



KITTITAS COUNTY PUBLIC HOSPITAL DISTRICT No. 1
BOARD OF COMMISSIONERS' REGULAR MEETING
Meeting in KVH Conference Room A/B/C with a call in option - 5:00 p.m.

Call in by phone: 888 475 4499 **Meeting ID:** 889 3315 0452 **Passcode:** 896068

June 22, 2023

- 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: May 25, 2023 and June 3, 2023 **(3-7)**
 - b. Approval of Checks **(8)**
 - c. Report: Foundation **(9)**
 - d. Minutes: Finance Committee May 23, 2023 **(10-11)**
- 4. Presentations:**
 - a. Rural Healthcare Workforce – Dr. Kevin Martin & Manda Scott
- 5. Public Comment and Announcements**
- 6. Reports and Dashboards**
 - a. Quality – Mandee Olsen, Chief Quality Officer **(12-22)**
 - b. Chief Executive Officer – Julie Petersen **(23-26)**
 - i. Expansion Project Update – Ron Urlacher **(27-28)**
 - c. Operations
 - i. Dede Utley, Chief Nursing Officer **(29-30)**
 - ii. Rhonda Holden, Chief Ancillary Officer **(31-32)**
 - iii. Stacy Olea, Chief of Clinic Operations **(33-37)**
 - d. Medical Staff
 - i. Chief of Staff, Roberta Hoppe, MD
 1. MEC Recommendations for Appointment and Re-Appointment** **(38)**
 2. Point of Care Ultrasound for ED Delineation of Privileges** **(39)**
 - ii. Chief Medical Officer, Kevin Martin MD **(40-41)**
 - e. Finance – Chief Financial Officer - Scott Olander **(42-58)**
 - i. Operations Report
 - ii. Capital Expenditure Request: Power Exam Tables (14)** **(59)**
 - f. Community Relations Report – Michele Wurl, Chief Public Relations Officer **(60-61)**
- 7. Education and Board Reports**
 - a. 2023 Rural Hospital Leadership Conference: June 26-28, 2023 – Chelan
 - b. 2023 American Hospital Association Leadership Summit: July 16-18, 2023 – Seattle
- 8. Old Business**



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9. New Business

10. Executive Session

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

11. Adjournment

Future Meetings

July 27, 2023, Regular Meeting
August 24, 2023 Regular Meeting

Future Agenda Items

KITTITAS COUNTY PUBLIC HOSPITAL DISTRICT No. 1
BOARD OF COMMISSIONERS' REGULAR MEETING MINUTES

May 25th, 2023

BOARD MEMBERS PRESENT: Matt Altman, Terry Clark, Jon Ward, Erica Libenow and Bob Davis

KVH STAFF PRESENT: Julie Petersen, Mandee Olsen, Scott Olander, Dr. Kevin Martin, Stacy Olea, Rhonda Holden, Dede Utley, Ron Urlacher, Dr. Roberta Hoppe, Michele Wurl, Jeff Yamada.

1. The meeting was called to order at 5:00 PM.

2. Approval of Agenda:

ACTION: On motion of Erica Libenow and second of Jon Ward, the Board members unanimously approved the agenda as submitted.

3. Consent Agenda:

ACTION: On motion of Bob Davis and second of Erica Libenow the Board members unanimously approved the consent agenda as submitted.

4. Public Comments/Announcements:

5. Presentations:

President Matt Altman and Vice President Terry Clark awarded two non-clinical SAFE catch awards to Seaira Roberts and Monique Mccready.

6. Reports and Dashboards:

Mandee Olsen, the Chief Quality Officer, presented her report to the Board, focusing on the recent DNV unannounced survey and their findings. Olsen stated that the surveyors commented on how welcoming and transparent our staff was and that we did very well on closing out previous non conformities.

Julie Petersen, the CEO, shared her report with the Board, stating that she recently attended the FME provider meeting and that it went well and was very collaborative and positive. Petersen also asked for Board approval for the 2023 Compliance Work Plan.

ACTION: On motion of Erica Libenow and a second of Terry Clark, the Board unanimously approved the 2023 Compliance Work Plan.

Dede Utley, CNO, delivered her report to the Board, highlighting her busy schedule during the DNV visit. Utley mentioned that we are currently in the process of searching for a replacement for the Emergency Department Director position, with one candidate being seriously considered. Lastly, Utley expressed her positive feedback on AVADE, the de-escalation training program that

we are implementing for our staff, emphasizing its effectiveness. She confirmed that we will continue to prioritize and utilize this crucial training.

Rhonda Holden, CAO, provided an update on her report to the Board, mentioning that our Pharmacy Technicians have been successfully handling 80-100 medication refills per day since the program's launch on Monday. During the discussion, Petersen and Holden responded to Commissioner Davis' question regarding the Emergency Services Consulting International Meeting. They noted that although the perspective of the meeting primarily focused on fire services, half of the report addressed EMS in Upper County. Petersen and Holden further shared that they provided additional information to the ESCI meeting about the relationship between Hospital District 1 and 2, as well as the services offered by each.

Stacy Olea, CCO, presented her report to the Board, beginning with an update on the Rapid Access program. Olea mentioned that we have seen 136 patients since its launch and gave approval for the marketing team to create more awareness in the community about Rapid Access. Commissioner Libenow inquired about whether Women's Health is accepting new patients, but they are not. However, if the issue is complex, they are providing alternative options for referring the patients.

Michele Wurl, CPRO, shared her quarterly report with the Board, specifically on activities planned for the Farmer's Market, and Senior Health Fitness Day.

Jeff Yamada, CIO, presented his quarterly report to the Board, mentioning that Cerner visited two weeks ago with Dr. Michele Flemmings, the senior physician executive for Cerner. Dr. Flemmings made similar comments about our culture as the DNV did, highlighting that we are transparent, friendly, and collaborative.

Ron Urlacher, COF, provided his quarterly report to the Board, focusing on the progress of the Expansion Project. He informed the Board that the air handler conversion for the ED/Admin Wing and Med surge area has been completed, while the remaining work is scheduled for future phases of the Expansion Project. Urlacher further explained several delays that have been encountered, including issues with flooding, contaminated soil, and layout/phasing details.

Chief of Staff Dr. Hoppe, presented the MECs recommendations for initial appointment and re-appointments to the Board. Dr. Hoppe also asked the Board for approval of an updated delineation of privileges for Vascular Surgery.

ACTION: On motion of Terry Clark and second of Jon Ward, the Board members unanimously approved the initial appointments; Guernsey, Paul, DO, Knight, Joan, MD, Padilla, Robert, MD, Shnowske, Kristin, DO, and Wakemen, Karen, MD, and re-appointments; Sand, John, MD, Thomas, Andrew, MD, Chang, Michael, MD, Deffinbaugh, Zach, ARNP, Hauk, Norman, PA-C, and Pelman, Alexander, PA-C, as recommended by the Medical Executive Committee.

ACTION: On motion of Jon Ward and second of Bob Davis, the Board members unanimously approved the delineation of privileges for Vascular Surgery.

Dr. Kevin Martin, CMO, shared his report with the Board, announcing that KVH has reached an agreement with Evergreen Anesthesia. Dr. Martin also commented on the good work done by Dr. Hoppe, Dr. Penoyar and Dr. Zammit to establish the new delineation of privileges.

Scott Olander, CFO, introduced the accounting team to the Board, stating it was their good work that paved the way to have an outstanding audit for the 2022 financials. Olander then introduced Tom Dingus, of Dingus | Zarecor & Associates PLLC, who covered the 2022 financial audit. Lastly Olander went through April's financial performance with the Board, commenting there has been a slight shift from inpatient to outpatient services.

ACTION: On motion of Jon Ward and second of Erica Libenow, the Board unanimously approved to accept the 2022 Financial Audit.

ACTION: On motion of Bob Davis and a second of Terry Clark, the Board unanimously approved the capital expenditure request for the McKesson Vitek2/BacT Alert/Myla Management System.

ACTION: On motion of Jon Ward and second of Bob Davis, the Board unanimously approved the capital expenditure request for the Homecare Homebase EMR

7. Education and Board reports:

8. Old Business:

9. New Business:

10. Executive Session:

At 7:22 p.m. President Altman announced that there would be an 8-minute recess followed by a 20-minute executive session to discuss personnel/property per RCW 42.30.110(b) (g).

At 7:50 p.m. the Board came back from executive session.

ACTION: On motion of Jon Ward and Bob Davis the Board unanimously approved the capital expenditure request for the GE MRI Machine.

11. Adjournment:

With no further business and no action taken, the meeting was adjourned at 7:51 p.m.

Respectfully submitted,

Justin Becker / Jon Ward

Executive Assistant / Secretary - Board of Commissioners

Conclusions:

1. Motion passed to approve the agenda as submitted.
2. Motion passed to approve the consent agenda as submitted.
3. Motion passed to approve the 2023 Compliance Work Plan.
4. Motion passed to approve the Medical Executive Committee Recommendations for Appointment and Re-Appointment.
5. Motion Passed to approve the Delineation of Privileges for Vascular Surgery.
6. Motion Passed to approve the 2022 Financial Audit.
7. Motion Passed to approve the Capital Expenditure request for McKesson Vitek2/BacT Alert/Myla Management System.
8. Motion Passed to approve the Capital Expenditure request for the Homecare Homebase EMR.
9. Motion Passed to approve the Capital Expenditure request for the GE MRI Machine.



KITTITAS COUNTY PUBLIC HOSPITAL DISTRICT No. 1

**BOARD OF COMMISSIONERS' SPECIAL MEETING
Canyon River Ranch, 14700 WA-821, Ellensburg, WA – 9:00 a.m.**

June 3, 2023

BOARD MEMBERS PRESENT: Matt Altman, Terry Clark, Jon Ward, Erica Libenow, Bob Davis

KVH STAFF PRESENT: Julie Petersen, Manda Scott, Dr. Kevin Martin, Scott Olander, Michele Wurl, Mandee Olsen, Dede Utley, Stacy Olea, Rhonda Holden, Jason Adler, Tricia Sinek, Ron Urlacher, and Jeff Yamada

The special meeting was called to order at 9:05 a.m. by President Altman. President Altman announced that the purpose of the special meeting was to review the Strategic Plan.

Each component of the Strategic Plan was discussed: Financial Sustainability, Access, Partnerships & Collaboration and Customer Experience. Administration was charged with refining the Strategic Plan and reporting back to the Board.

With no further business and no action taken, the meeting was adjourned at 3:03 p.m.

Respectfully submitted,

Mandy Weed / Jon Ward
Executive Assistant / Secretary - Board of Commissioners

DATE OF BOARD MEETING: June 22, 2023

ACCOUNTS PAYABLE CHECKS/EFTS TO BE APPROVED:

#1	AP CHECK NUMBERS	<u>293856-294710</u>	NET AMOUNT:	
		SUB-TOTAL:		<u>\$8,302,726.11</u>

PAYROLL CHECKS/EFTS TO BE APPROVED:

#1	PAYROLL CHECK NUMBERS	<u>82109-82110</u>	NET AMOUNT:	<u>\$3,804.96</u>
#2	PAYROLL CHECK NUMBERS	<u>82111</u>	NET AMOUNT:	<u>\$1,966.44</u>
#3	PAYROLL DIRECT DEPOSIT	<u>EFT</u>	NET AMOUNT:	<u>\$1,629,362.18</u>
#4	PAYROLL DIRECT DEPOSIT	<u>EFT</u>	NET AMOUNT:	<u>\$1,622,874.50</u>
		SUB-TOTAL:		<u>\$3,258,008.08</u>

TOTAL CHECKS & EFTs: \$11,560,734.19

Prepared by

Shardell Cummins

 James Sivonen
 Staff Accountant



June

A Breath of Fresh Air - Fundraiser

The Foundation is honored by the community support shown Saturday, June 3, at our Breath of Fresh Air fundraiser dinner and silent auction.

The event was our first gathering since 2019 and we sold out! We have brought in over \$78,000.00 to date with more donations coming.

Thank you to all who attended and we look forward to seeing everyone on Saturday, April 20, 2024 at our next event.

Tough Enough to Wear Pink

In honor of the Ellensburg Rodeo's 100th anniversary, we are creating new merchandise and reimagining the arena presentation with the creation of a new 20'x30' TETWP flag that Foundation and rodeo board members, along with breast cancer survivors and past rodeo royalty will be carrying into the arena.

Donations – Made in Memory

We have been the recipient of several generous donations made in memory of local community members who passed away recently. We are honored by the donors who made gifts in their name.

Respectfully submitted,
Laura Bobovski, Assistant
The Foundation at KVH

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

June 20, 2023

Tuesday

7:30 A.M.

Join Zoom Meeting

<https://zoom.us/j/83760011764>

Meeting ID: 837 6001 1764

Passcode: 275372

Dial by your location

888 475 4499 US Toll-free

877 853 5257 US Toll-free

AGENDA

- **Call to Order**
- **Approval of Agenda**
- **Approval of Minutes: May 23, 2023**
- **May Financial Highlights**
- **COVID Testing Medicare Appeals**
- **Capital Expenditures**
 - **Power Exam Tables (14)**
- **Adjourn**

Next Meeting Scheduled: July 25, 2023 (Tuesday)

Kittitas Valley Healthcare
Audit & Finance Committee Meeting Minutes
May 23, 2023

Members Present: Jon Ward, Bob Davis, Jerry Grebb, Julie Petersen and Scott Olander

Members Excused: None

Staff Present: Kelli Goodian Delys, Jason Adler and Kimme Greenwood

Guests Present: Tom Dingus, DZA

The meeting was called to order at 7:30 a.m.

Two motions were made, one to approve the agenda and one to approve the April 25, 2023 minutes. Both motions passed.

The 2022 financial audit results were presented by Tom Dingus from DZA. KVH received an unmodified opinion.

Olander presented the highlights of the April 2023 financial results. Statistics show a shift from inpatient services to more outpatient services. This is reflected in revenue. Expenses exceeded budget and are reflective of volume. Temporary labor is trending down, while the use of locums continues. The result is an operating income of \$302,404 for April 2023. With non-operating being positive, the April 2023 net income is \$583,445. Days cash on hand is 210. The details are in the Chief Financial Officer Report.

The committee recommends the capital requests for the Vitek 2 – Microbiology Analyzer with Blood Culture and MRI move forward to the Board of Commissioners.

With no further business, the meeting was adjourned at 8:55 a.m.



QUALITY IMPROVEMENT REPORT – Mandee Olsen, BSN RN CPHQ

June, 2023

DNV Year 1 Survey Final Report and Corrective Action Plan (CAP)

DNV conducted their survey of KVH Hospital on May 23 and 24. This was our second survey to CMS Conditions of Participation/NIAHO. We received our final report on June 7th which included 8 non-conformities. We have 10 calendar days to complete and return a corrective action plan. Teams of leaders and staff have been meeting, and we plan to submit our CAP on June 15th. The teams have already been working on resolving issues identified, and in fact, a few are already corrected. DNV will review and communicate with us any clarifications or changes needed to approve the plan. We have until July 23 to complete corrective actions, and for five of the non-conformities, we will need to provide evidence of sustained compliance within 60 days of acceptance of the CAP.

Survey of Patient Safety Culture

Huge thanks to Amy Diaz for building the AHRQ-based survey (twice!) and administering it to our staff. And thanks to her, in advance, for the analysis we look forward to. On Thursday, June 8th, we surpassed our goal of 80% participation. The clinic and hospital versions were sent to 634 staff, and we received 522 completed surveys, for an overall rate of 82%. Amy will be validating the data prior to doing analysis. The data and analysis will be reviewed at upcoming Admin Team meetings. We will further explore actions, and determine how we will communicate results and planned actions with staff, all of which will be presented to QI Council August 14th.

Infection Control and Prevention (ICP) Updates

- Inpatient COVID testing - We discontinued routine COVID testing of all admissions and surgical patients. Patients who are symptomatic, who have exposure risk, or who are being transferred to another facility may still be tested by physician order. An interdisciplinary group came to this decision after having zero asymptomatic COVID cases since April 1st, and we are seeing insurance denials of COVID surveillance testing.
- Rhinovirus and strep throat are circulating in numbers far exceeding COVID, and we saw multiple influenza cases over the last few weeks. Wash those hands!
- Speaking of hands, we did have a finding on our DNV survey related to hand hygiene. The ICP team is introducing an all-hands-on-deck approach and implementing direct observation audits with ED, SOP/Surgery, FBP, MedSurg, Imaging, Lab, Cardiopulmonary, Pharmacy, Dietary, and Housekeeping. IT has helped us make a convenient electronic data form, ICPs have beefed up department rounding with additional observations, and education will be rolling out in Announcements, Just-In-Time Coaching, and a “summer school” DNV-focused education fair August 10th.

