



Ferry County Health

BOARD OF COMMISSIONERS' MEETING

February 20, 2024 @ 10:30 AM in the HUB

<https://us06web.zoom.us/j/89584329356?pwd=Y0dZT1VldmNkV2JMZ09MRVROalZvQT09>

Meeting ID: 895 8432 9356

Passcode: 260559

One tap mobile

+12532158782, 89584329356# US (Tacoma)

Mission Statement:

"To strengthen the health and well-being of our community through partnership and trust."

AGENDA

		Page(s)
Call to Order	DiAnne Lundgren	
Quorum Established	DiAnne Lundgren	
Review, Amend, Accept Agenda	DiAnne Lundgren	
Introduction of Board, District Employees and Guests	DiAnne Lundgren	
<i>Items listed under the consent agenda are considered routine board matters and will be approved by a single motion of the Board without separate discussion. If separate discussion is desired, that item will be removed from the consent agenda and placed on the regular business agenda.</i>		
Approval of Consent Agenda	ACTION	DiAnne Lundgren
<ul style="list-style-type: none"> • Minutes 01.23.24 Board Meeting • Approval of Warrants • Financial Write-Off Report 		
Correspondence	DiAnne Lundgren	
Public Comments <i>DZA Accountants / Advisors 2022 Audit Presentation</i>	DiAnne Lundgren	
Environment of Care/ Safety Update	Adam Volluz	
Compliance Report	Spencer Hargett	
Department Spotlight – Assisted Living Facility (ALF)	Julie Twamley	
CNO Report/ Quality Improvement	Mike Martinoli	6-12
COO Report	Debbie DeCorde	13-18
Medical Staff Report	Richard Garcia, MD	19
CEO/CFO Report	Jennifer Reed	20-33
Revenue Cycle Report		

On-going Business

DiAnne Lundgren

- Board QI Project
- Health Foundation
- Republic Drug Store - Reader board
- Board Introduction Project
- Facility Update/Master Plan
- Rural Resources Building
- New Hire Orientation Schedule
 - 03/11 -
 - 03/25 -

Board Representative Reports

- Finance
- Quality Improvement
- Compliance/Risk Management
- Medical Staff
- EMS
- PFAC
- Credentialing

Ron Bacon/Sarah Krausse
DiAnne Lundgren/Nancy Giddings
Ron Bacon/Sarah Krausse
DiAnne Lundgren/Solomon-Hopkins
Nancy Giddings
Sarah Krausse/Nancy Giddings
DiAnne Lundgren/Nancy Giddings

- Request for Re Appointment of Advanced Practice Practitioner privileges for the following provider(s):

Eric Aronsohn, PAC

New Business

DiAnne Lundgren

Executive Session – if applicable

DiAnne Lundgren

Open Session - Action, if applicable regarding executive session

Adjournment

DiAnne Lundgren

Board meetings are usually the fourth Tuesday of each month at 10:30 a.m. unless otherwise posted.

The Public is encouraged to attend; Handicap access is available.

The next regularly scheduled meeting is March 26, 2023 @ 10:30 am in the HUB Conference Room



Ferry County Health

BOARD OF COMMISSIONERS' MEETING January 23, 2024

CALL TO ORDER: Board Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 10:30 am, on January 23, 2024 in the HUB and via Zoom.

Commissioners in attendance were Nancy Giddings, Sarah Krausse, DiAnne Lundgren, Susan Solomon-Hopkins and Ron Bacon (via zoom). Jennifer Reed, CEO/CFO; Debbie DeCorde, COO; Mike Martinoli, CNO; Spencer Hargett, Compliance (zoom); Amber Gangon, Executive Coordinator; Adam Volluz, Facilities Manager; James Davidson, IT Manager (zoom); Lacy Sharbono, HR Coordinator (zoom); Dawn Fritts, Nurse Manager (zoom); and Candace Perrin (zoom) were also present.

GUESTS: Candace Perrin (zoom) was present.

QUORUM ESTABLISHED: A quorum was present.

REVIEW, AMEND, ACCEPT AGENDA: A motion was made by Lundgren and seconded by Krausse to accept the agenda as written. The motion passed unanimously.

INTRODUCTION OF THE BOARD AND GUESTS: No introductions.

