

# North Valley Hospital District

Okanogan County Public Hospital District No. 4

North Valley Hospital/Clinic Division; and North Valley Long Term Care Division

The public is invited to attend in person or virtually with Google Meet:

**\*The physical location of this meeting will be in the Clinical Training Lab, in the Verbeck Building Basement\***

Meeting ID: [meet.google.com/gfk-skvn-fir](https://meet.google.com/gfk-skvn-fir); Phone Numbers: (US)+1 617-675-4444

PIN: 388 490 836 1057#

## Board of Commissioners Regular Board Meeting

*May 25, 2023 7:00 PM*

### Vision

Exceptional care that enhances the well-being of our communities.

### Mission

Cultivate healthcare rooted in compassion, stewardship, and excellence.

### Values

Trust-Accountability-Integrity-Safety-Diversity-Viability

## Call to Order

### Agenda

- I. **Public Participation** – according to Resolution No. 488-Public Participation Policy
- II. **Reports:**
  - a. Administration Report J. McReynolds, CEO
  - b. Committee Reports Commissioners
    - i. Foundation
    - ii. Medical Staff
    - iii. Safety
    - iv. Finance
  - c. Financial Report A. Ulrich, CFO
- III. Approval of Minutes
  - a. Regular Board Meeting Minutes: April 27, 2023

**IV. Consent Agenda:**

a. Charity Care	\$ xx,xxx.xx
b. Bad Debt	\$ x,xxx.xx
c. NVH A/P Vouchers No. 119645-119808	\$ 1,994,929.47
d. LTC A/P Vouchers No. 23131-23177	\$ 334,654.48

**V. Old Business:**

- a. St. Martins HVAC Project J. McReynolds, CEO
  - i. Swinerton Contract
  - ii. **Consider Resolution No. 739** - Authorizing Bond Financing

**VI. New Business**

- a. CAH Annual Program Evaluation C. Fox, Quality Mgr.
  
- b. Board Education
  - i. CQI Presentation C. Fox, Quality Mgr.
  - ii. Governance Webinar discussion J. Pfeifer, BOC
  
- c. Medical Staff D. Larson, BOC
  - Courtesy Appointments  
Keith Bernstein, MD – Radia  
William Brinkman, MD – Radia  
Amar Purandare, MD – Radia  
Sheri Kallsen, DNP – ERx
  
  - Courtesy Reappointments  
Benis Babusis, MD – Radia  
Ian Bovio, MD – Confluence  
Jack Fields, MD – Radia  
Paul Furmanczyk, MD – Confluence  
Daniel Kerr, MD – Confluence  
Christopher Krol, MD – Radia  
Thomas Markel, MD – Radia  
David Marlow, MD - Radia  
Brenden McCullough, MD – Radia  
Garland McQuinn, MD – Radia  
Andrew Olson, MD – Radia  
Mark Pflieger, MD – Radia  
Justin Siegal, MD – Radia
  
