

### **BOARD OF COMMISSIONERS' MEETING**

August 25, 2020, 10:30 a.m. via zoom
Join Zoom Meeting
https://zoom.us/j/99409381777?pwd=TWpvaytQMHdleTZWODVIMkJNSmxQZz09
Meeting ID: 994 0938 1777
Passcode: 757626
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Find your local number: https://zoom.us/u/acffpsDBP6

### Mission Statement

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

### **AGENDA**

Call to Order 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

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 3-5

- Minutes 7/28/20 Board Meeting
- Approval of Warrants
- Financial Write-Off Report

Correspondence Nancy Giddings

**Public Comments** 

CNO Report & Quality Improvement and Compliance/Risk Management Cindy Chase 6-7

Clinic Report JoAnn Ehlers 8-9

Medical Staff Report Dr. Garcia

Safety Report: Brant Truman

CFO/COO Report Brant Truman 10

Financial Report Brant Truman 11-18

CEO Report Aaron Edwards 19

Old Business Nancy Giddings

- Board QI Project
- Facility Update
- Health Foundation
- Board Succession planning

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

- Strategic Planning
- Pharmacy
- 2021 Holiday Calendar
- Curlew Board Meeting

### **Board Representative Reports**

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

Compliance/Risk Management
 Ron Bacon/Jody Jannot

Medical Staff Nancy Giddings/DiAnne Lundgren
Credentialing DiAnne Lundgren/Nancy Giddings

1. Request for reappointment of Active Medical Staff privileges for Richard Garcia, DO

2. Request for reappointment of Mid-Level Medical Staff privileges for Joseph Petersen, ARNP

3. Request for reappointment of Courtesy Medical Staff privileges by telemedicine proxy for Integra provider: Shawn Jones, MD

EMS
 Nancy Giddings

New Business Nancy Giddings

WSHA Annual Meeting eSeries
 20

Executive Session 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 September 22, 2020 @ 10:30 a.m.



### BOARD OF COMMISSIONERS' MEETING July 28, 2020

**CALL TO ORDER:** Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 10:35 a.m. on July 28, 2020, via Zoom. Commissioners in attendance were Nancy Giddings, Ronald Bacon, DiAnne Lundgren, Sarah Krausse and Jody Jannot. Aaron Edwards, CEO; Brant Truman, CFO/COO; Cindy Chase, CNO; Joann Ehlers, Clinic Manager; Nina Novikoff, HR Director; Mike Martinoli, Nurse Manager and Lacy Sharbono, Executive Assistant were present.

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

REVIEW, AMEND, ACCEPT AGENDA: A motion was made by Krausse and seconded by Bacon to approve the Consent Agenda. The motion passed unanimously.

**GUEST:** None

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

**CORRESPONDENCE**: Giddings read a thank you letter from our Med Student, Larissa Siirlia. There was another letter read from a patient's family.

**PUBLIC COMMENTS: None** 

**CNO/QUALITY IMPROVEMENT AND COMPLIANCE/RISK MANAGEMENT:** Chase reviewed the attached report. She also noted the LTC garden is coming alone. Martinoli discussed plans for the garden.

Sean Kim with ATS discussed possible upgrades for pressurizing rooms.

**CLINIC REPORT:** Ehlers reviewed the attached report. Will start closing the COVID trailer at 4pm. This is an issue for the lab to get the samples out the same day. Ehlers has given her 6 month notice.

### **MEDICAL STAFF REPORT:** Dr. Garcia noted the following:

- Still in negotiations with cardiology group and general surgery.
- Hoping to develop stress testing as it would be beneficial for our area.
- More activity at mobile testing for COVID.
- Impressed with our hospital's continued effort and protocols.
- Still no effective treatments beyond supportive treatment for COVID.
- Elective services running smoothly from injections and colonoscopies.

**SAFETY REPORT:** Truman reviewed the following:

- Updated weapons policy.
- There are some new Emergency signs up.
- Looking at the roof repair for the hospital.

