



# AGENDA

## Board of Directors Meeting

5:30 PM - Wednesday, September 28, 2022

[Click link to join Zoom meeting](#)

Meeting ID: 878 0782 1015 Pwd: 931197

Phone Line: 669-900-9128 or 301-715-8592

Kelly Cooper, President		Keriann Baker		Aaron Weisser	
Melissa Jacobsen, Vice Pres.		M. Todd Boling, DO		Bernadette Wilson	
Julie Woodworth, Secretary		Matthew Hambrick		Beth Wythe	
Walter Partridge, Treasurer		Edson Knapp, MD		Ryan Smith, CEO	

Page

### 1. CALL TO ORDER

### 2. ROLL CALL

### 3. REFLECT ON LIVING OUR VALUES

### 4. WELCOME GUESTS & PUBLIC / INTRODUCTIONS / ANNOUNCEMENTS

#### 4.1. Rules for Participating in a Public Meeting

### 5. COMMENTS FROM THE AUDIENCE ON ITEMS OF ANY MATTER

### 6. APPROVAL OF THE AGENDA

### 7. APPROVAL OF THE CONSENT CALENDAR

4 - 9

#### 7.1. Consideration to Approve the South Peninsula Hospital (SPH) Board of Directors meeting minutes for August 24, 2022.

[Board of Directors - Aug 24 2022 - Minutes- DRAFT](#)

- 10 - 13      7.2.    Consideration to Approve August FY2023 Financials  
[Balance Sheet - August FY2023](#)  
[Income Statement - August FY2023](#)  
[Cash Flow Statement - August FY2023](#)
- 14            7.3.    Consideration to Approve SPH Resolution 2022-14, A Resolution of the South Peninsula Hospital Board of Directors Resolving to Provide the Resources Necessary to Achieve and Sustain a Level IV Trauma Hospital Designation.  
[SPH Resolution 2022-14](#)

## **8.        PRESENTATIONS**

## **9.        UNFINISHED BUSINESS**

## **10.       NEW BUSINESS**

- 15            10.1.   Consideration to Approve SPH Resolution 2022-15, A Resolution of the South Peninsula Board of Directors Approving An Inflation Retention Bonus.  
[SPH Resolution 2022-15](#)

## **11.       REPORTS**

- 16 - 19      11.1.   Chief Executive Officer  
[Balanced Scorecard 2Q 2022](#)
- 11.2.   BOD Committee: Finance
- 20 - 24      11.3.   BOD Committee: Governance  
[Board Self-Evaluation](#)  
[SM-08 Committee Responsibilities, revised](#)  
[SM-09 Board Terms and Officers, revised](#)
- 25 - 26      11.4.   BOD Committee: Education  
[Education Committee Report](#)  
[iPro Update](#)
- 11.5.   Service Area Board Representative

## **12.       DISCUSSION**

- 27            12.1.   Board Self Evaluation  
[Board Self-Evaluation](#)

**13. COMMENTS FROM THE AUDIENCE ON ITEMS OF ANY MATTER**

**14. COMMENTS FROM THE BOARD**

(Announcements/Congratulations)

14.1. Chief Executive Officer

14.2. Board Members

**15. INFORMATIONAL ITEMS**

**16. ADJOURN TO EXECUTIVE SESSION (IF NEEDED)**

**17. ANNOUNCEMENTS AS A RESULT OF EXECUTIVE SESSION**

17.1. Credentialing

**18. ADJOURNMENT**

# **MINUTES**

## **Board of Directors Meeting**

**5:30 PM - Wednesday, August 24, 2022**  
Virtual Meeting Only

The Board of Directors of the South Peninsula Hospital was called to order on Wednesday, August 24, 2022, at 5:30 PM, in Conference Rooms 1&2 and via Zoom meeting.

**1. CALL TO ORDER**

President Kelly Cooper called the regular meeting to order at 5:30 p.m.

**2. ROLL CALL**

**BOARD PRESENT:** President Kelly Cooper, Keriann Baker, Todd Boling, Matthew Hambrick, Vice President Melissa Jacobsen, Edson Knapp, Walter Partridge, Aaron Weisser, Bernadette Wilson, Julie Woodworth, Beth Wythe, and CEO Ryan Smith

**BOARD EXCUSED:**

**ALSO PRESENT:** Angela Hinnegan, COO; Anna Hermanson, CFO (int.); Maura Jones (Executive Assistant); Marilyn Shroyer, Steve Hughes  
*\*Due to the Zoom meeting format, only meeting participants who comment, give report or give presentations are noted in the minutes. Others may be present on the virtual meeting.*

**2.1. A quorum was present.**

**3. REFLECT ON LIVING OUR VALUES**

Mr. Smith thanked everyone involved in the South Peninsula Hospital Foundation's first fundraiser, which was a huge success.

**4. WELCOME GUESTS & PUBLIC / INTRODUCTIONS / ANNOUNCEMENTS**

**4.1. Rules for Participating in a Public Meeting**

**5. COMMENTS FROM THE AUDIENCE ON ITEMS OF ANY MATTER**

There were no comments from the audience.

**6. APPROVAL OF THE AGENDA**

*Secretary Julie Woodworth made a motion to approve the agenda. Keriann Baker seconded the motion. Motion Carried.*

**7. APPROVAL OF THE CONSENT CALENDAR**

Ms. Woodworth read the consent calendar into the record.

- 7.1. **Consideration to Approve the South Peninsula Hospital (SPH) Board of Directors meeting minutes for July 27, 2022.**
- 7.2. **Consideration to Approve July FY2023 Financials**
- 7.3. **Consideration to Approve updated Emergency Management documents, including South Peninsula Hospital Emergency Operations Plan, Emergency Management Program, Home Health Emergency Operations Plan, Long Term Care Emergency Operations Plan, South Peninsula Hospital Hazard Vulnerability Assessment (HVA), Long Term Care HVA, Home Health HVA and Closed Pod Annex.**
- 7.4. **Consideration to Approve a Proclamation in Honor of Marilyn Shroyer's Retirement with 43 Years of Service to South Peninsula Hospital**
- 7.5. **Consideration to Approve a Proclamation in Honor of Stephen Hughes' Retirement with 31 Years of Service to South Peninsula Hospital**
- 7.6. **Consideration to Accept the South Peninsula Hospital Employees' Pension Plan and Trust Audit**

*Secretary Julie Woodworth made a motion to approve the consent calendar as read. Beth Wythe seconded the motion. Motion Carried.*

## **8. PRESENTATIONS**

### **8.1. Presentation of Proclamations to Marilyn Shroyer and Steve Hughes**

Marilyn Shroyer was present and Steve Hughes was virtually present. Ms. Cooper read each proclamation. Marilyn Shroyer was honored for retiring after 42 years of service to South Peninsula Hospital, and Steve Hughes was honored for retiring with over 30 years of service.

## **9. UNFINISHED BUSINESS**

## **10. NEW BUSINESS**

### **10.1. Consideration to Approve SPH Resolution 2022-12, A Resolution of the South Peninsula Hospital Board of Directors Approving a Plan Amendment for the Non-Union 403(b) Plan to Adjust the Annual Employer Match and Cap Requirements**

Staff Report: Angela Hinnegan, COO. The resolution changes the pension plan language to correctly reflect the intent of the change that was instituted in 2020. Newport has informed us that the language we used does not match the intent of the change and current practice, so we are updating to the recommended language.