Employee Health Updates



- Employee Health is implementing a new electronic system called Immuware, for monitoring compliance to the employee health requirements (vaccines and/or titers, TB testing, annual TB assessment, mask-fit testing). Immuware will help KVH staff and leaders more easily submit and retrieve immunization history, complete annual requirements, check for compliance, and remind staff of items due. Immuware is in testing with WAIS to both send and receive data from the state immunization registry. The planned pilot for Immuware begins June 26th, with roll-out to all current and new staff midsummer.
- We recently completed our required organizational TB risk assessment and policy revisions, which applies to both patients and employees, and covers both active and suspected cases. KVH works closely with Kittitas County Public Health Department on these cases, and we have had the opportunity to test out our new processes just this month.

Quality Department Staffing

Though we are sad for ourselves, we are very excited for Linda Navarre to get to spend more time with family as she retires September 7, 2023. Linda has a long history at KVH, both in her family and her own career. She came to us from the health department in 2012 in the newly created position of Risk Management/Peer Review Coordinator, and has been an incredible resource, coach, and advocate during her tenure here. She has managed some of the most challenging cases for our organization, and always does so with tenacity, grace, and respect. We appreciate her service.

In the coming weeks, we will be reviewing the position to determine how the role may have changed with all the growth of the organization in the last 10 years, before we begin our search for a replacement.

Quality Improvement Dashboard Data Summary – through April 2023

Summary of Areas Meeting Goal or Showing Improvement

- o Days to referral completion in clinics remains at or very close to goal across all clinics. Outgoing referral volumes remain high at the primary care clinics.
- o The fall risk screening and diabetic foot check rates continue to improve each month. These have been focus areas for clinic providers; the change over the past 12 months is remarkable and reflects the efforts of the clinic teams.
- o The improvement in the management of oral medications for home health patients discharged during the month of April 2023 was near goal and the state average. Of the patients who did not improve, none had a decline in their management of oral medications.
- o Charting of suicide risk assessment/intervention bundle was at 91% in the month of April 2023. This is below goal of 100% but one of the highest rates in the past year. Education with staff about the Columbia Suicide Severity Rating Scale is ongoing.



- There were no adverse medication events.

Summary of Improvement Opportunities

- We continue to have instances where restraint orders or documentation are missed. In one of the two failures this month, a restraint order was discontinued after a patient was transferred from the Emergency Department to the Critical Care Unit and not reactivated for several hours.
- There were two needlesticks in the month of April. In one case, the needlestick came from a pre-filled pharmacy device that has been the topic of national conversation. There is no other option for administration other than using the pre-filled device.
- There were 12 workplace violence events. Four of the events were staff-on-staff.

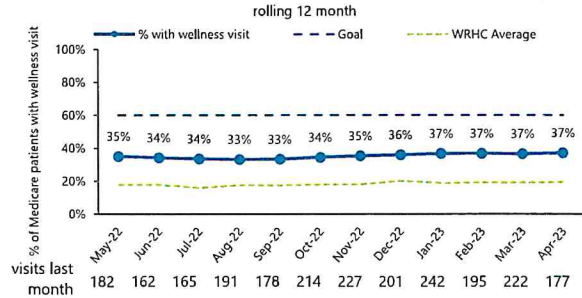
Patient Stories

"I want to express my appreciation for the kindness and excellent care provided by our attending nurse, Jessica Rosenkranz, during my wife's [orthopedic] stay... My wife was experiencing a high level of pain and nausea, and her condition warranted the need to be admitted until the following day to monitor and manage these issues. Jessica was assigned to care for her during this time and demonstrated a high level of professionalism, competence, caring, and honesty. She recognized the need to be admitted based on the safety and pain management needs of my wife and discussed this with me thoroughly before recommending admittance to Dr. Longo. Her attentive skills in monitoring my wife's condition, expertise in her skills, and willingness to address any of our concerns or needs were exemplary. The following morning after being transferred to a general room, she took time to check back in with my wife to be sure she was doing ok and gave her a hug before she left. Jessica represented her profession and your hospital very well in the level of care provided."

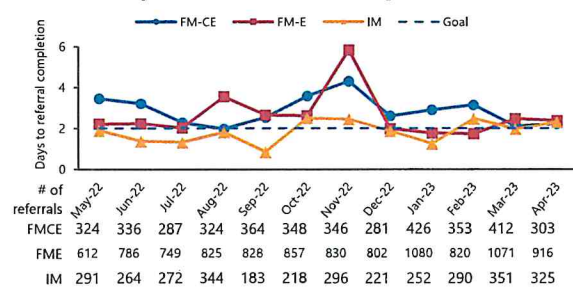
- Spouse of KVH Surgical patient to RN Jessica Rosenkranz

QI Council

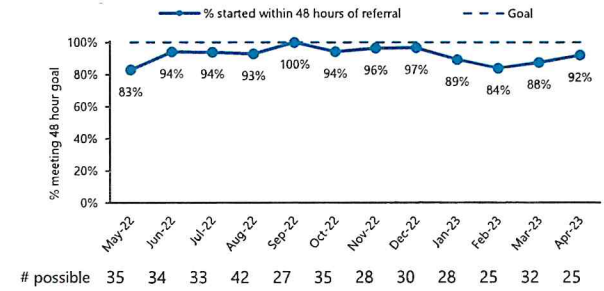
Medicare Wellness Visits ↑



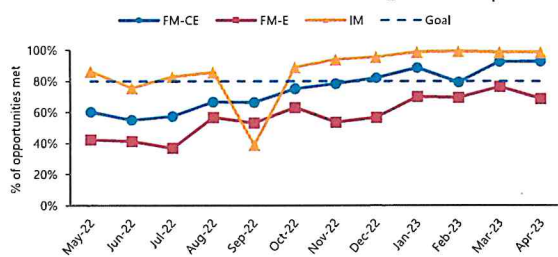
Days to Referral Completion ↓



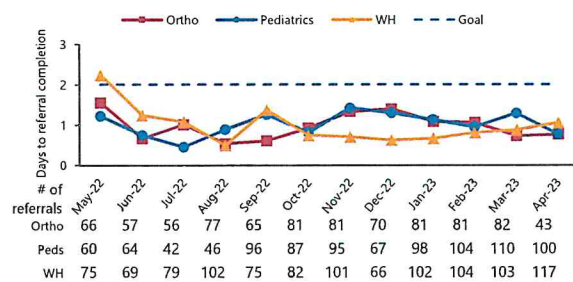
Timely Start for Home Health ↑



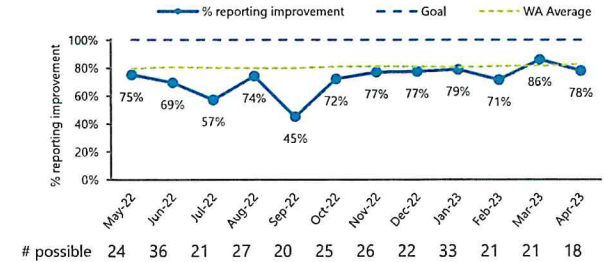
Fall Risk Screening ↑



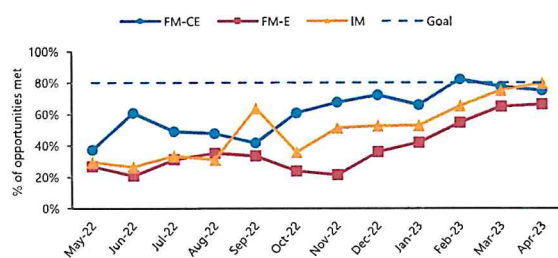
Days to Referral Completion ↓



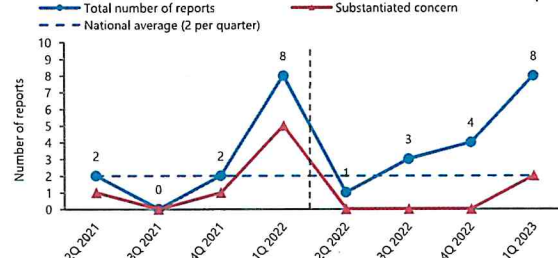
Improvement in Management of Oral Meds (Home Health) ↑



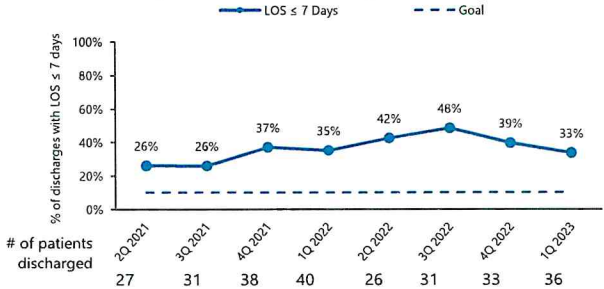
Diabetic Foot Checks ↑



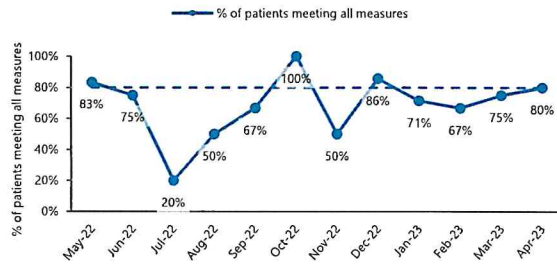
Compliance Concerns Reported ↑



Hospice Length of Stay ≤ 7 Days ↓

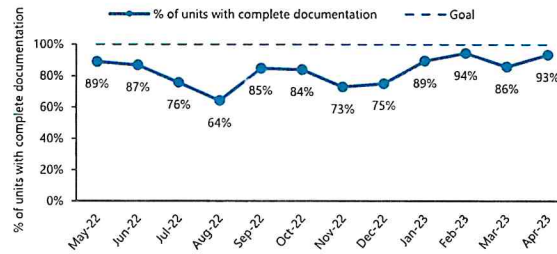


Sepsis Bundle ↑



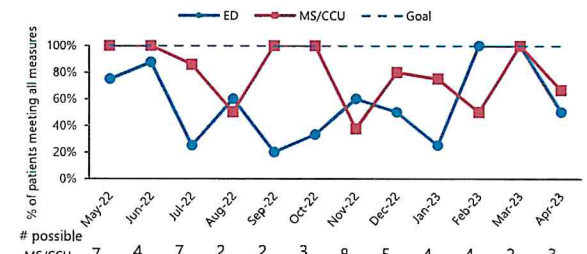
possible 6 4 5 8 3 2 2 7 7 6 4 5

Blood Product Documentation ↑



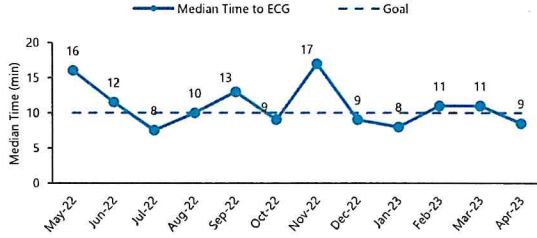
of units 18 15 41 25 13 37 22 40 28 35 28 59

Restraints Bundle ↑



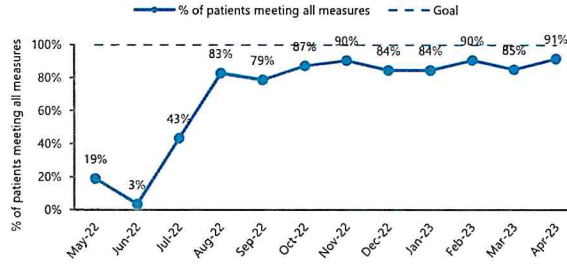
possible MS/CCU 7 4 7 2 2 3 8 5 4 4 2 3
ED 8 8 12 5 5 3 5 2 4 1 3 2

Median Time to ECG (Chest Pain) ↓



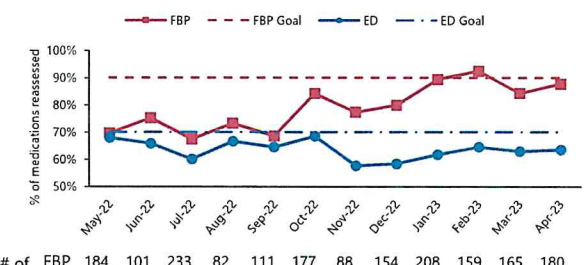
possible 10 8 6 10 10 13 8 7 7 4 11 4

Suicide Risk Assessment/Intervention Bundle ↑



possible 32 31 44 46 42 46 31 32 45 42 33 35

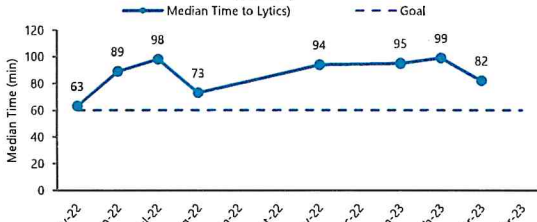
Pain Reassessment after Medication ↑



of FBP 184 101 233 82 111 177 88 154 208 159 165 180
ED 508 468 536 240 440 536 467 622 569 565 681 674

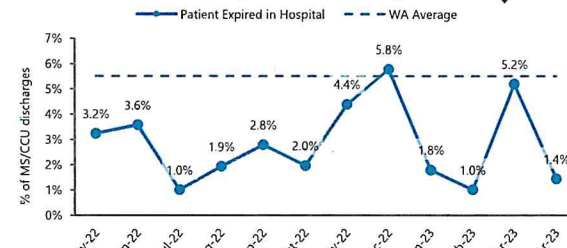
*Aug and Sep 2022 are incomplete data, report error, cannot be regenerated or recovered

Median Time to Lytics (Stroke) ↓



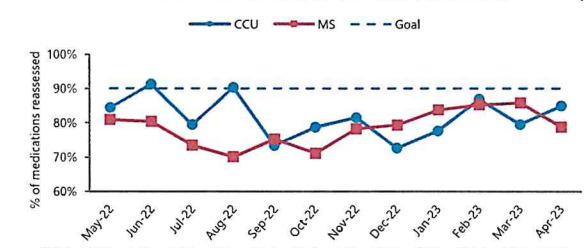
possible 1 1 1 1 0 0 2 0 1 1 2 0

Hospital Mortality ↓



deaths 4 4 1 2 3 2 5 6 2 1 7 2

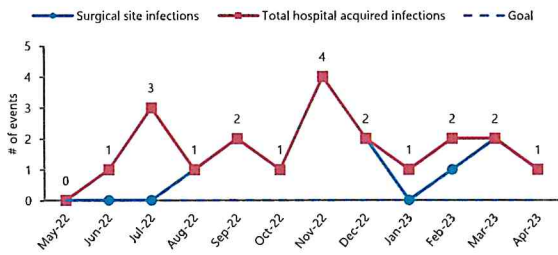
Pain Reassessment after Medication ↑



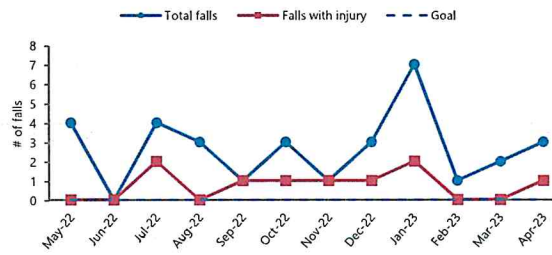
of CCU 154 148 277 93 244 141 146 157 228 137 156 213
MS 517 522 564 243 532 460 344 643 504 551 565 527

*Aug and Sep 2022 are incomplete data, report error, cannot be regenerated or recovered

