

McCALL MEMORIAL HOSPITAL DISTRICT BOARD OF TRUSTEES MONTHLY MEETING

TUESDAY, MARCH 18, 2025; 7:30 am - 8:30 am Administrative Conference Room; 1000 State St. McCall, ID 83638

For Microsoft Teams Link: Click here to join the meeting
Virtual Meeting ID: 252 726 450 726 and Passcode: hS3i9et2

Virtual Video Conference ID: 111 187 494 0

Phone Audio Only: <u>1 208-996-1717</u> Phone Conference ID: 926 567 70#

AGENDA

- 1. Call to Order Marge Krahn, Board Treasurer
- 2. Safety Together Mission Moment: Bedside Handoff Krystle Grothjan, SLM ANM Med/Surg
- 3. *ACTION* Approval of the February 18 Meeting Minutes– Marge Krahn, Board Treasurer
- 4. Monthly Budget Review Marge Krahn, Board Treasurer ACTION Amended Asset Disposals – Greg Sims, SLHS Finance
- 5. FY26 Funding Request– Amber Green, SLM COO/CNO
- 6. Financial Update Kim Doman, SLHS Finance
- 7. Ambulance Shelter Update Ginger McCabe, SLHS VP System Operations
- 8. Housing Workgroup Marge Krahn, Board Treasurer
 - ACTION Deed Restriction Steve Millemann, MMHD Legal Counsel
- 9. *ACTION* Hewitt Property Adjustment Steve Millemann, MMHD Legal Counsel
- 10. Health Services Agreement Workgroup Mike Vineyard, Trustee
- Public Information Campaign Aana Vannoy, Trustee
- 12. St. Luke's McCall Reports
 - Population Health Area Report Dennis Mesaros, VP Population Health
 - Administrator Report Amber Green, SLM COO/CNO
 - Community Board Report Aana Vannoy
 - Quality Committee Report Aana Vannoy
 - Foundation Board Report Marge Krahn
- 13. New Business Marge Krahn, Board Treasurer
- 14. Public Comment Marge Krahn, Board Treasurer
- 15. Adjourn Marge Krahn, Board Treasurer

Upcoming Meetings:

Next Board Meeting – Tuesday, April 15; 7:30 – 8:30 a.m.

MMHD Housing Workgroup Meeting – Wednesday, April 2; 9:00 – 10:00 a.m.

SLM Foundation Board – Friday, April 18; 10:00 a.m. – 12:00 p.m. SLM Community Board – Thursday, April 24; 7:00 – 9:00 a.m. Quality Committee – Thursday, March 20; 2:00 – 3:00 p.m. SLM Auxiliary Board – Friday, March 28; 9:30 a.m. – 12:00 p.m.

Safety Together Mission Moment

Krystle Grothjan, Assistant Nurse Manager, Med/Surg, OB

March 18, 2025



St. Luke's Bedside Shift Handoff

BEDSIDE SHIFT HANDOFF

Humanizing the experience through handoffs

- . Off-going RN log into Epic when you enter the room to enable use of IPASS framework
- Off-going RN to bedside for conversation with patient: NOTHING ABOUT ME WITHOUT ME
- . On-coming RN to the whiteboard to update in real time



Semantics matter

TASK



Bedside Shift Report

RELATIONSHIP



Bedside Shift Handoff

WHY...

We "don't need" to go into the room:

- We only have "updates"
- We need to discuss things we can't say in front of the patient
- We just need to do introductions
- · They are sleeping
- Takes too long



WHY... we ned to go in the room

- NOTHING ABOUT ME WITHOUT ME
- Improves safety and quality
 - ✓ Decreases safety events, falls, miscommunications
- Increases accountability between shifts
- Patients feel heard = increased trust
- Improves efficiency, better time management
- Fewer call lights
- Creates a partnership: patient + us + family
- Increases staff connections



Implementation Successes

McCall:

- ✓ Identified a missed, potentially life-saving, follow up appointment that the patient called out during report.
- ✓ During Patient/Family Leader Visits hearing comments:

"I feel I had advocates for my care"

"They spoke my language at my bedside"

"Communication between teams was great"



Ask Clarifying Questions

AVOID ASKING

Yes or no questions:

- Do you have any questions?
- Do you understand your care plan for the day?
- Do you need anything before I leave?

DO ASK

Open ended questions:

- What other questions do you have?
- What other information would be helpful?
- What would make you more comfortable?



Bedside Handoff FAQ's

Patient/family is sleeping

- Let the patient know they are a critical part of the care team
- If patient has had a rough shift, ask beforehand if they want to be woken up for report
- Let them know you will still need to go in the room to do a safety assessment, even if they are sleeping

Behavioral Health or Code Grey patients

- Off-going RN should use clinical judgement if patient is at risk to escalate
- Individualize report based on triggers and current patient behavior
- Discuss with Chain of Command

BSH for dementia, delirium, or cognitively impaired

- Yes, individualize the report and engage the patient to their level of ability
- Include loved ones in the report when possible

BSH with visitors in the room

- During admission explain process and ask who, if anyone, is okay to have in the room for BSH
- If visitors are present and not approved, politely ask them to wait in lobby

Just need to do updates

- The patient is the reason we do handoff, include them in our discussions
- It is still imperative to lay eyes on the patient and include the patient/family in the plan of care

Patient has new results not yet discussed by the provider

- Share with the on-coming RN and the patient that tests or procedures were completed, and the physician will be coming to discuss with the patient/family
- Share results privately with on-coming nurse

Patient has their TV on loudly

- Kindly explain the need to limit disruptions during handoff
- Mute the TV and proceed

Patient is non-English speaking

- Plan ahead and use a language services interpreter
- If needed, use video remote interpreting device

Hard of hearing patients

 Have the patient put in hearing aids or utilize other patient preferred tools (amplifier, etc.)

Orient patient to the BSH process

 Upon arrival to the unit we talk about our process of discussing their care at every shift change at the bedside McCALL MEMORIAL HOSPITAL DISTRICT BOARD OF TRUSTEES MONTHLY MEETING MINUTES TUESDAY FEBRUARY 18, 2025; 7:30 – 9:36 a.m.

