



**GOVERNING BOARD
REGULAR MEETING**

The Campbell County Hospital District Board of Trustees met in the Legacy meeting room on Thursday, February 23, 2017.

Members present:

Mr. Harvey Jackson
Mr. Mike Dugan
Ms. Ronda Boller
Mr. Mr. Dunlap
Dr. Sara Hartsaw

Members excused:

Dr. Ian Swift
Mr. Randy Hite

Also present:

Mr. Andy Fitzgerald, Chief Executive Officer
Dr. Jennifer Thomas, Chief of Staff
Mr. Dalton Huber, CFO
Ms. Deb Tonn, Vice President of Patient Care
Ms. Noamie Niemitalo, Interim Vice President of Human Resources
Mr. Bill Stangl, Vice President of Physician Services
Mr. Steve Crichton, Vice President of Plant and Facilities
Ms. Jonni Belden, Vice President of Long Term Care
Ms. Ellen Rehard, Recorder
Public

OPENING

Call to Order

Mr. Jackson, Chairman, called the meeting to order at 5:00 p.m.

Mission Statement

Mr. Dugan read Campbell County Health's Mission Statement.

Vision Statement

Ms. Boller read Campbell County Health's Vision Statement.

Roll Call

Ms. Ellen Rehard called the roll of the Trustees of the Board of Campbell County Memorial Hospital District. Mr. Jackson, Mr. Dugan, Ms. Boller, Mr. Dunlap and Dr. Hartsaw are present. Dr. Swift and Mr. Hite are excused.

Approval of Agenda

Dr. Hartsaw moved, seconded by Mr. Dugan to approve the agenda. Mr. Jackson, Mr. Dugan, Ms. Boller, Mr. Dunlap and Dr. Hartsaw voted aye. Motion carried.



Consent Agenda

The following items were approved as part of the Consent Agenda.

Approval of Minutes

Minutes from January 26, 2017 Board regular meeting and February 14, 2017 and February 28, 2017 Special Board meetings (copy appended to minutes).

Administrative Policy Review

Five Administrative policies, Administrative Coverage and Responsibilities, Keys and Identification Badges, Smoke-Free/Tobacco-Free Campus, Visiting Privileges and Weapons (copy appended to minutes). **No motion required.**

Finance Meeting

Items requiring Board Action from the February 20, 2017 Finance Committee Meeting (copy appended to minutes).

Committee Reports

Campbell County Healthcare Foundation

The Legacy Advisory Board

Quality Committee

Facilities Planning Committee

Dr. Hartsaw moved, seconded by Mr. Dugan, to approve the consent agenda as presented. Mr. Jackson, Mr. Dugan, Ms. Boller, Mr. Dunlap and Dr. Hartsaw voted aye. Motion carried.

PUBLIC QUESTIONS OR COMMENTS

Mr. Jackson asked if there were any comments or questions from the public at this time. There were none.

RECOGNITION ITEMS

Provider of Month

February - Dr. Romer Mosquera

Campbell County Health is proud to recognize the February provider of the month, Dr. Romer Mosquera. Medicine was just a part of the family for CCMG neurologist Dr. Romer Mosquera. Both his father and great uncle were physicians, and Dr. Mosquera remembers walking down the halls of his father's hospital at the tender age of five.

Dr. Mosquera attended medical school in his home country of Venezuela, and completed his neurology residency and fellowships in Clinical Neurophysiology and Pain Management at SUNY Upstate Medical University in Syracuse, NY.

According to Dr. Mosquera, scientific advancements have really changed his field of neurology since he completed his medical training, especially in the treatment of diseases like multiple sclerosis (MS). With diagnostic tools like MRI and new medications, patients with MS can avoid relapses and have a much better quality of life. The prospect of MS patients facing life in a wheelchair within 15-10 years has changed dramatically for the better.



Because many of Dr. Mosquera's patients have chronic disease, or are referred to him for complex conditions, he may care for them for many years. He worries that the pace of modern medicine makes it hard to take the time needed to delve into the small things that give clues to a patient's diagnosis, like questioning their sleep habits and even getting their vision checked. He gets to know his patients very well, and says that the time spent in those relationships is what makes us human.

