



**Board of Commissioners  
Work Session Minutes  
December 6, 2017**

The regular meeting of the Board of Commissioners of Olympic Medical Center was called to order at 12:30 pm by Board President Jim Leskinovitch in Linkletter Hall, and was opened with the pledge of allegiance. Also in attendance were Commissioners John Beitzel, Jean Hordyk, John Miles, MD, John Nutter, and Tom Oblak; CEO Eric Lewis; CNO/COO Lorraine Wall, RN; CMO/Safety Officer Scott Kennedy, MD; OMP CPO Joshua Jones, MD; CFO Darryl Wolfe; CHRO Richard Newman; Risk Manager Donna Davison; General Counsel Jennifer Burkhardt, JD, GPHR; Communications and Public Relations Manager Bobby Beeman; staff; public participants and Executive Assistant Gay Lynn Iseri. Commissioner Jim Cammack was excused.

***OMC Combined Fund Drive Celebration – Richard Newman, Chief Human Resource Officer and Bobby Beeman, Communications and Public Affairs Manager***

Mr. Newman acknowledged Julie Black, Bobby Beeman, Donna Pacheco, and Kayla Owens as co-chairs of the campaign. The goal was \$105,001, and over \$113,000 has been raised now, which includes \$46,000 raised for OMC charities.

***Medical Staff Recommendations – Scott Kennedy, MD, Chief Medical Officer***

The November 2017 Medical Staff Credentials Report was presented for approval as follows:

***Appointment to the AHP Staff:***

- |                          |   |
|--------------------------|---|
| 1. Chadburn, Kevin, CRNA | Envision – Anesthesia                     |
| 2. Rambow, Thomas, PA-C  | Jamestown Family Health – Family Medicine |
| 3. Schorer, Kim, CRNA    | Envision – Anesthesia                     |
| 4. Slack, Daniel, CRNA   | Envision - Anesthesia                     |

***Reappointment to the AHP Staff:***

- |                             |                             |
|-----------------------------|-----------------------------|
| 1. Bennett, Stephenie, PA-C | OMP – Primary Care          |
| 2. Koomen, Anne, ARNP       | Peninsula Behavioral Health |
| 3. Parker, Selby, PA-C      | Emergency Medicine          |
| 4. Turner, Deborah, PA-C    | OMP – Cancer Center         |

***Reappointment to the Consulting Medical Staff:***

- |                          |                                 |
|--------------------------|---------------------------------|
| 1. Wolgamot, Gregory, MD | Northwest Pathology - Pathology |
|--------------------------|---------------------------------|

**Reappointment to the Active Medical Staff:**

- |                            |   |
|----------------------------|---|
| 1. Guthrie, Timothy, MD    | Jamestown Family Health – Family Medicine |
| 2. Harrah, Gregory, MD     | Emergency Medicine                        |
| 3. Herschmiller, Emily, MD | Envision – Anesthesia                     |
| 4. Hobbs, William, MD      | Internal Medicine                         |
| 5. Jones, W. Brad, MD      | RADIA – Radiology                         |
| 6. Wu, Lisa, MD            | Jamestown Family Health – Family Medicine |

**Telemedicine Privileges:**

- |                        |                             |
|------------------------|-----------------------------|
| 1. Chen, Herbert, MD   | RADIA – New appointment     |
| 2. Dobson, Michael, MD | RADIA – New appointment     |
| 3. Rago, John, MD      | RADIA – New appointment     |
| 4. Sirkis, Hartley, MD | RADIA – New appointment     |
| 5. Vu, Lisa, MD        | RADIA – New appointment     |
| 6. Witt, Jennifer, MD  | Swedish – Effective 4/26/17 |

**Resignation/Contract Termination:**

- |                        |  |
|------------------------|--|
| 1. DePas, Shelby, PA-C | Jamestown Family Health – Effective 10/20/17 |
|------------------------|--|

**MOTION:** To approve the November 2017 Medical Staff Credentials Report as presented. **Motion carried unanimously.**

**Medical Staff Continuing Medical Education (CME) Policy #G19**

Approval was requested for the Medical Staff Continuing Medical Education governance policy. There were no changes found to the policy that was up for a two year review.

