

BOARD OF TRUSTEES JULY MEETING MINUTES Wednesday, July 30, 2025 4:00 P.M.

MEMBERS PRESENT: Ron Mischke, Jenifer Shassetz, Gene Davis, Kevin Kessner, Tobie Alsup, Rob

Johnson, and Richard Garber

MEMBERS ABSENT: OTHERS PRESENT:

Mike McCafferty, Dr. Megan Ratterman, Dr. Sierra Gross, Nathan Stutte, Joe Wright, Cody Sinclair, Cathy Bealer, Rob Forister, Brendon Kerns, Tommi Ritterbusch, Brady Shoemaker, Tenille Straley, Anthony Spiegelberg, Ada Kirven, Jasmine Slater, Sharon Krueger, Megan Ripley, Ann Aksamit, Kristen Czaban, Nick Siddle (County Commissioner), Jessica Heil, Amy Ligocki, Liz Dearcorn, Bryan Opitz, Erin Oetken, Jennifer Gaona, Sean Bonnet, Brent Maurhoff, Tonya

Carlson, Dawn Morgan, Dr. Ulibarri, Sean Schoonover, Kevin Koile with

Sheridan Media, and Weston Pope with the Sheridan Press

CALL MEETING TO ORDER

Ron Mischke, Chairman called the meeting to order at 4:01 p.m.

PUBLIC COMMENTS, INTRODUCTIONS

Mike McCafferty, CEO welcomes Dr. Jim Ulibarri and Sean Schoonover, PA-C to the meeting. Dr. Ulibarri and Mr. Schoonover have been in the community for years, but performing spine surgery cases in Gillette, WY. Both are back in Sheridan with the hospital's new Spine Center of the Bighorns, which opened July 14. Dr. Ulibarri states that he is grateful to be back practicing in the community and the transition has been very smooth. He appreciates the warm welcome of the staff and thanks the leadership team under the direction of Melanie Aksamit and Sean Bonnet for having everything in place ensuring the smooth transition. The spine center is very busy already, and there are patients coming from all over the state, but he feels there is room for growth.

Mr. Schoonover arrived in Sheridan 10 years ago and started working with Dr. Ulibarri at that time. He states that the transition has been wonderful and the team is great; and he too extends his thanks to the nursing staff and leadership teams.

Dr. Ulibarri (Douglas, WY), Katie Mischke, MPAS, PA-C (Sheridan, WY), and Sean Schoonover, PA-C (Cody, WY) are all from Wyoming and are making a huge difference to the community with their skills.

A warm welcome is extended to the board's newest trustee, Rob Johnson. Rob grew up in Dayton, WY and his family now resides in Sheridan. Rob has held many leadership roles in the community and served on the Foundation board for 6 years previously. Being integrated with the Foundation and learning about the hospital, he is excited to continue to serve the community as a trustee and he is thankful for the opportunity to do so.

APPROVAL OF AGENDA AND MINUTES

Kevin Kessner motioned to approve the agenda as presented. Richard Garber seconded the motion. Motion carried.

Tobie Alsup moved to approve the minutes of the board meeting held on June 25, 2025 as presented. Jenifer Shassetz seconded the motion. Motion carried.

QUALITY COMMITTEE REPORT

Kevin Kessner, committee chair states that with the new fiscal year, Tobie Alsup has joined the Quality Committee. Jenifer Shassetz was recognized and thanked for her time as she will no longer serve on this committee. Tommi



Ritterbusch, Director of Continuous Improvement states that the committee reviewed and approved the 2025/2026 Quality and Patient Safety Plan with no concerns. Other data reviewed by the committee was relative to the quality metrics report for Sheridan Green House, CAUTIs and CLABSIs with Home Care and Hospice with none reported, nursing pain management, restraints and seclusion data, inpatient and outpatient falls, employee injuries, utilization review, readmission rates, safety events and CMS star rating. There are no negative trends or areas of concern noted.

PATIENT EXPERIENCE REPORT

Tommi Ritterbusch, Director of Continuous Improvement will report on behalf of Kelly Lieb, Director of Patient Experience. Great work continues with the PFAC (now known as The Voice). Applications are being accepted to be a part of this group and interviews will be held in August/September, with the first meeting to be held in October. The committee also reviewed the emergency management protocol at the Welch Cancer Center, and the great work and improved NPS scores in wound care. The ENT Clinic now has effective support in audiology, resulting in improved patient satisfaction scores. The emergency department has improved their triage process and staff engagement, resulting in improved scores. Jody Hecker, Patient Advocate reported on the grievance process.

MEDICAL STAFF REPORT

Credentialing will be discussed in Executive Session with no other business to bring before the board.

