



The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:03 a.m. Wednesday, April 24, 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 Mike Pruett, Board 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 Tina Smith, Chief Nursing 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 German Meza, Quality Director Michele Graham, Quality Coordinator Amy Thomas, Chief Information Officer DJ Dinjian, Environmental Services Manager Mike Oberg, Informatics RN Dan Webster, TRH Foundation President Jennifer Bach, Accounting Controller Rosie Poole, Materials Manager Zac Allison, Radiology Supervisor

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 C. Thomas. Motion carried.

Minutes from Previous Meeting

A motion was made by C. Thomas to approve the March 27, 2024 Regular Board Meeting Minutes; seconded L. McNamara. Motion carried.



Public Comment

L. McNamara recognized Beronica Lopez, Clinic Manager, this month's employee spotlight. M. Pruett attended the medical lectures put on by Aero Methow at Sun Mountain Lodge where Dr. Rapport highlighted our need for a new building.

Consent Items

M. Pruett noted the MedStaff applications, payroll, and vouchers listed on the agenda.

Payroll Total:	Gross:	\$ 641,712.07 No	et: <u>\$ 454,425.65</u>
3/17/24 to 3/30/24	Gross:	\$ 324,472.31 No	et: <u>\$ 228,290.74</u>
3/31/24 to 4/13/24	Gross:	\$ 317,239.76	\$ 226,134.91
Vouchers Total:			\$ 1,577,242.57
3/28/2024		100638-100715	\$ 407,536.29
<u>4/4/2024</u>		100716-100743	\$ 408,825.47
4/11/2024		100744-100826	\$ 349,212.96
4/18/2024		100827-100864	\$ 411,667.85
Bad Debt			\$ 83,583.95
Financial Assistance			\$ 67,257.31

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

Foundation Report

Dan Webster presented the Foundation Report. They approved reimbursement for a tone audiometer to verify hearing loss and are reviewing a request for a lead analyzer for the clinic which can determine lead in blood samples. This device can also be used for mobile clinics. They have increased the amount of their scholarship to \$2,000 and received two applications, one from Pateros and one from Mansfield. The deadline is May 1st. The scholarships were mentioned at the Aero Methow lectures. They will be working on something special for Nurses Week.

Administration Report

S. Graham presented the Administration Report. There have been no significant changes to volumes. We will have 22 surgeries by the end of the month. We had swing bed patients for most of the month, but we are struggling to get more than 4 patients. We hired a new clinic manager, Beronica Lopez. Mandi Huffstetler has started seeing patients in the clinic.

We continue to work on plans for a new building. There is a meeting scheduled for the 3rd with a Seattle design firm who has helped other critical access hospitals. They have some ideas about potential funding. We have been exploring offsite possibilities and purchasing land, but this would complicate our timeline. We may need to consider postponing a second bond vote to another election. Dave Franklund is working on modifying his original designs to decrease the total cost, but it requires removing the clinic





services. A citizen's group to support the new building is being formed and Matt Ellsworth confirmed the Board members can attend those meetings but there cannot be a quorum. There has been no further communication from the Methow group. The joint CEO Board has not met yet, but there are changes at Mid Valley which may delay those meetings. Administration toured the FHC medical building for sale which could be an asset, but the building is 70 years old, would require remodeling, there is no parking, and the asking price is 1.3M.

Two representatives from the WSHA Quality and Safety Committee attended our last Quality Council meeting and seemed impressed with how the meeting was run and how our team works. Marie Richerson presented on sepsis, and they invited her and German to present at meetings at other facilities.

We received 425k from the Distressed Hospital Grant which can be used for lean and efficiency training, consultants, and assessments. Our leadership team is currently reading the 4 Disciplines of Execution. The group discussed how to best use the funds to improve quality and expand access to healthcare.

L. McNamara asked about the reasons for our surgical transfers; mostly due to surgeon availability or complicated cases that would require ICU care. She also asked why our hand hygiene rate is not at 100% and would like to see improvement; the main reason is every time there is an entrance and exit it counts even if the doctor or nurse enters the room just to talk to the patient. It is also a matter of patient perception if the provider performs the hygiene in the hallway before entering and the patient does not see it. L. McNamara suggested exploring holding CPR classes at the Firehall; Jamie will follow up. S. Graham reminded the group about public meeting protocol and conduct.

Physician's Report

Dr. Witt presented the Physician's report. Dr. Kingdon, the new ERx Director, will be starting in June. They are focusing on bringing on local providers, as well as exploring shorter shifts to avoid burnout.

