



BOARD OF COMMISSIONERS' MEETING
 July 23, 2019, 10:30 a.m., in the HUB Conference Room

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	3-6
<ul style="list-style-type: none"> • Minutes 6/19/19 Board Meeting • Minutes 7/17/19 Special Meeting Minutes • Approval of Warrants • Financial Write-Off Report 			
Correspondence		Nancy Giddings	
Public Comments			
CNO Report & Quality Improvement and Compliance/Risk Management		Lee Jackson	7-9
Clinic Report		JoAnn Ehlers	10-11
Medical Staff Report		Dr. Garcia	
Safety Report:		Brant Truman	
CFO/COO Report		Brant Truman	12
Financial Report		Brant Truman	13-18
CEO Report		Aaron Edwards	19-20
Old Business		Nancy Giddings	
<ul style="list-style-type: none"> • Board QI Project • Facility Update • Health Foundation • Levy • Board Succession planning 			
Board Representative Reports			
<ul style="list-style-type: none"> • Finance • Quality Improvement 		Ron Bacon/David Iverson Sarah Krausse/DiAnne Lundgren	

Board of Commissioners
 36 Klondike Rd, Republic, WA 99166
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- Compliance/Risk Management Ron Bacon/Sarah Krausse
 - Medical Staff Dave Iverson/ Nancy Giddings
 - Credentialing David Iverson/DiAnne Lundgren
 1. Request for appointment of Courtesy Medical Staff privileges by telemedicine proxy for Integra provider: Oksana Prychyna, MD
 2. Request for reappointment of Courtesy Medical Staff privileges by telemedicine proxy for Integra providers: Suzanne Shaw, MD and Leslie Russell, MD
 - EMS Nancy Giddings
 - ACH/HFCC David Iverson
- New Business Nancy Giddings
- Hot Topic
- 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 August 27, 2019 @ 4:00 p.m. in the Curlew Civic Hall in Curlew Washington



Ferry County Health

**BOARD OF COMMISSIONERS' MEETING
June 19, 2019**

CALL TO ORDER: Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 12:08 p.m. on June 19, 2019, in the Hospital Conference Room at Ferry County Health. Commissioners in attendance were Nancy Giddings, Ronald Bacon, David Iverson, DiAnne Lundgren and Sarah Krausse. Aaron Edwards, CEO; Brant Truman, CFO/COO; Lee Jackson, Interim CNO and Lacy Sharbono, Executive Assistant, were present.

QUORUM ESTABLISHED: A quorum was present.

REVIEW, AMEND, ACCEPT AGENDA: A motion was made by Bacon and seconded by Iverson to amend the Consent Agenda to add Resolution 2019 # 6 Surplus Small Equipment and add Strategic Planning to Old Business. The motion passed unanimously.

VISITORS: Nancy McIntyre, Melissa Rose

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

CORRESPONDENCE: Giddings said she received a phone call from a daughter of one of our LTC residents thanking and raving about the care given to the patient. Giddings had the Board members sign a thank you card for the LCT Staff. Sharbono read a letter to the editor from a patient giving thanks to the providers and nursing for such great care.

PUBLIC COMMENTS: Melissa Rose stated they are still looking for a location for the new EMS shop. They are also hoping to apply for another new ambulance.

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

CLINIC REPORT: The Board reviewed the attached report.

MEDICAL STAFF REPORT: Nothing to report

SAFETY REPORT: Truman noted the backup generator is installed and functional. The sidewalks at the ALF and stairs in front of the hospital will be fixed mid-August or early September.

CFO/COO REPORT: Truman reviewed the attached report.

FINANCIAL REPORT: Truman reviewed the attached May financials.

CEO REPORT: Edwards reviewed the attached report. He also reviewed capture rate graphs. Edwards and Truman went to Dayton Hospital to learn about how their swing bed and behavioral health programs do so well.

Giddings called for a break at 1:56 p.m. Open session continued at 2:05 p.m.

