

**BOARD OF TRUSTEES
JANUARY MEETING MINUTES
WEDNESDAY, FEBRUARY 7, 2018 4:00 P.M.**

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

MEMBERS ABSENT: Dixie See and Ron Mischke

Others Present: Mike McCafferty and Dr. Ian Hunter

CALL MEETING TO ORDER

Kevin Bailey, Chairman, called the meeting to order at 4:01 p.m.

PUBLIC COMMENTS, INTRODUCTIONS

None.

APPROVAL OF AGENDA and MINUTES

Kevin Bailey motioned to approve the revised agenda with the addition of Medical Staff Bylaws and Rules and Regulations amendments under the Medical Staff Report. Gene Davis seconded the motion. Motion carried.

The minutes from the December board meeting held on Wednesday, January 10, 2018 were reviewed. David Smith moved to approve the minutes. Shirley Coulter seconded the motion. Motion carried.

OLD BUSINESS

None.

QUALITY COMMITTEE REPORT

The Quality Committee reviewed data sets including Title 25 emergency detention, variable lengths of stay, and safety of the patient and staff. Also reviewed were medication errors and bar code scanning, patient feedback, and HCAHPS scores.

The Performance Improvement Plan for 2016-2017 was approved by the board at the last meeting. The plan has been slightly amended for 2018. David Smith moved to approve the 2018 Performance Improvement Plan/Quality Plan as presented. Dr. Scott seconded the motion. Motion carried. Significant amendments will occur in 2019 when a new chief quality officer is hired and Lean transformation is incorporated into the organization.

MEDICAL STAFF REPORT

The proposed amendments to the Medical Staff Bylaws Rules and Regulations were presented to the board for consideration. The first change is to accurately represent staff in defining category titles and outlining credentialing and privileging processes, supervision procedures and corrective action processes. The second proposed change pertains to allowing qualified labor and delivery registered nurses to perform medical screening examinations of women in labor. The registered nurses in obstetrics have specialized training and competencies and skill sets which differentiate them from registered nurses in other units in the hospital. Lastly, the third proposed revision pertains to the history and physical requirements of all patients admitted to the hospital; there is a difference in the language but with the same high quality care that our physicians provide. The hospital's legal counsel

has reviewed the changes on all three proposals and has no concerns. Shirley Coulter moved to accept the changes to the bylaws as presented. Dr. Scott seconded the motion. Motion carried.

Credentialing

Jessica Neau, PA-C requests full active staff privileges as a Certified Physician Assistant at Big Horn Mountain Medicine.

New medical staff privileges in consulting telemedicine have been requested by Martin Prager, MD specializing in Infectious Disease and Steven Arbogast, DO specializing in Neurology.

New Telemedicine Privileges with Real Radiology, LLC Radiologists request privileges for the following physicians to provide on-call services for preliminary interpretation of imaging and studies: Gregory Peters, MD; Alexander Serra, MD; Allison Summers, MD; and Scott White, MD.

Dr. Scott motioned to approve the above requests. Gene Davis seconded the motion. Motion carried.

ADMINISTRATION REPORT

Trauma Resolution of Commitment – Cassidy Camino, Trauma Coordinator, introduced herself and the trauma program. The hospital's trauma designation is reviewed every 3 years, where the State reviews our policies, processes and practices to determine if we qualify for the Level III trauma designation. The state's current guidelines request that the Resolution be signed by each board of trustee. Mike McCafferty made the recommendation to the board to consider the Resolution for approval and signature. Gene Davis motioned to approve the Resolution. Shirley Coulter seconded the motion. Motion carried.

Corporate Compliance Program Description – The compliance officer indicates that the Office of Inspector General (OIG) requires we have a program description or plan of the program the hospital has in place. The Compliance Committee reviewed a draft and provided input, ensuring it was reflective of our organization. Gene Davis motioned to approve the Corporate Compliance Program Description as presented. David Smith seconded the motion. Motion carried.

Simpler and OP Updates – At the previous board meeting, the board approved the proposal to proceed with engaging Simpler to assist the hospital in a Lean transformation. Representatives from Simpler have been on site since Monday, working with leadership on a transformation plan of care. Action plans have been developed and areas have been identified to focus on Lean implementation including how to frame it and how it fits within our operational plan. Employee forums will begin today and continue through tomorrow, Thursday, February 8th to discuss this process.

FINANCE COMMITTEE REPORT

The second quarter showed increased surgical visits and improved activity in Med Surg and ICU. There was a slowdown in the ER and Urgent Care. The Cath Lab and Interventional Radiology are flat from last quarter. The payer mix is trending negatively, and we have experienced an influx of uninsured patients in January. The second quarter finished with a slight loss, but still improved over the first quarter.

FOUNDATION REPORT

The Foundation Board conducted a strategic planning meeting on January 23rd. The Foundation will focus their operational goals to align with the hospital goals. Cody will provide more definitive information on major donors and foundations in conjunction with the MRI and Suite update at the next meeting.

Ada reported the Auxiliary's Annual Membership Drive and luncheon were well attended. The Auxiliary donated \$30K to the hospital; \$25K will go specifically to the TCU to help grow their services. Numerous volunteers were recognized for their hours of service. The Auxiliary has gifted over \$600K; perhaps more but records only go back to 1991.

BUILDING COMMITTEE REPORT

The Wyoming State Department of Health and the City of Sheridan have given permission for the MRI project to begin, and it is now underway. Anticipated completion date is early May, 2018. The MRI is to be delivered mid-May.

The Medical Arts Complex is on schedule with no issues noted. Originally, the MAC parking area was to be resurfaced. Alternatively, the Building Committee has proposed that the grade in the parking lot be addressed as well as the parking lot for the Emergency Department. The Building Committee reviewed multiple concepts and would like the full board to authorize the approval of obtaining design documents to change the grade of the parking lot at a cost of \$80K, with the total project estimate of \$660K. Gene Davis motioned to approve. David Smith seconded the motion. Motion carried.

OTHER BUSINESS

None.

EXECUTIVE SESSION

Kevin Bailey moved to adjourn into Executive Session at 4:46 p.m. after a short recess to discuss personnel. Dr. Scott seconded the motion. Motion carried.

The Board reconvened into general session at 5:02 p.m. with the above action taken on Medical Staff.

ADJOURNMENT

With no further matters to come before the board, the meeting adjourned at 5:03 p.m.

Patty Forister, Recorder

Shirley Coulter, Secretary