



Campbell County Health Board of Trustees

Regular Board Meeting – City Council Chambers

August 26, 2021

5:00 PM

Members present:

Adrian Gerrits, Chairman
Alan Stuber, Vice Chair
Lisa Harry, Secretary
Randy Hite, Treasurer

Dr. Sara Hartsaw, Trustee
Kristina Leslie, Trustee
Tom Murphy, Trustee

Also present:

Colleen Heeter, CEO
Dr. Attila Barabas
Dr. John Mansell
Jerry Klein, COO
Mary Lou Tate, CFO
Natalie Tucker, Interim CNO

Noamie Niemitalo, Human Resources VP
Matt Sabus, Information Technology VP
Tom Lubnau, CCH Attorney
Brandi Miller, Recorder
Public

Invocation

Pastor Phil Jones, Pastor of Roadway Alliance Church led those present in an opening prayer.

Call to Order

Mr. Stuber, Vice Chair, called the meeting to order at 5:00 p.m.

Mission Statement

Randy Hite read Campbell County Health's Mission Statement.

Vision Statement

Dr. Sara Hartsaw read Campbell County Health's Vision Statement.

Roll Call

Brandi Miller called the roll, Adrian Gerrits and Tom Murphy joined the meeting after roll call.

Approval of Agenda

SARA HARTSAW MADE A MOTION TO AMEND THE AGENDA, MOVING THE DISCUSSION ITEMS AND ACTION ITEMS TO THE END OF THE MEETING. RANDY HITE SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

Consent Agenda

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

Approval of Minutes

July 15, 2021 Regular Meeting Minutes

Finance Meeting

Items requiring Board Action from the August 23, 2021 Finance Committee Meeting.

RANDY HITE MADE A MOTION TO APPROVE THE CONSENT AGENDA AS PRESENTED. KRISTINA LESLIE SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

RECOGNITION ITEMS

Employee Recognition

The following employees were recognized by the Board as Thanks for Working Here recipients:

- Nancy Dillie, Behavioral Health Services
- Marcia Saunders, Professional Development

Retirement Recognitions

- Rick Engdahl, IT; retired after 29 years of service
- Aree “Sunny” Leger, EVS; retired after 34 years of service

PUBLIC QUESTIONS OR COMMENTS

Heidi Crosby spoke on behalf of her son, a BHS patient. Patient Experience will contact Ms. Crosby to address her concerns.

INFORMATIONAL ITEMS

Chairman’s Report – Vice Chair, Alan Stuber, assured stakeholders that CCH is working diligently to ensure that adequate staffing is available to meet the community’s needs.

Chief of Staff Report – Dr. Mansell recognized the Emergency Department and the medical staff for their continued efforts in managing increased patient numbers during the pandemic.

Chief Medical Officer – Dr. Barabas shared the benefits of the monoclonal antibody infusion therapy that is currently offered in the Internal and Complex Medicine clinic. Monoclonal antibody infusion treatment can reduce the risk of death and/or hospitalization in patients diagnosed with COVID-19.

CEO Report – Ms. Heeter reported on the events for August and September. The affiliation with UCHHealth begins on September 1st. Jerry Klein, Ashley Montague, Lisa Harry, Mary Lou Tate, and Nachele McGrath are scheduled to visit the Davis Hospice House on September 2nd. The group will report out at the next meeting.

Strategic Focus Presentation – Plan Outcomes 2021

People: Noamie Niemitalo, VP of Human Resources and Matt Sabus, VP of IT presented FY21 goals and how they ended. FY22 goals were also presented.

- Increase Employee Retention: Goal 88.10%, Ended 83.02%
- Effective Leadership Development Opportunities: Goal 4.63, Ended 4.43
- Increase Employee Engagement: Goal 4.11, Ended: 4.02
- Increase LITE Program Skills: Goal 8.7%, Ended: 8.81%

Goals for FY22

- **Increase indicator scores from three Press Ganey survey questions.**
 - #5 – Different work units work well together in this organization?
 - #7 – Different levels of this organization communicate effectively with each other?
 - #11 – This organization provides high quality care and service?
- Goal = 3.66
- **Leadership Development** – The effectiveness of the CCH Leadership Development will be evaluated with a composite score of each LDI and leadership hour.
- Goal = 4.23
- **Employee Retention**
- Goal = 83.3% (CCH FY21 ended at 83.02%)
- **Cyber Security** – Percentage of users that respond to Phishing tests
- Goal = 3.8%

Care: Patty McJilton, Director of Quality/Risk/Compliance, Derek Friedlan, Inpatient BHS Manager, and Matt Miller, Outpatient BHS Manager presented FY21 goals and ending scores along with FY22 goals.

- **Increase Sepsis Protocol compliance** for Early Management, Severe Sepsis and Septic Shock to greater than 67% as reported through the Sepsis Core Measure for Medicare.

- FY21 Year End = 65.40%
 - Will continue this initiative for FY22
- **Decrease readmission rate** within 30 days for patients over 64.
- FY21 Year End = 8.44%
- **Reduce suicide rate** to 1.72 per 10,000 population in Campbell County
- FY21 Year End = 2.17
- **Reduce suicide attempt rate** to 28.495 per 10,000 population – Campbell County
- FY21 Year End = 13

FY22 Goals

- **Reduce the Number of Unlabeled/Mislabeled Specimens**
 - Goal = 0
- **Decrease readmission rate** within 30 days for patients over 64.
 - Nat'l Benchmark is 15-16%
- **Reduce the number of suicides** in Campbell County
 - Goal = 9 / year
- **Decrease extended length of stay of Med/Surg and ICU patients** by 10%.
 - Goal = 16 days (Benchmark less than 10 days)

Service: Jerry Klein, COO, presented year end statistics for the clinics as well as the FY22 goals.

