1. **5:00 pm – CALL TO ORDER/ROLL CALL**

2. **5:02 pm – APPROVAL OF THE BOARD MEETING AGENDA –** *(Vote)*

3. **5:05 pm – PUBLIC COMMENT**
   a. Public Comment (please limit comments to 3 minutes)

4. **5:10 pm – CONSENT AGENDA –** *(Vote)*

5. **5:15 pm – PRESIDENT'S COMMENTS – Agenda revision**

6. **5:20 pm – NEW BUSINESS**
   a. **RCW 43.09.2855 Local Governments –** General Counsel, Skip Houser– *(Information)*
   b. **CEO Report –** CEO Jensen – *(Information)*
      o **Commissioner Education**, How Boards can Support Workforce Behavioral Health
   c. **Strategic Plan Dashboard** [June 2023] – *(Information)*

7. **6:00 pm – COMMITTEE REPORTS**
   a. **6:00 pm – Finance Committee** – CFO Ritter – *(Information)*
   b. **6:10 pm – Approval of Warrants** [May 2023] Commissioner Speikers – *(Vote)*
   c. **6:15 pm – Facilities Committee –** Director Scott – *(Information)*
   d. **6:20 pm – Medical Committee –** [June 2023] CMO Thompson – *(Information)*

8. **6:30 pm – GOOD OF THE ORDER/COMMISSIONER COMMENTS**

9. **6:50 pm – EXECUTIVE SESSION**
   Executive Session is convened to discuss the following topic, as permitted by the cited sections of the Revised Code of Washington (RCW 42.30.110):

   (b) To consider the selection of a site or the acquisition of real estate by lease or purchase when public knowledge regarding such consideration would cause a likelihood of increased price
   (i) To discuss with legal counsel representing the agency matters relating to agency enforcement actions, or to discuss with legal counsel representing the agency litigation or potential litigation to which the agency, the governing body, or a member acting in an official capacity is, or is likely to become, a party, when public knowledge regarding the discussion is likely to result in an adverse legal or financial consequence to the agency.

10. **7:15 pm – ADJOURNMENT**

Renée K. Jensen, *Chief Executive Officer*
9801 Frontier Avenue SE, Snoqualmie, WA 98065 • Ph. (425) 831-2362│ Fax:(425) 831-3412
Owned and Operated by King County Public Hospital District No. 4
SVH is an equal opportunity provider and employer.

COMMISSIONERS PRESENT
Kevin Hauglie, President
Jen Carter, Vice President
David Speikers, Secretary
Emma Herron, Commissioner
Dariel Norris, Commissioner

PUBLIC GUESTS
Matthew Stopa

OTHERS PRESENT
Renée Jensen, CEO
Patrick Ritter, CFO
Karyn Denton, COO
Dr. Thompson, CMO
Nichole Pas, Director
Danny Scott, Director
Julie Mincy, HR Manager
Charles (Skip) Houser, General Counsel

EXCUSED
Dr. Moore, VP

CALL TO ORDER: President Hauglie called the Board of Commissioners meeting to order at 5:02 pm, followed by roll call. Commissioners participated in this meeting remotely, and the public was provided the opportunity to participate remotely or attend and participate at a physical/onsite location.

APPROVAL OF THE BOARD MEETING AGENDA: A motion was made and seconded to approve the Board of Commissioners meeting agenda. **M/Carter S/Norris – Motion passed by unanimous vote.**

PUBLIC COMMENT: President Hauglie called for public comments; Gary Norris offered a comment for the Board.

NEW BUSINESS: No new business was discussed.

CONSENT AGENDA: A motion was made and seconded to approve the Consent Agenda which included the minutes for the May 25, 2023 Work Study and Regular Board of Commissioners meetings.
M/Carter S/Norris – Motion passed by unanimous vote

COMMUNICATIONS:
   a. **2022 Financial Audit Presentation**: delivered by Matthew Stopa with Moss Adams.
   b. **RCW 70.44.141: Treasurer Duties – *General Counsel Houser*:** RCW was shared and discussed.
   c. **CEO Report – *CEO Jensen:*** CEO Jensen shared and discussed highlights from the CEO Report.
   d. **Strategic Plan Dashboard** [May, 2023] **– *CEO Jensen:*** The Strategic Plan Dashboard was shared and discussed.

*Renée K. Jensen**, Chief Executive Officer*
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RESOLUTION:
   a. **Resolution NO: 692-0623:** Approval of the CFO as Treasurer passed by unanimous vote.
       M/Speikers S/Herron – Motion passed by unanimous vote

EXECUTIVE SESSION: Executive Session convened at 5:53 pm for ten minutes to discuss Resolution NO. 693-0624: Approval of CEO Compensation. President Hauglie requested ten additional minutes, four separate times, to be added by General Counsel Houser. This brought the time to 6:33, when President Hauglie requested five additional minutes. Executive Session ended at 6:47 pm.

Executive Session was convened to discuss the following topic, as permitted by the cited sections of the Revised Code of Washington (RCW 42.30.110):

   (g) To evaluate the qualifications of an applicant for public employment or to review the performance of a public employee.

Public Meeting reconvened at 6:47.

RESOLUTION:
   a. **Resolution NO: 693-0624: Approval of CEO Compensation: Resolution NO 693-0624 tabled.**
       President Hauglie called for a motion to table the discussion for a later date.
       M/Herron S/Norris Abstained/Carter – Motion passed.

COMMITTEE REPORTS:
   a. **Finance Committee – *CFO Ritter*:** Minutes from the June 13, 2023 meeting were provided as part of the board packet and reported on by CFO Ritter. Commissioners Hauglie and Speikers attended this meeting via Zoom.
   b. **Approval of Warrants for May 2023 – M/Speikers S/Carter – Motion passed.**
   c. **Facilities Committee – *Director Scott:*** Minutes from the June 13, 2023 meeting were provided as part of the board packet and reported on by Director of Facilities, Danny Scott. The agenda for this meeting was provided to Commissioners Carter and Norris electronically and in print.
   d. **Medical Committee – *CMO Thompson:*** Minutes from the June 13, 2023 meeting were provided as part of the board packet and reported on by CMO Thompson.
   e. **Compliance Committee – *CFO Ritter*:** Minutes from the June 13, 2023 meeting were provided as part of the board packet and reported on by CFO Ritter.

GOOD OF THE ORDER/COMMISSIONERS COMMENTS: Comments made by commissioners to the good of the order.

EXECUTIVE SESSION: Executive Session convened at 7:30 pm for ten minutes and included guest Mark Flippo. President Hauglie requested five additional minutes to be added by General Counsel Houser. Executive Session ended at 7:45 pm.

Executive Session was convened to discuss the following topic, as permitted by the cited sections of the Revised Code of Washington (RCW 42.30.110):

(i) To discuss with legal counsel representing the agency matters relating to agency enforcement actions, or to discuss with legal counsel representing the agency litigation or potential litigation to which the agency, the governing body, or a member acting in an official capacity is, or is likely to become, a party, when public knowledge regarding the discussion is likely to result in an adverse legal or financial consequence to the agency.

Public Meeting reconvened at 7:45.

President Hauglie made a motion requesting CEO Jensen and CFO Ritter to proceed as discussed with the Letter of Intent presented during Executive session.
M/Herron S/Carter – Motion passed by unanimous vote.

ADJOURNMENT: The Regular Board of Commissioners meeting adjourned at 7:47 pm.

APPROVAL:

David Speikers, Board Secretary   Jennifer Scott, Recording Clerk

COMMISSIONERS PRESENT
Kevin Hauglie, President
Jen Carter, Vice President
David Speikers, Secretary
Emma Herron
Dariel Norris

OTHERS PRESENT
Renée Jensen, CEO
Patrick Ritter, CFO
Karyn Denton, COO
Dr. Tammy Moore, VP
Dr. Rachel Thompson, CMO
Charles (Skip) Houser, General Counsel

CALL TO ORDER/ROLL CALL: President Hauglie called the Work Study meeting to order at 4:04pm, followed by roll call. Commissioners participated in this meeting remotely, and the public was provided the opportunity to participate remotely or attend and participate at a physical/onsite location.

INTRODUCTION – CMO Dr. Rachel Thompson discussed the role of patient satisfaction surveys in the district. Dr. Thompson

Presentation: Highlights of the PowerPoint are:
- Overview of History of Measuring Patient Satisfaction
- Hospital and Clinic based Patient Satisfaction
- SVH YTD Data

ADJOURNMENT: The Work Study meeting adjourned at 4:41pm.

APPROVAL:

_____
David Speikers, Board Secretary

_____
Jennifer Scott, Recording Clerk

Renée K. Jensen, Chief Executive Officer
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PDF **RCW 43.09.2855**

Local governments—Use of credit cards.

(1) Local governments, including counties, cities, towns, special purpose districts, municipal and quasi-municipal corporations, and political subdivisions, are authorized to use credit cards for official government purchases and acquisitions.

(2) A local government may contract for issuance of the credit cards.

(3) The legislative body shall adopt a system for:

(a) The distribution of the credit cards;

(b) The authorization and control of the use of credit card funds;

(c) The credit limits available on the credit cards;

(d) Payment of the bills; and

(e) Any other rule necessary to implement or administer the system under this section.

(4) As used in this section, "credit card" means a card or device issued under an arrangement pursuant to which the issuer gives to a cardholder the privilege of obtaining credit from the issuer.

(5) Any credit card system adopted under this section is subject to examination by the state auditor's office pursuant to chapter **43.09** RCW.

(6) Cash advances on credit cards are prohibited.

