

# BOARD OF TRUSTEES JUNE MEETING MINUTES WEDNESDAY, JUNE 22, 2022 4:00 P.M.

**MEMBERS PRESENT:** Shirley Coulter, Joe Wright, Ron Mischke, Jenifer Shassetz, Gene Davis, and

David Smith

MEMBERS ABSENT: Andrea Mellinger

OTHERS PRESENT: Mike McCafferty, Dr. Shaun Gonda, Dr. Goddard, Holly Zajic, Nyle Morgan,

Nathan Stutte, Cathy Bealer, Amy Ligocki, Cody Sinclair, Alan Dubberley, Brent Maurhoff, Lynn Grady, Rob Forister, Ada Kirven, Erin Oetken, Jennifer Rasp-Vaughn, Tom Ringley, Sheridan County Commissioner, Richard Garber, Foundation Board President, Margaret O'Hara with The Sheridan Press, and

Kevin Koile with Sheridan Media

#### **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.

### **PUBLIC COMMENTS, INTRODUCTIONS**

It is noted that representatives from The Sheridan Press and Sheridan Media are in attendance.

### **APPROVAL OF AGENDA AND MINUTES**

The June board meeting agenda was presented. Joe Wright moved to approve the agenda. Ron Mischke seconded the motion. Motion carried.

The May board meeting minutes from Wednesday, May 25, 2022 were presented and Gene Davis motioned to approve the minutes. David Smith seconded the motion. Motion carried.

### **QUALITY COMMITTEE REPORT**

The Quality Committee reviewed the following:

- 30 Day readmission data indicates that SMH is below the national average. SMH will work with Big Horn Rehabilitation to evaluate the readmission process.
- Behavioral Health and Title 25 45% of patients are transferred to the appropriate level of care required. SMH met with our tele-psych services partner and identified areas for improvement.
- SMH strategic initiative is for zero harm. There is an increase in the number of events reported, which will help us track and trend events.
- SMH is below the national average in blood contamination.
- Medical record delinquency will be monitored by Health Information Management, who will communicate with providers on delinquencies.
- Work is being done to improve pressure ulcer risk assessments upon admission.
- Review of Code Blue and Rapid Responses, all with positive outcomes. Work with Sheridan College on education with nursing assessment skills to identify patient deterioration.
- No safety events identified due to staff fatigue. There is a decrease in nurse turnover as well.

Ron Mischke states that staff were downtown at Third Thursday and requested Lynn Grady provide the board with the details. Lynn states that community outreach is being done to focus on the prevention of injury. This month relates to water safety for children. Safe Kids and the SMH Foundation funded 200 life jackets that were handed out. SMH staff made sure that the jackets were fitted properly, provided water safety tips and education to the families. This community outreach will continue through the summer, with a bike safety/helmet promotion. The



SMH Foundation purchased 200 helmets, which will be given out in July. Pedestrian safety will be provided in August before kids head back to school.

# PATIENT EXPERIENCE REPORT

Patient satisfaction scores for a number of departments were reviewed by the committee. Survey participation scores have increased, which will assist areas with improved care. The committee toured the Emergency Department; Kelly Lieb is working with a PA student on the agenda setting process in caring for a patient in the emergency room. SMH works with a third party vendor to administer the surveys and to gather the results. The board encourages our patients to complete the survey. Jody Hecker, Patient Advocate, who handles patient challenges, has joined the committee.

### MEDICAL STAFF REPORT

The Quarterly Medical Staff meeting was last week. Mike has been recruiting new physicians, the orthopedic office has recruited a new doctor, and there is a new emergency room physician assistant joining SMH as well. Credentialing will be done in Executive Session.

Dr. Gonda, on behalf of the Credentials Committee and the Medical Executive Committee, recommends the following Medical Staff Initial Appointments and Medical Staff Renewals for board approval. There are no concerns or red flags on any of the submissions.

