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CASCADE MEDICAL
PARTNERS IN YOUR HEALTH

Minutes of the Board of Commissioners Meeting
Chelan County Public Hospital District No. 1
Arleen Blackburn Conference Room & Video Conference Connection
September 25, 2024

Present: Bruce Williams, President; Tom Baranouskas, Vice President; Shari Campbell, Commissioner; Jessica Kendall, Commissioner; Diane Blake, Chief Executive Officer; Marianne Vincent, Chief Financial Officer; Melissa Grimm, Chief Human Resources Officer; Megan Baker, Executive Assistant
Excused: Gustavo Montoya, Commissioner
Guests: Natasha Piestrup, Director of Nursing; Erin Adams, Medical Services Officer- EMS; Shannon Keller, CM Foundation
Via Zoom: Mary Morse, PSR; Carrie Kingsley, Community Member

Topics	Actions/Discussions
Call to Order	• President Bruce Williams called the meeting to order at 5:32 pm. Tom then led the pledge of allegiance.
Consent Agenda	• Tom moved to approve the consent agenda. Shari seconded the motion, and the group unanimously approved.
Community Input	• None

Foundation Report	Shannon Keller provided the Foundation Report.
	• Jive Time was September 21st at the Leavenworth Festhalle
	  ○ There were fewer attendees this year compared to previous years which may be attributed to the increase in live music events happening around town.
	  ○ The CM Foundation raised ~ $10,000 in 2023 and $11,400.00 in 2024.
	• The group will host their annual retreat on October 16 at the Wenatchee River Institute. They will be working with a consultant who will advise foundation initiatives for 2025.
	• The CM Foundation is actively recruiting new members.

CM Values	Diane Blake provided the report. • CMF remains unwavering in their support of CM and our community, consistently exemplifying our Shared Values—commitment, community, empowerment, respect, and leadership. Their dedication inspires and motivates our teams to deliver their best efforts. • Shannon shared a thoughtful email highlighting the numerous individual contributions that made CMF's Jive Time event a success. • Kudos to Shannon for her exceptional leadership, dedication, and support for her team.
Discussions & Reports	**A. Patient and Family Advisory Council (PFAC) Report** Melissa Grimm provided the report. • Huge thanks to Jade Wolfe for her work creating the report. • Melissa outlined various consultation and field trip initiatives aimed at educating the group about Cascade Medical's services, along with a dedicated effort to improve navigation of the patient portal. • Upcoming work includes early viewing access of EMS Levy print materials. • In January, the group will look to add new members to PFAC. Melissa, Clint, or Jade are all points of contact for interest.

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B. Meditech Update

Diane Blake led the review of the progress document included in the packet.

- CM budgeted for an additional Informatics FTE for which we have not yet recruited.
- The portal is now accessible outside of the US.
- The Rural Collaborative is developing a Meditech Users Group which will allow hospitals with Meditech to connect, collaborate, and share resources.
- Intuitive referrals are now populating in Meditech.
- Luma Health is a patient engagement platform that streamlines healthcare communication and access by automating appointment scheduling, reminders, and care management through a user-friendly interface. CM is currently working to set up Luma with a Meditech interface.

C. Risk Work Overview

Diane Blake provided the report.

- Kudos to Melissa's leadership through risk stratification work.
- Dr. Kendall, Dr. Richardson, the Executive Team, and the Leadership team were all involved in a process of collaboratively adjusting rankings to address and capture team input.

Strategic Question:

Are there any risks missing from the list or different risks the board identifies as highest priority for mitigation?

- The constrained campus risk is relevant to CM, as there are limitations for expansion, landlocked conditions, and ongoing parking challenges that warrant consideration.
- Items that have been adjusted include:
    - Fell Off: EMS Levy and Payor Contract Management.
    - Blended/Revised: Mental health Crisis is now incorporated under Provider Coverage, since the risk is about whether there are enough practitioners to serve the population.
- Cybersecurity is a top priority because it's not a matter of if an incident will occur, but when, and the consequences could be catastrophic.

D. First Reading of Draft 2025 Budget

Marianne Vincent led the review.

Summary of Proposed Changes and Challenges:

- Chargemaster Increase: Proposed increase of 5%, following a 7% increase last year that received some pushback from payors.
- Proposed FTE Additions:
    - 1 Dietary Staff: Partially due to staffing regulations and the need to extend café hours.
    - 1 HR Staff: To expand the onboarding process, revive the volunteer program, and enhance training program management, increasing training from one day to two days to ensure completion of all modules.
    - 1 UR Data Specialist
    - 1 Provider
- Proposed Capital Budget: Approximately $1 million, with largest dollars allocated for IT and ambulance services.

Challenges for Growth:

- Achieving 9.1% Growth in the Clinic:
    - The urgent care question is still under consideration, with the most sensible approach being its integration into the Clinic by adding or expanding hours.