APPROVAL OF CONSENT AGENDA: A motion was made by Krausse and was seconded by Lundgren to accept the consent agenda. The motion passed unanimously.

CORRESPONDENCE: No correspondence read.

PUBLIC COMMENTS: No public comments.

EHR REPORT: No concerns to report

ENVIROMENT OF CARE/ SAFETY UPDATE: Volluz gave his report.

COMPLIANCE REPORT: Hargett gave his report.

REVENUE INTEGRITY REPORT: Reed gave report on behalf of Revenue Cycle Manager.

DEPARTMENT SPOTLIGHT: The ALF was selected as the department spotlight for February.

CNO REPORT: Martinoli gave his report

Giddings called for a break in session at 11:33 am. Open session resumed at 11:51 am.

COO: DeCorde gave her report.

MEDICAL STAFF REPORT: Dr. Garcia provided his report via PowerPoint slide.

CEO REPORT: Reed gave her CEO report.

CFO FINANCIAL REPORT: Reed gave her CFO financial report.

Giddings called for a break in session at 1:49 pm. Open session resumed at 1:54 pm.

ON-GOING BUSINESS:

- **Board QI Project:** Completed ALF QI visit.
- **Health Foundation:** Nothing to report.
- **Republic Drug Store-Readerboard:** Volluz will investigate possibility of putting up the reader board as a stand-alone unit, closer to the hospital. Will report back.
- **Facility Update/Master Plan:** David Johnson reported they are close to finalizing the initial debt capacity analysis and will reach out to schedule a time to present to the board during a special meeting.
- **Orientation Schedule:**
 - 2/13 – Dianne Lundgren
 - 2/28 – Susan Solomon-Hopkins

BOARD REPRESENTATIVE REPORTS:

- **Finance:** Nothing to report
- **Quality Improvement:** Nothing to report.
- **Compliance/Risk Management:** Nothing to report.
- **Medical Staff:** Nothing to report.
- **EMS:** Hammer Mountain Construction was awarded the contract. They are on track to begin this spring.
- **Credentialing:**
 - A motion was made by Lundgren and was seconded by Krausse to approve the request for Re-Appointment of Active Advanced Practice Practitioner for **Mari Hunter, ARNP**. The motion passed unanimously.
 - A motion was made by Lundgren and was seconded by Solomon-Hopkins to approve the request for Re-Appointment of Active Advanced Practice Practitioner for **Laura Karg, LICSW**. The motion passed unanimously.
 - A motion was made by Lundgren and was seconded by Krausse to approve the request for New Appointment of Courtesy Medical Staff privileges by Proxy for Integra Imaging provider, **Anne Marie McLellan, DO**. The motion passed unanimously.
 - A motion was made by Lundgren and was seconded by Solomon-Hopkins to approve the request for Reappointment of Courtesy Medical Staff privileges by Proxy for Integra providers; **Jordan Castle, MD; Richard Kennard, MD; Michael Posch, MD; Allison Tillack, MD; Scott Zelasko, MD; Jason Vergnani, MD; and Jade Regan, DO**. The motion passed unanimously.

NEW BUSINESS:

- **Updated Board Photo:** New photo taken with in-person members.

Giddings called for a break in session at 2:34 pm. Open session resumed at 2:38 pm.

- **Library Letter of Support:** Letter drafted and presented for approval. **A motion was made by Krausse and was seconded by Solomon-Hopkins to approve and sign the letter.** The motion passed unanimously.
- **Elections of Officers and Committee assignments:**
 - **Chair – Lundgren** was nominated. The nomination was approved unanimously.
 - **Vice President – Krausse** was nominated. The nomination was approved unanimously.
 - **Secretary – Giddings** was nominated. The nomination was approved unanimously.
 - **Committee Assignments:**
 - **Finance:** Bacon and Krausse
 - **Quality Improvement:** Giddings and Lundgren
 - **Medical Staffing:** Solomon-Hopkins and Lundgren
 - **EMS:** Giddings
 - **Credentialing:** Giddings and Lundgren
 - **PFAC:** Krausse and Giddings

EXECUTIVE SESSION: The Chair called an executive session pursuant to RCW §42.30.110(1)(g) - Performance of a Public Employee at 2:57pm. The Chair invited the CEO/CFO to join and requested 48 minutes.

