



**BOARD OF TRUSTEES
FEBRUARY MEETING MINUTES
Wednesday, February 25, 2026 4:00 P.M.**

MEMBERS PRESENT: Jenifer Shassetz, Kevin Kessner, Anthony Spiegelberg, Tobie Alsup, Rob Johnson, and Richard Garber

MEMBERS ABSENT: Ron Mischke

OTHERS PRESENT: Mike McCafferty, Dr. David Walker, Dr. Sierra Gross, Nathan Stutte, Joe Wright, Cody Sinclair, Brendon Kerns, Tom Klepperich, Tommi Ritterbusch, Tenille Straley, Sharon Krueger, Bryan Opitz, Kristen Czaban, Toni Schoonover, Caty Clabaugh, Hailey Dimitroff, Jenny Teel, Ann Aksamit, Megan Ripley, Liz Dearcorn, Jasmine Martinez, Brady Shoemaker, Brent Maurhoff, Jennifer Gaona, Erin Oetken, Kate Winn, Amy Ligocki, Sean Bonnet, Korissa Duff, County Commissioner Nick Siddle, Kevin Koile with Sheridan Media, and Weston Pope with the Sheridan Press

CALL MEETING TO ORDER

Jenifer Shassetz, Chairman called the meeting to order at 4:00 p.m.

PUBLIC COMMENTS, INTRODUCTIONS

None.

APPROVAL OF AGENDA AND MINUTES

Kevin Kessner motioned to approve the agenda as presented. Tobie Alsup seconded the motion. Motion passes.

Anthony Spiegelberg moves to approve the minutes of the board meeting held on January 25, 2026 as presented. Richard Garber seconded the motion. Motion passes.

Jenifer Shassetz moves to approve the minutes from the Special Board meeting held on February 10, 2026. Rob Johnson seconded the motion. Motion passes.

QUALITY COMMITTEE REPORT

Tommi Ritterbusch, Director of Quality and Specialty Services reports that the committee reviewed data relevant to return to surgery, medication adverse events, reported medication errors, hospital and community acquired CDI, mammography callback rates, critical results in radiology and nursing, patient care service contracts and patient safety data. Patient safety week will be observed the week of March 8 and the HSOPS (hospital survey on patient safety culture) survey will kick off that week as well. There are no negative trends or areas of concern noted.

PATIENT EXPERIENCE REPORT

Dr. Sierra Gross is reporting for Kelly Lieb, Director of Patient Care Continuum and Patient Experience. Dr. Gross states that there are common themes and efforts around access, communication and patient flow. SameDay Health and Imaging is addressing clinic volumes and access. Internal Medicine's work on improved interactions and corresponding scores, and the outpatient lab is standardizing post lab communications. The heart center is working to improve patient satisfaction in scheduling a new patient quickly when referred to the heart center, and Primary Care is updating their patient care templates. The women's clinic is working on a more efficient and effective scheduling process. The different departments are working on access, which is improving the patient experience.

MEDICAL STAFF REPORT

Dr. David Walker, Vice Chief of Staff indicates that there is a quarterly medical staff meeting on March 10 and the board is welcome to attend if they want to. Credentialing will be discussed in Executive Session. Mike

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acknowledges Dr. Walker for his 15 years of service and the great job he does for the hospital and the following he has in the community.

Dr. Walker, 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 Organization
Trevor Lewis, MD	Teleradiology/Delegated (No Membership)	Radiology	Real Radiology

MEDICAL STAFF RENEWALS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization
Blaine Ruby, MD	Consulting -No Admit w/o Active Physician cosign	General Surgery	2/28/26	Johnson County Healthcare
Xavier Fonseca Fuentes, MD	Telemedicine/Delegated (No Membership)	Pulmonary Diseases	2/28/2026	Billings Clinic
Shaun Gonda, MD	Active Staff w Priv - May Not Admit	Radiology	3/17/26	SMH Radiology
Stephen Holst, MD	Active Staff w Priv - May Admit	Surgery	3/16/26	Big Horn Urology
Amanda Kirlin, SLP	Non Member LIP - Speech Language Pathologist	Medicine	2/28/26	SMH
David Lin, MD	Teleradiology/Delegated (No Membership)	Radiology	3/02/26	Real Radiology
Miranda Woodward, SLP	Non Member LIP - Speech Language Pathologist	Medicine	2/28/2026	SMH

Confidential and Privileged

Kevin Kessner moved to approve the above appointments and renewals as presented. Anthony Spiegelberg seconded the motion. Motion passes.

ADMINISTRATION REPORT

Compliance Committee Report – Tenille Straley, Compliance Officer reports that the committee met in February with Tobie Alsup as committee chair. Brady Shoemaker, Information Systems Manager presented on the HIPAA Security Risk Assessment that was completed showing overall stability and strong execution and infrastructure. Last week was policy week and there were 40 approved policies, 35 approved for Sheridan Green House; 15 policies are still in discussion. Compliance regulatory updates for 2026 were reviewed on potential changes, with nothing finalized yet. There is a new notice of privacy practices that went into effect 2/16/26, which health information systems rolled out. 42 CFR Part 2 final rule was reviewed. Compliance has completed the Conflict of Interest for 2025 on both the board of trustees and staff, and there were no conflicts identified. There were 61 HIPAA investigations opened in 2025. Tenille made the board aware that additional board education will be coming in 2026.

