

Campbell County Health Board of Trustees

Regular Board Meeting – CCH 5th Floor Classroom August 22, 2024 5:00 PM

Members present:

Alan Stuber, Chair Mark Hoskinson, Trustee Bill Rice, Trustee

Tom Murphy, Vice Chair Sara Hartsaw, Trustee
Randy Hite, Trustee John Mansell, Trustee

Also present:

Matt Shahan, CEO Dr. Robert Neuwirth, COS

Natalie Tucker, CNO Dawn Hodges, CHFRO Director

Tom Lubnau, CCH Attorney Diane Jackson, UCHealth Norberto Orellana, Marketing

Adam Popp, CFO Bree Richardson, Marketing

Pledge of Allegiance

<u>Call to Order</u> – Chairman Stuber, called the meeting to order at 5:00 pm <u>Mission Statement</u> – Trustee Stuber read Campbell County Health's Mission Statement. <u>Vision Statement</u> – Trustee Stuber read Campbell County Health's Vision Statement. <u>Roll Call</u> – Jamie Kay called the roll.

Approval of Agenda

TRUSTEE HOSKINSON MOVED TO APPROVE THE AGENDA AS PRESENTED. TRUSTEE MANSELL SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

Consent Agenda

TRUSTEE MURPHY MOVED TO APPROVE THE CONSENT AGENDA AS PRESENTED. TRUSTEE MANSELL SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

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

- Approval of Minutes 7-18-24
- Finance Committee 8-19-24
- Board Committee Meeting minutes only on months with meetings
 - Legacy Advisory Board
 - Facilities
 - Joint Conference Committee
 - Community Behavioral Health Steering Committee
 - WREMS
 - Quality Committee Meeting Minutes
- Approval of Medical Staff Appointments

MEDICAL STAFF APPOINTMENT

TRUSTEE HARTSAW MOVED TO APPROVE MEDICAL STAFF APPOINTMENTS AS PRESENTED. TRUSTEE MURPHY SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

Recognitions and Presentations

Recognitions:

- Kelsie Dellos- received 13 nominations for the Daisy Award—clearly supported by her peers and co-workers.
- Lizzy Wood—performed much needed research and helped implement a
 Maternal Child Policy Change, allowing laboring mothers to eat during births.
- Maternal Child received two donations, one from a local business and one from a local family. That speaks to the great work Maternal Child has put forth and the Board is very proud of them.
- Lown Institute—Campbell County Health was recognized in various areas regarding Social Responsibility, Health Equity, Value of Care, Patient Satisfaction, Pay Equity, and Avoiding Overuse.
- CCH Cath Lab received recognition from NCDR as Gold Performance Achievement and MI Registry Performance Achievement Award.
- Chairman Stuber Thanked Jake from the News Record for his many years of service and CCH Coverage. CCH Board wishes Jake good luck in his future endeavors.

PUBLIC QUESTIONS OR COMMENTS: None.

DISCUSSION ITEMS:

- o Camporee Recap—Chris Beltz
 - o Chris Beltz, Director of Urgent & Emergent Services discussed Camporee from a Healthcare Standpoint and gave an outline of the number of patients cared for, the types of patient care rendered and additional staffing that was allocated to Camporee. Of Note a Camporee Baby was born on 8/10 at CCH!
 - Chairman Stuber complimented the EMS Crews and their abilities in handling the extra calls associated with Camporee as well as maintaining coverage for the community which this particular week included a working Apartment Structure Fire.
- MSHRRRG & MIHA Recap—Adam Popp, CFO attended MSHRRRG and MIHA Conferences in Cour D'Alene, Idaho August 7-9.

ACTION ITEMS:

- Approval of 2025 Board Meeting Dates
- Matt read out loud proposed Minute Dates, this matter was tabled to give Board
 of Trustees enough time to review the dates, and this matter will be brought
 forward at the September meeting.
- o Finance Report out and Approval

July Finance Report and Discussion:

No Capital Purchases have been made yet in this fiscal year.

Acute Patient Days of 643 for July were very consistent with the prior month at 646. The Acute Length of Stay calculation was down slightly compared to last month. Case Mix for July was at 1.7 compared to June at 1.4 and up from June of 2023 at 1.3. Legacy resident days were increased in July at 3,453 compared to Budget at 3,229. Newborn admissions were up at 45 compared to last month at 39. Mental Health visits for July was at 1,537, an increase of 504 visits compared to a year ago. Total Surgical cases of 252 were flat compared to the prior month of 253 and slightly down from 2023 at 267. Emergency room visits were comparative this month at 1,803 to Budget of 1,873, however, that is a130 visit increase compared to June. Outpatient visits were up compared to the prior month, 17,132 to 16,144 and to prior year 17,132 to 16,196. The Kid Clinic treated 46 patients in the month of July. Cardiology was up at 1,054 visits compared to last month at 807. Total Clinic visits were 8,368 for July compared to June at 7,325. Radiology was at 3,641 compared to 3,491 last year and slightly more than June at 3,415.

Days cash on hand is 118.

