

# BOARD OF TRUSTEES JANUARY MEETING MINUTES Wednesday, January 24, 2024 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, Dr. Luke Goddard, Jordan Lentz, Ada Kirven, Dr. Doughty, Tom Ringley, Tanya Carlson, Dr. Sierra Gross, Sharon Krueger, Ashley Phipps, Tyler Crossley, Liz Dearcorn, Brent Maurhoff, Collette Miller, Jasmine Slater, Bryan Opitz, Erin Oetken, Payton Gamble, Kristen Czaban, Jennifer Gaona, Ashley Winne, Jennifer Rasp-Vaughn, Chris Bilyeu, Jenny Teel, Tommi Ritterbusch, Jessica Kaminski and Brady Shoemaker

# CALL MEETING TO ORDER

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

# **PUBLIC COMMENTS, INTRODUCTIONS**

None

# APPROVAL OF AGENDA AND MINUTES

Gene Davis made a motion to add "Fluoroscopy Equipment (Action)" under the Finance Committee report. Kevin Kessner moved to approve the board meeting agenda as amended. Jenifer Shassetz seconded the motion. Motion carried.

Gene Davis moved to approve the minutes of the December board meeting held on December 20, 2023. Tobie Alsup seconded the motion. Motion carried.

# **QUALITY COMMITTEE REPORT**

Kevin Kessner, Quality Committee Chair states that the committee had their regular monthly meeting and asked Tonya Carlson, Quality Manager for a recap. The annual infection prevention plan was presented and approved. The hospital continues to meet goals on safety reporting, seeing many safety events are being caught before reaching the patient. Many process improvements are occurring in infusion and transfusion services. Reports from Home Care and Hospice and pain management quarterly audits; employee injuries are down and seeing decreased feedback files from the patient experience team. Inpatient falls are seeing reductions as well as readmissions down to 8% for the calendar year which exceeds the national goal of 14%.

# PATIENT EXPERIENCE REPORT

Dr. Gross reported on behalf of the recent patient experience meeting. The group has transitioned to a story board model where key leaders from around the hospital report how patient experience is affected in their areas. Many positive experiences have been shared with engagement from all. The board appreciates all efforts in this regard.

# MEDICAL STAFF REPORT

Dr. Gonda will discuss credentials of initial appointments and renewals held in Executive Session. No further report from the Medical Staff.

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.



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#### Medical Staff Credentials Report January 2024 Board of Trustees Meeting January 24, 2024

#### MEDICAL STAFF INITIAL APPOINTMENTS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization	Cred Cmte.	MEC	Board	Comments
Danielle Sankey, AGACNP-BC	Advanced Practice Clinician - Nurse Practitioner	Medicine		SMH Hospitalist	1/9/24	1/18/24	1/24/24	
Joseph Schmidt, FNP-C	Advanced Practice Clinician - Nurse Practitioner	Urgent Care (PRN)		SMH Urgent Care	1/9/24	1/18/24	1/24/24	ACLS, PALS are in process

#### MEDICAL STAFF RENEWALS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization	Cred Cmte.	MEC	Board	Comments
LaNora Dixon	Advanced Practice Clinician - Nurse Practitioner	Medicine	2/3/2024	Billings Clinic	1/9/24	1/18/24	1/24/24	
Andrew Lashus, MD	Consulting -No Admit w/o Active Physician cosign	Pediatric Cardiology	2/19/2024	Intermountain Health	1/9/24	1/18/24	1/24/24	
Cheryl Varner, MD	Active Staff w Priv - May Admit	Surgery	2/2/2024	SMH ENT	1/9/24	1/18/24	1/24/24	

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

# ADMINISTRATION REPORT

Trauma Designation - Cathy Bealer, CNO presents the three year Trauma Designation Resolution to the board as an action item. It is a requirement of the State Trauma Review Group and the American College of Surgeons, acknowledging our commitment to maintain a Level III Trauma Center. The surgeons have also acknowledged their commitment, and the resolution is attached for the board's review. The trauma team prepares for site visits and continual improvement work in this regard. Shirley Coulter motioned to approve the resolution as presented, Jenifer Shassetz seconded the motion. Motion carried.

