

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:01 a.m. Wednesday, September 25, 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, Board Chairman
Cherri Thomas, Vice Chair (Teams)
Leslie McNamara, Secretary (Teams)
Tracy Shrable, Member (Teams)
David Garcia, Member

Others present:

Onsite

Scott Graham, Chief Executive Officer
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
Beronica Lopez, Clinic Manager
Jennifer Best, PR and Marketing
Tina Smith, Chief Nursing Officer
Mike Oberg, Informatics RN

Via Teams

Jeremy Vandelac, Ancillary Services Director
Amy Thomas, Chief Information Officer
Rosie Poole, CS and HIM Manager
Jennifer Bach, Controller
DJ Dinjian, Environmental Services
Michele Graham, Quality Coordinator

Vision, Mission & Values

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

Agenda

L. McNamara requested that all action items be moved to the top of the agenda as she was traveling and might lose reception. A motion was made by C. Thomas to accept the amended agenda as official; seconded by D. Garcia. Motion carried.

Minutes from Previous Meeting

A motion was made by L. McNamara to approve the August 28, 2024 Regular Board Meeting Minutes; seconded by C. Thomas. Motion carried.

Public Comment

L. McNamara provided a debrief on the recent Rural Advocacy Day in Washington DC with our legislators. The meeting went well, and our legislators expressed support for us. Dr. Witt provided a debrief on the recent decontamination training in Quincy. He will be putting a proposal together for administration to consider for our decontamination trailer and processes.

Upcoming Meetings & Events

M. Pruett noted the upcoming schedule of meetings and events. An all-staff meeting is scheduled for October 7th. The Building and Planning Committee meeting will be rescheduled to October 11th.

Consent Items

M. Pruett noted the medical staff applications, payroll, bad debt, charity care, and vouchers listed on the agenda. L. McNamara recused herself from approving the 8/29/24 – 8/30/24 vouchers due to an invoice to herself.

Payroll Total:	Gross: <u>\$ 653,447.26</u>	Net: <u>\$ 462,123.32</u>
<u>8/18/24 to 8/31/24</u>	Gross: <u>\$ 318,328.54</u>	Net: <u>\$ 224,105.03</u>
<u>9/01/24 to 9/14/24</u>	Gross: <u>\$ 335,118.72</u>	Net: <u>\$ 238,018.29</u>
Vouchers Total:		<u>\$ 1,533,797.57</u>
<u>8/29/24 to 8/30/24*</u>	<u>101931-102017</u>	<u>\$ 443,351.10</u>
<u>9/5/24 to 9/6/24</u>	<u>102018-102052</u>	<u>\$ 385,935.12</u>
<u>9/12/2024</u>	<u>102053-102101</u>	<u>\$ 276,980.59</u>
<u>9/19/2024</u>	<u>102102-102134</u>	<u>\$ 427,530.76</u>
Bad Debt		<u>\$ 155,368.73</u>
Financial Assistance		<u>\$ 53,689.47</u>

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

Finance Report

J. Munson presented the August Finance Report. There were 51 acute days, 47 swing bed days, 360 ER visits, and 21 surgeries. Cash balance in the general fund was 778k. She withdrew 1M from our reserve funds which she will replace once we receive our tax monies. There were 99 FTEs. 41% of revenue went to salaries. Contractuals were back down to 30%. There were 110 AR days. Revenue was 2.3M with a net revenue of 1.6M. She completed the cost report and accrued 100k for a payable. Expenses were 1.5M. We had an operating profit of 29k and adding tax revenue and grant funds, we saw a 320k overall profit. Year to date revenue is higher than last year and this has been the trend all year. Expenses have also been higher due to increased costs. We have a year-to-date loss of 1M but we are 500k better in net income than last year. The costs report for 2019, 2020 and 2021 have been closed and we will see 50k coming in from that. The Medicare cost report is being audited for 2023.

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

Quality Report

G. Meza presented the Quality Report.

- **Medication Events** – There were two events in August, with no harm to the patient. The scan rate was 90%. Out of 2,812 medications, 229 scans were missed and 36 only the wristband was scanned. He is working with Tina on a report to determine if there is any correlation between missed scans and events. There were 2 staff members with low scan rates; the issue has been discussed with them. ER scan rates tend to be lower due to the emergent nature of the patient care.
- **Falls** – There were two falls, one with injury. A root cause analysis has been initiated and they have had one meeting to discuss, with another session scheduled for tomorrow. More details will be presented at the next Quality Council meeting.
- **Stroke** – There were 4 cases. We are meeting all state required median times.
- **Trauma** – There were 2 trauma cases. The trauma team activation chart review completeness rate was 69% with issues mainly due to documentation.
- **Chest Pain** – There were 13 chest pain cases. All 13 received an EKG, 8 received aspirin in the ER, 8 received repeated troponin. There was no TNK administered. Three were transferred and ten were sent home.
- **Surgical Case Transfers** – There were 8 transfers; the diagnosis included appendicitis, closed fractures, and trauma.

