



The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:16 a.m. Wednesday, July 27, 2022. The meeting was held in the McKinley Building Conference Room at 507 Hospital Way, Brewster WA 98812 and virtually via the Microsoft Teams platform. The presiding officer was Mike Pruett, Board 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  
Tina Smith, Chief Nursing Officer  
Anita Fisk, Human Resources Director  
Dr. Ty Witt, Chief Medical Officer  
Shauna Field, Administrative Assistant  
Jennifer Best, Business Development Coordinator  
Jamie Boyer, Clinic Manager  
Jeremy Vandelac, Ancillary Services Director  
Jennifer Bach, Accounting Controller  
Malinda Valdovinos, Dietary Manager  
DJ Dinjian, Environmental Services Manager  
Rosie Hartmann, Revenue Cycle Director  
Rosie Poole, Central Supply Manager  
Amanda Swartsel, Ultrasound Technician

### **Vision, Mission & Values**

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

### **Agenda**

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

### **Minutes from Previous Meeting**

A motion was made by L. McNamara to approve the May 25, 2022 Regular Meeting Minutes; seconded by D. Garcia. Motion carried.

### **Public Comment**

M. Pruett joined the staff at the recent Twisp Farmers' Market outreach event and complimented everyone on how well the event went.

### Consent Items

M. Pruett noted the payroll, vouchers, and Medical Staff applications as listed on the agenda. L. McNamara recused herself from approving the 7/14/22 vouchers due to an invoice from Grover's Building Supply.

#### Payroll/Vouchers

Payroll Total:	Gross: <u>\$ 1,136,037.36</u>	Net: <u>\$ 815,957.36</u>
<u>5/15/22 to 5/28/22</u>	Gross: <u>\$ 276,150.83</u>	Net: <u>\$ 195,685.66</u>
<u>5/29/22 to 6/11/22</u>	Gross: <u>\$ 295,978.27</u>	Net: <u>\$ 214,223.81</u>
<u>6/12/22 to 6/25/22</u>	Gross: <u>\$ 275,995.92</u>	Net: <u>\$ 198,480.75</u>
<u>6/26/22 to 7/09/22</u>	Gross: <u>\$ 287,912.34</u>	Net: <u>\$ 207,567.14</u>

Vouchers Total:	<u>\$ 3,065,670.83</u>
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<u>5/24/2022</u>	<u>095545-095545</u>	<u>\$ 13,110.84</u>
<u>5/26/2022</u>	<u>095546-095615</u>	<u>\$ 260,237.73</u>
<u>6/2/2022</u>	<u>095616-095661</u>	<u>\$ 370,512.56</u>
<u>6/9/2022</u>	<u>095662-095713</u>	<u>\$ 273,621.68</u>
<u>6/16/2022</u>	<u>095714-095743</u>	<u>\$ 431,412.78</u>
<u>6/17/2022</u>	<u>095744-095745</u>	<u>\$ 214,223.81</u>
<u>6/23/2022</u>	<u>095746-095797</u>	<u>\$ 355,757.98</u>
<u>6/30/2022</u>	<u>095798-095829</u>	<u>\$ 396,625.57</u>
<u>7/7/2022</u>	<u>095830-095848</u>	<u>\$ 364,686.44</u>
<u>7/14/2022*</u>	<u>095849-095879</u>	<u>\$ 385,481.44</u>

June Bad Debt:	<u>\$ 56,783.22</u>
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June Financial Assistance:	<u>\$ 19,209.23</u>
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July Bad Debt:	<u>\$ 55,542.06</u>
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July Financial Assistance:	<u>\$ 25,226.31</u>
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June Medical Staff Applications

July Medical Staff Applications

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

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**Employee Spotlight**

Amanda Swartsel is an ultrasound technician in our Radiology Department. She discussed her duties which include performing well checks and infant checks, how the purchase of a new ultrasound machine has improved our services, and the addition of echocardiogram services.

**Foundation Report**

J. Best presented the Foundation Report. The Foundation is working with our grant writer on how to spend the grant funds received from the Roots and Wings Foundation, as well as running a "Vote Yes" campaign for the upcoming levy. They are reviewing quotes for equipment purchases and we've asked them to consider covering the 18k costs for the RFID security doors.