FOREST STREET CENTER CONFERENCE ROOM & MICROSOFT TEAMS VIRTUAL MEETING

TRUSTEES PRESENT: Andy Laidlaw, Chair, Travis Leonard, Secretary, Marge Krahn, Treasurer,

Steve Clements, Angela Staup, Mike Vineyard, and Aana Vannoy, Trustees

TRUSTEES ABSENT: None

STANDING GUESTS: Maureen Arnold, SLM Dir. Ops, Mike Birkinbine, SLM Supply Chain, Laura

Crawford SLM PR Mgr, Kim Doman, SLHS Finance, Hannah Drabinski, MMHD Legal Counsel, Sandee Gehrke, SLHS VP COO, Amber Green, SLM COO/CNO, Ginger McCabe, SLHS VP Ops., Dennis Mesaros, VP Pop. Health, Steve Millemann, MMHD Legal Counsel, Greg Sims, SLHS

Finance, Cassie Zattiero, Bailey & Co.

PUBLIC PRESENT: Zack Armstrong, KTVB, Bill Colpo, SLM Foundation Board, Sarah Curtin,

SLM Physician, Drew Dodson, Boise Dev., Ron Erskine, SLM Foundation Board, Beth Gray, Tom Grote, RH, Greg Irvine, SLM Foundation Board, Karen Kellie, Gusti Laidlaw, Rae McKeating, SLM Foundation Board, Marilyn Olson, Ray Schmitz, Max Silverson, The Star-News, Debra Staup, Verna Vanis, SLM Foundation Board, April Whitney, Maureen O'Keeffe

Wing

A quorum was present and Andy Laidlaw, Chair, convened the meeting at 7:30 a.m. The in-person trustee attendance included: Andy Laidlaw, Chair, Marge Krahn, Treasurer, Travis Leonard, Secretary, Angela Staup, and Aana Vannoy. Mike Vineyard and Steve Clements attended virtually.

<u>SAFETY TOGETHER MISSION MOMENT</u> – Maureen Arnold, St. Luke's Practice Director of Operations, provided an update on the new Team-Based Care Model implemented at St. Luke's Clinic, Payette Lakes Family Medicine. The new model has significantly increased access to care by expanding family medicine physician panels. This improvement has opened access to accept new patients, with projections for this year reaching 2,500. An update on the impact of the urgent care clinic's impact on emergency department visits was requested.

<u>AUDIT PRESENTATION</u> – Andy Laidlaw, Chair, introduced Cassie Zattiero, from Bailey & Co. She presented the FY24 MMHD financial audit and commented on the findings, which included a recommendation for better deprecation schedule coordination. The board discussed implementing a depreciation schedule quarterly review.

ACTION: IT WAS MOVED BY MARGE KRAHN, AND SECONDED BY AANA VANNOY, TO APPROVE THE FY24 McCALL MEMORIAL HOSPITAL DISTRICT AUDIT. NO FURTHER DISCUSSION WAS HELD, AND IT WAS UNANIMOUSLY APPROVED.

APPROVAL OF MINUTES - Andy Laidlaw, Chair, referred to the previous meeting minutes.

ACTION: AANA VANNOY MOVED, SECONDED BY ANGELA STAUP, TO APPROVE THE JANUARY 21, BOARD MEETING MINUTES. THERE WAS NO DISCUSSION AND IT WAS UNANIMOUSLY APPROVED.

<u>WEBSITE REVIEW</u> - Travis Leonard, Secretary, provided an update on the website, which will include sections such as agendas, minutes, and educational information. A preview of the new website will be presented at the March meeting.

MONTHLY BUDGET REVIEW – Marge Krahn, Treasurer, noted that the monthly transfer of funds was completed to maintain the FDIC standards.

<u>IDAHO POWER JUDGEMENT PAYMENT</u> – Marge Krahn, Treasurer, explained that the Valley County Clerk's office provided notification that district boards within Valley County owe a portion of a judgement that was entered in favor of Idaho Power. There are three possible methods of payment: 1.) Pay now; 2.) Decrease the June property tax payment by the owed amount; 3.) Include the payment in the FY26 levy. Marge recommended to pay it now, and there was no further discussion.

ACTION: MARGE KRAHN MOVED, TO PAY TO THE VALLEY COUNTY TREASURER \$3,205.15 TO SATISFY THE IDAHO POWER JUDGEMENT. AANA VANNOY SECONDED, AND IT WAS UNANIMOUSLY APPROVED.

FINANCIAL UPDATE - Kim Doman, SLHS Finance, provided a monthly financial update.

<u>AMBULANCE SHELTER UPDATE</u> - Ginger McCabe, SLHS VP Ops., informed the board that construction activities are on track for the ambulance shelter. The general manager is working on a schedule, and a bid has been accepted. Construction will begin once the weather permits.

<u>HOUSING WORKGROUP</u> – Andy Laidlaw, Chair, noted that a letter was received from the Wildwood condominium HOA expressing their appreciation for changes in the plans to accommodate their concerns. Steve Millemann, MMHD Legal Counsel, provided an explanation of needing to deed restrict the workforce housing project, to allow for incentive opportunities from the City of McCall. The deed restriction becomes a covenant recorded with the property and cannot be changed. Discussion was held on the details of deed restrictions.

ACTION: MARGE KRAHN MOVED, AND TRAVIS LEONARD SECONDED, TO GIVE LEGAL COUNSEL DIRECTION TO PROCEED WITH ST. LUKE'S McCALL FOUNDATION FOR A DEED RESTRICTION DRAFT TO BRING BACK FOR FINAL APPROVAL. NO FURTHER DISCUSSION WAS HELD AND IT WAS UNANIMOUSLY APPROVED.

<u>HEWITT PROPETY LINE ADJUSTMENT DISCUSSION</u> – Steve Millemann, MMHD Legal Counsel, noted the board was briefed at their last meeting on trees removed from a neighboring property to the hospital during construction of the hospital expansion. The neighbors are requesting a boundary line adjustment. Legal counsel's recommendation is to resolve the issue with an easement rather than a property line adjustment. A discussion was held on next steps.

ACTION: TRAVIS LEONARD MOVED, AND ANGELA STAUP SECONDED, TO AUTHORIZE LEGAL COUNSEL TO DRAFT AN EASEMENT INCLUDING A PROPERTY DRAWING TO PREPARE FOR BOARD REVIEW PRIOR TO PROPOSING TO THE NEIGHBORS. NO FURTHER DISCUSSION WAS HELD AND IT WAS UNANIMOUSLY APPROVED.

<u>POPULATION HEALTH REPORT</u> – Dennis Mesaros, SLHS VP Population Health, provided a Health System update on capacity to care, Hospital at Home, and ongoing legislative topics.

<u>ST. LUKE'S McCALL REPORTS / OPERATIONS REPORT</u> – Amber Green provided an operational update regarding financials, staffing, census, quality measures, new providers, and construction.