	○ Team-based care is still being fine-tuned, necessitating new marketing strategies to attract patients. ○ All panels in the clinic are currently open, and there is increased visibility for same-day appointments. *Summary of Patient Volume Forecast and Budgeting Insights:* • Patient Volume Forecast: The forecast is influenced by acute inpatient, swing bed, emergency, and clinic areas, which drive demand for ancillary services such as rehabilitation, lab, and radiology. • Admissions Growth: In 2024, there has been an increase in hospital admissions due to the addition of a hospitalist program. Efforts will focus on improving patient admissions rather than transfers, with a budgeted expectation of 5 observation stays per month, though the average has risen to 9 in 2024. • Ambulance Reimbursement: The budget includes cost-based reimbursement for ambulance services. Recently, it was discovered that LCCH applied for and received the same reimbursement, which gives CM a sense of optimism. • MRI Discussion: While discussions regarding MRI services are ongoing, no budget provisions have been made as of yet. • Ultrasound Services: A few additional ultrasound days per month have been added, and this adjustment is reflected in the budget. • Employee Compensation Budgeting: The group engaged in discussions about the budget process for employee compensation, which will be further refined at the October Finance meeting before being presented to the Commissioners. Overall Sentiment: Marianne is optimistic about the budget's outlook, while Diane is enthusiastic about developing the next strategic planning cycle, focusing on a big-picture vision.
Committee Reports	**Quality Oversight Committee** Jessica Kendall provided the report. • The committee convened in August and discussed various topics, with a notable highlight being the infection control summary: "It's fire season, beware of bats." It was recommended that all board members should conduct at least one quality rounding session per calendar year, and moving forward, dates for these rounds will be presented at board meetings for discussion among all commissioners. Additionally, the committee explored ways for the board to better understand quality initiatives and determine what information would be most valuable for them, with ongoing efforts to develop a narrative that is useful for the board. **Board Quality Rounding** Shari C. & Tom B. provided the report. Tom and Shari participated in Board Quality Rounding on August 19, 2024. • The EMS goal is to ensure that by July 2025, 100% of patients meeting stroke neuro requirements in the field are transported to the appropriate emergency department per county medical protocols; although no transports have occurred since the new protocol's implementation, historical data indicates a potential increase in stroke patients being transported to CM in the future. For the lab, the objective is to reduce average outpatient wait times from arrival to collection to 10 minutes or less by the end of 2024, as improving this metric will establish a foundation for success in other lab-related measures, such as decreasing turnaround times. **Medical Staff Meeting** Shari Campbell provided the report.

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	• Shari shared with the medical staff that she and Jessica bring fresh perspectives to their roles in the QOC as the quality team arranges a follow-up meeting to address knowledge gaps and plan future quality initiatives, while also working on creating a quality dashboard. A communications survey is available on the CM website to gather insights on the services that matter most to community residents. Shari expressed her admiration for the provider engagement during the 2025 Organizational Objectives activity, noting it reflects well on provider culture, and reporting that the most important aspect for providers was the information flow with Confluence. **Community Outreach and Awareness Committee** Shari Campbell provided the report. The discussion focused on key areas of emphasis, particularly the access and availability of all CM services. Questions raised included how to measure these aspects, how to leverage data to enhance marketing efforts, and how to synergize various initiatives. **Governance Committee** Bruce Williams provided the report. • The committee reviewed several policies and the upcoming Board Retreat, placing particular emphasis on refining the CEO Annual Review processes to prioritize actionable feedback and provider input, along with conducting further research into best practices. Board succession plans were outlined, including proposals to transition Shari to board chair in 2026, her appointment as Vice President of the Governance Committee in January 2025, and Tom's transition to the Quality Committee. Additionally, the group discussed Commissioner compensation, concentrating on which activities should be counted versus those regarded as assumed responsibilities of Commissioner representation. **WSHA Board Meeting** Bruce Williams provided the report. • The board discussed a cybersecurity presentation, specifically addressing downtime processes. They noted significant changes ahead for elected officials, including shifts within the legislature and governing organizations. Additionally, discussion was had among the board on whether WSHA membership should or could remain unified in the face of legislative proposals that would harm only some members.
Action Items	**Motion: Approve Credentialing** • Shari moved to approve; Jessica seconded. Motion unanimously approved. **Motion: Approve Resolution 2024-08: Authorizing Proposition 1: EMS Regular Property Tax Levy** • Consensus on the necessity of EMS services. This was a common theme heard in the community when commissioners discussed with constituents. • Financial Misconceptions: o During Community Night, someone thought that CM benefits from the lodging tax, but the belief is misleading. • Property Tax Contributions: o Desire to consider both service users and property tax contributors. o o Tourists using the emergency department help offset costs and support a robust emergency response program. o The levy benefits the entire community.

