

SOUTHERN COOS HEALTH DISTRICT

Board of Directors Regular Meeting

May 26, 2022 6:30 p.m.

<u>AGENDA</u>

I.	Call to Order
	1. Roll Call
	2. Approval of Agenda
	3. Public Input
II.	Consent Agenda
	1. Meeting Minutes
	a. Special Meeting – 4/22/221
	b. Regular Meeting $-04/28/22$ 2
	2. Monthly Counsel Invoices
	a. Robert S. Miller III, General Counsel
	– Invoice #1074 May 19, 2022
III.	Staff Reports
	1. CEO Report9
	2. Clinic Report11
	3. CNO Report
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	6. SCHD Foundation Report
	7. Medical Staff
	a. Credentialing Report
IV.	Monthly Financial Statements: Review21
V.	Quality & Patient Safety
	1. Monthly Report
VI.	New Business
	1. Appointment of Budget Officer – FY23 Budget
	2. Board Education: Cybersecurity Risks – Jake Milstein, Critical Insight
	3. Imaging Department Renewals
	a. Ultrasound
	b. Portable X-Ray
	c. PACS (Picture Archiving and Communications System)
VII.	Old Business
	1. Strategic Plan – <i>To be provided 5-23-22</i>
	2. District Bylaws Review
VIII.	Open Discussion
,	 Consideration of Moving Staff Reports to Consent Agenda
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IX.	Adjournment



Southern Coos Health District Board of Directors Special Meeting Minutes – Strategic Planning Workshop April 22, 2022

Members Present: Brent Bischoff, Chairman; Mary Schamehorn, Secretary; Norbert Johnson, Treasurer; Pamela Hansen and Tom Bedell, Directors. **Administration:** Raymond T. Hino, CEO; Jeremiah Dodrill, CFO; Cori Valet, CNO; Scott McEachern, CIO; and Philip Keizer, MD, Medical Staff Chief of Staff. **Others present:** David Sandberg, Consultant; Joseph Bain, Bain Insurance Agency; Margaret Pounder, President, Bandon Chamber of Commerce; Robert S. Miller III, General Counsel.

I. Call to Order

Brent Bischoff called the meeting to order at 8:30 a.m. for the purpose of a Strategic Planning workshop, welcoming attendees and introducing David Sandberg, Cycle of Business, Consultant

Relevant documents were reviewed including the 2017 Strategic Plan, the 2020 Community Health Needs Assessment and pre-planning questionnaire results and vision of the future balanced scorecard results and discussion.

The group broke for onsite catered box lunch at noon and resumed the meeting at 1:00 with breakout into work groups to brainstorm the ideal future of Southern Coos and create action plan and strategy with assignment of responsibilities.

II. Public Comment was opened at 2:30 p.m.

Linda Maxon, CEO, Coast Community Health Center, spoke of the desire to collaborate with Southern Coos to serve the community. Joseph Bain, Bain Insurance Agency, and Margaret Pounder, Bandon Chamber of Commerce President each spoke in appreciation of the opportunity to participate in the process. Mr. Hino thanked staff for meeting setup and catering.

III. Next Steps

Mr. Sandberg will meet remotely with Management Team in the next week or so to fine tune the action plan and strategy drafted today with goal to present the final strategic plan to the Board of Directors at the May meeting.

IV. Adjournment

At 4:00 p.m. the meeting was adjourned. The next regular meeting of the Southern Coos Health District will be April 28, 2022 at 6:30 p.m.

Brent Bischoff, Chairman 5-26-22

Mary Schamehorn, Secretary 5-26-22



Southern Coos Health District Board of Directors Regular Meeting Minutes April 28, 2022

Members Present: Brent Bischoff, Chairman; Norbert Johnson, Treasurer; Pamela Hansen and Tom Bedell, Directors. **Attending via remote link:** Mary Schamehorn, Secretary and Robert S. Miller III, General Counsel. **Administration:** Raymond T. Hino, CEO; Jeremiah Dodrill, CFO; Cori Valet, CNO; Scott McEachern, CIO; and Philip Keizer, MD, Medical Staff Chief of Staff. **Others present:** Denise Ebenal, Infection Prevention RN; Victoria Schmelzer, CRNA/Pain Management RN; Barbara Snyder, Quality & Risk Management.

I. Call to Order & Approval of Agenda

The meeting was called to order at 6:30 p.m. following the 6:00 Executive Session under ORS 192.660(2)(i) to review and evaluate the employment-related performance of the chief executive officer. No decisions were made in Executive Session.

Roll Call: All members were in attendance; quorum was met. There is one addition to the agenda to consider site improvement for new location of MRI trailer approved in March.

Norbert Johnson **moved** to accept the meeting agenda as discussed. Pamela Hansen **seconded** the motion. **None opposed. Motion passed.**

1. Public Input

None.

II. Consent Agenda

1. Meeting Minutes

March 24, 2022 Regular Meeting Minutes

2. Monthly Counsel Invoices

i. Robert S. Miller III, General Counsel ~ Invoice #1056 04/03/22

Mary Schamehorn **moved** to approve the Consent Agenda. Norbert Johnson **seconded** the motion. **None opposed. Motion passed.**

III. Staff Reports

1. CEO Report

Mr. Hino opened his report with an update from the Oregon Health Authority

and the Southern Coos Covid-19 Committee regarding updates to masking policy and new signage in place for staff and patients regarding loosening of restrictions in non-patient-care areas for vaccinated individuals. Thank you to Denise Ebenal for her work to support our Covid-19 efforts with communication and signage. Mr. Hino has been meeting various members of the community including local chaplains to return to the Chaplain on Call rotation for inpatients. Doctor's Day was celebrated on March 30 and we look forward to Hospital Week May 9-13 with daily events Monday through Friday. Ray will be grilling and serving staff at the BBQ on May 11. Thank you to board members Tom Bedell and Norbert Johnson who also volunteered to grill and serve staff at noon and 7pm other board members invited to attend.

2. Multi-Specialty Clinic Report

Mr. Hino reviewed the Clinic stats for the month thanking Deborah Ellis for taking role of Interim Clinic Manager following resignation of Cherie Turbitt in March. Deb will be visiting Lower Umpqua Hospital administration with clinic specialty background, has worked with staff on some items that came up during the Strategic Planning meeting last month and working on productivity. March stats included a total of 66 clinic days, the highest total since August 2021. Patient volume also increased at 109 patient visits. There were 2 Covid vaccine clinics during the month. We are looking into possibility of hiring another Nurse Practitioner.

3. CNO Report

Cori Valet provided an update to her report. Since the report was written, an offer has been made to a full-time day shift RN. Unfortunately, the Surgical Services candidate has rescinded acceptance of their offer after not being able to find housing in our area. CT downtime for maintenance this month caused a diversion from our ED for specific types of care for several days, the total number of patients served during that time did reduce from average but the ambulance company does not keep those statistics. Cori was pleased to share the positive feedback received from three SCH RNs who had previously accepted opportunities elsewhere but have recently expressed their desire to return to Southern Coos. Cori Valet, Deborah Ellis and Barbara Snyder recently attended the Critical Access Hospital Quality Workshop hosted by the Oregon Office of Rural Health, providing valuable information, resources and networking. Per board request Cori will provide the number of patients seen in the ER that were then admitted to the hospital and will will forward the list of questions included in the HCAHPS patient survey.

4. CFO Report

Jeremiah Dodrill, CFO, provided a review of the monthly CFO Report from the meeting packet for the month of March. The Budget Committee held its quarterly meeting at 4:30 today for review of prior 3 months and included a presentation on Medicare Cost Based Reimbursement. The Cost Report presentation is also available to all Board members. Committee members

include Tom Bedell, Harv Schubothe, Mary Wilson and Anne McCaleb. The public Budget Committee Meeting to review the FY23 budget is scheduled to be June 2 at 4:30 p.m. and the public Budget Hearing with the Board of Directors for final form LB-1 budget approval is on June 23 at 6:30 p.m. Mr. Dodrill described staffing grids and other components used in budget planning. The Federal single audit of grant funds such as the Covid-19 PPP grants, audits use of these funds per federal guidelines that are still pending. There is a compliance requirement to review physician contracts to ensure providers are paid at fair market value. MGMA provides a tool to review clinic practitioner contracts. Administration has recently subscribed to MD Ranger, a fair market value analysis and benchmarking tool to assist with hospital provider contracts at a cost of \$5,000, with favorable Board response.

5. CIO Report

Scott McEachern, CIO, provided a summary of his March report. Recent press articles have included new CEO and school nurse program. Projects include a thorough review of stored medical and organizational records for destruction or move to off-site secure storage, and work with Barbara Snyder, Quality Manager, to develop work plan and timeline for DNV Accreditation with kickoff next week, and select and onboard combined Point of Sale system for gift shop and Dietary use. Work is in progress to implement Dialog Health as the new appointment reminder system for multi-specialty clinic appointments by the end of May which will result in annual savings of \$6,000 from current vendor. Mr. McEachern will add Clinical Informatics to his next report.

6. SCHD Foundation Report

The Bandon School Nurse program was featured KCBY-TV with an interview with Kerrie Devine, RN, Roger Straus from the Southern Coos Health Foundation, and Ocean Crest Elementary School Principal Courtney Wehner and shared on social media. Planning has begun for the 2022 Golf for Health Classic to be held at Bandon Crossings Golf Couse on Saturday, September 17. Year-end fundraising will begin in September to include coordination with the District Board and strategic planning currently underway.

7. Medical Staff Report

i. Dr. Philip Kiezer, Medical Chief of Staff, presented the Credentialing and Privileging Report from the April 12 Medical Staff monthly meeting as follows:

New Appointments

None

Staff Reappointments

Noel Pense, D.O. – Active Staff – Internal Medicine

<u>Direct Radiology – Third Party Reading Radiology Reappointments &</u> <u>Resignation</u>

Daniel Baker, MD – Courtesy Staff – Radiology Robert Berger, MD – Courtesy Staff – Radiology Patrick Burke, MD – Courtesy Staff – Radiology Courtney Carter, MD – Courtesy Staff – Radiology Samuel S'Doia, MD – Courtesy Staff – Radiology Dishant Shah, MD – Courtesy Staff – Radiology Joseph Trudeau, MD – Courtesy Staff – Radiology - Resigned

Tom Bedell **moved** to accept the Medical Staff Report as presented. Pamela Hansen **seconded** the motion. **None were opposed. Motion passed.**

IV. Monthly Financial Statements: Review

Jeremiah Dodrill, CFO, provided a summary of the financial report for the month of March. In summary, Gross Revenues for March of 3.393M were higher than budgeted expectations of \$2.999M, about 13%. Operating revenue for the month was \$2.365M exceeding budget of \$1.902M. Operating income for March was \$62,000 compared to a budgeted loss of (\$261,000). Year-to-date operating loss at end of March was (\$704,000) compared to a budgeted loss of (\$1,473,000).The increase in net position was \$151K compared to budgeted loss of (\$153K). Days of Cash on Hand closed at 124.6, down from 125.1 in February. Goal is to reduce use of contract nursing. The clinic performed better than budgeted. Respiratory stat reporting issue was corrected. There were no questions.

