

Jefferson County Public Hospital District No. 2  
Board of Commissioners Special Session Meeting  
Wednesday, February 19, 2025

**Audio Only:** dial Phone Conference Line: (509) 598-2842  
When prompted, enter Conference ID number: 975 178 013#  
**Microsoft Teams meeting:** Join on your computer or mobile app.  
This option will allow you to join the meeting live.

[Click here to join the meeting](#)

Due to multiple respiratory illnesses, Jefferson Healthcare is still highly encouraging the practice of infection protocols. You may attend this meeting virtually by accessing the information below or in person in the Sheridan Conference Room at 915 Sheridan Street. Limited seating is available.

Time:	WELCOME	Who:
2:00pm	<b>Call to Order</b>	Commissioner Buhler Rienstra
	<b>FOCUS REPORT</b>	
2:00pm	<b>Methodology of Patient and Employee Satisfaction</b>	Brandie Manuel, Chief Patient Safety & Quality Officer
2:30pm	<b>Patient Story</b>	Tina Toner, Chief Nursing Officer
	<b>PUBLIC COMMENT</b>	
2:35pm	Public comments are welcome orally, with a 3-minute limit, or may be submitted via email at <a href="mailto:commissioners@jeffersonhealthcare.org">commissioners@jeffersonhealthcare.org</a> , or written and addressed to Commissioners at 834 Sheridan Street, Port Townsend, WA 98368. Written submissions must be received by 5:00pm the day prior to the meeting.	
	<b>CONSENT AGENDA</b>	
2:40pm	<b>Minutes: Action Requested</b> <ul style="list-style-type: none"> <li>January 22, 2025 Regular Session Minutes (pages 3-7)</li> <li>February 5, 2025 Special Session Minutes (pages 8-9)</li> </ul>	Board of Commissioners
2:45pm	<b>Required Approvals: Action Requested</b> <ul style="list-style-type: none"> <li>Resolution 2025-04 Surplus Equipment (pages 10-15)</li> <li>Resolution 2025-05 Canceled Warrants (pages 16-20)</li> <li>Resolution 2025-06 HHHPC QAPI Plan (pages 21-25)</li> <li>December Warrants and Adjustments (pages 26-27)</li> <li>Medical Staff Credentials / Appointments / Reappointments (pages 28-29)</li> </ul>	Board of Commissioners
	<b>STANDING REPORTS</b>	
2:50pm	<ul style="list-style-type: none"> <li><b>Quality Report</b></li> </ul>	Brandie Manuel, Chief Patient Safety & Quality Officer
3:05pm	<ul style="list-style-type: none"> <li><b>Financial Report</b></li> </ul>	Tyler Freeman, Chief Financial Officer
3:20pm	<b>Break</b>	

STANDING BUSINESS		
3:35pm	<ul style="list-style-type: none"> <li>Construction Report</li> </ul>	Jake Davidson, Chief Operating Officer
3:50pm	<ul style="list-style-type: none"> <li>Administrative Report</li> </ul>	Mike Glenn, Chief Executive Officer
4:15pm	<ul style="list-style-type: none"> <li>CMO Report</li> </ul>	Dr. Steve Butterfield, Chief Medical Officer
BOARD BUSINESS		
4:20pm	<ul style="list-style-type: none"> <li>Ratification of ProTech Contract               <ul style="list-style-type: none"> <li>Resolution 2025-07 ProTech Collective Bargaining (page 30)</li> </ul> </li> </ul>	Molly Propst, Chief Human Resources Officer
4:30pm	<ul style="list-style-type: none"> <li>Board Report</li> </ul>	Board of Commissioners
EXECUTIVE SESSION		
4:45pm	Executive session as allowed by RCW 42.30.110, subcategory to be announced at the beginning of this meeting. Action may be taken.	
CONCLUDE		
5:15pm	<ul style="list-style-type: none"> <li>Meeting Evaluation</li> </ul>	Board of Commissioners
5:25pm	<ul style="list-style-type: none"> <li>Conclude</li> </ul>	Board of Commissioners

This Special Session will be officially recorded. The times shown on the agenda are estimates only.

**Audio Only:** dial Phone Conference Line: (509) 598-2842  
When prompted, enter Conference ID number: 975 178 013#  
**Microsoft Teams meeting:** Join on your computer or mobile app.  
This option will allow you to join the meeting live.  
[Click here to join the meeting](#)

Due to multiple respiratory illnesses, Jefferson Healthcare is still highly encouraging the practice of infection protocols. You may attend this meeting virtually by accessing the information below or in person in the Sheridan Conference Room at 915 Sheridan Street. Limited seating is available.

Time:	WELCOME	Who:
2:00pm	<p><b>Call to Order</b> The meeting was called to order at 2:00pm by Board Chair Buhler Rienstra. Commissioners in attendance included Commissioners McComas, Kolff, Dressler and Ready. Also, in attendance were Mike Glenn, CEO; Tyler Freeman, CFO; Jake Davidson, COO; Tina Toner, CNO; Molly Propst, CHRO; Brandie Manuel, CPSQO; and Shannon Groff, Executive Assistant.</p> <p>This meeting was officially audio-recorded by Jefferson Healthcare.</p>	Commissioner Buhler Rienstra
	<p><b>Approve Agenda</b> Commissioner McComas made a motion to approve the agenda. Commissioner Dressler seconded. <b>Action:</b> Motion passed unanimously.</p>	Board of Commissioners
	<b>FOCUS REPORT</b>	
2:00pm	<p><b>Patient Story</b> Tina Toner, Chief Nursing Officer gave us a patient story for January, which was around our hospital staff. This patient experienced both shifts in the Emergency Department. It was a set of friends that were hiking, biking and traveling through Jefferson County. This letter told the story of how impressive and high quality our care is. Discussion ensued.</p>	Tina Toner, CNO
	<b>PUBLIC COMMENT</b>	
2:15pm	<p>Public comments are welcome orally, with a 3-minute limit, or may be submitted via email at <a href="mailto:commissioners@jeffersonhealthcare.org">commissioners@jeffersonhealthcare.org</a>, or written and addressed to Commissioners at 834 Sheridan Street, Port Townsend, WA 98368. Written submissions must be received by 5:00pm the day prior to the meeting.</p> <p>Commissioner Kolff gave a shoutout to Angela Gyurko who was at the Peoples March last Saturday. The work she has done has been incredible.</p>	

