

KITTITAS COUNTY PUBLIC HOSPITAL DISTRICT No. 1
BOARD OF COMMISSIONERS' REGULAR MEETING
KVH Conference Room A & B - 5:00 p.m.

May 23, 2019

1. Call Regular Meeting to Order

2. Approval of Agenda **

(Items to be pulled from the Consent Agenda) **(1-2)**

3. Consent Agenda **

- a. Minutes of Board Meetings: April 23, 2019, April 25, 2019, and May 3, 2019 **(3-9)**
- b. Approval of Checks **(10)**
- c. Minutes: Finance Committee **(11-12)**

4. Presentations:

- a. Tom Dingus, Dingus, Zarecor & Associates: Financial Audit & Cost Report
- b. Dr. Jonathan Hibbs, Hospitalist & Anna Scarlet, RN, Quality & Risk Management: Sepsis Presentation
- c. Tanner Scheid, Clinic Manager: Total Joint Improvement Work

5. Public Comment and Announcements

6. Reports and Dashboards

- a. Quality – Mande Olsen, Director of Quality Improvement **(13-16)**
- b. Chief Executive Officer – Julie Petersen **(17-18)**
 - i. Motion to accept apparent low bid for the Medical Arts Center project **
- c. Medical Staff
 - i. Chief of Staff, Timothy O'Brien MD
 - 1. Medical Executive Committee Recommendations for Appointment and Re-Appointment ** **(19)**
 - ii. Chief Medical Officer, Kevin Martin MD **(20)**
- d. Finance – Chief Financial Officer - Scott Olander
 - i. Operations Report **(21-28)**
 - ii. Capital Expenditure Request: Sidewalk and Concrete Repair ** **(29)**
- e. Operations **(30-34)**
 - i. Vicky Machorro, Chief Nursing Officer
 - ii. Rhonda Holden, Chief Ancillary Officer
 - iii. Carrie Barr, Chief of Clinic Operations
- f. Community Relations Report – Michele Wurl, Director of Communications & Marketing **(35)**

7. Education and Board Reports



KITTITAS COUNTY PUBLIC HOSPITAL DISTRICT No. 1
BOARD OF COMMISSIONERS' REGULAR MEETING
KVH Conference Room A & B - 5:00 p.m.

8. Old Business

9. New Business

10. Executive Session

- a. Recess into Executive Session, Personnel & Real Estate - RCW 42.30.110 (b)(g)
- b. Convene to Open Session

11. Adjournment

Future Meetings

- June 23, 2019 Special Meeting
- June 27, 2019, Regular Meeting

Future Agenda Items



KITTITAS COUNTY PUBLIC HOSPITAL DISTRICT No. 1

BOARD OF COMMISSIONERS' SPECIAL MEETING

Medical Art Center (MAC)

100 East Jackson Avenue, Ellensburg, WA 98926

April 23, 2019

BOARD MEMBERS PRESENT: Matt Altman, Bob Davis, Erica Libenow, Liahna Armstrong, Roy Savoian

KVH STAFF PRESENT: Julie Petersen, Scott Olander, Mandee Olsen, Kevin Martin, Michele Wurl, Ron Urlacher, Vicky Machorro, Morgan Anderson, Carrie Youngblood, Carrie Barr, Jeff Yamada, Lisa Potter, John Bartlett

MEDICAL STAFF PRESENT: Dr. John Merrill-Steskal, Dr. Mark Larson, Dr. Vanessa Wright, Dr., Meghan Young

GUEST: Brian Andringa, Architect

The special meeting was called to order at 6:00 p.m. President Altman announced that the purpose of the special meeting was to provide the Board an opportunity to walk through the Medical Arts Center (MAC) and review the proposals in preparation for Thursday's regular Board meeting. Julie Petersen stated that tonight the team will be taken through each clinic site within the building and shown the design components. On Thursday, administration will ask the Board for a Resolution authorizing the project to go to public bid.

Carrie Barr started the tour by explaining rapid access and the need to level load schedules to accommodate all aspects of the new building from the breakroom to parking. The group toured several of the spaces in the MAC and were informed about plans for renovating the building.

The group then reconvened and watched a design video that was prepared by the architects of the third-floor space.

President Altman invited the public to share insights and concerns about the project and the process. Carrie Barr stated that the transition for Women's Health went very smoothly and has helped gain trust from the staff. Dr. Larson commented that there is some angst in regard to transportation of patients between the MAC and the hospital, but otherwise he and his colleagues think it will be great. Dr. Martin commented that they do not have the opportunity to grow in their current space. Space has become the limiting factor in recruiting primary care to our market.

Scott Olander stated that the anticipated net overall cost represents a significant savings when compared with building a new medical office building. Olander went over the funding sources for the project and reminded the Board that the money has already been borrowed and is sitting in a reserve account. He explained that tax exempt funds must be spent on a qualifying capital project within a specific time period. Commissioner Davis questioned the timing in regard to dropping our days of cash on hand. Olander commented that he feels we are in a pretty good financial position to do this now.

Ron Urlacher went over the timeline for the bid and move in date. Urlacher explained that his priority is to have a complete and comprehensive set of bid documents. He believes this will minimize costs and reduce change requests.

With no further business and no action taken, the meeting was adjourned at 7:45 p.m.

Respectfully submitted,

Mandy Weed/Erica Libenow
Executive Assistant/Secretary, Board of Commissioners



KITTITAS COUNTY PUBLIC HOSPITAL DISTRICT No. 1

BOARD OF COMMISSIONERS' REGULAR MEETING

KVH Conference Room A & B

April 25, 2019

BOARD MEMBERS PRESENT: Matt Altman, Bob Davis, Erica Libenow, Liahna Armstrong, Roy Savoian

KVH STAFF PRESENT: Julie Petersen, Scott Olander, Mandee Olsen, Vicky Machorro, Rhonda Holden, Lisa Potter, Jeff Yamada, Dr. Kevin Martin, Carrie Youngblood, Ron Urlacher, and Jason Adler

MEDICAL STAFF PRESENT: Dr. Timothy O'Brien

1. At 5:00 p.m., President Matt Altman called the regular meeting to order.

2. **Approval of Agenda:**

ACTION: On motion of Roy Savoian and second of Bob Davis, the Board members unanimously approved the agenda and agreed to delay the staff development presentation.

3. **Consent Agenda:**

ACTION: On motion of Erica Libenow and second of Liahna Armstrong, the Board members unanimously approved the consent agenda.

4. **Presentations:**

Mandee Olsen presented Safe Catch Awards for the fourth quarter of 2018 as follows: Clinical Award was presented to Veronica Herrera, Clinical Assistant, Family Medicine Ellensburg; Non-Clinical Award was presented to Paige Caton, Patient Service Representative, Family Medicine Cle Elum.

Gayl Curtiss, FISH Board Member of the Friends In Service to Humanity (FISH) Food Bank went over the history, mission, and programs offered by FISH. Julie stated that FISH is an important part of the Kittitas County Health Network (KCHN) and explained how it furthers KVH's aim of improving population health. Gayl requested a letter of support from the Board to Senator Warnick for state appropriations toward a new building. The Board agreed to sign letter of support to send to Senator Warnick.

5. **Public Comment/Announcements:**

None.

6. **Reports and Dashboards:**

The Board members reviewed the QI dashboards and summary with Mandee Olsen. Olsen stated that there was a presentation at the QI meeting on total joints that will also be presented at a future Board meeting.

The Board members reviewed the CEO report with Julie Petersen. Petersen stated that it has now been three years since TeamHealth exited the Emergency Department. The ED provider contracts are currently being reviewed. Petersen stated that she sent an email this morning to all users regarding the

special Board meeting that was held on Tuesday and she has received a lot of positive feedback from staff. She also stated that KVH will host an open house for staff next week at the MAC. Petersen stated that the AHA has reached out to President Altman and requested that he apply to join the Governance Committee. President Altman stated that he really enjoyed the congressional visits while at his recent AHA annual meeting and went over some of his takeaways from the meeting.

President Altman introduced Resolution 19-04, which was discussed at the special Board meeting on April 23. He asked if there were any further comments or questions regarding the MAC project or the resolution.

ACTION: On motion of Roy Savoian and second of Liahna Armstrong, the Board members unanimously approved Resolution 19-04 authorizing a Public Works project for the MAC in the amount of \$5,350,000.

ACTION: On motion of Erica Libenow and second of Roy Savoian, the Board members unanimously approved authorizing administration to take any and all actions necessary to execute the Medical Arts Center project as presented and budgeted.

Commissioner Davis stated it is a good investment for our community and that it will help us develop programs that we couldn't without the new space. Commissioner Libenow added she agreed that it is furthering KVH's mission.

Chief of Staff Dr. Timothy O'Brien presented the MEC's recommendations for initial appointments and reappointments to the Board. President Altman requested that applications be discussed in Executive Session, with action taken in public session after that.

The Board members reviewed the Chief Medical Officer report with Dr. Kevin Martin.

Scott Olander reported on KVH's financial performance for March. Olander stated that we had a pretty good month and ended the month with overall revenue slightly above budget.

ACTION: On motion of Liahna Armstrong and second of Erica Libenow, the Board members approved the capital expenditure request for the Eye Microscope and Phacoemulsification Machine for Cataract Surgery. Commissioner Davis recused himself from the vote due to a potential conflict of interest.

The Board members reviewed the operations report with Vicky Machorro and Rhonda Holden. Holden stated that the Home Health and Hospice Survey went well and the administration should receive a written report by next Friday.

The Board members reviewed the Community Relations report.

7. Education and Board Reports:

ACTION: On motion of Liahna Armstrong and second of Erica Libenow, the Board members unanimously approved the Regular Meeting Process policy as amended.

ACTION: On motion of Erica Libenow and second of Liahna Armstrong, the Board members unanimously approved the Commissioner Pledge Code of Conduct as amended.

President Altman stated that the Board also needs to review the bylaws. Commissioners Armstrong and Libenow agreed to review the bylaws.

President Altman stated that he covered the AHA meeting under the CEO report out.

8. Old Business:

None.

9. New Business:

None.

10. Executive Session:

At 7:15 pm, President Altman announced that there would be a 10-minute recess followed by a 50-minute executive session regarding personnel and real estate. RCW 42.30.110(b)(g). Action was anticipated.

At 8:15 pm, the meeting was reconvened into open session.

ACTION: On motion of Erica Libenow and second of Bob Davis, the Board members unanimously approved the initial appointment for Dr. Jonathan Fish, Dr. Stephen Atkinson, Dr. Michael Breen, Dr. Jessika Dingwall, Dr. Jarrett Kuo, Dr. David Madden, Dr. Joseph Morrell, Dr. Zandra Nocera, Dr. Justin Pham, Dr. Christin Reisenauer, Dr. Ripp Smith, Dr. Lon Welch, Carissa Dahl, ARNP and reappointments for Dr. Gary Bos, Dr. Jonathan Hibbs, Dr. Mark Larson, Dr. Faisal Ahmed, Dr. Susan Oldenkamp, Aaron Long, ARNP, Mary Nouwens, ARNP as recommended by the Medical Executive Committee.

