

Agenda

Estes Park Health Board of Directors' Regular Meeting by GoToWebinar

Monday, February 28, 2022

5:00 - 6:33 pm Board Meeting

Virtual Attendance via: <https://attendee.gotowebinar.com/register/4585717074618392592>

Regular Session		Mins.	Procedure	Presenter(s)
1	Call to Order and Welcome	1	Action	Dr David Batey
2	Approval of the Agenda	1	Action	Board
3	Appreciation of Dr John Meyer's Service as Chief of Staff	5	Action	Board and Others
4	Public Comments on Items Not on the Agenda	3	Information	Public
5	General Board Member Comments	3	Information	Board
6	Consent Agenda Items Acceptance:			
6.1	Board Minutes			
	6.1.1 EPH Board Regular Meeting Minutes January 31, 2021			
	6.1.2 EPH Executive Session Minutes January 27, 2022			
	6.1.3 EPH Executive Session Minutes February 3, 2022			
	6.1.4 EPH Executive Session Minutes February 10, 2022			
6.2	Other Approvals			
	6.2.1 Colorado Department of Regulatory Agencies Professional Review of Health Care Providers Annual Report	2	Action	Board
8	Presentations:			
8.1	Estes Park Health May 2022 Election Preparation Update	5	Discussion	Ms Sarah Shepherd
8.2	Estes Park Health Current Status, Covid-19 Updates, 2022 Tactical and Strategic Initiatives Updates and Forecast	15	Discussion	Mr Vern Carda
8.3	2021 Draft Year End fiscal review	10	Discussion	Mr Marc Armstrong
8.4	EPH Patient Experience Initiative	15	Discussion	Ms Pat Samples
8.5	Chief of Staff Strategic Update	15	Discussion	Dr Robyn Zehr
8.6	Chief Nursing Officer Strategic Update	15	Discussion	Ms Pat Samples
9	Executive Summary - Significant Items Not Otherwise Covered	1	Discussion	Senior Leadership Team
10	Medical Staff Credentialing Report - no credentialing February 2022	0		
11	Potential Agenda Items for March 28, 2022 Regular Board Meeting	1	Discussion	Board
12	Adjournment	1	Action	Board
Estimated Total Regular Session Mins.		93		

Next Regular EPH Board Meeting: Monday March 28, 2022 5:00 - 6:30 pm



ESTES PARK HEALTH

ESTES PARK HEALTH BOARD OF DIRECTORS' Regular Meeting Minutes – January 31, 2022

Board Members in Attendance

Dr. David Batey, Chair
Dr. Steve Alper, Finance Committee Chair
Ms. Diane Muno, Member at Large
Mr. William Pinkham, Member at Large
Ms. Sandy Bagley, Member at Large

Other Attendees

Mr. Vern Carda, CEO
Ms. Pat Samples, CNO
Mr. Gary Hall, CIO
Mr. Marc Armstrong, CFO
Ms. Shelli Lind, CHRO
Ms. Lesta Johnson
Mr. Adam Johnson
Ms. Kendra Simms
Dr. Robyn Zehr

Community Attendees (via webinar):

Wendy Rigby (via webinar)
Max Southinger (via webinar)

1. Call to Order

The board meeting was called to order at 5:03 PM by David Batey; there was a quorum present. Notice of the board meeting was posted in accordance with the Sunshine Law Regulation.

2. Approval of the Agenda

Diane Muno motioned to approve the agenda as submitted. Sandy Bagley seconded the motion, which carried unanimously.

3. Welcome New Chief Financial Officer Marcus Armstrong

Marc was introduced to the Board and public and was wished success.

4. Public Comments on Items Not on the Agenda

No comments.

5. **General Board Comments**

No comments.

6. **Consent Agenda Items Acceptance**

Diane Muno motioned to approve consent agenda items at listed. Bill Pinkham seconded the motion, which carried unanimously.

7. **Presentations**

7.1 **Estes Park Health May 2022 Election Preparation – Sarah Shepherd**

Discussed the startup activities to kick off the election and shared the number of self nomination forms requested and completed.

Important dates:

- 4:00 PM February 25th – Completed Self Nomination Form deadline.
- February 28th - Write-In Candidate Forms for those who miss the self-nomination form deadline.

7.2 **Estes Park Health Current Status, Covid 19 Updates, 2022 Tactical and Strategic Initiatives Updates – Vern Carda**

COVID-19 Updates

- Estes Park Health supports vaccinations, frequent handwashing, wearing masks, and maintaining appropriate social distancing. If you have an appointment at the hospital or clinic, please anticipate time in your schedule to accommodate a brief covid screening upon entrance to the hospital or clinic. Additionally, hospital and clinic visits will require patients to wear a mask during your appointment.
- EPH requires people to wear surgical grade quality masks upon entrance to the facility. This practice assists patients and staff with safety. Frequently, main entrance and emergency entrance screening personnel are greeted with resistance from customers challenging EPH's mask policy. On multiple occasions, EPH door screeners have had customers gesture a cough at them or simply walk away from the front door toward their specific appointment and then remove their mask. Expectations are that EPH's challenge in this area will continue to grow more as time passes. However, the effort to keep community and staff members safe will continue via enforcement of EPH's mask policy.
- EPH Covid Testing through January 24, 2022:
 - 1020 Total Tests
 - 323 Positive Results
 - 31.7% Positivity Rate Per the Sample Size
- Testing:
 - Call 970-586-2200 for testing or to speak with our COVID Triage Team during regular business hours. The results of a COVID-19 test are available within 24 hours.

If your test result is positive, an EPH provider will contact you and discuss the results of your test and provide further COVID-19 consultation.

- Vaccinations:
 - Call 970-586-2200 to receive instructions on obtaining a vaccination. Estes Park Health supports efforts to protect all community members from contracting COVID-19. Please schedule your vaccination if you have not already done so. EPH also has Pfizer vaccine available for pediatric population patients ages 5 - 17.

