



**BOARD OF COMMISSIONERS' MEETING**

June 19, 2019, 12:00 p.m., in the Hospital Conference Room

Mission Statement

*“To strengthen the health and well-being of our community through partnership and trust.”*

**AGENDA**

	Page(s)		
Call to Order		Nancy Giddings	
Quorum Established		Nancy Giddings	
Review, Amend, Accept Agenda		Nancy Giddings	
Introduction of Board, District Employees and Guests		Nancy Giddings	
<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	Nancy Giddings	3-4
<ul style="list-style-type: none"> <li>• Minutes 5/28/19 Board Meeting</li> <li>• Approval of Warrants</li> <li>• Financial Write-Off Report</li> </ul>			
Correspondence		Nancy Giddings	
Public Comments			
CNO Report & Quality Improvement and Compliance/Risk Management		Lee Jackson	5-6
Clinic Report		JoAnn Ehlers	7-9
Medical Staff Report		Dr. Garcia	
Safety Report:		Brant Truman	
CFO/COO Report		Brant Truman	10
Financial Report – To be given at the meeting		Brant Truman	
CEO Report		Aaron Edwards	11-12
Old Business		Nancy Giddings	
<ul style="list-style-type: none"> <li>• Board QI Project</li> <li>• Facility Update</li> <li>• Health Foundation</li> <li>• Levy</li> <li>• CEO Annual Review</li> <li>• Rebranding</li> <li>• Finalize Charity Care Policy</li> </ul>			
Board Representative Reports			

<ul style="list-style-type: none"> <li>• Finance</li> <li>• Quality Improvement</li> <li>• Compliance/Risk Management</li> <li>• Medical Staff</li> <li>• Credentialing               <ol style="list-style-type: none"> <li>1. Request for appointment of Courtesy Medical Staff privileges by telemedicine proxy for Integra providers: David Thayer, MD; Paige Flett, MD; Gurpreet Dhillon, MD; Jace Hilton, DO; Robert Frost, MD; Tyson Finlinson, MD</li> <li>2. Request for appointment of Courtesy Medical Staff privileges for Caleb Holtzer, MD</li> </ol> </li> </ul>	Ron Bacon/David Iverson Sarah Krausse/DiAnne Lundgren Ron Bacon/Sarah Krausse Dave Iverson/ Nancy Giddings David Iverson/DiAnne Lundgren
<ul style="list-style-type: none"> <li>• EMS</li> <li>• ACH/HFCC</li> </ul>	Nancy Giddings David Iverson
New Business <ul style="list-style-type: none"> <li>• Hot Topic</li> <li>• Plan for future Audits</li> <li>• Board succession planning</li> </ul>	Nancy Giddings
Executive Session Performance of a public employee per RCW 42.30.110(g)	Nancy Giddings
Open Session – Action, if applicable regarding executive session	Nancy Giddings
Adjournment	Nancy Giddings

**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.**

**Next regularly scheduled meeting is July 23, 2019 @ 10:30 a.m. in the HUB Conference Room**



Ferry County Health

**BOARD OF COMMISSIONERS' MEETING  
May 28, 2019**

**CALL TO ORDER:** Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 10:31 a.m. on May 28, 2019, in the HUB Conference Room at Ferry County Health. Commissioners in attendance were Nancy Giddings, Ronald Bacon, David Iverson, DiAnne Lundgren and Sarah Krausse. Aaron Edwards, CEO; Brant Truman, CFO/COO; Cherie Hanning, CNO; JoAnn Ehlers, Clinic Manager and Lacy Sharbono, Executive Assistant, were present.

**QUORUM ESTABLISHED:** A quorum was present.

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

**VISITORS:** Nancy McIntyre

**APPROVAL OF CONSENT AGENDA:** A motion was made by Bacon and seconded by Iverson to approve the consent agenda the motion passed unanimously.

**CORRESPONDENCE:** Giddings read a letter from a patient with concerns about billing.

**PUBLIC COMMENTS:**

**CNO/QUALITY IMPROVEMENT AND COMPLIANCE/RISK MANAGEMENT:** Hanning reviewed the attached report.

**CLINIC REPORT:** Ehlers reviewed the attached report. She also noted Dr. Brauer is working on a protocol for home visits.

**MEDICAL STAFF REPORT:** Dr. Garcia noted the following via text:

- Have added LTC to the Medical Staff agenda to keep up to date on care and progress.
- Many new protocols and order sets in the works. Currently working on a wound care order set.
- Will continue to discuss Swing Bed regularly at the Med Staff meeting.