11. Adjournment:

With no further action and business, the meeting was adjourned at 8:16 pm.

CONCLUSIONS:

1. Motion passed to approve the board agenda.
2. Motion passed to approve the consent agenda.
3. Motion passed approving Resolution 19-04 authorizing a Public Works project for the MAC.
4. Motion passed authorizing administration to take any and all actions necessary to execute the Medical Arts Center project as presented and budgeted.
5. Motion passed approving the capital expenditure request for the Eye Microscope and Phacoemulsification Machine for Cataract Surgery
6. Motion passed approving the Regular Meeting Process policy as amended.
7. Motion passed approving the Commissioner Pledge Code of Conduct as amended.
8. Motions passed to approve the initial appointments and reappointments as recommended by the Medical Executive Committee.

Respectfully submitted,

Mandy Weed/Erica Libenow
Executive Assistant, Board of Commissioners



KITTITAS COUNTY PUBLIC HOSPITAL DISTRICT No. 1

BOARD OF COMMISSIONERS' SPECIAL MEETING

KVH Café Conference Room

May 3, 2019

BOARD MEMBERS PRESENT: Matt Altman, Bob Davis, Erica Libenow, Liahna Armstrong, Roy Savoian

KVH STAFF PRESENT: Julie Petersen, Scott Olander, Jason Adler, Lisa Potter

The special meeting was called to order at 3:30 p.m. President Altman announced that the purpose of the special meeting was to conduct a Board Retreat regarding finances.

With no further business and no action taken, the meeting was adjourned at 7:45 p.m.

Respectfully submitted,

Mandy Weed/Erica Libenow
Executive Assistant/Secretary, Board of Commissioners

DATE OF BOARD MEETING: May 23, 2019

ACCOUNTS PAYABLE CHECKS/EFTS TO BE APPROVED:

#1	AP CHECK NUMBERS	<u>252851-253800</u>	NET AMOUNT:	<u>\$3,714,267.67</u>
		SUB-TOTAL:		<u>\$3,714,267.67</u>

PAYROLL CHECKS/EFTS TO BE APPROVED:

#1	PAYROLL CHECK NUMBERS	<u>81397-81408</u>	NET AMOUNT:	<u>\$11,911.12</u>
#2	PAYROLL CHECK NUMBERS	<u>81409-81417</u>	NET AMOUNT:	<u>\$11,517.31</u>
#3	PAYROLL DIRECT DEPOSIT	<u>EFT</u>	NET AMOUNT:	<u>\$1,093,302.48</u>
#4	PAYROLL DIRECT DEPOSIT	<u>EFT</u>	NET AMOUNT:	<u>\$1,101,045.58</u>
		SUB-TOTAL:		<u>\$2,217,776.49</u>

TOTAL CHECKS & EFTs: \$5,932,044.16

Prepared by

Sharoll Cummins
Sharoll Cummins
Staff Accountant

**KITTITAS COUNTY PUBLIC HOSPITAL DISTRICT #1
FINANCE COMMITTEE MEETING**

May 23, 2019

Thursday

Café Conference Room

3:30 P.M.

AGENDA

- **Call to Order**
- **Approval of Agenda**
- **Approval of Minutes: April 23, 2019**
- **2018 Audited Financial Statements**
- **April Financial Highlights**
- **Financial Sustainability**
 - **ER Leveling**
 - **RHC Medicaid Encounter Billing**
- **Capital Expenditure Request**
 - **Sidewalk and Pavement Repair – Engineering Department**
- **Adjourn**

Next Meeting Scheduled: June 25, 2019 (*Tuesday*)

Kittitas Valley Healthcare
Finance Committee Meeting Minutes
April 23, 2019

Members Present: Liahna Armstrong, Roy Savoian, Jerry Grebb, Scott Olander

Members Excused: Deborah Bezona, Julie Petersen

Staff Present: Kelli Goodian Delys, Jason Adler, Lisa Potter

The meeting was called to order by Liahna Armstrong at 7:30am.

A motion was made to approve the corrected agenda and corrected minutes. The next Finance Committee meeting will be May 23, 2019 instead of May 21, 2019. The minutes were corrected to reflect the correct spelling of Liahna, instead of Liahana. The motion carried.

Scott Olander presented the financial overview of March. Overall the financial results were pretty good for the month. Looking at the Key Statistics and Indicators page and the Statement of Revenue and Expense, the statistics support the revenue. Admissions and patient days are down a little from budget. Surgery volume was pretty good. We had orthopedic coverage for the entire month, yet elective surgeries (total hips and knees) were down. The Emergency Department continued to be busy. On the average, about 10-11% of our emergency room visits were admitted to the hospital and 80% of our admissions were from emergency room visits. Rehab visits continued to be over budget for the month and year to date. In March, Speech Therapy and Occupational Therapy moved into the building across from Physical Therapy. We have seen an increase in patient traffic and think we have gotten some synergy resulting from the move to get rehab services located closer to each other. Reported clinic visits will be corrected year to date on current year and prior year in April 2019. The RHC Medicaid visits have been duplicated in the visit count.

Looking at the Financial Sustainability page, our self-pay percentage is down. In the Emergency Department registration process, patients' identification and insurance information has been obtained up front. This process change did not delay patient care, yet we were able to get complete billing information and assisted uninsured patients apply for Medicaid. Accounts Receivable Days was held at 89. Since statements were sent, self-pay collections have increased: February 2019 \$86,684, March 2019 \$335,137, and April 2019 month to date \$603,965. In addition to the above improvements, the organization has or is working on the following: asked and received from the state a rebasing of the RHC yielding \$418,000 increase in annual revenue; implemented the emergency room charge leveling project yielding approximately \$500,000 in revenue; internally completing the Medicare Cost Report; RHC audits; swing bed project; and utilization of Medicare inpatient criteria for Medicare patients. This has had a positive impact on the Statement of Revenue and Expense. We were positive for operating income for the month and year to date. The overall sense is that we have moved in the right direction. Financial details were provided in the Chief Financial Officer's Report.

The committee approved the capital expenditure request for the eye microscope and phacoemulsification machine for cataract surgery go to the Board of Commissioners.

With no further business, the meeting was adjourned at 8:00am.

QUALITY IMPROVEMENT REPORT – Mandee Olsen, BSN RN CPHQ

May 2019

Quality Improvement Dashboard Data Summary – through March 2019

Summary of Areas Meeting Goal or Showing Improvement

- Performance at 100% for sepsis in March 2019. A new reminder for follow-up documentation has been added to a Cerner order set.
- Time before administration of tPA for patients with stroke has met goal consistently for all patients in the past 12 months. The particular metric reported on the Quality Improvement Council dashboard is one of several reported through Get With the Guidelines.
- Improvement in assessment following pain medication administration in the Emergency Department.
- Significant improvement in hospice visits near end of life.
- Improvement in poor control of diabetes in clinics.

Summary of Improvement Opportunities

- Dysphagia screening for patients with stroke symptoms has improved from February to March but is still below the goal of 100%.
- One superficial surgical site infection following a total hip procedure.
- One needlestick in the month of March.
- Dip in assessment following pain medication administration for patients in the Family Birthing Place. This is likely related to changes in medication administration patterns that will help reduce need for narcotics.
- Dip in improvement in management of oral medications for home health patients. This may include home health patients who are not able to ambulate to access their medications. Improved documentation of ambulation status may make this metric more meaningful.

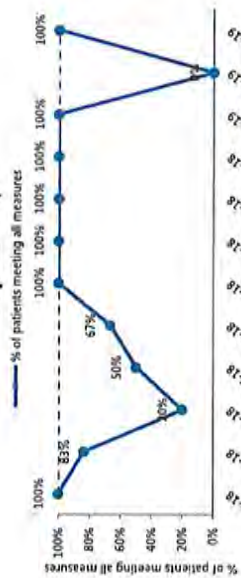
Patient Stories

"We would like to offer our most heartfelt thanks to the Emergency Department team, Dr. Peet, Dr. Ghermay, and mostly RN Knighten that treated our family member after a febrile seizure. In the midst of such a frightening and horrible situation, the care we received brought us much comfort and we are truly grateful. Please keep up the good work, you truly make a difference in people's lives."

