



PUBLIC MEETING NOTICE

PUBLIC HOSPITAL DISTRICT NO. 4, KING COUNTY BOARD OF COMMISSIONERS GIVES NOTICE AS FOLLOWS:

Thursday, April 9, 2020 – 4:30 pm
AFFILIATION WORK STUDY SESSION: CANCELLED

Thursday, April 9, 2020, 6:30 pm
REGULAR BUSINESS MEETING: VIA CONFERENCE CALL ONLY:

No In-person Attendance Permitted
Public may attend by using the information below:

DIAL IN - 800.704.9804 / Participant Code: 98477739#

The above option is provided to ensure the safety of staff and members of the community as we continue with social distancing and compliance with Governor Inslee's Proclamation "Stay Home -- Stay Healthy" order.

AGENDA WILL INCLUDE: (Full agenda may be viewed at www.snoqualmiehospital.org)

- Communications
- Consent Agenda: Minutes and Physician Credentialing
- Committee Reports: Finance (includes approval of warrants), Medical and Facilities
- No Old or New Business
- Public Comment

For questions please call 425.831.2362

DATE OF THIS NOTICE: April 2, 2020

Public Hospital District No. 4, King County
Board of Commissioners
Regular Meeting AGENDA
Thursday, April 9, 2020 - 6:30 pm
Via Conference Call
1-800-704-9804
Participant Code: 98477739#

CALL TO ORDER / ROLL CALL

APPROVAL OF AGENDA

COMMUNICATIONS

Emma Herron, President
Kim Witkop, M.D., Superintendent Report
Skip Houser, General Counsel, Board Education

CONSENT AGENDA

1. Approval of Minutes:
 - a. Affiliation Work Study – March 12, 2020
 - b. Regular Meeting – March 12, 2020
2. Physician Credentialing

COMMITTEE REPORTS – Action Requested as noted

1. Finance Committee
 - a. Approval of warrants, payroll and payroll taxes – February 2020 – **Action**
2. Medical Committee
3. Facilities Committee

OLD BUSINESS – Introduction and Discussion - None

NEW BUSINESS – Introduction and Discussion - None

PUBLIC COMMENT – (Please limit comments to 3 minutes)

ACTION ITEMS – VOTE - None

GOOD OF THE ORDER/COMMISSIONER COMMENT (Each commissioner shall have one comment period limited to three minutes)

NEXT SCHEDULED MEETINGS: Locations TBD

Work / Study: Wednesday, April 22, 2020, 6:30 pm

Affiliation Work / Study – Thursday, May 14, 2020, 4:30-6:00 pm

Monthly Business Meeting – Thursday, May 14, 2020, 6:30 pm

ADJOURNMENT



DRAFT

PUBLIC HOSPITAL DISTRICT NO. 4, KING COUNTY
Board of Commissioners
March 12, 2020
MINUTES
AFFILIATION WORK/STUDY
4:30 p.m.
North/South Conference Room

COMMISSIONERS PRESENT:

Emma Herron, President
Dariel Norris, Vice President
Kevin Hauglie, Secretary (Late arrival)
Jen Carter, Commissioner

EXCUSED: David Speikers, Commissioner

ALSO PRESENT:

Kim Witkop, M.D., Interim Superintendent/CEO/CMO
Karyn Denton, COO/CNO
Patrick Ritter, Chief Financial Officer
Skip Houser, General Counsel
Valerie Huffman, Clerk

CALL TO ORDER: The meeting was called to order by President Herron at 4:54 pm followed by roll call. Commissioner Hauglie arrived at 5:25. According to a Public Health Advisory in relation to COVID-19, each party present was seated six feet apart and no public was present.

TOPICS OF DISCUSSION:

1. **Definitive Agreement Update and Review.** A summary and highlights of the draft agreement were reviewed with any updates being pointed out. Time did not permit to review the entire document. It was noted this document is considered work product and thus confidential.

PUBLIC COMMENT: None.

An audio recording of this meeting is available on the District's website at www.snoqualmiehospital.org under the Governance page. Copies of any presentations and/or documents are available upon request by contacting Administration at 425.831.2362.

UPCOMING MEETINGS:

Work Study: Wednesday, March 25, 2020, 6:30 pm, North/South Conference Room

Affiliation Work Study: Thursday, April 9, 2020, 4:30 pm – 6:00 pm, North/South Conference Room

Regular Meeting: Thursday, April 9, 2020, 6:30 pm, North/South Conference Room

The meeting adjourned at 6:13 pm.

Emma Herron, President

Kevin Hauglie, Secretary

DRAFT



PUBLIC HOSPITAL DISTRICT NO. 4, KING COUNTY
Board of Commissioners
March 12, 2020, 6:30 pm
MINUTES
Snoqualmie Valley Hospital, North/South Conference Room
Snoqualmie, WA

PRESENT:

Emma Herron, President
Dariel Norris, Vice President
Kevin Hauglie, Secretary
Jen Carter, Commissioner

EXCUSED: David Speikers, Commissioner

ALSO PRESENT:

Kim Witkop, M.D., Interim Superintendent/CEO, CMO
Karyn Denton, COO/CNO
Patrick Ritter, CFO
Charles (Skip) Houser, General Counsel
Valerie Huffman, Clerk

CALL TO ORDER: The meeting was called to order by Pres. Norris at 6:35 pm, followed by the flag salute and roll call. According to a Public Health Advisory in relation to COVID-19, each party present was seated six feet apart and no public was present.

APPROVAL OF AGENDA

A motion was made and seconded to approve the agenda as written. M/Carter, S/Hauglie

The motion passed by unanimous vote.

