

BOARD OF TRUSTEES JULY MEETING MINUTES WEDNESDAY, JULY 27, 2022 4:00 P.M.

MEMBERS PRESENT:	Shirley Coulter, Andrea Mellinger, Ron Mischke, Jenifer Shassetz, Gene Davis, and Kevin Kessner
MEMBERS ABSENT:	Joe Wright
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, Tom Ringley, Sheridan County Commissioner, Ann Aksamit, Tom Klepperich, Alan Dubberley, Sharon Krueger, Tyler Crossley, Lynn Smith, 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 4:02 p.m.

PUBLIC COMMENTS, INTRODUCTIONS

Holly Zajic, Chief Ambulatory Officer introduces Dr. Rebecca Krzyminski to the board as a new OB/GYN having joined the Women's Clinic practice. Dr. Krzyminski received her training in Michigan, recently practicing in Idaho, has two children aged 9 and 6, and the family loves being in Sheridan with all of the outdoor activities offered.

Shirley Coulter, Chairwoman, introduces Kevin Kessner who has replaced David Smith as a trustee on the board. Kevin is from Rock Spring, received his undergrad degree from the University of Wyoming, attended law school at the University of Wyoming, and has been in the Sheridan community for 15 years. He has 2 daughters aged 17 and 12, and his wife Jamie is a realtor.

A warm welcome was extended to both.

APPROVAL OF AGENDA AND MINUTES

The July board meeting agenda was presented. Andrea Mellinger moved to approve the agenda. Ron Mischke seconded the motion. Motion carried.

The June board meeting minutes from Wednesday, June 22, 2022 were presented and Ron Mischke motioned to approve the minutes. Andrea Mellinger seconded the motion. Motion carried.

QUALITY COMMITTEE REPORT

The Quality Committee met and Jen Shassetz and Kevin Kessner are new to the committee for the coming fiscal year. Cathy Bealer, CNO made the following report:

- ... SMH has achieved the CMS 5-Star designation for a second year in a row. SMH is 1 of 400 in the nation to receive this designation, and 1 of 2 in the State of Wyoming.
- ... Many of the inpatient falls reported have occurred during the patient bathroom journey. Will audit standard work to insure compliance of policy and processes, continue to educate new staff and re-education to existing staff.
- ... Home Care and Hospice UTI, CAUTI, Vascular Access Device Infection data was reviewed. There is no national data or benchmarks to compare to, but SMH continued to collect, analyze and report infection data in a consistent manner.
- ... Multi drug resistant organisms data was reviewed and SMH is below the national average. The stewardship



program, early labs and physician involvement help with positive outcomes.

- ... Hand Hygiene program is at 97.4% compliance. SMH has exceeded the goal of 95% compliance.
- ... There were 3 employee injuries reported in the last quarter. Mitigation has been done.
- ... Patient Feedback fewer complaints have been received, and there is an opportunity for improved communication and patient experience goals.

PATIENT EXPERIENCE REPORT

No report for the month.

MEDICAL STAFF REPORT

Dr. Gonda, on behalf of the Medical Executive Committee and Credentials Committee, recommends approval of the Medical Staff Initial Appointment and Medical Staff Renewals as discussed in Executive Session. There are no concerns to note.

MEDICAL STAFF INITIAL APPOINTMENTS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization
Rita J. Cherni-Smith, MD	Active Staff w Priv - May Admit	Internal Medicine		Independent Contractor - SMH

MEDICAL STAFF RENEWALS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization
Jason D. Ackerman, MD	Active Staff w Priv - May Admit	Internal Medicine	7/31/22	SMH Addictions Medicine Clinic
William F. Dresen III, MD	Consulting -No Admit w/o Active Physician cosign	Cardiology	8/28/22	Billings Clinic
Laura M. Ferries, MD	Consulting -No Admit w/o Active Physician cosign	Internal Medicine	8/23/2022	Nursing Home
Wyatt Gardner, PAC	Advanced Practice Clinician Physician Assistant	Urgent Care	8/26/2022	SMH Urgent Care
Jason E. Grennan, MD	Teleradiology/Deleg ated (No Membership)	Tele- Radiology	8/26/2022	Real Radiology
Jonathan A. Jaksha, MD	Teleradiology/Deleg ated (No Membership)	Tele- Radiology	8/26/2022	Real Radiology
Matthew Mendlick, MD	Teleradiology/Deleg ated (No Membership)	Tele- Radiology	8/26/22	Real Radiology
Megan R. Ratterman, D.O.	Active Staff w Priv - May Admit	Oncology	8/2/22	Welch Cancer Center



Name	Category	Specialty	Renewal Date	Affiliated Organization
Erik C. Smith, MD	Active Staff w Priv - May Not Admit	Emergency Medicine	8/2/22	SMH Emergency Department
Elise V. Sylar, M.D.	Active Staff w Priv - May Admit	Internal Medicine	7/29/22	SMH Hospitalist
David Walker, D.O.	Active Staff w Priv- May Admit	Internal Medicine	8/21/22	SMH Hospitalist

Shirley Coulter motioned to approve the initial appointment and renewals as presented. Kevin Kessner seconded the motion, motion carried.

ADMINISTRATION REPORT

<u>Compliance Report</u> – Lynn Smith, Compliance Officer states that she has received and reviewed the annual compliance documents from the trustees and that there are no conflicts that require mitigation or action.

<u>Scope of Services</u> – Sheridan Memorial Hospital maintains a deemed status with the Joint Commission and it is a requirement of the Joint Commission to report on the services offered to the community and have those services reviewed and approved by the Board of Trustees on an annual basis. Mike McCafferty recommends and motions to approve the Scope of Services as presented. Ron Mischke seconded the recommendation. Motion carried.

