

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:07 a.m. Wednesday, December 28, 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, 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  
Jennifer Munson, Chief Financial 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  
German Meza, Quality Director  
Malinda Valdovinos, Dietary Manager  
Rosie Hartmann, Revenue Cycle Director  
Zac Allison, Radiology Technician  
Mike Oberg, Informatics RN  
DJ Dinjian, Environmental Services  
Dan Webster, Foundation Chairman  
Becky Fluegge, Clinic RN

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

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

### **Agenda**

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

**Minutes from Previous Meeting**

A motion was made by C. Thomas to approve the November 29, 2022, Regular Meeting Minutes; seconded by L. McNamara. Motion carried.

**Public Comment**

L. McNamara advised that a recent visit to the clinic did not generate a patient satisfaction survey.

**Consent Items**

M. Pruettt noted the payroll, vouchers, and Medical Staff applications as listed on the agenda.

Payroll Total:	Gross: <u>\$ 512,825.25</u>	Net: <u>\$ 372,279.82</u>
<u>11/13/22 to 11/26/22</u>	Gross: <u>\$ 249,385.23</u>	Net: <u>\$ 180,843.99</u>
<u>11/27/22 to 12/10/22</u>	Gross: <u>\$ 263,440.02</u>	Net: <u>\$ 191,435.83</u>
 Vouchers Total:		<u>\$ 1,287,788.82</u>
<u>12/1/22 to 12/2/22</u>	<u>096702-096744</u>	<u>\$ 463,157.72</u>
<u>12/8/2022</u>	<u>096745-096839</u>	<u>\$ 364,797.83</u>
<u>12/15/2022</u>	<u>096840-096887</u>	<u>\$ 459,833.27</u>
 Bad Debt:		<u>\$ 60,162.09</u>
Financial Assistance:		<u>\$ 13,654.25</u>

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

**Employee Spotlight**

Becky Fluegge, Clinic RN, has been with the clinic for four years and spoke about how she views her position as an advocate for patients and enjoys participating in our community outreach events. She looks forward to helping develop wound care services in the clinic.

**Foundation Report**

Dan Webster presented the Foundation Report. He provided an overview of the Foundation’s activities in 2022 including assisting with levy promotion, nurse appreciation, holiday gift baskets for staff and patients, youth sports physicals and equipment purchases including the new RFID doors. They will be receiving another 35k grant from the Roots and Wings Foundation. M. Pruettt asked about the terms of the grant; the parameters are loose but focused on patient care, bolstering rural hospitals, and healthy communities and children. He thanked the TRH staff for their donations through payroll deductions. They spent 24k in 2022 on purchases and activities for the hospital and currently have a 82k balance. They added two new members to the board, Jocelyn Murray and Elizabeth Boyd.

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**Physicians Report**

Dr. Witt presented the Physicians Report. The MedStaff bylaws and policies have been reviewed by the legal team and are ready for board review. T. Shrable asked about the large number of revisions to the bylaws; much of the content removed was policy related and the policies have been moved into our policy management system, PolicyStat. The meetings will move to a quarterly basis and the time moved to noon. Dr. Eric Ebaugh will join us on 2/13 as our new general surgeon. We have been having trouble and delays with transferring ER patients to higher levels of care and ICUs due to short staffing and service closures at other facilities. Mike Oberg has been working with our providers to improve charting procedure and transition to Notes in CPSI. The group discussed adding a board member to the quality portion of the MedStaff meetings. We received a letter from CMS regarding a lack of reporting on meaningful use data which we are investigating with the Quality Council. M. Pruett spent some time with a representative at Confluence discussing ways to improve collaboration and referrals between our organizations.

**Administration Report**

S. Graham presented the Administration Report. He discussed the hospital's goals and priorities for 2023 which included our financial viability, staffing, the building, emergency preparedness, collaboration, and legislative advocacy. Staffing will continue to be a challenge. Volumes continue to be low and we are monitoring to determine if it is a temporary lull or an overall trend going forward. Swing bed referrals are trending downward throughout the region. We have formed a swing bed task force that is meeting regularly. We are recruiting for an additional clinic provider. A new building is needed but requires time and investment and our debt capacity may impede the process. We need to increase our work with local legislators, WSHA, and the hospital associations regarding upcoming legislation that may hurt rural hospitals. Scott and Leslie will be attending the WSHA Advocacy Day in February. We are arranging for a mock survey to be performed in the coming months to prepare for the next Department of Health state survey. Security and safety will be a primary focus with plans to conduct safety drills and training. We would like to expand our kitchen services to include offering a menu to visitors. With new leadership recently in other facilities we will have new opportunities for collaboration and sharing resources. Notable accomplishments included hiring a new CNO, informatics nurse, and quality director as well as getting a new building concept off the ground, equipment purchases, and the RFID installation.

