



BOARD OF COMMISSIONERS' MEETING

April 28, 2020, 10:30 a.m.

Join Zoom Meeting

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Meeting ID: 509 775 8301

Mission Statement

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

AGENDA

	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	
 <i>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.</i>			
Approval of Consent Agenda		ACTION	Nancy Giddings 3-5
<ul style="list-style-type: none"> • Minutes 3/31/20 Board Meeting • Minutes 4/16/20 Emergency 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
- Strategic Planning
- Pharmacy

Board Representative Reports

- Finance
- Quality Improvement
- Compliance/Risk Management
- Medical Staff
- Credentialing
- EMS

Ron Bacon/Sarah Krausse
 Jody Jannot/DiAnne Lundgren
 Ron Bacon/Jody Jannot
 Nancy Giddings/DiAnne Lundgren
 DiAnne Lundgren/Nancy Giddings
 Nancy Giddings

New Business

- Aaron's annual evaluation/Contract

Nancy Giddings

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 May 26, 2020 @ 10:30 a.m.



Ferry County Health

BOARD OF COMMISSIONERS' MEETING

March 31, 2020

This meeting was conducted via Zoom

CALL TO ORDER: Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 10:31 a.m. on March 31, 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; Richard Garcia, DO, JoAnn Ehlers, Clinic Manager; Cindy Chase, CNO, Jordan Leonard, Social Worker James Davidson, IT 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 Lundgren to accept the agenda as written. The motion passed unanimously.

GUEST: Carol Devlin

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

ACTIVATION OF THE EMERGENCY PLAN: Truman reviewed the Incident Action Plan. Please review Plan at www.fcphd.org.

Edwards Thanked the Search and Rescue Team for all their hard work.

MEDICAL STAFF REPORT: Dr. Garcia discussed don and doff process and trying to improve how to achieve this safely in every hospital room.

Giddings thanked Aaron, Brant and Dr. Garcia. She also noted how proud she is of all our employees.

CNO/QUALITY IMPROVEMENT AND COMPLIANCE/RISK MANAGEMENT: The Board reviewed the attached report.

CLINIC REPORT: The Board reviewed the attached report.

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

- We are making every attempt to keep track of all available financing options via the new stimulus bill. As you are aware our current business is greatly impacted by the situation. As we are socially responsible and asking our community to social distance, overall demand for health services has decreased. We will most likely need some financial help during this time. Below is each opportunity as of today.
- **CMS Accelerated Medicare Payments- AVAILABLE RIGHT NOW**
- **Payment Protection Program- AVAILABLE SHORTLY**

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

- Through the SBA, you can receive up to \$850k (approx.) loan. Which can be completely forgiven in the event we do not lay off any workforce. **Still trying to understand as a public hospital district if we would qualify for the potential loan.** (501c3) qualify but does not specify our business structure.
- **HHS \$100B Hospital Grant Program**
- **FEMA Disaster Relief**
- **Unemployment Insurance**
- **Explore Optional Unemployment for selected group of employees**

FINANCIAL REPORT: Truman reviewed the February financials.

CEO REPORT: Edwards reviewed the attached report.

- Credentialing:
 1. A motion was made by Lundgren and seconded by Bacon to approve the reappointment of Courtesy Medical Staff privileges for Eric Aronsohn, PA-C. The motion passed unanimously.
 2. A motion was made by Lundgren and seconded by Bacon to approve the appointment of Courtesy Medical Staff privileges for Laura Karg, LCSW. The motion passed unanimously.
 3. A motion was made by Lundgren and seconded by Bacon to approve the appointment of Courtesy Medical Staff privileges by telemedicine proxy for Integra Imaging provider Jordan Castle, MD. The motion passed unanimously.

PUBLIC COMMENTS: Carol stated she appreciates the communication from the Hospital District. She is very impressed on what we have achieved in this area.

Lundgren stated she is amazed on what the District has done.
Krausse said great job to and what a fantastic team we have.
Edwards thanked our IT manager James Davidson and his assistant Jim Milner for a great job.
Bacon is extremely pleased with how we got the testing up and running.

