

BOARD OF COMMISSIONERS' MEETING

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

AGENDA

Call to Order Nancy Giddings

Quorum Established Nancy Giddings

Review, Amend, Accept Agenda Nancy Giddings

Introduction of Board, District Employees and Guests Nancy Giddings

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.

Approval of Consent Agenda ACTION Nancy Giddings 3-6

- Minutes 7/26/22 Board Meeting
- Approval of Warrants
- Financial Write-Off Report
- Resolution 2022#8 Surplus Small Equipment

Correspondence Nancy Giddings

Public Comments Nancy Giddings

Compliance Report Spencer Hargett

Quality Improvement Mike Martinoli

COO/HR Report Debbie DeCorde 7-8

Safety

CNO Report Mike Martinoli 9

Medical Staff Report Dr. Garcia

CEO/CFO Report Jennifer Reed 10-25

Old Business Nancy Giddings

- Board QI Project
- Facility Update/Master Plan
- Health Foundation
- Strategic Planning
- Pharmacy

Board of Commissioners 36 Klondike Rd, Republic, WA 99166 P. (509) 775-8242 F. (509) 775-3866

- Airport update
- Safety Project

Board Representative Reports

Finance Ron Bacon/Sarah Krausse
Quality Improvement Jody Jannot/DiAnne Lundgren
Compliance/Risk Management Ron Bacon/Sarah Krausse

Medical Staff
Credentialing
DiAnne Lundgren/Nancy Giddings

EMS Nancy Giddings

New Business Nancy Giddings

Open 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 September 27, 2022 @ 10:30 am in the HUB Conference Room



BOARD OF COMMISSIONERS' MEETING July 26, 2022

CALL TO ORDER: Board Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 10:33 a.m. on July 26, 2022, in the HUB conference room at Ferry County Health and via zoom. Commissioners in attendance were Nancy Giddings, Ronald Bacon, Sarah Krausse, DiAnne Lundgren and Jody Jannot. Jennifer Reed, CEO/CFO; James Davidson, IT Manager, Mike Martinoli, CNO; Spencer Hargget, Compliance Officer; Debbie DeCorde, COO; Adam Volluz, Informaticist, and Lacy Sharbono, Executive Assistant were present.

GUESTS: None

QUORUM ESTABLISHED: A quorum was present.

REVIEW, AMEND, ACCEPT AGENDA: A motion was made by Krausse and seconded by Jannot to add 4 credentialing items under new business. The motion passed unanimously.

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

CORRESPONDENCE: None

PUBLIC COMMENTS: None

EHR REPORT: Volluz gave an update Meditech implementation.

COMPLIANCE REPORT: Hargett reviewed report. Discussed de-escalation training, policy and procedures and vaccine mandate.

QI REPORT: Martinoli reviewed his report.

COO/HR REPORT: DeCorde reviewed her report.

CNO REPORT: Martinoli reviewed his report.

MEDICAL STAFF REPORT: Reed gave updates on the Hospital from Dr. Garcia.

Giddings called for a break at 11:45 a.m. Open session continued at 12:06 p.m.

CEO & CFO REPORT: Reed reviewed her report. She also proposed a retention incentive for all staff.

A motion was made by Lundgren and seconded by Krausse to approve the one time retention incentive for all staff. The motion passed unanimously.

FINANCIAL REPORT: Reed reviewed the June financials.

OLD BUSINESS:

- Board QI Project: Will bring treats for the nurses on August 8th.
- Facility Update: Company will be here in August to start the Master Facility Plan for 10 days.
- Health Foundation: They have given out scholarships.
- Strategic Planning: Discussion on next steps.
- Pharmacy: Still working to hire a Pharmacist.
- Airport update: Discussed in the CEO report.

BOARD REPRESENTATIVE REPORTS:

- Finance: No Board concerns.
- Quality Improvement: No Board concerns.
- Compliance/Risk Management: No Board concerns.
- Medical Staff: No Board concerns.
- Credentialing:
 - 1. A motion was made by Lundgren and seconded by Krausse to approve the Active Medical Staff privileges for Silas Wiefelspuett, MD. The motion passed unanimously.
 - 2. A motion was made by Lundgren and seconded by Krausse to approve the Courtesy Medical Staff privileges for Aaron Scott, MD. The motion passed unanimously.
 - A motion was made by Lundgren and seconded by Krausse to approve the APP Medical Staff privileges for Joseph Petersen, ARNP. The motion passed unanimously.
 - 4. A motion was made by Lundgren and seconded by Krausse to approve the Active Medical Staff privileges for Richard Garcia, DO. The motion passed unanimously.
- EMS: Giddings noted they had to open up the bids again for the project.

NEW BUSINESS: Nothing to report.

