

ADAMS COUNTY PUBLIC HOSPITAL DISTRICT #2  
Meeting of the Board of Commissioners  
**July 27, 2022**  
East Adams Rural Healthcare  
Conference Room  
Ritzville, WA

- I) Call to Order
- II) Additions or Corrections to the Agenda
- III) Public Comment
- IV) Approval of Minutes-June 22, 2022
- V) Consent Agenda
  - i) Chief Nursing Officer Report
  - ii) EMS Report
  - iii) HR Report
  - iv) Quality Report
- VI) Medical Staff Report
- VII) CEO Report
- VIII) Committee Reports
  - i) Finance Committee
    - (1) Financials – June
    - (2) Approval of Warrants and Vouchers
- IX) Old Business
  - None
- X) New Business
  - i) Matt Ellsworth; EMS Levy
  - ii) Strategic Plan Update
- XI) Public Comment
- XII) Executive Session
- XIII) Next Board Meeting at 5:30 p.m. August 24, 2022
- XIII) Adjourn

Washington State law states that all meetings of public bodies such as ours be open to attendance by the public, save for executive sessions or if a meeting has been closed owing to disruption. But that law is equally clear that there is no requirement that public attendees at such meetings be permitted to take any part in the proceedings. This Board, however, promotes open dealings with our community, and welcomes appropriate public participation; but, considering interests such as efficiency and simple civility, we do have rules governing that participation. We generally have on our agenda a period intended for public comments and questions, and we ask that members of the public confine questions and comments to that period. If, however, during our deliberations on a given matter a member of the public believes that he or she has some clearly relevant information that we have not considered, he or she may raise his or her hand and the Board Chair, in his or her discretion, may allow that member of the public to provide a brief factual comment. Moreover, both during meetings and in the specified comment period, we require that questions or comments be concise, factual, and, notably, that they be civil. We willingly accept tough questions and critical comments, but we will not accept generalized negative opinions, rambling, personal attacks, or perceived disparagement of individuals. Comments are limited to three minutes. The Board reserves the right to terminate a question or comment at any point if the Board determines in its discretion that the comment or question is unacceptable or disruptive. Please remember the need for civility and compliance with our rules.

ADAMS COUNTY PUBLIC HOSPITAL DISTRICT NO. 2  
East Adams Rural Hospital  
903 S. Adams  
Ritzville, WA 99169  
Meeting of the Board of Commissioners  
June 22, 2022

PRESENT:	John Kragt	Chairman
	Stacey Plummer	Vice Chairman
	Eric Walker	Commissioner
	Jerry Crossler	Commissioner
	Dan Duff	Commissioner/Secretary
	Corey Fedie	CEO
	Kimberly Polanco	CFO
	Jennifer Pepperd	Chief Nursing Officer

ABSENT: Dr. Sackmann

GUESTS: Colene Hickman, Kelly Wiggins

There were no community members present.

John Kragt, Board Chair, called the meeting to order at 5:31 p.m.

**INTRODUCTIONS-** None

**ADDITIONS AND CORRECTIONS-**None

**PUBLIC COMMENT-**None

**APPROVAL OF MINUTES**

The May 25th Board Meeting minutes were presented. Commissioner Stacey Plummer made a motion to approve the May 25th Board Meeting minutes. Commissioner Dan Duff seconded. Motion passed.

**CONSENT AGENDA:**

John Kragt, Board Chair polled the Board if they would like anything moved from the Consent Agenda to the regular agenda. The Board did not request anything to be moved.

**MEDICAL STAFF REPORT:**

Jennifer Pepperd, CNO gave report on behalf of Dr. Sackmann. Jennifer reported that there were two guests at the Med Staff meeting. Janna Nixon from Shriner's presented information regarding the services that Shriner's provides and what kind of referrals the providers can make to them. Austin Miner, CRNA whom provides our pain management services provided Med Staff education regarding the use of Ketamine for sedation. Jennifer reported that Sheena Starkel, Pharmacy Rep. shared treatment options for monkey pox if it is suspected. Dr. McKay was able to attend the meeting briefly.

