
REGULAR BOARD MEETING PACKET



BOARD OF COMMISSIONERS

Board Chair – Tom Herrin, Secretary – Kim Olive,
Commissioner – Craig Coppock, Commissioner – Wes McMahan &
Commissioner-Laura Richardson

August 31, 2022 @ 3:30 PM

Conference Room 1 & 2 or Join Zoom Meeting:

<https://myarborhealth.zoom.us/j/83841788729>

Meeting ID: 838 4178 8729

One tap mobile: +12532158782,,83841788729#

Dial: +1 253 215 8782

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Superintendent Report





**LEWIS COUNTY HOSPITAL DISTRICT NO. 1
REGULAR BOARD OF COMMISSIONERS' MEETING**

August 31, 2022 at 3:30 p.m.

Conference Room 1 & 2 or via ZOOM

<https://myarborhealth.zoom.us/j/83841788729>

Meeting ID: 838 4178 8729

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Mission Statement

To foster trust and nurture a healthy community.

Vision Statement

To provide accessible, quality healthcare.

AGENDA	PAGE	TIME
Call to Order		
Roll Call		
Reading of the Mission & Vision Statement		3:30 pm
Approval or Amendment of Agenda		
Conflicts of Interest		
Comments and Remarks		3:35 pm
<ul style="list-style-type: none"> • Commissioners • Audience 		
Executive Session-RCW 70.41.200	5	3:40 pm
<ul style="list-style-type: none"> • Medical Privileging-Dr. Mark Hansen & Janice Cramer 		
Department Spotlight	6	3:45 pm
<ul style="list-style-type: none"> • Orthopedics-Char Hancock 		
Board Committee Reports		
<ul style="list-style-type: none"> • Hospital Foundation Report-Committee Chair-Commissioner Richardson 	13	3:55 pm
<ul style="list-style-type: none"> • Finance Committee Report-Committee Chair-Commissioner McMahan 	16	4:00 pm
<ul style="list-style-type: none"> • Compliance Committee Report- Committee Chair-Commissioner McMahan 		4:10 pm
Consent Agenda (Action)		4:15 pm
<ul style="list-style-type: none"> • Approval of Minutes: <ul style="list-style-type: none"> ○ July 27, 2022, Regular Board Meeting ○ August 10, 2022, Compliance Committee Meeting ○ August 17, 2022, Special Board Meeting ○ August 24, 2022, Finance Committee Meeting 	22 29 34 36	
<ul style="list-style-type: none"> • Warrants & EFTs in the amount of \$3,889,876.15 dated July 2022 	40	
<ul style="list-style-type: none"> • Resolution 22-28-Approving the Capital Purchase of the MOB HVAC <ul style="list-style-type: none"> ○ To approve the purchase of the MOB HVAC unit with two compressors from operating cash. 	42	
<ul style="list-style-type: none"> • Resolution 22-29-Approving the Capital Purchase of the O2 Mini Bulk Tank <ul style="list-style-type: none"> ○ To approve the purchase of the O2 Mini Bulk Tank storage from operating 	45	

<i>cash.</i>		
<ul style="list-style-type: none"> • Resolution 22-30-Declaring to Surplus or Dispose of Certain Property <ul style="list-style-type: none"> ○ <i>To approve liquidation of items beyond their useful life.</i> 	48	
<ul style="list-style-type: none"> • Resolution 22-31-Appointing Replacement Auditor of LCHD No. 1 <ul style="list-style-type: none"> ○ <i>To appoint replacement auditor; CFO Boggess to CFO Cornwell.</i> 	50	
<ul style="list-style-type: none"> • Approve Documents Pending Board Ratification 08.31.22 <ul style="list-style-type: none"> ○ <i>To provide board oversight for document management in Lucidoc.</i> 	51	
Old Business		
<ul style="list-style-type: none"> • Superintendent Succession Plan (<i>Verbal</i>) <ul style="list-style-type: none"> ○ <i>To provide a search committee update.</i> 		4:20 pm
<ul style="list-style-type: none"> • Open Public Meetings Act <ul style="list-style-type: none"> ○ <i>To discuss interest in recording board meetings.</i> 		4:30 pm
<ul style="list-style-type: none"> • Public Hearing-Redistricting <ul style="list-style-type: none"> ○ <i>To discuss holding a Special Board Meeting-Public Hearing for Redistricting on September 21st.</i> 	55	4:35 pm
New Business		4:45 pm
<ul style="list-style-type: none"> • Board Policy & Procedure Review <ul style="list-style-type: none"> ○ Board Self-Evaluation ○ Board Spending Authority ○ Distribution of Board and Committee Packets 	58 60 62	
<ul style="list-style-type: none"> • 2022 Annual Meeting-AWPHD & WSHA <ul style="list-style-type: none"> ○ <i>To discuss interest in attending the conference.</i> 	63	4:50 pm
Superintendent Report (<i>Verbal</i>)		4:55 pm
<ul style="list-style-type: none"> • Packwood Clinic • Dr. Puga 		
Guest Speaker		5:00 pm
<ul style="list-style-type: none"> • Kurt O'Brien Consulting <ul style="list-style-type: none"> ○ <i>Developing a High Functioning & Effective Board-Part 6</i> 		
Meeting Summary & Evaluation		5:30 pm
Next Board Meeting Dates and Times		
<ul style="list-style-type: none"> • Regular Board Meeting-September 28, 2022 @ 3:30 PM (ZOOM) 		
Next Committee Meeting Dates and Times		
<ul style="list-style-type: none"> • QIO Committee Meeting-September 14, 2022 @ 12:00 PM (ZOOM) • Finance Committee Meeting- September 21, 2022 @ 12:00 PM (ZOOM) 		
Adjournment		5:15 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- 3

Radia Inc.

- William Feldmann, MD (Radiology Consulting Privileges)
 - Timothy Jan, DO (Radiology Consulting Privileges)
 - Michael Peters, MD (Radiology Consulting Privileges)
-

REAPPOINTMENTS- 9

Arbor Health

- Mark Hansen, MD (Emergency Medicine Privileges & Family Medicine Privileges)

Providence Cardiology Associates

- Gopal Ghimire, MD (Cardiology Consulting Privileges)
- Hartaj Girn, MD (Cardiology Consulting Privileges)
- Charles Rossow, MD (Cardiology Consulting Privileges)
- Jimmy Swan, MD (Cardiology Consulting Privileges)

Providence Health & Services

- Michael Chen, MD (Telestroke/Neurology Consulting Privileges)
- Lilit Judd, MD (Telestroke/Neurology Consulting Privileges)

Radia Inc.

- Daniel Susanto, MD (Radiology Consulting Privileges)
- Milton Van Hise (Radiology Consulting Privileges)

⊛-notates files with items to note.

Dr. Robert Williams

Arbor Health Orthopedics



Arbor
Health

| MORTON
HOSPITAL

Pg 6 of the Board Packet

Visit Statistics

July 1, 2021 – July 31, 2022

302 Office visits

8 Surgeries

7 Outpatient Professional Fees

49 MRI referrals

50 X-ray referrals

5 CT referrals

106 PT referrals

17 OT referrals

22 Lab referrals

1 Wound care referral

Financial Gains (Losses)

- 2022 YTD Clinic Net Gain (Loss) (**\$38,557**)
- 2021 YTD Clinic Net Gain (Loss) (**\$146,424**)
- 2021-2022 Net Gain (paid) from inside referrals (xray, CT, MRI, etc.,) \$187,791, still outstanding \$70,180
- Total received gain \$2,810

