

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:00 a.m. Wednesday, March 27, 2024. 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 Cherri Thomas, Board Vice Chair.

A quorum was present, including:

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

Others present:

J. Scott Graham, Chief Executive Officer
Jamie Boyer, Chief Operating Officer
Anita Fisk, HR Director
Jennifer Munson, Chief Financial Officer
Shauna Field, Administrative Assistant
Jeremy Vandelac, Ancillary Services Director
Rosie Hartmann, Revenue Cycle Director
Jennifer Best, PR and Marketing Director
Dr. Ty Witt, Chief Medical Officer
Michele Graham, Quality Coordinator
Amy Thomas, Chief Information Officer
DJ Dinjian, Environmental Services Manager
Mike Oberg, Informatics RN
Rob Wylie, Facilities Manager
Dan Webster, TRH Foundation President
Jennifer Bach, Accounting Controller
Rosie Poole, Materials Manager
Mike Maltais, Quad City Herald

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 M. Pruett to approve the February 13, 2024 Special Meeting Minutes and the February 28, 2024; seconded D. Garcia. Motion carried.

Public Comment

L. McNamara recognized employee spotlight, Nancy Montes – Certified Medical Assistant. M. Pruett reminded the members their F1 statements are due on April 15th. Dr. Witt is forming a citizens' group to

support the new building bond. Their focus will be on reaching out to the local community and encouraging voting. He will extend an invite to the Okanogan Healthcare Planning Group as well.

Consent Items

C. Thomas noted the MedStaff applications, payroll and vouchers listed on the agenda. L. McNamara recused herself from approving the 2/29/24 and 3/14/2024 vouchers due to an invoices for Grover’s Supply.

Payroll Total:	Gross: <u>\$ 920,517.13</u>	Net: <u>\$ 655,755.76</u>
<u>2/4/24 to 2/17/24</u>	Gross: <u>\$ 298,485.63</u>	Net: <u>\$ 214,261.32</u>
<u>2/18/24 to 3/2/24</u>	Gross: <u>\$ 308,815.59</u>	<u>\$ 218,218.22</u>
<u>3/3/24 to 3/16/24</u>	Gross: <u>\$ 313,215.91</u>	Net: <u>\$ 223,276.22</u>
Vouchers Total:		<u>\$ 2,203,862.41</u>
<u>2/22/2024</u>	<u>100395-100431</u>	<u>\$ 595,205.20</u>
<u>2/29/2024*</u>	<u>100432-100479</u>	<u>\$ 208,583.19</u>
<u>3/7/2024</u>	<u>100480-100505</u>	<u>\$ 407,976.32</u>
<u>3/11/2024</u>	<u>100506-100506</u>	<u>\$ 76,156.93</u>
<u>3/14/2024*</u>	<u>100507-100541</u>	<u>\$ 329,963.14</u>
<u>3/21/2024</u>	<u>100542-100637</u>	<u>\$ 585,977.63</u>
Bad Debt		<u>\$ 68,932.12</u>
Financial Assistance		<u>\$ 32,833.57</u>

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

Foundation Report

Dan Webster presented the Foundation Report. The Foundation met recently and discussed their scholarship program. This year they decided to double the amount to \$2,000 per school district and already have one applicant. They have processed the clinic’s fridge reimbursement and are reviewing requests for a lead screening device, as well as another order of blood pressure cuffs. Jocelyn Murray resigned as Vice President but will remain on the Board, with Elizabeth Boyd taking over the position. Dan gave a reminder that all staff members who contribute monetarily with payroll deductions are part of the Foundation. The Board is comprised of three people, himself, Jocelyn, and Elizabeth. M. Pruettt thanked the Foundation on behalf of the TRH Board for their support.

Physician’s Report

Dr. Witt presented the Physician’s report. The quarterly MedStaff meeting was well attended by the regular providers, though there were no ERx providers present. There was a good discussion and peer review. They will be presenting patient comments from our Press Ganey surveys to let providers know

when there are complaints and accolades. The new ERx director, Dr. Kingdon, will be starting soon. L. McNamara asked if the discussion on the number of repeated blood draws was resolved; Yes, they will work to reduce and be more efficient with the amount of stat draw orders to improve patient experience.

Administration Report

S. Graham presented the Administration Report. He thanked Dr. Witt for forming the citizen group and the Foundation for helping us with purchases and their support. Per D. Webster, the Roots and Wings Foundation also supports the hospital and wants to see us succeed. The TRH Foundation's funds are currently under 100k due to disbursements, but this is much improved from the past.

L. McNamara asked about what the lab is seeing for whooping cough; there is one test pending, but otherwise none. She also asked about the Thriving Together group; they used to operate as the NCACH, a federal government funding group that offers grants focused on health improvement, preventative care, and whole person wellness. They distribute money to healthcare partners to improve collaboration and connection and reduce expenses by investing in specific areas. The group discussed the number of stroke cases and whether there are screening tests that can be done; yes, there are indicators and imaging for patients with high risk factors. We also are doing bubble studies to determine small tears in the heart that can cause migraine and increase risk of stroke. Confluence is sending more diagnostic referrals to us to address their backlog now that we have adjusted our equipment settings to their satisfaction.