<u>SLM COMMUNITY BOARD</u> – Aana Vannoy noted the last Community Board coffee talk featured a local housing update from the West Central Mountains Economic Development Council, SLM Foundation, and the City of McCall.

<u>SLM QUALITY COMMITTEE & FOUNDATION BOARD</u> – No reports.

<u>PUBLIC ADVISORY VOTE</u> – Andy Laidlaw, Chair, recapped the history of the District , how it has evolved over the decades, and how complex the dissolution would be. He noted the public comment, included in the board packet, and the request for a public advisory vote on the May 2025 ballot. He suggested four options the board could take in response:

- 1- Decline the request for the advisory vote.
- 2- Grant the request and put it on the May ballot
- 3- Schedule a public hearing to hear citizens' concerns and find a reasonable path forward.
- 4- Schedule a public hearing to receive testimony on workforce housing.

Steve Millemann, Legal Counsel, thanked Andy for the description and suggested options. Andy Laidlaw, Chair, requested commentary from the board members, which included such themes:

- Misinformation, and the opportunity to educate, inform, and listen.
- The benefits of having a relationship with St. Luke's Health System and needing to do a better job of articulating the value.
- The previous Health Services Agreement workgroup, the District's process for vetting St. Lukes funding requests and how it has improved over the last several years, and the oversight of the expenditure of taxpayer dollars.
- The need to reestablish the Health Services Agreement workgroup to determine what steps to take regarding the request, provide an analysis, and suggest a recommendation to the full board.
- The critical community need for workforce housing and how the lack of affordable workforce housing affects the ability to recruit and retain quality of health care workers to deliver serves in the communities that St. Luke's McCall serves.
- The Community Health Needs Assessment that identified safe affordable housing and access to health care as top priority health needs in the region.

Steve Millemann, Legal Counsel, encouraged the board to not be rushed on this request, as dissolution has a number of significant impacts on health care in our community, and thus should be carefully evaluated. He urged the board to respond in a manner that is rational and in which the board does not feel pressured to reach a conclusion by a given deadline.

ACTION: AANA VANNOY MOVED, AND MARGE KRAHN SECONDED, TO REESTABLISH THE HEALTH SERVICES AGREEMENT WORKGROUP. A ROLL CALL VOTE WAS TAKEN, AND NO FURTHER DISCUSSION WAS HELD. IT WAS UNANIMOUSLY APPROVED.

NEW BUSINESS – None.

PUBLIC COMMENT – Andy Laidlaw, Chair, called for public comment at 9:14 a.m.

Dr. Patrick Kinney – 13765 Horizon View

Dr. Kinney commented on the quality of health care because of the partnership with St. Luke's, appreciation of the District and the resources provided and felt disrespected by assumptions made in the public comment the District received.

Dr. Curt Meske – 45 Standing Star Lane

Dr. Meske expressed his opinion that District taxpayer dollars should not be used to pay for a regional hospital providing health care services.

Debra Staup – 1624 Davis Ave.

Ms. Staup expressed her support of the quality health care she has received from St. Luke's McCall and encouraged the board to take their time to educate the public.

Dr. Sarah Curtin – 930 Valley View Lane

Dr. Curtain noted her appreciation of the District and thanked them for their ongoing support.

Tomi Grote – 1000 North 1st Street

Ms. Grote expressed appreciation to hear the board's discussion and plans to have a dialogue with taxpayers. She expressed disappointment there will not be a referendum on the May ballot and that the District should not have to pay for a regional hospital providing health care services. She stated her issue is with the funding mechanism, not the care provided.

Bill Thomas - 650 Brady Drive

Mr. Thomas called out the levy percentage difference between Cascade Medical Center (\$214 for 500K house) and the District (\$78 for a 500K house). He thanked the District for being a voice to ensure the community receives quality health care and that health care is a resource that should not be attacked.

Dan Krahn – 906 Ann Street

Mr. Krahn shared his history and time spent volunteering on the McCall Memorial Hospital and St. Luke's Health System boards and committees. He urged the board to take their time to educate the public and thanked them for their service.

Hearing no further public comment, Andy Laidlaw, Chair, concluded the public comment at 9:35 a.m.

Hearing no other comments or updates, the board adjourned at 9:36 a.m.

| Respectfully submitted, | |
|---------------------------------|-------|
| Travis Leonard, MMHD Board Secr | etary |