Mr. Partridge reported this resolution went through Pension and Finance Committee and was approved at both.

*Secretary Julie Woodworth made a motion to approve SPH Resolution 2022-12, A Resolution of the South Peninsula Hospital Board of Directors Approving a Plan Amendment for the Non-Union 403(b) Plan to Adjust the Annual Employer Match and Cap Requirements. Beth Wythe seconded the motion. Motion Carried.*

**10.2. Consideration to Approve SPH Resolution 2022-13, A Resolution Approving the Transfer of Cash in Excess of 90 Days Cash on Hand to the Plant/Equipment Replacement and Expansion Fund for the Period Ending June 30, 2022**

Staff Report: Anna Hermanson, CFO. This resolution allows hospital administration to transfer cash over 90 days to the PREF fund at the borough, as is required per the Operating Agreement with the Kenai Peninsula Borough. We will be transferring 4.7 days of cash.

Mr. Partridge added that this was reviewed in Finance Committee and approved. The committee discussed that we are now only at 88 days, however we've already committed to the transfer of this amount with the borough, so the committee recommends meeting that commitment.

*Secretary Julie Woodworth made a motion to approve SPH Resolution 2022-13, A Resolution Approving the Transfer of Cash in Excess of 90 Days Cash on Hand to the Plant/Equipment Replacement and Expansion Fund for the Period Ending June 30, 2022. Beth Wythe seconded the motion. Motion Carried.*

**10.3. Consideration to Approve SPH Resolution 2022-11, A Resolution of the South Peninsula Hospital Board of Directors Authorizing Bank Account Signers**

Staff Report: Anna Hermanson, CFO. This resolution proposed to update the signers on the bank accounts to reflect current leadership of the hospital and changes in the organizational chart.

Mr. Partridge added this was reviewed and approved in Finance Committee.

*Secretary Julie Woodworth made a motion SPH Resolution 2022-11, A Resolution of the South Peninsula Hospital Board of Directors Authorizing Bank Account Signers Beth Wythe seconded the motion. Motion Carried.*

**11. REPORTS**

**11.1. Chief Executive Officer**

Ryan Smith, CEO, reported. He welcomed Craig Caldwell as the new Emergency Department Director. The new Hospitalist program goes into effect on October 1st. Thank you to Dr. Christy Martinez, Dr. Sarah Roberts, and to Dr. Tuomi and Dr. Landess and all those involved for making this as seamless a transition as possible. Dr. Joe Llenos, new outpatient family medicine

physician started in at Homer Medical Center last week. Dr. Emma Mayfield has verbally accepted a position as well.

**11.2. BOD Committee: Pension**

Walter Partridge, Pension Committee Chair, reported. The committee met last week. We reviewed the report from our actuarial valuation and we're doing well. We are fully funded more than is required. We also got the result of the plans for the last quarter and we did lose more. The defined benefit plan is down 2% less than the others, because we made changes towards derisking. The committee also reviewed the resolution discussed earlier.

**11.3. BOD Committee: Finance**

Walter Partridge, Finance Committee Chair, reported. The committee met and reviewed the two resolutions approved earlier in the meeting. This month was right on budget. Total margin was above about 5% due to tax revenues.

**11.4. BOD Committee: Governance**

Aaron Weissner, Governance Chair, reported. The committee met and looked at revising the application for existing board members. The ad for board candidates is going into the paper shortly. We are revising policy to reflect the reality that the Governance is the membership committee, as well as looking to schedule regular policy and bylaw review. We are also looking at the board self evaluation process. By next meeting we should be able to pilot this new process. Please fill out your committee/leadership interest form for 2023 and return to Maura.

**11.5. BOD Committee: Education**

Melissa Jacobsen, Education Chair, reported. She apologized for missing her committee meeting when she left her phone at home. The meeting will be rescheduled. iProtean did agree to honor the original proposal for board education software, so we've scheduled a kickoff call and are moving forward.

**11.6. Service Area Board Representative**

Kathryn Ault reported on behalf of the Service Area Board (SAB). The SAB met in August and heard and approved the resolution about purchasing the properties for SPH staff housing. We also heard a brief summary from Willy about the Opioid settlement funds. The borough did not hear the SAB resolution due to some administrative communication breakdown, which was disappointing. The funds will be split up five ways, which will make it a very small amount of money. We also heard an update from Claudia Haines at Kachemak Bay Family Planning Clinic.

**12. DISCUSSION**

**13. COMMENTS FROM THE AUDIENCE ON ITEMS OF ANY MATTER**

There were no comments from the audience.

**14. COMMENTS FROM THE BOARD**

(Announcements/Congratulations)

**14.1. Chief Executive Officer**

Mr. Smith congratulated Ms. Shroyer and Mr. Hughes on their retirements, and noted there are a number of retirement recognitions coming at the end of the year. He congratulated Ms. Hinnegan for successfully completing her masters degree at Wake Forest University. He thanked Jeffrey Eide and Angie Newby and everyone with the Foundation for the excellent fundraiser.

**14.2. Board Members**

Melissa Jacobsen: Congratulations to Ms. Hinnegan, it was nice to hear good things about South Peninsula Hospital from long term employees. Apologies again to the Education Committee for the missed meeting.

Bernadette Wilson: Congratulations to Ms. Shroyer and Mr. Hughes, as well as Ms. Hinnegan.

Julie Woodworth: Congrats to Marilyn, Steve and Angela. Thanks to Anna/Angela for the seamless transition. Pretty impressive that we made a lot of changes with service provider and transferring and audit was perfect. Great fundraiser for the foundation.

Matt Hambrick: Congratulations to everyone involved in the successful Foundation fundraiser,

Walter Partridge: Congratulations to Ms. Shroyer and Mr. Hughes, as well as Ms. Hinnegan. The Foundation fundraiser was excellent.

Beth Wythe: Congratulations to Ms. Shroyer and Mr. Hughes, as well as Ms. Hinnegan.

Edson Knapp: Congratulations to Ms. Shroyer and Mr. Hughes, as well as Ms. Hinnegan. I worked with Steve quite a bit and enjoyed working with him. SPH's leadership feels right, stable and poised for growth and that is exciting.

Aaron Weisser: Thanks to Beth and Kelly for the mentorship with Governance. First full circle experience with a referral to Lucy Fisher, MD and it was excellent and am super thankful to have her in the community. The board dinners in the cafeteria before the meetings have been excellent - thanks to the kitchen.

Todd Boling: SPH has a good reputation in the recruiting/traveler world, and that has not always been the case.

Kelly Cooper: Thanks for the foundation work. Jeffrey is a force to be reckoned with. MAPP's work also helps him. Really nice to see the whole community come together in support of the Foundation. Congratulations to Ms. Shroyer and Mr. Hughes, as well as Ms. Hinnegan.

**15. INFORMATIONAL ITEMS**

There were none.

**16. ADJOURN TO EXECUTIVE SESSION (IF NEEDED)**

The board adjourned to executive session at 6:27pm.