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Resolution of Commitment – Trauma (Action) – Toni Schoonover, the SMH Trauma Coordinator is introduced to the board. Toni states that SMH just went through a recertification of our trauma designation, with no deficiencies noted. The Resolution of Commitment before the board for consideration, acknowledges the board's commitment to support the trauma program. SMH is designated as a Level III trauma center, in which we offer stabilization and basic life saving measures to a patient, before transferring to a higher level of care if needed. This designation insures a higher level of performance and readiness of staff, resulting in better patient outcomes. Jen Shassetz moved to approve the resolution as presented. Rob Johnson seconded the motion. Motion passes.

Sheridan Surgical Center – There have been ongoing discussions for a while relevant to the ownership of the Sheridan Surgical Center. SMH was a 40% owner, Sheridan Ortho was a 55% owner, and Sheridan Gastroenterology had a 5% ownership. It has always been our intention to move forward on 100% ownership. With the board's approval, we have acquired the 55% share from the orthopedic surgeons. Mike is requesting the board's consideration to purchase the remaining 5% from Sheridan Gastroenterology in the amount of \$372,750.00. Anthony Spiegelberg made the motion to approve the recommendation to purchase the remaining 5% share. Jenifer Shassetz seconded the motion. Motion passes.

Consideration of Resolution for Affiliation & Services Agreement (Action) – Mike has been discussing this opportunity for about a year; meeting with our medical staff, a joint meeting with our medical staff leadership and Billings Clinic medical staff leadership, SMH employees, the board of trustees, the board of county commissioners, the Foundation's funders and holding public forums. Great discussions have been held and we have done our best to cover all the basis for due diligence. There has been great conversations as well between the Sheridan County attorneys, Billings Clinic legal representation and SMH representation to construct the appropriate legal documents. After going through this process, Mike would like to put forward for the board's consideration, the Resolution for Affiliation & Services Agreement for board approval. If approved, it will go to the Board of County Commissioners next week. Kevin Kessner moves to approve the resolution as presented. Tobie Alsup seconds the motion. Motion passes. Board chair Jenifer Shassetz states that although Ron Mischke is not in attendance, he has let Jenifer know that he is in full support of the resolution.

Mike states that the governance work done around quality, safety, finance and the patient experience is appreciated, as the board gives a lot of their time and attention to governance. The Cath Lab went through an accreditation process by the ACC (American College of Cardiology). To have this service available and obtain this accreditation is a big deal.

Also, Sheridan Memorial Hospital was named by Chartis to the top 100 Rural Community Hospitals, which is our 10th year in the top 100.

Becker's Healthcare is a watch dog in the healthcare industry and they have listed Sheridan Memorial Hospital in the top hospitals for the lowest rates of hospital-acquired Clostridioides difficile (C.diff) infections, and SMH was also named among the lowest readmission rates by state. Our teams are doing a great job in providing a high level of quality care to our patients. The discharge planning, with follow-up coordination, and communication that goes with it supports a low readmission rate. Mike thanks the board for their leadership and governance and supporting the work that we do to serve the community.

FINANCE

Anthony Spiegelberg, Finance Chair states that the January results were lagging and it appears February is following suit. There are several items being worked on to manage financial performance. If finances continue on the same path through February, we may need to convert some reserves in short term accounts to convert to cash. Nathan Stutte, CFO states that volumes softened in January and there was year over year decline in delivery and endoscopy

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cases. There is a slowdown in patients at the Welch Cancer Center as well. The positive news is we had a better payer mix in January, with the WCC having a higher mix in commercial patients being served. There was a decline in inpatients, at 9% lower than last year. SMH management is looking at supply spending and labor costs. There are significant changes on the balance sheet with consolidated assets with the Surgical Center; merging the practice drove up our operating losses.

FOUNDATION REPORT

Richard Garber reports the Foundation board had a good meeting, with Mike presenting on the affiliation with Billings Clinic and the work the Foundation can do. There was a visit from anesthesiologist, Dr. Kristen Schaefer on the need for 4 machines needed by anesthesiology. The operating rooms are busy and the existing machines are antiquated. The Foundation will approve an expenditure of \$250,000 next month to replace what is needed.

Cody Sinclair, CDO states that the Foundation board will have a strategic planning session next month, and the hospital board is welcome to attend breakfast and stay for a portion of the meeting and tour.

BUILDING COMMITTEE REPORT

Cody Sinclair, CDO reports the EmPATH unit is working on a final punch list and the state inspection has been completed. The WCC pharmacy project is on track for completion in April. Green House Living elopement system is wrapping up this week. The MRI removal at Sheridan Ortho will be happening this week as well. Plans, documents and pricing are being gathered for the emergency department phase 2 project. SMH has kicked off a master planning initiative as we look to the future and identify needs and what has already been accomplished.

OTHER BUSINESS

None.

EXECUTIVE SESSION

Anthony Spiegelberg motions to adjourn General Session to go into Executive Session at 4:26 p.m. Richard Garber seconded the motion. Motion passes.

General session reconvened at 4:29 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, Jenifer Shassetz motions to adjourn the meeting. Rob Johnson seconds the motion. Motion passes with the meeting adjourned at 4:30 p.m. with no additional action taken.

Patty Forister, Recorder

Jenifer Shassetz on behalf of Ron Mischke, Secretary