Thank you Dr. Mosquera, for providing your patients with excellent care.

Medical Staff Recognition

Erin Clark, PA

Erin Clark, PA specialized in psychiatry and works in BHS. She is originally from West Virginia and received her Bachelor's in Biomedical Science from Marshall University and then completed her Master's in Physician Assistant Studies from Marietta College in Ohio. Erin began her career in the WV University hospital system where she enjoyed teaching psychiatry to 3rd and 4th year medical students on a large adult inpatient unit. She then joined a private practice clinic in Baltimore shortly before becoming a locum tenens provider and moving to Gillette to provide services for CCH. She is now primarily working in the inpatient psychiatric unit and continues to see outpatients in the clinic as well as hospital consults. Her father and younger brother reside in WV, and her older brother in Norfolk, VA recently had a son (Erin's first nephew) on February 19. Erin enjoys travelling and is planning a trip to Paris sometime in the fall. She is slowly learning enough French to hopefully not embarrass herself. She is also an avid Washington Capitals fan and tries to visit her family and go to a home game as often as possible. While in Gillette, Erin spends most of her time with her dog, Indiana, and her friends.

Brenda Castrichini, NP

Brenda Castrichini, an Advanced Practice Psychiatric Nurse Practitioner is working full time in the Behavioral Health Outpatient clinic. In this role she will be a member of the team who is providing Psychiatric evaluations and medication management to ages 13 and up in our outpatient clinic.

Ms. Castrichini moved here from Massachusetts. Brenda has been providing services in community mental health since 1992, first as a human services director of outpatient clinics and programs then advancing her degree into nursing in 2003 in order to assist in access to health care. In 2007 following her Masters of Science degree which was earned at Regis College in Weston, Massachusetts she began providing medication evaluations and management in large community based clinics for patients across the life span. In 2011 she began a private practice that grew and increased access to mental health treatment in a large inner city with multifaceted concerns. As a member of the adjunct faculty with Massachusetts College of Pharmacy and Health Science and Regis College she precepted students through the psychiatric rotation for the last five years. In addition, Ms. Castrichini has served in the United States Army Nurse Corp as a reservist for the last eight years and now in the individual ready reserves.

Employee Recognition

Mr. Fitzgerald recognized employees that have been selected for *Thanks for working here Thursday*:

Tammy Eadus
Ryan Reeves

Radiology
Cardiology Clinic



Kayla Hoffman
Melissa Gorsuch

BHS
Diabetes Education

Department Discoveries

Short Term Rehabilitation

Cardiac and Pulmonary Rehabilitation

January

February

EDUCATIONAL SESSION

HIPAA

Mr. Tom Lubnau reported Health Insurance Portability and Accountability Act (HIPAA) is a federal law that requires CCH to protect the privacy of patient health information, secure patient health information, adhere to the minimum necessary standards and follow patient's request for use and disclosure of their health information. Privacy violations may carry penalties under federal and state privacy laws. A public official shall not disseminate to another person official information which the public official obtains through or in connection with his position, unless the information is available to the general public or unless dissemination is authorized by law. Ms. Kim Johnson disclosed that CCH must protect any information created or received in the course of providing treatment or obtaining payment for services. Protected Health Information (PHI) is information related to the past, present or future physician and/or mental health condition of an individual; and personal identifiers, information in any format - spoken, written or electronic including videos, photographs and x-rays. CCH can use and disclose PHI without a patient authorization for treatment, payment, or healthcare operations. If CCH identifies or becomes aware that an individuals' PHI has been shared inappropriately, CCH is obligated to report this to the patient and to the Office of Civil Rights. CCH complies by providing each patient with a "Notice of Privacy Practices" upon request, follows the patient's request for use and disclosure of their health information, secures PHI in paper or electronic form, and educates staff to access records only if they have a need to know to perform their job duties. Employees acknowledge yearly a confidential statement. Mr. Lubnau added the Board of Trustees is obligated to ensure processes are in place to protect the privacy of protected health information, ensure security systems are in place to prevent unauthorized disclosure of PHI, not disclose confidential information and ensure that if a violation occurs, reporting is completed according to law, and appropriate discipline and remedial actions are implemented.

