



**BOARD OF TRUSTEES
SEPTEMBER MEETING MINUTES
WEDNESDAY, SEPTEMBER 29, 2021 4:00 P.M.**

MEMBERS PRESENT: Shirley Coulter, Andrea Mellinger, Joe Wright, Jenifer Shassetz, Gene Davis, Ron Mischke (via phone), and David Smith

MEMBERS ABSENT:

OTHERS PRESENT: Mike McCafferty, Dr. John Addlesperger, Dr. Shaun Gonda, Barb Hespen, Holly Zajic, Nyle Morgan, Cathy Bealer, Amy Ligocki, Cody Sinclair, Ada Kirven, Liz Mahoney, Rob Forister, and County Commissioner Tom Ringley (via phone), Erin Oetken (via phone), Dee Gilson, and Sharon Krueger

CALL MEETING TO ORDER

Shirley Coulter, Chairwoman, called the meeting to order at 4:00 p.m. The board is meeting in person, practicing social distancing and mask usage. The conference line is open for all others to attend via phone due to COVID.

PUBLIC COMMENTS, INTRODUCTIONS

There are no introductions and no one from the media made their presence known.

APPROVAL OF AGENDA AND MINUTES

The September board meeting agenda was presented. The agenda will be amended to reflect that the action item under the Finance Committee Report is for information only and no action will be taken. David Smith moved to approve the amended agenda. Gene Davis seconded the motion. Motion carried.

The August board meeting minutes from Wednesday, August 25, 2021 were presented and Andrea Mellinger motioned to approve the minutes. Joe Wright seconded the motion. Motion carried.

QUALITY COMMITTEE REPORT

Cathy Bealer on behalf of the Quality Committee states that the committee reviewed:

Rapid Response and Code Blue reports showing improved outcomes.

Organ donations and work done with the operating room on the organ donation process.

Identified risks with pressure ulcers and how to mitigate; with skin assessments, improved nutrition, frequent turning, and a skin assessment with every shift.

Healthcare acquired infections continue to improve and Sheridan Memorial Hospital is below the national average.

Our 30-day readmission rate continues to be below the national average, with follow up phone calls, arranging appointments for patients prior to discharge, and multi-disciplinary review of readmissions within 72 hours of discharge.

The Program for Evaluating Payment Patterns Electronic Report (PEPPER) shows improvement in qualifying admissions and length of stay.

Good improvements in the quality initiatives throughout the organization.

Ordering Authority of Practitioners without Clinical Privileges Policy – this policy was presented and reviewed in the Quality Committee meeting. Amy Ligocki, Medical Staff Manager gave a brief overview of the policy relevant to a practitioner in good standing, who does not have clinical privileges but places orders for a patient. This policy outlines a clear process to address these circumstances. Work was completed with the Admission's staff on the process for standard work. David Smith, on behalf of the Quality Committee motions to approve the policy as

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presented. Jenifer Shassetz seconded the motion. Motion carried.

PATIENT EXPERIENCE COMMITTEE REPORT

Ron Mischke, committee chair reported that the newly formed committee had candid discussions on patient outcomes. The committee reviewed data from our vendor NRC Picker relevant to the patient experience. Barb Hespen reports that the inpatient HCAHPS was reviewed as this category affects 22% of our STAR Rating. We have an opportunity for improvement and an A3 will be implemented to determine how we can improve patient encounters. Outpatient clinic encounters will be reviewed as well. The patient experience committee will visit one department/unit at a time to see what work is being done to improve.

MEDICAL STAFF REPORT

Dr. Gonda states that staff are really busy right now with COVID still prevalent in the community. The new spine surgeon with Sheridan Orthopaedic Associates has started. Credentialing to be done in Executive Session.

Dr. Gonda, on behalf of the Medical Executive Committee and the Credentials Committee recommends the approval of the Medical Staff Renewals as presented. There are no concerns of note with the renewals presented.

Bc

MEDICAL STAFF INITIAL APPOINTMENTS (ACTION)

| Name | Category | Specialty | Renewal Date | Affiliated Organization |
|------|----------|-----------|--------------|-------------------------|
| None | | | | |

MEDICAL STAFF RENEWALS (ACTION)

| Name | Category | Specialty | Renewal Date | Affiliated Organization |
|------------------------------|--|------------------------------------|--------------|---------------------------|
| Steven Arbogast, DO | Telemedicine/Delegated (No Membership) | Neurology Medicine | 10/02/2021 | Billings Clinic Neurology |
| Erin Rains, DO | Telemedicine/Delegated (No Membership) | Pulmonary / Critical Care Medicine | 10/02/2021 | Billings Clinic |
| Jeffrey Shideman, FNP-C, DNP | Advanced Practice Clinician-Nurse Practitioner | Internal Medicine | 10/30/2021 | SMH Internal Medicine |

Joe Wright motioned to approve the Medical Staff Renewals as presented. David Smith seconded the motion. Motion carried.