CONSENT AGENDA		
2:25pm	<p><b>Minutes: Action Requested</b></p> <ul style="list-style-type: none"> <li>December 18, 2024 Special Session Minutes</li> </ul> <p>Commissioner Kolff made a motion for an amendment to the December minutes under board business to note “Commissioner Kolff gave an update on the retirement of a city employee who shepherded the climate committee for more than 20 years”</p> <p>Commissioner Kolff made a motion to approve the minutes as amended. Commissioner Ready seconded. <b>Action:</b> Motion passed unanimously.</p>	Board of Commissioners
2:30pm	<p><b>Required Approvals: Action Requested</b></p> <ul style="list-style-type: none"> <li>Resolution 2025-01 Surplus Equipment</li> <li>Resolution 2025-02 Canceled Warrants</li> <li>November Warrants and Adjustments</li> <li>Medical Staff Credentials / Appointments / Reappointments</li> </ul> <p>Commissioner Dressler made a motion to approve the Required Approvals. Commissioner McComas seconded. <b>Action:</b> Motion passed unanimously.</p>	Board of Commissioners
STANDING REPORTS		
2:35pm	<ul style="list-style-type: none"> <li><b>Quality Report</b></li> </ul> <p>Brandie Manuel, Chief Patient Safety &amp; Quality Officer gave her January quality report, which included an overview of our patient experience metrics, the third next available appointment (TNAA) highlighting in elevating the patient experience in our Dental Clinic (who is in the top decile in our nation!) in addition to elevating the inpatient experience along with some staff recognition from their leadership team. We reviewed the patient experience highlights from 2024 and the top recommended hospital overview in every state. Port Townsend was among this list who was in the top box score! Discussion ensued.</p>	Brandie Manuel, CPSQO
2:50pm	<ul style="list-style-type: none"> <li><b>Financial Report</b></li> </ul> <p>Tyler Freeman, Chief Financial Officer, presented the December Financial Report which detailed our November statistics, income statement and our cash and accounts receivable. We also got a preview of January 2024. Discussion ensued.</p>	Tyler Freeman, CFO
3:05pm	<p><b>Break</b></p> <p>Commissioners recessed for break at 3:10pm Commissioners reconvened from break at 3:25pm</p>	
STANDING BUSINESS		
3:20pm	<ul style="list-style-type: none"> <li><b>Construction Report</b></li> </ul> <p>Jake Davidson, Chief Operating Officer provided a project update, which included some new photos of the ramp, parking lot, the linear</p>	Jake Davidson, COO

3:35pm	<p>accelerator room and inside of the building, the budget for this project and where things are shifting, the design builder contingency, Jefferson Healthcare’s contingency, the milestone timeline, road disruptions/closure from 01/17-03/12, 2025, and a recruitment update on our new service line providers. Discussion ensued.</p> <ul style="list-style-type: none"> <li>• <b>Administrative Report</b></li> </ul> <p>Mike Glenn, CEO gave his administrative report which included an update on the 2025 state legislative agenda, advocacy, both federal and state side, along with updates on recent events including our latest leadership development institute, and employee service award banquet. We have a reminder to the Board on what our Strategic Plan Roadshow dates are. More information/details to follow. Discussion ensued.</p>	Mike Glenn, CEO
3:50pm	<ul style="list-style-type: none"> <li>• <b>CMO Report</b></li> </ul> <p>Dr. Steve Butterfield, CMO gave his CMO report and gave a big shoutout to everyone who helped plan the service awards event. He then talked through the IV fluid shortage, and we have stood down incident command. We are still monitoring the situation and will come back together if needed. We talked through masking in patient facing areas and our numbers have started to trend down in Washington State for illnesses. We plan to mask until we are out of the respiratory illness season. Dr. Butterfield talked through the Q4 quality measures for primary care, and we have made significant improvements, which are diabetes control, high blood pressure and next year we are adding breast cancer screenings as a metric on our ACO quality committee.</p>	Dr. Butterfield, CMO
<b>BOARD BUSINESS</b>		
4:00pm	<ul style="list-style-type: none"> <li>• <b>Election of Officers</b></li> </ul> <p>Commissioner McComas made a motion to nominate Commissioner Buhler Rienstra as the Board Chair. Commissioner Dressler seconded. <b>Action:</b> Motion passed unanimously.</p> <p>Commissioner Kolff made a motion to nominate Commissioner Dressler as the Board Secretary. Commissioner McComas seconded. <b>Action:</b> Motion passed unanimously.</p>	Board of Commissioners
4:15pm	<ul style="list-style-type: none"> <li>• <b>Board Reports</b></li> </ul> <p>Commissioner Buhler Rienstra noted that we have moved our February Commission meeting up a week due to an overlap with the American Healthcare Association Conference that Mike Glenn, Jill Buhler and Marie Dressler will be attending with VIA Healthcare Consulting. Karma Bass, CEO at VIA Healthcare Consulting has asked for Mike Glenn and Jill Buhler to sit on the panel for discussion.</p> <p>Commissioner Buhler Rienstra asked the Board members if they would be interested in two half day sessions with Karma Bass, VIA Healthcare Consulting and the Commissioners agreed.</p>	Board of Commissioners

4:30pm	<p>Commissioner Buhler Rienstra mentioned the Advocacy Days happening in February and we need two Commissioners in attendance. Commissioner Buhler Rienstra offered her attendance along with Commissioner Kolff.</p> <p>Commissioner Kolff gave an update on the Board of Health members and informed us that they are now staffed!</p> <ul style="list-style-type: none"> <li>• <b>Ratification of RN Contract</b> <ul style="list-style-type: none"> <li>○ Resolution 2025-03 Nursing Collective Bargaining</li> </ul> </li> </ul> <p>Molly Propst, CHRO gave a high-level overview of the ratifications of the new RN contract.</p> <p>Commissioner Dressler made a motion to approve Resolution 2025-03 Nursing Collective Bargaining with Local 3000. Commissioner Ready seconded.</p> <p><b>Action:</b> Motion passed unanimously.</p>	Molly Propst, CHRO
<b>EXECUTIVE SESSION</b>		
4:45pm	<p>Board Chair Buhler-Rienstra announced that they will go into Executive Session for sixty (60) minutes to discuss the evaluation of a public employee as allowed by RCW 42.30.110g and RCW 42.30.110b. Action may be taken.</p> <p>Commissioners went into Executive Session at 4:45pm.</p> <p>Commissioner Buhler Rienstra returned to Regular Session at 5:45pm to announce that they are extending Executive Session by fifteen (15) minutes.</p> <p>Commissioners returned to Regular Session at 6:00pm.</p>	
<b>CONCLUDE</b>		
5:30pm  5:40pm	<ul style="list-style-type: none"> <li>• <b>Meeting Evaluation</b></li> </ul> <p>Commissioners evaluated the meeting. Discussion ensued.</p> <ul style="list-style-type: none"> <li>• <b>Conclude</b></li> </ul> <p>Commissioner Dressler made a motion to conclude the meeting. Commissioner McComas seconded.</p> <p><b>Action:</b> Motion passed unanimously.</p> <p>Meeting concluded at 6:04pm.</p> <p>Approved by the Commission: Chair of Commission: Jill Buhler Rienstra</p>	Board of Commissioners  Board of Commissioners

	<hr/> Secretary of Commission: Marie Dressler <hr/>	
--	---	--

DRAFT

This Regular Session will be officially recorded. The times shown on the agenda are estimates only.

**Audio Only:** dial Phone Conference Line: (509) 598-2842  
When prompted, enter Conference ID number: 975 178 013#  
**Microsoft Teams meeting:** Join on your computer or mobile app.  
This option will allow you to join the meeting live.  
[Click here to join the meeting](#)

Due to multiple respiratory illnesses, Jefferson Healthcare is still highly encouraging the practice of infection protocols. You may attend this meeting virtually by accessing the information below or in person in the Sheridan Conference Room at 915 Sheridan Street. Limited seating is available.