:ah

Accrual Basis

McCall Memorial Hospital District Balance Sheet Detail

As of February 28, 2025

| Туре | Date | Num | Adj | Name | Memo | Clr | Split | Debit | Credit | Balance |
|--|--|--------------------------------------|-----|--|---|---------------------------------|--|---|---|---|
| ASSETS Current Assets Checking/Savings IDF- Cash Sweep Transfer Transfer | 02/28/2025 02/28/2025 | | | | Funds Transfer Funds Transf | X X | IDF- Checking IDF- Checking | 942,081.78 | 3,205.15 | 5,590,218.87 5,590,218.87 2,859,096.87 1,657,015.09 2,599,096.87 2,595,891.72 |
| Transfer Transfer Deposit | 02/28/2025 02/28/2025 02/28/2025 | | | | Funds Transf Funds Transf Interest | X X X | IDF- Checking IDF- Checking Interest Income | 4,317.54 | 5,500.00 15,000.00 | 2,590,391.72 2,575,391.72 2,579,709.26 |
| Total IDF- Cash S | weep | | | | | | | 946,399.32 | 23,705.15 | 2,579,709.26 |
| IDF- Checking-31 Check Bill Pmt - Check Bill Pmt - Check Bill Pmt - Check Deposit Bill Pmt - Check Transfer Transfer Transfer Transfer Transfer Transfer Transfer Deposit | 02/03/2025 02/04/2025 02/12/2025 02/12/2025 02/19/2025 02/28/2025 02/28/2025 02/28/2025 02/28/2025 02/28/2025 02/28/2025 02/28/2025 | ACH 554 555 556 557 | | Verizon Lamm and Compan Bailey and Company Millemann, Pembert Column Software P | Memo:DBT C Memo:CHEC Memo:CHEC Memo:CHEC Deposit Paye Funds Transfer Funds Transfer Funds Transfer Funds Transfer Funds Transfer INTEREST D | x x x x x x x | Office Supplies Accounts Paya Accounts PayaSPLIT- Accounts Paya IDF- Cash Sw IDF- Cash Sw IDF- Cash Sw IDF- Money M IDF- Money M Interest Income | 38,532.44 3,205.15 5,500.00 15,000.00 762.04 45.86 | 35.93 250.00 5,500.00 7,839.27 141.94 942,081.78 | 951,319.74 951,283.81 951,033.81 945,533.81 937,694.54 976,226.98 976,085.04 34,003.26 37,208.41 57,708.41 58,470.45 58,516.31 |
| Total IDF- Checkir | ng-3112 | | | | | | | 63,045.49 | 955,848.92 | 58,516.31 |
| IDF- Money Marke Deposit | 02/17/2025 | | | Idaho First Bank | INTEREST D | X | Interest Income | 781.67 | 700.04 | 250,762.04 251,543.71 |
| Transfer Total IDF- Money | 02/28/2025 Market 4931 | | | | Funds Transf | Х | IDF- Checking | 781.67 | 762.04 762.04 | 250,781.67 250,781.67 |
| US BANK- 1033 | IVIai Ket-493 i | | | | | | | 761.07 | 702.04 | 0.00 |
| Total US BANK- 1 | | | | | | | | 1,010,226.48 | 980,316.11 | 2,889,007.24 |
| Accounts Receivable | - | | | | | | | 1,010,226.46 | 960,316.11 | 516,054.03 |
| Accounts Receive Payment Payment Payment Payment Payment | | 9473 9473 9473 9473 | | Valley County Warr Valley County Warr Valley County Warr Valley County Warr | | | Undeposited F Undeposited F Undeposited F Undeposited F | | 34,072.61 2,953.48 377.59 124.65 | 516,054.03 481,981.42 479,027.94 478,650.35 478,525.70 |
| Total Accounts Re | | 5475 | | valicy County Warr | | | Ondeposited 1 | 0.00 | 37,528.33 | 478,525.70 |
| Total Accounts Recei | | | | | | | | 0.00 | 37,528.33 | 478,525.70 |
| Other Current Assets Account for Cred Total Account for C | it Transfer | | | | | | | | | 2,215,067.97 0.00 0.00 |
| Prepaid Items Total Prepaid Item | ıs | | | | | | | | | 663,798.98 663,798.98 |
| Sales Tax Receiv Total Sales Tax Re | | | | | | | | | | 27,312.28 27,312.28 |
| Delinquent Taxes Total Delinquent T | | | | | | | | | | 32,000.00 32,000.00 |
| Taxes Receivable Total Taxes Recei | | | | | | | | | | 1,491,956.71 1,491,956.71 |
| Undeposited Fun Payment Payment Payment Payment Deposit | 02/19/2025 02/19/2025 02/19/2025 02/19/2025 02/19/2025 02/19/2025 | 9473 9473 9473 9473 9473 | | Valley County Warr Valley County Warr Valley County Warr Valley County Warr -MULTIPLE- | Deposit Paye | X X X X | Accounts Rec Accounts Rec Accounts Rec Accounts Rec IDF- Checking | 34,072.61 2,953.48 377.59 124.65 | 37,528.33 | 0.00 34,072.61 37,026.09 37,403.68 37,528.33 0.00 |
| Total Undeposited | Funds | | | | | | | 37,528.33 | 37,528.33 | 0.00 |
| Total Other Current A | ssets | | | | | | | 37,528.33 | 37,528.33 | 2,215,067.97 |
| Total Current Assets | | | | | | | | 1,047,754.81 | 1,055,372.77 | 5,582,600.91 |
| Fixed Assets Land Total Land | | | | | | | | | | 0.00 0.00 0.00 |
| Building Improveme Total Building Improve | | | | | | | | | | 0.00 0.00 |
| Advance for Tenant Total Advance for Ter | | ts | | | | | | | | 0.00 0.00 |
| Accumulated Depred | | | | | | | | | | 0.00 0.00 |
| Furniture and Equiporate Total Furniture and Equiporate Control Furniture Control Furni | | | | | | | | | | 0.00 0.00 |

Accrual Basis

McCall Memorial Hospital District Balance Sheet Detail

As of February 28, 2025

| Туре | Date | Num | Adj | Name | Memo | Clr | Split | Debit | Credit | Balance |
|--|---------------|---|-----|---|-------------------------------|-----|---|--|--------------------------------|---|
| Medical Equipment Total Medical Equipme | ent | | | | | | | | | 0.00 0.00 |
| Total Fixed Assets | | | | | | | | | | 0.00 |
| Other Assets Cascade Property Lo Total Cascade Propert | | | | | | | | | | 0.00 0.00 0.00 |
| Security Deposits As Total Security Deposit | | | | | | | | | | 0.00 0.00 |
| Total Other Assets | | | | | | | | | | 0.00 |
| TOTAL ASSETS | | | | | | | | 1,047,754.81 | 1,055,372.77 | 5,582,600.91 |
| LIABILITIES & EQUITY Liabilities Current Liabilities Accounts Payable Accounts Payable Accounts Paya Bill Pmt -Check Bill Bill Pmt -Check Bill Pmt -Check Bill Bill Pmt -Check | | 554 712481 109101 555 556 70E4 | | Lamm and Compan Millemann, Pembert Bailey and Company Bailey and Company Millemann, Pembert Column Software P Column Software P | Memo:CHEC Memo:CHEC Memo:CHEC | | IDF- Checking Legal Fees Accounting IDF- Checking IDF- Checking Legal Notices IDF- Checking | 250.00 5,500.00 7,839.27 141.94 | 7,839.27 5,500.00 141.94 | 5,590,218.87 1,518,836.19 1,518,836.19 250.00 0.00 7,839.27 13,339.27 7,839.27 0.00 141.94 |
| Total Accounts | Payable | | | | | | · · | 13,731.21 | 13,481.21 | 0.00 |
| Total Accounts Pay | /able | | | | | | | 13,731.21 | 13,481.21 | 0.00 |
| Credit Cards Total Credit Cards | | | | | | | | | | 0.00 0.00 |
| Other Current Lial A/P (Audit) Total A/P (Audit | | | | | | | | | | 1,518,586.19 3,494.00 3,494.00 |
| Deferred Taxes Total Deferred | | | | | | | | | | 0.00 0.00 |
| Owed to St Lul Total Owed to S | | | | | | | | | | 0.00 0.00 |
| Payroll Liabilit Total Payroll Lia | | | | | | | | | | 0.00 0.00 |
| Unavailable Pr Total Unavailab | | œs | | | | | | | | 1,515,092.19 1,515,092.19 |
| Total Other Curren | t Liabilities | | | | | | | | | 1,518,586.19 |
| Total Current Liabilitie | s | | | | | | | 13,731.21 | 13,481.21 | 1,518,586.19 |
| Long Term Liabilities Total Long Term Liabil | | | | | | | | | | 0.00 0.00 |
| Total Liabilities | | | | | | | | 13,731.21 | 13,481.21 | 1,518,586.19 |
| Equity Sinking Fund Total Sinking Fund | | | | | | | | | | 4,071,382.68 1,498,172.00 1,498,172.00 |
| Opening Balance Equation Total Opening Balance | | | | | | | | | | 0.00 0.00 |
| Fund Balances Total Fund Balances | | | | | | | | | | 1,005,691.02 1,005,691.02 |
| Net Income Total Net Income | | | | | | | | 13,517.14 | 6,149.18 | 1,567,519.66 1,560,151.70 |
| Total Equity | | | | | | | | 13,517.14 | 6,149.18 | 4,064,014.72 |
| TOTAL LIABILITIES & EQUI | TY | | | | | | | 27,248.35 | 19,630.39 | 5,582,600.91 |