**MEDICAL STAFF INITIAL APPOINTMENTS (ACTION)** 

Name	Category	Specialty	Renewal Date	Affiliated Organization
Ezekiel Odonkor, LPC	Non-Member LIP - Mental Health Consult	Mental Health		SMH
Derek Redinger, DO	Active Staff w Priv - May Admit	Internal Medicine		SMH Hospitalist / Primary Care

**MEDICAL STAFF RENEWALS (ACTION)** 

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Name	Category	Specialty	Renewal Date	Affiliated Organization	
Juli A. Ackerman, MD	Active Staff w Priv - May Admit	Internal Medicine	7/31/2022	SMH Internal Medicine Clinic	
Michael W. Brennan, MD	Active Staff w Priv - May Admit	Cardiology	6/28/22	SMH Heart Center	
James S. Ferries, MD	Active Staff w Priv - May Admit	Orthopedic Surgery	7/24/2022	Sheridan Ortho. Assoc.	
Rebecca R. Franklund, MD, FACOG	Active Staff w Priv - May Admit	OBGYN	6/26/2022	SMH Women's Clinic	
Luke A. Goddard, MD	Active Staff w Priv – May Not Admit	Emergency Medicine	6/26/2022	SMH Emergency Department	
Hannah M. Hall, MD	Active Staff w Priv - May Admit	Internal Medicine	7/31/2022	SMH Internal Medicine Clinic	
Brian D. Laman, MD	Active Staff w Priv - May Admit	Orthopedic Surgery	7/30/2022	Sheridan Ortho. Assoc.	



Name	Category	Specialty	Renewal Date	Affiliated Organization
Barry E. Mangus, MD	Active Staff w Priv - May Admit	General surgery	6/27/2022	Big Horn Surgical
Thomas O. Mayer, MD	Active Staff w Priv - May Admit	Neurology	7/7/2022	Sheridan Neurology
Brent Milner, MD	Active Staff w Priv - May Admit	Orthopedic Surgery	7/29/2022	Sheridan Orthopedic Associates
David E. Nickerson, MD	Active Staff w Priv – May Not Admit	Urgent Care	6/26/2022	SMH Urgent Care
Michael D. Pettersen, MD	Telemedicine/Deleg ated (No Membership)	Pediatric Cardiology	5/27/2022	Rocky Mountain Pediatric Cardiology
Kristen L. Schaefer, MD	Active Staff w Priv – May Not Admit	Anesthesiolo gy	6/26/2022	Big Horn Anesthesiology Associates
Elisabeth M. Scalva, MD	Active Staff w Priv - May Admit	OBGYN	6/24/22	SMH Women's Clinic
Kristopher C. Schamber, MD, FACP	Active Staff w Priv - May Admit	Internal Medicine	7/29/22	SMH Internal Medicine / Primary Care

David Smith moved to approve the slate of initial appointments and renewals as presented. Joe Wright seconded the motion. Motion carried.

#### **ADMINISTRATION REPORT**

<u>Semi-Annual Compliance Report</u> – the committee will have the second quarter meeting on July 18<sup>th</sup>. A part time compliance analysist is providing support in all aspects of the compliance program. Lynn has addressed the CURES Act – Provider Notifications: where a patient's primary care provider is notified of their admission, discharge or transfer. Information Systems has implemented this process and the providers are receiving these notifications.

No Surprises Act: prohibits balance billing for non-emergent services furnished by out-of-network providers during a visit by the patient at an in-network facility, unless the laws notice and consent requirements are met. For emergent cases, out-of-network providers may only bill the patient the cost-sharing responsibility they would bear for similar covered services from an in-network provider. For self-pay and uninsured patients, a Good Faith Estimate of the expected charges is required when a patient schedules a service. Work continues on the implementation of the requirements of the No Surprise Act.

Audits and Investigations were discussed as well as education of employees. Revisions on policies, procedures and forms relevant to two new HIPAA Revisions and Appropriate Use Criteria for Advanced Diagnostic Imaging were discussed.

<u>ARPA Request</u> – The American Rescue Plan Act (ARPA) is federal funding provided to states for on-going relief due to the pandemic. The State of Wyoming will be provided funds from ARPA to distribute. Approximately \$85M has been identified for healthcare and assisting with supporting aspects of the healthcare system in the state for future surges. The State of Wyoming has proposed rules to apply for these fund; the draft of the final rules after public comment is being released. SMH is waiting for the opportunity to submit our applications to the State Loan Investment Board (SLIB) to receive applications.

