The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:02 a.m. Tuesday, June 23, 2026. 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 (Teams)
Tracy Shrable, Member
David Garcia, Member

Others present:

Onsite
J. Scott Graham, Chief Executive Officer
Anita Fisk, Chief Human Resources Officer
Tina Smith, Chief Nursing Officer
Shauna Field, Administrative Assistant
German Meza, Quality Director
Beronica Lopez, Clinic Manager
Lynette Swezey, Discharge Planning
Karen Hurley, Assistant Chief Nursing Officer
Dan Webster, Foundation President

Via Teams
Jamie Boyer, Chief Operating Officer
Jeremy Vandelac, Ancillary Services Director
Sandra Zamudio, Accounting Tech
Dr. Ty Witt, Chief Medical Officer
Daniel Dinjian, Environmental Services Manager
Veronica Martinez, HR Assistant
Jennifer Best, PR/Marketing
Michelle Welton, OR Manager
Zach Allison, Radiology Manager
Sam Zamudio, Credentialing
Michele Graham, Quality Coordinator
Neala McGuire, Revenue Cycle Management
Brenda Escobar, Patient Registration
Ken Harman, Rural Health Redesign Center
Jarvis Gray, Rural Health Redesign Center
Jaquesha Jefferson, Rural Health Redesign Center

**Vision, Mission & Values**
All took turns reading the vision, mission, and values statements.

**Agenda**
The discussion on the mobile clinic staffing was tabled. 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 D. Garcia to approve the June 2, 2026 Regular Board Meeting and the June 16, 2026 Special Meeting Minutes; seconded by T. Shrable. Motion carried.

**Public Comment**
L. McNamara recognized this month's employee spotlight, Jessica Keeler, Marriage and Family Therapist. C. Thomas recognized the Employee of the Month, Eva Olea (Pharmacy). M. Pruett discussed the recent Farmers Market event in Twisp. He spoke to the parents of one of the Foundation scholarship recipients; they were pleased with the award.

**Consent Items**
M. Pruett noted the Medical Staff applications, and payroll and vouchers listed on the agenda. Bad debt and charity care reports were not available. L. McNamara recused herself from the 6/4/26 vouchers due to an invoice to Grover's Building Supply.

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|---|---|---|---|---|
| Payroll Total: | Gross: | $ 384,200.94 | Net: | $ 268,903.68 |
| 5/24/26 to 6/6/26 | Gross: | $ 384,200.94 | Net: | $ 268,903.68 |

| | | |
|---|---|---|
| Vouchers Total: | | $ 1,427,980.71 |
| 6/4/2026* | 106486-106541 | $ 400,269.81 |
| 6/11/2026 | 106543-106593 | $ 559,295.88 |
| 6/18/2026 | 106594-106670 | $ 468,415.02 |

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|---|---|
| Charity Care | na |
| Bad Debt | na |

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

**HeRO Collaboration Final Report**
Representatives from the Rural Health Redesign Center attended to present the final report and results of the collaboration and discussion between the three regional hospitals. Topics of focus were financial pressures, workforce shortages, recruitment difficulties, keeping local access to care, collaboration, how to be more effective with resources and improving patient care in the county. Activities during the collaboration included interviews with administration and board members, workshops, onsite visits, and leadership conversations to identify challenges. Each hospital has unique responsibilities for their districts and would maintain control over those. The group did not explore closing any hospitals, but more ways to work together. RHRC presented five recommendations: a shared business office, shared pharmacy, population health coordinated care for high-risk patients (community care, chronic disease management), shared orthopedics and regional therapy services. These suggestions would help reduce

costs and improve financials and improve community health. The hospitals are not being asked to approve the recommendations or commit to them, but the group is asking boards to support continued evaluation, exploration of collaboration, and strategic guidance over the next 13-24 months.

**Foundation Report**
Dan Webster presented the Foundation Report. He stated he felt encouraged to hear about the collaboration efforts. The group discussed the recent county Board of Health meeting, which the hospitals and other public health entities attended; healthcare collaboration was also discussed there.

**Physician's Report**
Dr. Witt presented the Physician's Report. The most recent MedStaff meeting was well attended with good representation from ERx; peer review went well. The bylaws were approved with one typo corrected and will go to the Board for approval. ERx has begun the rounding partnership with Harmony House, and they will also help cover in the clinic after Dr. Ellingson's last day. L. McNamara asked for his opinion on the Harmony House collaboration; Harmony House lost a provider and with our help they can continue to provide better, more thorough patient care. Dr. Witt will be the temporary supervisor of the PA's in the clinic until a replacement for Dr. Ellingson is found. C. Thomas asked about recruitment. There have been no interviews yet. We have been disappointed with the recruiting service and will be evaluating the contract. Dr. Witt met with the director and graduating residents at Chelan which may provide future opportunities for providers. There is an internist who is interested in open positions with us. C. Thomas suggested visiting medical schools to talk about rural medicine. Further discussion is needed regarding options; there is also the possibility of utilizing telemedicine. Dr. Witt also met with the Mansfield mayor who was excited about the mobile clinic and invited us to present at a future city council meeting.