Updates

- Recruitment Updates:
 - EPH Hospitalist Update: The contract with RPG has been terminated effective December 24, 2021. EPH is now operating with a clinically integrated model of employed hospitalists that are committed to the community and service to patients in the Estes Park community. Succinctly stated, this model will produce better quality care, reduced expense, and improve revenue streams.
 - Podiatrist Recruitment Update: EPH has conducted on-site interviews and offered preferred candidate position. An employment agreement has been completed. The start date for podiatrist will be May 1, 2022 pending licensure, credentialing, etc.
 - Radiology Recruitment Update: The search is completed. The physician will be joining the EPH staff approximately April 1, 2022 pending licensure, credentialing, relocation, etc. More information and announcement of candidate will occur soon but no later than the month end March 2022. Additionally, EPH will focus some attention during the next two months on developing the relationship and securing call coverage needs with CIA. CIA has been EPHs partner in radiology providing x-ray, MRI, and other diagnostic imaging services, including outreach of radiologists (including the timeframe that Dr. Hanson served EPH).
 - Ophthalmology Recruitment Update: EPH has many committed patients in this specialty area and our desire is to fill this position as soon as possible to meet community needs. Collectively, our team has put significant effort into this search, but the effort has not produced the desired results yet. An employment contract has been extended to an ophthalmologist. I am anticipating a "yes or no" to the contract answer by the time this board meeting occurs. If candidate answers "no" then EPH will re-initiate the search for a replacement. The search will probably consume 6-8 months of time investment. Additionally, EPH will work to secure locum coverage for the gap in service between the retired Dr. Prochoda and whomever accepts the new position.
 - Podiatrist Recruitment Update: Search is completed. Physician will be joining the EPH staff approximately May 1, 2022 pending licensure, credentialing, finding a place to live, etc. More information and announcement of the candidate will occur soon but no later than the month end May 2022. The EPIC software built to support

the physician practice has started to occur. We anticipate this will be completed on time for physician arrival in May 2022.

- Staff Recruitment Update:
 - Physician Credentialing Specialist: EPH is working with Heartland Health Alliance to secure a contract to outsource physician credentialing needs. However, EPH will need to find personnel to support medical staff administrative support needs. So, the search is gearing up to find an administrative assistant vs. a physician credentialing specialist.

Operational/Tactical Updates

- Strategic Planning: Strategic plan review and planning session will be scheduled for the first quarter of 2022. The basic agenda will be to review the current plan and achievements, as well as predict the future and create plans to meet future needs of EPH. A plan will be created by March 31, 2022. Key thoughts or items regarding this process/schedule include:
 - Process driven planning yields outcomes.
 - This will be the second iteration using this plan for EPH. So, we are embedding a planning cycle into the organizational culture.
 - We have identified several changes to the internal process that will be incorporated into the second planning cycle. The changes will improve this process and represent continuous quality improvement.
 - This process represents the concept of a "living plan" which allows for external environmental scans to help create and direct desired change within the current plan from year to year.
- 7.3 EPH 2021 Quality Program Review & 2022 Quality Vision – Pat Samples & Kendra Simms
As a reaction to DNV's two NC-1s, a new and more immersive quality structure has been implemented into EPH. This structure allows reporting to better be heard up and down the chain of command and further reinforces a culture of reporting, accountability, and continuous improvement. The future goals of the structure were discussed at length.
- 7.4 Cybersecurity Briefing – Gary Hall
Discussed the 24/7/365 risks of cybersecurity, the common tactics used, and the preventive and reactive responses EPH uses to combat these attacks.
- 7.5 Chief Operating Officer Updates – Gary Hall
Summary and overview of action items and goals going forward into 2022. These include:
- New MRI machine approved
 - Aspen Hall on-call housing opening by Q2 2022
 - Building-out laboratory staff
 - Recruiting more Environmental Services Staff
 - Helping with credentialing

8. Executive Summary – Significant Items Not Otherwise Covered

No comments.

9. Medical Staff Credentialing Report

Steve Alpers recommended the approval of the Medical Staff Credentialing Report. Bill Pinkham seconded the motion which was carried unanimously.

10. Potential Agenda Items for February 28, 2022 Regular Board Meeting

No comments.

11. Adjournment

David Batey motioned to adjourn the meeting at 6:15 PM. Bill Pinkham seconded the motion, which carried unanimously.

David M. Batey, Chair
Estes Park Health Board of Directors

Agenda
Estes Park Health Board of Directors' Executive Session - By TEAMS and In-Person
27-Jan-2022
5:24 p.m.-6:30 p.m.
Estes Park Health, 555 Prospect Avenue, Estes Park CO 80517

Regular Session		Mins.	Procedure	Presenter(s)
1	Call to Order/Welcome (5:35 pm)	1	Action	Dr David Batey
2	Approval of the Agenda (Motion Diane M. 2nd Steve A.)	1	Action	Board
3	Public Comments on Items Not on the Agenda	1	Information	Public
4	General Board Member Comments on Items Not on the Agenda	1	Information	Board
5	Entertain a motion to enter Executive Session Pursuant to Section 24-6-402(4)(e) C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f) C.R.S for the purpose of discussing personnel matters (Motion Steve A. 2nd Diane M.)	100	Action	Dr David Batey
6	Adjournment (Motion Sandy B. 2nd Steve A. Time 6:31 pm)	1	Action	Dr David Batey
<i>Total Regular Session Mins.</i>		105		

Agenda
Estes Park Health Board of Directors' Executive Session - By TEAMS and In-Person
3-Feb-2022
5:30 p.m.-6:30 p.m.
Estes Park Health, 555 Prospect Avenue, Estes Park CO 80517

Regular Session		Mins.	Procedure	Presenter(s)
1	Call to Order/Welcome (5:45 pm)	1	Action	Dr David Batey
2	Approval of the Agenda (Motion Bill P. 2nd Steve A.)	1	Action	Board
3	Public Comments on Items Not on the Agenda	1	Information	Public
4	General Board Member Comments on Items Not on the Agenda	1	Information	Board
5	Entertain a motion to enter Executive Session Pursuant to Section 24-6-402(4)(e) C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f) C.R.S for the purpose of discussing personnel matters (Motion Steve A. 2nd Bill P.)	100	Action	Dr David Batey
6	Adjournment (Motion Sandy B. 2nd Steve A. Time 7:05 pm)	1	Action	Dr David Batey
<i>Total Regular Session Mins.</i>		105		

Agenda
Estes Park Health Board of Directors' Executive Session - By TEAMS and In-Person
10-Feb-2022
5:30-6:30 p.m.
Estes Park Health, 555 Prospect Avenue, Estes Park CO 80517

Regular Session		Mins.	Procedure	Presenter(s)
1	Call to Order/Welcome (5:35 pm)	1	Action	Dr David Batey
2	Approval of the Agenda (Motion Steve A. 2nd Bill P.)	1	Action	Board
3	Public Comments on Items Not on the Agenda	1	Information	Public
4	General Board Member Comments on Items Not on the Agenda	1	Information	Board
5	Entertain a motion to enter Executive Session Pursuant to Section 24-6-402(4)(e) C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f) C.R.S for the purpose of discussing personnel matters (Motion Steve A. 2nd Diane M.)	100	Action	Dr David Batey
6	Adjournment (Motion Bill P. 2nd Steve A. Time 6:34 pm)	1	Action	Dr David Batey
<i>Total Regular Session Mins.</i>		105		



ESTES PARK HEALTH

CEO Report February 28, 2022

Covid -19 Update.