[**1995 c 30 § 2**. Formerly RCW **39.58.180.**]

NOTES:

Findings—1995 c 30: "The legislature finds that (1) the use of credit cards is a customary and economical business practice to improve cash management, reduce costs, and increase efficiency; and (2) local governments should consider and use credit cards when appropriate." [**1995 c 30 § 1.**]

"Appreciation can make a day, even change a life. Your willingness to put it into words is all that is necessary."
- *Margaret Cousins*

"A person that feels appreciated will always do more than is expected"
- *Unknown*

Foundational Elements

Building essential infrastructure to support a healthy future.
Objective: ERP System/ Premier Go-live by August 31st, 2023.
2023 objective – Go live by August 31st, 2023 <u>COMPLETE</u> @ 100%

- **Foundation Update –** Confirmed with agent at the IRS re: the 501(c)(3) status; It should be finalized and arrive in mid-August. Currently presenting to staff and leadership the kick-off presentation for the Foundation and employee giving campaign. The presentation will be part of the next work study for the board of commissioners.
- **ScaledData Partnership –** We are in the process of transitioning our IS services to full time with ScaledData who currently oversees our IT services. ScaledData has experienced EPIC operators and will be able to meet the current challenges with the EPIC conversion.
- **Disaster Preparedness –** The SVH team will be participating in a live mass causality drill with local first responders on August 23rd. The drill will test our systems and ability to manage and respond with our incident command center and procedures. We will be utilizing East Campus for the hands-on portion of the practice for the first responders.
- **Policy & Procedure Updates –** HR Manager Mincy is working diligently with every department manager to ensure all policies are up to date and managers are adequately trained to navigate the policy system. This is a huge project and Mincy has done a great job updating formatting, ensuring compliance and differentiating between policy and procedure in preparation for future survey.

Health System of Choice

Develop a brand of the future and define the "New SVH."
Objective: Overall patient satisfaction score for the district will be 4.5 or greater
2023 objective - District overall patient satisfaction score for June = 4.65

- **WSHA/AWPHD Chelan Meeting** – CEO Jensen and the Board of Commissioners attended the annual AWPHD and WSHA educational sessions for rural hospitals in Chelan. Jensen was a panel presenter for the CEO group on how to manage and lead through difficult conflict. Commissioners attended many board development seminars as well as networking events.
- **Branding –** We will be engaging a local branding firm to assist with the beginning of our rebranding process. This will allow for a more expedient and collaborative process across the organization. We have selected JayRay to be our partner in these exciting next steps. Information about JayRay can be found at the end of my report. Once we launch, we expect the process to take approximately 14 weeks and will include gathering stakeholder input from the board, leadership and staff.

- **Digital Marketing Update -** Over the past month our Marketing Team has been working to unify our online presence across social media platforms. The team has also been working to enhance the usability and accuracy of our website by reviewing and updating pages as needed, as well as working with our vendor on search engine optimization and some visual changes that should support easier navigation for a better user experience.
- **Snoqualmie City Growth and Development –** CEO Jensen met with Snoqualmie Mayor Ross and property developer MJ Durkan to discuss future planning and development outside of current city limits. Mayor Ross would like the hospital to be involved and aware of the zoning changes and future plans for the city.
- **Community Outreach Meetings - Community Outreach Meetings**
    - Snoqualmie Valley Chamber Meeting
    - City of Snoqualmie Economic Development Commission Meeting
    - Jessica Self, Community Events & Social Media
    - Sno Valley Senior Citizen Center - Susan Kingsbury, Comeau
    - North Bend, Dr. Steele
- **Red, White and Boom!!! –** The SVH team participated and represented with a booth at the Red, White and Boom event in Snoqualmie for the 4th of July.
- **North Bend Block Party –** The SVH team, including CFO Ritter, provided first aid at a booth during the North Bend Block Party on July 15th.

People
Recruit and retain the highest caliber SVH team to successfully execute the vision of the "New SVH."
Objective: First year turnover rate will be reduced by 4% to 39% or less.
2023 objective – First year turnover for June was 45%

- **Summer Staff BBQ** – The SVH summer staff BBQ planning is in full swing. Please join us to celebrate our staff Luau-style on August 2nd, 11-3:00. Staff are welcome to bring their families to the celebration for lunch and yard games.
- **DEI Strategy Investment** – Dr. Moore is representing SVH on the WSHA Gender-Affirming Care Workgroup. The goal of this group is: To empower WA hospitals to provide safe respectful environments and care experiences for gender diverse and LGBT patients. We will elevate the "why" behind collecting gender information and the harms of mis-gendering patients. Dr. Moore will be actively participating and assisting with implementing strategies not only at SVH but across the state.
- **PSBJ Healthcare Heroes! –** Dr. Neeta Jain was honored and celebrated as an award winner for the PSBJ first ever Healthcare Heroes Awards. The inaugural PBSJ Health Care Heroes Awards luncheon took place July 13 at a downtown Seattle hotel. Dr. Jain was among 16 illustrious honorees, from a wide variety of backgrounds, ranging from volunteers to clinical research physicians.

Community Health Needs
Develop our programs and infrastructure to meet and support the needs of our community.
Objective: Increase annual visits in the rural health clinics by 5% over prior year (2023 target = 25,092).
2023 objective – Total YTD clinic visits as of June = 12,059 estimate

- **Remote Patient Monitoring –** A soft launch took place on July 18th which included several patients being monitored on site by SVH staff with the new equipment. SpaceLabs provided redundant, parallel monitoring to test all systems. We anticipate a full go-live as soon as contract details can be finalized.
- **Value Based ACO with PSW –** We are exploring the possibility of rejoining the Collaborative and working with a shared savings model for MSSP. This would require us to meet quality metrics for preventative medicine and reduce the cost of care for our Medicare Patients. CFO Ritter is participating in the contracting review to make a final decision. We are expecting the Collaborative to choose a 70/30 split model with both up and downside risk. SVH will have less than 400 patients that are eligible so our risk would be very low.

Financial Stewardship
Ensuring we have comfortable financial resources to support our ability to provide excellent care and service to our community.
Objective: Positive 1 % profit margin. (2023 Budget est. = $537,889 net income target)
Progress towards 2023 objective as of May = $1,698,053

- **See finance summary prepared by CFO Ritter for more details on financial performance.**
- **East Campus Assessment –** Commissioners Speikers and Hauglie attended a site visit with commercial real-estate agent Mark Flippo and project manager/developer Dick Bratton to assess the potential rental or lease income that might exist at East Campus. Due to the narrow zoning of the property the options for lease or rental are limited. Existing buildings would require significant renovation in order to be functional for commercial use and as they currently exist would be a liability for occupancy. Mark

will be developing a marketing fact sheet and will promote the property to contractors looking for temporary outdoor storage or laydown space for potential nearby projects.

Upcoming Events –

- August 2nd | Staff appreciation summer BBQ (11 am – 2 pm)
- August 19 | Snoqualmie Days Celebration (8 am – 3 pm)
- September 9 | Snoqualmie Ridge Block Party (9 am – Noon)
- October 22nd & 23rd | WSHA Annual Meeting, Hyatt Regency Lake Washington, Renton, WA

Respectfully Submitted, Renée K. Jensen

Hello.
Let's do this together

WORKING WITH YOU
TO MAKE OUR
COMMUNITIES SHINE.

About JayRay

🚀

The agency launched in 1970

📍

We're proudly located in Tacoma, WA

✏️

We believe in creativity with a purpose and a plan

👩

We are 100% owned by women

Our Mission

We are dedicated to clients' success, helping them communicate effectively. We partner with clients who make a difference for their employees, customers and communities.

Land Acknowledgement

We acknowledge that our office along the Tacoma waterfront is located on the traditional homelands of the Puyallup Tribe. Though the Medicine Creek Treaty of 1854 removed native peoples to clear the way for colonial settlement, the Puyallup people have lived on and stewarded these lands since the beginning of time and continue to do so today.
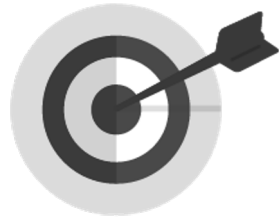
A Full-Service Partner

From one-time projects to ongoing support

ADVERTISING & MARKETING

BRANDING

STRATEGIC COMMUNICATIONS

PR & SOCIAL MEDIA

GRAPHIC DESIGN

DIGITAL & WEB DEVELOPMENT

Branding and visual identity

Messaging and PR strategy

Strategic communication programs

Collateral development, print and digital assets

Social media strategy and channel management

Advertising

Media pitching and hosting

Blogger and media relations

Issue management

Internal communications

Content strategy and creation

Research and planning

Promotions and events

Art direction and graphic design

Video storytelling

Photography

Website design and development

Website maintenance and support

Search engine marketing (SEM)

JAYRAY A PLACE TO THINK

Branding | Advertising | Strategic Communications

Advertising
Branding
Communication & Strategy
Digital & Social Media
Graphic Design
Internal Communications
Issue Management
Public & Media Relations
Promotions & Events
Research & Planning

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Tacoma, WA 98402
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JAYRAY A PLACE TO THINK

How Boards Can Support Workforce Behavioral Health

In this document, we define behavioral health disorders as both mental illness and substance use disorders. Mental illnesses are specific, diagnosable disorders characterized by intense alterations of thought, mood and/or behavior. Substance use disorders involve the recurrent use of alcohol and/or drugs, including medications, which cause clinically significant impairment. Persons with behavioral health care needs may experience one or both conditions, as well as physical co-morbidities.

People working in health care face incredible challenges that take a toll on their physical and mental health every day. A significant number of health care professionals experience burnout, depression and other forms of distress, and are at increased risk for suicide. These challenges, exacerbated by the pandemic, have heightened the importance of making the behavioral health of health care workers a priority and providing easy access to awareness, prevention and treatment resources.

This document, developed by AHA Trustee Services and AHA's Behavioral Health teams, intends to educate and raise awareness for trustees about suicide prevention and the role that hospital and health system boards can play in this very important public health issue. It also provides useful resources for boards to initiate a conversation about reducing the risks of and preventing suicides in the health care workforce.

In September 2022, AHA's Committee on Governance and the Committee on Behavioral Health met in person to discuss suicide prevention and what resources would help boards be better educated on options to support the mental well-being of their health care workforce. Experience has shown that health care workers appreciate a work environment that supports their mental well-being, and a positive impact of such an environment often reduces the risks of suicide in the health care workforce.

