

---

# REGULAR BOARD MEETING PACKET

---



---

## BOARD OF COMMISSIONERS

Board Chair – Trish Frady, Secretary – Tom Herrin,  
Commissioner – Craig Coppock,  
Commissioner – Wes McMahan & Commissioner-Chris Schumaker

October 27, 2021 @ 3:30 PM

Join Zoom Meeting: <https://myarborhealth.zoom.us/j/91570159415>

Meeting ID: 915 7015 9415

One tap mobile: +12532158782,,91570159415#

Dial: +1 253 215 8782

---

## TABLE OF CONTENTS

Agenda

Board Committee Reports

Consent Agenda

Old Business

New Business

Superintendent Report





**LEWIS COUNTY HOSPITAL DISTRICT NO. 1  
REGULAR BOARD OF COMMISSIONERS' MEETING  
October 27, 2021 at 3:30 p.m.  
ZOOM**

<https://myarborhealth.zoom.us/j/91570159415>

Meeting ID: 915 7015 9415

One tap mobile: +12532158782,,91570159415#

Dial: +1 253 215 8782

**Mission Statement**

**To foster trust and nurture a healthy community.**

**Vision Statement**

**To provide accessible, quality healthcare.**

| AGENDA   | PAGE     | TIME    |
|--|----------|---------|
| <b>Call to Order</b>   |          |         |
| <b>Roll Call</b>   |          |         |
| <b>Reading of the Mission &amp; Vision Statement</b>   |          | 3:30 pm |
| <b>Approval or Amendment of Agenda</b>   |          |         |
| <b>Conflicts of Interest</b>   |          |         |
| <b>Comments and Remarks</b>  |          | 3:35 pm |
| <ul style="list-style-type: none"> <li>• Commissioners</li> <li>• Audience</li> </ul>  |          |         |
| <b>Executive Session-RCW 70.41.205</b>   |          | 3:40 pm |
| <ul style="list-style-type: none"> <li>• Medical Privileging-Janice Holmes</li> </ul>  | 5        |         |
| <b>Department Spotlight</b>  |          |         |
| <ul style="list-style-type: none"> <li>• <i>To resume in January 2022.</i></li> </ul>  |          |         |
| <b>Board Committee Reports</b>   |          |         |
| <ul style="list-style-type: none"> <li>• Hospital Foundation Report-Committee Chair-Commissioner McMahan</li> </ul>  | 7        | 3:45 pm |
| <ul style="list-style-type: none"> <li>• Finance Committee Report-Committee Chair-Commissioner Coppock</li> </ul>  | 9        | 3:50 pm |
| <b>Consent Agenda (Action)</b>   |          |         |
| <ul style="list-style-type: none"> <li>• Approval of Minutes:               <ul style="list-style-type: none"> <li>○ <i>September 29, 2021 Regular Board Meeting</i></li> <li>○ <i>October 20, 2021 Finance Committee Meeting</i></li> </ul> </li> </ul>                                   | 14<br>22 | 4:00 pm |
| <ul style="list-style-type: none"> <li>• Warrants &amp; EFT's in the amount of \$4,334,809.67 dated September 2021</li> </ul>  | 26       |         |
| <ul style="list-style-type: none"> <li>• Approve Documents Pending Board Ratification 10.27.21 (<i>To be provided at the meeting.</i>)               <ul style="list-style-type: none"> <li>○ <i>To provide board oversight for document management in Lucidoc.</i></li> </ul> </li> </ul> | 28       |         |
| <ul style="list-style-type: none"> <li>• Resolution 21-37-Declaring to Surplus or Dispose of Certain Property               <ul style="list-style-type: none"> <li>○ <i>To approve liquidation of items beyond their useful life.</i></li> </ul> </li> </ul>                               | 29       |         |
| <b>Old Business</b>  |          |         |
| <ul style="list-style-type: none"> <li>• Incident Command Update               <ul style="list-style-type: none"> <li>○ <i>CNO/CQO Williamson will provide a verbal COVID 19 update, which will</i></li> </ul> </li> </ul>   |          | 4:05 pm |

|   |                      |         |
|---|----------------------|---------|
| <i>include Proclamation 21-14.</i>  |                      |         |
| <b>New Business</b>   |                      |         |
| <ul style="list-style-type: none"> <li>• Introduce Proposed Budget <ul style="list-style-type: none"> <li>○ <i>To present the 2022 Proposed Budget by November 1, 2021.</i></li> </ul> </li> </ul>  | 33                   | 4:15 pm |
| <ul style="list-style-type: none"> <li>• Board Policy &amp; Procedure Review <ul style="list-style-type: none"> <li>○ Code of Ethics</li> <li>○ Records Retention</li> <li>○ Board Meeting Teleconference</li> <li>○ Board Mobile Device Management</li> </ul> </li> </ul>  | 35<br>42<br>44<br>46 | 4:45 pm |
| <b>Superintendent Report</b>  |                      | 4:55 pm |
| <b>Meeting Summary &amp; Evaluation</b>   |                      | 5:05 pm |
| <b>Next Board Meeting Dates and Times</b>   |                      |         |
| <ul style="list-style-type: none"> <li>• Regular Board Meeting-November 10, 2021 @ 3:30 PM (ZOOM)</li> <li>• Special Board Meeting-November 10, 2021 @ 6:00 PM (ZOOM)</li> <li>• Special Board Meeting-November 29, 2021 @ 6:00 PM (ZOOM)</li> <li>• Regular Board Meeting-December 15, 2021 @ 3:30 PM (ZOOM)</li> </ul>                                |                      |         |
| <b>Next Committee Meeting Dates and Times</b>   |                      |         |
| <ul style="list-style-type: none"> <li>• Compliance Committee Meeting-November 3, 2021 @ 12 PM (ZOOM)</li> <li>• Finance Committee Meeting-November 17, 2021 @ 12:00 PM (ZOOM)</li> <li>• Quality Improvement Oversight Committee-December 1, 2021 @ 7:00 AM (ZOOM)</li> <li>• Finance Committee Meeting-December 22, 2021 @ 12:00 PM (ZOOM)</li> </ul> |                      |         |
| <b>Adjournment</b>  |                      | 5:10 pm |



---

#### MEDICAL STAFF PRIVILEGING

---

The below providers are requesting appointment to the Arbor Health Medical Staff. All files have been reviewed for Quality Data, active state license, any malpractice claims, current liability insurance, peer references, all hospital affiliations, work history, National Practitioner Data Bank reports, sanctions reports, Department of Health complaints, Washington State Patrol background check and have been reviewed by the credentialing and medical executive committees including the starred items below. The credentialing and medical executive committees have recommended the following for approval.

---

#### INITIAL APPOINTMENTS-7

---

**Arbor Health**

- Emily Johnston, MD (Emergency Medicine Privileges)
- Chalermkiat Thanasawat, MD (Emergency Medicine Privileges)

**Radiology Consulting Privileges**

- Aaron DeWald, MD (Consulting Radiology Privileges)
- Dawn Hastreiter, MD (Consulting Radiology Privileges)
- Germaine Johnson, MD (Consulting Radiology Privileges)

**Telestroke/Neurology Consulting Privileges**

- Mohammad Hirzallah, MD (Consulting Telestroke/Neurology Privileges)
- Robert Jackson, MD (Consulting Telestroke/Neurology Privileges)

---

#### REAPPOINTMENTS-4

---

**Arbor Health**

- Shanna Angel, CRNA (Anesthesia Privileges)

**Telestroke/Neurology Consulting Privileges**

- Sarabjit Atwal, MD (Consulting Telestroke/Neurology Privileges)
- Margarita Oveian, MD (Consulting Telestroke/Neurology Privileges)
- Ravi Pande, MD (Consulting Telestroke/Neurology Privileges)

✪-notates files with items to note.

**BOARD COMMITTEE REPORTS**

LEWIS COUNTY HOSPITAL DISTRICT NO. 1  
Arbor Health Foundation Meeting  
October 12, 2021  
ZOOM

Mission Statement

To raise funds and provide services that will support the viability and long-term goals of the Lewis County Hospital District No. 1. This includes, but is not limited to, taking a leadership role in maintaining and improving community pride and confidence in all aspects of the hospital's health care system.

Attendance: Ali Draper, Jessica Scogin, Leianne Everett, Caro Johnson, Linda Herrin, Christine Brower, Ann Marie Forsman, Martha Wright, Janine Walker

Call to Order by President Ali Draper at 12:05pm

August 2021 treasurers report and minutes were approved  
Christine Brower/Jeannine Walker

September 2021 treasurers report and minutes were approved  
Linda Herrin/Jeannine Walker

Administrators Report- Leianne Everett

The number of Covid cases has been declining and the staff are preparing to meet the Governors Proclamation for the mandated vaccinations. At this time about 67% of the staff are vaccinated and some employees are applying for medical or religious exemptions. Gaps in staffing are anticipated but Arbor Health is expected to be in compliance. The biggest gap will be with vendors who are required to be vaccinated and need proof of vaccination. The services provided by vendors is important to meet mandated requirements. Leianne reported that a team member passed away overnight and staff has been distraught.

Current projects include identifying a property in Packwood for new clinic. An offer was made on a property but Leianne let the counter offer expire due to lack of information.

Another big project is the opening of a walk-in clinic which could reduce volume in ER and be more affordable for patients. The same care would produce less revenue, but could eventually see increased volume.

Julie Taylor has been identified as a future CEO and Leianne asked if she could service as the CEO representative to the foundation.

**Directors Report:**

Jessica reported the auction grossed \$22,273, had 82 bidders and auctioned off 102 items. She felt it was successful and everyone had a good time. Ali said it was important to continue the project to preserve the consistency. Volunteers are still needed for the gift shop.

**Old Business:**

**New Business:**

Budget planning will start in November and anyone interested in participating may email Ali.

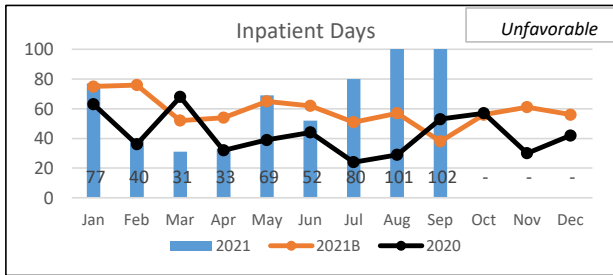
Meeting adjourned 12:28



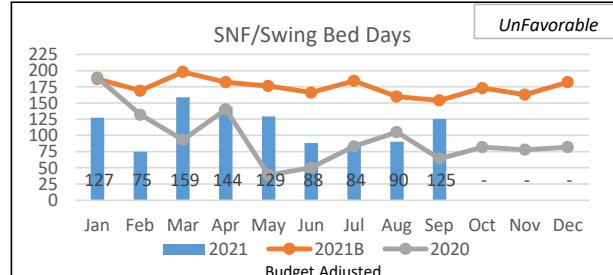
# Lewis County Hospital District No. 1 Board Financial Summary

September 30, 2021

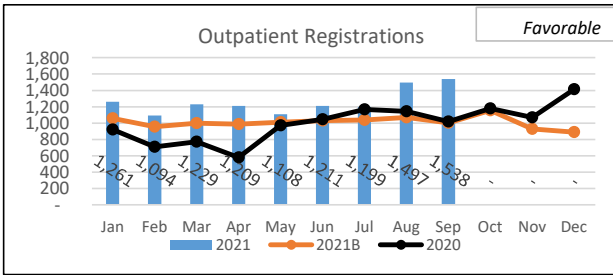
## Growth



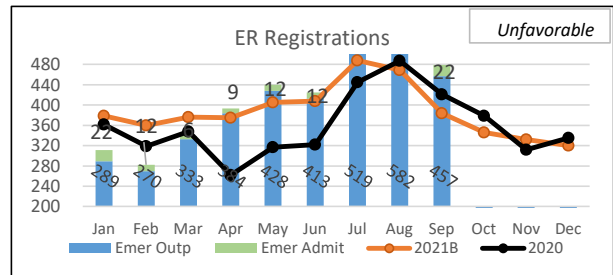
YTD: 585.00    Budget: 530.00    Pr Yr: 388.00



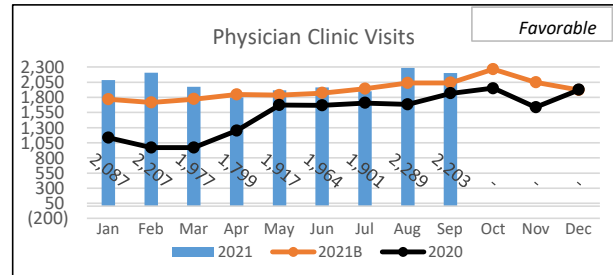
YTD: 1,021    Budget: 1,576    Pr Yr: 895