EXECUTIVE SESSION: Executive Session was called at 1:50 p.m. regarding RCW 42.30.110(1)(g).

Open session resumed at 2:20 p.m.

DJOURNMENT: As there was no further business the meeting was adjourned at 2:20 p.m.								
Nancy Giddings, Chair	Date	DiAnne Lundgren, Secretary	 Date					
Lacy Sharbono, Recording Secretary	 Date							



RESOLUTION 2022 #8

A RESOLUTION OF THE FERRY COUNTY HEALTH BOARD OF COMMISSIONERS, REPUBLIC WASHINGTON, AUTHORIZING THE DISPOSAL OF SURPLUS SMALL EQUIPMENT AND SUPPLIES.

WHEREAS, the District purchased and/or was donated several pieces of small equipment and supplies several years ago for multiple uses in different departments.

WHEREAS, the small equipment and supplies listed on attached Exhibit A are no longer in use and are in poor shape or obsolete,

WHEREAS, Exhibit A list of items are no longer necessary for the District's use and it would be an inefficient use of resources to move or continue to store them,

THEREFORE, the Ferry County Health Commissioners hereby resolve the aforementioned small equipment and supplies listed on Exhibit A shall be deemed surplus and disposed of by the District Policy, at the discretion of the Plant Manager.

RESOLVED, this 23rd day of August 2022.

APPROVED at regular meeting of the Commissioners of Ferry County Health, Republic, Washington, this 23rd day of August 2022.

Nancy Giddings, Chair	Date	Ronald Bacon, Vice Chair	Date
DiAnne Lundgren, Secretary	Date	Sarah Krausse, Commissioner	Date
Jody Jannot, Commissioner	 Date		

Asset Disposal Sheet (Quarterly Report) Disposal of Surplus Property other than Real Estate (Policy 25.01.001 - Exhibit A) For 3rd Quarter, 2022

DATE OF	DESCRIPTION (Model/Serial #/					
ACQUISITION	Quantity/Current Location)	REASON FOR DISPOSAL	DISPOSITION	I PROCESS	DISPOSAL TIMELINE	COMMENTS
2000	10-Dell Optiplex 760	Broken	Dump		ASAP	
2008	5- ViewSonic Monitor	Broken	Dump		ASAP	
2005	10- Acer Monitor	Broken	Dump		ASAP	
2000-2010	10- Dell Monitor	scratched screen	dump		ASAP	
2000	1- Dell Optiplex 755	not supported anymore	Dump		ASAP	
1998	1- Dell Postiplex GX520	not supported anymore	Dump		ASAP	
2005	1-Coby Monitor /TV	Broken/scratched	Dump		ASAP	
		overly used/ keys full of				
2015-2020	32- Variety of keyboards	food	Dump		ASAP	
1998	150-Nortel Desk phones	old phones	Dump		ASAP	
NA	1- Washable Keyboard	wire showing/broken	Dump		ASAP	
	Critikon Dinamap K8012 Asset 211196-28	·				
1996	Control # 211196	replaced	Dump		ASAP	
	GE Dinamap SN 032M1609005 Control	·				
Recorded 2015	# 235346	replaced	Dump		ASAP	
	GE Dinamap SN 032M1589006 Control					
Recorded 2015	# 235344	replaced	Dump		ASAP	
2013	Welch Allyn Propaq Monitor SN 07296022 Control # 235086	replaced	Dump		ASAP	
2012	Welch Allyn Propaq Monitor SN 04174015 Control# 235088	replaced	Dump		ASAP	
2012	4- Dayton Platform Carts	Never used/rotten wheels	Donations/Habitat		ASAP	

APPROVED BY:	
acilities Mgr	Date:
CFO	Date:
CEO	
BOD	Date:

Resolution 2022 #8

Date Approved by BOC: 8/23/22



To: Ferry County Public Hospital District #1 Board of Commissioners Meeting Date: August 23, 2022

From: Debbie DeCorde Subject: COO Report

As of August 23, 2022

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.

- Employee statistics for the month of July include four new hires and two internal transfers. We had three exits; 1 retirement and 2 resignations, one of which was to relocate. Our total headcount is 162.
- We are preparing to welcome volunteers back to the organization and look forward to the amazing
 ways in which they have supported the organization in the past.
- We have highly engaged ALF residents and staff. Staff is thankfully growing and HR has provided great candidates. The ALF is preparing for their summer-to-fall transformation. Some residents will be attending the fair.
- Rehab will be welcoming 2 new PT travelers in September. The pair travels together and are excited to live in our area for the winter.
- The Drug Store welcomed the full-time Pharmacist yesterday. Please visit the Drug Store to meet Ben Walling.

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.