ADJOURNMENT: As there was no further business the meeting was adjourned at 11:57 a.m.

***Please visit www.fcphd.org to watch a recording of this Board meeting.**

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: April 28, 2020

As of April 22, 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 experienced a bit of a downsize in nursing since last month. Mike has once again worked his magic and we have most shifts covered but I may have to dust off my stethoscope. Our staff has really stepped up in so many ways. We have some injured folks that we are holding our breath on.
- Workflow Evaluation We began bedside shift report so still in early phases. Covid 19 has put a dent in all the plans. However staff is doing it. We have many steps to go in this process and with the new staff coming on board, no point getting too far ahead. We have a great vision on how this is going to look when we are done.

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. No further cases have cropped up in FC. Katy has been working with various state departments refining policies and completing assessments. She did the ICAR last week and very few things need attention. She has been keeping on top of everything and anything covid. We have been able to preserve PPE as we have had no respiratory or any isolation type conditions. I use the most probably out in the testing trailer. We continue to test and after a real slow down, testing has picked up again. I had been worried about a couple patients who did, after the worry did come back negative. We have tested about 110 folks. All kinds of illnesses have come to the trailer for assessing. I think the community is going to miss this when we are done.

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. We continue to admit not only to swingbed but ACU. Austin and Jordan are developing solid connections with the regional facilities. We have been keeping our census a bit above normal from time to time.
- Activities Coordinator. Christa has been doing some activities with LTC only. No SWB at this time so she doesn't go back and forth between areas. Very important she continues her role as these patients have got to be bored to tears in their huddle. So far, no illnesses coming out of LTC
- New Equipment. Spacelabs is nearing completion. So many moving parts. We are going to be able to scan medications soon as we wait for some parts to come in. This is a HUGE safety concern and scanning meds is going to reduce errors for sure and keep patients safer. Folks have been trained on the new vent but Mike wants to be sure they really get it. He is going to put a video together for all staff and providers, to see simply how it gets set up. In Mike's eye, there is no such thing as over training! 😊
- QI/RISK/QMM. Nothing egregious has occurred in the Risk arena. I believe Covid testing and

results have been handled with care and protection. QMMS are fairly tame right now but there have been a couple falls in the Alf and LTC. No injuries.

Financial

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

Growth

- We continue to keep our PPE stock up to snuff just in case Covid stirs up in the community.

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

We are doing our best to keep public informed and educate community about the covid 19 and how to protect self....primarily to stay home!! Aaron has done a fabulous job on keeping the community informed. SARS has been a great asset to our campus and monitors everyone coming in.

CNO I, like everyone, continue to be mesmerized by the Covid 19 and all the various reports. I feel our hospital is ready for a surge, if it comes. I worry about the community and some of the items on the various FB pages in town. Folks are tired of this whole thing and it concerns me that we may try to pop back into normal too soon. Inside our hospital, I feel that staff continue to evolve but in general, are settled into a routine. I look forward to some upcoming meetings to discuss and strategize how to get back to some sort of normalcy. For the record, Zoom is killing me!! For me, I want meetings in person!!

To end on a good note, I heard yesterday that our Trauma Designation application was accepted but won't be announced officially until the 30th. I am assuming then our Level V will be retained for 3 more years. Most likely there will be a few mop up tasks to be completed.

Happy Spring.



TO: Ferry County Health Board of Commissioners
 FROM: JoAnn Ehlers
 Subject: Clinic Report

MEETING DATE: April 28, 2020

As of April 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.

- Changing things every day.
- After today, will have 5 full time staff moved to Standby/Furlough.
- 3 nurse staff cutting down time – unpaid.
- 2 providers cutting down time – unpaid.

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.