YTD: 11,346    Bud: 9,146    Pr Yr: 8,327

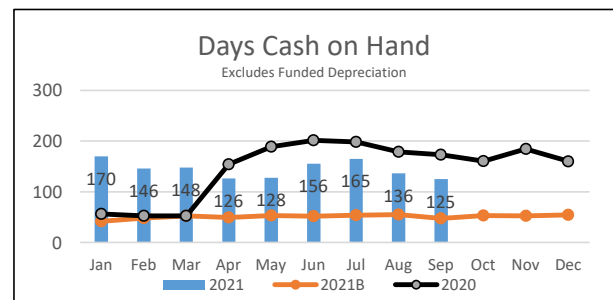
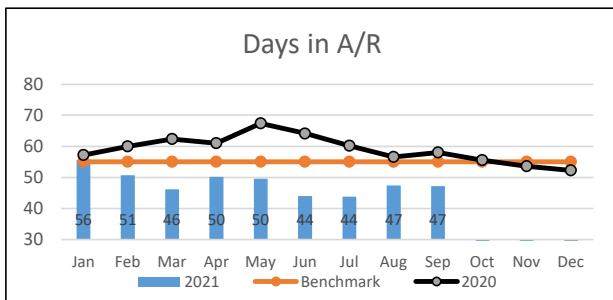
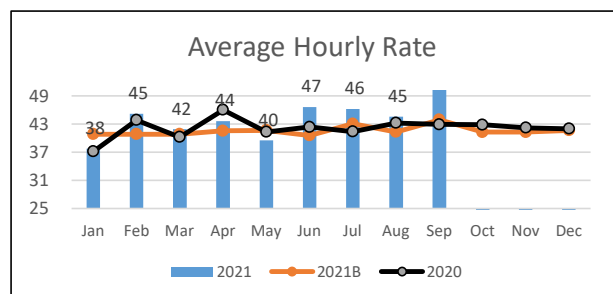
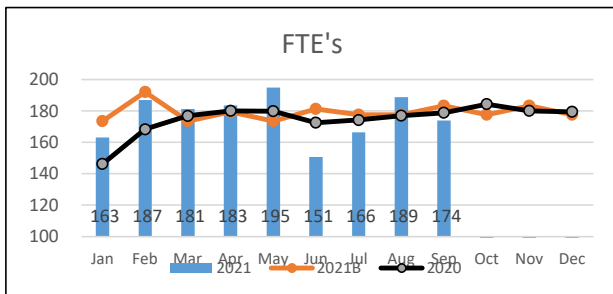


YTD: 3675    Bud: 3644    Pr Yr: 3283



YTD: 18,344    Bud: 16,834    Pr Yr: 12,924

## People and Operational Aspects



Lewis County Hospital District No. 1  
Income Statement  
September, 2021

| CURRENT MONTH                 |            |                | YEAR TO DATE     |                  |                                   |                    |                    |                    |               |                    |
|-------------------------------|------------|----------------|------------------|------------------|-----------------------------------|--------------------|--------------------|--------------------|---------------|--------------------|
| Pr Yr Month                   | % Var      | \$ Var         | Budget           | Actual           |                                   | Actual             | Budget             | \$ Var             | % Var         | Actual             |
| 690,034                       | 34%        | 242,088        | 718,000          | 960,088          | Inpatient Revenue                 | 6,396,803          | 7,447,394          | (1,050,592)        | -14%          | 5,704,287          |
| 2,729,780                     | 2%         | 65,659         | 3,087,691        | 3,153,350        | Outpatient Revenue                | 24,941,683         | 28,543,338         | (3,601,655)        | -13%          | 22,495,459         |
| 334,989                       | -12%       | (50,877)       | 411,431          | 360,554          | Clinic Revenue                    | 3,295,571          | 3,372,879          | (77,308)           | -2%           | 2,516,033          |
| 3,754,803                     | 6%         | 256,870        | 4,217,122        | 4,473,993        | <b>Gross Patient Revenues</b>     | <b>34,634,057</b>  | <b>39,363,612</b>  | <b>(4,729,555)</b> | <b>-12%</b>   | <b>30,715,780</b>  |
| 1,939,186                     | 1%         | 10,960         | 1,642,943        | 1,631,983        | Contractual Allowances            | 12,452,862         | 14,910,159         | 2,457,297          | 16%           | 12,835,220         |
| 65,052                        | -18%       | (5,569)        | 31,681           | 37,250           | Charity Care                      | 308,572            | 308,119            | (453)              | 0%            | 270,866            |
| 18,872                        | 49%        | 26,223         | 54,004           | 27,781           | Bad Debt                          | 429,569            | 531,026            | 101,457            | 19%           | 72,098             |
| 2,023,109                     | 2%         | 31,614         | 1,728,628        | 1,697,014        | <b>Deductions from Revenue</b>    | <b>13,191,004</b>  | <b>15,749,304</b>  | <b>2,558,301</b>   | <b>16%</b>    | <b>13,178,184</b>  |
| <b>1,731,694</b>              | <b>12%</b> | <b>288,485</b> | <b>2,488,494</b> | <b>2,776,979</b> | <b>Net Patient Service Rev</b>    | <b>21,443,053</b>  | <b>23,614,307</b>  | <b>(2,171,254)</b> | <b>-9%</b>    | <b>17,537,596</b>  |
| 46.1%                         | -5.2%      | -3.1%          | 59.0%            | 62.1%            | <b>NPSR %</b>                     | 61.9%              | 60.0%              | -1.9%              | -3.2%         | 57.1%              |
| (391,473)                     | 64%        | 46,867         | 73,806           | 120,672          | Other Operating Revenue           | 1,196,599          | 664,250            | 532,350            | 80%           | 3,665,555          |
| <b>1,340,220</b>              | <b>13%</b> | <b>335,351</b> | <b>2,562,300</b> | <b>2,897,651</b> | <b>Net Operating Revenue</b>      | <b>22,639,652</b>  | <b>24,278,557</b>  | <b>(1,638,905)</b> | <b>-7%</b>    | <b>21,203,151</b>  |
| <b>Operating Expenses</b>     |            |                |                  |                  |                                   |                    |                    |                    |               |                    |
| 1,290,170                     | -4%        | (56,241)       | 1,386,293        | 1,442,534        | Total Productive Salaries         | 11,721,212         | 11,606,866         | (114,346)          | -1%           | 11,058,460         |
| 176,938                       | -89%       | (176,347)      | 198,315          | 374,662          | Total Non Productive Salarie      | 1,996,114          | 1,784,835          | (211,279)          | -12%          | 1,670,402          |
| 1,467,108                     | -15%       | (232,588)      | 1,584,608        | 1,817,196        | Salaries & Wages                  | 13,717,326         | 13,391,701         | (325,625)          | -2%           | 12,728,862         |
| 337,572                       | 0%         | (1,348)        | 374,226          | 375,574          | Benefits                          | 3,315,786          | 3,245,142          | (70,644)           | -2%           | 2,819,495          |
| 129,278                       | 46%        | 77,097         | 168,509          | 91,412           | Professional Fees                 | 1,059,908          | 1,479,883          | 419,975            | 28%           | 1,344,615          |
| 155,150                       | -58%       | (116,349)      | 199,722          | 316,071          | Supplies                          | 1,649,255          | 1,694,490          | 45,235             | 3%            | 1,471,441          |
| 283,200                       | 9%         | 38,400         | 417,889          | 379,489          | Purchase Services                 | 3,146,934          | 3,337,561          | 190,627            | 6%            | 2,593,601          |
| 67,308                        | 12%        | 3,480          | 30,212           | 26,732           | Utilities                         | 376,650            | 410,374            | 33,724             | 8%            | 380,882            |
| 21,131                        | -17%       | (3,378)        | 19,623           | 23,001           | Insurance                         | 176,521            | 162,739            | (13,781)           | -8%           | 155,860            |
| 36,678                        | 30%        | 13,459         | 45,588           | 32,129           | Other Expenses                    | 366,690            | 383,997            | 17,307             | 5%            | 437,026            |
| 2,497,424                     | -8%        | (221,227)      | 2,840,377        | 3,061,605        | EBDITA Expenses                   | 23,809,071         | 24,105,888         | 296,817            | 1%            | 21,931,784         |
| (1,157,204)                   | -41%       | 114,124        | (278,078)        | (163,954)        | <b>EBDITA</b>                     | <b>(1,169,419)</b> | <b>172,669</b>     | <b>(1,342,088)</b> | <b>-777%</b>  | <b>(728,633)</b>   |
| -86.3%                        | 47.8%      | -5.2%          | -10.9%           | -5.7%            | <b>EBDITA %</b>                   | -5.2%              | 0.7%               | 5.9%               | 828.2%        | -3.4%              |
| <b>Capital Cost</b>           |            |                |                  |                  |                                   |                    |                    |                    |               |                    |
| 130,313                       | 14%        | 16,841         | 118,902          | 102,062          | Depreciation                      | 922,266            | 980,948            | 58,682             | 6%            | 1,297,951          |
| 38,172                        | 3%         | 1,152          | 39,802           | 38,650           | Interest Cost                     | 320,651            | 339,236            | 18,585             | 5%            | 326,663            |
| 2,665,909                     | -7%        | (203,234)      | 2,999,082        | 3,202,316        | Operating Expenses                | 25,051,988         | 25,426,071         | 374,084            | 1%            | 23,556,398         |
| (1,325,688)                   | -30%       | 132,117        | (436,782)        | (304,665)        | <b>Operating Income / (Loss)</b>  | <b>(2,412,336)</b> | <b>(1,147,515)</b> | <b>(1,264,821)</b> | <b>110%</b>   | <b>(2,353,247)</b> |
| -98.9%                        |            |                | -17.1%           | -10.5%           | <b>Operating Margin %</b>         | -10.7%             | -4.7%              |                    |               | -11.1%             |
| <b>Non Operating Activity</b> |            |                |                  |                  |                                   |                    |                    |                    |               |                    |
| 143,138                       | -4%        | (4,804)        | 134,493          | 129,689          | Non-Op Revenue                    | 1,183,651          | 1,210,437          | (26,786)           | -2%           | 1,292,379          |
| 1,477                         | -110%      | (1,897)        | 1,719            | 3,616            | Non-Op Expenses                   | 76,362             | 15,474             | (60,888)           | -393%         | 23,313             |
| 141,661                       | -5%        | (6,701)        | 132,774          | 126,073          | <b>Net Non Operating Activity</b> | <b>1,107,289</b>   | <b>1,194,963</b>   | <b>(87,674)</b>    | <b>-7%</b>    | <b>1,269,066</b>   |
| (1,184,027)                   | -41%       | 125,417        | (304,009)        | (178,592)        | <b>Net Income / (Loss)</b>        | <b>(1,305,046)</b> | <b>47,448</b>      | <b>(1,352,495)</b> | <b>-2850%</b> | <b>(1,084,181)</b> |
| -88.4%                        |            |                | -11.9%           | -6.2%            | <b>Net Income Margin %</b>        | -5.8%              | 0.2%               |                    |               | -5.1%              |