- d. Equipment Request- GE Carescape Upgrade J. McReynolds, CEO
  
- e. Equipment Request-GE Bone Density Scanner J. McReynolds, CEO

**VII. Adjournment:**

**Upcoming Events-**

June 26-28, 2023 – AWP/WSHA CEO Retreat

June 27-28, 2023 – AWP/WSHA Rural Hospital Leadership Retreat

July 11, 2023 – BOC Strategic Planning Retreat



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# Administration Report

05.25.23

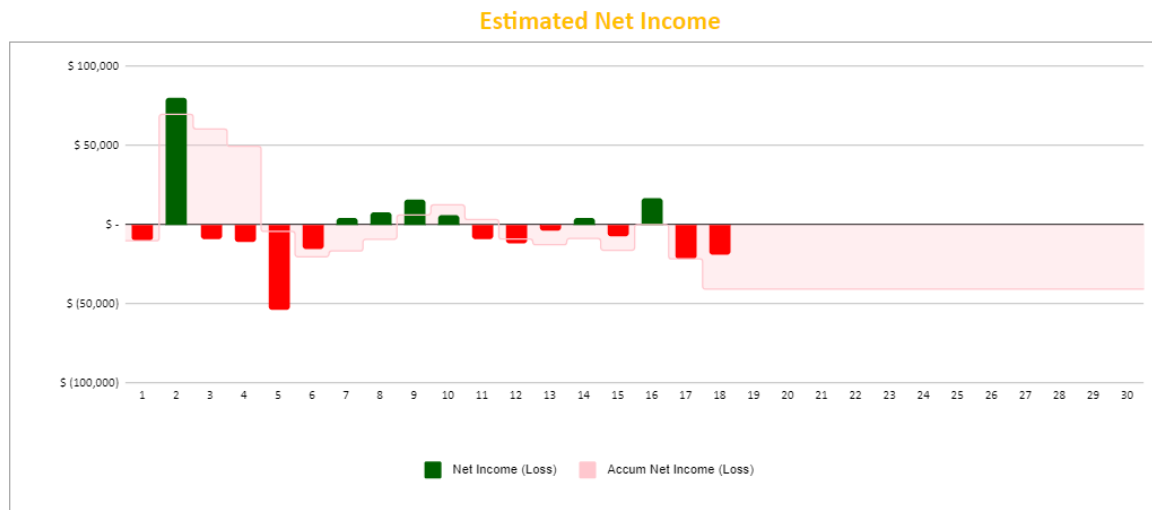
North Valley Hospital & Extended Care

## Operational Overview:

Continuing the trend from April, volumes have been below target in most areas except for ER and radiology. Additional information is available in the department specific sections.

Department	Month to Date Numbers		May	2023
	Number to Date	Target to Date		
Census	128	144	-16	-11%
Rehab Minutes	25995	26810	-815	-3%
Rad Tests	532	510	22	4%
Lab Tests	2015	2552	-537	-21%
TFMC	139	280	-141	-50%
Surgery	5	14	-9	-64%
ER Visits	263	234	29	12%

As of the 19th, the lower volumes have created a modest estimated net loss position for the May.



## Financial Matters:

Earlier this week, Alan gathered some interesting data about the District's activities from Calendars 2020 through 2022. Since this Administration Report is his next-to-last opportunity to document financial matters, he thought it important to share information about the non-clinical team that supports the District's clinical services. Alan is only one of many OCPHD 4 employees who (daily and nightly) bring their talents and expertise to contribute to the District's success!!

In addition to the clinicians, providers, and technical staff, the administrative team 1) registers patients, 2) confirms the clinical documentation of the services, 3) submits claims for the services rendered, 4) collects reimbursements from insurers and individuals, 6) purchases supplies, assets and services, 7) pays vendors and 8) prepares financial reports.

Alan acknowledges the talents and contributions of clinical and administrative staff!

The District wouldn't receive a "penny" without:

- The accurate registration by Admitting
- The attention to detail by HIM
- The Billing and Collections by Patient Financial Services
- Purchases and inventory management by Purchasing and Central Supply
- Vendor payments
- Preparation of accurate financial statements
- A willingness to learn new software and to adopt new processes

Here is some historical data:

	<b>Cal. 2020</b>	<b>Cal. 2021</b>	<b>Cal. 2022</b>
Admitting Number of Encounters	-	37,714	31,222
HIM Chart Reviews Lines of Charge Data	-	317,600	310,150
Patient Financ'l Svces Chgs	\$43.7 Million	\$42.7 Million	\$46.7 Million
Collections	\$19.8 Million	\$26.6 Million	\$22.2 Million
Lines of Charge Data	-	317,600	310,150
Claims Prepared	-	-	29,140

<b><u>Average Bi-Weekly Payroll:</u></b>	<b>Cal. 2021</b>	<b>Cal. 2022</b>
Hospital \$'s	\$326,000	\$331,000
Hospital Employees	166	172
Long-Term Care \$'s	\$97,000	\$87,000
Long Term Care Employees	66	73

Vouchers:

Number of Vendors		900
Hospital	2,754 checks	\$28.8 MILLION
LTC	886 checks	\$ 4.5 MILLION

Alan and the Accounting team are preparing January, February and March 2023 financials using Multiview's general ledger software. Thanks to everyone's contributions to this complex endeavor!

