



**GOVERNING BOARD
REGULAR MEETING**

The Campbell County Hospital District Board of Trustees met by WebEx on Thursday, April 23, 2020.

Members present:

Dr. Ian Swift
Ms. Ronda Boller
Mr. Alan Stuber
Mr. Adrian Gerrits
Dr. Sara Hartsaw
Ms. Lisa Harry
Mr. Dustin Martinson

Also present:

Mr. Andy Fitzgerald, CEO
Ms. Colleen Heeter, COO
Dr. Nick Stamato, Chief of Staff
Dr. Attila Barabas, CMO
Ms. Misty Robertson, CNO
Ms. Mary Lou Tate, CFO
Ms. Noamie Niemitalo, Vice President of Human Resources
Mr. Steve Crichton, Vice President of Plant and Facilities
Ms. Jonni Belden, Vice President of Continuing Health Services
Mr. Matt Sabus, Vice President of IT
Ms. Sue Ullrich, Director Quality, Risk and Care Management
Ms. Karen Clarke, Community Relations Director
Ms. Tanya Allee, Patient Experience Manager
Mr. Tom Lubnau, CCH Attorney
Ms. Ellen Rehard, Recorder
Public

OPENING

Call to Order

Ms. Boller, Vice-Chair, called the meeting to order at 5:10 p.m.

Invocation

Chaplain Gordon Harper led those present in an opening prayer.

Mission Statement

Ms. Harry read Campbell County Health's Mission Statement.

Vision Statement

Mr. Stuber 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. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Dr. Hartsaw, Ms. Harry and Mr. Martinson are present.



Approval of Agenda

Mr. Gerrits moved, seconded by Mr. Martinson, to approve the agenda as presented. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Dr. Hartsaw, Ms. Harry and Mr. Martinson voted aye. Motion carried.

Consent Agenda

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

Approval of Minutes

Minutes from March 17, 2020 Special Board meeting and March 26, 2020 Board meeting (copies appended to minutes).

Administrative Policy Review

Four Administrative policies, Communication and Graphic Standards, Fax Use of Health Information, Patient Grievance, and Release of Information/News Media (copies appended to minutes). **No motion required.**

Finance Meeting

Items requiring Board Action from the April 20, 2020 Finance Committee Meeting (copy appended to minutes).

Committee Reports

Facilities Planning Committee

Mr. Stuber moved, seconded by Ms. Boller to approve the Consent Agenda as presented. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Dr. Hartsaw, Ms. Harry and Mr. Martinson voted aye. Motion carried.

RECOGNITION ITEMS

Employee Recognition

Thanks for Working Here Thursday

Marti Hoem	Radiology
Melainie Buer	Main Clinic
Tristin Mallak	Legacy Nutrition
Keely Geer	Professional Development
Jamie Mooney	Employee Safety Coordinator
Chris Rollings	Plant Ops

Retirement

Bill Rice

Bill has served as a leader in multiple departments during his tenure of over 25 years here at CCH. He has proven his flexibility and willingness to try new things and accept new challenges. Bill initiated the CCH Wellness Services over twenty years ago. Bill actively participated in various activities and committees throughout CCH such as the Accountability Team, Clinic Charter and others, tying all efforts back to our Mission, Vision and Values. Bill will be greatly missed. Best wishes to him on his retirement.



JoAnn Bachmann

JoAnn Bachmann is a Certified Massage Therapist and Licensed Practical Nurse who has worked for CCH for 39 years! She is a graduate of Western Dakota Vocational Technical School in Rapid City, SD and Mueller College of Massage and Holistic Studies in San Diego, CA. JoAnn has been a valuable part of the Rehab Services team making a difference in so many patients' lives. JoAnn enjoys traveling, reading, and gardening. In her retirement, she is going to enjoy spending more time with her family and grandchildren.

Legend

Lee Sanders

Lee is always "present" at work. He is kind and helpful to both his co-workers and patients. He remembers everyone's name and their stories and always goes above and beyond to make sure the patient and their visitors feel comfortable. He is a positive role model and inspires those around him to make personal connections with patients as well. Lee is an invaluable resource for both new staff as well as seasoned staff. Lee makes every day a good day. He is an invaluable resource to CCH and the community and is truly a CCH LEGEND. Congratulations.

ACTION ITEMS

Medical Staff Appointments

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

New Appointments:

Initial Appointments:

Courtesy:

From Locum Tenens:

Gaelen Horne, M.D. Anesthesiology

Limited Health Care Practitioner (Dependent):

Sean Schoonover, PA-C Orthopedics

Limited Health Care Practitioner (Dependent):

From locum Tenens:

Kathleen (Kate) M. Feeley, CRNA Anesthesia

Reappointments:

Active:

Departments of Medicine

Nicholas Stamato, M.D. Cardiology

Department of Maternal Child

Brahmananda Koduri, M.D. Pediatrics

Department of Surgery

Kris Canfield, M.D. General Surgery

Departments of Surgery AND Powder River Surgery Center

John Mansell, M.D. Pain Medicine

Jacob Rinker, M.D. General Surgery



Limited Health Care Practitioner (Independent):

Department of Surgery

Joseph Maycock, OD

Optometry

PRIVILEGE EXTENSION REQUESTS

Courtesy Staff:

Department of Maternal Child

Kyle Kusek, M.D.