- Adjusting to the needs of the community by adjusting where our phone calls are going and how we handle things. Of note: Same person may call three different people about the same thing. We may pick that message up at different times find out someone already handled it or get it taken care of and then hear someone else calling the same person.
- Adjusting to less staff on hand. Changing the options on our phone tree so calls do not get lost on a line we don't have anyone working with. Per James this is as simple as unplugging the phone.
- Those of us working each day are keeping good communication lines moving.
- Better discussion of what to do and how to help each person.
- While we have time, have allowed providers some extra time with patients. Also trying to allow time to document. Patients are not waiting in the lobby, most of the time the lobby has one patient or none.

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.

- Started Telemed/Phone options on 3/17/2020 with one call. The main change took effect on the 23rd of March.
- Numbers from 3/17 to 4/21/2020:
- 700 Patients between 5 providers – Working various days from 2 days per week to 4 days.
- 128 Phone Appointments
 - 31 Telehealth (ZOOM) Appointments
 - 6 Drive up ZOOM Appointments (from our parking lot on our tablet.)

165 total Telemed Appointments = Almost one-fifth of our visits.
 (did not break out nurse visits here)

As you can see, most of our appointments are still via in-person mode. There are simply many people

that do not want to be seen any other way. We have the whole gamut of those that will NOT come in and those that will NOT change how they see their provider. We are happy to accommodate.

- Have had several calls for the new antibody testing for Covid.
- Have all the same problems with meds and such as always.
- While we are slower, have taken time to redo some processes that we could not get to:
Hard Copy Process: Removed three large heavy binders and scanned the info into patient charts.
Now using a more appropriate way of handing these out:
Call patient to let them know RX is ready.
Patient/Person picking up RX must present with ID.
Copy ID with original RX.
Patient/Person picking up RX signs this and we scan it into chart.
Allowing some leeway as people learn new process:
Example: Patient forgot ID – will allow staff that knows the patient to
Date and sign that they know the patient.
- The new process will help us keep a better eye on the RX's and return those that are not picked up to the prescribing provider. Drawer will be checked weekly for reminder calls to be made as needed.
- Same clean-up was done to the Non-med pick up file.
- Cupboards and drawers have been cleaned out and re-organized.
- Referral office is nearly clear of charts.

Financial

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

- March numbers were:
- 721 patients including 88 walk-ins at 12% of our total.
- Provider average was 11 per day.
- We seem to be hanging at 20-30 patients per day.
- We are not turning anyone away.
- We are making appointments for those that call in asking about walk-in options.
- There have still been some true walk-in patients.
- There are still lots of NEW patients checking in.
- Have had returning patients – one from 2011.
- Laura Karg has started to see patients, she is now credentialed with Medicare, Medicaid and Premera .

Growth

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

- My new goal is to get back to where we were one day.
- As Always, I respectfully submit this with thanks. JoAnn Ehlers



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

MEETING DATE: April 28, 2020

FROM: Brant Truman

Subject: COO/CFO Report

As of April 22, 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.

- Workforce continues to take and perform other related COVID tasks extremely well
- Currently have 12 employees that are on employee voluntary "standby".
- Continue to be impressed with our staff and their ability to continue to stay focused, provide great care and keep our community and staff safe.

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.

- Tele video visits present opportunity for family members to visit their loved ones without a face to face visit.
- Search and Rescue has done a tremendous job with our COVID external testing.
- Spacelabs went live, had to go back and get some additional items to go live but in all most seem extremely pleased with the new equipment.
- PPE has maintained at approx. 30 days of supply with current situation. We continue to try and monitor and get as much as possible in an effort to prepare for surge.
- Telehealth visits have increased the quality of service at this time.

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.

- Directly calling individual patients as opportunities arise to connect with and work with them in an effort to support them during this time.
- We continue to improve upon the COVID trailer, review of our emergency response plan to update any recent changes.

Financial

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

- March our loss in net position was \$184k, largely due to COVID 19.
- Received \$375k from round one of the CARES ACT, expecting round two this next week. Unsure of how much that will be. Continue to keep eye on all funding options.
- I have confirmed that our \$500k line of credit with the county is viable.
- Financial Statement Review.
- Expecting Financial Audit/Cost Report review complete by May 8th.
- 25% of all visits in the clinic are televisits currently, reimbursement increased from \$60 to \$90 per visit.
- MTD April we are down 32% of expected revenue.