What a journey we have had as we:

1. Created new departments to provide greeted information:
2. Created a new Chart of Accounts
3. Uploaded historical data from 2020 through 2022
4. Uploaded fixed asset records
5. Prepared the 2023 budget using the new chart of accounts and the new software enhancements
6. Prepared journal entries in old and new accounting systems
7. Prepared accounts payable checks in old (legacy) and new accounting systems

Preparing the financials is very complex as financial information is found in the CPSI (legacy) and Multiview transaction registers. Special thanks to the team for adopting the new software!

The administration team is working with Northwest Municipal Advisors and legal counsel to prepare a Request for Proposal for a \$5 million General Obligation debt instrument. Accounting has prepared interim Fiscal 2021 and Fiscal 2022 financial statements for inclusion in the RFP. Northwest Municipal Advisors released the RFP in early May. They will present responses to Administration on May 18. If the funding proposals meet the

District's news, Administration will present a funding resolution to the Board of Commissioners in the May meeting.

The Accounting team continues to review and revise Fiscal 2021 and Fiscal 2022 documentation for the DZA auditors. To complete their audit of the District and the special audit for HHS, DZA has requested information about receipts and disbursements of CARES funds. The Hospital has identified additional funds due HHS after completing this thorough review.

DZA has prepared the Division's Medicaid Cost Report for Long Term Care and the Medicare Cost Report for NVH. We will soon learn new LTC Per Diem reimbursement and NVH's new rates.

A big shout to the team for their knowledge, attitude, and many efforts to cross-cover each other!

## Extended Care:

### Activities:

Mother's Day was wonderful at the EC with Eldergrow church services and Mother's day tea. The Chickens are welcomed back, they are busy cleaning up bugs and fertilizing the courtyard. The Foundation (NVCHA) purchased patio chair cushions and an outside expandable dining table to host families and groups.




Deron Dachtler made and donated 2 beautiful wood planters for the residents Patio, we are very thankful! Eversound representatives were on site Tuesday to give Activities updates and check the equipment. Residents are benefiting greatly from having this equipment for multiple uses. All the flowers and vegetables are planted and doing well. Facility BBQs kick off this

Friday, May 19th to celebrate National Nursing home week and will continue every Friday through the summer months. We are enjoying the use of the cute little freezer on Wednesdays for our ice cream socials.

### EC Rehab:

We are pleased to have increasing involvement from our now per diem dietitian, Gaelen Ritter. She will be taking over service from Melissa Roberts. I want to thank Melissa for all





the work she has done to maintain continuous service both in extended care, as well as acute and OP.

### EC Quality:

The Extended Care team is preparing for a potential survey similar to the one the hospital just passed. We accomplish this by reviewing our past surveys and double checking hot topic items that have been cited in the past or at other facilities.

### Nursing Administration:

The Washington State Department of Health was here the last week of March. We have submitted our plan of correction for health and safety and environment of care. The Department of Health inspectors were helpful and pleasant. We appreciate their guidance and approach towards process improvement. We can anticipate the Medicare Survey in 18 months as they announced that this survey would not include the medicare portion.

John, Alan, and I reviewed the MOU for the Emergency Department Mental Health grant. As soon as both parties have signed the agreement we will start the recruiting process for a mental health professional and a caseworker. Julie Rickard, the grant writer along with Wendy Brzenzy MN, RN Director of Clinical Integration with Thriving together, formerly known as NCACH, will assist in creating our mental Health program. We already have some initial framework to start with.

We celebrated Nurses week May 8 through the 12th. The team of nurses include RN's, LPN's, MA's, and NAC's. I want to acknowledge our nursing team and the challenging work they do day in and day out. Our Nurses here at NVH deserve recognition for their dedication to providing patient care to our community. The theme this year was nurses making a difference.

Staffing continues to be our greatest challenge. I have contracted with six travel Nurses starting throughout the month of May and beginning of June.. Most of these contracts are 13 week assignments. We have staff out on leave which contribute to our staffing challenges and need for travel nurses. We have not been receiving applications and have not been able to hire.

Currently we have two WVC North Nursing Students doing their clinical preceptorship here at NVH. We are hopeful that they will apply for a permanent position after graduating from the nursing program in June. Jason Daniels and Leann Lewis have agreed

to be their preceptors. They are spending time in the Emergency Department and the Acute Care med/surg. It is a pleasure to have the WVC nursing students here at NVH.