Time:	WELCOME	Who:
3:00pm	<p><b>Call to Order</b> The meeting was called to order at 3:00pm by Board Chair Buhler Rienstra. Commissioners in attendance included Commissioners McComas, Kolff, Dressler and Ready. Also, in attendance were Mike Glenn, CEO; Tyler Freeman, CFO; Jake Davidson, COO; Tina Toner, CNO; Molly Propst, CHRO; Brandie Manuel, Chief Patient Safety &amp; Quality Office and Shannon Groff, Executive Assistant.</p> <p>This meeting was officially audio-recorded by Jefferson Healthcare.</p>	Commissioner Buhler Rienstra
	<b>EXECUTIVE SESSION</b>	
3:00pm	<p>To discuss the sale or lease of real estate, as allowed by RCW 42.30.110(b) in addition to potential litigation as allowed by RCW 42.30.110(1i). Action may be taken in regular session.</p> <p>Commissioners went into Executive Session at 3:01pm. Commissioners returned to Regular Session at 4:31pm.</p> <p>No action was taken.</p>	
	<b>CONCLUDE</b>	
4:30pm	<ul style="list-style-type: none"> <li><b>Meeting Evaluation</b></li> </ul> <p>Commissioners evaluated the meeting. Discussion ensued.</p>	Board of Commissioners
4:40pm	<ul style="list-style-type: none"> <li><b>Conclude</b></li> </ul> <p>Commissioner Dressler made a motion to conclude the meeting. Commissioner McComas seconded. <b>Action:</b> Motion passed unanimously.</p> <p>Meeting concluded at 4:34pm.</p> <p>Approved by the Commission: Chair of Commission: Jill Buhler Rienstra</p> <hr/> <p>Secretary of Commission: Marie Dressler</p>	Board of Commissioners

--	--	--

DRAFT

Jefferson County Public Hospital District #2  
**Surplus Equipment Form**

Department: Surgery, 7020 Date: 02/4/2025

Equipment to be declared surplus: MODULE, CO2

Asset Number: OR0011 Serial Number: DE45594218

Model Number: M3015A

**Justification for declaring surplus:** (check all that apply)

- No longer supports current software
- End of life, useful life exhausted
- Not supported by original manufacturer, parts not available
- Cost of parts to repair exceeds cost of new equipment
- Technology outdated
- Removed or altered during remodeling process
- Other \_\_\_\_\_

Depreciated value: \_\_\_\_\_

\_\_\_\_\_  
Department Director Signature

\_\_\_\_\_  
Materials Director Signature

**Recommended Disposition:**

- Send to surplus storage until \_\_\_\_\_ if not pulled for service dispose in appropriate manner.
- Use as trade-in and return to vendor \_\_\_\_\_
- Send to recycler\* \_\_\_\_\_
- Placed with third party reseller \_\_\_\_\_
- Send to landfill\* \_\_\_\_\_

\*If another party wishes to take equipment from District at no cost the CEO shall have discretion to allow this.

Sell to \_\_\_\_\_

Approved by Commission on \_\_\_\_\_ Resolution # \_\_\_\_\_

# DRAFT

## Jefferson County Public Hospital District #2 Surplus Equipment Form

Department: ACU, 6070 Date: 01/16/2025

Equipment to be declared surplus: LIFT, PATIENT TRANSFER

Asset Number: ACU0031 Serial Number: C6M00992

Model Number: c-625

**Justification for declaring surplus:** (check all that apply)

- No longer supports current software
- End of life, useful life exhausted
- Not supported by original manufacturer, parts not available
- Cost of parts to repair exceeds cost of new equipment
- Technology outdated
- Removed or altered during remodeling process
- Other \_\_\_\_\_

Depreciated value: \_\_\_\_\_

\_\_\_\_\_  
Department Director Signature

\_\_\_\_\_  
Materials Director Signature

**Recommended Disposition:**

- Send to surplus storage until \_\_\_\_\_ if not pulled for service dispose in appropriate manner.
- Use as trade-in and return to vendor \_\_\_\_\_
- Send to recycler\* \_\_\_\_\_
- Placed with third party reseller \_\_\_\_\_
- Send to landfill\* \_\_\_\_\_

\*If another party wishes to take equipment from District at no cost the CEO shall have discretion to allow this.

Sell to \_\_\_\_\_

Approved by Commission on \_\_\_\_\_ Resolution # \_\_\_\_\_

# DRAFT

## Jefferson County Public Hospital District #2 Surplus Equipment Form

Department: ER-7230 Date: 01/22/2025

Equipment to be declared surplus: MODULE, MULTIPARAMETER

Asset Number: ER0041 Serial Number: DE632E4720

Model Number: M3001A

**Justification for declaring surplus:** (check all that apply)

- No longer supports current software
- End of life, useful life exhausted
- Not supported by original manufacturer, parts not available
- Cost of parts to repair exceeds cost of new equipment
- Technology outdated
- Removed or altered during remodeling process
- Other \_\_\_\_\_

Depreciated value: \_\_\_\_\_

\_\_\_\_\_  
Department Director Signature

\_\_\_\_\_  
Materials Director Signature

**Recommended Disposition:**

- Send to surplus storage until \_\_\_\_\_ if not pulled for service dispose in appropriate manner.
- Use as trade-in and return to vendor \_\_\_\_\_
- Send to recycler\* \_\_\_\_\_
- Placed with third party reseller \_\_\_\_\_
- Send to landfill\* \_\_\_\_\_

\*If another party wishes to take equipment from District at no cost the CEO shall have discretion to allow this.

Sell to \_\_\_\_\_

Approved by Commission on \_\_\_\_\_ Resolution # \_\_\_\_\_

# DRAFT

## Jefferson County Public Hospital District #2 Surplus Equipment Form

Department: Radiology, 7140 Date: 01/24/2025

Equipment to be declared surplus: Pulse Oximeter

Asset Number: XR0063/10-00046 Serial Number: 949537

Model Number: Nonin 7500FO

### **Justification for declaring surplus:** (check all that apply)

- No longer supports current software
- End of life, useful life exhausted
- Not supported by original manufacturer, parts not available
- Cost of parts to repair exceeds cost of new equipment
- Technology outdated
- Removed or altered during remodeling process
- Other \_\_\_\_\_

Depreciated value: \_\_\_\_\_

\_\_\_\_\_  
Department Director Signature

\_\_\_\_\_  
Materials Director Signature

### **Recommended Disposition:**

- Send to surplus storage until \_\_\_\_\_ if not pulled for service dispose in appropriate manner.
- Use as trade-in and return to vendor \_\_\_\_\_
- Send to recycler\* \_\_\_\_\_
- Placed with third party reseller \_\_\_\_\_
- Send to landfill\* \_\_\_\_\_

\*If another party wishes to take equipment from District at no cost the CEO shall have discretion to allow this.

