BOARD OF TRUSTEES
SEPTEMBER MEETING MINUTES
WEDNESDAY, OCTOBER 2, 2019 4:00 P.M.

MEMBERS PRESENT: David Smith, Gene Davis, Kevin Bailey, Dr. Timothy Scott, Shirley Coulter, and Andrea Mellinger

MEMBERS ABSENT: Joe Wright

Others Present: Mike McCafferty and Dr. Ian Hunter

CALL MEETING TO ORDER
David Smith, Chairman, called the meeting to order at 4:00 p.m.

PUBLIC COMMENTS, INTRODUCTIONS
Hannah Hutton was introduced. She is a new reporter with Sheridan Media and will be covering the board meetings along with Pat Blair.

APPROVAL OF AGENDA and MINUTES
The September board meeting agenda was reviewed. Gene Davis requests that the agenda be revised by adding an action item under finance pertaining to software licensing. Mike McCafferty requests that the same matter be added under the Administration Report so he can give an update before any action is taken under the Finance Committee report. Dr. Scott motioned to approve the revised agenda. Kevin Bailey seconded the motion. Motion carried.

The minutes from the August board meeting held on Wednesday, August 28, 2019 were reviewed. Dr. Scott moved to approve the minutes as written. Shirley Coulter seconded the motion. Motion carried.

OLD BUSINESS
None.

QUALITY COMMITTEE REPORT
The Quality Committee reviewed readmission data. Sheridan Memorial Hospital’s readmission rate is half of the national average at 7.4%. Of that percent, about 40%-50% of our readmissions are on patients that are on 10 medications or more. Pharmacy and Case Management are working on strategies to address those with multiple medications.

The committee also reviewed healthcare acquired infections, hand hygiene rates, CMS core measures, and sepsis rates; all areas showed to be in compliance and scoring well above the national average.

MEDICAL STAFF REPORT
Dr. Hunter reports that the medical staff has been refining their processes with Ongoing Professional Practice Evaluations (OPPE) and Focused Professional Practice Evaluations (FPPE). The medical staff oversees the clinical background, expertise, and citizenship required parameters in which the medical staff works; how we behave and deal with each other and do evaluations of clinical performance on the medical staff. This is a challenging topic and the medical staff has a very robust process in place.

On behalf of the Medical Executive Committee and the Credentialing Committee, the following individuals are recommended for appointment and reappointment to the board. There are no concerns or red flags.
The above information was provided to the board for review and consideration prior to the meeting. Kevin Bailey moved to approve the appointment and reappointments as presented in executive session. Andrea Mellinger seconded the motion. Motion carried.

**ADMINISTRATION REPORT**

**Compliance Education** – one component of a compliance program is the investigation, reporting and refunding of overpayments. CMS conducts audits, and internal auditing is done as well to determine if our processes are correct on how we bill and code for services. SMH has systems in place to ensure compliance with federal regulations; ensuring errors are corrected and that education is provided to avoid similar errors from occurring in the future.

**Microsoft Licensing** – Microsoft Corporation audits organizations across the country who utilize their software. Sheridan Memorial Hospital was randomly selected to participate in an audit with Microsoft. We utilize a third party vendor who assists the hospital purchase the necessary licensing for the software based on our review of our needs. Sheridan Memorial Hospital conducts an annual internal audit as well. The results of the audit findings will continue under the Finance Committee portion of the board meeting.

**Support of Campbell County Memorial Hospital** - As all of you are aware, the Gillette hospital was hit with a ransomware virus which shut down their systems. The Gillette hospital was unable to provide any health care services and they discharged their patients to other hospitals. Additionally, they had to divert any new patients as well. Sheridan Memorial Hospital is doing the right things to protect ourselves; systems are in place, education of
staff is occurring, and redundancy in our backup systems is in place. We are doing things differently to provide extra layers of protection for the hospital. However, we are aware that risk still exists, and there is always potential for an attack.

