

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:00 a.m. Wednesday, November 17, 2021. The meeting was held virtually via the Microsoft Teams platform. The presiding officer was Mike Pruett, Chair.

A quorum was present, including:

Mike Pruett, Chair
Cherri Thomas, Vice-Chair
Leslie McNamara, Secretary
Tracy Shrable, Member
David Garcia, Member

Others present:

J. Scott Graham, Chief Executive Officer
Anita Fisk, Director of Human Resources
Jennifer Munson, Chief Financial Officer
Christine Smith, Assistant Chief Nursing Officer
Shauna Field, Administrative Assistant
Jennifer Best, Public Relations
Chad Schmitt, Chief Information Officer
Jamie Boyer, Clinic Manager
Grace Gordon, Director of Quality
Jennifer Bach, Accounting Controller
Rosie Poole, Materials Manager
Dr. Ty Witt, Chief Medical Officer
Rosie Hartmann, Revenue Cycle Director
Jeremy Vandelac, Ancillary Services Director
Felipe Aparicio, Privacy Officer

Vision, Mission & Values

All took turns reading the vision, mission, and values statements.

Scott opened the meeting by announcing the resignation of Chief Nursing Officer, Gretchen Aguilar. Tina Smith, Assistant Chief Nursing Officer, will be moving into the position and joining the Administration Team.

Agenda

A motion was made by L. McNamara to accept the agenda as official; seconded by C. Thomas. Motion carried.

Public Hearing and Comment

Resolution 2021-11: 2022 Budget and Capital Expenses – A public hearing to review the 2022 budget convened at 11:10 a.m. The budget is based on an average daily census of 3.37 inpatient and a daily average of 2 swing beds with revenue based on 20 surgeries per month. Lab revenue is projected for growth with an average daily volume of 59 and a total of 21,600 tests per year. The clinic is budgeted for 28 patients per day to meet target requirements for the Rural Health Clinic designation. Due to increased revenue this year, we will owe Medicare a 1M payable, so contractals have increased to

account for that. FTEs are budgeted for 110 positions with a 5% increase in nursing salaries and the new year increase to minimum wage of 5.8%. Increases for professional, locum fees, and COVID-19 supplies were also included. J. Munson projects a \$2.2M operating loss with a \$535K net profit. The capital purchase list will be approved later. We will be getting 252K in additional SHIP grant funds this year. The public hearing was closed at 11:14 a.m.

A motion was made by C. Thomas to accept the proposed 2022 budget; seconded by D. Garcia. Motion carried.

Public Hearing and Comment

Resolution 2021-12: 2022 Property Tax Levy Revenues – A public hearing to review the 2022 property tax revenues convened at 11:15 a.m. The resolution includes the standard 1% increase allowed by law. The public hearing was closed at 11:16 a.m.

A motion was made by L. McNamara to approve the resolution; seconded by C. Thomas. Motion carried.

Minutes from Previous Meeting

A motion was made by C. Thomas to approve the October 27, 2021 Regular Meeting minutes; seconded by L. McNamara. Motion carried.

Consent Items

M. Pruett noted the payroll and vouchers as listed on the agenda.

Payroll Total:	Gross:	<u>\$ 567,916.11</u>	Net:	<u>\$ 404,037.60</u>
<u>10/3/21 to 10/16/21</u>	Gross:	<u>\$ 286,002.55</u>	Net:	<u>\$ 204,531.63</u>
<u>10/17/21 to 10/30/21</u>	Gross:	<u>\$ 281,913.56</u>	Net:	<u>\$ 199,505.97</u>
Vouchers Total:				<u>\$ 1,443,081.40</u>
<u>10/15/2021</u>	<u>093754-093754</u>			<u>\$ 1,190.36</u>
<u>10/21/2021</u>	<u>093755-093806</u>			<u>\$ 475,919.94</u>
<u>10/28/2021</u>	<u>093807-093860</u>			<u>\$ 264,468.57</u>
<u>11/4/2021</u>	<u>093861-093913</u>			<u>\$ 437,604.68</u>
<u>11/11/2021</u>	<u>093914-093978</u>			<u>\$ 263,897.85</u>
Bad Debt:				<u>\$ 25,435.77</u>
Financial Assistance:				<u>\$ 80,019.16</u>

M. Pruett noted the applicants for medical staff privileges.

A motion was made by L. McNamara to accept the consent items as presented; seconded by C. Thomas. Motion carried.

