MEMBERS PRESENT: David Smith, Gene Davis, Dixie See, Shirley Coulter, Ron Mischke and Gary Miller

MEMBERS ABSENT: Kevin Bailey

Others Present: Mike McCafferty, Dr. Sara Smith

CALL MEETING TO ORDER

Ron Mischke, Vice Chairman, called the meeting to order at 4:00 p.m.

PUBLIC COMMENTS, INTRODUCTIONS

None.

APPROVAL OF AGENDA and MINUTES

The agenda for the January Board of Trustees Meeting was available for review. Dixie See made the motion to approve the January Board agenda. Gene Davis seconded the motion. Motion carried.

The minutes from the December Board Meeting, held on January 13, 2016 were reviewed. David Smith made a motion to approve the December Board meeting minutes. Shirley Coulter seconded the motion. Motion carried.

OLD BUSINESS

None.

QUALITY COMMITTEE REPORT

None. There has not been a Quality Committee meeting since the last report on January 13, 2016.

MEDICAL STAFF REPORT

None.

ADMINISTRATION REPORT

Information Systems Overview~ An overview of the work session held last month included EHR and ongoing use, meaningful use, physician documentation, and compliance and regulatory standards and continued optimization. Sheridan Memorial Hospital wrote into the master agreement with Cerner that we would own the software and would pay for maintenance and all upgrades to stay compliant. The focus remains on quality, safety and patient satisfaction.

Medical Office Building Overview~ We continue to go through iterations on the project and a number of the other projects slated in the coming years and where to allocate our resources. We want to make sure we create the right space for the future; in addition, we have Hospice and TCU to
consider and we are in a 70 year old building that needs to be maintained. A thoughtful approach is being taken with consideration of our capital budget and other needs. There will be more meetings to come in February.

**Strategic Plan Overview and Recommendation (Action)**~ Laura reminded the audience of the strategic planning process and how it has brought us to where we are today. In all the meetings that were held, clear themes and messages came about pertaining to patient centered care. The Vision of the hospital is the same but the mission has changed. The Pillars of Excellence are to guide the hospital operationally. Safety has been identified as a pillar of its own and is no longer grouped in with quality. There are growth initiatives, but they will be a by-product of us doing everything well with the other pillars and will be built around people, retention, and growth of investment, technology, and projects such as the ICU.

Leadership is requesting approval to change the Mission Statement of the hospital to read “To serve our community with excellent patient-centered care” and the addition of Safety to our Pillars of Excellence. David Smith made the motion to approve the strategic plan as presented. Gary Miller seconded the motion. Motion carried.

**Legislative Forum** – Mike presented at a Legislative Forum that was held at the City and spoke of the funds and services concerning Title 25 patients. There is a level of intensity to keep them safe and to provide the treatment that is needed. We will continue to address the concerns with our legislators.

**Nursing** - Mike acknowledged Charlotte Mather, our CNO who has been employed for 4 years. Charlotte has provided leadership and guidance, developed education, outstanding nurse leaders across the system of care we provide. Charlotte has applied to the Wyoming Board of Nursing to be considered as a board member (clarification and amendment approved with the February Board meeting held March 2, 2016).

Charlotte commented on the infrastructure of nursing care and is excited about the nursing leadership we currently have. We have set the foundation to start a Pathway to Excellence Designation for nursing. This designation is part of the Magnet family, but geared for smaller hospitals, with 12 areas of achievement identified and documented. There is a new core model of nurse team leaders leading at the operation level and mentoring people into leadership roles. There is a transition model in place for the new graduate nurses from the nurse residency program into their professional role. This has been very successful and we have been able to retain these new nurses. Sheridan Memorial Hospital is starting up a peri-operative residency program, similar to the nurse residency program, to groom our own operating room nurses and techs.

**FINANCE COMMITTEE REPORT**

We had a great month in December. Being half way through the year we have increased volumes on Med/Surg and the ICU; Urgent Care and the Emergency Department are trending higher. We continue to look at ways to manage labor and work force pool. Nathan continues to watch the payer mix and has seen slight shifts in the mix.
Sheridan Memorial Hospital is a county hospital and our annual audit is incorporated into the county audit. It was noticed that there was some inconsistencies and we have followed up with our audit firm. After evaluation, it has been decided that we will move to another firm moving forward with the next fiscal year audit.

FOUNDATION REPORT –

Ada Kirven, Executive Director of the Foundation and Robin Horsley, ICU Manager were on the radio this morning, speaking of the new ICU and patient centered care. Conversation was around the campaign and the changes that will be seen with the new ICU and the opportunity for the care of additional patients with more space. In 2013 there were 50 ICU days a month; we now average over 100 ICU days a month. This will allow patients to stay locally instead of having to travel.

Ada reminded everyone of the Auxiliary annual meeting and luncheon to be held on Friday, February 26th. The Auxiliary will be celebrating a big milestone. The volunteers work hard all year long to benefit the hospital. Everyone is encouraged to attend.

BUILDING COMMITTEE REPORT

The new medical office building continues to be discussed. There are 3 active projects at this time; the roofing project will be starting in 2-3 weeks’ time, the ICU is moving along on schedule and the generator at the Welch Cancer Center is installed and online. The schedule on the ICU may see a delay as the existing roof over maintenance will be the floor in the ICU and it needs to be leveled. Warmer weather is needed for the leveling compound to be applied. This will not change the cost of the project, due to the delivery method of the project (CMAR).

OTHER BUSINESS

None

EXECUTIVE SESSION

The meeting convened into Executive Session at 4:50 pm to discuss real estate and legal matters.

ADJOURNMENT

With there being no action taken in Executive Session and no further business to come before the Board, the general meeting adjourned at 5:17 pm

Recorder, Patty Forister

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David Smith, Secretary