

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:00 a.m. Tuesday, November 26, 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, Board Chair (Teams)
Cherri Thomas, Vice Chair
Leslie McNamara, Secretary
Tracy Shrable, Member
David Garcia, Member (Teams)

Others present:

Onsite

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
Dr. Ty Witt, Chief Medical Officer
German Meza, Quality Director

Via Teams

Jeremy Vandelac, Ancillary Services Director
Amy Thomas, Chief Information Officer
Mike Oberg, Informatics RN
Jennifer Bach, Controller
Jennifer Best, PR and Marketing
DJ Dinjian, Environmental Services
Rosie Hartmann, Revenue Cycle Director
Michelle Welton, OR Manager
Michele Graham, Quality Director
Jeff Pfeifer, ER Coordinator

Vision, Mission & Values

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

Agenda

The Physician's Report was moved to public comment. A motion was made by L. McNamara to accept the amended agenda as official; seconded by T. Shrable. Motion carried.

Minutes from Previous Meeting

A motion was made by T. Shrable to approve the October 30, 2024 Regular Board Meeting Minutes and November 12, 2024 Special Meeting Minutes; seconded by L. McNamara. Motion carried.

Physician’s Report

Dr. Witt presented the Physician’s Report. The next MedStaff meeting is scheduled for December where they will discuss the election of officers for the new year. The clinic will likely exceed 500 visits this month and we are seeing increasing growth in volumes. Dr. Corsa is away on military deployment. Dr. Witt recently met with a city council member regarding the new building, and they expressed their support.

Public Comment

None.

Consent Items

C. Thomas noted the payroll, bad debt, charity care, and vouchers listed on the agenda. There were no Medical Staff applications. L. McNamara recused herself from the 10/24/24 vouchers due to a reimbursement check.

Payroll Total:	Gross:	<u>\$ 641,275.77</u>	Net:	<u>\$ 456,217.78</u>
<u>10/13/24 to 10/26/24</u>	Gross:	<u>\$ 326,952.47</u>	Net:	<u>\$ 228,778.64</u>
<u>10/27/24 to 11/9/24</u>	Gross:	<u>\$ 314,323.30</u>	Net:	<u>\$ 227,439.14</u>

Vouchers Total:		<u>\$ 2,224,542.69</u>
<u>10/24/2024*</u>	<u>102358-102438</u>	<u>\$ 362,412.94</u>
<u>10/31/2024</u>	<u>102439-102469</u>	<u>\$ 427,259.36</u>
<u>11/7/2024</u>	<u>102470-102494</u>	<u>\$ 492,489.17</u>
<u>11/8/2024</u>	<u>102495-102495</u>	<u>\$ 2,416.04</u>
<u>11/14/2024</u>	<u>102496-102523</u>	<u>\$ 565,097.69</u>
<u>11/21/2024</u>	<u>102542-102568</u>	<u>\$ 374,867.49</u>

Bad Debt	<u>\$ 55,312.82</u>
Financial Assistance	<u>\$ 80,122.72</u>

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

Foundation Report

J. Best presented the Foundation Report. They have sent us reimbursement in the amount of \$10, 973 for the purchase of a lead analyzer, small medication refrigerator, a hip positioner for orthopedic surgery, 10 blood pressure cuffs, a portable vaccine cooler and a data logger. There was a meeting with Lisa Apple with the Okanogan Child Development Association to discuss how to utilize the Roots and Wings grant. The Foundation has a total of 110k in their account. We will be working with them to improve the requests and reimbursements process.

Administration Report

S. Graham presented the Administration Report. This month we held a special board meeting to discuss the plans for a new building and developed a plan for renovating crucial areas of the facility instead of pursuing a new building. We hope the community will consider this a good compromise that takes into consideration their feedback and concerns. Dave Franklund will begin developing a budget for the new