Growth

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

- Focus is on keeping people safe.
- Telehealth visits offer some opportunity.
- Will always keep an eye and ear out for great opportunities.

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

	January	February	March	March% of Gross	YTD	% of Gross Rev
Operating revenue:						
Gross patient service revenue	1,710,915	1,489,612	1,621,788		\$ 4,822,315	
Contractual allowances and provisions for uncollectible accounts	(665,331)	(448,659)	(642,669)	-40%	\$ (1,756,659)	-36%
Patient service revenue - (Net contractual allowances)	\$ 1,045,584	\$ 1,040,954	\$ 979,119	60%	\$ 3,065,656	64%
Bad debt expense	18,209	35,579	1,902	0%	\$ 55,690	1%
Other operating revenue	81,814	69,163	70,779	4%	\$ 221,755	5%
Total operating revenue	1,145,607	1,145,695	1,051,799	65%	3,343,101	69%
Operating expenses:						
Salaries and wages	567,489	518,333	572,097	35%	\$ 1,657,919	34%
Employee benefits	154,413	170,424	134,946	8%	\$ 459,783	10%
Professional fees	112,596	108,235	137,918	9%	\$ 358,749	7%
Supplies	92,119	67,987	105,701	7%	\$ 265,807	6%
Purchased services - Utilities	24,883	31,012	23,102	1%	\$ 78,997	2%
Purchased services - Other	86,392	108,389	157,758	10%	\$ 352,538	7%
Insurance	7,135	7,135	7,135	0%	\$ 21,405	0%
Other	28,371	21,186	47,393	3%	\$ 96,950	2%
Rent	11,573	11,573	11,673	1%	\$ 34,819	1%
Depreciation	62,559	74,447	66,827	4%	\$ 203,832	4%
Total operating expenses	1,147,529	1,118,721	1,264,549	78%	3,530,800	73%
Gain (loss) from operations	(1,922)	26,974	(212,750)	(0)	\$ (187,698)	-4%
Nonoperating revenues (expenses):						
Property taxes	21,876	21,952	21,876	1%	65,704	1%
Interest earnings	5,484	4,700	4,438	0%	14,622	0%
Interest expense	(15,457)	(15,439)	(14,997)	-1%	(45,893)	-1%
Grants and donations	-	-	-	-	-	0%
Other	20,757	18,095	16,799	1%	55,651	1%
Total nonoperating revenues (expenses) - Net	32,660	29,308	28,117	2%	90,085	2%
Increase (decrease) in net position	\$ 30,738	\$ 56,282	\$ (184,633)	-11%	\$ (97,614)	-2%

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 March 31, 2020

<i>Assets</i>	YTD Balances January	YTD Balances February	YTD Balances March
Current assets:			
Cash and cash equivalents	\$ 3,503,022	\$ 3,485,192	\$ 3,393,365
Patient trust	500	500	500
Receivables:			
Patient AR - Net	2,187,915	2,310,242	2,322,352
Gross AR	3,204,454	3,389,735	3,472,075
Contractual allowance	(1,016,539)	(1,079,494)	(1,149,723)
Taxes	280,664	267,440	238,966
Estimated third-party payor settlements	2,054	2,054	-
Other	286,755	167,313	191,197
Inventories	178,696	179,730	199,863
Prepaid expenses	35,750	52,322	44,120
Total current assets	\$ 6,475,355	\$ 6,464,792	\$ 6,390,363
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	27,282
Depreciable capital assets - Net of accumulated depreciation	5,996,007	5,928,669	5,896,328
Total capital assets	\$ 6,023,290	\$ 5,955,951	\$ 5,923,610
TOTAL ASSETS	\$ 12,498,644	\$ 12,420,744	\$ 12,313,973