– Family of KVH Emergency Department patient

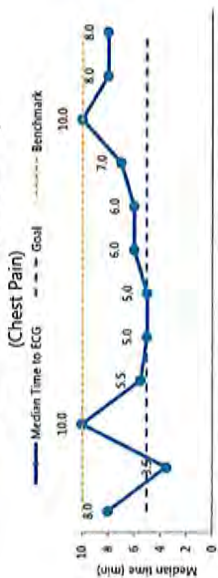
QI Council

Sepsis ↑



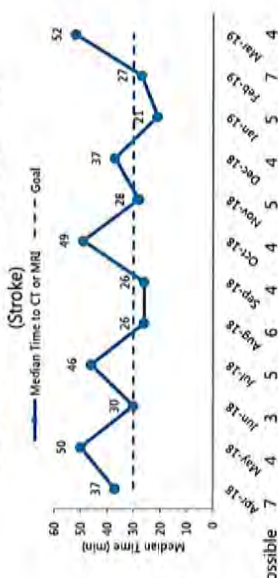
possible

Median Time to ECG (Chest Pain) ↓



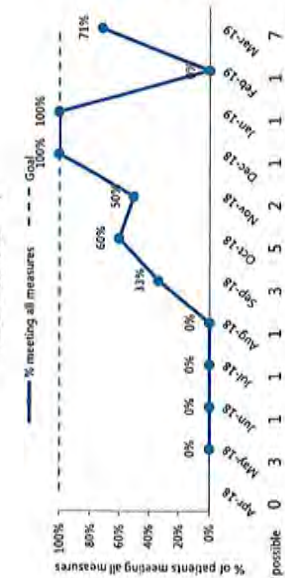
possible

Median Time to CT or MRI (Stroke) ↓



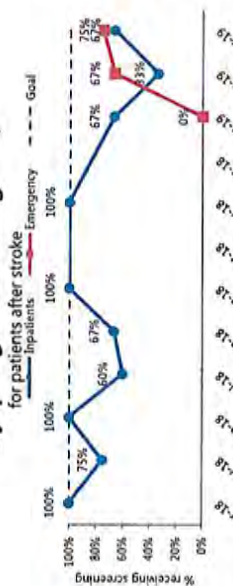
possible

Restraints ↑



possible

Dysphagia Screening for patients after stroke ↑



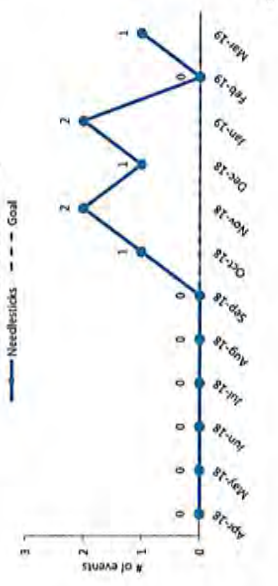
IP

Stroke IV tPA Timing ↑

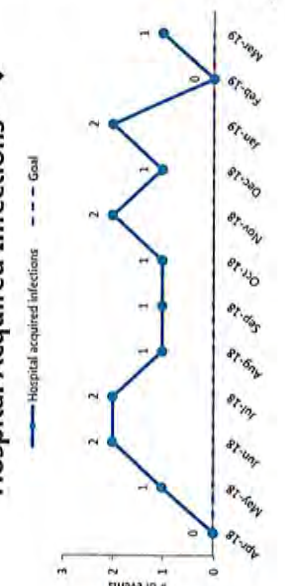


possible

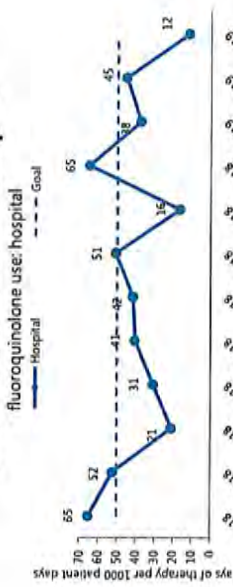
Needlesticks ↓



Hospital Acquired Infections ↓

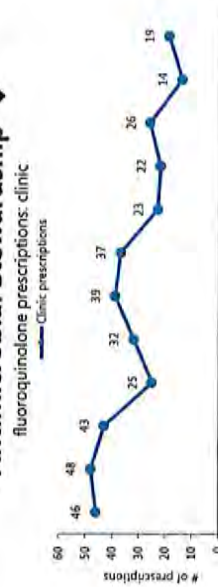


Antimicrobial Stewardship ↓

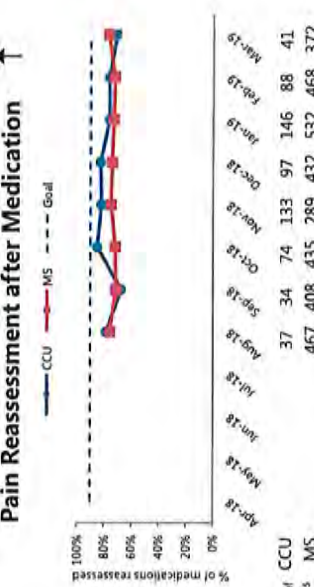


days of therapy

Antimicrobial Stewardship ↓



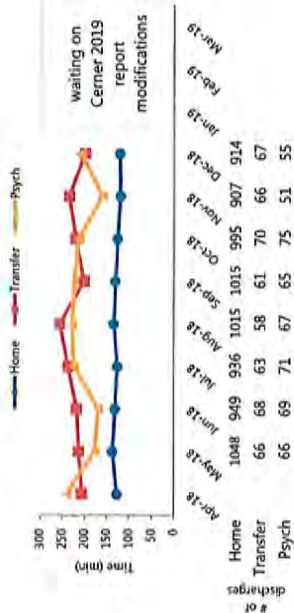
Pain Reassessment after Medication ↑



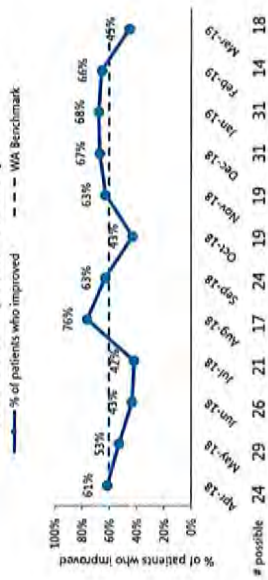
Pain Reassessment after Medication ↑



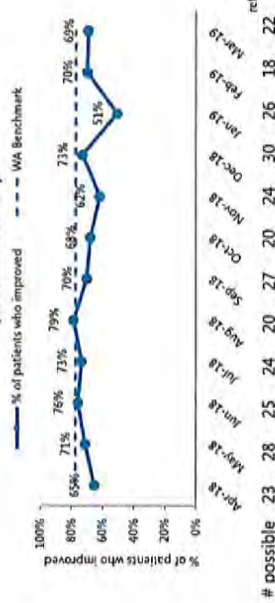
ED Admit to Discharge Time



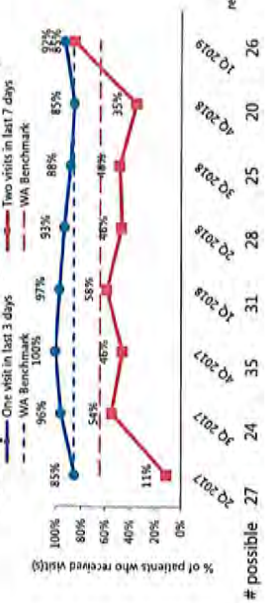
Improvement in Management of Oral Medications (Home Health)



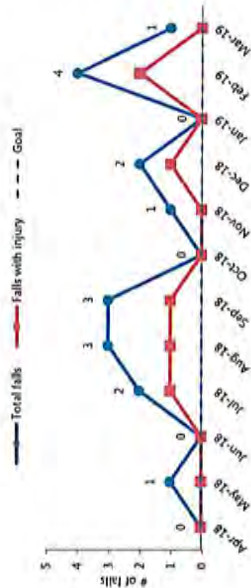
Improvement in Pain Interfering with Activity (Home Health)



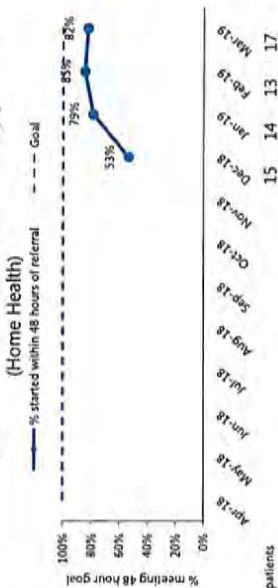
Hospice Visits Near End of Life



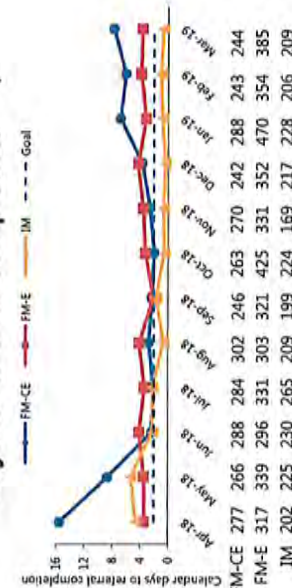
Falls



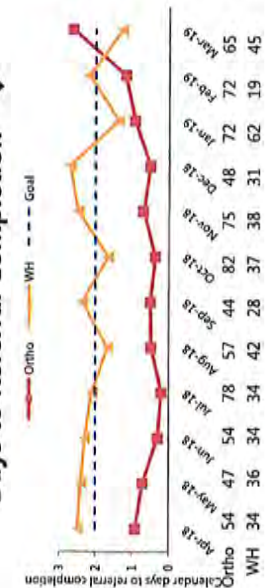
Timely Start for Physical Therapy (Home Health)