**MOTION:** To approve the Medical Staff Governance Policy #G19 Continuing Medical Education as presented. **Motion carried unanimously.**

**Amending the Board Bylaws – Jennifer Burkhardt, General Counsel**

Commissioner John Beitzel, as chair of the Board Bylaws Committee, asked for the annual review of the bylaws by the committee consisting of Commissioners Jean Hordyk and Tom Oblak. Also included in the review process was Jennifer Burkhardt, general counsel. Ms. Burkhardt presented potential opportunities for clarifications and improvements to the bylaws after reviewing four other public hospital district bylaws as follows:

**Section 5.3** - As a public hospital district is required by statute to have a seal, the official seal shall be maintained by the Administrator or designee, and be provided upon request to the Board Secretary so that it may be affixed to any document requiring it.

**Section 8.6** - Updated to reflect that the Quality Management Oversight Committee now meets quarterly.

**Section 9.6** - The full compilation and enumeration of the reasons that the Board is permitted by various statutes to go into executive session was expanded upon. This update is a more robust listing of the Board's ability and cites further statutory authority for executive session.

**Section 9.9** – This new section of Orderly Conduct of Meetings references a statutory right of the Board to require orderly conduct of meetings, and is a helpful quick reference.

**Section 9.10** – This new section of Emergency Meetings provides for expedited Board action in the event of a disaster or other emergency as allowed by statute.

**Section 11.1** - Clerical updates only.

**Article 13** – This new section for Anti-Retaliation is recommended to demonstrate the Board's commitment to ethical and lawful conduct while prohibiting retaliation.

**Section 14.1** - Clerical updates to follow current structure that now reads that any amendments to the Bylaws will be introduced at a regular meeting, and then adopted by resolution at a subsequent meeting by majority vote.

**MOTION:** To approve the proposed amendments to the Board Bylaws.

**Discussion:** Commissioner Leskinovitch requested more information about the anti-retaliation, or whistleblower policy. Discussion ensued.

**Motion carried unanimously.**

***Security, Privacy and Compliance Committee Update – Jennifer Burkhardt, General Counsel***

Nearly four years ago, per the Board's request, a compliance committee was formed following governance education from the Estes Park Institute to track internal controls that protect protected health care information. The committee now meets monthly, and reports quarterly to the board. This presentation includes a 2017 summary and 2018 plans as attached.

***Sequim Surgical Services – Eric Lewis, Chief Executive Officer***

As been noted in the Strategic Plan for many years, providing surgical and endoscopy services in Sequim has long been a goal. Since 1983 Sequim Same Day Surgery has operated in Sequim, and is now for sale. The owners would like to exit the business, and continue those services to Sequim patients. The fair market value is between \$380,000-420,000, OMC offered \$380,000 and the offer was accepted. The purchase agreement is being finalized, along with other details

including equipment, intangibles, and the eleven employees. This will be further discussed at the next Board Audit, Budget and Compliance Committee and the board meeting on December 20. This purchase would fulfill the strategic plan goal and continues services in Sequim.

Discussion ensued regarding needed purchases which will be few. New cleaning equipment was estimated at \$28,000 for endoscopy equipment. They have the same Olympus equipment that the hospital uses, and a brand new C-arm was just purchased. Continued pain management services is the primary goal. Long term goals would be to turn the space into a hospital based clinic after needed facility improvements

**Commissioner Position – Jim Leskinovitch, Board President**

Board President Leskinovitch read aloud the resignation letter from Commissioner Jim Cammack, serving District 3 in Position 1. Commissioner Leskinovitch thanked him for his 15 years of service to the community. A proposed timeline for the replacement process was discussed. A press release will announce the process for applicants to be interviewed and appointed to complete the term of this vacancy until the next general election. It was decided to allow applications until January 5, 2018, with interviews to be conducted on January 17, 2018.

**MOTION:** To accept Commissioner Jim Cammack’s resignation from the Board of Olympic Medical Center effective December 31, 2017, and to direct Administration to commence the process to appoint a replacement.  
**Motion carried unanimously.**

There being no further business the meeting was finally adjourned at 1:25 pm.

**APPROVED AND ADOPTED** this 29th day of December, 2017.


**ATTEST:**

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Secretary

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Commissioner

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Commissioner

  
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President

  
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