**16.1. The board went back into open session at 7:30pm.**



## 17. ANNOUNCEMENTS AS A RESULT OF EXECUTIVE SESSION

### 17.1. Credentialing

*After review of the applicants' files in Executive Session, Ms. Woodworth moved to approve the following positions in the medical staff as requested and recommended by the Medical Executive Committee:*

#### **Appointments** (Telemed/Telehealth\*)

• Lou, William MD	Neurology/Telestroke	Telemedicine
• O'Mahony, Darrah MD	Critical Care/eICU	Telemedicine
• Panko, Jessica MD	Radiology (RCI)	Courtesy Staff
• Rogers, David C. MD	Radiology (AIA)	Courtesy Staff
• Ryan, Tim MD	Radiology (RCI)	Courtesy Staff

#### **Reappointments** (Telemed/Telehealth\*)

• Charlton, Blake MD	Cardiology/Echo Interp.	Courtesy Staff
• Giles, James MD	Neurology/Telestroke	Telemedicine
• Olson, Jennifer MD	Psychiatry/Telepsych	Telemedicine
• Wang, James MD	Neurology/Telestroke	Telemedicine
• Vo, Hung MD	Cardiology/Echo Interp.	Courtesy Staff

#### **Appointments**

• Liebers, Warren MD	Family Med/Emergency Med.	Active Staff
• Rankine, David MD	Neurology	Courtesy Staff
• Turner, J. Wesley MD	Urology	Courtesy Staff

## 18. ADJOURNMENT

Respectfully Submitted,

Accepted:

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Maura Jones, Executive Assistant

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Kelly Cooper, President

Minutes Approved:

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Julie Woodworth, Secretary



# South Peninsula Hospital

DRAFT-UNAUDITED

## BALANCE SHEET As of August 31, 2022

	As of August 31, 2022	As of Aug 31, 2021	As of July 31, 2022	CHANGE FROM August 31, 2021
<b>ASSETS</b>				
CURRENT ASSETS:				
1 CASH AND CASH EQUIVALENTS	25,167,300	23,343,625	24,064,135	1,823,675
2 EQUITY IN CENTRAL TREASURY	7,851,053	6,898,626	7,551,132	952,427
3 TOTAL CASH	33,018,353	30,242,251	31,615,267	2,776,102
4 PATIENT ACCOUNTS RECEIVABLE	32,492,082	32,557,827	31,328,967	(65,745)
5 LESS: ALLOWANCES & ADJ	(15,751,699)	(15,274,034)	(14,365,837)	(477,665)
6 NET PATIENT ACCT RECEIVABLE	16,740,383	17,283,793	16,963,130	(543,410)
7 PROPERTY TAXES RECV - KPB	3,325,717	3,088,413	3,886,128	237,304
8 LESS: ALLOW PROP TAX - KPB	(4,165)	(3,599)	(4,165)	(566)
9 NET PROPERTY TAX RECV - KPB	3,321,552	3,084,814	3,881,963	236,738
10 OTHER RECEIVABLES - SPH	374,084	41,862	445,259	332,222
11 INVENTORIES	1,993,903	1,807,290	2,056,445	186,613
12 NET PENSION ASSET- GASB	4,803,397	8,750,712	4,775,709	(3,947,315)
13 PREPAID EXPENSES	950,055	749,142	748,043	200,913
14 TOTAL CURRENT ASSETS	61,201,727	61,959,864	60,485,816	(758,137)
ASSETS WHOSE USE IS LIMITED				
15 PREF UNOBLIGATED	5,939,928	9,126,931	5,939,928	(3,187,004)
16 PREF OBLIGATED	1,964,169	1,232,568	1,964,169	731,601
17 OTHER RESTRICTED FUNDS	46,526	50,289	47,050	(3,763)
	7,950,622	10,409,788	7,951,146	(2,459,166)
PROPERTY AND EQUIPMENT:				
18 LAND AND LAND IMPROVEMENTS	4,114,693	3,857,472	4,114,693	257,221
19 BUILDINGS	67,424,631	66,248,299	67,424,631	1,176,332
20 EQUIPMENT	30,179,139	28,692,804	30,161,106	1,486,335
21 BUILDINGS INTANGIBLE ASSETS	2,382,262	0	2,382,262	2,382,262
22 EQUIPMENT INTANGIBLE ASSETS	462,427	0	462,427	462,427
23 IMPROVEMENTS OTHER THAN BUILDINGS	290,386	213,357	290,386	77,029
24 CONSTRUCTION IN PROGRESS	710,802	607,481	566,276	103,321
25 LESS: ACCUMULATED DEPRECIATION FOR FIXED ASSETS	(62,206,908)	(58,293,482)	(61,870,858)	(3,913,426)
26 LESS: ACCUMULATED AMORTIZATION FOR LEASED ASSETS	(491,502)	0	(453,815)	(491,502)
27 NET CAPITAL ASSETS	42,865,930	41,325,931	43,077,108	1,539,999
28 GOODWILL	15,000	27,000	16,000	(12,000)
29 TOTAL ASSETS	112,033,279	113,722,583	111,530,070	(1,689,304)
DEFERRED OUTFLOWS OF RESOURCES				
30 PENSION RELATED (GASB 68)	4,530,917	(568,607)	4,530,917	5,099,524
31 UNAMORTIZED DEFERRED CHARGE ON REFUNDING	343,491	414,275	349,128	(70,784)
32 TOTAL DEFERRED OUTFLOWS OF RESOURCES	4,874,408	(154,332)	4,880,045	5,028,740
33 TOTAL ASSETS AND DEFERRED OUTFLOWS OF RESOURCES	116,907,687	113,568,251	116,410,115	3,339,436

	As of August 31, 2022	As of Aug 31, 2021	As of July 31, 2022	CHANGE FROM August 31, 2021
<b>LIABILITIES &amp; FUND BALANCE</b>				
CURRENT LIABILITIES:				
34 ACCOUNTS AND CONTRACTS PAYABLE	1,733,584	1,566,498	1,064,753	167,086
35 ACCRUED LIABILITIES	10,631,022	10,988,782	11,124,952	(357,760)
36 DEFERRED CREDITS	52,336	32,119	24,836	20,217
37 CURRENT PORTION OF LEASE PAYABLE	374,108	0	390,935	374,108
38 CURRENT PORTIONS OF NOTES DUE	0	0	0	0
39 CURRENT PORTIONS OF BONDS PAYABLE	1,510,000	1,705,000	1,510,000	(195,000)
40 BOND INTEREST PAYABLE	54,422	64,686	170,696	(10,264)
41 DUE TO/(FROM) THIRD PARTY PAYERS	888,761	1,376,416	1,005,761	(487,655)
43 TOTAL CURRENT LIABILITIES	15,244,233	15,733,501	15,291,933	(489,268)
LONG-TERM LIABILITIES				
44 NOTES PAYABLE	0	0	0	0
45 BONDS PAYABLE NET OF CURRENT PORTION	8,740,000	10,250,000	8,740,000	(1,510,000)
46 PREMIUM ON BONDS PAYABLE	511,038	685,234	523,205	(174,196)
47 CAPITAL LEASE, NET OF CURRENT PORTION	2,103,003	26,531	2,106,221	2,076,472
48 TOTAL NONCURRENT LIABILITIES	11,354,041	10,961,765	11,369,426	392,276
49 TOTAL LIABILITIES	26,598,274	26,695,266	26,661,359	(96,992)
50 DEFERRED INFLOW OF RESOURCES	0	0	0	0
51 PROPERTY TAXES RECEIVED IN ADVANCE	0	0	0	0
<b>NET POSITION</b>				
52 INVESTED IN CAPITAL ASSETS	5,731,963	5,731,963	5,731,963	0
53 CONTRIBUTED CAPITAL - KPB	0	0	0	0
54 RESTRICTED	25,286	25,286	25,286	0
55 UNRESTRICTED FUND BALANCE - SPH	84,552,164	81,115,736	83,991,507	3,436,428
56 UNRESTRICTED FUND BALANCE - KPB	0	0	0	0
57 TOTAL LIAB & FUND BALANCE	116,907,687	113,568,251	116,410,115	3,339,436

