

To: Board of Hospital Commissioners

From: Eric Moll Date: June 28, 2022

Subject: Consent Agenda

Consent agenda for Tuesday, June 28, 2022

## Approval of the Bills:

General Fund 2229201 – 2229730; 242839 – 242853 \$4,516,539.97

Employee Medical 20068 – 20069 \$ 529,541.97

## **Miscellaneous**

The Board of Commissioners reviewed and approved the updated District Financial Assistance policy on May 24, 2022. It was submitted to the Department of Health by the June 1<sup>st</sup> filing date, pursuant to the new state law.

Upon its review, one minor change was requested by the DOH. On page 2 of the policy, the third paragraph, second sentence implied that patients approved for Apple Health would not also be eligible for financial assistance (see below). By removing the second sentence, the ambiguity is gone.

"For those patients that have been identified to meet the guidelines for an Apple Health plan, they will need to comply with the application process prior to receiving financial assistance. If the application for Apple Health is denied, then financial assistance will be granted."

The BOC is requested to approve the updated policy with this one change. The new wording is as follows:

"For those patients that have been identified to meet the guidelines for an Apple Health plan, they will need to comply with the application process prior to receiving financial assistance."

A new X-ray machine and room was budgeted and approved for the 2022 budget due to it being end of life. The original and total approved capital amount was \$329,482. The updated quote is now \$386,595 so this *request is to utilize our capital contingency funds in the amount of \$57,113 to cover the difference.* 

## **CNO**

Union: We are waiting on a response from the nurses' union on whether they accept our ATB increase offer (8%). I spoke with Cathy Macphail the Union rep last week, she believes this likely will lead to a need for a vote. Should that be the case, the Union could vote 'no' which means we would essentially be renegotiating with them. The AFSME contract has settled. The contract goes to vote by Union members and then to the board for full ratification. The contract should be on the agenda by July 12<sup>th</sup>. Kevin Keller will present in my absence. A little over 15% ATB depending on job role. Several premium pays were added: float pay, preceptor pay, and certification pay were added.

Recruitment/retention: Work continues on the Recruitment/retention initiative. The team is working on expanding the tuition reimbursement to include an expanded list of eligible jobs. Turnover rate YTD is at 4% YTD. Our goal is under 11% for the year based on national benchmarks for full/parttime employees. We are also working on unit councils that are RN led. With the organization of the ED council, we now have councils in three units.

We have signed a commitment to participate in WSHA's 'CARE for staff and patients' initiative'. The initiative is to address hospital workplace concerns that were raised by staff and legislators. Mason commits to create a culture of respect, workplace innovation, and career development opportunities for front line staff. Trauma response services, nurse staffing committees, and CEO led listening sessions are included in WSHA's recommendations. The listening sessions will be completed by September 9<sup>th</sup>.

We are beginning modified Bonfire training by August and will be trialed on MSP/ICU. They will be adding clinical specific items to the agenda and then provide the training. The whiteboards in each patient room is also being revamped to make it easier for patients to understand the 'goals of the day' and who their care team is. The current white boards have too much information and can be confusing.

## <u>COO</u>

As of 6/22 there are 59 Open Positions, of which 21 are PRN. This compares to 70/34 when we began paying strict attention to this report and to 53/20 as of 6/7. It is expected the PRN openings will be reduced by five this week as we have exchanged four Lab Assistant PRN positions for one 1.0 FTE position. We are just waiting for this justification to clear the process. We also have a couple PRN Cook positions under review to see if they should be some portion of an FTE, since they will work a larger number of hours than PRN staff should. Giving this report attention has also highlighted opportunity in the Diagnostic Imaging area as their procedure schedule is heavily impacted by the lack of appropriate staffing. We are working with the Finance Department to investigate lost revenue due to this situation.

During the June 14 Board of Commissioners meeting, topics of the bi-weekly Customer Service Huddles in Mason Clinic were discussed. Included in the Board Packet is the list of topics we

cover in these huddles. Included in this list are "New Huddle Topics" – those suggested internally; and "Bonfire Sponsored" – which were introduced to us during the initial Customer Service Training; and a list of the topics that have been covered this year. These huddles are held every two weeks, where employees have up to 10 opportunities to attend a session. Part of the discussion also centered on the "Knock Your Socks Off" recognition program. Therefore, included in the packet is a copy of a recommendation to recognize Dr. Millard.