COMMUNICATIONS:

Pres. Herron shared communications and comments on the following topics:

- Information received from Dr. Witkop,
- Social Determinants of Health Symposium that may be of interest to the Board in terms of moving towards population health;
- Discussions from the Snoqualmie Valley Community Network meeting;
- Putting together a decorum for the Board

Kim Witkop, M.D., Interim Superintendent/CEO provided her CEO report in verbal form only. For

details, the reader may refer to the audio of this meeting located on our website noted in these minutes. Some of the topics covered included: current census, COVID-19, generosity campaign, COVID-19 testing.

Skip Houser, General Counsel, presented Robert's Rules Reminders: A Spark Chart on Robert's Rules of Order was given to each commissioner to keep. The same chart will be included in each month's board packet received at the meeting for reference.

In addition, at the request of the Bylaws Committee, Mr. Houser provided the commissioners with a current copy of the Rules of Procedure and Bylaws as a reference for review in preparation for any needed revisions.

CONSENT AGENDA

A motion was made and seconded to approve the consent agenda as proposed, which includes approval of minutes and physician credentialing. M/Hauglie, S/Carter.

There was no discussion and the motion unanimously passed.

COMMITTEE REPORTS

1. **Finance Committee Report - Approval of warrants, payroll and payroll taxes – January 1 thru January 31, 2020.** Commissioner Herron reported on the January 2020 finances that were reviewed at the Finance Committee meeting held on March 9, 2020.

Written minutes were also provided. The committee will next meet on April 7, 2020 to review February 2020 finances.

1(a). **Approval of Warrants, Payroll and Payroll taxes – January 2020.**

A motion was made and seconded to approve total disbursements that includes payroll warrants, hospital and clinic payroll, auto deposits, hospital and clinic payroll taxes, retirement and matching plans, as well as all accounts payable warrants in the total amount of \$4,093,126.31 for January 1 thru January 31, 2020, as recommended by the Finance Committee. M/Speikers, S/Hauglie

The motion carried by unanimous vote.

2. **Medical Committee Report.** Written minutes from the March 3, 2020 meeting were provided as part of the board packet. The report was given by Commissioner Norris. The committee will next meet on April 7, 2020.

3. **Facilities Committee Report.** Comm. Hauglie reported on items discussed in the Facilities Committee meeting held on February 26, 2019. The committee is scheduled to next meet on March 23, 2020. Written minutes were also provided.

NOTE: All written minutes, reports and/or presentations from each committee meeting are provided for the public and are part of the official record of the District. Copies of the complete board packet and audio recording of this meeting are available on the District's website at www.snoqualmiehospital.org. For any questions or further information, please call Administration at 425.831.2362 or email valerieh@snoqualmiehospital.org.

OLD BUSINESS: None.

NEW BUSINESS: None.

PUBLIC COMMENT: None.

NEW BUSINESS – Action Items: None.

GOOD OF THE ORDER/COMMISSIONER COMMENT: Commissioner comments were made and can be heard on the audio of this meeting posted on the District website.

UPCOMING PUBLIC MEETINGS: All meetings held at Snoqualmie Valley Hospital:
Work Study – Wednesday, March 25, 2020, 6:30 pm, North/South Conference Room
Affiliation Work Study – Thursday, April 9, 2020 – 4:30 – 6:00 pm, North/South Conference Room
Regular Meeting – Thursday, April 9, 2020 – 6:30 pm, North/South Conference Room

There being no further business the meeting was adjourned at 7:40 pm.

Emma Herron, President

Kevin Hauglie, Secretary



Approval of Warrants, payroll and payroll taxes - February 1 thru February 29, 2020

Summary:

Hospital and Clinics Accounts Payable Warrants:
#71754 thru #71998

\$1,375,026.40

Payroll Warrants #13997 to #14001
Hospital and Clinics Payroll Auto Deposits
Hospital and Clinics Payroll Taxes:
Hospital & Clinic Matching Plans:

1,148.10
984,972.51
366,148.71
111,314.81

\$1,463,584.13

TOTAL DISBURSEMENTS

\$2,838,610.53

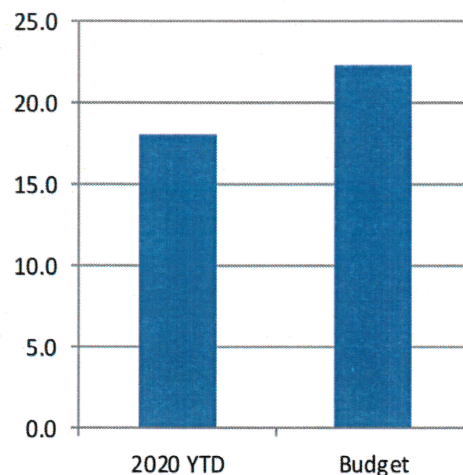
Snoqualmie Valley Hospital Statistics Summary Display



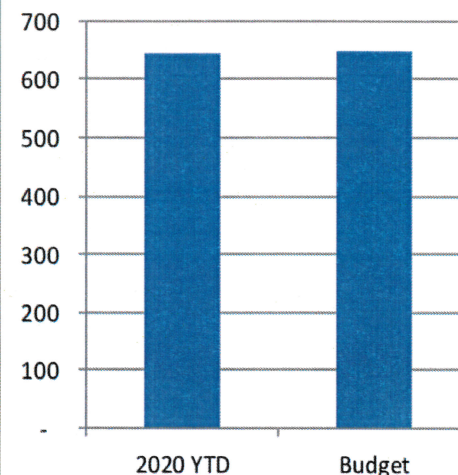
February YTD Statistics Summary

	2020 YTD	Budget	Var	%Var
Ave Daily Census	18.0	22.3	(4.3)	-19.3%
Emergency	644	647	(3)	-0.5%
Laboratory	14,122	7,272	6,850	94.2%
Imaging	818	711	107	15.0%
Clinics	3,048	3,012	36	1.2%
OP Rehab	1,582	1,595	(13)	-0.8%

