

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:00 a.m. Tuesday, December 2, 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 Cherri Thomas, Board Vice Chair.

A quorum was present, including:

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, Chief Human Resources Officer
Antone Eek, Interim Chief Financial Officer
Shauna Field, Administrative Assistant
German Meza, Quality Director
Tina Smith, Chief Nursing Officer
Beronica Lopez, Clinic Manager
Brett Mallo, Chief Information Officer
Karen Hurley, Assistant Chief Nursing Officer
Dan Webster, Foundation President
Mike Maltais, The Chronicle

Via Teams

Rosie Hartmann, Revenue Cycle Director
Jeremy Vandelac, Ancillary Services Director
Michele Graham, Quality Coordinator
Jennifer Bach, Accounting Controller
Rosie Poole, HIM and Coding Manager
Sandra Zamudio, Accounting Tech
Dr. Ty Witt, Chief Medical Officer
Daniel Dinjian, Environmental Services Manager
Mike Oberg, Informatics RN
Michelle Welton, OR Manager
Isaura Ochoa, Patient Registration Representative
Sergio Orozco, Bridgeport Mayor

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 D. Garcia . Motion carried.

Minutes from Previous Meeting

A motion was made by T. Shrable to approve the October 28, 2025 Regular Board Meeting Minutes and the November 11, 2025 Special Meeting Minutes; seconded by D. Garcia. Motion carried.

Public Comment

L. McNamara recognized the employee spotlight, Karl Bach, from Maintenance. S. Graham recognized Shauna Field, Administrative Assistant, for recording the meeting minutes.

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 11/20/25 vouchers due to an invoice to Grovers.

Payroll Total:	Gross: <u>\$ 709,060.98</u>	Net: <u>\$ 508,058.44</u>
<u>10/12/25 to 10/25/25</u>	Gross: <u>\$ 358,091.96</u>	Net: <u>\$ 261,106.17</u>
<u>10/26/25 to 11/8/25</u>	Gross: <u>\$ 350,969.02</u>	Net: <u>\$ 246,952.27</u>
Vouchers Total:		<u>\$ 1,995,664.15</u>
<u>10/30/2025*</u>	<u>104980-104999</u>	<u>\$ 528,445.19</u>
<u>11/6/2025</u>	<u>105000-105109</u>	<u>\$ 582,222.15</u>
<u>11/13/2025</u>	<u>105110-105161</u>	<u>\$ 515,818.20</u>
<u>11/20/2025*</u>	<u>105162-105211</u>	<u>\$ 369,178.61</u>
Bad Debt		<u>\$ 75,266.50</u>
Financial Assistance		<u>\$ 74,650.66</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 hospital and Foundation will be working together to review the capital purchase list and determine what items they can help us purchase. They received 40k in grant funds from Roots and Wings. The costs for the bond campaign have been paid. L. McNamara thanked them for their support. The Foundation can store the left-over yard signs.

Physician's Report

Dr. Witt presented the Physician's Report. MedStaff will meet this month, and the agenda includes re-electing their officers. Dr. Huffman has retired. Dr. Ellingson has announced her retirement as well and will be leaving in August. We are working on a job posting for her position.

Administration Report

S. Graham presented the Administration Report. The group discussed the recent retirements and how much we appreciate their work with us and how our work culture tends to attract good staff. We are currently working on postings for the open positions.

Renovation Bond – Although we didn't meet the 60% voter threshold, yes votes increased to 52% from 44% in last attempt which shows the support of the community. A strategic planning meeting will be scheduled to determine next steps. The AWPHD has offered a grant to fund the meeting. The group discussed possible locations in the region including Sun Mountain, Casia and Gamble Sands. C. Thomas feels we need to make a statement in the Methow. L. McNamara's availability is limited in January but the group agreed the meeting should take place early in the year. Suggest combining the retreat and the board meeting scheduled for the 6th and scheduling another meeting closer to budget time. A motion was made by L. McNamara to hold the meeting on the 6th; seconded by T. Shrable. Motion carried.

The group discussed analyzing the distribution of votes so we can target areas of resistance, as well as address the low voter turnout in the county. It may be easier to meet our certification target in the next general election. We will need to consider when to run our annual M&O levy for the ER. We continue to work with Thriving Together and the facilitator with the other hospitals in the region to discuss the future of healthcare in the county. A meeting is being scheduled for January. There are concerns about the Methow opposition group having a bias toward consolidation and, given the geographic size of our county and districts, the need for them to do more outreach and gather more feedback from community members regarding their ideas.

Bridge to Excellence – We are making investments to convert to electronic forms and reduce paper use in the organization.