McCall Memorial Hospital District Balance Sheet

As of February 28, 2025

| | Feb 28, 25 | Jan 31, 25 |
|---|-------------------------|--------------|
| ASSETS | | |
| Current Assets | | |
| Checking/Savings | 0.550.500 | |
| IDF- Cash Sweep | 2,579,709.26 | 1,657,015.09 |
| IDF- Checking-3112 IDF- Money Market-4931 | 58,516.31 250,781.67 | 951,319.74 |
| IDF- Molley Market-4931 | 250,761.07 | 250,762.04 |
| Total Checking/Savings | 2,889,007.24 | 2,859,096.87 |
| Accounts Receivable | | |
| Accounts Receivable | 478,525.70 | 516,054.03 |
| Total Accounts Receivable | 478,525.70 | 516,054.03 |
| Other Current Assets | | |
| Prepaid Items | 663,798.98 | 663,798.98 |
| Sales Tax Receivable | 27,312.28 | 27,312.28 |
| Delinquent Taxes Receivable | 32,000.00 | 32,000.00 |
| Taxes Receivable, Net | 1,491,956.71 | 1,491,956.71 |
| Total Other Current Assets | 2,215,067.97 | 2,215,067.97 |
| Total Current Assets | 5,582,600.91 | 5,590,218.87 |
| TOTAL ASSETS | 5,582,600.91 | 5,590,218.87 |
| LIABILITIES & EQUITY Liabilities Current Liabilities Accounts Payable | 0.00 | 050.00 |
| Accounts Payable | | 250.00 |
| Total Accounts Payable | 0.00 | 250.00 |
| Other Current Liabilities | | |
| A/P (Audit) | 3,494.00 | 3,494.00 |
| Unavailable Property Taxes | 1,515,092.19 | 1,515,092.19 |
| Total Other Current Liabilities | 1,518,586.19 | 1,518,586.19 |
| Total Current Liabilities | 1,518,586.19 | 1,518,836.19 |
| Total Liabilities | 1,518,586.19 | 1,518,836.19 |
| Equity | | |
| Sinking Fund | 1,498,172.00 | 1,498,172.00 |
| Fund Balances | 1,005,691.02 | 1,005,691.02 |
| Net Income | 1,560,151.70 | 1,567,519.66 |
| Total Equity | 4,064,014.72 | 4,071,382.68 |
| TOTAL LIABILITIES & EQUITY | 5,582,600.91 | 5,590,218.87 |

McCall Memorial Hospital District Profit & Loss Budget vs. Actual

October 2024 through February 2025

| | Oct '24 - Feb 25 | Budget | \$ Over Budget | % of Budget |
|--|------------------|--------------|----------------|-------------|
| Ordinary Income/Expense Income | | | | |
| Forgone Income | 57,113.00 | 57,113.00 | 0.00 | 100.0% |
| Property Tax Income | | | | |
| M & O Fund | 100,000.00 | 100,000.00 | 0.00 | 100.0% |
| Sinking Fund | 1,321,397.00 | 1,321,397.00 | 0.00 | 100.0% |
| Interest and Penalties | 10,921.82 | 6,000.00 | 4,921.82 | 182.0% |
| Total Property Tax Income | 1,432,318.82 | 1,427,397.00 | 4,921.82 | 100.3% |
| Sales Tax | 86,345.99 | 0.00 | 86,345.99 | 100.0% |
| Personal Property Tax Replace | 5,196.40 | 0.00 | 5,196.40 | 100.0% |
| Interest Income | 22,682.02 | 1,440.00 | 21,242.02 | 1,575.1% |
| Total Income | 1,603,656.23 | 1,485,950.00 | 117,706.23 | 107.9% |
| Expense | | | | |
| Remitted to SLHS | 0.00 | 0.00 | 0.00 | 0.0% |
| Legal Notices | 205.12 | 420.00 | -214.88 | 48.8% |
| Bank Service Charges | 25.00 | | | |
| Office Supplies | 189.90 | 225.00 | -35.10 | 84.4% |
| Contract Service Fees | | | | |
| Accounting | 6,750.00 | 8,250.00 | -1,500.00 | 81.8% |
| Total Contract Service Fees | 6,750.00 | 8,250.00 | -1,500.00 | 81.8% |
| General Liability Insurance Capital Expenditure | 0.00 | 2,341.00 | -2,341.00 | 0.0% |
| Workforce Housing Project | 0.00 | 1,600,000.00 | -1,600,000.00 | 0.0% |
| Ambulance Shelter & Living Qtrs | 0.00 | 42,835.00 | -42,835.00 | 0.0% |
| Total Capital Expenditure | 0.00 | 1,642,835.00 | -1,642,835.00 | 0.0% |
| Legal Fees | 33,694.51 | 30,000.00 | 3,694.51 | 112.3% |
| Postage and Delivery | 0.00 | 200.00 | -200.00 | 0.0% |
| Property Tax | 2,640.00 | 6,433.00 | -3,793.00 | 41.0% |
| Total Expense | 43,504.53 | 1,690,704.00 | -1,647,199.47 | 2.6% |
| Net Ordinary Income | 1,560,151.70 | -204,754.00 | 1,764,905.70 | -762.0% |
| Other Income/Expense | | | | |
| Other Income | | | | |
| Fund Balance Carryover | 0.00 | 0.00 | 0.00 | 0.0% |
| Total Other Income | 0.00 | 0.00 | 0.00 | 0.0% |
| Net Other Income | 0.00 | 0.00 | 0.00 | 0.0% |
| Net Income | 1,560,151.70 | -204,754.00 | 1,764,905.70 | -762.0% |
| | | | | |

McCall Memorial Hospital District

Fiscal Year 2026 Funding Request



FY26 Request for Funding – Workforce Housing ~\$1.5M

Spilt Maximum Allowable between M&O and Sinking Fund

- Intricacies to calculations:
 - ✓ Maximum allowable
 - This figure is provided to MMHD from Valley County Clerk on 3/24/25 by Idaho Code 63-1312(1)
 - ✓ New construction
 - This figure is provided to MMHD from Valley County Clerk on 7/28/25 by Idaho Rule 802.08
 - ✓ Forgone amount available (can only be applied to M&O)
 - ✓ Maximum cap does apply (dependent on all the above and %s calculated)



Next Steps

Work with Marge Krahn, MMHD Treasurer to determine the M&O and Sinking Fund Amounts.



