



**GOVERNING BOARD  
REGULAR MEETING**

The Campbell County Hospital District Board of Trustees met in the Hospital's Fifth Floor Classrooms on Thursday, May 23, 2019.

Members present:

Dr. Ian Swift  
Ms. Ronda Boller  
Mr. Adrian Gerrits  
Mr. Alan Stuber  
Dr. Sara Hartsaw  
Mr. Randy Hite

Members excused:

Ms. Lisa Harry

Also present:

Mr. Andy Fitzgerald, Chief Executive Officer  
Mr. Nicholas Stamato, Chief of Staff  
Ms. Colleen Heeter, COO  
Dr. Attila Barabas, CMO  
Ms. Misty Robertson, CNO  
Ms. Noamie Niemitalo, Vice President of Human Resources  
Mr. Bill Stangl, Vice President of Physician Services  
Mr. Steve Crichton, Vice President of Facilities and Plant Operations  
Ms. Jonni Belden, Vice President of Continuing Health Services  
Ms. Ellen Rehard, Recorder  
Public

**OPENING**

Call to Order

Dr. Swift, Chairman, called the meeting to order at 5:00 p.m.

Invocation

Chaplain Donny Edwards led those present in an opening prayer.

Mission Statement

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

Vision Statement

Dr. Swift 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 and Mr. Hite are present. Ms. Harry is excused.



Approval of Agenda

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

Consent Agenda

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

Approval of Minutes

Minutes from April 25, 2019 Board meeting and retreat (copy appended to minutes).

Administrative Policy Review

Four Administrative policies, Adoption and Surrogate Birth, Donations and Memorial Gifts, Petty Cash Fund, and Solicitation (copies appended to minutes). **No motion required.**

Finance Meeting

Items requiring Board Action from the May 23, 2019 Finance Committee Meeting (copy appended to minutes).

Committee Reports

- Physician Recruitment and Retention Committee
- The Legacy Advisory Board
- Quality Committee
- Healthcare Foundation

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

**RECOGNITION ITEMS**

Employee Recognition

Diana Steinlicht	Legacy
Sara Pence	Accounting
Christina Redman	Legacy

Legend

**Leigh Worsley**

Mom, leader, dosimetrist, physicist, volunteer, friend, and breast cancer survivor. These are all words to describe one very special woman who walks the halls at Campbell County Memorial Hospital: Leigh Worsley, the Heptner Cancer Center director, and a Campbell County Health Legend.

According to her nomination form, Leigh never hesitates to step in and help out—from gathering wheelchairs to running errands for patients. She gives her card and phone number to new patients and sincerely means it when she says, “Call me anytime.”

Leigh earned a Bachelor of Science from Weber State University in Ogden, Utah, and a Master of Science in Medical Physics, RTU-VT in South Bend, Indiana. She has also earned a Radiation Therapy License from the American Registry of Radiologic Technologists; a Medical



Dosimetry License from the Medical Dosimetry Certification Board; and is a Member of the American Association of Physicists in Medicine.

Leigh has worked in healthcare for 22 years—20 of those years have been in Oncology, and 18 of those 22 years she's been right here at CCH in Gillette, Wyoming.

Cancer has played a large role in Leigh's life. In September 2014, Leigh was diagnosed with breast cancer—at 37, the diagnosis took her off guard. But it didn't shake her. In fact, she uses her personal experience receiving treatment at the Heptner Cancer Center as a way to better connect with her patients.

Cancer Center staff will tell you that Leigh's willingness to share her personal cancer story puts their patients more at ease. Leigh also helps find ways to help patients financially afford the disease. Leigh is a member of the Campbell County Healthcare Foundation's Cancer Care Committee, which supports local cancer patients with financial grants. She is a driving force behind the Paint Gillette Pink fundraiser, a breast cancer education and awareness campaign, as well as the Chair Affair, which funds the Cancer Care Committee.

Leigh also played a large role in the fundraising for the CCHCF's PET/CT Capital Campaign, which will permanently install Positron Emission Tomography equipment in the Cancer Center to make it more comfortable for patients. PET is a type of imaging that helps healthcare providers choose the best treatments for cancer, see how well treatment is working and detect if cancer has spread to other areas of the body.

But, perhaps her proudest achievement is being a single mom to two amazing young men: Coleman, 19, and Chase, 14. Currently, Coleman attends Augustana University in Sioux Falls, SD, and plays tight end for the football team—he is majoring in exercise science. Chase is a freshman at Thunder Basin High School, and is what Leigh calls a computer genius! Thank you, Leigh, for coming in to work every day to provide these patients with the best care possible to help them in their cancer journey. Congratulations on your Legend award.

