Park Hospital District Candidate answers were limited to 750 characters per answer.

1. What ideas do you have to improve the long-term financial viability of EPH?

David Batey

EPH's long-term financial viability requires ongoing evaluation of opportunities for revenue increases and expense reductions. The EPH Board & Senior Leadership Team's financial evaluation process has the following components: 1) Assess viable services offered by financially strong Critical Access and Rural Hospitals regionally & nationally, 2) Determine our community's current and future needs for services, 3) Estimate current trends and future projections for utilizing those services, 4) Assess staffing requirements for the services, 5) Estimate current & future revenues for the current or possible future services, 6) Present the results of this evaluation in Board meetings for community input and discussion prior to any Board decision.

John Meissner

Oust the current board. It is long past time to have a frank discussion with the citizens of Estes Park and the district regarding funding/governance. Since early 2017, EPH has been governed by a team appointed by Larimer County, with a few hand-picked replacements and one independent who if truly independent could only provide a lone dissenting vote. After this election cycle, the core of the hand-picked board will have served almost ten years. Have they made EPH financially viable? Not as currently run without massive outside subsidies or loan forgiveness. Either change the board, go private locally - sell to a team of physicians and appoint whatever board you want, or go private nationally, with an entity like Kaiser or UC-Health.

Eric Owen

We need to phase out the travelers that are being used. This is costly and only works short term. I want to see local health care professionals like myself helping our community and neighbors. Patients feel more comfortable knowing that they are being taken care of by people that are vested in the community. There are many people locally that would love to work again at EPH, if the pay and work environment was better. I am sure these medical professionals would be happy not to drive the canyon adding 2 hours to an already 12 hour day. Next we need to stop wasting money on unnecessary items, i.e. the rebranding of the hospital.

Drew Webb

EPH faces challenges to achieve financial viability - return to normalcy, reduced government aide, shortages of quality labor, supply costs. Revenue and expenses are the keys to financial viability. Increased revenue is a result of increased patient counts

and services. Expenses are dictated by the efficiencies of services and their demand but require tools to analyze and evaluate performances. Resident confidence in EPH must be addressed to become the preferred healthcare alternative. Balance strengths and patient needs to offer new services meeting financial criteria and remove those not supported by demand or expertise. Develop competitive programs to attract and retain high quality employees with retention incentives.

2. Should EPH find a replacement in the Estes Valley for the discontinued nursing home? Why or why not?

David Batey

EPH should not attempt to replace the Skilled Nursing Facility (SNF). A financially viable SNF must fill at least 60 to 80 beds, and the demographics of the Estes Valley are not sufficient to fill 60 to 80 SNF beds. Staffing SNF's is an increasing challenge locally and nationally. Good Samaritan recently closed a Greeley facility because they could not staff it. It would be great if EPH could address all of our community's healthcare needs, but this is not possible. When EPH cannot provide a service, it is usually because of insufficient numbers of patients using the service, challenges with required staffing, and/or the need for the service's revenues to at least cover the service's expenses.

John Meissner

Yes. Yes. Yes. Yes. Either build new, remodel an outdated motel complex near the hospital, or negotiate with Good Samaritan to convert a portion of their facility to skilled nursing. Having said that, the current board has the town backed into a corner, and any replacements will still have to contend with the remaining incumbents, all of whom voted in lockstep to remove the skilled nursing facility, and are currently supportive of converting the rooms into temporary housing for contract/visiting nurses. Two votes cannot defeat three. But it is still possible for two new board members to make the remaining three uncomfortable in their choices, and echo public dissatisfaction.

Eric Owen

This is why I am running. I believe the current Board with the exception of 1 of 5 members did a big disservice to the EP community. I was personally called out by name by a Board member during the teleconference saying that I changed her mind in voting to keep PPLC open. No one want's to see 30+ residents and their love ones thrown under the bus, especially during a pandemic. This Board needs someone with compassion, a vested interest within the community and someone that will advocate for the community and I am that person. We must do better.

Drew Webb

Replacing the nursing home in the Estes Valley is not the answer at this time. Based on industry reports and the year-round population the potential demand does not appear to be economically viable. Care for the elderly is a critical issue in the Estes Valley and is being addressed in the new Comprehensive Planning process. Other communities across the country are addressing this issue and finding workable alternatives for skilled nursing home elderly care, such as, adult day care, at home skilled and custodial care and residential care facilities. Public health programs and policies are starting to promote more aging in place methods taking into consideration the resiliency of older adults. Local governments need to explore more incentives for care providers.

3. What services do you think should be expanded and which ones should be reduced or eliminated?

David Batey

The process for identifying services that could be added/expanded or reduced/eliminated is briefly described in the answer to question 1 above. As a current EPH Board member, until the thorough service evaluation process has been completed and the opportunity for input from our community has been considered, I do not feel I can responsibly describe possible changes in EPH services. The Board followed the service evaluation process described above when it decided to add the Urgent Care service and when it decided to end the Skilled Nursing Facility (SNF) service. The service evaluation process included presenting the results in public Board meetings and considering input from our community prior to the Board decision.