Burnout vs. Depression

It is important to understand the difference between burnout and behavioral health disorders. Burnout, a workplace phenomenon, is a long-term stress reaction defined by having at least one of the following symptoms: 1) emotional exhaustion; 2) depersonalization, including cynicism and a lack of empathy; and 3) a low sense of personal accomplishment. Burnout can be a contributing factor or trigger for mental illness, but individuals can be burned out without having a psychiatric or substance use disorder.

Governing boards are responsible for setting the strategy for their hospitals or health systems, including the organization's ability to create and sustain a culture of psychological safety for the organization's health care workforce. A culture of psychological safety is important for many reasons. It can reduce behavioral health stigma, increase the likelihood that health care workers will seek treatment, and reduce the risks of workforce burnout and suicide.

Boards should be engaged in discussion about suicide prevention to ensure there is an organizational strategy in place to keep their hospital and health system health care workforce healthy. When there is awareness and acknowledgement of the importance of this issue and commitment at the highest level of the organization, including the board, that commitment can be turned into actionable steps that can be meaningfully undertaken by all parts of the organization and its strategic community partners. Strategic community partners may also provide

resources to support the mental well-being of hospital and health system workforce by addressing the social drivers of health needed by the workforce, including but not limited to housing, community based behavioral health services, and addressing family needs such as childcare and/or older adult care.

Boards can inspire hospital and health system leadership to reexamine their organization's comprehensive approach to support workforce mental well-being and reduce suicide risks. Board members who understand the prevalence of behavioral health disorders, and consistently message the value and effectiveness of treatment can have multiple positive impacts such as improved workforce satisfaction and reduced absenteeism. Boards can be extremely important in supporting wellness not only for the patients under the organization's care but also for staff at all levels.

The questions below offer an opportunity for boards to begin the conversation on behavioral health supports for the workforce.

Trustee questions for discussion of your organization's workforce well-being efforts

1. What are your organization's current well-being efforts? Are you aware of what's available to the workforce at the individual level, such as employee assistance programs, the unit or department level, and /or those at the organizational level?

2. For programs currently in place, does the workforce find them valuable and/or can the organization define and track success?

3. What is your organization doing to reduce the risk of suicide for its health care workforce? This work may be a part of a much larger initiative to engage and support the mental well-being of your workforce.

4. Does your organization focus on creating a culture of psychological safety for its workforce, perhaps as part of its recruitment and retention strategies?

5. How much do you know about the mental health and well-being of your staff? How many die by suicide? What can we do to help? Does your hospital or health system have any data on the health of its workforce? If yes, how are you using this data and is it included in an organizational workforce strategy?

6. How is your hospital/health system management team engaging trustees in suicide prevention as an organizational strategy?

7. What are some of the barriers — logistical, legal or perceived — to implementing steps to support the reduction of the risks of suicide and support the mental well-being of the workforce?

8. Are your organization's managers aware of and trained in the steps to take if they are concerned about a colleague or employee? If not, what steps should be taken to remedy this situation?

9. Who will lead and champion the implementation of a comprehensive initiative to support the mental well-being of the entire workforce, and through that, reduce the workforce's risks of suicide?

10. What internal resources, both staff and financial, will be required?

11. What external resources will be necessary?

12. What is the anticipated timeframe for launching each intervention?

13. How will executive leadership and management gain buy-in from the workforce for these initiatives?

14. How does executive leadership plan to evaluate progress and scale up the program?

AHA Resources:

- AHA released "Suicide Prevention: Evidence-Informed Interventions for the Health Care Workforce," a **resource** to support hospitals' and health systems' efforts to prevent suicide in the health care workforce. The report describes key drivers of suicide and provides evidence-informed intervention strategies and metrics. The resource is coupled with a new **AHA webpage** dedicated to preventing health care worker suicide, and featuring leaders of AHA member hospitals

- **AHA People Matter Words Matter**

- AHA launched the **Stress Meter™**, a hub of curated, vetted resources featuring stress-relief information and techniques. The Stress Meter™ is not a diagnostic tool and does not provide behavioral health care; instead, it is a resource to help people self-identify their level of stress and access helpful resources with as few as two clicks.

- **Section One** of the Workforce Guide

- **AHA Behavioral Health web page**

- **AHA Digital Toolkit**:

AHA Articles:

- **How Boards Can Support Suicide Prevention Initiatives: Hartford HealthCare's Marissa Sicley-Rogers and Jennifer Ferrand discuss their Zero Suicide Initiative**

- **Health Systems Making Suicide Prevention a Priority: AFSP's Christine Moutier and Maggie Mortali discuss programs and tools that support health care workers**

- **Why Boards Should Focus on Suicide Prevention: Addressing challenges and priorities through the trustee role**

Other Resources:

- **www.afsp.org**

- **www.apafdn.org/**APA Foundation — As the nonprofit programming arm of the American Psychiatric Association, we complement the professional work of the APA by administering public outreach programs and support—all aimed at eliminating stigma, overcoming mental illness, and advancing mental health.

- **Thrive Global** has some great resources and information, including a video and a graphic explaining the difference between stress and burnout.

- This **New York Times article** also does a good job of explaining the difference between burnout and depression. Add copyright language
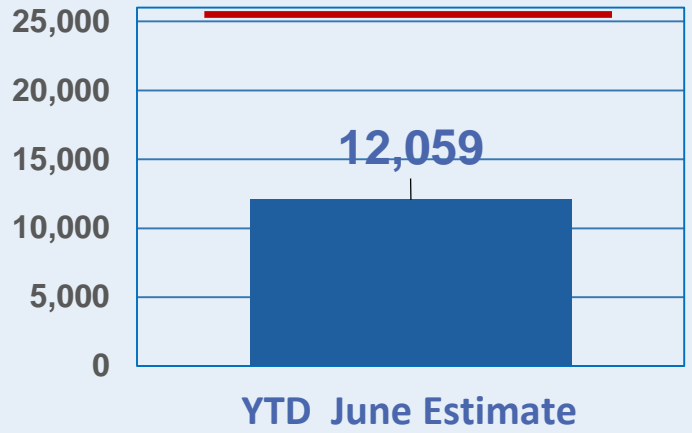
2023 Strategic Plan Dashboard – May

Foundational Elements

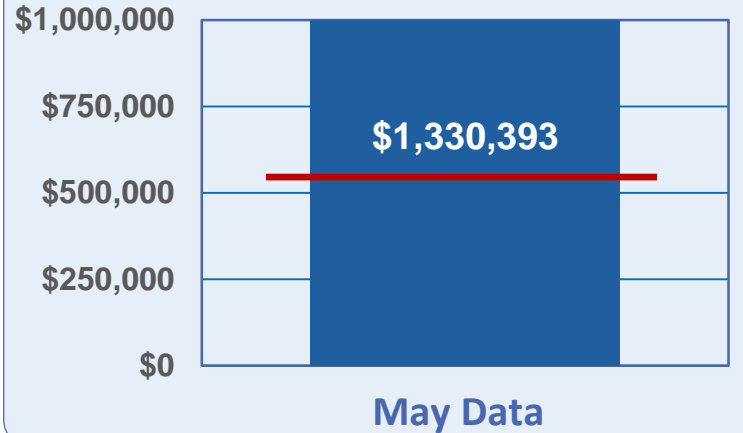**Goal:** Premier Go-Live **by** August 31, 2023

100%
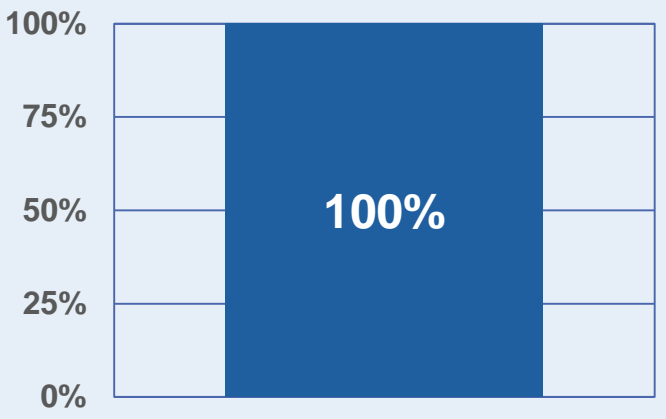
Community Health
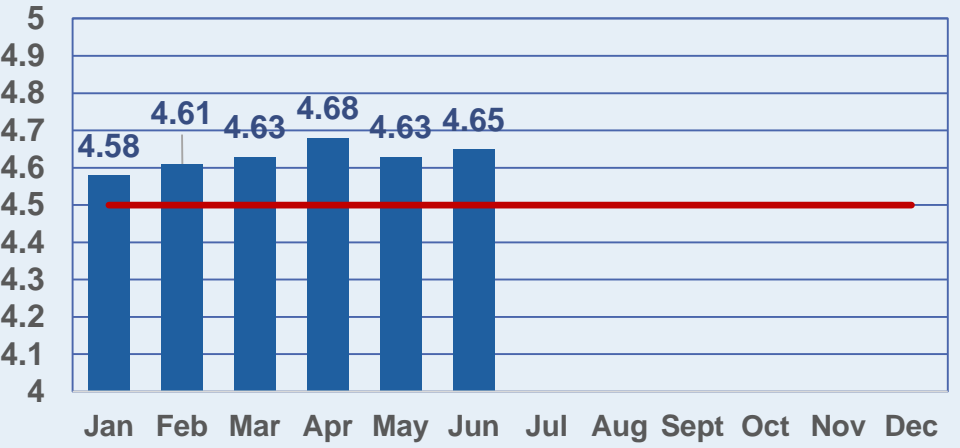
Goal: ↑ SVH Annual Clinic visits by 5% to **25,092**