V. Quality and Patient Safety Report

Barbara Snyder, Quality & Risk Manager, reviewed her report from the packet. Thank you for Board and executive support to include in new FY budget. Onsite training to occur in July with unannounced baseline survey in August. Items identified as requiring attention will be addressed at that time and we will be accredited. Barbara is working with Scott on goals and timelines for internal roll-out. DNV is deemed by CMS. DNV continuous improvement model includes annual survey compared to state surveys that occur typically every 3 years. DNV accreditation will support strategic planning rather than impede or interrupt. Barbara is participating in DNV cohort that includes top Critical Access Hospitals in the country. Patient satisfaction questionnaires are a focus in the hospital with an increase to 229 survey responses in March, thank you to everyone for their work to increase survey returns. The strategic plan includes effort to continue to increase survey responses. Documentation and medication scanning goals have been established in all areas of hospital as we prepare for DNV survey. Weekly quality variance reviewed by committee. No new policies introduced this month. Internal employee survey regarding employee safe reporting process. The workflow of radiology reading in the ED was discussed.

VI. New Business

1. Antimicrobial Stewardship

Denise Ebenal, Infection Prevention RN, presented a review of the Antimicroibial Stewardship program outlined by the CDC and required by CMS for all CAH hospitals, intended to address problem of increased antimicrobial resistance to antibiotics; requesting a motion to approve. Dr. Noel Pense has volunteered to be the physician program leader and Dr. Olixn Adams will also help. Stephanie Lyon, PharmD, has also taken a leadership role. Data tracked from 2020 to present. Collaborative hospital-wide program established.

Pamela Hansen **moved** to approve the Antimicrobial Stewardship Program as presented. Norbert Johnson **seconded** the motion. **None opposed. The motion passed.**

2. Pain Management

Victoria Schmelzer, CRNA, presented a review of the Pain Management Clinic that she is implementing, including statistics relating to Coos County patients, a list of the wide range of common medical conditions to benefit from this service, and review of interventions to be utilized. The Clinic will open in May. Ms. Schmelzer is an Active Staff member of the SCHHC Medical Staff.

3. Appoint Board Liaison for Coast Community Health Center

Mr. Hino shared that during recent meetings with Linda Maxon, CEO of Coast Community Health Center, Linda had shared that there had previously been a recurring joint conference with SCHHC. To proceed with a return to these periodic meetings Mary Schamehorn had expressed interest to serve as the SCHHC board liaison. A meeting schedule will be coordinated with CCHC.

Tom Bedell **moved** to approve Mary Schamehorn as the SCCHC board liaison for the SCHHC-CCHC joint conference meetings. Norbert Johnson **seconded** the motion. **None were opposed. Motion passed.**

4. Site Improvement – MRI Trailer

Jeremiah Dodrill, CFO, provided a review of the proposal to locate the MRI trailer approved in April to a new location at the north end of the hospital to improve access for patients as well as parking and traffic flow. **Discussion:** The location has been measured to be a safe distance from the oxygen tank. The Plant Operations Manager will contact the Fire Chief with plans. Project includes tree removal, concrete pad placement, retaining wall, awning and electrical installation. Initial quotes have been received for between \$25-28K with estimated total project cost of \$50,000. Administration is requesting an approval for up to \$50K to complete the project.

Norbert Johnson **moved** to approve the improvements for the new MRI truck relocation project up to \$50,000. Tom Bedell **seconded** the motion. **None were opposed. Motion passed. Discussion:** Will improve access to MRI for patients as well as traffic flow in parking area.

VII. Old Business

1. Bylaws Articles 1-3 – Review

Review of proposed amendments which have been forwarded to Robert S. Miller and Raymond Hino. Mr. Hino has reviewed and forwarded additional reference bylaws from other critical access hospitals. Article 2 Item 3, Mr. Miller suggested re-drafting conflict of interest section and consider if the purpose statement is accurate and unlikely to change in next few years; board should discuss rules for adding items to agenda, governed by public meetings law to give public fair notice, but on occasion allowing new items to be added. Discussion: leaving some flexibility for special considerations with board ability to suggest special meeting or voting on at next regular meeting. Regarding Article 2 Section 1 Conflict of Interest Mr. Miller suggested using language from Oregon Attorney General. Mr. Miller suggested that the board continue to review sections at each meeting, then once through the document, the final document is then reviewed approved by the board.

2. Governance Institute Update

The former NRC/Governance representative, Lindsay Laug, has moved on within the organization, Brent and Ray Hino, CEO have a meeting scheduled to meet new Customer Success Manager, Molly Preston. **Discussion:** Brent asked members for input on future subjects. All members have access to Governance Institute resources available through website. The Bylaws specify a board orientation training program. Norbert, Brent and Tom have completed the Board Orientation module. Once the Bylaws are complete the Board will then consider a specific orientation program.

VIII. Open Discussion

Tom Bedell, Budget Committee Liaison, noted that all three Budget Committee members were present for the 3Q Budget Committee Meeting at 4:30 today. Ray Hino, CEO, has a book for each of the Board members from the SCHHC insurance group, titled, "Answering the Call: Understanding the Duties, Risks, and Rewards of Corporate Governance."

IX. Adjournment

At 8:20 p.m. the meeting was adjourned. The next regular meeting of the Southern Coos Health District will be May 26, 2022 at 6:30 p.m.

Brent Bischoff, Chairman 5-26-22

Mary Schamehorn, Secretary 5-26-22

INVOICE

Robert S. Miller III Attorney (CY2022+) 1010 First Street SE, Suite 210 Bandon, OR 97411 robertstevensmilleriii@gmail.com (541) 347-6075

Southern Coos Hospital & Health Center

	Product or service Ar								
1.	Attorney	2.5 units × \$250.00	\$625.00						
	Service date: 04/22/2022								
	Email suggestions for noticing Strategic Planning Meeting; Strategic Planning Day, Bandon Public Library.								
2.	Attorney	4.5 units × \$250.00	\$1,125.00						
	Service date: 04/28/2022								
	Review of Bedell/Johnson edits of proposed Bylaw amendments; re present standards for potential/actual conflicts of interest and require	·							

Ways to pay	Total	\$1,750.00
EPay VISA COURSE BANK		



CEO Report

DATE:May 19, 2022TO:SCHD Board of DirectorsFROM:Raymond T. Hino, CEOSUBJECT:May 2022 CEO Report

COVID Update

We have seen an increase in positive COVID cases, both locally and in the State. We have also seen a rise in SCHHC staff testing positive for COVID and being quarantined at home. We are not changing any of our COVID policies at this time. So we continue to allow for masks to be optional in the administrative wing of the hospital. But we will continue to monitor the situation. The increase in COVID cases and staffing shortages in hospitals Statewide, has made it more difficult to transfer patients to other hospitals. As a result, recently, we have been keeping patients longer in our hospital, and in some cases treating and releasing from our hospital. For now, our staff, as usual, has stepped up and is making the extra effort to make sure that our patients are cared for with no drop in our customary standard of excellent care. I will keep the Board apprised if anything changes.

CEO Introductory Meetings

In the past 30 days I have met with:

- Don Crowe, General Manager, Bandon Dunes Golf Resort
- Brian Moore, CEO, Bay Area Hospital
- Virginia Williams, CEO, Curry General Hospital
- Doug Crane, MD, in Coquille office

The Community-wide Hospital CEO Meet and Greet is being schedule in early June with the location being the Edgewaters Restaurant. More details will be forthcoming.

Recruitment

Because of the critical nature of getting more volume into the Hospital-based clinic, I have initiated a recruitment for a Locum Tenens (Temporary) Family Nurse Practitioner for the clinic. My goal is to have an additional Nurse Practitioner working in the clinic by the end of June. We are continuing to recruit for a full time Nurse Practitioner to move to Bandon.

First 90-Day Priorities

٠	Strategic Plan to be presented to Board of Directors for approval in May on target
٠	Rural Health Clinic Feasibility Analysis & Implementation Plan Completedin progress
٠	Monthly All-Staff Meetings Completed for First 2 months
٠	Community-wide "Meet the New CEO" Community Eventin progress
٠	Begin interviewing FNP candidates1 candidate interviewed, Locum Tenens agreement in place

Recognitions

Our hospital week celebration was a huge success with the daily events, which was highlighted by the cook-out on Wednesday, May 11. Thank you to all the Board members (and their family members) that came to help or attend our event. Our employees greatly appreciated it.

My Move

My move from Mendocino, California to Bandon, Oregon will take place on Monday and Tuesday, May 23 and 24. Gayle and I will arrive with a moving van on Tuesday, May 24 and begin settling into our new home on May 24. I will be back in time for our Board meeting on May 26.



Clinic Report

To: Southern Coos Health District Board of Directors and Southern Coos Management From: Deborah Ellis, Interim Clinic Manager Re: Clinic Report for SCHD Board of Directors Meeting – May 26, 2022

Provider News-April

Dr. Mitchell, Dr. Pense and Dr. Adams all saw an average of 9 & 7 & 9 patients per day. Dr. Mitchell was in clinic a total of 12 days with 115 total patients seen while adding 9 new patients. Dr. Pense was at 5 days with 36 patients (2 new) and Dr. Adams 4 days with a total of 38 patients seen (1 new). All together the three DOs saw 189 patients in April.

- Shane Matsui, LCSW has a patient average of 4 patients per day with 21 days in clinic. He provided service via telehealth for 21 of those visits. He now has a waiting list of 12 patients and adds a new one patient to his panel each Tuesday. We are able to fill his schedule every week. Cancellation rate is at 17% while the no show rate is at 5%.
- Debra Guzman, NP logged in 39 telehealth calls and added 13 new patients to her panel. She averaged 13 patients per day with 12 days in clinic and a total of 153 patient visits.
- Dr. Qadir, Nephrologist was in clinic once during April and saw 11 local patients.
- We are advertising to hire an additional Nurse Practitioner to get back to capacity. Ginny Hall from HR is monitoring the process and hoping to speed it up with a new posting service.
- Victoria Schmelzer will begin to see patients in May. All work flow and provider coordination are in the final steps of completion

Clinic Report-April

- Debi Ellis is currently filling in as Clinic Manager. We are actively recruiting for a permanent replacement. Interviews are ongoing.
- We are currently exploring the Clinic designation, "Rural Health Clinic" in order to determine whether this would be a means to not only benefit the Multidisciplinary Clinic but increase revenue as well.
- Medicare Wellness, Chronic Disease Management and Transitional Care are all important components of the care that we can provide to our patients. This is another avenue that has potential to generate an increase in revenue that we are currently looking into.
- Telehealth visits for April totaled 66. We anticipate this number to maintain or slightly decrease as we transition out of the recent Covid Omicron surge.