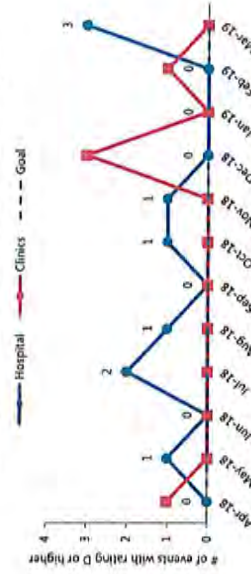
Days to Referral Completion



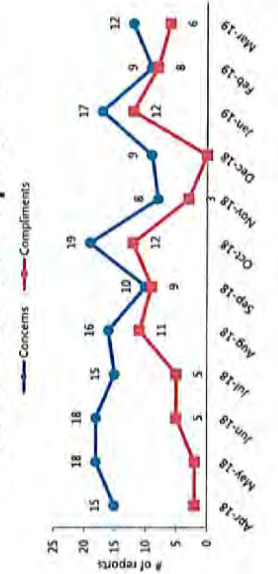
Days to Referral Completion



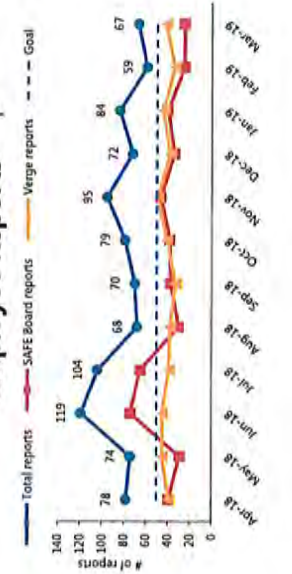
Adverse Medication Events



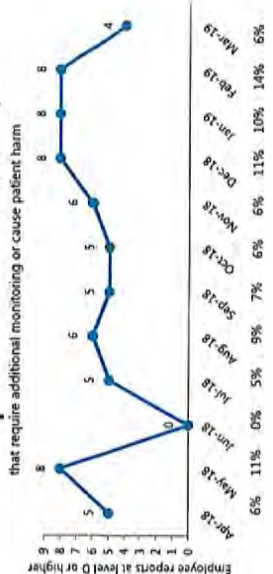
Care and Service Reports



Employee Reports

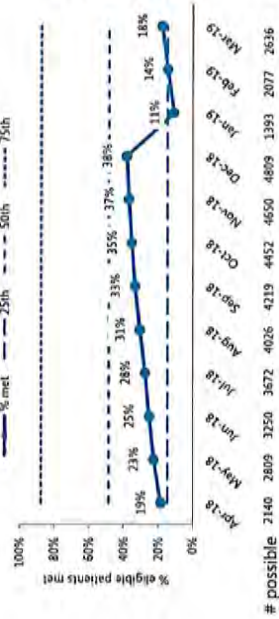


Reports of Occurrences

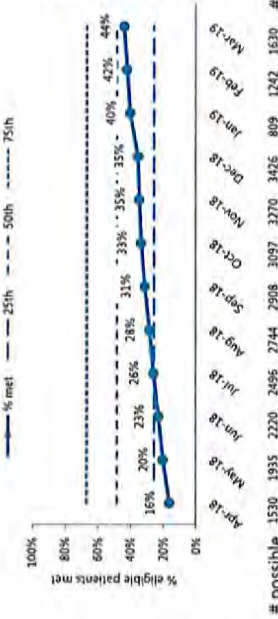


ACO Quality Measures: Clinics

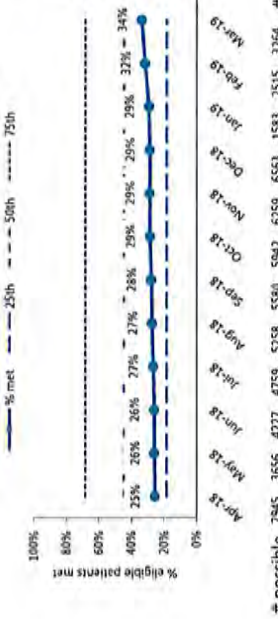
Screening for Future Fall Risk ↑



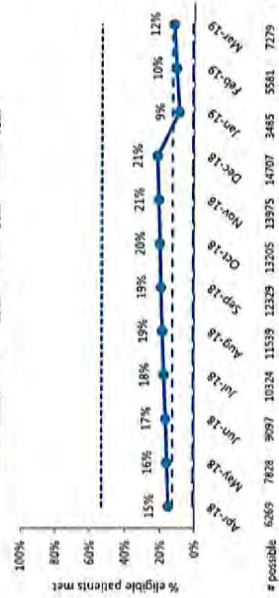
Screening for Breast Cancer ↑



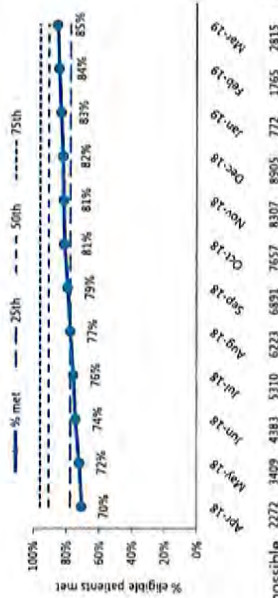
Screening for Colorectal Cancer ↑



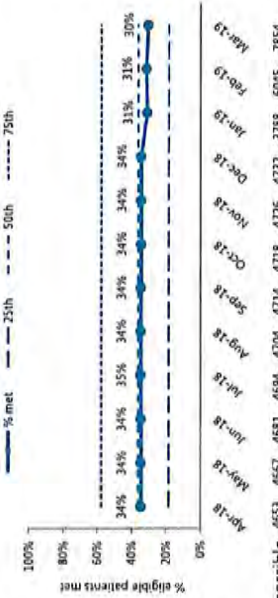
Screening for Depression ↑



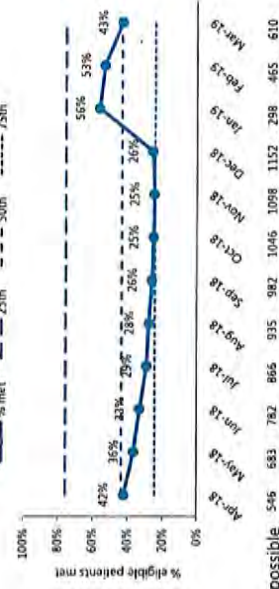
Tobacco Use Screening and Intervention ↑



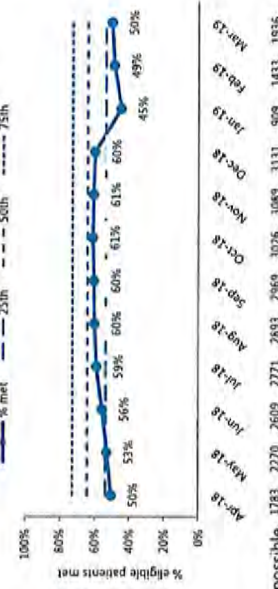
Influenza Immunization ↑



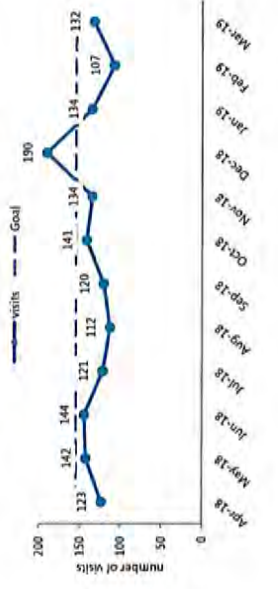
Diabetes: Poor Control ↓



Controlling High Blood Pressure ↑



Medicare Wellness Visits ↑



CHIEF EXECUTIVE REPORT – Julie Petersen

May 2019

Construction Projects

The Medical Arts Center Project went to bid on schedule. A walk through was conducted for interested contractors. Ron reports that there were several (6) familiar firms on site for the walk through. One firm has since notified Ron that they will not be participating due to current commitments. The public bid opening will be at the MAC May 20th at 2pm. Ron and the architect will declare an apparent low bidder at the bid opening based only on the base project, excluding alternates. Ron and KDA will spend the next two days qualifying the bidder and we anticipate bringing the bid to you for approval at the May 23rd meeting. I will be seeking approval to advance the entire project, including the alternates, unless the Board requests to delay the alternates.

Suite C Multi Plex

Progress in this Multi Plex suite is moving along nicely. Our cabling contractor is a bit back logged but the changes to the entrance, work areas and finishes is going well. The suite should be complete in mid-June and will include three exam rooms, a generous amount of work area and a diagnostics room.

Foundation

The Foundation has extended an offer for the Foundation Assistant position. The Foundation Assistant will be a half time position and the Foundation activities will be relocated to the KVH Staff Development House on Chestnut. Thank you to Michele for stepping in at the last minute to help pull off a successful gala. While the final tally is not in, we believe that the Foundation raised around \$50,000 towards the purchase of three birthing beds. Thank you to all who attended and assisted.

Grant Writer Position

An offer has also been extended for the grant writer. The candidate has accepted so we are working through the HR process. The grant writer will be fulltime and located in Dr. Martin's old office. Dr. Martin has moved into the larger office formerly occupied by the Foundation.

Recruiting and Retaining PATIENTS at KVH

Vicky Machorro has added a review of all transfers to her daily tasks. Doctors Hibbs and Lindsey are also reviewing and discussing transfers in very close to real time. Most of our transfers out of the Emergency Department are due to the need for a Mental Health Professional (MHP). Cardiology and trauma are other common reasons to transfer. We are scrutinizing each transfer for appropriateness, consistency and patterns.

We have identified a general surgeon who is very interested in coming to KVH. He has a particular interest in robotic assisted minimally invasive surgery. A few years ago robotic surgery was considered exotic. A number of smaller and critical access hospital in our state and region now have di Vinci robots including Good Shepard in Hermiston, Pullman and Lourdes in Pasco. In addition to a financial investment, a robotics program will require a commitment from general surgery, OB/GYN and urology. We have two new OB/GYNs arriving within the next 120 days both with some robotics experience and urology is being actively recruited as a part time specialty. We have encouraged the general surgery candidate to help us develop the interest as well as the data to support a robotics program at KVH.

Physician leadership will be working together to design the Orthopedics program at KVH in a post Bos world.

HR Dashboard

Measurement		19-Apr	19-Mar	19-Feb	19-Jan	18-Dec	18-Nov	18-Oct	18-Sep	18-Aug	18-Jul	18-Jun	18-May	18-Apr
Employee Population	Available workforce	Rolling 12 Variance												
		15	366	370	364	370	368	366	365	361	350	351	345	353
	Full-time	-6	133	131	133	132	135	130	133	135	134	139	139	139
	Part-time	5	96	101	101	104	103	104	97	95	92	90	91	91
	Per Diem	14	595	602	601	606	606	598	593	579	577	574	583	581
	Total Employees													
Turnover	Quality of recruitment and retention	Rolling 12 Total												
		114	5	6	8	6	12	7	9	4	17	8	16	8
	Voluntary (excludes pd terms, includes reduction of FTE to pd)	12	1	1	0	0	2	2	1	2	0	1	1	0
	Involuntary (excludes pd terms)	21.37%	1.01%	1.16%	1.33%	0.99%	2.31%	1.50%	1.67%	1.01%	2.94%	1.56%	2.96%	1.37%
	Overall Percentage (excludes pd terms, includes reduction of FTE to pd)													
	Total All Employees Separated	136	11	8	7	7	10	7	13	7	17	13	16	12
General Recruitment	Efficiency of sourcing, selecting and placing talent	Rolling 12 Total												
		184	8	6	11	10	17	12	14	15	37	13	14	13
	Open Postings	2275	184	161	167	99	174	179	242	248	224	192	133	135
	Unique Applications Received	155	3	10	3	11	7	16	18	21	16	18	7	14
	Employees Hired	38.13	24.20	25	26.5	28.5	38.5	43.5	45	45	44	45.5	37	44
	Time to Fill (Median)	40.39	22.30	23.41	30.31	31.92	41.77	43.00	45.65	47.0	45.10	46.74	48.40	48.53
	Time to Fill (Average)													51.00
Provider Recruitment	Efficiency of sourcing, selecting and placing talent	Rolling 12 Total												
		42	1	1	1	3	3	5	4	6	7	10	0	1
	Open Postings	32	1	1	1	3	3	5	4	6	7	0	0	0
	Open Slots	34	3	0	0	1	1	1	3	5	5	7	1	7
	Unique Applications Received	31	3	0	3	2	1	2	6	2	0	4	2	4
	Candidates Interviewed	13	1	0	1	0	1	2	0	1	2	2	0	1
	Employees Hired	310	416	486	486	238	238	210	132	132	645	367	151	151
	Time to Fill (Average)													377
Benefits	Financial impact of adding talent	Rolling 12 Total												
		43	3	7	4	6	1	3	3	3	4	0	4	1
	Workers Comp Claims	436	24	25	6	51	62	30	9	19	13	28	59	76
	Time Loss Days	66.3%	67.2%	65.8%	67.2%	66.3%	65.2%	66.0%	65.7%	65.4%	66.0%	66.7%	66.7%	66.2%
	Employee Population on Medical Benefits (Average)													
	Total cost in benefits per FTE - welfare (Average)	\$ 866.30	\$ 845.20	\$ 864.76	\$ 824.54	\$ 817.34	\$ 876.60	\$ 972.83	\$ 881.21	\$ 875.65	\$ 847.32	\$ 803.07	\$ 886.24	\$ 876.48
	Total cost in benefits per FTE - total (Average)	\$ 1,832.90	\$ 1,868.97	\$ 1,931.69	\$ 1,902.52	\$ 1,855.42	\$ 2,061.65	\$ 1,884.46	\$ 1,665.97	\$ 1,768.48	\$ 1,872.56	\$ 1,407.69	\$ 1,856.06	\$ 1,997.11
														\$ 1,805.07
Evaluations	Providing timely feedback to employee	Total Percentage												
		88.5%	88.5%	88.9%	88.5%	85.8%	87.7%	90.0%	83.1%	84.3%	86.6%	89.2%	92.8%	86.5%
	Percentage of employees with completed annual evaluation													

NOTIFICATION OF CREDENTIALS FILES
FOR REVIEW

Date May 9, 2019

TO: Board of Commissioners
Kevin Martin, MD

FROM: Kyle West
Medical Staff Services

The Medical Executive Committee has reviewed the applications for appointment or reappointment for the practitioners listed below. They recommend to the Board that these practitioners be granted appointment and privileges. Please stop by Mandy's office prior to the next Board meeting if you wish to review these files.