Finance Report

J. Munson presented the March Finance Report. R. Hartmann has secured a donated cabulance from Ballard Ambulance which will eliminate a barrier to getting to outside appointments for our swing bed patients. She thanked the Foundation for the audiometer which will be used for our contract with Chief Joe Dam to provide physicals.

We saw better volumes in March than anticipated. There were 88 inpatient days, 41 acute care, and 47 swing bed days. The cash balance was 442k, which is the lowest we've seen for a while, but it has since jumped back up. The days of cash on hand this morning was 16. There have been delays in reimbursements due to the cyberattack on Change Healthcare. Accounts receivable was at 111 days. It dropped to 99 days on Saturday and is at 101 today. March total patient revenue was 1.9M with net revenue at 1.5M. Contractuals were 485k. Expenses were 1.6M. The operating loss was 187k, but we received more tax money than anticipated so there was a 69K profit for the month. She reinvested the 500k she previously pulled from our reserve funds, and we are back to 3.5M. Cash flow projections still show August as when we would need to start using reserves if volumes and revenue do not improve. AR has dropped down to 6M. Collections have been better this year. We are not investing in capital items fast enough; they are depreciating faster than we can replace them, but this is entirely dependent on our cash position. The anesthesia machine needs replacing and is our number one concern. Rosie H. has worked with Health Alliance and Molina on some outstanding reimbursement issues. The clean claim



rate, 73% - 75%, dropped to lower than was hoped for due to the need to correct and resubmit incorrect claims. There were 300 claims denied in March out of 2,100 submitted.

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

Break

A break was held between 12:25 p.m. – 12:45 p.m.

Quality Report

G. Meza presented the Quality Report. There were no medication events in March. There were four falls in Quarter 1, 2 with minor abrasions. He is working on a root cause analysis with the nursing department to determine any trends or related factors. There were 11 stroke cases. We are meeting all state required metrics. There were 6 trauma cases. The chart review was 94% and they are focused on improving documentation. There were 26 chest pain cases, and all received an EKG. There have been 15 surgical case transfers year to date, 5 per month in Q1, with the most common reason being complicated cases with comorbidities.

Patient Satisfaction

- ER 93% with 38 surveys returned. We've seen an increase in ER survey returns.
- Inpatient 78% with 9 surveys returned. There was one negative review which brought down the score due to the low rate of survey return.
- Clinic 95% with 40 surveys returned.

They are continuing to work on automating the data pulling process for the antimicrobial stewardship report through Medici. He provided a debrief of the recent nursing meeting where they are actively working to improve interdepartmental collaboration and communication. At the last Quality Council meeting we had guests from WSHA's Quality and Safety Committee who commented positively on our teamwork and communication. The Council approved the 2024 Infection Prevention Plan, which is on the Board agenda today. He continues to work on implementing the HB1272 expanded demographics processes and reporting to PNWPop. He is working with the Code Grey Security Team, which has been meeting to develop policies and processes focused on de-escalation of combative and behavioral health patients. Our attestations to CMS for promoting interoperability and meaningful use did not go through the system and he is applying for a hardship exemption.

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

Old Business

Capital Improvements Update – John White is leaving the CEO position at Mid Valley at the end of May. J. Munson has been working with Jeff Fivecoat on alternative bond options and smaller non-voter bonds. A toilet in the nurse breakroom had a leak that needed repair.





New Business

2024 Infection Prevention Risk Assessment and Plan

J. Vandelac presented the 2024 Infection Prevention Risk Assessment and Plan. Other than minor changes regarding pathogens of epidemiological concern, our main objectives remain the same (prevent hospital acquired infections and surgical complications) and the plan is the same as previous years. A motion was made by C. Thomas to approve the 2024 plan; seconded by D. Garcia. Motion carried.

Strategic Plans and Discussion

None.

Upcoming Meetings & Events

M. Pruett noted the upcoming schedule of meetings and events. The June Regular Board Meeting will be moved to Thursday the 27th due to a conflict with the Rural Hospital Leadership Conference in Chelan.

A motion was made by L. McNamara to adjourn the meeting at 1:16 p.m.; seconded by C. Thomas.

Adjournment

Motion carried.	
Mike Pruett, Board Chair	Cherri Thomas, Board Vice Chair
Leslie McNamara, Board Secretary	Tracy Shrable, Board Member
David Garcia, Board Member	