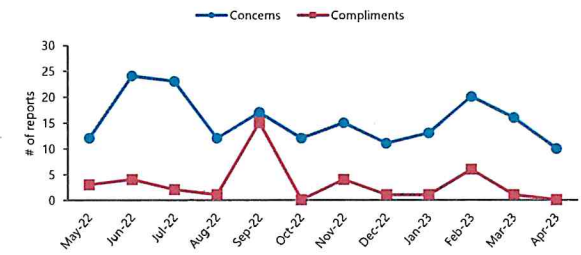
Hospital Acquired Infections



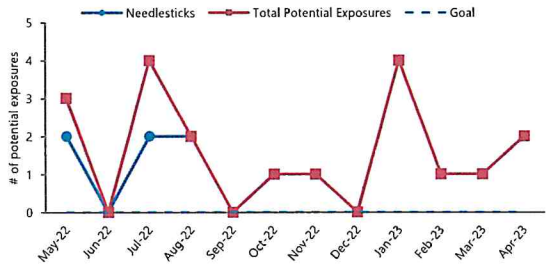
Falls



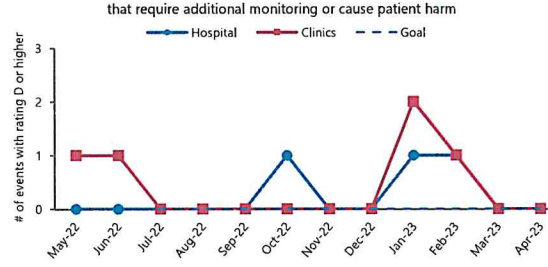
Care and Service Reports



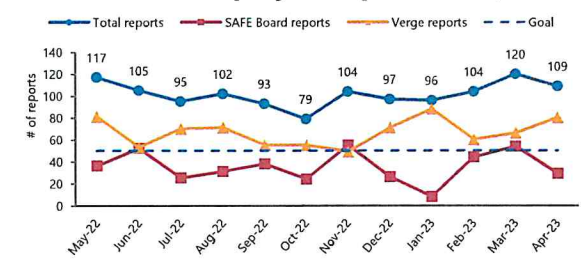
Potential Bloodborne Pathogen Exposures



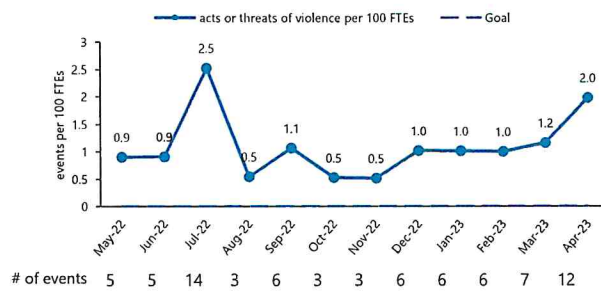
Adverse Medication Events



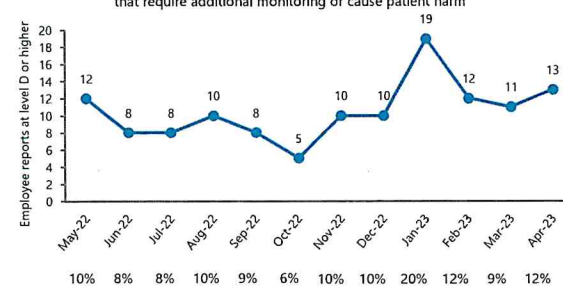
Employee Reports



Workplace Violence Events



Reports of Occurrences



KVH Quality Improvement Council Dashboard Glossary

KVH Measure Name	Components of the Measure	Simplified explanation or additional information	Other things to know
Medicare Wellness Visits	<p>Numerator: The number of traditional Medicare patients who have received a Medicare Wellness Visit within the previous 12 months</p> <p>Denominator: The total number of unique traditional Medicare patients who have been seen at KVH Family Medicine - Cle Elum, KVH Family Medicine - Ellensburg, or KVH Internal Medicine in the previous 12 months</p>	<p>Medicare Wellness Visits are an opportunity for patients with Medicare to develop or update a personalized prevention plan with their care team. This might include:</p> <ul style="list-style-type: none"> ▶ A review of medical and family history ▶ Developing or updating a list of current medications ▶ Height, weight, blood pressure, and other routine measurements ▶ Cognitive impairment screening ▶ Personalized health advice ▶ A screening schedule (checklist) for appropriate preventive services like cancer screenings 	<p>Visits can only cover preventive care. They cannot address current medical concerns. All traditional Medicare patients seen in these three clinics are included, even if they receive their primary care elsewhere.</p>
Fall Risk Screening	<p>The percentage of eligible patients who were due for and received a fall risk screening during their clinic visit</p>	<p>Patients age 65 or older are recommended to have a fall risk screening at least every 12 months</p>	
Diabetic Foot Checks	<p>The percentage of eligible patients who were due for and received a foot check during their clinic visit</p>	<p>Patients with diabetes are recommended to have a foot check at least every 12 months</p>	
Days to Referral Completion	<p>The number of calendar days to referral completion for KVH clinic patients</p>	<p>Based on month of referral order date. Only referrals that have been processed/sent are included in data.</p>	<p>ENT, General Surgery and Workplace Health are excluded due to small number of referrals</p>
Compliance Concerns Reported	<p>Blue line (circles): The total number of compliance concerns reported</p> <p>Red line (squares): The subset of total compliance concerns reported that were substantiated concerns</p>		
Timely Start for Home Health	<p>Percentage of new home health patients who are seen within 48 hours of referral</p>	<p>Patients who have referrals for care should be assessed and have care started promptly</p>	
Improvement in Management of Oral Medications (Home Health)	<p>The percentage of patients who are discharged from home health services during the month who experienced an improvement in their management of oral medications.</p>	<p>Patients answer questions at the beginning and end of a home health care episode using a screening questionnaire known as OASIS (Outcome and Assessment Information Set)</p>	<p>Tracked by the month of patient discharge from service</p>

KVH Quality Improvement Council Dashboard Glossary

KVH Measure Name	Components of the Measure	Simplified explanation or additional information	Other things to know
Hospice Length of Stay ≤7 Days	The percentage of hospice patients who were on service for seven days or less prior to discharge due to death or service discontinuation	A greater length of service can provide better pain and symptom management for patients and emotional support for the patient and caregivers	Tracked by the month of patient discharge from service
Sepsis Bundle	Percentage of inpatients with sepsis, severe sepsis, or septic shock who received all applicable components of the sepsis bundle	<ol style="list-style-type: none"> 1. Received within three hours: initial lactate level measurement, broad spectrum or other antibiotics, blood cultures drawn prior to antibiotics; 2. Received within six hours: repeat lactate level measurement if initial lactate level was elevated; 3. Received within three hours: crystalloid fluid bolus if indicated; 4. Received within six hours: vasopressors if indicated 	
Median Time to ECG (Chest Pain)	Median time from arrival to ECG for patients with chest pain who are admitted to KVH Hospital or transferred	Arrival means the first documented activity in the Emergency Department. At KVH, this is usually a registration/quick registration entry. Time measured from when patient arrived to time ECG is charted as "signed" or "completed."	
Median Time to Lytics (Stroke)	Median time from arrival to receipt of lytic medication for patients with stroke	Arrival means the first documented activity in the Emergency Department. At KVH, this is usually a registration/quick registration entry. Time measured from when patient arrived to time of medication administration	

KVH Quality Improvement Council Dashboard Glossary

KVH Measure Name	Components of the Measure	Simplified explanation or additional information	Other things to know
Blood Product Documentation	Percentage of blood product units that have complete documentation in the patient's electronic health record	Items that must be documented to be considered complete include: start time, stop time, if the patient had a reaction to the transfusion, pre-transfusion vital signs, vital signs 15 minutes after transfusion started, post-transfusion vital signs, and documentation of a consent. Vital signs include temperature, blood pressure, respiration rate and pulse. Numerator is number of blood product units considered complete. Denominator is total number of blood product units given.	
Suicide Risk Assessment/ Intervention Bundle	Percentage of patients with mental health issues who have all appropriate components of a suicide risk assessment/intervention bundle included	Measures for suicide risk assessment/intervention bundle include: <ul style="list-style-type: none"> ▶ Columbia Suicide Severity Rating (CSSR) assessment completed ▶ CSSR charted ▶ Order created for suicide precautions (if moderate or high risk) ▶ If precautions order placed: Environment made safe/SI precautions in place AND frequency of documentation achieved per policy AND sitter documentation completed (if appropriate) 	
Hospital Mortality	Percentage of discharges from MS or CCU where the discharge disposition is expired	Excludes patients receiving hospice services or visits where admitting provider note states comfort measures only	Includes inpatient, observation, and swing bed encounters for MS and CCU units only
Restraints Bundle	Numerator: Number of patients who met all possible measures for restraints Denominator: Total number of patients in restraints	Measures for restraint use include: <ul style="list-style-type: none"> ▶ Initial restraint order written ▶ Restraint problem added to care plan (MS/CCU only) ▶ Restraint orders continued/signed within appropriate timeframe ▶ Restraint charting/assessment done as frequently as appropriate for the reason for restraint 	

KVH Quality Improvement Council Dashboard Glossary

KVH Measure Name	Components of the Measure	Simplified explanation or additional information	Other things to know
Pain Reassessment after Medication	Percentage of patients in certain hospital units who had a documented follow up assessment of their pain level after receiving pain medications	Patients should be followed up with to assess whether administered medications are reducing their pain. Follow-up should occur within 60 minutes of medication administration, <i>except</i> oral medications in the Emergency Department should be followed up within 90 minutes.	IV Tylenol is currently excluded from this measure, scheduled pain medications for FBP patients are excluded
Hospital Acquired Infections	Red line (squares): Total number of infections contracted by an inpatient as a result of care or treatment provided during their hospital stay. Includes CAUTIs, CLABSIs, VAEs, and SSIs. Blue line (circles): The subset of the total infections that were SSIs	Inpatient infections from urinary catheters, certain types of intravascular devices, ventilators or surgeries. Based on criteria from the National Health and Safety Network (a division of the Centers for Disease Control and Prevention). Includes superficial surgical site infections, which are not included in Washington State Hospital Association comparison reports.	CAUTI: Catheter-associated urinary tract infection CLABSI: Central line-associated bloodstream infection VAE: Ventilator-associated event SSI: Surgical site infection
Potential Bloodborne Pathogen Exposures	Red line (squares): Number of potential staff exposures to bloodborne pathogens by any route Blue line (circles): The subset of the total exposures that were needlesticks/sharps injuries	Total potential exposures: All reported potential exposures, including needlesticks, splashes, Needlesticks: Total number of staff who experience a sharps injury during the month	Dependent on reporting by staff
Workplace Violence Events	Number of harm events related to workplace violence per 100 FTEs	As defined by the Occupational Safety and Health Administration, workplace violence includes any act or threat of physical violence, harassment, intimidation or other threatening disruptive behavior that occurs at the work site.	Threats and verbal abuse are included as events.
Falls	Blue line (circles): The total number of patient falls anywhere in the organization Red line (squares): The number of patient falls that result in any injury	Injuries are defined as anything that requires the application of a dressing or bandage, ice, cleaning of a wound, limb elevation, or topical medication	Non-patient falls are not included (employee falls, visitor falls, parking lot falls); near misses are not included
Adverse Medication Events	The number of medication events that are Category D or greater, separated by setting of clinics or hospital	A Category D error is an error that reaches the patient and requires monitoring to confirm that it did not results in harm to the patient and/or required intervention to preclude harm	Unanticipated medication allergies can be included in Category D or greater medication events

KVH Quality Improvement Council Dashboard Glossary

KVH Measure Name	Components of the Measure	Simplified explanation or additional information	Other things to know
Reports of Occurrences	Percentage of employee reports of a Category D or higher	A Category D error is an error that reaches the patient and requires monitoring to confirm that it did not result in harm to the patient and/or required intervention to preclude harm	
Care and Service Reports	The number of care and service patient reports submitted to the Quality Department, separated by concerns and compliments	CMS' conditions of participation in the Medicare program include certain policies and procedures regarding the receipt of and response to grievances	
Employee Reports	The number of employee reports submitted through Verge or on department SAFE Boards	Verge is the electronic occurrence reporting system used at KVH. SAFE Boards are also used for reporting, but typically contain items of lower severity.	

Chief Executive Report June 2023

Survey of Patient Safety

82% participation is really hitting it out of the park. I haven't seen even preliminary results yet but I am looking forward to digging in to the data. Please consider whether the Board will want a special meeting to review the results or if we should plan to present results as part of the July/August meeting.

Thank you for your help with the turn out and with the ice cream celebration. A huge thank you to Winegar's Dairy for the surprise donation of the ice cream.

All Things Hospital District #2

We are still waiting for an update on the cost to build out the first floor to accommodate therapy services. Hospital District #2 will close on the property July 11.

We continue to challenge both the underlying assumptions in the 47 Degrees North environmental impact statement as well as their proposed cure which appears to be, "let's wait and see"? It appears that there will be turn over in Cle Elum City Council but we are continuing to make our case.

The discussion about fire district consolidation/aggregation continues but, again, the election could influence that outcome. The Kittitas County Conference of Governments will be taking up the issue at a future meeting.

HD#2 will be entering into negotiations with IAFF4880 in the coming weeks. In 2022 we settled on a one year wage opener. Our intent is to negotiate a full, three year contract before this fall.

Anesthesia Services

Evergreen Anesthesia is actively credentialing (13) and recruiting in anticipation of their September start date. They toured KVH this week to meet with surgery leadership and staff and with our current anesthesia providers. I understand that the anesthesia call schedule is complete through August.

Board Retreat

Thank you for your time on Saturday. It was a long, fruitful day. Senior Leadership has met to sort and schedule work for the coming month on the four strategies as well as the Clinic Strategic Plan. Stay tuned for more work.

DNV

The DNV survey was a whirlwind event. We are still learning what to expect from their process. We have received their report of deficiencies back and we have submitted or plan of correction. Most of the work is very routine but I believe we will be bringing a discussion about discharge planning to the Board (Dede) and also the organization of our quality management structure (Mandee).

Wrapping Up All of Our June 3rd Events

June 3rd was a very busy day. The Foundation event was a huge success. Thank you to Laura and her Board. It is apparent to me that people welcome the opportunity to mingle and party again after three long years. It is also apparent that they are feeling generous; the Foundation grossed more than \$70,000 on the event.

KVH was well represented at all of the Pride events. We are looking forward to next year.

All About Advocacy

Members of Congress should be back in their districts for most of August. Representative Schrier is on the powerful Energy and Commerce Committee and on the Health Sub-committee. Bills that adversely impact KVH on both site neutral and 340B have emerged from the Health subcommittee. I have asked WSHA to help us set up a meeting while Schrier is in district. More to follow. I will have dates for Rural Advocacy Days in DC before the Board meeting₂₃

Future of OB Meeting

At the request of Dr. Holly Dawson, KVH hosted a meeting of providers and others to discuss the future of women's healthcare in Kittitas County.

Dr. Dawson and Dr. Wageneck from KVH Women's Health were joined by Doctors Wright, Stone and Casey from Family Medicine Ellensburg as well as Doctors Anderson and Young from KVH Pediatrics. CHCW was represented and Dr. Bredin and Dr. Wise also attended.

Doctors Kevin Martin and Jonathan Hibbs represented physician leadership. Chief Nursing Officer Dede Utley and Director of Family Birth Place Stacey Botten, Jason Adler and Michele Wurl were also present along with Commissioner Jon Ward.

Mandee Olsen facilitated the meeting with the stated goal of "continue to provide quality maternity care to our community".

The discussion was very positive and forward looking.

Human Resources & Staff Development- June 2023

May 2023 Metrics

<i>Employee Population</i>				
	<i>23 - May</i>	<i>23-Apr</i>	<i>23-Mar</i>	<i>23-Feb</i>
Full-time	511	513	505	505
Part-time	112	116	118	121
Total Employees	760	767	754	764

<i>Turnover</i>			
	<i>YTD</i>	<i>23-May</i>	<i>2022 Year End</i>
Turnover (People)	83	21	149
Turnover (Percentage)	10.8%	2.76%	20%
Voluntary	76	17	140
Involuntary	7	4	9

<i>General Recruitment</i>				
	<i>23-May</i>	<i>23-Apr</i>	<i>23-Mar</i>	<i>23-Feb</i>
Open Postings	19	25	19	18
Unique Applications Received	158	156	145	144
Employees Hired	16	19	10	13
Time to Fill (Median)	40.5	55	234	27
Time to Fill (Average)	73.88	78.64	243.2	83.4

<i>Annual Evaluations</i>	
	YTD
Percent complete	81.2%
Total evaluations over due	124
# of employee evals over due	101
# of provider evals over due	23

Recruitment: May was a slightly slower month in terms of postings, only 16. We posted our latest round for the MA Apprenticeship program and had nearly 20 applicants. We have three openings at this time; two at FME & one at FMCE. We are actively recruiting for the Director of Emergency Services, we have a candidate that was here for a site-visit and will be following up.

