

Board of Commissioners Regular Meeting (Wednesday, May 22, 2019)

Generated by Anne Presson on Saturday, May 25, 2019

1. Opening Items

Action, Procedural: A. Call to Order

Since Board Chair Presley was on vacation, the Board Secretary, Commissioner Graville, served as Chair of the meeting. The meeting was called to order by Commissioner Graville at 4:30 pm.

Information, Procedural: B. Public Comment

Commissioner Graville asked if anyone from the public would like to make a comment. Lauren Stephens from Catherine Washburn Medical Association (CWMA) reported the CWMA Board is scheduled to meet this afternoon to discuss approval of a \$25,000 request from Lopez Island Physical Therapy (LIPT) for equipment in the new clinic. She confirmed that the practice is anticipating moving into the new space June 20th and hopes to be open to see patients shortly thereafter. Commissioner Berger asked if Medicare or Medicaid would require a site visit and whether the practice is expecting to have much down time during the move. Lauren wasn't sure about the site visit requirement. She was able to confirm the move will likely happen over the weekend to provide for limited down time.

2. Consent Agenda

Action (Consent): A. Draft Regular Board Meeting Minutes
Draft Minutes from the April 24th Regular Board meeting were submitted for approval.

Action (Consent): B. AP Voucher Report
An AP Voucher Report dated April 24, 2019, in the amount of \$5,266.37, was submitted for approval.

Action (Consent): C. Approval of Consent Agenda

In the absence of any changes to either item contained in the Consent Agenda, there was a motion by Commissioner Campbell, seconded by Commissioner Berger, and unanimously carried to approve the Consent Agenda as presented. Motion carried 4:0.

3. UWNC Quarterly Operations Report

Discussion, Reports: A. Quarterly Operations Report

Mark Bresnick, Assistant Director of UW Neighborhood Clinics North Region, was present to review UW Medicine Lopez Clinic Operational Updates as of 5/20/2019. Highlights from his report are summarized below.

- **Tele-health services:**
 - Tele-nutrition and Tele-Diabetes education programs are starting May 30th, at the UW Medicine Lopez Island Clinic.
 - Whitney Thomas, RD/CDE, will provide the service. She has already conducted some patient panel reviews to identify good candidates for the program.
 - The program will start with one day of service each month, to be scheduled on the 4th Thursday, and will be shared with the UW Medicine Orcas Island Clinic.
 - Whitney will be working remotely from the Woodinville Clinic since Medicare requires that the provider is sitting at a Diabetes Education site that is accredited in order to receive reimbursement for services.
 - UW is starting with commercial insurance and Medicare since Medicaid does not cover Tele-Nutrition or Tele-Diabetes education at this time.
 - Moving forward, providers can refer patients to Nutrition or Diabetes education via the UW referral team. Someone from UW's contact center will make the appointments.
 - The Clinic's front desk staff will also be taught how to schedule appointments to be able to accommodate patients wanting to make an appointment following a visit with their PCP.
 - Shelly Wardell from UW Marketing has created Tele-Nutrition marketing cards, and those will be available at the Clinic.
 - The meeting scheduled with UW's Psych department that was set for Wednesday, May 29th, will be rescheduled due to an unexpected conflict.
- **Diabetes Education:** UW followed up on a referral from the Lopez Island Family Resource Center (FRC) with a Dr. Capell. Mark and Dr. Matt Jaffy met with Dr. Capell on May 20th. The initial meeting went well and Dr. Capell shared his vision around diabetes prevention advocacy. It's possible Lopez could serve as a pilot in coordination with the FRC and UW's Tele-nutrition program. The Board had questions about Dr. Capell, and Mark explained he is a retired UW physician with a passion for Diabetes education. He is also connected with a program called Food Lifeline, which gathers food donations for those in need, which is how he became connected to the FRC. Commissioner Campbell alerted Mark to the fact that the Lopez Lions Club is focused on Diabetes this year, and it would be good to get connected with their local efforts. Lauren Stephens reported that one of the RNs from the Lopez Clinic, Lynn Lindboe, was hired by the Lions to serve as a Diabetes educator. Mark will follow-up and make sure all efforts are coordinated. Mark and Matt will continue to discuss potential options for a pilot and follow up with Dr. Capell, Lopez Clinic, FRC and LIHD.