proposal and floorplans. The goal is a cost of 25M, but it may be higher depending on costs of material and labor. We will be moving administration and business offices to the McKinley building to accommodate provider sleep rooms and service growth in the clinic. C. Thomas asked about our lab test pricing; we did a study a few years ago and set them based on the Optum fee analyzer. We are fairly close to Confluence's pricing, but we are 24/7 so some pricing is higher. We offer discounts and financial assistance. We need to evaluate wound care costs so we will order the new fee analyzer and review the higher priced items. We continue to prepare for the upcoming CMS survey by doing walkarounds, identifying areas for improvement and addressing survey etiquette. We are working with vendors, IT, and partners to improve EMR functions. We have a new representative with CPSI who we hope will help address the deficiencies in CPSI for the clinical side. The state is exploring an EMR solution for all facilities, but implementation of a new system is expensive and a disruption. C. Thomas asked about AI tools; we utilize voice recognition software to help with charting and the clinic attended a demo of the Heidi AI. Jamie and Scott visited the senior center for a Veteran's Day lunch. The residents were appreciative and supportive of the new building and plans for improvement. The M&O levy passed with 64% of vote; the certification is today. A nurse from the Department of Health presented during the nurse staff meeting. Jamie is working with Virginia Mason on implementing their methods and training. In the 3 weeks since the summit, we have been working to identify the top five things to start improvement on with weekly meetings scheduled and Genba walks planned. Another summit is planned for 12 more staff members to attend. We received the draft diagnostic report from Virginia Mason yesterday with communication identified as being the biggest area for improvement. J. Munson has been working on the 2025 budget which we will go over today. T. Shrable asked about the impact of the new renovations on our cost reimbursement; it should be cost beneficial, but she needs the square footage to determine the exact financials.

Finance Report

J. Munson presented the October Finance Report. There were 35 acute bed days, 47 swing bed days, and 28 surgeries, with an increase in outpatient revenues and volumes. The general fund was \$1.8M, with \$500K moved back into investments, bringing the total to \$3.5M. Revenue was above \$2M, possibly reaching \$2.1M. Cash on hand was 31 days. There were 101 FTEs. 33% of revenue went to salaries. AR days continue to be high due to \$4M in private pay. The aged AR days account for 50 days of the total AR, but a single staff member can't process \$4M in claims. We received 156k in SNAP funds. Expenses were over budget by \$179K. There was a \$205K operating gain and \$423K net profit. Total expenses were \$1.8M. We are working with Stryker to purchase stretchers, with two planned for this year and two for next year. The anesthesia machine needs to be replaced. T. Shrable inquired about the \$3.5M in investments; they are county-managed safe investments. We received a \$179k bill from a locum vendor, who never billed us. After consulting with legal, we paid the total. The vendor gave us a 5% discount with no interest or late fees. She will have to put it in the December 2023 cost report which will reopen that year's cost report.

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

Break

A break was held between 12:00 p.m. – 12:20 p.m.

Quality Report

G. Meza presented the Quality Report.

- **Medication Events** – There were none in October. Scan rates improved to 93%. Nursing is exploring excluding the surgery scan rates as they cannot wait for an order to be approved when a patient is in pain.
- **Falls** – None.
- **Stroke** – There were 3 cases. We are hitting our median times. 2 patients were transferred, 1 was sent home. When we need to transfer, it is after the patient has been stabilized with telestroke. The median time from arrival to CT was 0 this month because of good communication between EMS and staff so we are ready when a patient is in route.
- **Trauma** – There were 2 cases. The activation chart review completeness improved from 75% last month to 96%, a 20% increase. Previously we were documenting the SBIRT form as not complete but the responsibility for that form transfers to the receiving facility when we transfer a patient. J. Pfeifer continues to remind and educate staff about proper documentation.
- **Chest Pain** – There were 10 cases. All received EKGs, 0 TNK administered, 5 received repeated troponin, 7 were sent home and 3 were transferred.
- **Surgical Case Transfers** – There were 6 cases in October with 55 year to date. Diagnosis included appendicitis, closed fracture, and traumas. Year to date 47% of patients have been transferred to Confluence, followed by Mid Valley and other facilities. L. McNamara asked if we follow up with patients who are sent home; yes, during business hours we make sure to schedule a follow-up. If after hours, the instructions to call for a follow up are included in the discharge instructions.
- **Perioperative Chart Review** – This will be part of the Quality report going forward. We had some surgical site infections that were discussed during Quality Council, one is still being investigated. We are 100% on all other stats.

Patient Satisfaction

- ER – For October, the ER scored 95% with 14 surveys returned.
- Inpatient – 78% with 2 returned surveys.
- Clinic – 97% with 10 returned surveys.

A common theme in the negative reviews was the need for building improvements.

Antimicrobial Stewardship – We are up to date on reporting to October. M. Oberg is working on getting access to dashboards so we can start analyzing data and identifying any trends.

Departmental Quality Improvement – 86% compliant with reporting. They are working on a way to measure individual project improvement instead of just metric submissions.