Unaudited

Lewis County Public Hospital District No. 1  
Balance Sheet  
September, 2021

|   | <u>Current Month</u> | <u>Prior-Month</u> | <u>Prior-Year<br/>end</u> | <u>Incr/(Decr)<br/>From PrYr</u> |
|---|----------------------|--------------------|---------------------------|----------------------------------|
| <b>Assets</b>                             |                      |                    |                           |                                  |
| <b>Current Assets:</b>                    |                      |                    |                           |                                  |
| Cash                                      | \$ 12,949,093        | 12,685,447         | 13,907,559                | (958,466)                        |
| Total Accounts Receivable                 | 6,789,599            | 6,634,607          | 6,254,724                 | 534,876                          |
| Reserve Allowances                        | (2,605,142)          | (2,773,805)        | (2,586,216)               | (18,926)                         |
| Net Patient Accounts Receivable           | <u>4,184,457</u>     | <u>3,860,802</u>   | <u>3,668,507</u>          | <u>515,950</u>                   |
| <br>                                      |                      |                    |                           |                                  |
| Taxes Receivable                          | (305,462)            | (157,589)          | 50,622                    | (356,084)                        |
| Estimated 3rd Party Receivables           | 54,132               | 54,132             | 1,087,432                 | (1,033,300)                      |
| Prepaid Expenses                          | 283,228              | 344,927            | 262,018                   | 21,210                           |
| Inventory                                 | 351,220              | 348,215            | 312,749                   | 38,470                           |
| Funds in Trust                            | 2,112,719            | 1,984,739          | 3,205,817                 | (1,093,099)                      |
| Other Current Assets                      | <u>190,266</u>       | <u>190,049</u>     | <u>66,706</u>             | <u>123,560</u>                   |
| <b>Total Current Assets</b>               | <u>19,819,652</u>    | <u>19,310,720</u>  | <u>22,561,411</u>         | <u>(2,741,760)</u>               |
| Property, Buildings and Equipment         | 34,495,885           | 34,332,066         | 31,221,772                | 3,274,113                        |
| Less Accumulated Depreciation             | (22,844,521)         | (22,741,154)       | (22,305,474)              | (539,047)                        |
| Net Property, Plant, & Equipment          | <u>11,651,364</u>    | <u>11,590,912</u>  | <u>8,916,298</u>          | <u>2,735,066</u>                 |
| <br>                                      |                      |                    |                           |                                  |
| <b>Total Assets</b>                       | <u>\$ 31,471,016</u> | <u>30,901,632</u>  | <u>31,477,709</u>         | <u>(6,693)</u>                   |
| <br>                                      |                      |                    |                           |                                  |
| <b>Liabilities</b>                        |                      |                    |                           |                                  |
| <b>Current Liabilities:</b>               |                      |                    |                           |                                  |
| Accounts Payable                          | 2,009,408            | 1,025,945          | 583,624                   | 1,425,784                        |
| Accrued Payroll and Related Liabilities   | 930,876              | 1,160,024          | 903,749                   | 27,127                           |
| Accrued Vacation                          | 869,348              | 893,103            | 894,536                   | (25,188)                         |
| Third Party Cost Settlement               | 5,844,789            | 5,807,361          | 6,149,286                 | (304,497)                        |
| Interest Payable                          | 96,915               | 64,608             | 0                         | 96,915                           |
| Current Maturities - Debt                 | 1,316,175            | 1,316,175          | 1,316,175                 | 0                                |
| Unearned Revenue                          | 1,081,258            | 1,083,673          | 773,947                   | 307,311                          |
| Other Payables                            | (8)                  | (8)                | (8)                       | 0                                |
| Current Liabilities                       | <u>12,148,761</u>    | <u>11,350,881</u>  | <u>10,621,309</u>         | <u>1,527,452</u>                 |
| <br>                                      |                      |                    |                           |                                  |
| Total Notes Payable                       | 4,343,138            | 4,391,736          | 4,560,487                 | (217,350)                        |
| Capital Lease                             | (0)                  | (0)                | (0)                       | 0                                |
| Net Bond Payable                          | 6,128,534            | 6,129,840          | 6,140,283                 | (11,749)                         |
| Total Long Term Liabilities               | <u>10,471,672</u>    | <u>10,521,576</u>  | <u>10,700,771</u>         | <u>(229,099)</u>                 |
| <br>                                      |                      |                    |                           |                                  |
| <b>Total Liabilities</b>                  | <u>22,620,433</u>    | <u>21,872,457</u>  | <u>21,322,080</u>         | <u>1,298,353</u>                 |
| <br>                                      |                      |                    |                           |                                  |
| General Fund Balance                      | 10,155,629           | 10,155,629         | 10,155,629                | 0                                |
| Net Gain (Loss)                           | (1,305,046)          | (1,126,454)        | (0)                       | (1,305,046)                      |
| <b>Fund Balance</b>                       | <u>8,850,582</u>     | <u>9,029,174</u>   | <u>10,155,629</u>         | <u>(1,305,046)</u>               |
| <br>                                      |                      |                    |                           |                                  |
| <b>Total Liabilities And Fund Balance</b> | <u>\$ 31,471,016</u> | <u>30,901,632</u>  | <u>31,477,709</u>         | <u>(6,693)</u>                   |

**Arbor Health  
Cash Flow Statement  
For the Month Ending September 2021**

|  | <b>MTD</b>    | <b>YTD</b>    |
|--|---------------|---------------|
| <b>Cash Flows from Operating Activities</b>                                      |               |               |
| Net Income   | (178,592)     | (1,305,046)   |
| Adjustments to reconcile net income to net cash provided by operating activities |               |               |
| Decrease/(Increase) in Net Patient Accounts receivable                           | (323,655)     | (515,949)     |
| Decrease/(Increase) in Taxes receivable  | 147,873       | 356,084       |
| Decrease/(Increase) in Est 3rd Party Receivable                                  | 0             | 1,033,300     |
| Decrease/(Increase) in Prepaid expenses  | 61,699        | (21,210)      |
| Decrease/(Increase) in Inventories   | (3,005)       | (38,471)      |
| Decrease in Other Current Assets   | (218)         | (123,559)     |
| Increase/(Decrease) in Accrued payroll liabilities                               | (252,903)     | 1,939         |
| Increase/(Decrease) in 3rd Party cost stlmt liabilities                          | 37,428        | (304,497)     |
| Increase/(Decrease) in Accounts payable  | 981,048       | 1,733,095     |
| Increase/(Decrease) in Interest payable  | 32,307        | 96,915        |
| Depreciation expense   | 103,367       | 539,047       |
| <b>Net Cash Flow from Operations</b>   | 605,349       | 1,451,648     |
| <b>Cash Flows from Investing Activities</b>                                      |               |               |
| Cash paid for  |               |               |
| Purchases of Fixed assets  | (163,819)     | (3,274,113)   |
| <b>Net Cash Flow from (used) in Investing Activities</b>                         | (163,819)     | (3,274,113)   |
| <b>Cash Flows from Financing Activities</b>                                      |               |               |
| Cash paid for  |               |               |
| Additions to long-term debt  | 0             | 0             |
| Principal payments of long-term liabilities                                      | (49,904)      | (229,099)     |
| <b>Net Cash Flow from (used) in Financing Activities</b>                         | (49,904)      | (229,099)     |
| <b>Net Increase (Decrease) in Cash</b>   | 391,626       | (2,051,564)   |
| Cash at Beginning of Period  | \$ 14,670,186 | \$ 17,113,376 |
| Cash at End of Period  | \$ 15,061,812 | \$ 15,061,812 |

**CONSENT AGENDA**



**LEWIS COUNTY HOSPITAL DISTRICT NO. 1  
REGULAR BOARD OF COMMISSIONERS' MEETING  
September 29, 2021 at 3:30 p.m.  
ZOOM**

<https://myarborhealth.zoom.us/j/95349451709>

Meeting ID: 953 4945 1709

One tap mobile: +12532158782,,95349451709#

Dial: +1 253 215 8782

**Mission Statement**

**To foster trust and nurture a healthy community.**

**Vision Statement**

**To provide accessible, quality healthcare.**

| AGENDA  | DISCUSSION  | ACTION | OWNER | DUE DATE |  |
|---|---|--------|-------|----------|--|
| Call to Order<br>Roll Call<br>Reading the Mission & Vision Statements | Board Chair Frady called the meeting to order via Zoom at 3:30 p.m.<br><br><b>Commissioners present:</b><br><input checked="" type="checkbox"/> Trish Frady, Board Chair<br><input checked="" type="checkbox"/> Tom Herrin, Secretary<br><input checked="" type="checkbox"/> Craig Coppock<br><input checked="" type="checkbox"/> Wes McMahan<br><input checked="" type="checkbox"/> Chris Schumaker<br><br><b>Others present:</b><br><input checked="" type="checkbox"/> Leianne Everett, Superintendent<br><input checked="" type="checkbox"/> Shana Garcia, Executive Assistant<br><input checked="" type="checkbox"/> Sara Williamson, CNO/CQO<br><input checked="" type="checkbox"/> Kathleen Arnold, Interim Pharmacist<br><input checked="" type="checkbox"/> Spencer Hargett, Compliance Officer<br><input checked="" type="checkbox"/> Roxann Morris, Facility Support Lead<br><input checked="" type="checkbox"/> Robert Hirst, Interim Quality Manager<br><input checked="" type="checkbox"/> Janice Cramer, Medical Staff Coordinator<br><input checked="" type="checkbox"/> Richard Boggess, CFO |        |       |          |  |

| AGENDA | DISCUSSION | ACTION | OWNER | DUE DATE |
|--------|------------|--------|-------|----------|
|--------|------------|--------|-------|----------|

|                                 |  |  |  |  |
|---------------------------------|--|--|--|--|
|                                 | <input checked="" type="checkbox"/> Clint Scogin, Controller<br><input checked="" type="checkbox"/> Van Anderson, Packwood Resident<br><input checked="" type="checkbox"/> Larry Sinkula, Surgical Services Director<br><input checked="" type="checkbox"/> Julie Taylor, Ancillary Services Director<br><input type="checkbox"/> Dr. Mark Hansen, Chief of Staff<br><input checked="" type="checkbox"/> Diane Markham, Marketing & Communications Manager<br><input checked="" type="checkbox"/> Jessica Scogin, Foundation Manager<br><input checked="" type="checkbox"/> Kim Olive, Human Resource Assistant<br><input checked="" type="checkbox"/> Laura Richardson, Morton Resident<br><input checked="" type="checkbox"/> Buddy Rose, Reporter<br><input checked="" type="checkbox"/> Zora DeGrandpre, Packwood Resident |  |  |  |
| Approval or Amendment of Agenda | <p>Superintendent Everett requested to add Special Board Meetings-Board Budget Prep to New Business for ten minutes.</p> <p>Board Chair Frady noted updates were made to the following:</p> <ol style="list-style-type: none"> <li>1. Resolution 21-36- Approving the Capital Purchase of a Fuel Tank- updated price of \$72,999 with 10% contingency.</li> <li>2. An additional operating lease option for the Mini C-arm.</li> <li>3. An additional document was added to the Board Ratification list to be approved-Suicide Precautions and Preventions.</li> </ol>   | <p>Commissioner Schumaker made a motion to approve the amended agenda.</p> <p>Commissioner McMahan seconded and the motion passed unanimously.</p> |  |  |
| Conflicts of Interest           | Board Chair Frady asked the Board to state any conflicts of interest with today's amended agenda.  | None noted.  |  |  |
| Comments and Remarks            | Commissioners: Commissioner Schumaker thanked the Staff and Foundation for the upcoming online auction, as well as for adding the unaudited financial documents to   |  |  |  |

| AGENDA | DISCUSSION | ACTION | OWNER | DUE DATE |
|--------|------------|--------|-------|----------|
|--------|------------|--------|-------|----------|

|  |   |  |  |  |
|--|---|--|--|--|
|  | <p>the packet. Thanks to the fight against COVID.</p> <p>Commissioners Schumaker and McMahan, as well as Board Chair Frady thanked the Staff providing care during the current COVID Surge in the District.</p> <p>Commissioner Coppock acknowledged continued concerns over the custodial program. He would support the program if it could be delivered safer.</p> <p>Commissioner McMahan encouraged the Board and its constituents to participate and bid during this weekend's Arbor Health Foundation Auction.</p> <p>Audience: Packwood Resident Dr. Zora DeGrandpre expressed concerns related to access to COVID numbers in Lewis County, campaigning and educating the District on the importance of vaccines, along with quality care on recent patient experiences.</p> <p>Superintendent Everett recommended Dr. DeGrandpre contact Bob Hirst in our Quality Department regarding patient concerns.</p> <p>Packwood Resident Van Anderson encouraged the District to have security for the staff, as well as recommended legal counsel be consulted regarding exemptions in the recent mandate.</p> <p>Superintendent Everett confirmed the Hospital has seven days a week, evening security coverage, as well as legal was involved prior to operationalizing the Proclamation 21-14.1.</p> |  |  |  |
|--|---|--|--|--|