### Giddings called for a break at 11:53 a.m. Open session continued at 12:05 p.m.

**CFO/COO REPORT:** Truman reviewed the attached report. He noted the following:

- Working on a contract with the current Curlew Clinic owners. We would like to have a provider up there 2 half days a month at the Curlew Clinic.
- Discussed the proposal to give all full time staff a one-time 24 hour increase to their PTO bank. Part Time employees would receive a one-time 12 hour increase to their PTO bank. This is due to COVID 19 challenges to some department within our hospital district. A motion was made by Lundgren and seconded by Krausse to approve the COVID19 PTO days for staff. Motions passed unanimously.
- Reviewed the 2021 Holiday calendar.

**EXECUTIVE SESSION:** Executive Session was called at 12:24 p.m. regarding RCW 42.30.110(1)(g).

Open session resumed at 12:32 p.m. No action taken.

Continued conversation regarding the 2021 holiday calendar. Truman will give more information on this next month.

FINANCIAL REPORT: Truman reviewed the June financials.

**CEO REPORT:** Edwards reviewed the attached report. He also noted the following:

- Discussion on masking
- Looking at having our September Board meeting in Curlew.

### **OLD BUSINESS:**

- Board QI Project: Tabled
- Facility Update: Meeting with Hermanson on Friday to get closed out.
- Health Foundation: They did not meet.
- Board Succession Planning: Need to have a job description of the Board Chair.
- Strategic Planning: Novikoff presented the Strategic Plan summary that the Board and Executive Team worked on.
- Pharmacy: Met with Rob Slagle a few weeks ago. Reviewed the financials.

### **BOARD REPRESENTATIVE REPORTS:**

- Finance: No Board concerns.
- Quality Improvement: No Board concerns.
- Compliance/Risk Management: Next meeting is in August.
- Medical Staff: No Board concerns.

Lundgren discussed the meeting her and Edwards had with Rural Resources. Rural Resources is looking at alternatives for Senior Meals.

- Credentialing: No Board concerns.
- EMS: No Board concerns.

<b>EXECUTIVE SESSION:</b>	Executive	Session	was	called	at 1:30	p.m.	regarding	<b>RCW</b>
42.30.110(1)(g).								

Open session resumed at 3:45 p.m. No .	action t	aken.	
ADJOURNMENT: As there was no fur	ther bus	iness the meeting was adjourned at	3:45 p.m.
Nancy Giddings, Chair	Date	DiAnne Lundgren, Secretary	Date
Lacy Sharbono, Recording Secretary	Date		



TO: Ferry County Health Board of Commissioners

FROM: Cindy Chase, CNO Subject: CNO Report MEETING DATE: August 25, 2020

### As of August 21, 2020

### 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.

- Nurse Staffing We are very close to shoring up the night shift with some great, experienced nurses. Hoping next report will have them signed on.
- Workflow Evaluation Covid continues to create issues with workflow but some improvements have been made. The nurses and NACs now carry small phones that allow them to contact each other when they need assistance. The numbers of who has which phone is posted on the electronic whiteboard. It will be going through a change as soon as James can update the board. Hoping to post one as well in the LTC report room.

### 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.

• Infection Control/ Employee Health. Triage trailer continues to be utilized daily which is a change from the earlier months of Corona. Discussions are beginning on where to permanently place the trailer, or buy a new one, to get us through Flu season. Lots to come on that.

### 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.

- Swing Beds. The Swing bed program continues to thrive. Busy enough we can be a particular about who comes. Austin and Mike continue to rock the swing bed role.
- New Equipment. Phones, already mentioned, and training is beginning on the new high flow O2 machine. Mike has more equipment ideas. Hang on to your wallet Brant.
- QI/RISK/QMM. QMMs are centered around falls. They are up again last month. 7 for the district. A new fall prevention program is being suggested where we involve all the departments when they go by a High Risk for Falls room to glance in to be sure patient is safe. More to come on that.