Finance Report

A Eek presented the October Financial Report. We had a net operating loss of 600k in October, much of which was driven by a third payroll period. Payroll is typically our largest expense. Going forward in 2026, the months with three payrolls will be adjusted appropriately. Other expenses included traveler and professional fees, MRI invoices, and the quarterly HCA payments. Our inpatient revenue fell short. The clinic revenue was up by 6%. We were over budget for all other revenue. WixCorp will go live on January 15th and the program will help modernize patient operations, collect AR, and improve patient experience. Mid Valley works with them and saw a 54% increase in collections. Our supply costs were underbudget due to volumes. Our utility costs and purchase services were a bit higher. Repair and maintenance costs remained flat. Next year's budget will be adjusted to account for the quarterly HCA payments. We will hopefully see our days of cash on hand increase by partnering with WixCorp. L. McNamara asked why so much had been budgeted for interest expense in the past and why we didn't use it; Antone will look into it. C. Thomas asked about our MRI expenses versus revenue; an analysis will be done. Volumes are expected to increase.

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 12:05 p.m. – 12:25 p.m.

Quality Report

G. Meza presented the Quality Report. The Quality Council met on November 20th. There were no falls with injury in October, but one that resulted in a small abrasion. There were three medication events in Q3, none in October. The events involved delays in antibiotics and a crash cart with a broken lid. The cart was audited by the Pharmacy; every medication was accounted for and the lid repaired. There were 11 stroke cases in Q3, 5 in October. There were 17 trauma cases in Q3 with 15 in October. The documentation completion rate was 82% with issues related to the run sheets and SBIRT forms. The metrics will be changing in the new year and the report template will be updated. There were 4 ER survey transfers in October, 8 in Q3. The transfers occurred when our ortho and general surgeons were not on shift.

Patient Satisfaction – For Q3, the ER saw a rating of 92%, inpatient 100%, and 97% for the clinic. In October, the ER saw a rating of 98% with 18 returned surveys, the year to date rating for inpatient was 94%. There were no survey returned in October. The clinic saw a rating of 96% with 16 returned surveys. In November, the ER saw a rating of 93% with 2 surveys, inpatient saw a rating of 100% with 1 survey, and the clinic saw a rating of 94% with 5 surveys.

They are working on improving the root cause analysis processes, adding more transparency and accountability to safety and feedback reports in RLDatix, and closing the backlog of open events. The security team has been identified, and he is working on scheduling dates for training in January. They are working with MedStaff to review and standardize and improve sepsis protocols. C. Thomas asked if CPSI has the ability to generate sepsis indicators; no, not automatically. There is a sepsis order set, but it is not used consistently.

There were two Bridge to Excellence presentations at the Quality Council meeting; the clinic's co-location project and the charge capture improvement project. L. McNamara asked if the co-locating has improved patient care; yes, and improved communication between the provider and their staff. For charge capture in the ER, we are seeing improvement in documentation and a decrease in the amount of charges caught during the audit process, meaning charges are being correctly processed on the first pass. They will refine the process in the ER before expanding to other areas. C. Thomas asked if we do auto capture; no, we are scanning stickers now but will be assessing our processes as we explore new EMR systems. We have been approved to present our Bridge to Excellence work at the Rural Health conference in Spokane in March.

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

Old Business

Capital Improvements Update – The new water heater has arrived and is being installed. We are reviewing a replacement purchase for our server. We have some tax levy funds we can allocate to an appropriate project. The Distressed Hospital grant will be available again in 2026 and we will be applying. We should have an update on the application for the solar energy grant by midmonth. We will have to apply for construction review to connect the kitchen hood to the electrical panel. The application review process takes at least 75 days.

New Business

Resolution 2025-12: Banking Structure – A proposal to move our treasury management and credit card accounts to Wheatland Bank, which will make our EFT process and credit card accounts easier to manage. A motion was made by T. Shrable to approve the resolution; seconded by L. McNamara. Motion carried.

Resolution 2025-13: TimeTrex and WixCorp EFT Payments – These vendors only accept electronic funds transfer. This resolution is requesting the ability to process invoices from TimeTrex and WixCorp via EFT. Future vendors will also be approved via resolution. A motion was made by D. Garcia to approve the resolution; seconded by T. Shrable. Motion carried.

Resolution 2025-14: Transition of Financial Institution – A proposal to move to one bank, Wheatland, instead of the two current banks as Wheatland has better capabilities for financial transactions and allows us to electronically submit finances to the county, which we currently cannot do. A motion was made by L. McNamara to approve the resolution; seconded by D. Garcia. Motion carried.

Resolution 2025-15: Review of External Audit Services – A proposal to review our current services and possibly change vendors for future audits. Suggest reviewing every three to four years to assess performance. A motion was made by D. Garcia to approve the resolution; seconded by L. McNamara. Motion carried.

Resolution 2025-16: Surplus Equipment – We purchased a refurbished stretcher which is no longer functioning and needs to be surplus. A motion was made by T. Shrable to approve the resolution; seconded by D. Garcia. Motion carried.

Strategic Plans and Discussion

The recommendation is to move forward with a strategic planning meeting on January 6, 2026 with another shorter one in October. S. Field will begin gathering information for conference room availability with vendors in the region.

Upcoming Meetings & Events

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

Adjournment

A motion was made by L. McNamara to adjourn the meeting at 1:08 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