Total Gross Patient Revenue for July was \$34.4M, up when compared to July 2023 of \$30.5M, about a 13% increase. Total Operating Expenses were \$18.9M. Operating Income for July was (\$2.5M). Month-end Revenue in Excess of Expenses was (\$1.3M).

Year-to-Date Bad Debt is running 3.5% of Gross Patient Revenue and Charity is 1.6% and Contractual Allowances are approx. 47.8%. As A/R decrease the Contractual Allowances will decrease as well.

Contract Labor, Physician Salaries and Non-Employed Physician Compensation are being reviewed by Accounting Staff as it presented unfavorable. a. Medical Supplies were elevated due to an increase in implants and Drugs/Pharmacy expenses were higher due to volumes in certain Chemo drugs.

Mill Levy over the last few years appears to be based on Federal Fiscal Year. April/May

Payments are higher than those we receive in July and August. CFO Popp has contacted the County to get more information and will continue to follow up with them.

Discussion From Trustee Hoskinson: Great work on everything CEO and CFO have done over the last few years.

Discussion From Hartsaw: Is the Mill Levy spread over 12 months? That is correct, it is not broken down to seasonality.

TRUSTEE HOSKINSON MOVED TO APPROVE THE JULY BUDGET REPORT AS PRESTNED. TRUSTEE MURPHY SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

INFORMATIONAL ITEMS

<u>Chairmans Report</u> – Thank you to Jake from GNR. Reminder to the community, there are three seats are up for Hospital Board; August 26 is last day to run; Thank you to the community for their help and everything they have done to help each other out during the wildfires; County Road & Bridge; Private Contractors loaning machinery and all other aspects. We live in the best community in Wyoming and the Nation.

Vice Chair Murphy: was in Billings, when he was notified of what was happening at home. As they got closer to Sheridan, they stopped the visitor's bureau; it seemed like anyone who had a tank and a flatbed, were traveling with flashers on to come help where they could. Trustee Murphy is very thankful for our community and Gillette will continue to shine on!

<u>Chief of Staff Report</u> – Kudos to ER staff physicians and nursing staff; this weather and event wreaked havoc on pulmonary patients and they have done a great job handling that.

<u>UCH Update</u> – None

<u>CFO Report</u>— Much of Departments' time has been and will be dominated by Epic Discovery Sessions; to everyone involved: there is a lot of good discussion and work happening.

RT Linda in HMR; served Campbell County for 49 Years;

Facilities: Parking Garage Elevator fixed in July; Boiler issued at PRSC—replaced one and limping the other; awaiting installation dates; 4 days per boiler is expected for installation. approval from state for Kitchen project to proceed. Pathology/Lab moved into the new area: Exhaust Fan will be upgraded at contractor's expense;

New Providers in CCMG Clinics: Dr. Parmaley family practice; Dr. <u>Arama</u> in peds clinic; Dr. Salmon in BHS;

There have been a ton of positive comments for Kim Johnson and kudos to her leadership and what a great job she is doing.

Materials Management: Initiative with David Thompson migrating contracts to reflect UCHealth pricing; increase our contract compliance.

Pediatric Carnival was held in early August, well over 300 people in attendance; it went very well.

Second Street Building: fire system inspection completed; downspouts fixed; quotes on concrete and flooring. Using some existing material for demoing to cut costs; removal of baseboards; prepping walls for paint; HMR Staff is very happy; looking at site to site WIFI; redoing bathrooms to be ADA compliant and reviewing quotes to add temp walls.

CHRO Report-

Legacy: Clinical recruitment continues to be a priority; CNA and RN Positions are open; finish Legacy CNA class; filling 4 positions; made an offer to a Nutrition Manager that has been accepted—moving form FL and start in October; restructuring some internal positions and positions that were not back filled—previous employee that is excited to come back since Legacy is under new management; introducing initiatives for residence voices; Foundation purchased a new van for close to \$60,000.00 and is funding close to \$60,000.00 in the kitchen for repairs; family member of former residence donate projectors to dementia unit.

Professional Development: hosting 139 students for clinicals; from CNAs to Rad Techs, Family NP, Med Lab Techs; and 14 more will join in next few months; CLIMB Wyoming is doing a Med Assistant Class; EMS University preparations have started; CCH is moving forward with the Journey program for 3rd year; it is a kick start program collaboration with the school district bring EMTs, phlebotomists and more to the hospital. Professional Development will be moving mandatory education to January from March so no interference w/ Epic. Emergency Preparedness—Decontamination Full Scale Drill on 9/5. The Drill will take 6 participants through entire decontamination process.

Childcare: School age program has ended with back to school; 40 summer kids; in September starting Learning without Tears collaboration with the school district for Reading.

Patient Experience: Five new grievances; closed eight; 20 are currently open and 0 have been open longer than 30 days; there was 70% positive response from staff regarding the culture initiative; 1,638 customers/patients physically assisted by Welcome Desk and the Chaplain Services had 187 contacts over the last month.

Radiology: Nuclear Medicine performed 79 procedures highest since 2019. Radiology continues to increase the number of procedures—highest satisfaction scores in Top Box.