- **Training:** UW staff was invited to participate in a training being coordinated by the FRC in August. It will offer a good opportunity to strengthen the relationship between FRC, UW Clinic and other organizations on Lopez Island.
- **Monthly Meetings:** One of the key areas that came out of the ongoing monthly meetings between the LIHD Chair and Superintendent and UW leadership is the need for more training and support for the Lopez Clinic staff. Mark provided an overview of the General Training/Learning Opportunities that UW is going to be delivering to Clinic staff in the coming months.
 - Customer Service/Service Culture Learning with OD&T (Organizational Training and Development)
 - Mark and Darren Layman from UW had initial meeting with Julie Bremer from UW's OD&T Department to discuss options
 - Mark will set a meeting with Julie, Mark and Lopez Clinic Manager by mid-June to review options
 - Julie will do on-site observation and rounding – target late June/early July – dates TBD
 - Julie will do initial on-site learning sessions – target late July/early August – dates TBD
 - Mark and Julie, along with Clinic Manager will create a follow-up plan for post initial learning sessions
 - Front Desk Workflows:
 - Mark to meet with Kirsten Davenport (UW Manager and point person for Front Desk Workflow Best Practice work). Once a time is confirmed, Kirsten will come onsite to observe and talk with staff. From there, she will provide feedback on best practice options to maximize efficiency and patient experience. From watching and talking with staff, Kirsten will be able to tailor recommendations and training to meet the unique needs of the island clinic rather than just using a standard UW program. Kirsten has worked in a variety of UW clinics and served in numerous roles, and is able to bring a wealth of experience and expertise to the Clinic.
 - Back Office Workflows:
 - Mark is working to identify a seasoned BOCC (Back Office Clinic Coordinator) to do a similar onsite assessment of back office staff as stated above for the front desk. The goal will be to help identify standard work and best practice opportunities. This is important as the back office activities directly impact quality measures.
 - ETA to identify BOCC is June 3rd
 - Timeline for site visit – late June to early August
 - Another outcome of the monthly leadership meetings is recognition to bring in the Clinic's leadership team. Mark is working on scheduling the initial meeting which will likely take place in about a month. The goal is to talk about what's working and where there are opportunities for improvement. They will hopefully develop a list of shared goals and items to work on together, and create a closer relationship between local Clinic staff and LIHD.
- **Allergy Shots:** an initial pilot patient has begun with a Lopez resident. UW will assess adding further patients as they gain more experience, even though there have only been 1 or 2 additional inquires. The pilot patient did end up having a reaction 4 hours after the shot, which the clinic was able to successfully resolve.
- **Home Visits:** Mark reported that some RNs and the Nurse Practitioner have performed home visits for patients who aren't able to make it into the Clinic. UW is looking into how these types of visits can be billed, and he is working with UW's RN lead, Susan Kline, to research scope of practice and licensing requirements.
- **Other:** Mark shared that the Clinic had been looking to leverage Tele-health to support anti-coagulation work; however, the Clinic feels their current process is working well. The patient gets 15 minutes with the provider and the follow-up visit is with the RN. Patients seem to like the process. Mark also shared some work underway regarding the online pharmacy ordering process. The Board made it clear that it is their goal to have UW work more closely with the Lopez Island Pharmacy, and they are not interested in pursuing any activities that might increase mail order prescriptions.

Commissioner Campbell asked about the "huddles" that were part of the daily workflow when UW first took over management of the Clinic. She felt they were valuable to the team, and she wasn't sure if they were still happening. It's felt like the staff was adrift without that support, training and recognition. Mark shared that every clinic handles this issue differently; however, he agreed that it's a valuable exercise and helps the team be aware of what's happening and what they should be prepared for based on the patients coming in. He wasn't sure what was happening in the Lopez Clinic and committed to following-up and will revisit with the Lopez team. Commissioner Graville asked what is meant by Mark's reference to working the "pools". Mark explained that in the electronic medical record system, EPIC, there are folders that messages go into (e.g. pharmacy refills) and it's just a way to say someone is focused on answering those messages.