### **Financial**

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

• We continue to manage staffing fairly ok and hoping agency use will decline quickly as we hire new nurses. We have three we are actively recruiting so fingers crossed. Night shift still riddled with injured nurses but we are getting there.

### Growth

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

I have asked the staff to suggest ideas on what we can do for the community when it comes to safety. This is part of the Trauma Program requirements. Your ideas are welcomed and appreciated.

CNO New things happening in nursing beginning Sept 1. The biggest launch is the new Charge nurse safety huddle at the beginning of each shift. Here the CN (Off going) will announce to the entire staff who is at risk for what. Like a patient in 201 could be a high risk for choking, or fall,

etc. This way entire staff knows who needs what surveillance to ensure safety. Bedside shift report will be in full swing by Sept 1. Mike and I will be listening in on both hand off and coach as necessary. We will be finally getting to the new whiteboards that are even budgeted. They will be monumental in a good bedside report. A new debrief form has been created for staff to use after a code or trauma to clarify what went well and what challenges we faced. On the safety huddle form will be the last fall date. Every 100 days with no falls in LTC or Acute and even the ED, staff will be fed as a reward. Trying to put a major focus on falls prevention. Hoping the district will join in the Rally to Prevent Falls....it does take a village.

I will miss board meeting as I am basking in the sun on the Deschutes River in Sunriver Oregon. Be safe and stay cool.



TO: Ferry County Public Hospital District #1 Board of Commissioners MEETING DATE: August 11, 2020

FROM: JoAnn Ehlers Subject: Clinic Report

### As of August 11, 2020

### 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.

- I am thrilled with the great help we have been able to bring in. We are training two new folks right now. One in the Front office PRN, who has taken to the job very quickly. One new MA Phlebotomist who is training with us in the front office, COVID Screening, Referrals and will learn to back up nursing staff. We have one more PRN Front office person to train and she is waiting in the wings to get started. It is so NICE to have full staffing. Some of our days were hard to handle before this last COVID surge.
- I have given my resignation notice so my job is now open. I am not leaving for any reason but that COVID is making me feel that my husband and I need to be near our kids.
- I would like to share that the support here is amazing and anyone new will be lucky to be stepping in. I want the whole community to know that this is an amazing, miraculous medical facility for such a small town. The providers are at the top of the game in any setting. Believe me when I say that many places do not have the quality of provider you are offered here. Support staff is also top notch. Administration and the Board truly care and that is something you don't get quite so deeply in a bigger place. This Community is in great hands.
- There are things I could not get done; but I feel that you have great potential here to do more than anywhere due to the smallness of this population and the support you have in doing all you can for every patient.

### 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.

- With enough staffing, I feel that we are able to do a better job all around.
- We continue to look for ways to improve.
- We are also looking for ways to help each other in any little thing. Unity is growing.
- Complaints are being heard; but so are the compliments and we are getting more of those! People have started thanking us for being here.

### 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 COVID-19 Testing Trailer has seen some busy times. We have reduced the hours to end at 4 pm due to the need to get tests out on time each day.
- The ISO side of the Clinic has had more use.
- Due to the high heat, we did move our Screening in to the front lobby. Screening is going to be sectioned off as best as we can get it so that we can have a more permanent base. This is going to be an on-going job. Some kind of wall has been requested.
- We have had fewer issues with folks regarding masking; probably due to the surge.
- Dr. Kelley continues to fill his Procedure Days.
- Dr. Garcia continues to fill his US Guided Injection Days. His days will be changing due to the ER schedule change in when he is on duty.
- Dr. Pavlic, Cardiology is coming to the area again.

- Bill Hartman, Orthopedics never stopped coming in.
- Dr. Hsu's Telehealth visits were put on hold for a personal reason. Nothing to do with COVID.
- We are looking forward to bringing Wound Care to the Hospital and possibly more.
- The Dental Van and the Coupons I got last year for glasses were not something I could get this year due to COVID but we will keep all of these contacts ready for when we can bring them back in. I still have the dental van wait list we started.
- The Mammogram bus is scheduled to be here on October 7<sup>th</sup>. We have turned in our wait list to the Rad Dept.
- We will be making a Flu shot wait list so that we can let folks know as soon as we have the shots in. The Flu shots this year will be offered in a Drive-by fashion to keep everyone as safe as possible. Please watch for news on our website, Facebook, and the local papers.