- Kassandra Keller remains as interim clinic supervisor. We anticipate Kassandra being out for a minimum of three months for maternity leave beginning around end of May so cross training has begun. Victoria Kolosiki CNA is temporarily filling in as "Front Office Lead" position while Kasandra is out on maternity leave
- We offered 4 Covid vaccination clinics in the month of March. We provided a total of 110 vaccinations over these 4 days.
- The outpatient clinic saw 174 patients over the 21 days we were open in April. The Clinic sent out 123 Referrals. The Outpatient Clinic will begin offering ABI (Ankle Brachial Index) procedures.
- The Clinic page on the SCHHC website was updated to reflect the services the Clinic offers instead of being focused on the providers. It also has a "request an appointment" button that now goes directly to scheduling.

Clinic Stats - April 202	22									
	Days in Clinic	Patients			Total	Average	No Show	Cancelation	Total	Total
Provider	Clinic	Scheduled	CXL'D	No Show	Seen	Seen	Rate	Rate	Telehealth	New Pts
Debra Guzman, FNP	12	196	24	19	153	12.8	10%	12%	39	13
Olixn Adams, DO	4	46	8	0	38	9.5	0%	17%	3	1
Noel Pense, DO	5	48	8	4	36	7.2	8%	17%	0	2
Christine Mitchell, DO	12	149	28	6	115	9.6	4%	19%	3	9
Shane Matsui, LCSW	21	121	21	6	94	4.5	5%	17%	21	0
COVID-19 Clinic	4	123	7	0	116	29.0	0%	6%	0	0
Outpatient Services	21	198	7	17	174	8.3	9%	4%	0	0
Schmelzer	0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!		
Totals	79	881	103	52	726	9.2	6%	12%	66	25
Total telehealth	66				436	Clinic Reg	gistrations			
Southern Coos Health	Center Intrad	o Results -	April 202	2						
Туре	Total									
Called - No Answer			*Pts Seen							
Phone Too Busy			*Cancelled							
Answered No TT Requested			*No Show							
Answered - Hung Up			*Primary C	are Only						
Answered - Entire Msg			No show ra	ate						
Invalid Ph # / Out of Order				#DIV/0!						
Answered - Repeated Msg										
Answering Machine										
Answered Yes										
Answered No										



CNO Report

To: Board of Directors and Southern Coos Management From: Cori Valet, CNO Re: CNO Report for Board of Directors Meeting – May 26, 2022

People

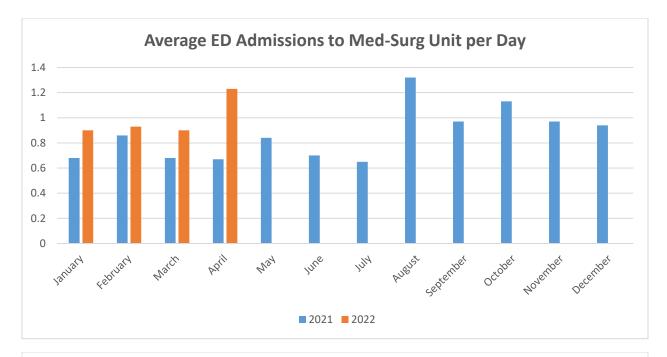
- Clinical Department Staffing
 - o Nursing
 - Full-time staff vacancies include 6 Full Time nurse positions (2 MS, 2 ED) and 6 CNA positions.
 - 5 Agency Nurse Contracts are in place (2 MS, 3 ED)
 - New hires:
 - i. Caroline Wheeler Full Time Med-Surg Day Shift RN
 - ii. Tammie Murer Transitioning back to Full Time from per diem Med-Surg Day Shift RN in June 2022.
 - iii. Katie Witt Transitioned back to Full Time from per diem Emergency Department Swing Shift RN.
 - iv. Kristina Campina Transitioned back to Full Time from per diem Emergency Department Day Shift RN.

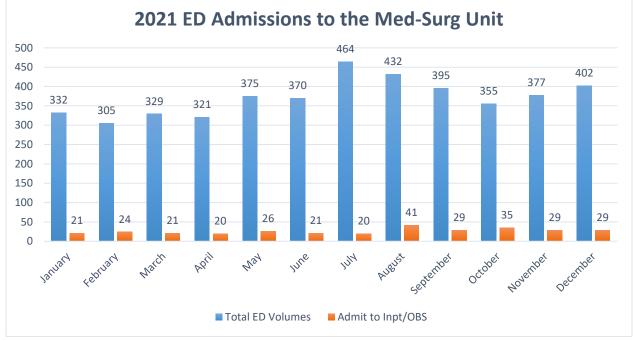
o Laboratory

- Vacancies include: 1 Full Time and 1 Per Diem Medical Laboratory Scientist/Medical Laboratory Technologist
- 1 Agency/Contract MLS/MLT in place
- Medical Imaging
 - Vacancies include 2 Full Time Radiology Technologists, 1 Part Time Radiology Technologist and 1 Part Time or Per Diem Ultra sonographer.
 - 1 Agency/Contract Technologist in place. Ongoing search active for a 2nd Agency/Contract Technologist.
- o Respiratory Therapy
 - 1 Full-time RT out on leave until mid-August 2022.
 - 1 Agency/Contract RT in place to cover vacancy.
- o Dietary
 - 1 Full-time dietary cook/aid
 - New hire:
 - i. Justin Medrano cook/aid started orientation 5/11/2022.

Service

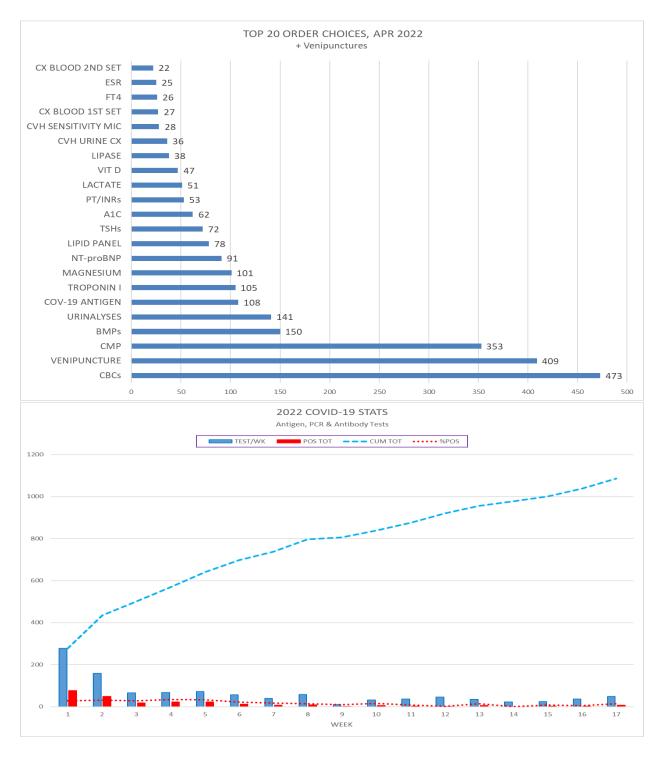
- Emergency Department Admission Statistics
 - o Average Daily Admission Rate (Inpatient and Observation)
 - 2021- 0.87 per day
 - 2022- 1.0 per day (Jan-April)





• Laboratory Top Order Statistics

 COVID Antigen Testing is trending down. April – 108, March – 139, February – 187, January – 477.





CFO Report

To: Board of Directors and Southern Coos Management From: Jeremiah Dodrill, CFO Re: CFO Report for Board of Directors Meeting – May 26, 2022

Budget Planning Update

Finance is finalizing our fiscal FY2022/23 budget. We have aligned key aspects and assumptions within the budget to various projects within our strategic plan including OP growth goals and provider and clinic productivity improvements. We will share the budget presentation as soon as it's finalized in advance of the Budget Committee Meeting. As a reminder, the Public Budget Committee Meeting is scheduled for June 2 at 4:30 p.m. and the Public Board Meeting/Budget Hearing is scheduled for June 23 at the regular meeting time of 6:30 p.m.

MD Ranger Contract Benchmarking

Finance and Administration have engaged MD Ranger to benchmark our provider contracts and ensure compliance with Medicare and OIG "fair-market value" (FMV) regulations. We have made our initial data submissions to MD Ranger which will be the basis for our benchmarking comparisons in order to identify FMV gaps, if any, in our current contract. Initial results are expected to be provided by June or July. The MD Ranger tool will also provide annual updates to ensure ongoing compliance and provide objective data for any new provider contract negotiations in the future.

Cost Report Preparation

Finance and Administration have performed a request for proposal for our cost report preparation services in response to some of the challenges we experienced in the preparation of the 2021 cost report. Several CPA firms were considered and we are pleased to engage CliftonLarsonAllen (CLA) to perform this work for fiscal 2022. CLA has included in its proposal continuation and ongoing updates to the cost report estimation tool that we use to record monthly cost report settlement adjustments. This tool is vital to ensure the accurate monthly reporting net revenues. It was also instrumental in identifying the issues we worked through in refiling our 2021 Medicare cost report.



CIO Report

To: Southern Coos Health District Board of Directors and Southern Coos Management From: Scott McEachern, Chief Information Officer Re: CIO Report for SCHD Board of Directors Meeting – May, 26 2022

General Projects - Information Systems (IS)

- SCHHC information systems is installing a new disaster recover server. After the hardware is installed, IS will then update our disaster recovery procedures.
- We have had several meetings with a company called Critical Insight, a cybersecurity firm operating out of the Seattle area. Critical Insight is the American Hospital Association's preferred cybersecurity vendor. SCHHC is working with Critical Insight on a long-term plan to improve SCHHC's cybersecurity defenses against external threats such as hacks and ransomware attacks. SCHHC has itself been the victim of a ransomware attack in January 2020 so this is an important next step in shoring up our digital defenses.

General Projects – Medical Records

- In Medical Records, Sammie Borgens recently started as medical records specialist I.
- We are onboarding a company, MediCopy, that will provide remote fulfillment of medical records requests. They will go live by the end of July.
- Lori Colby, medical records supervisor, is leading an effort to reduce the number of hard copy records stored in locations across the facility. We are contracted with a company called iShare, out of Grants Pass, to store records that are legally required to be retained. iShare will also destroy files slated for destruction.

