



TAHOE FOREST HOSPITAL DISTRICT

2024-05-13 Board Executive Compensation Committee Meeting

Monday, May 13, 2024 at 10:00 am

Tahoe Forest Hospital - Eskridge Conference Room

10121 Pine Ave, Truckee, CA 96161



2024-05-13 Board Executive Compensation Committee Meeting

Board Executive Compensation Committee

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BOARD EXECUTIVE COMPENSATION COMMITTEE AGENDA

Monday, May 13, 2024 at 10:00 a.m.
Tahoe Forest Hospital – Eskridge Conference Room
10121 Pine Avenue, Truckee, CA 96161

1. CALL TO ORDER

2. ROLL CALL

Mary Brown, Chair; Alyce Wong, Board Member

3. CLEAR THE AGENDA/ITEMS NOT ON THE POSTED AGENDA

4. INPUT – AUDIENCE

This is an opportunity for members of the public to address the Committee on items which are not on the agenda. Please state your name for the record. Comments are limited to three minutes. Written comments should be submitted to the Board Clerk 24 hours prior to the meeting to allow for distribution. Under Government Code Section 54954.2 – Brown Act, the Committee cannot take action on any item not on the agenda. The Committee may choose to acknowledge the comment or, where appropriate, briefly answer a question, refer the matter to staff, or set the item for discussion at a future meeting.

5. APPROVAL OF MINUTES OF: 11/14/2023..... ATTACHMENT

6. ITEMS FOR COMMITTEE DISCUSSION AND/OR RECOMMENDATION

6.1. Committee Charter ATTACHMENT

Executive Compensation Committee will review and recommend approval of the committee charter.

6.2. Draft Winning Aspirations & Goals ATTACHMENT

The Board Chair would like the Executive Compensation Committee to consider utilizing the metrics for the one-year aspirations and goals, where appropriate.

6.3. Fiscal Year 2024 President & CEO Incentive Compensation ATTACHMENT

Executive Compensation Committee will review the metrics update for fiscal year 2024 President & CEO Incentive Compensation.

6.4. Fiscal Year 2025 President & CEO Incentive Compensation ATTACHMENT

Executive Compensation Committee will review & consider proposed metrics update for fiscal year 2025 President & CEO Incentive Compensation.

6.5. President and CEO Succession Planning & Engagement of Executive Recruitment Agency

Executive Compensation Committee will begin consideration of Succession Planning Subcommittee, discuss the role of the Executive Compensation Committee’s role in the engagement of Executive Recruitment Agency and the succession planning.

7. REVIEW FOLLOW UP ITEMS / BOARD MEETING RECOMMENDATIONS

8. NEXT MEETING DATE

Executive Compensation Committee will discuss its next meeting date.

9. ADJOURN

*Denotes material (or a portion thereof) may be distributed later.

Note: It is the policy of Tahoe Forest Hospital District to not discriminate in admissions, provisions of services, hiring, training and employment practices on the basis of color, national origin, sex, religion, age or disability including AIDS and related conditions. Equal Opportunity Employer. The telephonic meeting location is accessible to people with disabilities. Every reasonable effort will be made to accommodate participation of the disabled in all of the District's public meetings. If particular accommodations for the disabled are needed or a reasonable modification of the teleconference procedures are necessary (i.e., disability-related aids or other services), please contact the Clerk of the Board at 582-3481 at least 24 hours in advance of the meeting.



BOARD EXECUTIVE COMPENSATION COMMITTEE **DRAFT MINUTES**

Tuesday, November 14, 2023 at 9:00 a.m.
Tahoe Forest Hospital – Eskridge Conference Room
10121 Pine Avenue, Truckee, CA 96161

1. CALL TO ORDER

Meeting was called to order at 9:00 a.m.

2. ROLL CALL

Board: Mary Brown, Chair; Alyce Wong, Board Member
Staff in attendance: Harry Weis, President & Chief Executive Officer; Louis Ward,
Other: Ben Teichman of FutureSense

3. CLEAR THE AGENDA/ITEMS NOT ON THE POSTED AGENDA

No changes were made to the agenda.

4. INPUT – AUDIENCE

No public comment was received.