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

- Definitely seeing slowdowns when COVID numbers go up.
- Appointments are up but total numbers down due to less walk-in business. I do like to have appointments made rather than walk-ins if we get a call –overall numbers are down with more caution regarding coming in to the Clinic.
- Total for July: 826 of these are 47 walk-ins (795 appointments)
- Heaviest day was 5 walk-ins on Thursday, July 2<sup>nd</sup>
- 16 Phone visits
- 2 Telehealth ZOOM visits We still offer all types of visits. We are missing some phone visits that I feel could be registered. I need help to get these captured.
- Providers are at an average of 12 visits per day. Goal is 14.
- Front office staff has continued to keep up with
- Last year July was 883 of those 121 walk-ins (762 appointments.)
- Walk -ins last year were: 1<sup>st</sup> Quarter: 507, 2<sup>nd</sup> Quarter: 533
- This year is: 1<sup>st</sup> Quarter: 262, 2<sup>nd</sup> Quarter: 78
- The Front office staff continues to do a stellar job in reduction of errors. Nursing staff is working hard to address every need. I am so very proud of everyone's efforts.

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

• I respectfully submit this with thanks. JoAnn Ehlers

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### Growth

**Financial** 



TO: Ferry County Public Hospital District #1 Board of Commissioners MEETING DATE: August 25, 2020

FROM: Brant Truman Subject: COO/CFO Report

### As of August 21, 2020

### 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.

- Rehab director/manager hired group starts October 1<sup>st</sup>.
- Revenue Cycle improvements in structure and potential opportunities.
- Transitioned Revenue Cycle staff to new manager this last month.
- Recruiting for OT.
- Utilization Review committee starting.

### 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.

- Received all quotes on fixing the roof, currently reviewing.
- DOH potential adjustments to oversight of our hospital from a quality and patient safety relation.
- We maintain approx. 180 days of high use PPE

### 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.

- Looking at an additional building to help with COVID testing/vaccines as well as long term sleeping solution for the providers.
- Waiting on bids to replace hospital oxygen system
- Received Nasal Cannula, which will greatly help our ability to provide oxygen services to our patients
- Working on surgical options
- Curlew Clinic progress
- Clinical documentation improvement currently being researched, continuing.

### **Financial**

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

- 340B Pharma companies requesting additional access to data
- 340B Audit scheduled for October with new vendor selected.
- Revenue in July was awesome, look forward to continued growth.
- Total Fiscal Support from the Federal Government
- CARES ACT: \$3,752,874 (Potential Grant) PPP LOAN: \$1,280,000 (Potential Grant)
   ACCELERATED PAYMENT: \$2,080,000 (LOAN MUST PAY BACK). Review status
- Revenue Cycle adjustments
- Expect finalized audit requirements for CARES act "soon."
- Review of Financials presented.

### Growth

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

Working on additional opportunities to expand in Curlew, Cardiac and minor surgery.