OPEN SESSION: Open session resumed at 3:45 p.m. No action was taken.

ADJOURNMENT: As there was no further business, the meeting was adjourned at 3:46 p.m.

Nancy Giddings, Chair

Date

DiAnne Lundgren, Secretary

Date

Amber Gangon, Recording Secretary

Date

Board Report

February 20, 2024



CNO Report

Mike Martinoli

February 20, 2024



CNO

➤ Follow Up

- **RNEP** (Rural Nursing Education Program) - meeting held with our past RONE students. Updates about next steps.
- **PFAC** (Patient and Family Advisory Council)-first introductory meeting completed! Building agenda items.
- **PHAB** (Public Health Advisory Board).
- **CHIP** (Community Health Improvement Plan).
 - ❖ CNO Continues to participate with NETCHD and other community stakeholders.
 - ❖ Increasing conversations about the need for home care aids.
 - ❖ Funding source has been identified for future projects.



CNO

➤ Coming Up

- **SOFR** (Suicide and Overdose Fatality Review Board)—new County program with NETCHD
 - ❖ Multidisciplinary county stakeholder representation—quarterly meetings.
 - ❖ CNO will represent on this community wide Board.
- **NAC Class**—recruitment and training update
 - ❖ Next class runs early March-May.
 - ❖ More than 9 applicants interviewed, 6 students are planned to be selected.



What is a SOFR?

NETCHD’s Suicide & Overdose Fatality Review (SOFR) is a county level multi-disciplinary team dedicated to understanding the risks and circumstances that lead to an overdose or suicide.

The purpose of a SOFR is to identify system gaps and innovative community-specific suicide and overdose preventions/intervention strategies.

RCW 70.05.210 gives local health departments the authority to establish review boards and collect medical record, autopsy/medical examiner reports, and coroner reports pertaining to suicides and overdoses.

Northeast Tri County Health District | 3

SOFR Members

25 Total

Ferry 13 Members

- Northeast Tri County Health District
- NEW Alliance
- Search & Rescue
- Sheriff
- Washington State University
- Ferry County Health
- Ferry County
- Washington State DOH
- Poison Control

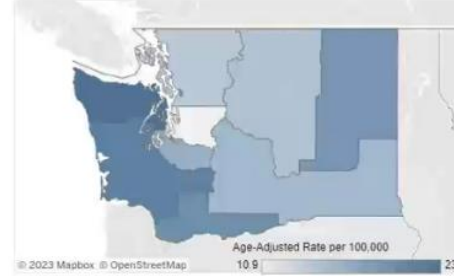
Stevens 13 Members

- Northeast Tri County Health District
- NEW Alliance
- Providence Hospital
- Colville School District
- Washington State University
- Hope Street
- Stevens County
- Colville Police Department
- Washington State DOH
- Stevens County EMS
- Poison Control

Northeast Tri County Health District | 5

Pend Oreille 14 Members

- Northeast Tri County Health District
- Newport Hospital & Health Services
- Washington State University
- Kalispel Tribe
- Pend Oreille Counseling
- Pend Oreille Sheriff
- Washington State DOH
- Poison Control



Washington East Region-2020 Suicide Death Rate 19.4 Per 100,000

High Risk:

- American Indian/Alaskan
- White-NH
- 45-64 Yrs.
- Male

WA State Suicide Rate 15.3 Per 100,000
 WA State 2021 Suicide Deaths 1,229
 US 2021 Suicide Deaths 14.04 Per 100,000
 US 2021 Suicide Deaths 48,183

[/www.cdc.gov/nchs/pressroom/sosmap/suicide-mortality/suicide.htm](https://www.cdc.gov/nchs/pressroom/sosmap/suicide-mortality/suicide.htm)

Northeast Tri County Health District | 2



Washington East Region-2020 Drug Induced Death Rate 24.1 Per 100,000

High Risk:

- American Indian/Alaskan
- Black-NH
- 25-44 Yrs.
- Male

WA State Overdose Rate 28.1 Per 100,000
 WA State 2021 Overdose Deaths 2,264
 US 2021 Overdose Death 28.3 Per 100,000
 US 2021 Overdose Deaths 106,699

https://www.cdc.gov/nchs/pressroom/sosmap/drug_poisoning_mortality/drug_poisoning.htm



