

**BOARD OF TRUSTEES
MARCH MEETING MINUTES
WEDNESDAY, April 1, 2015 3:00 P.M.**

MEMBERS PRESENT: Kevin Bailey, David Smith, Gary Miller, Ron Mischke, Gene Davis, Dixie See and Dr. Strahan

MEMBERS ABSENT:

Others Present: Mike McCafferty, Dr. Sara Smith

CALL MEETING TO ORDER

Kevin Bailey, Chairman, called the meeting to order at 3:04 p.m.

PUBLIC COMMENTS, INTRODUCTIONS

None.

APPROVAL OF AGENDA and MINUTES

The agenda for the March Board of Trustees Meeting was available for review. Gene Davis made the motion to approve the March Board agenda. Ron Mischke seconded the motion. Motion carried.

The minutes from the February Board Meeting, held on February 25, 2015 were reviewed. David Smith made a motion to approve the February Board meeting minutes. Gary Miller seconded the motion. Motion carried.

OLD BUSINESS

None.

QUALITY COMMITTEE REPORT

Dr. Addlesperger reported that data sets were reviewed in the quality meeting. The committee is working on improvement projects pertaining to falls and a project aimed at clarification on chemical restraints. The Joint Commission looks at chemical restraints to make sure it is being done safely. The committee has identified issues with the documentation of pressure ulcers. An RCA audit was covered and it was noted that the care delivered was adequate. CIT nursing gave a presentation on two projects they are doing; the projects are "1 hour rounding" and a "no pass zone". These are two great projects with patient safety and satisfaction, as well as staff satisfaction in mind. These projects have collected valuable data.

Fr. A presented The Utilization Management Review Plan, which was reviewed by our consultant from B.E. Smith and Liz Mahoney, Case Manager at Sheridan Memorial Hospital for the board's review and approval. Dr. A reported that this plan meets all the standards set by CMS and the Joint Commission. After discussion, Ron Mischke made a motion to approve the Utilization Management Review Plan. Dixie See seconded the motion. Motion carried.

MEDICAL STAFF REPORT

Dr. Sara Smith asked the Board to approve the recognition of Radiology Practitioner Assistants (RPA) as a new category of non-physician professional medical staff at the hospital. This position is that of a mid-level provider that works directly under the Radiologist. The Medical Executive Committee has recommended approval of this position. After discussion, Kevin Bailey moved to approve the creation of the Radiology Practitioner Assistant position as requested. Dixie See seconded the motion. Motion carried.

The Board reviewed and discussed the privileging files of Chris Bilyeu, RPA in Executive Session,. Chris is requesting RPA privileges under the supervision of Dr. William Taylor, in the Department of Radiology as a non-physician professional staff member. Christopher Bilyeu, RT, RPA has been employed at Sheridan Memorial Hospital since May 2009. He is the current Department of Radiology Manager as well as a certified Radiologic Technologist. Chris has also expanded his professional education to become a Radiology Practitioner Assistant credentialed by the Certification Board for RPAs to provide primary health care services in medical imaging with physician supervision. With guidance and discretion of the supervising physician, RPAs exercise autonomy in decision making in the role of a primary health care provider to provide patient assessment, management and a broad range of diagnostic and interventional services. After review of credentials in Executive Session, Kevin Bailey made the motion to approve the requested membership and RPA privileges to Chris Bilyeu. Gary Miller seconded the motion. Motion carried.

The Board also reviewed and discussed in Executive Session the privileging of a new Emergency Department physician, Dr. William Selde. Dr. William Selde is a Nebraska native who has been working for Emergency Physicians of Wyoming at Wyoming Medical Center since July 2014 after completing Fellowship training in Emergency Medicine at the University of New Mexico. Dr. Selde has spent time as an Emergency Medicine Resident at Sheridan Memorial Hospital the summers of 2011 and 2012. He is the current Medical Director of Wyoming Life Flight and has served time as a flight physician and assistant medical director with West Michigan Air Care. Dr. Selde will be the 5th addition to the team of 5 full time and 1 part time Emergency Department employed physicians at Sheridan Memorial Hospital. Dr. Selde is requesting Active Staff membership with full core Emergency Medicine privileges in the Department of Emergency at Sheridan Memorial Hospital. After review of credentials in Executive Session, Gary Miller moved to approve the requested membership and privileges of Dr. Dr. William Selde. Dixie See seconded the motion. Motion carried.

ADMINISTRATION REPORT

The Medical Office Building and ICU projects will be discussed under the Building Committee report.

Mike took the opportunity to introduce Laura Lehan as a new member of the Sheridan Memorial Hospital leadership team. Laura is the Chief Strategy Officer (CSO) which replaces the Chief Human Resources Officer (CHRO) position. Laura will oversee Human Resources, the Marketing Department, and will also drive the execution of our strategic and operational plans. Prior to her acceptance of this position, Laura was a business consultant working with organizations going through mergers and acquisitions, and provided executive coaching and leadership development. She worked with Sheridan Memorial Hospital as a consultant and is looking forward to making an impact on the organization from an internal standpoint.