### Ferry County Public Hospital District #1 Financial Statements Month Ending July 31, 2020



Ferry County Public Hospital District No. 1

doing business as

Ferry County Memorial Hospital

# Combined Income Statement: Hospital and Klondike Hills

Year to Date July 31, 2020

	8	April	May	June	Q2	l ylut	July % of Gross YTD	% of Gross Rev
Operating revenue:	4 827 315	1 462 044	1.651.185	2.104.457	5 217 686	2.404.082	5 17 444 083	
Contractual allowances and provisions for uncollectible		(508.258)	(361,702)	(800.919)	(1.670.879)	(1.011.545)		-36%
Patient service revenue - (Net contractual allowances)		\$ 983,786 \$	1,289,483 \$	1,303,537 \$	3,546,807 \$	1,392,536	\$	64%
Bad debt expense	55,690.05	17,073	48,511	20,414	85,998	7,948	1% \$ 149,636	1%
Other operating revenue	221,755	84,819	71,831	74,905	231,554	72,201	4% \$ 525,511	4%
Total operating revenue	3,343,101	1,055,678	1,409,825	1,398,857	3,864,359	1,472,685	66% 8,680,146	70%
Onerating expenses:				*				
Salaries and wages	1,657,919	570,665	510,788	537,102	1,618,555	551,857	26% \$ 3,828,330	31%
Employee benefits	459,783	154,348	137,584	146,663	438,596	150,611	7% \$ 1,048,990	8%
Professional fees	358,749	154,369	136,670	125,207	416,246	126,362		7%
Supplies	265,807	77,571	64,261	80,159	221,991	108,888	₩.	2%
Purchased services - Utilities	78,997	25,399	17,876	19,828	63,104	15,451	Ϋ́	1%
Purchased services - Other	352,538	80,931	130,244	112,614	323,788	129,886	~ γ	%9
Insurance	21,405	8,240	2,358	2,358	12,956	18,168	ν,	%0
Other	056'96	12,193	25,315	5,191	42,700	24,817	0% \$ 164,467	1%
Rent	34,819	11,573	11,573	11,573	34,719	11,573	1% \$ 81,110	1%
Depreciation	203,832	66,697	66,807	67,057	200,562	69,157	3% \$ 473,552	4%
Total operating expenses	3,530,800	1,161,988	1,103,477	1,107,752	3,373,216	1,206,771	53% 8,110,787	<b>65%</b>
Gain (loss) from operations	(187,698)	(106,309)	306,348	291,105	491,143	265,914	658'695 \$ 0	2%
Nonoperating revenues (expenses):				٠				
Property taxes	65,704	23,473	27,634	21,907	73,014	21,876	1% \$ 160,593	1%
Interest earnings	14,622	3,346	2,418	3,574	9,338	2,937	<b>⋄</b>	%0
Interest expense	(45,893)	(15,284)	(14,812)	(16,260)	(46,356)	(15,355)	<u> </u>	-1%
Grants and donations		1,200	•	•	1,200	10,344	<b>⋄</b>	%0
Other	55,651	598,970	253,911	17,864	870,745	104,111	1% \$ 1,030,508	88
Total nonoperating revenues (expenses) - Net	90,085	611,705	269,150	27,085	907,940	123,914	1% 1,121,939	%6
Increase (decrease) in net position	\$ (97.614) \$	\$ 396 \$	575,498 \$	318,190 \$	1,399,084 \$	389,828	15% \$ 1,691,298	14%
Account of the second of the s	AND ADDRESS OF THE PROPERTY OF							

### Ferry County Public Hospital District No. 1

doing business as

### Ferry County Memorial Hospital

Balance Sheet (Combined Statement of Net Position: Hospital and Klondike Hills) Year to Date July 31, 2020

	Y	TD Balances	YTD Balances			
Assets		June	July			
Current assets:						
Cash and cash equivalents	\$	11,133,588	Ś	11,150,277		
Patient trust	•	500	T	500		
Receivables:				<del>-</del>		
Gross AR		3,608,601	\$	3,975,312		
Contractual allowance		(1,592,234)	·,	(1,754,932)		
Patient AR - Net		2,016,367		2,220,380		
Taxes		108,875		105,776		
Estimated third-party payor settlements		-		-		
Other		228,634		226,139		
Inventories		219,577		213,328		
Prepaid expenses		43,405		75,107		
Total current assets	\$	13,750,946	\$	13,991,506		
At a comment and and and and another than						
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		-		_		
Total Holleant assets milited as to use						
Capital assets:						
Nondepreciable capital assets		27,282	\$	27,282		
Depreciable capital assets - Net of accumulated depreciation		5,717,952		5,679,659		
•		· · ·				
Total capital assets	\$	5,745,235	\$	5,706,941		
TOTAL ASSETS	\$	19,496,180	\$	19,698,447		