CNO-Volume

Inpatient and Emergency Department		Jan	YTD	YTD Target	Var	23-Jan
Acute Care Patient Days	●	22	22	21	2	10
Acute Care Admissions	●	7	7	5	2	4
Average Length of Stay	●	3	3	0	0	4
Skilled Swingbed patient days	●	112	112	103	9	117
Admissions	●	9	9	3	6	5
Average SSB Census	●	4	4	0	0	4
Average Length of Stay	●	12	12	0	0	23
ED Visits	●	179	179	163	16	152
Same Day Surgery	●	13	13	12	1	5
Outpatient Procedures	●	70	70	68	2	-
OBS Patients	●	2	2	4	(2)	8

Key	
●	Meets or exceeds budget/target
●	Does not meet budget/target expectations
●	Does not meet budget/target expectations

January Stats:

ED Transfers: 9

AMA: 0

Admits: 1



CNO

➤ Need to Know

- **Emergency Room**—Demos underway for a new Ultrasound unit.
- **EMS in the Hospital**—Care Coordinator's collaboration with WSHA.

QI Committee Report

➤ Upcoming:

- 2023 Quarter 4 Board Report
- 2024 CAH Annual Program Evaluation and Quality Plan
 - ❖ To be finalized and presented at the March Board meeting.



COO Report

Debbie DeCorde

February 20, 2024



COO

➤ Follow Up

- Republic Medical Clinic
 - Laura Karg returns with Behavioral Health services – February 26
 - DOT Examiner training complete for Matthew Johnson, ARNP. Exam scheduled for the National Testing Center.
 - COVID vaccines, expired Jan. 18 without waste. New batch in stock now.



COO

➤ Coming Up

- Laboratory
 - ❖ Christina Beckwith, (lab manager) out until the 26th - Out of Office
 - ❖ Staffing updates
- Republic Drug Store
 - ❖ Refreshed displays coming and new items from the annual purchasing
- Curlew Clinic
 - ❖ New faces on Wednesdays – Annette Byrd, ARNP as of the 21st
- Republic Medical Clinic
 - ❖ Going live with immunizations with the state for IIS



COO

➤ Need to Know

- Republic Medical Clinic
 - ❖ Kudos on RHC required meeting – positive review and constructive feedback
- Republic Rehabilitation Clinic
 - Hit & run + rumor – patient left note on employee's window and resolved issue quickly – rumors ran faster.
- Across Ferry County Health
 - ❖ Eliminating Annual Performance Reviews – replacing with Quarterly 1:1s
 - ❖ Potentially continuing performance reviews with Unionized employees, but seeking CBA update as step increases aren't performance related



COO - Dashboard

Outpatient and Ancillary Services		Jan	YTD	YTD Target	2023
11 Republic Clinic #Visits	●	800	800	645	796
12 Physical Therapy Visits	●	393	393	405	506
13 Imaging Exams	●	334	334	338	321
14 Lab # Billable Tests	●	2703	2,703	1,905	2,628
15 Drugstore Prescriptions	●	4501	4,501	3,710	4,526

Key

- Meets or exceeds budget/target
- Does not meet budget/target expectations by 5% or less
- Does not meet budget/target expectations by greater than 5%