Equipment purchased for Orthopedics

Total \$543,137

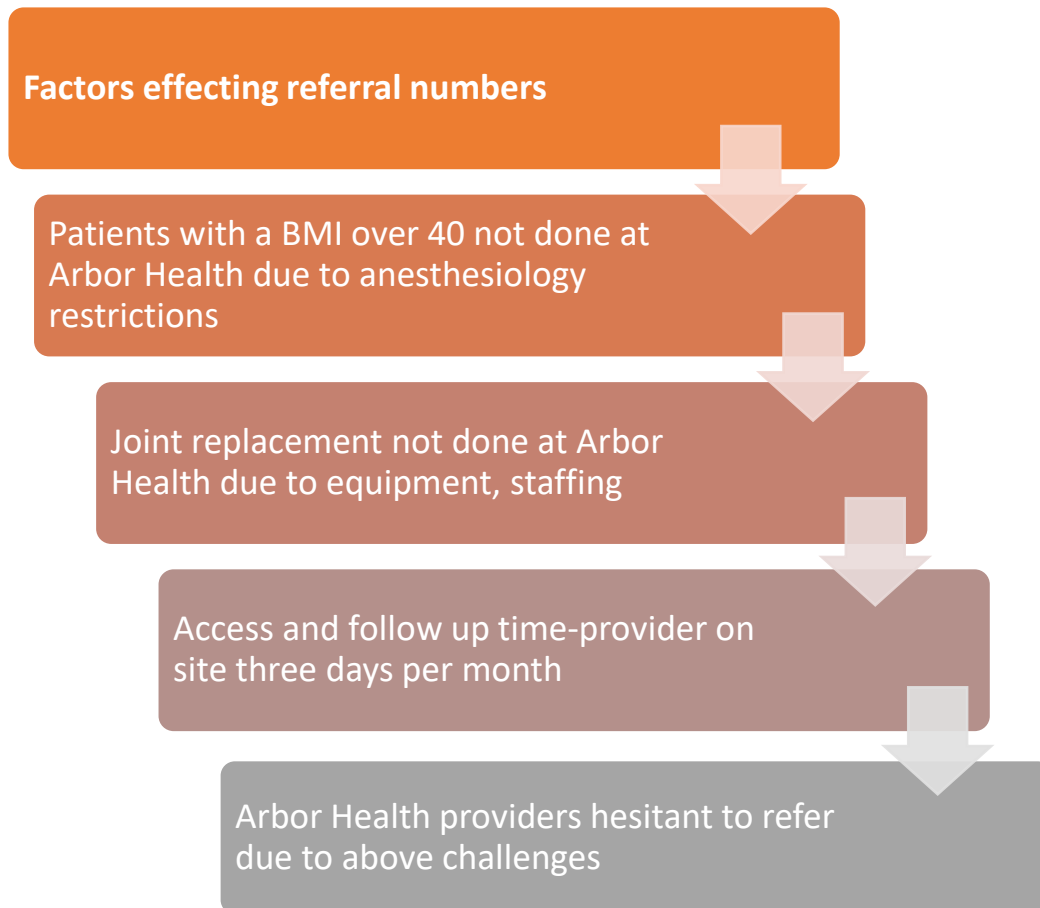
Cost per month: \$21,112

Term: 27 months

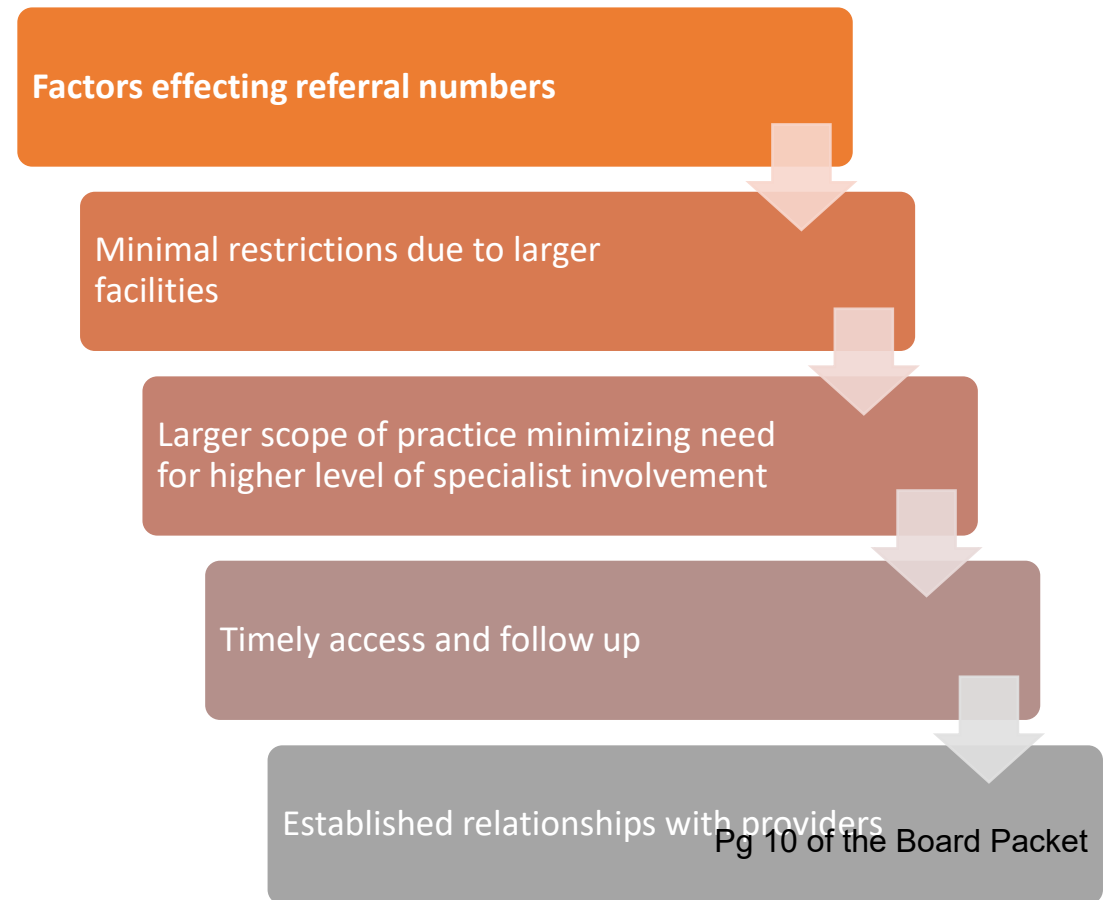
Interest: 3.86%

Referrals: 2021 – 2022

Dr. Williams - 219



Outside Ortho - 559



Strategies

- Increase surgeries by 50% annually.
- Increase referrals by 10% annually (Dr. Williams to build relationships with primary care providers).
- Work with provider to introduce telehealth visits for follow-up (increase patient satisfaction as well as trust in the program)
- Screening referrals for BMI, possible outcomes to make sure patients are being sent in the right direction with the first referral. This will increase patient satisfaction and primary provider satisfaction.

BOARD COMMITTEE REPORTS

LEWIS COUNTY HOSPITAL DISTRICT NO. 1
Arbor Health Foundation Meeting
August 9, 2022, at 12:00p.m.
Hybrid Meeting

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: Marc Fisher, Louise Fisher, Jeannine Walker, Jessica Scogin, Laura Richardson, Katelin Forrest, Gwen Turner, Paula Baker, Ann Marie Forsman, Christy Greiter, Leianne Everett, Lynn Bishop, Christine Brower, Laura Richardson, Gerri Maize, Martha Wright

Excused: Betty Jurey, Caro Johnson, Linda Herrin

Guest: Lenee Langdon, Bonnie Justice, Dolores Jones

Call to Order by President Marc Fisher at 12:00

The president read the mission statement

July minutes and July treasurers report were reviewed and approved. Louise Fisher moved, and Laura Richardson seconded. The motion passed.

Administrators Report-Leianne Everett

Leianne shared several updates including:

- Leadership level changes
 - New CFO Cheryl Cornwell started mid-July
 - CEO recruitment beginning, Leianne's last day 1/1/2023
- Staffing challenges
 - Nursing top priority
 - Dietary, cafeteria closing weekly due to short staffing
 - No provider challenges at this time
 - Discussed stay/exit interviews being completed about employee turnover
- Reviewed specialties including Surgery, Ortho, Podiatry, Family practice, Rapid Care Clinic offerings and future growth.
- Changes to Governors Proclamation
- Shift from volume to value healthcare
- Packwood Clinic Expected to open in December 2022
- Dr. Puga starting in October vs. August

Directors Report: -Jessica Scogin

Jessica shared several updates and passed around sign-up sheets including:

- Logger's Jubilee
 - 50/50 Raffle ticket sales
 - Arrive at arena front gate at 4:30 to sell tickets
 - Logger's Jubilee Float advertising for Auction and Color Run
 - Float decorating at Marc & Louise Fisher's home on Thursday
 - Distributing Color Run flyers at Jubilee 10K
- Color Run 8/27/2022
 - Need Volunteers for color stations, to provide water, snacks and Arbor Health Foundation booth
- Dinner Auction 10/1/2022
 - At Lyle Building
 - Sign up for decorating, item procurement, entertainment, food etc.

Old Business:

None

New Business:

- Proposed Bylaw Changes
 - Katelin reviewed changes the executive members are proposing for the bylaws. Please review redline copy emailed by Jessica. Will vote on changes at September meeting.
 - Proposed changes include:
 - Updating Foundation Directors to Foundation Members for clarity
 - Removing meeting attendance requirements
 - Updating mission/vision statement to more clearly define the foundations vision of improving community connection
- Banking Changes
 - Gwen Turner made a motion to make the following changes to the Arbor Health bank accounts at Key Bank and Security State Bank. Key Bank accounts ending in -9824, -9816, and -3117
 - Remove Ali Draper from all Arbor Health Foundation accounts
 - Add Katelin Forrest to all Arbor Health Foundation accounts
 - Arbor Health Foundation Officers and signers on the bank accounts are to be assigned as follows:
 - Jessica Scogin, Executive Director
 - Marc Fisher, President
 - Katelin Forrest, Vice President
 - Caro Johnson, Secretary
 - Gerri Maize, Treasurer

- Online banking rights are to be granted to Jessica Scogin, Katelin Forrest, Gerri Maize. Jessica Scogin is the only authorized signer on the Security State Bank Credit Card.
- Christie Greiter seconded the motion and the motion passed
- Nominations of new members
 - Katelin nominated Lenee Langdon and Laura Richardson nominated Bonnie Justice to become new Board Members. Lenee and Bonnie accepted the nominations. Katelin made a motion to accept the nominations and Laura Richardson seconded. The motion passed.

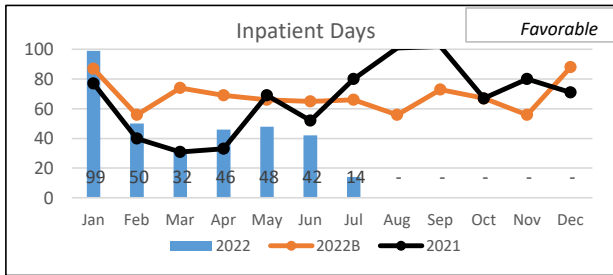
Next Meeting: September 13th at 6pm Bonnie Justice Home in Glenoma

Meeting adjourned 1pm

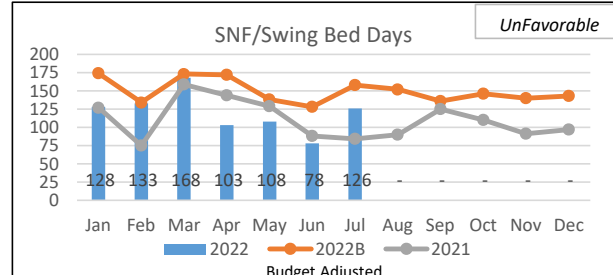
Lewis County Hospital District No. 1 Board Financial Summary

July 31, 2022

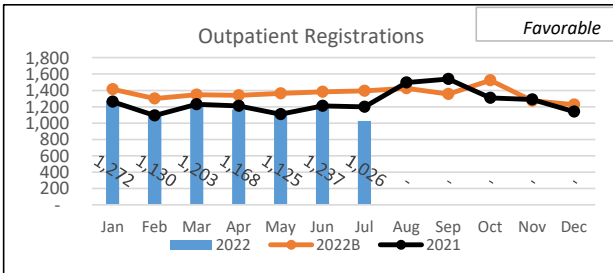
Growth



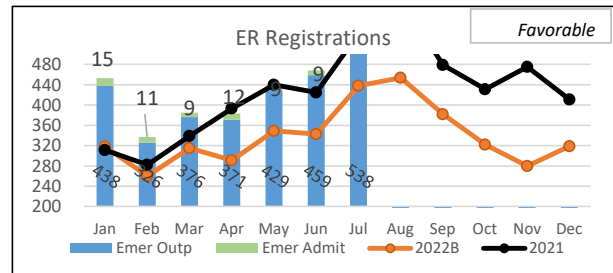
YTD: 331 Budget: 483 Pr Yr: 382



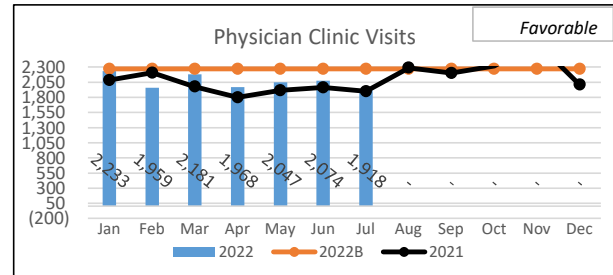
YTD: 844 Budget: 1,077 Pr Yr: 806



YTD: 8,161 Bud: 9,542 Pr Yr: 8,311

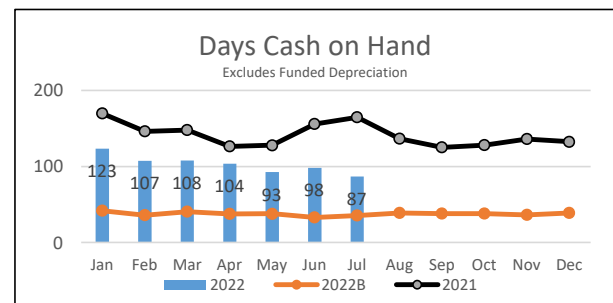
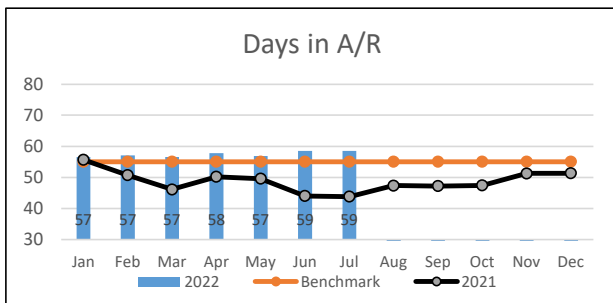
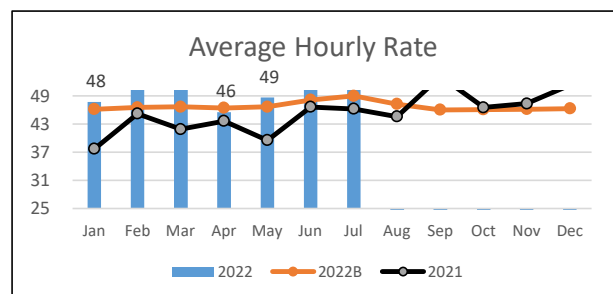
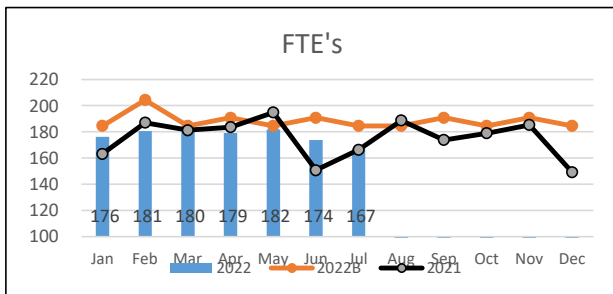