General Projects – Clinical Informatics

- The SCHHC Pain Management Center, led by Victoria Schmelzer, CRNA, opened in May. Our clinical informatics manager, Shawn March, shadowed the pain management team for the first several clinic days to identify any process gaps and system inefficiencies. On the first day, for example, the team identified an inconsistent scheduling workflow that they then resolved.
- Staying with the Multi-Specialty Clinic, we hold weekly meetings with Debi Ellis to ensure project awareness and continuity. A handful of items we are working on include:
 - Streamlining the new patient intake process by offering new patient packets via a pdf attachment to an email or by directing new patients to an online form they can then download, fill out, and then bring in to their appointment or send via attachment to an email or via the USPS.
 - This project roadmap includes offering an online form that new patients can fill out and then submit to the Multi-Specialty Clinic team for intake.
 - We are implementing a new text-based appointment reminder system through Dialog Health. Our implementation plan is as follows:
 - 1. Implement the system in the Multi-Specialty Clinic.
 - 2. Proof the workflows
 - 3. Implement in Medical Imaging and, then,
 - 4. Implement the staff communication module so we can send text communication to staff

- Front-Desk Schedule Optimization: in collaboration with Medical Imaging and Laboratory, we have identified several areas of improvement in the patient admissions process at the front desk of the hospital. These areas of improvement include:
 - Order faxing and organization
 - Previous record request process

General Projects – Hospital

• The SCHHC dietary and gift shop departments recently selected a new point of sale system, BePoz. We begin implementation in June. The go-live date is TBD. BePoz will significantly improve our ability to track inventory by automating a part of the ordering process, sending automatic low-inventory alerts to managers, and creating purchase orders and invoices directly out of the system.



Southern Coos Health Foundation Report

To: Southern Coos Health District Board of Directors and Southern Coos Management From: Scott McEachern, Executive Director, SCHF Re: SCH Foundation Report for SCHD Board of Directors Meeting - May 26, 2022

The Southern Coos Health Foundation did not have a meeting in April so board members and staff could devote their energy to the SCHHC strategic planning process.

I have included the Southern Coos Health Foundation into the hospital's strategic plan. Specifically, here is what I have included:

- 1. Develop and implement SCHF Strategic Plan, aligned with the hospital's plan and growth goals
- 2. Define specific and measurable fundraising targets for FY23-25
- 3. Recruit additional SCHF board members
- 4. Improve communication and alignment between the hospital and SCH Foundation board and community.

Golf for Health Classic 2022

The Golf for Health Classic planning is underway. The date of the event is September 17, 2022. A save the date has gone out. The planning team is also canvassing the community for sponsorships.



ΟυΤΗΕRΝ COOS HOSPITAL CREDENTIALING

May 10, 2022

Appointment and Privileges – MEDICAL STAFF							
Area of Practice	Category	əmeN					
Emergency Medicine	Courtesy	Adam Mankowski, MD					

		enoN						
Area of Practice	Category	əmɛN						
Appointment and Privileges – Licensedent and Dependent Practitioners								

		Reappointment and Privileges – MEDICAL STAFF
Area of Practice	Category	emeN
		enoN

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Area of Practice	Category	emeN
		Appointments, Reappointments, Changes – Direct Radiology

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Area of Practice	sutat2 oT	Prom Status	əmsN
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To: Board of Directors and Southern Coos Management From: Jeremiah Dodrill, CFO Re: April 2022 Month End Financial Results Presented May 26, 2022

Gross Revenue and Volumes – Gross revenues for April of \$3,008,000 were higher than budgeted expectations of \$2,941,000. OP gross revenues of \$1,990,000 were lower than a budget of \$2,019,000. ED and Respiratory volumes exceeded budgeted expectations with ED volume also exceeding the prior month. IP and Swing Bed volumes and revenues of \$1,018,000 were higher than a budget of \$922,000 for the month of April.

Deductions from Revenue – Revenue deductions at \$988,000 or 32.9% of gross revenue were lower than a budget of 34.6% due primarily to favorable cost report settlement adjustments. Year-to-date, deductions from revenue is 32.8% of gross revenue vs. a budget of 35.9%.

Total Operating Revenues of \$2,019,000 exceeded the budget of \$1,927,000.

Labor Expenses totaled \$1,323,000 in April compared to a budget of \$1,305,000. Contract staffing for nursing and other medical professionals continues to be high, but dipped slightly in April.

Professional Fees and Purchased Services combined were \$480,000 which was slightly above budget of \$462,000.

Medical Supplies, Drugs and Other Supplies combined at \$121,000 were lower compared to budgeted expectations at \$146,000 due to a decrease in purchases for lab test kits.

Operating Expenses – Total operating expenses of \$2,095,000 for the month were 1% higher than budget of \$2,118,000.

Operating Income / Loss – Operating loss for April was (\$76,000) compared to a budgeted loss of (\$191,000). Year to date operating loss is (\$780,000) compared to a budgeted loss of (\$1,664,000).

Increase in Net Position was \$8,000 compared to a budgeted loss of (\$83,000).

Days Cash on Hand for April was 131.5 days, slightly up from March at 124.6.

Volume and Key Performance Ratios For The Period Ending April 2022

				Month			Year to Date				
					Variance	Variance				Variance	Variance
		Actual	Budget	Prior Year	to Bud	to Prior	Actual	Budget	Prior Year	to Bud	to Prior
	IP Days	114	58	65	97.3%	75.4%	1,013	756	729	34.1%	39.0%
	Swing Bed Days	94	142	134	-33.8%	-29.9%	1,101	1,441	1,434	-23.6%	
b	Total Inpatient Days	208	200	199	4.1%	4.5%	2,114	2,197	2,163	-3.8%	
mar	Avg Daily Census	6.7	6.4	6.4	4.1%	4.5%	7.0	7.2	7.1	-3.8%	
iut	Avg Length of Stay - IP	3.4	2.8	3.1	21.8%	8.3%	3.6	3.6	3.5	-1.2%	
e Si	Avg Length of Stay - SWB	6.7	11.8	11.2	-43.3%	-39.9%	12.4	10.5	10.5	17.6%	18.2%
Volume Summary							1				
Vol	ED Registrations	391	364	316	7.5%	23.7%	3,751	3,192	3,318	17.5%	
	Clinic Registrations	436	467	654	-6.6%	-33.3%	4,600	4,742	3,871	-3.0%	
]	Ancillary Registrations	818	1,090	1,090	-25.0%	-25.0%	11,724	11,094	11,094	5.7%	5.7%
	Total OP Registrations	1,645	1,921	2,060	-14.4%	-20.1%	 20,075	19,028	18,283	5.5%	9.8%
nt	Gross IP Rev/IP Day	8,058	12,595	9,205	-36.0%	-12.5%	8,494	10,902	9,449	-22.1%	
me	Gross SWB Rev/SWB Day	1,057	1,364	970	-22.5%	8.9%	1,002	1,365	1,264	-26.6%	
tate	Gross OP Rev/Total OP Registrations	1,210	1,051	914	15.1%	32.4%	1,077	1,060	1,026	1.6%	
ome St Ratios	Collection Rate	67.1%	65.4%	78.5%	2.7%	-14.5%	67.2%	64.1%		4.8%	
Rat	Compensation Ratio	65.5%	67.7%	79.8%	-3.2%	-17.9%	66.5%	66.9%	67.5%	-0.6%	
Key Income Statement Ratios	OP EBIDA Margin \$	(20,458)	(121,828)	(177,802)	-83.2%	-88.5%	(243,787)	(1,025,470)	(1,093,236)	-76.2%	-77.7%
Cey	OP EBIDA Margin %	-1.0%	-6.3%	-8.7%	-84.0%	-88.3%	-1.2%	-5.3%	-6.1%	-78.0%	-80.9%
1	Total Margin	0.4%	-4.3%	-5.9%	-109.5%	-106.9%	 0.1%	-3.0%	-3.3%	-104.8%	-104.4%
k:	Days Cash on Hand	131.5	80.0	19.9	64.4%	560.8%					
Key Liquidity Ratios											
K Liqu Ra											
	AR Days Outstanding	46.9	50	44.3	-6.2%	5.9%					

Data Dictionary

	IP Days	Total Inpatient Days Per Midnight Census
	Swing Bed Days	Total Swing Bed Days per Midnight Census
	Total Bed Days	Total Days per Midnight Census
(Jac)	Avg Daily Census	Total Bed Days / # of Days in period (Mo or YTD)
Summary	Avg Length of Stay - IP	Total Inpatient Days / # of IP Discharges
ne Su	Avg Length of Stay - SWB	Total Swing Bed Days / # of SWB Discharges
Volume	ED Registrations	Number of ED patient visits
	Clinic Registrations	Number of Clinic patient visits
	Ancillary Registrations	Total number of all other OP patient visits
	Total OP Registrations	Total number of OP patient visits

		Gross IP Rev/IP Day	Avg. gross patient charges per IP patient day
nen	Gross SWB Rev/SWB Day	Avg. gross patient charges per SWB patient day	
Statement		Gross OP Rev/Total OP Registrations	Avg. gross patient charges per OP visit
	tios	Collection Rate	Net patient revenue / total patient charges
ome	Rati	Compensation Ratio	Total Labor Expenses / Total Operating Revenues
Income		OP EBIDA Margin \$	Operating Margin + Depreciation + Amortization
Key		OP EBIDA Margin %	Operating EBIDA / Total Operating Revenues
14		Total Margin (%)	Total Margin / Total Operating Revenues

Days Cash on Hand	Total unrestricted cash / Daily OP Cash requirements
AR Days Outstanding	Gross AR / Avg. Daily Revenues

Summary Statements of Revenues, Expenses, and Changes in Net Position For The Period Ending April 30, 2022