COO – Turnover Report YTD

Dates

2023-01-01 - 2024-01-31



29.8% 51 people
Total Turnover Jan 2023 - Jan 2024

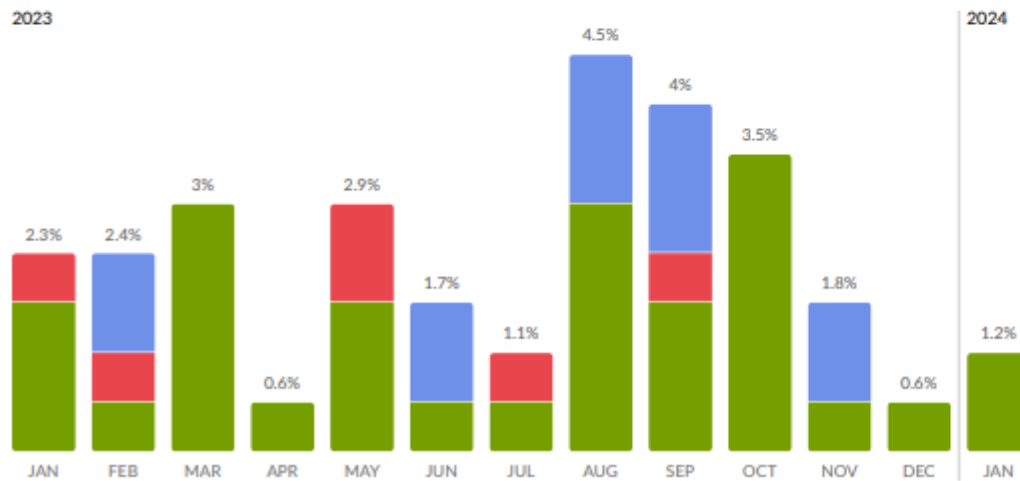


2.3% 3.9 people
Average Monthly Turnover



1.2% 2 people
Total Turnover - 30 days

2023



Voluntary

Regrettable

Non-Regrettable

Unspecified

Involuntary

Termination



Medical Staff Report

Dr. Garcia

February 20, 2024



CEO/CFO Report

Quality/Safety: by constantly holding ourselves to a higher standard.

Integrity: through honesty and respect.

Compassion: by providing a nurturing and caring environment

Stewardship: by utilizing our resources to their highest and best purpose.

Teamwork: by working together in a culture that promotes excellence.

Jennifer Reed

February 20, 2024



CEO/CFO

➤ Follow Up

- MIH – Truck delivered 2/24/24. Pilot is ongoing, submitted first deliverable of the grant, next is the financial feasibility which I will contract with Dave for \$13,000.
- Rural Resources update – They say end of March for move out. I requested access to perhaps move our new self-pay team up there as space is demanding it.
- Decision Matrix – Still to come.
- MOU with Foundation - present to Foundation?
- Jacquelin Maycumber – Nothing back yet about our request.
- We have been selected to present for collaboration with WSU – Workforce grant.



CEO/CFO

➤ Coming Up

- 2024 Workplan – Added safety component. Looking for vote and approval? 100% of new hires have attended the de-escalation training (Regulation), and 75% of all current employees have attended. Safety Intranet page one of the three in SMART goals.
- Year in review -

➤ Welcome

- Kaidance Miller – Environmental Services for Curlew
- Stacy Hooper, LPN – Swing Bed



CEO/CFO

➤ Need to Know

- Watching reproductive rights legislation. We have an OB/Gyn that is willing to come from Omak to provide prenatal care, but we are unable to consider this until bill is settled.
- HRG - Cash posting here, Klondike and Client accounts here, self-pay March 1, 2024, billing to come.
- Partner Updates:
 - ❖ Options for telehealth with two companies for consult for our block providers. Also talking with Confluence regarding same
 - ❖ Ready to go with Dermatology but will present feasibility next month.
- Payer Updates:
 - ❖ Med-advantage partners are not playing nice. Federal attention now so more to come.

➤ Q&As



CEO/CFO-Financials

- Income Statement and Balance Sheets
- Key Performance Metrics
- **Need to know**
 - 2022 Audit finally done
 - Financial debt capacity done – would like go/no go by June



