

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:01 a.m. Wednesday, April 26, 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  
Tina Smith, Chief Nursing Officer  
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  
Amy Thomas, Chief Information Officer  
Rosie Hartmann, Revenue Cycle Director  
Jamie Boyer, Clinic Manager  
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  
Rosie Poole, Materials and HIM Manager  
Dan Webster, Foundation President  
Matt Ellsworth, Director of AWPHD  
Matthew Schuh, Community Member  
Ellie Mota-Nolasco, CNO Administrative Assistant

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

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

### **Agenda**

The order of the agenda was changed to move the Employee Spotlight to after the consent items and the break before the Financial Report. Discussion on purchasing a Dermatome was added to New Business.

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

**Minutes from Previous Meeting**

A motion was made by L. McNamara to approve the March 29, 2023 Regular Meeting Minutes; seconded by C. Thomas. Motion carried.

**Public Comment**

L. McNamara suggested contacting the Methow Valley Senior Center to see if they could transport elderly patients here with their charter bus. M. Pruett and C. Thomas attended the Aero Methow conference at Sun Mountain Lodge where Dr. Witt was a guest speaker.

**Consent Items**

M. Pruett noted the payroll, vouchers, and Medical Staff applications as listed on the agenda. L. McNamara recused herself from approving the 4/20/23 vouchers due to an invoice from Grover’s Building Supply.

Payroll Total:	Gross: <u>\$ 573,033.93</u>	Net: <u>\$ 417,616.06</u>
<u>3/19/23 to 4/1/23</u>	Gross: <u>\$ 295,040.22</u>	Net: <u>\$ 214,339.86</u>
<u>4/2/23 to 4/15/23</u>	Gross: <u>\$ 277,993.71</u>	Net: <u>\$ 203,276.20</u>
Vouchers Total:		<u>\$ 1,591,375.83</u>
<u>3/30/2023</u>	<u>097815-097867</u>	<u>\$ 317,656.21</u>
<u>4/6/2023</u>	<u>097868-097914</u>	<u>\$ 439,034.40</u>
<u>4/13/2023</u>	<u>097915-098002</u>	<u>\$ 390,377.97</u>
<u>4/20/23*</u>	<u>098003-098042</u>	<u>\$ 444,307.25</u>
Bad Debt:		<u>\$ 4,946.83</u>
Financial Assistance:		<u>\$ 37,525.52</u>

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

**Employee Spotlight**

Ellie Mota-Nolasco, CNO Administrative Assistant, helps with nurse staff schedules, payroll, onboarding, and quality measures and reports. She participates in employee committees and has been working with the CORE Committee to revamp our DAISY Award program.

**AWPHD Education w/ Matt Ellsworth, Director of AWPHD**

Matt Ellsworth, Director of the AWPHD, works with legislators and helps hospitals develop funding strategies. He presented a guide on ballot measures, decision making, policies, and how to approach the community when trying to fund and build a new facility.

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**Foundation Report**

Dan Webster presented the Foundation Report. They have been working with the hospital on equipment purchases. The current bank balance is 86k. They are offering five nursing scholarships to the local schools. The deadline to apply is May 31<sup>st</sup>. The next Foundation meeting is scheduled for Thursday, May 4 in Twisp at 1:00 p.m. The Foundation is willing to assist with the new building initiative and fundraising.

**Physicians Report**

Dr. Witt presented the Physicians Report. The new providers are building their practices. ERx has merged into StatUS and they are working to recruit a new site director for us within the next two months. The next MedStaff meeting is scheduled for June.

**Break**

A break was held between 12:51 p.m. – 1:15 p.m.

**Administration Report**

S. Graham presented the Administration Report. Scott presented our operational pillars and WIGs, which include quality and safety, financial viability, just culture, communication, community partnership and collaboration, and bringing our best every day to create the ideal patient experience. In future meetings, discussions on strategic planning will be a standing item. To break even operationally and stay financially viable we need an average daily census of 3 in both inpatient and swing bed, 22 surgeries per month, and 30 clinic visits per day. Concerns about volume, reimbursement, the age of the building, duplication perception, and staff shortages have continued over the past 8 years. Many strategic initiatives have been accomplished including moving the ER, roof repair and maintenance, improved IT services, paying off our warrants, purchasing new equipment, investing in our culture, promoting our services, and establishing a rural health clinic.

ER volumes have been low, which has impacted metrics across all other departments and so we need to examine whether to continue with our current plans or change strategy. Expenses are exceeding our revenue, although cash collections are good right now, but this is due to collecting on old account balances. C. Thomas discussed the need for more community outreach.