Mark went on to review the future state staffing model that he and the Clinic Manager have been developing as a result of personnel changes underway with the LPN/RN roles. Currently, there are 3 per diem RNs who each work a .25 FTE, resulting in a total of a .75 FTE. The goal is to hire one permanent RN working four days/week, or .8 FTE. This structure will enable the RN to be familiar with the day to day operations and provide support for the routine work, including working the pools. Janet decided not to pursue her MA and has been training to step into Mike's role when he retires in the late fall. Mark is hoping to find a Medical Assistant (MAs) to fill the open spot, as opposed to hiring at a higher level. It's been tough to find MAs as there's a shortage of candidates across all of their clinics. Commissioner Campbell asked Mark to explore what type of training and certification programs are available at Skagit Valley College. Mark reported that UW was launching an internal MA Apprenticeship program that was a one-year, paid program. Commissioner Campbell said she'd be very interested in looking at ways to fund the tuition for a local student, possibly in collaboration with CWMA, and then require them to provide a certain number of years service at the Clinic.

4. Committee Reports

Discussion, Information, Reports: **A. Finance Committee**

Commissioner Berger reported that he and the Superintendent had an initial review of UW's FY '20 draft budget. There were questions related to the non-provider staffing that Mark is going to follow-up on to ensure the staffing information incorporated into the budget aligns with what he outlined in his operations report. When looking at the Annualized FY '19 budget, there continues to be a negative variance in actual versus budgeted visits. Commissioner Berger reminded the Board that UW has previously suggested having Dr. Wilson take all of his vacation in the first half of their fiscal year created the gap. Mark shared that another factor in the negative variance resulted because they didn't expect there to be much of a ramp up for Dr. Wilson. As

it turned out, he needed more ramp up time to learn UW's systems and that also contributed to him being able to see fewer patients.

When establishing the target visits for FY '20, UW was careful to set an expectation that is realistic. On the productivity side, Dr. Wilson's Work Relative Value Units (WRVU) ratio, which is a measure of patient complexity and ties to billing and revenue, is above target. That said, Wen is still in ramp up mode and her WRVU/visit will need to be higher in the coming fiscal year. It's something that the Medical Director, Dr. Alperin, will need to work with her to increase. Commissioner Berger questioned how Dr. Alperin was going to help Nurse Practitioner Murphy when he is scheduled to be in the Clinic on Tuesdays, and she doesn't work on that day. This will need to be explained. Discussion continued around scheduling and the need to balance holding enough same day slots open for urgent issues while making sure all slots are filled. Mark felt that for the majority of days all slots are being filled and the Clinic doesn't suffer from no shows like many of their other clinics.

Commissioner Campbell suggested that finding the balance of delivering primary versus urgent care is key, and for UW to be successful they are going to need to straddle that line. Becky Smith, Lopez Island Fire & EMS Board Chair, shared a few recent examples of EMS calls that seemed within the scope of the Clinic yet were turned away during Clinic hours. The Board agreed it will be important to learn more about these specific cases, and Becky shared they were written up by the Paramedics for discussion in the run review and the UW/EMS/LIHD monthly meeting. The Paramedics and EMTs feel that the inconsistency in what is/isn't within the scope of the Clinic is the biggest issue and creates hesitation for them to even engage the Clinic. It's something that has been brought up in the UW meetings by Chief Havner and needs to be resolved as the answer is not flying more people off the island. Mark agreed and indicated this is definitely an area that's a stretch for UW.

Commissioner Graville asked if the reduced number of patient visits could be related to patient attrition, and if there is a way to know what percentage of patients are no longer seeking care from the Clinic. Mark explained that there isn't a good way to pull that kind of data at this time.