**SAFETY REPORT:** Truman noted there were no issues with the gun show. Mike will be meeting with a contractor to get a plan on fixing the ALF sidewalk and the sidewalk in front of the Hospital on the lower parking area. The City will be helping fix the potholes in the parking lot.

**CFO/COO REPORT:** Truman reviewed the attached report. He also noted we are working on getting an Activities Director for LTC.

The Board thanked Cherie for all her hard work while she was here.

**Giddings called for a break at 12:00 p.m. Open session continued at 12:18 p.m.**

**FINANCIAL REPORT:** Truman reviewed the attached March financials.

**CEO REPORT:** Edwards reviewed the attached report.

**OLD BUSINESS:**

- Board QI Project: Next meeting with the Providers will be in the fall.
- Facility Update: Still working with Hermanson to fix the HVAC.
- Health Foundation: They did not meet this month.
- Levy: Tabled

**BOARD REPRESENTATIVE REPORTS:**

- Finance: Bacon noted it is really nice to see where cash balances are.
- Quality Improvement: Last meeting there was training for the patient portal.
- Compliance/Risk Management: Next meeting is on 6/6/19.
- Medical Staff: Giddings noted a lot is getting accomplished at these meetings.
- Credentialing: N/A
- EMS: The EMS group looked at the Hospital property for the possibility of putting their shop here. More discussion to come.
- ACH/HFCC: Discussed demographic information.

**NEW BUSINESS:**

- Hot Topic: None
- Audit Exit Interview update: The 2016-2017 Financial Audits went great.
- CEO Annual Evaluation: Board members received the annual evaluation sheet to complete for Aaron. They will review at next month's meeting.

**EXECUTIVE SESSION:** Executive Session was called a 2:55 p.m. for 15 minutes regarding performance of a public employee RCW 42.30.110(1)(g).

Open session resumed at 3:10 p.m. No action taken.

**ADJOURNMENT:** As there was no further business the meeting was adjourned at 3:10 p.m.

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Nancy Giddings, Chair Date

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DiAnne Lundgren, Secretary Date

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Lacy Sharbono, Recording Secretary Date



TO: Ferry County Public Hospital District #1 Board of Commissioners  
 FROM: Lee J. Jackson RN, MSN, PhD, Interim Chief Nurse  
 Subject:

MEETING DATE: June 19, 2019

As of June 14, 2019

People

To be the employer of choice. To develop and support a culturally diverse, competent, motivated and productive workforce. To recruit and retain highly competent staff to meet the District's patient and resident needs.

- **CLINICAL MANPOWER NEEDS:** NAC vacancies - during past two weeks we've experienced loss of NAC's due to resignation or medical issues and are recruiting for replacements. Discussions underway to sponsor an additional training class for NAC's. In addition, nursing leaders are assessing skill and training needs of current NAC's. RN Recruitment- We continue recruitment of RN's and have vacancies due to illness/family emergency issues. We experienced loss of new RN due to salary offer from another facility prior to her beginning employment. Interviews of potential staff RN's are scheduled.
- **WORKFLOW EVALUATION:** During my stay as Interim CNO, evaluation of nursing workflow will be undertaken. Recommendations on process changes to improve workflow challenges will be discussed with Executive Team to reduce road blocks to efficient and seamless delivery of patient care for Acute/Swing & LTC patients with recommended manpower adjustments as needed.

Quality

To lead the community that improves community health status and access to care. To provide quality healthcare that can be defined, measured and published. To enforce and invest in a pervasive culture of safety.

- **INFORMATICS/PROTOCOLS/ORDERSETS:** Skin assessment process & form including Braiden Scale fully implemented in EHR and implemented concurrent chart review for compliance. Blood Transfusion documentation was found to be problematic during June Laboratory Blood Services Survey by DOH resulting in identified need to revamp blood transfusion assessment in EHR. In progress. Order Sets – Wound Care Order set under development; Sepsis Order Set in progress
- **PATIENT FAMILY ADVISORY COUNCIL:** Patient Handbook under development.
- **EMPLOYEE HEALTH & INFECTION CONTROL:** - Policy Review and updating for hand hygiene and MRSA policy with completion by July 1; New policy re Endoscopy scope patient identification for scope reprocessing completed; IC Nurse enrolled in Infection Control Certification (CIC) program through national provider (APIC).

Service

To provide an environment in which patients, families, providers and employees are highly satisfied. To provide an experience for patients that exceeds expectations in all areas of the District. To identify areas for improvement.

