

Orcas Island Health Care District
Board of Commissioners - REGULAR Meeting Minutes
REMOTE BOARD MEETING
Tuesday, May 19, 2020
5:00 – 7:00 pm

Commissioners Present (via Zoom):

Art Lange
Diane Boteler
Patricia Miller, Secretary
Pegi Groundwater
Richard Fralick, President

Staff (via Zoom):

Anne Presson, Superintendent
Pat Hunt, Project Mgmt. Consultant

Commissioners Absent:

None

I. Call to Order

President Fralick called the meeting to order at 5:00 pm. He indicated this was the 8th meeting of the year, and the Board continues to operate under the Governor's Emergency Declaration and OPMA amendment that is set to expire on May 31st. It's expected the order will be extended; however, it remains unclear how and when public entities will be able to resume meetings where the public can attend in person. For now, we continue to operate in a remote environment and the Board reviewed how Public Comment will be handled.

II. Public Comment

Superintendent Presson read three public comments that were submitted via email per the temporary policy to accommodate the virtual meeting format.

Name: Bill Bangs - Agenda Items: VI.a. and VI.b.

Congratulations on releasing the RFP for a clinic operator. I regret that I am unable to attend this evening's meeting. I have a few questions to be asked during the opening public comment session.

- 1. Please clarify that if none of the proposals is judged to fully meet the medical care needs of our community then you reserve the right to award no contract.*
- 2. If that is the case, will you consider the district becoming the operator itself? That is, would the commissioners consider hiring, in addition to a Superintendent, a clinic Business Manager and a clinic Medical Director to be responsible for clinic operations with the Superintendent acting as chief executive officer and the board of commissioners acting as a board of directors? It seems that such an approach would maximize local control of the clinic while minimizing overhead expenses. If this approach has been rejected then some in the community might want to understand the rationale behind the rejection.*
- 3. I understand that the proposals may be evaluated by the commission en banc. Is that correct? Will there be any preliminary screening of the submissions for compliance with the terms of the RFP? How and by whom will such screening be performed? Will proposals deemed non-compliant be rejected and not considered for further evaluation?*

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4. *Will there be a structured evaluation process? Will the commissioners, as evaluators, be provided with score sheets or other rubrics to aid in assessing each proposal's value with regard to each of the RFP's evaluation criteria? Will there be a weighting or ranking of the evaluation criteria and the components to be considered in support of each criterion?*

5. *The RFP identifies six evaluation criteria or factors. Will sub-factors be identified and included in a scoring rubric? For example, will each proposal be scored on which of the requested services is to be offered and at what level? As another example, how will collaboration with local EMS be measured?*

I also have one request. Please consider recording your open meetings and make those recordings available on the District website. The host of a ZOOM meeting can record that meeting with the push/tap of a single button and the resulting file can be uploaded to your website server for access by the public.

Thank you for your consideration.

Name: Joleene Lucas, CMA - Agenda Item VI: RFP

I would like to make a brief statement of gratitude to UW for being a compass in the health care community. As a UW employee and a longtime islander, I am proud to be a part of a team that continues to care for the needs of all in need. This should continue to be a reliable service in a rural community.

Name: Jennifer Taylor - Agenda Item VI: RFP

As we move through the Covid 19 Pandemic, we have yet to see what our new normal will be and how recovery will potentially impact the future of healthcare on Orcas. As the RFP references, OIHCD reserves the right to revise the dates for extending the Timeline as defined in the documents. The Covid Pandemic has definitely taken its toll on every aspect of healthcare from staffing and supply chains to how we will interact with our patients in the future. As a Community, we face an uncertain future as to how the return of tourism (which is already evident) and the possibility of increased Coronavirus cases in the fall will delay recovery and add to the financial hardships already created by the Pandemic.

For binding proposals to be created during a time of such uncertainty, it does not seem prudent and could potentially create agreements that are not realistic for the future of healthcare on Orcas. For these reasons, I believe it is important for OIHCD's consideration of a delay in the proposal process until a later date after the healthcare industry has had an opportunity to tap into additional funding sources for recovery.

As a member of the Orcas community, the care of my family has benefited greatly because of our local clinic and its affiliation with the larger UW Medicine system. The financial cost of transition and the impact on staff are areas that require careful consideration as we face an uncertain future. We remain committed on continuing to provide excellent patient care at a time when stability is what our community needs most.

III. Consent Agenda

The Consent Agenda contained the May 5, 2020 Regular Board Meeting Minutes and a May 11, 2020 AP Voucher report in the amount of \$4,043.91.

MOVED by Commissioner Groundwater, seconded by Commissioner Boteler to approve the Consent Agenda as presented. No further discussion. VOTE 5:0:0. MOTION CARRIED.

IV. Clinical Operations During COVID

Representatives from Orcas Family Health Center (OFHC) and UW Medicine Orcas Island Clinic (UW) were present. It was discussed that going forward the Board will put specific timelines around this item.