Commissioner Berger asked about the major differences that exist when comparing the operations of the Lopez Clinic to other urban clinics. Mark shared that a key difference is the level of staffing. He can hire Medical Assistants (MAs) to do MA work and the RNs focus solely on chronic condition management work. In other clinics the RNs don't room patients or tend to the routine patient needs. They are more focused on those with chronic conditions and helping to manage those complex patients. The Nurse Triage work is also handled differently, as other clinics outsource that to UW's central triage rather than handling within the clinic, as is the case on Lopez. That had evolved early on since the central triage team didn't have adequate training to know not to send an island resident to the ER. Over time, UW has focused on training the triage team, and developed different scripting to alert the Triage Nurse when a caller is an island resident. UW is also incorporating their central Population Health Management team into patient workflows to help in setting up post hospital discharge appointments. In order to appear part of the local clinic team, UW created messaging that feels like the nurse is calling from the patient's local clinic. Finally, when asked if the payor mix is dramatically different, Mark reported that the Smokey Point clinic is very similar to Lopez with a high percentage of Medicare and Medicaid patients. Otherwise, most of the other clinics do tend to have higher percentages of commercial payors.

Commissioner Campbell asked about having another "float" provider for the busy season or when a provider goes on vacation. Mark shared that, at the moment, UW doesn't have a float pool provider as was the case last year with Dr. Maribeth Velasquez. When they are available, the float physician is usually deployed to help establish a new clinic; therefore, they are normally dedicated for 3 months as opposed to a few weeks. Mark did share that in the FY 20 budget UW is setting visit targets while taking into account the provider's PTO. Apparently hasn't been past practice and this will ensure the provider has enough slots over the course of the year to meet their annual visit goal.

The last item discussed in some detail had to do with labs and lab delivery. The labs are currently flown by San Juan Airlines to Seattle and picked up by courier and driven to the UW Seattle facility. Superintendent Presson noted that she asked UW for more information around their billing practice for labs. Based on information she obtained from the UW Lopez Island Clinic Manager, Island Hospital formerly covered the cost of lab transport since processing labs generated a lot of revenue for them. She is also working with UW to see if there are any alternatives to San Juan Airlines, which is now charging almost \$25,000/year to fly the labs off island.

Information: B. **Quality Committee**

The Quality Committee had a follow-up meeting with Dr. Jaffy on April 30th. Based on that discussion, Commissioner Orcutt clarified something he had stated in his February report having to do with data for quality reporting. He had initially indicated it was only data gathered through billing that was able to be reported for quality purposes. That meant that services delivered outside the UW system wouldn't be reflected in the quality data. Fortunately, that is not the case and a provider can enter quality data into EPIC and have it reflected on the UW Dashboard. That said, it is time-consuming work and we don't know how often it's being done.

In regard to the specific areas that raised concern in the initial report, Commissioner Orcutt provided the following summary:

- **Childhood Immunizations** - Follow-up data showed that 2 children came into the Clinic who would have been eligible to meet the criteria. One refused immunizations and the file was well documented that the provider did a thorough job of explanation and counsel. The other child had all but one of the shots, which was done the next month. There was discussion about getting immunization records from the County, which would have to be input into EPIC, and Mark will follow-up.
- **Diabetic Eye Exam** - Follow-up data showed that 8 patients met the criteria. Of those meeting criteria, 4 had the eye exam done elsewhere and the results were recorded in EPIC. The other 4 weren't recorded so the exam may have been performed, yet we don't know for sure. Commissioner Orcutt expressed concern that the Lopez Clinic isn't at the top of the list to receive the retinal imaging camera. During the Quality meeting he asked who is making the decision, and he remained frustrated that no one seems to know who is ultimately making the decision on equipment deployment. Mark was able to confirm that the Lopez Clinic is on the list, even though he couldn't provide a timeline. Mark committed to follow-up to be able to provide more specifics.

- **Annual Wellness Visit** - this is a cumulative measure specific to Medicare Advantage patients, and will build over the course of the year. This is a focus area for improvement across all of UW clinics. In addition to scheduling these visits, it's important to make sure providers are using the correct billing codes in order to get paid.
- **Access** - Commissioner Orcutt and Matt Jaffy agreed that the metric used to assess this measure is really more Patient Satisfaction and not truly access. We don't have the hard data we need to determine if there's an access issue. Commissioner Orcutt would like to know how many of the people calling each day for a same day appointment are seen. This will need to be captured manually in the Clinic, and Mark will see if this is something the Clinic can capture for a short period. The Board was clear that this is the information needed to address concerns from the community that they continue to hear. It's important enough to the success of the Clinic that UW should be willing to focus their efforts in this area and report back in the coming month or two.
- **Narcotic Management** - Commissioner Orcutt was glad to be able to confirm the Lopez Clinic is following UW's standard protocols, which are very extensive in this area. He also shared his feelings that it is important for UW to establish a relationship with the Lopez Island Pharmacy, and he encouraged Matt and Mark to spend some time with Pharmacists Rich and Marge McCoy.