Sell to \_\_\_\_\_

Approved by Commission on \_\_\_\_\_ Resolution # \_\_\_\_\_

# DRAFT

## Jefferson County Public Hospital District #2 Surplus Equipment Form

Department: ACU, 6070 Date: 01/16/2025

Equipment to be declared surplus: PUMP, CIRCULATING-FLUID, LOCALIZED HEATING

Asset Number: 17-00008 | 17-00009 ACU0133, ACU0065 Serial Number: 201601694, 201601722

Model Number: TP700

**Justification for declaring surplus:** (check all that apply)

- No longer supports current software
- End of life, useful life exhausted
- Not supported by original manufacturer, parts not available
- Cost of parts to repair exceeds cost of new equipment
- Technology outdated
- Removed or altered during remodeling process
- Other Replacement units already purchased

Depreciated value: \_\_\_\_\_

\_\_\_\_\_  
Department Director Signature

\_\_\_\_\_  
Materials Director Signature

**Recommended Disposition:**

- Send to surplus storage until \_\_\_\_\_ if not pulled for service dispose in appropriate manner.
- Use as trade-in and return to vendor \_\_\_\_\_
- Send to recycler\* \_\_\_\_\_
- Placed with third party reseller \_\_\_\_\_
- Send to landfill\* \_\_\_\_\_

\*If another party wishes to take equipment from District at no cost the CEO shall have discretion to allow this.

Sell to \_\_\_\_\_

Approved by Commission on \_\_\_\_\_ Resolution # \_\_\_\_\_

JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

RESOLUTION 2025-04

A RESOLUTION TO DECLARE CERTAIN EQUIPMENT SURPLUS TO THE NEEDS OF JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2 AND TO AUTHORIZE THE DISPOSAL OF SAID EQUIPMENT

WHEREAS the item(s) of equipment enumerated below are obsolete and otherwise surplus to the District, and;

WHEREAS said equipment now represents an unnecessary cost to the District to retain and store it,

NOW, THEREFORE, BE IT RESOLVED THAT:

- 1) The following equipment be declared surplus to the needs of Jefferson County Public Hospital District No. 2 and will be disposed of in compliance with state law:

Description	Asset #	Serial #	Model #
Module, CO2	OR0011	DE45594218	M6015A
Life, Patient Transfer	ACU0031	C6M00992	C-625
Module, Multiparameter	ER0041	DE632E4720	M3001A
Pulse Oximeter	XR0063/10-00046	949537	Nonin 7500FO
Pump, Circulating-Fluid, Localized Heating	ACU0133, ACU0065	201601694, 201601722	TP700

APPROVED this 19<sup>th</sup> day of February 2025.

APPROVED BY THE COMMISSION:

Commission Chair Jill Buhler Rienstra: \_\_\_\_\_

Commission Secretary Marie Dressler: \_\_\_\_\_

Attest:

Commissioner Bruce McComas: \_\_\_\_\_

Commissioner Kees Kolff: \_\_\_\_\_

Commissioner Matt Ready: \_\_\_\_\_

# DRAFT

JEFFERSON HEALTHCARE  
834 SHERIDAN AVENUE  
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS  
FROM: TYLER FREEMAN, CFO  
RE: January 2025 WARRANT SUMMARY

The following items need to be approved at the next commission meeting:

General Fund Warrants & ACH Transfers	<b>\$31,827,394.45</b>	(Provided under separate cover)
Allowance for Uncollectible Accounts / Charity	<b>\$339,531.00</b>	(Updated - December financials )
Canceled Warrants	<b>4,612.19</b>	(Attached)

# DRAFT

JEFFERSON HEALTHCARE  
834 SHERIDAN AVENUE  
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS  
FROM: TYLER FREEMAN, CFO  
RE: January 2025 GENERAL FUND WARRANTS & ACH  
FUND TRANSFERS

Submitted for your approval are the following warrants:

**GENERAL FUND:**

312790 - 313536 \$14,777,873.34

ACH TRANSFERS \$17,049,521.11

\$31,827,394.45

YEAR-TO-DATE: \$31,827,394.45

Warrants are available for review if requested.

# DRAFT

JEFFERSON HEALTHCARE  
834 SHERIDAN AVENUE  
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS  
FROM: TYLER FREEMAN, CFO  
RE: January 2025 ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS, ADMINISTRATIVE, AND CHARITY CARE WRITE OFFS

Submitted for your approval are the following:

	December	December YTD	December YTD BUDGET
Allowance for Uncollectible Accounts:	(70,743.00)	4,392,120.00	3,628,240.00
Charity Care:	389,121.00	4,795,356.00	3,430,980.00
Other Administrative Adjustments:	21,153.00	1,079,945.00	1,650,015.00
	<hr/>		
TOTAL FOR MONTH:	339,531.00	10,267,421.00	8,709,235.00
	<hr/> <hr/>		

# DRAFT

JEFFERSON HEALTHCARE  
834 SHERIDAN AVENUE  
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS  
FROM: TYLER FREEMAN, CFO  
RE: January 2025 WARRANT CANCELLATIONS

State law requires you to pass a resolution canceling any warrants which are not presented to the Treasurer for payment within one year of issue.

DATE	WARRANT	AMOUNT
11/14/2024	311881 FBO HOSPITAL DISTRICT #2	2,668.00
12/12/2024	312505 FBO HOSPITAL DISTRICT #2	400.00
01/04/2024	304581 FBO HOSPITAL DISTRICT #2	888.00
01/04/2024	304615 FBO HOSPITAL DISTRICT #2	146.28
01/25/2024	305049 FBO HOSPITAL DISTRICT #2	509.91

JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

RESOLUTION 2025-05

A RESOLUTION CANCELING CERTAIN WARRANTS IN  
THE AMOUNT OF \$4,612.19

WHEREAS warrants of any municipal corporation not presented within one year of their issue, or, that have been voided or replaced, shall be canceled by the passage of a resolution of the governing body;

NOW, THEREFORE BE IT RESOLVED THAT:

In order to comply with RCW 36.22.100, the warrants indicated below in the total amount of \$4,612.19 to be canceled.

Date of Issue	Warrant #	Amount
11/14/2024	311881	\$2,668.00
12/12/2024	312505	\$400.00
01/04/2024	304581	\$888.00
01/04/2024	304615	\$146.28
01/25/2024	305049	\$509.91
<b>Total</b>		<b>\$4,612.19</b>

APPROVED this 19<sup>th</sup> day of February 2025.

APPROVED BY THE COMMISSION:

Commission Chair Jill Buhler Rienstra: \_\_\_\_\_

Commissioner Marie Dressler: \_\_\_\_\_

Attest:

Commissioner Matt Ready: \_\_\_\_\_

Commissioner Kees Kolff: \_\_\_\_\_

Commissioner Bruce McComas: \_\_\_\_\_

**Meeting:** HHH/PC QAPI Meeting Minutes

**Date:** 01/07/2025

**Time:** 1:30 to 2:15 PM

**Location:** Microsoft Teams

**Recorder:** Christina Avila

X	David Hunsley, Director	X	Linda Potter, Hospice Lead Registered Nurse	X	Lisa Porter, Clinical Operations Manager	X	Gina Iery, Hospice Registered Nurse
E	Dr. Joseph Mattern, Medical Director	E	Sara Katz, P.A.- Palliative Care	X	Jill Katenbrink Newsome, Community Liaison/ Hospice Ancillary Program Manager	E	Linda Calderwood, Nurse Practitioner- Palliative Care
X	Kyra Berkovich, Office Coordinator- Palliative Care	X	Terri Neal, Home Health Physical Therapist	X	Krystal Brock-Farrington, Business Operations Manager	X	Christina Avila, Executive Assistant