Estes Park Health supports vaccinations, frequent handwashing, wearing masks and maintaining appropriate social distancing. If you have an appointment at the hospital or clinic, please anticipate some time in your schedule to accommodate a brief covid screening upon entrance to the hospital or clinic. Additionally, hospital and clinic visits will require patients to always wear a mask during your appointment.

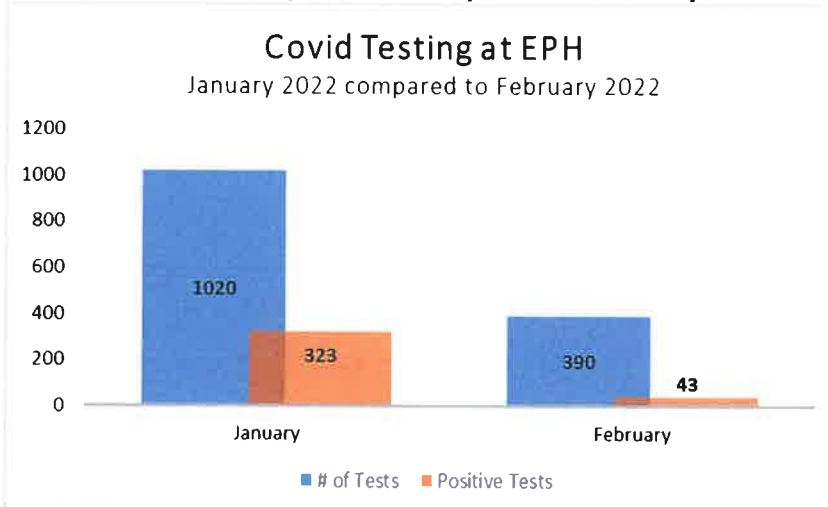
Testing. Call 970-586-2200 for testing or to speak with our Covid Triage Team during regular business hours. The results of a Covid-19 test are available within 24 hours. If your test result is positive, an EPH provider will contact you and discuss the results of your test and provide further Covid – 19 consultations.

Vaccinations. Call 970-586-2200 to receive instructions on obtaining a vaccination. Estes Park Health supports efforts to protect all community members from contracting COVID-19. Please schedule your vaccination if you have not already done so. EPH also has Pfizer vaccine available for pediatric population patients ages 5 - 17.

EPH Covid Testing through February 23, 2022:

- 390 Total Tests
- 43 Positive Results
- 11% Positivity Rate

EPH Covid Testing Comparison January 2022 vs. February 2022:



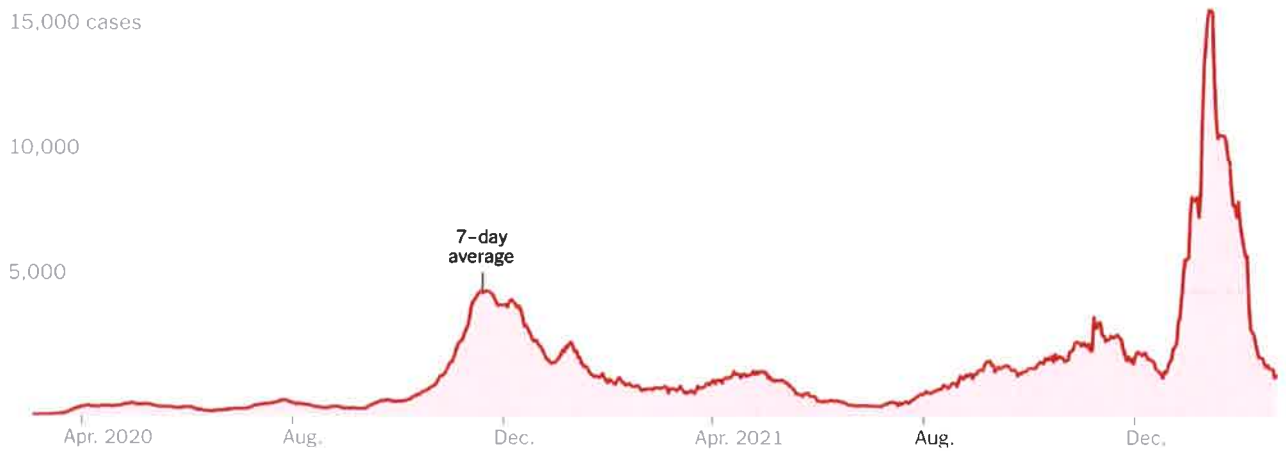
The total number of tests between January 2022 and February 2022 decreased by approximately 62% to 390 total tests conducted in February of 2022. Additionally, the positivity rate decreased from 31.7% in January of 2022 to 11% in February of 2022.

The Estes Park Health Covid governing team meets frequently and monitors the external environment, information from the Centers for Disease Control and multiple other sources. The main purpose of the governing team is to guide and adjust EPH policy and procedure to provide for patient, staff, and

community safety. Therefore, as Covid mutates and changes the EPH governing team designs and implements new practices to guide the organization.

Tracking Coronavirus in Colorado: Latest Map and Case Count

Updated Feb. 23, 2022



	DAILY AVG. ON FEB. 22	14-DAY CHANGE	TOTAL REPORTED
Cases	1,621	-52%	1,312,380
Tests	20,255	-29%	—
Hospitalized	691	-45%	—
In I.C.U.s	160	-44%	—
Deaths	9	-77%	11,939

Source: New York Times

Updates:

Dr. Amanda Luchsinger announced her intention to retire in 2022. Dr. Luchsinger has been a true servant to her patients. It will be very difficult to find a replacement that cares as much about her patients as she does! Estes Park Health owes Dr. Luchsinger a debt of gratitude for her years of service and wishes her well in her retirement!