**INCOME STATEMENT**  
**As of August 31, 2022**  
**DRAFT-UNAUDITED**

		MONTH			YEAR TO DATE				
		08/31/22			08/31/21	08/31/22			08/31/21
		Actual	Budget	Var B/(W)	Actual	Actual	Budget	Var B/(W)	Actual
Patient Service Revenue									
1	Inpatient	3,088,806	3,509,570	-11.99%	3,721,259	5,727,290	6,570,518	-12.83%	6,937,623
2	Outpatient	14,018,038	12,542,363	11.77%	12,146,239	25,529,005	24,758,566	3.11%	23,525,592
3	Long Term Care	1,085,270	1,097,797	-1.14%	767,896	2,118,622	2,195,594	-3.51%	1,606,925
4	Total Patient Services	18,192,114	17,149,730	6.08%	16,635,394	33,374,917	33,524,678	-0.45%	32,070,140
Deductions from Revenue									
5	Medicare	4,008,246	3,561,609	-12.54%	3,998,792	7,431,575	7,167,738	-3.68%	7,099,907
6	Medicaid	2,286,553	2,527,889	9.55%	1,940,801	4,123,150	5,087,377	18.95%	3,578,774
7	Charity Care	279,316	151,188	-84.75%	88,292	376,712	304,266	-23.81%	163,697
8	Commercial and Admin	1,622,657	1,418,077	-14.43%	994,023	2,976,342	2,853,880	-4.29%	1,947,025
9	Bad Debt	272,171	332,492	18.14%	371,293	475,028	669,140	29.01%	886,710
10	Total Deductions	8,468,943	7,991,255	-5.98%	7,393,201	15,382,807	16,082,401	4.35%	13,676,113
11	Net Patient Services	9,723,171	9,158,475	6.17%	9,242,193	17,992,110	17,442,277	3.15%	18,394,027
12	USAC and Other Revenue	56,590	61,665	-8.23%	41,076	130,182	123,330	5.56%	99,246
13	Total Operating Revenues	9,779,761	9,220,140	6.07%	9,283,269	18,122,292	17,565,607	3.17%	18,493,273
Operating Expenses									
14	Salaries and Wages	3,770,074	3,948,158	4.51%	3,789,457	7,795,991	7,987,311	2.40%	7,472,279
15	Employee Benefits	1,733,251	1,945,905	10.93%	1,706,223	3,476,745	3,921,941	11.35%	3,311,834
16	Supplies, Drugs and Food	1,224,608	1,141,688	-7.26%	1,128,399	2,304,456	2,161,832	-6.60%	2,069,885
17	Contract Staffing	271,830	177,442	-53.19%	400,352	515,007	310,112	-66.07%	658,808
18	Professional Fees	474,021	421,582	-12.44%	543,998	945,921	815,693	-15.97%	918,779
19	Utilities and Telephone	127,400	116,069	-9.76%	128,555	256,779	213,568	-20.23%	254,557
20	Insurance (gen'l, prof liab, property)	58,560	87,631	33.17%	59,121	115,781	149,834	22.73%	113,539
21	Dues, Books, and Subscriptions	15,141	22,292	32.08%	20,931	30,377	38,613	21.33%	42,575
22	Software Maint/Support	157,628	170,829	7.73%	118,488	332,767	302,155	-10.13%	279,942
23	Travel, Meetings, Education	27,641	70,398	60.74%	68,071	70,199	120,330	41.66%	97,713
24	Repairs and Maintenance	202,312	112,996	-79.04%	104,712	335,244	219,232	-52.92%	182,523
25	Leases and Rentals	56,822	72,017	21.10%	57,668	119,335	136,679	12.69%	133,080
26	Other (Recruiting, Advertising, etc.)	124,537	83,107	-49.85%	38,589	219,568	166,215	-32.10%	106,683
27	Depreciation & Amortization	337,050	345,891	2.56%	320,457	674,637	691,778	2.48%	647,372
28	Total Operating Expenses	8,580,875	8,716,005	1.55%	8,485,021	17,192,807	17,235,293	0.25%	16,289,569
29	Gain (Loss) from Operations	1,198,886	504,135	137.81%	798,248	929,485	330,314	181.39%	2,203,704
Non-Operating Revenues									
30	General Property Taxes	550,398	413,541	33.09%	593,905	1,585,408	1,032,621	53.53%	1,620,718
31	Investment Income	19,416	9,750	99.14%	701	37,279	19,501	91.16%	2,281
32	Governmental Subsidies	0	0	0.00%	0	0	0	0.00%	0
33	Other Non Operating Revenue	952	0	100.00%	0	952	0	100.00%	79,384
34	Gifts & Contributions	0	0	0.00%	0	0	0	0.00%	0
35	Gain <Loss> on Disposal	0	0	0.00%	0	0	0	0.00%	0
36	SPH Auxiliary	1	6	-83.33%	1	3	11	-72.73%	4
37	Total Non-Operating Revenues	570,767	423,297	34.84%	594,607	1,623,642	1,052,133	54.32%	1,702,387
Non-Operating Expenses									
38	Insurance	0	0	0.00%	0	0	0	0.00%	0
39	Service Area Board	7,053	0	0.00%	3,219	15,120	0	0.00%	831
40	Other Direct Expense	37	3,600	98.97%	0	0	7,200	100.00%	0
41	Administrative Non-Recurring	0	0	0.00%	0	0	0	0.00%	0
42	Interest Expense	39,366	28,432	-38.46%	32,233	78,870	56,863	-38.70%	64,466
43	Total Non-Operating Expenses	46,456	32,032	-45.03%	35,452	93,990	64,063	-46.71%	65,297
Grants									
44	Grant Revenue	0	29,167	0.00%	197,726	0	58,333	0.00%	209,726
45	Grant Expense	2,501	25,000	90.00%	187,500	5,003	50,000	89.99%	187,500
46	Total Non-Operating Gains, net	(2,501)	4,167	-160.02%	10,226	(5,003)	8,333	-160.04%	22,226
47	Income <Loss> Before Transfers	1,720,696	899,567	91.28%	1,367,629	2,454,134	1,326,717	84.98%	3,863,020
48	Operating Transfers	0	0	0.00%	0	0	0	0.00%	0
49	Net Income	1,720,696	899,567	91.28%	1,367,629	2,454,134	1,326,717	84.98%	3,863,020