- Manager Training for August is on interviewing.
- Our Executive Team is examining Building a Culture of Ownership with a different leader facilitating a section weekly.
- Air scrubbers have cleaned the drug store environment. Four air purifiers have been purchased and
 installed in the retail pharmacy. A large scrubber is currently being run off hours to assist the retail
 pharmacy.

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.

- Goat-mowing didn't come to fruition for the summer of 2022. Adam Volluz is looking into earlier in the season booking of the service for next summer. This summer we posted for a part-time groundskeeper to assume the seasonal work.
- The facility groundskeeper and maintenance team have been working hard to catch up on some much needed grounds work. The appearance of our facility grounds is a priority at this time.

Financial

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

- The Medical Clinic's Total number of patients seen: 799 (month of June: 847, decrease of 47patients) Total number of walk ins: 105 (month of June: 69, increase by 36 patients)
- The new EKG machine is being used with great success and ease. This has been a provider satisfier.
- The MRI chiller was delivered and installation was initiated last week. It should be operational later this week as an issue with the Glycol tank created a delay.

Growth

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

- Meditech build for the clinic is going well. The consultant, Rhi, has been an invaluable resource and she
 and the Clinic Manager, Julia, have been working very hard to build templates, cleaning up standard
 templates, and ensuring all required information is included in immunization and medication orders. The
 Meditech builders support any issues that are being identified.
- We now have four Front Office Coordinators/Medical Assistants, Registered. Kudos to the FOC-MAR's that are now fully licensed as MAR's with State of WA/DOH. This exudes the learning environment and internal growth we strive for organizationally.

Safety

To demonstrate our commitment to workplace safety and health. To provide a safe environment for patients and the community.

- 2 bollards have been purchased and received for the ER entrance. Currently working with EMS to ensure their placement will not inhibit patient transfer in and out of the ambulance. The bollards will provide a physical barrier which prevents vehicular entry through our ER doors.
- Install of additional security cameras at the ER entrance for optimal visualization of the area between the double doors.
- Signage is being updated and posted to inform all patients and visitors of our no violence policy.
- A policy is being drafted on how to handle trespassing situations on district property. This will include a
 procedure to inform all staff of individuals who have been trespassed from our grounds.
- We are ordering product to patch the damaged concrete sidewalks outside the pharmacy.

TO: Ferry County Public Hospital District #1 Board of Commissioners MEETING DATE: August 23rd, 2022

FROM: Mike Martinoli, Chief Nursing Officer

Subject: Nursing Department Report

As of, August 17th, 2022

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.

- Recruitment is underway for noc RN's, a LTC Nurse, a day NAC, noc NAC's, and Care Coordinator.
- Mike will deliver positive updates from our Activities Coordinator regarding program growth.
- The Nurse Staffing Committee will continue to have regularly scheduled meetings. Jennifer and Mike are included as Administrative members. New clinical nurse members are to be added to the group this month. This Committee fosters transparent and collaborative communication.

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.

- QI update: Mike is conducting 1:1 meetings this month with our Committee members to assess current needs, obtain ideas for program growth, and begin planning for 2023 projects.
- The idea of continuous learning is a focus for our department. Plans are underway to cross train our NAC's to become MAR's. This title will allow the employees to learn and perform an increased variety of skills throughout the ED and Acute Care units.

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.

 The nurse education team is planning to host the next NAC class in early January 2023 once the holiday season has passed. We are very excited to increase advertisements of the opportunity throughout our community.

Financial

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

- Dawn is a skilled educator and is successfully providing BLS, ACLS, PALS, and TNCC training to our district employees. We now only rely on outside Instructors for NRP certification courses.
- A budget purchase this month was an 'Auto Pulse', aka automatic CPR compression unit. This unit will ensure high quality CPR is maintained consistently without the physical strain on staff.
- Technology purchases: ergonomic workstation on wheels with a computer desktop for ED charting. Also, a medical grade tablet device to be used for registration, charting, and obtaining wound pictures.

Growth To be

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

- Mike has joined the 'Clinical Placement Solutions' summit sessions to keep our district a stakeholder for future clinical site opportunities. The first meeting brought industry and education partners together for a productive collaboration experience.
- Discussions occurred regarding solutions to the lack of clinical site availability, how to strengthen
 networking between education Deans and facilities, ideas to consider lodging for students so travel to
 our remote areas can be sustainable, and the quality of a versatile learning experience a student can
 achieve at a CAH was discussed. Mike initiated discussions about the past 'RONE' (rural opportunities
 for nurse education) program, and the Summit will continue problem solving at future meetings.
 - o 'RONE is primarily designed for current healthcare workers in rural areas and secondarily for geographically isolated prospective nursing students who cannot access traditional nursing programs. RONE was launched 2009-2015 to serve Critical Access Hospitals and our rural/remote communities needing Registered Nurses.' –Lower Columbia College



TO: Ferry County Public Hospital District #1 Board of Commissioners

FROM: Jennifer Reed Subject: CEO/CFO Report Meeting Date: August 23, 2022

As of August 23, 2022

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.