**Physicians Report**

Dr. Witt presented the Physicians Report. Staff is being trained on the new patient portal, My Care Corner. Our informatics nurse, Mike Oberg, has been doing well and made improvements to workflows and provider onboarding. Dr. Ellingson will be going on a 3-month sabbatical at the end of August, but Dr. Amy Van Milligan will be providing coverage. Greg Fisk will be joining the staff, providing part time services two days a week. We performed 32 surgeries in June. Our new echocardiogram tech is hitting their maximum scheduling potential and looking to expand hours. There were some surgeries that needed to be rescheduled due to equipment issues, but the cases were successful. There have been nationwide supply chain issues impacting pharmacy and lab supplies, as well as lab staff shortages. We have been working with CPSI and Medication Review to improve our medication order and verification processes. For contrast media, we are looking into direct shipments from the manufacturer instead of our current vendor. 8-9 MRIs needed to be rescheduled due to a breakdown of our mobile MRI unit. The revised MedStaff bylaws are pending legal review.

**Administration Report**

Volumes have been lower than expected. We've had only 16 surgeries in July. Hospitals statewide are struggling with staffing shortages and the cost of hiring travelers. If volumes continue to be low we will likely need to rethink our strategic plan in August and examine our service lines. We received an 800k grant from the Healthcare Authority to put toward services for underserved and uninsured patients. We are pursuing a similar grant in the same amount to help cover outstanding COVID-19 claims.

**Finance Report**

S. Graham presented the Financial Report. In June we had an operational loss of 195k, 2.1M in gross revenue, 17k for net revenue, and 24 days of cash on hand. Expenses were 1.4M. In order to reach operational breakeven, we need a monthly revenue of 2.3M. Staffing costs are higher this year. In May, we saw a 324k operating loss, 1.5M in expenses, and a negative bottom line of 113k.

HIM and the billing office are up to full staff and claims are being processed faster. With the new staff and the proposals under new business, we should see the number of AR days come down. They are working with CPSI on improvements for provider documentation and charting and automated processes for coding and chargemaster. R. Hartmann has been tracking the status of outstanding claims and contacting representatives at payer's offices regularly. The percentage of clean claims has increased to 56%. C. Thomas requested the rate be tracked as a quality improvement indicator. L. McNamara asked for an update on getting better Medicare rates; no progress at this time.

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

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**Break**

A twenty-minute break was held between 12:47 p.m. – 1:07 p.m.

**IT Report**

Anita Fisk presented the IT Report. Due to increased temperatures and potential damage caused by excessive heat, the IT department has plans in place in case of a heat related event. The HIT Committee is doing well identifying and cataloging system enhancements. The vendor transition in radiology to AMBRA and Inland Imaging is complete. 80% of our ER imaging reads are coming back within 30 minutes. Future projects include upgrading the phone system and implementing a badge scanning system.

**Quality Report**

S. Graham presented the Quality Report. The Quality Council is meeting quarterly and at the last meeting focused on the 2022 departmental quality improvement plans. So far there has been good compliance with objectives. The board requested a regular report be submitted on the progress of the improvement goals. In future meetings, the council will be tracking safety incidents such as any falls with injury, medication events, OR complications, and infection control. Patient satisfaction scores overall were 80% and above, but the return rate for surveys is low. The ER and Clinic received scores over 90%. Overall comments were very positive. We had no hospital acquired infections in 2022 until June when we had four incidents. Three cases were COVID-19 related. COVID-19 precautions and protocols were in place and the source of the outbreak could not be determined. The fourth was a UTI which may have been pre-existing, but we were unable to confirm. In the past 90 days there were six safety events involving falls and medications. Three were classified as no harm to the patient, three were classified as mild/moderate harm. There were four “near miss” events with no harm. We continue to look for a candidate to fill the open Quality Director position.

A motion was made by C. Thomas to accept the Quality Report; seconded by L. McNamara. Motion carried.