After review and discussion in Executive Session, Dr. Megan Ratterman, 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 | Affiliated Organizatio n |
|-----------------------------------|---|-----------------------|---------------------------------------|
| Todd Beckstead, MD | Consulting -No Admit w/o Active Physician cosign | General Surgery | WY Surgical Associates |
| Andrew J. Ferris, MD | Active Staff w Priv - May Not Admit | Anesthesiol ogy | SMH Anesthesiol ogy |
| Kelsey Ferris, MD | Active Staff w Priv - May Not Admit | Emergency Medicine | SMH Emergency Department |
| Agustin G. Velazquez Perez, MD | Consulting -No Admit w/o Active Physician cosign | Nephrology | Billings Clinic Nephrology |
| Laci D. Little, FNP-BC | Advanced Practice Clinician - Nurse Practitioner | Medicine | SMH SameDay Health & Imaging |
| Brynn Robinson, FNP-C | Advanced Practice Clinician - Nurse Practitioner | General Surgery | WY Surgical Associates |
| Jiayue (Sherry) Yuan, MD | Consulting/Telemedicine -No Admit w/o Active Physician cosign | Neurology | Blue Skye Neurology |



MEDICAL STAFF RENEWALS (ACTION)

| Name | Category | Specialty | Renewal | Affiliated |
|-------------------------------------|--|--|-----------|---------------------------------------|
| Name | | орестану | Date | Organization |
| Nina V. Beach, FNP-C, AOCNP | Advanced Practice Clinician - Nurse Practitioner | Oncology Medicine | 8/22/2025 | SMH Welch Cancer Center |
| Krista J. Frank, DNP, CNM, FNP-C | Advanced Practice Clinician - Nurse Practitioner | OB/GYN | 8/23/2025 | SMH Women's Clinic |
| Amber E. Friis, LCSW | Non-Member LIP - Mental Health Consult (Psych,Mental Health) | Mental/Behavioral Health Case Management | 8/07/2025 | SMH |
| Amanda M., McIntire, MSN, FNP-C | Advanced Practice Clinician - Nurse Practitioner | Cardiology | 8/03/2025 | SMH Heart Center |
| Becky L. Olson, RNC, WHNP | Advanced Practice Clinician - Nurse Practitioner | OB/GYN & Pediatrics | 8/19/2025 | SMH Women's Clinic |
| Christopher M. Prior, DO | Current - Good Standing | Family Medicine | 7/31/2025 | SMH SameDay Health & Imagine |
| Michael Q. Sanderson, MD, FAAP | Current - Good Standing | Pediatrics | 7/31/2025 | NEWPA |
| Kara Willenburg, MD | Telemedicine/Delegate d (No Membership) | Infectious Disease | 8/23/2025 | Rocky Mountain Infectious Diseases |

Tobie Alsup moved to approve the medical staff initial appointments and medical staff renewals as presented. Jenifer Shassetz seconded the motion. Motion carries.

ADMINISTRATION REPORT

<u>Board Officer Nominations</u> – Ron Mischke, board chair states that the Nominations Committee met and brings forth for consideration and action the following officer nominations for FY2025-2026:

Jenifer Shassetz – Chair Kevin Kessner – Vice Chair Gene Davis – Treasurer Ron Mischke - Secretary

Gene Davis moves to accept the nominations as presented. Richard Garber seconds to motion. Motion carries.

Mike McCafferty states that Ron Mischke has done a great job as the chair of the board of trustees. Ron provides effective leadership to move various initiatives and hospital goals, such as quality and patient experience forward. This kind of leadership is needed, with a sense of responsibility to those in the community to offer and be the best. Mike is proud to report that at the State hospital board meeting last month, Ron was nominated to be the State Chairman for Governance for the hospitals in the State of Wyoming. This will entail Ron traveling around the state and engaging boards like ours to get involved in governance education. Mike appreciates Ron's leadership not only to our board, but in the community and throughout the state.

Scope of Services

It is an annual requirement of the Joint Commission that the board reviews and approves the Scope of Services offered by the hospital. This also goes hand in hand with the community needs assessment that is done every couple of years, ensuring we are meeting the needs of our community. The next community needs assessment will be in 2026. Ron Mischke motioned to approve the Scope of Services as presented. Kevin Kessner seconded the motion. Motion carries.

Recruitment

Mike McCafferty, CEO states that we have some tremendous people joining the hospital and offered a brief recap. Dr. Daniel Holst, urologist, had a meet and greet with the medical staff this past week. He is a great addition to the



community and Big Horn Surgical, and will be starting full time in September, 2025. Also starting in September is Dr. Lisa Mullin a family medicine physician with Primary Care. Dr. Luke Leary is starting in August as a Hospitalist, along with Dr. AJ. Ferris, anesthesiology and Dr. Kelsey Ferris, emergency medicine. This speaks to the community and ground swell of leadership that we attract and support staff to serve our mission. Dr. Samuel Schrader will be joining us next fall, after completing his hand and upper extremity fellowship. We are growing the future of the hospital and the community, ensuring that the community needs are being met.