Student and Volunteer Services: Currently we have 22 learners on-site from the following groups: 2 Pharmacy students, 2 Nursing students, 8 Imaging Tech students, 1 Medical Laboratory Technician student, 2 Job Shadow students, 1 Physical Therapy student, 1 Certified Registered Nurse Anesthetist Student, 1 Physician Assistant student, and 4 Nurse Practitioner students. The Physical Therapy Student rotating with us is the first student rotation we've had from the new Pacific Northwest University School of Physical Therapy. We also have a physical therapy student from Spokane Community College scheduled to rotate with us in the Spring of 2024. It is exciting to see Physical Therapy Students on-site and we hope to recruit and retain some of them to meet our community needs for physical therapy!

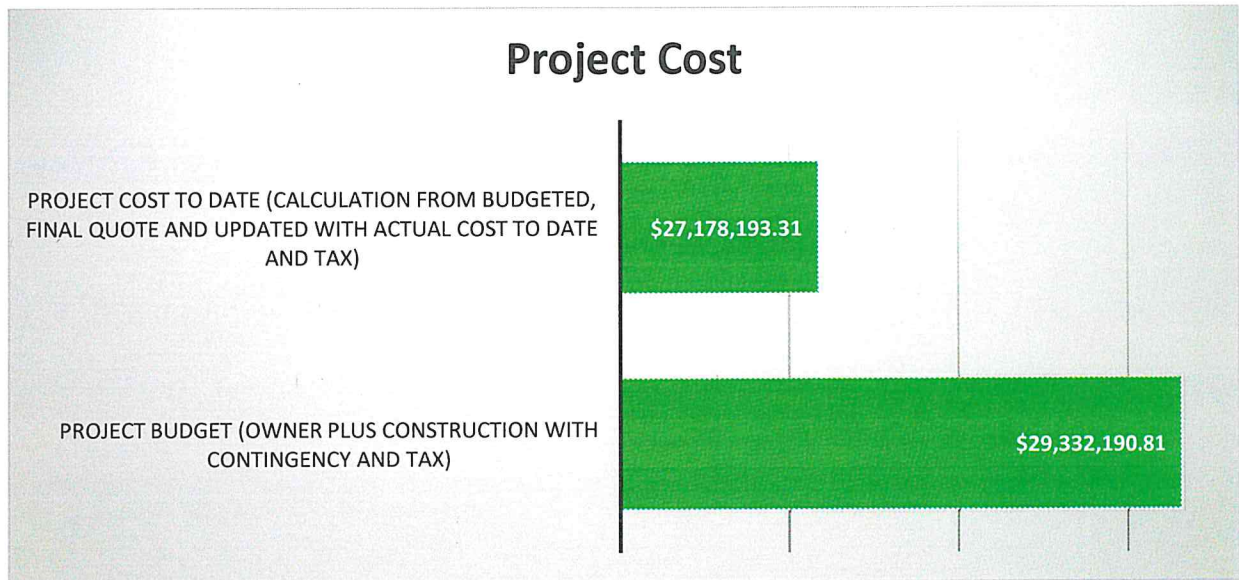
We have been preparing for the Experience Healthcare summer program for High School students between their Junior and Senior years. The program is focused on helping students learn about the wide range of healthcare career opportunities and includes hands-on training, job shadows and opportunities to learn about local secondary education programs with a focus on healthcare. Experience Healthcare was last held in 2019 and then was put on hold due to COVID. This year we are re-starting the program, it will be held July 17-21, 2023.

We've been doing outreach to recruit more volunteers, especially volunteers to the Caring Canines animal therapy program. Barrett and Katy, our animal therapy team have been at the farmer's market twice in the past month to recruit more volunteers. Caring Canines has been incredibly popular with patients and staff.

Benefits: We will be re-activating the Benefits Advisory Committee later this summer. We want to continue to come up with creative ways to provide benefits to our staff.

Staff Engagement/Recognition: We celebrated Healthcare Week in May. We had a couple of free food days, a treasure hunt for staff, and many raffles and giveaways. It was a good time, as always!

KVH Surgical Services, Materials Management and Radiology Expansion Project



Current Challenges

The fire main for the existing 2000 addition crosses the excavation and cannot be physically supported during this work.

The fire main has to be in service at all times other than short duration outage. The result was new fire main that enters the building outside of the construction area and goes around the construction excavation zone. The fire main is expected to complete next week hinging on city approval for a change in design at the city main.

Due to project delay we are facing foundation construction with higher water table. How high the water table will be and the flow rate from ground to the excavation area is unknown. We are working through preliminary and advanced dewatering tactics. Project delays have already been realized. Dewatering plans is now in place and will require a temporary retention pond at the west end of the property.

Though winter is still off a ways we will be have to come up with a plan to mitigate storm water on the existing roof system and the new roof as the storm drain system will be incomplete.

Finding pathways for new electrical and plumbing lines in the existing tunnel system is challenge due to existing active and decommissioned lines. We are looking at doing selective demolition of legacy lines to make room for new. This will involve some asbestos abatement. The other factor is not boxing in utilities such as sewer and water knowing they have to be replaced at some point.

In the OR area we have expansion project work as well as the Energy project work that will be happening concurrently. We are in the process of marrying the 2 schedules with as little impact to KVH work flow and either project.

Note: Schedule is set now baring time impactful change orders so future reports will have owner equipment coordination status.

Patient Care Services
June, 2023

Clinical Education/Staff Development-Deb Scheib & Babbi Mundy

- New Employee Clinical Orientation (NECO):
 - Reoccurring
- KVH Senior Health and Fitness Day at the Park, May 31st:
 - Babbi had a Falls Prevention Booth, with flyers and a poster presentation
- Yakima Valley Community College 2nd Quarter Nursing Students:
 - Babbi is planning for Fall Quarter and will be collaborating with a new Clinical Instructor as Peggy O'Neil is retiring from YVC
- Heritage University Junior Baccalaureate Nursing Students:
 - Babbi is coordinating with Heritage and Stacey Botten to arrange for 2 Nursing students to have their clinical rotation here at KVH this summer

Medical/Surgical & CCU-Jeff Holdeman

- Working on quotes for med surg and ccu bed replacement
- Continuing to work on patient monitoring house wide update with either Philips or Mindray
- Struggling to find CNA applicants. Currently have 7 open CNA nightshift positions posted with no applicants. Had to get contract travel CNA's to work to fill positions.

Food Nutrition Service-Jim Gallagher

- Foods Service
 - Staffing – Continue to be fully staffed until later in June when two resignations will occur
 - Café – Continue to see a slight but steady increase in demand. Remodel has been working well
- Clinical
 - Continue to provide virtual dietitian services to Snoqualmie Valley Hospital and Lincoln County Hospital
 - New per diem dietitian, Maria Ximena Williams, started in early June.
- Nutrition and Diabetes Education
 - Participated in the Senior Wellness event last month
 - A CWU dietetic intern completed her rotation in May and June
 - Referral numbers continue to be consistent

Surgical Services-Amy Krogstadt

- We are excited for the upcoming partnership with the EPICC team-backup support for PICC line placement. I know SOP staff are excited about working with them, and some of the education that can be available
- Surgery and Endo volumes remain high, even as we move into the summer season. SOP staff are doing an amazing job of keeping up even though we have multiple people out on leave. They have really stepped up to keep us going!

- We continue to rely on travel staff in the Operating Room. 3 RNs and 1 Scrub Tech. As an aside we currently have a really fantastic group here and appreciate all of their help as we continue to search for a permanent solution

Emergency Department/Urgent Care

- Volume: ED Volume is increasing. May daily average was: 49.2 patients per day, setting a record high number of visits in 1 month
- Staffing in the ED: 2 travelers to cover FMLA and Vacations
- Staff Meeting for the ED: next meeting is scheduled for 6/27@0730. Topics: decreasing EKG times, up staffing for high volume times
- ED Floors: New flooring in rooms 2 & 3. The staff did well during the downtime from 6/5-6/8
- Continue to recruit for a permanent ED Nursing Director

Family Birth Place-Stacey Botten

- Working closely with Case Management and Rev Cycle to ensure our charge capture is current
- Working with FME to onboard Acute Newborn providers
- Updated our practice with newborn hypoglycemia – added in glucose gel, -this will provide more rapid stabilization of blood sugars minimizing the need for additional testing and interventions

Respectfully submitted,
Dede Utley, BSN, RN, CEN
Chief Nursing Officer

Ancillary Services report to Board of Commissioners June 2023

Ancillary Service Operation Report:

Lab

The department of health is reviewing our application for changes in the laboratory that are required by the installation of the Beckman Chemistry Analyzer.

Pharmacy

The medication refill program is going strong. They are processing 80-100 refill requests per day for FME. We will expand this service to other clinics as soon as we are able to take on more apprentice pharmacy technicians.

Imaging and Cardiopulmonary will begin barcode scanning medications administered to patients in August. This will require all patients receive an armband at registration except for patients utilizing the laboratory.

Cardiopulmonary

We are interviewing candidates for the Director of Cardiopulmonary in anticipation of Jim Allen retiring in September.

Imaging

Spencer Jarman, CT and imaging technologist at KVH, was selected by YVCC students to present their graduation address and pinning ceremony. Spencer has been a wonderful mentor to the YVCC imaging students. You can watch a video of Spencer's speech at

<https://www.youtube.com/live/sBk0bhDoO4o?feature=share>



YVC Radiologic Sciences Pinning Ceremony - June 2023

53 views · 18h ago · [...more](#)



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Comments

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SKECHERS at Apple Park

PACS go live is set for June 26, but may be delayed.

Regional Fire Authority

The Kittitas County Conference of Governments (COG) is reviewing the prospect of moving towards a Regional Fire Authority. COG is composed of leadership of Roslyn, Cle Elum, Kittitas, Ellensburg and the County. They are considering conducting an independent feasibility study outside of the study conducted by KVFR and Fire District 7. Fire District 7 meeting minutes indicate that they are awaiting an invitation from Hospital District 2 to discuss issues related to EMS.

47 Degrees North

Comments on the application of 47 Degrees North are due June 26. There continues to be a good deal of opposition and campaign letter writing by residents of Upper County. Attorney Jamie Carmody will be submitting a letter to the City of Cle Elum on behalf of both Hospital Districts.

Advertising

Kudos to Michele Wurl and the marketing department for the great ads featuring staff testimonials in the Tribune during EMS Week. The paper was full of pertinent information related to Regional Fire & EMS issues as well.

Whole Blood for Trauma Patients

At the request of Harborview Medical Center, KVH has been asked to assist Medic One and Kittitas Valley Fire & Rescue with obtaining and overseeing whole blood for trauma patients, which would be stored at Station 99 and KVFR. Administration of whole blood has been proven to save lives in trauma patients. Due to regulations surrounding blood storage and administration, this is a very complex request and we will be working with our partners to determine the best method of moving forward.

Ground Ambulance Patient Billing Committees

We are having subcommittee meetings every other week. I am participating in the network adequacy & cost/payment structure subcommittee.

DNV Survey

Pharmacy and Imaging have been working to correct areas of non-conformance related to our DNV survey and have submitted our Corrective Action and monitoring plans to be included in the document that will be sent to DNV for approval.

Respectfully submitted by Rhonda Holden, MSN, CENP

Clinic Operations report to Hospital District #1 Board of Commissioners June 2023

Staffing

Open positions:

- Patient Service Representatives:
 - Family Medicine Cle Elum
 - Family Medicine Ellensburg
 - Internal Medicine
- Medical Assistants:
 - Internal Medicine
 - ENT and Allergy
 - Neurology
 - Three MA Apprentices
- Referrals Coordinator:
 - Family Medicine Ellensburg
- Pharmacy Tech/Clinic
 - Currently piloting this program at FME but hope to expand and include other clinics soon

Days to Third Available Established and New Appointments (See charts)

- Internal Medicine: The locums continue to do a great job and the wait time is 0 to 4 days for an appointment.
- Women's Health: Will be increasing OB patients as soon as Dr. Wageneck joins the clinic on July 10th. They are not accepting new GYN patients at this time and continue providing OB care for the 20 delivering patients per month.
- FMCE: Currently utilizing blocks in the schedule to increase access for scheduling appointments within a 4 day period.
- FME: Beginning in July, FME will be trialing a schedule where the provider on call for the clinic will have a same day scheduling to accommodate ER, Hospital, Birth Center follow up appointments and patients who are triaged for same day needs.

Clinic Nursing

- We have a new Clinic Nurse Development Coordinator (Sherry Donovan). We feel very lucky to be utilizing her knowledge and skills in this roll. She holds a Master's Degree in Nursing Education and has taught many years for the YVC Nursing Program. Currently this position is a 0.2 FTE but we are hoping to expand the roll to full time in the future. Sherry has been assisting in the RN onboarding process, improving efficiencies, addressing gaps in knowledge, increasing the number of patients that we "triage in" and more. Recently she has completed a training at FME with their nurses on suprapubic catheter change and conducted an in-service. This will improve patient access and increase patient satisfaction as needs will be met in the clinic setting versus traveling to other cities for care.

- The RN team at FME has successfully navigated many changes to their processes this past month. From the implementation of Access Nurse and the Pharmacy Tech Program, to a physical move inside the clinic, placing them together in a more centralized space for easier team access and leveling out the individual work load. We have centralized their messaging pool for improved workflow. Rapid Access has been a big win for nurses as they now have opened an avenue for their acute patients to be seen for same day visits. We have implemented Tiger Text for the Nursing team to communicate with Rapid Access Providers for warm patient handoffs. The goal is that it will be utilized as a more efficient and direct way to communicate with multiple providers in the large FME clinic setting. There is now a "nurse line" for Rapid Access provider calls and a clear line of communication from Access Nurse and/or their patients needing more specific information and guidance. Anticipating the success of Rapid Access we are going to implement a clear on-call provider schedule starting in July. This will create a direct path and a readily available provider to see patients that nursing is "triaging in". The goal with this is to also address and have a place to see ED follow up patients in the 72 hour window that is often recommended. The nurses have completed training on Sublocade administration, and are now managing the ordering, storing and scheduling of these patients. We have been holding bi-weekly FME 1 hour Nurse meetings to address and successfully navigate the large amount of changes that they have been going through. These paths of clear and direct communication have been highly valued by nursing and management. We continue to address barriers to patient care and adjust processes when and where we can. I have been tremendously impressed by their work ethic, optimum, ability to navigate change. Truly a compassionate group of nurses dedicated to the success of their clinic team and patient care.
- Access Nurse has been live for the past 4 weeks at FME. This has successfully decreased the amount of calls that our Triage nurses are receiving which has increased their ability to be available for patient care. In turn, Access Nurse has increased the activities of our PSR team who now manage their nursing triage notes, non-clinical notes and scheduling requests that come in via e-fax. Due to Access Nurse's inability to access our EMR there is still much clarifying of information and patient communication that needs to be had. Currently, this is still time intensive. Feedback from our patient population has proved challenging, with their needs being managed by professionals that are not familiar with KVH and healthcare team as well as their personal situation and history. We are proactively working with the Access Nurse team to continue to address the calls that have not had expected outcomes.

Rapid Access Clinic

- Great feedback from patients regarding ease of access.
- Looking to expand diagnostic equipment and capabilities.
- Clinic 3 month evaluation at the end of July.
- Seeing approximately 20 patients a day. Not up to full speed yet.

Family Medicine Ellensburg

- Pharmacy took over prescription refills per protocols and has been very successful. Creating more work for our PSR team getting patients scheduled.

- MA Brooke Oversby just finished her apprentice hours and will be prepping to take her exam to become certified.
- Dr. Merrill-Steskal, Dr. Casey, and Dr. Beard attended a hands-on neo-natal training simulation. This allows them NRP and STABLE certifications to be able to participate in neonatal acute care call.
- Dr. Casey has completed his CME hours for acupuncture. He will be providing patients medically appropriate acupuncture in clinic as a modality hopefully by Q4 2023.

Internal Medicine

- Bobbi Beard, ARNP will be leaving IM on August 11th. A letter went out last week notifying patients.
- Dr. White, Locum, will be staying with the IM clinic through December.