Ferry County Public Hospital District No. 1

doing business as

Ferry County Memorial Hospital

Combined Income Statement: Hospital, Klondike Hills and Republic Drug Store

Year to Date January 31, 2024

	Actuals	Budget	Var\$
Operating revenue:			
Gross patient service revenue	2,103,777	2,106,945	(3,168)
Contractual allowances and provisions for uncollectible accounts	(778,397)	(779,569)	1,172
Patient service revenue - (Net contractual allowances)	1,325,380	1,327,375	
Drug Store gross revenue	270,726	249,732	20,994
Other operating revenue	73,168	76,475	(3,307)
Total operating revenue	\$ 1,669,274	\$ 1,653,582	\$ 15,692
Operating expenses:			
Salaries and wages	1,008,560	979,189	(29,371)
Employee benefits	242,966	208,380	(34,586)
Professional fees	52,682	98,760	46,078
Supplies	242,989	322,169	79,180
Purchased services - Utilities	27,494	19,961	(7,533)
Purchased services - Other	110,896	96,389	(14,507)
Insurance	21,128	12,360	(8,768)
Other	39,076	41,354	2,278
Rent	3,919	2,082	(1,836)
Depreciation	82,703	76,503	(6,200)
Total operating expenses	\$ 1,832,413	\$ 1,857,148	\$ 24,735
Gain (loss) from operations	(163,139)	(203,566)	40,426
Nonoperating revenues (expenses):			
Property taxes	31,204	32,560	(1,356)
Interest earnings			
Interest expense	(2,178)	(2,178)	-
Grants and donations	200	-	
Other	23,116	23,116	-
Total nonoperating revenues (expenses) - Net	\$ 52,342	\$ 53,498	\$ (1,156)
Increase (decrease) in net position	(110,797)	(150,067)	39,270

CFO-Financials



Ferry County Public Hospital District No. 1

doing business as

Ferry County Memorial Hospital



Balance Sheet (Combined Statement of Net Position: Hospital, Klondike Hills and Republic Drug Store)

Year to Date January 31, 2024

<i>Assets</i>	January	December	<i>Liabilities and Net Position</i>	January	December
Current assets:			Current liabilities:		
Cash and cash equivalents	\$ 3,596,009	\$ 3,667,936	Accounts payable	483,696	890,005
Receivables:			Payroll and related expenses	714,804	665,159
Gross AR	\$ 8,932,332	9,425,313	Other Current Liabilities	937,375	1,890
Contractual allowance	(2,505,902)	(2,879,105)	Total current liabilities	\$ 2,135,875	\$ 1,557,054
Patient AR - Net	6,426,430	6,546,208	Noncurrent liabilities:		
Taxes	391,064	19,811	Long term debt	\$ 1,930,587	\$ 2,561,758
Estimated third-party payor settlements	7,174	380,174	Capital lease obligations - Less current portion	-	-
Other	33,211	14,429	Total noncurrent liabilities	1,930,587	2,561,758
Inventories	539,668	541,548	Total liabilities	\$ 4,066,462	\$ 4,118,812
Prepaid expenses	276,998	182,882	Net position:		
Total current assets	\$ 11,270,554	\$ 11,352,988	Current Year Earnings	(110,797)	-
Capital assets:			Equity Accounts	13,608,438	13,608,438
Nondepreciable capital assets	\$ 47,282	\$ 47,282	Total net position	\$ 13,497,641	\$ 13,608,438
Depreciable capital assets - Net of accumulated depreciation	5,643,927	5,724,640	TOTAL LIABILITIES AND NET POSITION	\$ 17,564,103	\$ 17,727,250
Construction in Progress	602,340	602,340			
Total capital assets	\$ 6,293,549	\$ 6,374,262			
TOTAL ASSETS	\$ 17,564,103	\$ 17,727,250			

CEO/CFO-Key Performance Indicators

		<u>Jan</u>	YTD	Target	Variance	2023
Profitability						
Revenue Deductions % of Gross Revenue	●	37%	37%	37%	0%	36%
Salaries % Gross Patient Revenue	●	46%	46%	39%	-7%	36%
Benefits % of Salary Expense	●	21%	21%	21%	0%	21%
Net Income						
Operating Margin	●	-7%	-7%	-9%	2%	3%
Cash and Liquidity						
Days Cash on Hand	●	60	60	85	(25)	65
Days Cash in AR	●	107	107	53	(54)	89
Current Ratio	●	5	5	1	4	4.5
Debt to Equity	●	0.2	0.2	1	1	0.2
Claims Processing and Coding						
# Accounts on Hold	●	237	237	200	(37)	200
Net AR Days	●	61	61	45	(74)	85
Unbilled AR	●	722,229	722,229	1,000,000	277,771	524,307
GROSS AR - MEDITECH	●	7,004,996	7,004,996	4,500,000	(2,504,996)	5,637,360
Key						
●	Meets or exceeds budget/target					
●	Does not meet budget/target expectations by 5% or less					
●	Does not meet budget/target expectations by greater than 5%					