| AGENDA  | DISCUSSION  | ACTION   | OWNER | DUE DATE |
|---|---|--|-------|----------|
| Executive Session-<br>RCW 70.41.205   | <p>Executive Session began at 3:53 p.m. for 5 minutes to discuss Medical Privileging. The Board returned to open session at 3:58 p.m.</p> <p>No decisions were made in Executive Session.</p> <p>Initial Appointments-</p> <p style="text-align: center;"><u>Arbor Health</u></p> <ol style="list-style-type: none"> <li>1. Edward Junn, MD (Emergency Medicine Privileges)</li> </ol>  | Commissioner McMahan made a motion to approve the Medical Privileging as presented and Secretary Herrin seconded. The motion passed unanimously. |       |          |
| Department Spotlight  | To resume in January 2022.  |  |       |          |
| <b>Board Committee Reports</b> <ul style="list-style-type: none"> <li>• Hospital Foundation Report</li> </ul> | <p>Commissioner McMahan noted the Arbor Health Foundation Auction is underway and there is still time to register at <a href="http://www.arborhealth.maxgiving.bid">www.arborhealth.maxgiving.bid</a>. The virtual live auction is Saturday, October 2<sup>nd</sup> at 6:30 p.m. Please consider participating in either the online auction, the live virtual auction or donate to the fund-a-need, which is the scholarship program.</p> |  |       |          |
| <ul style="list-style-type: none"> <li>• Finance Committee Report</li> </ul>                                  | <p>Commissioner Coppock highlighted the following:</p> <ol style="list-style-type: none"> <li>1. Continue to monitor the cost of COVID to remain competitive and budget for 2022.</li> <li>2. Support the four resolutions presented for approval.</li> <li>3. Explore a lease line and/or an operational lease for capital purchases. A cap on the limit has not been confirmed but proposing \$500,000.</li> </ol>                      |  |       |          |
| <b>Consent Agenda</b>   | <p>Board Chair Frady announced the consent agenda items for consideration of approval:</p> <ol style="list-style-type: none"> <li>1. Approval of Minutes <ol style="list-style-type: none"> <li>a. August 25, 2021, Regular Board Meeting</li> </ol> </li> </ol>  | Commissioner Schumaker made a motion to approve the Consent Agenda and Secretary Herrin seconded. The motion passed unanimously.                 |       |          |

| AGENDA | DISCUSSION | ACTION | OWNER | DUE DATE |
|--------|------------|--------|-------|----------|
|--------|------------|--------|-------|----------|

|  |   |  |  |  |
|--|---|--|--|--|
|  | <p>b. September 22, 2021, Finance Committee Meeting</p> <ol style="list-style-type: none"> <li>2. Warrants &amp; EFT's in the amount of \$4,694,627.07 dated August 2021</li> <li>3. Approve Documents Pending Board Ratification 09.29.21</li> <li>4. Resolution 21-33- Approving the Petty Cash Drawers &amp; Custodians of the District</li> <li>5. Resolution 21-35- Approving the Capital Purchase of Chiller Unit Improvements</li> </ol> |  |  |  |
|--|---|--|--|--|

|  |   |  |  |  |
|--|---|--|--|--|
| <p><b>Old Business</b></p> <ul style="list-style-type: none"> <li>• Incident Command Update</li> </ul> | <p>CNO/CQO Williamson highlighted the following:</p> <ol style="list-style-type: none"> <li>1. Cases have decreased recently but still extremely high.</li> <li>2. The 7-day rolling average is 41 cases per day in Lewis County.</li> <li>3. The Delta Variant is proving to be worse, which makes the vaccine even more important.</li> <li>4. Proclamation 21-14.1 continues to go in affect 10.18.21. The Hospital continues to strive towards the required 100% compliance of employees being either fully vaccinated or having an approved exemption. Employee Health is closely monitoring and reporting twice a month to the Multidisciplinary Committee.</li> <li>5. Provider vaccination town hall is scheduled to educate, not debate, the District constituents on the importance of being vaccinated.</li> </ol> |  |  |  |
|--|---|--|--|--|

| AGENDA   | DISCUSSION  | ACTION  | OWNER                                  | DUE DATE |
|--|---|---|--|----------|
|  | <ul style="list-style-type: none"> <li>a. Commissioners reiterated the District educating and promoting patients on the vaccine.</li> <li>b. Commissioners requested moving Dr. McCurry's townhall on October 14<sup>th</sup>.</li> <li>6. Vaccination boosters are recommended to the immunocompromised population. Clinics are proactively contacting patients. Healthcare workers are not eligible for the Moderna booster as of today but expecting that will be approved soon.</li> </ul>  | Request moving provider townhall to another day in October. | Superintendent Everett & Diane Markham | 10.01.21 |
| <p><b>New Business</b></p> <ul style="list-style-type: none"> <li>• Special Board Meetings- Board Budget Prep</li> </ul> | <p>Superintendent Everett-operating budgets</p> <ul style="list-style-type: none"> <li>1. 10.20.21-Introduce Proposed Budget <ul style="list-style-type: none"> <li>a. Finance Committee Meeting</li> </ul> </li> <li>2. 10.25.21-1<sup>st</sup> Week- Advertise Public Hearing @ 11.10.21 Special Board Meeting</li> <li>3. 10.27.21-Introduce Proposed Budget by November 1, 2021 <ul style="list-style-type: none"> <li>a. October Regular Board Meeting</li> </ul> </li> <li>4. 11.01.21-2<sup>nd</sup> Week- Advertise Public Hearing @ 11.10.21 Special Board Meeting</li> <li>5. 11.10.21-Special Board Meeting-Public Hearing-Budget @ 6:00 PM (After the Regular Board Meeting @ 3:00 PM)</li> <li>6. 11.29.21-Special Board Meeting-Adopt the 2022 Budget @ 6:00 PM (ZOOM) due to the county on 11.30.21</li> </ul> | Schedule Special Board Meetings.                            | Executive Assistant Garcia             | 10.08.21 |

| AGENDA   | DISCUSSION   | ACTION   | OWNER                             | DUE DATE                              |
|--|--|--|-----------------------------------|---------------------------------------|
| <ul style="list-style-type: none"> <li>Resolution 21-34- Approving the Capital Purchase of a Mini C-arm</li> </ul> | <p>CFO Boggess noted the District is proposing to purchase a Mini C-arm to support the surgeons in the operating room for the new service lines of Orthopedics and Podiatry. There are a couple options; capital lease or an operating lease. The operating lease allows the District the ability to buy the lease out for a predefined fixed dollar amount and First American allows the District to include the estimated \$15,000 in soft costs. Administration is recommending the operating lease with First American.</p> <p>The Board supported approving the purchase of the Mini C-arm.</p> | <p>Secretary Herrin made a motion to approve RES-21-34 and Commissioner Coppock seconded. The motion passed unanimously.</p>   |                                   |                                       |
| <ul style="list-style-type: none"> <li>Resolution 21-36- Approving the Capital Purchase of a Fuel Tank</li> </ul>  | <p>Superintendent Everett noted the District received an updated quote for the fuel tank of \$72,999. Again, this requirement is due to the increasing frequency of natural disasters across the US that the Department of Health pulled our waiver. This amount is expected to cover the tank, bollards, installation and disposal of the original tank.</p> <p>The Board supported approving the purchase of the Fuel Tank.</p>  | <p>Commissioner Schumaker made a motion to approve RES-21-36 and Secretary Herrin seconded. The motion passed unanimously.</p> |                                   |                                       |
| <ul style="list-style-type: none"> <li>Board Policy &amp; Procedure Review</li> </ul>                              | <p>Commissioner Compensation for Meetings and Other Services- Approved.</p> <p>Annual CEO/Superintendent Evaluation-Approved.</p> <p>Superintendent Succession Plan- Approved.</p> <p>Board E-Mail Communication- Approved.</p> <p>The Board approved all four policies/procedures as presented.</p>   | <p>Marked four of the four documents as Reviewed in Lucidoc.</p>   | <p>Executive Assistant Garcia</p> | <p>10.27.21 Regular Board Meeting</p> |
| <p>Superintendent Report</p>   | <p>Superintendent Everett introduced to our new Compliance Officer, Spencer Hargett.</p>   |  |                                   |                                       |

| AGENDA                       | DISCUSSION  | ACTION | OWNER | DUE DATE |
|------------------------------|---|--------|-------|----------|
|                              | <p>Compliance Officer Hargett is excited to have Arbor Health as one of three of the hospitals he will be supporting. Compliance will be integrated into the hospital through ComplyTrack, which will align with the OIG Workplan. Corporate Compliance &amp; Ethics Week is November 7-13, so the plan will be to raise awareness with all staff. Compliance Officer Hargett is planning to meet with the Board in the next quarter to understand the Board's compliance goals.</p> <p>Compliance Officer Hargett's goals within the next year include completing an initial risk assessment and the progress made on the risks identified, ensuring the staff know and understanding compliance's role, as well as a reporting structure to accurately report events.</p> |        |       |          |
| Meeting Summary & Evaluation | Superintendent Everett highlighted the decisions made and action items.   |        |       |          |
| Adjournment                  | Secretary Herrin moved and Commissioner Schumaker seconded to adjourn the meeting at 5:20 p.m. The motion passed unanimously.   |        |       |          |

Respectfully submitted,

---

Tom Herrin, Secretary

Date



**LEWIS COUNTY HOSPITAL DISTRICT NO. 1  
Finance Committee Meeting  
October 20, 2021, at 12:00 p.m.  
Via Zoom**

**Mission Statement  
To foster trust and nurture a healthy community.**

**Vision Statement  
To provide accessible, quality healthcare.**

| AGENDA  | DISCUSSION   | ACTION   | OWNER | DUE DATE |
|---|--|--|-------|----------|
| Call to Order<br>Roll Call<br>Reading the Mission & Vision Statements | Commissioner Coppock called the meeting to order via Zoom at 12:00 a.m.<br><br>Commissioner(s) Present in Person or via Zoom:<br><input checked="" type="checkbox"/> Wes McMahan, Commissioner<br><input checked="" type="checkbox"/> Craig Coppock, Commissioner<br><br>Committee Member(s) Present in Person or via Zoom:<br><input checked="" type="checkbox"/> Shana Garcia, Executive Assistant<br><input checked="" type="checkbox"/> Richard Boggess, CFO<br><input checked="" type="checkbox"/> Leianne Everett, Superintendent<br><input checked="" type="checkbox"/> Marc Fisher, Community Member<br><input checked="" type="checkbox"/> Clint Scogin, Controller<br><input type="checkbox"/> Sherry Sofich, Revenue Cycle Director<br><input checked="" type="checkbox"/> Sara Williamson, CNO/CQO |  |       |          |
| Approval or Amendment of Agenda                                       | No amendments noted.   | CFO Boggess made a motion to approve the agenda and Community Member Fisher seconded. The motion passed unanimously. |       |          |
| Conflicts of Interest   | Commissioner Coppock asked the Committee to state any conflicts of interest with today's agenda.   | None noted.  |       |          |

| AGENDA   | DISCUSSION  | ACTION   | OWNER       | DUE DATE                           |
|--|---|--|-------------|------------------------------------|
| Consent Agenda   | Commissioner Coppock announced the following in consent agenda up for approval: <ol style="list-style-type: none"> <li>1. Review of Finance Minutes –September 22, 2021</li> <li>2. Revenue Cycle Update</li> <li>3. Board Oversight Activities</li> <li>4. Financial Statements- September</li> </ol>  | CFO Boggess made a motion to approve the consent agenda and Community Member Fisher seconded. The motion passed unanimously. |             |                                    |
| Old Business <ul style="list-style-type: none"> <li>• Financial Department Spotlight</li> </ul>      | Commissioner Coppock reminded the committee that the department spotlights will resume in January 2022.   |  |             |                                    |
| New Business <ul style="list-style-type: none"> <li>• Health Insurance Quarter 3 Overview</li> </ul> | <ol style="list-style-type: none"> <li>1. The District continues to be a self-funded health plan and costs through third quarter have exceeded the claims of the prior year by 12%.</li> <li>2. During a call today with the broker, Administration learned due to the District’s current experience with the number of stop loss claims on the books, we can expect a minimum of 10% increase in stop-loss renewal rates for 2022. There are a couple options as to how we mitigate this increase 1) take a higher aggregate amount of risk or 2) increase individual claims from \$80k to \$100k. The broker is modeling both options, as well as receiving quotes from three vendors for the stop loss coverage.</li> <li>3. There are likely indirect costs related to COVID like lab testing in our costs, but no outliers identified specifically in the top 5 diagnosis categories. Claim data is blinded from us.</li> <li>4. Ultimately claim costs continue to be higher than projected.</li> </ol> | Continue to identify healthcare plan costs to include in the 2022 budget.  | CFO Boggess | 11.17.21 Finance Committee Meeting |
| <ul style="list-style-type: none"> <li>• Introduce 2022 Proposed Budget</li> </ul>                   | CFO Boggess highlighted the following while introducing the 2022 Proposed Budget: <ol style="list-style-type: none"> <li>1. High-level volume assumptions were rolled forward for 2022. The</li> </ol>  |  |             |                                    |

| AGENDA | DISCUSSION | ACTION | OWNER | DUE DATE |
|--------|------------|--------|-------|----------|
|--------|------------|--------|-------|----------|