YTD: 2937 Bud: 2314 Pr Yr: 2731



YTD: 14,380 Bud: 15,897 Pr Yr: 13,852

People and Operational Aspects



All Morton General Hospital
Income Statement
July, 2022

Pr Yr MTD	% Var	MTD \$ Var	MTD Budget	MTD Actual		YTD Actual	YTD Budget	YTD \$ Var	YTD % Var	PY YR YTD
851,562	-60%	(480,572)	795,800	315,227	Total Hospital IP Revenues	4,148,890	5,352,787	(1,203,897)	-22.5	4,583,302
2,951,847	-1%	(48,615)	3,458,515	3,409,900	Outpatient Revenues	22,266,690	21,575,644	691,046	3.2	18,410,977
381,382	-24%	(131,511)	547,971	416,460	Clinic Revenues	2,979,913	3,695,913	(716,000)	-19.4	2,519,192
4,184,791	-14%	(660,698)	4,802,286	4,141,587	Total Gross Patient Revenues	29,395,492	30,624,344	(1,228,852)	-4.0	25,513,471
(1,459,751)	-21%	314,563	(1,497,198)	(1,182,635)	Contractual Allowances	(9,010,244)	(9,783,358)	773,114	-7.9	(8,573,483)
(20,428)	-114%	72,427	(63,507)	8,920	Bad Debt & Bankruptcy	(108,265)	(392,523)	284,259	-72.4	(342,427)
(26,841)	2933%	(50,697)	(1,728)	(52,426)	Indigent Care	(303,596)	(14,741)	(288,855)	1959.6	(230,650)
(91,028)	0%	(163,838)	0	(163,838)	Other Adjustments	(665,194)	0	(665,194)	0.0	(242,132)
(1,598,048)	-11%	172,455	(1,562,433)	(1,389,978)	Total Deductions From Revenue	(10,087,299)	(10,190,622)	103,323	-1.0	(9,388,692)
2,586,743	-15%	(488,243)	3,239,853	2,751,609	Net Patient Revenues	19,308,194	20,433,722	(1,125,528)	-5.5	16,124,780
66,020	12%	9,863	81,900	91,764	Other Operating Revenue	663,844	573,303	90,541	15.8	1,005,153
2,652,763	-14%	(478,380)	3,321,753	2,843,373	Total Operating Revenue	19,972,038	21,007,025	(1,034,987)	-4.9	17,129,932
Operating Expenses										
1,582,749	0%	(2,970)	1,891,639	1,894,609	Salaries	11,983,801	12,746,303	762,502	6.0	10,200,554
356,136	31%	136,097	441,420	305,324	Total Benefits	2,736,010	3,046,106	310,095	10.2	2,638,124
1,938,885	6%	133,127	2,333,059	2,199,932	Salaries And Benefits	14,719,811	15,792,409	1,072,597	6.8	12,838,678
90,901	-1%	(799)	145,165	145,964	Professional Fees	953,960	1,082,369	128,409	11.9	888,197
164,174	-16%	(31,142)	199,485	230,627	Supplies	1,476,847	1,425,538	(51,309)	-3.6	1,112,147
328,573	16%	60,703	389,305	328,602	Total Purchased Services	2,588,468	2,775,306	186,838	6.7	2,348,388
42,269	-1%	(258)	43,966	44,224	Utilities	337,179	299,350	(37,829)	-12.6	292,454
9,987	16%	4,598	28,379	23,781	Insurance Expense	162,067	162,005	(62)	0.0	126,690
101,037	-3%	(3,490)	107,062	110,552	Depreciation and Amortization	768,584	723,783	(44,802)	-6.2	711,585
35,543	4%	1,522	36,661	35,139	Interest Expense	231,145	239,129	7,984	3.3	249,694
37,972	-66%	(36,055)	54,845	90,900	Other Expense	317,928	414,000	96,072	23.2	289,568
2,749,341	4%	128,207	3,337,928	3,209,721	Total Operating Expenses	21,555,989	22,913,888	1,357,899	5.9	18,857,401
(96,579)	2165%	(350,173)	(16,175)	(366,348)	Income (Loss) From Operations	(1,583,952)	(1,906,863)	322,912	-16.9	(1,727,469)
(119,347)	-7%	9,643	(137,566)	(147,209)	Non-Operating Revenue/Expense	(1,015,109)	(962,964)	52,145	-5.4	(858,836)
22,769	-281%	(340,530)	121,391	(219,139)	Net Gain (Loss)	(568,843)	(943,900)	375,057	-39.7	(868,633)

Lewis County Hospital District No. 1
Income Statement
July, 2022

CURRENT MONTH		MONTH			YEAR TO DATE					
Pr Yr Month	% Var	\$ Var	Budget	Actual		Actual	Budget	\$ Var	% Var	Actual
851,562	-60%	(480,572)	795,800	315,227	Inpatient Revenue	4,148,890	5,352,787	(1,203,897)	-22%	4,583,302
2,951,847	-1%	(48,615)	3,458,515	3,409,900	Outpatient Revenue	22,266,690	21,575,644	691,046	3%	18,410,977
381,382	-24%	(131,511)	547,971	416,460	Clinic Revenue	2,979,913	3,695,913	(716,000)	-19%	2,519,192
4,184,791	-14%	(660,698)	4,802,286	4,141,587	Gross Patient Revenues	29,395,492	30,624,344	(1,228,852)	-4%	25,513,471
1,550,779	10%	150,725	1,497,198	1,346,472	Contractual Allowances	9,675,438	9,783,358	107,919	1%	8,815,615
26,841	-2933%	(50,697)	1,728	52,426	Charity Care	303,596	14,741	(288,855)	-1960%	230,650
20,428	114%	72,427	63,507	(8,920)	Bad Debt	108,265	392,523	284,259	72%	342,427
1,598,048	11%	172,455	1,562,433	1,389,978	Deductions from Revenue	10,087,299	10,190,622	103,323	1%	9,388,692
2,586,743	-15%	(488,243)	3,239,853	2,751,609	Net Patient Service Rev	19,308,194	20,433,722	(1,125,528)	-6%	16,124,780
61.8%	1.5%	1.0%	67.5%	66.4%	NPSR %	65.7%	66.7%	1.0%	1.6%	63.2%
66,020	12%	9,863	81,900	91,764	Other Operating Revenue	663,844	573,303	90,541	16%	1,005,153
2,652,763	-14%	(478,380)	3,321,753	2,843,373	Net Operating Revenue	19,972,038	21,007,025	(1,034,987)	-5%	17,129,932
Operating Expenses										
1,582,749	0%	(2,970)	1,891,639	1,894,609	Salaries & Wages	11,983,801	12,746,303	762,502	6%	10,200,554
356,136	31%	136,097	441,420	305,324	Benefits	2,736,010	3,046,106	310,095	10%	2,638,124
90,901	-1%	(799)	145,165	145,964	Professional Fees	953,960	1,082,369	128,409	12%	888,197
164,174	-16%	(31,142)	199,485	230,627	Supplies	1,476,847	1,425,538	(51,309)	-4%	1,112,147
328,573	16%	60,703	389,305	328,602	Purchase Services	2,588,468	2,775,306	186,838	7%	2,348,388
42,269	-1%	(258)	43,966	44,224	Utilities	337,179	299,350	(37,829)	-13%	292,454
9,987	16%	4,598	28,379	23,781	Insurance	162,067	162,005	(62)	0%	126,690
37,972	-66%	(36,055)	54,845	90,900	Other Expenses	317,928	414,000	96,072	23%	289,568
2,612,762	4%	130,174	3,194,205	3,064,031	EBDITA Expenses	20,556,260	21,950,976	1,394,716	6%	17,896,123
40,001	-273%	(348,206)	127,549	(220,658)	EBDITA	(584,222)	(943,951)	359,729	-38%	(766,190)
1.5%	302.1%	11.6%	3.8%	-7.8%	EBDITA %	-2.9%	-4.5%	-1.6%	34.9%	-4.5%
Capital Cost										
101,037	-3%	(3,490)	107,062	110,552	Depreciation	768,584	723,783	(44,802)	-6%	711,585
35,543	4%	1,522	36,661	35,139	Interest Cost	231,145	239,129	7,984	3%	249,694
2,749,341	4%	128,207	3,337,928	3,209,721	Operating Expenses	21,555,989	22,913,888	1,357,899	6%	18,857,401
(96,579)	2165%	(350,173)	(16,175)	(366,348)	Operating Income / (Loss)	(1,583,952)	(1,906,863)	322,912	-17%	(1,727,469)
-3.6%			-0.5%	-12.9%	Operating Margin %	-7.9%	-9.1%			-10.1%
Non Operating Activity										
128,105	7%	10,517	141,132	151,649	Non-Op Revenue	1,047,267	987,925	59,342	6%	925,869
8,758	-24%	(874)	3,566	4,440	Non-Op Expenses	32,158	24,962	(7,197)	-29%	67,033
119,347	7%	9,643	137,566	147,209	Net Non Operating Activity	1,015,109	962,964	52,145	5%	858,836
22,769	-281%	(340,530)	121,391	(219,139)	Net Income / (Loss)	(568,843)	(943,900)	375,057	-40%	(868,633)
0.9%			3.7%	-7.7%	Net Income Margin %	-2.8%	-4.5%			-5.1%