- **PHARMACY MEDICATION DELIVERY SYSTEM:** Pyxis MedStation and Towers installed in Medication Rooms at Nurse Station and ED. Testing is being completed with Go Live in early July 2019. Tele-pharmacy system in progress with Go Live in July. Bar Code Scanning Go Live in July.
- **NEW HOSPITAL BEDS:** Beds have arrived and placed in service, older beds rotated to LTC patients with retirement of old beds in LTC.

Financial

To be financially viable, to support advancing the mission and vision. To be operationally efficient. To offer value to payer and consumers.

- **TELEHEALTH WOUND CARE SERVICES:** The Telehealth Wound practice session went well with Coulee Medical Center Wound Services. On track for first patient clinic in June. Wound

## Growth

Care protocols are being standardized between both facilities. Standardization of wound care supplies will be undertaken to reduce variation. EHR order set is requested by FCH providers to standardize the ordering of dressings and protocol to reduce variation in practices.

- **CARDIOLOGIST ORDERED ECG'S:** Recent changes by visiting cardiologist has increased FCH staff performance of ECG's for scheduled cardiology clinic patients. This will result in increased work load volume for staff performing ECG's. Will monitor frequency and volume of patients to quantify impact on workload and offsetting revenues.

To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.

- **SWING BED PROGRAM:** During June we have experienced increased swing bed census with 3-5 patients per day. To maximize this program Nursing /Rehabilitation services and leaders are reviewing admission criteria and processes to assure that patients admitted care needs are appropriate for the skill of staff, rehabilitative services available and that the facility has appropriate equipment capable of meeting each patient's needs.



TO: Ferry County Public Hospital District #1 Board of Commissioners  
 FROM: JoAnn Ehlers  
 Subject: Clinic Report

MEETING DATE: June 18, 2019

As of June 12, 2019

People

To be the employer of choice. To develop and support a culturally diverse, competent, motivated and productive workforce. To recruit and retain highly competent staff to meet the District's patient and resident needs.

- PRN has been hired for the Referral and Front Office fill in spot. We will share her with the Hospital Front Desk and PT/OT.
- Jane Plesac will still be contacted to see if she can be available as well.
- RN Cindy has requested to go part time and be flexible and on call for us as needed. She will still run our MAT program. Her new schedule will start in July.
- We have a new Externship MA Student who is already graduated from Big Bend Community College working with us for 6 weeks. She has also applied for the PRN Position.
- We have a new U of W ARNP student joining us in later June as well.

Quality

To lead the community that improves community health status and access to care. To provide quality healthcare that can be defined, measured and published. To enforce and invest in a pervasive culture of safety.

- The Clinic staff has suffered from many illnesses and other planned missed work days and we have had some tough days. I want to state that I am always very proud of the ones that are here on those days. We have had some really good pulling together to keep things moving. I thank everyone.
- Phones are still our nemesis. We now have a main phone staff person and nearly all messages are going to only two locations so that we have better control of getting them handled.
- Radiology recently reported that they have fewer complaints regarding test results since we added a phone nurse!!! Yay.
- When I called Providence just recently, my call was sent to a phone nurse. Here I thought we came up with this idea. We call ours the Message HUB (or William.)
- Walk-in hours will now end at 4 pm.
- Some short 15 minute slots have been added to the Clinic Provider schedules as we can between the hours of 8 am and 10 am. Staff can book them at any time and we hope to help with some of the walk-ins during those hours to give the ER block time to get settled.
- The new "Check Out" process is starting with Nursing and we hope to see great improvement by receiving fewer complaints regarding results and follow up care.
- It has been reported to me that we have received several compliments on the new layout of the Clinic Lobby furniture. I found out it is the Clinic's turn for new paint this winter so I will be looking for a good color – relaxing, healing, welcoming, to replace what we have now.
- It is a slow thing but in the end, I want our Lobby to be "instantly calming" when a person comes in.
- Our lab work in the Clinic is getting a re-vamp and Karen from the Hospital will be assisting to make sure we are totally compliant and that our records are in line. I am excited about this cooperation between Clinic and Hospital.

Service

To provide an environment in which patients, families, providers and employees are highly satisfied. To provide an experience for patients that exceeds expectations in all areas of the District. To identify areas for improvement.

