Board of Commissioners

Meeting called by: Jerry Kennedy  
Type of meeting: Regular Board meeting  
Note taker: Leha Neilsen, Executive Support Coordinator  
Timekeeper: Leha Neilsen  

Board Members: Jerry Kennedy, Commissioner and Board Chair | Commissioner Kris Hare, Commissioner and Board Secretary | Brad Parrish, Commissioner | Geary Oliver, Commissioner | Clea Pryor, Commissioner |  

Please Read: Previous meeting minutes pg. 3 - 6

Agenda Items

<table>
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<tr>
<th>Topic</th>
<th>Presenter</th>
<th>Time allotted</th>
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<tr>
<td>☐ Call to Order</td>
<td>Jerry Kennedy</td>
<td>2 mins</td>
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<tr>
<td>☐ Introductions and Announcements</td>
<td>Jerry Kennedy</td>
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<tr>
<td>☐ Mission, Vision and Values</td>
<td>Board of Commissioners</td>
<td>5 mins</td>
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<tr>
<td>☐ Approve previous meeting minutes</td>
<td>Motion requested</td>
<td>2 mins</td>
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<tr>
<td></td>
<td>May 2023 meeting</td>
<td></td>
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<tr>
<td>☐ Public Comments</td>
<td>Ramona Hicks</td>
<td>5 mins</td>
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<tr>
<td>☐ Chief Executive Officer report</td>
<td>Ramona Hicks</td>
<td>20 mins</td>
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<tr>
<td>☐ Chief Financial Officer report</td>
<td>Kelly Hughes</td>
<td>20 mins</td>
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</table>
☐ Financial Resolutions

   Resolution 1236 – Charity Care April 2023
   Resolution 1237 – Bad Debt April 2023
   Resolution 1238 – Payment of Warrants April 2023

☐ Chief Medical Officer report

☐ Board Committee Reports

☐ Next Meeting date and time

   July 31st @ 6:00pm

☐ Executive Session:

   RCW 42.30.110(1)(g)

☐ Credentialing

   Approval of June Credentialing

☐ Adjournment
## Agenda Details

### Drafted previous meeting minutes | May 26, 2023

**5 MINS**  
**APPROVAL OF MINUTES**  
**BOARD OF COMMISSIONERS**

<table>
<thead>
<tr>
<th>Discussion</th>
<th>The 2023 April Board minutes were distributed prior to the meeting.</th>
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<tr>
<td>Conclusions</td>
<td>Commissioner Kris Hare moved for approval of minutes that were presented. The motion was seconded by Commissioner Brad Parrish. Motion carried.</td>
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<table>
<thead>
<tr>
<th>Action items</th>
<th>Person responsible</th>
<th>Motion carried</th>
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<tbody>
<tr>
<td>Approved previous meeting minutes</td>
<td>Leha Neilsen</td>
<td>Unanimously</td>
</tr>
</tbody>
</table>

**25 MINS**  
**2022 DZA AUDIT**  
**TOM DINGUS**

| DISCUSSION | Audited financials and reports were distributed prior to the meeting  
| o The 2022 audit was presented and discussed, CMC saw a loss in 2022. |
| CONCLUSIONS |
| ACTION ITEMS | PERSON RESPONSIBLE | MOTION CARRIED |
| • DZA Audit | Kelly Hughes |

**10MINS**  
**CEO UPDATE**  
**RAMONA HICKS**

| Discussion | The walk-in clinic has returned to the main building, patients and staff are happy. Our CMC cafe is open to the public.  
| The search for a lab manager continues, we have some interviews scheduled for this week.  
| We continue to look for an OB FP provider  
| We have reopened the cafe to the community members of the community have returned and are very happy that we are here for them.  
| o We have a brand new hot case in that department.  
| Rural Advocacy, legislative updates have been in our favor lately, due to the efforts from WSHA  
| The lab has passed their follow up survey.  
| Moving security in-house, we have parted ways with the company we had, this department will go under Kraig.  
| Full day Board workshop - looking at mid-late September for a date, the first week in Sept or 18th or 19th Sept. [no final decisions were made.]  
| Restructure of the organization is going very well, Ramona gave kudos to the new senior directors for stepping up and working together to mitigate issues.  
| Governance Policies 1.0 and 1.1 were distributed prior to the meeting. |