Lewis County Public Hospital District No. 1

Balance Sheet

July, 2022

	<u>Current Month</u>	<u>Prior-Month</u>	<u>Prior-Year end</u>	<u>Incr/(Decr) From PrYr</u>
Assets				
Current Assets:				
Cash	\$ 8,676,347	9,955,312	11,725,277	(3,048,929)
Total Accounts Receivable	7,946,008	8,135,526	6,796,889	1,149,119
Reserve Allowances	<u>(3,651,040)</u>	<u>(3,916,814)</u>	<u>(2,675,536)</u>	<u>(975,504)</u>
Net Patient Accounts Receivable	4,294,968	4,218,712	4,121,353	173,615
Taxes Receivable	13,554	(108,636)	44,337	(30,782)
Estimated 3rd Party Receivables	3,000	59,300	74,277	(71,277)
Prepaid Expenses	177,639	213,187	299,720	(122,081)
Inventory	362,339	363,857	351,873	10,466
Funds in Trust	2,094,554	1,918,327	1,593,539	501,015
Other Current Assets	<u>188,908</u>	<u>193,055</u>	<u>192,811</u>	<u>(3,903)</u>
Total Current Assets	<u>15,811,310</u>	<u>16,813,115</u>	<u>18,403,188</u>	<u>(2,591,878)</u>
Property, Buildings and Equipment	34,938,746	34,864,725	34,687,777	250,970
Less Accumulated Depreciation	<u>(23,954,188)</u>	<u>(23,844,039)</u>	<u>(23,182,426)</u>	<u>(771,762)</u>
Net Property, Plant, & Equipment	10,984,558	11,020,686	11,505,351	(520,793)
Right-of-use assets	647,830	666,532	0	647,830
Other Assets	<u>167,514</u>	<u>167,514</u>	<u>0</u>	<u>167,514</u>
Total Assets	<u>\$ 27,611,213</u>	<u>28,667,847</u>	<u>29,908,539</u>	<u>(2,297,326)</u>
Liabilities				
Current Liabilities:				
Accounts Payable	1,056,366	1,362,259	748,429	307,938
Accrued Payroll and Related Liabilities	1,663,591	1,365,637	1,244,266	419,325
Accrued Vacation	806,360	828,051	784,018	22,342
Third Party Cost Settlement	2,236,699	3,006,109	5,311,870	(3,075,171)
Interest Payable	29,599	(0)	0	29,599
Current Maturities - Debt	1,366,865	1,366,865	1,366,865	0
Unearned Revenue	1,252,684	1,252,684	1,000,000	252,684
Other Payables	<u>10,506</u>	<u>10,506</u>	<u>12,150</u>	<u>(1,644)</u>
Current Liabilities	<u>8,422,670</u>	<u>9,192,110</u>	<u>10,467,598</u>	<u>(2,044,928)</u>
NP - Current portion	(271,695)	(271,695)	(271,695)	0
N/P - Glacier Bank	(2,866)	(2,866)	152,685	(155,551)
N/P - GE Healthcare Finance	1,513,129	1,562,593	1,685,492	(172,363)
Total Notes Payable	1,238,568	1,288,032	1,566,482	(327,915)
Capital Lease	(0)	(0)	(0)	0
Lease Liability	647,830	666,532	0	647,830
Net Bond Payable	5,025,978	5,025,868	5,029,448	(3,471)
Total Long Term Liabilities	<u>6,912,376</u>	<u>6,980,431</u>	<u>6,595,930</u>	<u>316,445</u>
Total Liabilities	<u>15,335,046</u>	<u>16,172,541</u>	<u>17,063,528</u>	<u>(1,728,483)</u>
General Fund Balance	12,845,010	12,845,010	12,845,010	0
Net Gain (Loss)	<u>(568,843)</u>	<u>(349,704)</u>	<u>0</u>	<u>(568,843)</u>
Fund Balance	<u>12,276,167</u>	<u>12,495,306</u>	<u>12,845,010</u>	<u>(568,843)</u>
Total Liabilities And Fund Balance	<u>\$ 27,611,213</u>	<u>28,667,847</u>	<u>29,908,539</u>	<u>(2,297,326)</u>

Arbor Health
Cash Flow Statement
For the Month Ending July 2022

	MTD	YTD
Cash Flows from Operating Activities		
Net Income	(345,507)	(695,211)
Adjustments to reconcile net income to net cash provided by operating activities		
Decrease/(Increase) in Net Patient Accounts receivable	(76,256)	(173,615)
Decrease/(Increase) in Taxes receivable	(122,190)	30,785
Decrease/(Increase) in Est 3rd Party Receivable	56,300	71,277
Decrease/(Increase) in Prepaid expenses	35,548	122,081
Decrease/(Increase) in Inventories	1,518	(10,466)
Decrease in Other Current Assets	4,147	(163,613)
Increase/(Decrease) in Accrued payroll liabilities	276,263	441,667
Increase/(Decrease) in 3rd Party cost stlmt liabilities	(643,042)	(2,948,803)
Increase/(Decrease) in Accounts payable	(305,892)	558,976
Increase/(Decrease) in Interest payable	29,599	29,599
Depreciation expense	110,149	771,762
Net Cash Flow from Operations	(979,363)	(1,965,561)
 Cash Flows from Investing Activities		
Cash paid for		
Purchases of Fixed assets	(74,021)	(250,969)
Right-of-use assets	0	(666,532)
Net Cash Flow from (used) in Investing Activities	(74,021)	(917,501)
 Cash Flows from Financing Activities		
Cash paid for		
Additions to long-term debt	0	0
Principal payments of long-term liabilities	(49,354)	(331,385)
Lease liabilities	0	666,532
Net Cash Flow from (used) in Financing Activities	(49,354)	335,147
 Net Increase (Decrease) in Cash	(1,102,738)	(2,547,915)
Cash at Beginning of Period	\$ 11,873,639	\$ 13,318,816
Cash at End of Period	\$ 10,770,901	\$ 10,770,901

CONSENT AGENDA



**LEWIS COUNTY HOSPITAL DISTRICT NO. 1
REGULAR BOARD OF COMMISSIONERS' MEETING**

July 27, 2022, at 3:30 p.m.

Conference Room 1 & 2 or via ZOOM

<https://myarborhealth.zoom.us/j/87072017180>

Meeting ID: 870 7201 7180

One tap mobile: +12532158782,,87072017180#

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 Roll Call Reading the Mission & Vision Statements	Board Chair Herrin called the meeting to order via Zoom at 3:30 p.m. Commissioners present: <input checked="" type="checkbox"/> Tom Herrin, Board Chair <input checked="" type="checkbox"/> Kim Olive, Secretary <input checked="" type="checkbox"/> Wes McMahan <input checked="" type="checkbox"/> Craig Coppock <input checked="" type="checkbox"/> Laura Richardson Others present: <input checked="" type="checkbox"/> Leianne Everett, Superintendent <input checked="" type="checkbox"/> Shana Garcia, Executive Assistant <input checked="" type="checkbox"/> Sara Williamson, CNO/CQO <input checked="" type="checkbox"/> Julie Allen, Quality Manager <input checked="" type="checkbox"/> Richard Boggess, CFO <input checked="" type="checkbox"/> Spencer Hargett, Compliance Officer <input checked="" type="checkbox"/> Janice Cramer, Medical Coordinator <input checked="" type="checkbox"/> Edwin Meelhuysen, Rehabilitations Services Director <input checked="" type="checkbox"/> Matthew Lindstrom, CFMO			

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
	<ul style="list-style-type: none"> ☒ Diane Markham, Marketing & Communications Manager ☒ Cheryl Cornwell, CFO ☒ Shannon Kelly, CHRO ☒ Kathleen Arnold, Interim Pharmacist ☒ Julie Taylor, Ancillary Services Director ☒ Mark Hansen, MD, Chief of Staff ☒ Buddy Rose, Reporter ☒ Van Anderson, Packwood Resident <p>Board Chair Herrin noted the chat function has been disabled and the meeting will not be recorded.</p>			
Approval or Amendment of Agenda		<p>Commissioner Coppock made a motion to approve the agenda.</p> <p>Commissioner Richardson seconded and the motion passed unanimously.</p>		
Conflicts of Interest	<p>Board Chair Herrin asked the Board to state any conflicts of interest with today's agenda.</p>	<p>None noted.</p>		
Comments and Remarks	<p>Commissioners: All Commissioners thanked CFO Boggess for his service and support. Commissioner Coppock thanked the Staff involved in making the Packwood Clinic a reality. Secretary Olive thanked the Staff involved in the recent softball game, which was a great success.</p> <p>Audience: Superintendent Everett thanked CFO Boggess for his years of service, as well as welcomed new CFO Cheryl Cornwell to Arbor Health.</p> <p>Van Anderson thanked CFO Boggess for his service and Superintendent Everett for a 6-month resignation period to find a replacement. Mr. Anderson</p>			

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
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	<p>thanked the Staff for hanging the sign for the new Packwood Clinic. Van hopes the Board will revisit the at-risk compensation model with the new Superintendent.</p> <p>Marketing & Communications Manager Markham shared that the last week of August is Wellness Week, hoping all Commissioners, as well as the District take advantage of this opportunity. There is more information on the website regarding the <i>Arbor Talks</i>, color run, health expo and more!</p>			
<p>Executive Session- RCW 70.41.200</p>	<p>Executive Session began at 3:44 p.m. for five minutes to discuss RCW 70.41.200. The Board returned to open session at 3:49 p.m.</p> <p>Board Chair Herrin noted no decisions were made in Executive Session.</p> <p>Initial Appointments- Radia Inc.</p> <ol style="list-style-type: none"> 1. Rakhee Goel, MD (Radiology Consulting Privileges) 2. David Gorrell, MD (Radiology Consulting Privileges) 3. Patrick Hurley, MD (Radiology Consulting Privileges) <p>Reappointments- Arbor Health</p> <ol style="list-style-type: none"> 1. Stanford Tran, MD (Emergency Medicine Privileges) <p>Providence Health & Services</p> <ol style="list-style-type: none"> 1. Kyle Ogami, MD (Telestroke/Neurology Consulting Privileges) 	<p>Commissioner Richardson made a motion to approve the Medical Privileging as presented and Secretary Olive seconded. The motion passed unanimously.</p>		

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
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	2. Tarvinder Singh, MD (Telestroke/Neurology Consulting Privileges)			
Department Spotlight <ul style="list-style-type: none"> Rehabilitation Services 	Rehabilitation Services Director Meelhuysen highlighted that his team continues to navigate COVID, as well as keep the top-rated engaged department. He shared the improvement on service trends, steady expenses, as well as the revenue generated by the various services offered in rehab services. Retaining and attracting staff will continue to be a challenge; however, competitive salaries has strengthened this area. Excited for new opportunities with the schools, senior fitness, and the new Packwood Clinic.			
Board Committee Reports <ul style="list-style-type: none"> Hospital Foundation Report 	Commissioner Richardson shared the Mossyrock Independence Day 5K & 8K was a huge success with 160 participants. The Arbor Health (AH) Foundation Scholarship Committee is seeking legal council on the guidelines for scholarships, as an important component in incentivizing employees to remain employed with the District. The AH Foundation color run is August 27, 2022, and volunteers are needed. The Dinner Auction is set for this Fall with a theme of “Queen of Hearts” and volunteers are needed.			
<ul style="list-style-type: none"> Finance Committee Report 	Commissioner McMahan highlighted AR was strong this month, great work Revenue Cycle Department! There are four resolutions in consent agenda, which includes a superseding resolution for the Capital Purchase of the Stretchers, all of which the Finance Committee supports approving. CFO Boggess noted one of the many benefits of being a part of The Rural Collaborative is searching for insurance coverage together with Parker, Smith & Feek. The District is experiencing an			