Patient Satisfaction

- ER – 93% with 16 surveys returned.
- Inpatient – 85% with 2 surveys returned.
- Clinic – 94% with 10 surveys returned.

Antimicrobial Stewardship – The program is up and running; they are working on adjustments in the system to create the necessary reports.

Departmental Quality Improvement – For Quarter 3, we are 65% compliant with date entry for improvement projects. Michele is working on ways to track not only reporting compliance, but improvements in each department.

They continue to work with the security team to arrange demos for behavioral health management training as well as preparation for the upcoming CMS survey.

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

New Business

Thriving Together Facilitator Proposal – The Okanogan Healthcare Planning Group has proposed a facilitated meeting between their group and the CEOs of the regional hospitals to discuss their ideas for the future of healthcare in the county. Thriving Together has provided a grant to cover the costs of a facilitator. C. Thomas expressed concerns that the members of this group are all from the Methow area and the need for more representation from the entire county. A motion to accept the proposal was made by L. McNamara; seconded by C. Thomas. Motion carried.

Foundation Report

M. Pruet presented the Foundation report. The Foundation met on Monday the 23rd and discussed marketing ideas, approved marketing resources for the M&O levy, hospital purchases, the Epic program, new building ideas, and capital improvements. They are looking for someone to help with their website and Facebook page to improve utilization of those tools. They have requested statistics on how many patients were brought in by the billboard and details on the progress of the new building. They also discussed how to improve donations and encourage participation by providing more information to staff on what the donations accomplish and the potential tax deduction benefits.

Physician's Report

Dr. Witt presented the Physician's Report. At the Medstaff meeting, the group discussed refining the peer review process. Dr. Corsa has stepped into the role of ERx site director. Dr. Witt would like to see more ERx providers attending MedStaff, even if they are offsite at the time of the meetings.

Administration Report

S. Graham presented the Administration Report. He thanked L. McNamara for representing us at the Washington DC Advocacy Days with our legislators. She also met with Physician's Insurance as well and will share what she learned during that meeting at a future meeting. Scott will be attending the WSHA Safety and Quality Committee meeting tomorrow, with the WSHA CEO Retreat the following week. We held our Leadership Council meeting yesterday. Physician's Insurance and G. Meza presented a training on RLDatix and incident reporting. The group also reviewed our financials with J. Munson. We continue to meet with the CEOs from Mid Valley and North Valley to discuss ways to collaborate. Virginia Mason will be onsite next week for their initial evaluation. Support from all leadership is a non-negotiable in order for Virginia Mason to move forward with the program, which will be a 9-12 month commitment. We were exploring a swing bed consultation contract with Allevant but will put the implementation on hold for now in order to focus on the Virginia Mason work.

Break

A break was held between 12:03 p.m. – 12:23 p.m.

Old Business

Capital Improvements Update – We have met with Dave Franklund to discuss a phased remodeling approach to address our infrastructure needs. He will be drafting plans to remodel the Hillcrest building, the OR, lab and radiology and break the construction into smaller projects. If there is no support for the new building bond, we must do something to stay viable and operational, although multiple projects may not be a lower cost in the long run. If we can improve our financial situation, we may be able to explore loans. A special board meeting for further discussion will be scheduled. M. Pruet would like the commissioners to attend in person. S. Graham met with Jody Corona, who has worked

with us before, and she suggested working with legislators to acquire 1M-2M for building upgrades. This could help with our immediate needs.

Strategic Plans and Discussion

None.

Outreach Events – M. Pruett provided a debrief on recent community events, including farmers markets, health fairs and the county fair. These events have been going well.

Executive Session – RCW 42.30.110(i)

A 30-minute executive session under RCW 42.30.110(i) was held between 12:45 p.m. – 1:15 p.m. No action was taken.

Adjournment

A motion was made by L. McNamara to adjourn the meeting at 1:15 p.m.; seconded by C. Thomas. Motion carried.

Mike Pruett, Board Chair

Cherri Thomas, Board Vice Chair

Leslie McNamara, Board Secretary

Tracy Shrable, Board Member

David Garcia, Board Member