

BOARD OF TRUSTEES FEBRUARY MEETING MINUTES Wednesday, February 28, 2024 4:00 P.M.

MEMBERS PRESENT:	Ron Mischke, Jenifer Shassetz, Kevin Kessner, Tobie Alsup, Gene Davis, and Richard Garber
MEMBERS ABSENT:	Shirley Coulter, Trustee and Dr. Luke Goddard, CMO, and Dr. Shaun Gonda, COS
OTHERS PRESENT:	Mike McCafferty, Dr. Sara Maguire, Joe Wright, Nyle Morgan, Cody Sinclair, Cathy Bealer, Nathan Stutte, Rob Forister, Jordan Lentz, Ada Kirven, Tanya Carlson, Dr. Sierra Gross, Sharon Krueger, Ashley Phipps, Liz Dearcorn, Brent Maurhoff, Jasmine Slater, Bryan Opitz, Erin Oetken, Payton Gamble, Kristen Czaban, Jennifer Gaona, Chris Bilyeu, Tommi Ritterbusch, Brendon Kerns, Tom Klepperich, Robbi Morris, Brittany Goodvin, Jody Hecker, Amy Ligocki, Sean Bonnet, and Brady Shoemaker

CALL MEETING TO ORDER

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

PUBLIC COMMENTS, INTRODUCTIONS

Tom Klepperich introduces Brendon Kerns, who has joined SMH as a staff attorney working alongside Tom. Brendon provides the board with some background information on his current practice, schooling and origin. He is excited to be here and a warm welcome was provided by the board.

APPROVAL OF AGENDA AND MINUTES

Jenifer Shassetz requests to amend the agenda with the addition of "Conference Rooms and Office Space (Action)" under the Building Committee report. Gene Davis moved to approve the board meeting agenda as amended. Kevin Kessner seconded the motion. Motion carried.

Jenifer Shassetz moved to approve the minutes of the January board meeting held on January 24, 2024. Richard Garber seconded the motion. Motion carried.

QUALITY COMMITTEE REPORT

Kevin Kessner, Quality Committee Chair states that the committee had their regular monthly meeting and asked Tommi Ritterbusch, Director of Continuous Improvement for a recap. Tommi states that the Environment of Care Plan was reviewed and approved for 2024. Also reviewed and discussed was operative procedures, antimicrobial stewardship, medication errors, medication adverse events, critical tests and critical results, mammography call back rates, critical tests and results in radiology, employee flu and employee COVID -19 vaccination rates, core measures and safety events. There are no concerns noted or negative trends to address with the data reviewed.

PATIENT EXPERIENCE REPORT

Dr. Gross reported on behalf of the patient experience meeting, stating the group reviewed the recently released HCAHPS scores. There is a poor response rate, with the national recommended average at 20% or greater; so there is some work to be done relevant to responses. With the story board model adapted, departments are excited to present their projects. Ron Mischke reflects that the patient experience endeavor has grown and there is positive engagement and professionalism across the organization.

MEDICAL STAFF REPORT

Dr. Maguire, in attendance on behalf of Dr. Gonda, will discuss credentials of initial appointments and renewals held in Executive Session. Dr. Maguire states that the Quarterly Medical Staff meeting will be on March 12. Dr.



Maguire also extended her thanks to Mike McCafferty and Amy Ligocki for the hospital sponsored medical staff leadership conference. There was great attendance, with presentations on credentialing, peer review and medical staff behaviors. Mike extends his thanks to Amy and her leadership, and to that of Brittany Varner and Roxanne Lueders in the medical staff office. The SMH medical staff program is the model by which other hospitals should emulate. Amy participates in the medical staff credentialing process at the state and national levels and has set the bar high for what the program should look like.

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



MEDICAL STAFF INITIAL APPOINTMENTS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization
Xavier E. Fonseca Fuentes, MD	Telemedicine/Deleg ated (No Membership)	Pulmonary Diseases		Billings Clinic Pulmonary
David S. Mann, DO	Telemedicine/Deleg ated (No Membership)	Infectious Disease		Billings Clinic Infectious Disease
Amanda Kirlin, SLP	Non-Member / SMH Employee	Speech Language Pathologist		Sheridan Memorial Hospital
Miranda Woodward, SLP	Non-Member / SMH Employee	Speech Language Pathologist		Sheridan Memorial Hospital

MEDICAL STAFF RENEWALS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization
Keith T. Borg, MD	Active Staff w Priv - May Not Admit	Emergenc y Medicine	3/20/2024	SMH Emergency Department
Allen L. Gee, MD	Consulting -No Admit w/o Active Physician cosign	Medicine	3/02/2024	Frontier Neurosciences LLC
Stephen Holst, MD	Active Staff w Priv - May Admit	Urological Surgery	3/16/2024	Big Horn Urology

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SHERIDAN MEMORIAL HOSPITAL

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Shaun J. Gonda, MD	Active Staff w Priv - May Not Admit	Radiology	3/17/2024	SMH Radiology
David S. Lin, MD	Teleradiology/Delegated (No Membership)	Radiology	3/2/2024	Real Radiology
Steven T. McCormack, MD	Teleradiology/Delegated (No Membership)	Radiology	3/6/2024	Real Radiology
Seth Parsons, MD	Telemedicine/Delegated (No Membership)	Psychiatry	3/4/2024	Avel eCare
John Person, MD	Telemedicine/Delegated (No Membership)	Psychiatry	3/23/2024	Avel eCare
Blaine J. Ruby, MD	Consulting -No Admit w/o Active Physician cosign	Surgery	2/28/2024	Johnson County Healthcare Center
Ryan Santin, MD	Telemedicine/Delegated (No Membership)	Psychiatry	3/4/2024	Avel eCare

MEDICAL STAFF ADDITIONAL PRIVILEGE REQUEST (A

Name	Category	Specialty	
KC McKenzie, PAC	Advanced Practice Clinician – Physician Assistant	Urgent Care	

Tobie Alsup moved to approve the Medical Staff Initial Appointments, Medical Staff Renewals, and Medical Staff Additional Privilege request as presented. Kevin Kessner seconded the motion. Motion carried.