**Administration Report**
S. Graham presented the Administration Report, which focused on the strategic initiatives identified at the planning meeting in February; the renovation bond, marketing, service lines, IT, and wages and benefits.

- Hybrid Renovation – Dave Franklund has provided an updated cost of 45M. Adding the roof and the IT upgrades increased the cost by 5M to 50M. We will go back and reassess, as we want to keep the costs as close to 45M as possible. Some items may be covered by the RHTP funds.
- Marketing and Outreach – We have rebranded our marketing department to focus on Public Relations and we are hiring more staff. The department is focusing on education and outreach for the annual M&O levy. We have started working with consultant, Joe Kunkel. M. Pruett did a radio interview with KTRT.
- IT Enhancements – A. Eek is taking on oversight for the IT department and we are recruiting for a new CIO as the Scaled Health contract is ending in October. We have retained M. Oberg as our Informatics RN and the current onsite staff. The financing for the new server is complete, and the equipment will be ready to ship soon. Anticipated installation in July. A roadmap of IT improvements will be drafted. L. McNamara asked about the RHTP funds and what those might cover; the roof is potentially allowed, but IT costs are not. S. Graham would like a new HRIS system by the end of the year; we are exploring potential vendors.
- Service Line Development – We are moving forward with purchasing the mobile clinic. The financing is in progress, and we are forming a steering committee to develop the service plan, staffing, rebranding, and locations.

- Wages and Benefits – We will be doing a market analysis of our wages and benefits with an independent firm, and we hope to have that complete by budget time.

We continue to see improvements across the facility due to the B2E program work. We want to increase patient volumes but need more nursing staff to accommodate. We have decreased our paper ordering by half through our efforts to go paperless.

**Finance Report**
The financial report was not available. Neala McGuire presented a report on the Revenue Cycle and Billing Office. We've seen a 22% improvement in collections from 2025 to 2026. May collections were 1.58M. In May 4.15M was billed. The clean claim rate has improved at 77%. The industry standard is 95% but we are moving in the right direction. AR days have decreased to 106 as of today and staff is working the accounts 150 days and older on a daily basis.

**Break**
A break was held between 12:42 p.m. – 1:02 p.m.

**Quality Report**
G. Meza presented the Quality Report. The previous plan of correction was reviewed at the most recent Quality meeting to prepare for this year's survey. They have been meeting with department heads to go over their SMART goals for Bridge to Excellence improvement projects.

<u>May Quality Metrics</u>

- Falls with injury: There were 0 falls with injury but two falls in the ER and one assisted fall.
- Medication events: 0
- Stroke: 3
- Trauma: 10
- Chest pain: 7
- ER surgery transfers: There were 4 transfers; appendicitis, bowel obstruction, and fracture were the reasons.
- Antimicrobial stewardship is up to date.

<u>Patient Satisfaction</u>

May

- ER – 90% with 11 returned surveys.
- Inpatient – 0% with no returned surveys.
- Clinic – 91% with 18 returned surveys.

Our survey response rate is low at 8.4%. He is working with registration to make sure current patient contact information is being collected, especially cell phone numbers and emails for the electronic surveys. He is also looking at other ways to increase response such as education and reminders for patients. C. Thomas asked how other facilities are doing; he doesn't have that information. Discussion on if REDDE can be utilized; the system needs current and correct patient contact information to be successful as well. For the upcoming survey he has been doing department walkthroughs, checking for outdates and anything of concern. He will be auditing our crash carts.

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

**Old Business**

**Capital Improvements Update –** The group discussed the new server purchase. M. Pruett asked about any disruptions during the server switch; a 6–8 hour downtime is expected.

**New Business**

**Infection Prevention Plan**
J. Vandelac presented the infection prevention plan, which has been approved by the Quality Council and MedStaff. There were no changes from the previous year. A motion to approve the plan was made by C. Thomas; seconded by L. McNamara. Motion carried.

L. McNamara reminded the group to donate to the WSHA PAC. She asked about the HAWT Committee bake sale; the committee is not sure of funding and is in need of more members. She also requested in future meetings, the list of people in the board room be posted for the online participants.

**Strategic Plans and Discussion**
None.

**Upcoming Meetings & Events**
M. Pruett noted the upcoming schedule of meetings and events.

**Adjournment**
A motion was made by L. McNamara to adjourn the meeting at 1:25 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