12,059

YTD June Estimate

Financial Stewardship

Goal: Attain a 1% profit margin of **$537,889**

$1,330,393

May Data

Health System of Choice

Goal: Overall Patient Satisfaction Score **at or greater than 4.5**

Jan	Feb	Mar	Apr	May	Jun
4.58	4.61	4.63	4.68	4.63	4.65

Our Team

Goal: Reduce 1st year turnover rates by 4% to **39%**

Jan	Feb	Mar	Apr	May	Jun
43%	45%	40%	40%	40%	45%

Snoqualmie Valley HEALTH
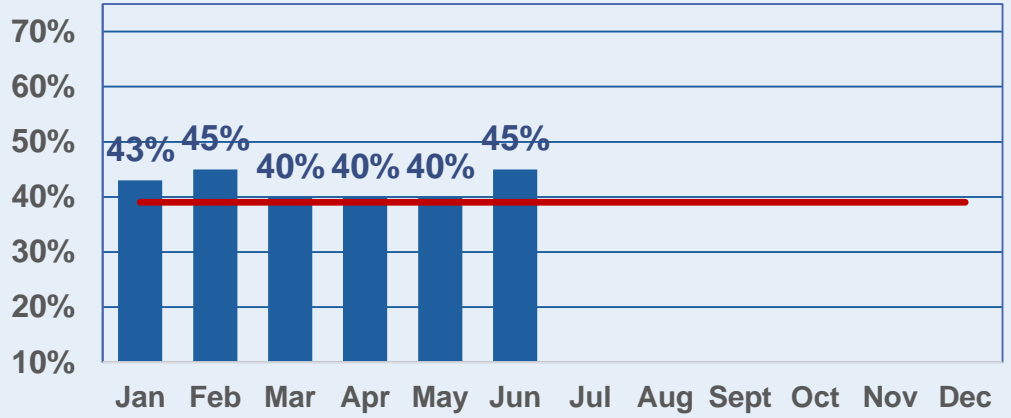
Last Updated: 06.14.2023

PUBLIC HOSPITAL DISTRICT NO. 4, KING COUNTY

MAY FINANCE PACKET

07.18.2023

Financial Statements

KING COUNTY HOSPITAL DISTRICT # 4
HOSPITAL & CLINICS COMBINED
STATEMENT OF OPERATIONS
ACTUAL vs BUDGET
MAY 2023

CURRENT MONTH					YEAR TO DATE			
ACTUAL	BUDGET	VARIANCE	% VARIANCE		ACTUAL	BUDGET	VARIANCE	% VARIANCE
$ 4,366,254	$ 4,683,983	$ (317,729)	-7%	NET PATIENT SERVICE REVENUE	$ 21,535,478	$ 21,911,998	$ (376,520)	-2%
113,350	125,222	(11,872)	-9%	TAXATION FOR OPERATIONS	513,510	626,108	(112,598)	-18%
20,486	36,129	(15,643)	-43%	OTHER	121,589	174,858	(53,270)	-30%
4,500,090	4,845,334	(345,244)	-7%	TOTAL OPERATING REVENUE	22,170,577	22,712,965	(542,388)	-2%
				OPERATING EXPENSES				
1,679,180	2,064,721	385,541	19%	SALARIES	8,489,110	9,732,539	1,243,429	13%
424,385	506,207	81,822	16%	EMPLOYEE BENEFITS	2,321,597	2,512,798	191,201	8%
510,826	404,865	(105,961)	-26%	PROFESSIONAL FEES	2,685,593	1,901,414	(784,179)	-41%
421,630	464,652	43,021	9%	SUPPLIES	1,643,663	2,209,996	566,333	26%
43,737	67,851	24,114	36%	REPAIRS AND MAINTENANCE	188,680	327,855	139,175	42%
50,223	55,676	5,453	10%	UTILITIES	286,800	261,435	(25,365)	-10%
453,705	452,441	(1,264)	0%	PURCHASED SERVICES	1,957,335	2,125,885	168,550	8%
18,833	22,090	3,257	15%	INSURANCE	90,471	103,727	13,256	13%
22,117	50,109	27,993	56%	LEASES AND RENTALS	136,354	235,295	98,941	42%
369,773	395,241	25,467	6%	DEPRECIATION	1,863,060	1,976,135	113,075	6%
70,846	183,005	112,159	61%	OTHER	364,322	899,186	534,864	59%
4,065,255	4,666,857	601,602	13%	TOTAL OPERATING EXPENSES	20,026,986	22,286,265	2,259,279	10%
434,835	178,477	256,359	144%	OPERATING INCOME	2,143,591	426,700	1,716,891	402%
16,232	8,785	7,447	85%	INVESTMENT INCOME, NET OF AMOUNT CAPITALIZED	78,448	43,925	34,523	79%
261,594	261,594	(0)	0%	TAXATION FOR BOND PRINCIPAL & INTEREST	1,308,240	1,307,968	272	0%
(388,770)	(414,295)	25,525	6%	INTEREST EXPENSE, NET OF AMOUNT CAPITALIZED	(2,034,876)	(2,071,476)	36,600	2%
(13,454)	(11,587)	(1,868)	-16%	BOND ISSUANCE AND FINANCING COSTS	(67,270)	(57,933)	(9,338)	-16%
57,223	-	57,223		OTHER NET	269,920	-	269,920	
(67,175)	(155,503)	88,328	57%	NON OPERATING, NET	(445,538)	(777,515)	331,977	43%
367,660	22,974	344,686	-1500%	CHANGE IN NET POSITION	1,698,053	(350,815)	2,048,868	584%
$ 367,660	$ 22,974	$ 344,686	-1500%	NET POSITION	$ 1,698,053	$ (350,815)	$ 2,048,868	584%

Income Statement

SNOQUALMIE VALLEY HOSPITAL COMBINED BALANCE SHEET	APRIL 2023	MAY 2023
ASSETS		
CURRENT ASSETS		
UNRESTRICTED CASH	2,437,429	2,847,363
BOARD RESTRICTED FUNDS	4,457,502	4,457,390
CMS ADVANCE PAYMENT	-	-
MANDATED RESERVE FUNDS	10,292,588	10,232,475
TOTAL CASH	17,187,518	17,537,228
ACCOUNTS RECEIVABLE	14,994,522	14,527,319
LESS A/R ALLOWANCES	3,066,412	2,409,303
COST REPORTS RECEIVABLE	1,344,045	1,344,045
EMR MEANINGFUL USE	-	-
TOTAL NET RECEIVABLE	13,272,155	13,462,061
TAXES RECEIVABLE	2,482,910	2,146,156
INVENTORY	56,536	150,669
PREPAID EXPENSES	247,811	343,027
INTANGIBLE ASSETS	2,807,520	2,794,066
OTHER RECEIVABLES	3,611	3,611
TOTAL CURRENT ASSETS	36,058,061	36,436,819
FIXED ASSETS		
LAND AND IMPROVEMENTS	26,604,969	26,616,132
BUILDINGS	33,319,275	33,319,275
EQUIPMENT	9,469,087	9,469,087
INFORMATION SYSTEMS	7,786,937	7,786,764
RIGHT TO USE ASSET	705,216	654,467
CONSTRUCTION IN PROGRESS	444,566	521,469
LESS: ACCUMULATED DEPRECIATION	30,031,832	30,350,856
NET FIXED ASSETS	48,298,219	48,016,338
TOTAL ASSETS	84,356,279	84,453,157
LIABILITIES AND FUND BALANCES		
CURRENT LIABILITES		
NOTES PAYABLE	-	-
COST REPORT PAYABLE	-	-
ACCOUNTS PAYABLE	1,392,812	1,261,462
ACCRUED PAYROLL & TAXES	2,813,254	3,016,226
ACCRUED INTEREST (BONDS)	1,074,614	1,244,541
OTHER CURRENT LIABILITIES	(82,146)	(98,579)
CURRENT PORTION LONG TERM DEBT	1,753,333	1,671,666
CURRENT PORTION CMS ADVANCE PAYMENT	-	-
DEFERRED STIMULUS REVENUE	-	-
DEFERRED TAX REVENUE	2,838,956	2,477,704
TOTAL CURRENT LIABILITIES	9,790,823	9,573,021
LONG TERM LIABILITIES		
LIABILITY RIGHT TO USE ASSET	701,170	648,190
CMS ADVANCE PAYMENT PAYABLE	-	-
LONG TERM LIABILITIES (LTGO BONDS)	43,700,000	43,700,000
REVENUE BONDS	43,543,321	43,543,321
TOTAL LONG TERM LIABILITIES	87,944,491	87,891,511
EQUITY/FUND BALANCE PERIOD END	(13,379,035)	(13,011,375)
TOTAL LIABILITY + EQUITY/FUND BALANCE	84,356,279	84,453,157

Balance Sheet

| STATMENT OF CASH FLOWS		
SOURCE AND APPLICATION OF FUNDS	APRIL 2023	MAY 2023
Net Income	373,331	367,660
Add (Deduct) items not affecting cash:		
Depreciation expense	319,025	319,025
(Increase) decrease in accounts receivable	(576,684)	(189,906)
(Increase) decrease in current assets		
Tax Receivable/Other Receivable	1,716,912	336,754
Inventory	34,800	(94,134)
PrePaid Expenses	(21,640)	(95,216)
Intangible Assets	13,454	13,454
Other Receivables	-	-
Increase (decrease) in current liabilities		
Notes and Loans Payable	-	-
Accounts Payable	174,189	(131,350)
Accrued Payroll & Taxes	163,575	202,972
Accrued Interest (Bonds)	169,927	169,927
Other Current Liabilities	(2,613)	(16,433)
Deferred Stimulus Funds	-	-
Current Long Term Debt	(81,667)	(81,667)
Deferred Tax Revenue	(361,252)	(361,252)
Other (net)	-	-
Net Cash provided by operating activities	1,921,357	439,833
CASH FLOW FROM INVESTING ACTIVITIES		
Investment in plant and equipment		
Land	-	(11,163)
Buildings	-	-
Equipment	-	-
Information Technology	174	174
Right to Use Assets	50,749	50,749
Construction in Progress	(132,783)	(76,903)
Net cash used for investing activities	(81,861)	(37,144)
CASH FLOW FROM FINANCING ACTIVITIES		
Change in long-term liabilities	(52,725)	(52,980)
Increase (decrease) in cash	$ 1,786,772	$ 349,710
Beginning Cash Balance	15,400,746	17,187,518
Prior Year Adjust impact		
Ending Cash Balance	17,187,518	17,537,228