Board Chair John Kragt asked if Dr. McKay was still happy to be here. Dr. McKay said that he was and is continuing to build his patient load and learning a lot. Vice Chair, Stacey Plummer asked if Dr. McKay had all of the necessary equipment to perform his duties. Dr. McKay said that the providers have made a list of requests and Jennifer is working on getting those items purchased. There are still some supply chain delays.

### **CEO REPORT- See attached**

Corey Fedie, CEO reported that there is still lots of discussion regarding the Swing Bed Program and how to get more patients in beds. Jennifer is checking all referrals. We do have a Swing Bed consultant coming at the end of the month. We are still working on building and implementing EPIC. Several staff are involved in that process. Commissioner Eric Walker asked about the Care Center status. Corey said that he had spoken to Vincent recently and due to the current nursing staff shortages he is not comfortable opening the building back up as a nursing home. He is looking for suggestions on different ideas and will be reaching out to community stakeholders for their input.

### **COMMITTEE REPORTS**

#### **Finance Committee- See Attached Report**

### **CFO REPORT - See attached**

Kim Polanco, CFO reported that the month ended better than expected. Revenues are down because there were less patients in beds. There was a loss of \$100,000 for the month. This was far less than the anticipated \$300,000. Salaries and wages expense is under budget while contract nursing expense is over budget. The Medicare advanced funds have been paid back in full. We've implemented the new payroll system and are starting the new accounting system this month. Board Chair, John Kragt, asked about how long contracted staff would be needed. Jennifer explained that they have been covering vacations, extended illnesses, etc. There is one full-time RN position posted. Jennifer recently hired a per diem RN to help fill some of the gaps. Corey added that the EMS class is doing well. We started with nine students and have only had one drop out. Corey and Kim explained how important it was to have a minimum of at least one swing bed patient. Commissioner Eric Walker asked about tracking patients to see where they go and then contacting them directly or if a provider has suggested a procedure contacting them directly to come back to our facility for after care. Colene explained that would be a HIPPA violation. Corey reminded the Board of the Dash Program that he had previously talked about that links CPT codes to zip codes so we would get an idea of where most of our community is going and could reach out to that facility to try to get out patients referred back to us. There would be no PHI shared. There was a brief discussion about different marketing and advertising ideas that could be used to get patients to come here.

### **WARRANTS & VOUCHERS: EARH**

Dan Duff presented the following warrants for approval Accounts Payable Warrants #064111 to #064253 for \$738,003.02 and an additional \$384,580.72 for payroll direct deposits and \$115,810.44 for payroll tax deposits. Commissioner Eric Walker made a motion to approve, Vice Chair Stacey Plummer seconded. Motion passed unanimously.

### **OLD BUSINESS**

None

## **NEW BUSINESS**

Resolution 22-01; Investment Authorization was presented to the Board. Commissioner Eric Walker read the resolution. Vice Chair Stacey Plummer made a motion to authorize Corey Fedie, CEO to deposit or withdraw investments on behalf of Adams County Public Hospital District #2. Commissioner Eric Walker seconded. Motion passed unanimously.

Resolution 22-02; Patient Accounts Cash Drawer was presented to the Board. Commissioner Eric Walker read the resolution. Board Chair John Kragt asked how the cash drawer was going to be audited and how much money will be kept in it. Kim Polanco, CFO explained that the cash drawer would be reconciled on a daily basis with dual reconciliation and signed off. The cash box will be locked and stored in a locked filing cabinet at night. There will be \$200 in the cash drawer to be able to make change for patients that are paying on accounts or for co-pays. Vice Chair Stacey Plummer made a motion to authorize Corey Fedie, CEO to establish a patient accounts cash drawer. Commissioner Dan Duff seconded. Motion passed unanimously.