For the Ferred Ending riph 56, E										
- •		Curr	ent Month - Apr-2	022		Year To Date - Apr-2022				
	Apr-2022	Apr-2022			Apr-2021	Apr-2022	Apr-2022			Apr-2021
	Actual	Budget	Variance	Var %	Actual	Actual	Budget	Variance	Var %	Actual
Patient Revenue										
Inpatient	1,017,891	921,557	96,334	10.5%	728,381	9,707,652	10,203,792	(496,141)	(4.9%)	8,700,499
Outpatient	1,989,778	2,019,104	(29,326)	(1.5%)	1,882,129	21,615,358	20,162,411	1,452,947	7.2%	18,751,182
Total Patient Revenue	3,007,670	2,940,661	67,008	2.3%	2,610,510	31,323,010	30,366,204	956,806	3.2%	27,451,682
Deductions From Revenue										
Total Deductions	988,470	1,017,926	29,456	2.9%	560,447	10,272,121	10,897,276	625,155	5.7%	9,463,959
Revenue Deductions %	32.9%	34.6%			21.5%	32.8%	35.9%			34.59
Net Patient Revenue	2,019,200	1,922,736	96,464	5.0%	2,050,063	21,050,889	19,468,928	1,581,961	8.1 %	17,987,723
Other Operating Revenue	45	4,090	(4,045)	(98.9%)	45	820	40,905	(40,085)	(98.0%)	36,893
Total Operating Revenue	2,019,245	1,926,826	92,419	4.8%	2,050,108	21,051,709	19,509,833	1,541,876	7.9 %	18,024,615
Operating Expenses										
Total Labor Expenses	1,323,133	1,304,597	(18,536)	(1.4%)	1,636,310	14,004,198	13,056,204	(947,994)	(7.3%)	12,172,936
Total Other Operating Expenses	772,064	813,212	41,148	5.1%	648,304	7,827,433	8,117,286	289,853	3.6%	7,502,641
Total Operating Expenses	2,095,196	2,117,808	22,612	1.1%	2,284,613	21,831,631	21,173,490	(658,141)	(3.1%)	19,675,577
Operating Income / (Loss)	(75,952)	(190,982)	115,031	(60.2%)	(234,505)	(779,923)	(1,663,657)	883,735	(53.1%)	(1,650,962
Net Non-Operating Revenues	84,262	107,786	(24,521)	(22.8%)	112,838	810,225	1,076,349	(273,673)	(25.4%)	1,060,310
Change in Net Position	8,310	(83,196)	91,506	(110.0%)	(121,667)	30,302	(587,308)	617,611	(105.2%)	(590,652
Collection Rate %	67.1%	65.4%	2.7%	2.7%	78.5%	67.2%	64.1 %	4.8%	4.8%	65.5%
Compensation Ratio %	65.5%	67.7%	(3.2%)	(3.2%)	79.8%	66.5%	66.9 %	(0.6%)	(0.6%)	67.5%
OP EBIDA Margin \$	(20,458)	(121,828)	101,370	(83.2%)	(177,802)	(243,787)	(1,025,470)	781,684	(76.2%)	(1,093,236
OP EBIDA Margin %	(1.0%)	(6.3%)	5.3%	(84.0%)	(8.7%)	(1.2%)	(5.3%)	4.1%	(78.0%)	(6.1%
Total Margin (%)	0.4%	(4.3%)	4.7%	(109.5%)	(5.9%)	0.1%	(3.0%)	3.2%	(104.8%)	(3.3%

Volume and Key Performance Ratios For The Period Ending April 2022

	1	Actual	Budget	Month Prior Year	Variance to Bud	Variance to Prior Year
	Medicare	6 5.75%	63.34%	63.34%	3.8%	3.8%
Gross Charges	Medicaid	15.59%	20.62%	20.62%	-24.4%	-24.4%
Gross (Commercial	11.25%	11.36%	11.36%	-1.0%	-1.0%
Mix -	Government	5.58%	1.97%	1.97%	183.8%	183.8%
Payor Mix	Other	0.88%	0.59%	0.59%	49.2%	49.2%
	Self Pay	0.95%	2.12%	2.12%	-55.2%	-55.2%

		Year to Date	Variance to	Variance to
Actual	Budget	Prior Year	Bud	Prior Year
61.47%	65.60%	65.60%	-6.3%	-6.3%
18.23%	18.00%	18.00%	1.3%	1.3%
12.06%	10.49%	10.49%	15.0%	15.0%
6.11%	4.15%	4.15%	47.2%	47.2%
0.43%	0.68%	0.68%	-36.8%	-36.8%
1.70%	1.08%	1.08%	57.4%	57.4%

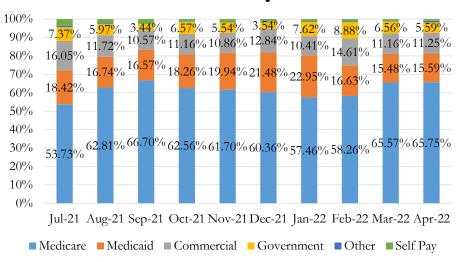
Total

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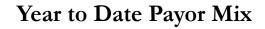
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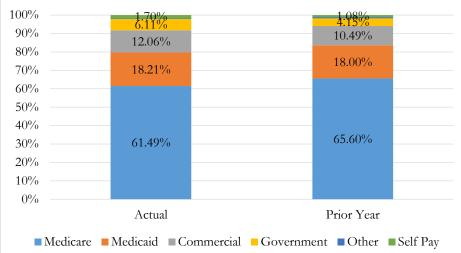
				Month		
					Varia	nce %
		FY22 Actual	FY22 Budget	FY21 Prior Year	To Budget	To Prior Year
	In Patient Days	114	58	65	97.3%	75.4%
	Swing Bed Days	94	142	134	-33.8%	-29.9%
	Total Patient Days	208	200	199	4.1%	4.5%
Patient Volumes	Emergency Visits	391	364	316	7.5%	23.7%
τŇ	Radiology Procedures	726	720	659	0.8%	10.2%
tien	Laboratory Tests	3,130	3,374	3,413	-7.2%	-8.3%
Pa	Respiratory Visits	675	608	442	11.0%	52.7%
	Surgeries and Endoscopies	2	13	23	-84.0%	-91.3%
	Specialty Clinic Visits	174	222	191	-21.6%	-8.9%
	Primary Care Clinic	436	46 7	443	-6.6%	-1.6%

		Year To Dat	e		
			Variance %		
FY22	FY22	FY21		To Prior	
Actual	Budget	Prior Year	To Budget	Year	
1,013	756	729	34.1%	39.0%	
1,101	1,441	1,434	-23.6%	-23.2%	
2,114	2,197	2,163	-3.8%	-2.3%	
3,751	3,192	3,318	17.5%	13.1%	
7,086	6,870	6,955	3.1%	1.9%	
36,683	34,194	34,233	7.3%	7.2%	
6,238	6,159	5,996	1.3%	4.0%	
190	303	279	-37.4%	-31.9%	
1,923	2,253	2,221	-14.6%	-13.4%	
4,558	4,742	3,032	-3.9%	50.3%	

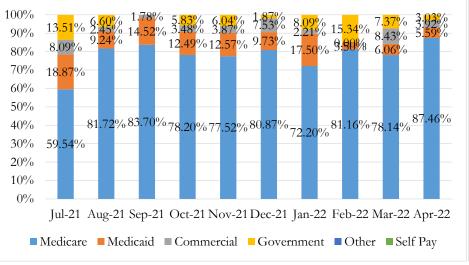


All Patients Payor Mix

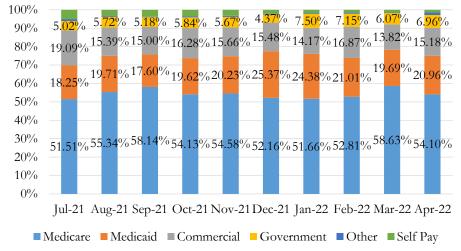


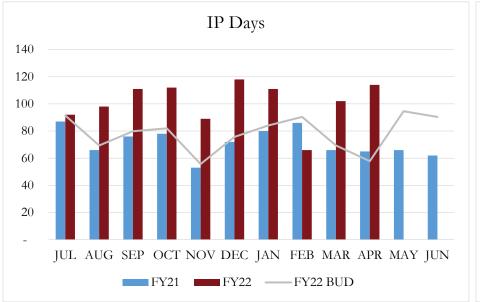


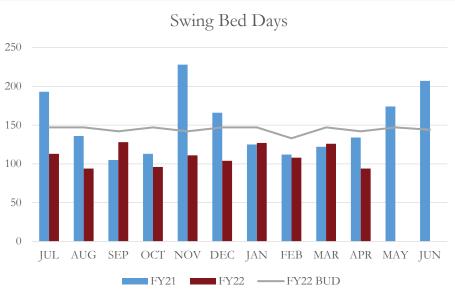
IP Payor Mix

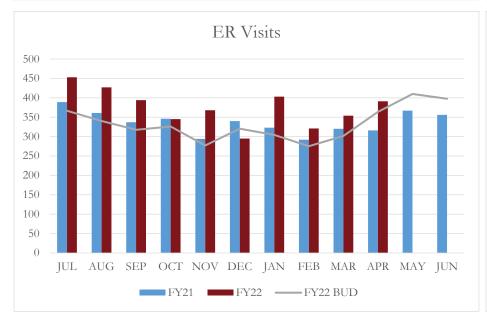


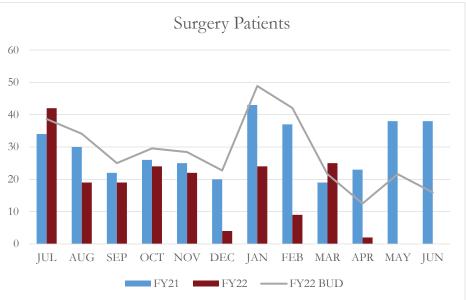
OP Payor Mix





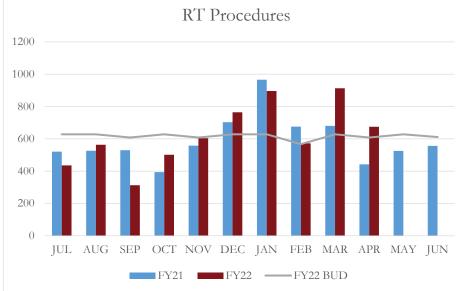


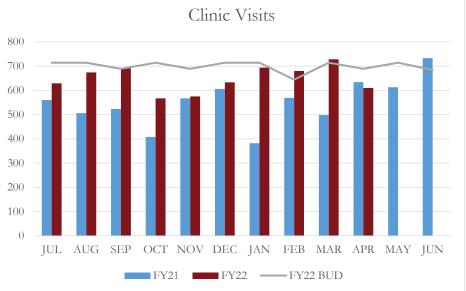




27 | SCHD Board of Directors Meeting May 26, 2022







28 | SCHD Board of Directors Meeting May 26, 2022

Balance Sheet

For The Period Ending April 2022

	Balance as of	Balance as of		Balance as of
	April 2022	June 2021	Change	June 2020
Assets				
Current Assets				
Cash - Operating	6,811,586	7,830,681	1,019,095	(781,040
Covid-19 Relief Funds	1,201,335	(0)	(1,201,336)	8,016,55
Medicare Accelerated Payments	3,814,186	6,952,217	3,138,031	7,352,04
Investments - Unrestricted	1,437,640	452,620	(985,021)	375,57
Investments - Restricted	9,488	9,488	0	9,48
Investment - USDA Restricted	233,705	233,705	0	233,70
Investment - Board Designated	1,972,783	1,972,783	0	1,972,78
Cash and Cash Equivalents	15,480,724	17,451,493	1,970,769	17,179,11
Patient Accounts Receivable	5,216,131	4,845,025	(371,106)	5,758,15
Allowance for Uncollectibles	(2,442,676)	(2,456,334)	(13,658)	(2,336,53
Net Patient Accounts Receivable	2,773,455	2,388,691	(384,764)	3,421,61
Other Receivables	484,637	840,233	355,596	81.44
Inventory	236,678	239,072	2.394	300,56
Prepaid Expense	409,053	402,507	(6,545)	128,60
Property Tax Receivable	0	0	0	
Total Current Assets	19,384,548	21,321,997	1,937,449	21,111,34
Property, Plant and Equipment				
Land	461,527	461,527	0	461,52
Property and Equipment:	16,421,968	16,154,324	(267,644)	15,980,09
Less: Accumulated Depreciation	(12,040,129)	(11,651,955)	388,175	(11,010,36
Construction In Progress	2,438	31,125	28,688	
Net PP&E	4,845,804	4,995,021	149,218	5,431,25
Total Assets	24,230,352	26,317,018	2,086,667	26,542,59