### **PUBLIC QUESTIONS OR COMMENTS**

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

### **EDUCATION**

#### **2019 CCH Perception Survey**

Jackie O'Hara from Jet Marketing presented a summary of findings from the 2019 Public Perception survey. Seven Hundred One total surveys were completed which is 150 more than the previous record. Survey questions stayed the same in order to trend the data. One question was added to the survey to address new competition in the marketplace. Also new in 2019 was a "pop-up" added to the CCH website, prompting people to take the survey. An effort was made by PFAC members to ask people sitting in waiting rooms to take the survey on a provided iPad. The percent of people who would recommend CCH to others increased in 2019 and the percent of people who perceive CCH's reputation as negative stayed the same. 2019 survey results were primarily in line with 2017 results. Results indicate steady satisfaction in care provided by Campbell County Health. Quality of care and billing were the most talked about subjects in open-ended comments.



**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:**

**Active:**

Department of Surgery AND Powder River Surgery  
**James A. Ulibarri, M.D.** Orthopedic

**Reappointments (All reappointment terms will begin July 1, 2019)**

**Active:**

Department of Medicine  
**Michael Nollo, M.D.** Pulmonology/Sleep Medicine  
**Travis Roberts, M.D.** Family Medicine  
**Billie Wilkerson, M.D.** Family Medicine

Department of Surgery AND Powder River Surgery Center  
**Nathan Simpson, M.D.** Orthopedic Surgery

**Courtesy:**

Department of Maternal Child  
**Julie Fall, M.D.** Pediatrics

**Limited Health Care Practitioner – Independent**

Department of Surgery  
**Joseph Fischer, OD** Optometry

**Limited Health Care Practitioner – Dependent**

Department of Medicine  
**Whitney Shawver, APRN** Ambulatory Medicine

Department of Surgery AND Powder River Surgery Center  
**Brian Austin, CRNA** Anesthesia  
**Aaron Hall, CRNA** Anesthesia

**30 DAY EXTENSION REQUESTS**

**Received**

Michel Skaf, M.D.  
 Daniel Allen, DPM

**MEDICAL STAFF NOT RENEWING PRIVILEGES:**

Arthur Ratcliffe, M.D.

**MEDICAL STAFF RESIGNATIONS:**

Peter Chase, M.D. Effective May 26, 2019

**Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits and Mr. Hite voted aye. Motion carried.**



### Medical Staff Development Plan

Mr. Fitzgerald explained that CCH has entered into a three-year contract with 3d Health. This will enable 3d Health to work with CCH to review and change the plan on an ongoing basis. The recommendation to approve the plan has gone to Physician Recruitment and Retention Committee and the recommendation out of committee was to present the findings to the Board of Trustees. The primary focus of the plan is primary care. Psychiatry and Geriatrics are listed as well, but can be a challenge to recruit.

**Mr. Stuber moved, seconded by Mr. Gerrits, to approve the Medical Staff Development Plan as presented. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Dr. Hartsaw and Mr. Hite voted aye. Motion carried.**

### PET CT Installation/Room Modifications

#### Legacy Shower Installation/Modifications

#### Pharmacy Storage and Hood Room Addition

Mr. Crichton explained the amendments to the FY2019 Facilities Capital budget.

- PET CT installation and room modifications increased from \$85,000 to \$120,000. Updated plans were received from Siemens the radiation-planning expert. Radiation injections are required to be given in a separate room other than the PET CT room.
- The Legacy shower installation and modification will increase from \$683,012 to \$787,148. Trip hazards and issues with proper water control within the shower spaces were identified during the mockup room trials.
- Pharmacy storage and hood room addition project planned for FY20 capital projects, moved to FY19. This work will allow CCH to modify the existing chemo preparation room and associated storage area to be compliant with USP800 regulations with an October 2019 deadline. Mr. Crichton is requesting to utilize funds from FY19 and begin work immediately.

Mr. Crichton explained that Facilities would still underspend FY19 approved capital budget by approximately \$1,435,000.

**Ms. Boller moved, seconded by Mr. Stuber, to approve the recommendation from Facilities Committee. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Dr. Hartsaw and Mr. Hite voted aye. Motion carried.**

## **DISCUSSION ITEMS**

### Board Rounding

Ms. Boller explained the process for CCH District touring. She recommends that two Board members and a member of administration tour various departments and areas so that Board members can become familiar with the infrastructure and learn what each department does. This will not include problem solving. She would like to start the process in the fall beginning with a practice session.

### Paperless meetings

Mr. Stuber explained that a group met to explore the possibility of paperless meetings. Mr. Stuber believes this would cut costs, decrease waste and improve efficiency. Training would be provided before going live. Board members discussed the use of their own devices, but suggested a portable device be available as well. The September Board meeting could potentially be the first paperless meeting.



## **INFORMATIONAL ITEMS**

### **Chairman's Report**

Dr. Swift explained that he will begin focusing the Chairman's report on the CCH Pillars. This month he will center his report on the Business Pillar. Currently nationwide there are 5300 hospitals. Between 2010 and 2018, ninety-eight rural hospitals closed throughout the country primarily in the southeast. Revenues are declining and expenses are increasing. Challenges include physician and nursing shortages, escalating IT expenses and a changing insurance marketplace. CCH is fortunate to receive funds from the Mill Levy and have relatively stable earning and expenses. The age of plant is good and there is an excellent medical staff and employees. Challenges for the future include escalating IT expense, decreasing reimbursement, increasing drug costs and the promise of "Medicare for all".