Ophthalmology Recruitment Update. EPH has many committed patients in this specialty area and our desire is to fill this position as soon as possible to meet community needs. Currently, EPH is in process of interviewing an ophthalmologist. This candidate will be extended an onsite interview. The timeframe for the site visit and interview is mid to late March. Additionally, EPH is working to secure locum coverage for this community valued service.

Radiology Recruitment Update. This search has been completed. Dr. John Kundtson will serve the Estes Park community and will commence employment in late March. Additionally, EPH has focused some attention on securing call coverage needs with Colorado Imaging Associates (CIA). More information regarding Dr. Knudtson will be provided as Knudtson's employment start date approaches.

Podiatrist Recruitment Update. This search has been completed. Dr. Paxton Riding will serve the Estes Valley commencing May 2, 2022. More information regarding Dr. Riding will be provided as his employment date approaches.

Operational/Tactical Updates

1 Call. 1 Call is on track for "go live" in March 2022. EPH expects this endeavor to streamline patient access to EPH. 1 Call will facilitate a better patient experience. More detail will be provided at the March board meeting.

Aspen Hall – On Call Rooms. This on-call sleeping room project had been delayed due to supply chain issues. However, the 14 sleeping rooms will be available for use prior to March 31st. Additionally, EPH will be exiting its "Kingstone" lease on March 31, 2022.

KRONOS update. EPH has completed its move from manual time entry back to the Kronos system.

2022 Challenges. While the pandemic has remained the top story in healthcare over the past year, a few noteworthy trends are important to monitor, understand and plan for:

1. **EPH is anticipating continued salary escalation.** Health care workers of all types including RNs, food service workers, environmental service workers and others are difficult to find and employ at the present time thus driving wages upward. According to a Wall Street Journal article, "the healthcare industry has the second highest percentage of organizations that provided increased wages to recruit and retain workforce."
2. **The cost of contract or temporary labor has doubled recently.** To find qualified workers like RNs to fill vacant shifts is becoming a very expensive proposition.
3. **Supply chain interruptions and supply costs will provide challenges.** Getting needed items to EPH, as well as the cost of goods will continue to challenge the organization during 2022.



555 Prospect Ave.
Estes Park, CO 80517
p: 970-586-2317
eph.org

PARK HOSPITAL DISTRICT

BOARD FINANCE EXECUTIVE SUMMARY

December 2021

BOARD FINANCE EXECUTIVE SUMMARY

December 2021

Row 15—Total charges were over budget in December by \$202,690 or 3.1%. YTD charges were over budget by \$2,791,922 or 3.2%, driven by favorable Outpatient volumes, as follows:

ER visits	10%
Urgent Care visits	35%
O/P Diagnostic imaging	39%
O/P Lab	24%
O/P Rehab	10%

Row 18—Deductions from Revenue were over budget proportionate to the favorable charge variance.

Rows 27 and 40---Total Operating Revenue was over budget by 2.4% in December and under the YTD budget by .4%. Total Operating Expenses were over the December budget by 41.1%, due primarily to Professional Fees, Purchased Services and Repairs and Maintenance. Operating Expenses for the year were 5.4% over in these same expense categories.

Row 32—Professional Fees and Purchased Services were over budget by \$2,152,359 or 180% in December, but this is due to vacancy in Staff Accountant position in the Finance department and the associated catch up for underreported amounts in September through November and year-end accruals. The average monthly expense over these four months was about \$1.3M, which is reasonable compared to the rest of the year. The YTD expense is 42% above budget.

Row 31---The December and YTD Employee Benefit totals were under budget since we have fewer than budgeted employees.

Row 51—Other Nonoperating Revenues are favorable due to the recognition of unbudgeted Provider Relief Fund revenues.

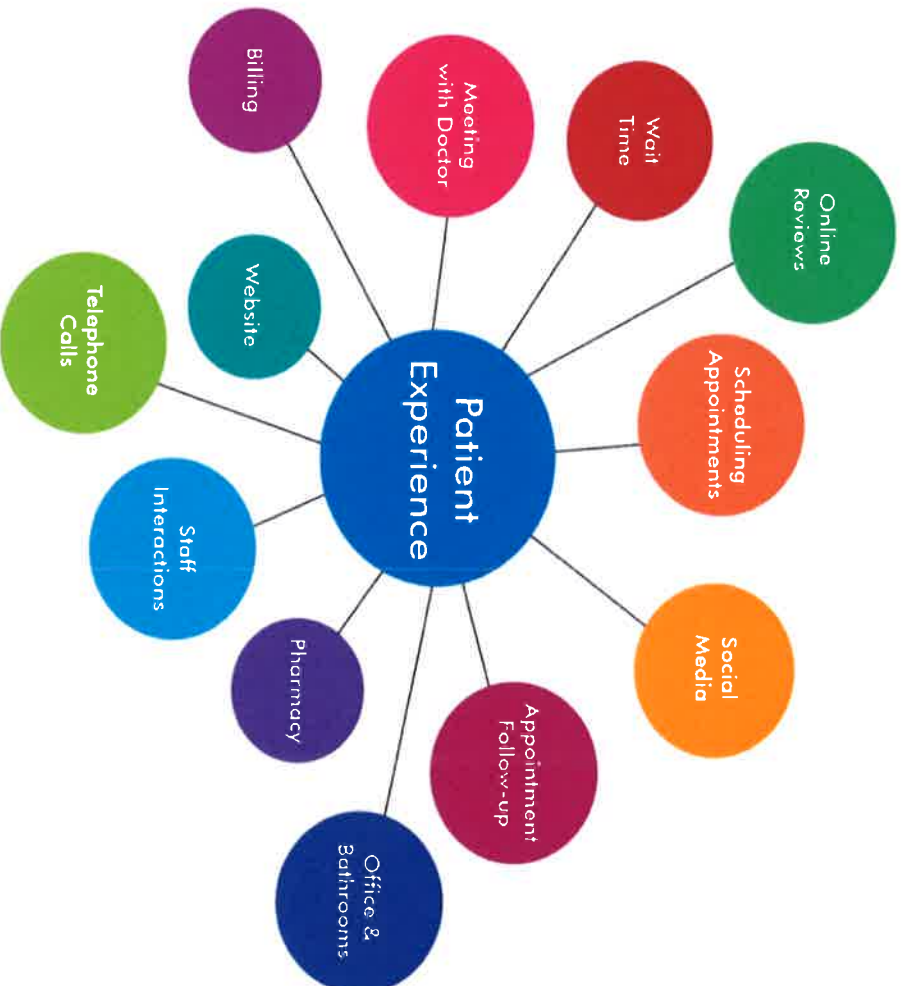
ESTES PARK HEALTH
Draft Statement of Revenues, Expenses, and Changes in Net Position (Unaudited)
Month Ending December 31, 2021