ACTION ITEMS

Medical Staff Appointments

Dr. Jennifer Thomas recommended approving the following medical staff appointments as recommended by the appropriate Department Chairman, Credentials Committee, and Executive Committee.

New Appointments:

Limited Health Care Practitioners:

Department of Medicine

Lynn P. Perlenfein, PA-C

Family Medicine / Ambulatory

Reappointments:

Active:

Department of Medicine

Laine Russell, DO

Family Medicine / Ambulatory



Departments of Medicine **AND** Maternal / Child
Landi Lowell, MD Internal Medicine / Pediatrics

Department of Maternal / Child
Jeffrey Anderson, DO OB / GYN

Courtesy – Telemedicine:

Department of Medicine
Elizabeth Fitzpatrick, MD Psychiatry

ADDITIONAL PRIVILEGE REQUEST

Robert Finley, MD – Sleep Medicine / via Telemedicine

Extensions Requested – Applications Not Received and/or Complete

Suzanne Harris, MD
Robert Neuwirth, MD
Mary Maymana, MD

Dr. Hartsaw moved, seconded by Ms. Boller, to approve the recommendation for Med Exec. for medical staff appointments as presented. Mr. Jackson, Mr. Dugan, Ms. Boller, Mr. Dunlap and Dr. Hartsaw voted aye. Motion carried.

RESIGNATIONS TO NOTE:

The following Medical Staff resignations were noted:

Vijaya Koduri, MD	Pediatrics	Effective 2/10/2017
Deborah Johnston, PA-C	Amb. FM	Effective 2/10/2017
Mohammed Majeed, MD	IM	Effective 2/9/2017
Sue Walla, APRN	Psychiatry (telemedicine)	Effective 1/6/2017

Cardiology Public Spaces Improvement

Mr. Crichton explained the request is to move forward with the Cardiology public space improvement at a cost of \$259,253 for a facelift of the Cardiology Clinic on the 3rd floor of the hospital. This includes updating the reception check in check out desk, flooring, carpeting, wall finishes, ceiling and light fixtures and an asbestos survey. A second phase will be brought forward next year to convert the patient rooms into exam rooms.

Dr. Hartsaw moved, seconded by Mr. Dugan, to approve the recommendation from Facilities Planning Committee for the Cardiology public space improvements at a cost of \$259,253. Mr. Jackson, Mr. Dugan, Ms. Boller, Mr. Dunlap and Dr. Hartsaw voted aye. Motion carried.

DISCUSSION ITEMS

Organizational Chart

Mr. Fitzgerald presented the updated Organizational Chart. He noted the addition of the Vice President of Long Term Care. Dr. Hartsaw inquired why the CBO is listed under Physician Services. Mr. Fitzgerald explained that the CBO bills for the physicians and the Campbell County Medical Group. Patient Accounting bills for hospital care. Mr. Jackson asked about any additions that may be made to the organizational chart in the future. Mr. Fitzgerald stated if a



Chief Medical Officer was added, that position would report to the CEO at a Vice President level. It would be likely that the physician component would report to the CMO. Executive Leadership will have to discuss any additions as well as succession planning.

INFORMATIONAL ITEMS

Chairman's Report

Mr. Jackson congratulated Jonni Belden on being named Vice President of Long Term Care.

Chief of Staff Report

Dr. Thomas, Chief of Staff, reported on the success of the recent Medical Staff Recognition dinner. She also told the Board that the Medical Executive Committee and Credentialing Committee have gone paperless, using tablets for their meetings. This will cut down a lot of time spent at the copy machine and in the long run will save money and time.

CEO Report

Mr. Andy Fitzgerald, Chief Executive Officer, complimented the medical staff for working through the move to paperless. He credited Chris Harrison, IS Director, for helping them make the move.