**Marketing Report**

J. Best presented the Marketing Report.

Signage Committee – She is drafting a campus map with our fire plan and working with Building and Planning on getting new speed limit signs and speed bumps for the parking lot.

Community Outreach – We had record staff participation in the parades this year. Jennifer will be coming back onsite in October for the TRH Health Fair. She is working on improving our online presence with the company Rater8. Fletcher Ellingson has offered to assist with more direct community outreach.

Clinic “How Did You Hear About Us” Survey – Responses have slowed down. We’ve received 153 surveys showing word of mouth and referrals as the most common answer. Survey responses from our Spanish speaking patients listed our newsletter.

The next issue of our newsletter will go out in mid-August. The group reviewed Jennifer’s drafts of our logo rebranded as Three Rivers Health but there were concerns discussed about the cost of rebranding and if we should wait to see what happens with a new building. Jennifer will gather more information on the potential cost. Her marketing expenses for the year are underbudget at 26k out of 80k allocated. For the levy proposition, she has sent a press release, updated our website, and gave a radio interview on

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the 11<sup>th</sup>. L. McNamara asked how we respond to negative comments on social media; Jennifer responds privately and, in the future, will post publicly to that effect so it does not look like we are ignoring feedback. She will also look into moderating comments before they are posted.

#### **Old Business**

**Capital Improvements:** The old gravel around the hospital has been removed and new irrigation lines have been installed to prepare for the new flowerpots. The Maintenance Department has been pressure cleaning and resealing the roof. Dave Franklund has completed seismic reports showing the hospital grounds are solid enough for construction. He will next be onsite on August 2<sup>nd</sup> and 3<sup>rd</sup> to assess the building for renovation costs.

#### **New Business**

**Resolution 2022-07: 2023 Levy Resolution (for November ballot):** A second resolution to submit for the November ballot in case the levy does not pass in August. A motion was made by L. McNamara to approve the resolution; seconded by C. Thomas. Motion carried.

**Hospital Purchases – RFID Doors, Clinic Parking Lot Repairs:** A proposal from the Building and Planning Committee to improve safety and security of the hospital by purchasing new RFID security doors and fixing the clinic parking lot. The vendor quote for repairs to the parking lot increased significantly from their previous quote. The Maintenance Department will be able to lay the new asphalt themselves for approximately \$2,000. A motion was made by L. McNamara to approve the cost of purchasing the doors (\$18,910.43) and parking lot repairs; seconded by C. Thomas. Motion carried.

**Private Pay Outsourcing:** R. Hartmann proposed changing our self-pay vendor from Access One to HELP Financial to improve collections on the 1.5M in outstanding self-pay accounts receivable. A motion was made by C. Thomas to approve the vendor change; seconded by D. Garcia. Motion carried.

**Chargemaster Review:** Our chargemaster review was last completed in 2017 and should be done every 2-3 years. R. Hartmann proposed using TruBridge for our review as they are already part of CPSI, familiar with our operations, and have given us a discount. A motion was made by L. McNamara to approve the chargemaster review; seconded by T. Shrable. Motion carried.

**Coding Software Update:** R. Hartmann proposed changing our coding software from 3M to TruCode for ease of use and to improve business office function. A motion was made by C. Thomas to approve the software change; seconded by D. Garcia. Motion carried.

#### **Upcoming Meetings & Events**

M. Pruett noted the upcoming schedule of meetings and events. The Finance Committee meeting will be held on August 29, 2022.

#### **Executive Session – RCW 42.30.110(g)**

**To evaluate the qualifications of an applicant for public employment or to review the performance of a public employee.**

A 15-minute executive session was held between 2:23 p.m. – 2:38 p.m. extended by 3 minutes per request. No action was taken. The public meeting reconvened at 2:41 p.m.



## Three Rivers Hospital

Board of Commissioners Regular Meeting

July 27, 2022 Minutes

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### Adjournment

A motion was made by L. McNamara to adjourn the meeting at 2:41 p.m.; seconded by D. Garcia.  
Motion carried.

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Mike Pruett, Board Chair

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Cherri Thomas, Board Vice Chair

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Leslie McNamara, Board Secretary

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Tracy Shrable, Board Member

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David Garcia, Board Member