

**BOARD OF TRUSTEES
JANUARY MEETING MINUTES
WEDNESDAY, JANUARY 27, 2010 3:00 P.M.**

MEMBERS PRESENT: Harlan Rasmussen, Ron Mischke, Gary Miller, Dixie See, Dr. Michael Strahan, Bill Huppert and Randy Bomar

MEMBERS ABSENT: None

CALL MEETING TO ORDER

Harlan Rasmussen called the meeting to order at 3:00 p.m.

APPROVAL OF MINUTES

The minutes from the December Board meeting, held on January 6, 2010 were reviewed. A motion was made by Dixie See to approve the minutes; Ron Mischke seconded the motion and motion carried.

PUBLIC COMMENTS, INTRODUCTIONS

None.

QUALITY COMMITTEE REPORT

Randy Bomar reviewed the scorecard results and noted that under Quality (CHF) that we have made very good strides to obtain 100%. Follow-up discussion was held regarding HCAHPS communication held during last meeting. Lajune Bacon is currently researching why HCAHPS reports indicate apparent downward trend in our percentile for the year when our quarterly scores have been steadily rising. She will explain her research findings at the next meeting. Last month, nurse managers participated in an IHI webinar designed to help improve HCAHPS scores. The last session focused on a program illustrating how follow-up telephone calls to patients, made by a nurse or unit coordinator, raised the quality of hospital scores. We currently provide this follow-up service in the Emergency Department, Outpatient Surgery, Med/Surg. and in Home Health Care. Ms. Bacon explained that everyone involved in the current process is doing something different. She further explained that we would like to become more consistent in the telephone scripting, while adding a personal touch. She believes this will help to improve scores and provide the best patient care. She reported that progress is being made in this arena. Lee Ingalls explained Home Health Care makes follow-up phone calls a couple of days after discharge to make sure patients are safe and secure, to assure patients received their medications instructions, and remind them to make follow-up appointments with their physician. They are making calls for several physicians with patients over 65. Mr. Ingalls explained that while they play some phone tag it doesn't take long to complete the calls. Patients are thankful for the call

and in some cases; the telephone call has prevented them from coming back into hospital. Iris Hehn, Emergency Department Manager, explained that it is more difficult to make the contact with patients seen in the ED due to two factors: 1) timeframes; or 2) patients see the unlisted number associated with the hospital on their Caller ID and don't answer the phone. Nyle Morgan stated the second issue is being changed and currently, most hospital extensions will show on Caller ID as 673-2600. Mr. Morgan further explained that we could add more identification information if the need warranted.

Harlan Rasmussen asked about turnover sections that are always in the red. He wondered if we are using appropriate numbers or if we are doing anything to address it. Len Gross explained that there are varying factors when looking at turnover especially during recent economic times and spouses leaving community due to lack of work. This is an important area for HR to track and we use VHA for target comparison data. Ron Mischke stated that it is important to see numbers to show trends and for discussion purposes. Gary Miller noted that the turn-over targets are tough to achieve and if we did it would be fabulous. HR Avatar score measures how well our staff serves patients and overall service provided. The overall AVATAR score affects Gainsharing outcome.

MEDICAL STAFF REPORT

Sara Smith, M.D. was introduced and welcomed to Sheridan Memorial Hospital. Dr. Smith is the daughter of Dr. Chris Smith and we are happy she is here and treating patients at Big Horn Surgical. Dr. Smith expressed her thanks for the opportunity to move back to the community and work at Sheridan Memorial Hospital. She is excited to hear of the funds being raised for the digital mammography equipment but is impressed with the equipment all ready in place. Dr. Strahan noted her focus is on Women's Health and breast disease which promotes a good opportunity for the medical community in treating patients.

ADMINISTRATION REPORT

Strategic Planning – The current plan was implemented in 2007 and it extends through 2011. We are beginning the process for gathering input to develop the 2011-2014 plans. Discussions with department managers have taken place and the meetings for employees and community groups have been scheduled for early March. Dates will be determined for Physician and Board of Trustee sessions. These meetings are to discuss the future of health care services in the community, growth opportunities, what we are doing and where we are going. Over the next few months this input will provide a good indication of what facilities we need to support the growth of services.

