

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:04 a.m. Wednesday, January 29, 2025. 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 Chair Cherri Thomas, Vice Chair Leslie McNamara, Secretary Tracy Shrable, 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 German Meza, Quality Director Dan Webster, Foundation President

Via Teams

Jeremy Vandelac, Ancillary Services Director Amy Thomas, Chief Information Officer Mike Oberg, Informatics RN Jennifer Best, PR and Marketing DJ Dinjian, Environmental Services Rosie Hartmann, Revenue Cycle Director Michele Graham, Quality Director Rosie Poole, HIM and CS Manager Sandra Zamudio, Accounting Teresa Stout, Discharge Planning

Vision, Mission & Values

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

Agenda

A fifteen-minute executive session under "RCW 42.30.110(g) To evaluate the qualifications of an applicant for public employment or to review the performance of a public employee" was added prior to adjournment. A motion was made by L. McNamara to accept the amended agenda as official; seconded by C. Thomas. Motion carried.

Minutes from Previous Meeting

A motion was made by C. Thomas to approve the November 26, 2024 Regular Board Meeting Minutes; seconded by L. McNamara. Motion carried.



Public Comment

L. McNamara noted G. Meza as the Employee Spotlight this month.

Consent Items

M. Pruett noted the Medical Staff applications, payroll, bad debt, charity care, and vouchers listed on the agenda.

Payroll Total:	Gross:	\$ 1,682,493.36	Net:	\$ 1,204,525.92
	Gross:	\$ 318,274.06	Net:	\$ 233,786.72
	Gross:	\$ 322,426.96	Net:	\$ 228,848.36
	Gross:	\$ 339,454.84	Net:	\$ 245,676.72
	Gross:	\$ 354,079.41	Net:	\$ 248,608.15
	Gross:	\$ 348,258.09	Net:	\$ 247,605.97
Vouchers Total:				\$ 3,942,402.21
11/27/2024		102569-102612		\$ 430,142.69
12/5/2024		102613-102685		\$ 390,308.57
<u>12/12/2024</u>		102686-102739		\$ 467,426.58
12/19/2024		102740-102835		\$ 479,740.48
12/26/2024		102836-102848		\$ 401,156.54
<u>1/2/2025</u>		102849-102896		\$ 251,468.46
<u>1/9/2025</u>		102897-102927		\$ 454,724.07
<u>1/16/2025</u>		102928-102955		\$ 322,824.98
<u>1/23/2025</u>		102956-103018		\$ 744,609.84
1/25/2025		102330 103010		\$ 744,005.04
Bad Debt - December				\$ 76,689.66
Financial Assistance - December				\$ 60,011.57
Bad Debt - January				\$ 46,243.09
Financial Assistance - January				\$ 66,368.75

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





Foundation Report

Dan Webster presented the Foundation Report. L. McNamara reminded everyone to contribute to the Foundation and WSHA PAC this year. The Foundation is in the process of regrouping for 2025 and they are reviewing requests for the new year including painting the new cabulance, a spot vision scanner, a new LifeFlight stretcher, and sports physicals. They are communicating with Roots and Wings regarding their grant process. The HAWT Committee used their annual funds to help purchase jackets for the staff. M. Pruett asked for the day and time of the next meeting to be made available to the board and leadership. Most of their funds come from staff donations. He would like to utilize their Facebook page and website to engage more with the public. C. Thomas asked if the hospital provides brochures and information on The Foundation; yes, but we are out of stock. Dan suggested hanging a poster in the lobby. The information could be posted on our electronic bulletin board as well. Mike asked if we have a donation button on the hospital website; no, but we include a link to the Foundation website. J. Best will look into any rules or requirements regarding adding a donate button. On behalf of the CORE Committee, Anita thanked the Foundation, as well as Administration, for contributing to the purchase of the staff jackets.