<u>PRACTITIONER</u>	<u>STATUS</u>	<u>APT/REAPT</u>	<u>SITE</u>
Holly Dawson, DO	Provisional Active	Apt	KVH Women's Health
C Andersen, MD	Provisional Associate	Apt	MDIG Onsite Locum
Lance Knecht, MD	Provisional Associate	Apt	MDIG Onsite Locum
Stewart Kerr, MD	Provisional Associate	Apt	KVH-Orthopedics
John Sand, MD	Active	Reapt	OB/GYN of Ellensburg
Dalila Fairchild, CRNA	Allied Health Professional	Reapt	CRNA
Dena Mahre, PA-C	Allied Health Professional	Reapt	KVH-Orthopedics
Chelsea Newman, PA-C	Allied Health Professional	Reapt	KVH-FM Cle Elum

CHIEF MEDICAL OFFICER – Kevin Martin, MD

May 2019

Medical Staff Services:

- Mitch Engel reports that in April we interviewed three providers: one General Surgeon and two GNP's. Offers were made to the GS and one GNP and both accepted. We had a full-time Hospitalist, Dr. Fish, start on April 29th.
- Lisa Potter is working on a number of fronts. These include:
 - **Primary Projects:**
 - **Podiatry**
 - We are actively exploring ways to bring this service to the community and are in process of analyzing the options.
 - **Tele-Psychiatry**
 - We have some information from two other hospitals using Cerner for this service, but both have indicated less than favorable financial returns. Will be contacting Providence St. Mary in Walla Walla regarding their program, which appears robust.
 - **Pulmonary Rehab Program/Cardiopulmonary Rehab Option**
 - Lisa is reviewing regulatory requirements for both pulmonary and cardiac rehab to see whether offering both would be an option. With this, she continues to gather demand and reimbursement data for both programs, along with start-up costs.
 - **KVH Explore Healthcare High School Internship**
 - Assisting Karen Schock in process of drafting the syllabus and compiling learning module presentations from each department into a workbook for the students.
 - **Foundation at KVH Presentations**
 - Gearing up for the first presentation at the May foundation board meeting.
 - **GNP Program Analysis**
 - Currently evaluating if we are adequately staffed to meet community demand.
 - **Ongoing Projects:**
 - **Referral Partner Research**
 - **Pulmonary/Cardio-pulmonary Rehabilitation**
 - **Palliative Care**
 - Kyle West reports that in May we have 4 initial appointments. Of those 2 will be KVH employees. 2 are locums through MDIG. There are 4 reappointments.

CMO activities:

- **Community & Regional Partnerships**
 - Greater Columbia Accountable Community of Health: I continue as facilitator of the Transition Care Project (Project 2C). We are receiving payments from GCACH to support our transformation work in our family medicine clinics and inpatient services.
 - KVH continues to be a key partner in the Kittitas County Health Network and at the Annual Meeting 5/30, I will start my term as board president.
- The Values Alignment Committee continues to have very interesting, sometimes challenging meetings every other week.

Respectfully submitted,
Kevin Martin, MD
Chief Medical Officer



CHIEF FINANCIAL OFFICER REPORT- Scott Olander, CFO

April Operating Results

- Although April inpatient admissions and deliveries were below budget by 10 admits and 11 deliveries, respectively; inpatient days were at budget so inpatient revenue was very close to budget. With the exception of rehab services and surgery, most outpatient services were just a little below their budget target. Outpatient surgery cases were 13.2% below budget in April and 15.7% below budget YTD. The hospital is performing approximately 16 more colonoscopy procedures per month in 2019 than in 2018 which is helping to offset negative outpatient surgery volume variance. In 2018 the hospital performed on average 106 colonoscopies per month and are now doing 122 procedures per month. The ER is a major driver of ancillary service revenue. Positive volume variances in EKG and the CT department are due to ER volume and the higher acuity of the patients being seen. The ER leveling project is also adding an additional \$84,000 per month of ER facility charges that were not budgeted. Rehab visits were 19.8% better than budget for April and 13.7% better than budget YTD. The relocation of OT and Speech to the patient friendly and beautifully finished space at 309 Mountain View appears to be leading to additional patient volumes in OT/PT and Speech. Clinic visits were below budget, by 4% in April and 2.8% YTD.
- Gross revenue of \$12,352,369 was below budget by \$157,780. April inpatient revenue tracked with patient days and was just slightly below budget by \$26,512. Outpatient revenue was below budget by \$148,821. Although clinics visits for the month and YTD are below their budget target, we have identified opportunities to bill for some encounters that were not previously billed or budgeted. In addition, the professional fees from the additional colonoscopy procedures have contributed to a combined positive variance of \$63,521 for our Internal Medicine and General Surgery practices. These improvements have resulted in a positive clinic revenue variance for April and only 1% negative revenue variance YTD.
- Deductions from revenue exceeded budget by \$11,115 for the month. Contractual adjustments were greater than budget due to our conservative approach to recording reserves. There were fewer accounts written off to bad debt and charity in April so we reduced our reserve accordingly. Another factor in reducing our allowance for bad debt and charity is a lower percentage of self-pay revenue. YTD self-pay revenue is 2.29% of total revenue through April compared with 3.52% in 2018.
- Other operating revenue exceed budget due to an accrual for \$149,989 for earned practice transformation funds from GCACH. The remaining variance was due to 340B rebates receipts.

- Overall operating expenses were below budget by \$54,937 in April. The positive wage variance was due partly to smaller than expected provider incentive payments. In addition, the hospital had budgeted for an OBGYN to start working in April. The OBGYN provider backed out of the contract after the budget that included the provider's salary was approved. The negative temporary labor variance was due to staffing for ER, a Home Health PT and for and echo tech. The variance in professional services was due \$59k of general surgery locums and \$22k for hospitalist locum providers. The positive supply expenses variance of \$61,285 was due to the low number of inpatient orthopedic surgery and outpatient surgery cases. Utilities expenses were over budget by \$20,402 in April and YTD are over budget by \$30,590. The colder than normal weather experienced in late January through early March and warmer than normal weather in April are factors causing this variance. In addition, a natural gas line in Canada (our regions supplier) broke last fall and this has resulted in significant natural gas cost increases. The negative April purchased service expense was due to additional volume related expenses of \$25,294 paid to Rehab Visions for PT, OT and Speech therapists and \$15,536 for contract coders for HIM. For the most part, YTD expenses are tracking close to budget and when they are not, the variances are explainable.
- April operations resulted in an operating gain of \$229,505 compared to budgeted operating gain of \$173,263. YTD KVH is \$66,903 below our operating income target.
- Non-operating revenue/expense was slightly better than budget by \$4,633.
- Days in Accounts Receivable increased 1 day from 89 to at 90 days in April. Gross account receivable increased by \$27,409 in April. KVH is purchasing some additional coding hours to bring this backlog down which will result in a greater purchase service variance for HIM.
- Days Cash on Hand increased 6.1 days to 128.1 days in April from 122 in March due to timing. Overall, days cash on hand have been stable. As we start to spend fund on the Medical Arts Clinic project the days cash on hand will decline substantially.
- Average daily cash collections (all cash) in April was \$319,945 per working day. This is a decrease from March. Average daily collections for the past three months, February, March and April have been \$325,173; \$332,137 and \$319,945, respectively.

Kittitas Valley Healthcare

Financial and Operating Indicators

April 2019

Measure	2016	2017	2018	2019 Budget	2019 Annualized	2019 YTD
Total Charges	124,153,636	130,611,388	140,104,003	151,556,153	149,250,859	49,750,286
Net Revenue	71,506,819	71,490,964	77,527,646	82,594,255	80,885,011	26,961,670
Operating Income	(5,893)	885,655	(752,045)	2,013,073	733,626	244,542
Net Margin %	2.2%	3.7%	1.7%	3.2%	0.9%	0.9%
Cash	29,859,717	33,213,447	27,408,625	31,428,600	27,175,202	27,175,202
Days Cash on Hand	156.0	178.7	133.5	150.0	128.1	128.1
Surgeries	1,856	1,641	1,461	1,478	1,272	424
Emergency Visits	13,789	13,162	13,930	13,760	13,872	4,624
% ED visits admitted	n/a	n/a	n/a	n/a	10.4%	10.4%
Diagnostic Imaging	33,471	33,836	29,474	31,664	30,273	10,091
Laboratory	181,082	190,587	207,040	218,157	212,049	70,683
Clinic Visits	48,525	50,917	58,500	75,644	70,326	23,442
IP and Obs Days	3,937	3,440	3,829	3,801	4,288	1,429
Deliveries	312	322	332	332	315	105
Admits	1,043	899	944	952	945	315
FTEs	449.1	457.6	469.4	485.4	476.6	476.6
AR Days	47.5	50.8	92.0	60.0	90.0	90.0