|  |   |  |   |                                       |
|--|---|--|---|---------------------------------------|
|  | <p>leadership team has reviewed the volumes on the inpatient side and proposed adjustments to improve the Income Statement. With the District bringing on the new programs this will lead to increased market utilization and changes the income statement significantly to (\$45,207).</p> <p>2. The committee discussed the cost of labor in the COVID environment as it relates to both permanent and temporary staff. This is an unknown risk in the budget. Management has 5% allocated for wage increase on regular wages per existing contract, however conditions could change, and more be required.</p> <p>3. As a reminder, this budget is a moving target as it is a snapshot in time as of today. Administration proposes the budget be updated as new information presents.</p> <p>The Finance Committee supported presenting the most up to date 2022 Budget at the Regular Board Meeting on October 27, 2021.</p> <p>CFO Boggess the Cost Report tool is projecting a payable of \$965,868. This is subject to change as we close 2021.</p> <p>Superintendent Everett reiterated that new service lines stem from referral patterns leaving the District. The service lines are often identified in the Community Health Needs Assessment as unaddressed health concerns in the District. The goal is to bridge the gap of bringing</p> | <p>Present the current 2022 Budget at the Regular Board Meeting on 10.27.21.</p> | <p>CFO Boggess/Executive Assistant Garcia</p> | <p>10.27.21 Regular Board Meeting</p> |
|--|---|--|---|---------------------------------------|



| AGENDA | DISCUSSION | ACTION | OWNER | DUE DATE |
|--------|------------|--------|-------|----------|
|--------|------------|--------|-------|----------|

|  |   |   |                            |                                |
|--|---|---|----------------------------|--------------------------------|
|  | services to the District to meet the needs closer to home.  |   |                            |                                |
| <ul style="list-style-type: none"> <li>Surplus or Dispose of Certain Property</li> </ul> | <p>CFO Boggess presented the list of the District's property that needs to be surplus or disposed of.</p> <p>The Finance Committee supported the surplus and/or disposing of certain property and will recommend approval at the Board level in Consent Agenda.</p> | The Finance Committee supported requesting the Board's approval of a resolution at the Regular Board Meeting. | Executive Assistant Garcia | 10.27.21 Regular Board Meeting |
| Meeting Summary & Evaluation   | CFO Boggess highlighted the decisions made and the action items that need to be taken to the entire board for approval.   |   |                            |                                |
| Adjournment  | Commissioner Coppock adjourned the meeting at 1:12 pm.  |   |                            |                                |

DRAFT

WARRANT & EFT LISTING NO. 2021-09

RECORD OF CLAIMS ALLOWED BY THE  
BOARD OF LEWIS COUNTY  
COMMISSIONERS

The following vouchers have been audited,  
charged to the proper account, and are within the  
budget appropriation.

CERTIFICATION

I, the undersigned, do hereby certify, under  
penalty of perjury, that the materials have been  
furnished, as described herein, and that the claim  
is a just, due and unpaid obligation against  
LEWIS COUNTY HOSPITAL DISTRICT NO. 1  
and that I am authorized to authenticate and  
certify said claim.

Signed:

\_\_\_\_\_  
Richard Boggess, CFO

We, the undersigned Lewis County Hospital  
District No. 1 Commissioners, do hereby certify  
that the merchandise or services hereinafter  
specified has been received and that total  
Warrants and EFT's are approved for payment  
in the amount of

\$4,334,809.67 this 27<sup>th</sup> day

of October 2021

\_\_\_\_\_  
Board Chair, Trish Frady

\_\_\_\_\_  
Commissioner, Craig Coppock

\_\_\_\_\_  
Secretary, Tom Herrin

\_\_\_\_\_  
Commissioner, Wes McMahan

\_\_\_\_\_  
Commissioner, Chris Schumaker

SEE WARRANT & EFT REGISTER in the amount of \$4,334,809.67 dated September 1, 2021 –  
September 30, 2021.

Routine A/P Runs

| Warrant No.               | Date        | Amount                 | Description |
|---------------------------|-------------|------------------------|-------------|
| 123025                    | 1-Sep-21    | 250.22                 | CHECK RUN   |
| 123024                    | 1-Sep-2021  | 11,517.82              | CHECK RUN   |
| 122801 - 122802           | 1-Sep-2021  | 7,010.25               | CHECK RUN   |
| 122659 - 122664           | 1-Sep-2021  | 251,975.52             | EFT         |
| 122680 - 122712           | 3-Sep-2021  | 124,755.25             | CHECK RUN   |
| 122803                    | 7-Sep-2021  | 130.04                 | EFT         |
| 122665 - 122679           | 7-Sep-2021  | 241,737.65             | EFT         |
| 122723 - 122726           | 8-Sep-2021  | 704,348.12             | EFT         |
| 122737 - 122800           | 10-Sep-2021 | 209,641.82             | CHECK RUN   |
| 122736                    | 13-Sep-2021 | 60,199.00              | EFT         |
| 122727 - 122735           | 13-Sep-2021 | 60,227.81              | EFT         |
| 122804                    | 14-Sep-2021 | 135.42                 | EFT         |
| 122822 - 122887           | 17-Sep-2021 | 162,327.73             | EFT         |
| 122805 - 122821           | 20-Sep-2021 | 88,710.20              | EFT         |
| 123026                    | 21-Sep-2021 | 66.00                  | EFT         |
| 122906 - 122970           | 24-Sep-2021 | 243,567.22             | CHECK RUN   |
| 122888 - 122905           | 27-Sep-2021 | 733,137.12             | CHECK RUN   |
| 123027 - 123028           | 28-Sep-2021 | 17,535.10              | EFT         |
| 123029                    | 30-Sep-2021 | 981.00                 | EFT         |
| <b>TOTAL - CHECK RUNS</b> |             | <b>\$ 2,918,253.29</b> |             |

Error Corrections - in Check Register Order

| Warrant No.                  | Date Voided | Amount             | Description |
|------------------------------|-------------|--------------------|-------------|
| 122905                       | 29-Sep-2021 | 7,064.90           | VOID        |
| 122492                       | 28-Sep-2021 | 591.09             | VOID        |
| 122491                       | 28-Sep-2021 | 335.98             | VOID        |
| 122166                       | 28-Sep-2021 | 769.02             | VOID        |
| 121579                       | 28-Sep-2021 | 67.60              | VOID        |
| 121562                       | 28-Sep-2021 | 40.00              | VOID        |
| 120541                       | 28-Sep-2021 | 145.75             | VOID        |
| 119061                       | 28-Sep-2021 | 77.91              | VOID        |
| 118699                       | 28-Sep-2021 | 94.50              | VOID        |
| 122490                       | 28-Sep-2021 | 58.50              | VOID        |
| <b>TOTAL - VOIDED CHECKS</b> |             | <b>\$ 9,245.25</b> |             |

**COLUMBIA BANK CHECKS, EFT'S & VOIDS**      **\$ 2,909,008.04**

| EFT                                       | Date        | Amount                 | Description   |
|---|-------------|------------------------|---------------|
| 1150                                      | 1-Sep-2021  | 7,651.00               | IRS           |
| EFT                                       | 3-Sep-2021  | 605,995.23             | EFT / PAYROLL |
| 1151                                      | 7-Sep-2021  | 202,384.59             | IRS           |
| 1152                                      | 17-Sep-2021 | 162,653.96             | IRS           |
| EFT                                       | 17-Sep-2021 | 447,116.85             | EFT / PAYROLL |
| <b>TOTAL EFT'S AT SECURITY STATE BANK</b> |             | <b>\$ 1,425,801.63</b> |               |

**TOTAL CHECKS, EFT'S & TRANSFERS**      **\$ 4,934,809.67** Board Packet

## Documents Awaiting Board Ratification 10.27.21

|    | LCHD No. 1's Policies, Procedures & Plans:             | Departments:              |
|----|--|---------------------------|
| 1  | B1: Dietary Purchasing and Inventory                   | Dietary Services          |
| 2  | B5: Menu Substitutions                                 | Dietary Services          |
| 3  | B6: Food Handling Guidelines (HACCP)                   | Dietary Services          |
| 4  | Charity Care/Financial Assistance                      | DOH Policies & Procedures |
| 5  | Electronic Funds Transfer                              | Finance                   |
| 6  | F10: Sanitizing Food Contact Surfaces/Logs             | Dietary Services          |
| 7  | F5: Damaged China and Glassware Surveillance           | Dietary Services          |
| 8  | F7: Area and Equipment Cleaning                        | Dietary Services          |
| 9  | F8: Ice Handling                                       | Dietary Services          |
| 10 | F9: Storage of Pots, Dishes, Flatware, Utensils        | Dietary Services          |
| 11 | G3: Repairs  | Dietary Services          |
| 12 | G4: Equipment Manual                                   | Dietary Services          |
| 13 | G5: Mold Prevention                                    | Dietary Services          |
| 14 | H10: Disaster Menus                                    | Dietary Services          |
| 15 | H9: Tray Identification-Non-Selective Menu             | Dietary Services          |
| 16 | Monoclonal Antibody Informed Consent                   | Pharmacy                  |
| 17 | Organizational Use of Social Media                     | Communications            |
| 18 | PTO, EIL & PSL Donation                                | Human Resources           |
| 19 | REGEN-COV EUA Patient-Caregiver Fact Sheet English     | Pharmacy                  |
| 20 | Stock Rotation   | Materials Management      |
| 21 | Unwanted Medication Disposal Service for the Community | Pharmacy                  |

In order to access the above documents you will need to log into Lucidoc. Once you have logged into Lucidoc, on the top toolbar click "My Meetings" and select the upcoming QIO meeting date that's highlighted in green to see the agenda with documents needing to be approved. You are able to view the documents once in the agenda. If the date is highlighted in yellow that means the agenda has not been released yet.



**LEWIS COUNTY HOSPITAL DISTRICT NO. 1**  
**MORTON, WASHINGTON**

RESOLUTION DECLARING TO  
SURPLUS OR DISPOSE OF CERTAIN  
PROPERTY

RESOLUTION NO. 21-37

WHEREAS, the Lewis County Hospital District No. 1 owns and operates Arbor Health, a 25-bed Critical Access Hospital located in Morton, Washington, and;

WHEREAS, the Lewis County Hospital District No. 1 feel that this is worthy,

NOW, THEREFORE, BE IT RESOLVED by the Commissioners of Lewis County Hospital District No. 1 as follows:

**That the equipment and supplies listed on Exhibit A, attached hereto and by this reference incorporated herein, are hereby determined to be no longer required for hospital purposes. The Administrator is hereby authorized to surplus, dispose and/or trade in of said property upon such terms and conditions as are in the best interest of the District.**

ADOPTED and APPROVED by the Commissioners of Lewis County Hospital District No. 1 in an open public meeting thereof held in compliance with the requirements of the Open Public Meetings Act this 27<sup>th</sup> day of October 2021, the following commissioners being present and voting in favor of this resolution.

\_\_\_\_\_  
Trish Frady, Board Chair

\_\_\_\_\_  
Tom Herrin, Secretary

\_\_\_\_\_  
Craig Coppock, Commissioner

\_\_\_\_\_  
Wes McMahan, Commissioner

\_\_\_\_\_  
Chris Schumaker, Commissioner

DISPOSAL/SURPLUS PERSONAL PROPERTY

EXHIBIT A

| DATE   | DESCRIPTION        | DEPARTMENT | PROPERTY # | DISPOSITION      | REASON                    |
|--------|--------------------|------------|------------|------------------|---------------------------|
| 8/2021 | Infant crib        | Acute      | 5516       | DISPOSAL/SURPLUS | OBSOLETE                  |
| 8/2021 | WII                | Long term  | 5437       | DISPOSAL/SURPLUS | OBSOLETE                  |
| 8/2021 | Indoor Rower       | Wellness   | 5795       | DISPOSAL/SURPLUS | OBSOLETE                  |
| 8/2021 | Mixer              | Dietary    | 5718       | DISPOSAL/SURPLUS | OBSOLETE                  |
| 8/2021 | Steam well         | Dietary    | 5194       | DISPOSAL/SURPLUS | OBSOLETE                  |
| 8/2021 | House<br>Structure | Main       | 1369       | DISPOSAL/SURPLUS | House no<br>longer exists |