Balance Sheet

For The Period Ending April 2022

	Balance as of	Balance as of		Balance as of
	April 2022	June 2021	Change	June 2020
Liabilities and Net Assets				
Current Liabilities				
Accounts Payable	698,138	924,534	226,395	1,072,148
Accrued Payroll and Benefits	1,010,154	1,054,435	44,281	938,690
Interest and Other Payable	633,232	310,866	(322,367)	33,306
Current Portion of Long Term Debt	231,964	231,964	0	227,789
Medicare Accelerated Fund	3,814,186	6,952,217	3,138,031	7,352,042
Provider Relief Funds	1,201,335	0	(1,201,335)	4,308,836
Oregon Provider Relief Funds	0	0	0	68,963
Covid-19 Relief Funds	0	0	0	3,638,757
Current Liabilities	7,589,010	9,474,016	1,885,006	17,640,531
Long-Term Debt	4,136,733	4,368,697	231,964	4,596,488
Less Current Portion of Long-Term Debt	(231,964)	(231,964)	0	(227,789
Total Long-Term Debt, net	3,904,769	4,136,733	231,964	4,368,699
Total Liabilities	11,493,779	13,610,748	2,116,970	22,009,230
Net Assets:				
Fund Balance	12,706,270	4,533,364	(8,172,906)	6,518,595
Change in Net Position	30,302	8,172,906	8,142,604	(1,985,231
Total Net Assets	12,736,573	12,706,270	(30,302)	4,533,364
Total Liabilities & Net Assets	24,230,352	26,317,018	2,086,667	26,542,594

Summary Statements of Revenues, Expenses, and Changes in Net Position

For The Period Ending April 30, 2022

Tor the renou chang April 50	Current Month - Apr-2022					Year To Date - Apr-2022				
	Apr-2022	Apr-2022			Apr-2021	Apr-2022	Apr-2022			Apr-2021
	Actual	Budget	Variance	Var %	Actual	Actual	Budget	Variance	Var %	Actual
Patient Revenue										
Inpatient	1,017,891	921,557	96,334	10.5%	728,381	9,707,652	10,203,792	(496, 141)	(4.9%)	8,700,49
Outpatient	1,989,778	2,019,104	(29,326)	(1.5%)	1,882,129	21,615,358	20,162,411	1,452,947	7.2%	18,751,18
Total Patient Revenue	3,007,670	2,940,661	67,008	2.3%	2,610,510	31,323,010	30,366,204	956,806	3.2%	27,451,68
Deductions From Revenue										
Total Deductions	988,470	1,017,926	29,456	2.9%	560,447	10,272,121	10,897,276	625,155	5.7%	9,463,959
Revenue Deductions %	32.9%	34.6%			21.5%	32.8%	35.9%			34.59
Net Patient Revenue	2,019,200	1,922,736	96,464	5.0%	2,050,063	21,050,889	19,468,928	1,581,961	8.1%	17,987,723
Other Operating Revenue	45	4,090	(4,045)	(98.9%)	45	820	40,905	(40,085)	(98.0%)	36,89
Total Operating Revenue	2,019,245	1,926,826	92,419	4.8%	2,050,108	21,051,709	19,509,833	1,541,876	7.9%	18,024,615
Operating Expenses										
Salaries & Wages	1,013,836	1,014,458	622	0.1%	1,120,954	9,740,520	9,870,634	130,114	1.3%	8,737,64
Contract Labor	127,682	12,724	(114,958)	(903.5%)	317,216	1,845,924	491,866	(1,354,058)	(275.3%)	1,058,224
Benefits	181,614	277,414	95,800	34.5%	198,140	2,417,754	2,693,704	275,950	10.2%	2,377,06
Total Labor Expenses	1,323,133	1,304,597	(18,536)	(1.4%)	1,636,310	14,004,198	13,056,204	(947,994)	(7.3%)	12,172,93
Professional Fees	205,955	213,999	8,044	3.8%	195,625	2,151,405	2,140,431	(10,975)	(0.5%)	2,090,53
Purchased Services	274,028	247,881	(26,147)	(10.5%)	187,929	2,351,061	2,478,810	127,749	5.2%	2,330,08
Drugs & Pharmaceuticals	34,434	47,373	12,939	27.3%	39,018	550,875	480,044	(70,830)	(14.8%)	447,19
Medical Supplies	13,824	14,068	243	1.7%	4,411	142,454	171,868	29,414	17.1%	152,16
Other Supplies	72,448	84,196	11,748	14.0%	48,129	907,677	841,963	(65,713)	(7.8%)	747,76
Lease and Rental	23,567	25,691	2,124	8.3%	25,138	272,342	257,317	(15,025)	(5.8%)	249,74
Maintenance & Repairs	7,311	24,410	17,099	70.0%	(7,294)	141,951	244,101	102,150	41.8%	200,32
Other Expenses	53,849	54,327	478	0.9%	58,235	390,541	543,445	152,904	28.1%	404,43
Utilities	27,647	20,009	(7,637)	(38.2%)	7,672	218,527	200,092	(18,435)	(9.2%)	183,99
Insurance	3,506	12,103	8,596	71.0%	32,738	164,464	121,028	(43,436)	(35.9%)	138,66
Depreciation & Amortization	55,493	69,154	13,661	19.8%	56,703	536,136	638,187	102,051	16.0%	557,72
Total Operating Expenses	2,095,196	2,117,808	22,612	1.1%	2,284,613	21,831,631	21,173,490	(658,141)	(3.1%)	19,675,57
Operating Income / (Loss)	(75,952)	(190,982)	115,031	(60.2%)	(234,505)	(779,923)	(1,663,657)	883,735	(53.1%)	(1,650,962
Non-Operating										
Property Taxes	85,155	86,497	(1,342)	(1.6%)	83,924	847,856	864,969	(17,114)	(2.0%)	841,20
Non-Operating Revenue	8,706	30,344	(21,638)	(71.3%)	39,810	81,000	303,441	(222,441)	(73.3%)	313,15
Interest Expense	(15,135)	(16,132)	997	(6.2%)	(15,828)	(155,287)	(162,836)	7,549	(4.6%)	(162,71
Investment Income	5,536	7,078	(1,541)	(21.8%)	4,933	44,656	70,775	(26, 119)	(36.9%)	68,68
Gain(Loss) on Sale of Assets	-	-	-	0.0%	-	(8,000)	-	(8,000)	0.0%	-
Total Non-Operating	84,262	107,786	(23,525)	(21.8%)	112,838	810,225	1,076,349	(266,124)	(24.7%)	1,060,334
Change in Net Position	8,310	(83,196)	91,506	(110.0%)	(121,667)	30,302	(587,308)	617,611	(105.2%)	(590,62

