

**BOARD OF COMMISSIONERS  
PUBLIC HOSPITAL DISTRICT NO. 1 OF PEND OREILLE COUNTY**

**January 26, 2023**

In Attendance: Chief of Medical Staff, Aaron Reinke, MD; Commissioners: Lois Robertson, Lynnette Elswick, Susan Johnson, Melanie Kiss, and Becky Walrath; Executive Officers: Merry-Ann Keane, Kim Manus, Chris Wagar, Theresa Hollinger, and Joseph Clouse. Others: Matt Ellsworth, AWPHD, Casey Scott, Glenn Talmage, Melody Brown, Rhi Drake, and Nancy Shaw.

CALL TO ORDER:

Chairperson Robertson called the meeting to order at 10:02 a.m.

READING OF LEGAL NOTICE:

The regular meeting legal notice was distributed as required.

APPROVAL OF AGENDA / CONSENT ITEMS:

The Meeting Agenda, Auditors Reports and Uncompensated Report (Consent Packet) were approved via motion made, seconded and passed unanimously.

Bad Debt/Charity: Dec.2022, inclusive District Write-off: \$ 68,703.71

APPROVAL OF PREVIOUS MEETING MINUTES

The January 17, 2023 special meeting minutes and December 15, 2022 regular minutes were approved via a motion made, seconded and unanimously passed. The November 15, 2022 special (budget hearing) meeting minutes were not available for approval.

BUSINESS FROM THE AUDIENCE

Matt Ellsworth, Executive Director of the Association of Washington Public Hospital Districts (AWPHD) was introduced and welcomed. He shared a presentation titled "Rules of the Road" with the attendees. Matt provided definitions of a public hospital district, noting it is created by the citizens who elect stewards of the District (Commissioners). Matt defined policy, delegation authority, and the role of Administration. The tools include our District Bylaws, Code of Ethics, Decision Matrix, HR Systems and Annual Review & Recommitment of Roles. He explained areas of conflict as: failure to act as a Board, personal agendas, staff involvement, and board involvement in Administration. Other highlights included how to be a highly functioning Board, the role of the Chairperson, and being active in the community. A list of resources was shared with the group for more information.

COMMITTEE REPORTS:

Joint Conference: Aaron Reinke, MD, Chief of Medical Staff commended our nurses for doing an amazing job in the midst of many sick patients; noting he and Dr. Jones worked extra Hospitalist hours. PA-C's McCord and Rivera have assisted greatly.

Finance: Kim Manus, CFO provided the financial statements, noting there will be changes to the data in the future. The goal of patient financial services is to attain 45 days in AR. The day's cash-on-hand dropped slightly from November to December. Kim noted the supply expenses included orthopedic implants, at a more profitable payor mix.

Seebers Pharmacy – issues continue to be addressed as they occur. As proposed, **Resolution No. 2023-03 to establish a petty cash fund for the department was approved via motion and passed unanimously.** Any information or questions related to the recent acquisition should be directed to Merry-Ann Keane.

Quality/Performance Improvement - Our 2023 focus is patient safety. The patient satisfaction survey rate of return will be reviewed quarterly. Rhi announced that DNV accepted the corrective action plan and will return in August 2023. Policies are in the process of being updated – it was noted of 1,900 policies, only 300 remain to be reviewed.

CEO Report – Merry-Ann reported that the 10 minute morning huddles are well received and successful. The brief time allows staff members to resolve issues in real time and serve as a daily reminder of our Mission.

The NHHS Pantry has proven to be useful to our employees as a resource for food items during these times of high costs. The SLT team launched the program initially and the Foundation will provide additional support of \$100 per month, if needed.

The Administration staff will be moving to the Annex (former LTCU area) within the next few months. Merry-Ann stated she believes it is important for the Administration team to be located together and also to provide a central location for the public. In addition, the Accounting house will be vacated.

Plans are underway for the formal ED space conversion. It was noted there was a loss of \$1.5M in 2022; the CARES Act funded the gap, which would have been \$3.5M. Every position in the District is being reviewed.

The Senior Leader team is recommending a 5 committee council structure: Compliance, Medical Staff, Quality, Finance and Ethics. Board members are not obligated to attend the Committee meetings, which are limited to 2 board members being in attendance. It was decided that board packets will be published Monday prior to board meetings and available at the main front desk until 9:00 pm. The standard reports will be included in the packets for the Board to review; in the interest of time, the department updates will not be included at the meeting; however, the board members are invited to ask questions. Commissioner Johnson voiced concerns regarding the new format.

Prior to moving forward with any major new construction, the budget will be finalized. It was noted that the OB program is on “pause”; however the Unit is not closed. We are accepting OB patients at this time, actual deliveries are being referred to Spokane until staffing is sufficient to ensure patient safety. Kim Rutland, NP and Perinatal Manager is coordinating care for these patients and anticipates we will be providing full OB services by Q3.

Merry-Ann reported that management of all District records is underway to ensure the District is in compliance, and to free up space. The records retention laws have changed in 2021.

The District has 90 days to comply with pricing transparency rules. The rules are published to the NHHS website.

The clinic is accepting walk in appointments (for established patients) and same day appointments. Kim explained we must ensure this aligns with insurance plans. Several questions were posed regarding acutely ill patients, patients with no insurance and the method for charging patients whether established and ability to pay. Kim responded, noting it depends upon the Federal poverty guidelines, family size, etc.

Strategic Planning – Merry-Ann stated that the Senior Leaders met for 4 hours this week to discuss 2023 strategic planning. A 1 year plan is proposed and focuses on quality care, patient experience, safety culture, process improvement, outstanding workplace (7 Habits) leadership development,

building trust, sustainable operations, real estate management, and department accountability. The plan will be presented at the February board meeting.

**ACTION ITEM AGENDA**

**Resolution No. 2023-02 Surplus Property.** Kim explained the District received a large shipment of what appeared to be used gloves. The State Auditor's Office was contacted to report the fraudulent activity. It was noted that many other hospital facilities purchased the gloves. NHHS removed them from our inventory; it was determined the cost was approximately \$63,000. The gloves are contaminated and require disposal. A motion made, seconded and passed unanimously approved Resolution No. 2023-02.

**ED Room Remodel** - Following discussion, a maximum amount of \$90,000 was approved as a capital expense to convert/remodel the 3 temporary emergency rooms.

**OTHER BUSINESS**

Merry-Ann explained that all 2023 District travel has been paused due to budget constraints. The Chelan WSHA annual meeting will occur in June and the hotel rooms have been held for the board members and senior team. Following discussion, it was determined that the District board members and Senior team will attend.

**NEXT MEETING DATE**

The next Board of Commissioner meeting will occur at 10:00 a.m., February 23, 2023 in the Sandifur meeting room.

**EXECUTIVE SESSION**

As permitted by RCW 42.30.110(1)(g), the meeting was moved to Executive Session at 12:10 pm for approx. thirty five minutes to discuss personnel matters.

**RETURN TO OPEN SESSION**


The Commission returned to Open Session at approximately 12:55 pm.

**ADJOURNMENT**

There being no further business, the meeting adjourned at approximately 1:00 pm.

Minutes recorded by Nancy J. Shaw, Executive Administrative Assistant.

  
Lois Robertson, President  
Board of Commissioners

  
Susan Johnson, Secretary  
Board of Commissioners