Pediatric Gastroenterology

Dr. Hartsaw moved, seconded by Mr. Stuber, to approve the recommendation from Med Exec. for Medical Staff appointments as presented. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Dr. Hartsaw, Ms. Harry and Mr. Martinson voted aye. Motion carried.

Kid Clinic Contract for Construction with CCSD

Mr. Fitzgerald explained that Ms. Alison Gee worked on two agreements together with the school district. CCH and the school district have been involved in a successful partnership involving the Kid Clinic, which is currently housed at the old Hillcrest Elementary School. This building has reached the end of its life. Heating and air conditioning are very outdated. CCH and CCSD propose building a new clinic and would like to enter into a construction agreement. Prior to the commencement of construction, the parties will agree in writing to a total project budget. The second document is an MOU that describes the operation of the clinic and how that relationship will work. CCSD will own the building and provide all maintenance. CCH will operate the clinic with medical and counseling services. The School District will take this issue to their Board next Tuesday. Ms. Robertson explained that the Kid Clinic serves about 11,000 visits per year.

Mr. Stuber moved, seconded by Ms. Harry, to approve both the Kid Clinic Construction Agreement along with the Amended Kid Clinic Agreement Between the Campbell County School District and the Campbell County Hospital District as presented. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Dr. Hartsaw, Ms. Harry and Mr. Martinson voted aye. Motion carried.

INFORMATIONAL ITEMS

Chairman's Report

Dr. Swift reported that he continues to be impressed with the preparedness of the entire staff. He is equally sad about the decisions the organization had to make last week. Dr. Swift thanked Dr. Stamato for his knowledge and efforts that he has contributed to the Covid situation.

Chief of Staff Report

Dr. Stamato reported that the Credentials Committee and Medical Executive Committee started using virtual meetings. Medical Executive Committee approved a Mayo Clinic protocol in which CCH will be a part of that will allow CCH to use convalescent plasma if needed to treat a patient with Covid-19 in the hospital. The medical staff spring meeting will be postponed and the fall meeting may be scheduled a little early. The By-laws Committee will start looking at some by-law changes in order for the medical staff to review those changes before the fall medical staff dinner.

CEO Report

Mr. Fitzgerald recognized the Campbell County Healthcare Foundation and Maurice's for their



\$5,000 donation to CCH for PPE. The Healthcare Foundation has established an online Crisis Response fund for donations to support local healthcare workers. To get information, call (307) 688-6235. The purpose is to raise additional money for community and healthcare providers on the frontline as well as purchasing supplies and other needs. Hospital Week is coming up the week of May 11 along with LTC Week and Nurses Week.

PPE

Ms. Tate provided an update on PPE:

- CCH has received quite a few gloves and procedure masks. Are at goal level for gloves and near goal level for procedure masks.
- Waiting on a shipment of isolation gowns and N95 masks from China. Those should be in the U.S. in the next week or two.
- Thank you to Gillette Construction Company for their donation of Tyvek wrap to make isolation gowns. Gowns made from that material can be reused 5-6 times after cleaning. The Legacy is using those right now.
- Thank you to the community for all the donations
- Donations of 2300 cloth masks have been received. That process is going very well.

Testing

Ms. Heeter reported the following:

- The community call center will be combined with the employee call center since there has been a decline in calls.
- Three hundred forty one tests have been performed.
- The State of Wyoming has 14 positives for Campbell County.
- Wyoming has six deaths confirmed. None from Campbell County.
- The mobile site continues to be up. Community members with symptoms are encouraged to call the call center which is open from 7:00 a.m. to 5:00 p.m. M-F.
- CCH does have two types of in-house tests. One is the Abbott Labs machine, which has now been shown to have some faulty testing abilities. CCH will not be using that test.
- CCH does have a new VD max system, which is used for critical patients in-house.
- Testing sent to the state has a quick turnaround time.

Strategic Focus

People

Ms. Niemitalo explained the following:

- The strategic goal for reduction of voluntary turnover is 12.6%. CCH is currently at 11.6%.
- The goal for recordable injuries is 3.3. CCH is currently at 3.6.
- Twenty new RN graduates have accepted positions within our organization.
- Twenty-seven open positions have been filled since March 1st with 5 current offers on the table.
- The strategic goal for Leadership Development is 4.59. CCH is currently at 4.61.
- The Employee engagement survey will be conducted before the end of the fiscal year.
- Leaders in Training for Excellence participants have a goal to increase their leadership skills by 8.7% from pre to post testing. The pre-assessment was taken prior to onset of the program and the post assessment will be assigned in May.
- Support measures taken for employees include:



- Developed a page on Staffnet with resources and links to the Employee Assistance Program, mental health support, strategies to manage coronavirus anxiety, self-care resources, wellness tips and spiritual meditations.
- Coordinating, accepting and distributing donations that are coming into the facility.
- Providing treats and inspirational notes 2-3 times a week.
- Checking in with staff weekly to make sure they have the resources they need to deal with any stress they are having.
- Creating a ZEN room within the hospital.
- Carry-in kitchen.