HB 1272 Expanded Demographics – Our application extension was approved. The go live date is the end of March 2025.

Security Team – They have identified two staff members to attend the MOAB de-escalation and behavioral management training.

CMS Survey Preparation – They have been completing regular walkarounds and equipment, preventative maintenance, and outdate checks. They have met with department heads to go over their plans for correction from the previous surveys and follow up on items that have not been completed. C. Thomas asked if all the previous items have been addressed; yes. We lack signage for EMTALA which he is working to acquire. He has put in an order for financial assistance signs. The next Quality Council is scheduled for 12/17 but it depends on when the surveyors arrive.

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

Old Business

Capital Improvements Update – The proposal and invoice from Dave Franklund for the new project are pending.

New Business

C. Thomas asked if we do cardiac calcium scans; no, that is a special module for the CT machine which we do not have. Provider feedback is that the scans would be done so infrequently it would not justify the cost. It would be more cost effective to include it in a bundle when buying a new machine.

Resolution 2024-07: 2025 Budget

The budget is conservative with growth, except for the clinic. Swing bed days are budgeted at 425, similar to what we are now. The Allevant contract starts at the beginning of the year, with a goal of reaching 5 swing bed patients per day. Inpatient days are budgeted at 500, with a daily average of 2.88. She included a 5% price increase except for Central Supply and Pharmacy as they have their own pricing. Professional fees need more analyzing. Outpatient surgeries were set at 25 per month. There were no big changes for lab or radiology. ER is budgeted for 11 patients per day. This year was the busiest year in the ER we've seen since 2009. Clinic was set at 41 visits per day, with 350 telemedicine visits. This year we did 300 telemedicine visits. C. Thomas asked about reimbursement for telemedicine; it is a percentage of a percentage of the fee schedule. We have not been reimbursed for telephone visits this year by any insurances. Contractuals are set at 29%. We will receive SNAP funds in 2025 but the amount has not been approved yet. She has been working with each department on their staffing to determine needs versus wants. She included the M&O levy and SNAP funds in the 2025 revenue. FTE's are set at 113 for the new year, including 24/7 staffing for ER techs and an additional private pay collector. There are wage increases from the nurse union negotiations and a 9% wage increase for all other staff effective January 1.

For expenses she added more for public relations and marketing, for postage and mailers regarding the new renovation project. Depreciation was increased by 50k. We have significant capital needs, there will be election costs, repairs and maintenance. We will have an operating loss but adding in all tax and additional revenue, we should see 738k profit overall. We will apply for the Distressed Hospital grant again, but she did not include it in her calculations. The group reviewed the capital purchase list and amended it to include a Logic Q Surewave Elastography that was accidentally deleted. The cost adds \$10,200 to the total. We are committed to a new lab analyzer. The exact cost of a new anesthesia machine is unknown but will be around 100k. L. McNamara asked how many of the IT and facilities requests will be part of the new renovation; roof repair, fire alarm upgrades, water heating and conditioning, electric vehicle charging station, HVAC, water main, and room remodels. T. Shrable

suggests adding these costs to the new bond request. We are exploring a new phone system now. L. McNamara suggested adjusting the phone tree to include pressing 1 for English and 2 for Spanish instead of listening through both. J. Boyer will follow up on this. A motion was made by T. Shrable to accept the 2025 budget; seconded by D. Garcia. Motion carried.

Rescinding Resolution 2024-05, 2025 Insurance Benefits, Dental and Vision Plans

It was decided not to move forward with the employer paid dental and vision plans so we could provide wage increases. A motion was made by L. McNamara to rescind the resolution; seconded by T. Shrable. Motion carried.

2025 Renovation Project

The Board discussed the new renovation project as developed in the November strategic planning meeting. A motion was made by L. McNamara to move forward with the project in 2025; seconded by M. Pruettt. Motion carried.

Strategic Plans and Discussion

None.

Upcoming Meetings & Events

C. Thomas noted the upcoming schedule of meetings and events. There is an Environment of Care meeting scheduled for December 10th. The Finance Committee meeting will be cancelled along with the regular Board meeting.

Adjournment

A motion was made by L. McNamara to adjourn the meeting at 1:21 p.m.; seconded by T. Shrable. Motion carried.

Mike Pruettt, Board Chair

Cherri Thomas, Board Vice Chair

Leslie McNamara, Board Secretary

Tracy Shrable, Board Member

David Garcia, Board Member