

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:04 a.m. Wednesday, July 31, 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
Shauna Field, Administrative Assistant
Jeremy Vandelac, Ancillary Services Director
Rosie Hartmann, Revenue Cycle Director
Dr. Ty Witt, Chief Medical Officer
German Meza, Quality Director
Michele Graham, Quality Coordinator
Amy Thomas, Chief Information Officer
Mike Oberg, Informatics RN
Zac Allison, Radiology Supervisor
Rob Wylie, Maintenance Manager
Rosie Poole, CS and HIM Manager
Dan Webster, TRH Foundation President
Mike Maltais, Quad City Herald
Nick Gonzales, Bouten Construction
Mark Lindsay, Allevant
Jordan Tenenbaum, Allevant

Vision, Mission & Values

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

Agenda

A 15-minute executive session was added after New Business under RCW 42.30.110(i). A motion was made by T. Shrable to accept the amended agenda as official; seconded by D. Garcia. Motion carried.

Minutes from Previous Meeting

A motion was made by C. Thomas to approve the May 29, 2024 Regular Board Meeting Minutes; seconded by D. Garcia. Motion carried.

Public Comment

Nick Gonzales with Bouten Construction in attendance to stay informed about our new building project.

Consent Items

M. Pruettt noted the MedStaff applications, payroll, bad debt, charity care, and vouchers listed on the agenda.

Payroll/Vouchers

Payroll Total:	Gross: <u>\$ 1,289,248.01</u>	Net: <u>\$ 915,377.22</u>
<u>5/12/24 to 5/25/24</u>	Gross: <u>\$ 319,052.40</u>	Net: <u>\$ 230,898.55</u>
<u>5/26/24 to 6/8/24</u>	Gross: <u>\$ 324,321.66</u>	Net: <u>\$ 226,882.26</u>
<u>6/9/24 to 6/22/24</u>	Gross: <u>\$ 322,435.23</u>	Net: <u>\$ 231,460.43</u>
<u>6/23/24 to 7/6/24</u>	Gross: <u>\$ 323,438.72</u>	Net: <u>\$ 226,135.98</u>

Vouchers Total:		<u>\$ 3,183,145.75</u>
<u>5/23/2024</u>	<u>101150-101239</u>	<u>\$ 274,044.66</u>
<u>5/30/2024</u>	<u>101240-101278</u>	<u>\$ 407,808.77</u>
<u>6/6/2024</u>	<u>101279-101304</u>	<u>\$ 272,319.23</u>
<u>6/13/2024</u>	<u>101305-101338</u>	<u>\$ 418,105.60</u>
<u>6/20/2024</u>	<u>101339-101382</u>	<u>\$ 207,734.65</u>
<u>6/27/1934</u>	<u>101383-101432</u>	<u>\$ 435,614.92</u>
<u>7/3/2024</u>	<u>101433-101459</u>	<u>\$ 405,914.04</u>
<u>7/11/2024</u>	<u>101460-101497</u>	<u>\$ 394,670.75</u>
<u>7/18/2024</u>	<u>101498-101577</u>	<u>\$ 366,933.13</u>

Bad Debt - June	<u>\$ 63,355.45</u>
Bad Debt - July	<u>\$ 83,244.86</u>
Financial Assistance - June	<u>\$ 42,717.38</u>
Financial Assistance - July	<u>\$ 48,357.50</u>

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

Foundation Report

Dan Webster presented the Foundation Report. They are processing the scholarships and sending checks to each institution today. Recent purchases for the hospital and clinic include a portable vaccine unit, data logger, and cooler. Their next meeting is scheduled for August 16th, location to be determined. Dan will let Shauna know so she can disseminate the information.

Physician's Report

There were no updates from Dr. Witt and no questions asked.