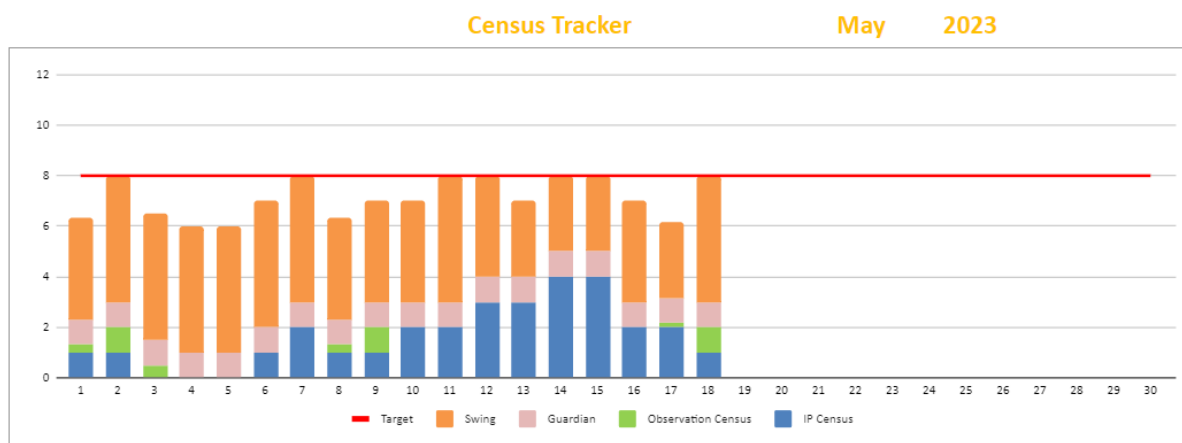
This legislative session is complete. The Washington State Hospital association (WSHA) held a recap of the session. We will be implementing the new Nurse staffing Laws over the next few years. They are planning workshops and developing tool kits to assist hospitals. The work of the staffing committee is valuable and important work. One of the changes will require administration to monitor meal and rest breaks missed. We must maintain a greater than 80% of all patient care employees' meals and rest breaks taken. If this is not achieved a plan of correction will need to be filed and monitored. We could get hefty fines per day if found not to be following the submitted plan of correction. I have been monitoring meal and rest breaks taken and feel confident that we will meet the 80% rule. It appears that there will be some additional support for Washington Rural Hospitals. I look forward to more information coming forward over the next several months.

Recommended Reading:

[Washington joins Nurse Licensure Compact \(NLC\)](#)

[Nursing School Enrollments Now Down](#)

## Acute Care:

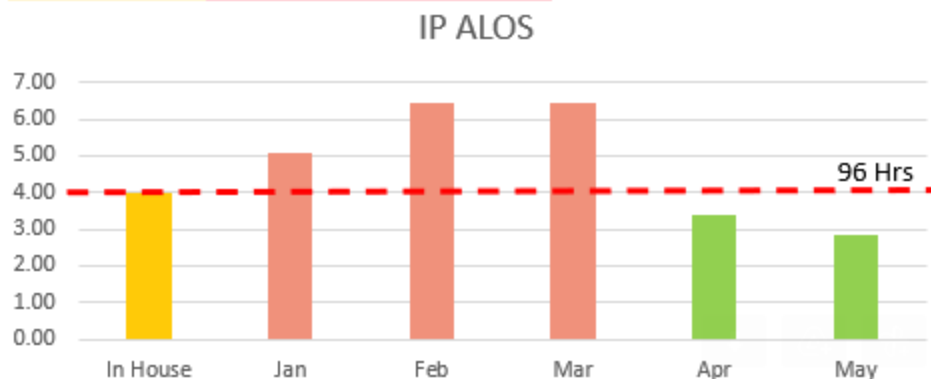


For the first time in several months we have had an extended stay by a guardian care patient. Guardian care patients are unable to be discharged for a variety of reasons that might include a lack of a safe place to go, inability to care for themselves, or an inability to make medical/guardianship decisions. These are often difficult situations that can take a long time to resolve. It also typically results in NVH providing uncompensated care because the patient lacks a medical reason to remain in the hospital.

