



**CGH Board of Directors
Planning Committee
28 April 2022
Zoom**

Call to Order and Attendees

A meeting of the Planning Committee was called to order by Dr. Marcia Jones at 1800 on 28 April 2022. Present were Andy Moore, Bob Hewes, Dacia Dennis, Dana McCoy, DeAnne White, Don Stindt, Dr. Marcia Jones, Heather Sotelo, John Larson, John Van Osdol, Mary Ellen Wilkinson, Mary Jean Derreberry, Nancy Rasmussen and Roger Wait. Absent were Dacia Dennis, Dr. Jeff LeMay and Tim Zollinger. Five CGH staff members were present.

Approval of Previous Minutes

The minutes of the 18 November 2021 meeting were approved as written. **A MOTION WAS MADE BY ROGER WAIT AND SECONDED BY NANCY RASMUSSEN TO ACCEPT THE MINUTES AS WRITTEN.**

OLD BUSINESS

Physician Recruitment Update

Dr. Younes, ENT, started in March. He is doing a wonderful job of filling his schedule.

We have a new CRNA starting later this summer.

Since our last meeting, Jobelle Gamboa has started as a Nurse Practitioner in the Cardiology Department and Angie Tschosik-Johnson, NP, will be seeing patients in the Pulmonology Department.

We have hired Twinkle Singh, Interventional Cardiologist, and she will be joining us in mid-August.

Last week we signed Jennifer Birkey, an audiologist.

Dr. Cundiff, Ophthalmologist in Dixon, has given notification that he will be departing on August 21, 2022. He is originally from Wisconsin, and he has accepted a position near his family. We will be meeting soon to discuss how we will proceed with the recruitment for an ophthalmologist.

Facilities Update

We are in the process of building out the oncology/infusion center department on the third floor of the main clinic. Anticipated completion of the project is June.

We are developing plans for replacement of our equipment in both X-ray rooms in the hospital DID dept. We will be presenting those proposals for approval in June.

We will be starting the design process for the Lobby/Cafeteria remodel which has been budgeted in the FY 23 capital budget. This initial design will take the next couple months to determine an overall cost for the project.

The Locust/LeFevre road project has started and IDOT has accepted bids to perform the work. The process will take several months and impact our parking and access to the facility at various phases of the project. Required changes will be shared with our patients and staff as the occur.

We received approval of funds in April to update the flooring and waiting room seating at the main clinic first floor. This will part of a 3-year plan to include updating the second and third floor in subsequent years.

	<p>We have received approval for the project for replacement of air handler's 7 and 9 at the hospital. We have received public bids for the project and will be awarding the contract in the next couple weeks. This project will take us into 2023 to complete.</p> <p>We have also evaluated our off-site clinics for any updates that are needed. A provider is at the Prophetstown Clinic three days a week.</p> <p>We have not looked at the expansion of day care building at this point in time. We are evaluating all of our available space for current and future use for services.</p>
Marketing Update	<p>We had a total of 240,985 website visits from January 1, 2022 – April 28, 2022. The largest number of views was on the provider pages. Our Facebook Live Stats show 124,595 people were reached with a net following of 162 for Dr. Bird's Facebook Live program, which began on 3/21. We have now completed 103 episodes. For Instagram in the last 90 days, we have a total of 1,100 followers with men at 15% and woman at 85%. YOUTube had four hundred hours watched. The New HealthLines E-Newsletter was rolled out in January 2021. We currently send 13,581 emails monthly and this goes to patients, employees and providers as well. We have been using geo-fencing at the local colleges, hospitals, and other targeted areas for careers and recruitment. We have had 380 calls to HR just from our geo-fencing campaign. We have been pushing the "Calm" app to our employees.</p>
NEW BUSINESS	
Detox Program Update	<p>Kristie spoke about the Detox program. Provided background from the Whiteside County Community Health Assessment noting drug and alcohol induced deaths increased from previous assessments with 42.3% attributed to alcohol.</p> <p>CGH has a lot of support for this type of program. CGH participates in "Project Open" and receives support from Treatment Committee, which consists of Sinnissippi, Safe Passages, Voice of Recovery and KSB. We are currently working specifically on alcohol withdrawal at this time.</p> <p>Our Internal Team consists of Kristie Geil, Sarah Snow, Dr. Tran, Dr. Kavanaugh, Julie Morse, Sarah Alvarez-Brown, and Amy Myer (BHU).</p> <p>Safe Passages provides the post detox plan of care. This started March 28th and we have seen four patients so far. All four finished the program. Staff are continuing to smooth the process with Safe Passages and evaluate options for polysubstance patients. Three of the four had commercial insurance</p> <p>The medical floor is the primary location for this treatment. The majority of the admits are from the ED. Safe Passages screens all patients for appropriateness. We accept admissions Monday – Friday 8:00 a.m. – 5 p.m. and we will likely not have more than 2 patients at any given time. Bed availability and staffing are considered before acceptance. Safe Passages work with individuals during their stay. They are given individual activities such as</p>