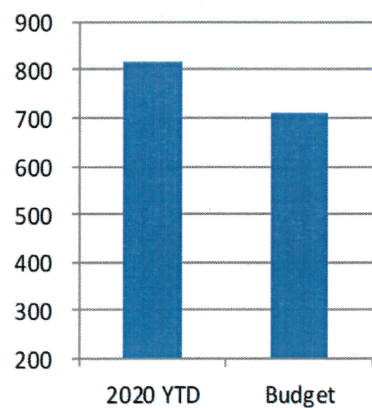
Ave Daily Census



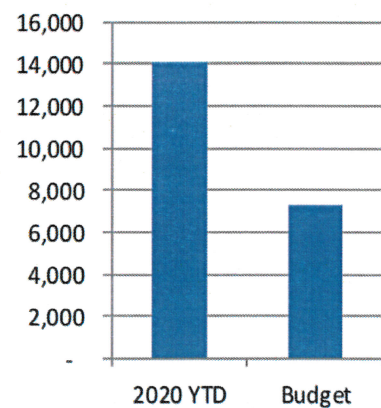
Emergency



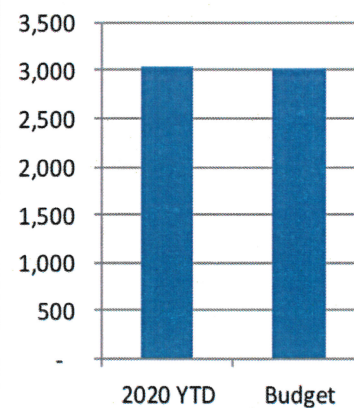
Imaging



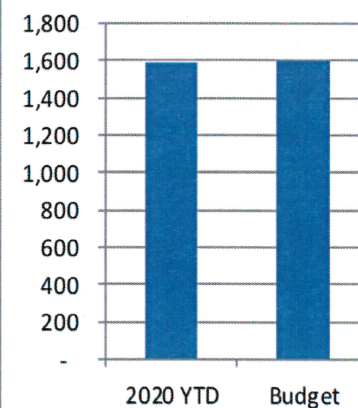
Laboratory



Clinics



OP Rehab



KING COUNTY HOSPITAL DISTRICT # 4
HOSPITAL & CLINICS COMBINED
STATEMENT OF OPERATIONS
ACTUAL vs BUDGET
FEBRUARY 2020

CURRENT MONTH					YEAR TO DATE			
ACTUAL	BUDGET	VARIANCE	% VARIANCE		ACTUAL	BUDGET	VARIANCE	% VARIANCE
\$ 2,371,611	\$ 2,953,386	\$ (581,775)	-20%	NET PATIENT SERVICE REVENUE	\$ 5,332,775	\$ 6,166,341	\$ (833,566)	-14%
51,563	47,385	4,178	9%	TAXATION FOR OPERATIONS	101,420	99,846	1,574	2%
20,862	33,312	(12,450)	-37%	OTHER	62,088	67,209	(5,121)	-8%
2,444,036	3,034,083	(590,047)	-19%	TOTAL OPERATING REVENUE	5,496,283	6,333,396	(837,113)	-13%
				OPERATING EXPENSES				
1,435,415	1,623,577	188,162	12%	SALARIES	3,027,526	3,247,154	219,628	7%
372,615	362,571	(10,044)	-3%	EMPLOYEE BENEFITS	771,340	725,092	(46,248)	-6%
68,350	56,517	(11,833)	-21%	PROFESSIONAL FEES	149,585	113,716	(35,869)	-32%
251,809	241,714	(10,095)	-4%	SUPPLIES	445,802	483,428	37,626	8%
28,223	15,618	(12,605)	-81%	REPAIRS AND MAINTENANCE	50,838	31,236	(19,602)	-63%
41,479	36,220	(5,259)	-15%	UTILITIES	78,208	72,440	(5,768)	-8%
224,514	208,092	(16,422)	-8%	PURCHASED SERVICES	466,336	416,184	(50,152)	-12%
3,621	10,431	6,810	65%	INSURANCE	32,373	20,862	(11,511)	-55%
56,506	62,898	6,392	10%	LEASE AND RENTALS	115,014	125,796	10,782	9%
344,507	356,990	12,483	3%	DEPRECIATION	693,787	713,980	20,193	3%
40,418	42,678	2,260	5%	OTHER	85,431	87,031	1,600	2%
2,867,458	3,017,306	149,848	5%	TOTAL OPERATING EXPENSES	5,916,240	6,036,919	120,679	2%
(423,422)	16,777	(440,199)	-2624%	OPERATING INCOME	(419,957)	296,477	(716,434)	-242%
11,902	12,681	(779)	-6%	INVESTMENT INCOME, NET OF AMOUNT CAPITALIZED	25,507	26,721	(1,214)	-5%
279,241	258,069	21,172	8%	TAXATION FOR BOND PRINCIPAL & INTEREST	559,573	543,788	15,785	3%
(465,635)	(464,037)	(1,598)	0%	INTEREST EXPENSE, NET OF AMOUNT CAPITALIZED	(930,066)	(929,175)	(891)	0%
(9,096)	(9,096)	(0)	0%	BOND ISSUANCE AND FINANCING COSTS	(18,193)	(18,192)	(1)	0%
32	9,566	(9,534)	-100%	OTHER NET	9,508	20,156	(10,648)	-53%
(183,556)	(192,817)	9,261	5%	NON OPERATING, NET	(353,671)	(356,702)	3,031	1%
(606,978)	(176,040)	(430,938)	-245%	CHANGE IN NET POSITION	(773,628)	(60,225)	(713,403)	-1185%
-	-			NET POSITION BEGINNING OF YEAR	-	-	-	
\$ (606,978)	\$ (176,040)	\$ (430,938)	-245%	NET POSITION	\$ (773,628)	\$ (60,225)	\$ (713,403)	-1185%