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 March 31, 2020

<i>Liabilities and Net Position</i>	YTD Balances January	YTD Balances February	YTD Balances March
Current liabilities:			
Current maturities - Long term debt	\$ 92,962	\$ 92,939	\$ 91,847
Current maturities - Capital lease obligations	113,248	112,786	112,326
Accounts payable	652,942	404,096	747,619
Warrants payable	299,940	415,110	143,564
Patient trust	500	500	500
Payroll and related expenses	12,986	146,083	189,976
Accrued vacation	300,457	321,242	342,219
Unearned tax revenue	240,635	218,759	196,884
Accrued interest payable	13,699	27,402	40,685
Estimated third-party payor settlements	352,819	216,167	13,514
Total current liabilities	\$ 2,080,187	\$ 1,955,084	\$ 1,879,133
Noncurrent liabilities:			
Long term debt - Less current maturities	3,801,049	3,801,072	3,752,164
Capital lease obligations - Less current portion	102,580	93,477	84,350
Total noncurrent liabilities	3,903,629	3,894,549	3,836,514
Total liabilities	\$ 5,983,816	\$ 5,849,633	\$ 5,715,647
Net position:			
Invested in capital assets	1,899,752	1,828,275	1,842,238
Restricted expendables	-	-	-
Unrestricted	4,615,076	4,742,835	4,756,088
Total net position	6,514,828	6,571,110	6,598,326
TOTAL LIABILITIES AND NET POSITION	\$ 12,498,644	\$ 12,420,744	\$ 12,313,973

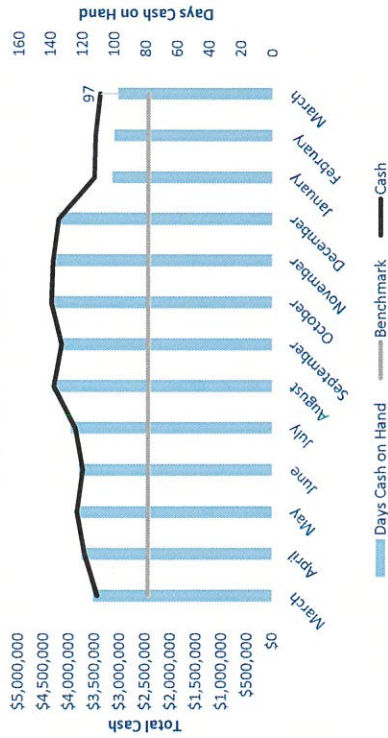
FINANCE DASHBOARD
Ferry County Public Hospital District #1
March 31, 2020

Stats	Year To Date		Prior Year	Current Month	
	Current Total	Target		Current Total	Target
1 Acute Care Days	85	85	16	43	16
2 Skilled Swing Bed Days	136	136	113	52	38
3 Long Term Swing Bed Days	864	864	1086	273	362
4 Observation Hours	411	411	592	166	197
5 Admissions (Acute)	16	16	19	11	6
6 Average Length of Stay (Acute)	3.26	3.00	3.02	3.33	4.00
7 Outpatient Visits	2390	2495	2512	667	832
8 ED Visits	407	429	448	133	143
9 Emergency Admit to Inpatient	4.67%	3.00%	4.69%	7.52%	2.80%
10 Procedures	45	45	59	12	20
11 Clinic Visits	2547	2632	2626	721	877
12 Rehab Treatments	2608	2589	3482	303	863
13 Imaging Visits	945	1050	941	263	350
14 Lab Visits	5992	6805	6596	2,042	2,268
Profitability					
14 Revenue Deductions % of Gross Revenue	36%	30%	34%	30%	30%
15 Salaries % Gross Patient Revenue	34%	45%	31%	35%	45%
16 Benefits % of Salary Expense	28%	26%	26%	11%	26%
17 Bad Debt % Gross Patient Revenue	1.15%	1.78%	2.58%	2.39%	1.78%
18 Charity % Gross Patient Revenue	0.28%	1%	0.24%	0.28%	1%
19 Total Salary Expense	\$ 1,657,919	\$ 1,502,770	\$ 1,478,978	\$ 518,333	\$ 500,923

