



**BOARD OF TRUSTEES
NOVEMBER MEETING MINUTES
Wednesday, November 29, 2023 4:00 P.M.**

MEMBERS PRESENT: Ron Mischke, Jenifer Shassetz, Kevin Kessner, Shirley Coulter, Tobie Alsup, Gene Davis and Richard Garber

MEMBERS ABSENT:

OTHERS PRESENT: Mike McCafferty, Dr. Shaun Gonda, Joe Wright, Nyle Morgan, Cody Sinclair, Cathy Bealer, Nathan Stutte, Rob Forister, Ada Kirven, Dr. Doughty, Tommi Ritterbusch, Nicole Trott, Brady Shoemaker, Bryan Opitz, Dr. Goddard, Tom Ringley (Sheridan County Commissioner), Erin Oetken, Ann Aksamit, Kristen Czaban, Sharon Krueger, Britney Varner, Liz Dearcorn, Collette Miller, Chris Bilyeu, Kelly Lieb, Tonya Carlson, Brittany Goodvin, Ashleigh Snoozy 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

Nathan Stutte, CFO welcomes Nicole Trott who is the Director of Revenue Cycle. Nicole addressed the board with her thanks for the opportunity to join our team. Nicole gave an overview of her background and wealth of experience she brings to SMH.

APPROVAL OF AGENDA AND MINUTES

Gene Davis moved to approve the board meeting agenda as presented. Shirley Coulter seconded the motion. Motion carried.

Shirley Coulter moved to approve the minutes of the October board meeting held on October 25, 2023. Richard Garber seconded the motion. Motion carried.

QUALITY COMMITTEE REPORT

Kevin Kessner, Quality Committee Chair states that the committee had a great meeting with numerous presentations. Tommi Ritterbusch provides an overview to the board, which includes the following - the proposed schedule / calendar for 2024 was approved by the committee, 30 day readmits were reviewed, along with emergency department patient board flow, medication errors, adverse events, Home Care and Hospice, tracers and audits, moderate sedation, core measures, hospital acquired infections, multi drug resistant organisms, inpatient and visitor falls, and safety events. There are no trends identified at this time.

Ron Mischke notes that the Home Care and Hospice report indicates that there are 22 volunteers that work within Hospice. Appreciation is extended to those individuals for their efforts and volunteer work.

PATIENT EXPERIENCE REPORT

Kelly Lieb, Director of Patient Experience gave an overview of the committee meeting, which highlighted the great process improvement in Pharmacy. A strategic goal is to get the pharmacist at the bedside, educating the patient on what medication is being taken, why they are taking it and any side effects that may be experienced. A visual aid has been implemented as well that is left with the patient. With this initiative, we have seen an improvement in our scores with NRC Picker.

Kelly states that we are looking at opportunities around the digital experience relevant to telehealth and optimizing the patient portal.

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Mike reiterated that quality and the patient experience are two of the highest priorities for the hospital. He would like to commend the staff in those areas and the leadership of Dr. Goddard, Tommi Ritterbusch, Tonya Carlson, Kelly Lieb and Jody Hecker. Their efforts have built confidence in the community; pushing the bar to excel in those areas. Mike also acknowledges the board leadership and engagement in leading the quality and patient experience committees.

MEDICAL STAFF REPORT

Discussion on the credentials of 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)

Name	Category	Specialty	Renewal Date	Affiliated Organization	
Husain Danish, MD	Consulting -No Admit w/o Active Physician cosign	Neurology		Blue Sky Neurology	1
Andrew Ferguson, MD	Consulting -No Admit w/o Active Physician cosign	Neurology		Blue Sky Neurology	1
Erin Henderson, MD	Active Staff - w Priv - May Not Admit	Family Medicine		SMH Primary Care	1
Victoria Chase, LCSW	Non-Member LIP - Mental Health Consult (Psych, Mental Health)	Mental Health/ Behavior Health		Sheridan Memorial Hospital	1
Phillip Kissel, MD	Consulting -No Admit w/o Active Physician cosign	Neurosurgery		Sheridan Orthopedic	1

MEDICAL STAFF RENEWALS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization	
Melanie Kawulok, FNP-BC	Advanced Practice Clinician - Nurse Practitioner	Urgent Care	12/1/2023	SMH Urgent Care	1
Jason Otto, PA-C	Advanced Practice Clinician - Physician Assistant	Medicine	12/2/2023	SMH Internal Medicine	1

Veronica Ruvo, DO	Teleradiology/Delegated (No Membership)	TeleRadiology	12/4/2023	Real Radiology	
Emma Schmidt, PA-C	Advanced Practice Clinician - Physician Assistant	Emergency Medicine	12/1/2023	SMH Emergency Department	
Erin Strahan, PA-C	Advanced Practice Clinician - Physician Assistant	Medicine	12/4/2023	SMH Internal Medicine	

MEDICAL STAFF INITIAL FPPEs (ACTION)

Name	Category	Specialty
Laura Powell-Rousey, LCSW	Non-Member LIP - Mental Health Consult (Psych, Mental Health)	Mental Health/Behavior Health
Morgan Eliason, LCSW	Non-Member LIP - Mental Health Consult (Psych, Mental Health)	Mental Health/Behavior Health
Valerie Cates, LCSW	Non-Member LIP - Mental Health Consult (Psych, Mental Health)	Mental Health/Behavior Health

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Gene Davis moved to approve the Medical Staff Initial Appointments and Medical Staff Renewals as presented. Tobie Alsup seconded the motion. Motion carried.