04/08/20

BALANCE SHEET

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18:04

Snoqualmie Valley Hospital

Application Code : GL

User Login Name:carolynm

Consolidated Balance Sheet

FEBRUARY 2020

DESCRIPTION	Current Year Actual	Prior Year Actual
ASSETS		
CURRENT ASSETS		
UNRESTRICTED CASH	5,384,507.01	7,645,695.24
RESERVE FUND LTGO 2011	2,373,134.13	1,725,890.47
RESERVE FUND LTGO	2,482,671.91	2,429,060.32
RESERVE FUND 2015 REVENUE BOND	3,675,187.50	3,675,187.50
INTEREST RESERVE 2015 REV BOND	0.00	0.00
RESERVE FUNDS MANDATED	8,530,993.54	7,830,138.29
BOARD RESTRICTED FUNDS	102,276.62	102,276.62
TOTAL CASH	14,017,777.17	15,578,110.15
ACCOUNTS RECEIVABLE	7,952,752.74	7,357,218.50
LESS A/R ALLOWANCES	1,513,837.58	1,966,202.82
NET PATIENT A/R	6,438,915.16	5,391,015.68
COST REPORT RECEIVABLE	0.00	0.00
EMR MEANINGFUL USE RCVBL	197,176.84	197,176.84
TOTAL NET RECEIVABLE	6,636,092.00	5,588,192.52
TAX RECEIVABLE	3,988,409.39	3,882,839.55
INVENTORY	223,249.00	117,768.21
PREPAID EXPENSES	73,340.28	114,057.98
INTANGIBLE ASSETS	2,216,281.79	2,325,438.71
OTHER RECEIVABLES	41,992.08	22,671.25
TOTAL CURRENT ASSETS	27,197,141.71	27,629,078.37
FIXED ASSETS		
LAND AND IMPROVEMENTS	26,587,059.86	26,587,059.86
BUILDINGS	32,029,211.04	32,029,211.04
EQUIPMENT	12,421,630.29	12,325,333.26
RIGHT TO USE ASSET	1,953,273.44	0.00
ACCUMULATED DEPRECIATION	19,754,897.65	16,478,979.11
NET FIXED ASSETS	53,236,276.98	54,462,625.05
TOTAL ASSETS	80,433,418.69	82,091,703.42

04/08/20

BALANCE SHEET

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18:04

Snoqualmie Valley Hospital

Application Code : GL

User Login Name:carolynm

Consolidated Balance Sheet

FEBRUARY 2020

DESCRIPTION	Current Year Actual	Prior Year Actual
LIABILITIES AND FUND BALANCES		
CURRENT LIABILITIES		
NOTES PAYABLE	0.00	0.00
COST REPORT PAYABLE	147,392.00	1,876,451.00
ACCOUNTS PAYABLE	261,125.44	220,277.68
ACCRUED PAYROLL & TAXES	1,912,780.82	2,155,488.40
ACCRUED INTEREST	756,425.00	637,800.80
OTHER CURRENT LIABILITIES	-45,661.89	-12,781.46
CURRENT PORTION LONG TERM DEBT	1,448,749.99	1,871,250.00
DEFERRED TAX REVENUE	3,247,100.16	3,136,887.45

TOTAL CURRENT LIABILITIES	7,727,911.52	9,885,373.87
LONG TERM LIABILITIES		
LTGO BONDS	45,600,000.00	45,805,000.00
REVENUE BONDS	46,333,321.10	47,163,321.10
LIABILITY RIGHT TO USE ASSET	1,956,920.77	0.00

TOTAL LONG TERM LIABILITIES	93,890,241.87	92,968,321.10

TOTAL LIABILITIES	101,618,153.39	102,853,694.97
NET INCOME/LOSS		
	-773,628.05	-389,340.54
EQUITY FUND BALANCE	-20,411,106.65	-20,372,651.01

TOTAL EQUITY AND FUND BALANCE	80,433,418.69	82,091,703.42
=====		



**Public Hospital District No. 4, King County
Finance Committee Minutes
April 7, 2020
(Rescheduled from March 31, 2020)
11:30 am – 1:00 pm
Snoqualmie Valley Hospital,
JoinMe Meeting**

Present:

David Speikers, Commissioner, Chair – Attended via JoinMe
Emma Herron, Commissioner – Attended via JoinMe
Patrick Ritter, CFO
Kim Witkop, MD, Interim CEO/CMO
Karyn Denton, COO/CNO
Jim Baldauf, Director of Finance – Attended via JoinMe

February 2020 Finances:

Income Statement:

Revenue:

- Loss of \$606,978
 - Avg. inpatient Census was 16.0 Region wide, inpatient visits were down. Especially at Swedish Hospital which is one of our largest referring hospitals. Part of the slowdown was strike at Swedish, other reasons are unknown.
 - Outpatient Rehab 22% above year ago
 - Lab was 89% above budgeted revenue
 - CT & X-ray Revenue were above budget.

Expenses:

- Overall SVH held expenses down in February. Operating expenses were 5% below budget in total. 2% below budget expenses for year.
- Purchased Services
 - Purchased Services is higher because the reference lab service is doing really well and our expense for that based on percentage of net revenue received. Purchased

services also includes HRG expenses. Lower cost Trubridge services replaces HRG beginning in June.