Orthopedics

- Consolidated to one location at MAC starting June 5th. X-ray is available in clinic location, and patients and providers have been positive about workflows and a smooth transition.
- Remodel & Expansion project for Ortho plans to go to bid 1st quarter 2024.
- Fully staffed- no openings!

General and Vascular Surgery

- Dr. Zammit continues to fill all allocated OR block time
- Due to limited services in Yakima, both service lines continue to see steady referrals from outside facilities.
- Remodel project still on construction schedule and moving forward.
- Vascular MA position is posted but is currently being filled by a MA Apprentice who will be taking position once certified.
- No other openings.

ENT & Allergy

- Dr. Rogers continues to see upwards of 20-25 patients per day in clinic.
- MA position posted. There is a current MA Apprentice who will transition to position in July when our other apprentice becomes certified.
 - The upcoming MA Apprentice was previously a PSR at the ENT Clinic and it's been wonderful to have a pathway for staff to grow professionally.
- No other openings.

Pediatrics

- Dr. Anderson will be on leave as of July 13th. She will be out 3-4 months.
- Dr. Paul DeBusschere's last day was June 15th.
- Fully staffed with support staff.

Family Medicine Cle Elum

- Position posted for a physician.
- Looking at options on how to modify current clinic layout to better improve use of space and access.

Workplace Health

- New EHR, site visit of existing client in late July.
- Pricing update coming soon.
- Dr. Frick is up to speed and is seeing a full patient load.

Dermatology

- Searching for new Provider, and Dermatologist Overseer.
- Julia is seeing 25-30 patients a day.
- Next available, November 13.

Cardiology

- Would like to do a GEMBA with the board sometime in fall.
- Slowly adding more patients into our device management program MURJ. We are at 25 patients now and growing.

Onsite Casting Class

American Society of Orthopedic Professionals Casting and Splinting Workshop was held in Conference Room ABC over the first weekend of June. Attendees will need to complete 6 months of casting practice/experience and will then be eligible to sit for the Registered Orthopedic Technologist exam. This is a certification that will allow our MA-Cs & RNs to cast/splint under physician oversight.

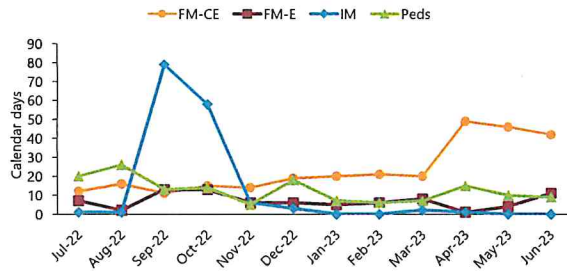
There were 16 attendees between the Clinics and ED:

Alisha Walsh	ORTHO
Derek Henderson	ORTHO
Jolene Kvinsland	ORTHO
Ashley Wilde	ORTHO
Becca Packett	FMCE
Elizabeth Golubiec	FMCE
Chris Johnson	ED
Jessica Salvati	ED
Hannah Hester	ED
Heather Stermetz	ED
Jennifer Hagemeyer	ED
Kay Goodey	WPH
Sarah Vlahovich	WPH
Zane Davies	PT
April Streiff	RA
Ashley Bowers	RA

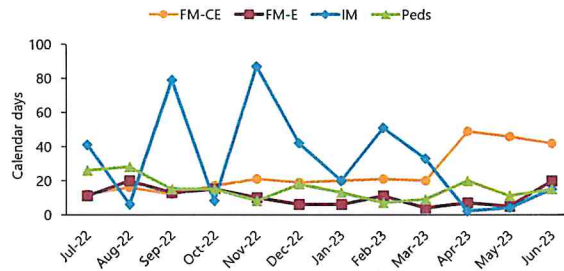
Respectfully submitted by Stephanie Walker on behalf of Stacy Olea, MT(ASCP), CRHCP, FACHE

Clinic Operations Dashboard

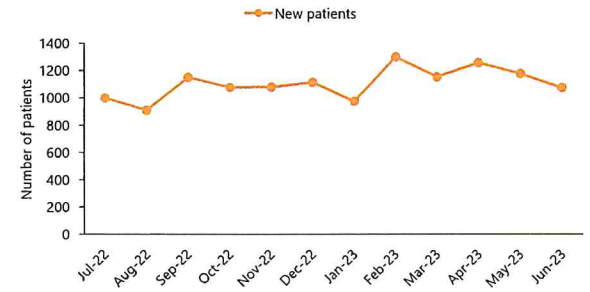
Third available appointment for established patients



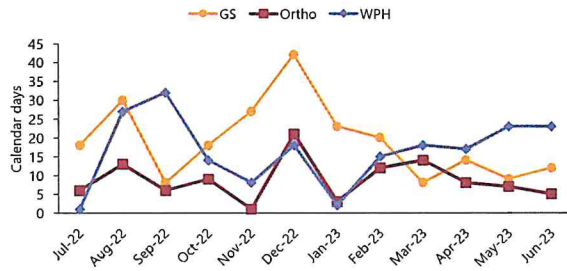
Third available appointment for new patients



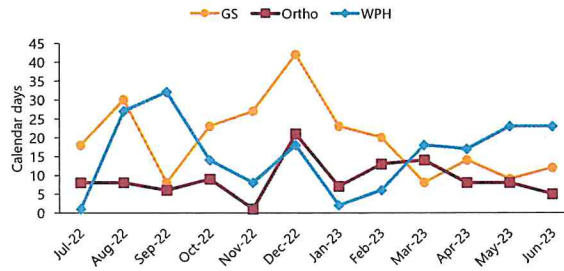
New patients



Third available appointment for established patients

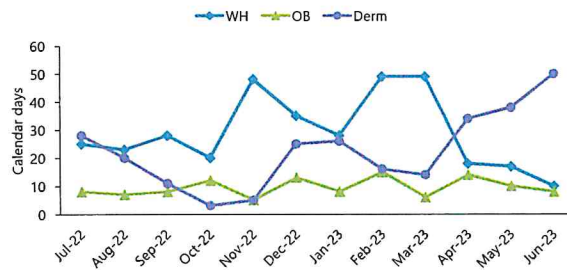


Third available appointment for new patients

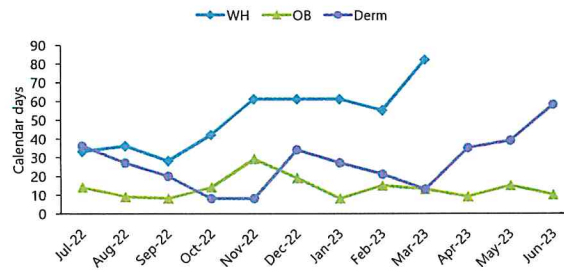


Effective March 2021, we began coding our "new" patients differently. The definition of "new" visits were changed as it was based on taxonomy code for the practice. Previously, we were only identifying the visit as "new" if the patient had not presented to any of the clinics

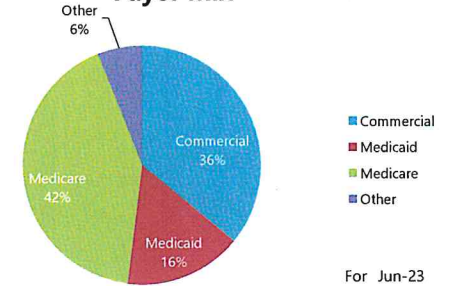
Third available appointment for established patients



Third available appointment for new patients

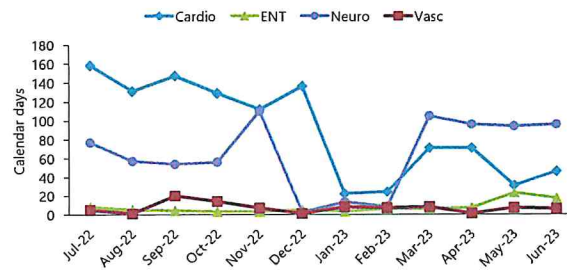


Payor Mix

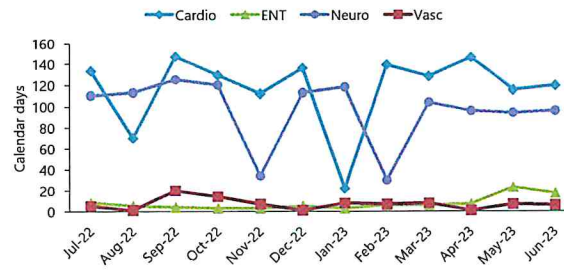


For Jun-23

Third available appointment for established patients



Third available appointment for new patients



NOTIFICATION OF CREDENTIALS FILES
FOR REVIEW

Date June 15, 2023

TO: Board of Commissioners
 Kevin Martin, MD

FROM: Shannon Carlson, CPCS
 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 as noted in each file.

<u>PRACTITIONER</u>	<u>STATUS</u>	<u>APT/REAPT</u>	<u>SITE</u>
Edgar, Craig, MD	Provisional	Initial Appointment	KVH ED
Hampton, Rachel, MD	Provisional	Initial Appointment	KVH ED
Kuehn, Nicolaus, MD	Provisional	Initial Appointment	OnRad
Papazian, Jeff, MD	Provisional	Initial Appointment	KVH ED
Southwell, Craig, MD	Provisional	Initial Appointment	KVH ED
Zinn, William, MD	Provisional	Initial Appointment	OnRad
Bredin, June, MD	Active	Re-Appointment	CHCW
Davidson, Todd, MD	Active	Re-Appointment	KVH ED
Hanafy, Hanafy, MD	Active	Re-Appointment	KVH Gen. Surg.
Owens, Kevin, MD	Active	Re-Appointment	RPG
Zammit, Michael, MD	Active	Re-Appointment	KVH Vascular
Abed, Nashwa, MD	Associate	Re-Appointment	Incyte Pathology
Caverly, Jeffrey, MD	Associate	Re-Appointment	OnRad
Jensen, Sheldon, DO	Associate	Re-Appointment	OnRad
Lampert, Paul, MD	Associate	Re-Appointment	OnRad
Strand, Ian, DO	Associate	Re-Appointment	KVH ED

Delineation Of Privileges

Point of Care Ultrasound (POCUS) - Emergency Department

Provider Name:

Privilege	Requested	Approved		
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Initial Criteria:

- a. Documentation of formal training through residency or fellowship (Emergency Ultrasound Credentialing Letter) OR;
- b. Certificate of completion of a minimum of 24 hours introductory ultrasound course that covers core applications OR;
- c. Documentation of greater than 5 years of point of care ultrasound privilege's with a minimum of at least 50 ultrasound interpretations reflective of the privileges requested within the previous 24 months (case logs and verification required)
- d. A minimum of 5 ultrasound exams for each exam area in which privileges are requested. Evaluations may be in the form of formal over-read from the Imaging Department or by Department Quality review confirming the preliminary diagnosis.

Renewal Criteria:

- a. A minimum of at least 50 ultrasound interpretations within the previous 24 months AND;
- b. A minimum of at least 4 hours of ultrasound relate CME within the previous 24 month AND;
- c. Participation in ongoing quality review of ultrasounds; confirmed by the Department Chair

Diagnostic Ultrasound - Includes the following exam areas:

- Abdominal aorta aneurysm (AAA)
- Biliary
- Cardiac
- Deep venous thrombosis (DVT)
- Ocular
- Pregnancy
- Soft tissue/musculoskeletal
- Trauma
- Urinary tract

Ultrasound Guided Procedures - Includes the following procedure areas:

- Abscess drainage
- Fracture and dislocation reduction
- Joint aspiration and injection
- Lumbar puncture
- Nerve blocks
- Paracentesis
- Pericardiocentesis
- Subcutaneous foreign body localization
- Thoracentesis
- Vascular access

CHIEF MEDICAL OFFICER – Kevin Martin, MD

June 2023

I am pleased to offer the following report.

Medical Staff Services:

- **Recruiting:** Our recruiting team remains very busy. Kathryn Brunner is working with recruitment firms, locum tenens agencies and professional societies to identify candidates.
 - **Incoming Providers:**
 - Women's Health – Robert Wageneck, DO, will start 10 July
 - **Providers in Progress:**
 - 6 OB providers to help cover call while recruiting for 2 more permanent providers
 - IM physician interview on 05/22/2023
 - OBGYN interview 06/15/2023
 - Vascular APC
 - Ortho APC
 - Rapid Access APC
 - Local PA-C student.
 - **Posted Positions**
 - **Physician**
 - Adult Medicine
 - Dermatology
 - OBGYN
 - Family Medicine with Surgical Obstetrics
 - Family Medicine
 - Cardiology
 - **APC**
 - Dermatology
 - GNP
 - Adult Medicine
 - ED/UC
- **Medical Staff:**
 - Appointments
 - 6 new providers requesting privileges this month.
 - 10 providers requesting reappointment.
 - 32 applications in process, mostly Evergreen Anesthesia Associates CRNAs.

CMO activities:

- **Anesthesia Services**
 - As noted previously, KVH has long been served and served well by Kittitas Anesthesia Associates, LLC. However, our current and projected growth has posed recruitment challenges for them. We have reached an agreement with Evergreen Anesthesia Associates (EAA). We will start a transition to their services on 1 July, and there is potentially an opportunity for our current providers to stay on with EAA.

- **Education**
 - Last month I reported that we were working with the Washington State University Elson S. Floyd College of Medicine to bring a mobile simulation lab to enhance our providers' skills drills. That event took place Friday, and was attended by Drs. Anderson, Beard, Casey, and Merrill-Steskal.
- **The Rural Collaborative (TRC):**
 - The Physician Leadership Committee is scheduled to meet Monday, 19 June, as of this writing.

Respectfully submitted,
Kevin Martin, MD
Chief Medical Officer



May Operating Results

- May admissions to the hospital of 63 were 36 admissions less than budget. Patient days of 225 were below budget by 170 days. YTD KVH is 107 admissions below budget and 322 patient days below budget. The Family Birth Place delivered 16 infants in May; 11 deliveries less than budget. YTD deliveries are 38 deliveries below budget and 36 deliveries less than 2022 deliveries through May. KVH's average length of stay was 3.6 days in May. Care continues to shift from inpatient to outpatient where accordingly there has been an increase in observation days. In May, there were 140 observation days compared to budgeted observation days of 98. YTD observation days total 718 days compared to budgeted observation days of 469, a positive variance of 249 observation days. The surgery department continued to be busy in May. Inpatient cases of 15 were below budget by 16 cases. C-sections were factor in the low number of inpatient surgery cases. In May the hospital performed only 1 C-section delivery. Outpatient surgery cases of 184 exceeded budget by 46 cases and GI procedures of 177 exceeded budget by 39 procedures. May ER visits of 1,532 exceeded budget by 142 visits. Urgent Care Clinic visits of 489 were below budget by 30 visits. May clinic visits of 7,749 were below budgeted visits by 154 visits.
- May gross revenue of \$20,842,322 exceeded budget by \$598,998. May inpatient revenue was below budget by \$1,306,452; outpatient revenue exceeded budget by \$1,634,127 and professional fee revenue exceeded budget by \$271,323. The following departments had significant positive revenue variances in May: Med/Surg by \$237,075; Surgery by \$40,990; Imaging by \$158,058; Pharmacy by \$106,834; ER by \$243,101 and Hospice by \$49,066. Departments with significant negative variances were Family Birth Place by \$145,987 and Laboratory by \$368,794.
- In May deductions from revenue exceeded budget by \$847,047. Contractual adjustments exceeded budget by \$558,755. Bad debt deductions were below budget by \$24,618. Financial assistance exceeded budget by \$44,070. Other deductions totaled \$414,032 and exceeded budget by \$268,840. Hospice adjustments were \$4,915; no prior authorizations were \$92,510; not medically necessary adjustments totaled \$94,242 and provider not credentialed adjustments totaled \$63,067.
- May other operating revenue exceeded budget by \$39,651. In May the shortfall from 340B contract pharmacy rebates totaled just \$6,634. A few months ago KVH signed contracts with 340B ESP to try to recapture some of the lost 340B contract pharmacy revenue. May's 340B results appear to show that KVH is starting to recapture some of these pharmacy sales. Sales from the outpatient retail pharmacy were \$100,129 and exceeded budget by \$32,184. Lastly, cafeteria sales of \$34,493 exceeded budget by \$6,040.