Finance Report

McCall Memorial Hospital District Board Meeting

March 18, 2025



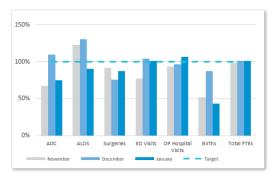


St. Luke's McCall Financial Performance Highlights — January 2025

KEY MESSAGE:

January represents the first month of the second quarter of the fiscal year. Entering FY25 assumptions built into the target include continued decreases in traveler usage, inflationary adjustments, as well as impacts to 340B.

Our clinical quality, throughput, and access to care all impact our financial performance. In the short term we will continue to monitor our financial performance closely in order to inform an operational response and continuous improvement. McCall is currently forecasted to miss target for the year.



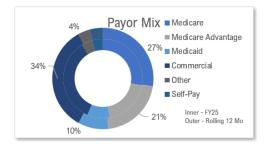
Operating Indicators: Variances to target were in line with typical seasonal activity but were also affected by unique operational challenges and special community needs. Relative to January:

- Average Daily Census was 3.85, below target for the month.
- Surgical cases of 67, under target. Endo completed 71 procedures for the month.
- ED visits at 16 per day, above target for the month.
- OP Hospital Visits exceeded target for the month.
- Births were 5 for the month, under target.
- Total FTE's above target as the team continually monitors staffing levels.

Capital Purchases: FY25 SLHS funded capital purchases have been prioritized to maintain safety standards, meet regulations, and respond to operational and plant needs.

- Imaging Mobile C Arm
- Women's Infant Hearing Screener with Cart
- Lab ABL90 Flex Plus Analyzer





Payor Mix: FY25 has seen an overall decrease in Governmental Payers shifting toward Commercial and Other/Self Pay compared to the 12 month average.

- Government payors account for 56.4%, a decrease compared to rolling 12 month
- Commercial payors at 34.8% of payor mix up compared to the rolling 12 month
- Other & Self Pay up compared to rolling 12 months, making up 8.8% of overall Payor Mix.

Trended Financial Performance: Total YTD Adjusted Operating Expenses¹ as a % of YTD Adjusted Operating Revenue¹ stands at 76% vs. a target of 73%.

- YTD January Labor expense as a percentage of Adjusted Operating Revenue¹ was higher than target. Labor is being monitored through weekly productivity meetings to ensure the facility has the appropriate staffing. In several areas minimum staffing is required to maintain services.
- Supply expense YTD through January as a percentage of Adjusted Operating Revenue¹ is under target due, despite an increase in instruments for January.
- Drug expense YTD as a percentage of Adjusted Operating Revenue¹ is above target for the period.
- Other expenses as a percentage of Adjusted Operating Revenue¹ is above target due travel during January.











McCall Taxing District Project Tracking As of January 2025 Close

| | | | | | | | | Current Year | |
|-----------------------|---|-----------------------|------------|------------|----------|---------------|----------------|-----------------|-------------|
| | | | | | Year End | | Carryover from | Taxing District | Anticipated |
| Project Number | Projecf Name | Original Quote | Prior Year | Year Total | Forecast | FY25 Forecast | Prior Year | Reimbursement | Carryover |
| C00554 | 16.995.1401 - McCall Urgent Care (MMHD Funded) | 2,113,336 | 2,649,751 | 121,735 | 129,955 | 129,955 | | | |
| C00591 | C00591 16.267.1371 - McCall Allen Nokes Parking Lot Improvements | | 498,495 | 68,055 | 68,055 | 68,055 | | | |
| C00643 | C00643 16.145.1193 - MCCALL ASL AMBULANCE GARAGE - Taxing District Funded | | 112,424 | 124 | 124 | 1,637,576 | | | |
| Workforce Housing | | 871,397 | | | | 871,397 | | | |
| | Operating Expense | | | | | | | | |
| | Capitalized | | | | | | | | |
| | Total Spend | 4,826,956 | 3,260,670 | 189,914 | 198,134 | 2,706,983 | 1,187,576 | 1,300,000 | 219,407 |

McCall Ambulance Quarters: Preconstruction

Proiect # C00643

Progress as of: 3/7/25

Project documentation location:

| Phases/Milestones | Status | % Complete | End Date |
|----------------------------------|--------|------------|----------|
| Plan Review Complete | | 90% | 3/21/25 |
| Design Review Complete | | 100% | 11/30/24 |
| Permit Approved | | 80% | 3/21/25 |
| 100% Design Documents | | 100% | 12/1/23 |
| 100% Construction Documents | | 100% | 10/31/24 |
| Value Engineering | | 100% | 10/31/24 |
| General Contractor GMP Finalized | | 100% | 1/10/25 |
| Construction | | 0% | 10/31/25 |
| Fit Out & Move In | | 0% | 11/30/25 |
| Project Close out | | 0% | 12/31/25 |
| Project Complete | | | |

Executive Sponsor Ginger McCabe **Project Manager** Steve Sell **Project Description:** Construct a new facility to support EMS staff and ambulance parking adjacent to the McCall hospital. **Overall Status: Rationale** Status Project is on track with current critical path next steps. Construction Substantial Completion 09/28/25 Estimated project completion date, including operational activation and move in, is January 2026 **Project Success Measures:** Achieving project milestones and deliverables as planned/approved Project on schedule and Budget

Key Accomplishments

Project risks and issues managed effectively and proactively

Entitlements

PW Permit Application & Fee submitted

Preconstruction

- GC Contract Executed
- · Subcontractor buy out completed
- Draft construction schedule received