Human Resources: Annually reduced overall turnover from 29.92% to 23.75%. Still high but going in the right direction; currently there are 133 positions open-- 75 at CCH and 58 at Legacy—in the last month we hired 20 lost 19. One on LOA could not return, 4 terminated for cause, 2 moved, 1 retired, 1 family emergency out of state could not return, 1 took another job outside org but has returned as full time; 1 terminated due to being PRN and not taking any shifts for 3 months and 8 resigned.

Discussion regarding students coming into work; are we interviewing/hiring them? Some like in journey will work here. Some are doing rotations in med school, and we are recruiting, and some are recommended to pursue careers elsewhere.

<u>CNO Report-</u> Echo shout out to patient care areas; communications; Materials Management; Emergency Preparedness; all the work during the week; and work not done yet; wrapping up and reviewing changes for the next Camporee.

EMS in Sheridan: Wilderness Medical Team; is a back country rescue team comprised of 15 members, who works closely with Sheridan Search and Rescue. Since 2023 there have been 11 activations.

EMS held a meet and greet in Wright last week that went very well; everyone did a fabulous job putting it on and over 100 people came to meet the crews.

July QAPI Projects: 19 incidences of workplace violence; 10 assault/battery; 3 in ER, 1 in BH, and 6 in ICU; moving forward hope to include Legacy data.

Social Determinants of Health: May had 206 adult admissions; and was 72% in compliance; June had190 adult admissions and was 96% compliance. Two patients screened positive and were given referrals for resources. July had 188 adult admissions and was 99% in compliance with 5 positive screens and resource referrals.

Cath Lab: Collects data to recognize Quality Indicators; Group efforts of various departments; The Cath Lab will be increasing their hours. Specifically, opening earlier at 630 and closing at 530 pm Mon-Fri. As we add staff we hope to increase the hours even more.

Finally, Length of Stay is the lowest it has been since 2020; recognition goes to all the staff that has helped get patients placed at appropriate levels of care.

Discussion regarding the change in Cath Lab hours, is that based on data? Yes, data has been collected from ER regarding the times people come in and determined if we can hold them to get them into our ICU and our Cath Lab or if they will need to be transferred out to accommodate proper timing.

<u>CMO Report</u> –Working to reenergized Physician Leadership Committee to establish a sounding board for CMO Houk and to get feedback from providers regarding clinical care and directions we may want to go; second meeting laid out expectations for Medical Directors; Put a face to a name of nearly Medical Providers; CMO Houk will be implementing a process for new providers, where they are given expectations of their roles. Amanda has done some great work in Recruitment and Retention, contracting and pay and has someone in pipeline for all areas, except anesthesia. This will allow her to focus on retention efforts.

<u>CEO Report</u>—WREMS Board Meeting reset to next Friday. WREMS continues to be a bright spot throughout the State. CEO Shahan, Eric with WHA and Sheridan's CEO have met with the Mental Health Task Force including Behavorial Health interventions with EMS. We have set a positive standard; WREMS does great things in Sheridan; staff and leaders have met with city and county and all reports is that everyone is happy. Thank you to this Board for their continued support.

End of the year bash will be Saturday, 11-2. Please come down to the 3rd Street Plaza, there will be food trucks and Kelvin will be DJing.

Culture Changes that we have been working on for the last 5 months are starting to come to fruition. Thank you to the staff and teams involved and the support of the Board. We are starting to hear the positive changes; and it's coming full circle. We are teaming up with the right people from a culture perspective and hiring for culture not a warm body. Recent adjustments are already having a big impact on our patients.

Department Manager have added almost 60 items to the cost reduction spreadsheet that staff have come up with. Some are lofty and some are \$500 they all add up and make a difference. Staff are starting to present ideas and be a part of the cost-saving effort.

Purchase Services were cut by 40% over the years. A lot of work but happy with our first month of the Fiscal Year.

Discussion: Stuber is unhappy about the nearly \$4 million dollars in grant we were awarded and then taken away. Several articles about the importance of rural EMS, yet Grant funds are not available. CCH was given the Legal opinion that the funds were intended to be used for COVID purposes, and the State did not want to take the risk of handing funds out and having to pay back. The funds have been given back to the federal government.

The regular meeting recessed at 6:31 p.m. to enter Executive Session.

EXECUTIVE SESSION

TRUSTEE HARTSAW MOVED TO ENTER INTO EXECUTIVE SESSION AT 6:31 PM TO DISCUSS CONFIDENTIAL PERSONNEL MATTERS AND ATTORNEY CLIENT INFORMATION PURSUANT TO W.S. 16-4-405(a)(ix) AND W.S. 1-12-102 AND W.S. 16-4-405(a)(vii).

TRUSTEE MANSELL SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

TRUSTEE HOSKINSON MOVED TO COME OUT OF THE EXECUTIVE SESSION at 7:45 PM. TRUSTEE HARTSAW SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

The meeting adjourned at 7:45 PM. The next n	neeting is scheduled for September 26, 2024.
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Jamie Kay, Recorder

Signature: Bill Rice (Oct 3

Bill Rice, Secretary

Email: bill.rice@cchwyo.org