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Statement of Confidentiality: Quality Assurance data, records, and knowledge, including minutes, collected for or by individuals or committees, or committees assigned peer/professional review functions are confidential, not public records, and not available for court subpoena in accordance with RCW sections 70.41.200, 43.70.510, 4.24.250, 74.42.640, 18.20.390, 70.56.020, and 70.56.040
Discussion

- Financials were distributed prior to the meeting.
  - CMC saw a gain in April
    - April 2023 Gain $155,675
    - Year to Date (YTD) Gain: $920,989.
  - Cash flow progress:
    - Deposited from Operations: $3,188,709
    - Paid out for Operations: ($2,870,852)
    - Operational Cash Gain/(Loss): $317,857
- Financial Metrics
  - Month End Total Cash & Investments: $7,374,044
  - AR - 60
  - Days of Cash on Hand 75
  - Gross Patient Rev – 5,082,411
  - Operating Rev: $3,018,535
  - Total Operating Expense: $2,857,909
- 3rd party payables
  - Medicaid Liability Balance $1,230,336
  - 2018 DSH Payable $571,000 (this will be paid in June) 2018 Cost Report Final Payable $92,410 (paid in May)
  - 2022 Medicaid Payable $580,000 (overpaid based on 2020 costs) (payment plan to be set up)
  - Medicare: Liability Balance is $301,900 (Receivable for 2022 Cost Report)
  - Financial Reports for 2022 to be sent to HUD May 30, 2023
  - 2022 Annual Report submitted to State Auditor Office
- Governance Policy 1.4 is in compliance
- Mesirow reports - none of our funds are on the watch list

RESOLUTIONS

- Financial Resolutions:
  - Resolution 1229 – Petty Cash Locations-We no longer need a location for the walk-in clinic in the Medical Arts Conference Room.
  - Resolution 1230 – Payment of Warrants April 2023 – Accounts Payable Warrants #606110702 through #60611072 totaling $1,441,028.58 and Payroll Warrants totaling $996,338.20 for April 2023.
  - Resolution 1231 – Charity Care – April 2023 - Commissioners were provided Charity Care cases in the amount of $25,390.13 identified in the attached listings for the month of April 2023
  - Resolution 1232 – Bad Debt April 2023– Commissioners were provided with Bad Debts in the amount of $107,913.50 for April.
  - Resolution 1233 – Budget amendment requesting an additional $7,500 for equipment repairs
  - Resolution 1234 – Budget amendment requesting an additional $35,000 for a service agreement between Coulee Medical and Savista (third party utilization review company)
  - Resolution 1235 – Budget amendment requesting an additional $40,000 to continue tele-stroke services with Providence

CONCLUSIONS

Commissioner Clea Pryor moved for approval on all financial resolutions. The motion was seconded by Commissioner Kris Hare, Motion carried.

ACTION ITEMS

PERSON RESPONSIBLE

MOTION CARRIED

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Leha Neilsen/Shawn Groh

2 MINS

CMO UPDATE

DR. HSIEH

DISCUSSION

- The Medical Bylaws were approved in the April meeting work continues on the rules and regulation piece.
- Recruitment:
  - We are working to hire more providers and mid-levels
- Clinic:
  - Sarah Damino is helping us with Clinic in July and August - she is applying for OB fellowship this fall, our goal is to keep her here.
  - Working to standardized work flows and no show rates
  - We are starting to see an improvement in morale - patient satisfaction is also trending up moving the walk-in clinic has been extremely beneficial
- Hospital:
  - Dr. Hsieh thanked the board for approving the third-party UR company
- Surg/Wound/Outpatient:
  - The team traveled to Dayton to see their hyperbaric chamber and how they have gone live with.
  - The transportation program at Dayton is great and is its own functioning department - We would like to look into this as an option for CMC.
  - Dayton has a great marketing and grant writing program.
- Moving forward with Forgut program, starting the middle of next month.
- Looking to bring Orthopedics back to CMC
- We have recruited a per diem CRNA and OB Provider
- ER:
  - Tele-stroke with Providence is a great and the medical staff feel this program is extremely beneficial
  - Josh Mayfield - He had a great experience going through our on boarding process.
- Dr. Hsieh welcomes a Board member to attend MedStaff - the 1st Wednesday at 0900 via zoom