- Endoscopy scheduling is moving along. Dr. Kelley continues to be very helpful on his pre-op days.
- Dr. Garcia's Injection schedule is consistently full.
- Dr. Hsu will see 5 patients in June.
- We are looking forward to the tele-wound care to start up in the Hospital Outpatient with Dr. Hseih from Coulee Medical Center.
- The Veterans Choice Program changed on June 6<sup>th</sup> and we are working on what we can. Kande in referrals is working with Clinic nursing. I think we are ahead of most in this.
- Losing my full time RN has put a kink in my plans for Medicare Wellness and Chronic Care Management. I received a great amount of information and will be using it to help me figure out what we might be able to do. I am also trying to find out if I must have an RN or if I can do these programs with an LPN.

## Financial

To be financially viable, to support advancing the mission and vision. To be operationally efficient. To offer value to payer and consumers.

- The small change in adding a short visit or two to each provider schedule should prove to bring up volume a little bit.
- At this time, in the first 5 months we are averaging 108 more patients a month than in the last year.
- We have not been turning away anyone but we are moving to a more planned and efficient way to help everyone each day. Depending on what a person states they need; we may try to help them by another way than by simply checking them in.
- I am working hard to stop all interruptions to daily nurse and provider flow. It is hard to curb those that consistently just walk back and ask questions. I am asking that we stop this practice and use the Qliq System and Message HUB as much as possible. Every little question holds up patient care for those being seen that day. Patients that come into the lobby with questions will be asked to wait while we send a message and get a response.

## Growth

To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.

- At the last marketing meeting it was reported that my wish list items are being ordered. I do not know if I mentioned this before but I also asked for bags to give to patients that bring in their medications. We have been asking for this so that med lists can be cleaned up and it seems everyone has a grocery bag. It will be great to hand them a Ferry County Health bag for easy transport.
- I have a date set for the Curlew Sport Physicals and will be contacting someone in the Republic Schools soon to set a date. Providers and nursing staff are happy to help in this. We will run one at each school in August if possible from 4 to 6 pm in an assembly line fashion. We will need the help of school or coach staff.
- Still need to look at tentative flu shot event dates.
- The Dental Van is a definite GO!! Amerigroup has sent us a check for the cost of running the Van and will be our official sponsor of the event. We have one dentist so far and I have sent a letter to invite the local dentist to join us if he can. I was in error last month, we do not have a hygienist, we have a dental assistant. Still, YAY!!  
I am working with Nina on an ad to feature both the Van and Amerigroup. These ads will be handed out during the PFAC Food Truck events and all over, including the website and



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Facebook.

The following will join us: Health Care Authority (Shanna Rugo), VA will have a table, Amerigroup will be here, Rural Resources will come.

Medical Teams Registration staff will be here.

The following have been invited: DSHS Mobile Unit (trying to be here), PT/OT Department, Molina, CHPW.

I will invite the whole Hospital. I hope to arrange some refreshment and giveaways from the insurance plans.

The Van will be parked on the grass alongside the steps to the lower parking lot in Clinic area so that we do not block any parking. This will be a Cardiology Friday so we will have plenty of patient traffic.

Tables/tents will be set up by the Van on the grass surrounding it.

- I still have plenty of Vision certificates to give away so we will have them at the food trucks and this Dental Event. I hope to bring this Van in at least yearly.

I am sorry to have missed another meeting. (I am busy being tortured today.)

Respectfully submitted, JoAnn Ehlers

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TO: Ferry County Public Hospital District #1 Board of Commissioners  
 FROM: Brant Truman  
 Subject: COO/CFO Report