Income Statement

For The Period Ending April 2022

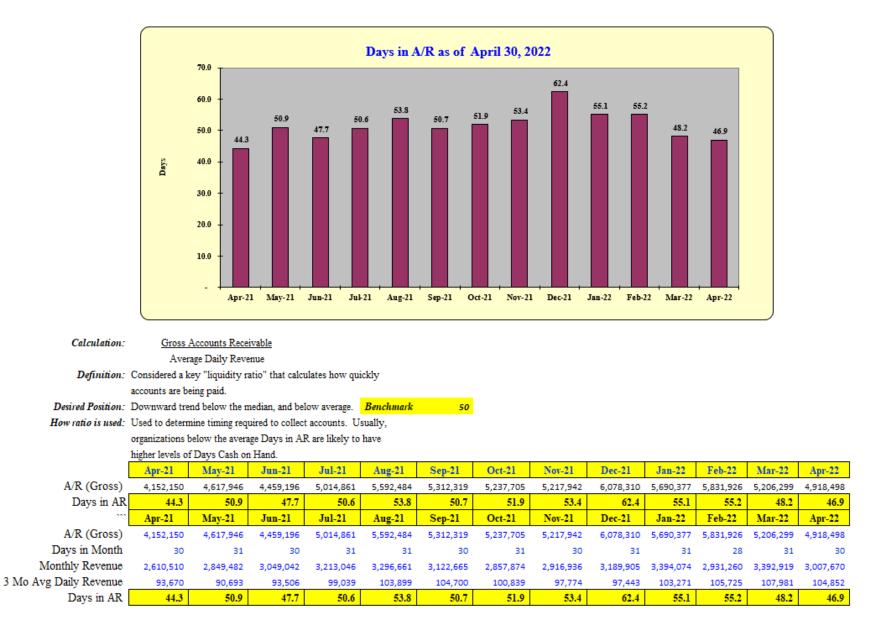
Comparison to Prior Months

	Nov-2021	Dec-2021	Jan-2022	Feb-2022	Mar-2022	Apr-2022
Patient Revenue						
Inpatient	887,913	1,038,237	1,102,724	758,958	1,055,775	1,017,891
Outpatient	2,029,023	2,151,667	2,291,351	2,172,303	2,337,144	1,989,778
Total Patient Revenue	2,916,936	3,189,905	3,394,074	2,931,260	3,392,919	3,007,670
Deductions From Revenue						
Charity Services	12,278	5,999	8,192	19,554	15,478	11,287
Contractual Allowances	913,152	1,177,785	1,125,496	523,535	889,226	919,009
Other Discounts	67,248	84,537	95,317	99,097	123,451	73,372
Bad Debt	(17,221)	(7,928)	22,786	(1,437)	(347)	(15,198)
Total Deductions	975,457	1,260,393	1,251,791	640,749	1,027,807	988,470
Net Patient Revenue	1,941,479	1,929,512	2,142,283	2,290,511	2,365,112	2,019,200
Other Operating Revenue	(406)	223	30	30	30	45
Total Operating Revenue	1.941.073	1.929.735	2.142.313	2.290.541	2.365.142	2.019.245
	1,941,075	1,929,133	2,142,313	2,230,341	2,303,142	2,019,243
Operating Expenses	1 001 001	067 702	1 000 260	064 700	000 400	1 012 026
Salaries & Wages	1,001,981	967,783	1,000,369	964,708	980,490	1,013,836
Benefits	281,283	270,780	268,750	264,545	257,609	181,614
Contract Labor Professional Fees	147,348	175,524	171,832	150,430	189,112	127,682
	242,511	214,229	218,125	233,668	221,826	205,955
Purchased Services	203,933	239,380	238,295	230,834	253,538	274,028
Medical Supplies	15,069	15,802	12,562	14,994	18,192	13,824
Drugs & Pharmaceuticals	25,740	51,741	55,874	64,169	54,421	34,434
Other Supplies	71,303	93,883	84,606	97,387	142,048	72,448
Depreciation & Amortization	51,527	54,980	54,963	55,311	55,217	55,493
Lease and Rental	23,244	31,298	29,685	28,533	28,811	23,567
Maintenance & Repairs	17,117	23,441	6,952	12,138	13,335	7,311
Utilities	22,493	25,304	11,350	20,463	25,188	27,647
Insurance	17,655	17,626	18,154	18,154	18,747	3,506
Other Expenses	33,020	43,887	35,857	41,369	44,598	53,849
Total Operating Expenses	2,154,227	2,225,658	2,207,372	2,196,703	2,303,133	2,095,196
Excess of Revenue Over Expenses fi	(213,154)	(295,923)	(65,059)	93,838	62,009	(75,952)
Non-Operating						
Unrestricted Contributions	85,155	85,155	85,155	85,155	85,155	85,155
Other NonOperating Revenue\Expens	15,546	12,803	12,342	(76,780)	13,899	8,706
Investment Income	4,145	3,851	3,910	3,580	5,484	5,536
Gain(Loss) on Sale of Assets	(8,000)	0	0	0	0	0
Total Non-Operating	96,845	101,810	101,407	11,955	104,538	99,397
Interest Expense	(17,795)	(15,135)	(15,135)	(15,135)	(15,135)	(15,135
Excess of Revenue Over Expenses	(134,105)	(209,249)	21,213	90,658	151,412	8,310

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Calculatio	on:		Total Unrestricted Cash on Hand Daily Operating Cash Needs													
Definition	n:		This ratio quantifies the amount of cash on hand in terms													
-			of how m	' any "days	' an organi	ization can	Year	Average								
	existing cash reserves.									109.5						
Desired Position:			Upward t	rend, abov	e the medi	2021	41.2									
							2020	54.0								
							2019	64.7								
						2018	70.7									
Benchma	rk		80 Days			2017	96.1									
How ratio	How ratio is used:			is frequen	tly used by	y bankers,	2016	83.6								
			analysts to gauge an organization's liquidityand ability to 2015 67.3													
			meet short term obligations as they mature.													
Fiscal	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	<u>Mar</u>	Apr	May	Jun				
2022	67.2	66.2	56.6	128.6	136.1	127.4	132.1	125.1	124.6	131.5						
2021	38.7	54.6	39.1	48.2	61.6	34.4	34.6	33.0	37.2	19.9	21.9	70.8				
2020	54.3	53.4	54.2	53.3	50.3	58.3	62.6	64.9	63.8	56.4	44.0	32.0				
2019	63.0	63.5	59.0	59.6	67.6	67.6	69.3	67.8	71.2	62.8	69.0	55.7				
2018	93.3	88.3	82.1	68.2	79.4	69.4	64.5	63.4	59.8	60.1	63.0	57.5				



SOUTHERN COOS HOSPITAL & HEALTH CENTER

CAPTIAL PURCHASES SUMMARY

FY2021	VENDOR	DESCRIPTION	COST		DATE	GRANT FUNDING SOURCE
	Non-Threshold Capital Pur	rchases (<\$25,000)				
	CDW Government	Computer ThinkCenters & Monitors (Covid)	16,247		9/29/2020	CARES Grant Funded
	Steris Corporation	Endo Cabinet, Seismic Anchor-	7,656		10/1/2020	
	CDW Government	Ergotron Sit-Stand Vertical Lift	5,549		11/1/2020	
	CDW Government	Computer ThinkCenters & Monitors (Covid)	11,488		11/30/2020	CARES Grant Funded
	Helmer Scientific	Blood Bank Refrigerator	12,470		12/1/2020	
	Para Healthcare Financial	Price Transparency Tool	15,000		12/31/2020	
	Emergency Genrator Repairs	Repairs to Hospital Generator	17,522		12/31/2020	CARES Grant Funded
	Zoho Corporation	OpManager Plus	7,595		2/28/2021	
	Medline	COVID Vaccination Freezers	15,226		4/21/2021	CARES Grant Funded
	Fukuda Denshi	Ds-8100 Patient Monitor	16,373		5/1/2021	
	Threshold Projects (>\$25,0	DOO)				
	Stryker Instruments	Two Neptune Surgical Waste Management Systems	29,645		1/1/2021	
	Walk-In Refrigeration	Refrigerator & Electric Hook Up	39,265		3/1/2021	
	Oxygen Tanks	Bulk storage tanks	92,766		6/30/2021	CARES Grant Funded
	Total		286,800			
	Total Grant Funded Equipment		153,248			
	Capital Purchases Under Budge	et Authority	133,552			
	FY2021Budget Authority		250,000			
	Remaining Budget		116,448			
				Approved		
FY2022	VENDOR	DESCRIPTION	COST	Budget	DATE	GRANT FUNDING SOURCE
	Non-Threshold Capital Pur	rchases (<\$25,000)				
	Threshold Projects (>\$25,0	0001				
	C&R Homes & Construction	New Roof	76,800	150,000	9/30/2021	
	Stryker	New Patient Beds	81,185	120,000	11/30/2021	
	Cepheid	PCR Testing Machine - Lab	61,731	-	1/31/2022	SHIP ARPA
	Bellhurst	Sleep House Lot - Re-Gravel	8,500	-	1/31/2022	
	CDW	Computers, Laptops, Monitors	22,253	-	2/28/2022	
	CDW	Server	17,480	-	4/30/2022	
	Total		267,950			
	Total Grant Funded Equipment		61,731			
	Capital Purchases Under Budge	et Authority	206,219			
	FY2021Budget Authority		1,000,000			
	Remaining Budget		793,781			

Clinic Provider Income Summary

All Providers

All I TOVICETS																							
For The Budget Year 2022																						Current Bu	dget YTD
	ACT	BUD	ACT	BUD	ACT	BUD	ACT	BUD	ACT	BUD	ACT	BUD	ACT	BUD	ACT	BUD	ACT	BUD	ACT	BUD	ACT	FY22	
	JUL	JUL	AUG	AUG	SEP	SEP	OCT	OCT	NOV	NOV	DEC	DEC	JAN	JAN	FEB	FEB	MAR	MAR	APR	APR	YTD	Budget	Variance
Provider Productivity Metrics																							
Clinic Days	67	73	68	72	60	73	57	74	48	69	52	72	58	68	54	65	66	71	54	75	582	712	(130)
Total Visits	428	484	484	484	510	467	428	484	405	467	423	484	474	484	461	437	509	484	436	467	4,558	4,742	(184)
Visits/Day	6.4	6.6	7.1	6.7	8.6	6.4	7.6	6.5	8.4	6.8	8.2	6.7	8.2	7.1	8.6	6.7	7.7	6.8	8.1	6.2	7.8	6.7	1.2
Total RVU	922.84	882.40	1,031.24	882.40	1,045.36	855.80	845.91	882.40	833.02	855.80	902.56	882.40	985.24	882.40	1,060.21	798.60	1,130.86	882.40	967.63	855.80	9,724.87	8,660.40	1,064,47
RVU/Vinit	2.16	1.82	2.13	1.82	2.05	1.83	1.98	1.82	2.06	1.83	2.13	1.82	2.08	1.82	2.30	1.83	2.22	1.82	2.22	1.83	2.13	1.83	0.31
RVU/Clinic Day	13.77	12.09	15.17	12.26	17.57	11.72	14.97	11.92	17.35	12.40	17.53	12.26	16.99	12.98	19.74	12.29	17.20	12.43	17.92	11.41	16.71	12.16	4.55
Gross Revenue/Visit	334.06	353.24	285.07	353.24	322.52	353.26	336.37	353.24	308.47	353.26	312.20	353.24	332.45	353.24	353.60	353.25	350.15	353.24	313.23	353.26	325,10	353.25	(28.15)
Gross Revenue/RVU	154.93	193.75	133.79	193.75	157.35	192.77	170.19	193.75	149.98	192.77	146.32	193.75	159.94	193.75	153.75	193.30	157.60	193.75	141.14	192.77	152.37	193.42	(41.05)
Patient Revenue										1													
Outpatient			1																				
Total Patient Revenue	142,978	170,968	137,973	170,968	164,485	164,972	143,968	170,968	124,932	164,972	132,060	170,968	157,580	170,968	163,011	154,372	178,227	170,968	136,569	164,972	1,481,784	1,675,095	(193,311)
			í l																				
Deductions From Revenue			1																				
Total Deductions From Revenue (Note A)	81,766	97,251	77,917	97,251	93,443	93,848	82,225	97,251	70,929	93,848	74,654	97,251	90,214	97,251	92,770	87,817	100,443	97,251	75,972	93,848	840,334	952,870	(112,537)
			1																				
Net Patient Revenue	61,212	73,716	60,057	73,716	71,043	71,124	61,743	73,716	54,003	71,124	57,406	73,716	67,365	73,716	70,240	66,554	77,784	73,716	60,597	71,124	641,450	722,225	(80,775)
			1																				
Total Operating Revenue	61,212	73,716	60,057	73,716	71,043	71,124	61,743	73,716	54,003	71,124	57,406	73,716	67,365	73,716	70,240	66,554	77,784	73,716	60,597	71,124	641,450	722,225	(80,775)
						1.1																	
Operating Expenses			1																1				
Salaries & Wages	65,195	64,890	65,893	64,890	61,655	63,389	65,341	65,133	48,479	63,353	55,262	65,856	52,159	65,856	46,714	59,483	56,279	65,856	51,750	63,732	563,773	642,083	(78,310)
Benefits	8,805	14,973	8,782	14,914	8,606	14,524	6,989	14,933	7,112	13,804	5,668	13,557	11,197	15,740	7,178	14,828	9,125	16,417	8,531	15,887	81,992	150,182	(68,190)
Purchased Services	7,421	5,465	7,226	5,465	4,561	5,465	8,735	5,465	4,244	5,465	5,680	5,465	8,963	5,465	5,477	5,465	5,293	5,465	5,422	5,465	63,023	54,648	8,375
Medical Supplies	0	507	0	507	0	491	0	507	0	490	0	507	0	506	0	458	0	507	0	491	0	4,971	(4,971)
Other Supplies	0	455	0	455	0	455	0	455	0	455	188	455	0	455	0	455	0	455	0	455	188	4,550	(4,362)
Maintenance and Repairs	0	316	0	316	0	316	0	316	0	316	0	316	0	316	0	316	0	316	0	316	0	3,156	(3,156)
Other Expenses	1,517	1,251	1,517	1,251	2,405	1,251	3,684	1,251	(650)	1,251	3,319	1,251	4,201	1,251	1,517	1,251	1,517	1,251	3,067	1,251	22,094	12,514	9,581
Allocation Expense	18,223	31,488	18,782	31,488	33,375	30,682	31,695	31,488	32,144	30,682	35,627	31,488	29,289	31,543	29,969	29,193	33,063	31,771	40,857	31,086	303,025	310,916	(7,892)
Total Operating Expenses	101,161	119,346	102.200	119,286	110,602	116,573	116,444	119,549	91,329	115,816	105,744	118,896	105.809	121,132	90.855	111,448	105,277	122,038	109,627	118,683	1.034.095	1,183,020	(148,925)
																					-11		
Excess of Operating Revenue Over Expenses	(39,949)	(45,629)	(42,144)	(45,570)	(39,559)	(45,448)	(54,701)	(45,832)	(37,326)	(44,692)	(48,339)	(45,179)	(38,444)	(47,416)	(20,615)	(44,894)	(27,493)	(48,321)	(49,030)	(47,559)	(392,645)	(460,795)	68,150
	((1)	1.01-2.1	Q-1-1-1	1	1.01007	(- 1 /	(()/	X-1/	()	117	(((1	(11/	1	1.1.1.1.1.1.1.1.1.1	(()	Contraction of the
Total Non-Operating Income	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Excess of Revenue Over Expenses	(39,949)	(45,629)	(42,144)	(45,570)	(39,559)	(45,448)	(54,701)	(45,832)	(37,326)	(44,692)	(48,339)	(45,179)	(38,444)	(47,416)	(20,615)	(44,894)	(27,493)	(48,321)	(49,030)	(47,559)	(392,645)	(460,795)	68,150
and the control of the superior	(active)	(and any)	(and a state of	(10,01.0)	(asher)	(10) (10)	(0.1).02)	(10,002)	(0.1010)	(11)072)	(10)003)	(and a st	(and it is	(11,1120)	(20,020)	(1,024)	(21,10,2)	(10,021)	(10,000)	(1,000)	(0,0,0,0)	(100).201	Johns