- Teena is doing a great job! Thank you to Lacy who has been there for her.
- Retention incentive was paid quicker than anticipated and seemed to really be appreciated and well received.
- Next BBQ is Friday, August 26.
- Dr. W's visa has been approved and he will be starting on the 22nd.
- Pharmacist hire is confirmed!
- Next big search will be to replace Laura Karg.
- Karen was chosen as Informatics and a search is on for her replacement.

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.

- Reworking surveys to include patients that are crossing services and asking communication questions. This will help us identify problems and be able to measure progress.
- Working on workflow for the QMM and how events get tracked, followed up, and closed. Same with the NRC survey data, tracking follow-up and closure of both satisfied and dissatisfied.
- Working with the health district on hosting a focus group for the Needs assessment.
- Due to pushback and reaction from compliance, legal and our insurance company, the taser policy, and training have been put on hold. Looking at an outside security company and other options. Risk is high and security is our focus.

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.

- Airport. Waiting for an update on the airport.
- Talking to collaborative grant writer about the weather station.

Financial

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

- We are showing a little bit of a loss last month. A look at late charges shows a backlog of charges of approximately \$381K which would put us in the positive side so operationally we still held positive last month. Currently still ahead of budget.
- CARES dollars to spend. We have spent \$90,000 on retention, \$60,000 for the airport, and master plan fees will come through soon. Still looking for a readily available tiny house.
- Would like us to join the Collaborative Enterprise LLC. Elya, from Collaborative, will present next month on the Enterprise LLC.
- We are working through the one and only Medicare Advantage plan that is coming to the county. More to come on that but we are at a pretty good reimbursement rate of 5% over our Medicare rate.
- Working on the budget process with Mena. Planning a process where Mena and I can be more actively involved while managers have their workbooks. We will also hold a manager meeting related to budgeting 101.

Growth

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

- Preparing feasibility on the LTC options and working with the other hospitals in the state that are doing the same, on dealing with the statewide DOH response. This will be an ongoing conversation with DOH and DSHS. Much more to come on this.
- Watching primary care volumes and also running a feasibility on Curlew options.

Ferry County Public Hospital District #1 Financial Statements Month Ending July 31, 2022



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 July 31, 2022

		;				% of Gross		% of Gross
		Ę,	June	75	July	Kev	AID	Rev
Operating responses.								
ס'חבים מיווים באמווים:			6	777	0		1 4 4	
Gross patient service revenue		6,649,669	7,3/9,723	7,111,639	956,262,2		16,054,265	
Drug Store gross revenue		816,849	303,192	889,677	286,722	11% \$	1,993,249	
Contractual allowances and provisions for uncollectible								
accounts		(2,519,618)	(778,544)	(2,599,825)	(1,096,406)	-43% \$	(6,215,849)	-34%
Patient service revenue - (Net contractual allowances)		4,946,901	1,903,871	5,520,591	1,483,273	51% \$	11,950,764	%99
Bad debt expense		40,406	20,556	55,386	6,017		101,809	1%
Other operating revenue		136,155	86,812	192,753	30,634	1% \$	359,543	7%
Total operating revenue	\$	5,123,462	2,011,238 \$	5,768,730	1,519,924	\$ %65	12,412,116	%69
Onerating expenses:								
Openion and upday		2 126 184	728 973	2 189 714	795 082	21% <	5 110 979	78%
Jaian Sand Wages		£71.050	100,025	770001	017,007		1 216 064	707
		24T,000	100,130	320,074	130,100		1,410,044	200
Professional rees		464,612	CTC,021	459,755	150,102		1,074,463	%0
Supplies		363,629	76,061	285,578	158,200		807,408	4%
Purchased services - Utilities		90,828	18,791	72,141	19,136		182,105	1%
Purchased services - Other		359,625	115,940	389,756	198,015	\$ %8	947,396	2%
Pharmacy Drugs		426,721	154,993	518,611	184,568	\$ %/	1,129,900	%9
Drug Store Retail		32,661	4,293	23,253	6,358	\$ %0	62,272	%0
Insurance		33,495	11,533	26,661	18,591	1% \$	78,747	%0
Other		138,903	37,816	112,681	21,370	1% \$	272,954	5%
Rent		66,930	19,346	59,518	22,585	1% \$	149,033	1%
Amortization		10,989	3,663	10,989	3,663	\$ %0	25,640	%0
Depreciation		221,379	77,029	225,788	77,111	3% \$	524,278	3%
Total operating expenses	\$	4,897,815 \$	1,567,038 \$	4,894,517	1,788,892	\$ %82	11,581,224	64%
Gain (loss) from operations		225,647	444,200	874,213	(268,968)	-12% \$	830,892	2%
Nonoperating revenues (expenses):								
Property taxes		89,272	42,489	110,771	29,665	1% \$	229,708	1%
Interest earnings		1,669	1,881	5,569		\$ %0	7,238	%0
Interest expense		(13,122)	(4,043)	(12,596)	(3,958)	\$ %0	(29,676)	%0
Grants and donations		6,542	1	407	13,377	1% \$	20,326	%0
Other		73,712	34,883	83,420	27,726	1% \$	184,859	1%
Total nonoperating revenues (expenses) - Net	\$	158,073	75,210	187,571	66,810	3% \$	412,454	2%
	4						1	ì
Increase (decrease) in net position	v	383,720 \$	519,411 \$	1,061,784 \$	(202,158)	\$ %8-	1,243,346	1%
			,					