Sheridan Memorial Hospital has identified three projects to submit for consideration. The first project tags on to



the initial funds received through SLIB. With the increase of 20 multi-use beds with our TCU project, we can utilize the TCU in a crisis, surge situation, utilizing the TCU to segregate the patient population as needed. We utilized funds from the government to initially update the HVAC system on the second and third floors of the hospital. Money applied for at this time would be for HVAC distribution system needed specifically for the second and third floors, and the electrical system upgrade required.

Due to the pandemic and the need to purchase and store a large number of supplies to be readily available due to supply chain issues, the material management area has exceeded capacity. The second plan is to make space in the lower level of the hospital into a warehouse space to store and manage hospital supplies efficiently and effectively.

The third grant application for funds would be to create an EmPATH and Crisis Stabilization Unit at the hospital. EmPATH stands for Emergency Psychiatric Assessment, Treatment and Healing. This would provide a "front door" for urgent behavioral health care needs for assessment, crisis stabilization and inpatient beds. Mike has been working with Sheridan County officials, Johnson County officials, legislators, and the Wyoming Department of Health on this initiative. Mike will meet with Governor Gordon in July on this matter as well. There is a huge need in our region, providing the right care and treatment for behavioral health patients.

There is a resolution for board consideration and action on providing the support to move forward with this initiative. Johnson County Commissioners and the Sheridan County Commissioners have adopted resolutions of their own in support of our efforts. David Smith states that this is important for our community. Being able to care for our patients in their own communities, in a safe environment for the patient and staff alike. SMH does not currently have the resources, facility infrastructure or clinical infrastructure to care for the behavioral health patient. SMH would work with a 3<sup>rd</sup> party entity to run the operation, similar to the Watt Dialysis Clinic. SMH provides the space in which the see the dialysis patient, but DCI manages the operation. SMH would look for a similar partnership with a behavioral health provider to appropriately manage the program with us. Operationally, this potential service would not have a positive margin to our finances, but it is desperately needed.

David Smith moved to approve the Resolution Regarding Formation of a Regional EmPATH and Crisis Stabilization Unit as presented, authorizing Shirley Coulter, Chairwoman to sign the resolution in the board secretary's absence so that it can be submitted in the application process. Joe Wright seconded the motion. Motion carried.

There is a lot of work to do and funding is important to move forward with the time line. We would utilize existing space in order to start construction, but would need to move other departments in the hospital to make this happen. Approximate cost of construction if \$15M. Title 25 and behavioral health patients put a lot of pressure on our emergency department and this is not an appropriate way to care for our patients. This unit will decrease the number of titled patients due to the assessment being done. This is an important aspect; we have approximately 150 titled patients a year in Sheridan. It is difficult to get this patient population to the State hospital or Wyoming Behavioral Institute. This challenging situation puts a lot of pressure and risk to our staff and is not the best care for the patients.

Inter-Facility Transport Services - With un-reliable resources to transfer patients, SMH has reached out to Campbell County Health Emergency Medical Services as a resource. CCH EMS excel in staff education and their commitment is in alignment with SMH, and they have been receptive to a partnership in Sheridan. Rocky Mountain Ambulance has challenges with staffing and have not been responsive to the needs of SMH and patient transfers. In order to take care of our patients, CCH EMS has agreed to provide transfer services to SMH as needed. This is not 911 services in Sheridan or the county, but hospital transfers only.



<u>VAMC</u> – SMH was notified by the Veteran's Administration that they are making some changes due to staffing and vaccination requirements with the closing of their urgent care, which could potentially have an impact on our emergency department and our urgent care. At this time, we have not experienced a surge of veterans seeking services at either location. Mike just wanted to make the board aware of this matter.

Other Business – Mike congratulated Shirley Coulter on her recent retirement from the school district. Additionally, David Smith will be stepping down from the SMH board after serving a little over 10 years. Mike thanked David for his time, work, leadership, and how he has handled himself and his representation of the hospital in the community. Mike is proud to know David and have had him as part of the organization. David's reasonable, thoughtful, and wide view approach has been appreciated.