- Pro Fees
 - Agency Nurses. Low census employed RNs but had to keep agency per contract. Pro Fee budgeted line item also includes fee SVH pays to radiology group to interpret imaging services. X-ray and CT Imaging services delivered were higher than budget.
- Benefits Expenses
 - Benefits expenses include PTO, and health care expenditures. Since we had to low census staff due to volumes, the staff used their PTO to make up lost hours.

Balance Sheet:

- Assets
 - AR increased \$600,000
 - Commercial Swing bed delays.
 - Assets increased 2.1MM Right to Use Asset for GASB 87
 - Asset increased 4 MM in tax receivables
- Liabilities
 - Long Term Liabilities increased 2MM Right to Use assets for GASB 87

Cash Flow:

- Cash down \$470,000
 - Negative Net Income
 - Payment of short term liabilities

AR Days:

- December AR days increased 5 days to 61.9
 - Commercial Swing Bed Claims
 - Increased Lab Revenue Claims
 - Beginning of year Deductibles

Bond Covenants: (Snapshot forecast)

- Debt Coverage .53 requirement 1.20
- Reserve Requirement is at \$3,675,188 as required
- Days cash is 64 bond requirement is 60

COVID-19 Funding Sources

- **CMS**
 - Accelerated Payments – CMS has expanded their Accelerated and Advanced Payment Program. Critical Access Hospitals are able to request up to 125 percent of their net payment amount for a six-month period. This could produce between 9 and 11 million dollars, interest free advance. Repayment of any accelerated or advance payments would begin 120 days after the date of issuance of the payment. Day 121 claims would be 100% held by CMS until the full amount is paid. SVH would have 12 months to pay back CMS.
 - Revenue Loss Reimbursement – This would include reimbursement for loss of revenue for such things as Endoscopy and Sleep Center having been shut down. This program is still in development from government.
 - Disaster Waivers – 2% sequestration of Medicare payments has been eliminated for 2020.
- **FEMA**
 - There are disaster relief grants for COVID related costs available for which we have applied. New cost center has been set up for COVID to track all costs. We will have up to a year to apply for the grants.
 - WSHA is hiring a consultant to help Washington hospitals
- **Payroll Taxes** – Payments on FICA, approximately \$300,000 per month, can be deferred, interest free and no penalty. They would be due and payable 50% at end of 2021 and 50% at the end of 2022.

Other

- Commissioner Speikers asked staff to look at reducing expenses in lieu of substantially reduced revenue.
- A request was made for a breakdown of the margins on Lab and Sleep Center. However, the information will be provided only for lab, as it will be more meaningful since the Sleep Center has been shut down due to the space having been converted for COVID patients.
- Since the date for individuals paying property taxes has been extended, payment to the District from county will most likely be delayed.

NEXT MEETING: Tuesday, April 28, 2020 – 11:30 am – Location TBD

Approved: April 8, 2020

MEDICAL COMMITTEE OF THE BOARD

[by teleconference]

Date: April 7, 2020 4:00 – 5:00 pm



PARTICIPANTS: Commissioner Dariel Norris-chair; Commissioner Emma Herron, Kim Witkop, MD, CEO-int/CMO; Karyn Denton, COO/CNO; Patrick Ritter, CFO

ABSENT:

Community		<ul style="list-style-type: none">COVID Chat-bot installed on SVH website to offer semi-customized information for patients about COVIDCOVID testing site re-opened 4.7.20 as a drive-thruMany generous expressions of support from community						
Hospital	System-wide	<ul style="list-style-type: none">Staff resilience under continuous assessment and monitoring; experiences have been as expected for circumstances and overall doing well so farCorona virus response plan remains activated (Full review at board meeting later in week):<ul style="list-style-type: none">preventing spread: by staff, by incoming patients, by outpatients, by visitorsplanning for surgesprotecting staff: conservation of suppliesproviding daily status reports to DOH/Public Health Emergency response center.MIPS (Merit-based Incentive Payment System) reporting deadline delayed. Poised for successful attestation.						
	Inpatient/ Swing	<ul style="list-style-type: none">Average Daily Census:<table><tr><td>2020 Budget (pts/day and % Occup)</td><td>Mar 2020 (pts/day and % Occup)</td><td>Mar 2020 YTD (pts/day and % Occup)</td></tr><tr><td>22.8 (91%)</td><td>23.1</td><td>19.7</td></tr></table>Surrounding hospitals have been informed of our willingness to collaborate with them to accept transfers if they have higher acuity patients in need of their higher acuity beds.Maximal bed use consistent with regional emergency response plan documents	2020 Budget (pts/day and % Occup)	Mar 2020 (pts/day and % Occup)	Mar 2020 YTD (pts/day and % Occup)	22.8 (91%)	23.1	19.7
	2020 Budget (pts/day and % Occup)	Mar 2020 (pts/day and % Occup)	Mar 2020 YTD (pts/day and % Occup)					
	22.8 (91%)	23.1	19.7					
	Emergency	<p>Visit Volumes for month:</p> <table><tr><td>2020 Budget (visits/day)</td><td>Mar 2020 (visits/day)</td><td>Mar 2020 YTD (visits/day)</td></tr><tr><td>10.8</td><td>8.6</td><td>10</td></tr></table> <ul style="list-style-type: none">Volumes low in ED as is the case for all ED's across the region have been since Stay-at-Home order issued	2020 Budget (visits/day)	Mar 2020 (visits/day)	Mar 2020 YTD (visits/day)	10.8	8.6	10
2020 Budget (visits/day)	Mar 2020 (visits/day)	Mar 2020 YTD (visits/day)						
10.8	8.6	10						
Patient Transitions Service	<ul style="list-style-type: none">Managing multiple referrals per dayDischarges to Long Term Care now more challengingWorking with DSHS/HCA on long-term resident alternative placement							
Lab	<ul style="list-style-type: none">Reference lab volumes low due to limited visits in clinics—used as an opportunity for re-working some internal processes to improve efficiencyReview for expansion of in-house testing menu beginningAggressively queuing to acquire new to market COVID testing solutions in-house							
Clinics		<ul style="list-style-type: none">Rapid adoption of telemedicine has allowed recovery of some visitsExploring an opportunity to re-open the Women's clinic as an extension of SRMC—great interview.						

