

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:03 a.m. Wednesday, March 29, 2023. 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, Board Chair  
Cherri Thomas, Vice Chair  
Leslie McNamara, Secretary  
Tracy Shrable, Member  
David Garcia, Member

Others present:

J. Scott Graham, Chief Executive Officer  
Anita Fisk, Human Resources Director  
Jennifer Munson, Chief Financial Officer  
Dr. Ty Witt, Chief Medical Officer  
Shauna Field, Administrative Assistant  
Jennifer Best, Business Development Coordinator  
Jeremy Vandelac, Ancillary Services Director  
German Meza, Quality Director  
Malinda Valdovinos, Dietary Manager  
Rosie Hartmann, Revenue Cycle Director  
Zac Allison, Radiology Supervisor  
DJ Dinjian, Environmental Services Manager  
Mike Oberg, Informatics RN  
Rob Wylie, Facilities and Maintenance Manager  
Jennifer Bach, Accounting Controller  
Isaura Ochoa, Insurance Specialist

### **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 by D. Garcia. Motion carried.

### **Minutes from Previous Meeting**

A motion was made by L. McNamara to approve the February 22, 2023 Regular Meeting Minutes; seconded by C. Thomas. Motion carried.

**Public Comment**

None.

**Consent Items**

M. Pruett noted the payroll, vouchers, and Medical Staff applications as listed on the agenda. L. McNamara recused herself from approving the 3/16/23 vouchers due to an invoice from Grover’s Building Supply.

|                          |                             |                           |
|--------------------------|-----------------------------|---------------------------|
| Payroll Total:           | Gross: <u>\$ 835,473.50</u> | Net: <u>\$ 604,720.14</u> |
| <u>2/5/23 to 2/18/23</u> | Gross: <u>\$ 257,754.86</u> | Net: <u>\$ 187,722.02</u> |
| <u>2/19/23 to 3/4/23</u> | Gross: <u>\$ 292,962.80</u> | Net: <u>\$ 207,925.13</u> |
| <u>3/5/23 to 3/18/23</u> | Gross: <u>\$ 284,755.84</u> | Net: <u>\$ 209,072.99</u> |
| <br>Vouchers Total:      |                             | <u>\$ 1,981,110.64</u>    |
| <u>2/23/2023</u>         | <u>097464-097497</u>        | <u>\$ 407,739.34</u>      |
| <u>2/24/2023</u>         | <u>097498-097498</u>        | <u>\$ 3,792.96</u>        |
| <u>3/2/2023</u>          | <u>097499-097553</u>        | <u>\$ 298,544.16</u>      |
| <u>3/9/2023</u>          | <u>097554-097597</u>        | <u>\$ 463,834.10</u>      |
| <u>3/16/2023*</u>        | <u>097598-097665</u>        | <u>\$ 355,210.79</u>      |
| <u>3/23/2023</u>         | <u>097666-097814</u>        | <u>\$ 451,989.29</u>      |
| <br>Bad Debt:            |                             | <u>\$ 27,763.04</u>       |
| Financial Assistance:    |                             | <u>\$ 45,156.69</u>       |

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

**Employee Spotlight**

Isaura Ochoa, Insurance Specialist, started with the hospital one year ago as a per diem in ER registration before moving into her current billing role. She appreciates the trust R. Hartmann puts in her as an employee to examine the billing system for areas of improvement and the flexibility of the position.

**Foundation Report**

The next meeting is scheduled for May 4<sup>th</sup> at 9:30 a.m. Their funds are currently at 90k.

**Physicians Report**

Dr. Witt presented the Physicians Report. The first quarterly MedStaff meeting was well attended by 11 providers as well as leadership and support staff. Peer review was completed by Dr. Harris. All committees were assigned and Dr. Ebaugh was established as the new surgery department chair. Surgery numbers have increased and include referrals from the ER and surgeries that have not

previously been performed at the hospital. The new interface between Medication Review and CPSI is in the testing phase. LifeFlight completed a hot load training (loading a patient while the helicopter is running) with the nursing staff during their competency day. L. McNamara asked about CT downtime during upgrades or outages; the issue is infrequent, but we do not have a backup due to size of the machinery and cost. Patients may need to be diverted during those times.

### **Administration Report**

S. Graham presented the Administration Report. Despite increases in swing bed and surgery, volumes and revenue continue to be lower than expected for March. Leadership is controlling costs where they can but professional fees for locum staff to cover staffing shortages keep our expenses high. The CHART alternative reimbursement model has been formerly withdrawn. Scott and Jennifer Munson will be attending a webinar on the Rural Emergency Hospital model. March operations: 19 surgeries, averages for swing bed are 1.74, 1.07 for inpatient and 8 for the ER, gross revenue of 1.5M. Expenses are at 1M with labor costs at 80%. Days of cash on hand are at 35 with AR days at 115. We are reviewing the plan of corrections from our last state survey, working on survey etiquette with the staff and organizing mock survey walkarounds to prepare for this year's survey. The new bus stop shelter has been installed. L. McNamara asked about the recent Women's Ski Day event at the Loup; Roy Huffstetler attended with M. Pruettt to provide information on our women's health services. M. Pruettt suggested the hospital attend Twisp and Winthrop Chamber meetings once or twice a year to provide information and updates.