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
	increase this year, and we will not be issued a rebate either. Also, he shared forecasting for 2022, the budget with current amendments, as well as budget assumptions for 2023. The departments are starting to review 2023 budgets, so Finance Committee will be receiving frequent updates.			
Consent Agenda	<p>Board Chair Herrin announced the consent agenda items for consideration of approval:</p> <ol style="list-style-type: none"> 1. Approval of Minutes <ol style="list-style-type: none"> a. June 29, 2022, Regular Board Meeting b. July 18, 2022, Special Board Meeting c. July 20, 2022, Finance Committee Meeting 2. Warrants & EFTs in the amount of \$2,935,193.39 dated June 2022 3. Resolution 22-24- Approving the Capital Purchase of the Stretchers 4. Resolution 22-25- Approving the Budget Amendment- Malpractice/General Liability Insurance 5. Resolution 22-26- Approving the Medicare 2017 Cost Report Settlement Payment 6. Resolution 22-27-Declaring to Surplus or Dispose of Certain Property 7. Approve Documents Pending Board Approval & Ratification 07.27.22 	<p>Commissioner Coppock made a motion to approve the Consent Agenda and Commissioner Richardson seconded. The motion passed unanimously.</p> <p>Minutes, Warrants and Resolutions will be sent for electronic signatures.</p>	Executive Assistant Garcia	07.01.22
Old Business <ul style="list-style-type: none"> • Superintendent Succession Plan 	Board Chair Herrin shared the search committee has been established and will be meeting the first week of August. Board Chair Herrin noted while using the plan, it has been identified that the file type needs to be changed from policy to plan in Lucidoc. Also, Human	Change the file type of the Superintendent Succession Plan from policy to plan.	Executive Assistant Garcia	07.29.22

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
	<p>Resources needs to be included early in the process given their involvement in the process. CHRO Kelly stated the committee will review three recruitment firms and then select the firm who will conduct the national search. The search committee's role will be to recommend qualified candidates to the Board to interview.</p>			
<p>New Business</p> <ul style="list-style-type: none"> Board Policy & Procedure Review 	<p>Board E-mail Communication- Approved.</p> <p>Board Meeting Teleconference- Approved.</p> <p>Board Mobile Device Management- Approved.</p>	<p>Marked three documents as Reviewed in Lucidoc.</p>	<p>Executive Assistant Garcia</p>	<p>07.29.22</p>
<p>Superintendent Report</p>	<p>Superintendent Everett highlighted the following:</p> <ol style="list-style-type: none"> Q2 Department Strategic Measures to date are 72% on pace to accomplish this year while others are not likely to make their goal. The department leaders have learned to better define measures. The departments in the red are working on corrective action plans to address the barriers. The first year's experiences have grown this program and gave more depth. Department leaders will be encouraged to attend the Strategic Planning Retreat to hear the new Plan to know how to reprioritize strategies. The Special Board Meeting for the Strategic Planning Retreat is scheduled for December 5, 2022. Administration engaged Via Healthcare Consulting, Inc. The location will need to be offsite to have a large enough facility to have in-person participation. The goal is to have the new 	<p>Schedule Special Board Meeting</p>	<p>Executive Assistant Garcia</p>	<p>07.29.22</p>

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
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	<p>Superintendent candidate participate in the shaping of the new strategic plan versus inheriting the plan.</p> <p>3. The Board has 30-minute Q & A windows before committee meetings. The Board agreed to discontinue the Q & A for all committees except Finance Committee.</p>	<p>Add 30-minute Q & A for Finance Committee for the months July-December 2022.</p>	<p>Executive Assistant Garcia</p>	<p>07.29.22</p>
Meeting Summary & Evaluation	<p>Superintendent Everett highlighted the decisions made and action items.</p> <p>The Commissioners agreed the meeting went well, very informative and looking towards the future.</p>			
Adjournment	<p>Commissioner Coppock moved and Secretary Olive seconded to adjourn the meeting at 4:53 p.m. The motion passed unanimously.</p>			

Respectfully submitted,

Kim Olive, Secretary

Date



**LEWIS COUNTY HOSPITAL DISTRICT NO. 1
Compliance Committee Meeting
August 10, 2022, 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 Roll Call Reading the Mission & Vision Statements	Commissioner McMahan called the meeting to order via Zoom at 12:00 p.m. Commissioner(s) Present in Person or via Zoom: <input checked="" type="checkbox"/> Laura Richardson, Commissioner <input checked="" type="checkbox"/> Wes McMahan, Commissioner Committee Member(s) Present in Person or via Zoom: <input checked="" type="checkbox"/> Shana Garcia, Executive Assistant <input type="checkbox"/> Cheryl Cornwell, CFO <input type="checkbox"/> Leianne Everett, Superintendent <input checked="" type="checkbox"/> Shannon Kelly, CHRO <input checked="" type="checkbox"/> Sherry Sofich, Revenue Cycle Director <input checked="" type="checkbox"/> Sara Williamson, CNO/CQO <input checked="" type="checkbox"/> Julie Allen, Quality Manager <input checked="" type="checkbox"/> Spencer Hargett, Compliance Officer <input type="checkbox"/> Matthew Lindstrom, Facilities Director <input checked="" type="checkbox"/> Jim Frey, IT Director <input type="checkbox"/> Julie Taylor, Ancillary Services Director			
Approval or Amendment of Agenda	No amendments noted.	CNO/CQO Williamson made a motion to approve the		

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
		agenda and CHRO Kelly seconded. The motion passed unanimously.		
Conflicts of Interest	Commissioner McMahan asked the Committee to state any conflicts of interest with today's agenda.	None noted.		
Consent Agenda	<p>Commissioner McMahan announced the following in consent agenda up for approval:</p> <ol style="list-style-type: none"> 1. Review of Compliance Minutes –May 11, 2022 2. Review of Compliance Workgroup Minutes –June 30, 2022 3. Review of Compliance Workgroup Minutes –July 28, 2022 4. Compliance Program Update 5. Annual Action Schedule 	<p>Commissioner McMahan noted an edit on the July 28, 2022, Workgroup Minutes to update the date from June 30th to July 28th.</p> <p>IT Director Frey made a motion to approve the consent agenda with proposed edits and Commissioner Richardson seconded. The motion passed unanimously.</p>	Compliance Officer Hargett	Prior to the September 29, 2022, Compliance Workgroup Meeting
Committee Reports	Compliance Officer Hargett highlighted the workgroup minutes and the areas of focus.			
<p>Old Business</p> <ul style="list-style-type: none"> • RA#1- Inpatient/OB S Status Errors 	<p>CNO/CQO Williamson noted:</p> <ol style="list-style-type: none"> 1. Last year was a challenge, so correct patient statuses remain a focus this year. Patient Access has joined the Interdisciplinary Team to ensure patients are in the right status. A gap continues to exist in the Case Management position; however, nursing has pitched in. Overall, the Hospital has experienced a significant improvement from Q1 to Q2. 			
<ul style="list-style-type: none"> • RA#2-Write-offs due to no ABN 	<p>Compliance Officer Hargett noted:</p> <ol style="list-style-type: none"> 1. The number of write-offs due to no ABN continues to be a concern. A workflow is being developed, as this is complex as it impacts multiple departments. Anticipating small 			

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
	improvements for the Hospital by Q4. There will be a financial impact to patients.			
<ul style="list-style-type: none"> RA#3- COVID Effects on Staffing, Burnout, etc. 	CHRO Kelly noted: <ol style="list-style-type: none"> There is continued focus on Workplace Violence. A workgroup is being formed to provide support and services to staff during burnout. The workgroup is looking to join the WSHA CARE initiative. 			
<ul style="list-style-type: none"> RA#5- Security Risk Assessment Action Items 	IT Director Frey noted: <ol style="list-style-type: none"> The IT Business Continuity and Disaster Recovery Plan is being presented to leadership to receive feedback on decision points. Movement continues for policies and procedures that remain required by the Hospital. 			
<ul style="list-style-type: none"> Records Retention 	Compliance Officer Hargett noted: <ol style="list-style-type: none"> Reviewed the existing program to ensure compliance with schedule. On July 26th eligible paper records were sent to the WA State Archives and Exhibit 1 is a summary of the records. An annual review of the District's record management system has been added to the Compliance Action Schedule. 			
<ul style="list-style-type: none"> Public Records Act 	Executive Assistant Garcia noted: <ol style="list-style-type: none"> A Public Records Policy has been reviewed by legal to ensure we are meeting all requirements of the Public Records Act. There will be two resolutions coming forward regarding topics related to the fee schedule and indexing. 			
New Business	Executive Assistant Garcia noted: <ol style="list-style-type: none"> There were updates to the OPMA as of June 9th 	Discuss recording board meetings.	Executive Assistant Garcia &	08.31.22 Regular Board Meeting

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
<ul style="list-style-type: none"> Open Public Meetings Act (OPMA) 	<p>which included encouraging video recording of meetings. There will be an operational impact to manage these new types of records if the Board remains interested.</p>		Superintendent Everett	
<ul style="list-style-type: none"> Redistricting 	<p>Executive Assistant Garcia noted:</p> <ol style="list-style-type: none"> The District needs to complete redistricting prior to November 15, 2022. Information has been provided on census and if the lines stay “as is” they are nearly equal in population as possible to each other. A Special Board Meeting needs to be scheduled and the Committee recommends holding the Public Hearing on September 21st. The draft redistricting map will be posted within ten days prior to the meeting, so by September 11th. The Plan will be adopted one week later, September 28th. The Committee selected and supported moving forward with the dates proposed. 	<p>Schedule Special Board Meeting- Public Hearing with Public Comment in September.</p>	Executive Assistant Garcia & Board Chair Herrin	08.31.22 Regular Board Meeting
<ul style="list-style-type: none"> Q2 Audit & Monitoring- Vaccines for Children Program 	<p>Revenue Cycle Director Sofich noted:</p> <ol style="list-style-type: none"> The Washington Vaccine for Children’s is free vaccines for children 19 years and younger. The billing team submits the claim for the administration of the vaccine, but not the serum. The team has been working on this project and have rebilled 310 claims. 			
<ul style="list-style-type: none"> Q2 Compliance Work Plan Update 	<p>Compliance Officer Hargett presented the Quarter 2 updates. Many items were addressed today and are stable with no emerging risks.</p>			

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
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Meeting Summary & Evaluation	Compliance Officer Hargett provided a summary report.			
Adjournment	Commissioner McMahan adjourned the meeting at 1:02 p.m.			



**LEWIS COUNTY HOSPITAL DISTRICT NO. 1
SPECIAL BOARD OF COMMISSIONERS' MEETING**

August 17, 2022 at 6:00 p.m.

