

**BOARD OF TRUSTEES  
AUGUST MEETING MINUTES  
WEDNESDAY, AUGUST 28, 2019 4:00 P.M.**

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

**APPROVAL OF AGENDA and MINUTES**

The August board meeting agenda has been reviewed. Gene Davis motioned to approve the agenda. Andrea Mellinger seconded the motion. Motion carried.

The minutes from the July board meeting held on Wednesday, July 31, 2019 were reviewed. Gene Davis moved to approve the minutes as written. Andrea Mellinger seconded the motion. Motion carried.

**OLD BUSINESS**

None.

**PUBLIC COMMENTS, INTRODUCTIONS**

None.

**QUALITY COMMITTEE REPORT**

The Quality Committee reviewed the newly implemented inpatient falls program, in which a staff member stays with a patient when going to the bathroom. Staying with the patient has proven that there is a decrease in fall occurrences.

HCHAPS were reviewed and we are working on various programs to increase service to our patients.

Mammography call back numbers were reviewed as well. The national average is 9% of patients are called back; Sheridan Memorial Hospital has an average of 5.79%. This equates to 150 patients that do not need to be rescanned; we have detected 41% more instances of cancer with the implementation of the new mammography equipment.

The Quality Committee approved the Infection Prevention Plan.

**MEDICAL STAFF REPORT**

Dr. Hunter reminded the board of the Quarterly Medical Staff meeting on Tuesday, September 10<sup>th</sup>. Any board member is welcome to attend. Credentialing matters will be discussed in executive session.

Dr. Hunter, on behalf of the Medical Executive Committee and Credentials Committee, presents the following Physicians, Advanced Practice Clinicians, and Independent Practitioners for reappointment.

**MEDICAL STAFF REAPPOINTMENTS**

<b>Name</b>	<b>Category</b>	<b>Specialty</b>
<b>Robert Merchant, MD</b>	Telemedicine/Delegated	Critical Care
<b>David Wheeler, MD</b>	Telemedicine/Delegated	Neurology

August Board of Trustee Meeting  
August 28, 2019

Name	Category	Specialty
Tracy Amadio, FNP-C	Advanced Practice Clinician	Family Nurse Practitioner
Autumn Barrett, PAC	Advanced Practice Clinician	Physician Assistant
Nina Beach, FNP-C, AOCNP	Advanced Practice Clinician	Family Nurse Practitioner
Christopher Bilyeu, RT, RPA	Advanced Practice Clinician	Physician Assistant
Diana Charlson, FNP-BC	Advanced Practice Clinician	Family Nurse Practitioner
Amber Friis, LCSW	Non-Member Licensed Independent Practitioner	Licensed Clinical Social Worker
Jennifer Graslie, PAC	Advanced Practice Clinician	Physician Assistant
Janae Harper, AGPCNP-C	Advanced Practice Clinician	Adult Gerontology Primary Care Nurse Practitioner
Melanie Kawulok, FNP-C	Advanced Practice Clinician	Family Nurse Practitioner
Elizabeth Mahoney, LCSW	Non-Member Licensed Independent	Licensed Clinical Social
Name	Category	Specialty
		Practitioner Worker
Amanda McIntire, FNP-C	Advanced Practice Clinician	Family Nurse Practitioner
Jason Otto, PA-C	Advanced Practice Clinician	Physician Assistant
Erin Strahan, PA-C	Advanced Practice Clinician	Physician Assistant
Kelly Thomas, FNP-C	Advanced Practice Clinician	Family Nurse Practitioner

Andrea Mellinger moved to approve the reappointments as presented. Joe Wright seconded the motion. Motion carried.

**ADMINISTRATION REPORT**

Compliance Report – Lynn Smith the Compliance Officer reports that the Conflict of Interest forms have been received and reviewed; there are no conflicts that require mitigation or action.

Compliance Education | HIPAA Refresher Continued – Last month’s education pertaining to HIPAA was talked about in generalities with various scenarios given.

The Compliance Officer, Lynn Smith, advised the board on the implementation of HIPAA regulations by the organization to decrease the likelihood of getting any fines; and how the compliance program captures concerns and reports violations. The forms that are utilized for reporting purposes were reviewed and discussed. The forms are part of a formal process, which adds consistency to the organization on how a concern is examined to determine if there is a breach. The hospital has a very healthy reporting system, whereas employees are confident in self reporting. Next month Lynn will do education on the overall compliance program.

WHA Conference – Mike thanked the board members who will be attending the Wyoming Hospital Association Conference in Cheyenne next week. There will some good speakers, state legislature and networking opportunities for those in attendance.

At this year’s conference, the Lean Team will be doing a presentation on the process we are taking relative to our Lean Transformation journey. The team will share the wins we’ve had, lessons learned, and the challenges we have faced.

Strategic Deployment | Tiered Metrics – the hospital is 18 months into our Lean transformation and we have learned much; the evolution in lean management has evolved during this time. We have not made the headway we had anticipated and have come to the conclusion that work below the A3 level needs to be done and a common set of metrics defined. These specific metrics will contribute to a higher level goal. Metrics should be implemented in a couple of weeks. The primary driver is to have goals down to direct staff levels; to hold each other accountable to

August Board of Trustee Meeting  
August 28, 2019

sustain the improvements being made. The metrics defined will be performance measures or process measures; whatever is most effective to reach the higher level goals.

### **FINANCE**

We have had positive operations for two months in a row. July saw improved financial performance, with an improved payer mix. We continue to tackle our cost structure. Spinal cases have dropped off, but we saw more outpatient cases. July was busy, and August was soft until last week. We are on track for the 1<sup>st</sup> quarter. Nathan Stutte, CFO will let the board know the next quarter outlook. Cash is down, as there was a slowdown of the cost receivable process. We are now back on track.

### **FOUNDATION REPORT**

The fundraising efforts for Project Heartbeat has commenced. Cody Sinclair, Chief Development Officer is excited to announce a \$150K gift that was received from the William F. and Lorene W. Welch Foundation towards the purchase of Intra-Aortic Balloon Pumps and IntraSight 5. The Foundation will seek matching gifts from other donors for funding on this life changing equipment and technology. This will have a major impact on the Cath Lab.

Ada Kirven made the board aware of a calendar of events within the community in the next couple of months. This list of events will be emailed to the Board of Trustees. On-line registration is available for the Link this year.

### **BUILDING COMMITTEE REPORT**

There are two ongoing projects. The parking lot project is complete except for the guardrails on the emergency department lot and the handrails on the stairs at Dialysis. The handrails have been fabricated and are being powder coated; installation should occur sometime next week. We are working on warranty issues for repairs pertaining to cracked concrete in the lower parking lot.

The contractor continues to work on the punch list for items pertaining to landscaping and concrete.

### **OTHER BUSINESS**

None.

### **EXECUTIVE SESSION**

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

The Board reconvened into general session at 4:45 p.m. with action taken on reappointment of medical staff. Please see the Medical Staff Report above.

David Smith moved to go back into Executive Session at 4:50pm. Andrea Mellinger seconded the motion. Motion carried.

The Board reconvened into general session at 5:02 pm with no action taken.

### **ADJOURNMENT**

With no further matters to come before the board, the meeting adjourned at 5:02 p.m.

Patty Forister, Recorder

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Shirley Coulter, Secretary