Otherwise, we have seen a return to our more typical ratio of swing beds to inpatients with the bulk of our volumes related to our swing beds.

An area of focus for the last few months has been our average length of stay for inpatients.

IP DC Month	Average of length_of_stay
In House	4.00
Jan	5.05
Feb	6.44
Mar	6.45
Apr	3.40
May	2.83
Grand Total	5.19



As a Critical Access Hospital we function under the “96 Hour Rule” that states our inpatient stays should be on average under four days. During the COVID Public Health Emergency this rule was waived, but is now back in place. As shown on the graph our inpatients had longer lengths of stay during January-March. In April and May we have successfully stayed below the requirement.

## Quality/Infection Prevention:

Cassandra just finished the eight month Certificate Program in Patient Safety and Quality from the University of Washington and is about to start the Quality 101: Safety and Quality Fundamentals for Healthcare Leaders on May 30th.

Quality, Allied Health, Nursing Leadership and Administration have been working together to refine the wound care process on the acute care floor.

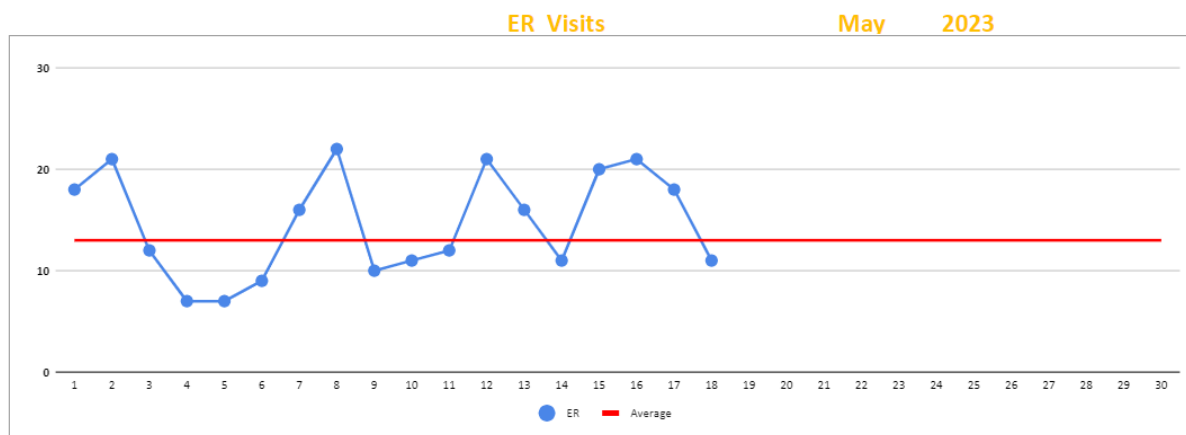
New policy development has been underway as a response from our Department of Health survey to develop reliable processes moving forward.

Annual N95 FIT testing is beginning in order to achieve compliance with respiratory protection requirements. We are restructuring that process upon hire and moving forward to include Respiratory Therapy.

The CAH Annual Program Review was completed and will be reviewed with the district's managers on May 24th, 2023 and also presented to the Board of Commissioners for their endorsement at their May 25th, 2023 meeting.

The annual tuberculosis and MRSA risk assessments were completed and we continue to be low risk. COVID-19 positivity remains low, but we do continue to occasionally see positivity amongst our staff and throughout the community.

## Emergency Department:



The ED has experienced volumes that are higher than our historic average with several days the month having our 20 visits. The patient in the ED's experience and wait time can vary depending on the volume of visits when they come in.