Note A - Average Collection Rate =41% of Gross Charges, therefore the Deduction Rate is 59% of Gross Charges

Clinic Provider Income Summary

All Providers

For The Budget Year 2022				Current Bu	dget YTD	Threshold P	erformance	Target Per	Target Performance		
	ACT	BUD	ACT	FY22		Proforma		Proforma			
	APR	APR	YTD	Budget	Variance	Target	Variance	Target	Variance		
Provider Productivity Metrics											
Clinic Days	54	75	582	712	(130)	712	(130)	712	(130		
Total Visits	436	467	4,558	4,742	(184)	6,719	(2,161)	8,467	(3,909		
Visits/Day	8.1	6.2	7.8	6.7	1.2	9.4	(1.6)	11.9	(4.1		
Total RVU	967.63	855.80	9,724.87	8,660.40	1,064.47	12,573.71	(2,848.84)	15,861.61	(6,136.74		
RVU/Visit	2.22	1.83	2.13	1.83	0.31	1.87	0.26	1.87	0.20		
RVU/Clinic Day	17.92	11.41	16.71	12.16	4.55	17.66	(0.95)	22.28	(5.57		
Gross Revenue/Visit	313.23	353.26	325.10	353.25	(28.15)	381.55	(56.45)	388.76	(63.66		
Gross Revenue/RVU	141.14	192.77	152.37	193.42	(41.05)	203.89	(51.52)	207.52	(55.15		
Patient Revenue			-								
Outpatient											
Total Patient Revenue	136,569	164,972	1,481,784	1,675,095	(193,311)	2,563,636	(1,081,852)	3,291,592	(1,809,808		
Deductions From Revenue											
Total Deductions From Revenue (Note A)	75,972	93,848	840,334	952,870	(112,537)	1,468,250	(627,917)	1,888,885	(1,048,552		
Net Patient Revenue	60,597	71,124	641,450	722,225	(80,775)	1,095,386	(453,936)	1,402,707	(761,257		
Total Operating Revenue	60,597	71,124	641,450	722,225	(80,775)	1,095,386	(453,936)	1,402,707	(761,257		
Operating Expenses											
Salaries & Wages	51,750	63,732	563,773	642,083	(78,310)	642,083	(78,310)	642,083	(78,310		
Benefits	8,531	15,887	81,992	150,182	(68,190)	150,182	(68,190)	150,182	(68,190		
Purchased Services	5,422	5,465	63,023	54,648	8,375	54,648	8,375	54,648	8,375		
Medical Supplies	0	491	0	4,971	(4,971)	4,971	(4,971)	4,971	(4,971		
Other Supplies	0	455	188	4,550	(4,362)	4,550	(4,362)	4,550	(4,362		
Maintenance and Repairs	0	316	0	3,156	(3,156)	3,156	(3,156)	3,156	(3,156		
Other Expenses	3,067	1,251	22,094	12,514	9,581	12,514	9,581	12,514	9,581		
Allocation Expense	40,857	31,086	303,025	310,916	(7,892)	310,916	(7,892)	310,916	(7,892		
Total Operating Expenses	109,627	118,683	1,034,095	1,183,020	(148,925)	1,183,020	(148,925)	1,183,020	(148,925		
Excess of Operating Revenue Over Expenses	(49,030)	(47,559)	(392,645)	(460,795)	68,150	(87,634)	(305,011)	219,687	(612,332		
Total Non-Operating Income	0	0	0	0	0	0	0	0	0		
Excess of Revenue Over Expenses	(49,030)	(47,559)	(392,645)	(460,795)	68,150	(87,634)	(305,011)	219,687	(612,332		

Note A - Average Collection Rate =41% of Gross Charges, therefore the Deduction Rate is 59% of Gross Charges



Quality Report

To: Southern Coos Health District Board of Directors and Southern Coos Management From: Barbara Snyder, RN, Quality & Risk Manager Re: Quality Report for SCHD Board of Directors Meeting - May 26, 2022

Potential Changes for Quality Metrics

It has been very important to "Focus on Fundamentals" such as documentation, medication verification/management, patient experience (HCAHP & Tablet), patient rights, and a Just Culture (patient safety culture). Though SCHHC needs to continue pursuing improvements in fundamental hospital activities, we will begin to look at more recognized quality metrics such as those that are prioritized by leadership, medical staff, and future quality committee meetings. It is likely that the metrics will include data related to the CMS Star Rating as well as the Chartis Rural Hospital Performance Index, so that we can be ranked with our peers, and pursue a top 100 CAH status.

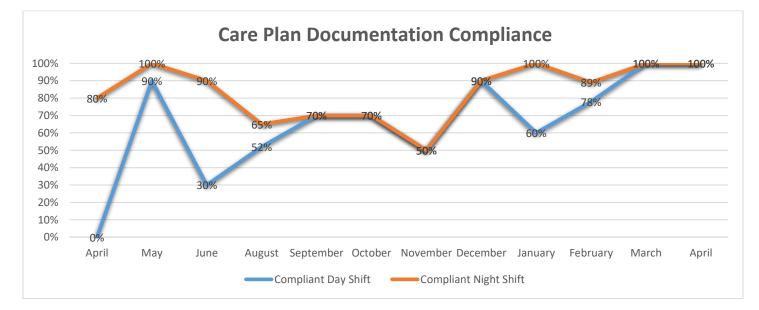
DNV

DNV training is confirmed for July 12-14th and will be here on-site/in-person with a DNV trainer. There will be 12 employees who will be attending. Board members and executive leaders will be welcomed to "pass through" and check in on the training in progress.

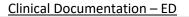
Data Reporting

Patient Satisfaction Questionnaires:

Our patient satisfaction scores are very positive. Unfortunately, we are not receiving enough actual HCAHP surveys back. Our CEO is encouraging our office to review the offerings of additional vendors such as NRC (affiliated with the Governance Institute). NRC has a number of resources regarding the patient experience and top performing hospitals.

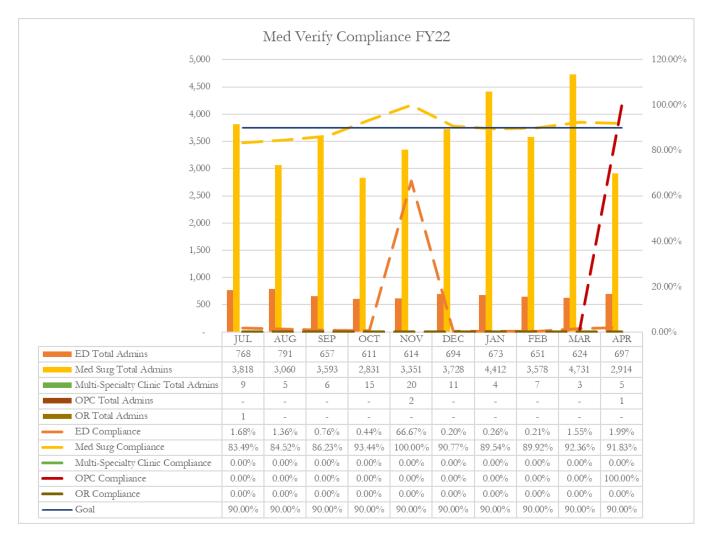


Clinical Documentation - Med/Surg





Medication Scanning/Verification



Safety Culture

<u>Questionnaire</u> – A questionnaire was sent out hospital-wide in April and results were available for the May Quality Meeting. There were 42 responses which were fewer than have of what would be ideal (109 responses) considering the number of employees that we have. Regardless of this, the responses show a variety of employee perspectives and a range of thoughts. In conclusion, the hospital does not have a strong Just Culture or Patient Safety Culture, and this needs to be created through a safety culture action plan. A DNV presentation on this topic was shared during the May Quality Meeting.

Patient and Family Centered Care Project

Southern Coos is in a cohort sponsored by Oregon Office of Rural Health with Runyan Consulting. There has not been a start date identified, but we are planning an inpatient leadership rounding project that will be implemented within the next few months.

Welcome!

Please welcome Sharon Bischoff, BSN, RN to the RN Quality Coordinator role. She will begin on June 6th, 2022, and we are lucky to have her.