- May expenses exceeded budget by \$89,083. Expenses are tracking to budget levels or are trending with patient volumes when volumes exceed budget. Salaries were below budget by \$135,404. Temporary labor exceeded budget by just \$182,045. Departments that exceeded their temporary labor budget were Med/Surg by \$61,965; Surgery by \$41,920; Laboratory by \$18,931; Radiology by \$22,189; and ER by \$107,244. Much of the negative May variance was due to catch up payments to vendors for contract labor. With the exception of the surgery department, KVH is continuing the trend of using less contract labor. Professional fees exceeded budget by \$62,507. In May KVH paid \$127,913 for ER locums; \$38,830 for Internal Medicine locums and \$77,336 for Women's Health locums. Supply expenses exceeded budget in May by \$22,238. Surgery exceeded their supply budget by \$142,985. Surgery's negative supply variance was volume related. Other department came in under their monthly supply budget offsetting the negative variance in surgery. Depreciation expense exceeded budget for May by \$102,833 and will for the year due to shortening the estimated useful life on some hospital owned buildings. In addition, in May the hospital began to capitalize components of the energy efficiency project that have been completed. Insurance expense exceeded budget by \$30,501. As noted previously, KVH's insurance renewal was higher than expected and KVH also increased coverage limits. Other direct expenses exceeded budget by \$34,555 due to provider recruitment expenses.
- In May KVH posted operating income of \$765,751 compared to a budgeted operating income of \$1,063,232; a negative variance of \$297,481. YTD operating income is \$1,667,936 compared to budgeted operating income of \$3,921,750; a negative variance of \$2,253,814.
- Non-operating income exceeded budget by \$10,731. In May KVH recorded interest income of \$94,158, grant income of \$89,484 to offset Rural Collaborative grant expenses and an unrealized loss on investments of \$132,642.
- KVH reported a Net Income for May of \$892,331. YTD Net Income is \$2,921,846 compared to budgeted Net Income of \$4,500,888, a negative variance of \$1,579,042.
- May Days in Accounts Receivable increased 3.4 days to 66.6 days from 63.2 in April. Gross accounts receivables increased by \$1,517,109 from \$45,544,930 in April to \$47,062,039 in May. Total cash receipts in May from payers, patients and other sources totaled \$10,375,024. Total Cerner receipts posted in May were \$9,629,494.
- Average daily cash collections per working day decreased from \$584,181 in April to \$471,592 in May.

- Days cash on hand increased .7 days to 210.7 days in May from 210.0 days in April. Actual cash and investments on hand decreased by \$824,156 from \$70,918,601 in April to \$70,094,445 in May.

Kittitas Valley Healthcare
May 2023 - Key Statistics and Indicators

Activity Measures	Current Month			Year to Date			Prior YTD		
	Actual	Budget	Var. %	Actual	Budget	Var. %	Actual	Var. %	
01 Admissions w/Swingbed	63	99	-36.6%	370	477	-22.4%	479	-22.8%	01
02 Patient Days - W/O Newborn	225	395	-43.1%	1,573	1,895	-17.0%	1,865	-15.6%	02
03 Patient Days - Swingbed	-	8	-100.0%	-	38	-100.0%	30	-100.0%	03
04 Avg Daily IP Census w/Swingbed	7.2	13.0	-44.2%	10.4	12.8	-18.6%	12.5	-17.0%	04
05 Average Length of Stay	3.6	4.0	-10.3%	4.3	4.0	7.0%	3.9	9.2%	05
06 Average Length of Stay w/Swingbed	3.6	4.1	-12.1%	4.3	4.1	4.9%	4.0	7.5%	06
07 Deliveries	16	27	-41.5%	95	133	-28.7%	131	-27.5%	07
08 Case Mix Inpatient	0.96	1.00	-3.6%	1.18	1.00	17.8%	1.11	6.1%	08
09 Surgery Minutes - Inpatient	1,219	3,742	-67.4%	10,670	17,991	-40.7%	16,822	-36.6%	09
10 Surgery Minutes - Outpatient	9,850	8,721	12.9%	51,866	41,929	23.7%	36,990	40.2%	10
11 Surgery Procedures - Inpatient	15	31	-51.1%	104	147	-29.4%	135	-23.0%	11
12 Surgery Procedures - Outpatient	184	138	33.4%	867	664	30.7%	566	53.2%	12
13 Gastrointestinal Procedures	177	138	28.0%	825	665	24.0%	545	51.4%	13
14 ER Visits	1,532	1,390	10.2%	7,006	6,679	4.9%	5,979	17.2%	14
15 Urgent Care Cle Elum Visits	489	519	-5.8%	2,160	2,495	-13.4%	2,056	5.1%	15
16 Laboratory	24,264	26,171	-7.3%	118,359	125,770	-5.9%	117,506	0.7%	16
17 Radiology Exams	3,418	3,130	9.2%	16,484	15,041	9.6%	13,889	18.7%	17
18 Rehab Visit	1,531	1,766	-13.3%	7,981	8,502	-6.1%	7,486	6.6%	18
19 Outpatient Percent of Total Revenue	92.2%	85.5%	7.8%	89.2%	85.5%	4.4%	84.3%	5.9%	19
20 Adjusted Patient Days	2,881	2,727	5.6%	14,621	13,079	11.8%	11,862	23.3%	20
21 Equivalent Observation Days	140	98	42.9%	718	469	53.2%	452	58.7%	21
22 Avg Daily Obs Census	4.5	3.2	42.9%	4.8	3.1	53.2%	3.0	58.7%	22
23 Home Care Visits	529	633	-16.4%	2,493	3,035	-17.9%	2,928	-14.9%	23
24 Hospice Days	933	638	46.3%	4,162	3,107.0	34.0%	3,014	38.1%	24
25 Primary Clinic Visits	5,349	5,357	-0.1%	26,033	25,589	1.7%	28,758	-9.5%	25
26 Specialty Clinic Visits	2,318	2,428	-4.5%	11,665	11,690	-0.2%	7,092	0.0%	26
27 Telehealth Visits	82	118	-30.4%	407	565	-28.0%	561	NA	27
28 Total Clinic Visits	7,749	7,903	-1.9%	38,105	37,844	0.7%	36,411	4.7%	27
Financial Measures									
29 Salaries as % of Operating Revenue	46.6%	46.9%	0.7%	46.6%	47.9%	2.8%	48.3%	-3.7%	29
30 Total Labor as % of Operating Revenue	58.1%	58.6%	1.0%	58.4%	60.0%	2.8%	60.1%	-2.8%	30
31 Revenue Deduction %	48.1%	45.3%	-6.1%	47.6%	45.6%	-4.2%	45.5%	4.5%	31
32 Operating Margin	6.9%	9.4%		3.1%	7.3%		5.5%		32
Operating Measures									
33 Productive FTE's	540.9	548.0	1.3%	545.1	548.0	0.5%	513.3	6.2%	33
34 Non-Productive FTE's	64.4	73.0	11.7%	57.6	73.0	21.1%	69.1	-16.7%	34
35 Paid FTE's	605.3	621.0	2.5%	602.7	621.0	3.0%	582.4	3.5%	35
36 Operating Expense per Adj Pat Day	\$ 3,573	\$ 3,741	4.5%	\$ 3,619	\$ 3,808	4.9%	\$ 3,764	-3.8%	36
37 Operating Revenue per Adj Pat Day	\$ 3,838	\$ 4,131	-7.1%	\$ 3,734	\$ 4,108	-9.1%	\$ 3,983	-6.3%	37
38 A/R Days	66.6	60.0	-11.0%	66.6	60.0	-11.0%	61.7	7.9%	38
39 Days Cash on Hand	210.7	217.6	-3.2%	210.7	217.6	-3.2%	209.0	0.8%	39

Kittitas Valley Healthcare

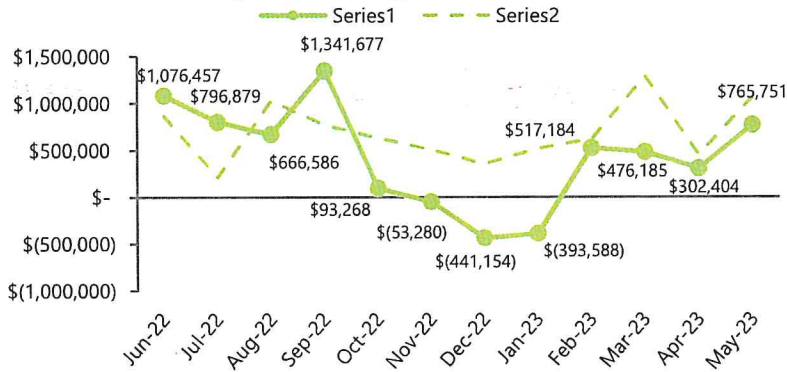
Year over Year Financial and Operating Indicator Trends

May 2023 - Key Statistics and Indicators

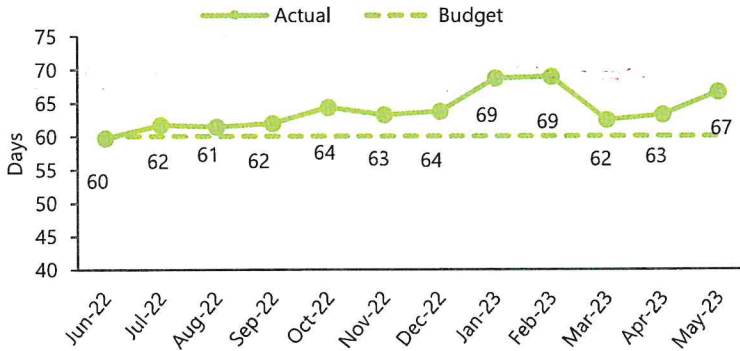
L	Measure	2023 YTD	2023 Budget	2023 Annualize	2022	2021	2020	2019	2018	2017	2016
1	Total Charges	102,434,343	233,240,187	247,606,194	213,492,081	198,630,104	160,301,629	152,675,062	140,104,003	130,611,388	124,153,636
2	Net Revenue	54,587,144	129,100,000	131,949,058	120,219,085	114,372,961	89,905,245	83,527,969	78,753,810	71,490,964	71,506,819
3	Operating Income	1,667,936	8,000,000	4,031,766	6,074,001	14,127,110	620,732	2,901,869	474,120	885,655	(5,893)
4	Operating Margin %	3.1%	6.2%	3.1%	5.1%	12.4%	0.7%	3.5%	0.6%	1.2%	0.0%
5	Net Income	2,921,845.8	9,390,000	7,062,740	4,079,789	18,470,881	6,420,388	3,690,537	2,526,547	2,648,415	1,543,915
6	Net Margin %	5.4%	7.3%	5.4%	3.4%	16.1%	7.1%	4.4%	3.2%	3.7%	2.2%
7	Cash	70,094,445	62,853,786	NA	73,241,408	61,914,502	40,852,244	29,218,516	27,408,625	33,213,447	29,859,717
8	Days Cash on Hand	210.7	197.0	NA	246.4	235.8	175.8	138.6	133.5	178.7	156.0
9	Surgeries	971	1,950	2,347	1,922	1,788	1,354	1,305	1,461	1,396	1,510
10	Gastrointestinal Procedures	825	1,600	1,994	1,404	1,321	1,211	1,416	1,250	1,383	1,396
11	Emergency Visits	7,006	16,790	16,935	15,643	13,988	12,207	13,861	13,930	13,162	13,789
12	% ED visits To Bed	7.8%	10.0%	7.8%	7.7%	9.2%	10.1%	9.5%	n/a	n/a	n/a
13	Laboratory Tests	118,359	302,431	286,100	277,627	288,552	237,710	209,144	207,040	190,587	181,082
14	Radiology Exams	16,484	36,169	39,845	35,222	32,016	29,338	30,397	30,843	33,836	33,471
15	Rehab Visits	7,981	20,447	19,292	17,060	21,390	16,724	18,718	16,359		
16	IP & Obs Days (no swing)	2,291	5,684	5,539	5,470	4,820	3,717	3,805	3,999	3,440	3,937
17	Deliveries	95	322	230	318	280	284	309	342	322	312
18	Admits w/Swing	370	1,147	894	1,066	949	860	941	984	899	1,043
19	Primary Clinic Visits	26,033	61,377	62,927	58,013	60,229	53,270	60,871			
20	Specialty Clinic Visits	11,665	28,113	28,197	22,778	19,865	13,135	11,840			
21	Telehealth Visits	407	1,359	984	1,263	1,391	3,793	-			
22	Total Clinic Visits	38,105	90,849	92,108	82,054	81,485	70,198	72,711	59,241	50,917	48,525
23											
24	FTEs	602.7	621.0	NA	560.9	529.9	499.0	477.4	469.4	457.6	449.1
25	AR Days	66.6	60.0	NA	63.7	63.9	73.5	88.1	92.0	50.8	47.5
Normalize charges by adjusting for charge master increases:											
26	Normalized Charges to 2023		233,240,187	247,606,194	223,099,225	217,946,882	179,408,782	174,290,630	165,265,768	161,001,417	159,162,750
27	Operations Growth		4.55%	10.98%	2.36%	21.48%	2.94%	5.46%	2.65%	1.16%	-1.05%
28	Operations Growth Exclude COVID Testing			12.25%	6.29%	19.23%	-0.61%				

Financial Dashboard

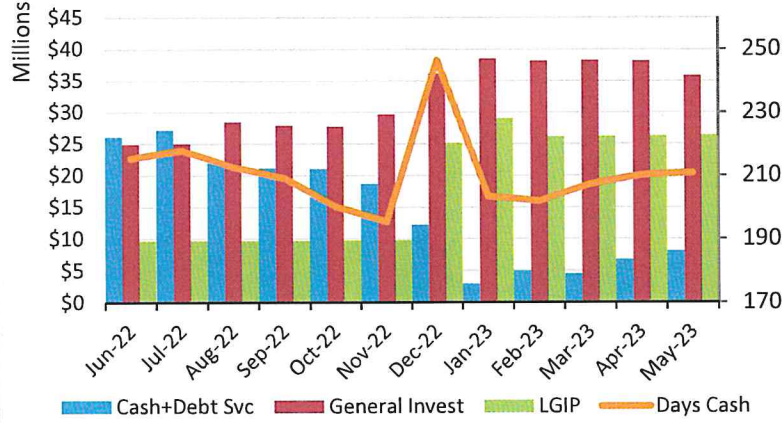
Operating Income



Accounts Receivable Days



Cash and Investments - 12 Months



Payer Mix

	CY 2020	CY 2021	CY 2022	YTD 2023
Medicare	39.42%	40.24%	42.31%	42.30%
Medicaid	19.41%	19.08%	18.64%	19.08%
Commercial	34.97%	35.29%	33.66%	33.49%
Self Pay	2.66%	2.38%	2.10%	1.43%
Other	3.55%	3.01%	3.29%	3.71%