<u>Hour Of Day</u>	<u>Hour Total</u>	<u>Sun 05/07</u>	<u>Mon 05/08</u>	<u>Tue 05/09</u>	<u>Wed 05/10</u>	<u>Thu 05/11</u>	<u>Fri 05/12</u>	<u>Sat 05/13</u>
00:00	1			1				
01:00	1						1	
02:00	2			1				1
03:00	2		1			1		
04:00	1		1					
06:00	3		1			1	1	
07:00	2	1					1	
08:00	3	1			1	1		
09:00	9	1	4	1		2	1	
10:00	11		4		1	2	2	2
11:00	4		1		2			1
12:00	5		1	1		2	1	
13:00	7	1	2	1	1		2	
14:00	8	3	1		1	2		1
15:00	4			1			1	2
16:00	3	1					2	
17:00	8		3	1	1	1	1	1
18:00	8	5			1		2	
19:00	11	2	2	1	2		1	3
20:00	4	1	1	1				1
21:00	3			1	1		1	
22:00	4						2	2
23:00	4						2	2
	<b>108</b>	<b>16</b>	<b>22</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>21</b>	<b>16</b>

This analysis shows a recent week's visits by hour of arrival. As an example it is interesting to note the difference between Monday May 8th and Friday May 12th. The volumes were almost the same as 22 and 21 respectively, however the visits on May 8th were clustered and grouped while the 12th was spread evenly across the entire day. As you can imagine Monday creates additional challenges for patient flow and staffing. Despite these realities our team does a great job seeing our patients as quickly as possible.

## Surgery:

Due to rising temperatures the Surgery AC unit and thermostat are down for repairs. Ray and his team are working on locating parts to repair and get the Surgery suite running again. Dr. Dhillon and Dr. Jex continue to provide colonoscopies and EGDs for the community in the Endo room that is unaffected by the AC outage.

## Laboratory:

Lab Week 2023 has come and gone. It was a great opportunity to acknowledge our Lab Staff and the amazing contributions they make to the district and our community. We appreciate everyone's participation in our games and the kind words and comments we received. Pictures from our week are shared in the employee newsletter.

The Lab is preparing for summer heat this week. We have moved some instruments around to make room for a portable air conditioner unit in the Microbiology Lab. It is very important that our analyzers are kept within certain temperature limits to maintain proper operation. Thank you to the Plant Engineering team for helping to facilitate this.

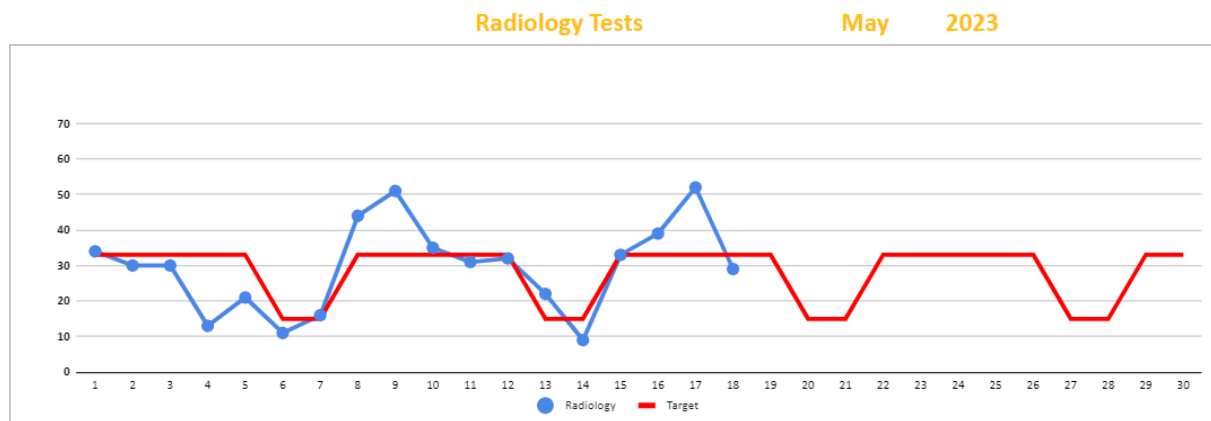
Lab volumes are now leveling out after 3 years of COVID. However we are still seeing volumes higher than pre pandemic years.