FINANCE

Nathan Stutte, CFO reports on June financial results, wrapping up the fiscal year and reviewing some highlights. There is a decline in activity across the organization, including the cath lab and inpatient activity. Some areas of growth include addiction medicine and behavior health. Growth at the Welch Cancer Center show volumes grew significantly. However, costs grew as well, putting financial pressure on the organization throughout the year. The focus is on revenue cycle and improved collections. Days in accounts receivable improved as well, as we continue to bring the organization to break even status.

FY2026 Budget - Nathan states that he worked in partnership with leadership on a budget to serve the mission of the hospital in a very difficult climate in healthcare. The recommended budget is break even for the next year and then a 2% operating margin. The projection is to see growth in the clinics and Dr. Ulibarri's contribution with spine cases in the operating room. The forecast is to see improvement at Sheridan Green House with growing the census within each cottage. Nathan is looking for the board to approve the operational budge for FY2026 only today. He would like to hold off on the capital budget and will come back in September for formal approval. Gene Davis on behalf of the Finance Committee motions to adopt the FY2026 operational budget as proposed in Nathan's memo of June 19. Tobie Alsup seconded the motion. Motion carries.

<u>Urology Equipment Ratification</u> – In order to be prepared for Dr. Holst's urology clinic opening date of September 15, there was additional equipment that Dr. Holst requested. The ultra sound machine has an 8 week lead time, so it was imperative to get it ordered prior to the board meeting and obtaining board approval. This ultra sound machine can also be utilized by the general surgeons to make biopsies more successful, so is not exclusive to urology. On behalf of the Finance Committee, Gene Davis asks to ratify the approval and purchase of the GE Ultrasound machine for \$56,567. Kevin Kessner approves the ratification. Jenifer Shassetz seconds the motion. Motion carries.

FOUNDATION REPORT

Richard Garber reports that Denise Ebzery is new to the Foundation board and is a wonderful addition. Wendy Smith is the new president for the coming year. The board has great people serving and continues to improve and exceed expectations.

Cody Sinclair, Chief Development Officer reports that the board did a year in review of the work done in support of the hospital. Multiple areas of the hospital benefited from the Foundation's generosity such as behavioral health, the linear accelerator at the WCC, Hospice, quiet kits, gap funds, diabetes education, comfort care funds at the WCC, and the scholarship funds, plus many more. The impact that the Foundation has had with the community for the benefit of the community is amazing and Cody looks forward to the Foundation doing even more.

Ada Kirven, Director of Donor Relations reports on the Foundation Scholarship Program, which recognized recipients this week at the Foundation's Annual meeting. Ada states that this endowment fund was started in 2001 and \$635,000 has been given over the years in support of education. The Foundation endowment is supporting our radiology tech program, in order educate rad techs and have them come back to the hospital to work. This "growing our own" program is quite successful and good things are happening. This program was developed and presented to the Foundation by Joe Wright, Bryan Opitz, Chris Bilyeu and Stephanie Williams to address the



shortage of radiology technicians, as well as addressing the funds spent on bringing in travelers to fill in the gaps. Ada commented on the commitment and passion of our staff, who want to improve and offer a higher level of care to our patients.

BUILDING COMMITTEE REPORT

Rob Forister, Director of Facility Services recognizes Rob Johnson as our new committee member with the retirement of Shirley Coulter from the board. Jordan Lentz continues to do a great job on keeping the EmPATH project on track and on budget. The exterior work is a little behind schedule due to weather delays. The committee reviewed the MRI project, with demo completed and awaiting construction documents. We expect the MRI to arrive in September sometime.

The WCC pharmacy project is brought forth to the board for review and recommended approval. The compounding area requires updating to meet the USP 800 requirements with new HVAC; we will also increase the footprint of this area to provide additional room to work. The funding has been received from SLIB in the amount of \$300,000 and the Foundation in the amount of \$300,000 to fund this project. Jen Shassetz move to approve this project in the amount of \$600,000. Gene Davis seconds the motion. Motion carries.

OTHER BUSINESS

EXECUTIVE SESSION

Ron Mischke motioned to adjourn General Session and go into Executive Session at 4:40 p.m. Tobie Alsup seconded the motion. Motion carried.

General session reconvened at 5:15 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 5:16 p.m. with no additional action taken.

Patty Forister, Recorder

Kevin Kessner, Secretary