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	• Education and Support from AWPHD:
	  ○ Matt Ellsworth from the Association of Washington Public Hospital Districts (AWPHD) is available to provide educational resources and guidance on mailers.
	• Upcoming Vote Details:
	  ○ The upcoming vote is planned for April 2025, with a proposal for a 50-cent increase over a six-year period.
	• Tom moved to approve Resolution 2024-08 at the rate of $0.50 / $1,000, Jessica seconded. Motion unanimously approved.
	Motion: Approve Open Public Meetings Policy
	• Shari moved to approve; Tom seconded. Motion unanimously approved.

August Financial Report	**Marianne Vincent provided the financial report.** • YTD net margin variance is approaching $1.5 million. • Monthly gross revenue is approximately $500K higher per month than it was in 2023. • Cash receipts totaling $4,015,000 For August were greater than the budgeted cash receipts total of $2,404,000, which included Medicare settlement funds for 2023 and 2024.. • Professional Fees were over budget in August by ($63,000), primarily in Acute due to coverage for our open hospitalist position and in Admin for ongoing Clinic Practice Share consulting. • Rehab statements were recently sent out, accompanied by a letter explaining the changes. CM is transitioning to a monthly billing format instead of using a rolling patient visit account. • In August we saw Swing Bed, Rehab, and Clinic volumes below budgeted volumes, while Acute, CT, and Radiology were all were well above budgeted volumes. • Our Balance Sheet shows an increase in cash balances in August of $1,429,000.
Administrator Report	**Diane Blake provided the report.** • **Staffing Law Update**: CM is investing approximately $30,000 in new time clocks to support the transition to “to the minute” timekeeping, ensuring employees can clock in effectively, in response to new regulations. • **Hiring:** CM is actively recruiting for the hospitalist position, with an onsite interview conducted last week and additional interest received today. The new Clinic Outreach Provider, Kalie Thompson, PA-C, will start in early November. • **Hilfreiche Hausfruen:** The group will set up two tables for a yard sale, coinciding with the library’s book sale on October 12. • **Endoscopy Update:** Dr. Butruille has expressed interest in increasing endoscopy days, and CM is evaluating potential program expansion opportunities. The team is considering the ideal patient wait time for this service, given the current 8-month wait at Confluence, and exploring solutions for coverage when Dr. Butruille is unavailable, including collaboration with LCCH. • **Parking:** The city and CM are working on refreshing their parking agreement to ensure positive patient parking experiences and maintain a strong partnership. • **X-ray/Mammograph**: Radiology was recently surveyed by the Department of Health (DOH) and passed with flying colors. Kudos to Deseree for her leadership. CM is fully staffed in radiology, with a quality focus on mammography imaging, reaching a 90% efficiency rate in three capture areas. • **EMTALA Training**: The care team will participate in upcoming EMTALA training, which is being provided at the request of nursing.

	• **Connections with WA Legislators:** Diane and Aaron Edwards, the CEO of LCCH met with Representative Keith Goehner to discuss rural healthcare challenges,. Diane, Aaron, and Dr. Jones (Confluence) plan to meet with Representative Mike Steele in Chelan on Friday for further discussions**.** • **DC Advocacy Days**: Leaders, WSHA staff, CEOs, and commissioners, met with senators who showed strong interest in supporting initiatives aimed at protecting access. Discussions centered on challenges with Medicare Advantage plans (advocating for increased oversight), potential changes to CAH regulations (allowing hospitals with slightly more than 25 beds to apply for CAH designation), and concerns over the 96-hour acute care limit, which poses risks as statewide bed space tightens. Additional discussions involved extending telehealth waivers to continue to allow CM to be an originating site. • **AHA Rural Policy Board**: This group focused heavily on workforce issues, particularly the challenges related to provider shortages. Emphasis was placed on expanding access and exploring debt relief programs to incentivize individuals to pursue careers in medicine. • **Rural Collaborative Board Retreat**: Provided valuable networking opportunities and insights into what other organizations are doing. Discussions focused on joint payor contract work, interest in forming a consortium to pursue funding for digital initiatives such as Universal Service Administrative Co. (USAC) support, and strategies for enhancing rural workforce training programs. • **WSHA Annual CEO Retreat**: October 1-3 at Salish Lodge. • Sarah Portin was honored as a Wenatchee World 30 Under 35 award winner. Kudos to Melissa for advocating and highlighting the importance of nominating team members for recognition.
Board Action Items	• October 26th PTRAC: Tom • October 29th Community Engagement Night: Shari • Board Quality Rounding: October 30th: Bruce and Shari, 9-11 AM • Please check your email for the Resolution.
Executive Session: Performance of a Public Employee (RCW 42.30.110(1)(g)	• Bruce called the executive session to order at 9:00 PM for 15 minutes. • At 9:15 PM, the group extended the meeting for an additional 15 minutes. • The group came back into regular session at 9:30 PM.
Adjournment	• Jessica moved to adjourn; Shari seconded, and the group unanimously agreed.

Signed by:
Bruce Williams
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Bruce Williams, President

Signed by:
Shari Day-Campbell
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Shari Campbell, Secretary