Corey Fedie, CEO gave a brief summarization of the Community Forum that was held the previous night. There was only one community member that showed up. It was good practice and several leadership members were there. Board Chair, John Kragt, felt that good information was shared in the presentation. He suggested that the district consider doing a daycare for not only employees but also for the community. It is something that is desperately needed in the community. John thought that if you want to reach the public you have to do something that involves their kids. Corey and Kim will run a financial analysis and research what the requirements would entail.

## **PUBLIC COMMENT-None**

Commissioner Eric Walker made a motion, seconded by Commissioner Dan Duff to adjourn the meeting. The motion passed.

The meeting was adjourned at 6:28 p.m.

Respectfully submitted,  
Kylie Buell, Executive Assistant

## CNO Board Report

July 27, 2022

1. I had a nurse that wanted to go from full time down to per-diem, this position has been posted I have had someone expressed interest in this position. I extended our current night shift charge nurse position contract through 12/22. She has been a wonderful addition to our staff. I have an interview with a NAC for our open night shift position. We did interview one nurse that we are looking to bring on to our staff.
2. We completed the in person consultant part for our swing bed program. She has given us a report that we are working on completing at this time
3. We continue to move forward with our EPIC build, we continue to answer lots of questions both by email and in person meetings.
4. We have had some discussions with our ACO about what our plans are for next year.
5. Med staff by-laws have been finished and will go to med staff for review and discussion. More to come on this.
6. I am working closely with Dr. McKay on the wish list for the providers and some of the supplies that they are wanting. We have had a demo with some of the suppliers so we can have a better understanding.
7. We are close to receiving our IV pumps; it appears that we may be past the back order status.
8. We will have a demo with a company that could help us out with compliance hotline, this company could also help us out with multiple other areas, we are looking to see what we can consolidate so we have one place to go for, help tickets, education, policies, and compliance reporting. More to come as we discover all what they can do for us.

Sincerely

Jennifer Pepperd RN/CNO

AMBULANCE RUNS JUNE 2022								
UNIT	TRANSPORT	EARH	REFUSAL/ NON- INJURY	CANCEL/ UTL	TREAT & RELEASE	OTHER FACILITY	LIFT ASSIST/ Standby	TOTAL
3	0	1	2					3
4	9	18	7	8			4	46
6	2	6	1	3			1	13
7								
ALL	11	25	10	11			5	62
UNIT	STARTING MILEAGE	ENDING MILEAGE						TOTAL MILEAGE
3	90429	90486						57
4	157896	159961						2065
6	55387	55929						542
7	23834	23834						0
ALL								2664

