

BOARD OF TRUSTEES AUGUST MEETING MINUTES Wednesday, August 23, 2023 4:00 P.M.

MEMBERS PRESENT:	Ron Mischke, Jenifer Shassetz, Kevin Kessner, Shirley Coulter, and Richard Garber
MEMBERS ABSENT:	Gene Davis
OTHERS PRESENT:	Mike McCafferty, Dr. Shaun Gonda (via phone), Nyle Morgan, Cathy Bealer, Nathan Stutte, Rob Forister, Brady Shoemaker, Amy Ligocki, Kelly Lieb, Tommi Ritterbusch, Erin Oetken, Ann Aksamit, Tonya Carlson, Kristen Czaban, Bryan Opitz, Collette Miller, Robbi Morris, Brent Maurhoff, Sharon Krueger, Jennifer Gaona, Sean Bonnet, Alaina Bergstrom, Jasmine Slater, 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

APPROVAL OF AGENDA AND MINUTES

Kevin Kessner moved to approve the August board meeting agenda as presented. Jenifer Shassetz seconded the motion. Motion carried.

Shirley Coulter moved to approve the minutes of the July board meeting held on July 26, 2023. Richard Garber seconded the motion. Motion carried.

QUALITY COMMITTEE REPORT

Kevin Kessner reports that the committee has been productive and asked Tommi Ritterbusch, Director of Continuous Improvement to recap the meeting. The committee reviewed and discussed data relevant to operative procedures, mammogram call back rates, critical test/results reporting, core measures in sepsis and eCQMs, adverse drug reactions, medication errors, antimicrobial stewardship, medical record delinquency charting, tracer audits and safety events. Tommi reports that there are no major findings or trends to be of concern. Ron Mischke states that he has seen many improvements over the years and appreciates the professionalism and engagement exhibited by the committee.

PATIENT EXPERIENCE REPORT

Jenifer Shassetz, committee chair reports that they had wonderful attendance at the meeting. Dr. Schamber and Tyler Crossley reported on the critical strategic goal on the patient experience around the phone system at the Primary Care Clinic. The goal is to achieve a 90% of a live answer rate. Kelly Lieb, Director of Patient Experience reports that the committee also reviewed HCAHPS and NRC data.

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)

dvanced Practice Sinician - Nurse Practitioner	OBGYN /			Г
	Certified Nurse Midwife		Sheridan Women's Clinic	4
elemedicine (No lembership)	Infectious Disease		Billings Clinic	1
Consulting Staff Delegated)	Nephrology	\mathbf{S}	Billing Clinic	1
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MEDICAL STAFF RENEWALS (ACTION)

MEDICAL STAFF RENEWALS (ACTION)							
Name	Category	Specialty	Renewal Date	Affiliated Organization			
Laura Bainbridge, MSN, FNP-BC	Advanced Practice Clinician - Nurse Practitioner	Urgent Care	8/25/23	Sheridan Memorial Hospital/ Urgent Care			

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Cristian Balcescu, MD	Active Staff w Priv- May Admit	Surgery	8/25/23	Sheridan Orthopedic Associates
Diana Charlson, FNP- BC, DNP	Advanced Practice Clinician - Nurse Practitioner	Medicine	9/28/23	Sheridan Memorial Primary Care, ENT (PRN)
Robert Merchant, MD	Telemedicine/Deleg ated (No Membership)	Critical Care	8/28/23	Billings Clinic Pulmonary
KC McKenzie, PA-C	Advanced Practice Clinician – Physician Assistant	Medicine	8/30/23	Sheridan Memorial / Addictions Clinic/ENT
Joyce Pang, MD	Telemedicine/Deleg ated (No Membership)	Medicine / Critical Care	10/2/2023	Billings Clinic Pulmonary
Mohammed Quraishi, MD	Teleradiology/Deleg ated (No Membership)	Radiology	9/28/23	Real Radiology
Erin Rains, DO	Telemedicine/Deleg ated (No Membership)	Medicine / Critical Care	10/2/23	Billings Clinic Pulmonary



Shirley Coulter moved to approve the Medical Staff Initial Appointments and Medical Staff Renewals as presented. Jenifer Shassetz seconded the motion. Kevin Kessner abstained from approval of Dr. Balcescu due to a conflict of interest. Motion carried.

ADMINISTRATION REPORT

<u>Wyoming Hospital Association Annual Meeting Reminder –</u> The WHA annual meeting and convention will be held in Cheyenne, WY on August 30 and 31 at Little America. A golf tournament will be on Tuesday, August 29 for those that signed up for that event. Registration for the conference and hotel rooms have been made for those that have indicated they will be attending. Contact the administration office if you should need further details or confirmation information.

<u>Compliance Update</u> - Robbi Morris, Compliance Officer, reports that the Board of Trustees have completed the annual conflict of interest and compliance documents. There is one conflict identified in which the board member indicates family members are employed by the hospital. Any conflicts will be mediated with that board member abstaining from voting on matters relevant to the family member/employee.

Robbi is working on updating compliance and HIPAA education at the new hire level, with plans to implement to hospital employees on an annual basis. There is new software installed which is being tested; Robbi will announce in the coming months when it will be fully implemented.