	<p>journaling, and coloring to help them through the withdrawn process.</p> <p>Prior to this program, patients were referred out of the area and our community agencies would lose track of individuals to help them with sustained recovery. Providing local services allow for continuity of care including intensive outpatient services and post recovery housing.</p>
<p>Physician Televisit Program Update</p>	<p>We are rolling a new program out for the telehealth expansion for urgent care needs. This program will align with Ready Care. We are expecting to offer options to have telehealth visits and not have to go to Ready Care. We can then expand the hours for later in the evenings and longer on weekends. The hours would be from 7:00 a.m. to 8:00 pm – 7 days a week. Our patients are more familiar with Telehealth options so we would like to make this more accessible to out outpatients. Shane is working with the clinic operations team to get this process up and running by the 1st of June. This will be staffed by CGH providers this time.</p> <p>We recently signed a contract to provide teleneurology services at CGH which will supplement our neurologists. When Dr. Joseph is not available to be on call then we will have the teleneurologist fill in.</p> <p>On the clinic side we will start having our neurologist see patients five ½ days a week. This will be done when they have been credentialed. We also would like to have better access to our neurologist. In 6 months, we should be able to decompress Dr. Dela Cruz and Dr. Joseph.</p> <p>Can patient access Telehealth information? The answer is yes, they can but they will have to come to the clinic to make sure their med list is up-to-date, and someone will guide them through the process.</p> <p>A discussion was held on how to market this new process so our patients know that it is our physicians they will be seeing.</p>
<p>Financial Update</p>	<p>CGH is still digging its way out of the COVID impact. On an average we have lost \$1-3 million dollars per month. ER and Lab ancillary volumes are returning. With Primary care there are still barriers up with acute infections. We are trying to decrease our expenses. We have hired travelers to support our long-standing employees (1-5 healthcare workers have left the field). This is expensive. We expect 60% of the traveling nurses to go away by the end of May and be done by the end of summer. We need to grow the revenue side and encourage people to come back for medical care. We will not get any more relief funds.</p> <p>Our COVID numbers have declined dramatically. We have 1-3 COVID patients in the hospital. We have seven patients that have tested positive with the new variant and more patients are being admitted incidentally and seven tested positive (all new variant). More people are being admitted incidentally and not because of because of COVID. Tools to treat COVID helps to keep us on the downside of COVID. Learning to live with it at a low level. Masking in health facilities will be with us for a while.</p>

	DeAnne White shared that someone she knew was in BHU and they said the staff was exception, programming was great, and food was amazing.
Other	
Next Meeting Date	August 25 th next meeting at 6:00 pm
Adjournment	There being no further business, the meeting was adjourned at 1900.

Beth Lancaster
Recording Secretary

Marcia Jones
Chairman