2021 YTD Total **\_761\_** runs

2022 YTD Total runs runs **341**

**45% Complete**

Month 2021 **\_56\_** runs

Month 2022 **\_62\_** runs

Increase/Decrease of **\_+6\_** from 2021

# Job Openings

Department	Job Title	Posting Date	Start Date	Status	Notes
Business Office	Postdoc Clerk	02/11/2021		Filed	
Business Office	Health Information Manager	04/01/2021		Filed	Offer letter signed as of 3/17/21. Candidate start date set for 4/26/21. Candidate will start 4/21/21
Nursing	Long Term Care Nurse	09/13/2019		Filed	Candidate accepted position as of 9/21/21. NBI
Crna/Periopul	MD	10/01/2020		Filed	Working with recruitment firm. Start date 10/14/2021
Facilities	Maintenance Tech.	03/20/2021		Filed	Call out to 5 applicants to schedule interview. Only one interview scheduled for 3/22/21. Applicant will start 3/22/21
Nursing	Long Term Care Nurse(Day Shift)	09/12/2019		Filed	Interview scheduled for 7/22/21. Applicant will start 7/22/21
Information Technology	Help Desk/Support	03/09/2021		Filed	1 interview scheduled for 7/22/21. Applicant will start 7/22/21
Facilities	Facilities Manager	03/07/2021		Filed	4 interviews conducted. Anticipating offer being presented Friday 5/28/21. Orientation will start 07/12/21
Business Office	Benefits Advisor	04/02/2021		Filed	Candidate orientation 5/27/21
Business Office	Internal Specialist	04/17/2021		Filed	Candidate orientation 5/27/21
Business Office	Chief Billing	04/22/2021		Filed	Offer letter written on 5/21/21. Multiple candidates interviewed. Offer signed on 5/21/21. Candidate accepted and will start orientation 6/14/21
Administration	Executive Assistant	04/07/2021		Filed	3 interviews scheduled for the week of 6/21/21. Candidate will start orientation 07/05/21
Rehab	Physical Therapist	04/14/2021		Filed	Signed offer letter. start date August 16, 2021
Rehab	Speech Language Pathologist	04/17/2021		Filed	Signed offer letter. start date August 16, 2021
CRNA	MA-C	04/28/2021		Filed	Candidate started 06/15/21
CRNA	MA-C	07/12/2021		Filed	Filed with NBI. candidate started 10/14/2021
Nursing	MA-C Noc-Shift	07/06/2021		Filed	Noticed and filed with per diem internal candidate
Facilities	Housekeeper	07/27/2021		Filed	Offer accepted and candidate will start orientation 11/4/2021
Rehab	OT/COA	07/29/2021		Open	Not currently advertising for position
Lab	MLT	07/29/2021		Open	Unable to fill at this time
Lab	Temporary Lab Assistant	08/02/2021		Open	Filed with internal candidate
Facilities	Hospital Engineer	08/26/2021		Open	Offer accepted and candidate will start orientation 01/27/2022
Business Office	HRM Tech	09/01/2021		Filed	Offer accepted and candidate will start orientation 02/17/2022
CRNA	MA-C	09/07/2021		Filed	Filed with an MA-C that started 10/18/2021
Nursing	MA-C Noc-Shift	09/13/2021		Filed	Filed with agency MA-C 03/08/22
Business Office	Distal	11/11/2021		Filed	Candidate will complete orientation 12/13/2021
CRNA	Chief Manager	12/01/2021		Filed	Head internal candidate started 01/17/2022
IT	Tech	12/02/2021		Filed	Candidate accepted offer and started 12/15/2021
CRNA	RN, DRN, DRN MA-C	01/17/2022		Open	Filed. Head MA-C candidate will start 1/29/22
EMT	EMT			Open/OnGoing	Head EMT's in March. Update: Hoping to hire 4-5 of the students currently in the EMT class after National Certification passes
Imaging	Pw Demd Rad Tech	02/22/2022		Filed	Head 4/17/2022
Therapy	OT/COA	04/01/2022		Filed	Completed OT work start as EMT employee 06/17/2022
Therapy	PT	04/01/2022		Filed	Applicant signed offer letter. Giving 30 day notice to current employer. Started 7/11/22
Therapy	Speech Language Pathologist	05/04/2022		Open	
Nursing	MA-C Noc-Shift	06/09/2022		Open	
Nursing	Medication Nurse	07/12/2022		Open	
Administration	Accounting Clerk	07/14/2022		Open	



# MINUTES

East Adams Rural Healthcare

6/22/2022 at 10:30am | Meeting called to order by Jackie Mathis

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## In Attendance

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Jackie Mathis, Jennifer Pepperd, Colene Hickman, Neil Verberne, Tyler Dennis, Nelson McKay, Kim Polonco, Terri Abney, Stacey Plummer, Todd Nida, Dan Crisp, Bruce Garner

Missing: Amelia Bernal (patient care), John Kragt, Corey Fedie (vacation), Amanda Osborne (sick), Nelson McKay

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## Approval of Minutes

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No issues with May minutes, located on I drive.

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## Board

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No questions at this time. Board will be given minutes in board meeting packet for approval.

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## New Business

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Jamey Bitton has taken over N95 fit-testing. New policy in the works, only testing those involved in direct patient care. Jamey to fit-test EMTs at July meeting.