OLD BUSINESS:

- Board QI Project: Next meeting with the Providers will be in the fall.
- Facility Update: Will have humidity for the Lab and CT rooms.
- Health Foundation: They did not meet this month.
- Levy: Tabled
- CEO Annual Review: Will discuss during executive session.
- Rebranding: Nina reviewed all the rebranding updates.
- Finalize Charity Care Policy: The Board reviewed the policy. **A motion was made by Iverson and seconded by Lundgren to approve the Charity Care Policy Reference # 3.01.001. The motion passed unanimously.**
- Strategic Planning: Lundgren discussed concerns that the Board has not been working on a Strategic Plan. The Board agreed to have a workshop meeting on July 17th at 9:30am to start talking about a plan.

BOARD REPRESENTATIVE REPORTS:

- Finance: No Board concerns.
- Quality Improvement: Krausse discussed the patient portal.
- Compliance/Risk Management: Cancelled
- Medical Staff: No Board concerns.
- Credentialing:
 1. A motion was made by Lundgren and seconded by Iverson to approve the appointment of Courtesy Medical Staff privileges by telemedicine proxy for Integra Imaging providers David Thayer, MD; Paige Flett, MD; Gurpreet Dhillon, MD; Jace Hilton, DO; Robert Frost, MD and Tyson Finlinson, MD. The motion passed unanimously.
 2. A motion was made by Lundgren and seconded by Iverson to approve the appointment of Courtesy Medical Staff privileges for Caleb Holtzer, MD. The motion passed unanimously.
- EMS: Giddings noted that the hospital is not ready to take on more debt at this time so we will not be moving forward with putting the EMS shop on district property.
- ACH/HFCC: Iverson reviewed a handout.

NEW BUSINESS:

- Hot Topic: None
- Plan for future audits: Truman reviewed information on a company called DZA. **A motion was made by Iverson and seconded by Bacon to approve signing on with DZA to conduct our future financial audits. The motion passed unanimously.**
- Board succession planning: Iverson will be moving out of District. The Board will be looking to fill his Keller District position.



Ferry County Health

**SPECIAL BOARD OF COMMISSIONERS' MEETING
July 17, 2019**

CALL TO ORDER: Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 9:40 a.m. on July 17, 2019 in the Republic Clinic conference room at Republic Medical Clinic. Commissioners in attendance were Nancy Giddings, Ronald Bacon, Sarah Krausse, David Iverson and DiAnne Lundgren. Aaron Edwards, CEO was also in attendance.

QUORUM ESTABLISHED: A quorum was present.

STRATEGIC PLANNING: The Board reviewed the previous Strategic Plan and evaluated the progress.

The next Strategic Planning meeting is scheduled for September 18th at 9:30 a.m.

ADJOURNMENT: As there was no further business the meeting was adjourned at 11:30 a.m.

Nancy Giddings, Chair	Date	DiAnne Lundgren, Secretary	Date
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DRAFT



TO: Ferry County Public Hospital District #1 Board of Commissioners
FROM: Lee Jackson, Interim CNO
Subject: CNO Report

MEETING DATE: July 23, 2019

As of July 19, 2019

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.

- NURSING STAFFING- Staffing has been difficult during the past month with incidences of shortage of both NAC and RN/LPN. Hospital leadership and nursing personnel proactively addressed the issue while not completely resolved, we are working on recruitment of NAC and RN staff. Additional short critical staffing plans are under development. RN recruitment has been positive with an experienced RN beginning in late July and NAC recruited started the 3rd week of July.
- WORKFLOW EVALUATION: Beginning in August we will be adding additional NAC hours from 1530 to 2400 daily to increase personnel available during the dinner, evening care and bedtime care of the LTC residents. This action is taken to increase patient safety and satisfaction with care, increase the availability to assistance to night NAC when transferring, turning and settling patients for sleep, and for staff safety in moving patients and satisfaction with the work environment. Lastly, we are striving to provide the night NAC an uninterrupted meal break prior to the evening shift NAC leaving, to enhance staff satisfaction and provide adequate rest break.