### **Chief of Staff Report**

Dr. Stamato thanked everyone who attended the medical staff dinner and thanked the Board for hosting the Board/MEC meeting. May 29<sup>th</sup> is the first of two annual medical staff dinners.

### **CEO Report**

Mr. Fitzgerald reported on these CCH events:

### **Events in May**

May 4	CCH competes in Gillette College Pronghorn golf scramble
May 8	CCH Board and Medical Staff Joint meeting to discuss the strategic plan
May 13-17	Hospital Week and Long Term Care Week
May 16	CCH Trustees participate in statewide WHA training

### **Upcoming events in June**

June 6	First Succession planning group graduation
June 15	Gillette Chamber Singers depart for Czech and Hungary
During June four CFO candidate interviews	

### **Other Items**

Becker's Hospital Review identifies CCH as one of the Top 150 healthcare places to work in U.S.

### **Strategic Focus**

### **People**

#### **Employee Engagement**

Ms. Noamie Niemitalo reported on the results of the Employee Engagement Survey. Employee engagement measures employee pride; intent to stay; willingness to recommend to friend and family for care; overall satisfaction toward workplace. Employee engagement scores went from 4.02 in 2017 to 4.11 in 2019 which is -0.01 below the national healthcare average. 83% of CCH employees took the survey. Action steps for addressing survey results include:

- Department Managers / Directors go over results with staff
- Celebrations
- Goals are assigned on the LEM
- Get ideas from employees on how to improve



- Assign committees, set up interdepartmental meetings, etc.
- Employee forums are held
- Trainings at Leadership hours/LDI's are conducted
- Rounding
- Stoplight Reports
- Survey sent out at end of the year

## Care

### Care Strategy Team

Ms. Misty Robertson reported that the long-term strategy for care delivery will include care coordination between acute care and outpatient continuum of care. Continuum of care tracks and guides patients through a comprehensive array of services over time to improve patient experience and outcomes. This care consists of inpatient, outpatient, long term care and the clinics. Initiatives for the project include:

- Patient navigator in the ED
- Chronic care management in the clinics
- EMS community paramedicine program
- Care managers at the hospital visit patients, inpatient and outpatient
- Social work

An oversight committee will be developed since these initiatives are located in different service lines with different leaders. Work will be done with IT to discuss a central, accessible electronic documentation area.

## Service

### Outpatient Caps/Survey

Ms. Colleen Heeter introduced Tanya Allee who talked about the changes to the patient experience survey. Delivery of surveys is now blended with some surveys being mailed, but most of the surveys are collected electronically. This has resulted in an increase in the number of completed surveys. Improvements have been made throughout all outpatient areas. Quality plus the use of AIDET have helped increase scores. Ms. Terri Kinney, Director of Radiology, shared the success her department has had by passing out a card to all patients that go through Radiology. Each patient receives a card signed by the radiology team and also provides additional information about the patient survey and further patient assistance information. Ms. Kinney also began rounding with patients with a purpose. Not just saying hello, but asking specific questions. Her staff has received 515 name mentions in the survey comments, which is the direct result of AIDET and rounding with a purpose.

## Business

Mr. Fitzgerald provided the following financial report:

April 2019:

- The total gain for the organization was \$220,000 which includes operating and non-operating income and expenses.
- The total excess revenue over expenses gain ytd is \$1,168,000.
- EIBDA was close to \$1.9M in April. YTD almost \$17.5M.
- EBIDA margin is close to budget at 11.99%.
- Net patient revenue has increased over the last couple of months.
- Operating expenses have increased in April as well.
- Total EIBDA just over budget.



- The trend line from consolidated operating gains and losses is negative although numbers are better than a year ago.
- Accounts receivable days dropped one day to 87 in April.
- Days cash on hand remained the same at 141.
- Cash balances stayed the same at \$66M.

Ms. Boller inquired about billing issues, since that was a negative that came out of the public perception survey. Mr. Fitzgerald stated that the billing department has turned a corner. Patient Financial Services has changed to a more consistent statement format. Ms. Heeter added that an outpatient procedure estimator will roll out in a few months.

### **PRESENTATION**

Dr. Swift presented Mr. Stuber with a plaque for completing the Best on Board courses.

### **EXECUTIVE SESSION**

The regular meeting recessed into Executive Session at 6:40 p.m.

The regular meeting reconvened at 8:47 p.m.

### **ADJOURNMENT**

There being no further business, the meeting adjourned at 8:47 p.m.

The next regularly scheduled Board meeting is June 27, 2019 at 5:00 a.m. in Classrooms 1 & 2.

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Alan Stuber, Secretary

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Ellen Rehard, Recorder