CONCLUSIONS

ACTION ITEMS

PERSON RESPONSIBLE

MOTION CARRIED

☐

5 MINS

NEXT MEETING DATE AND TIME

BOARD OF COMMISSIONERS

DISCUSSION

June 26th 2023 @ 6:00pm

CONCLUSIONS

ACTION ITEMS

PERSON RESPONSIBLE

Leha Neilsen

MOTION CARRIED

☐
Commissioner Clea Pryor made a motion to approve the credentialing as presented. The motion was seconded by Commissioner Kris Hare. Motion carried.

Credentialing privileges were approved for the following providers:
- Christina Mora, MD
- Norel Smith, CRNA
- Karen Rimpler, ARNP
- Hanbing (Hilary) Wang
- Sarah Dimino, MD

Approval of Credentialing was approved by Credentialing Specialist. 

Meeting was adjourned at 7:25PM

Agenda Details: [short overview of agenda item – Approval/motion requested]

Special notes and additional information

**COULEE MEDICAL CENTER**

DOUGLAS, GRANT, LINCOLN, & OKANOGAN COUNTIES PUBLIC HOSPITAL DISTRICT #6

**Vision**

To be an organization where all people are equal and where the complete well-being of those we serve is our ultimate objective.

**Mission**

To inspire excellence, as we care for our patients, honor our profession and serve our community.
Values

- **Integrity**
  
  We serve with integrity by doing what is right, regardless of the difficulty encountered.

- **Compassion**
  
  We offer comfort and security to our patients, families and community by providing hope through heartfelt concern.

- **Respect**
  
  We respect all cultures, beliefs and opinions. We uphold a positive attitude of respect and courtesy.

- **Competence**
  
  We strive to be life-long seekers of wisdom and clinical expertise to ensure our patients receive the highest quality of care. We encourage and support education and the professional growth of staff.

- **Professionalism**
  
  We practice the art of professionalism that embodies appearance, action, communication, competence and respect.

- **Financial Viability**
  
  We strive for balance in providing efficient, innovative, quality care by being responsible stewards of our resources.
### Staff Development Goal

To develop a well-trained and competent workforce, who feel prepared and ready to perform their duties in a safe and respectful atmosphere.

1a: Customer service – build upon previous training.
1b: Training and education – develop staff to their fullest potential.
   1b1: Annual education and all required trainings
   1b2: Orientation
   1b3: Customized for professional growth

### Safety Goal

To enhance the overall patient and employee experience in a safe and effective manner, while striving for continual quality improvement.

2a: Technology Solutions – Assess, improve and sustain safety and quality of Electronic Health Record and all other technological tools and devices.
2b: Quality – Assess, improve and sustain all quality initiatives throughout the organization.
2c: De-escalation training – Ensuring a safe environment for patients and employees.
2d: Facility security – Assess, improve and sustain security measures.

### Employee Experience Goal

To create an environment of respect and recognition of every employee’s role in the organization to produce a culture of engagement and satisfaction.

3a: Employee empowerment – Hearing your voice and supporting employee councils.
3b: Retention – Valuing our current workforce through boosting morale, motivation and recognition.
   3b1: Encourage and provide opportunities for growth
3c: Recruitment – Carefully evaluate need and fit for positions.
3d: Space – Identify each department’s immediate and future needs.
   3d1: New building expansion to enhance patient care services – Identify funding opportunities and meet financial benchmarks.

### Patient Retention and Recruitment Goal

To meet and exceed the wellness needs of those we care for to ensure the long term viability of our organization.

4a: Patient and patient family experience – Getting it right the first time, from patient presentation to discharge and beyond.
   4a1: Encourage and embrace patient feedback to learn, improve and grow.
4b: Service lines – Enhance current services while exploring new opportunities.
4c: Marketing – Tell our story and grow our services.