

**BOARD OF TRUSTEES
DECEMBER MEETING MINUTES
WEDNESDAY, JANUARY 10, 2018 4:00 P.M.**

MEMBERS PRESENT: Kevin Bailey, Ron Mischke, Gene Davis, Shirley Coulter, Dixie See, David Smith, and Dr. Tim Scott

MEMBERS ABSENT:

Others Present: Mike McCafferty and Dr. Ian Hunter

CALL MEETING TO ORDER

Kevin Bailey, Chairman, called the meeting to order at 4:01 p.m.

PUBLIC COMMENTS, INTRODUCTIONS

None.

APPROVAL OF AGENDA and MINUTES

The agenda for the December Board of Trustees meeting were reviewed. Dr. Scott moved to approve the agenda as presented. Gene Davis seconded the motion. Motion carried.

The minutes from the November board meeting held on December 6, 2017 were reviewed. David Smith moved to approve the minutes. Shirley Coulter seconded the motion. Motion carried.

OLD BUSINESS

None.

QUALITY COMMITTEE REPORT

The Quality Committee reviewed various safety events, medication bar scanners, and conscious sedation safety. Hand hygiene is trending upward with 90% compliance in the previous 2 months; December data is not available at this time. The flu vaccination rate is at 92%, which equates to 997 people having received the vaccination. The committee is also evaluating competency methods.

The Quality Committee has approved the Performance Improvement Plan for 2016/2017. Ron Mischke motioned to approve the Quality Plan as written. Gene Davis seconded the motion. Motion carried. The committee will begin work on the 2018/2019 plan.

MEDICAL STAFF REPORT

No report at this time.

ADMINISTRATION REPORT

Ann Aksamit, Home Health/Hospice Manager presented an overview of the department's annual report. Ann introduced Dr. Kris Schamber, Medical Director for Home Health and Hospice. A surveyor with the State commented that staff has the best hand hygiene practices and plan of care in a home health agency she has ever seen. Home Health increased visits by 1100 visits last year. The department is working on a certification for a community based palliative care program in the upcoming year. Hospice has a Level 1 designation for the veteran's program end of life care and will continue to work on achieving a Level II designation. Dr. Schamber attends the visits with the veterans as well. Community education on the Hospice program continues to be a focus for the staff.

Mike had the staff members in attendance introduce themselves to the board. The majority of the group represents the leadership of the hospital. The leadership in attendance is in support of the Lean initiative that is being presented to the board today.

Operational Plan – Information was sent to the board in advance of the meeting for review and consideration. The plan outlines and identifies what we want to accomplish in the next 2 years (January 2018 thru December 2019) relative to our current 4-year strategic plan. The plan is in line with our pillars as follows:

Growth – The hospital is proposing to pursue Lean transformation; a Lean management system and methodology to sustain improvement.

People – The goal is to develop and retain employees. The hospital will utilize the Gallup Q12 survey, with the goal of 90% participation by March 31, 2018.

Service – The hospital goal is to increase patient satisfaction scores. These scores tie into our reimbursement by CMS and are measured by HCAHPS.

Safety – The goal is to maintain a participation rate of 90% in the hospital and improve the overall positive response rate to the 75th percentile with a 90% participation rate in the clinics. This is measured by the Hospital Survey of Patient Safety Culture (HSOPS survey) and is done every 18 months.

Quality – The goal is to obtain a CMS Star Rating of 4 Stars by December 2019.

Finance – The goal is to achieve and sustain an operating margin of 1.5%. The work of redefining the budget and planning process on a continuous basis; educate on the standards and planning around financial expectations.

Lean and the Simpler Proposal – A large part of the Operational Plan has to do with the execution of the plan and how to achieve the goals outlined. The hospital will need a strong, standardized management system in place adding value to the patient along with continuous improvements to create a positive experience for the people we care for along with eliminating waste. The by product will drive improvement in service, safety, and quality. The managers and physicians are excited to introduce this culture into our organization and to experience process improvement with a Lean management system. Mike recommends we implement Lean and engage Simpler as our consulting partner to implement Lean management concepts over the next three years. This will provide the hospital with an opportunity for break through results with proven methods to improve and sustain measures; the use of scientific data to break through barriers. Mike recommends approval of the Operating Plan for January 2018 thru December 2019, utilizing Lean as the management system. Along with the authorization to engage Simpler to be the consulting partner, Mike requests an expenditure of \$375K in non-budgeted funds for the remainder of the fiscal year. Ron Mischke moved to approve the Operation Plan along with the authorization to engage Simpler as a consulting partner and an expenditure of \$375K of non-budgeted funds in order to proceed. Dr. Scott seconded the motion. Motion carried.

FINANCE COMMITTEE REPORT

The hospital experienced positive results the month. The operating profit for November was 2.1% in conjunction with operationally generating cash while realizing A/P liability. There was growth in the TCU and in surgical volumes; the Cath Lab was stagnant for the month and Endo saw some improvement. The hospital had a negative payer mix, yet experienced improvement, and the write-offs improved. We were able to hit our break even goal in the 2nd quarter.

FOUNDATION REPORT

The Foundation hosted the Employee Partner celebration in December. Partner gifts totaling \$36K will go toward the MRI project and suite update; thanks to the 430 employee partners for the gift. While the Foundation is looking to increase that number, they have received great response from the ongoing membership drive. Foundation staff is meeting with community members to talk about the great things the Foundation is involved in. The Foundation will be doing an article for The Press for a publication on philanthropy. There has been over \$8M that has flowed through the Foundation to the hospital over the years, and we need to continue to let the community know what a gift can do to help the hospital. The Foundation will be working on their strategic plan in the coming month.

BUILDING COMMITTEE REPORT

The Medical Arts Complex expansion project is going well. The MRI construction documents are in the completion phase, and the hospital is awaiting approval from the State Department of Health.

OTHER BUSINESS

None.

EXECUTIVE SESSION

Kevin Bailey moved to adjourn into Executive Session at 4:50 p.m. after a short recess to discuss real estate and legal matters. Gene Davis seconded the motion. Motion carried.

The Board reconvened into general session at 5:13 p.m. with no action taken.

ADJOURNMENT

With no further matters to come before the board, the meeting adjourned at 5:13 p.m.

Patty Forister, Recorder

Shirley Coulter, Secretary