

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:00 a.m. Thursday, June 26, 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  
David Garcia, Member

Others present:

Onsite

J. Scott Graham, Chief Executive Officer  
Jamie Boyer, Chief Operating Officer  
Anita Fisk, HR Director  
Jennifer Munson, Chief Financial Officer  
Dr. Ty Witt, Chief Medical Officer  
Shauna Field, Administrative Assistant  
German Meza, Quality Director  
Dan Webster, Foundation President  
Beronica Lopez, TRFM Clinic Manager

Via Teams

Jeremy Vandelac, Ancillary Services Director  
Zac Allison, Radiology Supervisor  
Jennifer Best, PR & Marketing  
Amy Thomas, Chief Information Officer  
Rosie Hartmann, Revenue Cycle Director  
Mike Oberg, Informatics RN  
Jennifer Bach, Accounting Controller  
Michele Graham, Quality Coordinator  
Marie Richerson, Employee Health Nurse

**Vision, Mission & Values**

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

**Agenda**

A 15-minute executive session under RCW 42.30.110 (g) was added after the upcoming meetings and events. 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 C. Thomas to approve the May 27, 2025 Regular Board Meeting Minutes; seconded by D. Garcia. Motion carried.

**Public Comment**

L. McNamara recognized the employee spotlight, Nicole Evans, RN, who has been with us for eight years. The board members who attended the Rural Leadership Conference in Chelan provided a debrief and the group discussed the importance of advocating with our legislators and donating to the WSHA PAC.

**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 6/19/25 vouchers due to the presence of an invoice from Grover’s Building Supply.

Payroll Total:	Gross: <u>\$ 746,241.64</u>	Net: <u>\$ 529,106.69</u>
<u>5/11/25 to 5/24/25</u>	Gross: <u>\$ 365,764.68</u>	Net: <u>\$ 263,310.19</u>
<u>5/25/25 to 6/7/25</u>	Gross: <u>\$ 380,476.96</u>	Net: <u>\$ 265,796.50</u>
Vouchers Total:		<u>\$ 1,628,850.68</u>
<u>5/26/2025</u>	<u>103976-104002</u>	<u>\$ 469,516.98</u>
<u>6/2/2025</u>	<u>104003-104003</u>	<u>\$ 7,835.17</u>
<u>6/5/2025</u>	<u>104004-104072</u>	<u>\$ 417,671.31</u>
<u>6/12/2025</u>	<u>104073-104091</u>	<u>\$ 525,514.48</u>
<u>6/19/2025*</u>	<u>104092-104143</u>	<u>\$ 208,312.74</u>
Bad Debt		<u>\$ 74,300.04</u>
Financial Assistance		<u>\$ 102,924.25</u>

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

**Foundation Report**

Dan Webster presented the Foundation Report. He thanked Cherri for presenting the Liberty Bell scholarships. Jennifer Best sent out a press release. The Foundation Board approved the clinic requests for blood pressure cuffs, sports physicals, and otoscopes. They received an honorarium of \$525 from the Roots and Wings Foundation and are still waiting for information on the grant status. They should know more in the next five days. M. Pruett would like to attend the next Foundation meeting.

**Physician’s Report**

Dr. Witt presented the Physician’s Report. The June MedStaff meeting was well attended. The WMCC, a referral center that was set up during COVID to help transfer and place patients has had their funding cut and the service will end at the end of the month. There are concerns about the impact on patient care and outcomes. There has been regional discussion about how to alleviate the burden and create our own WMCC services for the county. Okanogan County is the most rural in the state and we have

been the number one user of the system. Other items discussed at the MedStaff meeting included: nurse staff training, Dr. Miller's retirement, Chelan needing orthopedic assistance, and the skin and wound care program in the clinic. L. McNamara asked about succession planning for Dr. Huffman and Kremer when they retire; ERx is working on that. MedStaff would like to increase the number of cases reviewed during peer review. Right now, 40 cases are being reviewed per quarter. M. Pruettt discussed the Rural Leadership Conference presentations on the future of AI in healthcare.