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	av
2023	3695	3476	3948	3647									3692
2022	6448	5141	4740	4594	4786	4712	5337	4909	4475	4877	3931	4350	4858
2021	3939	3472	3732	3894	4175	5131	4545	4843	6629	7101	5035	5819	4860
2020	3085	2548	2893	2334	2482	2925	3805	3478	3727	3762	4694	4115	3321
2019	2273	2225	2418	2005	3117	2541	2726	2121	2292	2475	2493	3124	2484
2018	3029	2306	2307	2270	2277	2536	2587	2745	2162	2475	2166	2285	2429

Lab test volumes per month over time 2018 until April 2023

We continue to be concerned about the lack of students entering the Laboratory field. Wenatchee Valley College has now completed enrollment for the 2023-24 MLT program. There are only six students enrolled and no students enrolled through the Omak campus. The program has the capacity to accommodate 22 students and in years gone by was very competitive and not all applicants received admission to the program. We are continuing to look at ways to encourage the next generation of students to enter the program.

## Radiology:



The radiology department is trying to find a replacement traveling technologist. Our current traveler has another assignment and will be done on May 18th. We have agencies looking for coverage but they have been unsuccessful. The department will need a traveler until October.

## Allied Health:

Gaelen Ritter, RD, Caitlynn Southerland, OT, and Liz Rodriguez, OT hosted an information session introducing the new diabetes prevention program. As a courtesy, the program was initially opened to physician referrals and employees. We had three participants at the information session, two who called to say they would like to participate but couldn't make the date, and have since had several more applicants. This is a free program that will continue for one year. I am grateful to Gaelen, Caitlynn, and Liz for taking on this work.



The **FREE** classes start in June.  
We currently have space for more participants.

For more information or to submit your referral  
please see our website, [nvhospital.org](http://nvhospital.org),  
email [dpp@nvhospital.org](mailto:dpp@nvhospital.org),  
or call 509-486-2784.

We are happy to announce that we have hired a per diem respiratory therapist who will offer coverage as she is able when Ken is away. Our intent is to have an RT available anytime airway issues arise, however, in order to help providers be prepared in case there isn't, Ken Radford has been providing "hands-on" as well as video training for providers in the event that he is away. Ken reports that this is going well and providers seem to be appreciative.

This month we say goodbye to Taylor, our rehab clerk in Oroville. We are sad to see Taylor go as she has done a stellar job managing insurance, patient accounts, maintaining good relationships between allied health and all of the departments we interface with. We wish her all the best as she moves into another phase of her life.

Recruitment continues for a physical therapist and a rehab clerk.



Congratulations to Katie Sharkey, PT and Caitlynn Southerland, OT on completion of the second level of training in pelvic floor dysfunction. The first level focused on assessment techniques and understanding anatomy and physiology, while the second level focused more intensely on treatment techniques. This service can be provided by PT, however, since our PT will soon be taking maternity leave, referrals will be directed to OT. Pelvic floor dysfunction includes abdominal pain, back pain, urinary issues, pre and post-natal assessment and care, and treatment

for prolapse. Thanks to Katie and Caitlynn for advancing their education to be able to extend these services to our community.

## TFMC:

TFMC has two members who have joined our team. Stephanie R and Allyssa from LTC. Stephanie moved into our front desk positions and Allyssa will soon be joining the MA-C apprenticeship program.

## Human Resources:

We continue to actively recruit for several positions including HR Director, nursing, maintenance, and clinical positions. This month we had the opportunity to visit the graduating nursing students at Wenatchee Valley College to discuss career opportunities. Thanks to Jody and Kristy for representing us.

We are gearing up for our every third-year union negotiations. Over the coming months, the Board will learn more about our progress and work to update the contract.



## Support Services

### Food Service:

May has been quite a busy month so far! We are excited to start off our summer BBQ on the 19th. The barista position has been filled. Still short staffed in the kitchen which has been very challenging. Hoping to get some candidates applying so we can fill our department.

### Laundry:

Once again, we are looking to hire a per diem. I hope to be doing some interviews very soon and get that position filled prior to peak vacation season.

In other news, it's hot. We are doing everything we can to cool down in Laundry and we appreciate the Plant Engineering staff for their diligence while they try to help us with this issue. If I can say anything positive about it, we are all much more focused on staying hydrated.

### Plant Engineering:

The Maintenance Team is wrapping up the corrective actions from the survey and working to keep the campus cool in the higher temperatures. We have had some isolated issues with our cooling systems and it has taken some time to find solutions. We are also supporting the repair work in the Boardroom and offices and happy to have that project wrapping up.