FY22 Goals

- Percentage of patients aged 6 months and older seen between October 1-March 31 who received an influenza immunization or reported receipt.
 - Goal = 97.4%
- All CCH outpatient Press Ganey overall scores will be at or above 81%.
- All CCMG medical practice Press Ganey overall scores will be at or above 84.4%.

Business: Mary Lou Tate presented FY21 year-end final statistics as well as FY22 goals.

FY 2021 Goal Name	Jul-20 Result	Jun-21 Result	% Improvement	Outcome
At least 81% of all departments will be at 90% productivity or higher (higher is better)	84.20%	88.30%	4.87%	above goal
AR Days will be reduced to 70 Days (lower is better)	78	73	-6.41%	below goal
Decrease the Percentage of AR over 120 Days to less than 43.40% (lower is better)	41.90%	35.10%	-16.23%	above goal
Increase EBIDA Margin to budget of 9.48% (higher is better)	10.64%	14.11%	32.61%	above goal

FY 2022 Goals	Best Practice	FY2021 Base	FY2022 Goal	% Planned Improvement
At least 77.5% of all departments will be at 95% productivity or higher	unknown	74.50%	77.50%	4.03%
AR Days will be reduced to 66 Days	Good-55 Better-50 Best- 45	73	66	-9.59%

Decrease the Percentage of AR over 120 Days to less than 30%	Good-18% Better-16% Best-14.6%	35.10%	30.00%	-14.53%
Meet Budget Operating Margin of (12.07%)	2.3%-2.7%	14.11%	-12.07%	-185.54%
Reduce Supply Cost as Measured by Medical Supply % of Gross Revenue	3.10-4.35%	4.29%	4.05%	-5.59%

July Financials

- June's account receivable days increased by 5 to 78.
- Day's cash on hand decreased to 183 days.
- Total revenues for the month was a profit of \$853,991.

Recess

Vice Chairman Alan Stuber recessed the meeting at 6:00 pm. The meeting reconvened at 6:15 pm.

DISCUSSION ITEMS

Outsource Revenue Cycle – After conducting onsite interviews with two companies that offer outsourcing revenue cycle options Ensemble, was asked to conduct a three-month review. A permanent contract will be offered to Ensemble if the review goes well. Ensemble has agreed to retain currently employees.

Vaccine Mandate for Long Term Care – Rules and requirements of a new COVID-19 vaccination mandate requiring all employees of long term care facilities be vaccinated is expected to be released in September. All long term care facilities that receive Medicare and Medicaid funding will be required to enforce the mandate.

ACTION ITEMS

Medical Staff Appointments – Dr. Mansell shared the attached list that was recommended for approval by the appropriate Department Chairman, Credentials Committee, and Executive Committee.

SARA HARTSAW MADE A MOTION TO APPROVE THE MEDICAL STAFF APPOINTMENT LIST AS PRESENTED. ALAN STUBER SECONDED THE MOTION. THE MOTION CARRIED UNANIMOUSLY.

Medicaid Repayment – An agreement was reached between CCH and the State of Wyoming for the repayment of BHS Summer program funds. CCH inadvertently overbilled the state \$1,500,000. This will be repaid to the state as well as CCH participating in a 3-year corporate compliance (CIA) agreement.

RANDY HITE MADE A MOTION TO APPROVE THE CIA REPORTING PERIOD COMPLIANCE RESOLUTION AS PRESENTED. ALAN STUBER SECONDED THE MOTION. THE MOTION CARRIED UNANIMOUSLY

CEO Compensation – The compensation committee recently met to conduct Colleen Heeter's performance review. FY21 Strategic Plan outcomes are used to determine the CEO's bonus. The committee recommended a bonus of \$62,635 out of a possible \$80,000 be paid.

ALAN STUBER MADE A MOTION TO APPROVE THE CEO COMPENSATION PACKAGE BETWEEN CCH AND UCHEALTH AS PRESENTED. LISA HARRY SECONDED THE MOTION. THE MOTION CARRIED UNANIMOUSLY.

Foundation Legal Demand – The Board received a letter from the Foundation's attorney claiming breach of contract. The Board agreed that both CCH and the Foundation have not fulfilled all items included in the Service Agreement and the Hospice House agreement. After discussion, the Board agreed that it would be best for all involved and the community for the two entities to try and work together.

FY22 Strategic Plan – The FY22 Strategic Plan was presented to the Board. The Board requested a more robust presentation before taking action.

SARA HARTSAW MADE A MOTION TO TABLE THE FY22 STRATEGIC PLAN UNTIL A MORE ROBUST PRESENTATION IS PRESENTED. ALAN STUBER SECONDED THE MOTION. THE MOTION CARRIED UNANIMOUSLY.

Official Signing of UCHealth Management Agreement – UCHealth representatives, Grace Taylor and Diane Jackson, attended the meeting.

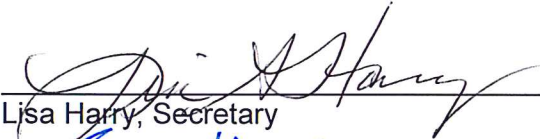
EXECUTIVE SESSION

The regular meeting recessed into Executive Session at 9:00 pm.

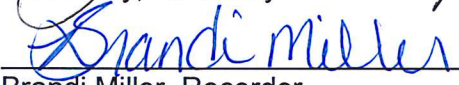
The regular meeting reconvened at 10:55 pm.

The regular meeting adjourned at 10:55 pm.

The next regularly scheduled Board meeting is September 23, 2021.



Lisa Harry, Secretary



Brandi Miller, Recorder