Statement of Cash Flow

Financial
Dashboards (Revenue & Income)
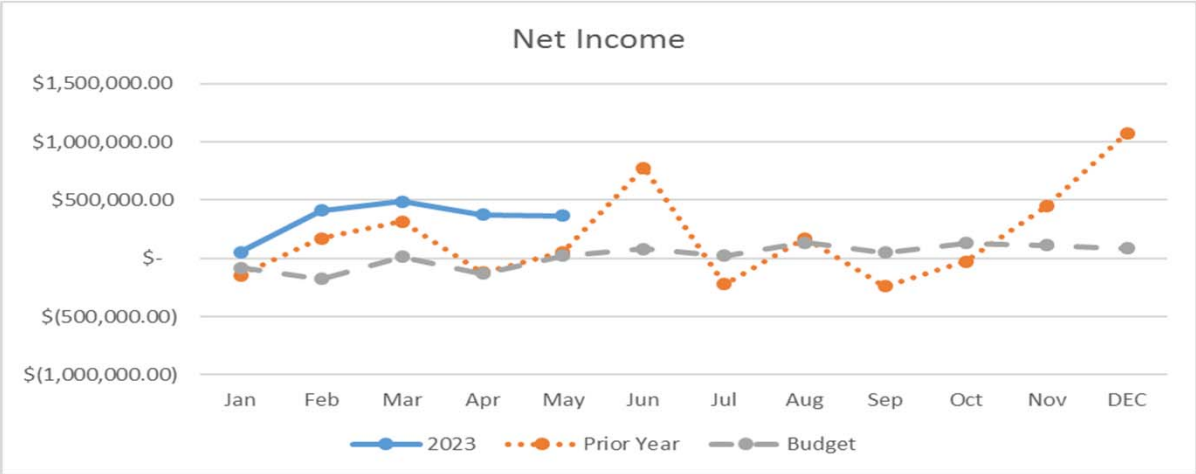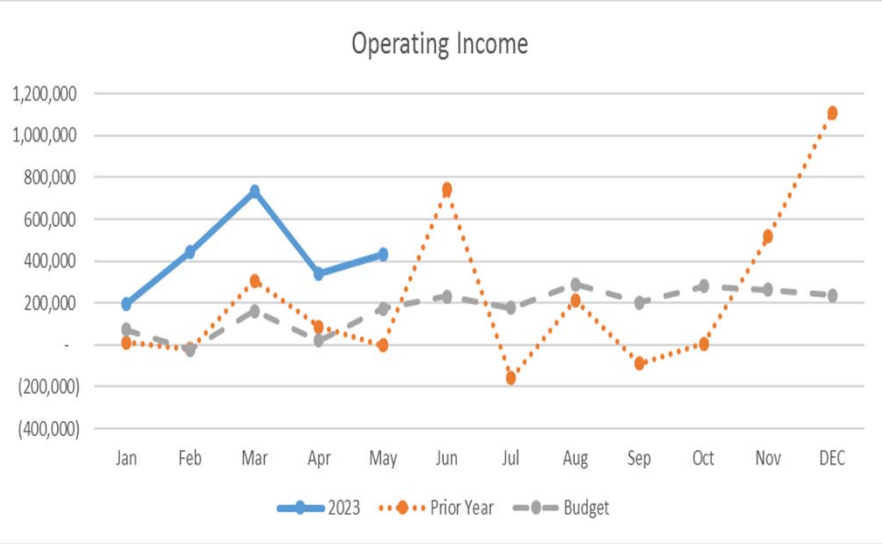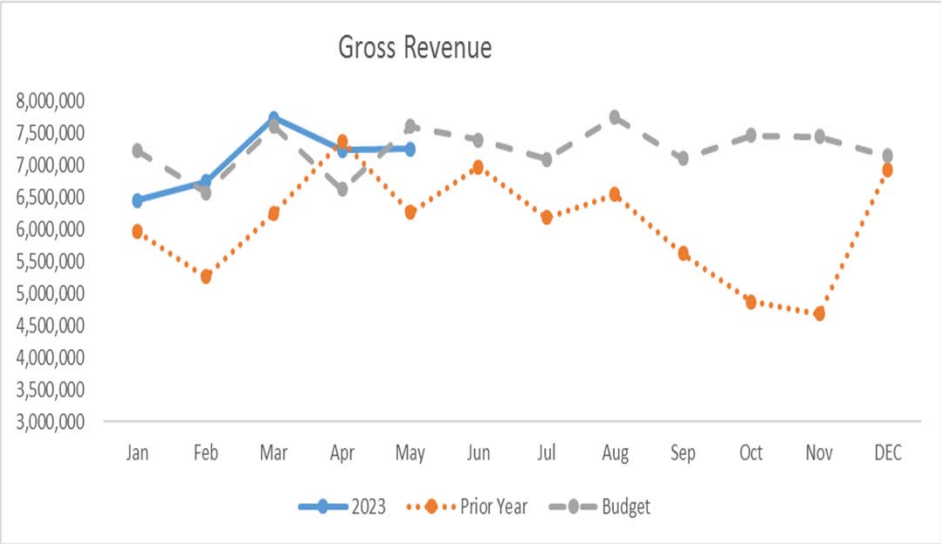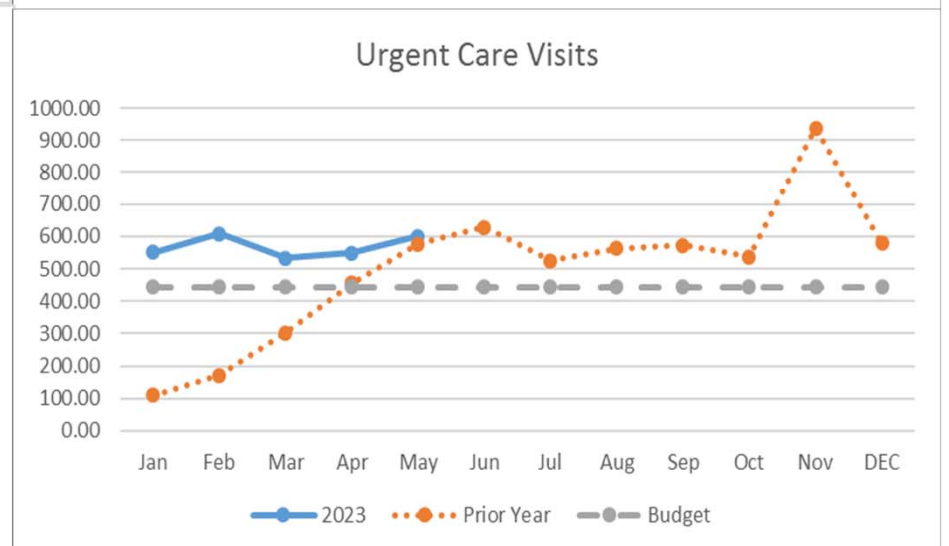