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## PowerPoint Manager Reports

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PowerPoint was presented for May data. All managers explaining current tracking measures, goals, and action plans. Discussion on current measures, questions asked and answered, and current data documented and previous measures referenced as needed. Highlights from discussion below.

Lab: Auditing all bloodbank paperwork r/t deficiencies found in state lab inspection, focused on training and education to lab staff and nursing staff on proper documentation. Will be ongoing. Monitoring blood cultures, improvement from previous audit with no longer drawing from IV site when possible for integrity of specimen.

Safety: Regular meetings have resumed. No safety incidents reported in session that met prior to QA meeting today, see safety minutes for additional items discussed at safety meeting. Will not meet next month, resume in August.

Medical records: monitoring charting and documentation discrepancies, percentage of incomplete charts overdue, and days in total discharge not final billed. Improvements in



numbers, some outstanding charts which are being monitored on a daily basis for completion. Most items being corrected on a daily basis on hospital charting with few charts waiting for extended periods of time. See PowerPoint for percentages of outstanding documentation deficiencies by provider. Clinic documentation and Hospital documentation to be accounted for separately when reporting documentation deficiencies for clarity.

Therapy: April numbers were decreased related to number of patients responding to referrals. Continue to have good success at the school. Building issues resolved, some space needs continue to be in progress for action plans. Goal for retention and successful follow through of referrals is 75% with action plan in place to hit this goal including tracking, implementing a policy to connect with patients, and returning calls to providers for follow-up. New PT hired and will be starting in July. Recruiting for ST.

Patient Safe Handling: No falls in previous month, slide updated, no referrals to SPH for month of April. SPH paperwork audited with 4/5 completed for new admits.

Radiology: See PowerPoint for data, continuing to meet goals, seeing less billing discrepancies than previously.

Maintenance: Continuing on measures for 2022. Goals being met, no additional action items at this time. All maintenance requests being worked on, in compliance for all state findings with continuation of measures put in place for POC. Checklists being completed timely. Fire drills completed as regulated, generator test next week.

Dietary: All goals were met, Dietician is reporting monthly inspections, RD checks, no issues found. Some weight changes with residents, however were not unexpected r/t goals and changes in life stages. No QMM or dietary issues identified.

SS: Continuing with weekly care planning meetings. All referrals being monitored and discussed going forward at weekly careplan meetings, referrals have been few and far between the past month. Discharge interviews positive. Swing bed specialist to review program and give recommendations in this month, will report on findings next month.

IT: PowerPoint slide was updated, reported on projects currently in the works including the implementation of Windows 10 to all facility computers to replace Internet Explorer, replacing screens on computers for implementation of EPIC, creating a device list for Epic implementation, moving out current network to new servers, and creating a new Intranet landing page with updated QMM icon for easier reporting. Some disruptions in service scheduled for equipment updates r/t EPIC implementation. New cyber-security measure and phishing button implemented on emails.

Nursing reported 0 STEMI. No use of restraints reported, all blood transfusions spot checked for completeness by lab staff for their state POC compliance, no CVA for the month. All deaths are reviewed by Medstaff in peer review quarterly by Dr. Anderson in August meeting. Organ procurement paperwork completed as needed on ongoing basis, 0 May ED deaths. Continuing chart audits and education as needed on excellent documentation of ASA given and actual EKG time for appropriate patients See PPT for current numbers. No nursing findings related to QA, but will continue to monitor ongoing.

Infection control continues to monitor all things COVID and update policies as needed. No COVID related transfers for the month of May. All previous findings r/t covid vaccinations and contingency policy and implementation resolved with action plans in place and functioning. Expecting increase in COVID numbers in the month of July r/t current epidemiology predictions. Masking education provided to all staff.

Antibiotic Stewardship/ Pharmacy and Therapeutics/ Infection Control Committee met in May. All med errors/ near misses identified and ongoing issues being monitored closely by pharmacy and reviewed. COVID still on forefront of discussions, documentation requests of providers all reported back through Medstaff. Monkey Pox identified as potential emerging disease and will continue to be monitored with education going out as needed. Antibiotic usage at EARH remains low. TASP participation by IC and Pharmacy regularly.