Administration Report

S. Graham presented the Administration Report. We have been holding steady on our strategic plans, focusing on increasing patient volumes and working on strategy for the new building. We have met with the opposition group in the Methow in an effort to better understand their stance. We have been attending collaboration meetings with North Valley and Mid Valley Hospitals and they have offered their support for our pursuit of a new building. We will be meeting with them again in August.

With leadership, we have been reading The 4 Disciplines of Execution and are moving forward with bringing in a consultant to coach us on how to implement operation improvement techniques. We have reached out to Virginia Mason and Stroudwater for proposals on safety and quality improvement training. The funds from the Distressed Hospitals grant will cover the costs.

We conducted an employee survey this past month and are in the process of compiling and analyzing the results. We have seen increased participation in our community outreach events. We received the bronze Rural Stroke award for 2024 from the AHA's stroke association which reflects Jeff Pfeifer's work and concentrated efforts in the ER to adhere to state CT and EKG standards.

New Building – One of the main concerns of the Methow group is the cost of a new building and increased taxes and so we have been exploring a variety of ways to reduce costs. We have been exploring four options:

- Renovating certain areas of the current building, such as building a new clinical wing, with no changes to the family practice clinic.
- Build a new facility offsite. The cost estimate was 71M, not including the cost of land.
- Build a smaller facility offsite, leaving the clinic in its current location. The cost estimate was 55M, not including the cost of land.
- Build a smaller facility on our current site. The cost estimate for a scaled down design on the current site remained the same as our first proposal at 72M due to inflation and increased construction costs.

We have been unable to find a suitable offsite location for sale, so building on our current location is the only option available. The architect, Dave Franklund, continues to look into potential alternatives. Due to these considerations, we have decided not to run another bond in November and defer until next year. We will need to run our annual M&O levy to fund the ER, which will be on the November ballot. We will continue to discuss with regional partners a broader vision for the county, but we still need to find a solution for our aging building in the meantime. M. Pruetz suggested scheduling a strategic planning meeting with Dave Franklund to review his designs and recommendations. If we can reach operational breakeven and become more financially viable, we will look better to banks and lenders which would give us more financial options. G. Meza is exploring possible grants.

Allevant Presentation

Allevant attended the meeting to present a proposal to improve our swing bed program. J. Munson recommended we move forward with the proposal as 12 swing bed days would pay for the program, and we would have an early out if we don't see increased volumes. It would require us to be more aggressive with pursuing referrals, but Allevant can provide guidance on how to work with case managers. The Board approved moving forward.

Finance Report

J. Munson presented the May and June Finance Report. For May, we saw 2.3M in gross revenue, 40 inpatient days, 20 swing bed days, and 27 surgeries. Contractuals were 30%. We had an operating loss of 137k but an overall 117k profit. In June, inpatient revenue saw a decrease. There were 15 swing bed days, 24 inpatient days, and 295 patients in the ER. So far in July, we have seen an increase in the ER to over 400 patients and revenue is approximately 2.6M. In June we had 1.9M in our general fund but she transferred funds from our investments to cover payroll. We did not have to use those funds, and she hopes to transfer it back. If collections stay steady, we won't have to use investment funds for the rest of the year. There is a 100k surgery case that we are in the process of rebilling due to an error during the admission process. It will be reprocessed at the correct outpatient rate. This will be reflected in the coming months. In June, we had a 277k operating loss with an 18k overall loss. We have kept a good hold on expenses these past few months and with the improvements in the business office we have exceeded all national targets for clean claims, first pass, paid claims, and denied claims. They are currently working to establish electronic billing for L&I claims.

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

Break

A break was held between 12:18 p.m. – 12:38 p.m.