### **Administration Report**

S. Graham presented the Administration Report. We have yet to schedule our first telemedicine visit with the Mansfield school. We are starting the school sports physicals in Liberty Bell on the 21<sup>st</sup> and we are waiting to hear from the Bridgeport school. We are exploring a grant with WSU for a glucose monitor program. The program would provide 20 patients with a continuous glucose monitor and a clinic chatbot to help manage diabetes. We should know in September if the grant is approved. L. McNamara asked about the press release and brochure for our Bridge to Excellence program; the press release will go out next week and Jennifer Best will be ordering the brochures soon. She is also working on brochures for the menopause services in the clinic and the bond. Jamie is exploring a Teddy Bear Clinic.

The group discussed the budget reconciliation bill, the potential impact of cuts to Medicaid for rural hospitals, and advocacy work with legislators. Representative Engell stopped by for an onsite visit during his tour of the Okanogan County hospitals. Congressman Dan Newhouse signed a letter objecting to the Senate changes to the bill, which shows the importance of speaking out. We received an award from WSHA for meeting 320% of our goal for PAC contributions.

The Rural Leadership Conference in Chelan went well and there was a lot of focus on governance including succession planning for the CEO and Board members. The Clinical Excellence Committee met at the conference and discussed policy and addressing staff shortages in nursing and radiology and lab techs. Staff shortages are a nationwide problem but hits us harder due to our rural location.

We held an all staff meeting to discuss the new renovation project and give staff recognition. L. McNamara and M. Pruettt were there and helped present our length of service awards.

Dave Franklund is working on new renderings for the hybrid renovation. We met with financial consultant, Jeff Fivecoat, and we were able to reduce the cost of the bond for the community from .88 to .78 cents per \$1,000. The annual M&O levy will be on the August ballot and the renovation proposal on the November ballot. A backup resolution for the M&O levy has been prepared for November, just in case it fails in August, though this will mean both the M&O levy and renovation bond will be on the same ballot.

The group discussed our Bridge to Excellence program and how well the staff are responding to creating improvement projects. A weekly meeting is being held with our Virginia Mason representative and leadership to discuss progress. The biggest challenge per feedback is finding time between day-to-day work.

We are struggling with low volumes, though there are several surgeries scheduled for this month. We are significantly behind our revenue goals at 1.3M in gross revenue. This is a nationwide problem per leadership at the Chelan conference.

We are moving forward with the facilitator and other hospitals to explore regional collaboration, but we have made it clear we are against consolidation as a goal in that process. We continue to attend meetings with the Community for Health Improvement, which is a county group that meets once a month to discuss pressing needs. We are seeing good support from the community at our outreach events. L. McNamara asked about our interlocal with Lake Chelan for data scrubbing for the Vitality Index report; it is working well, and we are not being charged for the service. The Methow Arts Alliance hung new art and held an open house. There are new bulletin boards in the main hallway for staff recognition. L. McNamara suggested sending out more info on the recognition awards and how to submit nominations. T. Shrable asked about college scholarships and recruiting to help with staff shortages in lab and radiology; they offer lab programs in Omak. Radiology is only offered in Wenatchee. J. Vandelac gives presentations at the Brewster school every year. WorkSource is our best resource for staffing and job advertising. We plan on exploring more outreach to the schools and students.

### **Finance Report**

J. Munson presented the May Finance Report. There were 28 acute days, 52 swing bed days, and 25 surgeries. We ended the month with 17 days of cash on hand. The AR days are 124. Since January our average daily revenue has dropped by 13k, but the overall AR has dropped by 716k. There was 2.3M in total patient revenue, with a net revenue of 1.8M. Contractuals were 421k. We had 1.9M in expenses. Expenses were overbudget by 76k largely due to professional fees and purchase services. We had a 213k net gain with a 64k operating loss. The directed payments have been approved and we have paid our first assessment. She has talked to Coastal Bank regarding a financing package, but they would have to partner with Meridian on any loans to a public hospital and she would prefer to avoid that. Equipment vendors offer their own financing, but she is hoping for a package in order to take care of multiple purchases. She has concerns about our cash flow and how soon we will have to use our reserve funds. The Distressed Hospital grant was approved. She requested 3M and we were approved for 218k. We received 47k from the AWPMD for IGT funds. Our insurance renewals saw a 30k increase on malpractice insurance. Our attorney is drafting the resolution for the renovation bond in November.