# South Peninsula Hospital

## Statement of Cash Flows As of August 31, 2022

### Cash Flow from Operations:

1	YTD Net Income	2,454,134
2	Add: Depreciation Expense	674,637
3	Adj: Inventory (increase) / decrease	68,601
4	Patient Receivable (increase) / decrease	(222,173)
5	Prepaid Expenses (increase) / decrease	(189,836)
6	Other Current assets (increase) / decrease	(2,966,851)
7	Accounts payable increase / (decrease)	(98,685)
8	Accrued Salaries increase / (decrease)	2,520,096
9	Net Pension Asset (increase) / decrease	(127,688)
10	Other current liability increase / (decrease)	(1,987,671)
11	Net Cash Flow from Operations	124,564

### Cash Flow from Investing:

12	Cash paid for the purchase of property/equip	(156,652)
13	Cash transferred to plant replacement fund	
14	Proceeds from disposal of equipment	-
15	Net Cash Flow from Investing	(156,652)

### Cash Flow from Financing

16	Cash paid for Lease Payable	-
17	Cash paid for Debt Service	-
18	Net Cash from Financing	-
19	Net increase in Cash	\$ (32,088)
20	Beginning Cash as of July 1, 2021	\$ 33,050,441
21	Ending Cash as of August 31, 2022	\$ 33,018,353

Introduced by: Administration  
Date:  
Action:  
Vote: Yes –, No –, Excused–

**SOUTH PENINSULA HOSPITAL  
BOARD RESOLUTION  
2022-14**

**A RESOLUTION OF THE SOUTH PENINSULA HOSPITAL BOARD OF DIRECTORS  
RESOLVING TO PROVIDE THE RESOURCES NECESSARY TO ACHIEVE AND SUSTAIN  
A LEVEL IV TRAUMA HOSPITAL DESIGNATION**

**WHEREAS**, traumatic injury is the leading cause of death for Alaskans between the ages of 1 and 44 years; and

**WHEREAS**, South Peninsula Hospital strives to provide optimal trauma care; and

**WHEREAS**, participation in the Alaska Statewide Trauma System will result in an organized and timely response to patients' needs, a more immediate determination of patients' definitive care requirements, improved patient care through the development of the hospital's performance improvement program and an assurance that those caring for trauma patients are educationally prepared:

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF DIRECTORS OF SOUTH PENINSULA HOSPITAL, INC., TO PROVIDE THE RESOURCES NECESSARY TO ACHIEVE AND SUSTAIN A LEVEL IV TRAUMA HOSPITAL DESIGNATION IN ACCORDANCE WITH OUR PROCUREMENT POLICIES.**

**PASSED AND ADOPTED BY THE BOARD OF DIRECTORS OF SOUTH PENINSULA AT ITS MEETING HELD ON THIS 28<sup>th</sup> DAY OF SEPTEMBER, 2022.**

ATTEST:

\_\_\_\_\_  
Kelly Cooper, Board President

\_\_\_\_\_  
Julie Woodworth, Secretary

Introduced by: Administration  
Date:  
Action:  
Vote: Yes - X, No - X, Excused - X

**SOUTH PENINSULA HOSPITAL  
BOARD RESOLUTION  
2022-15**

**A RESOLUTION OF THE SOUTH PENINSULA HOSPITAL BOARD OF DIRECTORS  
APPROVING AN INFLATION RETENTION BONUS**

**WHEREAS** South Peninsula Hospital offers a competitive salary to its Union and Non-Union employees; and

**WHEREAS** the South Peninsula Hospital Board of Directors acknowledges that the cost of living has increased significantly and inflation has exceeded estimated levels making it more challenging for staff to meet the costs of living; and

**WHEREAS** the South Peninsula Hospital Board of Directors further acknowledges that the regular salaries and wages paid to its employees were established predicated on significantly lower anticipated inflation levels, and

**WHEREAS** the South Peninsula Hospital Board of Directors values staff and would like to ensure we retain current staff, despite the recent increased cost of living, and would like to assist staff through an additional compensatory bonus of \$2,500 for each staff member as described below; and

**WHEREAS** each permanent Union and Non-Union employee that is in an active status as of September 30, 2022 shall be eligible to receive a bonus of \$2,500. The bonus shall be pro-rated on the basis of compensated hours, including low census hours, in the preceding 26 pay periods, up to 2,080 hours; and

**WHEREAS** Union and Non-Unions employees hired September 11, 2022 or later shall not be eligible for this bonus; and

**WHEREAS** the Finance Committee reviewed and recommended adoption of this resolution at their meeting on September 22, 2022.

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF DIRECTORS OF SOUTH PENINSULA HOSPITAL TO APPROVE AN INFLATION RETENTION BONUS.**

**PASSED AND ADOPTED BY THE BOARD OF DIRECTORS OF SOUTH PENINSULA HOSPITAL THIS 28th DAY OF SEPTEMBER 2022.**

ATTEST:

\_\_\_\_\_  
Kelly Cooper, Board President

\_\_\_\_\_  
Julie Woodworth, Secretary

**South Peninsula Hospital**  
**Hospital Board of Trustees Balanced Scorecard Report**  
**Second Quarter Calendar 2022 (Apr, May, Jun)**

Overall Indicators		Target	n	Note
Medicare Care Compare Overall Hospital Star Rating	N/A	5		
Medicare Care Compare Overall Hospital Survey Star Rating	4	5		
Medicare Care Compare Overall Nursing Home Star Rating	5	5		
Medicare Merit Based Incentive Payment System Total Score	60.68	75		2019- 60.6 2020- 75.2 2021- 81.34
The Chartis Group - iVantage Health Analytics Index Rank	57.9	75		2019- 34.6 2020-74.7 2021-70.9
Quality of Care		Target	n	Note
<b>Severe Sepsis &amp; Septic Shock Care</b>	100%	>75%		7/1/2021-9/30/2021 (Care Compare 69%, 7/1/20-3/31/21)
Measures the percentage of patients who received appropriate care for severe sepsis and septic shock.				# of cases passing/total # of cases-exceptions (3 pass, 3 fail, 4 exclusions)
<b>Stroke Care</b>	100%	>95%		7/1/2021-9/30/2021 (Care Compare N/A, 7/1/20-3/31/21)
Percentage of patients who came to ED w/Stroke symptoms and received CT/MRI within 45 minutes of arrival.				Numerator = CT/MRI within 45 min & documented last known well. Denominator = Patients with Stroke presenting within 2 hours of symptoms. (1 pass, 0 failed, 6 excluded)
<b>Readmission</b>	10%	<15%		1/1/2022-03/31/22 (Care Compare 15.6%, 7/1/2019-12/31/19)
Unplanned readmission which occurs within 30 days of a previous discharge date.				# of patients with unplanned readmission within 30 days of discharge - exclusions/Eligible admissions
<b>Elective Deliveries</b>	0%	<0%		1/01/2022-3/31/22 (Care Compare N/A, 7/1/20-3/31/21)
% of non-medically indicated deliveries including caesarean delivery, inductions of labor, and cervical ripening occurring before 39 weeks gestation.				# of nomadically indicated deliveries before 39 weeks gestation / total deliveries.
<b>Provider Quality Score (Group)</b>	70%	>95%		Scoring tabulated as a running, annual score.
CMS Merit-Based Incentive Payment System (MIPS) for providers				
Patient Safety	2nd Q 2022	Target	n	Note
<b>Patient Fall Rate AC (injurious fall rate)</b>	9.1(3.6)	3-5*	1101	# of patient falls / # patient days x 1000
Measures the number of patient falls per 1,000 patient days				n = IP, observations and swing bed patient days.
<b>Resident Fall Rate LTC (injurious fall rate)</b>	8.2(2.0)	2	1959	# of resident falls / # resident days x 1000
Measures the number of resident falls per 1,000 patient days				
<b>Medication Errors</b>	1	0		
Measures the number of reported medication errors causing patient harm or death.				Classified according to the National Coordinating Council for Medication Error Reporting and Prevention/CMS
<b>Never Events</b>	0	0		
Measures the number of errors in medical care that are clearly identifiable, preventable and serious in their consequences as defined by CMS and NQF.				