**OLD BUSINESS**

**NEW BUSINESS**



Lewis County Hospital District 1  
Volume Assumptions

| Business Line<br>Statistic    | Acute<br>Admits | Acute<br>Pat Days | Skilled Nursing<br>Admits | Skilled Nursing<br>Pat Days | Custodial<br>Admits | Custodial<br>Pat Days | Outpatient<br>Visits | Observation<br>Visits | Emergency<br>Visits | Outpatient<br>Total | Randle<br>Visit | Mossyrock<br>Visit | Morton<br>Visits | Packwood<br>Visit | Womens<br>Visit | Specialty<br>Visit | Physician<br>Total |
|-------------------------------|-----------------|-------------------|---------------------------|-----------------------------|---------------------|-----------------------|----------------------|-----------------------|---------------------|---------------------|-----------------|--------------------|------------------|-------------------|-----------------|--------------------|--------------------|
| 2019 Final                    | 190             | 631               | 96                        | 1,366                       | 0                   | 2,723                 | 10,580               | 218                   | 4,721               | 15,519              | 6,014           | 5,472              |                  |                   | 297             | 848                | 12,631             |
| 2020 Final                    | 154             | 517               | 76                        | 1,137                       | -                   | 1,330                 | 11,991               | 212                   | 4,159               | 16,362              | 4,830           | 5,100              | 6,531            |                   | 177             | 841                | 17,479             |
| 2021 Cur Yr Budget            | 190             | 703               | 140                       | 2,094                       | 0                   | 0                     | 12,121               | 218                   | 4,642               | 16,981              | 5,529           | 5,690              | 10,933           |                   | 108             | 999                | 23,259             |
| Sept Budget YTD               | 140             | 530               | 97                        | 1,576                       | 0                   | 0                     | 9,146                | 170                   | 3,644               | 12,960              | 3,967           | 4,025              | 8,176            |                   | 79              | 726                | 16,973             |
| Sept Actual YTD               | 152             | 585               | 62                        | 1,021                       | 0                   | 0                     | 11,346               | 209                   | 3,675               | 15,230              | 3,316           | 3,927              | 8,627            |                   | 48              | 637                | 16,555             |
| Budgeted Oct - Dec            | 50              | 173               | 43                        | 518                         | 0                   | 0                     | 2,975                | 48                    | 998                 | 4,021               | 1,562           | 1,665              | 2,757            |                   | 29              | 311                | 6,324              |
| Material Issues               |                 |                   |                           |                             |                     |                       |                      |                       |                     |                     |                 |                    |                  |                   |                 |                    |                    |
| YTD Experience                |                 | 22                |                           |                             | 0                   | 0                     |                      |                       | -80                 | -80                 | -187            | -200               |                  |                   | -3              | -9                 | -400               |
| Sub total                     | 0               | 22                | 0                         | 0                           | 0                   | 0                     | 0                    | 0                     | -80                 | -80                 | -187            | -200               | 0                |                   | -3              | -9                 | -400               |
| Previous Projection 8/31      | 195             | 722               | 88                        | 1,368                       |                     |                       | 14,321               | 257                   | 4,593               |                     | 4,691           | 5,392              | 11,384           |                   |                 |                    |                    |
| 2021 Projected                | 202             | 780               | 105                       | 1,539                       | 0                   | 0                     | 14,321               | 257                   | 4,593               | 19,171              | 4,691           | 5,392              | 11,384           |                   | 74              | 939                | 22,479             |
| Percent Change from Pr Year   | 31%             | 51%               | 38%                       | 35%                         |                     | -100%                 | 19%                  | 21%                   | 10%                 | 17%                 | -3%             | 6%                 |                  |                   | -58%            | 12%                | 29%                |
| Growth from Pr Year           | 48              | 263               | 29                        | 402                         | 0                   | -1,330                | 2,330                | 45                    | 434                 | 2,809               | -139            | 292                | 4,853            | 0                 | -103            | 98                 |                    |
| Growth in 2022                |                 |                   |                           |                             |                     |                       |                      |                       |                     |                     |                 |                    |                  |                   |                 |                    |                    |
| Service Line Changes          |                 |                   |                           |                             |                     |                       |                      |                       |                     |                     |                 |                    |                  |                   |                 |                    |                    |
| Urgent Care - 12 Months       |                 |                   |                           |                             |                     |                       | 552                  |                       | -623                | -71                 |                 |                    | 1,946            |                   |                 |                    | 1,946              |
| Ortho Program - Per Proforma  |                 |                   |                           |                             |                     |                       | 240                  |                       |                     | 240                 |                 |                    | 0                |                   |                 | 360                | 360                |
| Possible PCR lab              |                 |                   |                           |                             |                     |                       | 200                  |                       |                     |                     |                 |                    |                  |                   |                 |                    |                    |
| Change in Market Share        |                 |                   |                           |                             |                     |                       |                      |                       |                     | 0                   |                 |                    |                  |                   |                 |                    | 0                  |
| Physician Activity (New/Lost) |                 |                   |                           |                             |                     |                       |                      |                       |                     |                     |                 |                    |                  |                   |                 |                    |                    |
| Packwood Clinic 6 Months      | 12              | 36                |                           |                             |                     |                       | 120                  |                       | 10                  | 130                 | -300            |                    |                  |                   |                 |                    | -300               |
| Prodiatry - Per Proforma      |                 |                   |                           |                             |                     |                       | 725                  |                       |                     | 725                 |                 |                    |                  |                   |                 | 1,073              | 1073               |
| Mossyrock - Acosta            |                 |                   |                           |                             |                     |                       | 120                  |                       |                     | 120                 |                 | 1,338              |                  |                   |                 |                    | 1338               |
| Marketing Campaigns           |                 |                   | 10                        | 60                          |                     |                       |                      |                       |                     | 0                   |                 |                    |                  |                   |                 |                    | 0                  |
| Change in Market Utilization  | 16              | 50                | 4                         | 194                         |                     |                       |                      |                       |                     | 0                   | 436             |                    | 258              |                   |                 | 200                | 894                |
| Population Growth / (decline) | 4               | 16                |                           | 0                           | 0                   | 0                     | 72                   | 5                     | 92                  | 169                 | 94              | 0                  | 0                |                   | 34              | 100                | 228                |
| 2022 Budget                   | 234             | 882               | 119                       | 1,793                       | 0                   | 0                     | 16,350               | 262                   | 4,072               | 20,484              | 4,920           | 6,730              | 13,588           | 0                 | 108             | 2,672              | 28,018             |
| Chg from 2021 Projected       | 32              | 102               | 14                        | 254                         | 0                   | 0                     | 2,029                | 5                     | -521                | 1,313               | 230             | 1,338              | 2,204            | 0                 | 34              | 1,733              | 5,539              |
| Percent Change                | 16%             | 13%               | 13%                       | 17%                         | 0%                  | 0%                    | 14%                  | 2%                    | -11%                | 7%                  | 5%              | 25%                | 19%              |                   | 46%             | 185%               | 25%                |

Lewis County Hospital District 1  
Income Statement  
Budget 2022 Presentation  
Finance Committee 10/21/2021

|                                | 2020<br>Actual    | Cur Year<br>Budget | Sep YTD<br>Budget  | September<br>Act YTD | Forecast<br>Act + Rem Bud | Annualized<br>9    | Material<br>Issues | Projected<br>Cur Year | 2022<br>Budget     | \$ Chg to Proj<br>Incr/(dcrs) | % Incr<br>(Dcrs) |
|--------------------------------|-------------------|--------------------|--------------------|----------------------|---------------------------|--------------------|--------------------|-----------------------|--------------------|-------------------------------|------------------|
| <b>Revenue</b>                 |                   |                    |                    |                      |                           |                    |                    |                       |                    |                               |                  |
| Inpatient Revenue              | 7,430,722         | 9,893,672          | 7,447,394          | 6,396,803            | 8,843,081                 | 8,529,071          |                    | 8,529,071             | 9,210,076          | 681,005                       | 8%               |
| Outpatient Revenue             | 29,957,845        | 37,875,507         | 28,543,338         | 24,941,683           | 34,273,852                | 33,255,577         |                    | 33,255,577            | 37,250,067         | 3,994,490                     | 12%              |
| Clinic Revenue                 | 3,597,372         | 4,638,349          | 3,372,879          | 3,295,571            | 4,561,041                 | 4,394,095          |                    | 4,394,095             | 6,367,089          | 1,972,994                     | 45%              |
| Gross Patient Revenue          | 40,985,939        | 52,407,528         | 39,363,611         | 34,634,057           | 47,677,974                | 46,178,743         |                    | 46,178,743            | 52,827,232         | 6,648,489                     | 14%              |
| Deductions from Revenue        | 15,555,724        | 20,828,745         | 15,749,304         | 13,191,004           | 18,270,445                | 17,588,005         |                    | 17,588,005            | 17,349,010         | (238,995)                     | -1%              |
| Net Patient Revenue            | 25,430,215        | 31,578,783         | 23,614,307         | 21,443,053           | 29,407,529                | 28,590,737         |                    | 28,590,737            | 35,478,222         | 6,887,485                     | 24%              |
| NPSR % of Gross                | 62%               | 60%                | 60%                | 62%                  | 62%                       | 61.9%              |                    | 61.9%                 | 67.2%              |                               |                  |
| Other Operating Revenue        | 5,534,221         | 885,666            | 664,250            | 1,196,599            | 1,418,015                 | 1,595,465          | 2,850,600          | 4,446,065             | 982,805            | (3,463,260)                   | -78%             |
| <b>Total Operating Revenue</b> | <b>30,964,436</b> | <b>32,464,449</b>  | <b>24,278,557</b>  | <b>22,639,652</b>    | <b>30,825,544</b>         | <b>30,186,203</b>  |                    | <b>33,036,803</b>     | <b>36,461,027</b>  | <b>3,424,224</b>              | <b>10%</b>       |
| <b>Operating Expense</b>       |                   |                    |                    |                      |                           |                    |                    |                       |                    |                               |                  |
| Salaries & Wages               | 17,202,430        | 18,076,139         | 13,391,701         | 13,717,326           | 18,401,764                | 18,289,768         | 345,000            | 18,634,768            | 21,491,914         | 2,857,146                     | 15%              |
| Benefits                       | 3,929,506         | 4,359,002          | 3,245,142          | 3,315,786            | 4,429,646                 | 4,421,048          | 69,000             | 4,490,048             | 5,179,578          | 689,530                       | 15%              |
| Professional Fees              | 1,703,174         | 1,977,510          | 1,479,883          | 1,059,908            | 1,557,535                 | 1,413,211          | (89,286)           | 1,323,925             | 1,476,047          | 152,122                       | 11%              |
| Supplies                       | 2,072,897         | 2,271,276          | 1,694,490          | 1,649,255            | 2,226,041                 | 2,199,007          | 25,000             | 2,224,007             | 2,413,129          | 189,122                       | 9%               |
| Purchase Services              | 3,595,544         | 4,357,730          | 3,337,561          | 3,146,934            | 4,167,103                 | 4,195,912          |                    | 4,195,912             | 4,684,848          | 488,936                       | 12%              |
| Utilities                      | 517,969           | 540,829            | 410,374            | 376,650              | 507,105                   | 502,200            |                    | 502,200               | 546,621            | 44,421                        | 9%               |
| Insurance                      | 214,206           | 221,618            | 162,739            | 176,521              | 235,400                   | 235,361            |                    | 235,361               | 267,252            | 31,891                        | 14%              |
| Other Expense                  | 556,797           | 458,643            | 383,997            | 366,690              | 441,336                   | 488,920            |                    | 488,920               | 696,525            | 207,605                       | 42%              |
| Depreciation                   | 1,720,483         | 1,328,652          | 980,948            | 922,266              | 1,269,970                 | 1,229,688          |                    | 1,229,688             | 1,185,889          | (43,799)                      | -4%              |
| Interest Expense               | 441,484           | 505,562            | 339,236            | 320,651              | 486,977                   | 427,535            |                    | 427,535               | 422,436            | (5,099)                       | -1%              |
| Total Operating Expense        | 31,954,490        | 34,096,961         | 25,426,071         | 25,051,987           | 33,722,877                | 33,402,649         |                    | 33,752,363            | 38,364,239         | 4,611,876                     | 14%              |
| <b>Operating Income</b>        | <b>(990,054)</b>  | <b>(1,632,512)</b> | <b>(1,147,514)</b> | <b>(2,412,335)</b>   | <b>(2,897,333)</b>        | <b>(3,216,447)</b> |                    | <b>(715,561)</b>      | <b>(1,903,212)</b> | <b>(1,187,651)</b>            | <b>2</b>         |
| Non Operating Income           | 1,843,600         | 1,593,284          | 1,194,963          | 1,107,289            | 1,505,610                 | 1,476,385          |                    | 1,476,385             | 1,513,005          | 36,620                        | 2%               |
| <b>Net Income</b>              | <b>853,546</b>    | <b>(39,228)</b>    | <b>47,449</b>      | <b>(1,305,046)</b>   | <b>(1,391,723)</b>        | <b>(1,740,061)</b> |                    | <b>760,825</b>        | <b>(390,207)</b>   | <b>(1,151,032)</b>            | <b>-151%</b>     |
|                                | 3%                | 0%                 | 0%                 | -6%                  | -5%                       | -6%                |                    | 3%                    | -1%                |                               |                  |



DocID: 15804  
Revision: 4  
Status: Official  
Department: Governing Body  
Manual(s):

---

## Policy : Code of Ethics

---

### Policy:

It is the policy of Lewis County Hospital District No. 1 that the Board of Commissioners will adopt and comply with this Code of Ethics.