Next Steps

Entitlements

• Plan Mod VE#2 Approval

Preconstruction

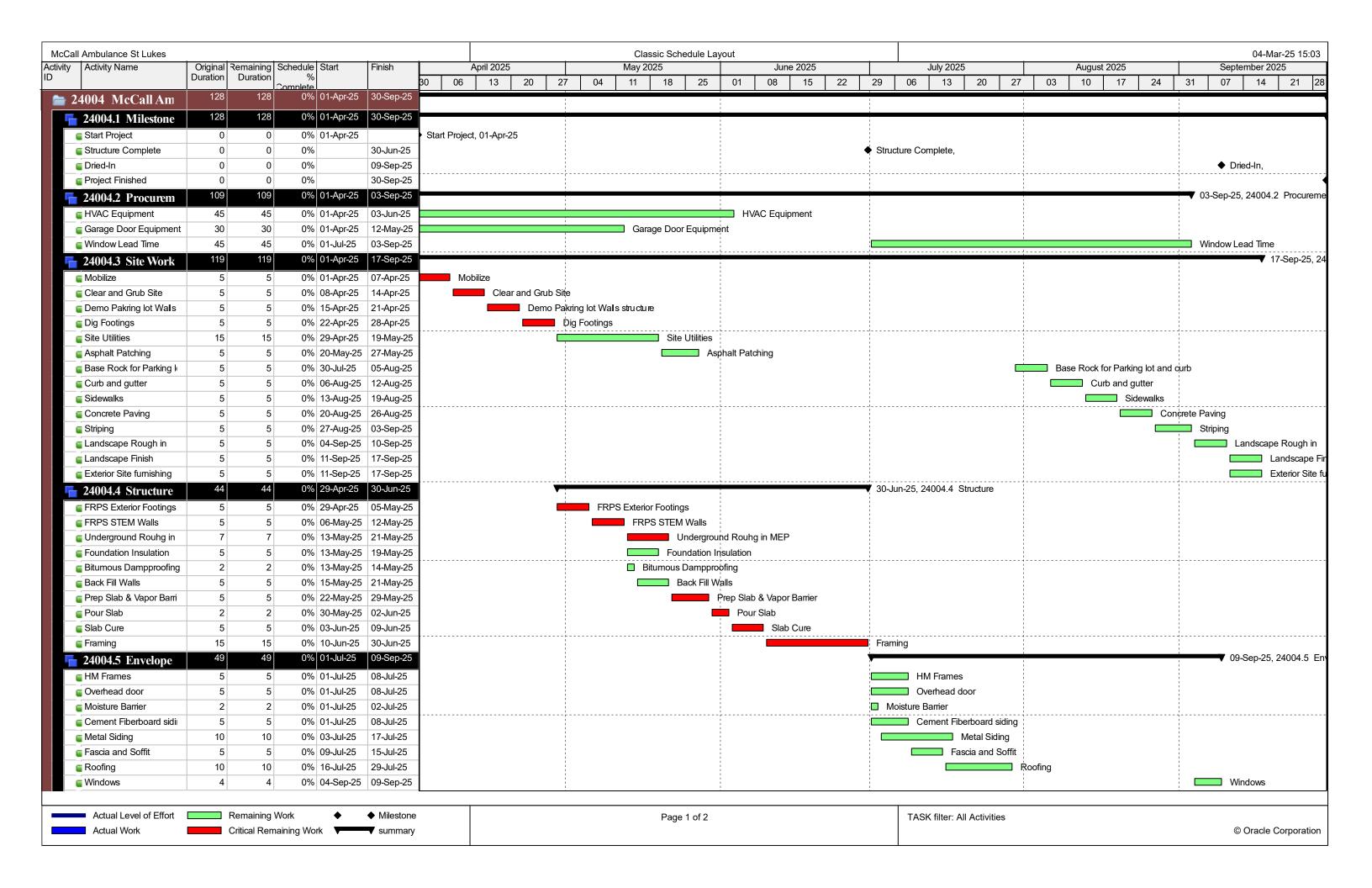
Draft operation activation schedule

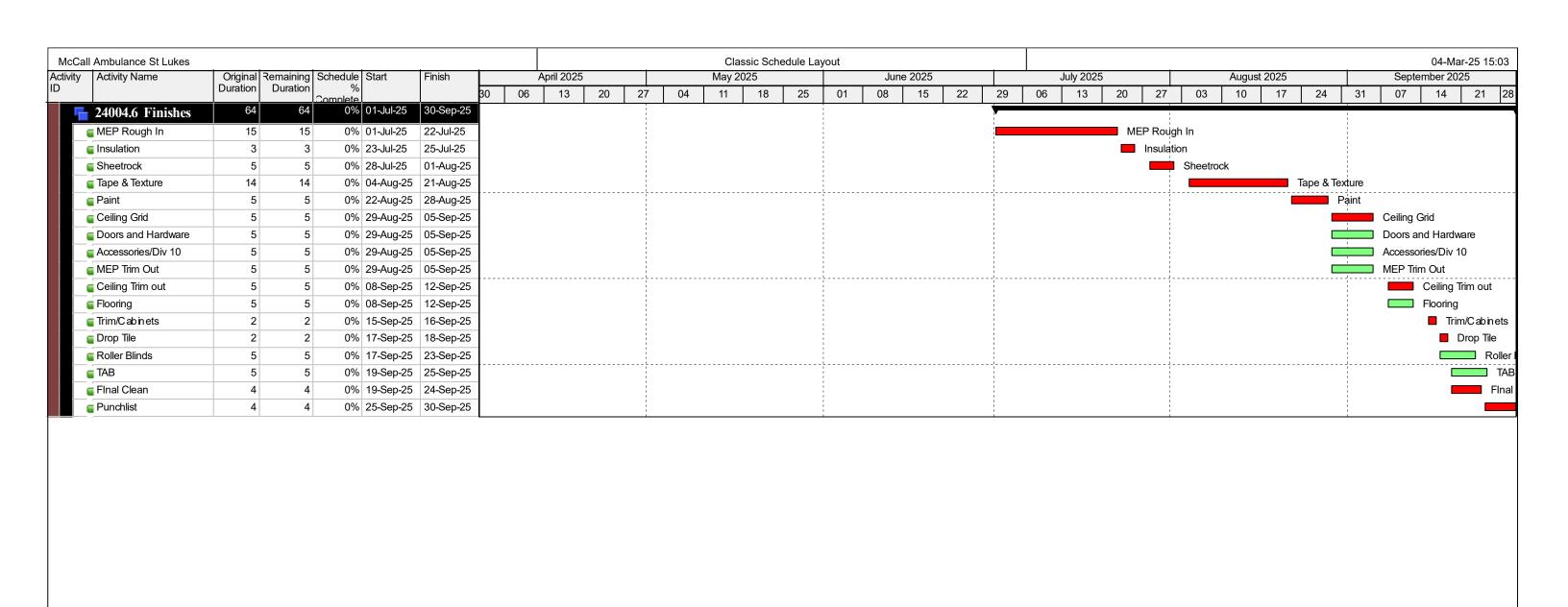
Key Issues / Risks

- If a subcontractor retained for Chip Sealing becomes unavailable, there is a risk that final Certificate of Occupancy could be delayed.
- If the GMP selected is not inclusive of full project scope, construction costs could escalate
- · If subcontractor resources are requested on non-SLHS projects, labor costs could escalate.