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 – Hand Hygiene policy revision is in progress with target completion by August. MRSA policy revision is being completed and will be in place by end of August. Antibiotic Stewardship Process - Work flow for culture reports for ED/OP and Inpatient analysis has been completed and new work flow processes have been implemented. Benchmark data for 1st Quarter reporting of AHRQ for Long Term Care has been received. Discrepancies were identified in the report concerning patient days and corrected. Preliminary results, even with discrepancies, indicate that we are under the benchmark(s) for antibiotic use in LTC. FCH had a presentation of patient with Pertussis in the Emergency Department. 3 positive cases have been identified in the community. ICP worked closely with the DOH and Dr. Artzis on prophylaxis treatment of employees and residents.
- INFORMATICS/PROTOCOLS/ORDERSETS: Order sets and forms are being revised in the system to improve documentation workflow for providers and nursing staff. Issues continue around consistency of documentation by Nursing staff and using the tools in the system to track and complete work tasks. One on one coaching and mentoring has been completed for both NAC's and licensed staff.

- **PATIENT EVENTS REPORTED IN JUNE:**

Skin Integrity and Patient Safety in all locations of FCH has been an ongoing focus. The report below indicates the events which occurred during June which were reported. In follow up on this events, staff coaching, mentoring has occurred; increased skin integrity surveillance has been implemented for patients where skin integrity has been identified as an issue; issues of documentation has been addressed such as wrong patient POLST on a chart; and the pharmacy system has been changed that when a med is placed on hold by a provider, the med is discontinued and will no longer be on the active med portion of the EMAR. The bottom report quantifies the events by area and type.

Frequency	Type of Event	Percentile of Total Pt Events	% at location ALF	% at location LSSB	% at location Acute/OBS/SSB
2	Falls	18.2%	2	0	0
1	Medication Event	9%	0	0	1
1	Delay in Care	9%	0	1	0
5	Skin Integrity	45.5%	0	5	0
1	Disruptive Behavior	9%	0	1	0
1	Miscellaneous	9%	0	0	1
11	Total	100.0%	18.2%	63.6%	18.2%

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.

- **PYXIS MEDICATION ADMINISTRATION SYSTEM:** Pyxis went live on July 10. All staff are trained to the system which is function within parameters for medication delivery. Some issues have arisen for billing which is being address by finance and CFO.
- **SKILLED SWING BED ADMISSION PROCESS-** This process is being redesigned to expedite the review by nursing, rehabilitative services, medicine and finance. The admission criteria have been review and revised. Review for acceptance includes acuity (care needs) or the patient, the specialty equipment needed (obesity equipment, wound VACs, etc.), medical management needs and ability to meet intensity of service for rehabilitation services and if we have the right level of therapy here to meet the needs of the patient (i.e. SLP/OT). Establishing a central secure fax file where referring facilities send patient packet will be accessible by all needing to review without printing files and to expedite availability to the reviewers. Anticipate this process will be in place by August 1.

Financial

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

- **PYXIS:** this will streamline the charging of items which have historically been manual such as stickered IV bags, saving staff time and reducing lost charges.
- **ECG work flow:** Working collaboratively with Radiology we are refining the ECHO/ECG cardiology testing prior to visits by Cardiologist. A clear process has been implemented, scheduling has been refined and a schedule built in Centriq to allow daily review of testing

Growth

scheduled each day by the day shift RN to assist in workflow and staff assignments. This process will be rolled out for revolving outpatient visit (i.e. long term antibiotic therapy) with scheduling to manage workflow interruptions during the day of hospital nursing staff.

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

- ST JOSEPH LONG TERM CARE UNIT CLOSING- We have recently received calls for placing of patient(s) from St Joseph due to Providence System closing the facility. This may indicate an increased need in the area for LTC beds.



TO: Ferry County Public Hospital District #1 Board of Commissioners
 FROM: JoAnn Ehlers, Clinic Manager
 Subject: Clinic Report

MEETING DATE: July 23, 2019

As of July 17, 2019

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 was on vacation from June 26th to July 8th and right before I left we moved a staff person to another department so we had Joy, the new person Josie, and Kandee to back them. (I heard that they did a good job.)
- I am paying for that vacation now: I returned to find that whooping cough or its cousin had whooped on my staff. We are still dealing with shortage and I am covering out front. That said, I am learning a LOT about the Centriq system and even some "mistakes" have been useful. I have been cramming patients in all over the place so if you see exhausted staff, there you have it. I am out front. ☺
- In the meantime, our MA student is almost finished with her externship and we are picking her up as PRN for both the MA job and the front office.

Service

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.