Care

Ms. Ullrich reported the following:

- The goal for acute care readmissions over age 64 is 5.4-5.6%. The national rate is 14.9%. CCH is currently at 4.9% Strategies used by CCH include patient education including disease and medication education, post discharge calls, chronic care and transitional care management programs.
- The goal for early sepsis recognition, severe sepsis and septic shock is 67-72%. Last quarter CCH was at 69%. CCH has a sepsis work group of providers and nurses who review cases, look for ways to drive improvement through use of protocols, order sets and education.
- The goal for serious safety events is two. Currently CCH is at two. Strategies include that all near misses or incidents are reviewed for possible prevention strategies using root cause analysis, sharing of safety stories and best practices.

Ms. Robertson reported the following:

- Suicide Prevention goals
 - Reduce suicide rate per 10,000 population. The baseline is 1.73 suicides per 10,000. Campbell County had five suicides in the 3rd quarter and year to day is at 1.95 with nine suicides.
 - Reduce suicide attempt rate per 10,000 CCH clients. The baseline is 532.7 attempts per 10,000. YTD CCH has seen 57 attempts from 4000 clients, which works out to be 144.6 attempts per 10,000.

Ms. Belden reported the following:

- The quality measure goal for the Legacy is 6/11 quality measures at or below CMS national target of six. The Legacy is at 7/11, which is below the CMS national target.

Service

Ms. Tanya Allee reported that patient survey scores are completed for inpatient services, the emergency department, outpatient surgery, outpatient services, medical practice and urgent care. Those scores are as follows:

- HCAHPS – Goal: 66.3% Currently: 67.6%
- Emergency Dept. - Goal: 72.4% Currently: 68.4%
- Outpatient Surgery - Goal: 81.2% Currently: 75.7%
- Outpatient Services - Goal: 86.5% Currently: 82.2%
- Medical Practice - Goal: 81% Currently: 80.3%
- Urgent Care - Goal: 71.6% Currently: 68.8%



Business

Business

Ms. Mary Lou Tate provided the following financial report:

March 2020:

- CCH is over the operating margin goal of -6.77% at -8.73%.
- Cash days on hand is 122.
- AR days are 81.
- EBIDA margin at 9.72%
- Inpatient visits were down in March and are slightly below budget and slightly below last year.
- Outpatient observation visits are slightly ahead of last year but behind budget.
- Outpatient visits are slightly below budget. Clinic visits are well above budget and well above last year.
- Surgeries at CCH are slightly below budget but ahead of last year. PRSC is ahead of last year but slightly below budget.
- Net patient revenues ahead of budget month to date and was \$252K over budget YTD.
- Payor mix not a lot of changes YTD.
- Operating expenses were high MTD and slightly ahead of budget YTD.
- Excess revenue over expenses was less than budget by \$767K.
- EBIDA was \$771K under budget and decreased \$591K compared to last year.
- Days cash on hand increased by 3 to 122. Cash balances increased by \$2.34M
- Accounts receivable days was unchanged at 81 days.
- Cost saving measures include:
 - Executive pay cuts
 - Staffing reductions
 - Travel freeze
 - Reduction in purchased services
 - Capital freeze
 - Reduction in FY21 capital purchases
 - Departments reviewing for additional savings. The target is 10% expense reduction in FY21 budget.
 - Finance projections without cost saving measures:

	April 2020	May 2020	June 2020
Proj Operating Income (loss)	(7,900,454)	(5,864,792)	(5,018,987)
Additional Funding	2,745,111	1,300,000	
Modified Operating Loss	(5,155,343)	(5,564,792)	(5,018,987)
Non-Operating Income	1,080,467	1,080,467	1,080,467
Revenue in Excess of Expense	(4,074,876)	(3,938,520)	(3,938,520)



Cash Use*	(4,024,744)	(4,904,194)	(1,709,520)
Days Cash*	113	102	100

Mr. Sabus provided a telemedicine update:

- All clinics with the exception of Audiology and Anti-Coag are now live with Meditech video visits through the Patient Portal.
- Clinics are using WebEx in conjunction with Meditech to see patients in the 12-17 age range.
- BHS is currently utilizing WebEx with the Netsmart EMR to see all service lines. BHS is also utilizing virtual provider staff. Providers are utilizing iPads and WebEx to see patients on Med/Surg and WIC locations instead of sending staff into patient areas.

EXECUTIVE SESSION

The regular meeting recessed into Executive Session at 6:48 p.m.

The regular meeting reconvened at 8:02 p.m.

ADJOURNMENT

There being no further business, the meeting adjourned at 8:02 p.m.

The next regularly scheduled Board meeting is May 28, 2020 at 5:00 p.m.

Alan Stuber, Secretary

Ellen Rehard, Recorder