Physician Recruitment - Mike McCafferty explained that he has had recent communications with a Psychiatrist who is coming for a site visit. Initially our financial goal for this service would have a neutral impact and would take a few years for a positive impact. While the practice is not a money maker, there are several benefits including the overall health of our primary care physicians who are currently doing work in psychiatry which is not their

specialty. This service could also decrease the number of psychiatric patients seen through the Emergency Department and assist with the 72-hour involuntary patient stays. Bill Huppert asked about Telemedicine benefit. Mike explained that presents an option for physicians to provide a service to patient but will not solve all problems. We could be the facilitator of that service as we have media equipment to provide access to physician and patients.

Mr. McCafferty has been in contact with an ENT physician who might be interested in relocating to Sheridan. Mr. McCafferty will keep everyone updated.

Primary Care – We will continue to recruit for an additional internist for Big Horn Mountain Medicine. The goal would be to have a group of four physicians in that practice. Dr. Nicole Caldwell will begin in January, 2011. Hometown physician campaign has been our focus to promote services that are available within the community. We have developed a good packet of information on each physician for both radio and press coverage.

Cancer Center – We continue the validation process of the study completed by the Oncology Management Consulting Group (OMCG) and currently do not have a recommendation to be presented. A report will be provided at the next board meeting on the exploration of the development of a new Cancer Center and the future expansion of cancer care services.

FINANCE COMMITTEE REPORT

Financial – Gary Miller stated that the Finance Committee met today to review the financials for the month of December. This year, staff worked hard on the expense side of the budget. We have higher than expected volumes and net income well over budget. The net income will be necessary for us to maintain for upcoming expenses associated with new services. We are currently half way through the FY and have a strong volume for the year with outpatient volume being up. The gross revenue for the month of December was over \$8.7M, the second highest revenue month on record. Ron Mischke asked why salaries (non-hospital) were off budget by 30%. Mr. Johlman explained that it is because of primary care facility expenses that were not budgeted. Depreciation currently under budget because of the timing issues of projects, but is spread over the year and by end-of year will be closer to budget. Randy Bomar reflected on the AR balance sheet and noted that during January 2008 we were at 75 days and now down to 52 days. Mr. Bomar stated this was amazing and great job to get money back into the door. The Patient Accounts Department was acknowledged for their efforts. The greater than 180-days-old AR accounts are the hardest to collect and for the first time, in more than five years, it has dropped below \$1.0M. Bill Huppert commented that AR finished December at 52 days which is far above expectations. Ed Johlman felt it worth noting that year-to-date total net income is \$2.06M and credits the entire staff for following the plan for the year-to-date. While supplies were over budget, Mr. Johlman stated that Dennis Songer, Materials Manager and staff continue to work hard to improve it. The following examples were given on ways that they have found to save money. One example shown was an Ice gel pack, the old item cost was \$2.89 each and the new product is only .92 each. Another example was the telemetry packs and

the cost was \$7.42 each and the new product is \$2.61. The Materials Department will continue to look for opportunities to lower medical supply costs.

Capital Equipment Requests

Finance Committee recommended the approval of the following requests:

Nursing - Lift System which is a budgeted item. It was explained that we received a \$50K grant to install this equipment, pay for staff training and cover additional costs related to implementation. We must invest a minimum of \$10K of our own funds in the project to retain the grant. Purpose of the equipment is for lifting patients in and out of a hospital bed, or turning them to avoid developing bed sores. Equipment will be installed in one patient room to test its usefulness. Based on the results we may pursue a more widespread use in the hospital. Greatest value of equipment will increase patient and staff safety. Mission statement noted this equipment would also help us become an employer of choice for nurses. LaNora Dixon further explained the State of Wyoming grant that she obtained, and answered questions regarding the Arjo Hunter Leigh lift system. A portion of the funds is for the equipment/installation and other part is for a clinical support program. The grant will cover and outline map processing and put in place the measurement over a year. Randy Bomar asked if they will get requests for future equipment after the trial period. Mike McCafferty acknowledged that we want to test it and if it turns out positive and we can quantify that it protects our patients by reducing patient falls and personnel, by reducing back injuries, it will bring us value. It was noted that the lift was good for up to 750-1000 pounds. Dr. Strahan confirmed that back injury for nurses or aides is one of the top 5 workers comp injuries reported. Mrs. Dixon stated that other systems were evaluated and ergonomic surveys dating back to 2005 were studied. This system had several elements in place for workplace prevention of injuries and also could be used for positioning for pressure ulcer prevention. Ed Johlman explained the estimated purchase price for the budget item is \$16,562 and less grant money of \$6,562 for a cost of \$10,000. After further discussion, Ron Mischke moved to approve the \$10,000 for the budgeted lift system; Gary Miller seconded the motion. After no further discussion, the motion carried.