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	1,624,548	2,930,999	(1,306,452)	11,022,301	14,061,521	(3,039,220)	13,362,724
OUTPATIENT REVENUE	15,486,053	13,851,926	1,634,127	73,641,547	66,457,551	7,183,997	57,453,469
PROF FEE REVENUE	3,731,721	3,460,398	271,323	17,770,496	16,524,942	1,245,554	14,184,980
REVENUE	20,842,322	20,243,323	598,998	102,434,343	97,044,013	5,390,330	85,001,174
CONTRACTUALS	8,979,843	8,421,087	558,755	43,649,600	40,515,039	3,134,562	35,089,513
PROVISION FOR BAD DEBTS	485,514	510,132	(24,618)	2,751,840	2,541,367	210,473	2,664,222
FINANCIAL ASSISTANCE	142,428	98,358	44,070	660,377	491,789	168,589	480,589
OTHER DEDUCTIONS	414,032	145,192	268,840	1,654,470	725,958	928,512	447,607
DEDUCTIONS FROM REVENUE	10,021,817	9,174,769	847,047	48,716,288	44,274,152	4,442,136	38,681,931
NET PATIENT SERVICE REVENUE	10,820,505	11,068,554	(248,049)	53,718,056	52,769,861	948,195	46,319,243
OTHER OPERATING REVENUE	237,083	197,432	39,651	869,089	955,470	(86,381)	924,445
TOTAL OPERATING REVENUE	11,057,588	11,265,986	(208,398)	54,587,144	53,725,331	861,814	47,243,688
SALARIES	5,149,422	5,284,825	(135,404)	25,425,359	25,742,213	(316,854)	22,840,246
TEMPORARY LABOR	438,079	256,035	182,045	1,912,431	1,247,136	665,295	1,501,372
BENEFITS	1,270,220	1,319,895	(49,675)	6,430,822	6,506,651	(75,829)	5,530,400
PROFESSIONAL FEES	227,212	164,705	62,507	1,690,732	802,273	888,459	1,116,250
SUPPLIES	1,080,013	1,057,775	22,238	6,747,730	5,099,198	1,648,531	4,097,100
UTILITIES	99,316	106,272	(6,956)	574,597	507,744	66,853	492,052
PURCHASED SERVICES	946,254	1,080,975	(134,721)	5,022,548	5,276,752	(254,204)	5,273,704
DEPRECIATION	570,219	467,386	102,833	2,680,496	2,325,291	355,205	1,858,674
RENTS AND LEASES	(21,644)	3,250	(24,894)	8,986	16,248	(7,262)	444,830
INSURANCE	188,092	157,592	30,501	782,096	787,958	(5,863)	463,024
LICENSES & TAXES	71,098	86,574	(15,477)	428,290	415,871	12,419	370,067
INTEREST	110,844	110,969	(125)	557,242	552,846	4,397	248,783
TRAVEL & EDUCATION	48,899	47,128	1,771	229,003	234,191	(5,188)	108,225
OTHER DIRECT	113,813	59,374	54,439	428,876	289,208	139,668	303,673
EXPENSES	10,291,837	10,202,753	89,083	52,919,209	49,803,581	3,115,628	44,648,399
OPERATING INCOME (LOSS)	765,751	1,063,232	(297,481)	1,667,936	3,921,750	(2,253,814)	2,595,289
OPERATING MARGIN	6.93%	9.44%	142.75%	3.06%	7.30%	-261.52%	5.49%
NON-OPERATING REV/EXP	126,580	115,849	10,731	1,253,910	579,138	674,772	(961,038)
NET INCOME (LOSS)	892,331	1,179,081	(286,750)	2,921,846	4,500,888	(1,579,042)	1,634,251
UNIT OPERATING INCOME							
HOSPITAL	739,426	1,325,461	(586,035)	3,473,757	5,541,271	(2,067,514)	4,360,010
URGENT CARE	16,567	10,519	6,048	18,077	40,566	(22,489)	14,532
CLINICS	(13,075)	(213,865)	200,790	(1,805,293)	(1,351,466)	(453,827)	(1,618,604)
HOME CARE COMBINED	22,834	(58,883)	81,717	(18,606)	(308,622)	290,016	(160,648)
OPERATING INCOME	765,751	1,063,232	(297,481)	1,667,936	3,921,750	(2,253,814)	2,595,289

Kittitas Valley Healthcare Balance Sheet and Cash Flow

Kittitas Valley Healthcare
Balance Sheet

	YEAR TO DATE	PRIOR YEAR END	CHANGE
CASH AND CASH EQUIVALENTS	6,824,955	11,162,290	(4,337,335)
ACCOUNTS RECEIVABLE	47,062,039	41,373,454	5,688,585
ALLOWANCE FOR CONTRACTUAL	(30,722,641)	(26,782,288)	(3,940,353)
THIRD PARTY RECEIVABLE	2,000,000	2,182,107	(182,107)
OTHER RECEIVABLES	1,220,200	2,007,557	(787,357)
INVENTORY	2,614,877	2,690,763	(75,886)
PREPAIDS	1,851,628	1,512,320	339,309
INVESTMENT FOR DEBT SVC	1,220,167	963,413	256,754
CURRENT ASSETS	32,071,224	35,109,615	(3,038,391)
INVESTMENTS	62,049,323	61,115,705	933,618
PLANT PROPERTY EQUIPMENT & ROU ASSET	109,062,170	106,089,339	2,972,831
ACCUMULATED DEPRECIATION & ROU AMORT	(56,167,857)	(53,865,018)	(2,302,840)
NET PROPERTY, PLANT, & EQUIP	52,894,312	52,224,321	669,992
OTHER ASSETS	0	0	0
NONCURRENT ASSETS	52,894,312	52,224,321	669,992
ASSETS	147,014,860	148,449,641	(1,434,781)
ACCOUNTS PAYABLE	1,574,950	4,228,424	(2,653,474)
ACCRUED PAYROLL	1,857,470	2,645,596	(788,126)
ACCRUED BENEFITS	433,753	985,345	(551,591)
ACCRUED VACATION PAYABLE	2,751,760	1,927,557	824,203
THIRD PARTY PAYABLES	1,084,899	1,284,899	(200,000)
CURRENT PORTION OF LONG TERM DEBT	1,640,441	2,293,900	(653,459)
OTHER CURRENT LIABILITIES	0	0	0
CURRENT LIABILITIES	9,343,273	13,365,720	(4,022,447)
ACCRUED INTEREST	490,585	273,091	217,494
DEFERRED TAX COLLECTIONS	5,979	0	5,979
DEFERRED REVENUE HOME HEALTH	63,276	60,910	2,366
DEFERRED INFLOW RIGHT OF USE	596,619	628,695	(32,076)
DEFERRED OTHER	127,031	127,031	0
DEFERRED LIABILITIES	1,283,490	1,089,727	193,763
LTD RIGHT OF USE ASSETS	4,463,359	4,991,302	(527,943)
LTD - 2017 REVENUE BONDS	11,194,095	11,667,554	(473,459)
LTD - 2018 REVENUE BOND	5,100,000	5,280,000	(180,000)
LTD - 2018 LTGO & REVENUE REFUND BONDS	898,152	898,152	0
LTD - 2022 REVENUE BOND	15,310,000	15,310,000	0
CURRENT PORTION OF LONG TERM DEBT CONT	(1,640,441)	(2,293,900)	653,459
LONG TERM DEBT	35,325,165	35,853,108	(527,943)
OTHER POST EMPLOYMENT BENEFITS LIABILITY	3,806,216	3,806,216	0
NONCURRENT LIABILITIES	40,414,872	40,749,051	(334,180)
LIABILITIES	49,758,144	54,114,771	(4,356,627)
FUND BALANCE	94,334,870	94,334,870	0
NET REVENUE OVER EXPENSES	2,921,846	0	2,921,846
FUND BALANCE	97,256,716	94,334,870	2,921,846
TOTAL LIABILITIES & FUND BALANCE	147,014,860	148,449,641	(1,434,781)

Kittitas Valley Healthcare
Balance Sheet and Cash Flow

Statement of Cash Flow

	CASH
NET BOOK INCOME	2,921,846
ADD BACK NON-CASH EXPENSE	
DEPRECIATION	2,302,840
PROVISION FOR BAD DEBTS	
LOSS ON SALE OF ASSETS	
NET CASH FROM OPERATIONS	5,224,685
CHANGE IN CURRENT ASSETS (\$)	
PATIENT ACCOUNTS	(1,748,232)
OTHER RECEIVABLES	969,464
INVENTORIES	75,886
PREPAID EXPENSES & DEPOSITS	(339,309)
INVESTMENT FOR DEBT SVC	(256,754)
TOTAL CURRENT ASSETS	(1,298,944)
INVESTMENTS	(933,618)
PROPERTY, PLANT, & EQUIP.	(2,972,831)
OTHER ASSETS	0
TOTAL ASSETS	19,292
CHANGE IN CURRENT LIABILITIES (\$)	
ACCOUNTS PAYABLE	(2,653,474)
ACCRUED SALARIES	(788,126)
ACCRUED EMPLOYEE BENEFITS	(551,591)
ACCRUED VACATIONS	824,203
COST REIMBURSEMENT PAYABLE	(200,000)
CURRENT MATURITIES OF LONG-TERM DEBT	(653,459)
CURRENT MATURITIES OF CAPITAL LEASES	0
TOTAL CURRENT LIABILITIES	(4,022,447)
CHANGE IN OTHER LIABILITIES (\$)	
ACCRUED INTEREST ON 1998, 1999 UTGO	217,494
DEFERRED TAX COLLECTIONS	5,979
DEFERRED REVENUE - HOME HEALTH	2,366
DEFERRED INFLOW RIGHT OF USE	(32,076)
DEFERRED OTHER	0
TOTAL OTHER LIABILITIES	193,763
CHANGE IN LT DEBT & CAPITAL LEASES (\$)	
LTD RIGHT OF USE ASSETS	(527,943)
LTD - 2017 REVENUE BONDS	(473,459)
LTD - 2018 REVENUE BOND	(180,000)
LTD - 2018 LTGO & REVENUE REFUND BONDS	0
LTD - 2022 REVENUE BOND	0
CURRENT PORTION OF LONG TERM DEBT	653,459
TOTAL LONG-TERM DEBT & LEASES	(527,943)
OTHER POST EMPLOYMENT BENEFITS LIABILITY	0
TOTAL LIABILITIES	(4,356,627)
NET CHANGE IN CASH -	(4,337,335)
BEGINNING CASH ON HAND	11,162,290
ENDING CASH ON HAND	6,824,955

KVH
AR Days
May 2023

Accounts Receivable		Unbilled	0-30	31-60	61-90	91-180	181+	Total	Days
Hospital Total	Paragon	175	-	-	-	-	496,790	496,965	
	Cerner	11,800,032	6,935,094	5,480,163	2,800,686	4,395,356	8,786,356	40,197,688	
		<u>11,800,206</u>	<u>6,935,094</u>	<u>5,480,163</u>	<u>2,800,686</u>	<u>4,395,356</u>	<u>9,283,147</u>	<u>40,694,653</u>	72
Home Health		-	125,862	80,152	16,638	35,342	66,750	324,744	
Hospice		-	181,120	32,171	25,539	10,653	162,371	411,853	
Home Care and Hospice			<u>306,982</u>	<u>112,323</u>	<u>42,177</u>	<u>45,994</u>	<u>229,121</u>	<u>736,597</u>	77
Family Medicine Ellensburg	NextGen						168	168	
	Cerner	570,282	488,187	160,910	77,092	140,499	78,122	1,515,091	
		<u>570,282</u>	<u>488,187</u>	<u>160,910</u>	<u>77,092</u>	<u>140,499</u>	<u>78,290</u>	<u>1,515,259</u>	40
Family Medicine Cle Elum	NextGen						13,237	13,237	
	Cerner	164,081	169,228	30,968	23,844	39,922	31,001	459,045	
		<u>164,081</u>	<u>169,228</u>	<u>30,968</u>	<u>23,844</u>	<u>39,922</u>	<u>44,238</u>	<u>472,282</u>	41
Pediatrics	Cerner	37,252	123,314	25,413	11,030	17,540	13,003	227,553	
		<u>37,252</u>	<u>123,314</u>	<u>25,413</u>	<u>11,030</u>	<u>17,540</u>	<u>13,003</u>	<u>227,553</u>	27
Adult Medicine	NextGen						(2,858)	(2,858)	
	Cerner	207,206	178,417	100,528	31,456	34,808	19,517	571,932	
		<u>207,206</u>	<u>178,417</u>	<u>100,528</u>	<u>31,456</u>	<u>34,808</u>	<u>16,659</u>	<u>569,074</u>	38
Womens Health	NextGen						1,015	1,015	
	Cerner	46,191	69,601	21,594	6,347	14,441	14,098	172,273	
		<u>46,191</u>	<u>69,601</u>	<u>21,594</u>	<u>6,347</u>	<u>14,441</u>	<u>15,113</u>	<u>173,288</u>	27
ENT	Cerner	114,415	29,807	35,420	9,657	15,445	24,965	229,707	
		<u>114,415</u>	<u>29,807</u>	<u>35,420</u>	<u>9,657</u>	<u>15,445</u>	<u>24,965</u>	<u>229,707</u>	52
Orthopedics	NextGen						23,649	23,649	
	Cerner	9,980	22,330	26,202	6,945	35,549	12,123	113,129	
		<u>9,980</u>	<u>22,330</u>	<u>26,202</u>	<u>6,945</u>	<u>35,549</u>	<u>35,772</u>	<u>136,778</u>	34
General Surgery	NextGen						4,755	4,755	
	Cerner	61,939	30,522	17,195	11,164	8,047	6,261	135,127	
		<u>61,939</u>	<u>30,522</u>	<u>17,195</u>	<u>11,164</u>	<u>8,047</u>	<u>11,016</u>	<u>139,882</u>	13
Hospitalist	NextGen						3,409	3,409	
	Cerner	9,377	6,949	4,316	3,468	6,793	3,353	34,257	
		<u>9,377</u>	<u>6,949</u>	<u>4,316</u>	<u>3,468</u>	<u>6,793</u>	<u>6,762</u>	<u>37,666</u>	233
Workplace Health	NextGen						73,171	73,171	
	Cerner	4,049	6,140	8,117	3,985	4,532	14,852	41,675	
		<u>4,049</u>	<u>6,140</u>	<u>8,117</u>	<u>3,985</u>	<u>4,532</u>	<u>88,023</u>	<u>114,846</u>	138
							Total	45,047,583	66.6

KITTITAS VALLEY HEALTHCARE
US BANCORP INVESTMENTS
MAY 31, 2023

INVESTMENT TYPE	CUSIP	INVESTMENT DATE	MATURITY DATE	YTM %	MATURITY AMOUNT	INVESTMENT AMOUNT	MARKET VALUE	UNREALIZED GAIN/(LOSS)
US TREASURY NOTES	912828ZU7	03/11/2022	06/15/2023	1.100%	2,090,000.00	2,067,793.75	2,085,754.75	17,961.00
US TREASURY NOTES	912828S92	12/29/2022	07/31/2023	4.472%	4,000,000.00	3,925,780.00	3,973,061.76	47,281.76
US TREASURY NOTES	91282CBA8	12/19/2022	12/15/2023	4.419%	2,000,000.00	1,917,781.25	1,944,453.12	26,671.87
US TREASURY NOTES	91282CBE0	01/13/2023	01/15/2024	4.486%	1,500,000.00	1,436,385.00	1,451,718.75	15,333.75
US TREASURY NOTES	91282CBE0	05/01/2023	01/15/2024	4.779%	2,000,000.00	1,936,015.63	1,935,625.00	(390.63)
US TREASURY NOTES	912828ZW3	12/09/2021	06/30/2025	1.000%	1,500,000.00	1,460,742.00	1,377,011.72	(83,730.28)
FHLMC	3137EAF2	12/14/2022	12/04/2023	4.501%	2,000,000.00	1,920,000.00	1,947,143.10	27,143.10
FFCB	3133EMNG3	02/25/2021	01/19/2024	0.190%	1,000,000.00	1,001,156.00	967,734.03	(33,421.97)
FHLB	3130AMKX9	06/07/2021	06/07/2024	0.140%	2,000,000.00	2,002,598.00	1,899,400.94	(103,197.06)
FNMA	3136G4Z71	08/28/2020	08/26/2024	0.370%	1,000,000.00	1,001,588.00	941,962.57	(59,625.43)
FHLMC	3134GW3W4	10/28/2020	10/28/2024	0.350%	3,562,000.00	3,566,235.22	3,334,718.72	(231,516.50)
FHLB	3130ALB52	02/25/2021	02/25/2025	0.236%	2,800,000.00	2,803,892.00	2,584,165.05	(219,726.95)
FHLMC	3134GWK88	09/17/2020	03/17/2025	0.350%	4,500,000.00	4,510,089.00	4,164,268.77	(345,820.23)
FHLB	3130ANZ29	09/30/2021	09/30/2025	0.383%	3,000,000.00	3,009,468.00	2,740,418.64	(269,049.36)
FNMA	3135G06B4	07/27/2021	10/22/2025	0.570%	1,500,000.00	1,499,371.50	1,361,913.45	(137,458.05)
FFCB	3133ENFR6	12/02/2021	12/01/2025	1.220%	1,775,000.00	1,783,285.70	1,635,787.94	(147,497.76)
FHLB	3130ALDB7	02/25/2021	02/25/2026	0.413%	1,800,000.00	1,804,426.20	1,617,144.26	(187,281.94)
FFCB	3133ENHAI	12/14/2021	12/14/2026	1.112%	1,000,000.00	1,003,850.00	899,876.98	(103,973.02)
TOTAL					39,027,000.00	38,650,457.25	36,862,159.55	(1,788,297.70)



June 9, 2023

Noridian Administrative Services
Attention: 935 Appeals Redeterminations
JF Part A Redeterminations
900 42nd Street South
Fargo, ND 58103-2119

Subject: Denial of 22 Target Testing using the 0202U Billing Code

Re: Noridian Letter 31105574 dated 10/06/2022
Noridian Letter 31096935 dated 10/05/2022
Noridian Letter 31127257 dated 10/12/2022
Noridian Letter 31161277 dated 10/19/2022
Noridian Letter 31155079 dated 10/18/2022
Noridian Letter 31192945 dated 10/25/2022
Noridian Letter 32290109 dated 04/12/2023
Noridian Letter 32315505 dated 04/17/2023
Noridian Letter 32360811 dated 04/24/2023
Noridian Letter 32369171 dated 04/25/2023
Noridian Letter 32403229 dated 04/28/2023
Noridian Letter 32412886 dated 05/01/2023
Noridian Letter 32423267 dated 05/02/2023
Noridian Letter 32431073 dated 05/03/2023
Noridian Letter 32461305 dated 05/08/2023
Noridian Letter 32464323 dated 05/09/2023
Noridian Letter 32474401 dated 05/10/2023
Noridian Letter 32484336 dated 05/11/2023

To Whom It May Concern:

In response to the referenced notices above from Noridian regarding the disallowance of the 22 panel BioFire Multiplex Nucleic Acid Amplified test Kittitas Valley Healthcare sent an appeal letter dated November 21, 2022 via certified mail requesting that Noridian not disallow the 22 panel BioFire Multiplex Nucleic Acid Amplified test. For your reference, a copy of the hospital's appeal letter is attached. The letters from Noridian states that the hospital should have received a response within 30 days of our appeal. Noridian has not responded to our appeal. Noridian began sending communication in April and May of 2023 again advising that a payment error was made regarding the 22 panel BioFire Multiplex Nucleic Acid Amplified test and that funds should be repaid or the hospital should request that funds be recouped. Our Revenue Cycle Director requested that the funds be



recouped or offset. In reviewing these accounts we have observed that some of the funds have already been taken back by Noridian.