MEETING DATE: June 20, 2019

As of June 17, 2019

People	<p>To be the employer of choice. To develop and support a culturally diverse, competent, motivated and productive workforce. To recruit and retain highly competent staff to meet the District's patient and resident needs.</p> <ul style="list-style-type: none"> <li>• Gold Rush run was a huge success able to donate \$2k to Forget Me Not Animal Shelter, 60 participants will have more next year.</li> <li>• New Activities Director started this last week, look forward to having her aboard!</li> <li>• Able to go tour hospital in Dayton, learned a lot looking forward to implementing some changes based on discussion there.</li> </ul>
Quality	<p>To lead the community that improves community health status and access to care. To provide quality healthcare that can be defined, measured and published. To enforce and invest in a pervasive culture of safety.</p> <ul style="list-style-type: none"> <li>• First meeting completed in regards to Registration committee, looking forward to improvement.</li> <li>• Pyxis implementation in process currently.</li> </ul>
Service	<p>To provide an environment in which patients, families, providers and employees are highly satisfied. To provide an experience for patients that exceeds expectations in all areas of the District. To identify areas for improvement.</p> <ul style="list-style-type: none"> <li>• Increased resources used in Nursing in the hospital to help out.</li> <li>• Working thru MRI project to see if full time bus is possible.</li> <li>• Starting on process for new cardiac monitoring system.</li> <li>• Currently working thru HVAC improvement</li> </ul>
Financial	<p>To be financially viable, to support advancing the mission and vision. To be operationally efficient. To offer value to payer and consumers.</p> <ul style="list-style-type: none"> <li>• Yearly audit review with new vendor starting soon.</li> <li>• Review of 2018 cost report shows miscalculation of square feet causing a large payable on behalf of the hospital, just received the bill which will take a \$150k hit on our cash.</li> <li>• Pre auth's for most services causing increase administrative burden.</li> <li>• VA continues to cause issues related to adjustment in services.</li> <li>• Average daily revenue again was at an all-time high, so was total revenue at \$1.704 million.</li> <li>• Paid additional \$240k towards debt principal year to date, continue to be aggressive with approach of paying debt off.</li> <li>• AR days at 54 days.</li> <li>• EMR incentive payment of \$134.5k coming shortly, still waiting on this being completed.</li> <li>• Working on RHC Reconciliation for 2014 thru 2017.</li> </ul>
Growth	<p>To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.</p> <ul style="list-style-type: none"> <li>• Continued attempts at new/improved services is currently being attempted.</li> </ul>



TO: Ferry County Public Hospital District #1 Board of Commissioners  
 FROM: Aaron Edwards, CEO  
 Subject: CEO Report

MEETING DATE: June 20, 2019

As of June 12, 2019

People	<p>To be the employer of choice. To develop and support a culturally diverse, competent, motivated and productive workforce. To recruit and retain highly competent staff to meet the District's patient and resident needs.</p> <ul style="list-style-type: none"> <li>• Lee Jackson has joined us as interim CNO.</li> <li>• Amber Lemoine has joined on to take over our LTC activities in July. She has extensive experience with this position from past work at a larger facility out of State.</li> <li>• Working with Spokane Community College to identify specific areas of staffing where we need additional training and assistance.</li> </ul>
Quality	<p>To lead the community that improves community health status and access to care. To provide quality healthcare that can be defined, measured and published. To enforce and invest in a pervasive culture of safety.</p> <ul style="list-style-type: none"> <li>• Continue to grapple with how we use our patient portal via discussion at our QI meeting (Quality Improvement).</li> <li>• Working on getting close to 100% compliance with an annual QI project (have a few departments outstanding).</li> <li>• Karen Quinnell has stepped up to help the clinic with an overhaul of their lab practices, equipment, and policy.</li> <li>• James is working on reviewing on our old phone system and has received proposals for replacing the system. Hopefully more on that soon.</li> <li>• Working with the UW to possibly be a site in a clinical study on Tele MAT (Medically Assisted Treatment = Suboxone).</li> <li>• We received two new beds in the hospital this past week; making progress on replacing all of our beds.</li> <li>• Our Pyxis machines have arrived and we are in the process of set up and training.</li> </ul>
Service	<p>To provide an environment in which patients, families, providers and employees are highly satisfied. To provide an experience for patients that exceeds expectations in all areas of the District. To identify areas for improvement.</p> <ul style="list-style-type: none"> <li>• Promoted the Prospectors Day Fun Run. Attendance up 50% from last year and we raised \$2000 for the Forget Me Not Animal Shelter.</li> <li>• Attended the Ferry County Health Coalition where we talked about ways to increase vaccination rates among preschool aged children and teens and also talked about reducing maternal tobacco use.</li> <li>• Attending The Newport Health Foundation fundraiser 6/14 along with Davenport Public Hospital District #3.</li> <li>• Participated in a WSU interview which seeks to better understand our rural opioid problem and how the University might find ways to help communities such as ours.</li> </ul>
Financial	<p>To be financially viable, to support advancing the mission and vision. To be operationally efficient. To offer value to payer and consumers.</p> <ul style="list-style-type: none"> <li>• Working with the NWRHN to build a coalition to look at self-funded insurance options.</li> <li>• Medical Staff continues to grapple with our Swing bed program.</li> </ul>
Growth	<p>To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.</p>

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- Visiting Columbia County Health 6/13 (Dayton, WA) to discuss successes they have had in various areas and how we might adopt some of their practices (Swing Bed, Psych, Billing, etc.).
  - Did a practice run for our new Tele Wound service that will be starting shortly in conjunction with Grand Coulee Hospital.
  - Continue to talk with various vendors about bringing in a robust Tele Behavior Health program (both inpatient and clinic).
-