Provider and Staff Alignment	2nd Q 2022	Target	n	Note
<b>Provider Satisfaction Percentile</b>	<b>74th</b>	<b>75th</b>		
Measures the satisfaction of physician respondents as indicated by Press Ganey physician survey results. Measured as a percentile.				Result of provider survey 2021
<b>Employee Satisfaction Percentile</b>	<b>70th</b>	<b>75th</b>		
Measures the satisfaction of staff respondents as indicated in Press Ganey staff survey results Measured as a percentile.				Result of employee survey 2021
Patient Satisfaction Through Press Ganey	2nd Q 2022	Target	n	Note
<b>Inpatient Percentile</b>	<b>79th</b>	<b>75th</b>	<b>40</b>	
Measures the satisfaction of inpatient patient respondents. Measures as a percentile ranking across Press Ganey clients.				Q4-2021: 67th, n = 42 Q1-2022: 49th, n = 39
<b>Outpatient Percentile</b>	<b>31st</b>	<b>75th</b>	<b>249</b>	
Measures the satisfaction of outpatient patient respondents. Measures as a percentile ranking across Press Ganey clients.				Q4-2021: 28th, n = 289 Q1-2022: 22nd, n = 295
<b>Emergency Department Percentile</b>	<b>81st</b>	<b>75th</b>	<b>62</b>	
Measures the satisfaction of emergency patient respondents. Measures as a percentile ranking across Press Ganey clients.				Q4-2021: 98th, n = 48 Q1-2022: 89th, n = 51
<b>Medical Practice Percentile</b>	<b>61st</b>	<b>75th</b>	<b>498</b>	
Measures the satisfaction of patient respondents at SPH Clinics. Measures as a percentile ranking across Press Ganey clients.				Q4-2021: 81st, n = 475 Q1-2022: 63rd, n = 523
<b>Ambulatory Surgery Percentile</b>	<b>56th</b>	<b>75th</b>	<b>76</b>	
Measures the satisfaction of ambulatory surgery patient respondents. Measures as a percentile ranking across Press Ganey clients.				Q4-2021: 16th, n = 44 Q1-2022: 70th, n = 65
<b>Home Health Care Percentile</b>	<b>60th</b>	<b>75th</b>	<b>36</b>	<b>*Running 12 months due to low quarterly returns</b>
Measures the satisfaction of Home Health Care clients (or family) respondents. Measures as a percentile ranking across Press Ganey clients.				Q4-2021: 24th, n = 29 Q1-2022: 21st, n = 29
Consumer Assessment of Healthcare Providers and Services	2nd Q 2022	Target	n	Note
<b>HCAHPS Percentile</b>	<b>91st</b>	<b>75th</b>	<b>39</b>	
Measures the 1-10 ranking received by inpatient client (or family) respondents. Measures as a percentile ranking across Press Ganey clients.				Q4-2021: 80th, n = 40 Q1-2022: 32nd, n = 39
<b>HHCAHPS Percentile</b>	<b>54th</b>	<b>75th</b>	<b>29</b>	<b>*Running 12 months due to low quarterly returns</b>
Measures the 1-10 ranking received by Home Health Care client (or family) respondents. Measures as a percentile ranking across Press Ganey clients.				Q4-2021: 10th, n = 28 Q1-2022: 54th, n = 29

Workforce	2nd Q 2022	Target	n	Note
<b>Turnover: All Employees</b>	<b>6.88%</b>	<b>5.00%</b>	<b>523</b>	<i>36 Terminations/523 Total Employees</i>
Percentage of all employees separated from the hospital for any reason				All Employees – National Hospital Rate for West Region is 23.1% (up 7.3% over PY), All Regions is 25.9%
<b>Turnover: Voluntary All Employees</b>	<b>6.12%</b>	<b>4.75%</b>	<b>523</b>	<i>32 Voluntary Terminations/523 Total Employees</i>
Measures the percentage of voluntary staff separations from the hospital				Voluntary Employees – National Hospital Rate is 95.5%
<b>First Year Total Turnover</b>	<b>9.89%</b>	<b>7%</b>	<b>91</b>	9 New Staff Terminated in Q2/91 Total New Hires from 7/1/2021-6/30/2022
Measures the percentage of staff hired in the last 12 months and who separated from the hospital for any reason during the quarter.				National Hospital Rate is 31.7%
Information System Solutions	2nd Q 2022	Target	n	Note
<b>Eligible Hospital (EH) Promoting Interoperability: hospital-based measures for inpatient and observation stays.</b>	<b>69</b>	<b>&gt;60</b>		<b>CMS score 60 and above = pass</b>
e-Prescribing: Electronic Prescribing (Rx)	<b>8</b>	<b>10</b>		
Health Information Exchange: Support Electronic Referral Loops by receiving and incorporating health information	<b>10</b>	<b>20</b>		
HIE: Support Electronic Referral Loops by sending health information (Summary of Care sent)	<b>5</b>	<b>20</b>		
Provider to patient exchange: Provide patients electronic access to their health information (timely access via the patient portal)	<b>36</b>	<b>40</b>		
Public Health & Clinical Data Exchange	<b>10</b>	<b>10</b>		
<b>Eligible Provider (EP) - Promoting Interoperability (Group)</b>	<b>n/a</b>	<b>95%</b>		<b>*PI score not yet calculated in Athena*</b>
Merit Based Incentive Payment System Promoting Interoperability score ( <i>MIPS tracking is in Athena</i> )				Scoring tabulated as a running, annual score.
<b>Electronic Medical Record (EMR) Adoption Stage</b>	<b>5</b>	<b>5</b>		
Health Information Management & Systems Society (HIMSS) Electronic Medical Record Adoption Model (EMRAM) stage.				The current US average is 2.4 out of a possible 7.0 stages. Stage 6 and 7 require site visit validation.
<b>IT Security Awareness Training Complete Rate</b>	<b>83%</b>	<b>100%</b>	<b>1564</b>	
% of employees who have completed assigned security training				
<b>Phishing Test Pass Rate</b>	<b>99.7%</b>	<b>100%</b>	<b>3641</b>	
% of Phishing test emails that were not failed.				3641 test phishing emails sent out to staff. 11 of the email links were clicked, causing 11 potential security risks.

