

# BOARD OF TRUSTEES JULY MEETING MINUTES Wednesday, July 26, 2023 4:00 P.M.

**MEMBERS PRESENT:** Gene Davis, Ron Mischke, Jenifer Shassetz, Kevin Kessner, and Richard Garber

**MEMBERS ABSENT:** Shirley Coulter

**OTHERS PRESENT:** Mike McCafferty, Dr. Shaun Gonda, Nyle Morgan, Cathy Bealer, Nathan Stutte,

Rob Forister, Brady Shoemaker, Amy Ligocki, Cody Sinclair, Dr. William Doughty, Kelly Lieb, Tommi Ritterbusch, Erin Oetken, Ann Aksamit, Tyler Crossley, Tonya Carlson, Sharon Krueger, Tom Ringley (Sheridan County Commissioner), Shelby Kruse with the Sheridan Press and Kevin Koile with

Sheridan Media.

#### **CALL MEETING TO ORDER**

Ron Mischke, Chairman, called the meeting to order at 4:00 p.m.

#### PUBLIC COMMENTS, INTRODUCTIONS

A welcome to Richard Garber as a new member of the Sheridan Memorial Hospital Board of Trustees.

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

Kevin Kessner moved to approve the July board meeting agenda as presented. Gene Davis seconded the motion. Motion carried.

Gene Davis moved to approve the minutes of the June board meeting held on June 28, 2023. Jenifer Shassetz seconded the motion. Motion carried.

#### **QUALITY COMMITTEE REPORT**

Kevin Kessner reports that the committee is seeing excellent data coming through, with buy-in from the employees. Kevin introduced Tommi Ritterbusch as the new Director of Continuous Improvement over the Quality Department. Tommi states that the committee reviewed readmission rates, Home Care and Hospice data relevant to catheter associated urinary tract infections and vascular access device infections, pain assessment and reassessment, employee injuries, patient feedback, inpatient falls and the prevention efforts within the fall program. The stoke program continues to be monitored to maintain and improve scores.

## PATIENT EXPERIENCE REPORT

Kelly Lieb, Director of Patient Experience reports that the committee had a great meeting and the new committee chair is Jenifer Shassetz. Kelly and Jen are excited to work together in the coming year. Kelly reports that the Welch Cancer Center (WCC) chose the strategic goal around the patient experience. The timing of the current patient survey will be changed, as the current survey goes out right after diagnosis and one of the questions asked is if the patient understands their medications. A cancer patient, without having received any treatment at the time of the survey, cannot answer that question. The survey will be done after a few rounds of treatment, so the patient can answer questions as to side effects and nursing education on the medications being administered.

The committee reviewed HCAHPS data and composite scoring. There is a lag in the HCAHPS data received, which makes it difficult to mitigate any issues or improve processes in real time. NRC does provide real time data.

Doctor-ordered blood draws vs patient directed blood draws were discussed. A number of doctors are proponents of wanting to push forward for a doctor-ordered blood draw program and move away from wellness only.



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## **MEDICAL STAFF REPORT**

Dr. Gonda states that discussion on initial appointments and renewals will be held in Executive Session.

Dr. Gonda, on behalf of the Medical Executive Committee and Credentials Committee recommends the following Medical Staff Initial Appointments and Medical Staff Renewals for consideration and approval.

**MEDICAL STAFF INITIAL APPOINTMENTS (ACTION)** 

MILDICAL STATE INITIAL AFFOINTMENTS (ACTION)								
Name	Category	Specialty	Renewal Date	Affiliated Organization				
Bruno Rodrigues, MD	Telemedicine/Dele gated (No Membership)	Critical Care		Billings Clinic				
Vanessa Sui, MD	Consulting -No Admit w/o Active Physician cosign (Telemedicine only)	Neurology	<	Blue Sky Neurology				
Zachary Zemore, MD	Active Staff – may admit	Internal Medicine / Hospitalist		Sheridan Memorial Hospital				

MEDICAL STAFF RENEWALS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization
Nina V. Beach, FNP-C, AOCNP	Advanced Practice Clinician - Nurse Practitioner	Medicine/ Oncology	8/22/2023	Welch Cancer Center/Sheridan Memorial Hospital

Kimberlee Gilbert, FNP- C, AGACNP-BC	Advanced Practice Clinician – Acute Care Nurse Practitioner	Medicine/ Hospitalist	8/29/2023	Sheridan Memorial Hospitalist	7
Amanda M. McIntire, FNP-C	Advanced Practice Clinician - Nurse Practitioner	Medicine/ Cardiology	8/3/2023	Sheridan Memorial Hospital / Heart Center	7
Becky L. Olson, RNC, WHNP	Advanced Practice Clinician - Nurse Practitioner	OBGYN/ Women's Health	8/19/2023	Sheridan Memorial Women's Clinic	7
Steve E. Rabon, DPM	Non-Member LIP - Podiatrist	Surgery- Podiatry	7/27/2023	Sheridan Surgical Center	7
Michael Sanderson, MD	Active Staff w Priv - May Admit	Pediatrician	7/31/2023	North East Wyoming Pediatric Associates	7



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Kevin Kessner moved to approve the Medical Staff Initial Appointments and Medical Staff Renewals as presented. Jenifer Shassetz seconded the motion. Motion carried.