John Meissner

Expanded – None. The current board has done a great job adding fancy baubles that can never be financially viable in a community with a year-round population of 6000. The hospital needs to return to what the community envisioned when fundraising began in the late 1960s – A place to diagnose/stabilize in preparation for transport, with core services (chemo, dialysis) having a backstop if things went south. Expansion is beyond control, but some things which can be cut, especially with a nursing home dead beyond reviving, include eliminating "urgent care", eliminating the advertising budget, eliminating one vanity ortho surgery spot until price matching and a SICU can be built/staffed. Cut dietary, since you are now feeding more staff mouths than patient mouths, and staff has options.

Eric Owen

Wow. I currently don't know what services are being offered. It is constantly changing. Is PPLC going to become a surgical center like the board said or is it going to housing for travelers? I believe the family practice clinic/physicians clinic could be expanded. I can tell you for sure that expanding and adding the surgical center is a bad idea. With a plethora of excellent surgeons down in the valley, coming up to 7500 feet to Estes is a

bad idea for specialize surgeries and your PCP/Primary Care Physician would likely not approve if you have many comorbidies. Let's not try to make EPH something that it is not. We are a small town rural hospital.

Drew Webb

At this time, I do not have enough knowledge to suggest what services should be expanded or eliminated. My understanding is the EPH Senior Management Team is reviewing the operational and financial details of each service and will present findings to the Board. As stated earlier there are services that require special treatment or equipment, but the volume of procedures may not support the investment. These services may then be coordinated with resources and facilities already available in the Valley. I also believe this should not be a decision based on finances alone but historical community needs, special interests, etc. should also be part of the discussion. There are new services that are scheduled to be added to EPH capabilities.

4. What issues or concerns do you hear from of Estes Valley residents?

David Batey

When I hear from our community, it is usually about their personal healthcare experiences at EPH. Many are grateful for the excellent care they have received. Some have questions about services offered at EPH and how to get them. Some describe experiences that were unsatisfactory. I relay all of these communications to the EPH CEO because it is his responsibility to convey the good experiences to those involved if they can be identified, and to investigate the circumstances of the unsatisfactory experiences for remediation. I rarely hear comments about Board-level policy deliberations or decisions unless it is controversial like the Colorado End-Of-Life discussions, adding Urgent Care, or ending the Skilled Nursing Facility service.

John Meissner

That EPH doesn't accept certain forms of insurance, that radiologic studies are 30% more expensive than the valley, and no faster or better, that the current board didn't campaign on any of the changes they made, but rather waited until being elected to implement changes as if they had somehow been given a mandate, that in a community where 37% of the population is over 65 years of age, it is problematic or borderline criminal to eliminate a skilled nursing home. That most people have already voted with their feet, and go elsewhere. Since I have a medical background, I also hear horror stories of potential malpractice, but having never stepped foot in the hospital except as a healthy visitor, I have no way of knowing if these events are commonplace or outliers.

Eric Owen

As a nurse who arrived in Estes in 2013 right after the flood, now working in hospice and doing private duty nursing in our community, I hear a lot. I hear imagining prices are

high. Employees are underpaid for the cost of living in the area and there is over billing by the billing department.

Drew Webb

The questions and concerns I hear from residents are related to availability of services and a concern for the ongoing financial viability of EPH. I believe there needs to be a better understanding of the service capabilities at EPH and the quality and expertise of the physicians, nursing, and support staff. Residents tell me how important EPH is to our community, and we should focus on maintaining sustainability in any way possible. There were frustrations caused by the pandemic regarding access to services, such as elective surgeries, primary care visits, therapies, etc. which some residents were able to access in the Valley. There is great confidence that the new MRI capabilities will minimize having to seek services elsewhere.

5. How can this board better communicate with the public on a regular basis?

David Batey

As pandemic restrictions are lifted, with Board agreement, I would support "EPH Board Talks" at regular intervals like those held by the Town Board. With restrictions lifted, I expect we will have hybrid meetings with in-person and electronic options for public attendance. Whether attending Board meetings in-person or electronically, the public can comment on items not on the agenda, and they can comment on each agenda item. From May 2017 forward, there are video recordings of Board meetings and meeting materials available to the public on the EPH website. In addition, there is currently communication from EPH to the public through Trail Gazette articles on Board meetings in print and online, and through EPH blast emails.

John Meissner

By providing contact information, including emails and telephone numbers of board members and the CEO, on the EPH.org website. By holding more public meetings where the audience doesn't have to register, as if they were being tracked, and escaping less often to executive sessions. Why would you require audience members to sign in to public meetings? Is the intent to disincentivize public attendance, or somehow track miscreants? By hosting an open Q&A once a month on neutral ground outside the hospital. By using the Trail-Gazette for something other than a propaganda arm, with fluff coverage exchanged for reduced advertising rates.

Eric Owen

The hospital does an excellent job positioning employment positions in both of the local papers. The minutes of their meetings are available online but I don't see why we could not have a column in the paper with updates or a online forum in our current portal. Oh

and give the community straight answers, no matter if it's good or bad new. Stop treating the EP community like mushrooms, we want transparency.

Drew Webb

The Board is elected by the community and communication is an obligation. The responsibility of the Board is to provide the highest level of communication. As restrictions are lifted, I see more opportunities to interact directly including a return to public attended in person Board meetings. The community needs to better understand how to access available information. Meetings are open to the public and citizens are welcome to participate. All meetings are electronically recorded and posted on the EPH website including minutes. The Trail Gazette reports on meeting and is available in print or online. I would recommend examining ways for the Board to more closely interact with the public on specific issues and answer questions directly.