CALL MEETING TO ORDER

Mr. Ron Mischke, Chairman called the meeting to order at 3:02 p.m.

PUBLIC COMMENTS, INTRODUCTIONS ~

None

APPROVAL OF AGENDA and MINUTES

The agenda for the March Board of Trustees Meeting was available for review. Motion was made by Mr. Kevin Bailey to approve the March Board agenda. Mr. Gene Davis seconded the motion. Motion carried.

The minutes from the February Board Meeting, held on February 26, 2014 were reviewed. A motion was made by Ms. Dixie See to approve the February Board meeting minutes. Mr. David Smith seconded the motion. Motion carried.

OLD BUSINESS

No old business to discuss.

QUALITY COMMITTEE REPORT

Dr. Addlesperger stated they have established a weekly senior leadership quality meeting to review safety events; senior leadership is trying to be more proactive and preemptive and to raise the level of safety awareness. There is a culture of safety survey that has gone out to all personnel and responses should be back in a week and results back within a month. This is an accreditation requirement that needs to be done about every 18 months. The last survey was done 2 months after going live with the electronic medical record, Cerner. Leaders have a good plan in place to work with the employees on communication and teamwork. There are no serious safety events to report at this time. There was an increase in numbers in February but Dr. Addlesperger feels that this is due to an improvement in the reporting process. The Leaders are encouraged to see numbers go up and will be performing root cause analysis for improvement purposes.

Mr. McCafferty shared the results of the Culture of Kindness Survey that was completed last November 2013. The survey had 12 questions on it and each question was rated 0 to 5. The average overall score of the survey was 3.71 out of a possible 5. We need to raise the bar on how
we treat each other and how patients are being cared for. The survey was another indicator on how staff views the workplace. SMH will continue to strive for quality interactions.

Mrs. Charlotte Mather stated that she and Dr. Addlesperger missed the February board meeting as they were at a Care Innovations and Transformations conference with med/surg nursing staff. This is a national program with 12 organizations participating. Both leaders have found this to be very effective and the staff attending is “on fire”. There are approximately 100 post-it notes in the nurse’s area with ideas for improvements that those attending this workshop would like to work on. The staff will review and prioritize, picking the top 3 to work on to implement change; eventually getting to all of the notes. Mrs. Mather said that this is really exciting. The speakers and other hospitals attending have the same story, and face the same challenges SMH does; the staff will start slow and work to learn change and methodology (how to make effective changes). Staff will present ideas and changes internally. Currently, there are monthly phone calls with 12 other organizations participating to discuss improvements and to share information. Since all the organizations participating are facing the same issues, sharing the best of improvements with each other will make a big impact. Mrs. Mather said that they are rolling out a national time in motion study on nurses. Management will have staff carry a tracking device to see how staff is spending their time; at the bedside, charting etc. It is felt that this is the best way to determine how the nurses are prioritizing their time.

Dr. Addlesperger reported on site verification, stating that it is the culture that drives it ~ the organization and people who see the value of it. This may uncover other issues in the operating room that can leave us vulnerable. Wrong site surgery doesn’t happen often but it does happen occasionally. Culture is vigilant. Survey gives insight into your organization on safety thinking.

MEDICAL STAFF REPORT
Dr. Sara Smith gave an update on the Ordering Authority Policy that requires approval by the Board as per CMS guidelines. The patients in house require an order from a provider with SMH privileges. The policy defines the ordering authority by licensed physicians with privileges from a licensed physician with no privileges. All orders require a physician signature. The policy will allow licensed physicians with no privileges to order non-invasive diagnostic tests only. The policy mirrors the CMS requirements and is tailored to the hospital. The policy is being recommended by the Medical Executive Committee to be approved as written. Motion was made by Mr. Kevin Bailey to approve the Ordering Authority Policy. Mr. Gene Davis seconded the motion. Motion carried. Dr. Smith also notified the Board that the next quarterly medical staff meeting will be June 10, 2014.

EMR REPORT
Mr. Nyle Morgan had no report on the EMR at this time.