Conference Room 1 & 2 or Zoom

<https://myarborhealth.zoom.us/j/83974223549>

Meeting ID: 839 7422 3549

One tap mobile: +12532158782,,83974223549#

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 Roll Call Reading the Mission & Vision Statements	Board Chair Herrin called the meeting via Zoom to order at 6:00 p.m. Commissioners present: <input checked="" type="checkbox"/> Tom Herrin, Board Chair <input checked="" type="checkbox"/> Kim Olive, Secretary <input checked="" type="checkbox"/> Laura Richardson <input checked="" type="checkbox"/> Wes McMahan <input checked="" type="checkbox"/> Craig Coppock Others present: <input type="checkbox"/> Leianne Everett, Superintendent <input checked="" type="checkbox"/> Shana Garcia, Executive Assistant <input checked="" type="checkbox"/> Michael Brunet, Principal, Foster Garvey			
Conflicts of Interest	Board Chair Herrin asked the Board to state any conflicts of interest with today's agenda.	None noted.		
Reading of the Notice of the Special Meeting	Board Chair Herrin read the special board meeting notice.			
Public Comment	Commissioners: None. Public: None.			
Executive Session- RCW 42.30.110 (g)	Executive Session began at 6:05 p.m. for twenty minutes to review			

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
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<ul style="list-style-type: none"> To review the performance of a public employee. 	<p>RCW 42.30.110 (g). At 6:25 p.m. Board Chair Herrin extended Executive Session by 15 minutes. At 6:40 p.m. Board Chair Herrin extended Executive Session by 15 minutes.</p> <p>The Board returned to open session at 6:55 p.m.</p> <p>Board Chair Herrin noted no decisions were made in Executive Session.</p>			
Adjournment	<p>Secretary Olive moved and Commissioner Richardson seconded to adjourned at 6:57 p.m. The motion passed unanimously.</p>			

Respectfully submitted,

Kim Olive, Secretary

Date



**LEWIS COUNTY HOSPITAL DISTRICT NO. 1
Finance Committee Meeting
August 24, 2022, 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 Roll Call Reading the Mission & Vision Statements	Commissioner McMahan called the meeting to order via Zoom at 1:02 p.m. Commissioner(s) Present in Person or via Zoom: <input checked="" type="checkbox"/> Wes McMahan, Commissioner <input checked="" type="checkbox"/> Kim Olive, Secretary Committee Member(s) Present in Person or via Zoom: <input checked="" type="checkbox"/> Shana Garcia, Executive Assistant <input checked="" type="checkbox"/> Cheryl Cornwell, CFO <input checked="" type="checkbox"/> Leianne Everett, Superintendent <input type="checkbox"/> Marc Fisher, Community Member <input checked="" type="checkbox"/> Clint Scogin, Controller <input checked="" type="checkbox"/> Sherry Sofich, Revenue Cycle Director <input checked="" type="checkbox"/> Sara Williamson, CNO/CQO <input type="checkbox"/> Julie Taylor, Ancillary Services Director <input checked="" type="checkbox"/> Char Hancock, Clinic Manager <input checked="" type="checkbox"/> Matthew Lindstrom, CFMO			
Approval or Amendment of Agenda	CFO Cornwell requested to add District Auditors as an agenda topic is New Business.	CFO Cornwell made a motion to approve the amended agenda and Secretary Olive seconded. The motion passed unanimously.		

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
Conflicts of Interest	Commissioner McMahan asked the Committee to state any conflicts of interest with today's amended agenda.	None noted.		
Consent Agenda	<p>Commissioner McMahan announced the following in consent agenda up for approval:</p> <ol style="list-style-type: none"> 1. Review of Finance Minutes –July 20, 2022 2. Revenue Cycle Update 3. Board Oversight Activities 4. Financial Statements-July 	Secretary Olive made a motion to approve the consent agenda and Superintendent Everett seconded. The motion passed unanimously.		
<p>Old Business</p> <ul style="list-style-type: none"> • Financial Department Spotlight • Orthopedics 	<p>Clinic Manager Hancock noted the Orthopedic program just celebrated a year in July with Dr. Williams. Referrals may vary depending on the referring providers, as well as number of surgeries due to equipment requirements, BMI, or Operating Room staffing and availability. Strengths include the patients like the local service. Challenges include access and if greater than 10-day patients are requesting to be referred to WA Orthopedics. Opportunities include exploring telehealth follow ups and continuing to build trust with internal providers to increase referrals. Superintendent Everett noted increasing access is challenging given the current travel struggles, as well as we need to remember this continues to be a learning experience and we are still in the infancy stage of building this program.</p>			
<ul style="list-style-type: none"> • Capital Review 	<p>CFO Cornwell noted two capital purchases this month: 1) MOB HVAC and 2) O2 Mini Bulk Tank.</p> <p>CFMO Lindstrom shared we are planning to adjust the capital plan for 2022 to meet the more immediate needs of the District which means replacing the fire panel in 2023 versus 2022. The panel is functioning.</p> <p>CFMO Lindstrom noted the District is proposing to replace two of the</p>	The Finance Committee supported requesting the Board's approval of a resolution for the MOB HVAC and O2 Mini Bulk Tank at the Regular Board Meeting.	Executive Assistant Garcia	08.31.22 Regular Board Meeting

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
	<p>three Daiken VRF units in the MOB HVAC, as well as building a new system using a bulk tank for O2.</p> <p>The Finance Committee supports the capital purchases of the MOB HVAC (2 units) and O2 Mini Bulk Tank and will recommend approval at the Board level in Consent Agenda.</p>			
<ul style="list-style-type: none"> Cost Report 	<p>CFO Cornwell noted the District received Medicare Advance Payments that stem from the COVID-19 pandemic. Noridian is currently withholding 25% and will be bumping up to 50%. Expecting this payment amount to be fulfilled at the end of six months.</p>			
<p>New Business</p> <ul style="list-style-type: none"> 2023 Budget 	<p>CFO Cornwell noted the budget process is in the early stages. Meetings have been set with each department that manages a budget. Great time to meet managers, learn the goals of the department and work with Multiview and Cerner. The budget will evolve during this process and an updated version will be presented to leadership and the Finance Committee in September. Invites have already been sent to the Board to keep the District on target to meet deadlines.</p>			
<ul style="list-style-type: none"> Surplus or Dispose of Certain Property 	<p>CFO Cornwell presented the list of assets for surplus.</p> <p>The Finance Committee supports the resolution and will recommend approval at the Board level in Consent Agenda.</p>	<p>The Finance Committee supported requesting the Board's approval of a resolution of the Surplus at the Regular Board Meeting.</p>	<p>Executive Assistant Garcia</p>	<p>08.31.22 Regular Board Meeting</p>
<ul style="list-style-type: none"> Lucidoc 	<p>CFO Cornwell presented a new policy called Provider Relief Funds Reporting & Tracking. This is required by the Health Resources and Services Administration (HRSA).</p>	<p>Secretary Olive made a motion to approve the policy and Superintendent Everett seconded. The motion passed unanimously.</p>		
<ul style="list-style-type: none"> District Auditors 	<p>CFO Cornwell noted as the new Chief Financial Officer the District needs to remove CFO Boggess and add her as a District Auditor per RCW 70.44.171. The Board will</p>	<p>The Finance Committee supported requesting the Board's approval of a resolution for</p>	<p>Executive Assistant Garcia</p>	<p>08.31.22 Regular Board Meeting</p>

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
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	<p>need to make this appointment via resolution.</p> <p>The Finance Committee supports the appointment resolution and will recommend approval at the Board level in Consent Agenda.</p>	<p>appointing a new auditor at the Regular Board Meeting.</p>		
Meeting Summary & Evaluation	<p>CFO Cornwell highlighted the decisions made and the action items that need to be taken to the entire board for approval.</p>			
Adjournment	<p>Commissioner McMahan adjourned the meeting at 12:48 pm.</p>			

WARRANT & EFT LISTING NO. 2022-07

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:

Cheryl Cornwell, 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

\$3,889,876.15 this 31st day

of August 2022

Board Chair, Tom Herrin

Secretary, Kim Olive

Commissioner, Wes McMahan

Commissioner, Craig Coppock

Commissioner, Laura Richardson

SEE WARRANT & EFT REGISTER in the amount of \$3,889,876.15 dated July 1, 2022 – July 31, 2022.

Routine A/P Runs

Warrant No.	Date	Amount	Description
126379 - 126413	1-Jul-2022	146,020.51	CHECK RUN
126414 - 126430	5-Jul-2022	790,456.76	CHECK RUN
126431	1-Jul-2022	269,764.00	CHECK RUN
126432 - 126447	11-Jul-2022	182,414.64	CHECK RUN
126448 - 126478	8-Jul-2022	49,724.94	CHECK RUN
126479 - 126557	15-Jul-2022	291,652.37	CHECK RUN
126558 - 126587	18-Jul-2022	887,558.20	CHECK RUN
126588	5-Jul-2022	140.89	CHECK RUN
126589	12-Jul-2022	140.48	CHECK RUN
126590	19-Jul-2022	21.02	CHECK RUN
126591 - 156611	22-Jul-2022	229,370.34	CHECK RUN
156612 - 126682	22-Jul-2022	311,883.36	CHECK RUN
126683	5-Jul-2022	43.90	CHECK RUN
126684	11-Jul-2022	1,000.00	CHECK RUN
126685	18-Jul-2022	3,706.31	CHECK RUN
126686 - 126687	25-Jul-2022	21,078.13	CHECK RUN
126688	26-Jul-2022	201.18	CHECK RUN
126709 - 126766	29-Jul-2022	375,048.48	CHECK RUN
124514	29-Jul-2022	130.05	CHECK RUN
Total - Check Runs		\$ 3,560,355.56	

Error Corrections - in Check Register Order

Warrant No.	DATE VOIDED	Amount	Description
126246	25-Jul-2022	(4,960.00)	VOID CHECK
TOTAL - VOIDED CHECKS		\$ (4,960.00)	

COLUMBIA BANK CHECKS, EFT'S & VOIDS	\$ 3,555,395.56
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Eft	Date	Amount	Description
4692	5-Jul-2022	260.00	TPSC
1175	8-Jul-2022	154,427.35	IRS
4693	11-Jul-2022	10.00	TPSC
4694	18-Jul-2022	1,105.93	TPSC
1176	22-Jul-2022	178,465.65	IRS
4695	22-Jul-2022	99.00	TPSC
4696	26-Jul-2022	112.66	TPSC
TOTAL EFTS AT SECURITY STATE BANK		\$ 334,480.59	

TOTAL CHECKS, EFT'S, & TRANSFERS	\$ 3,889,876.15
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LEWIS COUNTY HOSPITAL DISTRICT NO. 1
MORTON, WASHINGTON

RESOLUTION APPROVING THE
CAPITAL PURCHASE OF THE MOB HVAC

RESOLUTION NO. 22-28

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:

Approving the purchase of MOB HVAC (2 Daiken VRF units) from operating cash.

The purchase price is \$99,760 plus tax and a 10% contingency.

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 31st day of August 2022, the following commissioners being present and voting in favor of this resolution.

Tom Herrin, Board Chair

Kim Olive, Secretary

Wes McMahan, Commissioner

Craig Coppock, Commissioner

Laura Richardson, Commissioner

SECTION 1 - DEPARTMENT INFORMATION / ITEM REQUESTED

Department Name Facilities Department# _____

Manager Matthew Lindstrom Phone # 360-496-3699

General Description of Item Replace two of the Daiken VRF units on the MOB roof that are no longer functioning and no longer can be repaired.

Reason For Purchase New Replacement End of Life Quality of Care Patient Satisfaction
 (Choose all that apply) Increase Volume Other _____

Expected Life of New Equipment in Years 15 Years

Notes about reason for request, effect on department's operations, effect on other departments, and impact of purchase on revenues or volumes :

Two of the three units on the building have failed. Due to the history of issues, and concerns extra care was put into engineering and research on this project. The units were smaller than originally called out for, 18 ton installed instead of 20. Due to the size difference and history these units will have a factory start up to ensure it is done appropriately and the units will come with a ten year warranty on compressors. This is affecting the PT gym area where patients are seen and the entire second floor of our MOB which is space that office personnel can't work in right now due to the temperatures.