### Ferry County Public Hospital District No. 1

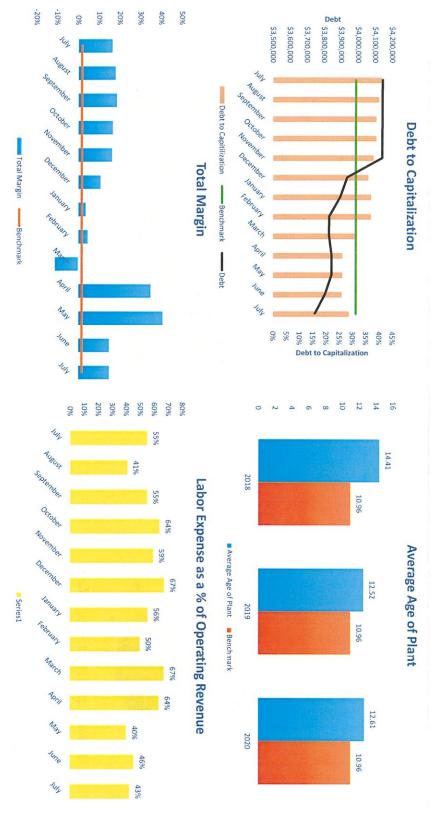
doing business as

### Ferry County Memorial Hospital

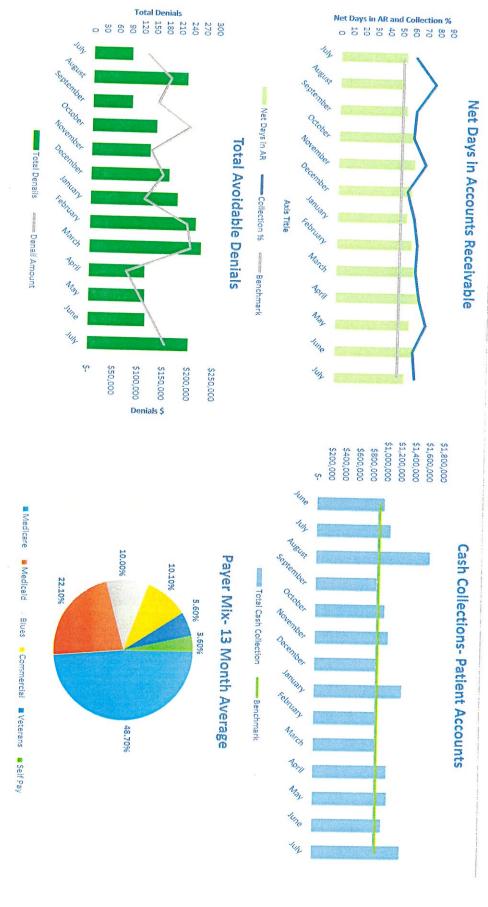
Balance Sheet (Combined Statement of Net Position: Hospital and Klondike Hills) Year to Date July 31, 2020

	Y	TD Balances	Υ	TD Balances
Liabilities and Net Position		June		July
Current liabilities:				
Current maturities - Long term debt	\$	96,718	\$	98,292
Current maturities - Capital lease obligations		108,644		100,754
Accounts payable		421,365		100,513
Warrants payable		6,378		378,589
Patient trust		500		500
Payroll and related expenses		338,999		121,107
Accrued vacation		372,029		367,320
Unearned tax revenue		131,256		109,380
Accrued interest payable		81,925		95,580
CARES ACT FEDERAL FUNDING		4,344,797		4,250,517
Estimated third-party payor settlements		2,324,974		2,404,881
Total current liabilities	\$	8,227,585	\$	8,027,433
Noncurrent liabilities:				
Long term debt - Less current maturities		3,747,293	\$	3,745,719
Capital lease obligations - Less current portion		137,459		151,625
Total noncurrent liabilities		3,884,752		3,897,344
Total liabilities	\$	12,112,337	\$	11,924,777
Net position:				
Invested in capital assets	\$	1,573,195	\$	1,514,972
Restricted expendables	Ψ		Y	±,0±1,012
Unrestricted		5,810,648		6,258,699
		·		
Total net position	\$	7,383,843	\$	7,773,671
TOTAL LIABILITIES AND NET POSITION	\$	19,496,180	\$	19,698,447