Kittitas Valley Healthcare

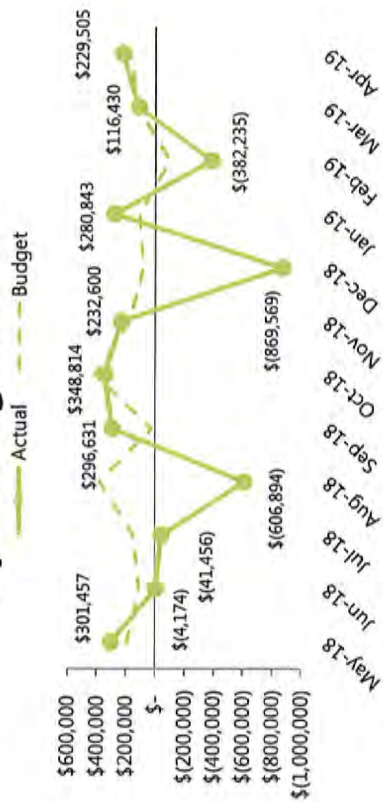
Key Statistics and Indicators

April 2019

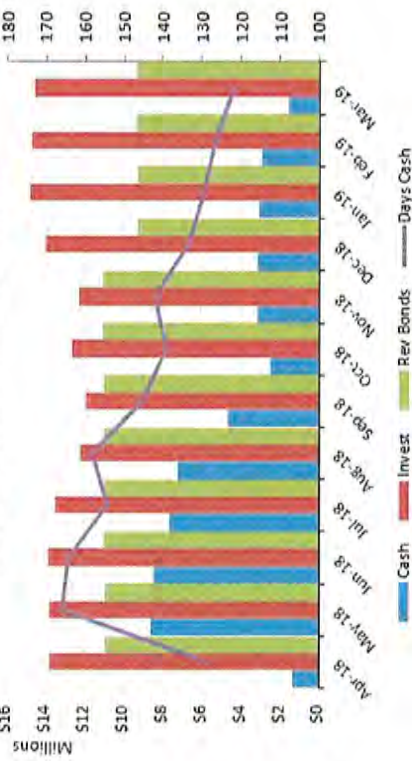
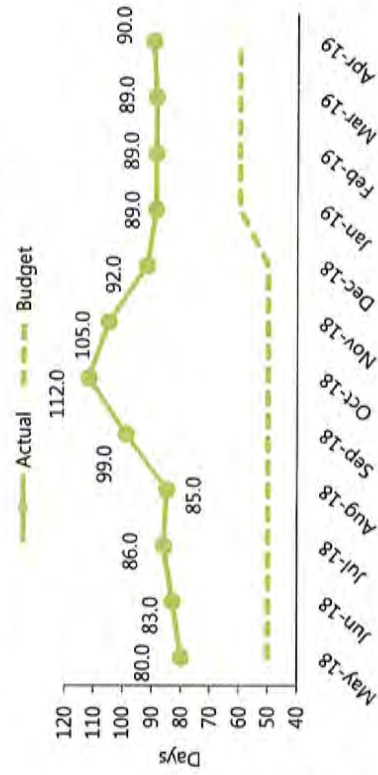
Activity Measures		Current Month			Year to Date			Prior YTD	
		Actual	Budget	Var. %	Actual	Budget	Var. %	Actual	Var. %
01	Admissions	68	78	-13.1%	315	313	0.6%	358	-12.0% 01
02	Patient Days - W/O Newborn	219	218	0.1%	953	873	9.2%	1,072	-11.1% 02
03	Avg Daily IP Census	7.3	7.3	0.1%	7.9	7.3	9.2%	8.9	-11.1% 03
04	Average Length of Stay	3.2	2.8	15.2%	3.0	2.8	8.5%	3.0	1.0% 04
05	Deliveries	16	27	-41.4%	105	109	-3.8%	112	-6.3% 05
06	Case Mix Inpatient	1.22	1.00	22.2%	1.17	1.00	17.2%	1.04	12.7% 06
07	Surgery Minutes - Inpatient	2,212	2,920	-24.3%	11,592	11,681	-0.8%	12,833	-9.7% 07
08	Surgery Minutes - Outpatient	6,004	6,540	-8.2%	23,171	26,162	-11.4%	32,073	-27.8% 08
09	Surgery Procedures - Inpatient	18	22	-19.9%	90	90	0.1%	113	-20.4% 09
10	Surgery Procedures - Outpatient	86	99	-13.2%	334	396	-15.7%	504	-33.7% 10
11	ER Visits	1,119	1,131	-1.1%	4,624	4,524	2.2%	4,679	-1.2% 11
12	Laboratory	17,353	17,931	-3.2%	70,683	71,723	-1.5%	79,359	-10.9% 12
13	Radiology Exams	2,579	2,603	-0.9%	10,091	10,410	-3.1%	11,631	-13.2% 13
14	Rehab Visit	1,641	1,370	19.8%	6,229	5,481	13.7%	5,890	5.8% 14
15	Outpatient Visits	NA	NA	NA	NA	NA	NA	NA	NA 15
16	Outpatient Percent of Total Revenue	86.2%	86.2%	0.0%	84.9%	86.1%	-1.4%	83.7%	1.4% 16
17	Clinic Visits	6,081	6,337	-4.0%	23,442	24,125	-2.8%	18,394	27.4% 17
18	Adjusted Patient Days	1,587	1,580	0.4%	6,299	6,262	0.6%	6,573	-4.2% 18
19	Equivalent Observation Days	84	94	-10.8%	476	376	26.5%	390	22.0% 19
20	Avg Daily Obs Census	2.8	3.1	-10.8%	4.0	3.1	26.5%	3.3	22.0% 20
Financial Measures									
21	Salaries as % of Operating Revenue	49.2%	50.2%	1.9%	50.4%	50.9%	1.0%	53.3%	5.4% 21
22	Total Labor as % of Operating Revenue	61.1%	61.9%	1.2%	62.9%	62.6%	-0.4%	66.0%	4.7% 22
23	Revenue Deduction %	48.0%	47.3%	-1.5%	48.6%	47.5%	-2.2%	45.5%	-6.7% 23
24	Operating Margin	3.4%	2.5%	32.4%	0.9%	1.2%	-21.6%	-1.6%	-155.0% 24
Operating Measures									
25	Productive FTE's	425.3	432.9	1.8%	421.8	432.9	2.6%	417.0	-1.2% 25
26	Non-Productive FTE's	50.6	52.5	3.6%	54.7	52.5	-4.3%	52.4	-4.5% 26
27	Paid FTE's	475.9	485.4	2.0%	476.6	485.4	1.8%	469.4	-1.5% 27
28	Operating Expense per Adj Pat Day	\$ 4,157	\$ 4,209	1.2%	\$ 4,242	\$ 4,250	0.2%	\$ 3,839	-10.5% 28
29	Operating Revenue per Adj Pat Day	\$ 4,302	\$ 4,318	-0.4%	\$ 4,280	\$ 4,299	-0.4%	\$ 3,777	13.3% 29
30	A/R Days	90.0	50.0	-80.0%	90.0	50.0	-80.0%	83.0	-8.4% 30
31	Days Cash on Hand	128.1	175.0	-26.8%	128.1	175.0	-26.8%	128.8	-0.6% 31

Financial Sustainability

Operating Income



Accounts Receivable Days



Payer Mix

	CY 2017	CY 2018	YTD 2019
Medicare	40.47%	41.85%	41.55%
Medicaid	18.90%	18.45%	19.87%
Commercial	33.14%	32.03%	31.84%
Self Pay	4.31%	3.52%	2.29%
Other	3.18%	4.15%	4.45%

Kittitas Valley Healthcare

Statement of Revenue and Expense

	Current Month			Year to Date			Prior Y t D
	Actual	Budget	Variance	Actual	Budget	Variance	Actual
INPATIENT REVENUE	1,701,793	1,728,305	(26,512)	7,529,094	6,913,220	615,875	7,173,473
OUTPATIENT REVENUE	8,714,052	8,862,874	(148,821)	35,106,829	35,451,494	(344,665)	31,860,576
CLINIC REVENUE	1,936,524	1,918,971	17,553	7,114,363	7,211,469	(97,106)	4,941,536
REVENUE	12,352,369	12,510,149	(157,780)	49,750,286	49,576,184	174,103	43,975,585
CONTRACTUALS	5,665,679	5,514,346	151,333	22,815,656	21,974,742	840,915	18,444,286
PROVISION FOR BAD DEBTS	175,212	249,157	(73,944)	1,019,029	996,626	22,403	1,067,169
FINANCIAL ASSISTANCE	67,179	89,129	(21,950)	21,583	356,516	(334,932)	319,089
OTHER DEDUCTIONS	17,200	61,524	(44,324)	308,670	237,699	70,970	184,197
DEDUCTIONS FROM REVENUE	5,925,270	5,914,155	11,115	24,164,939	23,565,583	599,356	20,014,741
NET PATIENT SERVICE REVENUE	6,427,099	6,595,994	(168,895)	25,585,348	26,010,601	(425,253)	23,960,844
OTHER OPERATING REVENUE	398,620	228,420	170,200	1,376,323	913,679	462,644	862,370
TOTAL OPERATING REVENUE	6,825,719	6,824,414	1,306	26,961,670	26,924,280	37,391	24,823,215
SALARIES	3,361,291	3,425,389	(64,098)	13,585,696	13,701,556	(115,860)	13,223,673
TEMPORARY LABOR	33,836	11,519	22,317	127,086	40,602	86,484	138,378
BENEFITS	809,746	797,523	12,224	3,369,967	3,156,948	213,020	3,149,160
PROFESSIONAL FEES	100,392	53,739	46,653	225,221	214,957	10,264	259,208
SUPPLIES	699,536	760,821	(61,285)	2,855,797	3,043,303	(187,506)	2,881,554
UTILITIES	86,500	66,098	20,402	341,808	311,218	30,590	306,149
PURCHASED SERVICES	859,054	825,189	33,865	3,432,903	3,300,756	132,147	2,984,525
DEPRECIATION	311,360	342,061	(30,702)	1,251,268	1,368,245	(116,977)	934,598
RENTS AND LEASES	119,365	127,932	(8,567)	499,671	511,727	(12,056)	433,561
INSURANCE	38,428	39,575	(1,147)	220,834	158,300	62,534	178,300
LICENSES & TAXES	54,626	67,783	(13,158)	287,616	271,133	16,483	258,823
INTEREST	57,160	56,913	247	230,286	227,653	2,633	199,718
TRAVEL & EDUCATION	18,286	35,422	(17,136)	102,287	141,687	(39,401)	104,468
OTHER DIRECT	46,636	41,187	5,449	186,690	164,749	21,941	180,555
EXPENSES	6,596,215	6,651,151	(54,937)	26,717,128	26,612,834	104,294	25,232,669
OPERATING INCOME (LOSS)	229,505	173,263	56,242	244,542	311,445	(66,903)	(409,454)
OPERATING MARGIN	3.36%	2.54%	4307.99%	0.91%	1.16%	-178.93%	-1.65%
NON-OPERATING REV/EXP	56,607	51,974	4,633	285,147	207,897	77,250	615,491
NET INCOME (LOSS)	286,112	225,237	60,875	529,689	519,342	10,347	206,037
UNIT OPERATING INCOME							
HOSPITAL	(23,534)	270,508	(294,041)	561,279	1,070,146	(508,868)	797,471
URGENT CARE	(25,619)	(5,974)	(19,645)	(184,013)	(25,563)	(158,450)	9,878
CLINICS	186,748	(137,431)	324,179	(303,327)	(920,296)	616,968	(1,550,430)
HOME CARE COMBINED	92,048	46,160	45,888	170,742	187,158	(16,416)	333,626
OPERATING INCOME	229,643	173,263	56,380	244,680	311,445	(66,765)	(409,454)

Kittitas Valley Healthcare Balance Sheet and Cash Flow

Kittitas Valley Healthcare Balance Sheet

	YEAR TO DATE	PRIOR YEAR END	CHANGE
CASH AND CASH EQUIVALENTS	2,710,264	3,142,430	(432,166)
ACCOUNTS RECEIVABLE	39,132,595	36,648,852	2,483,743
ALLOWANCE FOR CONTRACTUAL	(20,450,268)	(18,507,689)	(1,942,579)
THIRD PARTY RECEIVABLE	300	639,004	(638,704)
OTHER RECEIVABLES	136,079	788,227	(652,147)
INVENTORY	1,583,546	1,526,115	57,431
PREPAIDS	846,537	591,940	254,596
INVESTMENT FOR DEBT SVC	601,977	945,710	(343,733)
CURRENT ASSETS	24,561,030	25,774,589	(1,213,558)
INVESTMENTS	23,862,961	23,320,485	542,476
PLANT PROPERTY AND EQUIPMENT	77,531,545	79,180,803	(1,649,258)
ACCUMULATED DEPRECIATION	39,976,549	40,721,064	(744,515)
NET PROPERTY, PLANT, & EQUIP	37,554,995	38,459,738	(904,743)
OTHER ASSETS	(0)	(0)	0
NONCURRENT ASSETS	37,554,995	38,459,738	(904,743)
ASSETS	85,978,987	87,554,812	(1,575,825)
ACCOUNTS PAYABLE	639,399	2,085,073	(1,445,674)
ACCRUED PAYROLL	379,614	1,046,722	(667,108)
ACCRUED BENEFITS	843,311	209,608	633,703
ACCRUED VACATION PAYABLE	1,688,508	1,678,465	10,043
THIRD PARTY PAYABLES	1,708,504	1,708,504	0
CURRENT PORTION OF LONG TERM DEBT	997,343	1,587,202	(589,859)
OTHER CURRENT LIABILITIES	0	0	0
CURRENT LIABILITIES	6,256,680	8,315,575	(2,058,895)
ACCRUED INTEREST	236,257	322,579	(86,322)
BOND PREMIUM 2008 REFUND	0	0	0
DEFERRED TAX COLLECTIONS	5,988	0	5,988
DEFERRED REVENUE HOME HEALTH	149,920	116,204	33,715
DEFERRED LIABILITIES	392,164	438,783	(46,619)
LTD - 2008 UTGO BONDS	(0)	(0)	0
LTD - 2009 LTGO BONDS	0	0	0
LTD - 2017 REVENUE BONDS	12,989,839	13,399,698	(409,859)
LTD - 2018 REVENUE BOND	5,820,000	6,000,000	(180,000)
LTD - 2018 LTGO & REVENUE REFUND BONDS	2,540,849	2,540,849	0
CURRENT PORTION OF LONG TERM DEBT CONTR.	(997,343)	(1,587,202)	589,859
LONG TERM DEBT	20,353,345	20,353,345	0
NONCURRENT LIABILITIES	20,745,509	20,792,128	(46,619)
FUND BALANCE	58,447,109	58,447,109	0
NET REVENUE OVER EXPENSES	529,689	0	529,689
FUND BALANCE	58,976,798	58,447,109	529,689
TOTAL LIABILITIES & FUND BALANCE	85,978,987	87,554,812	(1,575,825)

