

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:00 a.m. Wednesday, August 28, 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 (Teams)
Cherri Thomas, Vice Chair
Leslie McNamara, Secretary (Teams)
Tracy Shrable, Member (Teams)
David Garcia, Member (Teams)

Others present:

Onsite

Jamie Boyer, Chief Operating Officer
Anita Fisk, HR Director
Jennifer Munson, Chief Financial Officer
Shauna Field, Administrative Assistant
Rosie Hartmann, Revenue Cycle Director
Dr. Ty Witt, Chief Medical Officer
German Meza, Quality Director
Dan Webster, TRH Foundation President

Via Teams

Jeremy Vandelac, Ancillary Services Director
Amy Thomas, Chief Information Officer
Mike Oberg, Informatics RN
Rosie Poole, CS and HIM Manager
Dr. Joshua Corsa, ERx Site Director
Stevie Sena, Dietary Manager
Jennifer Bach, Controller
Jennifer Best, PR and Marketing
DJ Dinjian, Environmental Services

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 M. Pruett. Motion carried.

Minutes from Previous Meeting

A motion was made by L. McNamara to approve the July 31, 2024 Regular Board Meeting Minutes; seconded by T. Shrable. Motion carried.

Public Comment

L. McNamara wished M. Pruett a happy birthday. Dr. Joshua Corsa introduced himself as the new ERx site director.

Consent Items

C. Thomas noted the payroll, bad debt, charity care, and vouchers listed on the agenda. There were no Medical Staff applications.

Payroll Total:	Gross: <u>\$ 957,506.22</u>	Net: <u>\$ 680,781.81</u>
<u>7/7/24 to 7/20/24</u>	Gross: <u>\$ 326,630.76</u>	Net: <u>\$ 233,677.76</u>
<u>7/21/24 to 8/3/24</u>	Gross: <u>\$ 314,744.59</u>	Net: <u>\$ 221,432.58</u>
<u>8/4/24 to 8/17/24</u>	Gross: <u>\$ 316,130.87</u>	Net: <u>\$ 225,671.47</u>
Vouchers Total:		<u>\$ 2,141,528.95</u>
<u>7/25/2024</u>	<u>101579-101604</u>	<u>\$ 437,130.16</u>
<u>8/1/2024</u>	<u>101605-101652</u>	<u>\$ 398,317.48</u>
<u>8/8/2024</u>	<u>101653-101687</u>	<u>\$ 441,770.69</u>
<u>8/15/2024</u>	<u>101763-101892</u>	<u>\$ 424,556.13</u>
<u>8/22/2024</u>	<u>101893-101930</u>	<u>\$ 439,754.49</u>
Bad Debt		<u>\$ 42,232.10</u>
Financial Assistance		<u>\$ 55,878.80</u>

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

Foundation Report

Dan Webster presented the Foundation Report. The Foundation met on August 23rd. They made a one-year commitment to help the clinic fund the Epic Outreach program in Bridgeport, with the cost of \$7,000. The EPIC program offers daycare, well child exams, vaccinations, and lead testing for 40-50 lower income families in Bridgeport and Wenatchee. They approved \$1,500 for an advertising budget for the 2025 M&O levy. They discussed funding for sports physicals but would like more research done to determine school requirements in the district and where students are going for their physicals. They want to offer the services to all five schools and be equitable. There will be another 35k grant from Roots and Wings in October. The next meeting is scheduled for September 23rd at 5pm and Dan would like to invite all staff. They will be reviewing the charter and bylaws. M. Pruett suggested making it a public meeting.

Physician's Report

Dr. Witt presented the Physician's Report. He let the board know that they may be approached about a recent death in the community and if there are any questions he can help with, he is available. The clinic volumes continue to grow; we saw 50 patients in one day for sports physicals. The ER saw an increase to 400 visits in July. The ER saw a total of 40 patients in one day due to a bus accident. He discussed the importance of our role in the community when these incidents occur and why we are needed for critical care. He praised the staff for their teamwork. The next MedStaff meeting is scheduled for September. The surgery department met and there was a good discussion there. Dr. Ebaugh continues to grow his practice, and his patient satisfaction reports are great. The Credentials Committee has been tracking our quality of care and will report their findings in the future. Our credentialing process will stay the same. Dr. Corsa is our new ERx director in the ER. Dr. Witt has been invited to a decontamination training in Quincy on September 21st. He invited members of the board; M. Pruett would like to attend.

Administration Report

J. Boyer presented the Administration Report. Hospital, swing bed, and clinic volumes are below target in August. The Lab and Radiology are meeting their goals. There have been 17 surgeries this month, with 304 ER visits. We are currently at 1.7M revenue with a goal of 2.4M. We met with engineers from Principal Mechanical Systems to assess the CT and Lab HVAC systems and they will give us some written recommendations on how to keep those areas cool. The concrete has been poured for the new ADA entrance at the main door. The cost for that repair is 9,000k. The damper repairs in the clinic are scheduled for September 10th. The cost for that project is 15k.