Topic/Discussion
<p>David welcomed the group and started the meeting at 1:32 pm.</p> <p>David reviewed the agenda. See <a href="#">PowerPoint</a>.</p> <p>David reviewed the referral survey results. Christina confirmed that the survey was sent to internal and external partners. David shared that the overall referral score was 4.14/5.</p> <p>David reviewed our Plans of Correction including Orientation Process, Home Health Care Plans, and Dot Phrases for Wound Care and Urinary Catheters.</p> <p><b>Review:</b></p> <p><b>-Patient Satisfaction/Grievance/Comments/Compliments</b></p> <p>David provided the group with Home Health and Hospice Comments. David noted that the comments were generally positive. Krystal noted that many of the negative comments involved scheduling concerns. David agreed that scheduling should still be a focus. Krystal reminded the group that this data is not reflective of recent changes. Discussion ensued. Terri shared that in her previous job they had a “week at a glance” schedule with their scheduling team. David confirmed that he sent out instructions for schedule timeframes for nurses. David shared that the negative Hospice comments showed consistency with our current goals for Hospice.</p> <p><b>-Incident Reports</b></p> <p>David shared falls with and without injury. David confirmed that these falls are all the falls that clinicians were present. David shared that the Power Point and minutes will be emailed to all participants for further review.</p>

**-Infection Control Log**

David noted that there are no new infections. Lisa shared that we do not have a tracking method for acquired wounds. Group to add as a goal for Q1: create a tracking method for acquired wounds. David requested that we add the URQNs to the invite group for QAPI moving forward. Lisa confirmed that if wounds and infections are sent in a message to her, she can track moving forward.

**Action:**

-URQNs and Lisa to create process for reporting infections and wounds.

-Christina to add URQNs to the invite group.

-Christina to create Goal worksheet for “Create a Tracking Method for Acquired Wounds”.

**Review Progress of Current Hospice Goals**

**PIP Title: Visits in Final Days of Life**

David confirmed that this metric is going to be difficult to meet due to patients who do not want any visits for Death with Dignity. Port Townsend Death with Dignity count is higher than national average. David confirmed that the visit has to be by a nurse or social worker two of the last three days of life for all patients. This is a Medicare requirement. Jill recommended putting appointments on the night nurse’s schedule for a visit during the night. The group agreed that this would be a good effort to increase night shift appointments in person and meet this goal. Discussion ensued. David confirmed that there was a pharmacist at the Port Ludlow pharmacy after hours. Jill asked if there could be a night shift nurse who could use a Pyxis at the hospital. David shared that pharmacy has declined this option. David also confirmed that e-kits are not allowed in the office. David confirmed that we will likely have an after-hours pharmacist when the Port Townsend retail pharmacy opens.

**PIP Title: Get Care When Needed**

David confirmed that this has been a difficult metric. Night nurses must go out to hospice patients with clinical concerns. David shared that our outcomes have not been what we would like, but the night nurses have been going out on visits recently. Linda shared that the evening shift has been taking regular appointments when day shift appointments are full, and this has been working well.

**PIP Title: Bereavement Satisfaction**

David states that he feels this has been met, with 4 quarters in a row with favorable outcomes. David asks that we wait for one more quarter of good feedback and then remove. Group agreed.

**PIP Title: Patient Informed About When Staff Would Arrive**

David shared that this is still a work in progress and requested that this remains a focus point. Discussion ensued. The group agreed to continue measuring this goal.

**Review Current Home Health Goals**

David shared that he would like to add a new area of concern: Did your family get needed help for pain or trouble breathing? Although the scores are not low, David feels that this is a high area of concern and would like to see these metrics at 100%. Jill recommended that after-hours staff should be given training in Hospice services and medications so that the staff who are trained in Home Health are more comfortable with Hospice patients after

hours. Linda and Gina agreed that in-services could be helpful in this situation. The group agreed to move forward with this new area of concern.

**Action:**

-Christina to schedule monthly meetings with Dr. Mattern for hospice services.

-Training to be provided to after-hour Home Health staff for Hospice medication.

-Christina to complete Goal Worksheet for new PIP: Did your family get needed help for pain or trouble breathing?

**-Creating a Team Approach to Care Management/Nursing Consistency of Care**

David confirmed that all patients have an assigned case manager, and there is now consistency in case management. Geographic areas have been established and patients are being moved at recert junctures. On Feb 2<sup>nd</sup> everyone who has not had a recert date is going to move to a new nurse and new territory. Q1 2025 we should continue to monitor for appropriate care alignment and continue the IDT and wound care meetings. David confirmed that case managers should be reviewing visit sets, transitions report, self-scheduling rubric, and ensuring that orders are signed for visits that are being completed. Terri asked how the case managers are scheduling. Krystal confirmed that they are going through the care plan.

**-Improvement in Ambulation, Dyspnea, and Management of Oral Meds and OASIS Accuracy**

David confirmed that we are a 2-star Home Health currently and would like to review quarter by quarter. Terri said that she would like to take on dyspnea as a pet project. David confirmed that this would be a great area to work on. David recommended training on an OASIS walk. Discussion ensued. David stated that we are over-rating people at the start, and under rating them at the end, and this is making the OASIS score look like we are making patients worse.

**Action:**

-Terri to create a plan for dyspnea.

-Terri to create a training for an OASIS walk.

**-Fall Prevention**

David confirmed that any RL falls are falls with injury that have been in the presence of a clinician. We had a total of 37 falls in the last 90 days. There are a number of patients who have repeated falls, so David feels that this is a high focus point. Are there times that we can do more to help these patients from repeat falls? Lisa confirmed that most of the falls are reported by therapy, but that she doesn't see a lot of interventions to prevent future falls. David asked if we should look at fall trends before IDT moving forward to review high fall risks. The group agreed. Terri asked if the falls are being reported correctly. David stated that he does see accuracy of falls reported. David asked if Terri could provide an Inservice on fall prevention. Lisa would like to look over the falls before offering an Inservice.

**Action:**

-Lisa to review falls in RL Datix.

-Falls to be reviewed during IDT meetings moving forward.

**Review Progress of Current Palliative Care Goal**

**-Set Productivity and Construct Template**

Kyra has created five templates for a schedule. There are no normal practices for outpatients, so there is no standard to compare. Kyra shared that Sara chose a template. David confirmed that we can see how the template works for Sara and maybe transition to Linda. Kyra stated that she would like to create a template for Dr. Mattern to move forward. David shared that Christina is going to be the point person for scheduling with Dr. Mattern and would like to include him in QAPI meetings moving forward. A meeting is scheduled to review Dr. Mattern's schedule on 01/15/2025. Kyra requested additional help for follow up requests from the providers to her beyond the closing of the charts. Is this something that can be part of the PIP? David agreed that this should be a part of a plan of correction. David asked Kyra to send a list of meetings to David that Palliative Care providers should have to schedule on Dr. Mattern's calendar for all of 2025, including office hours and hospice meetings.

**Action:**

-Kyra to send list of recommended meetings to David.

**Create List of Goals for 2025**

-Incorporate annual referral survey results with current goals and identify any new goals the group would like to include in 2025.

The group agreed to move this task to the Q2 QAPI meeting in April.

The meeting concluded at 2:30 pm.