- Providers and Nursing Staff have been going hard at keeping complaints down. From being out front, I can tell you we are still getting some; but it feels like not as many.
- We again/still are trying something new with the calls, those that we can't grab live still go to voice mails but those that we can catch are not getting sent back, we are letting folks know that we are taking messages and we are sending by Oliq. We are being frank, if a call goes to voice mail, it may fall in a black hole. Oliq is not totally reliable either, but we have a better chance of getting the message taken care of.
- Medications loop now has two staff watching it and we are keeping up better.
- Message HUB is doing well though when we have a high volume of walk-ins things still can get pushed back a bit. We seem to catch up well.
- A new phone system is in the works!!!!
- Nursing team did some heavy duty scanning one day and caught that all up too. Scanning has not had a fully caught up day since Kandee changed jobs. This helps so much because records can be found!
- I have had more compliments on the layout of the Clinic chairs. People with walkers and wheelchairs are particularly happy with the new arrangement and some folks just let us know they like it. It has been nice. I have only just begun to improve the lobby.
- The coffee stand is going well. One day we forgot to bring out the coffee and we heard about it right away!

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.

- Dr. Kelley continues to be busy and we are filling his procedure days well.
- Dr. Garcia continues to be full on his days.
- Dr. Hsu has not been building but seems steady with a few patients at this time.
- Our visiting providers are steadily full.

Financial

- The Mammo bus will be here on the 12th of September.
- Kande in Referrals/Auths has become a real expert in the Mission Act (new name for what was Veterans Choice) and we are actually getting some authorizations through.

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

- Volume from last year to this year so far is up by a little over 100 patients per month.
- We still have those days of many walk-ins but we are doing well with this so far. I continue to “think” on how we can improve this and all ideas are welcome. Those that call in are given a time as much as possible.

Growth

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

- As soon as I have staff back Sport Physicals and Flu shots will be settled in for dates.
- The Dental Van project is growing by itself now. I have more folks joining in. I am not full on the dental van appointment schedule yet so if you know anyone send them my way!! Ads should be going out soon for this. The date is Friday, August 12th - 9 am to 3 pm.
- I still have vision certificates. These will be there at the Van event as well.
- I really will get classes going.
- I do have a pretty steady stream of folks coming in for help too and that has been nice. At least a few per week and that seems good for the size of this area.

I want to share here that there have been more compliments all around from patients and though we do still get complaints; I did not hear the compliments when I first arrived. I even had one man stop just to tell us “Thank you” out front because he did not think we hear it enough.

Thanks to all of you for the great support. Mr. Iverson, you will be missed!

Respectfully submitted, JoAnn Ehlers



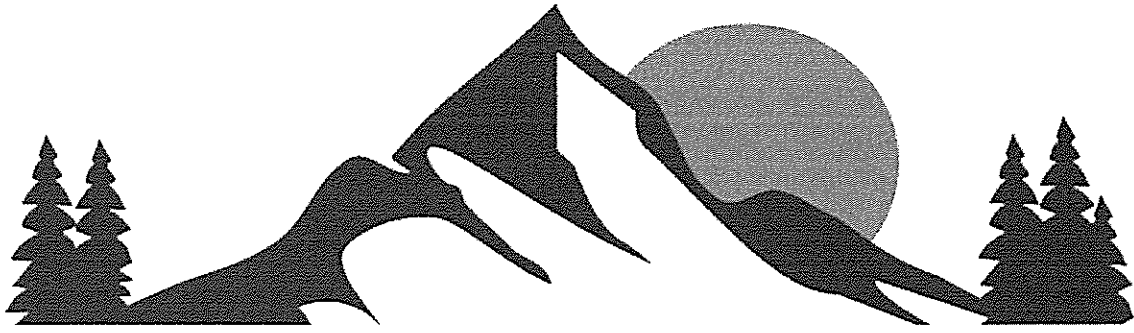
TO: Ferry County Public Hospital District #1 Board of Commissioners
 FROM: Brant Truman
 Subject: COO/CFO Report