Row	MONTH Dec 2021			2021 YEAR TO DATE Jan through Dec			2020 YEAR TO DATE Jan through Dec			2019 YEAR TO DATE Jan through Dec				
	Actual (A)	Budget (B)	Percent (A-B)/ABS(B)	Actual - Budget	Budget (B)	Percent (A-B)/ABS(B)	2021 Actual - 2020 Actual	Percent (21-20)/ABS(20)	2019 Actual - 2020 Actual	Percent (19-20)/ABS(20)				
8	OPERATING INCOME													
9	OPERATING REVENUES													
10	Charges for Patient Services													
11	543,923	(1,005,217)	(461,294)	-45.9%	9,991,032	(14,442,457)	(4,451,425)	-30.8%	13,987,284	(3,906,252)	-28.0%	17,041,486	(7,030,454)	-41.4%
12	6,280,376	(5,616,392)	663,984	11.8%	79,786,577	(72,543,230)	7,243,347	10.0%	70,302,512	9,484,065	13.5%	74,154,052	5,632,525	7.6%
13	6,824,299	6,621,609	202,690	3.1%	89,777,609	(86,985,687)	2,791,922	3.2%	84,289,796	5,487,813	6.5%	91,195,538	(1,417,723)	-1.6%
14	Deductions from Charges for Patient Services													
15	(2,845,951)	(2,786,768)	(59,183)	-2.1%	(38,988,763)	(36,533,988)	(2,454,775)	-6.7%	(34,029,453)	(4,359,310)	-12.6%	(40,704,272)	1,715,509	4.2%
16	(131,305)	(98,969)	(32,336)	-32.7%	(2,054,659)	(1,304,786)	(749,873)	-57.5%	(1,918,097)	(136,562)	-7.1%	(2,154,195)	99,536	4.6%
17	(2,977,256)	(2,885,737)	(91,519)	-3.2%	(41,043,422)	(37,838,774)	(3,204,648)	-8.5%	(36,547,550)	(4,495,872)	-12.3%	(42,858,467)	1,815,045	4.2%
18	3,847,043	3,735,872	111,171	3.0%	48,734,187	49,146,913	(412,726)	-0.8%	47,742,246	991,941	2.1%	48,337,071	397,116	0.8%
19	Net Patient and Resident Service Revenues, Net of Provision for Bad Debts of Approximately \$650,000 in 2020 and \$1,130,000 in 2019													
20	34,150	55,045	(20,895)	-38.0%	662,750	469,650	193,100	41.1%	466,401	196,349	42.1%	728,242	(65,492)	-9.0%
21	3,881,193	3,790,917	90,276	2.4%	49,396,937	49,616,563	(219,626)	-0.4%	48,208,647	1,188,290	2.5%	49,065,313	331,624	0.7%
22	Other Operating Revenues (Row 22 + Row 25)													
23	2,069,573	1,997,658	71,915	3.6%	23,638,497	24,060,549	(422,052)	-1.8%	23,495,822	142,675	0.6%	22,868,643	769,854	3.4%
24	317,558	411,246	(93,688)	-22.8%	5,624,828	6,878,585	(1,253,757)	-18.2%	5,986,674	(361,846)	-6.0%	5,656,277	(31,449)	-0.6%
25	2,152,589	768,203	1,384,386	180.2%	13,428,646	9,465,295	3,963,351	41.9%	11,944,385	1,484,261	12.4%	11,797,925	1,620,721	13.8%
26	538,295	462,882	75,413	16.3%	5,481,086	5,678,297	(197,211)	-3.5%	6,088,155	(577,069)	-9.5%	5,891,817	(410,731)	-7.0%
27	58,371	49,425	8,946	18.1%	667,295	591,530	75,765	12.8%	589,117	78,178	13.3%	583,846	83,449	14.3%
28	51,834	92,583	(40,749)	-44.0%	1,106,350	1,125,968	(19,618)	-1.7%	797,501	308,849	38.7%	401,422	704,928	175.6%
29	30,760	26,016	4,744	18.2%	368,994	311,442	57,552	18.5%	360,973	8,021	2.2%	305,411	63,583	20.8%
30	317,985	13,380	304,605	2275.8%	417,903	174,257	243,646	139.8%	150,261	267,642	178.1%	150,312	267,591	178.0%
31	288,900	262,330	26,570	2.5%	3,231,691	3,147,937	83,754	2.7%	3,150,453	81,238	2.6%	2,081,217	1,150,474	55.3%
32	213,241	181,925	31,316	17.2%	2,747,146	2,355,344	391,802	16.6%	2,761,124	(13,978)	-0.5%	2,557,438	189,708	7.4%
33	6,018,576	4,265,648	1,752,928	41.1%	56,712,436	53,789,224	2,923,212	5.4%	55,294,465	1,417,971	2.6%	52,294,308	4,418,128	8.4%
34	TOTAL OPERATING INCOME (LOSS) (Row 27 minus Row 40)													
35	(2,137,383)	(474,731)	(1,662,652)	-350.2%	(7,315,499)	(4,172,661)	(3,142,838)	-75.3%	(7,085,818)	(229,681)	-3.2%	(3,228,995)	(4,086,504)	-126.6%
36	Operating Margin Total Operating Income (Loss) + Total Operating Revenue													
37	310,694	261,468	49,226	18.8%	3,284,513	3,137,600	146,913	4.7%	3,254,487	30,026	0.9%	2,896,027	388,486	13.4%
38	(36,857)	(33,000)	(3,857)	-11.7%	(416,164)	(396,000)	(20,164)	-5.1%	(417,841)	1,677	0.4%	(395,453)	(20,711)	-5.2%
39	(100,988)	19,865	(120,853)	-608.4%	(93,818)	88,500	(182,318)	-206.0%	117,437	(211,255)	-179.9%	334,928	(428,746)	-128.0%
40	1,485	25,000	(23,515)	-94.1%	10,000	(10,000)	(9,750)	-397.5%	26,206	14	0.1%	8,500	(58,250)	-685.3%
41	850,000	(2,100)	852,100	40576.2%	11,466,054	2,500	11,463,554	458942.2%	93,181	11,372,873	12205.1%	23,021	11,454,216	96758.0%
42	1,024,134	261,233	762,901	297.0%	14,217,055	2,922,600	11,294,455	386.5%	3,073,470	11,145,583	362.6%	2,878,861	11,338,194	393.8%
43	TOTAL NONOPERATING REVENUES, NET (Sum of Rows 46 to 51)													
44	(1,113,249)	(213,498)	(899,751)	-21.4%	6,901,556	(1,250,061)	8,151,617	652.1%	(4,012,348)	10,913,904	272.0%	(350,134)	7,251,690	2071.1%
45	DEFICIT OF REVENUES OVER EXPENSES BEFORE CAPITAL CONTRIBUTIONS													
46	100,000	(100,000)	(100,000)	-100.0%	55,888	300,000	(244,112)	-81.4%	523,769	467,881	-89.3%	102,095	(46,207)	-45.3%
47	(1,113,249)	(113,498)	(999,751)	-880.9%	6,957,444	(950,061)	7,907,505	832.3%	(3,488,579)	10,446,023	299.4%	(248,039)	7,205,483	2905.0%
48	NET POSITION INCREASE (DECREASE) (Row 54 + Row 50)													
49	-28.7%	3.0%	14.1%	49.1%	38,886,052	38,886,052	45,843,496	118.1%	42,374,631	42,374,631	100.0%	42,672,669	42,672,669	100.0%
50	Total Margin Net Position + Total Operating Revenues													
51	38,886,052	38,886,052	38,886,052	100.0%	38,886,052	38,886,052	42,374,631	109.0%	42,374,631	42,374,631	100.0%	42,672,669	42,672,669	100.0%
52	Net Position - Beginning of Year													
53	37,772,603	37,772,603	37,772,603	100.0%	45,843,496	45,843,496	42,374,631	92.4%	38,886,052	38,886,052	100.0%	42,374,631	42,374,631	100.0%
54	NET POSITION - END OF YEAR													