Physicians Report

Dr. Witt presented the Physician's Report. The MedStaff bylaws were updated at their meeting today to include specific language regarding physician assistants per feedback received during the recent Department of Health survey. We have lost staff in radiology and are working to fill those open positions. There is an opportunity to partner with WSU Medical School for a study and grant regarding PAP smear availability in our district.

Administration Report

S. Graham presented the Administration Report. It has been a good year financially and our budget reflects that. We are off diversion and the COVID-19 outbreak among the staff has been resolved. Volumes are low but this could be due to the typical downturn we see during the fall and winter months. Dr. White will be returning in December. November's gross revenue is lower than what we would expect to see. We have 2 swing bed referrals.

Finance Report

J. Munson presented the Finance Report. October was a good revenue month. Inpatient and outpatient revenues were both overbudget. There was a daily average of 2.9 inpatient days, 272 ER visits, and 21 surgeries. Based on the ratio of our 2021 revenue vs expenses, the cost report model shows that we will owe Medicare a 1M payable. She is spreading the payment out over the rest of year and accrued an additional \$200K in October. She received the interim rate review from Medicare, but she is having QHR review her response before submitting it. Expenses were overbudget by 104K. Pharmacy supply costs were high as we are keeping 3-4 COVID-19 medications stocked to specific levels. There was a 333K operating loss and with tax revenues, a total loss of 126K for the month. If the payable to Medicare stays at 1M we will lose our 327K operating profit for the year. She will request an extension on the payment plan.

A motion was made by T. Shrable to accept the finance report as presented; seconded by D. Garcia. Motion carried.

Quality Report

G. Gordon presented the Quality Report. We have not received the results of the survey yet, but there will be citations regarding the quality program and reporting to the board. We have 980 policies and procedures with 471 due for review. Annual review is not required by CMS so all policies will move to a 2-year review date. We are prioritizing those policies identified by DOH to update for the ER, OR, and anesthesia departments. She will work with PolicyStat on the best way to document a policy was approved by the board. We need to improve on identifying, tracking, and presenting our quality indicators. A spreadsheet of current indicators and safety event data was provided to the board to review. Grace has contacted and resolved all patient complaints and grievances for the year and the DOH found no fault in that process. Every year the Board will need to approve an annual Quality Improvement Plan and a Compliance Plan. S. Field will contact the board members individually to help them log into their PolicyStat accounts in order to review and acknowledge necessary policies.

New Business

Policy and Procedure Approval - A motion was made by L. McNamara to approve the policies listed below; seconded by C. Thomas. Motion carried.

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- Non-retaliation, Whistleblower Protection
 - Patient Complaints and Grievances
 - Privacy Practices Manual
 - Quality Improvement Program Plan
 - Safety Event Reporting and Management
 - Serious Adverse Events

Public Comment

Gretchen's last day is scheduled for January 5, 2022. Whether another Assistant CNO is hired will depend on the department structure decided on by Tina.

Upcoming Meetings & Events

M. Pruett noted the upcoming meetings and events listed on the agenda. The next regular Board meeting will be held on December 22, 2021.

Adjournment

A motion was made by C. Thomas to adjourn the meeting at 11:47 a.m.; seconded by L. McNamara. Motion carried.

Mike Pruett, Board Chair

Cherri Thomas, Board Vice Chair

Tracy Shrable, Board Secretary

Leslie McNamara, Board Member

David Garcia, Board Member