

CMF Board Meeting, Minutes of 7/17/2020

Attendees....

CMF Board Coordinator: Marlene Farrell

CMF Board Members: Nancy Lellelid, Mark Judy, Wade Nash, Kathi Nash, Dana Wilson, Jeff Wilson, Bob Adamson, Ted & Kathy Montgomery, Robert Jennings, Ann MacPherson, Vangie Schasse, Linda Kinder

Absent: Linda Bradshaw, Scott Bradshaw, Mogens Bach, Terri Judy, Mary Helen Mayhew

CM Staff: Diane Blake, CEO

CM Commissioner: Helen Rayfield

Call to Order at 9:00

Ann read our missions statement: Our mission is to enhance and financially support Cascade Medical's ability to deliver quality healthcare to our community.

A motion was made to approve the May 2020 minutes, Wade seconded and the motion passed.

1. CM Update – Diane Blake

Staffing Notes: CM has hired a public relations expert. Clint Strand has a lot of experience.

Shawn Ottley left CM at the end of June. Recruiting has not begun for this position yet. Dr. Kranz is planning to retire at the end of this year. CM is working through the process of finding his patients other providers. The clinic hopes he can stay possibly be available for extra help as the need warrants. CFO Jim Hopkins is retiring at the end of July, but this has been known for some time now. Marianne Vincent who has been at CM will be taking over as CFO. She has been working alongside Jim for many months now.

Diversity Notes: CM, as a public agency, has stayed relatively quiet during this period of time. However, Diane has updated the process for hiring dual language employees. Dixie Gough, CM's financial counselor, is retiring and her replacement is bilingual in English and Spanish. This will be a great help to the Spanish-speaking patients coming into the clinic for a variety of needs.

Covid Notes: We have more cases in our region. Infections are still on the upswing. The hope is that cases will decline in the next week or two due to wearing masks. CM has been working with WSHA to discuss the challenges regarding several issues, especially contact tracing. There have been more requests for testing for groups of employees. The Chelan County health has

stepped up to provide test kits. CM has put together a fact sheet that can be distributed to local businesses so they are informed about covid resources, although this is typically more a public health issue.

## 2. Finances – Mark Judy

Financial Statement Notes: Overall assets are down 10% from June 2019. This is due to a combination of a lack of earnings and unrealized investment losses. Those investment losses are down \$14,000. It was as high as \$30,000+ so it has improved and is moving in the right direction. Deferred revenue and expenses from the golf tournament have been rolled over to 2021. Profit and Loss Statement: revenue continues to be down and will be the rest of this year. We are about \$49,000 off due to not having the golf tournament this year. There has been a reduction in expenses due to not holding our various fundraisers with the exception of the audit. Costs of the DZA Audit are also down from \$6200 in 2019 to only \$4800 in 2020. Our reports for the rest of the year will be very similar. Financial statements from May were not distributed but available on request. This is the most up-to-date financial statement. Ann moved to approve the financial statement and the motion was seconded and passed.

Board Giving Notes: Board giving was discussed. There have usually been two venues for board giving ... golf and annual letter. Mark reminded board members to be aware of their giving this year. This is an expectation for all board members and this is stated in the by-laws.

## 3. Board Education – Diane Blake

Electronic Health Records (EHR) Notes: EHR - CM is in the process of replacing the electronic health records system. This includes administrative functions and patient records. The systems being considered are all-inclusive. Reasons for doing this are: there is currently more than one system for all the various parts of the hospital services, i.e. ambulance, administration, rehab, payroll, etc. It is difficult to navigate between the various systems. There was a lot of funding 5-7 years ago to move to electronic records over paper records. Having different systems means there is relatively little communication between providers. The current systems in place are problematic and inefficient. The newer systems would have a better patient portal. Online bill pay would also be a benefit of a new system. The ambulance department would continue to have a separate system. There needs to be a system that interacts well with Epic, which is the system in place at Confluence. Moving to Epic is not a reality for CM because of its

unaffordability for a small facility. Epic is not usually installed at really small facilities like CM. It would be possible to connect with Confluence using Epic, but the costs are too exorbitant. CM is looking at two systems that work really well with Epic. The goal is to have a new system by the end of the year, due to one of the current systems possibly expiring. The cost of implementation is \$100,000-\$200,000 and then monthly expenses. Once a system has been chosen, a financial analysis will be completed. Diane believes that the changeover is more affordable than originally thought. Diane is not sure if our system will allow providers to populate the system at Confluence, but there will be a way to make records available to providers outside of CM, possibly in the form of an attachment.

MHC Notes: According to Diane, CM is not doing a good job of delivering care to outlying areas. This is part of CM's strategic planning. The thought is that a mobile clinic could provide services in a more flexible way. Diane has appreciated that Marlene has been doing grant work for the mobile clinic. What does a mobile clinic look like? It could include a family health provider as well as a mental health provider. It could also assist people sign up for health care via Medicare, for example. This seems to be the better option as opposed to renting a fixed space. Would there be lab services? Yes, this is part of the plan. Mobile x-ray is also being considered. All of these plans are dependent upon funding sources. Marlene mentioned it is more than what can be offered through the free clinic (which is currently canceled due to covid). Diane is hoping that this can be accomplished sometime in 2021.