Pharmacy – Pandora Pyxis Software – Budgeted Item. Ed Johlman provided an overview of the request from the Pharmacy Department for the purchase of the Pandora PYXIS software data system. The purpose of the software is to record, through the PYXIS units, the dispensing of drugs by clinical staff. The software will provide enhanced drug inventory which will reduce the cost of drug expirations. Pharmacy Manager, Kirsi Ludwig explained that the Pharmacy software gathers data from the Pyxis system to look at what is given to patients and providing accurate data for patients. The Board of Pharmacy and Joint Commission also require these reports. Financially, this will reduce drug cost by reducing inventory levels, improve patient safety and monitor drug expirations. Harlan Rasmussen asked who is responsible. Mrs. Ludwig stated that Pharmacy and Nursing have a code to release or pick up drugs based on physician order. Mike McCafferty asked what information is available regarding medication error rates. Kirsi Ludwig acknowledged that it will help us quantify if anyone removed wrong drugs or too much which should help decrease medication error rates. The estimated purchase price for this budgeted item is \$15,374. After further discussion, Dr. Strahan moved to approve the purchase of the

Pandora PYXIS software for \$15,374; Dixie See seconded the motion. After no further discussion, the motion carried.

FOUNDATION REPORT

Ada Kirven, Foundation Director, presented an update on digital mammography campaign. Just over \$27,000 remains to meet the goal of \$250,000. Mrs. Kirven announced that First Interstate Bank has made a generous offer to match gifts up to \$15,000 to help meet the goal. The Foundation Annual Benefit will be held on April 17th at the Sheridan County Fairgrounds Exhibit Hall. The dinner/dance will feature the Sheridan College Jazz Band and the Alycia Duprey-Vince Trio. Proceeds raised will go towards the Digital Mammography Campaign and cancer care; this event should complete fundraising activities for digital mammography equipment. Harlan Rasmussen noted that this is a project that the Board members believe in and they want to make sure the committee knows how much they appreciate all of the effort to make this community project such a success. Upon hearing about the match offered by First Interstate Bank, Mr. Rasmussen asked Board members if they would each consider a donation to be matched by First Interstate Bank. They all agreed and Trustees will let Roxanne Araas or Ada Kirven know about their gift intention. Mrs. Kirven offered to send out pledge forms to each Trustee to make the process easier.

Ron Mischke asked if the cost was firm for the equipment. Mike McCafferty asked Chris Bilyeu for update. Mr. Bilyeu explained that they are considering three machines and hopefully could be up and running in April. This new equipment will fit in the current mammography space. Nyle Morgan is working on storage for digital files which will be a separate cost and old space will be used for storing film.

Mrs. Kirven explained that she is beginning to bring different Foundation Partners into the hospital to hear updates and tour various departments. She noted that the Foundation recently received a membership gift from a former patient who detailed several stories about the personal patient care received during a recent stay at Sheridan Memorial Hospital.

BUILDING COMMITTEE REPORT

Rob Forister reported that the new Lab is on schedule. Case work has been installed and the move is scheduled for the first week in March. Pharmacy remodel project is catching up and they will begin to dry wall soon. Next week, a large crane will be required to lift and install the new air handler on the roof outside of 2nd floor. Mr. Forister explained that we were having an OSHA inspection today. The inspectors were invited to come for consulting and compliance purposes to identify any opportunities of improvement. If we enroll in programs it will decrease our Workers Comp payments which will provide a costs savings and then after one year we are eligible to join another program to assist with our safety programs.

OTHER BUSINESS

Danae Brandjord announced that a community Open House is being planned for the last week in February. Tours of the new Lab and Big Horn Mountain Medicine Practice along with food from the Sidewalk Café will be provided.

The February Board Meeting will be held on March 3rd. Gary Miller noted that he would be out of town. Dr. Strahan and Dixie See were invited to attend the Finance Committee meeting at 1:30 on March 3rd in his absence.

EXECUTIVE SESSION

The public meeting moved into closed session for personnel matters and real estate discussion.

ADJOURNMENT

The public meeting reconvened after executive session. There being no further business to come before the Board, the meeting adjourned at 5:00 p.m. with the February meeting scheduled to be held on March 3, 2010.

Recorder,
Roxanne Araas
Dixie See, Secretary