MEETING DATE: July 23, 2019

As of July 8, 2019

<p>People</p>	<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"> • Jeanette Phillips transitioned from Clinic to Rehab department. • Occupational Therapist, LCSW among positions we are actively recruiting for. • Able to attend Chelan conference and learn a bunch from seminars and cohorts in similar positions. • 25% increase in PTO use this year.
<p>Quality</p>	<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"> • Registration committee continues to work thru improvements around registration. • Charity Care policy change coming shortly.
<p>Service</p>	<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"> • Pyxis go live the week of the 8th of July. • Work group formed to start Cardiac Monitoring System Improvement. • Plexi Windows are currently being installed this week, should help with room temperatures.
<p>Financial</p>	<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"> • Site visit for 2018 Financial Statement Audit July 24th and 25th • Total Cash for the month of June \$1.247 million • VA continues to cause issues related to adjustment in services. • \$1.85 Million in June Gross Revenue. • Paid additional \$290k towards debt principal year to date, continue to be aggressive with approach of paying debt off. • EMR incentive payment of \$134.5k came June. • Working on RHC Reconciliation for 2014 thru 2017.
<p>Growth</p>	<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"> • Looking at having MRI bus around every day of the month. • Continue to explore behavioral health options to help district with increased options local.

Ferry County Public Hospital District #1 Financial Statements
Month Ending June 30, 2019



Ferry County Health

Ferry County Public Hospital District No. 1
 doing business as
 Ferry County Memorial Hospital
Combined Income Statement: Hospital and Klondike Hills
 Year to Date June 30, 2019

	Q1	April	May	June	% of Gross Rev	YTD	% of Gross Rev
Operating revenue:							
Gross patient service revenue	4,806,826	1,637,580	1,704,795	1,902,976		10,052,178	
Contractual allowances and provisions for uncollectible accounts	(1,625,177)	(286,113)	(653,887)	(733,637)	-39%	(3,298,813)	-33%
Patient service revenue - (Net contractual allow.:	\$ 3,181,649	\$ 1,351,468	\$ 1,050,909	\$ 1,169,340	61%	\$ 6,753,365	67%
Bad debt expense	(123,940)	(45,439)	(26,154)	(15,418)	-1%	(210,951)	-2%
Other operating revenue	218,983	65,517	74,196	216,338	11%	575,035	6%
Total operating revenue	3,276,692	1,371,546	1,098,951	1,370,260	72%	7,117,448	71%
Operating expenses:							
Salaries and wages	1,478,978	513,289	473,215	480,660	25%	2,946,142	29%
Employee benefits	385,956	135,597	134,226	136,971	7%	792,749	8%
Professional fees	359,326	167,334	158,004	122,040	6%	806,704	8%
Supplies	236,119	72,511	103,516	86,704	5%	498,850	5%
Purchased services - Utilities	81,195	22,701	16,143	17,852	1%	137,891	1%
Purchased services - Other	221,411	68,381	126,919	24,986	1%	441,708	4%
Insurance	20,429	7,454	1,934	1,934	0%	31,750	0%
Other	77,876	23,422	35,499	19,840	1%	156,637	2%
Rent	32,125	10,708	11,258	11,357	1%	65,449	1%
Depreciation	145,926	71,833	53,896	54,045	3%	325,699	3%
Total operating expenses	3,039,341	1,093,241	1,114,608	956,389	50%	6,203,580	62%
Gain (loss) from operations	237,351	278,305	(15,657)	413,871	22%	913,869	9%
Nonoperating revenues (expenses):							
Property taxes	68,497	23,200	29,620	22,322	1%	143,640	1%
Interest earnings	16,114	5,754	5,779	6,213	0%	33,861	0%
Interest expense	(58,821)	(17,957)	(18,975)	(16,707)	-1%	(112,461)	-1%
Grants and donations	19,449	3,745	-	9,730	1%	32,924	0%
Other	59,921	17,104	24,678	16,277	1%	117,980	1%
Total nonoperating revenues (expenses) - Net	105,160	31,846	41,103	37,835	2%	215,944	2%
Increase (decrease) in net position	\$ 342,511	\$ 310,151	\$ 25,446	\$ 451,706	24%	\$ 1,129,813	11%

Ferry County Public Hospital District No. 1
 doing business as
 Ferry County Memorial Hospital

