

**San Juan County Public Hospital District #2
Dbá Lopez Island Hospital District (LIHD)**

**Board of Commissioners – Special Board Meeting
August 5, 2019
Blossom Building
Second Floor Meeting Room**

Minutes

- I. The meeting was called to Order by the Board Chair, Commissioner Presley, at 4:30.**
- II. Financial Reports revealed a negative variance in clinic visits**
 - A. Questions as to the cause of the negative variance, response was inconsistent**
 - 1. Initial report was a result of Dr. Wilson’s vacation happening all in the first half of the fiscal year.
 - 2. Later explained to be incorrectly setting Wen’s target at the 63rd percentile when her productivity was closer to the 40th percentile of MGMA.
 - B. Unclear if complaints about access and service were widespread**
 - 1. Clinic was holding what was deemed a necessary amount of same day appointments.
 - 2. Community and EMS concerns continued to suggest people were unable to get same day appointments, when needed.
 - C. Efforts to address consistent feedback on non-clinical issues were unsuccessful**
 - 1. Numerous meetings with UWNC leadership to discuss feedback from community.
 - 2. Inability to engage directly with local staff and lack of support from Medical Director.
- III. Efforts to validate whether people were leaving clinic in any meaningful numbers**
 - A. Talk with Key Stakeholders**
 - 1. Lopez Island Fire & Rescue
 - 2. Lopez Island Family Resource Center
 - 3. Lopez Island Pharmacy
 - 4. Cathy Doherty
 - B. Meeting with UWNC leadership; if we gather feedback, they will take action.**
 - 1. Mutual agreement the PHD would reach out to the community for feedback.
 - 2. UW leadership apprised on how PHD would engage with the community.

IV. June 19th Meeting to solicit formal community feedback

A. Prep

1. Kept key stakeholders informed of evolving process.
2. Worked with expert to ensure balance in designing questions for the 2019 Community Health Care Survey.

B. Delivery

1. Opportunity for improvement around customer service-related issues.
2. Overall feeling was that care delivered was very good/excellent.
3. Feedback was consistent with what Commissioners had been hearing from the community.

C. Meeting Follow-up

1. Commissioner Campbell met with Clinic Staff to discuss next steps.
2. Clinic upset as to format and feedback from event.

V. Follow-up meeting with LIHD/LIFE/UW Clinic on 7/31

A. Goal - *understand and respect each other's role. Confirm everyone's commitment to create a collaborative, community approach to delivering health care on Lopez island.*

1. Build Trust
2. Improve and Sustain Regular Communication
3. Create a Collaborative, Cooperative Relationship across ALL entities involved in health care on Lopez Island
4. Move forward with a shared purpose and mutual agreements in key areas

B. Proposed Outcomes

1. Define the appropriate performance metrics to measure around patient satisfaction and access.
2. Determine how we will measure and hold each other accountable.

C. Results

3. Meeting remained largely focused on Clinic's reaction to June event and survey.
4. Environment not conducive to moving forward in a trusting and collaborative manner.

VI. The Path Forward for the PHD and Clinic

1. Concerns exist around workload and staffing at the clinic based on comments from staff.
2. Validate 70% "same day" slots is able to support both primary and urgent care needs.
3. Define PHD and Superintendent roles and responsibilities, direct engagement with staff.

VII. LIFE ASSESSMENT OF 7/31 MEETING

1. The description of care expressed by the Clinic staff doesn't match with the decline in visits and the decrease in revenue reported from UW. It also doesn't align with the Pharmacy's decreasing numbers.
2. The Clinic article that will be printed in Health Matters states they are seeing 10-20 urgent (same day) appointments every day, depending on whether a 1 or 2 provider day. That seems high in light of the budget that was built on 16 visits/day for Wen and 19 visits/day for Bob. If Wen was performing below target, which is what was cited as cause for the negative visit variance, the numbers don't seem to add up.
3. The negative experiences and stories that we have heard from the community and thru the survey are real experiences, and it's important they aren't discounted or deemed rumor. People appreciate being validated.
4. It's important we acknowledge there are some areas that can be improved and share ways those will addressed. If community feedback is ignored, we risk the possibility that more people will stop using the Clinic. UW's requirement that all complaints be put in writing and with the individual's personal information must be balanced against people's concerns around confidentiality, etc. in a small community.
5. It is the LIFE Board's goal to listen to the needs of ALL taxpayers, not just those who choose to use the Clinic for care. The survey is representative of the community and is aligned with feedback we'd been hearing and sharing with UW.

VIII. The meeting was adjourned by the Board Chair, Commissioner Presley, at 6:30.