Aimee Johnson, OFHC, Office Manager, reported the clinic is adjusting their schedule as the schedule warrants. There are two providers in the clinic on Monday, Tuesday, and Wednesday from 9 am to noon, and one provider remains for the afternoon. On Thursday there is one provider scheduled from 9 am to noon, and Friday's are the same with afternoon open, if needed. They are starting to revisit having two providers work a full day on Mondays following the holiday weekend.

The number of appointments for the period March 19 through May 19 is about 61% of the volume for the same period a year ago, or 580 compared to 958. Payment differentials are usually reflected in the following month or two, as payments are received from payors. OFHC just received \$118,000 for payroll costs from the Paycheck Protection Program. These are required to be used over the two months following date of deposit, which was May 18th. The practice also received \$139,000 in CARES funding, and with the funding support expects to end the fiscal year in the black.

Commissioner Groundwater indicated that she's heard parents are reluctant to bring kids in for vaccines and wondered if OFHC was seeing patients return. Aimee reported that they are starting to see patients come back for follow-up visits and blood draw orders. Commissioner Boteler asked about seasonality, and the impact on volume since it's expected tourists will be less due to COVID restrictions. Aimee reported she is able to review visits based on zip code and will follow-up with that information. The Clinic normally does see a fair amount of kids attending camp Orkila, and it's unclear if they will continue with any sessions this summer. If not, that will have a definite impact on summer volumes.

Jennifer Taylor, UW Medicine Orcas Island Clinic, Clinic Manager, provided an update for UW. She shared a detailed list of activities that took place over the course of the past two months. The Clinic continues to serve all members of the community who meet the criteria for COVID-19 testing, per CDC guidelines. The plan has been to conduct testing five days per week; however, there were periods when that was moderated to effectively manage limited supplies of PPE. Testing is handled in the back parking lot to maintain patient privacy and has been working well. The clinic also participated in the County's asymptomatic testing pilot for essential workers. To-date, they have conducted 123 tests. It was noted how much extra time it takes staff to conduct the testing. This includes time for patient education prior to the actual test, and time to follow-up with results. They've also created ways for patients to access their COVID-19 test results more quickly and easily.

For the period March 23rd through May 17th the staff fielded 2,229 phone calls from patients, and the front desk initiated 1,441 outbound calls. This doesn't include calls by the RN staff. In April, the UW Orcas Clinic has the 5th highest call volume across the entire UW Neighborhood Clinic system. Besides calls, the work has continued to address prescription refills, return calls with patient questions/concerns, and insurance/billing issues. The average time spent on each call is 20 minutes. Finally, there have been 1,545 touches to answer patients emails in advance of appointments. The lab suffered after the loss of a staff member at the start of the year; however, the Clinic hired and is training a new lab technician who is doing a wonderful job. Labs for March 2020 were 155, April showed 98 and May to-date are 147. These are critical and essential labs, and the Clinic has not yet resumed routine lab draws. Courtesy labs generate a lot of extra work for staff as they need to be able to confirm orders and transport requirements.

The plan for the Clinic is to start to increase in person visits to the Clinic with a focused approach on those at risk for things outside of COVID-19. This includes allergy injections, adult vaccines, wound care and children. They continue to use telehealth for patients who are hesitant to return to the Clinic. Overall, YTD visits are 26.39% below budget, at the same time non-provider FTEs have been 1.48% below budget. Commissioner Lange asked about PPP funds and how much will be allocated to the UW Orcas Clinic. Mark Bresnick responded that it was unclear how the funds received will be distributed across the entire UWNC system; however, he reported that overall, they expect to end the UWNC fiscal year balanced. Commissioner Boteler asked how the numbers Jen supplied compare to the same period a year ago, and Jen agreed to try and follow-up with that detail, but reporting was on a different system at that time which could make it difficult to compare.

Superintendent Presson shared a few updates from the County's Emergency Operations (EOC).

V. Committee and Work Group Reports

- a. **Building/Equipment Committee** – Commissioner Groundwater reported that Esary was the low bidder of the three bids received for the roof replacement. The Committee received their Pre-Award form to confirm they are a responsible bidder. The references were contacted; however, the Port of Bellingham couldn't be reached. The two other references checked out positively. The Committee confirms Esary is both the low bid and a responsible bidder. Discussion was held around the Agreement and the need to get clarification on the warranty for workmanship and what ice/water shield product is proposed.

President Fralick asked the Board to authorize the Committee to go ahead with the contracting, subject to getting clarification on the points discussed. Until the HVAC RFP is concluded, the Committee can't make a final recommendation on whether to go with the extra insulation. He would like to have a conversation with Esary that they will be awarded the contract; however, the final determination on project material will be determined following conclusion of the HVAC RFP.