Ferry County Public Hospital District No. 1

doing business as

Ferry County Memorial Hospital

Republic Drug Store Income Statement Year to Date July 31, 2022

						% of Total		
***************************************	징		June	075	July	Rev	YTD	
Operating revenue: Pharmacy revenue - (Allowances)	748	748,025	273,159	802,612	255,784	%68	1,806,421	
Retail Revenue	68	68,824	30,032	87,066	30,938	11%	186,828	
Total operating revenue	\$ 816	816,849 \$	303,192 \$	\$ 229,688	286,722	100% \$	1,993,249	
Operating expenses:								
Salaries and wages	9/	76,714	30,593	85,116	31,155	11%	192,986	
Employee benefits	56	26,911	8,381	20,660	9,166	3%	56,736	
Utilities	Ŋ	5,025	433	5,054	1,233	%0	11,312	
Pharmacy Drugs	426	426,721	154,993	518,611	184,568	64%	1,129,900	
Retail	32	32,661	4,293	23,253	6,358	2%	62,272	
Supplies	2	2,546	485	4,469	1	%0	7,015	
Purchased services- Other	9	6,197	2,325	6,571	1,326	%0	14,094	
Taxes and Licences	0	,286	3,938	11,423	3,853	1%	24,562	
Advertising		459	373	373	115	%0	947	
Professional Fees	53	53,763	14,047	52,172	19,547	7%	125,482	
Other	9	6,649	212	5,534	2,454	1%	14,637	
Amortization	70	10,989	3,663	10,989	3,663	1%	25,640	
Depreciation	m	3,751	1,250	3,751	1,250	%0	8,753	
Total operating expenses	\$ 661	661.672 \$	224.986 \$	747.975 \$	264.688	92% \$	1,674,334	
Gain (loss) from operations	155		78,205	141,703	22,034	8%	318,915	
Nononorating revenues (exnenses).								
Grants and Donations		(407)	,	407	•	%0	1	
Interest Expense Interest earnings	(3	(3,523)	(1,062)	(3,456)	(1,044)	%0 %0	(8,023)	
Total agraphing roughling foundation Mat	ν (1)	73 031) \$	\$ (C30 L)	\$ 101027	(1,044)	\$ 6	(8 003)	
יאפן ביים ווסווסף ביים וויים וביים וביים ווסווסף בייאפן			¢ (700/T)		(T)O++)		(6,020)	
Increase (decrease) in net position	\$ 151	151,247 \$	77,143 \$	138,654 \$	20,991	1 % \$	310,892	16%

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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 July 31, 2022

	Υ	TD Balances	Y	TD Balances
Assets		June		July
Current assets:				
Cash and cash equivalents	\$	8,060,338	\$	7,610,711
Receivables:	•	-,	•	.,,
Gross AR		4,565,408		5,072,887
Contractual allowance		(1,573,532)		(1,723,153)
Patient AR - Net		3,175,275		3,462,255
Taxes		131,926		129,494
Estimated third-party payor settlements		-		-
Other		149,519		(274,849)
Inventories		479,751		484,809
Prepaid expenses		104,497		147,129
Total current assets	\$	12,101,304	\$	11,559,548
Noncurrent and and anch againstants				
Noncurrent cash and cash equivalents:				
Restricted cash & cash equivalent, USDA reserve		~		-
Internally designated cash and cash equip, funded depreciation		-		
Total noncurrent assets limited as to use		-		_
Capital assets:				
Nondepreciable capital assets		27,282		27,282
Depreciable capital assets - Net of accumulated depreciation		6,734,789		6,668,055
Construction in Progress		139,834		187,629
25				
Total capital assets	\$	6,762,071	\$	6,882,967
TOTAL ASSETS	\$	18,863,376	\$	18,442,515