Next meeting: April 15, 2025 (Tentative)

JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

RESOLUTION 2025-06

A RESOLUTION TO DECLARE THAT ALL COMMISSIONERS HAVE RECEIVED A COPY OF THE HOME HEALTH/HOSPICE/PALLIATIVE CARE SUMMARY OF QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT PLAN AND APPROVE OF THE CURRENT PLAN AND INSTRUMENTS NECESSARY TO EXECUTE THIS PLAN.

WHEREAS all commissioners have received a copy of the Summary of Home Health/Hospice/Palliative Care Quality Assurance and Performance Improvement (QAPI) Plan, and;

WHEREAS the plan is approved as written including instruments necessary to execute this plan,

NOW, THEREFORE, BE IT RESOLVED THAT:

- 1) Commissioners have read the Quality Assurance and Performance Improvement (QAPI) Plan provided to them, and approve of the plan and instruments necessary to execute this plan:

APPROVED this 19<sup>th</sup> day of February 2025.

APPROVED BY THE COMMISSION:

Commission Chair Jill Buhler Rienstra: \_\_\_\_\_

Commission Secretary Marie Dressler: \_\_\_\_\_

Attest:

Commissioner Bruce McComas: \_\_\_\_\_

Commissioner Kees Kolff: \_\_\_\_\_

Commissioner Matt Ready: \_\_\_\_\_

# DRAFT

Jefferson  
Healthcare

STATISTIC DESCRIPTION

STATISTIC DESCRIPTION	DECEMBER 2024						DECEMBER 2023			
	MO ACTUAL	MO BUDGET	% VARIANCE	YTD ACTUAL	YTD BUDGET	% VARIANCE	MO ACTUAL	% VARIANCE	YTD ACTUAL	% VARIANCE
FTEs - TOTAL (AVG)	692	696	1%	682	696	2%	640	-8%	623	-9%
FTEs - PRODUCTIVE (AVG)	600	619	3%	609	619	2%	553	-8%	559	-9%
ADJUSTED PATIENT DAYS	4,442	3,415	30%	51,706	40,322	28%	2,908	53%	38,922	33%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	94	88	7%	683	1,038	-34%	66	42%	966	-29%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	406	295	38%	4,187	3,482	20%	372	9%	3,714	11%
SWING IP PATIENT DAYS (MIDNIGHT CENSUS)	-	25	-100%	152	300	-49%	6	0%	77	49%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	500	408	23%	5,022	4,820	4%	444	13%	4,757	5%
BIRTHS	6	7	-14%	94	80	18%	12	-50%	82	13%
SURGERY CASES (IN OR)	135	134	1%	1,587	1,582	0%	144	-6%	1,578	1%
SURGERY MINUTES (IN OR)	13,980	13,242	6%	162,292	156,344	4%	20,148	-31%	217,456	-34%
SPECIAL PROCEDURE CASES	89	88	1%	1,254	1,034	21%	77	16%	1,002	20%
SURGERY MINUTES (SPECIAL PROCEDURES)	4,275	4,825	-11%	59,572	56,962	5%	-	0%	-	100%
LAB BILLABLE TESTS	23,437	21,873	7%	277,407	258,244	7%	21,348	10%	257,381	7%
BLOOD BANK UNITS MATCHED	42	45	-7%	466	530	-12%	32	31%	534	-15%
MRIs COMPLETED	266	242	10%	3,060	2,862	7%	251	6%	2,875	6%
CT SCANS COMPLETED	734	649	13%	8,688	7,662	13%	699	5%	7,919	9%
RADIOLOGY-DEXA	152	128	19%	1,866	1,517	23%	103	48%	1,411	24%
X-RAYS COMPLETED	1,842	1,584	16%	21,172	18,705	13%	1,813	2%	21,972	-4%
ECHOs COMPLETED	214	192	11%	2,318	2,266	2%	163	31%	2,182	6%
ULTRASOUNDS COMPLETED	425	369	15%	4,906	4,354	13%	352	21%	4,319	12%
MAMMOGRAPHS COMPLETED	311	320	-3%	3,404	3,780	-10%	235	32%	3,334	2%
NUCLEAR MEDICINE TESTS	39	35	11%	350	410	-15%	31	26%	373	-7%
TOTAL DIAGNOSTIC IMAGING TESTS	3,983	3,519	13%	45,764	41,556	10%	3,647	9%	44,385	3%
PHARMACY MEDS DISPENSED	24,611	23,412	5%	264,556	276,410	-4%	23,074	7%	254,316	4%
ANTI COAG VISITS	287	365	-21%	3,592	4,314	-17%	322	-11%	4,197	-17%
RESPIRATORY THERAPY PROCEDURES	2,008	2,926	-31%	28,955	34,545	-16%	3,353	-40%	35,025	-21%
PULMONARY REHAB	112	109	3%	1,270	1,288	-1%	72	56%	1,049	17%
CARDIAC REHAB SESSIONS	186	202	-8%	2,124	2,384	-11%	131	42%	2,186	-3%
PHYSICAL THERAPY	6,382	6,924	-8%	84,555	81,745	3%	5,660	13%	77,612	8%
OCCUPATIONAL THERAPY	625	1,273	-51%	10,232	15,026	-32%	832	-25%	13,893	-36%
SPEECH THERAPY	250	288	-13%	2,929	3,404	-14%	135	85%	2,656	9%
REHAB/PT/OT/ST	7,555	8,796	-14%	101,110	103,847	-3%	6,830	11%	97,396	4%
ER CENSUS	1,379	1,240	11%	15,456	14,643	6%	1,217	13%	14,269	8%
EXPRESS CLINIC	1,242	1,160	7%	14,302	13,692	4%	1,256	-1%	13,767	4%
SOCO PATIENT VISITS	211	228	-7%	2,433	2,689	-10%	189	12%	1,885	23%
PORT LUDLOW PATIENT VISITS	609	764	-20%	7,128	9,021	-21%	656	-7%	8,427	-18%
SHERIDAN PATIENT VISITS	2,890	2,822	2%	35,739	33,314	7%	2,561	13%	33,508	6%
DENTAL CLINIC	420	491	-14%	5,446	5,802	-6%	374	12%	5,671	-4%
WATERSHIP CLINIC PATIENT VISITS	1,230	1,284	-4%	13,902	15,162	-8%	1,145	7%	14,094	-1%
TOWNSEND PATIENT VISITS	502	535	-6%	6,413	6,318	2%	476	5%	6,422	0%
TOTAL RURAL HEALTH CLINIC VISITS	7,104	7,284	-2%	85,363	85,998	-1%	6,657	7%	83,774	2%
CARDIOLOGY CLINIC VISITS	471	628	-25%	5,767	7,416	-22%	445	6%	6,377	-11%
DERMATOLOGY CLINIC VISITS	546	757	-28%	8,157	8,940	-9%	720	-24%	9,478	-16%
GEN SURG VISITS	259	342	-24%	3,937	4,043	-3%	226	15%	3,543	10%
NEUROLOGY VISITS	121	8	1413%	522	98	433%	-	-	-	-
ONCOLOGY VISITS	374	680	-45%	4,517	8,031	-44%	373	0%	5,830	-29%
ORTHO VISITS	648	631	3%	7,769	7,451	4%	616	5%	7,188	7%
RHEUMATOLOGY VISITS	19	4	375%	117	49	139%	-	-	-	-
SLEEP CLINIC VISITS	165	197	-16%	2,486	2,323	7%	103	60%	1,961	21%
UROLOGY VISITS	211	211	0%	2,529	2,497	1%	226	-7%	2,717	-7%
OB/GYN CLINIC VISITS	335	331	1%	4,110	3,912	5%	327	2%	3,846	6%
WOUND CLINIC VISITS	102	187	-45%	1,564	2,205	-29%	105	-3%	1,496	4%
HANDS/PLASTICS VISITS	141	226	-38%	2,039	2,668	-24%	195	-28%	2,577	-26%
TOTAL SPECIALTY CLINIC VISITS	3,392	4,202	-19%	43,514	49,633	-12%	3,336	2%	45,013	-3%
SLEEP CENTER SLEEP STUDIES	43	58	-26%	651	684	-5%	51	-16%	652	0%
INFUSION CENTER VISITS	753	905	-17%	8,949	10,686	-16%	779	-3%	10,269	-15%
SURGERY CENTER ENDOSCOPIES	71	76	-7%	869	900	-3%	58	22%	744	14%
HOME HEALTH EPISODES	88	77	14%	982	907	8%	62	42%	830	15%
HOSPICE CENSUS/DAYS	1,167	1,175	-1%	12,549	13,867	-10%	946	23%	12,807	-2%
FOOD AND NUTRITION SERVICES MEALS SERVED	6,977	9,801	-29%	80,743	115,717	-30%	6,098	14%	93,342	-16%
MAT MGMT TOTAL ORDERS PROCESSED	1,850	1,701	9%	21,003	20,081	5%	1,565	18%	18,702	11%
REGISTRATION HOSPITAL ACCOUNTS CREATED	7,841	3,415	130%	96,574	40,322	140%	-	-	-	-
PATIENT ENGAGEMENT CENTER CALLS HANDLED	18,247	3,415	434%	18,247	40,322	-55%	-	-	-	-