Mike stated that officers, directors and managers completed offsite strategic planning. The information will be compiled, along with the data that was collected in last year's planning sessions with the community, staff, leadership and board, to create a framework for a strategic plan for the next four years. Mike will come back to the board to review the plan in the next couple of months.

Joint Commission Update ~ the Joint Commission is on the schedule for a site visit in the near future. Brittany Goodvin, Mackenzie Mudd and Rob Forister are working to prepare for the Joint Commission's visit. In an effort to communicate to the organization and departments, Mackenzie stated that care rounds are being done through the departments and that life safety issues, expired supplies, and other vulnerabilities are being identified.

Title 25 Update ~ the hospital continues to organize meetings with all parties involved regarding the best approach to take care of titled patients and the best level of care for them. We currently have approximately 25 patients or less a year, where we feel we cannot offer the level of service and of care needed. We are looking at options relating to jurisdiction, transportation and services available at different locations. This is not just a Sheridan County issue but a State issue in which allocation of resources for all areas of the State is needed.

Mike reports that for the last 6 months we have been conducting daily safety briefs (DSB). Each department within the hospital reports if there are any safety concerns and/or other issues that have happened in the last 24 hours. There has been good participation with the managers and leaders within the hospital. The call lasts approximately 5 to 10 minutes and has been very successful. Any big problems mentioned are addressed immediately for that particular area. Board members are welcome to participate and join in on the call; Patty will forward the call information to the members as requested.

Wyoming Life Flight ~ Representatives from Air Methods were here this week to go around the facility, identifying living quarters for their staff and looking at the helipad and the improvements made and still to be made, for having a helicopter at our location. The agreement still needs to be finalized and a meeting is arranged to do so. There is a 60 to 90 day window to get everything in place and for Wyoming Life Flight to be operational.

Cerner Optimization ~ Nyle states that there is continued focus on three areas for updates which include the ambulatory side, the hospital side and system related issues, which is what the computer room looks like, memory and disk space. The environment has changed in the time we first started with Cerner; we are doing things here that are not done elsewhere. Cerner is refining processes for physicians. Prioritization for the hospital piece is being identified. There will be continued expenses

with Cerner, as we add on pieces, such as for women's health and quality. We will need to maintain the system with updates and code changes, which may require additional product and training; so maintenance costs will continue to be an expense. We need to maintain the product that we have already invested in. As CMS continues to ask for additional information, we need to be able to gather data needed to report on.

FINANCE COMMITTEE REPORT

Gene reports that February was a difficult month for the hospital. Alan Dow, interim CFO provided a handout to the board, that helps put into perspective on what has happened and offers some clarity to our situation. The finance committee met with the Bank of the West regarding the Wilson Trust. Of this money, we can access dividend and interest but not the initial trust amount.

Although there is concern with the February results, Alan points out that as a community hospital, we are a safety net for our community. 99% of our income comes from patient revenue. Our expenses are fixed and our revenue is not, so we can incur a substantial operating loss. To put things into perspective for the operating loss, there were a number of contributing factors such as the hospital budgeted a break even bottom line, additional Cerner costs, and salary adjustments that all came at one time. The hospital is in the middle of our budget process as well. Cerner expenses have not been budgeted for in the past, but will be put in the budget going forward. Costs for professional services, ICD -10 changes, salaries and supply costs were up. Cath Lab procedures were up and the implants costs are high, which added to the increased supply costs. We had a good month with revenue; inpatient numbers were down and outpatient was high. The hospital is still even for the year.

FOUNDATION REPORT

Ada Kirven, the Executive Director is currently working on developing a timeline for strategic projects to look at how the Foundation can best support the hospital. She plans on going to each hospital department to talk about the growth of the hospital and to thank the employees for their support and to reach out to the physicians for support as well.

Ada will be meeting with donors and people who want to know about our projects. Ada will be planning a hospice project and colon cancer education. She made a presentation to First Federal Savings Bank and received some good feedback.

Ada reminded everyone of the Wound Care Symposium that will be presented in the fall. There is a local sponsor for the symposium.

BUILDING COMMITTEE REPORT

Dixie See reports that the Building Committee has approximately 8 projects ongoing. The most pressing is the ICU and MOB projects; we still need the schematic drawing and construction drawing for those two projects. Mike will be meeting with Rob and the TSP representatives regarding the construction and schematic designs.

OTHER BUSINESS

None

EXECUTIVE SESSION

With no further business, the meeting moved into closed session at 4:00 pm for discussion of real estate, legal, and personnel. The meeting then reconvened into public session at 4:25 pm. Please see above Medical Staff report for credentialing actions.

ADJOURNMENT

There being no further business to come before the Board, the meeting adjourned at 4:28 pm.

Recorder, Patty Forister

David Smith, Secretary