The clinic attended the August 24th Farmers Market. There was good community interaction, a high number of blood pressure checks done, and a lot of questions and support from visitors regarding the new building. We will be attending one more event in September. We provided 21 sports physicals for a Brewster school event. We are working with the Mansfield school district to create a telemedicine access point at the school and provide care to students and faculty. We'll also be working with the Pateros school district to provide this service. We will be assisting the Senior Center with their regular luncheons.

Wipfli was onsite yesterday for a workshop on billing and cost report preparation. The RestorixHealth wound care program went live on August 12th but had a rocky start due to lack of an available nurse. A nurse has been hired and is pending training. C. Thomas suggested looking into providing ostomy care; Jamie will follow up on the possibility of providing the service under wound care.

Finance Report

J. Munson presented the July Finance Report. There were 58 acute care days, 17 swing bed days, 401 ER visits, which was the highest we have seen in years, and 24 surgeries performed. The Lab, Radiology, Clinic, and outpatient services were overbudget in revenue. We ended the month with 1.4M in the general fund. She took 1M out of our reserves to help cover payroll but will be putting it back. We have 3M in reserve funds. There were 25 days of cash on hand. Contractuals dropped to 30%. Inpatient revenues were under budget, outpatient was 600k over budget. Total patient revenue was 2.7M, net revenue was 1.8M. The charity care and bad debt numbers were high due to not having a meeting in June. Our expenses were 1.8M. We had an operating profit of 62k with an overall profit of 337k. Our assets are depreciating faster than we are replacing them and we have several items on the capital list that need to be purchased. The group discussed adjusting the finance report to separate the clinic into its own section to better track the growth happening.

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

Break

A break was held between 11:55 p.m. – 12:15 p.m.

Quality Report

G. Meza presented the Quality Report.

- **Medication Events** – In July there were no medication events. There have been 6 year to date, with no harm to the patient. Most had to do with scanning and documentation issues. The scan rate was 93%. There were 2,781 medications administered, 140 were not scanned, and 38 only the wristband was scanned. C. Thomas suggested streamlining this report to identify any correlations between scan rates and number of events.
- **Falls** – There were no falls in July.
- **Stroke** – There were 6 cases. We are hitting state targets, but there is still room for improvement regarding documentation and streamlining processes to identify gaps. As with trauma, having a dedicated recorder would help with documentation. L. McNamara suggested utilizing audio recording during cases to review later; German will need to check legal requirements.
- **Trauma** – There was one case. The trauma activation chart review was 66% which was a 30% drop from the previous month. Documentation was the main issue. During the recent patient care team meeting they discussed the potential of training a recorder to document trauma cases, since the primary focus of the team is on patient care during the event. C. Thomas asked if the trauma director uses a trauma sheet; yes, but the documentation issues tend to happen in after-hours cases when there is limited staffing.
- **Chest Pain** – There were 7 cases, all were given an EKG, 2 received aspirin in the ER, 4 received repeated troponin, 2 were transferred, 2 were admitted, 3 were sent home. One TNK was administered at 17 minutes into the case, which was within the required time frame of 30 minutes.
- **Surgical Case Transfers** – There were 9 surgical transfers in July, due to bowel obstruction, closed fractures, trauma, and orthopedics. The receiving facilities were Confluence, Mid Valley, and Sacred Heart. Orthopedics cases are sent to Mid Vally depending on Dr. White's schedule and availability.

Patient Satisfaction

- ER – For July, 93% based on 23 returned surveys.
- Inpatient – There were no returned surveys. Year to date score is 78%.
- Clinic – For July, 95% based on 20 surveys.

We are 81% complete with departmental quality improvement projects. They have started preparing for the next survey by reviewing the Maintenance and Nursing tags from the previous surveys. The Quality and Surgery tags will be reviewed at the next Quality Council meeting.

Antimicrobial Stewardship – The program is up and running and they are working on generating the necessary reports.

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

Old Business

Capital Improvements Update – There was nothing for approval today, but we are in need of a new anesthesia machine, stretchers, and a fracture table in the OR. Jennifer Munson is working on a financing package.

New Business

Administration has decided to go with Virginia Mason’s quality and safety training program which will be a 9-12 month engagement and will involve 30 mini projects, 3 sets of online and in person education sessions, and sending staff to Virginia Mason for tours and onsite training. The costs will be covered by the Distressed Hospital grant. A motion was made by L. McNamara to approve the training program contract; seconded by D. Garcia. Motion carried.

Strategic Plans and Discussion

The group discussed marketing opportunities, including sharing a booth with Mid Valley at the county fair. We will be re-engaging with Dave Franklund about new designs and options for the new building. Administration is looking at a house for sale for potential expanded office space. Jennifer Best gave an update on her marketing activities, including updating the website with the M&O levy information and drafting a press release. There was Dr. Rapport’s recent letter supporting the new building in the Methow Valley News. Jamie did an interview and tour with Methow Valley Examiner, which is pending publishing.

Upcoming Meetings & Events

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

Adjournment

A motion was made by M. Pruett to adjourn the meeting at 12:46 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