Physician's Report

S. Graham presented the Physician's Report. The next MedStaff meeting is scheduled for March. Dr. Corsa is doing well in his new role as ERx director, and we are receiving good feedback from patients and staff. The group discussed Dr. Huffman and Natalie Koncz and the support and teamwork shown by our providers. Dr. Witt also recently received a positive patient review on Google. L. McNamara commented on how grateful we are for our providers and nurses.

Administration Report

S. Graham presented the Administration Report. We did not see the typical winter downturn in volumes. Our numbers have stayed steady. J. Munson feels we have the right mix of services. Our focus on providing the ideal patient experience and good stewardship is bearing fruit for patient care and our finances.

Virginia Mason Training – There is another leadership summit in February. Their goal is not to help us make money, but to help us give the best patient care and develop our leadership. The World Class Management training has started, which is challenging us to examine our approach. J. Boyer and J. Munson are leading the project. C. Thomas discussed a similar training course in Salt Lake City. We held a vote for the name of our program and the most popular choice was Bridge to Excellence submitted by Dr. Ellingson. We will be creating a visual incorporating the name into our WIGs.

Hybrid Renovation – Dave Franklund met with leadership to discuss potential floor plans. He is drafting more details and working to get us designs we can display to the public for the upcoming bond proposal. 25M is still our goal for cost but with tariffs and inflation there is some uncertainty. We will submit for the summer election so if it fails, we can resubmit it in the fall. C. Thomas discussed how vital communication will be, especially to make sure the community knows the difference between the renovation project and the yearly M&O levy that funds the ER. The Methow group who is opposing is still active, but we are working with other CEOs in the region about the future of healthcare in Okanogan County. There is a meeting scheduled with the new CEO at Mid Valley and the North Valley CEO.

The Olympia Rural Advocacy Day is scheduled for February 11th. L. McNamara, J. Boyer and S. Graham will be attending. We are staying active with WSHA and monitoring new federal policies. We will be putting out a statement on our approach to immigration concerns. We have received feedback that the





community is scared to come to the hospital for fear of immigration action, but we will not be turning anyone over to immigration or asking about status. If agents come on site, it must with proper authority and documentation. We want to be a safe place. The Economic Development Alliance in the county is focused on how to grow business and housing and is exploring grants and legislation regarding housing. Due to limited housing, a lot of our staff do not live in the district. T. Smith attends the quarterly WVC Nursing Advisory Committee meeting and provides our schedule of open shifts. We will have students from Liberty Bell shadowing onsite starting on March 14th. We have implemented staff wage increases.

IT Report – They have launched the new intranet and Life Preserver ticketing system. C. Thomas asked if it is possible to go paperless with charts. Consents are not paperless and have to be scanned. CPSI doesn't allow electronic signatures in the clinic. We can reduce our paper use, but it requires a lot of investment in monitors and kiosks. Our work with Virginia Mason can provide insight into how paperwork moves through the facility. L. McNamara asked if the nurse union contract was ratified; yes, and we are waiting for the final copy.

Finance Report

J. Munson presented the November Finance Report. December has not been closed yet for year end. There was an operating loss in December and an overall loss of \$6,000 but she hasn't done any inventory adjustments or cost reports. In November, there were 51 inpatient days, 25 swing bed days and 24 surgeries. The lab and radiology were busy. We had 1.1M in the general fund with 2.1M total patient revenue and 1.5M in net revenue. She has updated her cash flow projections going forward with 2M. Our expenses are up, so the projection hasn't changed for when we will need to start using reserve funds. We have seen an overall increase in collection percentages to 64%. Expenses were 1.7M. There was a 194k operating loss, but a net gain of 60k. Year to date, we are 1.7M to the good so she predicts we will end 2024 with a positive bottom line. Our payroll system, 3R, is being discontinued in our market in November, so we are looking at another vendor for processing payroll, Paylocity, which is a national company. She held out money from the reserves to help cover the Medicare payment hold that happens every January. WSHA believes the Distressed Hospital Grant will be made available again this year. SNAP funds will not be impacted by the federal freeze, but there is a 12 billion shortfall in the state budget and concern about the impact on healthcare facilities.