Approved: _4/_7/_2020_

		<ul style="list-style-type: none"> • Peds applicant interview completed—declined offer
Medical Staff	MEC & Med Cmmte Recommendations:	<ul style="list-style-type: none"> • <u>Initial Privileging to Provisional Status:</u> • <u>Extend Provisional Status 6 months:</u> • <u>Transition from Provisional to Active:</u> <ul style="list-style-type: none"> ○ Daniel Case, MD (ED) • <u>Transition from Provisional to Courtesy:</u> • <u>Transition from Provisional to Telemedicine:</u> <ul style="list-style-type: none"> ○ Breanna Taylor, MD (Tele-Stroke) • <u>Transition from Provisional to Affiliate:</u> • <u>Renewal to Active Staff:</u> <ul style="list-style-type: none"> ○ Elisa Chan, MD (Clinics) ○ Jason Rubin, MD (ED) • <u>Renewal to Courtesy Staff:</u> • <u>Renewal to Telemedicine:</u> <ul style="list-style-type: none"> ○ Ben Harmon, MD - Teleradiology ○ Hannu Huhdanpaa, MD - Teleradiology ○ Bart Keogh, MD - Teleradiology ○ Philip Lowe, MD - Teleradiology ○ Jigish Patel, MD – Teleradiology • <u>Renewal to Affiliate Staff:</u> <ul style="list-style-type: none"> ○ Joanna Hagen, ARNP (Clinics)
Other/ Education		<ul style="list-style-type: none"> •
Next Meeting		<ul style="list-style-type: none"> • May 5th 4:00-5:00pm East-West Conference room –Value Based Contracts



FACILITIES COMMITTEE MEETING

Minutes

March 23, 2020
Noon to 1:00 pm
Snoqualmie Valley Hospital
Via Teleconference

Committee Members:

Commissioner Kevin Hauglie, Chair
Commissioner Jen Carter
Karyn Denton, COO/CNO
Kim Witkop, MD, Interim CEO/Chief Medical Officer
Scott Nohavec, Facilities Director
Patrick Ritter, CFO

Old Business:

1. **Underground Diesel Fuel Storage Tank.** In follow up, Scott reported that we will have a tank assessment in a couple of week and at that time, will ask for a quote for getting a lock on the hasp on the tank.

New Business:

1. **Maintenance Issues** – No report.
2. **Facility Usage.**
 - a. Due to COVID-19 all external uses of the community room have been cancelled until further notice.
3. **Environment of Care.**
 - **Emergency Management** – No report.
 - **Fire Safety Management** – No report.
 - **Hazardous Materials Waste Management** – No report.
 - **Medical Equipment Management**
 - a. With a mask shortage nationwide, a mask conservation plan has been in place for the last two weeks. Other supplies such as hand sanitizer also remains in shortage. Bed are becoming hard to order on demand due to COVID usage in other facilities. Other supply items remain available for now.
 - b. We received contact from a local distillery who is now making hand sanitizer per CDC guidelines.

- c. We have had several other offers for donated supplies, even for hand sewn masks.
- Physical Plant
 - a. COVID testing center was set up on Monday, March 9 on the premises utilizing the East/West Conference Rooms. However, the testing has been suspended while waiting for replenishment of testing supplies.
- Safe Patient Handling – No report.
- Safety Management
 - a. Adherence to CDC and DOH guidelines regarding visitors, staff and patients are in place.
- Security Management
 - a. We remain vigilant to visitors entering the premises.
- Utilities Management – No Report.
- East Campus
 - a. King County Search & Rescue has filed permits with the county and expect a 4-6 week approval process. There will be an addendum presented to the board for approval before any additional usage of space is granted.
- 4. Other/Miscellaneous
 - a. **Certificate of Occupancy Update.** Progress is being made. SVH staff had a meeting with representatives from the City of Snoqualmie, Benaroya, Absher, and Perteet on March 5 to review the items remaining to be completed prior to finalizing the Certificate of Occupancy. Agreement was made as to whose responsibility they were along with due dates. Since the meeting several of those items have now been completed including: lift station as-builts, pond as-builts, and a proposal for landscaping expense. A follow up meeting will be held on April 9 via teleconference.