EPH Patient Experience February 2022





Patient Experience

The sum of all *interactions*, shaped by an organization's *culture*, that influence patient *perceptions* across the *continuum of care*.

- Interactions-the orchestrated touch points of people, processes, policies, communications, actions and environment.
- Culture-the vision, values, people (at all levels in the organization) and community.
- Perceptions-what is recognized, understood and remembered by patients/families. Perceptions vary on individual experiences such as beliefs, values, cultural background, etc.
- Continuum of care-before, during and after the delivery of care.

The Beryl Institute



Patient Experience



The patient experience **represents a critical component of your ability to attract and retain patients**. When patients form positive relationships and begin to trust your providers, they become more engaged in their own care, and develop a stronger sense of loyalty to your organization.

Patient experience is associated with a patient's perception of care, while **patient satisfaction is about the patient's expectations for care**.



Pursuit of Quality....Developing People Resources....Fiscal Health....Information Technology





Where are we at...

Inpatient Stoplight Report

Discharge Dates From Apr 1, 2021 to Mar 31, 2022

<https://caahlpstg1.rcogroup.com/npah/spd/default.aspx>

February 23, 2022



Overall	Benchmarks		Calendar Year	Estes Park Health IP Adult Overall				
	NRC 80th Percentile*	NRC 70th Percentile		Qtr 1 2022	Qtr 4 2021	Qtr 3 2021	Qtr 2 2021	
Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate the hospital during your stay?	73.0%	78.6%	100.0% PRE-100	100.0% PRE-100	45.5% PRE-100	85.7% PRE-100	76.9% PRE-100	

Key Drivers	NRC 80th Percentile*	NRC 70th Percentile	Current YTD	Qtr 1 2022				
				Qtr 1 2022	Qtr 4 2021	Qtr 3 2021	Qtr 2 2021	
Information and Education	69.8%	74.8%	83.0% PRE-100	86.9% PRE-100	48.5% PRE-100	78.6% PRE-100	66.7% PRE-100	
Information and Education	68.7%	73.6%	86.6% PRE-100	88.9% PRE-100	48.5% PRE-100	79.0% PRE-100	66.7% PRE-100	
Patient Safety	68.8%	73.5%	66.7% PRE-100	66.7% PRE-100	55.0% PRE-100	84.0% PRE-100	50.0% PRE-100	

Focus	NRC 80th Percentile*	NRC 70th Percentile	Current YTD	Qtr 1 2022				
				Qtr 1 2022	Qtr 4 2021	Qtr 3 2021	Qtr 2 2021	
World Recommended Hospital	73.3%	79.5%	100.0% PRE-100	100.0% PRE-100	45.5% PRE-100	82.7% PRE-100	87.1% PRE-100	
Information and Education	69.7%	73.6%	88.9% PRE-100	86.9% PRE-100	48.5% PRE-100	78.6% PRE-100	66.7% PRE-100	
Continuity and Transition	85.5%	89.1%	100.0% PRE-100	100.0% PRE-100	78.0% PRE-100	89.5% PRE-100	63.6% PRE-100	
Patient Safety	80.1%	76.4%	66.7% PRE-100	66.7% PRE-100	65.0% PRE-100	84.0% PRE-100	60.0% PRE-100	
Respect for Patient Preferences	81.0%	84.5%	100.0% PRE-100	100.0% PRE-100	70.0% PRE-100	69.3% PRE-100	80.4% PRE-100	
Physical Comfort	68.7%	72.5%	81.3% PRE-100	83.3% PRE-100	87.8% PRE-100	72.2% PRE-100	47.0% PRE-100	
Information and Education	69.8%	74.8%	86.6% PRE-100	86.9% PRE-100	48.5% PRE-100	75.0% PRE-100	66.7% PRE-100	
Continuity and Transition	87.1%	90.0%	100.0% PRE-100	100.0% PRE-100	78.0% PRE-100	88.5% PRE-100	63.6% PRE-100	
Physical Comfort	68.9%	72.7%	83.3% PRE-100	83.3% PRE-100	87.8% PRE-100	72.2% PRE-100	47.0% PRE-100	
Patient Safety	68.8%	73.5%	66.7% PRE-100	66.7% PRE-100	55.0% PRE-100	84.0% PRE-100	50.0% PRE-100	
Respect for Patient Preferences	81.5%	85.1%	100.0% PRE-100	100.0% PRE-100	70.0% PRE-100	69.3% PRE-100	80.4% PRE-100	