# DRAFT

## Jefferson Healthcare

### Gross Revenue

Inpatient Revenue  
Outpatient Revenue

### Total Gross Revenue

### Revenue Adjustments

Cost Adjustment Medicaid  
Cost Adjustment Medicare  
Charity Care  
Contractual Allowances Other  
Administrative Adjustments  
Allowance for Uncollectible Accounts

### Total Revenue Adjustments

### Net Patient Service Revenue

### Other Revenue

Pharmacies  
Grants  
Other Operating Revenue

### Total Operating Revenues

### Operating Expenses

Salaries And Wages  
Employee Benefits  
Professional Fees  
Purchased Services  
Supplies  
Insurance  
Leases And Rentals  
Depreciation And Amortization  
Repairs And Maintenance  
Utilities  
Licenses And Taxes  
Other

### Total Operating Expenses Operating Income (Loss)

### Non Operating Revenues (Expenses)

Taxation For Maint Operations  
Investment Income  
Interest Expense  
Bond Issuance Costs  
Gain or (Loss) on Disposed Asset  
Contributions

### Total Non Operating Revenues (Expenses)

### Change in Net Position (Loss)

	December 2024 Actual	December 2024 Budget	Variance Favorable/ (Unfavorable)	%	December 2024 YTD	December 2024 Budget YTD	Variance Favorable/ (Unfavorable)	%	December 2023 YTD
<b>Gross Revenue</b>									
Inpatient Revenue	4,530,908	3,721,745	809,164	22%	41,210,944	43,940,597	(2,729,653)	-6%	43,914,759
Outpatient Revenue	33,230,575	29,253,285	3,977,290	14%	373,590,164	345,377,494	28,212,670	8%	320,074,623
<b>Total Gross Revenue</b>	<b>37,761,483</b>	<b>32,975,030</b>	<b>4,786,454</b>	<b>15%</b>	<b>414,801,108</b>	<b>389,318,090</b>	<b>25,483,017</b>	<b>7%</b>	<b>363,989,382</b>
<b>Revenue Adjustments</b>									
Cost Adjustment Medicaid	2,275,349	2,607,748	332,399	13%	24,355,622	30,788,252	6,432,630	21%	27,230,444
Cost Adjustment Medicare	13,987,929	11,836,686	(2,151,243)	-18%	161,812,280	139,749,259	(22,063,021)	-16%	138,457,806
Charity Care	389,121	290,602	(98,519)	-34%	4,795,356	3,430,980	(1,364,376)	-40%	3,495,078
Contractual Allowances Other	3,756,820	2,894,639	(862,181)	-30%	36,588,530	34,175,418	(2,413,113)	-7%	30,988,996
Administrative Adjustments	21,153	139,755	118,602	85%	1,079,945	1,650,015	570,070	35%	824,838
Allowance for Uncollectible Accounts	(70,743)	307,310	378,053	123%	4,392,120	3,628,240	(763,880)	-21%	2,073,066
<b>Total Revenue Adjustments</b>	<b>20,359,630</b>	<b>18,076,741</b>	<b>(2,282,890)</b>	<b>-13%</b>	<b>233,023,854</b>	<b>213,422,164</b>	<b>(19,601,690)</b>	<b>-9%</b>	<b>203,070,228</b>
<b>Net Patient Service Revenue</b>	<b>17,401,853</b>	<b>14,898,289</b>	<b>2,503,564</b>	<b>17%</b>	<b>181,777,254</b>	<b>175,895,926</b>	<b>5,881,328</b>	<b>3%</b>	<b>160,919,154</b>
<b>Other Revenue</b>									
Pharmacies	571,559	715,134	(143,575)	-20%	6,099,385	8,443,200	(2,343,815)	-28%	5,390,391
Grants	50,400	63,963	(13,563)	-21%	463,952	755,176	(291,224)	-39%	270,679
Other Operating Revenue	305,150	43,197	261,953	606%	1,701,273	510,000	1,191,273	234%	1,378,323
<b>Total Operating Revenues</b>	<b>18,328,963</b>	<b>15,720,583</b>	<b>2,608,379</b>	<b>17%</b>	<b>190,041,864</b>	<b>185,604,302</b>	<b>4,437,562</b>	<b>2%</b>	<b>167,958,547</b>
<b>Operating Expenses</b>									
Salaries And Wages	8,061,960	7,585,544	(476,415)	-6%	88,807,448	89,558,363	750,915	1%	78,776,532
Employee Benefits	1,710,495	1,747,688	37,192	2%	19,177,687	20,633,988	1,456,302	7%	17,654,433
Professional Fees	945,468	205,419	(740,049)	-360%	6,861,357	2,425,270	(4,436,086)	-183%	8,884,759
Purchased Services	313,492	1,302,296	988,804	76%	12,534,942	15,375,490	2,840,548	18%	11,865,729
Supplies	5,024,183	3,107,851	(1,916,333)	-62%	40,758,302	36,692,306	(4,065,996)	-11%	36,250,826
Insurance	81,715	152,618	70,903	46%	1,824,865	1,801,877	(22,988)	-1%	1,631,953
Leases And Rentals	69,506	55,093	(14,413)	-26%	875,168	650,452	(224,716)	-35%	605,941
Depreciation And Amortization	705,397	437,672	(267,724)	-61%	5,905,175	5,167,356	(737,820)	-14%	5,248,300
Repairs And Maintenance	148,548	135,900	(12,648)	-9%	1,383,715	1,604,494	220,780	14%	1,178,641
Utilities	94,296	136,899	42,603	31%	1,493,792	1,616,294	122,502	8%	1,396,638
Licenses And Taxes	12,332	88,315	75,983	86%	2,046,954	1,042,688	(1,004,266)	-96%	1,099,550
Other	1,066,615	311,710	(754,906)	-242%	3,858,023	3,680,183	(177,840)	-5%	3,298,794
<b>Total Operating Expenses</b>	<b>18,234,007</b>	<b>15,267,004</b>	<b>(2,967,003)</b>	<b>-19%</b>	<b>185,527,426</b>	<b>180,248,762</b>	<b>(5,278,664)</b>	<b>-3%</b>	<b>167,892,096</b>
<b>Operating Income (Loss)</b>	<b>94,955</b>	<b>453,579</b>	<b>(358,624)</b>	<b>-79%</b>	<b>4,514,438</b>	<b>5,355,540</b>	<b>(841,102)</b>	<b>-16%</b>	<b>66,451</b>
<b>Non Operating Revenues (Expenses)</b>									
Taxation For Maint Operations	44,926	45,205	(279)	-1%	529,178	533,710	(4,532)	-1%	531,604
Investment Income	366,402	207,344	159,058	77%	6,017,700	2,448,000	3,569,700	146%	1,879,475
Interest Expense	(641,664)	(417,744)	(223,920)	-54%	(7,031,083)	(4,932,074)	(2,099,009)	-43%	(1,057,035)
Bond Issuance Costs	-	(134,249)	134,249	100%	-	(1,585,000)	1,585,000	100%	(1,574,900)
Gain or (Loss) on Disposed Asset	(0)	-	(0)	0%	(0)	-	(0)	0%	(4,850)
Contributions	834,566	855,803	(21,237)	-2%	5,691,953	10,104,000	(4,412,047)	-44%	73,134
<b>Total Non Operating Revenues (Expenses)</b>	<b>604,230</b>	<b>556,360</b>	<b>47,870</b>	<b>9%</b>	<b>5,207,747</b>	<b>6,568,636</b>	<b>(1,360,888)</b>	<b>-21%</b>	<b>(152,572)</b>
<b>Change in Net Position (Loss)</b>	<b>699,186</b>	<b>1,009,939</b>	<b>(310,753)</b>	<b>-31%</b>	<b>9,722,185</b>	<b>11,924,174</b>	<b>(2,201,990)</b>	<b>-18%</b>	<b>(86,121)</b>