**IT Report**

M. Oberg presented the IT Report. Since coming on in March as our Informatics RN he has been working with our ER providers on improving system use, workflows, and charting and streamlining the physician onboarding process. Upcoming projects will be focused on standardization, documentation integrity, and implementation of Lippincott for nursing. CPSI has been meeting with us weekly to address issues and concerns. We will be implementing the HR module, 3R, in the new year and Patient Connect which is a scheduling and communication application for patients. The HIT Committee has been meeting regularly to identify areas for improvement. We are planning on sending staff to the May CPSI training in Orlando.

**Break**

A break was held between 12:40 p.m. – 1:00 p.m.

**Finance Report**

J. Munson presented the November Finance Report. Noridian notified us our rates will be adjusted and we will receive a lump sum 967k receivable. Outpatient rates will increase to 68%, swing bed will increase to \$5,000 per day and inpatient rates to \$5,200 per day. For November, we saw 118 patient

days, with a daily average of 3.94, 310 ER visits, 8 surgeries, and 347 clinic visits. We ended the month with 2.1M in cash for 45 days of cash on hand. She moved 2.5M into our investments in anticipation of the 967k payment. 51% of our net revenue went to salaries. AR days were at 128. Our total patient revenue was 1.7M with 1.4M in expenses with an operating loss of 469k and net loss of 241k. M. Pruettt asked about a credit on the finance report; it was a correction on 57k in prepaids that DZA moved out and expensed in 2021 for an overdraft check which should have been put into cash. Our year to date operating loss is 2.8M. C. Thomas asked for clarification on the meaningful use reporting issue; we received a letter from CMS regarding a lack of reporting which doesn't include much detail or a number to call for questions. It was possibly received in error. Quality is investigating what data is required, what is being reported, and to who. C. Thomas asked when we could expect our AR days to come down to an acceptable level; R. Hartmann is working with six of our largest payers on outstanding claims and they have committed to reviewing and submitting those claims for processing. The self-pay accounts are being transferred to HELP Financial. Our clean claim rate is at 75%. Current AR days are at 122. Last year we had 5,000 claims pending but that is down to 367 with the improvements in the business office systems and processes. The business office is also reviewing their claims for accuracy before sending them to the payers. The transition to the new coding software, TruCode, went smoothly. L&I claims are going out cleanly. J. Munson updated her cash flow projections and anticipates we will end the year in a positive cash position but if revenue does not increase above 1.8M, our cash will run out by December of next year. The advanced Medicare payment has been completely repaid.

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

### **Quality Report**

G. Meza presented the Quality Report. We had two falls with injury in 2022, one in May and one in October. We've had no medication events since June, with one near miss in August. There was a question on if the low incident rate might be due to a lack of reporting. C. Smith will investigate with the pharmacy. There was one surgical complication and hospital acquired infection in October that involved the same patient. For patient satisfaction surveys in November the ER saw a score of 89.8% with 9 surveys returned, no surveys returned for inpatient, and 94.4% in the clinic with 16 surveys. Inpatient saw a score of 81.4% in December with 4 surveys. He is working with department leaders on their quality improvement plans and arranging a mock survey in order to prepare for the next state Department of Health survey. He is also working on a root cause analysis for an issue regarding patients and providers who did not receive mammography result letters.

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

### **Marketing Report**

J. Best presented the Marketing Report. The group reviewed the Spring/Summer 2023 newsletter and provided feedback on the content, cover, and paper quality. The next issue will highlight Dr. Ebaugh and general surgery. She is working on our ad for The Chronicle's 2023 Infobook as well as promotion and introductions for Dr. Ebaugh on our website, social media, and with Family Health Center providers.

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**Old Business**

**Capital Improvements:** J. Munson is working with DZA and Jody Corona on completing the feasibility study for a new building. More information to come in the new year. The RFID door installation is close to completion.

**New Business**

**Part Time Benefits Proposal** – Our insurance carrier requires the employer to cover 75% of the premium so the proposal was updated to reflect this. The union has signed off on the agreement. The benefits package will include sick leave accrual. If we can recruit part time nurses by offering a benefits package, this will decrease the amount we spend on travelers. Anita recommends adopting the proposal and making it effective January 1, 2023. A motion was made by C. Thomas to approve the benefits package; seconded by T. Shrable. Motion carried.

**MedStaff Bylaws and Officer Elections** – A motion was made by L. McNamara to approve the revised MedStaff bylaws and officer elections; seconded by D. Garcia. Motion carried.

**Board Officer Elections** – A motion was made by L. McNamara to keep the same officer positions in 2023; seconded by C. Thomas. Motion carried.

**Committee Assignments and Meeting Schedule** – A motion was made by L. McNamara to keep the same committee assignments and meeting schedules for 2023; seconded by D. Garcia. Motion carried.

**Upcoming Meetings & Events**

M. Pruett noted the upcoming schedule of meetings and events. The MedStaff meeting will move to quarterly meetings.

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

An executive session was held between 2:27 p.m. – 3:00 p.m. with a 15-minute extension requested. The public meeting reconvened at 3:15 p.m.

**Adjournment**

A motion was made by L. McNamara to adjourn the meeting at 3:15 p.m.; seconded by C. Thomas. 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