HR reviewing personnel files as established at the last meeting and is at 100% of the five personnel audits per our POC. POC for missing "approvals" on exemption paperwork in place and contingency policy live and being audited. Carelearning numbers continuing to increase.

Business Office is continuing to work towards their goals in correcting any billing discrepancies and training new staff. Progress continues to be made with correct billing and revenue cycle. Several staff members out in months April. Registration and billing goals outlined and current stats given. Goals being met and improvements to measures continue. Please see PPT for exact numbers related to ongoing QA projects. Continuing to see improvements in revenue cycle.

QMMs: Zero falls for May. Additional QMMs reported x1 HR was referred and all previous QMM closed. Zero clinic QMM this month referred to clinic manager and resolved.

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## Announcements

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Next Meeting July 27 , 2022

Current PowerPoint and Minutes available on I drive

Adjournment at 11:15am



# East Adams Rural Healthcare

903 South Adams  
Ritzville, Washington 99169  
509-659-1200

## CEO Report to the Board

Board of Commissioners  
East Adams Rural Healthcare  
July 27<sup>th</sup>, 2022

As summer moves forward so has a lot of activity in the healthcare environment. Across the state most healthcare organizations are feeling the pinch again with rising patient volumes. This time however it doesn't appear to be as heavily driven by COVID positivity. The current thought process is a combination of COVID, delayed care and post COVID sickness. The combination of increased patient volumes and staffing challenges is creating bed shortages across the state. However, many of the rural facilities continue to have available beds and increased conversation is being had to figure out why. At a recent GCHA meeting it was shared amongst all the critical access hospitals that we are all having difficulty sourcing patients, especially swing bed. In other words, we are not alone.

Although that is somewhat comforting it isn't helping the bottom line. It is difficult to operate a healthcare facility without patients! So we continue down our relentless path of improvement. We had our consultant on site to evaluate our swing bed program to ensure we are meeting requirements, but more importantly helping us to understand what we need to do to move forward and grow the program. We have received some feedback so far and have begun making improvements already, but more will come.

Regarding improvements, we continue to look for every opportunity. Our EPIC conversion is going strong and still on track. The financial software implementation is in full swing. Our clinic team has been making changes to improve teamwork and customer service. And of course we have put a lot of effort into EMS training to improve access to EMTs so our ambulance service continues to be the community asset we all rely on. Our most recent class just finished up. Out of nine initial students eight completed the class and are ready to take their national exam. Of the eight, four have signed up with us already to cover shifts pending certification. We are excited and will have another class soon.

We completed the All Employee Engagement Survey the end of June. We had an excellent turnout with fifty-four responses compared to thirty-seven prior-year. We are in the process of reviewing them and will be communicating the results as well as action plans in the upcoming months.

With the mobile clinic anticipated delivery in a couple of weeks I have been asked to present about it and its capabilities to the Othello Community Hospital board at their meeting on August 25<sup>th</sup>. Pam Gilmore and I will attend, hopefully with the vehicle.

Lastly, there are community events coming up you should be aware of. First is the "End of Summer" event that we are partnering with Lind-Ritzville Schools and the Chamber. It is taking place on August 25<sup>th</sup> at the city park. There will be food, games and a movie later in the evening. Advertising

should start next week in the paper, web sites and social media. Second, the Wheatland Fair & Rodeo is coming up quick. We hope to have our Mobile Clinic by then and plan to showcase it there. We are also sponsoring part of the rodeo again this year as well. Third, is the "From Harvest to Health" Fair September 15<sup>th</sup>. We have partnered with the WSU extension office to put on this event at Wheatland Fairgrounds. Please join us for all of these events!

As always, it is a privilege to serve the board and our community.

Respectfully,

A handwritten signature in black ink, appearing to read "Corey Fedie". The signature is written in a cursive, flowing style.

Corey Fedie, CEO