Do We Have Any Similar Equipment In The Organization / Which Department? Yes No

Can This Equipment Be Utilized By Other Departments? Yes No

Were (3) Competitive Quotes Obtained? (Please Attach) Yes No - Detail below

There are limited providers of this equipment in the immediate area. We called many contractors from Portland up to Seattle, and over to Yakima. Companies won't work on this unit, or the scope is too large for the ones that did respond to work on.

Suggested Vendor Olympia Sheet Metal PREFERRED MODEL # _____

Name/Contact Of Vendor Kevin Ashby

Estimated Price \$ \$99,760.00

Source Of Estimated Price Quote (attach) Other (Explain) _____

SECTION 2 – DEPARTMENT AND TECHNOLOGY IMPACT

Will this purchase interface with our computer system? Yes - Detail below No Unsure

Facilities Involvement	<input checked="" type="checkbox"/> Yes - Detail below	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Biomed Involvement	<input type="checkbox"/> Yes - Detail below	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Clinical Informatics Involvement	<input type="checkbox"/> Yes - Detail below	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Infection Control	<input type="checkbox"/> Yes - Detail below	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
IT Involvement	<input type="checkbox"/> Yes - Detail below	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Material Management	<input type="checkbox"/> Yes - Detail below	<input type="checkbox"/> No	<input type="checkbox"/> Unsure

Explain and/or quantify any known involvement or expenses in these areas.

Facilities to handle logistics, shut downs, communication on impact.

SECTION 3 - EQUIPMENT ASSESSMENT TEAM EVALUATION SUMMARY

Assessment Team Members:

Date of Meeting:

PROS	
CONS	
CONSIDERATIONS	
RECOMMENDATIONS	
WARRANTY INFORMATION	
ADDITIONAL ACQUISITION/ PREP COST \$	_____
ADDITIONAL PREP/ TRAINING HOURS	_____
COMMENTS	

Base Equipment Price - As Provided	_____		
Support And Maintenance Costs	_____		
Additional Cost of Installation Support	\$ -	Total Monthly Consumables Cost	_____
Total Additional Associated Cost	\$ -		
Shipping, Delivery and Installation	\$ -		\$ -
Sales Tax	\$ -	Depreciation	0
TOTAL NON- RECURRING EXPENSE	\$ -		
TOTAL RECURRING EXPENSE			\$ -

***** FOR FINANCE DEPARTMENT USE ONLY *****

HOW ARE WE PAYING FOR THIS? _____

IS THIS BUDGETED Yes No

BUDGETED PURCHASE DATE _____

TYPE OF EQUIPMENT

Building Improvement Fixed Equipment Building Capital Lease

Major Moveable Equipment Other - Explain _____

***** APPROVALS *****

Chief Financial Officer _____ Date _____

Chief Executive Officer _____ Date _____

Board of Commissioner Chairperson _____ Date _____

if > than \$30,000



LEWIS COUNTY HOSPITAL DISTRICT NO. 1
MORTON, WASHINGTON

RESOLUTION APPROVING THE
CAPITAL PURCHASE OF THE
O2 MINI BULK TANK

RESOLUTION NO. 22-29

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:

Approving the purchase of O2 Mini Bulk Tank project from operating cash.

The purchase price is \$177,275 plus tax and a 10% contingency.

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 31st day of August 2022, the following commissioners being present and
voting in favor of this resolution.

Tom Herrin, Board Chair

Kim Olive, Secretary

Wes McMahan, Commissioner

Craig Coppock, Commissioner

Laura Richardson, Commissioner

SECTION 1 - DEPARTMENT INFORMATION / ITEM REQUESTED

Department Name Facilities Department# _____
 Manager Matthew Lindstrom Phone # 3604963699
 General Description of Item O2 Mini Bulk Tank project. Build separation wall, pad, spill pad, and install bulk O2 tank to get hospital off the O2 manifold system.

Reason For Purchase New Replacement End of Life Quality of Care Patient Satisfaction
 (Choose all that apply) Increase Volume Other _____
 Expected Life of New Equipment in Years _____ Years

Notes about reason for request, effect on department's operations, effect on other departments, and impact of purchase on revenues or volumes :
 A new system using a bulk tank would allow us to stop using the current manifold system of smaller tanks that have to be changed out frequently. During peak covid usage tanks were getting swapped out a couple times a day, and in 2021 we had an incident where we came very close to not having any supply for patients. A bulk system will allow us to hold a larger quantity, have the engineers spend more of their time on other tasks, and the bulk O2 tank also has a back up redundant system for emergencies.

Do We Have Any Similar Equipment In The Organization / Which Department? Yes No
 Can This Equipment Be Utilized By Other Departments? Yes No

Were (3) Competitive Quotes Obtained? (Please Attach) Yes No - Detail below
 There are limited contractors of this equipment in the immediate area. Airgas is a known vendor in Lewis County. This contractor works with airgas on installations across hospitals.

Suggested Vendor James Quinn Co. PREFERRED MODEL # _____
 Name/Contact Of Vendor Aaron Lothrop
 Estimated Price \$ 177,275.00 plus tax
 Source Of Estimated Price Quote (attach) Other (Explain) _____

SECTION 2 – DEPARTMENT AND TECHNOLOGY IMPACT

Will this purchase interface with our computer system? Yes - Detail below No Unsure

Facilities Involvement Yes - Detail below No Unsure
 Biomed Involvement Yes - Detail below No Unsure
 Clinical Informatics Involvement Yes - Detail below No Unsure
 Infection Control Yes - Detail below No Unsure
 IT Involvement Yes - Detail below No Unsure
 Material Management Yes - Detail below No Unsure

Explain and/or quantify any known involvement or expenses in these areas.
 Facilities to handle logistics of project, communication around impacted areas, and plans for shut downs.

SECTION 3 - EQUIPMENT ASSESSMENT TEAM EVALUATION SUMMARY

Assessment Team Members:

Date of Meeting:

PROS	
CONS	
CONSIDERATIONS	
RECOMMENDATIONS	
WARRANTY INFORMATION	
ADDITIONAL ACQUISITION/ PREP COST \$	
ADDITIONAL PREP/ TRAINING HOURS	
COMMENTS	\$1,279 monthly facility fee through air gas to lease equipment for 7 years. \$90.00 delivery charge, \$50 hazmat charge per delivery, and telemetry fee of \$50 per month per vessel.

Base Equipment Price - As Provided			
Support And Maintenance Costs			
Additional Cost of Installation Support	\$ -	Total Monthly Consumables Cost	
Total Additional Associated Cost	\$ -		
Shipping, Delivery and Installation	\$ -		\$ -
Sales Tax	\$ -	Depreciation	#DIV/0!
TOTAL NON- RECURRING EXPENSE	\$ -		
TOTAL RECURRING EXPENSE			\$ -

***** FOR FINANCE DEPARTMENT USE ONLY *****

HOW ARE WE PAYING FOR THIS? _____

IS THIS BUDGETED Yes No

BUDGETED PURCHASE DATE _____

TYPE OF EQUIPMENT

Building Improvement Fixed Equipment Building Capital Lease

Major Moveable Equipment Other - Explain _____

***** APPROVALS *****

Chief Financial Officer _____ Date _____

Chief Executive Officer _____ Date _____

Board of Commissioner Chairperson _____ Date _____

if > than \$30,000



LEWIS COUNTY HOSPITAL DISTRICT NO. 1
MORTON, WASHINGTON

RESOLUTION DECLARING TO
SURPLUS OR DISPOSE OF CERTAIN
PROPERTY

RESOLUTION NO. 22-27

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 31st day of August 2022, the following commissioners being present and voting in favor of this resolution.

Tom Herrin, Board Chair

Kim Olive, Secretary

Wes McMahan, Commissioner

Craig Coppock, Commissioner

Laura Richardson, Commissioner

DISPOSAL/SURPLUS PERSONAL PROPERTY

EXHIBIT A

DATE	DESCRIPTION	DEPARTMENT	PROPERTY #	DISPOSITION	REASON
08/04/2022	Window AC Unit	Maintenance	000455	Surplus	Beyond repair
08/04/2022	Whirlpool Refrigerator	Maintenance	5905	Surplus	Bad compressor, not cost effective to repair
08/04/2022	Cardio Diagnostic	Morton Medical Clinic	No property tag	Surplus	Machine is no longer used. Old and obsolete



LEWIS COUNTY HOSPITAL DISTRICT NO. 1
MORTON, WASHINGTON

RESOLUTION APPOINTING REPLACEMENT
AUDITOR OF LEWIS COUNTY
HOSPITAL DISTRICT NO. 1

RESOLUTION NO. 22-31

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:

Cheryl Cornwell, Chief Financial Officer, replacing former CFO Boggess, Morton, Washington is hereby appointed as additional Auditor of Lewis County Hospital District No. 1, to hold this office until further action of the Commission.

Leianne Everett, Superintendent (RES 21-26) and Clint Scogin, Controller (RES 18-16) remain Auditors of the District. RCW 70.44.171

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 31st day of August 2022, the following commissioners being present and voting in favor of this resolution.

Tom Herrin, Board Chair

Kim Olive, Secretary

Wes McMahan, Commissioner

Craig Coppock, Commissioner

Laura Richardson, Commissioner

Documents Awaiting Board Ratification 08.31.22

	LCHD No. 1's Policies, Procedures & Plans:	Departments:
1	Air Medical Transport Guidelines	Emergency Services
2	Annual Adoption of the Compliance Pla	Governing Body
3	Annual Adoption of the Quality Program	Governing Body
4	Antibody Detection by Gel Card Test M	Blood Bank
5	Antibody Screen - Tube Method	Blood Bank
6	Arterial Puncture for Blood Gas Analysis	Respiratory Care Services
7	Blood Bank - Discarded/Wasted Blood	Blood Bank
8	Blood Bank - Serologic Centrifuge - Fun	Blood Bank
9	CPAP PSG montage	Sleep Center
10	CSF Cell Counts	Hematology
11	Cardiac Emergencies	Sleep Center
12	Care and Condition of Patient in OR	Surgery
13	Casual Part-time Employees	Human Resources
14	Circulating Nurse Responsibilities	Surgery
15	Combining Duplicate Encounters	Health Information Management
16	Conflict of Interest	Compliance
17	Credit Card Use	Finance
18	Digital Specifications for Routine PSG R	Sleep Center
19	Direct Antiglobulin Test by Gel Card Tes	Blood Bank
20	EDTA-Dependent Pseudothrombocytog	Hematology
21	EMERGENCY DEPARTMENT INFORMAT	Emergency Services
22	EPIDURAL ANALGESIA	Anesthesia Services
23	Early Termination of Sleep Study	Sleep Center
24	Emergency Surgery While On E.R. Duty	Surgery
25	Emergency Uncrossmatched Blood	Blood Bank
26	Emergency-Psychiatric Response	Sleep Center
27	Employee Personal Property	Human Resources
28	Employee Problem Resolution & Comp	Human Resources
29	Employment Of Relatives	Human Resources
30	Event Log	Sleep Center
31	Fecal Leukocytes	Hematology
32	Fecal Occult Blood Test	Serology
33	Fluid & Blanket Warmer Management	Nursing Department
34	Fresh Frozen Plasma (FFP)	Blood Bank
35	Gastric Occult Blood And pH POC Testir	Nursing Department
36	Glucose Tolerance Test	Chemistry
37	Gram Stain	Microbiology
38	HSAT Staff Training	Sleep Center
39	Hematology Manual WBC Differentials	Hematology
40	Hyperkalemia Protocol	Pharmacy
41	Interpreter Access	Patient Access