### **Finance Report**

J. Munson presented the February Finance Report. Our swing bed volumes saw an increase with an average daily census of 2.5 and a total of 70 swing bed days. Outpatient, surgery, and ancillary services were under budget for revenues. We had 1M in our general fund, 2.5M for investments, and 750k in the bond fund. FTEs were at 87.7 with 35% of our net revenue going to salaries. Contractuals were at 17%. AR days were 117. Outpatient revenue was 474k under budget. The cafeteria brought in \$2,700. We received a payment of 15k from Coordinated Care for meeting their quality indicators. There was 1.3M in net revenue, 1.4M in expenses, and an operating loss of 30k but a net gain of 194k. If we can get to 5 swing beds per day and meet our surgery goals, we can achieve operational breakeven.

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

### **Break**

A break was held between 12:09 p.m. – 12:37 p.m.

### **IT Report**

M. Oberg presented the IT Report. Amy Thomas will be taking over the CIO position. The department is helping with the 3R rollout which will go live on May 15. Scaled Data donated a server set for the implementation of the GE patient monitoring interface and a new interface switch for the lab analyzer. Mike has been working with the ER to identify areas for improvement with documentation and medication ordering. Our cyber insurance is up for renewal. We've had no identified attempts on or breaches of our cyber security.

### **Quality Report**

G. Meza presented the Quality Report. We've had no new safety events since the beginning of the year. The February medication scan rate was 96%. For February, ER patient satisfaction scores were 87% based on 10 returned surveys, inpatient was 85% with 3 returns, and the clinic was 95% with 21 surveys.

There were some negative comments regarding having more menu options for meals which will be forwarded to dietary. He will be presenting trauma, chest pain, stroke and antibiotic therapy metrics in future meetings but wants to fine tune the presentation of the data. There was one trauma case in the first quarter, 6 head CTs, and 24 cases for chest pain. Current Quality projects include reviewing the previous state survey's plan of corrections, 2023 quality improvement plans, developing a survey prep guide, and EOC mock survey walkthroughs. They are focusing improvement plans around the Plan Do Study Act model. Emergency and disaster planning will also be a focus this year and will include safety and active shooter drills.

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

### **Marketing Report**

J. Best presented the Marketing Report. Current projects include advertising for ortho and senior services, completing an inventory of PR supplies, ordering more promo materials and logo swag for community events and parades, updating our service brochures, updating the language of our swing bed program to transitional care program, provider postcard mailers, and staff committee work for Hospital Week, Nurse's Week, fundraisers, and the Daisy Program. The next issue of our newsletter is on track for June. She is exploring other vendors who provide heavier weight paper. The group discussed a proposal to work with Tim Matsui on a transitional care program video advertisement. The cost would be 10-15k. The video could act as a virtual tour and business card for our services and facility which could be posted to our website and social media. The Board members approved the project. Recent and upcoming community events include: the Women's Ski Day event at the Loup, parent meetings at the local schools, Bridgeport Seedling Resource Fair, and the Boys and Girls Club golf tournament. Dr. Ellingson would like to provide a monthly calendar of our provider services and schedules to improve communication with other facilities. Jennifer is working with Quality to resolve a patient complaint that originated on social media.

### **Old Business**

**Capital Improvements:** Landscaping and beautification of the grounds is continuing now the weather allows. Maintenance has nearly finished the new flooring in the McKinley Building hallway. We are continuing to explore options for the new building regarding funding, feasibility, and design. We will be working with the architect to scale down his design to fit our debt capacity. If we do not run a bond levy for financing the new building this year, we will need to file for another M&O levy by the end of May.

### **New Business**

Okanogan Public Health has made a request for regional facilities to continue masking requirements after the statewide mandate has ended but there are concerns about the ability to recruit and retain staff and community pushback. Senior leadership suggests keeping the requirement in place for the ER and acute care, as well as with patients exhibiting respiratory symptoms. Masks will be optional in all other areas of the hospital. The Board approved this policy update.

### **Upcoming Meetings & Events**

M. Pruettt noted the upcoming schedule of meetings and events. The Achieving Governance Momentum in an Uncertain Environment webinar will be available on the WSHA Governance Education portal on April 5, 2023.

**Adjournment**

A motion was made by L. McNamara to adjourn the meeting at 2:03 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