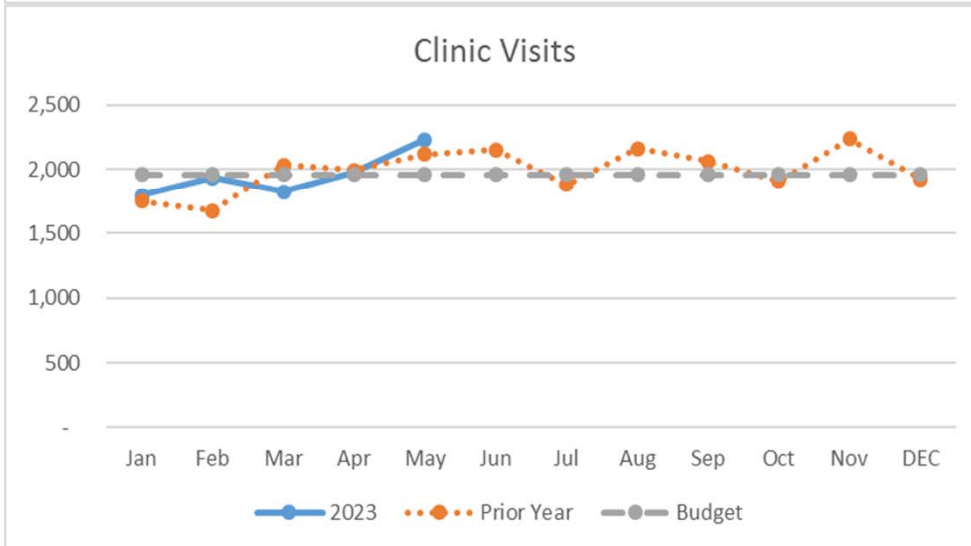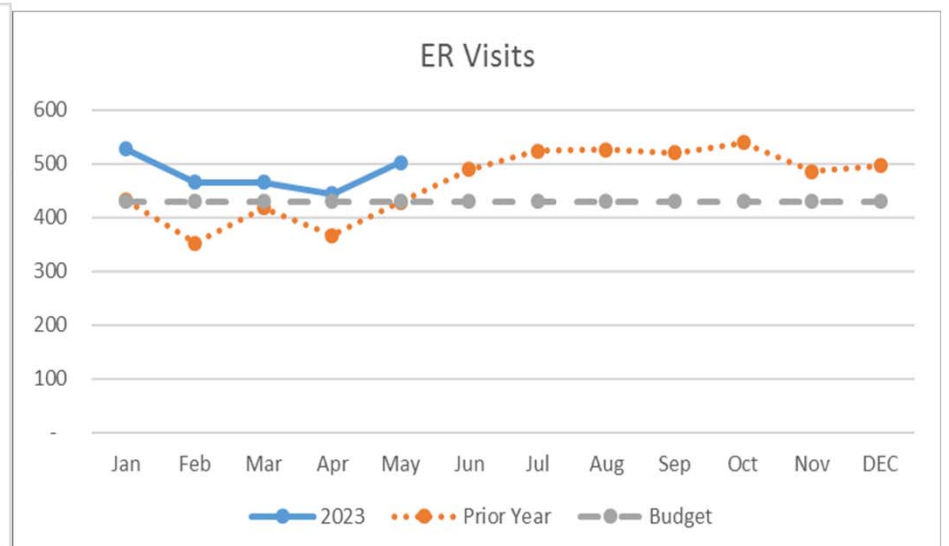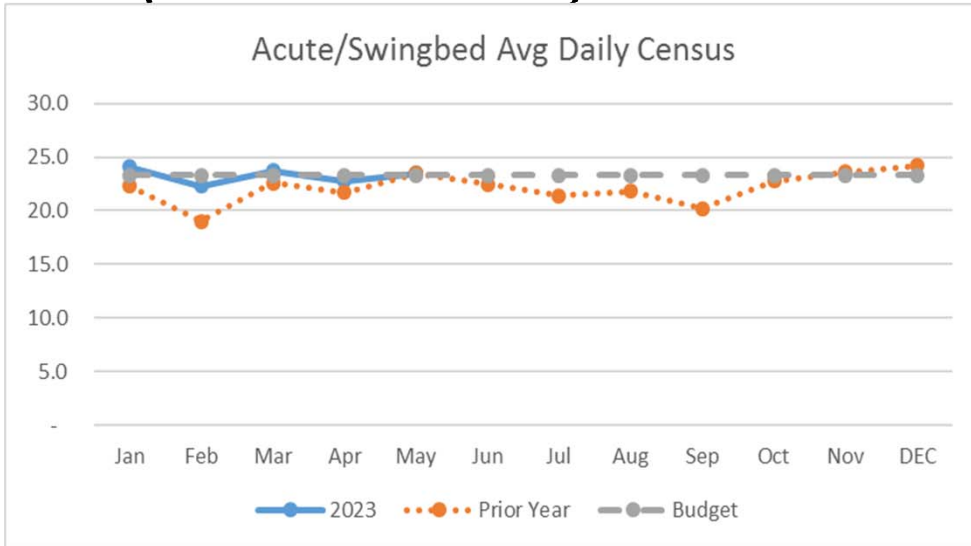
Financial Dashboards (Expenses)
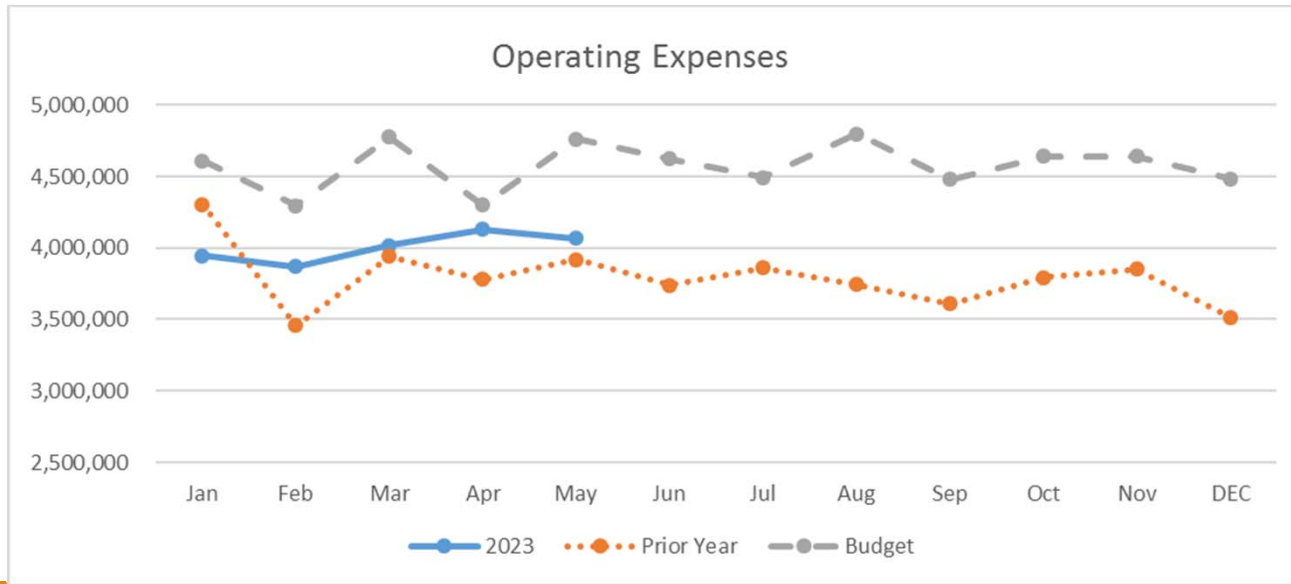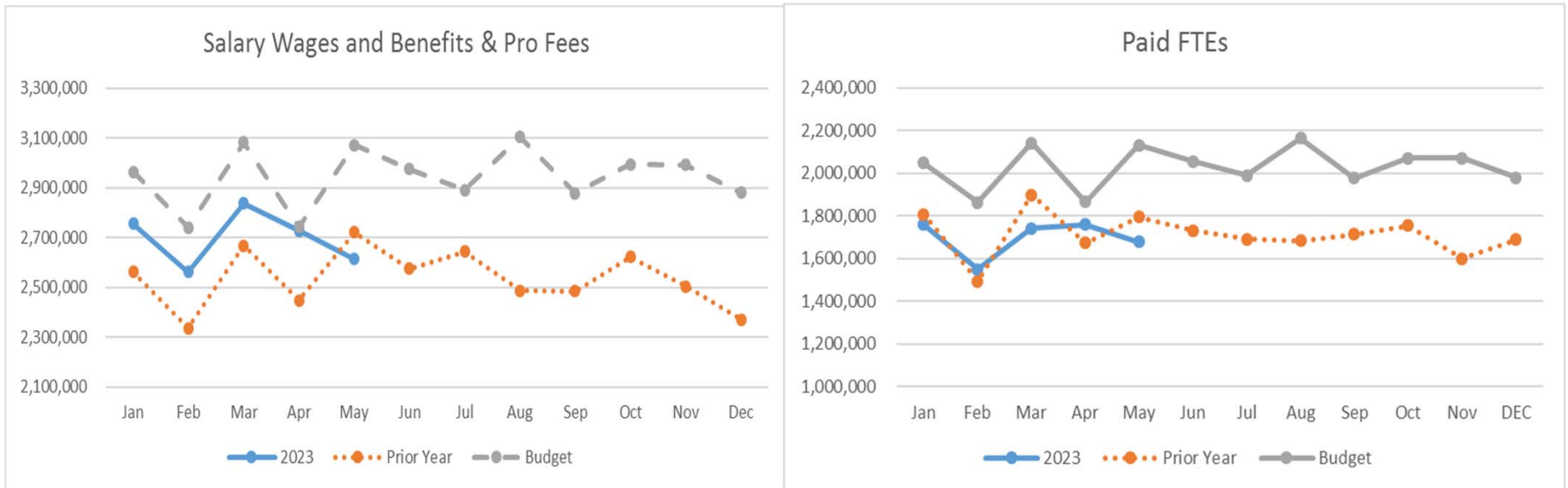
Financial Dashboards (Cash)