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 July 31, 2022

	Υ	TD Balances	Υ	TD Balances
Liabilities and Net Position		June		July
Current liabilities:				
Current maturities - Long term debt	\$	306,912	\$	255,876
Current maturities - Capital lease obligations	7	20,664	т	21,077
Accounts payable		265,276		405,676
Warrants payable		1,439		1,439
Sales Tax Payable		3,938		3,853
Patient trust		500		500
Payroll and related expenses		527,184		305,507
Accrued vacation		408,265		403,330
Unearned tax revenue		177,878		148,232
Accrued interest payable		-		-
CARES ACT FEDERAL FUNDING		874,701		684,715
Estimated third-party payor settlements		51,056		51,056
Total current liabilities	\$	2,637,814	\$	2,281,261
Noncurrent liabilities:				
Long term debt		2,132,946		2,132,946
Capital lease obligations - Less current portion		30,903		28,918
		0.450.040		0.464.005
Total noncurrent liabilities		2,163,849		2,161,865
Total liabilities	\$	1 901 663	ċ	4 442 125
Total liabilities	<u> </u>	4,801,663	\$	4,443,125
Net position:				
Invested in capital assets		4,270,646		4,256,520
Restricted expendables		-		-
Unrestricted		9,791,067		9,742,870
				· · · · · · · · · · · · · · · · · · ·
Total net position		14,061,713		13,999,389.78
			٠	
TOTAL LIABILITIES AND NET POSITION	\$	18,863,376	\$	18,442,515

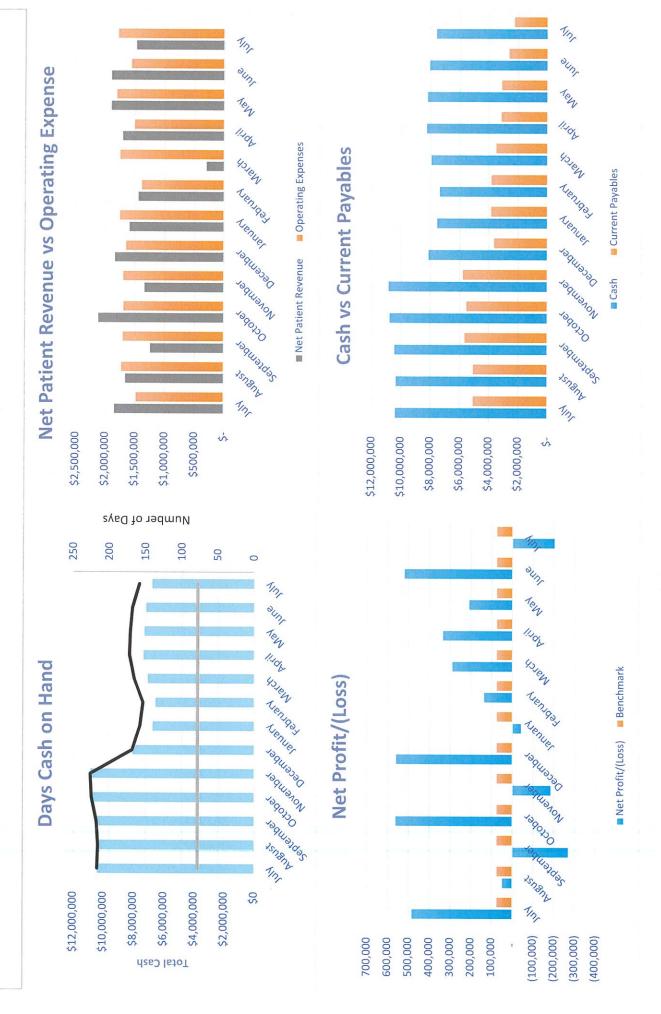
FINANCE DASHBOARD Ferry County Public Hospital District #1 July 31, 2022

		Current Month	th	
Stats	Current Total	Target	Prior Year	
1 Acute Care Patient Days	•	48	16	16
2 Skilled Swing Bed Patient Days		57	38	107
3 Non-Skilled Long Term Care Patient Days	•	253	362	209
4 Observation/Short Stay Hours		276	197	211
5 Admissions	•	10	9	4
6 Average Length of Stay (ALOS)	3	3.97	4.00	2.70
7 Outpatient # Visits		902	832	863
8 ED # Visits	•	226	143	124
9 Emergency Admit to Inpatient	2.9	2.92%	2.80%	2.00%
10 Procedures/Treatment #Patients		2	20	13
11 Republic Clinic #Visits	•	799	877	699
12 Rehab Treatments	•	812	863	1063
13 Imaging Visits	•	507	350	369
14 Lab # Billable Tests	2.	2758	2268	2309
Profitability				
14 Revenue Deductions % of Gross Revenue	0	43%	30%	37%
15 Salaries % Gross Patient Revenue	6	31%	45%	33%
16 Benefits % of Salary Expense		19%	76%	31%
17 Bad Debt % Gross Patient Revenue	0	0.3%	1.78%	2.30%
18 Charity % Gross Patient Revenue	2.4	2.40%	1%	0.27%
19 Total Salary Expense	\$ 795,082	\$	\$ 000,000	599,825
Key				

