

Southern Coos Health District
Board of Directors Meeting
Minutes
December 15, 2022, 6:00 p.m.

I. **Call to Order**

At 6:00 p.m. the public meeting was called to order. There was no Executive Session.

1. **Roll Call**

Members Present: Brent Bischoff, Board Chairman; Norbert Johnson, Treasurer; Pamela Hansen, Tom Bedell; Directors. **Via remote meeting link:** Mary Schamehorn, Secretary; Doug Selix and Dustin Smith, from Critical Insight **Administration:** Raymond Hino, CEO; Jeremiah Dodrill, CFO; Cori Valet, CNO; Scott McEachern, CIO; Dawn Gray, Clinic Manager. **Others present:** Robert S. Miller, III, Legal Counsel; Kim Russell, Executive Assistant. **Press:** None.

All members present; quorum met.

2. **Approval of Agenda**

The Annual HIPAA Risk Assessment Report from Doug Selix of Critical Insight, the hospital's cyber security vendor, will be moved forward in the agenda to accommodate guest presenters.

Tom Bedell **moved** to approve the agenda with modification. Pam Hansen **seconded** the motion. **All in favor. Motion passed.**

3. **Public Input**

None.

II. **Consent Agenda**

1. **Meeting Minutes**

- a. Special Meeting – 11/14//22
- b. Regular Meeting 11/17/22
- b. Executive Session – 11/17/22

2. **Monthly Counsel Invoice Robert S. Miller III #1175**

Norbert Johnson **moved** to accept the Consent Agenda. Tom Bedell **seconded** the motion. **No discussion. All in favor. Motion passed.**

III. New Business - Annual HIPAA Risk Assessment Report from Critical Insight

Moved forward in the agenda from VI. New Business. Scott McEachern, CIO, introduced Doug Selix and Dustin Smith from Critical Insight, the contracted cyber security vendor hired to assist SCHHC meet its obligation to protect electronic protected health information (ePHI), and to complete a security risk analysis of the computing environment. The Department of Health and Human Services' Office for Civil Rights (OCR) conducts periodic audits to ensure that covered entities and their business associates comply with the requirements of HIPAA's regulations according to the Health Insurance Portability & Accountability Act of 1996. Mr. Selix shared a comparison of progress made from 2021 to 2022 with improvements such as audit readiness documentation and evidence, plus 2022 deficiency findings. A deficiency gap was identified in the auditing of staff access to patient records. A policy gap was identified regarding potential use of portable media, and physical security of the data center needs improvement. These recommendations are integrated within the Strategic Plan and prioritized over time. Penalties can be incurred if an OCR audit should find egregious deficiencies without documentation or planned action. This internal audit documented low, medium and high risk priorities for action with recommendations in areas of Administrative Controls and Physical Security and Technical Controls.

IV. Staff Reports

1. CEO Report

Mr. Hino summarized his report noting that masking was recently lifted in non-patient care areas for fully-vaccinated individuals. Documentation in support of improvements outlined for all NC-1 non-conformities required for DNV accreditation is due to DNV by January 23. Weekly onboarding meetings are in place for the transition to the new emergency room physician staffing group, OPYS, to begin on December 31. Paul Preslar, DO, began work in the clinic on December 5. Christine Mitchell, DO, has submitted her resignation for the end of January. Another DO has provided verbal acceptance of an offer, with contract hoped to be complete before end of year. The temporary clinic NP, Sarah Harvison, will conclude her contract next week, with a new temporary NP to be in place in January. SCHHC's new Director of Surgical Services, Michelle King, RN, is holding weekly project management meetings in preparation to begin orthopedic surgery as soon as possible. We still await the new anesthesia machine and new operating room lighting, due to supply chain delays. Mr. Hino provided a review of 2022 accomplishments including annual community and staff events, the new 3 year Strategic Plan, hiring of new Clinic Manager, HR Director, a new weekly CEO video message for all staff, and the DNV Critical Access Hospital Accreditation.

2. Clinic Report

Dawn Gray, Clinic Manager, will join future meetings to provide the monthly Clinic Report. Dawn expressed her appreciation for staff and administration and her pride in work being accomplished. Clinic financials will no longer include ScribeX physician scribe service as we implement microphone talk-to-text technology. Physician cancellations shown in the statistics for the month include appointments that are

rescheduled. Ms. Gray shared her goal for the clinic to acquire PCPCH designation, which is patient and quality driven, to allow a higher reimbursement from Medicaid, with a goal date of April 1, 2023, added to the Strategic Plan under Clinic. Coordination of Care program (Medicare) is another opportunity for additional revenue generation. Board members expressed concern about lower number of visits in November. Positive feedback has been received regarding Dr. Paul Preslar who began in the Clinic on December 5. One of his goals is to pick up backlog. As noted in the CEO Report, an additional DO and NP are to be joining Clinic soon.