#### 4. Grant update – Marlene

MHC Notes: The startup cost of the mobile health clinic is \$250,000 which includes the vehicle and all the supplies inside including office equipment. Operational costs would be about the same every year. The two grants would assist in funding the startup costs. The federal pre-application is completed and a response is being awaited. Murdock is on the second step. Murdock has a place on the application to show the organization's proof of financial support. These are being applied for under the umbrella of the hospital, not the Foundation.

Board Funding Notes: Discussion was held regarding how we can show support for this effort. The executive committee discussed ways to do this. For example, we could have a targeted campaign to raise \$40,000. Mark shared that the mobile clinic is an important part of meeting the needs of the community. Most of this would be funded by Murdock and federal grants. He

believes the foundation should have a targeted campaign (not to be confused with the ambulance campaign) to raise \$40,000, half of which would be designated from Foundation assets which could be taken out of operating funds rather than the endowment. Nancy would like to see the commissioners also donate funds. She believes we need to get the community involved as well. It is important that this is carefully explained so community members are not confused about our various campaigns. Ann believes we can add a blurb to her letter to her long list of volunteers about the MHC. Linda Kinder wanted to know if we could have a fund-raising concert, although any entertainment is not allowed due to the governor's recent decree. Wade thinks we should be careful about sending out information about this fund raising effort until we have carefully thought out our approach. Marlene mentioned the idea of putting together videos that could be on our website to promote this campaign. Mark moved that we designate a campaign to raise \$40,000 for the MHC, with the foundation providing \$20,000. It was moved and seconded that we move forward with this campaign. The fundraising committee will meet to discuss the best way to move forward.

#### 5. Governance – Nancy Lellelid

Notes: A vision statement has been written to reflect current events in our country and world which was created after multiple meetings. It was felt that the word “diversity” and “equity” are important terms to use. We decided we would add a strategic planning goal of including a minimum of 15% in board diversity. Nancy discussed ways we could accomplish this.

#### 6. Strategic Planning – Linda Kinder

Website resources for board members to look at:

- i. <https://www.councilofnonprofits.org/thought-leadership/10-steps-more-diverse-board>
- ii. <https://www.bridgespan.org/insights/library/boards/building-a-diverse-board>

The vision statement added to the website is as follows: In our mission to support Cascade Medical, we value equality of access to healthcare and wellness resources for all.

Strategic Planning Notes: Work has been done to add concrete steps to strategic planning to accomplish the goal of greater diversity and equity. Linda showed the new additions (in red) to the document. Goals and steps have been added to the strategic planning document to

incorporate the vision statement that include diversity and equity. For example, there is a new statement under Priority 1 regarding enhancing diversity in the volunteer core. Another new part includes fundraising events. Priority 3 has changed to address how to include diversity with our donors. Another new addition relates to promoting diversity and equality in community health event participation/sponsorship. Priority 6 involves diversity and equality in communication. Wade suggested sharing the new vision statement in the volunteer newsletter.

A motion to approve the new vision statement was made, moved and seconded. All approve.

Linda will send out the updated Strategic Planning document to the board.

Linda listed the above website resources that the board can review at a future meeting.

Marlene suggested that board members review the websites so we can discuss this at the next board meeting if there is enough time.

#### 5. Coordinator report – Marlene Farrell

Benevolent Night Notes: (Kathy Montgomery) There was a benevolent night at the Munchen Haus. They are sending a check for \$745 (compared to last year's amount). The next benevolent night is in October at Wildflour, however they are not opening until the county is at Stage 3. Carl Evans from the Bavarian Bistro said he would be more than happy to have a benevolent night. They are open at 25% capacity. We may keep this in mind for future months. A thank you should be sent to the Munchen Haus.

Summer newsletter and email campaign analytics Notes: Marlene sent out 536 emails, 448 were successful deliveries. 158 people actually opened those, about 35%. 14 people actually clicked on something in the email. Through that email we had about \$1000 donated. About 7% of our audience always open our emails. Other statistics were shared. Approximately 650 newsletters were mailed and only one came back. Please be sure you "like" the Foundation FB page. Statistics were shared about people's interaction with the website. Marlene will continue to use and mention analytics going forward.

LNO Notes: Due to current covid restrictions, no date has been chosen yet. Marlene thought it might be a possibility later in the fall should conditions improve with covid.

Small Videos Notes: Marlene would like to do a small video every month to add to the Foundation's website. The videos could be used to explain our fundraising campaigns. Wade and Mark agreed to help with this. Marlene believes it is important that various board members be in the videos.

Commissioner's Meeting Notes: The commissioner's meeting is next Tuesday at 9:00. Marlene asked if anyone was interested in attending, but in the absence of volunteers to do this, she agreed to represent the board at the meeting. Mark asked for a schedule of all upcoming commissioners' meetings. Marlene will send out a calendar of all the meetings for the rest of the year so people can sign up to attend those.

Nancy thinks we will have a Zoom meeting next month.

The meeting was adjourned at 10:29.