5. APPROVAL OF MINUTES OF: 06/06/2023

Director Wong moved to approve the Board Executive Compensation Committee of June 6, 2023, seconded by Director Brown.

Open Session recessed at 9:02 a.m.

6. CLOSED SESSION

6.1. Conference with Labor Negotiator (Government Code § 54957.6)

Name of District Negotiator(s) to Attend Closed Session: Mary Brown

Unrepresented Employee: President & Chief Executive Officer

Discussion was held on a privileged item.

Open Session reconvened at 9:47 a.m.

7. ITEMS FOR COMMITTEE DISCUSSION AND/OR RECOMMENDATION

7.1. Fiscal Year 2023 President & CEO Incentive Compensation

Harry Weis, President & Chief Executive Officer, rejoined the meeting at 9:53 a.m.

Executive Compensation Committee reviewed the metrics achieved for fiscal year 2023 President & CEO Incentive Compensation.

CFO shared the District's Fiscal Year 2023 net income exceeded budget. Once gainsharing and incentive compensation are booked, the District will still exceed budget at approximately \$22,713,000.

The Service criteria was set at 94.2 and the average achieved for Fiscal Year 2023 was 95.25.

The Quality criteria was set at 98.20% and FY23 finished at 98.47%. The quality metric will be updated in the future to measure process.

The Growth criteria was set to meet or exceed 116,795 office visits. There were 129,599 office visits in Fiscal Year 2023. The growth metric will also be updated in the future to include access and community.

The People criteria was set at meet or exceed 90th percentile in the engagement category from the employee Press Ganey engagement survey. The Press Ganey report show a 91st percentile for engagement.

Executive Compensation Committee will recommend approval of the President & Chief Executive Officer's Incentive Compensation at the regular board meeting.

President & CEO departed the meeting at 10:17 a.m.

Open Session recessed at 10:17 a.m.

Open Session reconvened at 10:26 a.m.

8. REVIEW FOLLOW UP ITEMS / BOARD MEETING RECOMMENDATIONS

No discussion was held.

9. NEXT MEETING DATE

Executive Compensation Committee will meet as needed.

10. ADJOURN

Meeting adjourned at 10:33 a.m.

Charter
Executive Compensation Committee
(formerly Personnel Committee)
Tahoe Forest Hospital District
Board of Directors

PURPOSE:

The purpose of the charter is to delineate the responsibilities and duties of the Executive Compensation Committee of the District's Board of Directors.

RESPONSIBILITIES:

The Executive Compensation Committee is responsible for assisting the Board in oversight of Chief Executive Officer (CEO) relations and the work done through the Foundations of Excellence.

DUTIES:

1. Oversee the identification and recruitment of the organization's CEO as directed by the Board of Directors.
2. Ensure an annual CEO performance evaluation process is in place.
3. In conjunction with the CEO, annually review and recommend modifications of goals and objectives which will be used to evaluate the performance of the CEO.
4. Review annually the CEO's comprehensive compensation package, and make recommendations to the Board of Directors as necessary.
5. Review metrics annually for the CEO's Incentive Compensation Criteria and make recommendations to the Board of Directors as necessary.
6. Review annually the CEO's Employment Agreement, and make recommendations to the Board of Directors as necessary.
7. In conjunction with the CEO, review and evaluate annually the CEO position description to ensure its continued relevance. Recommend revisions to the Board of Directors as necessary.
8. Annually review the CEO Succession Plan and make recommendations to the Board.

COMPOSITION:

The Committee is comprised of at least two (2) board members appointed by the Board Chair.

MEETING FREQUENCY:

The Committee shall meet at least once annually and then on an as needed basis.

DRAFT Winning Aspirations & Goals

Community - Aspire to be an integrated partner in an exceptionally healthy and thriving community.