Next Meeting: Monday, April 27, 2020 – 12 noon – Location to be determined

Approved: March 24, 2020



STATE OF WASHINGTON
OFFICE OF THE GOVERNOR

P.O. Box 40002 • Olympia, Washington 98504-0002 • (360) 902-4111 • www.governor.wa.gov

**PROCLAMATION BY THE GOVERNOR
AMENDING PROCLAMATION 20-05**

20-28

Open Public Meetings Act and Public Records Act

WHEREAS, on February 29, 2020, I issued Proclamation 20-05, proclaiming a State of Emergency for all counties throughout Washington as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed person-to-person spread of COVID-19 in Washington State; and

WHEREAS, as a result of the continued worldwide spread of COVID-19, its significant progression in Washington State, and the high risk it poses to our most vulnerable populations, I have subsequently issued amendatory Proclamations 20-06, 20-07, 20-08, 20-09, 20-10, 20-11, 20-12, 20-13, 20-14, 20-15, 20-16, 20-17, 20-18, 20-19, 20-20, 20-21, 20-22, 20-23, 20-24, 20-25, 20-26, and 20-27, exercising my emergency powers under RCW 43.06.220 by prohibiting certain activities and waiving and suspending specified laws and regulations; and

WHEREAS, the COVID-19 disease, caused by a virus that spreads easily from person to person which may result in serious illness or death and has been classified by the World Health Organization as a worldwide pandemic, continues to broadly spread throughout Washington State; and

WHEREAS, to curtail the spread of the COVID-19 pandemic in Washington State and to protect our most vulnerable populations, it is necessary to limit person to person contact through social distancing and limiting person to person contact; and

WHEREAS, to curtail the spread of the COVID-19 pandemic in Washington State and to protect our most vulnerable populations, it is necessary to limit person to person contact through social distancing and limiting the numbers of people who may gather in one location; and

WHEREAS, transparency in state government and all of its political subdivisions is an important state policy, such that all statutes related to open public meetings and public records are the business of the state; and

WHEREAS, there are a plethora of electronic, telephonic and other options that make it possible for the public to attend open public meetings remotely; and

WHEREAS, it is necessary to immediately waive any requirement in RCW 42.56, the Public Records Act, and RCW 42.30, the Open Public Meetings Act, that provides for any activity that necessitates an in-person setting; and

WHEREAS, the worldwide COVID-19 pandemic and its progression throughout Washington State continue to threaten the life and health of our people as well as the economy of Washington State, and remains a public disaster affecting life, health, property or the public peace; and

WHEREAS, the Washington State Department of Health (DOH) continues to maintain a Public Health Incident Management Team in coordination with the State Emergency Operations Center and other supporting state agencies to manage the public health aspects of this ongoing incident; and

WHEREAS, the Washington State Military Department Emergency Management Division, through the State Emergency Operations Center, continues coordinating resources across state government to support the DOH and local health officials in alleviating the impacts to people, property, and infrastructure, and continues coordinating with the DOH in assessing the impacts and long-term effects of the incident on Washington State and its people.

NOW, THEREFORE, I, Jay Inslee, Governor of Washington, as a result of the above-noted situation, and under RCW 38.08, RCW 38.52 and RCW 43.06, do hereby proclaim that a state of emergency continues to exist in all Washington State counties, that Proclamation 20-05 and all amendments thereto remain in effect, and that Proclamation 20-05 is amended by waiving and suspending the portions of RCW 42.30 and RCW 42.56 that require in-person meetings or contact.

I again direct that the plans and procedures of the Washington State Comprehensive Emergency Management Plan be implemented throughout state government. State agencies and departments are directed to continue utilizing state resources and doing everything reasonably possible to support implementation of the Washington State Comprehensive Emergency Management Plan and to assist affected political subdivisions in an effort to respond to and recover from the COVID-19 pandemic.

I continue to order into active state service the organized militia of Washington State to include the National Guard and the State Guard, or such part thereof as may be necessary in the opinion of The Adjutant General to address the circumstances described above, to perform such duties as directed by competent authority of the Washington State Military Department in addressing the outbreak. Also, I continue to direct the DOH, the Washington State Military Department Emergency Management Division, and other agencies to identify and provide appropriate personnel for conducting necessary and ongoing incident related assessments.

FURTHERMORE, based on the above situation and under the provisions of RCW 43.06.220(1)(h), I find that RCW 42.30, as applied to all public agencies statewide, involves the conduct of state business, and to help preserve and maintain life, health, property or the public peace, I hereby amend Proclamation 20-05 to prohibit public agencies as follows:

Any public agency, subject to RCW 42.30, is prohibited from conducting any meeting, subject to RCW 42.30 unless (a) the meeting is not conducted in-person and instead provides an option(s) for the public to attend the proceedings through, at minimum, telephonic access,

and may also include other electronic, internet or other means of remote access, and (b) provides the ability for all persons attending the meeting to hear each other at the same time.

Remote meeting resources include the Department of Enterprise Services Master Contract for teleconferencing and web-based meeting platforms, which can be found here:

Software Resellers (06016):

<https://apps.des.wa.gov/DESContracts/Home/ContractSummary/06016>

Cloud Solutions (05116):

<https://apps.des.wa.gov/DESContracts/Home/ContractSummary/05116>

Other resources can be found online by searching for free conference call services and for other e-based meeting services. Additional guidance for remote meetings may be found on at the Municipal Research and Services Center (MRSC, www.mrsc.org).

FURTHERMORE, based on the above situation and under the provisions of RCW 43.06.220(1)(h), I find that RCW 42.30, as applied to all public agencies statewide, involves the conduct of state business, and to help preserve and maintain life, health, property or the public peace, I hereby amend Proclamation 20-05 to prohibit public agencies as follows:

Subject to the conditions for conducting any meeting as required above, agencies are further prohibited from taking “action,” as defined in RCW 42.30.020, unless those matters are necessary and routine matters or are matters necessary to respond to the COVID-19 outbreak and the current public health emergency, until such time as regular public participation under the Open Public Meetings Act is possible.

