SPECIAL BOARD OF HOSPITAL COMMISSONERS
June 17, & 18, 2026

Those in attendance were Hospital Commissioners Don Welander, Lori Brady and Pam Schlauderaff. Also present were Eric Moll, Mason Health CEO, Winfried Danke, Mason Health COO; Melissa Strong, Mason Health CNO; Steve Leslie, Mason Health CFO, Dr. Darren Cuevas, Mason Health CMO, and Shelly Dunnington, Senior Executive Assistant.

Others in attendance: Hannah Norton, Executive Assistant, Jen Capps, Mason Health CDO, Carolyn McCain, Mason Health CHRO, Laura Grubb, Compliance Officer, Nicole Eddins, Sr Director of Performance Excellence, Brad Becker Sr. Director Payer Strategy.

Don Welander called the special meeting of the Board of Commissioners to order at 1:00 p.m.

Eric Moll provided an overview of the strategic planning retreat agenda and objectives for the two-day session.

Lisa Welander facilitated a team-building exercise as part of the strategic planning retreat.

Market Analysis Review

Eric Moll presented the 2025 market analysis and reviewed current and projected community healthcare needs.

Among existing service lines, Primary Care, General Surgery, and Ophthalmology were identified as areas of greatest demand. The analysis indicated a need equivalent to approximately 2.8 FTE general surgeons, though opportunities to improve access through existing capacity were also noted. Discussion included considerations related to Health Professional Shortage Area (HPSA) designation and current space limitations affecting Primary Care recruitment.

Among specialties not currently offered, Dermatology, Urology, and ENT were identified as areas of significant community need, with Dermatology representing the largest unmet demand.

Also provided an update on a strategic planning pilot project with the University of Washington (UW). The project includes evaluation of specialty care access opportunities, potential integration of e-consult services. Additionally, UW is conducting referral patterns and provider network analyses to better understand patient care flows into and out of the organization. The information gathered will help identify opportunities to improve access to care, support strategic planning efforts, and inform development of the Campus Master Plan.

Blue Sky Thinking

Eric Moll facilitated a discussion with the group regarding future opportunities and strategic priorities for the organization.

Pam Schlauderaff asked about provider access and whether it remains a strategic priority. Leadership confirmed that improving access to care continues to be a focus and will remain part of future strategic planning efforts. Pam also suggested exploring an ED fast-track model and raised questions regarding leadership accountability, board self-evaluation, and the potential for future clinic services in the North Mason/Allyn area.

Don Welander asked for an update on Emergency Department operations and patient experience. Leadership provided updates on efforts to improve employee engagement, patient communication, provider communication, patient flow, and admission processes. Leadership noted that ED challenges are common across rural healthcare organizations and will continue to be an area of focus.

Lori Brady expressed appreciation for the ongoing work to improve Emergency Department operations and recognized progress in increasing cancer screening rates.

Winfried Danke provided an overview of leadership development efforts utilizing the Baldrige framework, including work to strengthen accountability, define organizational culture, and align leadership behaviors with organizational goals. Don Welander emphasized the importance of leaders understanding and communicating the organization's culture and purpose throughout the organization.

Progress was recognized in several areas, including workforce recruitment and retention, construction and remodeling projects, referral process improvements, community partnerships, and employee development programs.

Carolyn provided an update on workforce vacancies, noting the lowest number of open FTE positions in the past two years.

Mel Strong reported that testing for the swing bed program is expected to begin next month and highlighted the successful hiring of the first scholarship recipients through the organization's healthcare workforce development program.

Discussion also included opportunities for future commissioner participation in emergency preparedness exercises. Don Welander expressed appreciation for the organization's partnerships.

Blue Sky Thinking (continued)
Pam Schlauderaff also recognized Winfried Danke's leadership in addressing maternal health concerns and improving prenatal care access within the community.