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

Meets or exceeds budget/target

2022 Financial



Try July Commercial Ten Medicare Veterans Medicaid Self Pay = Blues Cash Collections- Patient Accounts 1496 Benchmark SIEN Nenday Nenuer Payer Mix Total Cash Collection December October 18% to qui of que 2022 Revenue Cycle YS NAMA \$400,000 \$200,000 \$1,800,000 \$1,200,000 \$1,000,000 \$800,000 \$600,000 \$1,600,000 \$1,400,000 Net Days in AR, \$ sleinad Thy \$250,000 \$200,000 \$150,000 \$350,000 \$300,000 \$100,000 \$50,000 Benchmark, 50.77 42 July Toy Thy 140/2 July **Total Avoidable Denials** ----- Denial Amount YSIEN Ten Nenigo, 1496 Days in AR BIEN Nenuer Nenigos John John Co Total Denials 109ULANON December 10 quanon Togopo October 10 quid que 199Weller 45 nany 180 150 120 90 60 60 270 240 210 70 9 50 40 20 Met Days in AR and Collections % Total Denials

The 10.96 2022 JUN 13.53 Ton Labor as Percent of Operating Revenue 1492 10.96 Average Age of Plant Benchmark 2021 45 PEN 13.45 Tiengay https://3jzjstox04m3j7cty2rs9yh9-wpengine.netdna-ssl.com/wp-content/uploads/2019/04/StateMediansReport_2019_v3.pdf Average Age of Plant Nenuer 10.96 2020 المال CAH Financial Indicators Report: Summary of Indicator Medians by State 12.64 18 do So 2022 Liquidity 10.96 2019 12.48 15 NONE %09 %02 20% 30% 10% 40% 20% %0 16 14 12 10 ∞ 9 4 0 Debt to Capitalization 30% 25% 20% 15% 10% %0 2% TON Try our 1400 Debt to Capitalization Ton Total Margin 45 PEN 1496 Debt to Capitilization --- Debt Sien Nenigos Venigos Nenuer Venuer December Series1 December November Benchmark Jodobo MUSINA todillor des 19dobe ISNAMA b \$2,000,000 Musides. \$3,500,000 \$3,000,000 \$4,000,000 \$2,500,000 \$1,500,000 \$1,000,000 \$500,000 \$0 -10% AUBUS? 35% 30% 25% 20% 15% -15% 10% 2% %0 -20%



Strategic Plan

07.28.2020 - updated August 2022

Your Partner in Health

Ferry County Health 36 Klondike Rd Republic, WA 99166

Overview

The strategic plan will work as guidance toward the mission of Ferry County Health, "Your Partner in Health", by defining our organization's goals, what they mean to us, and how we can achieve them together.

Goals

- 1. Build a Culture of Ownership
- 2. Improve Communication
- 3. Update Infrastructure

Specifications

Milestones have been set for each of the goals listed to support the Executive Team and the FCH team as a whole, in their efforts to build a foundation in which a new culture and communication structure can thrive.

Timelines

Established timelines coincide with the milestones laid out by the Board of Commissioners. Each defined goal has time driven milestones that provide a focused, specific, and measurable effort that can be tracked and celebrated.

Milestones

I. Building a Culture of Ownership

In three months, the Executive Team will have identified the tool(s) needed to direct a thriving culture of ownership at Ferry County Health (see attachment: "Invisible Architecture", as an example.

Progress: In an effort to build a culture of ownership, the past executive team developed a tiered performance plan that specified levels of ownership, and corresponding pay increases related to the level that the employees had reached. We will continue to develop merit based pay strategies but, as suggested by previous administrative team, this requires more planning and training in order to implement.

What does ownership look like?

- 1. Employees feel empowered to solve problems and they take initiative
- 2. Employees demonstrate leadership
- 3. Employees are engaged

Identify the tools to get there. Fostering a culture of ownership.

- 1. Be clear about expectations. Have a clear values statement (core values) and live by them. Publish them, print them, live them, and hold people accountable to them. Call out those who are really displaying those values. Our values are:
 - a. Quality/Safety: by constantly holding ourselves to a higher standard.
 - b. Integrity: through honesty and respect.
 - c. Compassion: by providing a nurturing and caring environment.
 - d. Stewardship: by utilizing our resources to their highest and best purpose.
 - e. Teamwork: by working together in a culture that promotes excellence.
- 2. Provide meaningful work, recognize a job well done and help them grow.
- 3. Catching people doing good.
- 4. Provide an emotionally positive workplace.