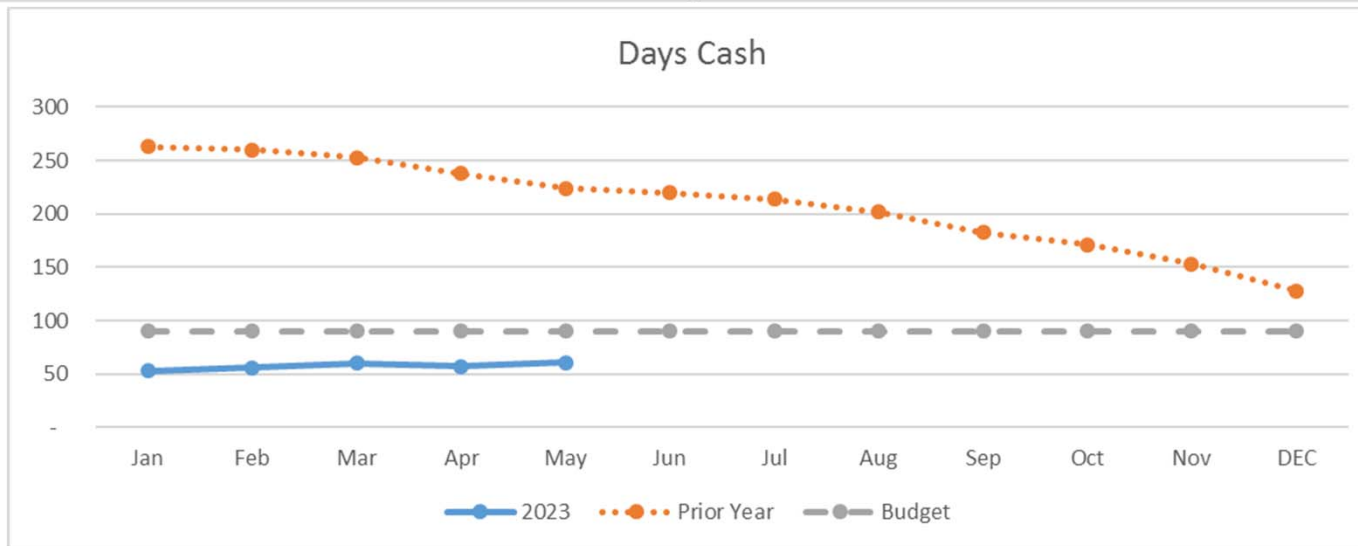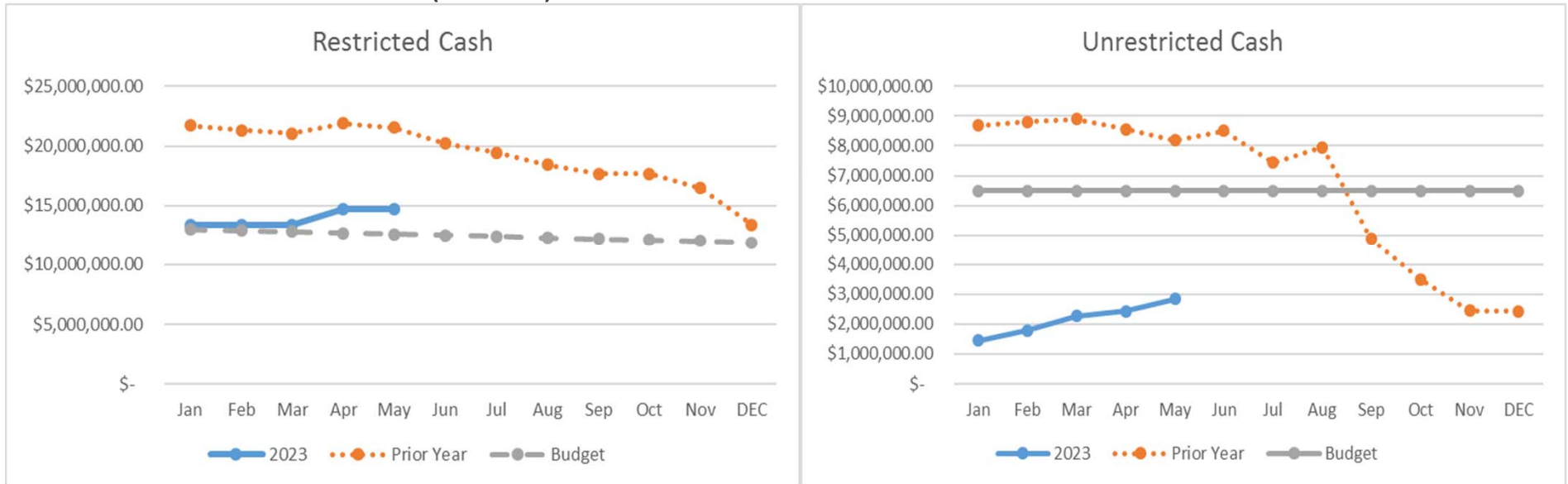
Productivity Dashboards
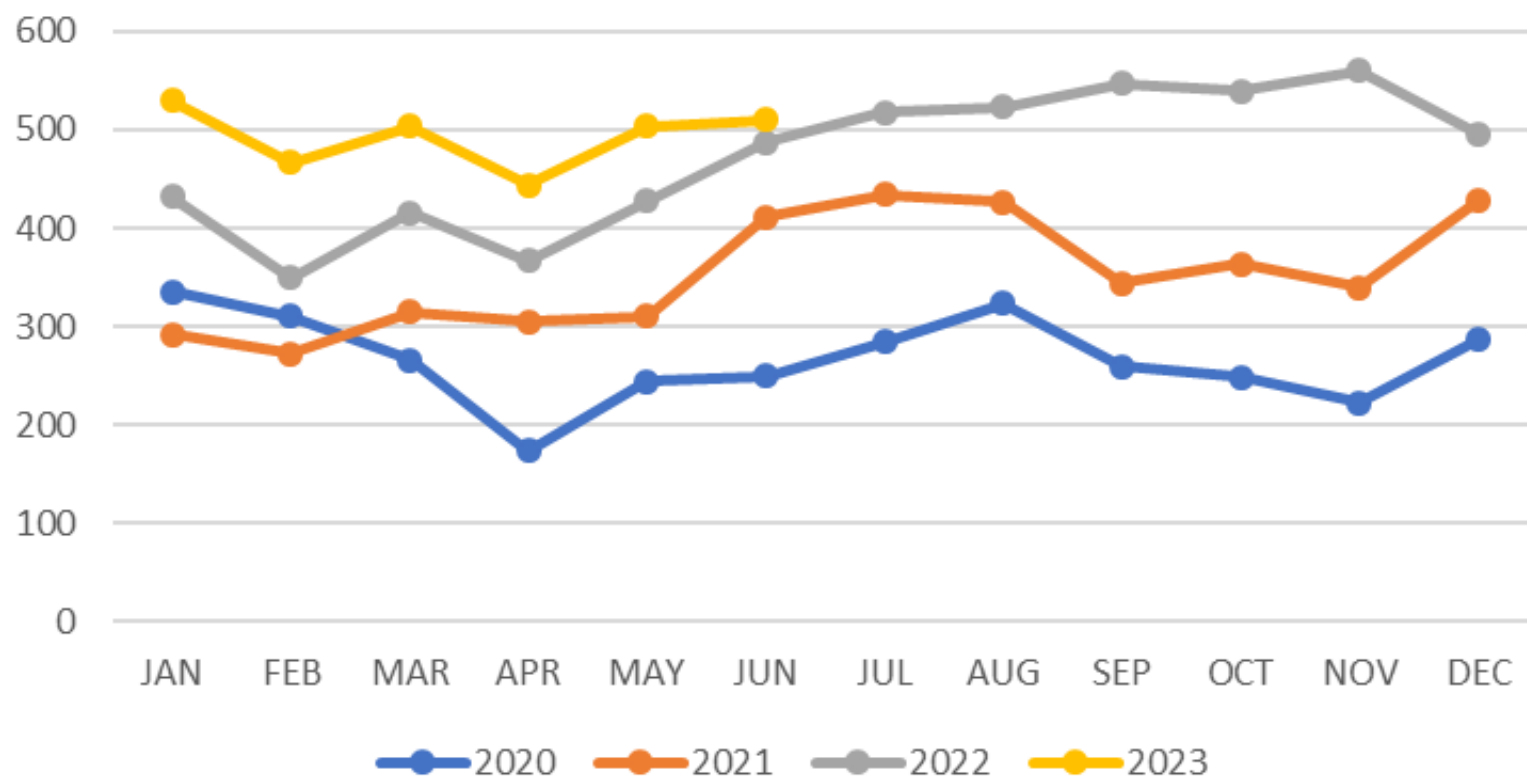# (AR & Medicare %)
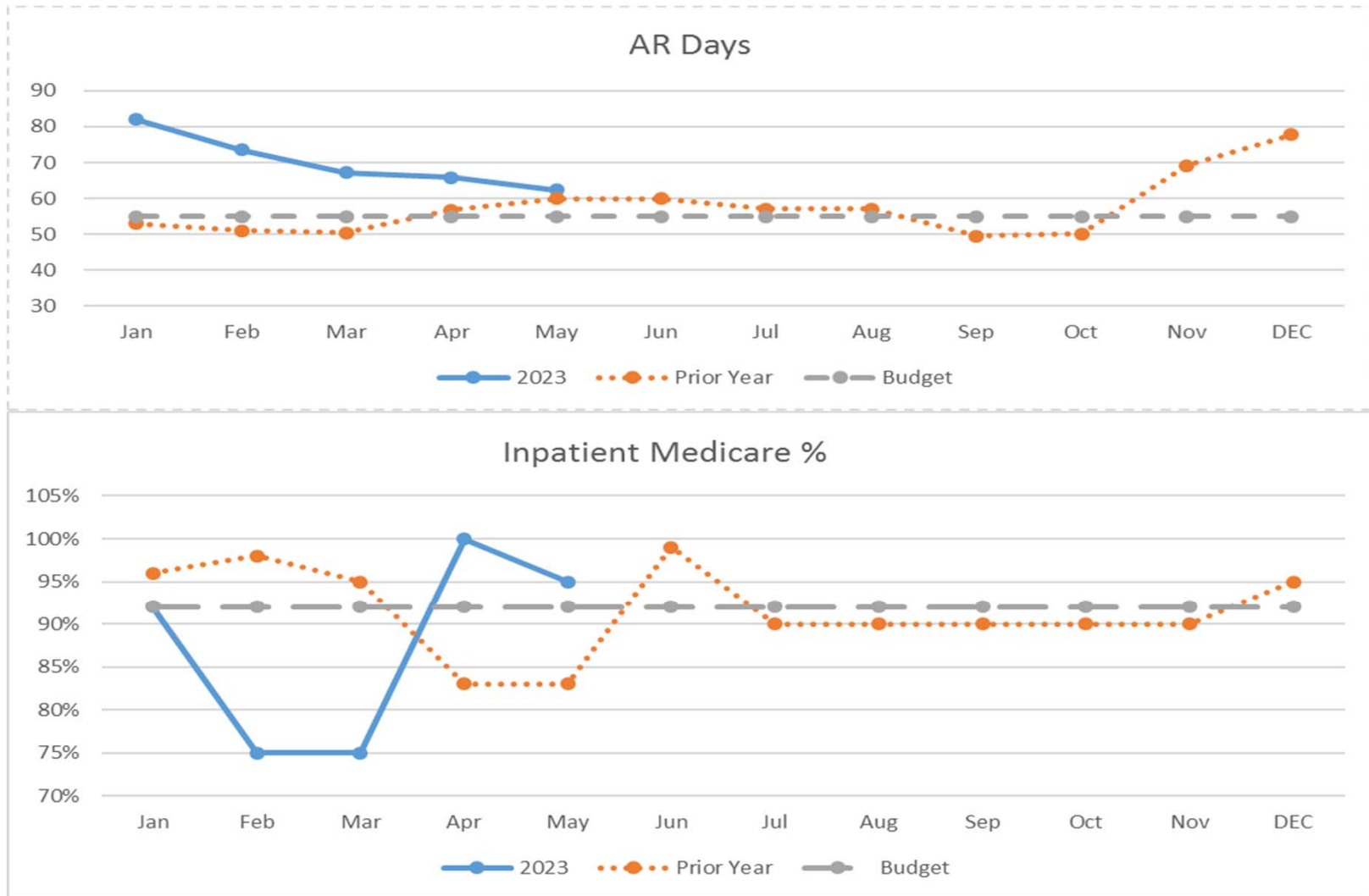
Productivity Dashboards
(Census Visits)