| Attribute | Definition Definition |
|------------------|--|
| Red (R) | One or more of the following conditions exist: 1. Phase/Milestone is at significant risk of delay. Multiple issues or risks exist, no mitigation plans in place 2. Schedule: Major date of delivery slippage is expected; > 2-week variance 3. Resource: Resource availability certain to impact project; >10% variance from projection 4. Deliverable % Complete: Major deliverables are completed with >2-week variance of planned duration 5. Budget: Cost variance >5% beyond contingency plan and progress inhibited |
| Yellow (Y) | One or more of the following conditions exist and none of the above conditions exist: 1. Phase/Milestone is at risk of missing date of delivery. Active issues or risks exist, mitigation plan(s) in development 2. Schedule: ~30% probability minor date of delivery slippage, <2-week variance 3. Resource: Resource availability may impact date of delivery; 1-9% variance from projection 4. Deliverable % Complete: Major deliverables and milestones completed on schedule with <2-week variance 5. Budget: Cost variance >5% beyond contingency plan and progress not yet inhibited or expecting a cost variance within the next two week |
| Green (G) | Project is on track as indicated by all the following conditions existing: 1. Phase/Milestone is tracking to planned date of delivery. No unmitigated issues or risks. 2. Resource: No resource constraints that will impact date of delivery 3. Deliverable % Complete: Major deliverables and milestones completed on schedule with <1-week variance 4. Schedule: Delivery dates are expected to be on time 5. Budget: No cost variance currently or anticipated within the next two weeks |
| Not Started (NS) | Task/deliverable has not started yet |
| Complete (C) | Task/deliverable is complete |





McCall Area B: Preconstruction

Project # Pending

Progress as of: 3/7/25

Project documentation location:

| Phases/Milestones | Status | % Complete | End Date |
|--|--------|------------|----------|
| 100% Construction Documents | | 100% | 12/16/24 |
| Design Review Complete | | 100% | w/Area A |
| Permit Approved | | 90% | 03/31/25 |
| General Contractor GMP Finalized | | 100% | 03/31/25 |
| Construction: Demolition & repair of existing facility | | 0% | 10/31/25 |
| Construction: East Parking Lot | | 0% | 10/31/25 |
| Project Close out | | 0% | 12/31/25 |
| | | | |
| Project Complete | | | |

| Executive S | Sponsor | Ginger McCabe | Project Manager | Steve Sell | |
|--|---------------------------|---------------|-----------------|------------|--|
| Project Description: | | | | | |
| Demolish 1950's wing and construct East Parking Lot. Demolition includes relocation of IHT cabling and closet, refinishing South/East Side exterior, and repair of 90's foundation, exterior wall, and roof. | | | | | |
| Overall Stat | tus: | | | | |
| Status | tus Rationale | | | | |
| Project on track for estimated completion Spring 2026 | | | | | |
| Project Suc | Project Success Measures: | | | | |

Key Accomplishments

Achieving project milestones and deliverables as planned/approved

3. Project risks and issues managed effectively and proactively

Entitlements

PUD Approval Received

Preconstruction

- · Planning meetings for IHT, Fire Sprinklers
- · Environmental Risk Audit completed

Project on schedule and Budget

· GC contract, including GMP, finalized

Entitlements

Public Works approval

Preconstruction

Environmental Risk Report

Key Issues / Risks

- · If the GMP comes back higher than budgeted, project schedule could be extended to align with available capital funding
- · If the Environmental Risk Audit reveals unanticipated risks that need to be mitigated, construction costs could escalate
- · If subcontractor resources are requested on non-SLHS projects, labor costs could escalate
- · If winter weather conditions arrive earlier than anticipated, the East Parking Lot may be completed Spring of 26



Next Steps

| Attribute | Definition Definition |
|------------------|--|
| Red (R) | One or more of the following conditions exist: 1. Phase/Milestone is at significant risk of delay. Multiple issues or risks exist, no mitigation plans in place 2. Schedule: Major date of delivery slippage is expected; > 2-week variance 3. Resource: Resource availability certain to impact project; >10% variance from projection 4. Deliverable % Complete: Major deliverables are completed with >2-week variance of planned duration 5. Budget: Cost variance >5% beyond contingency plan and progress inhibited |
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| Not Started (NS) | Task/deliverable has not started yet |
| Complete (C) | Task/deliverable is complete |

SLM COO/CNO Update

McCall Memorial Hospital District Board Meeting

March 18, 2025



McCall Updates

Culture/Workforce Innovation

- ✓ Staffing
- ✓ Housing

Access

- ✓ New Services
- ✓ New Providers
- ✓ Construction Updates

Safety & Quality

✓ Quality Scores



January Data PHA-1 McCall Quality Metric Overview

| Metric | Assessment | Key Trends |
|---|------------|--|
| SSE Falls | | Sustaining. No falls reaching the level of serious safety event this fiscal year. |
| DART: Employee Injury | | 1 DART event in October 2024: Strain sustained when moving a patient |
| SSI: Knee Prothesis, Fracture, Hip Prothesis, Appendectomy, C- section, Cholecystectomy | | Sustaining zero SSI's for rolling 12-month for these SSI categories |
| SSI: Breast | | Zero Breast SSI for rolling 12 months |
| SSI: Hernia | | 1 Hernia SSI in November 2023 |
| BCMA: Med Safety | | Above goal for December |
| Mortality | | 4 over last rolling 12 months. Risk-adjusted above expected mortality, sepsis-related death. |
| Care Experience: LTR Patient Care Services | | Below goal for fiscal year and January elated to fewer responses, n=9 |
| Care Experience: LTR ED | | Below goal for fiscal year. Improved over Nov and Dec data |
| Hand Hygiene | | Sustaining above goal |