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

### **Break**

A break was held between 12:44 p.m. – 1:04 p.m.

### **Quality Report**

German presented the Quality Report. The Quality Council met on May 20 with D. Garcia in attendance. The meeting has been moved to a quarterly schedule with the next one scheduled for July 10. There were no patient falls in May. There was one medication event involving a delayed IV antibiotic. There were no stroke cases. There were 11 trauma cases with an 83% chart review. There were 5 chest pain cases. There were 2 surgery transfers from the ER involving a hip fracture and an ovarian mass. Patient satisfaction scores: 84% for the ER with 11 returned surveys. There were no inpatient returns but the year-to-date average is 89%. The clinic saw 13 returned surveys with a 95% score. There were 27 patient comments, mostly positive other than one negative comment involving miscommunication with the nursing staff.

The Security Team met on the 20<sup>th</sup> to discuss the security camera system and general concerns. We need to expand our storage capacity in order to add more cameras. The MOAB training rollout is still in progress. There were 6 sepsis cases in May with 100% compliance thanks to increased focus on the

program. Our Bridge to Excellence program is improving staff understanding regarding the different departments and processes, as well as empowers them to speak about issues and solutions.

We won a first-place trophy for our float in the Bridgeport parade. The recent bake sale fundraiser saw positive staff and community involvement. We are appearing on Kozi's Spanish program this weekend to provide peace of mind to the community regarding our immigration status policies. L. McNamara would like more information on the 3 ER patients who left AMA and LWBS in one day in June.

C. Thomas would like to include the Bridge to Excellence process improvements in the Board reports. She also addressed the need to investigate why our diagnostic reports are not reaching outside providers in a timely manner and if the fax number that Confluence has is the correct one. We do participate in the Commonwell Health Alliance data sharing system, but everyone uses it differently, which can cause issues. The Lab and Radiology do verify their reports send and our reports auto fax when they come through, but reports get mishandled or are not scanned into the receiving facility's systems. C. Thomas suggested presenting our work with Virginia Mason at next year's Rural Leadership Conference.

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

### **Old Business**

#### **Capital Improvements Update**

Dave Franklund is preparing new renderings of the renovation and has provided a list of pre-work we can pursue including seeking permits and site studies but there would be a cost for all of those. If the bond passes, we can start the project in 2026. The 45M cost proposal was approved; 43M for construction and 2M for bond costs. C. Thomas would like us to investigate grants for purchasing new equipment. AWPHD has a grant writer we can use.

#### **New Business**

None.

#### **Strategic Plans and Discussion**

None.

#### **Upcoming Meetings & Events**

M. Pruett noted the upcoming schedule of meetings and events. The Marketing Committee meeting has been moved to a quarterly schedule. The next one will be in August. The Brewster parade is scheduled for July 4 at 10AM, the Pateros parade is on the 19<sup>th</sup> at 11:00AM, and the Methow Farmer's Market is on the 12<sup>th</sup> at 9:00AM.

#### **Executive Session – RCW 42.30.110(g)**

A 15-minute executive session was held between 1:50 p.m. – 2:05 p.m. with a ten-minute extension requested. The public meeting re-convened at 2:16 p.m. No action was taken.

#### **Adjournment**

A motion was made by L. McNamara to adjourn the meeting at 2:17 p.m.; seconded by C. Thomas. Motion carried.

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Mike Pruett, Board Chair

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Cherri Thomas, Board Vice Chair

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Leslie McNamara, Board Secretary

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Tracy Shrable, Board Member

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David Garcia, Board Member