### Procedure:

### Introduction

This Board of Commissioners Code of Ethics (Code) has been adopted by the Board of Commissioners (Board) of Lewis County Public Hospital District No. 1, Arbor Health of Lewis County, Washington (District) to promote honest and ethical conduct and compliance with applicable laws, rules and regulations by the members of the Board (Commissioners).

### Applicability

This Code applies to each Commissioner.

### How to Use the Code

This Code is a general guide to the Board's standards of conduct and regulatory compliance. This Code is not intended to cover every issue or situation Commissioners may face in their official capacity. This Code does not replace other more detailed policies and procedures adopted by the District, including but not limited to the District's Bylaws, the Lewis County Hospital District No. 1 Code of Ethics (to the extent applicable to Commissioners), and specific directives adopted from time to time by the Board.

It is essential that Commissioners thoroughly review this Code and make a commitment to uphold its requirements. Failure to read and/or acknowledge this Code does not exempt a Commissioner from his or her responsibility to comply with this Code, applicable laws, rules and regulations, and District policies and procedures.

None of the principles and practices outlined in the Code is intended to restrict any Commissioner from exercising its constitutional rights of free speech and should not be so construed. Furthermore, the exercise of such rights shall not subject any Commissioner to any sanctions under this Code, even if such exercise is otherwise inconsistent with a stated principle or practice of appropriate ethical conduct.

The Board does not intend to adopt any rule in this Code that violates existing law. If, as a result of changes in the law or otherwise, any provision of the Code is subsequently determined to violate applicable law, such provision

shall be construed in such a way as to eliminate such violation and, if no such construction of the applicable provision is possible, the provision shall be void.

## Fundamental Responsibilities of Commissioners

The fundamental responsibility of each Commissioner is to promote the best interests of the public by overseeing the management of the District's business and community operations. In doing so, each Commissioner shall act in accordance with this Code, the District's other policies and procedures, and applicable laws, rules and regulations, including, but not limited to, Washington state law and the District's Bylaws. The Commissioners acknowledge that the purpose of Chapter 70.44 RCW, pursuant to which the District was formed, is to authorize the establishment of public hospital districts to own and operate hospitals and other health care facilities and to provide hospital and other health care services for the residents of such districts and other persons. The discharge of this responsibility requires the District to operate its hospital and other health care facilities in a competitive manner. Were it not to do so, the District could not compete with other private and public health care providers for patients, medical staff, executives and other critical operational support and would cease to be an economically viable entity notwithstanding the public support provided through tax levies against real property located within the District's boundaries.

## Principles and Practices

1. In the performance of their official duties, Commissioners shall act ethically, in good faith, with integrity, with care, and in a manner they reasonably believe to be in the best interests of the public that is served by the District.
2. Commissioners shall not allow outside activities or personal financial or other interests to influence or appear to influence their ability to make objective decisions with respect to the District.
3. Commissioners shall conduct their official and personal affairs in such a manner as to give the clear impression that they cannot be improperly influenced in the performance of their official duties.
4. Commissioners in discharging their duties to the District shall use their best efforts to comply with all applicable laws, rules and regulations of federal, state and local governments and other regulatory agencies.
5. Commissioners shall not be beneficially interested, directly or indirectly, in any contract or transaction which may be made by, through or under the supervision of such Commissioner, in whole or in part, or which may be made for the benefit of their office, or accept, directly or indirectly, any compensation, gratuity or reward in connection with such contract or transaction from any other person beneficially interested therein, except to the extent permitted under applicable law. Should a Commissioner have a beneficial interest in any contract or transaction proposed for the District, such beneficial interest shall be disclosed to the Board, before the Board authorizes the District to enter into such contract or transaction. The existence of such conflict of interest shall be reflected in the official minutes of the Board. Any Commissioner having such a conflict of interest shall not vote when the matter is presented to the Board for approval. Moreover, such Commissioner shall not influence or attempt to influence any other Commissioner to enter into a contract or transaction in which such Commissioner has a beneficial interest.
6. At the time of a Commissioner's election, a Commissioner shall disclose in writing to the Board all personal or professional relationships that create, or have the appearance of creating, a conflict of interest with the District. Should any such personal or professional relationships arise in the future, the Commissioner shall promptly disclose such relationships to the Board.
7. Commissioners shall not use their position to secure special privileges or exemptions for themselves or others.
8. Commissioners may not, directly or indirectly, give or receive or agree to give or receive any compensation, gift, reward, or gratuity from a third party for the Commissioners' services to the District or as to any contract or transaction between the District and any other party.
9. Commissioners shall not receive any compensation, remuneration, payments or distributions from the District for their services as Commissioners, except as and only to the extent permitted by applicable law.
10. Commissioners shall not accept employment or engage in any business or professional activity that could reasonably be expected to place them in a conflict of interest with the District or require or induce them, by reason of their new employment or engagement, to disclose confidential information acquired by the Commissioners by the reason of their office.

11. To the extent Commissioners obtain confidential information by reason of their office, they will not disclose such confidential information to others unless authorized to do so by the Board. For purposes of this paragraph "confidential information" means information that the Commissioners are required to treat as confidential under applicable law (whether such law is derived from statutes, regulations, case law, the District's charter documents, or otherwise). Information regarding the District not deemed confidential under applicable law may be shared by the Commissioners with others.
12. If Commissioners receive frequent inquiries from individuals or other persons requesting the disclosure of confidential information, Commissioners shall bring that information to the attention of the other Commissioners to allow the Board to determine if it wishes to adopt preventive measures to further protect the Board and District's legitimate interest in controlling access to its confidential information.
13. Commissioners shall not simultaneously hold any other incompatible office or position, including, but not limited to, another office or position whose functions are inconsistent with the functions of a Commissioner for the District, or where the occupation of such other office or position is detrimental to the public interest.
14. Commissioners shall comply with all of the District's policies and procedures, including those applicable to District employees and medical staff generally, to the extent applicable to their services as Commissioners.
15. The Superintendent is, by statute, the District's chief administrative officer and, in such capacity, is responsible for the administration of the District. Accordingly, if Commissioners receive questions or concerns from employees, from members of the medical staff, or from the public concerning District operations, they shall promptly notify the Superintendent and it shall be the responsibility of the Superintendent (or the Superintendent's designee) to respond on behalf of the District. Similarly, if third parties, such as third party payors, employee groups, real estate developers, or others, communicate with Commissioners regarding existing or proposed business or other relationships with the District, such matters shall promptly be referred to the Superintendent to take whatever action the Superintendent deems appropriate. The Superintendent shall be accountable to the full Board for follow-up on such items.
16. Commissioners shall fully cooperate with government investigators as required by applicable law. If a Commissioner encounters an investigator, or receives a subpoena, search warrant or other similar document, related to an investigation of the District, the Commissioner shall promptly give notice of such investigation to the Board.
17. Commissioners shall not destroy or alter any information or documents in anticipation of, or in response to, a request for documents by any applicable governmental agency or from a court of competent jurisdiction.
18. The Commissioners are expected to prepare for, participate in, and attend all Board meetings. They should commit the time necessary to review all Board materials. The same level of participation is expected with respect to all Board committees, if any, to which the Commissioners are assigned. For purposes of the foregoing, "attend" shall mean that the Commissioner arrives at the Board meeting (or, if applicable, the Board committee meeting) on time and stays until the conclusion of the meeting.
19. Commissioners are expected to engage in robust, active discussions of the issues submitted to the Board for consideration in order to arrive at the most carefully considered decisions for the District. With this in mind, Commissioners must study all relevant information (including materials in Board packages), articulate clearly their personal views, be prepared to argue for and support their positions, and, when appropriate, question and challenge the views of others. Such deliberations should be conducted in a respectful manner in line with customary standards of civility and decorum.
20. Commissioners when discussing District business, whether at Board meetings or elsewhere, are urged to adhere to the following standards: Commissioners should be respectful of the views of other Commissioners and executives, even if such views are contrary to the Commissioners' personal opinions; not divulge confidential information regarding the District's affairs; not purport to represent the views of the Board, unless authorized to do so by the Board; and not intentionally misrepresent, demean or belittle positions taken by other Commissioners or District executives and, where appropriate, take all reasonable steps to ensure that a balanced presentation of competing points of view is given so as to promote common understanding of (rather than to foster a spirit of divisiveness with respect to) the issues before the Board and the various competing points of view taken by other Commissioners and District executives. Nothing in this Code is intended to limit any Commissioner's constitutionally-protected rights of free speech, nor is this Code to be construed so as to impair the ability of Commissioners to participate in ceremonial, representational or informational functions in the pursuit of their official duties.
21. Commissioners are publicly-elected officials. As a consequence, if incumbent Commissioners choose to run for re-election, they will of necessity be involved in campaign-related activities during the tenure of their service on the Board. Nothing in this Code of Ethics is intended to deprive such individuals of, or to inhibit or limit the lawful exercise of, the right to engage in customary re-election activities, including but not limited to seeking and securing

endorsements, soliciting campaign contributions, distributing voter pamphlets and other campaign related materials, or making public appearances. They may solicit financial or other support for the community at large, hospital employees, medical staff members, nurses, and others, provided that the support comes from such persons when acting in their personal capacities, and not as representatives or employees of the District. All such support must be voluntary and may not be given or received with the expectation or understanding that the contributing individual will receive any consideration, privilege or benefit, directly or indirectly, from the District. Commissioners may not, claim, suggest or create the impression that their re-election is supported or endorsed by the District itself, nor may they use or gain access to the District financial resources to support their re-election campaign. They may however fully discharge their duties and responsibilities as Commissioners during the re-election campaign (as indeed they are obligated to do), and such activities are not wrongful.

22. Commissioners shall refrain from any illegal, unethical, or inappropriate conduct, whether or not specifically identified in this Code.

## General Standards of Conduct

Commissioners' compliance with the principles and practices of this Code will be subject to the following guidelines:

1. Commissioners may not be considered in violation of the ethical guidelines of the Code as long as they have acted in good faith, and in a manner they believed to be consistent with their obligations under Code.
2. To the extent that Commissioners receive advice from the District's legal counsel (consisting of in-house counsel or legal counsel engaged by the District), Commissioners may rely upon such advice in discharging their duties to the District. If Commissioners have in good faith relied upon such advice in conducting the District's business, such reliance will constitute a defense to charges that actions based upon such reliance violated the provisions of the Code.
3. Absent evidence of bad faith, inadvertent violations of the Code that do not adversely affect the District in a material way and that do not create private benefits in favor of the Commissioner or related parties will not constitute grounds for disciplining a Commissioner.

## Enforcement of Code

The Board is the body vested with the exclusive authority to enforce the provisions of the Code and to take disciplinary action against Commissioners for violations. As provided in Article VIII, the Board may, under certain circumstances, enlist the support of others to assist with fact finding and to make recommendations.

While members of the public may give the Board notice of alleged violations of the Code, they may not, except as qualified below, bring legal actions against Commissioners for alleged violations, whether such actions seek specific performance, damages or other forms of judicial relief. The Commissioners are not liable to members of the public for damages resulting for Code violations.

Notwithstanding the foregoing, if a Commissioner's misconduct constitutes official misconduct as to which a legal action may be brought by a member of the public, separate and apart from its constituting a violation of the Code, members of the public may pursue such matters, at law or in equity, in the same manner as they might otherwise have pursued such matters under then-existing law. Hence, as relates to members of the public, the Code does not, and is not intended to create, a basis for making claims or pursuing remedies that would not otherwise be available under existing law.

## Reporting Procedures and Process

1. Any individual may advise the Board of an alleged violation of the Code by a Commissioner. To the extent feasible, any such notice should be given in writing and specify in reasonable detail the alleged misconduct.
2. The District will not take retribution or disciplinary action against any District employee who raises concerns or reports potential violations of the Code by a Commissioner, whether or not it is subsequently determined that there is a legal or factual basis to support such allegations. On the other hand, should members of the public allege official misconduct by Commissioners, and should such allegations not be supported either for factual or legal reasons, Commissioners may pursue such remedies as are available, at law or in equity, including but not limited to claims for libel or slander, against the parties wrongfully accusing the Commissioners of misconduct.