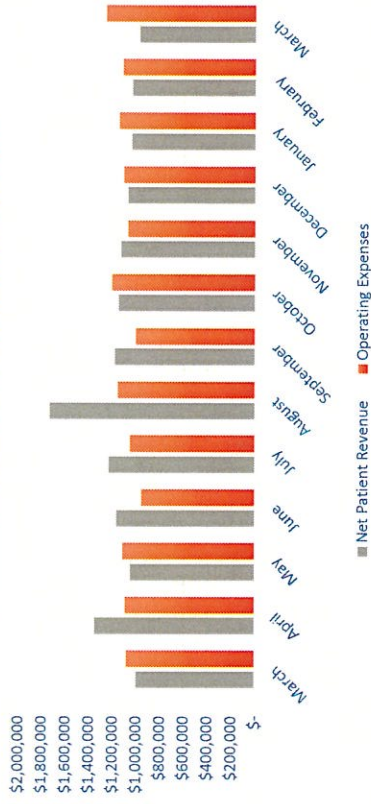
Key
 Meets or exceeds budget/target
 Does not meet budget/target expectations by 5% or less
 Does not meet budget/target expectations by greater than 5%

2020 Financial

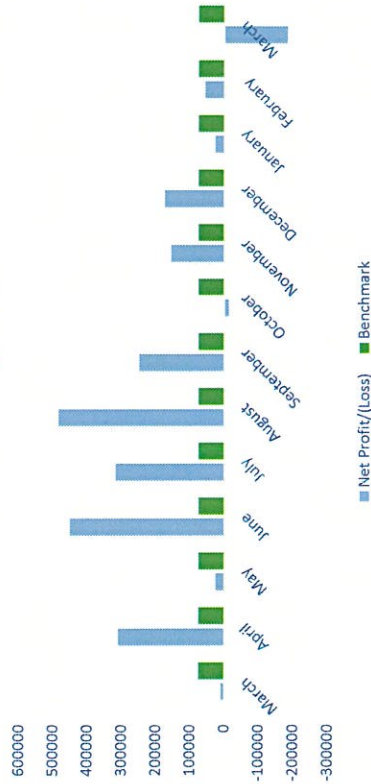
Days Cash on Hand



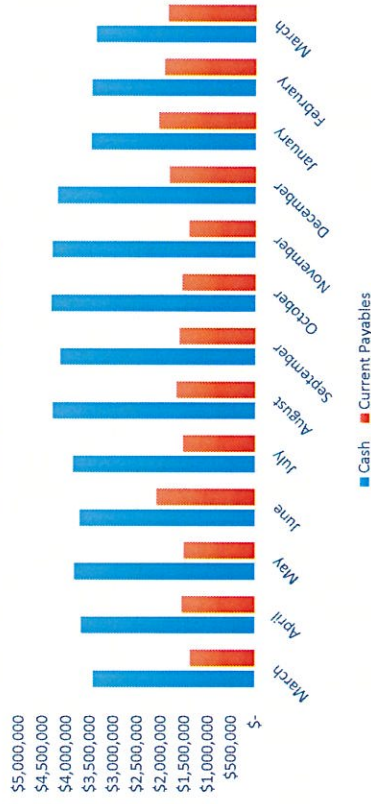
Net Patient Revenue vs Operating Expense



Net Profit/(Loss)