### Materials Management:

Knock on wood! The work tempo continues at its normal pace - a blessing compared to earlier months when personal protective equipment was in short supply.

Thanks to Michelle and Lupe for their "steady" management of purchasing, inventory management, and stocking supplies in departments! They are now identifying soon-to-be-outdated supplies with a magenta patch. These patches will help the staff keep inventory stock "current".

## Safety:

The May Safety Committee engaged in discussion for participation in Annual update topics: fire and electrical safety. Great news, April had no injuries or claims!

## Security:

As the weather warms we typically see more citizen activity around the campus after hours. It's been a comfort to have the added access badges and cameras to monitor this activity. The 2 security guards log their activity and we compare those incidents to Safety Zone activity for a more complete view of our ongoing Security environment.

## Disaster:

We initiated Incident Command to prepare extra staff and supplies for the upcoming Spring Barter Faire weekend. Disaster policies continue to be updated, including Memorandums of Understandings (MOU's) with regional partners who we may interact with during summer wildfires or other incidents which could affect our ability to give care. We will participate in a WAt rac Statewide Communication drill on June 8th.

## Committee Work:

### Policy and Procedure Committee:

There are currently 1344 documents in PolicyStat, with 213 pending approval and 411 due for review. The quarterly committee meeting will be held June 15th 10am location TBA.

### Grants Committee:

The Grants Committee has made a decision to pause applications while we work to complete reporting and compliance topics for the previously awarded grants. In the coming months we hope to resume applications.

Topic	Request Amount	Status
PUD Incentives	Unknown	In Process

Strategic Planning	\$10,000	Awarded
Thriving Together NCW (NCACH)	\$380,000	In Contracting

### Long Range Focus Committee:

The LRFC's meeting for May was dedicated to the Strategic Planning working session with our facilitator. The group is looking forward to seeing the next steps of the process.

### Foundation:

The Foundation met on May 1st. The 2023 Scholarship program, for applicants on a healthcare pathway, will be launched soon. The committee also discussed the Edward Jones CD Investments and agreed to reinvest the recently matured CDs until September. The committee is keeping the hospital's pending construction projects in mind to possibly donate towards completing a patient care area. The Foundation is always in search of new members. Participation at summer community events was discussed to help promote membership and the Foundation's mission.

### Building and Planning Committee:

Building and Planning did not meet in May. The next meeting will be June 7th.

## Revenue Cycle:


### Health Information Management

Janis, Heather and Tegan will be attending the AAPC coding conference virtually the week of 05/21. This will help with any updates to coding that are going on or answer any questions that we may have with coding or documentation.

Kristy and Tegan attend the WAMSS conference in Spokane 04/24-04/28. Kristy did a presentation on provider enrollment. She has done this twice now with WAMSS and all the attendees really appreciate her advice.

Provider credentialing is up to date. We are still trying to recruit a part-time credentialing staff member.

### Patient Access



Recently, I presented Patient Registration with a challenge. As part of mandatory reporting elements set forth by Medicare, we are required to review our patient's Advance Directive status with them. For Patient Registration this means: a) asking the patient if they have one, b) if they do what kind and where it is located c) advising them to bring it in for adding to their Medicare record d) providing the patients with information on Advance Directives if they wish to pursue one. While this isn't a new requirement, over the years, we have lost momentum on this. I ran the first quarters numbers for our CQI dashboard and found we have much room for improvement. Since challenging the Registration staff, I have been hearing and witnessing this element getting addressed during the check in process. For the first quarter, our average for patients 65 years and older with an updated Advance Directive status was 34%. April's numbers are at 47% and I only presented the challenge on April 19th! I am very pleased with this progress and am excited to present the second quarter numbers at our next CQI meeting!

I would also like to give a shout out to our scheduling department for going above and beyond to make sure our patients get the services they need and the authorizations we need. Recently Brittany was presented with a challenging case and there was concern we were going to have to postpone a patient's (multiple) services. We were presented with an expired authorization and conflicting information from the payer. Brittany made multiple phone calls and was able to get an updated authorization from the ordering provider and got corrected information from the payer. All in the 11th hour and we did not have to reschedule the patient!

Thank you to both departments for your hard work!