Quality Report

G. Meza presented the Quality Report.

- **Medication Events** – There were 0 events in June. The medication scan rate was 94%, with a year-to-date average of 95%.
- **Falls** – There were no falls in June.
- **Stroke** – There were 3 cases. We are meeting all state median times, but there is still room for improvement regarding documentation.
- **Trauma** – There was one trauma case in June, with three for the quarter. The trauma team activation chart review completion rate was 96% with lack of documentation being the main issue for improvement.
- **Chest Pain** – There were 12 cases in June with 35 for the quarter. All patients received an EKG, 11 received aspirin in the ER, 17 had repeated troponin. 26 patients were discharged home, 7 were transferred to a higher level of care.
- **Surgical Case Transfers** – There were 5 surgical transfers from the ER in June, with 9 for the quarter. The main diagnosis for transfer was bowel obstruction, closed fracture, and trauma.

Patient Satisfaction

- ER – The ER received a rating of 92% based on 8 returned surveys.
- Inpatient – There were no returned surveys. The year-to-date average rating is 78%.
- Clinic – The clinic received a rating of 95% based on 13 returned surveys.

Antimicrobial Stewardship – We have submitted data through June, with minor adjustments needed to the system reports.

Open Projects

We are at 82% compliance for quality improvement data. In order to prepare for the upcoming CMS survey, the Quality Council has moved to a monthly meeting schedule. The next meeting will be held on August 21st. The correct data for the HB1272 expanded demographics report is not pulling out of CPSI. They are working with CPSI to resolve the issue. German continues to work on the hardship exception waiver for our interoperability report. The security team has identified appropriate training programs and have requested demos. They are working on a quality incident reporting campaign and standardized flow chart and process for event reporting. They are actively working with certain departments that can impact satisfaction scores and with registration to ensure we have accurate contact phone numbers and mailing addresses.

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

Old Business

Capital Improvements Update – We have had difficulties keeping the CT room and lab cool with the increased temperatures. This issue will be ongoing until we can finance a new building or upgrade the facility as our air handlers are not equipped to handle excessive heat due to their age. We are looking at long-term solutions and R. Wylie has talked to engineers with the Department of Health to schedule an onsite evaluation. If the CT machine goes down due to the heat, we will have to go on diversion. The engineer that will connect the ER registration roll shutter to our fire panel is scheduled to come onsite on August 19th.

New Business

Resolution 2024-04, 2025 M&O Levy – Regarding adding the resolution for the annual M&O levy to fund the ER on the November ballot. There was a typo regarding the total amount that needs to be corrected before submitting. The group discussed utilizing marketing to let the public know this is the levy they have approved in past years. A motion was made by D. Garcia to approve the resolution with the typo correction; seconded by C. Thomas. Motion carried.

Stryker Power System and DePuy Synthes Power Products – J. Munson presented quotes for a new power system used during orthopedic surgeries. Our second backup unit failed, and we can no longer get parts for repair or replacement batteries. The surgery staff is scheduling a demo from the Synthes vendor, which is less expensive than our current vendor, Stryker, and will provide a recommendation. A motion was made by C. Thomas to accept the quotes with staff recommendation on final purchase; seconded by D. Garcia. Motion carried.

Our anesthesia machine is beyond its service life and the replacement is #1 on our capital asset list. The cost is 100k and J. Munson will work on financing options. The next priority is to purchase new stretchers in the ER and a tourniquet system. The front entrance to the hospital needs repairs to address ADA compliance, which was identified via patient complaint. The cost for repairs will be 6-10k. The board agreed that this should be a high priority.

Upcoming Meetings & Events

M. Pruett noted the upcoming schedule of meetings and events.

Executive Session - RCW 42.30.110(i)

A 15-minute executive session was held between 1:01 p.m. – 1:16 p.m. with a 5-minute extension requested. The public meeting resumed at 1:24 p.m. No action was taken.

Strategic Plans and Discussion

None.

Adjournment

A motion was made by C. Thomas to adjourn the meeting at 1:24 p.m.; seconded by T. Shrable. Motion carried.

Mike Pruett, Board Chair

Cherri Thomas, Board Vice Chair

Leslie McNamara, Board Secretary

Tracy Shrable, Board Member

David Garcia, Board Member