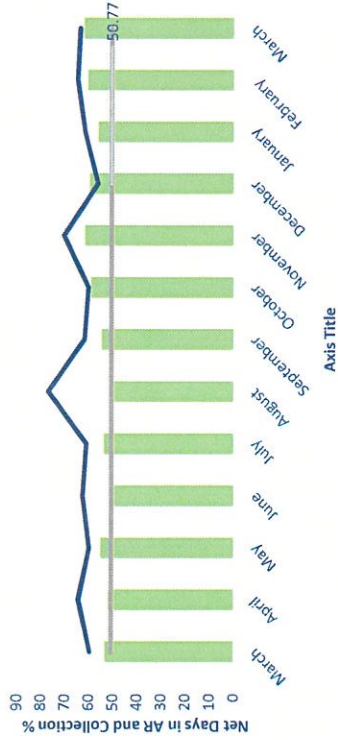


Cash vs Current Payables

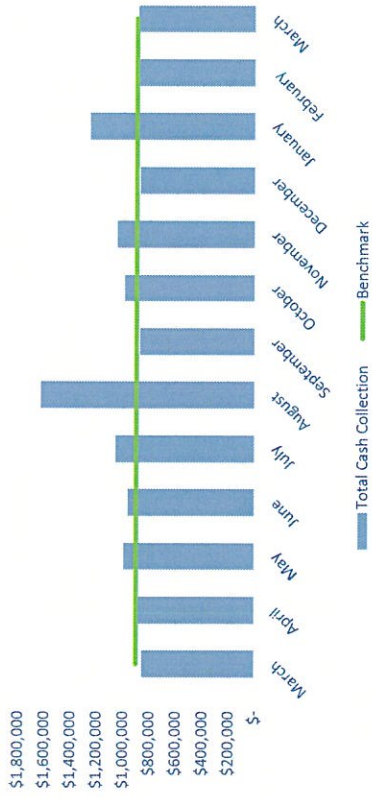


2020 Revenue Cycle

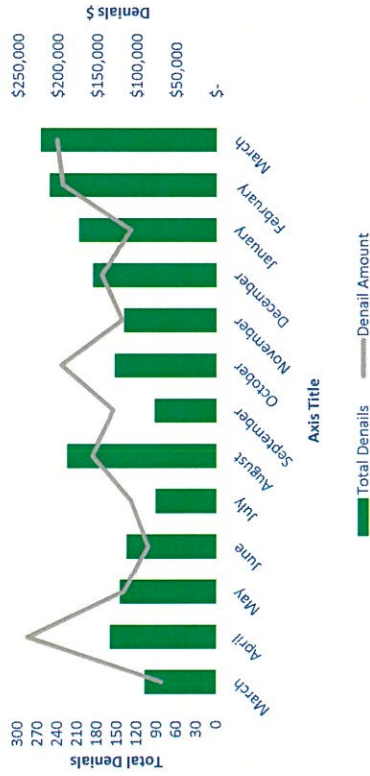
Net Days in Accounts Receivable



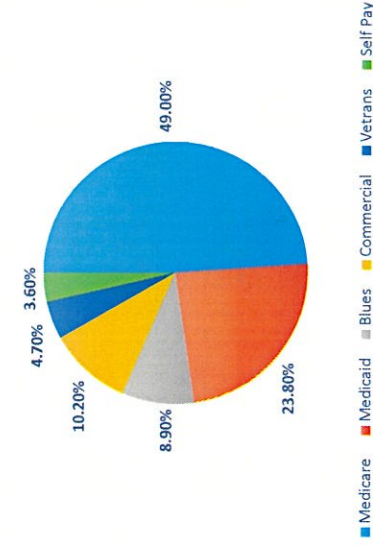
Cash Collections- Patient Accounts



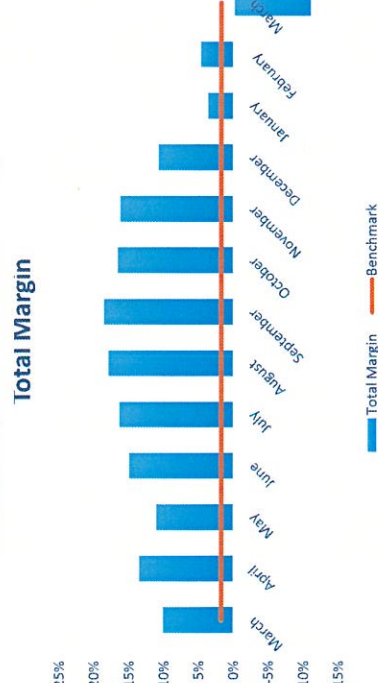
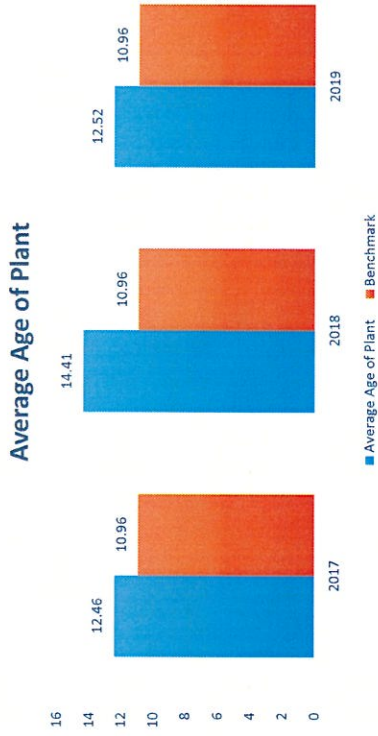
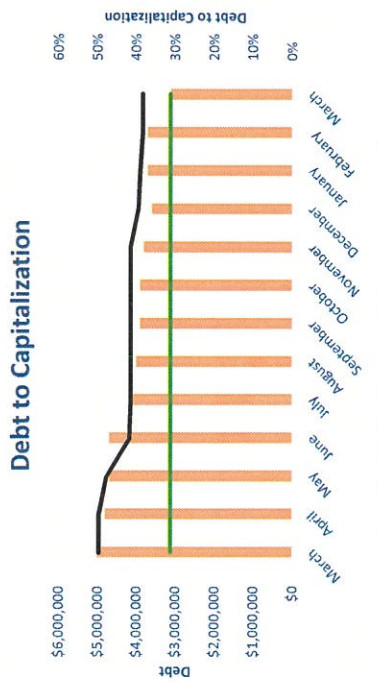
Total Avoidable Denials



Payer Mix- 13 Month Average



2020 Liquidity





TO: Ferry County Health Board of Commissioners MEETING DATE: April 22, 2020
 FROM: Aaron Edwards, CEO
 Subject: CEO Report

As of April 28, 2020

People	<p>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.</p> <ul style="list-style-type: none"> • Roughly 12 FTE's have been put on standby (voluntary). Very appreciative of our workforce and their willingness to help out in various unforeseen and meaningful ways. • Working on coverage for the ED through likely September with a provider still out for an unknown time.
Quality	<p>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.</p> <ul style="list-style-type: none"> • Continue to execute/stick to our Incident Action Plan (posted on the main page of our website). • Able to meet the need for surgical masks via a buy of 20K masks from WSHA. Working on surgical gowns and hand sanitizer next. Beyond protecting our patients and employees steady PPE supply is a must if the community is to "open back up").
Service	<p>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.</p> <ul style="list-style-type: none"> • Have done interviews with CBS (60 Minutes), Politico, The Spokesman, and every Monday with The Ferry County View. Have one later this week with WebMD. • Continue to update the community with semi regular written updates (web, trap line, Facebook, the Ferry County View, Sheriff's office, and other local entities). • Quarantine hotel details are in place should we need to isolate any community members. Working with county commissions for a long term solution that might be beneficial to the community for years to come. • Continue to actively explain our situation to local, state and federal legislators. • Clinic has improved tele services.
Financial	<p>To be financially viable, to support advancing the mission and vision. To be operationally efficient. To offer value to payer and consumers.</p> <ul style="list-style-type: none"> • We have been able to keep swing beds for the most part, which has been a significant help to us financially. Jordan (discharge planner) and Austin (Hospital PT) have done an excellent job with this.
Growth	<p>To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.</p> <ul style="list-style-type: none"> • The rehab department has begun tele visits for existing patients which by and large has been a success. • Hair and beard have been growing at an alarming rate (far superior to Dr. Garcia and Brant). Need a haircut badly.