ADMINISTRATION REPORT

Compliance Update – The Compliance Officer, Lynn Smith reports that the annual conflict of interest and compliance forms have been completed by the board members. Upon review, there are no conflicts identified that require mitigation or action.

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Governor's Announcement – Governor Gordon announced an allocation of funds through the CARES Act. Sheridan Memorial Hospital should receive approximately \$450K, although we are unsure of what that looks like and the specific application for the money. Mike will share additional information as he receives it.

COVID-19 & Immunization Update – The number of hospitalizations and active cases identified in a 24 hour period has remained flat over the last couple of days. The accumulation of staff tiredness, caring for the very sick and dying patients, and having hard conversations is challenging. Our staffs' wellbeing is our biggest concern as there are no resources available to provide them relief. There are no resources available to transfer patients to other regional hospital if needed for a higher level of care, as those hospitals are facing the same challenges. Administration is paying close attention to our staff, supplies, and the ability to care for our patients on a daily basis. Dr. Addlesperger states that it is encouraging to see the daily positivity rate leveling off.

There is some controversy between the FDA and CDC on the booster shots. Booster shots have been approved for the Pfizer vaccine only, for those people six months out from their second immunizations. There is specific criteria for those that "should" get a booster and those who "may" get the booster. The guidelines are listed on the CDC website. As not everyone received the Pfizer vaccine, we are trying to gauge the public demand for a booster shot. Community Health is limited on what they can accommodate, and it would take several months to meet the demand. We will operationalize our vaccination clinic once again to do the Pfizer booster shots. The launch date is unknown at this time. We will do the same with the Moderna vaccine once approved. There are no supply chain issues relevant to obtaining the vaccine.

Strategic Plan Overview – Earlier in the year, Mike had outlined the hospital's strategic plan, priorities, principals and deployment to the board. Mike will ask staff and their executive sponsors to present their strategic A3's next month.

FINANCE

August was very busy across the healthcare system as a whole. Nathan noted that it was the busiest month in the past six years, showing record volumes. Urgent Care had the highest volume totals of 1,600 visits in August. There were only three areas that were not busy. The Welch Cancer Center has continued growth, and there is some leveling in chemotherapy patients being seen. The hospital received another donation from the Foundation to offset expenditures towards the TCU project. Internal Medicine had a slight decrease due to limiting capacity, as physicians were deployed as hospitalist coverage to the medical-surgical floor due to a high volume of COVID-19 patients. Overall, we had record levels of activity for a very positive month.

O-ARM Navigation for Spine Surgeon- this item will be addressed next month to ensure that the board has all the information relevant to the funding model before any action is taken. We will review via a zoom meeting if needed.

FOUNDATION REPORT

Cody Sinclair shared that the Foundation continues to receive gifts and pledges towards the TCU project. The Wyoming Hospital Association awarded the Sheridan Memorial Hospital Auxiliary as Auxiliary of The Year. We are thankful to the volunteers and this program as they continue to support the hospital. Cody provided information to the board on The Link – Partners in Pink race. The event will be virtual once again this year. We have had great corporate sponsors step forward. Drive through t-shirt pickup will be at Whitney Commons Park on Saturday, October 16.

Ada Kirven shared with the board the pressure and stress our clinical teams are under daily. Spearheaded by Ada, a list of items and ways to become involved to support the clinical staff and departments has been implemented. This includes snacks and a roaming coffee cart to thank the staff for their continued hard work. There is also an option

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for other staff to “Adopt a Department”. This is a great opportunity to support our coworkers, letting them know we care about them and all they are doing for our community.

There is an auction event on Sunday, October 3rd, in which the proceeds will benefit the Sheridan Memorial Hospital Foundation. Information on the event will be sent to our board via email.

BUILDING COMMITTEE REPORT

Rob Forister gave a brief overview of the three active projects at the hospital. All are proceeding nicely. There is a delay in materials for the Cardio Pulmonary Rehab project pushing the timeline back a month. The TCU project is moving along and there are no issues with the scheduled timeline. The Physician Women’s Locker room should be completed in the next month.

Flooring in the hospital is being replaced. Carpet that has been in the facility for decades is being removed and flooring similar to the rest of the hospital is being laid in various areas.

OTHER BUSINESS

None.

EXECUTIVE SESSION

Shirley Coulter motioned to move into Executive Session at 4:42 p.m. to address credentialing matters. David Smith seconded the motion. Motion carried.

General session reconvened at 4:47 p.m. to address the medical staff credentialing. Please see above under the Medical Staff Report for action taken.

The board moved back into Executive Session at 4:49 p.m. to discuss real estate and further personnel matters.

General session reconvened at 5:10 p.m. with no action needed.

ADJOURNMENT

With no further matters to come before the board, the meeting adjourned at 5:10 p.m.

Patty Forister, Recorder

Andrea Mellinger, Secretary