Department Summary

NET PROMOTER SCORE

72.8 n-size: 139



ALERT PERFORMANCE

OPEN ALERTS: 30
CLOSED ALERTS: 0

QUESTION SUMMARY

Question	YTD	Last 3 Months	Last Month	YTD n-size	Score	Search	Search
		Months	Month			Count	Days
Total providers w/ case	78.1	77.2	69.7	661	77.8	79.1	14
Family provider n visit	74.4	75.1	74.5	746	76.7	86.2	26.8
Care provider n visit	73.0	78.1	72.7	870	78.1	77.1	2.0
Internal Emergency Dept	77.0	78.2	74.2	850	75.4	60.7	18.3
Providers based diversion	74.1	72.8	77.7	820	74.3	61.2	11.8
Specialty group time with patient	72.8	78.4	68.2	874	73.8	68.8	14.8
Spent in family member	79.3	79.5	80.9	997	73.2	66.5	4.1
NHS Family would recommend	73.0	71.1	62.5	836	72.8	78.4	19.4
Care provider return of no	71.2	71.0	70.3	851	68.0	60.9	1.1

QUALITATIVE SUMMARY

- Promoter**
- General - Recognition
 - System/Organization - Visit Time
 - Provider - Recognition
 - General - Content/Subject
 - Care Value - Recognition
- Detractor**
- General - Info/Education
 - General - Professional Skill
 - System/Organization - Visit Time
 - Provider - Info/Education

Department Summary

NET PROMOTER SCORE

73.8 n-size: 863



ALERT PERFORMANCE

OPEN ALERTS: 36
CLOSED ALERTS: 3

QUESTION SUMMARY

Question	YTD	Last 3 Months	Last Month	YTD n-size	Score	Search	Search
		Months	Month			Count	Days
Care provider return	86.0	81.8	66.7	664	81.5	61.3	6.1
Family provider w/ case	83.8	80.3	87.3	888	86.5	79.1	4.4
Received from insurance	74.7	74.4	75.3	852	79.5	72.8	7.7
Care provider return	83.0	78.1	81.9	801	78.1	77.1	2.8
Provider return complete	74.0	74.6	79.8	821	78.6	61.2	11.4
Care provider return of no	74.4	75.6	75.4	876	74.3	60.9	12.4
NHS Family would recommend	80.7	71.8	74.8	843	73.8	78.4	11.0
Spent in family member	70.8	64.4	70.3	808	57.7	60.5	16.6

QUALITATIVE SUMMARY

- Promoter**
- General - Recognition
 - System/Organization - Visit Time
 - General - Professional Skill
 - Provider - Recognition
 - Provider - Info/Education
 - Admin/Check in
- Detractor**
- General - Professional Skill
 - System/Organization - Visit Time
 - General - Recognition
 - Provider - Info/Education
 - Provider - Professional Skill



Human understanding

Department Summary

NET PROMOTER SCORE

79.9 n-size: 4,037



ALERT PERFORMANCE

OPEN ALERTS CLOSED ALERTS

56 31

QUESTION SUMMARY

Question	YTD	Last 3 Months	Last Month	n-size	Score	Score last month	Delta
Facility was clean	90.5	90.2	90.5	4,108	89.8	79.9	18.9
Train staff members w/ care	88.6	89.3	90.0	4,126	87.6	80.0	7.6
Staff listened	87.6	88.4	88.3	4,140	86.7	77.9	8.8
Staff explained things	85.6	85.2	85.0	4,188	83.4	78.4	5.0
NPS: Facility would recommend	85.7	82.3	84.0	4,037	79.9	78.4	1.5
Test/procedure began on time	75.7	75.8	78.0	4,325	70.7	68.3	2.4
Told when to expect results	70.7	72.4	73.6	3,606	66.9	63.6	3.3

QUALITATIVE SUMMARY

- Promoter**
 - General - Recognition (4)
 - General - Professional Staff (4)
 - General - Patient/Visitor (4)
 - Care Team - Courtesy/respect (4)
- Passive**
 - General - Professional Staff (1)
- Detractor**
 - General - Recognition (1)
 - General - Patient/Visitor (1)
 - General - Infection/Control System/Organization - Wait Time (1)
 - Care Team - Recognition (1)



What is next...

- Have initiated a patient experience team, with front line staff on it.
- Begin with observation of employee behavior with patients/families and understanding the data.
- Review current data and identify one or two processes to improve by first of 2nd quarter.
 - Multidisciplinary
 - Across units
- In 6 months will add patients and families to our team.



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Patients' feedback provides valuable information about what **patients and service users think about the healthcare services offered**. Examining patients' feedback will give a direct insight into what is working well and what needs further improvement in the way care is delivered.

Questions?



**ESTES PARK
HEALTH**

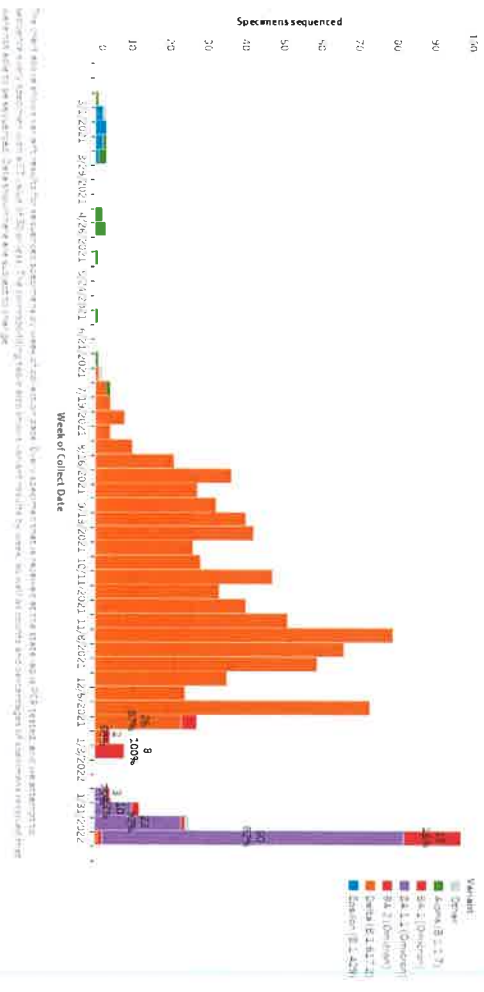
Chief of Staff Updates

Robyn Zehr DO



COVID/Viral illnesses

SARS-CoV-2 lineages identified in sentinel specimens submitted from Estes Park by collection week