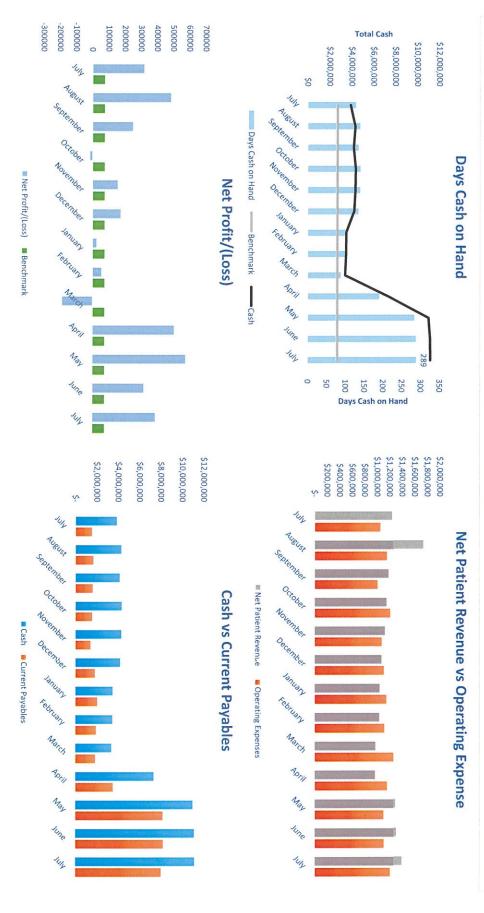
## 2020 Liquidity



# 2020 Revenue Cycle



# 2020 Financial



FINANCE DASHBOARD Ferry County Public Hospital District #1 July 31, 2020

Key  Meets or exceeds budget/target  Does not meet budget/target expectations by 5% or less  boes not meet budget/target expectations by greater than 5%	19 Total Salary Expense	18 Charity % Gross Patient Revenue	17 Bad Debt % Gross Patient Revenue	16 Benefits % of Salary Expense	15 Salaries % Gross Patient Revenue	14 Revenue Deductions % of Gross Revenue	Profitability	14 Lab Visits	13 Imaging Visits	12 Rehab Treatments	11 Clinic Visits	10 Procedures	9 Emergency Admit to Inpatient	8 ED Visits	7 Outpatient Visits	6 Average Length of Stay (Acute)	5 Admissions (Acute)	4 Observation Hours	3 Long Term Swing Bed Days	2 Skilled Swing Bed Days	1 Acute Care Days	Stats	
	\$																					Curi	
	3,828,330	0.37%	1.20%	8%	31%	36%		15799	2349	5544	4624	105	4.14%	1063	5145	2.90	49	1612	1854	346	168	Current Total	Ye
	\$ 3,0																					Target	Year To Date
	3,828,330 \$ 3,005,539.57 \$	1%	1.78%	26%	45%	30%		16031	2473	6099	6199	138	3.00%	1009	5876	3.00	45	1394	2558	266	114	Pri	ate
	3,447,432	0	2					1					4									Prior Year	
	,432	0.69%	2.04%	27%	29%	33%		16244	2259	6897	6179	94	4.46%	1121	5876	3.32	54	1440	2930	303	186		
	<b>(</b>			0		0			•		0		0		•								
	Ş																					Curre	
	551,857	0.33%	0.33%	27%	23%	42%		2,654	418	1,438	ı	32	2.36%	212	1,085	2.85	7	363	258	44	17	Current Total Ta	Curr
	O,																					Target	Current Month
	500,923 \$	1%	1.78%	26%	45%	30%		2,268	350	863	877	20	2.80%	143	832	4.00	6	197	362	38	16		th
	501,290	0.20%	1.65%	32%	26%	36%		2,437	312	995	883	21	4.52%	177	907	2.01	11	151	381	83	26	Prior Year	



TO: Ferry County Public Hospital District #1 Board of Commissioners MEETING DATE: August 25, 2020

FROM: Aaron Edwards, CEO

Subject: CEO Report

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### 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.