3. CNO Report

Cori Valet, CNO, reviewed the CNO Report for the month of November, noting the new table format of the printed report, next month to include definition of FTE roles. Very small percentage of travelers. In November, SCHHC held our Daisy Award kickoff event and promotion. We are very happy to be joining this world-wide nurse recognition program, with our initial goal to present the award 2-times per year. Nominations are made by patients. Leadership Patient Rounding initiated in August has provided overall positive feedback. One area of improvement identified is for more communication of the plan of care. A new Quality Improvement project with a focus on communication is being drafted by the department manager Mike Snyder. ED volume statistics remain static. The Medical Imaging PACS system data transfer is to be complete by January 31. Echos are sent to Bay Area Hospital and Peace Health.

4. CFO Report

Jeremiah Dodrill, CFO, provided a review of his report on department activities for the month of November, including beginning a Facilities Master Plan to include architect RFP, a long-range (5-10 year) financial plan to include capital requirements planning and target setting, and the Community Benefit Report (CBR-1) due in April/May 2023, the required report providing justification for tax-free status with new thresholds defined in the last year.

5. CIO Report

Scott McEachern, CIO, provided a summary of the CIO report. The Risk Assessment remediation plan will provide quarterly updates for the board of directors. Thank you to Pam Hansen for joining the Project Management Committee; the committee will provide accountability and structure for larger scale projects. The EMR project is top priority. Mr. McEachern recently visited with Curry General who is moving to Epic on the Providence Health platform. Southern Coos has transitioned between EMRs five times in the last 10 years. We want this next transition to be a long-term partnership that will best serve the needs of our patients.

6. SCHD Foundation Report

Mr. McEachern, Foundation Executive Director, reviewed key performance indicators of for the month of November. The Foundation welcomed new board member Steve Reber in November. Steve is currently a volunteer with the Foundation gift shop and has a project management background.

7. Strategic Plan Report

Mr. Hino provided a summary review of progress or changes in the report from prior month. Board members requested that if the initial date of a strategic plan initiative cannot stay in the date field when changed, Administration is to continue to retain the original start date in the notes section. Board members inquired about efforts to increase commercial insurance patients and engagement with Moda Health which were confirmed.

V. Monthly Financial Statements

Jeremiah Dodrill, CFO, provided a review of the financial statements reported for the month of November noting the busy month with operating expenses slightly over budget in the area of labor. Revenue deductions are related to cost report, interim rate changes and service mix. Claims denials are standard in part due to automated process, explained. Southern Coos re-bills with some accounts then going to payment plans or charity care. Deductions from revenue methodology described, with contributing factors of patient type, payer types, and aged accounts.

VI. Old Business

1. Board of Directors Annual Self-Evaluation

The Governance Institute self-evaluation tool used in 2021 was completed again this year with 2022 results received last week. Board members opted to schedule a Saturday workshop to review the 2022 assessment results, which can be a public meeting. Administration to assist with date selection and potential board education options. **Discussion:** A workshop can be a public meeting or the group can choose to meet in Executive Session.

VII. New Business

See III. New Business Annual HIPAA Risk Assessment Review, Doug Selix, Critical Insight, agenda item moved forward to accommodate guest speakers.

2. Accounting Policy Review

- a. 300.001 Fixed Asset Policy
- b. 300.002 Capital Expenditure Approval Policy

The two policies had been reviewed by internal department representatives and the Policy Committee, then forwarded in advance to two board members for review. These revisions are not substantive but clarify procedure and approval specifications regarding assets in accordance with GASB 87 and GASB 96, with "software as a service" and "intangible assets" now capitalized. **Discussion:** Asset disposal when fully depreciated may still have real value worth pursuing. Under disposal need to refer to public contracting goals and add language documenting determination of net value, simplified language OK. Capital Purchase flow chart to edited per discussion.

Pam Hansen **moved** to approve policies 300.001 and 300.002 with amendments as directed. **Discussion:** The flow chart is not part of the policy but is used as a reference tool with recommended edit. Board members would like to see final edits. Norbert Johnson **seconded** the motion. **All in favor. Motion passed.**

VIII. Open Discussion & Adjournment

Mr. Hino reminded members to please join staff at the Southern Coos Hospital & Health Center employee holiday party on Saturday, December 17, 5:00-9:00 p.m. The next regular meeting will be held on January 26, 2023. A workshop to review the Board Member self-evaluation will be scheduled and publicly noticed.

At 8:10 p.m. the meeting adjourned.


Brent Bischoff, Chairman 1-26-2023


Mary Schamehorn, Secretary 1-26-2023