<u>Community Health Needs Assessment Report</u> – Mike McCafferty states that SMH conducts a needs assessment every three years. SMH contracted with Professional Research Consultants to obtain the data and provide the assessment. This is a good baseline of the needs of the community and a great communication tool that we can put on the website for the community to view. This report has already been released to hospital employees and the board of trustees for viewing. Kristen Czaban, Director of Marketing and Communications provided the board with the press release that will go out after the board meeting, along with a synopsis of frequently asked questions. In this report, the key informants identified mental health as a major health concern. The hospital is finalizing its 2023-2026 Strategic Plan, which aligns closely with the needs of the community and the hospital's strategic priorities. The EmPATH and Crisis Stabilization unit addressing mental health needs is scheduled for completion December 2026.

<u>Wyoming Regional EMS</u> - SMH is engaged with Campbell County Health (CCH) in a joint venture for emergency management/9-1-1 ambulance service in Sheridan County. This joint venture established Wyoming Regional EMS. Campbell County Health, under the direction of Chris Beltz, has established a strong EMS system in Sheridan and provides management of the business and the regional service. Mike, along with Nathan Stutte and Dr. Luke Goddard meet on a regular basis with CCH to insure the joint venture is operationally sound. There are contracts with the VA, SCSD sporting events, Sheridan County rodeo, and polo events as well. Alaina Bergstrom, ICU and Emergency Department Manager states that this has been an awesome partnership with phenomenal providers. The EMS staff are great to work with and there is daily communication. The paramedics volunteer with SMH staff for 3rd Thursday events and mock trauma scenarios. Sheridan Regional EMS has a critical care transport team for ground transport of a Trauma I patient, if appropriate; along with seven new or lightly used ambulances and a mountain suburban for back country needs.

Wyoming Regional EMS will be hosting an open house on Tuesday, September 5 from 11 am -1 pm. A calendar invite will be extended to the board of trustees as a reminder of the event. Governor Gordon is planning on attending the event at this time.

The board extends their thanks to Mike, Nathan and Dr. Goddard for establishing the joint venture for EMS



services, as there was a need for a strong ambulance service and it is an asset to the community. Nathan Stutte made it known that Dr. Goddard has had a pivotal role in the quality of care and he is a huge advocate for the community.

<u>Trustee Announcement</u> – Mike had announced a month ago that Joe Wright was leaving the hospital board, as he will be joining SMH hospital operations. The County Commissioners went through their process for applicants to make an appointment to the hospital board to fill this position. Tom Ringley, County Commissioner states that the commissioners see this as an important role to make sure they appoint really good, strong individuals to boards, but especially the hospital board. The Commissioners recently reappointed Gene Davis to his third term on the hospital board, and Richard Garber for his initial term. Tom states that they recently interviewed and appointed Tobie Alsup to fill the vacancy with Joe Wright's departure. Tobie comes well recommended with her 40 years of nursing experience. The commissioners are confident she will do a great job.

FINANCE

Nathan Stutte, CFO reports that July historically is a slower month, and is budgeted for accordingly. However, 2023 has proved different. The clinics slowed down but the hospital was really busy with spine and Ortho cases in surgery. The lab and imaging were busy as well. There was a spike in the emergency department due to summer activities and increased visitors to the area. The clinics were slower and the labor costs were under budget. The health system budgeted for a loss, but the loss was not as bad as projected. Nathan is working on revenue cycle initiatives with CliftonLarsonAllen and obtaining additional resources for the billing department to process claims in a timely fashion. Nathan is working with a third party to obtain three full time billers. SMH is looking to accelerate and resolve the revenue cycle problems, however this seems to be an issue across the country.

FOUNDATION REPORT

Ada Kirven, Director of Donor Relations states that the Foundation has started their new fiscal year as of July 1 and are now aligned with the hospital's fiscal year reporting. The Foundation identified three appointments to their board – Rosemary Rieder will be the Auxiliary representative, Dr. Josh Scott will replace Dr. Sara Maguire as the physician representative, and Ryan Franklin as a director at large. Richard Garber will be the hospital board liaison. The board talked about equipment needs in radiology and nuclear medicine and how the foundation may be able to help. The Foundation is working on a communication plan on approaching community members on making an investment in the hospital.

BUILDING COMMITTEE REPORT

The building committee did not meet, but Rob Forister, Director of Facility Services provided the committee with an update via email. There were no action items to be addressed. The update to the committee included the electrical upgrade in moving the electrical load to the new transfer switches, waiting on MDU to provide power to the warehouse project, update on the main entrance remodel which we hope to have done by December, and the pharmacy project and the emergency department lobby and triage remodel/redesign. The elevator project is ongoing.

OTHER BUSINESS

Dr. Gonda states that radiology has a new stereotactic biopsy machine. Radiology has performed more procedures in the last month than in the previous five months. The machine would not have been possible without the Foundation's support and generosity. It has improved the patient experience.

EXECUTIVE SESSION

Shirley Coulter made the motion to move into Executive Session at 4:52 p.m. to address personnel and legal matters. Kevin Kessner seconded the motion. Motion carried.



General session reconvened at 4:58 p.m. to address medical staff credentialing. Please see above under the Medical Staff Report for action taken.

Ron Mischke motioned to go back into Executive Session at 5:00 p.m. Jenifer Shassetz seconded the motion. Motion carried.

ADJOURNMENT

With no further matters to come before the board, the meeting adjourned at 5:11 p.m. with no action taken.

Patty Forister, Recorder

Kevin Kessner, Secretary