ADMINISTRATION REPORT

Strategic Growth Discussion – Mike reminds the board about the behavioral health project and what that encompasses. We have a conceptual drawing for this project and all the ancillary projects that go along with it. The pharmacy project is the only project that we have construction documents for and a bid to go along with it. When we started this vision years ago, we estimated at total project cost of \$12.8M; it is now creeping towards \$14M. SMH is working to hone in on cost estimates for the balance of the projects. Several projects are independent of each other. The pharmacy project is the hinge point for everything that needs to happen to have the behavioral health project come to fruition. There are also timing and funding issues to be aware of. Discussions with the architects continue on the projects and how to obtain a guaranteed maximum price. Mike would like the board members join him for a work session(s), engaged in the process and the impact on the balance sheet for the hospital. The emergency department remodel is still on the table, as SMH has received approval from the SLIB for 50% of the project. The remodel will better triage patients with medical or mental health issues and will separate patients differently. Mike will come back to the board with this project in a couple of months. Mike will make a recommendation for the pharmacy project under the Building Committee report.

FINANCE

Nathan Stutte states that October was a busy month for the healthcare system. Volumes picked up at the Welch Cancer Center, Urgent Care, the Transitional Care Unit, Primary Care and the Cath Lab to name a few. These are above normal levels. There was great expense control in place. The health plan costs were high in October. Claims that paid out dated back to August. The first four months of the year we were 4.5% under budget. We have an engaged group working hard on efficiency and improvement. A loss was budgeted, but we operated in the black for the month.

FY2023 Audit with CliftonLarsonAllen – Darryn McGarvey from CLA is on the phone presenting on behalf of James Mann. Darryn highlighted that there were new accounting standards adopted by SMH; information technology agreement implemented in FY2023 with all governmental organizations. There was an investment in a joint venture as well. A single audit for provider relief funds was performed for federal dollars received during COVID. This audit shows the funds were utilized appropriately and as intended, due to losses of revenue and additional COVID expenses. There were no significant findings. CLA has issued an un-modified opinion for FY2023 with no proposed audit adjustments identified. This is the highest/best audit to receive. After review of the internal control design, a clean unmodified management letter will be provided indicating there are no issues with the internal controls in place.

Darryn reviewed some industry trends and general themes they are seeing across the industry. There are thirteen new merger guidelines for healthcare from the DOJ and FTC that will continue to be viewed. By 2029, 100% of baby boomers will be on Medicare and the government is looking to shore up finances.

Darryn states that SMH is doing a great job with capital and growth, keeping providers in the community and staying relevant. It's been a challenging year for the hospital.

Gene Davis motioned to accept the audit report for FY2023 as presented. Kevin Kessner seconded the motion. Motion carries.

FOUNDATION REPORT

Richard Garber states things are going well and they are approaching \$1M in fundraising during the “quiet phase” of campaigning for the behavioral health unit. Brittany Goodvin made a presentation to the Foundation board and it

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was well received.

Cody Sinclair, Chief Development Officer thanked the Auxiliary team for the hospital decorations. The Trees of Love will be this Sunday. Thanks extended to Richard Garber and Elaine Henry for connecting SMH to Matter 360. We have identified and provided outdated supplies that can be utilized internationally to this organization. Thanks also extended to Jordan Lentz and Amanda Nelsen for their help in identifying outdated and unusable items.

BUILDING COMMITTEE REPORT

Jen Shassetz states that the committee met and reviewed a few on-going projects. Rob Forister reported that the drywall is up on the front entrance project. Project should be done by year end. SMH should have two working elevators in three weeks. The construction documents have been completed for the emergency department project and we will proceed with obtaining pricing. The part needed for the new generator will be installed on 12/11 and then testing will be done. At that point, we can finish the transfer switches.

Pharmacy Project – the building committee would like to recommend the board approve \$3,150,000 for the pharmacy project. There is an additional request of \$450K recommended to do the material supply chain project as well, since both are in the same area of the lower level and it makes sense to address the projects at the same time. A recommendation to approve \$3.6M for both projects is brought before the board to consider. Jen Shassetz moves to approve the \$3.6M for the pharmacy project and materials management project (supply chain) as presented. Gene Davis seconded the motion. Motion carries.

OTHER BUSINESS

None

EXECUTIVE SESSION

Ron Mischke motioned to move into Executive Session at 4:50 p.m. to address personnel matters.

General session reconvened at 4:56 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 4:58 p.m. to address other personnel and legal matters.

ADJOURNMENT

With no further matters to come before the board, the meeting adjourned at 5:13 p.m. with no action taken.

Patty Forister, Recorder

Kevin Kessner, Secretary