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ADMINISTRATION REPORT

2023 Annual Compliance Report Overview – Robbi Morris provided a summary of the work done in the compliance office for 2023. Robbi transitioned into the role of compliance officer in March of 2023 and since that time has reviewed standards, policies and procedures; has provided education and training, monitored and audited files and compliance issues, and performed investigations to report to the Secretary of HHS as required.

Recruitment Update -

SMH always has recruitment going on at any given time, but are currently working on specialty areas such as medical oncology and obtaining a partner for Dr. Ratterman at the Welch Cancer Center. Another physician is needed to join the OB/GYN practice and another Hospitalist is needed as we grow service lines. A recruitment strategy for psychiatry is being developed as well. To date, SMH has received outstanding candidates for the three specialties mentioned. Our expectation is to have those filled soon. The work has just begun on psychiatry as we work on the facility and clinical infrastructure around behavior health.

Financial Projections for Surgical Services – Mike will report next month on the surgical services area relevant to the growth and plan to provide relief to the current space. We are in the design development phase, and obtaining estimates on the cost of construction and equipment needed, which will be shared along with a Gant chart with project deadlines and approval for expansion. The initial conversations have gone well with the stakeholders, as we look to expand our capabilities and clean up areas with dysfunctional flow. Nyle Morgan, Joe Wright, Rob Forister and Jordan Lentz are involved with the planning and design development, and meeting with staff for input.

Outpatient Imaging Expansion - SMH is looking to increase the capacity to take care of patients and meet the



needs of the patients and physicians in our community. There is increased demand in imaging services and there are questions on how we can improve access and shorten turnaround times for reporting results to the physicians.

SMH will increase staffing with the goal to expand all modalities to M-F 7:30 am - 9:00 pm schedule to see patients beginning April 1, 2024. If there is high demand, we will look at offering some Saturday appointment options as well. With expanded hours of operation, this will give patients a broader choice in time and shorten the time to get results back to the physicians. This will be marketed to the physicians and the community, offering better access for the patient and increasing confidence with the physicians that results will be reported quicker. This will be fluid for a while as we see what the volume of the modalities are and how they fluctuate. Mike will keep the board updated.

Mike announced that there was a benefit held for the Sheridan County Medical Society Scholarship Fun and \$15,000 was raised from the auction items. The society will provide a scholarship(s) to a student going into the health profession.

Last week, SMH had a Jeans Friday where employees paid \$5 to wear jeans for the day. The Friday Jean Day funds collected in the amount of \$1,500 will go to the benefit of the Krinkee family. Today, SMH hosted a Dining Donation event where the funds collected for breakfast and lunches purchased will be donated to the family as well. The funds from the two events total \$9,000 which will go to the Krinkee family fund. Please thank Tomi Riegert, Nutritional Services Manager and her staff for all of their efforts.

FINANCE

Gene Davis, Finance Chair states that the high point of the Finance Committee meeting was a presentation on Revenue Cycle, which has shown huge improvements. Nathan Stutte, CFO reports that January's performance was busier than expected. Total revenues exceeded our target by 8%. There is continued improvement in the payer mix, with a higher level of commercial patients. The budget projection was not met due to an increase in costs, but we were able to generate a positive margin. A 12 month revenue cycle plan was reviewed in order to get to under 50 days in A/R by January 2025. There are goals outlined relevant to continued performance improvement, processes, and communication with patients.

FOUNDATION REPORT

Cody Sinclair reports that Tommi Ritterbusch presented on the GAP funds utilized within the hospital, and Megan Ripley reported on the Comfort Care Funds utilized at the Welch Cancer Center to the board. The Foundation Board was impressed with the programs and grateful on how the funds impact patient care daily. The Nursing Scholarship applications will be available in May, with decisions made in June, and scholarships awarded at the July Foundation meeting. This is a great program as we grow our nurses from within. The Foundation Board also expressed their gratitude at being invited to the Sheridan County Medical Society Scholarship fundraiser and meeting the physicians.

BUILDING COMMITTEE REPORT

Jen Shassetz, Building Committee Chair reports that the group reviewed projects under construction and in the design phase. Rob Forister, Director of Facility Services states that the pharmacy phase of the EmPATH project is on schedule, the peds phase of the project is in the contruction document phase and the front entrance project is complete. The front entrance project came in under budget thanks to Jordan Lentz, project manager. The supply chain project is ongoing as well.

It has been identifed that there is a need for additional confernce rooms and offices, that could be located in the lower level shell space. A design has been presented, which is less expensive than what was originally outlined and estimated by the architects. The Building Committee reviewed the design concept and budget and recommends



board approval for \$180,130 to create office space and conference rooms, along with a couple of bathrooms, by the pharmacy in the lower level of the hospital. Gene Davis motioned to approve the project as outlined. Jenifer Shassetz seconded the motion. Motion carries.

OTHER BUSINESS

None

EXECUTIVE SESSION

The board moves into Executive Session at 4:36 p.m. to address personnel matters.

General session reconvened at 4:41 p.m. to address medical staff credentialing. Please see above under the Medical Staff Report for action taken.

ADJOURNMENT

With no further matters to come before the board, the meeting adjourned at 4:42 p.m.

Patty Forister, Recorder

Kevin Kessner, Secretary