STRATEGIC FOCUS

People

Recordable Injuries

Ms. Noamie Niemitalo reported on recordable injuries comparing FY15/16 with FY16/17. CCH has been concentrating on falls inside and outside for several years and continues to promote non-slip shoes. The Safety Committee concentrated on needle sticks and determined recapping processes and education would be valuable. The main area of concern is patient handling. A Bariatric Committee has been making some evaluations, and Rehab staff recently attended a conference focusing on safe patient handling and assistive devices. Ms. Niemitalo added an injury is recordable if the employee has to take medication; some sort of brace is used; receives ongoing treatment or some sort of restriction. Light duty, which are considered restricted days, are down. Lost time are restricted days with no light duty. Ms. Niemitalo is developing a new policy identifying how and when to report an injury.

Care

Sepsis

Ms. Sue Ullrich reported that there was not a good baseline measurement available when this goal was established, but now there is data to support a 50% national compliance rate. CCH's quarterly measurement is 40%. Early recognition is the key. CCH has accomplished a lot toward improving the measure. A sepsis response team has been formed and starting March 1st they will respond when sepsis is suspected. Sepsis is an overwhelming infection that can come from any source. Once there is a systemic reaction the infection falls into sepsis.

Suicide Prevention

Ms. Deb Tonn reported the goal is to increase the percentage of BHS clients reporting a decrease in suicidality upon treatment completed. The goal is 68% and the latest measurement is 79%. The outpatient Behavioral Health unit when admitting a patient to the service completes a risk to self-assessment. If patients express a higher rate of suicide thoughts the clinicians are able to measure that. The patient is re-assessed at a minimum of 60 days after. BHS is currently auditing a minimum of 25 charts per month to acquire the metrics. CCH has initiated



QPR (question, persuade, refer) training. QPR is a tool that helps ask the questions of people that are depressed or have suicidal thoughts to persuade them to seek help. CCH has rolled out and encourages all staff to participate in QPR training. The City of Gillette, the Campbell County School District and some of the coal mines have committed to QPR training as well. Mr. Fitzgerald offered the training to Board members as well.

Service

Long Term Care Satisfaction

Ms. Jonni Belden reported that a resident satisfaction survey is conducted every six months for residents, family members and upon discharge. The current domains that show The Legacy at or over the 50th percentile include:

- | | |
|-----------------------------------|--------|
| • Respect for patient preferences | 65.65% |
| • Pain Management | 50% |
| • Emotional Support | 50% |
| • Relationships | 50% |
| • Communication with providers | 67.9% |
| • Continuity and Transition | 54.1% |
| • Care of Patient | 50% |

Ms. Belden stated that in two years nursing homes will be measured and reimbursed the same as hospitals, according to their satisfaction scores.

Business

Mr. Dalton Huber reported the following:

- Operating revenues were over budget.
- Total operating expenses were over budget.
- The operating income exceeded budget by about \$1M due to a QRA payment received from the State of Wyoming.
- EBIDA – Significant improvement from last year due to trimming back expenses and becoming more efficient.
- Day's cash on hand is 179 compared to the target of 168.
- Accounts receivable days are 71.

Mr. Dunlap inquired on bond payments. Mr. Huber explained that the bonds are callable in a couple of years, but bond payments are made twice a year. Some bonds are retired every year. Mr. Fitzgerald added the bonds are laddered out and retired at various stages.

Strategic Projects

New PACS

Ms. Tonn explained the PACS system is beyond its useful life. Implementation of the new system has been delayed by Fuji until May 9th. Staff training has been scheduled for the new system and work is in progress to migrate current stored images to the new system. PACS is an image storage system that will be used by Radiology, Cardiology and Surgery. Images can be viewed from any location with an internet connection, including physician homes and offices.



EXECUTIVE SESSION

The regular meeting recessed into Executive Session at 6:15 p.m.

The regular meeting reconvened at 7:27 p.m.

ADJOURNMENT

There being no further business, the meeting adjourned at 7:27 p.m.

The next regularly scheduled Board meeting and retreat is March 23 and 24, 2017, at The Lodge at Deadwood.

Ronda Boller, Secretary

Ellen Rehard, Recorder