Kittitas Valley Healthcare
Balance Sheet and Cash Flow

Statement of Cash Flow

	CASH
NET BOOK INCOME	529,689
ADD BACK NON-CASH EXPENSE	
DEPRECIATION	(744,515)
PROVISION FOR BAD DEBTS	
LOSS ON SALE OF ASSETS	
NET CASH FROM OPERATIONS	(214,826)
CHANGE IN CURRENT ASSETS (\$)	
PATIENT ACCOUNTS	(541,164)
OTHER RECEIVABLES	1,290,851
INVENTORIES	(57,431)
PREPAID EXPENSES & DEPOSITS	(254,596)
INVESTMENT FOR DEBT SVC	343,733
TOTAL CURRENT ASSETS	781,393
INVESTMENTS	(542,476)
PROPERTY, PLANT, & EQUIP.	1,649,258
OTHER ASSETS	0
TOTAL ASSETS	1,673,349
CHANGE IN CURRENT LIABILITIES (\$)	
ACCOUNTS PAYABLE	(1,445,674)
ACCRUED SALARIES	(667,108)
ACCRUED EMPLOYEE BENEFITS	633,703
ACCRUED VACATIONS	10,043
COST REIMBURSEMENT PAYABLE	0
CURRENT MATURITIES OF LONG-TERM DEBT	(589,859)
CURRENT MATURITIES OF CAPITAL LEASES	0
TOTAL CURRENT LIABILITIES	(2,058,895)
CHANGE IN OTHER LIABILITIES (\$)	
ACCRUED INTEREST ON 1998, 1999 UTGO	(86,322)
2008 UTGO REFUNDING BOND PREMIUM	0
DEFERRED TAX COLLECTIONS	5,988
DEFERRED REVENUE - HOME HEALTH	33,715
TOTAL OTHER LIABILITIES	(46,619)
CHANGE IN LT DEBT & CAPITAL LEASES (\$)	
LTD - 2008 UTGO BONDS	0
LTD - 2009 LTGO BONDS	0
LTD - 2017 REVENUE BONDS	(409,859)
LTD - 2018 REVENUE BOND	(180,000)
LTD - 2018 LTGO & REVENUE REFUND BONDS	0
CURRENT PORTION OF LONG TERM DEBT	589,859
TOTAL LONG-TERM DEBT & LEASES	0
TOTAL LIABILITIES	(2,105,514)
NET CHANGE IN CASH	(432,166)
BEGINNING CASH ON HAND	3,142,430
ENDING CASH ON HAND	2,710,264

**KITTITAS VALLEY HEALTHCARE
Capital Expenditure Board Narrative**

Requesting Department: Engineering

Capital Item Requested: Sidewalk and Concrete Repair

Function of Project: Restore walking surfaces to safe condition.

Reason Requested: Uneven sidewalk surfaces create a trip hazard for patients, visitors and employees.

Budget: \$35,754 **Actual Cost:** \$35,754

Submitted By: Ron Urlacher, Director – Engineering

Date: 05/23/19

PATIENT CARE OPERATIONS

Medical Surgical/ CCU:

- The Philips upgrade and installation are completed with a few items yet to be resolved. These are not major hurdles and are expected to be resolved within 2 weeks.

The Swing Bed order sets have been completed and submitted to Cerner. When completed, the team will "test" them prior to going live. All other action items are completed.

Family Birthing Place:

- The Safe Sleep go-live is scheduled for June. The ED and FBP have been collaborating on this initiative. After 3 months of meeting the Safe Sleep criteria, the FBP will apply to be a Safe Sleep certified hospital. Our goal will be "bronze" initially.

FBP is finishing the second training module of the EMPOWER grant bringing the staff breastfeeding education hours to a minimum of 14.5 per staff member. This includes 5 hour of hands on clinical hours. We will then begin our application for breastfeeding friendly Washington "silver" status. We are exploring further opportunities to advance our designation to "gold" or "baby friendly. This includes providers also having completed 3 hours of education. The Lactation prenatal program has been rolled out to Women's health with the other clinics to follow soon.

Emergency Department and Urgent Care:

- Lots of Education in the Emergency Department:
 - ED specific competencies led by the ED Best Practice Committee (6/3/19)
 - Point of Care PT/INR machine (Coverdell Stroke Grant work)
 - Safe Sleep training (partnering with Family Birth Place)
 - Philips Cardiac Monitoring (software upgrade house wide)
 - "Code Stroke" Drill held 5/9 and 5/15 (Coverdell Stroke Grant work)
 - Splint Class held by ED staff members John Yoder, RN and Robyn Watkins, PCT

Dede Utey, RN and Cody Staub, RN presented at the Emergency Nurse's Spring Regional Conference held in Seattle at the end of April. They were part of a panel speaking on Disaster Preparedness. They shared the stage with staff from Harborview and St. Peter's in Olympia. Each facility spoke about a recent Disaster and lessons learned. Once again, KVH represented rural health at a large conference and was able to share the great work we do.

Staff from the Urgent Care is participating in the Health, Wellness and Resource Fair on May 23rd at the Cle Elum Roslyn High School. They will be focusing on Summertime Injury Prevention topics to include helmet safety, water safety and chest compression only CPR.

Patient volume continues to meet expectations in both departments and they have each received praise from patients for the care provided.

Surgical services:

- Wound Care Services has begun using some advanced dressings (cellular and tissue products) and continues to grow in patient numbers.

SOP/OR has been working on education. Recently they went through Malignant Hyperthermia training; a drill should follow shortly, as well as a presentation by the CRNA student on local anesthesia toxicity.

Thank you, Vicky Machorro, Chief Nursing Officer

ANCILLARY SERVICES OPERATIONS

- **Home Health & Hospice:**

The DOH has accepted our corrective action plan for the statement of deficiencies from our CMS Hospice Survey. Our biggest challenge will be conducting a tabletop disaster drill and documenting recommendations to include in our disaster plan based on the lessons learned from the drill.

On April 30-May 2 I attended the Home Care Association of Washington's annual meeting. Many topics focused on the new payment structure for Home Health, which goes into effect January 2020. We have engaged our Performance Improvement Facilitators to help us plan for this transition, which will be a significant change in payment structure.

- **Rehab Services:**

Our open house for OT/ST at the 309 Annex was held from 4-6 PM on Tuesday May 7. Over 30 people attended and the comments on the space and services offered were quite positive.

- **Diagnostic Services:**

We are receiving many positive comments from providers regarding having a radiologist on site M-F for eight hours. Providers are appreciating being able to drop in and consult a radiologist face to face and also noting the quality of reads has greatly improved. We have had a few issues with how quickly exams are reported out, especially afterhours, and are actively tracking those cases as well as any quality concerns or addendums that

need to be made to a study. MDIG has been very engaged and receptive to any concerns brought forward from our providers.

Beginning Saturday May 11 we will be offering mammograms one Saturday per month on a trial basis and tracking if this helpful to pull in new patients.

We've been working with the Performance Improvement Facilitators to improve our front office workflow and phone tree in the Imaging Department. We are currently surveying clinical departments regarding their current level of satisfaction with phone communication with the imaging department. We will survey them again after implementing the changes.

- **Cardiopulmonary:**

We are in the process of onboarding staff to fill all vacant positions in the Cardiopulmonary Department. This will give us 24/7 in house respiratory therapists and be a great asset to the providers and clinical staff at night.

- **Hospital District 2:**

Commissioners are moving ahead with their plans for the new Medic One Ambulance Garage.

- **Swedish Specialty Services:**

Scott Olander is working with Swedish on the terms of the lease termination.

- **Pharmacy:**

We are in the process of implementing split-billing software to allow us to utilize 340B medications on our outpatients (ED, MS, CCU, MOP, etc). We anticipate this to be a significant source of revenue for us.

- **EMS and Trauma Program:**

As the rural hospital representative for WSHA on the State's EMS & Trauma Program Steering Committee, I participated in an assessment of the State's EMS and Trauma Program on April 22-24. A final report with recommended changes will be due to the DOH in 10 weeks. The verbal report out was very strong on the need for additional funding for the EMS & Trauma Program and also on ensuring we have appropriate levels of trauma hospitals and EMS providers across the state.

Thank you, Rhonda Holden, Chief Ancillary Officer

CLINIC OPERATIONS

Population Health/Chronic Care Management:

- We have a group working on this project for Chronic Care Management. They have mapped out the improvement they would like to see and have an action plan of how to achieve the implementation. The team is comprised of nurses who will be rolling this out to Family Medicine Ellensburg/Cle Elum and Internal Medicine.

Expert Lists Ways to Boost Adolescent Immunization Rates:

- This is the title of a Q&A article featuring Dr. John Merrill-Steskal. This was published on April 24th on the American Academy of Family Physicians website. Dr. Merrill-Steskal explains the KVH approach, implemented with standard work he created, by approaching a patient's vaccine status as a vital sign. In other words, the MA's assess if vaccines are needed at every visit.

<https://www.aafp.org/news/health-of-the-public/20190424vaccineq-a.html>

Workplace Health:

- Workplace Health has signed a few new contracts to expand services to patients. We are now doing QTC VA exams. QTC is a company who subcontracts with the VA. We will be known as the only clinic doing this work regionally as Wenatchee and Yakima do not have locations for these exams. These VA exams include: military exiting, disability rating, prisoner of war and retirement exams.

Another contract is with the US Forest Service for fit for duty exams. This exam is to ensure their employees can safely perform necessary duties for work. We are excited to be able to offer our services to both.

Lastly, we are now conducting fit for duty exams for Upper County Fire Department. This is a great addition as we are already conducting these exams for our other fire departments locally. We are excited to be continuously expanding our services and reach.

Family Medicine Cle Elum:

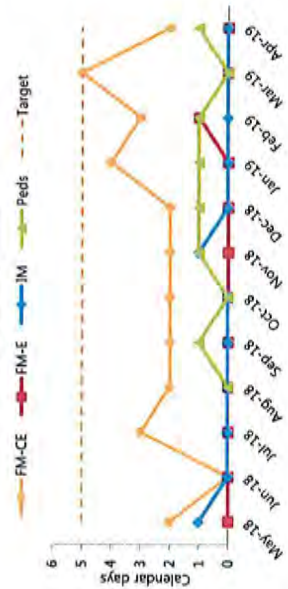
- Construction is complete! We are thrilled to have a full functioning clinic back in Cle Elum. Although we found the reduction of the space did not impact the access to the patients as our patient visits were higher in February and March than what we have seen in previous months. Yet, the office morale was taking quite a beating. So, we are glad to have the clinic back to normal.