Fluoroscopy Presentation– Chris Bilyeu, Radiology Manager stated that unfortunately the fluoroscopy machine is out of order and will not be able to be fixed due to unavailable parts requiring an unanticipated purchase of a new machine. Quotes from five different vendors have been received and the option chosen will cost \$599,950. The new machine will have additional use by x-ray and speech pathology for patient care needs and will be mobile for hospital use. In transition of the new machine, services will be delayed for approximately 30 days. See Finance Committee report for action on capital item request.

Strategic Growth | Surgical Services – Mike continues to prioritize master planning goals to include upcoming needs for the surgical services area to best meet the needs of the community. This is a forecast out to the next 25 years, where an investments now will affect the future. He plans to host open house meetings with the staff and physicians in the next week. There are many obstacles we are facing due to our growing volumes that need to be addressed. For example, central sterile area is too small, there is lack of storage for technology in the OR area, there is a bottleneck for endoscopy/gastro patient flow which causes delays in procedures. In addition there are flow issues around the PACU area and a need for a dedicated space for c-sections. Being landlocked adds to these complexities. Following meetings with the staff, Mike will come back to the Board with concepts and construction designs to move forward in phases to address the initial solutions.



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# **FINANCE**

Fluoroscopy Equipment (Action) - On behalf of the recommendation by the Finance committee, Gene Davis made a motion to approve the purchase of a new FujiFilm Radiographic Fluoroscopy System. The equipment plus construction will cost a total of \$599,950. Richard Garber seconded the motion. Motion carried.

Nathan Stutte states that December financials stayed very busy. TCU had one of its best months, averaging patient volumes around 18. OR utilization was above budget and last year. Cancer Center remains busy. Clinics also stayed busy and saw growth over budget and last year, specifically Addiction Medicine Clinic, Primary Care and Internal Medicine. Operating costs were well controlled and it was a busy capital month with implementation of a new ultrasound machine, med/surg beds, and the new nuclear medicine equipment. Overall a busy, solid month. Nathan also noted the discount ratio was down by 2%, with efficiencies in revenue cycle and a solid payer mix, showing improvement from last year.

Board chair, Ron Mischke, thanked Nathan and his team. Nathan noted a lot of managers have executed efficiencies within their areas that directly affect these financials. Everyone is doing great work.

#### FOUNDATION REPORT

Cody Sinclair reported from the Foundation Board meeting last evening, where members were able to tour the hospital and view the many construction areas, ie new front registration area, employee lounge, and the pharmacy project, which is now underway. The Foundation is excited and working to launch the behavioral health funding process in March 2024. Dr. Josh Scott, Foundation member also reported that surgical services has now completed over 100 robotic procedures and that he is thankful for all the great physicians and communications occurring between the medical staff.

#### **BUILDING COMMITTEE REPORT**

Jordan Lentz reported progress in many areas of construction and facilities work. The electric system is 95% complete, the front entrance project will be completed within the week; elevators are fully installed and working. In regards to the behavioral health construction timelines, the Pharmacy phase is on track with its timeline, Pediatrics is entering the construction document phase, the Empath facility is in the concept phase, and the ED Triage project is awaiting bids.

#### **OTHER BUSINESS**

None

#### **EXECUTIVE SESSION**

Ron Mischke motioned to move into Executive Session at 4:30 p.m. to address personnel and legal matters. Shirley Coulter seconded the motion. Motion carries.

General session reconvened at 4:35 p.m. to address medical staff credentialing. Please see above under the Medical Staff Report for action taken.

Ron Mischke moved to go back into Executive Session at 4:37 p.m. to address other personnel matters. Shirley Coulter seconded the motion. Motion carries.

General session reconvened at 4:50 p.m. Kevin Kessner made the motion to approve the CEO evaluation and compensation as discussed in Executive Session. Gene Davis seconded the motion. Motion carried.



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# ADJOURNMENT

With no further matters to come before the board, the meeting adjourned at 4:51 p.m.

Amy Ligocki, Recorder

Kevin Kessner, Secretary