As stated in our original letter, the BioFire 22 target test panel was the only test available to the hospital that could produce accurate results regarding whether a patient was positive or negative for the Covid 19 virus within 60 minutes.

We respectfully request that Noridian respond to our appeal and not disallowed payment for these critical tests. I can be reached via email at solander@kvhealthcare.org or via telephone at 509-962-7312. Thank you for your consideration.

Sincerely,

A handwritten signature in blue ink that reads 'Scott Olander'.

Scott Olander,
Chief Financial Officer



November 21, 2022

Noridian Administrative Services
Attention: 935 Appeals Redeterminations
JF Part A Redeterminations
900 42nd Street South
Fargo, ND 58103-2119

Subject: Denial of 22 Target Testing using the 0202U Billing Code

To Whom It May Concern:

Kittitas Valley Healthcare is writing this letter to appeal the denial of Multiplex Nucleic Acid Amplified tests for Respiratory Viral Panels LCD that include more than 5 viral pathogens that were billed using the 0202U code. The BioFire 22 target testing panel was used in the Emergency Department and for other urgent or emergent situations. The BioFire 22 target test panel was the only test available to the hospital that could produce accurate results regarding whether a patient was positive or negative for the Covid 19 virus within 60 minutes. Knowing whether a patient was Covid 19 positive was critical information that the admitting physicians and staff had to know in order to safely care for the patient and to protect hospital physicians and staff. If patients needed to be transferred to another hospital, the accepting hospital required Covid 19 test results before they would accept the patient. Kittitas Valley Healthcare had no other way to obtain timely test results. At the time, results for the PCR Covid 19 tests that were sent out took from 24 to 72 hours or longer to obtain results.

We respectfully request that Noridian reconsider the decision to disallow the 22 panel BioFire Multiplex Nucleic Acid Amplified test. Kittitas Valley Health Care used the 22 panel BioFire for approximately 1300 patients so denying reimbursement for this test is a \$260,000 hit to the hospital's finances. I would be happy to schedule time to discuss further. Dr. Kevin Martin, KVH's Chief Medical Officer can provide additional clinical background about the use of the BioFire test with 22 targets. I can be reached via email at solander@kvhealthcare.org or via telephone at 509-962-7312 and Dr. Martin can be reached via email at kbmartin@kvhealthcare.org or via telephone at 509-933-7585. Thank you for your consideration.

Sincerely,

A handwritten signature in black ink that reads 'Scott Olander'.

Scott Olander,
Chief Financial Officer

A handwritten signature in black ink that reads 'Kevin B. Martin'.

Kevin B. Martin, MD
Chief Medical Officer

cc: Congresswoman Kim Schrier
1123 Longworth HOB
Washington D.C. 20515

www.kvhealthcare.org
509.962.9841 • Fax: 509.962.7351
603 S. Chestnut Street • Ellensburg, WA 98926

Grant	Grantee/ Applicant	Funding Category	Funding Source	Amount	Status	Funds Leveraged/Complimented	Partnerships	Purpose
Opioid Implementation Grant	KCHN	Opioids	HRSA	\$1,000,000	Awarded	Opioid Planning and Opioid Resource Network Manager	KCHN Participants	Implement plan created in Opioid Planning Grant to address opioid addiction in our county
Care Coordination	KCHN	Care Coordination	HRSA	\$750,000	Awarded	HRSA Rural Health Network Development, GCACH	KCHN Participants	Funding to improve care coordination in our community
Community World of Difference	KCHN	Care Coordination	Cigna	\$100,000	WIP	HRSA Rural Health Network Development, GCACH, HRSA Care Coordination	KCH Participants	Funding to improve care coordination in our community
Rural Mental Health Integration	KVH	PCMH	UW/AIMS	\$245,000	Awarded	GCACH	Greater Columbia	Provides training and education for integrated mental health at FMCE
Drill Grant	KVH via KVHF	Education/Staff Development	Coverys	\$49,000	WIP	DOH Trauma	KVFR, Law Enforcement (likely included), Foundation	Create and implement clinical and non-clinical drill program
Behavioral Health Grant	KVH via KVHF	Facilities	Premera	\$100,000	WIP	Rural Mental Health Integration	ED, Foundation	Remodel ED and ICU rooms to be safe rooms for behavioral holds and training staff
Child Care Partnerships Grant	KCHN	Child Care	WS Department of Commerce	\$80,000	Awarded		KCHN	Provides funding to explore options and strategically plan how to increase childcare capacity in our community
Drive Thru Vaccinations Clinic	KVH	Pharmacy/ Clinics	Capture Cares	\$24,879	Awarded			Funds to implement a vaccination drive-thru clinic for flu and child immunizations.
Rural Mental Health Integration	KVH	PCMH	UW/AIMS	\$245,000	Awarded	GCACH	Greater Columbia	Provides training and education for integrated mental health at FME
Capital Funding Request	District 2	Facilities	Washington State Legislature	\$761,080	Awarded			Capital Funding to assist in the construction of Station 99
Capital Funding Request	KVH	Facilities	Washington State Legislature	\$385,627	Awarded			Capital Funding to assist in the remodel of KVH Lab
Kittitas County Jail MAT and Behavioral Health RFP	KCHN	Behavioral Health	Kittitas County Corrections	\$600,000	Awarded	HRSA RCORP, HRSA Care Coordination	KCHN	KCHN is applying with a joint application with its partners to provide direct treatment services in the jail. Three year Contract
COVID-19 RHC Vaccine Funding	KVH	COVID	HHS	\$ 150,000	Awarded			Funding to assist in the COVID-19 Vaccination efforts
Early Learning Facilities Grant	Happy Feet Academy / KCHN / KVH	Child Care	Department of Commerce	\$1,000,000	Awarded	HRSA Care Coordination	KCHN	Funding would increase childcare capacity in our community
Opioid Implementation Grant	KCHN	Opioids	HRSA	\$1,000,000	Awarded	Opioid Planning and Opioid Implementation Grant	KCHN Participants	Expanding on the work of the first Opioid response grant
RCORP Behavioral Health	KCHN	Opioids	HRSA	\$2,000,000	Awarded	Opioid Planning and Opioid Implementation Grant	KCHN Participants	Funding would expand the work of the implementation grant to go beyond opioids and work to find solutions for other behavioral health issues
Harm Reduction Program #2	KCHN	Opioids	SAMHSA	\$1,200,000	Applied	Opioid Planning and Opioid Implementation Grant	KCHN Participants	Activities focus primarily on ways increase access to treatment, and reduce harm for individuals with SUD
ALTA Training	KVH	Education/Staff Development	DOH	\$7,500	Awarded			Funding would support getting staff members through ALTA Language testing and help them to become certified.

Professional Development	KVH	Education/Staff Development	Hearst Foundation		Researching			Funding focuses on professional development and addressing healthcare professional shortages.
Coordinated Care	KCHN	Care Coordination	Coordinated Care		Applied	HRSA Care Coordination		Funding focuses on improving care management for underserved populations and improinb service delivery for LGBTQ+ individuals
Care Coordination Expansion	KCHN	Care Coordination	Yakima Valley Community Foundation	\$25,000	Applied	HRSA Care Coordination		Funding to extend care coordinators to fulltime.
Family Resource Center Capacity Building	KCHN	Care Coordination	DCYF	\$60,000	Applied	HRSA Care Coordination		Funding to provide care coordination for individuals and families at risk for abuse and neglect
Technical Education Grant	KVH	Education/Staff Development			Researching		School Districts, YVCC, Technical Programs, CHCW	In collaboration with school districts, technical schools, and health care providers, KVH is proposing strategic planning activities to create training programs for training new employees and addressing the workforce shortage. Currently searching for a grant program that will be a better fit for this work.
Capital Funding Request	KVH	Facilities	Washington State Legislature	\$2,000,000	Applied			Capital Funding to assist in the construction of the surgery expansion, with primary focus on the Diagnostic Imaging Department
Offender Re-Entry Program	KCHN	Opioids	SAMHSA	\$2,000,000	Applied	Opioid Implementation, Care Coordination		Funds will be used to provide continued MAT services to inmates as they re-enter the community and provide care coordination. This is a 3 year grant program.
Cyber Security Grant Programs	KVH	IT	State and FEMA		Researching			Funds to implement and improve cyber security at KVH.
ANEW Grant Program	KVH	Staff Development	HRSA	\$650,000	Applied			Training Grant to provide scholarships and funding for clinical training for ARNP Students. Funds will pay for approximately 12 students in 4 years for two years of support and clinical training.
RCORP Children's Behavioral Health	KCHN	Opioids	HRSA	\$4,000,000	Applied	HRSA Behavioral Health	KCHN Participants	Funding would expand current behavioral health work from the Health Network to children and yough 5 - 18. Fuding is up to \$1,000,000 per year for four years.
Strategic Prevention Framework	KCHN	Opioids	SAMHSA	\$1,875,000	Applied	Opioid Implementation, Care Coordination	KCHN Participants	Funds would assist in leveraging and expanding upon the work of the current opioid work the network is already doing with an emphasis on prevention. Fuding is for \$375,000 per year for 5 years.
Offender Re-Entry Program	KCHN	Opioids	SAMHSA	\$2,000,000	Applied	Opioid Implementation, Care Coordination		Funds will be used to provide continued MAT services to inmates as they re-enter the community and provide care coordination. This is a 3 year grant program.

Community Base Offender Reentry Program Support	KCHN	Opioids	Department of Commerce	\$300,000-\$1,000,000	Researching	Opioid Implementation, Care Coordination, Jail Contract, Offender Re-Entry Program	Funds will be used to provide continued MAT services to inmates as they re-enter the community and provide care coordination. This is a 2 year grant program.
SANE Education and Service Reimbursement	KVH	Staff Development	DOH	\$41,760	Applied		Funding to support Sexual Assault Nurse Examiners (SANE) educational opportunities including RN time and travel, supplies, backfill from other departments, KVH incentives for SANE RNs, and for SANE RNs time in performing examinations. Funds would reimburse for SANE Program activities for FY 2022

* Grants under research may not have a grant amount associated yet

** Bold and larger fonts are new opportunities

*** Denied Applications

**** ***Bold, italicized, larger font size are newly awarded grants***

KITTITAS VALLEY HEALTHCARE
Capital Expenditure Board Narrative

Requesting Department: Medical Specialties Clinics

Capital Item Requested: Power Exam Tables (14)

Function of Project: Purchase fourteen power exam tables that adjust from 18-37 inches improving accessibility to the exam chair and greatly reducing the likelihood of injury to patients and staff.

Reason Requested: Current exam tables do not have adjustable heights, with some being quite high, and we are not able to provide a safe environment for many of our patients. The current method of having the patient helped up on the bed with Kittitas Valley Healthcare staff has been a safety risk to employee health. The adjustable examine chair will allow for a proper physical exam. The purchase of the Power Exam Tables will allow a safe setting for both our patients and staff.

Budget: \$147,000

Actual Cost: \$115,500

Submitted By: Stacy Olea – Chief of Clinic Operations

Date: 06/22/2023

Community Relations June 22, 2023 Board Report

Medicare retroactive rejection of COVID Biofire testing – A letter went out to nearly 500 patients explaining the recent Medicare reversal of payment for Hospital-based COVID Biofire testing. We also put notices on our website and via Social media. Scott can address any feedback or response from patients.

Senior Health Fitness Fair – Our first Senior Health Fitness Day took place on Wednesday, May 31 at Mountain View Park. The standard Ellensburg wind was present and convinced everyone to move this event indoors. We received positive feedback and appreciation from both the attendees and the participants. One comment from a vendor on our post-event survey is below. Thank you Jon and Terry for spending the day with us and greeting the public.

I loved the event! Hearing the reasons people came was heartening. One woman came because after a heart attack, her doctor told her she should get out more and find new things to do. In fact, many of the comments had to do with the person looking for things to do. Art was not immediately accepted as something "they" could do, but after talking to Amy and me, almost all took a kit "to try"! My favorite comment was from a man who looked at the paint kit and said, "I haven't done that since grade school!" He was pretty excited to do it! True saying, but true: "You are never too old to" fill in the blank with new possibilities. Having live music was a definite plus! Very good performers made it even better! I do wish more people had been there but know those who came know more about what KVH offers as well as other groups in the Ellensburg area who have a senior focus. Talking to a representative of a care facility, for instance, in a relaxed, open setting like this event was a way to provide a personal connection with everyone. Websites are super at information. Eye-to-eye contact, I believe, allows for a greater understanding of the person's needs, abilities, hopes, the list goes on. The person then has a contact for the interest they have. Please do it again! Next year, the ones who came will bring friends."

New KVH Tools – KVH is changing our Policy, Procedure, Forms, and Contracts (P&P) program effective July 17. We will also be changing our Intranet tool in the fall. My team is leading the Intranet change and participating in the P&P change. Both of these will require significant communication and training with our staff.

Internal & Adult Medicine – We will be changing the name of Internal Medicine to Adult & Internal Medicine in July. This name reflects the providers we have, (Internists and Family Practitioners with an adult care focus) and will be recruiting for this clinic.

Survey of Patient Safety Culture – On Monday, June 12 we celebrated the staff's 82% participation rate in the SOP survey by giving away nearly 500 pints of Winegar's ice cream. We later learned that Winegar's would be donating this ice cream to our team. Please be sure to take the time to thank the Winegar's.

Emergency Preparedness – There was an NC2 finding during the DNV survey for not having a completed 96-hour resource tool. The Emergency Preparedness Committee has already started the work on this tool and it will be completed by July 23.

Events:

- **KVH returns to the Ellensburg Farmer's Markets** - Our 2023 schedule for the market is below
 - June 17th: Emergency Preparedness
 - July 1st: Hands-Only CPR/Water Safety
 - July 15th: Derm Day
 - August 5th: Art Therapy
 - August 19th: Sports Physicals/Well Child Visits/Vaccines

Sept. 9th: Medicare Wellness visits vs. Annual Physicals

Sept 23rd: Specialty Services

October 21st: Infection Prevention Week

October 28th: Snow Safety

- **Cle Elum Pioneer Days Parade, July 1, 2023**
- **Experience Healthcare, July 17-21, 2023** – Experience Healthcare is a fun and rewarding week-long program introducing attendees to healthcare careers taking place July 17-July 21 from 8am-5pm. Students will learn all aspects of working in healthcare, learn about the range of careers within the field, and learn practical skills! We have ten students enrolled who come to us from Ellensburg, Kittitas, and surrounding areas.
- **KVH “Day” at the CWU Football game, September 16, 2023** – more details to follow
- **2nd Annual KVH Appreciation Banquet** – Save the Date! December 2, 2023