#### ADMINISTRATION REPORT

Gallup Survey Results – Cody Sinclair talks about the process and what the scores mean, and action going forward. This is a tool that is used annually to assess employee engagement and determine what areas can be improved upon. There are twelve questions asked and the answers are compared against other hospitals. The goal was to have 90% participation by employees; SMH had 82% participation. Engaged employees results in less turnover. The data will be reviewed, goals set and work on the goals done to achieve great results.

Governance Training – Kim Russel will be in Sheridan on August 2 and 3 to do some governance training with the board. Kim is a colleague from Lincoln, NE and the former CEO of Bryan Health. Kim is very familiar with rural healthcare and will be a good resource for the board.

<u>WHA Annual Meeting</u> – Mike states that this is a great training for the board, as well as a good networking opportunity to meet with peers across the state. And good education as well. The meeting material has been provided to the board and arrangements will be made on their behalf if they choose to attend.

<u>Scope of Services</u> – It is a Joint Commission and CMS requirement that the Board of Trustees review the clinical services of the organization and approve the scope of service provided. A red-line version of the Scope of Services has been provided for review, so the board is aware of any changes in a department. Kevin Kessner moved to approve the Scope of Services as presented. Gene Davis seconded the motion. Motion carried.

Organizational Chart – Mike extended another welcome to Richard Garber as the newest member of the board, replacing Andrea Mellinger. Richard previously served on the Foundation Board, where he showed his leadership as a co-committee chair for the TCU campaign. He took on the project and propped us up to meet our goal for funding the TCU; and he made it look easy. Mike appreciates Richard's willingness, service and leadership to the board. SMH has a diverse board, and there is a lot to understand in order to do great work, and everyone at the table brings their own expertise.

Mike notes that Shirley Coulter is not in attendance, as well as Joe Wright. The board should have received a memo in which it was announced that Joe is no longer on the board, as he will be joining the organization as an employee. In Joe's time on the board, he asked questions to understand and analyze the data and has proven himself to be a strong leader. Joe will come to the organization as Chief Operating Officer, strengthening our leadership group. We will continue to see how the org chart develops with Joe joining the team in September, 2023.

#### **FINANCE**

Gene Davis, Finance Chairman states the committee had a good meeting. Nathan Stutte, CFO reports that there was a loss in June and a positive forecast with days of cash on hand. There was some growth in the various service lines, such as lab, the WCC and imaging. The operating rooms were really busy with general surgery, ENT, ortho and urology. Revenue Cycle continues to move forward as we grow the roles of the financial advocates, bring in a third party to assist, and utilize some additional Cerner services to capture revenue. All of this provides a great opportunity to lower write off percentages currently seen. SMH had a 3.7% operating loss for the year. Thanks extended to Gene for continuing his service on the board and as the chairman of the finance committee.

#### FOUNDATION REPORT

Cody Sinclair reports that the Foundation held their Annual Gratitude Gathering to reflect on another successful year. The Foundation has a very engaged board, but will see some changes. Dr. Sara Maguire went off the Foundation board after serving six years, as well as recognizing Matt Ebzery for serving his term. The Foundation is



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thrilled that Richard Garber will continue to have a seat at the table as the liaison between the Foundation Board and hospital board. Thanks extended to Joe Wright for being the previous liaison before stepping down, due to his change in circumstances. The Foundation welcomed Ryan Franklin as a new board member and the governance committee will make a recommendation to fill another vacancy soon.

Ada Kirven reports that at the Annual Gratitude Gathering, 26 scholarships were awarded. The scholarship program started in 2003 under Tom Ringley, then Executive Director of the hospital Foundation, to encourage nursing students at Sheridan College. There were a number of great applicants this year and \$38,000 in scholarships were awarded to various applicants. The \$5,000 Cato Scholarship was awarded to Brianna Julien, a TCU coordinator, going to Sheridan College to become a nurse. SMH is fortunate to have Sheridan College as a partner as we look for nurses and to grow our own.

Cody reminds the board that they are invited to a joint gathering of the Foundation Board and Hospital Board for a summer supper at Richard Garber and Elaine Henry's home on August 6<sup>th</sup>. This is an opportunity for fellowship and to get to know one another.

#### **BUILDING COMMITTEE REPORT**

Jenifer Shasstez reports there is a lot of excitement in all of the various projects. Rob Forister reported that the committee reviewed the status of all of the projects, which are within or under budget. Jen states that it was not intended for everything to happen at once, but due to delays in shipping and supply chain issues, everything arrived at once to the facility. Construction documents for the front entrance should be arriving in September and pricing brought to the board soon after. The construction documents for the pharmacy project are being worked on as well, as the first phase of the EmPATH Project. The elevator installation is coming, with the existing elevator being removed on Saturday. Removal of existing elevator, new installation, and refurbishing the other elevator could take up to 12 weeks. The generator is in place and the new transfer switches are to be installed, which is a process as it will mean a loss of power to various departments and coordination is required. This project was to be done in March 2023, but the generator was received in June.

#### **OTHER BUSINESS**

Mike introduced Tonya Carlson as the new Quality Manager. Tonya was with SMH before and had left, but she is now back and we are happy to have her.

#### **EXECUTIVE SESSION**

Ron Mischke made the motion to move into Executive Session at 4:42 p.m. to address personnel and legal matters. Gene Davis seconded the motion. Motion carried.

General session reconvened at 4:50 p.m. to address medical staff credentialing. Please see above under the Medical Staff Report for action taken.

The board went back into Executive Session at 4:51 p.m. to address personnel and legal matters.

## <u>ADJOURNMENT</u>

With no further matters to come before the board, the meeting adjourned at 5:06 p.m.

Patty Forister, Recorder