Board Officer Nominations - The slate of officers for 2022-2023 has been presented.

Shirley Coulter – Chairwoman Joe Wright – Vice Chair Andrea Mellinger - Secretary Gene Davis – Treasurer

Ron Mischke moved to approve the slate of officers as presented. David Smith seconded the motion. Motion carried.

Tom Ringley, Sheridan County Commissioner is in attendance and Mike thanked Tom for all that he and the other commissioners due to support the hospital. Tom announced that the Board of County Commissioners interview and appointed Kevin Kessner to the Sheridan Memorial Hospital board effective July 2022.

#### **FINANCE**

Nathan Stutte, CFO reports that SMH is seeing a trend with sustained losses in the past six months. There is a decrease in cash on hand, and accounts receivable and revenue cycle continue to struggle. Write offs have increased, which is a surprise as the payer mix has not changed. There has been a decline in reimbursement rates with Medicaid, Medicare and the VA. Commercial reimbursement is impacted by the patients' ability to meet their deductible. There is increased denials on emergency room activity. The number of travelers will be one traveler in July. Traveler costs had a huge impact on the organization financially; contract forecast for next year is \$500k. This is down considerably from \$5.3M spent in contract labor for FY2021-2022.

The budget for FY2022-2023 was provided for the board to review. Gene Davis on behalf of the Finance Committee, moved to approve the budget presented for FY2023. Ron Mischke seconded the motion. Motion carried.

<u>Title 25 Transport</u> – SMH would like to purchase a vehicle to transport medically stable Title 25 and behavioral health patients, by this means of transportation. There is an immediate need to transport this patient population to receive the care needed, or risk losing a bed. A 2019 Tahoe was identified for purchase, in order to be self-reliant and not take an emergency transport vehicle out of service. If purchased, this vehicle would have barriers installed; a barrier between the driver and mid seat and the mid seat to the back of the vehicle where personal belongings would be held. Personnel would have BLS and NVCI training. Cost of purchase is \$55,000 for a 2019 Tahoe with 19,000 miles and still under warranty. We average five transfers per month and most recent cost with Buffalo EMS providing the transport was \$6,800 per transport. Gene Davis motioned to approve the purchase of the transport vehicle. David Smith seconded the motion. Motion carried.



#### FOUNDATION REPORT

Cody Sinclair welcomes Richard Garber to the meeting. Mr. Garber is the current president of the Foundation Board. Cody states Mr. Garber leads, inspires, and connects people and is passionate about the hospital and community. He is involved and develops other board members as well.

Reminder that the Foundation golf tournament is July 1. The Foundation annual meeting is July 26 and the hospital board is invited to attend. Recognition of the scholarship recipients will be done at this time as well.

Ada Kirven extended her thanks to Tom Ringley, as Tom developed the scholarship program when he was with the Foundation many years ago. There were 30 applications to consider, with requests for funding on certifications, conferences, bachelor programs, and other schooling. The Foundation has \$25K-\$35K to award. The program continues to grow as the Foundation supports the SMH organization.

#### **BUILDING COMMITTEE REPORT**

The building committee met to address a few housekeeping items and change orders. The cooling tower is installed and in use. The bag house has been removed. The electrical system project has begun. There is a long lead time on the generator, with expected receipt now in January 2023. Project completion date has been moved to fit that time frame.

There is contingency money remaining from the TCU project as it came in on time and under budget. The cooling project came in under budget as well. Huge thanks extended to Jordan Lentz for his leadership and oversight on the projects, as both were completed on time and under budget.

The State Department of Health is here today and licensure from the department is expected in two weeks. All infrastructure and equipment will be installed by July 6, 2022.

#### **OTHER BUSINESS**

None.

#### **EXECUTIVE SESSION**

Shirley Coulter motioned to move into Executive Session at 5:07 p.m. to address personnel matters. David Smith seconded the motion. Motion carried.

General session reconvened at 5:30 p.m. to address the medical staff credentialing. Please see above under the Medical Staff Report for action taken.

# **ADJOURNMENT**

With no further matters to come before the board, the meeting adjourned at 5:32 p.m.

Patty Forister, Recorder

Andrea Mellinger, Secretary