Financial Health	2nd Q 2022	Target	n	Note
<b>Operating Margin</b>	1.18%	-2.2%		
Measures the surplus (deficit) of operating income over operating expenses as a percentage of net patient service revenue for the quarter.				Target is based on budgeted operating margin for the period.
<b>Adjusted Patient Discharges</b>	983.91	968.33		
Measures the number of patients discharged, adjusted by inpatient revenues for the quarter divided by ( <i>inpatient + outpatient revenues</i> ).				Total Discharges: 205 (Acute, OB, Swing, ICU) LTC Revenue & discharges not included
<b>Net Revenue Growth</b>	16.6%	2.9%		
Measures the percentage increase (decrease) in net patient revenue for the quarter compared to the same period in the prior year.				Target is based on budgeted net patient service revenue for the period compared to net patient service revenue for the same period in prior year.
<b>Full Time Equivalents (FTEs) per Adjusted Occupied Bed</b>	8.73	9.39		
Measures the average number of staff FTEs per adjusted occupied bed for the quarter.				Target is based on budgeted paid hours (FTE) divided by (budg gross patient revenue/budg gross inpatient rev) X budgeted average daily census for the quarter.
<b>Net Days in Accounts Receivable</b>	55.0	55		
Measures the rate of speed with which the hospital is paid for health care services.				
<b>Cash on Hand</b>	95	90		# Represents days
Measure the actual unrestricted cash on hand (excluding PREF and Service Area) that the hospital has to meet daily operating expenses.				Cash available for operations based average daily operating expenses during the quarter less depreciation for the quarter.
<b>Uncompensated Care as a Percentage of Gross Revenue</b>	1.8%	3-4.7%		
Measures bad debt & charity write offs as a percentage of gross patient service revenue				Target is based on industry standards.
<b>Surgical Case Growth</b>	13.5%	-1.0%		
Measures the increase (decrease) in surgical cases for the quarter compared to the same period in the prior year.				Target is based on budgeted surgeries above actual from same quarter prior year.
<b>Intense Market Focus to Expand Market Share</b>	2nd Q 2022	Target	n	Note
<b>Outpatient Revenue Growth</b>	12.9%	-2%		
Measures percentage increase (decrease) in outpatient revenue for the quarter, compared to the same period in the prior year.				Target is based on budgeted outpatient revenue for the period compared to outpatient revenue for the same period in the prior year.

## **SOUTH PENINSULA OPERATING BOARD SELF-EVALUATION SURVEY**

### **Understanding & Executing the Board Role**

I understand what is expected of me as an individual SPH board member

I understand the job of the whole board in governing the affairs of SPH

I believe our board reflects the social and cultural make-up of the service area

### **Meetings**

I am given adequate and timely information to fulfill my responsibilities as a board member at each meeting

I believe the board chair conducts board meetings effectively and efficiently

I believe all reports and presentations at regular board meetings provide information essential to the board

I believe that board agenda setting, meeting frequency and format enable the board to do its work

### **Committees**

I understand the purpose and function of the current board committees

I understand my role as a committee member and am adequately equipped to fulfill that function

I believe the current committees are sufficient to meet the boards needs

### **CEO**

I feel that the board has a strong and positive working relationship with the CEO

I feel that the CEO provides adequate and timely information to the board in support of the boards work

### **Mission & Strategic Planning**

I understand and support the mission and values of SPH

I understand the long-term strategic plan of SPH and the board's role in accomplishing its strategic objectives

I believe the board is more proactive than reactive and is focused on future development and growth

### **Culture**


I believe the board environment is healthy and supportive of productive work

I believe the board embodies the values of SPH when doing its work

I believe my personal contribution to the board is heard and valued

### **Training**

I feel the training opportunities provided to me as a board member sufficiently support my growth

 South Peninsula Hospital	<b>SUBJECT:</b> Committee Responsibilities	<b>POLICY #:</b> SM-08
		Page 1 of 2
<b>Scope:</b> Board of Directors		<b>Original Date:</b> 6/23/04
<b>Approved by:</b> Board of Directors		
<b>Revised:</b> 8/28/19; draft		<b>Revision Responsibility:</b> Board of Directors
<b>Reviewed:</b> N/A		

**PURPOSE:**

Outline of responsibilities assigned to the Committees managed by the Board of Directors.

**DEFINITION(S):**

N/A

**POLICY:**

- A. The operational responsibilities of Committees developed to carry out functions for the Board of Directors will be managed as outlined below.
- B. Committees that constitute the Board include the Finance Committee, Governance Committee, Membership Committee, and Education Committee.
- C. *Board Representation:* A Board Member will serve on the Pension Committee, Credentialing Committee, and South Peninsula Foundation Board. At least two members will serve on the Patient Centered Care Quality Committee. Ad hoc committees will be formed as needed.
- D. *Committee Members At Large:* A community member may be invited to serve on a Committee, but that community member must sign a Confidentiality Agreement and understand that information obtained by serving on that Committee is privileged.

**PROCEDURE:**

1. Finance Committee

Assists the Board in maintaining and improving the financial integrity of the hospital and its subordinate activities. Responsibilities include:

- A. Draft and forward policies recommendations regarding the Board's responsibility for ensuring the hospital's financial health.
- B. Review recommendations management has forwarded to the Board dealing with finances.
- C. Review the long-range financial plan for the hospital. Recommend to the Chair or CEO those items that may benefit from governmental line item or grant funding sources.
- D. Assess whether the budget is likely to achieve Board-formulated financial objectives, key goals, and the vision. Forward recommendations to the Board regarding approval, rejection, or revision of the budget.
- E. Monitor financial performance on a monthly basis against the approved budget, in accordance with Board policy F-10, and keep the Board informed on the organization's financial status, recommending corrective action when necessary.
- F. Develop and recommend financial performance indicators and associated standards for regular review by the Board.
- G. Monitor financial indicators and present analyses to the Board when such indicators cross established thresholds or otherwise warrant attention and action.
- H. Provide guidance and direction to the auditor in preparation for the annual financial audit.
- I. Analyze and present to the Board an assessment of the financial impact of new and expanded services, and major capital plans for the hospital, incorporating any forecast information provided by management.
- J. Recommend corrective action to the Board when necessary to ensure compliance with the budget and other financial plans.
- K. Ensure financial reporting required by the Operating Agreement is forwarded in a timely manner to appropriate entities.

2. Governance Committee

Responsible for assisting the Board in fulfilling its ultimate responsibility for effective and efficient performance. Its functions include:

- A. Assist the Board with developing its bylaws, developing & implementing policies & procedures for the hospital and its administration. Update bylaws as required but no less than annually and conduct a formal and in-depth review every third year. Review board policies as required but no less than

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annually and conduct a formal and in-depth review of board policies on the following three year schedule:

Year 1 – Quality & Executive Management Performance Policies

Year 2 – Finance Policies

A. Year 3 – Self Management Policies Review annually and update as necessary.

**B. Board Evaluation:**

- 1) Conduct annual self-evaluation to determine level of compliance with Board's goals and objectives
- 2) Oversee, analyze, propose, and implement action for the results of the governance assessment process (i.e., self-evaluations)

**C. CEO Evaluation:** Oversee CEO Evaluation process in accordance with policy EMP-08.

**D. Ensure Medical Staff Bylaws and Rules and Regulations** are reviewed biannually by the Medical Executive Committee.

**E. Coordinate periodic Board and Medical Staff Dinners.**

**3. Membership Facilitation**

Identifies strong individuals to add to the efforts by which the Board strives to continue and improve the accomplishments of South Peninsula Hospital. Responsibilities include:

- A. Develop actual and ideal Board composition profiles, addressing demographics and professional experience.
- B. Maintain Board solicitation packet and new member training information in collaboration with Education Committee and Marketing Director to ensure information is current.
- C. Work with Executive Assistant to place timely ads in local media to solicit potentially interested Board members and Committee consultants/advisors.
- D. Identify potential new Board members and persons to assist Committee goals by serving as consultant/advisors in their respective areas of interest; make recommendations for vacancies.
- E. Ensure new members are assigned a mentor and orientation is scheduled per policy SM-07. Ensure Borough is notified within 14 days of new members seated, in accordance with the Operating Agreement.