Hospital Income Statement
 Year to Date June 30, 2019

	Q1	April	May	June	YTD
Operating revenue:					
Gross patient service revenue	4,652,157	1,590,487	1,655,361	1,854,137	9,752,141
Contractual allowances and provisions for uncollectible accou	(1,625,177)	(286,113)	(653,887)	(737,822)	(3,302,999)
Patient service revenue - (Net contractual allowances)	3,026,980	\$ 1,304,374	\$ 1,001,474	\$ 1,116,315	\$ 6,449,143
Bad debt expense	(123,940)	(45,439)	(26,154)	(15,418)	(210,951)
Other operating revenue	218,956	65,508	74,187	216,311	574,963
Total operating revenue	3,121,996	1,324,443	1,049,507	1,317,208	6,813,154
Operating expenses:					
Salaries and wages	1,375,562	484,352	438,937	451,368	2,750,219
Employee benefits	355,356	125,792	124,313	127,235	732,696
Professional fees	359,326	167,334	158,004	122,040	806,704
Supplies	230,665	70,152	101,907	84,800	487,523
Purchased services - Utilities	77,955	21,487	15,080	16,508	131,029
Purchased services - Other	201,257	61,138	119,015	17,965	399,376
Insurance	20,429	7,454	1,934	1,934	31,750
Other	77,515	23,313	35,414	19,388	155,630
Rent	-	-	550	649	1,199
Depreciation	145,926	71,833	53,896	54,045	325,699
Total operating expenses	2,843,990	1,032,854	1,049,049	895,932	5,821,825
Gain (loss) from operations	278,006	291,590	458	421,276	991,329
Nonoperating revenues (expenses):					
Property taxes	68,497	23,200	29,620	22,322	143,640
Interest earnings	15,821	5,650	5,678	6,110	33,260
Interest expense	(58,821)	(17,957)	(18,975)	(16,707)	(112,461)
Grants and donations	19,449	3,745	-	9,730	32,924
Other	59,921	17,104	24,678	16,277	117,980
Total nonoperating revenues (expenses) - Net	104,868	31,742	41,001	37,732	215,343
Increase (decrease) in net position	\$ 382,873	\$ 323,332	\$ 41,460	\$ 459,008	\$ 1,206,672

Ferry County Public Hospital District No. 1
 doing business as
 Ferry County Memorial Hospital

Klondike Hills Income Statement
 Year to Date June 30, 2019

	Q1	April	May	June	YTD
Operating revenue:					
Patient service revenue - (Net contractual allowances)	\$ 154,669	\$ 47,094	\$ 49,435	\$ 53,025	\$ 304,222
Other Operating Revenue	27	9	9	27	72
Total operating revenue	154,696	47,103	49,444	53,052	304,294
Operating expenses:					
Salaries and wages	103,416	28,937	34,278	29,292	195,923
Employee benefits	30,600	9,805	9,912	9,735	60,053
Supplies	5,454	2,359	1,609	1,905	11,327
Purchased services - Utilities	3,240	1,214	1,063	1,344	6,861
Purchased services - Other	20,154	7,254	7,904	7,021	42,332
Other	362	109	84	452	1,007
Rent	32,125	10,708	10,708	10,708	64,250
Total operating expenses	195,350	60,387	65,559	60,457	381,754
Gain (loss) from operations	(40,655)	(13,285)	(16,115)	(7,405)	(77,460)
Nonoperating revenues (expenses):					
Interest earnings	293	104	101	103	601
Total nonoperating revenues (expenses) - Net	293	104	101	103	601
Increase (decrease) in net position	\$ (40,362)	\$ (13,181)	\$ (16,014)	\$ (7,302)	\$ (76,859)

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 June 30, 2019

<i>Assets</i>	YTD Balance Hospital	YTD Balances Klondike Hills	Eliminations	YTD Balances Totals
Current assets:				
Cash and cash equivalents	\$ 3,729,329	\$ 102,307	\$ -	\$ 3,831,636
Patient trust	500	-	-	500.00
Receivables:				-
Patient AR - Net	2,051,688	46,569	-	2,098,256.49
Gross AR	3,200,884	46,569	-	3,247,452.78
Contractual allowance	(1,149,196)	-	-	(1,149,196.29)
Taxes	125,565	-	-	125,564.55
Estimated third-party payor settlements	-	-	-	-
Interdivision receivables	1,462,181	-	(1,462,181)	-
Other	82,205	-	-	82,204.82
Inventories	157,784	-	-	157,784.20
Prepaid expenses	34,204	-	-	34,204.06
Total current assets	7,643,456	148,876	(1,462,181)	6,330,150
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
Depreciable capital assets - Net of accumulated deprec	5,656,915	-	-	5,656,915
Total capital assets	5,684,197	-	-	5,684,197
TOTAL ASSETS	\$ 13,327,653	\$ 148,876	\$ (1,462,181)	\$ 12,014,348