3. The Board shall review promptly, and in a prudent manner, allegations of Commissioner misconduct to determine whether there have been violations of the Code and what disciplinary action, if any, is appropriate. The processing of such allegations shall be under the direction of the Board Chair, acting with the advice of counsel, and being subject to the other guidelines provided for in this Article VIII. If the Board Chair is the subject of alleged misconduct, the responsibilities vested in the Board Chairman under the Code will pass to the next ranking officer (or, if none, the senior most member) of the Board who is not accused of the alleged Code violations.
4. The Board may, from time to time, adopt procedures for investigating, handling, and resolving allegations of misconduct, subject to adopting reasonable procedures for:
  - a. gathering information regarding the alleged misconduct, including but not limited to, accepting written submissions, hearing testimony, conducting hearings, undertaking fact finding, and soliciting information from experts;
  - b. the right of the accused to respond to the allegations and to be represented by counsel;
  - c. the screening out of frivolous complaints; and
  - d. the right of the public to observe such proceedings under the Open Public Meeting Act ("OPMA").
5. If the Board determines that a Commissioner has violated one or more of the provisions of the Code, the Board may give written or oral warnings, issue formal reprimands, publicly censure the Commissioner and/or relieve the commissioner of board committee assignments. Such disciplinary action shall be recorded in the minutes of the Board's meetings and, as directed by the Board, be published in local newspapers, the District's communications with residents, or through other media. In those instances where the misconduct is of a serious nature, the Board may, after receiving legal advice from counsel, initiate legal action in a court of competent jurisdiction to remove such Commissioner from office.
6. Subject to the following guidelines, the Board may appoint the Values, Ethics & Conflict of Interest committee to assist in fact-finding and/or making recommendations to the Board regarding allegations of Commissioner misconduct:
  - a. It will be left to the discretion of the Board to determine whether such a panel should be convened and to determine the scope of the responsibility given to such panel. The Board shall consider all facts and circumstances in making such determinations, including but not limited to the seriousness of the allegations, the history of the alleged misconduct – whether constituting an isolated incident or pattern of misconduct, the publicity surrounding the activities, the level of public interest, and whether and to what extent the public's interest might be advanced by enlisting the support of others outside of the Board. The Board's determinations regarding such matters will be final and binding. It is not expected that such panels would be convened to handle frivolous complaints or allegations regarding inadvertent or minor violations of the Code.
  - b. If the Board elects to solicit outside support in processing allegations of Code violations, the Board Chair, acting with the advice of legal counsel, shall appoint, on such basis as the Board Chair deems appropriate, the individuals to serve on the advisory panel, which participants may be drawn from public officials or members of the local business community (such as members of the chambers of commerce) from those municipalities whose geographic boundaries fall primarily within the boundaries of the District. The size of the panel will be determined by the Board Chair.
  - c. The Board or, absent specific direction from the Board, the Board Chair will establish the specific fact-finding and advisory responsibilities of the panel.
  - d. If such a panel is constituted, the panel's activities will be subject to the public access requirements of the OPMA, to the extent required by OPMA.
  - e. The Board will, however, in all instances, retain ultimate decision making regarding whether the alleged misconduct constitutes a violation of the Code and whether and to what extent to take disciplinary action against any Commissioner found to be in violation of the Code.
7. To the extent that alleged misconduct constitutes a violation of law, separate and apart from a violation of the Code, such misconduct may be referred to the county prosecuting attorney for action.

## Waiver

If a Commissioner believes that it is inappropriate to apply any of the provisions of this Code to such Commissioner, such Commissioner may submit to the Board a written request for a waiver from such provision. Such written request must be accompanied by a statement setting forth the reasons why the waiver should be granted under the circumstances. Such waiver shall be effective if approved by a majority vote of the Commissioners (excluding the requesting Commissioner). Furthermore, such waiver may be granted only if supported by legal advice from the District's in-house or outside legal advisors.

## **Review**

The Board shall review this Code to ensure compliance with all applicable laws, rules and regulations, and to ensure that the Commissioners are held to the highest standards of conduct and ethics. In connection with such review, the Board should discuss what, if any, amendments or revisions are necessary to improve the effectiveness of this Code.

## **Amendments**

This Code may be amended from time to time by the Board, if approved by a majority vote of all Commissioners, and any amendment must be disclosed as required by and in accordance with applicable laws, rules and regulations.

## **Affirmation**

Each Commissioner is responsible for reviewing, understanding, acknowledging and personally upholding this Code and other policies and procedures. Each of the Commissioners shall certify that he or she has read, understands, is in compliance with and is not aware of any violations of this Code upon the initial adoption of this Code; upon the adoption of any amendments to this Code; upon a Commissioner's appointment, election or re-election to office; and at the beginning of each fiscal year. Each such certification shall be made by the execution of the Receipt and Acknowledgement attached hereto as Exhibit A.



**EXHIBIT A**

**LEWIS COUNTY HOSPITAL DISTRICT NO. 1**

**Board of Commissioners Code of Ethics**

**Receipt and Acknowledgement**

I understand that each Commissioner is responsible for reviewing, understanding, acknowledging and personally upholding the Board of Commissioners Code of Ethics (Code), and for familiarizing him or herself with the applicable detailed elements of other policies and procedures.

By executing this Receipt and Acknowledgement, I hereby acknowledge that:

1. I have received and read a copy of the Code;
2. I understand the contents of the Code;
3. I have familiarized myself with the applicable detailed elements of the Code of Ethics and other policies and procedures;
4. I affirm my commitment to and compliance with the standards and procedures set forth in the Code; and
5. I am not aware of any violations of the Code involving myself that occurred since the later of the adoption of the Code, the last time I executed and delivered a Receipt and Acknowledgement or the beginning of the last fiscal year that have not otherwise been reported in accordance with the procedures set forth in the Code.
6. I acknowledge that my execution of this Receipt and Acknowledgement has been requested by the Board of Commissioners as a part of the District's ongoing program to ensure compliance with the terms of the Code and that the District and the Board intended to rely upon the representations made herein.

Printed name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Document Owner:** Frady, Trish

**Collaborators:**

**Approvals**

- **Committees:** ( 09/25/2019 ) Board of Commissioners, ( 07/29/2020 ) Board of Commissioners,

- **Signers:**

**Original Effective Date:** 07/17/2012

**Revision Date:** [07/17/2012 Rev. 0], [07/17/2012 Rev. 1], [08/27/2015 Rev. 2], [08/27/2018 Rev. 3], [09/06/2019 Rev. 4]

**Review Date:** [11/08/2013 Rev. 1], [12/23/2014 Rev. 1], [06/20/2016 Rev. 2], [08/24/2017 Rev. 2], [07/21/2020 Rev. 4]

**Attachments:**

(REFERENCED BY THIS DOCUMENT)

**Other Documents:**

(WHICH REFERENCE THIS DOCUMENT)

*Paper copies of this document may not be current and should not be relied on for official purposes. The current version is in Lucidoc at*

<https://www.lucidoc.com/cgi/doc-gw.pl?ref=morton:15804>.



DocID: 8610-107  
Revision: 2  
Status: Official  
Department: Governing Body  
Manual(s):

---

## Policy : Records Retention

---

### Policy:

It is the policy of Lewis County Hospital District No. 1 that in accordance with RCW 40.14 and as hereafter amended, the Board of Commissioners of Lewis County Hospital District No.1 commissions the protection of public records, documents and publications.

There shall be a designated records officer to supervise the District's records program.  
The Records Officer shall:

1. Coordinate and maintain all aspects of the records management program as that program is approved by the Board of Commissioners.
2. Manage the inventory in accordance with procedures prescribed by the "Public Hospital Districts General Records Retention Schedule". The Districts records program will meet the Washington State Local Records Committee recommendations and the Board of Commissioners' policy.
3. Consult with any other personnel responsible for the maintenance of specific records within this organization regarding records retention and transfer recommendations and requirements.
4. Analyze records inventory data, examine and compare internal department inventories for duplication of records and recommend to the Superintendent maximum retentions for all copies commensurate with legal, financial and administrative needs.
5. Review the District's records program at least annually to insure that they are complete and current.

The Superintendent shall give an annual District Record Management report to the Board of Commissioners.

---

**Document Owner:** Frady, Trish

**Collaborators:**

**Approvals**

- **Committees:** ( 12/19/2018 ) Board of Commissioners, ( 09/30/2020 ) Board of Commissioners,

- **Signers:**

**Original Effective Date:**

**Revision Date:** [01/01/2007 Rev. 1], [11/07/2013 Rev. 2]

**Review Date:** [05/29/2009 Rev. 1], [04/06/2010 Rev. 1], [04/11/2011 Rev. 1], [01/17/2013 Rev. 1], [11/21/2017 Rev. 2], [10/18/2018 Rev. 2], [09/21/2020 Rev. 2]

**Attachments:**

(REFERENCED BY THIS DOCUMENT)

**Other Documents:**

(WHICH REFERENCE THIS DOCUMENT)

*Paper copies of this document may not be current and should not be relied on for official purposes. The current version is in Lucidoc at*

<https://www.lucidoc.com/cgi/doc-gw.pl?ref=morton:10649>.



DocID: 14518  
Revision: 5  
Status: Official  
Department: Governing Body  
Manual(s):

---

## Policy & Procedure : Board Meeting Teleconference

---

### Policy:

It is the policy of Lewis County Hospital District No. 1 that the Board can participate virtually or by teleconference for board meetings.

### Procedure:

The Board may attend Regular, Special and/or Committee Meetings via the following guidelines:

1. The Board will comply with the OPMA regulations.
2. Virtual and/or teleconference meetings will be permitted when at least one Board Member or the Superintendent are present at the established meeting place.
3. The Board is able to conduct board business i.e., motions and votes.
4. The Board Chair will conduct the meeting ensuring that each board member can hear and be heard.
5. The Board meeting access information will be distributed via any of the following:
  - a. Board Notices
  - b. Board Agendas
  - c. Board Packets
  - d. Arbor Health Website
  - e. Arbor Health Facebook Page

In a state of emergency, the Board will adhere to the Governor's Proclamations.

---

**Document Owner:** Frady, Trish

**Collaborators:**

**Approvals**

- **Committees:** ( 01/27/2021 ) Board of Commissioners,

- **Signers:**

**Original Effective Date:** 06/18/2010

**Revision Date:** [06/18/2010 Rev. 0], [08/28/2012 Rev. 1], [08/12/2014 Rev. 2], [07/24/2015 Rev. 3], [11/27/2018 Rev. 4], [01/28/2021 Rev. 5]

**Review Date:** [04/11/2011 Rev. 0], [05/31/2016 Rev. 3], [09/05/2019 Rev. 4]

**Attachments:**

(REFERENCED BY THIS DOCUMENT)

**Other Documents:**

(WHICH REFERENCE THIS DOCUMENT)

*Paper copies of this document may not be current and should not be relied on for official purposes. The current version is in  
Lucidoc at*

<https://www.lucidoc.com/cgi/doc-gw.pl?ref=morton:14518>.



DocID: 17933  
Revision: 0  
Status: Official  
Department: Governing Body  
Manual(s):

---

## Policy & Procedure : Board Mobile Device Management

---

### Policy:

It is the policy of Lewis County Hospital District No. 1 that the Board of Commissioners shall not send or receive electronic communications during a board meeting concerning any matter pending before the board.

### Procedure:

Commissioners should:

1. Not use electronic communication devices to review or access information regarding matters not in consideration before the board during a board meeting.
2. Only use the internet during meetings to access the board agenda packet information, board resource documents, including but not limited to board policies, the bylaws, Robert's Rules of Order or other research relevant to the discussion.
3. Make every effort to refrain from sending or receiving electronic communication of a personal nature during board meetings. It may sometimes be necessary to send or receive urgent/emergency family or business communications during meetings.

---

**Document Owner:** Frady, Trish

**Collaborators:**

**Approvals**

- **Committees:** ( 09/25/2019 ) Board of Commissioners, ( 03/31/2021 ) Board of Commissioners,

- **Signers:**

**Original Effective Date:** 12/05/2017

**Revision Date:** [12/05/2017 Rev. 0]

**Review Date:** [08/27/2018 Rev. 0], [09/05/2019 Rev. 0], [02/19/2021 Rev. 0]

**Attachments:**

(REFERENCED BY THIS DOCUMENT)

**Other Documents:**

(WHICH REFERENCE THIS DOCUMENT)

*Paper copies of this document may not be current and should not be relied on for official purposes. The current version is in  
Lucidoc at*

<https://www.lucidoc.com/cgi/doc-gw.pl?ref=morton:17933>.

**SUPERINTENDENT REPORT**