**4. Education Committee**

Responsible for ensuring members receive the education and training regarding parliamentary procedures, hospital programs, services, community healthcare needs, trends, and demographics needed to make informed decisions regarding the operation of South Peninsula Hospital. Responsibilities include:

- A. Plan ongoing Board orientation and continuing education to satisfy requirements of the Operating Agreement.
- B. Plan and conduct annual Board retreat.

**ADDITIONAL CONSIDERATIONS:**

N/A

**REFERENCE(S):**

1. SPH BOD Self-Management policy *SM-07 Board Member Orientation*
2. SPH BOD Executive Management Performance policy *EMP-08 CEO Performance Evaluation*
3. SPH BOD Finance policy *F-10 Financial performance Indicators*

**CONTRIBUTORS:**

Board of Directors

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 South Peninsula Hospital	SUBJECT: Board Terms and Officers	POLICY #: SM-09
		Page 1 of 2
Scope: Board of Directors Approved by: Board of Directors		Original Date: 7/23/08 Effective: 7/28/21
Revised: 8/28/19; 7/28/21 Reviewed: N/A		Revision Responsibility: Board of Directors

## PURPOSE:

Guidelines for the management of the election of board members and term limits for board officers.

## DEFINITION(S):

N/A

## POLICY:

### A. Board Member Election Process

- B. The Governance Committee will facilitate the election of new board members and commence the electoral process no later than September of each year. A Membership Committee will be established at the October meeting of the Board each year to facilitate the election of officers.
  1. At least forty-five days prior to a sitting board member's term of office expiring, the Membership Committee will send a notice confirming the term ending and the procedures to apply for re-appointment. The board member will have fifteen days to respond to the Membership Committee. Simultaneously, the Governance Committee will place a display ad in the local papers inviting members of the Service Area to apply to serve on the Board of Directors. Board members are also encouraged to provide recommendations to the Membership/Governance Committee for potential candidates and the Membership Committee will reach out to those potential members.
  2. Each Candidate will complete an application. Two references will be required for successful board applicants to be considered for appointment. Exceptions will be made for applicants who are well known to an existing board member(s) if that member(s) is able to provide a positive reference for the applicant. Reference checks will be completed by the Governance Committee.
  3. Applications will be reviewed by the Membership Committee.
  4. Interviews will be coordinated for selected candidates, and all board members will be invited to attend the interview.
  5. Two references will be required for successful board applicants to be considered for appointment. Exceptions will be made for applicants who are well known to an existing board member(s) if that member(s) is able to provide a positive reference for the applicant. Reference checks will be completed by the Governance Committee. Board member terms will be three years. Vacancies created by a member no longer able to serve shall be filled for the remainder of the unexpired term.

### B. Vacancies

1. Each candidate will be reviewed in Executive Session. Incumbents will leave the room when the discussion is concerning their application.
2. Candidates will be voted on by secret ballot at a regularly scheduled Executive Session and the appointment of selected candidates will be ratified by the Board of Directors in an Open Session.
3. After board members are seated, the Kenai Peninsula Borough will be notified of continuing or newly appointed members in accordance with the Operating Agreement.

### C. Officer Terms

1. Board Officers (President, Vice President, Treasurer, and Secretary) will serve one year terms, with a maximum of two consecutive terms. Exceptions may be made in special circumstances, which would require a vote of the board.


## PROCEDURE:

N/A

## ADDITIONAL CONSIDERATIONS:

N/A

## REFERENCE(S):

 South Peninsula Hospital	SUBJECT: Board Terms and Officers	POLICY #: SM-09
		Page 2 of 2
Scope: Board of Directors Approved by: Board of Directors		Original Date: 7/23/08 Effective: 7/28/21
Revised: 8/28/19; 7/28/21 Reviewed: N/A		Revision Responsibility: Board of Directors

N/A

**CONTRIBUTORS:**  
 Board of Directors



To: President Cooper and the SPH Board of Directors

From: Melissa Jacobsen, Education Committee Chair

Date: August 30, 2022

Subject: Education Committee Meeting

At our August 30<sup>th</sup> meeting the Education Committee confirmed topics for the retreat and discussed what materials need to be provided to Jamie Orlikoff for our session. Topics to be addressed are-

- Personnel Sustainability
- Succession Planning
- Board Development
- Facility Planning

We confirmed we would schedule a full day on Friday, September 30<sup>th</sup> and half day on Saturday, October 1<sup>st</sup>. Maura will let us know the times when they are set.

The Committee discussed venues and Aaron suggested space at his office area at 1061 East End Road. The group agreed it would be a good spot, Maura and Melissa will do a site visit.

Lastly we let the Committee know that Maura and Melissa are scheduled for a kick-off call with iProtean on August 31<sup>st</sup>.

To: President Cooper and the SPH Board of Directors

From: Melissa Jacobsen, Education Committee Chair

Date: September 21, 2022

Subject: iPro Update

On September 2<sup>nd</sup> Maura and I met with Emma from iPro for a walk-through of the Dashboard and discussion of next steps.

In the next week or so, Board Members and designated staff will receive an introduction email to get logged in and start familiarizing yourselves with the platform.

At the next Education Committee meeting, we'll review some of the suggested Board Training Tracks and work with iPro to get the dashboard set up. In the meantime, log in and check it out!

## **SOUTH PENINSULA OPERATING BOARD SELF-EVALUATION SURVEY**

### **Understanding & Executing the Board Role**

I understand what is expected of me as an individual SPH board member

I understand the job of the whole board in governing the affairs of SPH

I believe our board reflects the social and cultural make-up of the service area

### **Meetings**

I am given adequate and timely information to fulfill my responsibilities as a board member at each meeting

I believe the board chair conducts board meetings effectively and efficiently

I believe all reports and presentations at regular board meetings provide information essential to the board

I believe that board agenda setting, meeting frequency and format enable the board to do its work

### **Committees**

I understand the purpose and function of the current board committees

I understand my role as a committee member and am adequately equipped to fulfill that function

I believe the current committees are sufficient to meet the boards needs

### **CEO**

I feel that the board has a strong and positive working relationship with the CEO

I feel that the CEO provides adequate and timely information to the board in support of the boards work

### **Mission & Strategic Planning**

I understand and support the mission and values of SPH

I understand the long-term strategic plan of SPH and the board's role in accomplishing its strategic objectives

I believe the board is more proactive than reactive and is focused on future development and growth

### **Culture**

I believe the board environment is healthy and supportive of productive work

I believe the board embodies the values of SPH when doing its work

I believe my personal contribution to the board is heard and valued

### **Training**

I feel the training opportunities provided to me as a board member sufficiently support my growth