- 5 Year – Achieve 10 Healthy People 2023 Targets from the Community Health Index
 - One Year – Increase from 3 Community Health Index (2030 CHI) targets met to 5 targets met

Service- Aspire to deliver a timely, outstanding patient and family experience

- 5 Year Improve primary service area PSA market share from 53% to 56%
 - Increase top- box composite Press Ganey patient satisfaction from 95.25% to 96%
 - One Year –
 - 2024 Fiscal year surgery volumes from x to 1.08x (surgical procedures only) (includes 2 hospitals + Truckee Surgery Center)
 - Improve 3rd next available appointment from x to y

Quality- Aspire to deliver the best possible outcomes for our patients

- 5 Year-Increase CMS star rating from 3 to 5
 - One Year- Improve performance of a select group of CMS Star Rating measures from 0/8 achieving the target to 4/8

People- Aspire for Highly engaged culture that inspires teamwork and joy

- 5 Year – Increase Medical staff engagement from 60th percentile to 75th percentile (Press Ganey) Increase staff (non-medical) engagement from 92nd percentile (Press Ganey)
 - One Year - Improve Physician alignment score from 2024 Press Ganey baseline x 1.05

Finance- Aspire for long-term financial strength

- 5 Year-Improve investment rating from BBB- to A-
 - 1 Year-Maintain day's cash on hand from actual level of June 30, 2024

FY2024 President & CEO Incentive Compensation Criteria & Update

Finance 50% weight:

Meet or Exceed budgeted net income* as approved by the Board for FY 24.

It is likely that the hospital will achieve the board approved budget for FY 24 even after booking a 5 M hit from the closure of the Research Institute, 14 year activities (meeting goal as of March 2024 Statement of Revenue & Expenses).

Service 20% weight:

10% - meet or exceed an average of 95.00 Press Ganey Patient Satisfaction score.

10 % - Lower the primary care provider third next available appointment number of days from 25 to 33 and keep the specialty provider days for third next appointment at 28 days or lower.

We believe we can hit the 95% level which is a very high level, but we still have to successfully complete more quarters to know for sure. (Total Patient Satisfaction Average was 95.46 as of 12/31/2023)

10% of the weight is to lower the primary care 3rd next available appointment from 25 days to 23 days. It's still unknown if we'll hit this improvement goal. Also within this 10% weight is the need to achieve 28 or fewer days to the 3rd next available appointment for specialty care physicians. It is still unknown if we'll hit this improvement goal.

Quality 13% weight:

Meet or exceed 98.20% roll-up of the following quality measurements: SEP-1 (Early Management Bundle, Sever Sepsis/Septic Shock), EDTC ALL (Emergency Department Transfer Communication ALL), PC-01 (Early Elective Delivery), CLASS I SSI, (Class I Surgical Site Infection Rate), Class I SSI for Joint Replacement (Class 1 Surgical Site Infection Rate for Total Knee and Hip Replacement), Medicare Readmission Rate (Inpatient Readmission) and C. DIFF> (rate of Hospital Onset C. Diff).

The custom core measure bundle goal was raised to 98.2% from a lower level of performance in FY 23. We still need 2 more quarters of data to see how we are doing and at last count we were 6/100ths below the improvement target.

Growth 2% weight:

Meet or exceed the 36th percentile in the alignment category from the Medical Staff Press Ganey engagement survey.

The goal was to at least equal the FY 23 provider office visits in FY 24. We will exceed this improvement target.

People 15% weight:

Meet or exceed the 36th percentile in the alignment category from the Medical Staff Press Ganey engagement survey.

The target to improve the medical staff Press Ganey alignment goal from the 26th percentile to the 36th percentile is still unknown and we'll know by the end of July on how we did as this survey completes in June.

PROPOSED FY 25 INCENTIVE GOALS AFTER SEVERAL AC GROUP DISCUSSIONS

Finance 50% weight:

The goal is to meet or exceed the board approved budget for FY 25.

Service 20% weight:

The proposed goal is to continue to hold the very high level of 95.00% in patient satisfaction scores across 8 service areas for both Truckee and Incline Village. We still have at least one quarter to complete to learn how we might do in FY 24.

Quality 20% weight:

Please see the 8 new process measures on 2 page handout. Our team recommended goal is to go from 0 out of 8 process measures being in the green zone to any 4 out of 8 process measures to be in the green zone by June 30, 2025.

(Standard Work Bundles 2024 Attached)

Community 5% weight:

Our team recommended goal is to improve from 3 out of 15 community health initiatives to 5 out of 15 community health initiatives by June 30, 2025.