There was water damage in the ER caused by a leaking AC unit which has been repaired. The other units were checked and won't be a problem.

Leadership is controlling labor costs and expenses while volumes are low. There have been some issues with providing OT services as North Valley is short-staffed. We are working with RehabVisions to bring in a traveler. There were 28 surgeries in February with 4 total hip replacements. We hired a new clinic manager, Beronica Lopez. We have 13 days of cash on hand. We recently signed an agreement with Wipfli consultants to assess the hospital and clinic in order to improve processes. The cost for that is 15k.

Dave Franklund attended a meeting with administration to gather feedback on the new building design with the goal of reducing the total cost from 72 million. A one-story structure on an alternate location is a possible option. M. Pruettt arranged a meeting with the Okanogan Healthcare Planning Group which went well overall, but they have different goals for healthcare in the region. The need for a new building remains regardless of any regional restructuring or changes that might be pursued in the future, as we are dependent on the systems in place right now and trying to maintain the current facility is not cost effective.

Finance Report

J. Munson presented the February Finance Report. There were 5 cost reports that were settled all at once and she is working to move those into the proper accounts. This will require adjustments but should not impact our bottom line. The average daily census was 2.55, with 36 swing bed days. We ended the month with 1.1M in the general fund, which included 500k from our reserve funds. She will reinvest those funds in March, pending tax revenue. Salaries were 62% of total revenue. The AR days were 101. The total patient revenue was 1.7M. 28 surgeries were performed. Net revenue was 1M. We saw a 518k loss for the month with an overall loss of 263k.

L. McNamara requested a report to provide alternative means for if we do not submit an M&O levy this year for the ER. Jennifer applied for 3M from the Distressed Hospital Fund grant. The award letters are expected this week. She is working with our attorney to address a locum vendor who submitted 140k in past due invoices from 2021 and 2022. The vendor has made no previous attempts to contact us regarding these charges. Health Alliance has not issued reimbursements since 2/21. R. Hartmann is addressing this situation. The cyberattack on Change Healthcare has delayed reimbursements from other payors as well.

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 12:20 p.m. – 12:40 p.m.

New Business

Resolution 2024-02: Interlocal Establishing a Joint Operating Board – A resolution allowing the CEOs of Three Rivers, Mid Valley, and North Valley to form a joint operating board to discuss collaborations, create plans, and share staff and resources. The resolution provides a legal vehicle for meeting and making decisions. A motion was made by L. McNamara to approve the resolution; seconded by M. Pruett. Motion carried.

OR Scope Tower Purchase – We can save 115k by changing to another vendor, as Stryker was asking for 240k to renew our lease. A motion was made by L. McNamara to approve the purchase; seconded by D. Garcia. Motion carried.

Quality Report

M. Graham presented the Quality Report. There were no medication events in February. Out of 1000+ scans, 84 were not scanned and 37 where only the patient armband was scanned. The medication scan rate was 98%, with a year-to-date rate of 96%. There were two falls and 1 near miss with no acute injuries. 2 falls occurred with the same patient. A root cause analysis is being done to examine our protocols. There were 5 surgical transfers who were transferred due to comorbidities.

Patient Satisfaction

- ER – 95% with 9 returned surveys. One survey is being reviewed by Quality and nursing for follow up on a patient who commented that they felt they weren't taken seriously in the ER and they went to Mid Valley for diagnosis.
- Inpatient – 77% with 4 returned surveys. There were some negative comments regarding meals which have been forwarded to the Dietary department. The dietary manager is working to improve patient menus. When return rates are low, one negative review can skew the overall score.
- Clinic – 95% with 20 returned surveys. There were some negative comments regarding wait times and communication but mostly the feedback was positive.

They are uploading test data into the new antimicrobial reporting system. We were 100% compliant with quality improvement plan reporting in 2023. This year the focus will be on how to actively use the data to make departmental improvements. They want to re-train the staff on how to utilize Press Ganey and RLDatix. The next survey is anticipated to happen in November, and they will begin preparing for that in the coming weeks. The Security Committee has been formed and is on a meeting schedule. The recent clinic vaccine audit was successful. The next Quality Council meeting is scheduled for April 17th.

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

Old Business

Capital Improvements Update – The quote for a new building design from Dave Franklund was signed.

Strategic Plans and Discussion

The group discussed how to proceed if the new building bond doesn't succeed and how to encourage bigger voter turnout. S. Graham suggested meeting to reconfirm our strategic goals as one of the concerns from voters is our sustainability. We are waiting for the new design from the architect, who is looking into options such as land/new location to purchase and creating a medical campus in order to rent out space. There are questions about what to do with the clinic if the hospital is moved to another location.

Upcoming Meetings & Events

C. Thomas noted the upcoming schedule of meetings and events.

Adjournment

A motion was made by L. McNamara to adjourn the meeting at 1:34 p.m.; seconded by D. Garcia. Motion carried.

Mike Pruett, Board Chair

Cherri Thomas, Board Vice Chair

Leslie McNamara, Board Secretary

Tracy Shrable, Board Member

David Garcia, Board Member