Ferry County Public Hospital District No. 1

doing business as

Ferry County Memorial Hospital

Combined Income Statement: Hospital, Klondike Hills and Republic Drug Store

Year to Date December 31, 2022

Year to Date 2022 Income Statement	Draft	Audited
Operating revenue:		
Gross patient service revenue	28,472,543	
Contractual allowances and provisions for uncollectible accounts	(9,774,128)	
Patient service revenue - (Net contractual allowances)	18,698,415	17,951,503
Drug Store gross revenue	3,379,888	3,256,445
Other operating revenue	1,064,544	641,724
Total operating revenue	\$ 23,142,847	\$ 21,849,672
Operating expenses:		
Salaries and wages	12,024,291	9,135,573
Employee benefits	2,514,662	2,104,028
Professional fees	1,007,757	4,027,361
Supplies	3,560,352	3,739,758
Purchased services - Utilities	285,702	295,176
Purchased services - Other	1,696,038	258,762
Insurance	147,890	141,648
Other	540,828	563,828
Rent	261,514	47,018
Post Employment Benefits		1,046,706
Depreciation	986,854	936,518
Total operating expenses	\$ 23,025,888	\$ 22,296,376
Gain (loss) from operations	116,959	(446,704)
Total nonoperating revenues (expenses) - Net	\$ 529,284	\$ 1,188,912
Increase (decrease) in net position	646,243	742,208

2022 Comparison



2024 Organizational Workplan

Ferry County Health

Presented by Executive Leadership Team



2024 Work Plan

<p><i>People - Goal</i> <i>Employees are engaged in their work as evidenced by patient-first communication and a culture of ownership.</i></p>	<p>Employees are participating in formally chartered committees that support strategic planning</p>	<p>Total unique employees involved in committees has increased by 10%</p>
	<p>Ferry County Health is an employer of choice in the community</p>	<p>Program has been re-introduced to county and we have won</p>
	<p>Communications are enhanced and strengthened across the organization</p>	<ol style="list-style-type: none"> 1. Communication Matrix is designed and implemented by 3/31/24 2. AIDET has been introduced and implemented across the organization by 6/30/24 with a plan for annual training and fully integrated into new employee orientation. 3. New intranet platform has limited rollout to 3 departments by 12/31/24
	<p>Identify Workforce challenges -</p>	<p>Top 2024 workforce challenges are identified by January 31, 2024, with a plan to address by 2/29/24. - H to H</p>
	<p>Increased awareness and training for all staff.</p>	<ol style="list-style-type: none"> 1. Manager meetings are implemented and well attended by 90% of managers, with clear goals and standing agenda by 3/31/24. 2. All departments have implemented department specific orientation by 3/29/24. 3. Quarterly all-employee town halls have been implemented and are posted for viewing by 6/30/24
	<p>Safety</p>	<ol style="list-style-type: none"> 1. Manager meetings are implemented and well attended by 90% of managers, with clear goals and standing agenda by 3/31/24.

2024 Work Plan-Continued

<p><u><i>Patients - Goal</i></u> <i>Patients are satisfied with their care including receiving badass and safe care, primary care services are well defined including patient panels and partner relationships.</i></p>	<p>All employees are well-versed in patient-centered AIDET communication skills</p>	<p>See Above</p>
	<p>Patient panels have been defined and providers are on board with current staffing.</p>	<p>Wait times for establishing new care outranks industry benchmarks by 50%</p>
	<p>Strong bonds and collaboration with local stakeholders to provide the care.</p>	<ol style="list-style-type: none"> 1. Input and involvement in CHNA grows from outside survey participants to active authors of the next plan. 2. MIH pilot project has been completed, operational plan written and the program has grown to include Behavioral Health by 12/31/24.

2024 Work Plan-Continued

<p><i><u>Finances - Goal</u></i> <i>Ferry County Health is financially sound while providing outstanding health services to the community.</i></p>	<p>Financials can support building the new hospital or the phases as identified.</p>	<p>See Above</p>
	<p>New Product committee is working to identify opportunities and prevent unnecessary spending</p>	<p>3 New Service applications have been processed by Committee including feasibility studies for presentation or no go.</p>
	<p>MASTER PLANNING</p>	<ol style="list-style-type: none"> 1. Phases are identified with a pathway by 6/30/24 2. Board communication plan to community is established by 9/30/24