Review of SLT Strategy Retreat Recommendations
Eric Moll presented the top internal strengths identified during the SLT Strategic Planning Retreat.

A recess was taken at 4:20 p.m. to reconvened 6/18/26 at 8:30 a.m.

The meeting reconvened on Thursday, 6/18/26 at 8:30 a.m. with Don Welander calling the meeting to order.

Eric Moll shared the top internal weaknesses identified during the SLT retreat.

Carolyn McCain discussed leadership and manager onboarding and ongoing training, including consideration of quarterly leadership training and the development of peer-to-peer leadership support. Opportunities for partnership with TRC and a potential mentorship pilot program with Jefferson were discussed.

Winfried Danke reviewed access to care and scheduling as an ongoing organizational priority. Improvements were noted, with continued focus on patient satisfaction and looking at self-scheduling options. The Access Council has identified key areas to improve access, with ongoing efforts to use data to guide decision-making.

Steve Leslie discussed access to data and analytics, noting current use of population health tools and identifying opportunities to strengthen financial and analytical staffing support.

Colby Snyder reviewed the organization's current reporting systems, DA2 and HealtheIntent, and discussed plans to transition to HealtheIntent as the primary reporting platform. He noted that the transition will be a significant effort and highlighted the importance of consistent processes and staff training to improve data accuracy. Colby also shared that a centralized list of reports and data sources is being developed.

Discussed whether emergency department operations and customer service should remain explicitly identified within organizational priorities. It was confirmed that ED operations remain a strategic initiative.

Eric Moll reviewed the top external opportunities identified during the SLT retreat.

Review of SLT Strategy Retreat Recommendations

Colby Snyder provided an update on the establishment of an AI/Data Governance Committee and noted that AI tools are being evaluated with an emphasis on security and vendor vetting prior to broader adoption.

Carolyn McCain discussed workforce development as a key opportunity, including internal career pathways, promotion from within strategies, and strengthening entry-level recruitment. Ongoing job shadowing programs for high school students were also noted.

Partnerships with Public Health were also discussed, including exploration of a potential mobile clinic model. Noted ongoing engagement with regional partners and community organizations, including Mason Matters.

Eric Moll reviewed the top external threats identified at the SLT retreat.

Steve Leslie noted that patient financial services currently support insurance enrollment and charity care assistance, and that these functions are being transitioned closer to patient access services.

Discussed workforce capacity constraints related to physical space limitations and ongoing efforts to expand behavioral health integration through collaboration with primary care and external partners, including the University of Washington.

Colby discussed cybersecurity and AI-related risks, emphasizing the importance of continuity planning and system resilience. Leadership noted the use of application dependency mapping to support operational risk planning.

Mission, Vision, and Values

Eric Moll shared the organization's current mission, vision, and values statements.

Commissioners agreed that the mission remains relevant to the organization, though discussion included whether revisions to the wording or sequence could improve clarity and memorability.

Laura Grubb discussed the vision statement and noted that additional clarity around the organization's aspirations and benchmarks may make it easier to communicate.

Carolyn McCain recommended revisiting the organization's values following completion of the ongoing culture work to ensure alignment. The mission, vision, and values will be brought back to the Board for further discussion at a future meeting.

Review Targets for 2027 Strategy Dashboard

Eric Moll presented the draft 2027 Strategy Dashboard.

Ensure Superior Safety

Discussion focused on proposed safety metrics, including FIN management and use of two patient identifiers. Leadership noted that baseline metrics are still being developed.

Commissioners supported the proposed strategic objective.

Enhance Population Health Outcomes

Reviewed proposed population health targets and noted that based on recent strong performance goals are being increased to appropriately reflect continued improvement expectations. Discussion included efforts to improve follow-up for patients with positive cancer screenings and the potential development of a clinical breast cancer navigator position.

Commissioners supported the proposed objectives and targets.