ADMINISTRATION REPORT
Mr. McCafferty stated that he will schedule multiple strategic planning meetings during the weeks of May 5, 2014 through May 16, 2014. The meetings will be for hospital employees, physicians and the public. Mr. McCafferty will put an agenda together and will take a couple of different approaches tailored for each group. He would like to gather information on the types of services and types of
facilities needed; receiving feedback on where we need to go in the future and to see if everyone is on the same page on what healthcare looks like for Sheridan and the country. Again, these sessions will be information gathering venues to help plan for the future.

Mr. McCafferty stated that he will be out of the office on April 30, 2014 for the next Board of Trustees meeting and asked if the board would be opposed to moving the meeting to Thursday, May 1, 2014. There was no opposition to this request and a reminder will go out to the board with this change.

Mr. McCafferty stated that we will not move forward on the ICU expansion until we study the business impacts and understand what is at the heart of the enhancements and expansion. Consideration needs to be given to the type of services we will offer in the future and at what level and extent of services. Mr. McCafferty has met with TSP asking for an indication on alternative type of plans and expects to hear back by April 17, 2014. Mr. McCafferty would like a few board members present at this work session to hear the alternative options. An e-mail will go out to the Board of Trustees to see who can attend the April 17th meeting.

Mr. McCafferty reported on the SGR Legislation, in which every year, the House and Senate finagle the reimbursement amount to physicians. Reimbursements to physicians have decreased by 25%. There will be provisions for physician reimbursements with ICD 10 as well.

The IDC 10 implementation date has been delayed for at least one year until October 2015 and could possibly extend longer than that. CMS has put the implementation on hold. The hospital has contracts on the line with physicians and staff for reimbursements. We have an unfunded mandate on the hook and it will vanish because we will have to go through the process again next year for training. SMH will finish putting in the new software and not implement it at this time. The CMS director was pushing for it a month ago, but CMS was not prepared for the change. The AMA put the brakes on it as well. This will have a huge impact on physician offices. As a reminder, the ICD 9 has approximately 14,000 diagnostic codes and the ICD 10 has approximately 68,000 codes which is more specific diagnostic codes for reimbursement.

Mr. McCafferty informed the Board that in preparation for the Joint Commission, there will be a mock surveyor coming in two weeks to make sure we have everything in line. The lab is ready to be surveyed.

Mr. McCafferty reminded the members that the Keystone Awards will be April 24th and Board Member Dixie See is being recognized. Congratulations to Dixie.

FINANCE COMMITTEE REPORT

Mr. Ed Johlman stated that the hospital expenses are higher, the bad debt is down, and the hospital lost some money. However, the hospital’s insurance costs are half of what they have been in the past. And overall the balance sheet is good.

FOUNDATION COMMITTEE REPORT
Mrs. Ada Kirven spoke of the Nursing Scholarship Endowment and that there has been an overwhelming response and support of the program. The Foundation has seen over 60 nurses apply for scholarship awards and it is good to see the funds being used. The scholarships can be used for certification and conferences as well; the emergency department staff has applied for an on-line program for geriatric emergency training for nurses. There will be two (2) students graduating in May; Lori Gross and Adrienne Tapman. There are 15 college graduates through this program. By the year 2020, the expectation is to have a BSN or higher degree.

The Foundation staff and board are working on strategic planning and support initiatives. The Foundation staff is also working on a sponsor event which will be held April 26, 2014. Mrs. Kirven recognized Ms. Dixie See again on the Keystone Award.

**BUILDING COMMITTEE REPORT**

Ms. Dixie See had no report at this time.

**OTHER BUSINESS**

A Trustee Education Program will be in Casper on May 16, 2014. This is a free program but registration is still required. A registration form has been provided to each board member. Mr. Ron Mischke will be a presenter at this meeting.

A Doctor’s Day Breakfast is April 4, 2014 in Conference Rooms A & B. The National Doctor’s Day recognition was March 30, 2014. A plate of cookies was delivered to each doctor’s offices April 2, 2014 in recognition and celebration of Doctor’s Day.

**EXECUTIVE SESSION**

With no further business, the meeting moved into closed session at 3:50 p.m. for discussion of personnel.

The meeting then reconvened into public session at 4:10 p.m.

**ADJOURNMENT**

There being no further business to come before the Board, the meeting adjourned at 4:10 p.m.

Recorder, Patty Forister

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Michael Strahan, M.D., Secretary