**Community Benefit Report** – a copy of the Community Benefit Report was provided to each board member, and consists of information about how we are positioned in the community; putting the consumer at the forefront relevant to pricing, charge structure, and payer mix. This report explains what we are doing in the community. A distribution plan is in place to get the report to our county and community partners and inviting them to have an open conversation. Mike will meet with various business leaders in the community to discuss what the hospital is doing and how we can care of their employees within the community.

**Strategic Deployment Plan** - along with the Community Benefit Report is our Strategic Deployment Plan. This plan provides an overarching look at what we are doing strategically and the tools used to operationalize and introduce Lean into our organization.

**WHA Conference Update** – The Lean Team presented the hospitals’ journey into Lean to the attendees at the Wyoming Hospital Association Conference. Andrea Mellinger, board trustee attended the conference and stated that it provided her with a better understanding of Lean; the presentation was professional and there was great interaction with the attendees. David Smith, Chairman, also attended and stated that the presentation clearly inspired many of the attendees. The board appreciates leadership follow-up on our lean transformation going back to refine what isn’t working to get results. The hospital has been applying lean methodology for 19 months.

**FINANCE**

The finance committee met with representatives from our insurance carrier, reviewing the hospitals’ portfolio of insurance coverages. Cybersecurity was added three years ago. Based on the current environment, a cyber-attack is our highest risk for business interruption, and the decision was made to increase coverage to $3M (currently at $1M).

August finance performance incurred a loss outside of what we were projecting. There is a slowdown in volumes across the organization. The expectation is that September will look the same. We are watching volumes on a daily basis. The payer mix has improved from a year ago and continues to be a positive note.

**Microsoft Audit** – Microsoft contracts with Deloitte to perform audits on companies that utilize their products. Deloitte announced that they would perform an audit at SMH to determine if we have all the appropriate licensing for our hardware that drives the Microsoft software. Internally, the hospital does this on an annual basis as well. We pay a fee every year to upgrade our systems with new software versions when available to reduce the potential of a ransomware attack on our operating systems. As stated, SMH performs an audit, we have vendors perform an audit, and our 3rd party reseller performs an audit. Based on the most recent audit from Deloitte, we were short licenses for what we are running and owe Microsoft $518,529.68. Gene Davis, on behalf of the Finance Committee, made the motion to pay the referenced amount to Microsoft based on their audit. Andrea Mellinger seconded the motion. Motion carried.

**FOUNDATION REPORT**

Cody Sinclair, Chief Development Officer, spoke of the Project Heartbeat Campaign and their outreach project to donors relative to this.

Ada Kirven, Director of Donor Relations and Jasmine Slater, Volunteer Coordinator, spoke of The Link, which will is Saturday, October 19th. Lots of work has been happening in the last 6-8 weeks gearing up for the event in 3 weeks. We have a great response from corporate sponsors in addition to honor and memorial gifts. There are over 100 volunteers that will be helping with this event. Education is a big part of screening and prevention. To help with that, the Foundation has scheduled a health talk series in a lunch and learn format targeting the high school, college, and the girls’ school. The committee is working with the patient financial advocates as well to let patients know of funds available for screening if they cannot afford it.
The Foundation is also working with a patient who is willing to tell her story; so rewarding on how she got here through a process of teams working together to benefit our community.

**BUILDING COMMITTEE REPORT**
No building committee was held and there is nothing to report at this time.

**OTHER BUSINESS**
None.

**EXECUTIVE SESSION**
David Smith moved to adjourn into Executive Session after a short recess to discuss real estate and personnel. Gene Davis seconded the motion. Motion carried.

The Board reconvened into general session at 5:08 p.m. with action taken on the appointment and reappointment of medical staff. Please see the Medical Staff Report above.

David Smith moved to go back into Executive Session at 5:16 pm. Andrea Mellinger seconded the motion. Motion carried.

The Board reconvened into general session with David Smith making the motion to authorize Kevin Bailey to proceed as discussed in executive session. Shirley Coulter seconded the motion. Motion carried.

**ADJOURNMENT**
With no further matters to come before the board, the meeting adjourned at 5:26 p.m.

Patty Forister, Recorder

Shirley Coulter, Secretary