- Have had some very promising screening interviews for the open clinic manager position.
- Beginning work on the 2021 ED/Hospital block schedule.
- Received two calls this month from physicians looking for work (ED).
- Received CV's via Board Chair Giddings for two physicians (husband and wife) looking to relocate back in Republic (one grew up here).

### Quality

• We have a new Rehab Director starting in October moving from the Vancouver, WA area. 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.

- Brant and I will be attending the virtual NRHA annual late next month.
- WSHA is working on a virtual annual meeting in October for leadership (would like to have the Board attend).
- Getting closer to an agreement with the Elson S. Floyd Medical School at WSU to have two students work on an analysis of what could be done to improve obstetric care in rural facilities such as ours.
- WSU will be including our patients and community in a coming study on COVID and cancer patients (how COVID-19 has impacted them across various measures).
- Will be doing COVID-19 point of prevalence testing in the ALF soon per a DOH mandate (optional for patients, not optional for employees).
- Our summer UW med student completed her report on home health and the potential for it in Ferry County. Will review and pass on to Board members (just received it).

### 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.

- Planning for flu shot days to be done in the parking lot in prep for a COVID-19 vaccine coming sometime in the not too distant future.
- Visited with a family working towards opening an early childhood learning center here in Republic, space in there only issue at this point.
- BHT may possibly have some funding to help with bringing early childhood learning and/or suicide prevention.

### Financial

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

- July was another record for gross revenue, however, recent COVID cases seemed to have slowed our August clinic pacing.
- Hired a nurse specializing in inpatient qualification to reduce inpatient/hospital billing denials (working with InterQual software).

### Growth

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

- Continue to work towards the possibility of surgical services coming to the District.
- Certified wound nurse coming to the hospital in October.



### WSHA Annual Meeting eSeries



Washington State
Hospital Association





### Mike **Abrashoff**

Mike Abrashoff was the most-junior officer in the Pacific Fleet when he took command of the near-worst performing ship. Twelve months later, the USS Benfold was the best ship in the entire Navy - using the same crew. The story of that stunning transformation has lessons for every organization: leadership matters - and culture is everything.





### Mara Liasson

Mara Liasson is a national political correspondent for NPR. Her reports can be heard regularly on award-winning newsmagazine programs Morning Edition and All Things Considered. Liasson provides coverage of politics and policy from Washington, DC, focusing on the White House and Congress.

\* Please also join us for the **WSHA BUSINESS MEETING** @ 11:00 a.m. and the **WSHA LEGISLATIVE PREVIEW** @ 12:00 p.m.





### WSHA Peer Exchange: Lessons Learned from COVID-19 Response

Join WSHA Member Hospitals as they share TED-style presentations, accompanied with a follow-up discussion session.





### Carvell Wallace

Carvell Wallace is a New York Times Bestselling author, memoirist, and award-winning podcaster who covers race, arts, culture, film and music for a wide variety of news outlets. He is a regular long form contributor to the New York Times Magazine where his profile of Riz Ahmed was a cover story in August 2018. He has additionally written cover profiles on Mahershala Ali for GQ and Samuel L. Jackson for Esquire.





### Don Berwick

Don Berwick is the United States' leading advocate for high-quality health care, and one of the top thinkers in health care today. He sees tremendous unrealized potential in American medicine. Despite our expert practitioners and world-class equipment, our health care system can do better in providing safe, high-quality care at reasonable costs.