There was consensus of the Board to proceed as recommended by the Committee. Once all of the details are confirmed the Board will go through a formal approval process on the contract.

Regarding the HVAC RFP, Commissioner Groundwater reported the Committee is waiting for proposals which are due the end of the month.

- b. **Finance Committee** – the Q'3 financial report from UW Medicine was shared late with the group. Commissioners were asked to submit questions to Superintendent Presson so they can be factored into discussions with UW prior to the next Board meeting. Commissioner Miller shared that UW is reporting \$562,000 in subsidy has been used in comparison to a YTD budget of \$510,000. This results in a YTD deficit of \$52,000, and there are still a few months to go in the fiscal year ending June 30th. The Committee will be discussing options with UW Medicine.

VI. Clinic RFP Process

The Board held a discussion around the criteria to evaluate responses to the RFP. This included the scope of services, after-hours, and the degree of influence the Board would like to have in decision making. There was agreement that it's not the role of the Board to micromanage the Clinic operator; however, there were varying opinions as to the balance between advice and consent versus having veto power around key decisions and/or hiring. Discussion continued and Commissioner Miller asked each Commissioner to think about what a deal

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breaker would be when assessing potential partnerships. Those items will be important to know and factor into the Clinical Services Agreement (CSA).

Superintendent Presson reported on responses to the RFP to-date. PeaceHealth will not be responding to the RFP, and she expects the same reply from the FQHCs. Island Hospital and OFHC will be responding, and Island Hospital has requested a site visit for May 29th. Discussion was held to determine the Board's view on whether the timeline might be revisited. There was consensus that if the Board feels they aren't getting a good representation of options they will revisit the schedule to consider a 2- or 3-week extension. This will be discussed at the next Board meeting.

Commissioner Miller asked the Board to authorize engaging Bruce Rylander to look at the financial model. She would like to factor into the model the impact that a delay in the RFP would have on the long-term financial projections. She feels a new model that's easier to use as a decision tool is needed. She will put together a Scope of Work for Bruce and bring that to the next Board meeting.

VII. New Business

- a. **Meeting Schedule** - The Board tentatively scheduled two Special Meetings to be held on July 14th and 28th. These will be revisited should the timeline be modified.
- b. **Electronic Signature Policy** - A draft Electronic Signature Policy was submitted to the Board for approval. Adding this capacity will greatly enhance the efficiency of the normal Board processes, and the cost of contracting with DocuSign can be shared with the Lopez Island Hospital District.
- c. **DocuSign** – there was consensus of the Board to move forward with DocuSign. The Superintendent will determine what is needed to be able to share the cost of the contract with Lopez Island Hospital District.

MOVED by Commissioner Groundwater, seconded by Commissioner Boteler to approve Electronic Signature Policy as presented, and pursue splitting the contract with LIHD. No further discussion. VOTE 5:0:0. MOTION CARRIED.

- d. **Template CSA** – Commissioner Groundwater shared a template CSA and she would like to merge that with the best parts of the existing CSAs. There was consensus of the Board to create a Work Group to review and prepare a new CSA template. Commissioner Miller agreed to work with Commissioner Groundwater on this project. All Commissioners were asked to review and submit feedback to Commissioner Groundwater. Superintendent Presson will send a word version of the existing CSAs to the Board so Commissioners can identify what they do/do not like in the existing CSAs.
- e. **Communication with Community** – Commissioners Boteler and Lange were asked to put together a communication plan around the Clinic Operator RFP process. This will be brought to the next Regular meeting.

VIII. Operations Report

Superintendent Presson shared the OIHCD financial report through the month of April 2020. She reported no unusual activity on either Revenue or Expenditures. As of April 30th, Revenue from Property Tax receipts was 51% of budget, which was positive news. She also moved funds into the Debt Service Fund in anticipation of making the required May 1st Interest payment on the General Obligation Bond. Per District policy, she will be

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moving \$50,000 into the Reserve Fund and is waiting to finalize the UW subsidy for the period July 1, 2019 through December 31, 2019.

IX. Public Comment

Aimee Johnson was able to report back on the item she left outstanding in her COVID-19 report specific to seasonality. For the last fiscal year, 14% of production was from zip codes outside of the County. She also reported that during the 2008 recession there was a significant financial impact from reductions in construction and service worker activity and Labor & Industry claims.

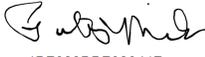
X. Upcoming Meetings

A list of upcoming meetings was included on the Agenda. The next Regular Meeting of the OIHCD is scheduled for June 2nd and will continue to be conducted via Zoom.

XI. Meeting adjournment

MOVED by Commissioner Groundwater, seconded by Commissioner Boteler to adjourn the meeting at 7:08 pm. VOTE 5:0:0. MOTION CARRIED.

Minutes approved this ____ day of _____, 2020.

DocuSigned by:

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6/30/2020

Attest: Patricia Miller, OIHCD Board Secretary