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 12:06 p.m. – 12:26 p.m.

Quality Report

G. Meza presented the Quality Report. Medication scan rates improved from Q3 to Q4 with a 2.4% increase. We added sepsis as one of our quality focuses in 2025 and we will be working to improve provider education on protocols, including appropriate vital checks.

HB 1272 Expanded Demographics – Our EMR was updated to collect the data, but the necessary information is not being inputted into the correct screen for the report to pull properly. An audit will be done. The go live date is March 2025 and he anticipates we will meet that date and be ready for compliance in June/July.





Security Team – He and RN Zach Riggle will be attending MOAB training on February 4th to 6th in Seattle. He is working to implement a virtual facility-wide training that will be included in our annual Healthstream training schedule. The training is focused on de-escalation techniques and how to handle violent patients.

Reproductive Health Requirements – He is working on reviewing and updating our policies and BAAs. Changes are due by July 2025. The NPP has been updated, and he is taking on the required coordinator role.

ECQM and Medicare Beneficiary Quality Improvement Project Reporting – The interoperability measures and meaningful use data is due on February 28th, but we have an extension to March 14th. For the MBQIP, he is working with IT to implement reporting tools to make sure we can pull the necessary data. For now, we are pulling the information from CPSI to the tool, but we are looking into the i2i system to help compile reports.

CMS Survey Preparation – The Quality team continues to perform walkarounds to check for anything out of compliance. There is a new Fire Marshal this year. We ended 2024 with 88% completion for staff performance evaluations.

Virginia Mason Training – We have been active with genba walks for the past two months and he is seeing openness from staff, who seem to be feeling comfortable and confident in addressing areas of improvement. We have also seen an increase in event and feedback reports in RLDatix and more collaboration and communication between departments. Dr. Witt has been working to arrange an active shooter drill in March.

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

Old Business

Capital Improvements Update – We have purchased a new anesthesia machine to replace the one that failed. We will be submitting a request for tool cabinets and carts for the new machine to The Foundation.

New Business

Board Officer Elections – The Board members agreed on keeping the officer roles the same. A motion was made by L. McNamara to accept the 2025 Board Officer roles; seconded by C. Thomas. Motion carried.

Committee Assignments and Meeting Schedule – The Board members agreed on keeping their current committee assignments the same. It was also agreed to move the regular board meeting to the last Tuesday of each month at 11:00 a.m. to help with in-person attendance. A motion was made by C. Thomas to approve the committee assignments and meeting schedule; seconded by L. McNamara. Motion carried.

Resolution 2025-01: Cancelled Warrants – We receive a list of uncashed checks annually from the county. The checks will be reviewed and either re-issued or turned over to the state as unclaimed





property. A motion was made by L. McNamara to approve the list of warrants to cancel; seconded by C. Thomas. Motion carried.

DZA Audit Engagement Letter – A motion was made by C. Thomas to accept the annual audit engagement letter; seconded by L. McNamara. Motion carried.

Strategic Plans and Discussion

None.

Executive Session

A 15-minute executive session under RCW 42.30.110(g) to evaluate the qualifications of an applicant for public employment or to review the performance of a public employee was held with a 5-minute extension requested. The regular meeting was reconvened at 1:14 p.m. No action was taken.

Upcoming Meetings & Events

M. Pruett noted the upcoming schedule of meetings and events. The Finance Committee meeting was rescheduled to the 21st and the regular Board meeting to the 27th in February due to a conflict with the Virginia Mason Leadership Summit. C. Thomas will not be available to attend committee meetings in February.

A motion was made by T. Shrable to adjourn the meeting at 1:19 p.m.; seconded by C. Thomas. Motion

Adjournment

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