- Variants
 - Alpha (3/2021-6/2021)
 - Delta (7/2021 - 12/2021)
 - Omicron (12/2021-current)- BA.1, BA.1.1, BA.2
- Positivity rates for EPH:
 - January 38%
 - February 11% (No major bump with change in mask mandate as of 2/24/22)
 - 7- day average for state of Colorado 4.71%
- Have been identified BA.2 samples in CO, but at this time not causing same spikes in cases
- Encourage vaccination and boosters for those eligible
 - Estes Park Community has lower than state average vaccination rates for peditrics age 5 and up
 - New consideration for 8-week interval between first and second dose in some people ages 12 years and older
 - Males ages 12-39 years
 - Pfizer has delayed approval for 6mo to 5-year vaccination, awaiting data on 3rd dose
- Have see other respiratory viral illnesses (RSV, Human metapneumovirus, Flu A)

Strategic Updates

- Recruitment
 - Radiologist- Dr. Knutson will be starting end of March
 - Podiatry- Paxton Riding will start in May
 - Still working on ophthalmology recruitment
 - Goal for 1-2 day a week coverage while waiting long term replacement
 - Dr. Amanda Luchsinger planned retirement May 2022
 - Plan for active recruitment
- Focus on Quality and Culture
- Goal to shift focus from COVID defense/management to new goals and development



Nursing Strategy Update

February 2022

“The trained nurse has become one of the great blessings of humanity, taking a place beside the physician and the priest.”

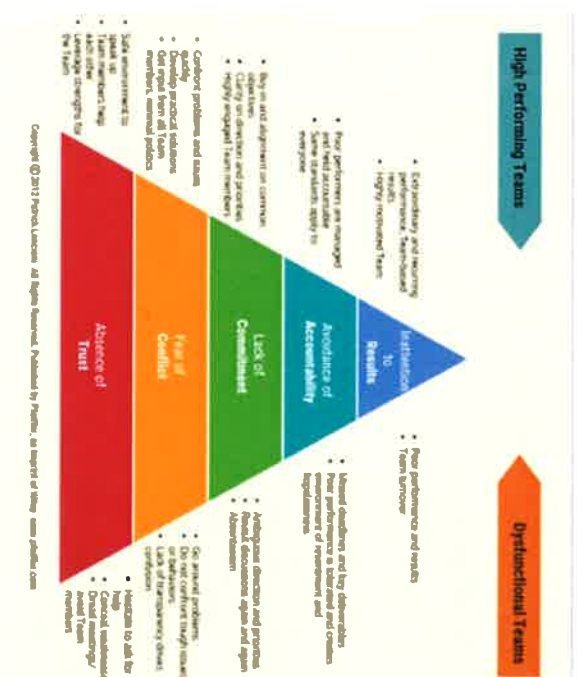
—Dr. William Osler, Canadian physician and founder of Johns Hopkins University

2022 EPH Nursing Strategy

Goal: To develop a high performing nursing leadership team that will lead EPH forward in meeting our mission: “We exist to make a positive difference in the health and well-being of all we serve.”

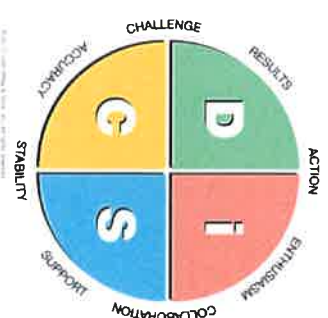
- Alignment with EPH strategic plan.
- Agile in decision making and execution of solutions/plans.
- Strong employee engagement.
- Quality outcomes achieved.
- High performing team members.
 - Effective communication, relationships built on trust, authenticity.
- High quality patient experience.
- A culture of ownership.

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Quarter 1 2022

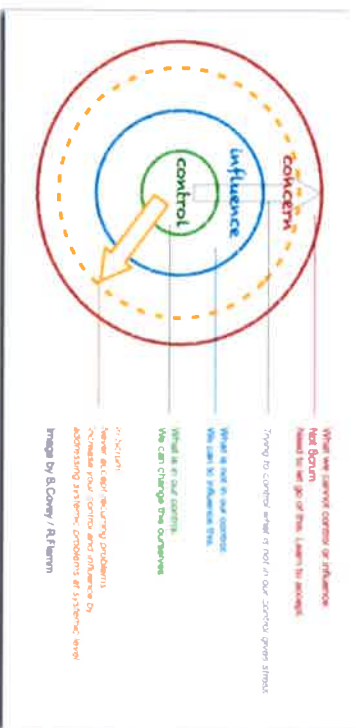
- Offsite all-day retreat with all nursing leadership supported by CHRO.
 - Personality assessment: DISC
 - Understanding different characteristics and behaviors of self and others.
 - Overall visual of our team; where are we strong and what perspective is missing?
 - How do we grow and develop as a nursing leadership team?
 - Strength based leadership assessment.
 - Who am I? Where do I lead from?
 - Team similarities?
 - Team strengths?
 - Team gaps?



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- SWOT analysis: (strengths, weaknesses, opportunities, threats)
- Identified areas of strength and how to leverage them as we move forward?
- Identified areas of opportunities for this team over the next year to 18 months?
- Identified real or anticipated threats.



Prioritized what was within our control and what was within our influence.



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Next steps: Recruitment and Retention

- Reviewed state and national data regarding the “Great Resignation” and the impact on nursing.
- Currently working on a survey for nurses and travelers to elicit data specific to Estes Park Health.
 - Compensation, benefits, continuing education, loan forgiveness, tuition reimbursement, development opportunities, etc.
 - Will do by March 18th and utilize that data to support the development our long-term and short-term retention plan.



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Next steps: Leadership Development

- Regular check ins of our strengths, how they are showing up and how can we support one another different or better.
- Continue to work on our knowledge of DISC, what it means to each of us and the team.
- Continue leadership development with nursing team and director team.



Pursuit of Quality.....Developing People Resources.....Fiscal Health





Questions?

“Nurses are a unique kind. They have this insatiable need to care for others, which is both their greatest strength and fatal flaw.”

—Jean Watson, American nurse theorist and nursing professor