

- Covid-19 Updates
 - Opened the Covid Hospital unit for a very short time when one patient in the Inpatient Hospital (IP) tested positive, the IP was closed for a few days; no other cases were identified, the Covid unit was closed, and IP resumed normal procedures within 5 days
 - No current positive cases in Mount View and Pine Crest.
 - We are discussing with Aspirus about the potential to open a Covid unit to help with their growing Covid census. Most area nursing homes are not taking Covid admissions needing rehab and it is important for us to help hospitals and care for these individuals safely.
 - Nursing homes are required to test weekly which for us is several hundred people each week. Have had several false positive results but our protocol is that we will then retest to verify and if negative will test a third time. The employee tracking document shows that we currently have 32 individual with the majority out due to pending test results and quarantined. Biggest issue is when a family member tests positive and the employee is needed to care for them which has potential to result in being off work for 20-28 days.
- September Financials
 - There was a loss of \$688,000 with net patient revenue down \$325,000 from average. Main areas affecting the loss were the nursing homes not taking admissions and the hospital closed for 5 days resulting in about 20 diversions. Year to date we are still in the black at \$265,000.
- Organizational Chart Updates
 - Have moved from program focused to director focused structure.
 - Restructured several executive team positions/roles to create the Operations Executive position. Also added two key clinical executive team members with a Chief Medical Officer and Chief Nursing Officer thereby reducing Executive Team by 2 positions in 2020.
 - Directors are being asked to growth in their leadership to their programs which in effect should help be more efficient and effective, along with a higher accountability for results.
 - One position that remains on hold is the Executive Director for the North Central Health Foundation.
- Youth Behavioral Health Hospital
 - Tours are being provided this week to community partners; anticipate opening 10/20/20.
 - Did not budget start-up costs and construction was delayed 8 weeks; have had about \$180,000 in startup expenses to date and until census is reached program will run at a loss. These start-up costs were are being funded from County fund balances versus having the County provide the additional funding.
 - After program is operational and if census is averaging around 4 not the required 6, we will consider exploring admissions from outside our three county area.
- Northern Valley Industries
 - Continue to make progress, albeit slowly.

- Physician Recruitment
 - Dr. Lamberton is ending her contract with us at the end of 2020; Dr. Varhely and Tiffany Pluger, APNP will be filling her role.
 - Two additional inpatient physicians will be joining us in the first quarter 2021; they are finishing their residency out of UW Green Bay; a second child psychiatrist will be joining us in the summer of 2021. Recruitment for additional Outpatient Psychiatrists continues.
- Outpatient Services
 - Intensive Outpatient and Day Treatment programs continue to be suspended; technology not a good solution as substitute.
 - Reviewed outpatient therapy financial model and difficulties managing high caseloads given the demand; limitations exist on our referral flow internally and externally. To increase capacity will need to add therapists for timely outpatient care; would also need to increase CCS.
- Long Term Care Future State – CLA
 - The implications of Covid-19 in 2020 and the stress of other nursing homes closures in area will impact the decision on the renovations to the nursing home and the final footprint and bed capacity for Mount View Care Center; we will be updating our demand analysis by second quarter 2021. An expansion of mental health services could be considered if space is made available as Mount View would be scaled back.
 - CLA will be working on a market review and master facility plan for Pine Crest, as well as revisit the plan prepared in 2017 for MVCC, and will be assisting as we engage with Portage County relative to a regionalized model. A presentation will be provided to the Board in early 2021.
- CCIT Assessment
 - Feel we need to own this function as a strategic direction and not outsource it.
 - Our goal is to refresh our core systems on a reoccurring 5 year cycle.
 - Built capacity internally with new Information Technology Executive position, Director and Project Manager. Feel we can support our IT needs internally with substantial cost savings.
 - We want to be thoughtful about this process and do not want to impair the other partners involved with CCIT. Analysis continues.
- Construction Updates
 - Outcomes have been great; however there has not been a due date that's been delivered on which has been a struggle.
- Culture Work
 - The Fundamentals for NCHC to have a High Performing Culture were shared. Have not been able to implement the initiative due to Covid. Plan is to launch the program in January 2021 for all employees. Staff are excited and feel this will do a lot for the organization.

- Corporation Counsel Update
 - Thankful Dejan is here and has been a great resource right out of the gate.

Motion to Move Into Closed Session:

- A. **Motion**/second, Anderson/Leonhard, Pursuant to §19.85(1)(c) Wis. Stats. to consider Performance Evaluation of a Public Employee Over Which the Governmental Body has Jurisdiction or Exercises Responsibility, namely the Chief Executive Officer of North Central Health Care.
- B. Roll call taken, all ayes. Motion carried. Meeting convened in closed session at 12:57 p.m.

Reconvene to Open Session and Report Out on Possible Action on Closed Session Item(s)

- A. No report out or action.

Future Agenda Items for Executive Committee or Board Consideration

- A. No discussion.

Adjourn

- A. **Motion**/second/ Stowe/Leonhard, to adjourn. Motion carried. Meeting adjourned at 2:10 p.m.