Productivity Dashboards (Procedures)

SVH ED Patient Volume

Epic/Revenue Optimization (Hosp)

July 11, 2023

AR Summary - Candidate for Billing - Days

Min: 2.6   Max: 23.6   Most Recent: 3.4

<p align="center">**May 2023**</p>

<p align="center">**Finance Committee Minutes**</p>

Income Statement Narrative:

May Revenues

Total May Operating Net Revenues were $345,244 below budgeted expectations: $4,500,090. Most of the revenue shortfall is related to Lab Volumes. We constructed the 2023 budget on historical volumes, which included the Sound Medical Lab line of service. We discontinued the SML line of business in May of 2022. The 340B program is bringing in less revenue as well. 340B revenue shortfall is related to AHA's ongoing dispute with drug manufacturers. The debate is still currently in the court system. We are also accruing contractual adjustments at a higher rate (40% vs. 35%) due to decreased expenses in 2023. We accrue these to account for any possible amount owed back to CMS on the interim cost report in the fall.   Inpatient volumes trended up compared to April at 23.5 patients per day. Outpatient volumes were up versus April as well.

May Expenses

May operating expenses continued to be below budget expectations. May operating expenses totaled $601,000 below budget. The majority of the savings were in Salaries. The salary budget includes incentive payments yet to be earned or paid in 2023. Once paid, the variance will decrease. YTD operating expenses overall are a healthy 10% less than budgeted expectations.

Pro Fees were above budget by $105,961. The negative variance is mostly due to night shift positions in MedSurg and ED.

May Net Income

Net Income for May is about $367,660. Net income for the year is $1,698,053, beating budget by 584%%

Balance Sheet Highlights:

- Overall Assets decreased by $96,877
    - Due to the increase in construction in progress for Premier.
- Liabilities decreased by $323,762.28
    - LT Liabilities Decrease
    - AP Payments
    - Right to Use (Lease) Payments
- Equity Increased by $367660
    - Net Income for May

Cash Flow Statement Highlights:

- **Operating Activities** positive **$439,833**
    - Decrease in AR

- Positive Net Income
- **Investing Activities Decrease of $37,144**
  - Payments for ERP
  - Payment to City for engineering services SVH incurred during construction.
- **Financing Activities Decrease $52980**
  - Regular Long term Interest Expenses

Total cash up $ 349,710

AR Days Goal 55

- 62.5 Days May
  - AR is moving down.
  - More billing is out the door in Epic.
  - Increased self-pay payments

Bond Covenants: (Snapshot forecast)

- Debt Coverage is 2.89 requirement is 1.20
- Reserve Requirement is $3,675,188 as required.
- Unrestricted cash above the reserve is 61. The bond requirement is 60

ACO Discussion- Finance committee in support of ACO participation if contract is approved for collaborative.

Property Discussion- Counter LOI was discussed. Finance committee agreed to support CEO Jensen and CFO Ritter continue negotiations with seller.

Nordic Discussion- Finance committee does not recommend moving forward with the scope of services outlined in the proposal.

Epic Optimization Status. Commissioner Speikers was encouraged about the progress on Epic. He asked for data to show the improvement the Rev Cycle Team has been working. The following graph shows the 20 day improvement in time to release claims since January 1.

PUBLIC HOSPITAL DISTRICT NO. 4, KING COUNTY

Snoqualmie Valley Hospital

9801 Frontier Ave. S.E. Snoqualmie, WA 98065

Phone: 425-831-2300, FAX: 425-831-1994

Cash Disbursements for the period May 1 to May 31, 2023

Northwest Bank Accounts Payable Warrants

$2,270,149.58	Accounts Payable Warrants
	Warrants #82561 to #82823
$2,270,149.58	

Northwest Bank Payroll Warrants & EFT

1,120,686.11	Hospital & Clinic Payroll Auto Deposits
417,859.40	Hospital & Clinic Payroll Tax
99,713.84	Hospital & Clinic Retirement 457, 403B, & 403B Match Plans
$1,638,259.35	

GRAND TOTAL   **$3,908,408.93**

I hereby certify that the described supplies have been received or services rendered in behalf of Public Hospital District No. 4 of King County.

_____

Renee Jensen, Chief Executive Officer

_____

David Speikers, Commissioner, Secretary

I, the undersigned, do hereby certify under penalty of perjury that the materials have been furnished,
the services rendered or the labor performed as described herein, and that the claim is a just, due and
paid obligation against Public Hospital District #4, King County and that I am authorized to authenticate and certify to said claim.

Micah Gailey
_____

Micah Gailey, Senior Accountant

I:\May 2023 Financials\[05 AP CHECK REG MAY 2023.xlsx]Check Register

Committee Members:
Commissioner Jen Carter
Commissioner Dariel Norris
Karyn Denton, COO/CNO, Executive Chair
Renee Jensen, CEO
Danny Scott, Director of Facilities

Old Business: None

Facility Usage: All external uses of meeting rooms will be evaluated on availability of space and size of group making the request, consistent with District policy. No recurring meetings will be accommodated at this time due to limited meeting space for hospital operations.

Environment of Care New Business:

- **Safety:** SafetyZones numbers have been submitted consistently. No reportable events.

- **Security:** No events or concerns

- **Hazardous Materials and Waste:** No events or issues

- **Emergency Preparedness:** In the planning stages with Snoqualmie Fire and South King County Fire Training Consortium for a full-scale drill on August 23rd. This drill is a requirement by CMS and will involve vehicular incidents since our hospital is a high risk (based on our location) for these types of events. SVH Leadership discussed the upcoming live drill to prepare for the impacts of the event and to ensure we have enough staff on shift to maintain patient care.

- **Fire Safety:** All fire drills and fire systems are current

- **Medical Equipment:** Materials and Facilities are assessing new biomed vendors and will be making a selection by the end of August.

- **Utility Systems:** All electrical, water, gas, medical gas and generator fuel are all in working order. Preventative maintenance is current on all systems.

- **Physical Environment**: The new Facilities ticket system, The WorxHub, has been launched and staff are utilizing it. The Facilities team has been able to increase response times to tickets and is preparing to implement the Preventative Maintenance side of the program. Staff are also becoming more consistent in utilizing the new system.
  - **East Campus** – Onsite meeting on July 17th with board members to discuss value of renting space at East Campus. No outcome yet.

PARTICIPANTS:

Dariel Norris – Commissioner; **Emma Herron** – Commissioner;
Dr. Rachel Thompson – CMO; **Renée Jensen** – CEO

MEDICAL UNIT (Avg Daily Census)	2023 Budgeted Volume	June 2023	2023 YTD
	24	18.4	22.7
	Detailed Report		
	Swing	15	20.7
	Inpatient	2	1.9
	Observation	2	0.7

EMERGENCY (Avg Daily Visit Volumes)	2023 Budgeted Volume	June 2023	2023 YTD
	14	16.9	15.2

ENDOSCOPY (Monthly Visit Volumes)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	21	25	36	26	28	32						

2022 Monthly Average: 28
2021 Monthly Average: 18

HOSPITAL & RIDGE CLINICS		Jan (21)	Feb (20)	Mar (23)	Apr (20)	May (22)	Jun (22)	Jul	Aug	Sep	Oct	Nov	Dec
	Primary Care	870	996	1274	942	1189	1234						
	BH	242	250	292	181	250	259						
	Specialty	132	95	136	93	164	136						
	Total	1244	1341	1702	1216	1603	1629						
	Daily Average	59	67	74	61	73	74						

2022 Monthly Average: 1477; Daily Average: 70
2021 Monthly Average: 1662; Daily Average: 79

URGENT CARE	2023	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	Total	550	564	572	517	601	520						
	Daily Average	18	20	18.5	17	19	17						

2022 Average – Visits per month: 516; Visits per day: 17

Medical Staff	MEC and Med Committee Recommendations:

	<u>Initial Privileging to Provisional Status:</u>
	    Sarah Leppert, PA – Urgent Care
	    Tara Garland, MD – Emergency Medicine
	    Bao Bui, MD – Teleradiology
	    Jose Lopez, MD – Teleradiology
	    Thomas Markel, MD – Teleradiology
	<u>Transition from Provisional to Telemedicine:</u>
	    William Feldmann, MD – Teleradiology
	    Patrick Hurley, MD – Teleradiology
	    Jonathan Lee, MD – Teleradiology
	<u>Transition from Provisional to Affiliate:</u>
	    Jordan Kamal, ARNP - Hospitalist
	    Kevin Trippe, ARNP – Hospitalist
	<u>Renewal to Active Staff:</u>
	    Alan Johnson, MD – Family Practice
	<u>Renewal to Telemedicine:</u>
	    David Alexander, MD – Teleradiology
	    Daniel Susanto, MD – Teleradiology
	<u>Renewal to Affiliate Staff:</u>
	    Dawn Finney, LICSW – Behavioral Health
	    Eric Seabright, PharmD - Pharmacy
	    Patricia Yetneberk, DNP- Family Practice/Behavioral Health

June Highlights:

➢ YTD June 2023 we have surpassed the total number of admissions from our ER compared to all of 2022 (YTD 64 Inpatient, 28Obs; vs total 47 Inpatient last year)

➢ Swing volumes dipped lowest in 2 years

➢ SpaceLabs equipment installed, equipment went live June 27 and testing ongoing; planning to launch patient care with telemetry this week

➢ PA Sarah Leppert joined UC provider team, doing well

Next Meeting: August 15th at 3 pm via Teams