FURTHERMORE, based on the above noted situation and under the provisions of RCW 43.06.220(2)(g), I find that strict compliance with the following portions of statutory and regulatory obligations or limitations will prevent, hinder, or delay necessary action for coping with the COVID-19 State of Emergency by bringing people in contact with one another at a time when the virus is rapidly spreading, and that the language of each statutory provision specified below is hereby waived and suspended as provided herein until midnight on April 23, 2020:

- RCW 42.30.030 – the following words only:
 - “and all persons shall be permitted to attend any meeting of the governing body of a public agency, except as otherwise provided in this chapter”
- RCW 42.30.040 – in its entirety; however, agencies are strongly encouraged to utilize a remote meeting option that complies, to the greatest extent possible, with this statute
- RCW 42.30.050 – as to the following word only: “room” in the first sentence
- RCW 42.30.070 – as to the following word only: the first usage of “site” - in the fourth sentence
- RCW 42.30.075 – as to the following words only:
 - “Notice of any change from such meeting schedule shall be published in the state register for distribution at least twenty days prior to the rescheduled meeting date.”
- RCW 42.30.080(2)(c) – as to the following words only:
 - “Prominently displayed at the main entrance of the agency's principal location and the meeting site if it is not held at the agency's principal location.”

- RCW 42.30.090 – as to the following words only:
 - “on or near the door of the place where the regular, adjourned regular, special, or adjourned special meeting was held.”

FURTHERMORE, based on the above noted situation and under the provisions of RCW 43.06.220(2)(g), I find that RCW 42.56, as applied to all public agencies statewide involves the conduct of state business and I also find that strict compliance with the following statutory and regulatory obligations or limitations will prevent, hinder, or delay necessary action for coping with the COVID-19 State of Emergency in responding to public records requests by bringing people in contact with one another at a time when the virus is rapidly spreading, and that the language of each statutory provision specified below is hereby waived and suspended as provided herein until midnight on April 23, 2020:

- RCW 42.56.080(2), as to the following words only:
 - “Agency facilities shall be made available to any person for the copying of public records except when and to the extent that this would unreasonably disrupt the operations of the agency.”
 - “in person during an agency's normal office hours, or”
- RCW 42.56.090, as to the first sentence only
- RCW 42.56.100, as to the following word only in the first sentence: “full”
- RCW 42.56.520(1), as to the following words only in the second sentence: “Within five business days of receiving a public records request,”

Violators of this of this order may be subject to criminal penalties pursuant to RCW 43.06.220(5).

Signed and sealed with the official seal of the state of Washington on this 24th day of March, A.D., Two Thousand and Twenty at Olympia, Washington.

By:

_____/s/
Jay Inslee, Governor

BY THE GOVERNOR:

_____/s/
Secretary of State

CEO REPORT: COVID-19 HIGH LEVEL SUMMARY OF WORK TO DATE AS OF APRIL 9, 2020

SPACE

- Operating at full 28-bed license capacity after federal lift of 25-bed CAH restriction
- 3 unique inpatient cohorts: COVID+, PUI, all others. COVID+ and PUI beds on 1st floor in negative pressure externally ventilated rooms. All other beds on 2nd floor.
- ED has 2 unique cohorts: PUI in rooms 5/6; all others in room 1-4
- Air systems vendor brought in to enhance negative spaces, balance airflows, and document complete air turnover for cohorted rooms
- Testing site now set up as drive-through with no exposure to interior of building
- Seating areas thinned of chairs; conference rooms opened for spacing
- Community rooms closed to public
- Clinic visits converted to tele-medicine visits as often as possible; use Testing Site drive thru when closed for car visits
- Clinic interior space dedicated to well visits before 3pm and ill visits after 3:30pm

STAFF/PEOPLE

- All staff are screened upon arrival to work for COVID symptoms and a temp check
- Vendors are held external to building when possible; those that must enter go through staff screening process
- Staff impact so far: 4 have terminated, 4 have self-furloughed
- Visitors excluded from inpatient areas; outpatients screened and masked for their visit—escorts discouraged
- Surge planning: agency staff in high demand in region so several locked in on contracts; short term ICU planned if needed,

STUFF

- Critical shortage of N-95 masks recently temporized by distribution from National Strategic Stockpile
- UV light boxes acquired for re-processing of masks and other solid objects--deployed today
- Many generous donations from community have kept our supply of "patient/public" masks in the adequate range; community donations of N-95 masks have mostly been non-medical grade so don't replenish our N-95 supply but can be incorporated into our Procedural mask supply for staff use. [Level I=patient use to protect others, Level II=staff use to protect themselves, N-95=staff use when virus aerosolized by procedure/intubation/etc]

PROCESSES

- Ill clinic visits start as car visits to confirm safety for entry to building
- Multiple process modifications to protect patients/staff from exposure
- Capturing details of related expenses (FEMA support) and lost revenue (Revenue recovery grants)
- Preparing cash flow projections and 2020 Cost Report assumptions to inform impacts of delay in receipt of property taxes and inform taking/not taking CMS payment advances, SBA loans, delayed submission of FICA taxes, etc

CEO REPORT: COVID-19 HIGH LEVEL SUMMARY OF WORK TO DATE AS OF APRIL 9, 2020

SERVICE LINE IMPACTS FROM COVID-19 RESPONSE WORK:

- Endoscopy unit off-line: converted to negative pressure patient care area; elective procedures prohibited to preserve PPE
- Sleep Studies off-line: converted to negative pressure patient care area; discontinuation of all sleep studies recommended by American Academy of Sleep Medicine for staff protection
- Clinics: all wellness visits for anyone over age of 3 cancelled (doesn't meet exceptions to Stay at Home order), patients appropriately delaying routine follow-up visits of chronic illnesses— medication renewal parameters being extended and/or visits converted to telemedicine

REGULATORY

- Liability protections being addressed for providers, not for organizations
- EMTALA and HIPAA have been relaxed
- Many waivers have been received from CMS, from state/HCA, from CDC