**FROM:** Medical Staff Services  
**RE:** 02/18/25 Medical Executive Committee appointments/reappointments for Board approval 02/19/25

C-0241

§485.627(a) Standard: Governing Body or Responsible Individual

The CAH has a governing body or an individual that assumes full legal responsibility for determining, implementing and monitoring policies governing the CAH'S total operation and for ensuring that those policies are administered so as to provide quality health care in a safe environment.

Interpretive Guidelines §485.627(a)

*It is the responsibility of the governing body (or responsible individual) to appoint, with the advice of the medical staff, the individual practitioners to the medical staff. After considering medical staff recommendations, and in accordance with established CAH medical staff criteria and State and Federal laws and regulations, the governing body (or responsible individual) decides whether or not to appoint new medical staff members or to continue current members of the medical staff.*

### **JHC Active Initial Appointments**

1. N/A

### **Allied Initial Appointments**

1. Watts, Jamie, FNP - Express Clinic

### **Courtesy Initial Appointments**

1. Yu, Fang, MD - TeleRadiology - Real Rads
2. Suchecki, Bryan, MD - TeleRadiology - Real Rads

### **Locums**

1. N/A

### **Recommended re-appointment to the active medical staff with privileges as requested:**

1. Kirchner, Shannan, MD - Family Medicine
2. Dwijendra, Sean, MD - Diagnostic Radiology/Teleradiology in-house - SKAGIT

### **Recommended re-appointment to the courtesy medical staff with privileges as requested:**

1. Pairitz, Anita, MD - Tele-Psychiatry - ARRAY
2. Frischmann, Lindsey, DO - Teleneurology – Providence
3. Lou, William, MD – Teleneurology - Providence

### **Recommended re-appointment to the allied health staff with privileges as requested:**

1. Flanders, Ingrid, FNP - Primary Care
2. Hampton, Lonna, PA-C - Certified Physician Assistant
3. Irick, Sarah, ARNP - Internal Medicine

### **Recommended re-appointment to the LOCUMS staff with privileges as requested:**

1. N/A

### **Recommended Temporary Privileges:**

**FROM:** Medical Staff Services  
**RE:** 02/18/25 Medical Executive Committee appointments/reappointments for Board approval 02/19/25

C-0241

§485.627(a) Standard: Governing Body or Responsible Individual

The CAH has a governing body or an individual that assumes full legal responsibility for determining, implementing and monitoring policies governing the CAH'S total operation and for ensuring that those policies are administered so as to provide quality health care in a safe environment.

Interpretive Guidelines §485.627(a)

*It is the responsibility of the governing body (or responsible individual) to appoint, with the advice of the medical staff, the individual practitioners to the medical staff. After considering medical staff recommendations, and in accordance with established CAH medical staff criteria and State and Federal laws and regulations, the governing body (or responsible individual) decides whether or not to appoint new medical staff members or to continue current members of the medical staff.*

1. N/A

**Recommended POCUS Privileges:**

1. N/A

**Medical Student Rotation:**

**Disaster Privileging**

1. N/A

**90-day provisional performance review completed successfully:**

1. Vollger, Helmuth, MD – Diagnostic Radiology Skagit

**Resignations:**

1. N/A

**Policy and Privilege Review Policies**

1. Bylaws

**New Privileges**

1. N/A

**Revised Privileges**

1. Family Medicine with OB Core privileges

**Jefferson County Public Hospital District No. 2**

**RESOLUTION 2025-07**

A Resolution of the Jefferson County Public Hospital District No. 2 Board of Commissioners approving the ProTech collective bargaining agreement with the United Food & Commercial Workers Local 21 (“UFCW 3000”)

WHEREAS, the Public Hospital District has been in negotiations with UFCW 3000 in an attempt to arrive at a satisfactory contract.

WHEREAS, the Public Hospital District and UFCW 3000 have reached tentative agreement on a contract for the protech employees, and bargaining unit members have ratified their respective contract.

NOW THEREFORE, BE IT RESOLVED by the Jefferson County Public Hospital District No. 2 Board of Commissioners that it hereby approves the parties’ tentative agreements and any minor edits thereto necessary to prepare a final agreement; and

BE IT RESOLVED that the Chief Executive Officer is authorized to take all necessary administrative actions to implement this resolution, and is authorized to execute the final contracts with UFCW 3000.

ADOPTED and APPROVED by the Board of Commissioners of Jefferson County Public Hospital District No. 2 at an open public meeting thereof this 19<sup>th</sup> day of February 2025, the following Commissioners being present and voting in favor of the resolution.

Commission Chair Jill Buhler Rienstra: \_\_\_\_\_

Commission Secretary Marie Dressler: \_\_\_\_\_

Attest:

Commissioner Matt Ready: \_\_\_\_\_

Commissioner Kees Kolff: \_\_\_\_\_

Commissioner Bruce McComas: \_\_\_\_\_