To be competitive with other facilities, we'll need to make improvements to our swing bed program such as providing a full suite of therapy services, an activities room and director, and transportation. Referral volumes are down. We are working on outreach to other facilities and the community, but lack of local amenities and distance create barriers. Administration is requesting an additional FTE to hire a full-time program coordinator for marketing, PR, and networking. The new position would be an investment that would pay for itself if we can attract more swing beds. A motion was made by C. Thomas to approve the position; seconded by L. McNamara. Motion carried.

**Finance Report**

J. Munson presented the March Finance Report. Total patient revenue was 1.7M, net revenue was 1.5M. We had a 65k operating loss, but a 161k profit after contractual adjustments. There were 19 surgeries, but all other volumes were low. We had 2M in cash collections, which improved our cash flow projections but maintaining our revenue continues to be a concern. AR days at the end of March were 109 and currently are 113 because revenue is dropping. Our clean claim rate was 69%, with 95% on the first pass submission, and a denial rate of 13%. Paid claims are at 92%. R. Hartmann will be meeting with Gebbers next week to discuss billing for H-2A workers.

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

### **IT Report**

Amy Thomas presented the IT Report. Amy is our new CIO. Current projects include revamping the onboarding process, configuring new GE vital signs monitors, supporting the 3R implementation, charting optimization, IV protocols, the CPSI Medication Review interface, PNWPop integration, Lippincott nurse education, and improved telehealth solutions. ScaledData is growing their resources and expanding. Lake Chelan has joined the CareShare POD. Mike Oberg will be attending the CPSI conference in Florida next week.

### **Quality Report**

G. Meza presented the Quality Report. There have been no falls with injury, hospital acquired infections, surgical complications, or medication events since the beginning of the year. The medication scan rate is 96%. Patient survey satisfaction scores were 88% for the ER with 12 surveys, no returns for inpatient, 93% for the clinic with 16 surveys. Year to date scores were 88% for the ER with 54 surveys, 85% for inpatient with 10 surveys, 96% for the clinic with 65 surveys. Patient comments for the ER were 87% positive and 6% negative. Inpatient comments were calculated for the year and were skewed due to the low number of returns with 45% positive and 27% negative. The negative feedback was mostly regarding meals and menu variety. We also received negative feedback regarding a fire drill that occurred during a patient stay which maintenance is looking into. For the clinic comments were 96% positive with 4% negative. German is reevaluating how to present the trauma, stroke, and chest pain data. Current projects are following up on items from the last state survey plan of corrections, departmental quality improvement presentations, and drafting a survey preparedness guide. The mock survey walkarounds have been completed.

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

### **Marketing Report**

J. Best presented the Marketing Report. Included in the recent Daisy award nomination were some complaints from the patient. L. McNamara asked if the issues were addressed. Jennifer will look into it. Current projects are reviewing online advertising, Public Records Act training, updating the Public Records Request policy, community outreach events including Chelan Pride, the Bridgeport Seedling Fair, and local parades, postcard mailers for our new providers, the newsletter, revamping the TRH website, radio interviews, a provider satisfaction survey, and staff committee work for Hospital and Nurses Week. She will be meeting with Tim Matsui in May to storyboard and film the swing bed program promotional video. An inventory of our PR supplies has been completed. She will be utilizing Metricool to help manage our social media and track analytics. The group discussed how to incorporate Matt Ellsworth's suggestions into our marketing and push the message that we are the community's public hospital.

### **Old Business**

**Capital Improvements:** We continue to work with Jeff Fivecoat on financial strategy for the new building. We have talked to Dave Franklund, our architect, about revising the new building plans to fit in

the 50-57M dollar range to avoid hitting our debt capacity. An additional study is needed and so the cost to revise the plans will be \$10,000.

### **New Business**

#### Resolution 2023-01: Surplus Equipment

A motion was made by C. Thomas to approve the list of surplus equipment; seconded by D. Garcia. Motion carried.

#### Dermatome Purchase

Dr. Ebaugh would be able to use this skin graft machine for burns, chronic wounds, and amputations. The cost is \$15,702. A motion was made by L. McNamara to approve the purchase; seconded by C. Thomas. Motion carried.

### **Upcoming Meetings & Events**

M. Pruett noted the upcoming schedule of meetings and events. The following additions were made:

- 5/10 Hospital and Nurses Week All Staff BBQ
- 5/10 WSHA Webinar, Maximizing Your Board's Efficiency
- 5/16 – Speaker panel in Moses Lake, The Board's Role With All Aspects Of Construction Projects
- 5/16 – WSHA Webinar, The Importance of Regular Board Self-Assessments
- 5/29 – The Finance Committee meeting is currently scheduled for Memorial Day and needs to be rescheduled.

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

The time needed for the executive session was reduced from 30 minutes to 15 minutes. An executive session under RCW 42.30.110(i) was held between 3:00 p.m. – 3:15 p.m. No action was taken.

### **Adjournment**

A motion was made by C. Thomas to adjourn the meeting at 3:15 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