Measuring Success

- 1. Participation on committees and in Meditech Training. Goal is 100% participation that shows ownership in the training and also in the project in general.
- 2. Survey Results Employees are engaged. We will measure the following:
 - a. Belonging. Questions
 - b. Fellowship
 - c. Pride
 - d. Stewardship of resources
- 3. Volume of internal movement.

II. Improve Communication

In seven months, the Executive Team will have identified common communication problems, where they are occurring, and propose potential system-wide solutions to help solve these problems.

<u>Identifying Common Communication Problems</u>

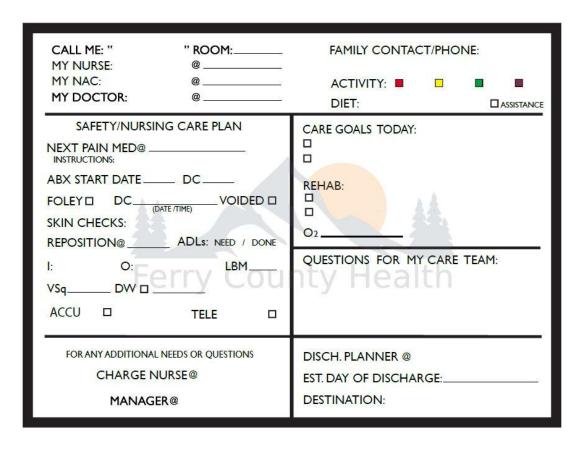
- 1. Organization to Patient. Two issues have been identified as trends from NRC data that need improvement.
 - a. Care Provider explained things. NEEDS IMPROVEMENT
 - b. Told when to expect results NEEDS IMPROVEMENT
 - c. Four more have been identified, not necessarily related to communication, but are big impact detractors from scores.

Priority	Question Friendly Text	Positive %	n-size
Low Positive % and High Correlation	Providers eased discomfort	61.00%	77
Low Positive % and High Correlation	Spent enough time with patient	66.30%	83
Low Positive % and High Correlation	Received consistent info	73.40%	274
Low Positive % and High Correlation	Care provider explain-if not better	73.70%	76

- 2. We are hearing the following but have no way to validate or to measure improvement. Survey data will be modified to identify those patients that are having services across the organization, and the questions asked will be related to inter-departmental communication effectiveness. This will help us validate the information and also form a plan for communication improvement.
 - a. Cross-communication between departments not consistent
 - b. Calls not being returned
 - c. Medication refills not ready

<u>Identify the tools to get there</u>. Fostering great communication.

1. Communication boards. These custom boards were identified as a tool for increased communication and are now installed and being utilized in all acute care and swing bed patient rooms. The boards assist with communication for the daily care plan, along with discharge planning progress. Use of these boards and communication huddles is expected to further increase patient and family satisfaction. Productivity of the communication boards is planned to be assessed via an interdisciplinary swing bed patient experience survey at time of discharge.



- 2. Initiation of Hospital team huddles. Since 2021, Provider, Nursing, Dietary, and Rehab weekly 'Swing Bed Rounds' inside the patient room combine feedback from the patient along with communication board utilization. This consistent effort has already noted positive feedback from patients and family members to promote open and productive communication. Daily morning census rounds at 10:00am between Provider and Nursing staff assist with maximizing efficiency and safety with team communication. Team huddles and case reviews now occur after critical stress incidents in the ED. A huddle sheet is followed, and information is delivered to the Nurse Manager who will follow up with individual employees for education or further support rounding as needed. Will continue to evaluate effectiveness of these consistent interdisciplinary meetings.
- 3. Data Dump. Along with the ownership goals in the data dump, we will be communicating many things, including customer service expectations, the educational video series will have a link with language for the education below.
- 4. Education roll out videos from NRC Healthdata as follows:
 - a. <u>Communicating with Patients and Families</u>. 11 part video series of helpful communication tools. Each video is less than 5 minutes, and each video, based on best practices, will include a key takeaway, an example of its application, and some key activities to reinforce the topic reviewed.

Measuring Success

1. NRC Data. Monitor the surveys for changes, drilling down to department, provider, etc. to identify root cause of issues.

III. Update Infrastructure

In one year, the Executive Team will have determined whether they will move forward with a remodel of the current structures, or if a new build is warranted.

- 1. Master Facility Planning underway, with team members on site the week of 8/15/2022.
- 2. Should have a plan identified by year end, with plan for implementation.