Information: C. **Communications Committee**

Commissioner Graville and Superintendent Presson are working on a draft Communication Policy and Procedure, which includes a detailed section on Crisis Communication. A draft document should be ready to be brought to the August or September meeting.

5. Operations Reports

Information, Reports: A. **Monthly Financial Reports**

The Superintendent will be making an interest payment on the District's General Obligation Bond which is due June 1st. Property tax revenues are on target and there was nothing else remarkable to report.

Information: B. **Kaiser Air Transport Update**

The Board continues to be kept in the loop on communications between San Juan County and Kaiser. At this point, Kaiser will not communicate directly with us until the Office of the WA Insurance Commissioner (OIC) investigation is complete.

Information: C. **2019 Accountability Audit**

The District signed a Letter of Engagement for this year's audit with the State Auditor's Office, scheduled for the second week in June. As a new entity, the District is reviewed annually although the 2018 audit went so well the Superintendent was told if things go as well this year we'll likely be able to move from annual to every 2-3 years. The estimated cost of the Audit is \$5,000 plus travel expenses.

Information: D. **2018-19 Board Calendar**

Nothing remarkable. The June 21st meeting will be the Community Conversation. There was a brief discussion about car pooling to the Annual Rural Hospital Leadership Conference in Lake Chelan.

Information: E. **Articles of Interest**

Several articles were included in the Board materials on articles that are timely or relevant to topics being discussed by the Board.

6. Old Business

Discussion: A. **Interisland Healthcare Foundation**

Evan Perrolloz, representing Interisland Healthcare Foundation provided an updated at the April Board meeting, and there was a request for \$10,000 to support a County-wide feasibility study. Moved by Commissioner Berger, seconded by Commissioner Campbell, and unanimously passed to decline to provide the requested \$10,000 to support a feasibility study. Superintendent Presson will communicate the Board's decision to Evan.

Action, Discussion, Information: B. **Community Conversation**

Superintendent Presson distributed an updated draft Save the Date invitation for the June 19th Community Conversation. She reported that she has been working closely with Chief Havner, Becky Smith and Becky Presley to finalize the invitation, meeting framework, and the logistics for the event. There was a lengthy discussion around the wording of the invite, and Commissioners were asked to provide feedback to the Superintendent within the next week. The goal is to start promoting the event after the Memorial Day weekend.

The Board also discussed the questions for the group activity, and everyone stressed the need to make sure we tell participants how the LIHD and others are going to use their feedback. It will also be important to outline the next steps to set expectations, and have transparency in what is learned. The Superintendent walked through the three ways participants will be able to share feedback and ask questions during the event. There will be a short survey completed upon arrival, a group activity where tables will work on 5 broader questions, and there will be index cards on the tables to allow people to write specific questions they'd like answered. The latter will be collected, aggregated, and answers posted on our website. We will also develop a post-meeting communication strategy with the broader community to share what was learned and how that's informing next steps. Superintendent Presson was excited to be able to secure the services of the visual recording artist so her work can keep what we learn front and center within the community.

7. New Business

Discussion: A. **2019 Superintendent Performance Review Form & Process**

Discussion about the performance review form used last year and consensus reached that the same form should be used again. Chair Presley will share with the Board the process and deadline for submitting individual input. All responses must be compiled

and ready for discussion in Executive Session at the July 24, 2019 meeting.

8. Closing Items

Information: A. **Upcoming Meetings and Key Activities and Commissioner Comments**

Commissioner Orcutt requested that meetings have time allotments for each Agenda item to help manage both the length of the meeting and reduce the redundancy of information reviewed from meeting to meeting.

Commission Berger extended an invitation to the Commissioners and Superintendent for a social evening at his home, Monday, July 15th. The start time is 5 pm and Spouses are also invited. The address is: 1020 Shark Reef Road.

Action, Procedural: B. **Meeting Adjournment**

Commissioner Graville adjourned the meeting at 7:31 pm