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 June 30, 2019

<i>Liabilities and Net Position</i>	YTD Balances Hospital	YTD Balances Klondike Hills	Eliminations	YTD Balances Totals
Current liabilities:				
Current maturities - Long term debt		\$ -	\$ -	\$ -
Current maturities - Capital lease obligations		-	-	-
Accounts payable	142,578	(3,522)	-	139,056
Warrants payable	134,528	6,484	-	141,012
Patient trust	500	-	-	500
Payroll and related expenses	243,631	15,905	-	259,536
Accrued vacation	243,106	31,610	-	274,717
Unearned tax revenue	133,797.30	-	-	133,797
Accrued interest payable	89,745.02	-	-	89,745
Estimated third-party payor settlements	253,653	-	-	253,653
Interdivision payables	-	1,462,181	(1,462,181)	-
Total current liabilities	1,241,538	1,512,659	(1,462,181)	1,292,016
Noncurrent liabilities:				
Long term debt - Less current maturities	4,900,004	-	-	4,900,004
Capital lease obligations - Less current portion	175,094	-	-	175,094
Total noncurrent liabilities	5,075,098	-	-	5,075,098
Total liabilities	6,316,636	1,512,659	(1,462,181)	6,367,114
Net position:				
Invested in capital assets	519,354	-	-	519,354
Restricted expendables	-	-	-	-
Unrestricted	6,491,663	(1,363,783)	-	5,127,879
Total net position	7,011,017	(1,363,783)	-	5,647,234
TOTAL LIABILITIES AND NET POSITION	\$ 13,327,653	\$ 148,876	\$ (1,462,181)	\$ 12,014,348



TO: Ferry County Public Hospital District #1 Board of Commissioners
 FROM: Aaron Edwards, CEO
 Subject: CEO Report

MEETING DATE: July 23, 2019

As of July 16, 2019

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"> • Have had several interviews with potential CNO candidates and should have some face to face visits shortly. • Staffing shortages and increased patient load (and acuity) in the hospital has made for some challenging days. Our nurses have done a great job to step up to help each other out. HR, admin, nursing working together to come up with creative staffing options. Talking about the need to figure out how to <u>carefully</u> grow staff to meet increased demand across the District. • Continue to search for an Occupational Therapist, LCSW, Activities Director, and additional clinic front desk staff.
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"> • Pyxis up and rolling. • Visited with a vendor for help with employee training at hire on customer service expectations and retraining for staff. More on that later. • Patient quality surveying to begin again shortly (NRC almost done with set up in order to have a clean and successful launch). • A UW DNP student is currently shadowing Mari and Jane, first year med student to come soon, and Stanford Medicine is interested in possible placement of a med student. • Additional AED's placed throughout the facility (older AED's updated). • Beginning to look at options for new cardiac monitors. • Continue to talk to BHT about a possible August adoption of Medicaid reform initiatives. • Attended what I think was a productive meeting with nursing, med staff, and rehab on how we work to improve swing.
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"> • Attended a meeting at the PUD where AT&T spoke about FirstNet and services offered to first responders. Also good to watch and participate in a PUD meeting. • Attended a Hospital Foundation Board meeting where bylaw adjustments were discussed which would remove the hospital Board ability to place Board members.
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"> • Record gross billing in June @ \$1.8M (big increases in ED, Pharmacy, Inpatient, and Radiology). • Work will start shortly on starting internal (hospital) 340B. • A surprise payable from Noridian (CMS) should be coming as a result of a desk review finding an underpayment on the 2017 cost report (estimates are between \$100-300K at this point).
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>

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- Will be participating in a clinical trial feasibility study with the UW and Bright Heart Health which will bring tele MAT for both the ED and Clinic.
 - Looking feasible to bring MRI to the District 24/7 (rather than just Fridays).
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