We are planning a farewell to Dr. Wise who will be retiring at the end of June. More details coming soon.

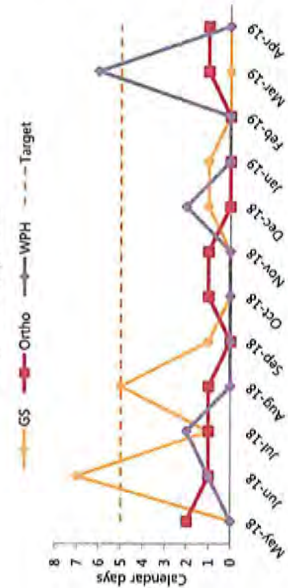
Thank you, Carrie Barr, Chief of Clinic Operations

Clinic Operations Dashboard

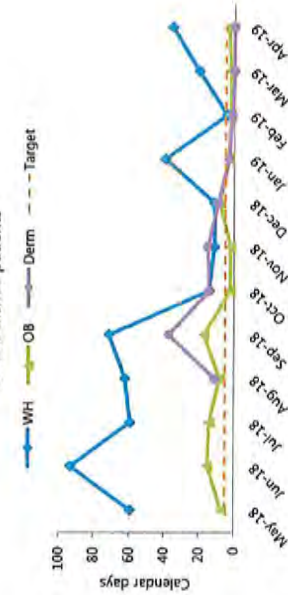
Third available appointment for established patients



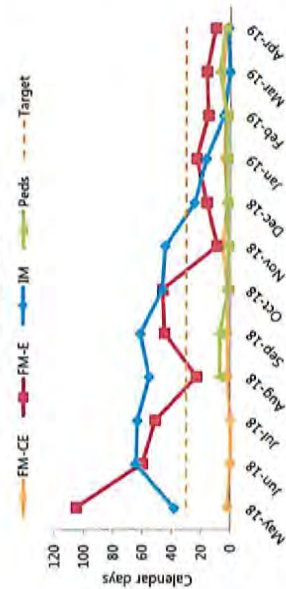
Third available appointment for established patients



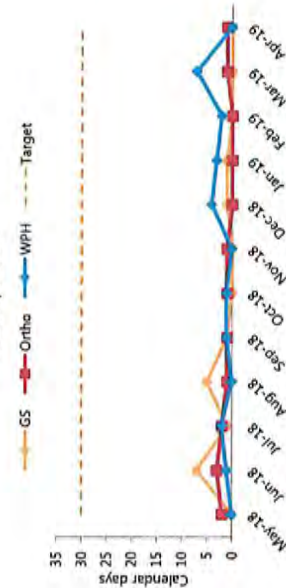
Third available appointment for established patients



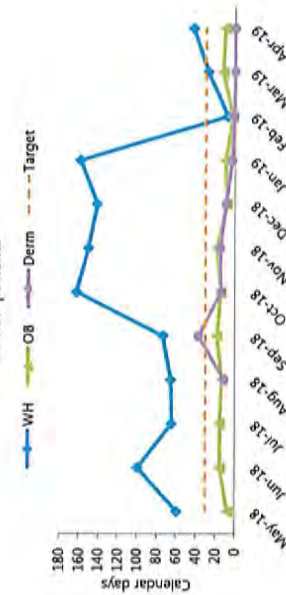
Third available appointment for new patients



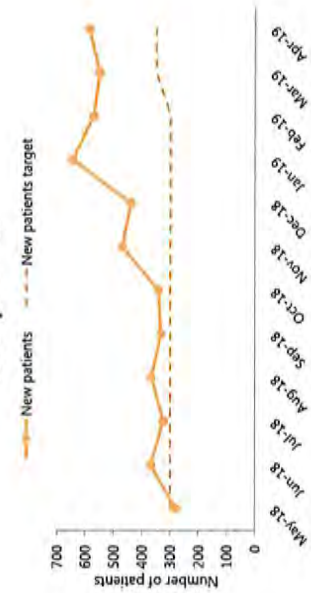
Third available appointment for new patients



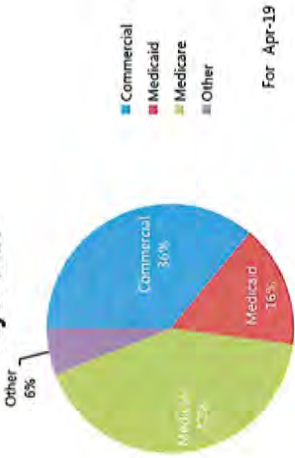
Third available appointment for new patients



New patients



Payor Mix



COMMUNITY RELATIONS – Michele Wurl

April 26 – May 23, 2019

External Outreach activities:

- Foundation Gala (4/27)
- Ellensburg High School Career Day (5/3)
- Speech/OT Open House at 309 Mountain View (5/7)
- Ellensburg Downtown Association Girls Night Out (5/9)
- KXLE Senior Expo (5/23)
- Ellensburg school district 3rd grade tours (5/20-5/22)
- Meditation and Mindfulness with Anita Schiltz (5/23)
- Cle Elum/Roslyn School District Wellness Fair (5/23)

Internal Outreach activities:

- Mother's Day first baby gift
- Hospital Week (5/13-5/17)
- Family Medicine - Cle Elum hardhat celebration event (5/22)

Collaborations & Partnerships:

- Letter for support to Ellensburg School District for a "Comprehensive School-Based Approach to Youth Violence and Victimization grant
- Collaboration with the Washington Association of Community & Migrant Health Centers (WACMHC) on MA Apprenticeship program
- Bares and Broncs (5/18)
- Mentoring CWU Public Relations Intern Arianna Walker in Community Relations through June 7
- Easton Memorial Day Parade (5/25)
- Recreation Jan-April 2019 booklet. (<https://ci.ellensburg.wa.us/DocumentCenter/View/2381/EPR-Quarterly-Program-Guide?bidid=>)

Stories/Letters to the Editor:

- Patient Story Josh Kirk (General Surgery)
- Behind the scenes at KVH blog – Board of Commissioners

Other:

- Bri Botten resigned her position as KVH Events Coordinator in order to stay home with her beautiful newborn twins. We will miss her greatly but wish her all the best. We are working on filling this position as I write this report.
- We have been assisting various departments in the areas below:
 - ✓ Foundation – Gala wrap up
 - ✓ Family Medicine - Cle Elum – Hard hat construction party & Dr. Wise retirement open house
 - ✓ Family Birthing Place Blue bland initiative - development of educational materials for rollout and website
 - ✓ Family Birthing Place – Lactation program marketing materials translations
 - ✓ Swing Bed program – development of educational materials for rollout and website development
 - ✓ Rehabilitation Services – worked with Anne Merrill-Steskal for clinical presentation
 - ✓ KVH Intranet refresh

On the horizon:

- I will be out of the office May 15 – May 28. Jan Powell will be covering urgent issues during my absence.
- Swing Bed program roll out - June
- Hello FISH – May 28

Kittitas Valley Healthcare Board of Commissioners Planning Calendar 2019

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Regular Meeting	24 5pm	28 5pm	28 5pm	25 5pm	23 5pm	27 5pm	25 5pm	22 5pm	26 5pm	24 5pm	12/5 5pm	1/2 5pm
Standing Items	Strategic Plan Refresh	Update Board Ed/Dev Plan	Compliance Plan and Policies		Acceptance of Financial Audit			Approve Budget Assumptions (Operating & Capital)	Board Self-Evaluation	Plan Board Retreat Budget Hearing Annual CEO Evaluation	Approve 2020 Operating and Capital Budgets Approve 2020 Board Committees & 2020 Board Calendar	Update 2019 Operating Budget Election of 2020 Officers 2020 QAPI Approval
Presentation Subject to Change	Business Plan Update	Workplace Violence		FISH Food Bank	Financial Audit & Cost Report DZA Sepsis Total Joint Improvement Work	Community Benefits & Relations	Business Plan Update	Patient Satisfaction	Rehab Visions	Rural Advocacy & Federal Policy Update Business Plan Update		
EDUCATION, CONFERENCES & SPECIAL MEETINGS		AHA Rural Health Care Leadership Conference Phoenix, AZ 2/3-2/6 NRHA Rural Health Policy Institute Washington, D.C 2/5-2/7		IHI Annual Summit San Francisco CA 4/11-4/13 AHA Annual Meeting WA DC 4/7-4/10 CEO/Trustee Summit Seattle, WA 4/29 or 4/30	NRHA Annual Rural Health Conference Atlanta, GA 5/7-5/10	WSHA Rural Conference Chelan 6/23-6/26	AHA Leadership Summit San Diego, CA 7/25-7/27	Gov. Institute Governance Support Forum WA DC 8/4-8/6	NRHA CAH Conference Kansas City, MO 9/18-9/20 Gov. Institute Leadership Conference Colorado Springs, CO 8-11	WSHA Annual Meeting Renton 10/9-10/10 Gov. Institute Leadership Conference WA DC 10/27-10/29		

Board Retreat 5/3 at 2:30pm
Board Retreat 6/23 at 1:00pm

	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC
Events			Provider Appreciation Dinner 3/27	Foundation Gala 4/27/19	Hospital Week & Meal Service 5/12-5/18			KVH Rodeo BBQ 8/21	TETWP Rodeo Event 9/1			
			EBM Workshop 3/29-3/30									
Board Finance	22 7:30am	26 7:30am	26 7:30am	23 7:30am	23 3:00pm	25 7:30am	TBD	20 7:30am	24 7:30am	22 7:30am	12/3 7:30am	31 7:30am
MEC	9 5:15pm	13 5:15pm	13 5:15pm	10 5:15pm	8 5:15pm	12 5:15pm	10 5:15pm	14 5:15pm	11 5:15pm	9 5:15pm	13 5:15pm	11 5:15pm
QI Council		18 3:00pm		15 3:00pm		17 3:00pm		19 3:00pm		21 3:00pm		16 3:00pm
Foundation Board	22 5:30pm		26 5:30pm		28 5:30pm		23 5:30pm		24 5:30pm		19 5:30pm	
Compliance	10 10am	14 10am	14 10am	11 10am	9 3:30pm	13 3:30pm	11 3:30pm	8 3:30pm	12 3:30pm	10 3:30pm	14 3:30pm	12 3:30pm
Strategic Planning	TBD											
Joint Districts						June Mtg will be scheduled						
HD #2	21 6:30pm	18 6:30pm	18 6:30pm	15 6:30pm	20 6:30pm	17 6:30pm	15 6:30pm	19 6:30pm	16 6:30pm	21 6:30pm	18 6:30pm	16 6:30pm

Emerging Topics:

WRHC Initiatives
Kittitas County Health Department
WRHA
ACO
WSHA/AWPHD