(see Draft Winning Aspirations Attached)

People 5% weight:

Our team recommended goal is to perform another medical staff Press Ganey survey in the May and June time frame of 2025. The Alignment improvement goal is to achieve an "Alignment" score improvement of at least 1.05 or a 5% increase vs the actual "Alignment" score from the FY 24 medical staff Press Ganey survey.

Tahoe Forest Hospital
Standard Work Bundles
2024

We have developed the following concurrent quality metric bundles:

- 1. OP-35: Emergency Visits after Outpatient Chemotherapy**
 - a. Stakeholders: Kelley Bottomley, Derek Baden
 - b. Standard work items
 - i. Initial prevention
 - ii. Symptomatic patients during treatment
 1. Evaluations and referrals
 - c. Numerator-Chemo patients with validated chemo teach
 - d. Denominator-New start chemo patients
 - e. **Goal = $\geq 92\%$**
- 2. HAI-6/C-Diff**
 - a. Stakeholders: Trent Foust, Nicole Becker
 - b. Standard work items
 - i. Testing- call MD before
 - ii. Enteric contact precautions
 - iii. If C-Diff positive- PPE present, private room, hand hygiene observed
 - c. Numerator-Patients with bundle items done
 - d. Denominator- Patients with 3 or more loose stools in 24 hrs
 - e. **Goal $\geq 90\%$**
- 3. Sep-1/Sepsis**
 - a. Stakeholders: Trent Foust, Nicole Becker, Ellie Cruz
 - b. Standard work items
 - i. 3 hour bundle
 - ii. 6 hour bundle
 - c. Numerator- Sepsis patients with 3 and 6 hour bundles verified
 - d. Denominator- Sepsis admissions or new sepsis developed
 - e. **Goal $\geq 90\%$**
- 4. Falls**
 - a. Stakeholders: Trent Foust, Nicole Becker
 - b. Standard work items
 - i. Fall risk bundle in place
 - ii. Ambulation status posted (ICU/MS)
 - c. Numerator- High fall risk patients with all bundles in place
 - d. Denominator- Fall risk patients reviewed
 - e. **Goal $\geq 90\%$**
- 5. SSI**
 - a. Stakeholders: Calley Corr, Kate Cooper
 - b. Standard work items

Tahoe Forest Hospital
Standard Work Bundles
2024

- i. Pre-op hair removal
 - ii. CHG Pre-op
 - iii. Nasal Decolonization
 - iv. Oral Decolonization
 - v. Vanco MRSA Positive only
 - vi. Normo-thermia pre-op
 - c. Numerator- TJR patients with all bundles
 - d. Denominator- Elective TJR patients
 - e. **Goal \geq 90%**
- 6. OP-10: Abdomen CT Use of Contrast**
 - a. Stakeholders: Sadie Wangler, Shayna Vosburgh
 - b. Standard work items
 - i. Exclusion diagnosis present
 - ii. Verified with Provider correct order
 - c. Numerator- Appropriate combined abdomen CT orders
 - d. Denominator- Combined abdomen CT orders
 - e. **Goal \geq 90%**
- 7. Total Joint Replacements**
 - a. Stakeholders: Danielle Moran, TBD
 - b. Standard work items
 - i. Medical and social clearance
 - ii. Patient education
 - iii. Monitoring/follow-up
 - 1. Sub-items within each category
 - c. Numerator- TJR patients with all bundles
 - d. Denominator- Elective TJR patients
 - e. **Goal \geq 90%**
- 8. Hospital-Wide All Cause Unplanned Readmissions**
 - a. Stakeholders: Karyn Grow, Anna McGuire
 - b. Standard work items
 - i. TCM referral
 - ii. Follow-up with PCP within 14 days
 - c. Numerator- High risk discharges with bundle items
 - d. Denominator- High risk discharges, score \geq 3
 - e. **Goal \geq 90%**

Tahoe Forest Hospital
Standard Work Bundles
2024

The concurrent bundles are for internal tracking and not reportable to CMS. Previously we have tracked outcome measures, showing noncompliance with the quality metric. The concurrent bundle is being proactive to ensure compliance with the process measure to avoid a negative outcome. We are focused on standard work and adhering to it every time to ensure the best outcome for our patients. Tracking the bundles will be reported out in the form of a numerator (number of patients with quality metric bundle completed) and denominator (total number of patients being measured).