<u>American Rescue Plan Act (ARPA) Requests and Resolutions</u> – Mike indicates that hospital leaders are working on the application request for four (4) capital construction projects to submit for funds. The projects are the EmPATH and Crisis Stabilization Unit, HVAC distribution on the 2nd and 3rd floors and associated electrical needs, Supply Chain Relocation and Expansion Project, and the renovation of the Emergency Department reception and waiting area to create a Triage location. In the board packet is a Resolution for each project. The EmPATH and Crisis Stabilization resolution was approved at the June, 2022 board meeting. The resolutions, if approved will accompany each application submitted to the SLIB board. Mike reviewed the amounts that will be requested for each project:

- ... EmPATH and Crisis Stabilization Unit \$5,902,557
- ... HVAC Distribution and associated electrical needs \$1,004,928
- ... Supply Chain Relocation and Renovation Project \$608,995
- ... Emergency Department Triage \$480,000

The estimates are based on architect's projections and not from any bids received. Applications will be submitted to the State by August 12, 2022. We are unsure of the State's response; if approving or declining all as a group, or individually.

Mike clarified that SMH did receive funds through the CARES Act for HVAC on the second and third floors. The additional amount requested is for the distribution method of the HVAC system within that space and the electrical component associated with it. The expansion of materials management (supply chain) space is needed due to the amount of inventory we purchased and continue to purchase, as a result of the COVID-19 pandemic. The funds would be utilized to build a new warehouse area within the lower level shell space of the hospital. The funds requested for the front entry of the emergency department is to improve flow of traffic and triage patients. This would be a segregated space in the emergency department. The EmPATH Crisis Stabilization Unit was talked about in depth at the last meeting.

Shirley Coulter asked for a motion on the resolutions as presented. Ron Mischke moved to approve the resolutions on the four (4) capital projects as outlined. Gene Davis seconded the motion. Motion carried.



<u>Transitional Care Unit Update</u> – Cathy Bealer, Chief Nursing Officer states that she is excited to announce that Dr. Rita Cherni-Smith will be joining SMH as a TCU physician. Other staffing is being addressed with hiring a part-time nurse practitioner and some staff transferring from within the hospital to the new TCU. Everything is coming together nicely with equipment arriving and furniture being placed, and work flows in place. State approval is pending and the opening date is to be announced.

<u>Primary Care Practice</u> – Holly Zajic, Chief Ambulatory Officer states that the staff is excited to serve the community at 61 South Gould Street. We are working hard to open on August 1 with 301 patients scheduled for the first week. A multi-generational patient population will be seen. Exam rooms are set up and the building is designed well for a medical practice. There is ample patient parking and we are excited for the opportunity to expand our services to another location. Same day appointments, tele-health services and blood work will be offered. SMH will ask for feedback from our patients to improve our processes. The Primary Care Clinic will be open Monday through Friday 8 am – 5 pm. Marketing will be communicating with a mailing to let people know where they can be seen. The clinic will do patient notifications via text messages and phone calls as well.

FINANCE

Nathan Stutte, CFO reports that SMH had a great revenue year, although there were concerns in the last quarter, with declining reimbursements over the last 6 months. There was a positive payer mix, and a decline in uninsured, moving to a fixed payer. There was a decline in private insurance companies, and a strain on our revenue levels. Record revenue was offset by increased costs with double digit labor costs (travelers), and an increase in staff wages by 6%-8%, and inflation affecting supply chain. Cost of goods are up almost 30% from pre-pandemic costs. SMH has a negative 1% operating margin for year end. SMH spent over \$5M in contract labor, having only budgeted \$220K for the year. SMH peaked with 27 traveling nurses at one time, and we are currently down to 1. All of this had a big impact to our bottom line.

In the board packet is an audit letter from CliftonLarsonAllen, who is going through the audit and federal filing process required for the CARES money SMH received. Nathan is asking the board to review this information and get with him on any concerns, prior to the board accepting and finalizing the audit next month.

FOUNDATION REPORT

Cody Sinclair states that there was a great turn out for the annual meeting earlier in the week. Employees, leadership, and donors were in attendance, with the focus on education and awarding of scholarships. The Foundation Board has a change in leadership as well. The officers for the coming year is as follows:

Rob Johnson, President Sue Belish, Vice President Matt Ebzery, Treasurer Vicki Jorgenson, Secretary

The Foundation awarded 25 scholarships at the annual meeting. Thanks were extended to Tom Ringley, County Commissioner, who started the scholarship program in 2001 while employed with the Foundation.

BUILDING COMMITTEE REPORT

The building committee did not meet this month. The state inspection resulted in a mediation of the sprinkler heads for the TCU project, which is nearing completion. The boiler project and electrical project are on the front end with planning and the purchasing of equipment.



OTHER BUSINESS

None.

EXECUTIVE SESSION

Shirley Coulter motioned to move into Executive Session at 4:33 p.m. to address personnel matters. Andrea Mellinger seconded the motion. Motion carried.

General session reconvened at 4:48 p.m. to address the medical staff credentialing. Please see above under the Medical Staff Report for action taken.

As discussed in Executive Session, Shirley Coulter asked for a motion to amend the Bylaws consistent with the recommendation of legal counsel. Gene Davis moved to accept the recommendation. Andrea Mellinger seconded the motion. Motion carried.

The board reconvened into Executive Session at 4:58 pm to address legal and additional personnel matters.

ADJOURNMENT

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

Patty Forister, Recorder

Andrea Mellinger, Secretary