42	Ketone (Acetone) Test	Chemistry
43	Laboratory Incident Management	Lab General Policies/Procedures
44	Lost & Found	Patient Access
45	Medicare Credit Balance Report	Business Office
46	N95 FIT Testing and CAPR Training	Employee Health & Wellness
47	Naloxone Policy	Pharmacy
48	Name Badges	Human Resources
49	Nondiscrimination	DOH Policies & Procedures
50	PACU CRITERIA FOR NOTIFYING ANESTHESIA SERVICES	Anesthesia Services
51	Pain Management	Medical Staff
52	Payday	Human Resources
53	Poison Control Information	Emergency Services
54	Printing Medical Records	Health Information Management
55	Profile-V MedTox Reader	Chemistry
56	Provider Relief Funds Reporting & Tracking	Finance
57	Quality Control for Blood Bank	Blood Bank
58	Quality Control for Blood Bank Refrigeration	Blood Bank
59	Quality Improvement Oversight Information	Governing Body
60	RH TESTING FOR D - TUBE METHOD	Blood Bank
61	Refunds	Business Office
62	Registering Deceased Persons Upon Arrival	Patient Access
63	Retention of Medical Records	Health Information Management
64	Safe Place for Newborns/Abandonment	Emergency Services
65	Scanning Documents to Patient's Chart	Health Information Management
66	Screening, Brief Intervention & Referral	Emergency Services
67	Sedimentation Rate (ESR)	Hematology
68	Sign out protocol for blood components	Blood Bank
69	Sleep Center Clinical Administrator	Sleep Center
70	Sleep Center Medical Director	Sleep Center
71	Social Networking Policy	Human Resources
72	Sorall Cellwasher: Operation and Quality Control	Blood Bank
73	Specimen Rejection : Guidelines	Lab General Policies/Procedures
74	Sperm Count - Post Vasectomy	Hematology
75	Sports Physicals	Clinics
76	Standards of Patient Care-Sleep Lab	Sleep Center
77	Storage of Blood Components - Loss of Inventory	Blood Bank
78	Strep A Test	Serology
79	Subpoena of Patient Records	Health Information Management
80	Surgical Instrument Count	Surgery
81	Suspected Drug - Seeking Behavior	Emergency Services
82	Telecommuting	Human Resources
83	Temperature and Humidity Monitoring	Lab General Policies/Procedures
84	Termination of Patient Care	Compliance
85	Timer Verification	QC/QA

86	Transfusion-Associated Infections-Repd	Blood Bank
87	Trespass Policy and Procedure	Compliance
88	Urinalysis by Clinitek Status	Nursing Department
89	Use and Disclosure of Highly Confident	Health Information Management
90	Verifying Ongoing Competency in the L	Lab General Policies/Procedures
91	Wet Prep /KOH reporting	Microbiology

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 Board 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.

OLD BUSINESS

To: Compliance Committee & Board of Commissioners
From: Shana Garcia, Executive Assistant/Public Records Officer
Date: 7/26/22
Subject: Public Hearing-Redistricting

Per Chapter 29A.76 RCW and RCW 70.44.070 (2), the public hospital district is required to periodically redraw districts. The AWPFD Legal Manual (updated March 2022) notes the following:

Under [RCW 29A.76.010](#), it is the responsibility of each municipal corporation to periodically redistrict its governmental unit based on population information from the most recent federal decennial census. No later than eight months after receipt of federal decennial census information applicable to the district, the district board of commissioners must prepare a plan for redistricting its commissioner districts. The plan must follow certain criteria:

- Each commissioner district must be as nearly equal in population as possible to each and every other commissioner district.
- Each commissioner district must be as compact as possible.
- Each commissioner district must consist of a geographically contiguous area.
- Population data may not be used for purposes of favoring or disfavoring any racial group or political party.
- The commissioner district boundaries must coincide with existing recognized natural boundaries and shall, to the extent possible, preserve existing communities of related and mutual interest.

The district board must hold at least one public hearing on the proposed redistricting at least one week before adopting it. [RCW 29A.76.010\(5\)](#).

The federal decennial census occurs in years ending in zero. The decennial redistricting calendar typically begins in April of the census year and ends before candidate filing week in May of the following year. However, with respect to the 2020 Census only, the Washington State Legislature has extended the redistricting deadlines as described in this MRSC Insight blog: [Redistricting and the 2020 Census](#). Local governments that are not scheduled to elect members of their governing bodies in 2022 (which includes hospital districts) must submit redistricting plans no later than November 15, 2022.



In October 2015, the District engaged Sammamish Data Systems, Bob Schweizer for the purpose of redistricting. The District has received quotes from Bob & Gary Hurley of Lewis County Public Works. Bob quoted \$600 and Gary quoted \$200 to redraw the lines.

Gary shared keeping the current commissioner districts "as is" remains relevant given they continue to be quite close. The District could use the same descriptions provided by Bob, along with updated population numbers.

Commissioner District 1 Population = 3,148

Commissioner District 2 Population = 3,016

Commissioner District 3 Population = 3,112

Total Population = 9,276

The Board will need to hold a Special Board Meeting-Public Hearing for redistricting one week before a Regular Board Meeting prior to the deadline of November 15th to submit the data to Lewis County. The options are as follows:

Special: August 24th
Regular: August 31st

Special: September 21st
Regular: September 28th

Special: October 19th
Regular: October 26th



NEW BUSINESS



DocID: 8610-104
Revision: 2
Status: Official
Department: Governing Body
Manual(s):

Policy & Procedure : Board Self-Evaluation

Policy:

It is the policy of Lewis County Hospital District No.1 that the Board of Commissioners will conduct an annual self-evaluation.

Purpose:

For the Board of Commissioners to set and review goals and expectations.

Procedure:

The Board of Commissioners will identify their areas of strengths and weaknesses ensuring their personal goals and hospital health system goals are compatible. They will do this by using one of the evaluation forms located in the binder marked **Board Self Evaluation** located in the Administration office.

Document Owner: Herrin, Tom
Collaborators:
Approvals
- **Committees:** (09/25/2019) Board of Commissioners, (03/31/2021) Board of Commissioners,
- **Signers:**
Original Effective Date:
Revision Date: [07/05/2006 Rev. 1], [08/27/2018 Rev. 2]
Review Date: [07/09/2008 Rev. 1], [05/29/2009 Rev. 1], [03/21/2014 Rev. 1], [05/31/2016 Rev. 1]
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:10652.](https://www.lucidoc.com/cgi/doc-gw.pl?ref=morton:10652)



DocID: 18944
Revision: 0
Status: Official
Department: Governing Body
Manual(s):

Policy & Procedure : Board Spending Authority

Policy:

It is the policy of Lewis County Hospital District No. 1 that the Board Chair is responsible for the annual Board of Commissioners' budget. All district funds incurred by individual Commissioners must receive prior approval from the Board Chair, or delegate, before district funds can be committed.

Procedure:

Authority to Requisition

The Board Chair is responsible for Board of Commissioners related expenditures and is the only person authorized to commit district funds on behalf of the Board of Commissioners. The Board Chair may delegate authority to an alternative in his/her absence. This delegation should be submitted in writing to the CFO, detailing who is authorized, length of delegation, any restrictions (such as restricting delegation to types of expenses or maximum limits of delegation).

Types of Costs Incurred

1. Commissioner Compensation: Compensation is subject to "Commissioner Compensation for Meetings and Other Services" policy (DocID 15827). Time is reported and processed via the District's Kronos timekeeping system.
2. General/Office Supplies: A Purchase Requisition form will be used to request all general/office supplies for Commissioners. This form will be approved by the Board Chair, or delegate, prior to being submitted to the Purchasing Department for acquisition.
3. Legal/Professional Services: The Board Chair, or delegate, is the only person that can commit District funds towards legal/professional services. Individual commissioners engaging these services without prior approval will be individually responsible for the cost of the service.
4. Education/Travel Expenses: All Commissioner education and travel related expenses must be approved by the Board Chair prior to incurring any associated costs. Commissioners must comply with the "Travel Expense Reimbursement Policy" (DocID 16195) when submitting travel related expenses for reimbursement. The "Travel Reimbursement Form" must be completed and signed/dated. The form and supporting documentation must be submitted to the Board Chair, or delegate, for approval. Reimbursements are processed and paid via the District's Kronos timekeeping system. Any expenses incurred without prior approval, non-reimbursable per policy or not addressed by the policy will be the responsibility of the individual Commissioner.
5. All Other Expenses: All other expenses must be approved by the Board Chair, delegate or full board, prior to being incurred. Without prior approval, Commissioners will be individually responsible for the expense.

Document Owner: Herrin, Tom

Collaborators:

Approvals

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

- **Signers:**

Original Effective Date: 09/05/2019

Revision Date: [09/05/2019 Rev. 0]

Review Date:

Attachments:

(REFERENCED BY THIS DOCUMENT)

Other Documents:

(WHICH REFERENCE THIS DOCUMENT)

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DocID: 8610-108
Revision: 2
Status: Official
Department: Governing Body
Manual(s):

Policy : Distribution for Board and Committee Packets

Policy:

It is the policy of Lewis County Hospital District No. 1 that regular board meeting agendas and packets shall be distributed electronically five days before the scheduled board meeting. Board committee meeting agendas and packets shall be distributed electronically five days before the scheduled committee meeting. Printed copies will be available upon request.

Document Owner: Herrin, Tom
Collaborators:
Approvals
- **Committees:** (07/22/2015) Board of Commissioners, (09/27/2017) Board of Commissioners, (12/19/2018) Board of Commissioners, (08/26/2020) Board of Commissioners, (09/29/2021) Board of Commissioners,
- **Signers:**
Original Effective Date: 05/15/2008
Revision Date: [05/15/2008 Rev. 0], [08/12/2014 Rev. 1], [09/08/2014 Rev. 2]
Review Date: [05/29/2009 Rev. 0], [04/06/2010 Rev. 0], [04/11/2011 Rev. 0], [11/08/2013 Rev. 0], [08/02/2016 Rev. 2]
Attachments:
(REFERENCED BY THIS DOCUMENT)
Other Documents:
(WHICH REFERENCE THIS DOCUMENT)

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<https://www.lucidoc.com/cgi/doc-gw.pl?ref=morton:13513>.

Join AWPHD For an All Member Meeting in October

2022 Annual Meeting



Washington State
Hospital Association



Association of Washington
Public Hospital Districts

As part of the WSHA Annual Meeting, AWPHD will be hosting a breakfast meeting for all of you to gather at **8:00 am** on **Tuesday, October 18th**. Open to CEOs and Commissioners, we will be giving an annual update on AWPHD work and welcoming the new 2023 Board of Directors members.

WSHA Annual Meeting – In Person *or* Virtual

- **Dates:** Sunday, October 16 – Tuesday, October 18
- **Location:** Hyatt Regency Lake Washington | Renton, WA
- **Audience:** C-Suite Leadership, Management, Safety & Quality Leaders, Trustees & Commissioners
- [REGISTER HERE](#)
- **Room block:** To reserve hotel rooms, please visit this link: [Washington State Hospital Association Annual Meeting \(hyatt.com\)](#)

SUPERINTENDENT REPORT