Create Exceptional Patient Experience

Lori Brady suggested increasing the target for Emergency Department patient engagement to the 75th percentile. Mel Strong further proposed increasing the inpatient engagement target to the 80th percentile for hospital services.

Mel Strong noted that the specific key initiatives supporting these targets will be developed and brought back to the Board in August for further review.

Laura Grubb suggested that meaningful discharge instructions be included as a key initiative to support patient experience improvements in both the hospital and the clinic. Lori Brady suggested that discharge instructions should be incorporated into standard work to ensure consistency. Mel Strong will review Emergency Department discharge instructions, and Winfried Danke and Darren Cuevas will evaluate opportunities for clinic-based process improvement related to discharge communication and patient experience.

The Commissioners supported the proposed patient experience objectives and updated targets.

Be the Workplace of Choice

Carolyn McCain provided an update on the implementation of employee and provider engagement surveys. She noted that both surveys will be conducted concurrently over a 2–3-week period. Following completion of the survey period, results are expected to

Be the Workplace of Choice (continued)
be available approximately one month later, with presentation to the Board anticipated by the September Board meeting.

Carolyn shared that the results will be used to help identify and prioritize key initiatives related to workforce engagement, retention, and organizational culture.

Commissioners agreed with the proposed objectives. It was noted that this item will not be ready for presentation in August and will be brought back to the Board at a later date following receipt and analysis of survey results.

Ensure Financial Strength and Growth
Steve reviewed long-term technology and financial planning considerations, including future electronic medical record (EMR) strategy and opportunities for collaboration through the TRC. Discussion included the potential development of a shared technology hub among participating organizations.

Commissioners supported the proposed objectives and targets.

Review 2027 Societal Contribution Dashboard

Eric shared the working 2027 societal contribution dashboard.

Sustainability and Organizational Initiatives

Jen Capps provided an update on sustainability and recycling efforts, referencing Practice Greenhealth metrics related to recycling as a percentage of total waste. She reported a reduction in overall waste of approximately 24 tons. Discussion included the potential need to refine or modify the current metric or adjust future targets once alternative measurement approaches are evaluated. Pam Schlauderaff noted uncertainty regarding whether linking waste metrics to patient days would provide a meaningful comparison.

Business Continuity
Discussion included a proposed change in benchmark source to the National Institute of Standards and Technology (NIST) framework to guide business continuity planning and alignment with national standards.

Commissioners supported the proposed objectives and targets.

Job Shadow Program
The Job Shadow program was discussed in relation to Community Health Needs

Job Shadow Program
Assessment (CHNA) priorities, with emphasis on supporting workforce development and livable wages in the community.

Commissioners supported continuing and expanding the program, including increasing targets for participation.

Healthy Food Environment
Proposed changes included shifting the metric to focus on healthy food consumption. Discussion included eliminating food dyes and high-fructose corn syrup from food offerings. Carolyn McCain suggested adding nutritional information for cafeteria items to improve transparency. Leadership emphasized the importance of clear communication to staff and the public regarding any changes and the rationale behind them.

Commissioners supported the proposed objectives and targets.

Annual Compliance Plan
Laura Grubb discussed the potential for a comprehensive coding audit with external support to benefit Health Information Management (HIM), clinic operations, and providers. Brad suggested that Rural Health Transition Program (RHTP) funding may be available to support this effort.

Pam Schlauderaff raised the consideration of including leadership continuity and succession planning within the Governance section of the dashboard as part of the broader compliance framework.

Next Steps

The Strategy Dashboards will be revised based on Board feedback and brought forward for review at the July Board meeting. It will then be returned to the Board in August for formal approval. In the interim, SLT will begin development of A3 documentation to support implementation planning.

Any funding considerations will be incorporated into the standard budget development process.

Don Welander adjourned the meeting at 1:16 p.m.

`PUBLIC HOSPITAL DISTRICT NO. 1
OF MASON COUNTY, WASHINGTON

BY: _____

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Attest: _____