which affected our ability to fully collect for services we provided, the difficult decision was made to outsource our revenue cycle and combine our current state of 15 revenue cycle vendors to 1 (one). Unfortunately, some of our team members will need to transition as a result; one-third of the current revenue cycle workforce is already outsourced. There will be a meeting tomorrow with the affected staff, who have been guaranteed an interview with our selected vendor. The executives will be on hand to share the news and provide emotional support to those staff.

There was a lengthy, robust question and answer session, with feedback received from the board on their concerns surrounding public reaction, addressing questions on the rationale behind this decision and the importance of a compassionate communication to the staff concerned. The board emphasized how crucial it will be to communicate the rationale behind the decision clearly, and that plan is moving forward.

Comments from the board also included recognition that tough decisions must be made for Bay Area Hospital to survive, and that we must pursue payment as aggressively as our payors - whose end game is not to pay us. Mr. Moore shared that we do approximately \$20M per year of work that we do not get paid for. In

conclusion of the discussion, Mr. Moore thanked the board for the conversation and their assistance in this long-term commitment for the organization, stating that this is the direction that management is recommending.

#### *Organizational Goals – Patient Experience – Ms. Jennifer Collins*

Due to time constraints, this presentation will be moved to the May board meeting.

Ms. Collins did provide a brief update on activities in the Emergency Department. Changes have been made to the surveys are given to patients, and we are now receiving up to 30 responses per month. There has been a 20-percentage point increase in patient satisfaction scored in the ED; the left without being seen (LWBS) metric, which we like to see at 2% or less has been below 1% for three months in a row. The board asked Ms. Collins to convey their thanks to the ED staff for their hard work.

#### **FINANCE REPORT – Ms. Barbara Taylor, Treasurer**

Ms. Taylor advised the board that the Finance Committee recommends the purchase of the UKG Kronos Dimensions Implementation, a planned capital item of \$514k, as presented in the board packet.

#### **Action Taken by the Board:**

Ms. Taylor approved the purchase of the UKG Kronos Dimensions Implementation of \$514,000.00 as presented in the board packet. Ms. Carma Erickson-Hurt and Ms. Patrice Parrott seconded, and the motion carried on a call of vote. Ms. Taylor reviewed the highlights of the last Finance Committee meeting:

#### *Financial Metrics*

Overall, Bay Area hospital earned \$819K in February vs. budgeted income of \$166K and last year's loss of \$3.1M. Gross Revenue for February was strong ending at \$63.7M overall, \$10.5M ahead of budget. Net Revenue ended the month with a Net to Gross Revenue Margin of 32.5% or \$1.6M ahead of budget. This margin reflects \$4M in high dollar Inpatients accounts with DRG payments that were significantly less than charges, resulting in a 6.2% drop in margin. High dollar accounts included patients with long length of stays and high-cost drug usage.

Work continues with the payer contract renegotiations. Regence BCBS contract increase became effective on 12/15/23 and Pacific Source will be effective 01/01/24, MODA contract is effective 02/15/24. Actual operating expenses were over budget by \$401K. Expenses are higher to support the additional volumes. On a flex basis, based on actual volumes, expense spending is in line with volumes and shows a favorable variance. Overall, Net Income for the month exceeded the budget by \$652K.

Ms. Mary Lou Tate invited the board to the next Finance Committee meeting to hear the budget assumptions for FY25. That meeting will be held on April 23, 2024.

#### **MEDICAL STAFF CREDENTIALS REPORT – Dr. Lee Saltzgaber**

This report was reviewed in the Executive Session.

#### **EXECUTIVE SESSION**

The Board went into Executive Session as authorized by ORS 192.660(2) at 7:49 pm to:

- (c) consider matters pertaining to the function of the medical staff at a public hospital*
- (f) consider information or records that are exempt by law from public inspection*
- (h) consult with legal counsel concerning the legal rights and duties of the District with regard to current litigation or litigation likely to be filed*

#### **OPEN SESSION**

Chairperson Cribbins reopened the meeting into public session at 7:51 pm.

**Action taken by the Board:** Dr. Tom McAndrew moved to approve the Credentialing Report as presented in the packet. Ms. Barbara Taylor seconded the motion. There was no further discussion and the motion carried on call for vote.

**MEDICAL STAFF REPORT – Dr. Paavani Atluri**

Dr. Atluri thanked Dr. Saltzgaber and the team for the Doctor's Day festivities; advised the board that the MEC meeting was cancelled last month and nothing to report except that Dr. Steve Beeson will be starting his series, Practicing Excellence, on collegiality in May; there will be a Harty Springer CP process education in 2 to 3 months.

**ADJOURNMENT**

There being no further business, the District Board meeting was adjourned at 7:58 pm.

  
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Troy Cribbins, Board Chairperson

  
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Patrice Parrott, Secretary

Date: 5/14/24

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