

**Campbell County Health Board of Trustees**

Regular Board Meeting – CCH 5<sup>th</sup> Floor Classroom

September 26, 2024

5:00 PM

**Members present:**

Alan Stuber, Chair

Tom Murphy, Vice Chair

Randy Hite, Trustee

Mark Hoskinson, Trustee

Sara Hartsaw, Trustee

John Mansell, Trustee

Bill Rice, Trustee

**Also present:**

Matt Shahan, CEO

Natalie Tucker, CNO

Tom Lubnau, CCH Attorney

Adam Popp, CFO

Dr. Robert Neuwirth, COS

Dawn Hodges, CHFRO

Diane Jackson, UCHHealth

Jamie Kay, Recorder

Bree Richardson, Marketing

Director

Julie Ieronimo

Tanya Allee, VP of Patient

Experience

**Pledge of Allegiance**

**Call to Order** – Chairman Stuber, called the meeting to order at 5:00 pm

**Mission Statement** – Trustee Stuber read Campbell County Health’s Mission Statement.

**Vision Statement** – Trustee Stuber read Campbell County Health’s Vision Statement.

**Roll Call** – 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 MANSELL MOVED TO APPROVE THE CONSENT AGENDA AS PRESENTED.**

**TRUSTEE HITE SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.**

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

- Approval of Minutes August 22, 2024
- Finance Committee September 24, 2024
- Board Committee Meeting minutes - only on months with meetings
  - Legacy Advisory Board
  - Community Behavioral Health Steering Committee
    - July 25, 2024
    - August 15, 2024
  - WREMS
  - Quality Committee Meeting Minutes

## **Recognitions and Presentations**

### Recognitions:

- Dr. Jacob Parmley, DO—Family Practice Doctor from Utah. Completed Residency at UW in Casper.
- Dr. Natasha Maremma, MD—Kid Clinic Pediatrician; have heard nothing but amazing things about Dr. Maremma. We are excited to watch her practice grow!
- Best on Board—Dr. Mansell completed Best on Board Certification—Thank you for continuing your education. The Best on Board Education is paid for by the Wyoming Hospital Association.
- GALI Graduates—Jordan Frost, Lisa Jackson, Norberto Orella, and Amanda Teppo

### **PUBLIC QUESTIONS OR COMMENTS:** None.

### **CORRECTION TO AGENDA:**

Chairman Stuber requested that the Agenda be modified to combine Finance Report out and Approval and Capital Requests at Item "B" of the Agenda. Item "A" of the Agenda will now be Approval of Proposed 2025 Board Meeting Dates.

### **ACTION ITEMS:**

- 2025 Board Meeting Dates
  - **TRUSTEE HARTSAW MOVED TO APPROVE THE 2025 BOARD MEETING DATES AS PRESENTED. TRUSTEE MANSELL SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.**
- Capital Requests
  - Kitchen Remodel
  - EPIC Update

### **Capital Budget**

- **Kitchen Remodel**

Facilities submitted a Capital Request for Consideration to remodel the Kitchen in the amount of \$93,600. The funds will be used to remodel the steam lines in the ceiling, improve the exhaust system and relocate walls and other permanent fixtures.

Discussion regarding when Unidine came on with CCH, did Unidine participate in the initial remodel? Yes, they fronted funds and repayment ran through contract.

Discussion regarding the approval process and kudos given to Finance Committee and Trustee Murphy's efforts in getting the plans approved.

**TRUSTEE HOSKINSON MOVED TO APPROVE THE KITCHEN REMODEL REPORT AS PRESENTED. TRUSTEE MURPHY SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.**

- **EPIC Update**

IT submitted a Capital Request update regarding the advancement of funds to date. The EPIC Capital Project was previously approved for \$3,382,850. To date \$119,022 has been advanced to implement the various Interfaces. CFO Popp proposes that this document be used as a tracking document to keep the Board up to date on spending previously approved Funds.

Discussion: Do we anticipate any cost increases for this project? Yes, we have reviewed the overall Budget and have addressed necessities and have been able to remove some items.

Discussion: Do we have a running total on what has been spent on EPIC thus far? Approximately 1 year ago, there were discussions as part of the audit relative to labor costs regarding how much could be written off in FY23. Currently what has been spent as far as Capital toward EPIC is \$119,022.

Discussion Regarding EPIC Expenses—In CFO Popp's history he has researched implementing EPIC 4-5 years ago; you were looking at 38M; which is separate from lease costs. Meditech would require millions of dollars to bring it up to date; there are underlying issues with Meditech that would cost additional millions. Meditech Upgrade vs. UCHHealth EPIC Upgrade—During the retreat there will be an EPIC Recap. The decision was based on the 10-year cost being cheaper with EPIC. More will be addressed at the Retreat.

**TRUSTEE MURPHY MOVED TO APPROVE THE EPIC CAPITAL BUDGET REPORT AS PRESENTED. TRUSTEE RICE SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.**

- **Finance Report Out & Approval**

**Capital Summary:**

Very little has been brought forward as Capital Expenses thus far; as discussed previously the bulk of Capital Expenditures will be made in the 2<sup>nd</sup> and 3<sup>rd</sup> Quarters. Using 1<sup>st</sup> and 4<sup>th</sup> Quarters to gain cash on hand.

### **Bad Debt and Charity**

August 2024: Charity \$142,137.78; Bad Debt \$1,905,237.24; Grand Total \$2,047,375.02.

**TRUSTEE HOSKINSON MOVED TO APPROVE THE AUGUST BAD DEBT & CHARITY AS PRESENTED. TRUSTEE HARTSAW SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.**

### **Financials**

Acute Admissions for August are 210, which is almost 18% above Budget and reflects a 22% increase compared to July (172). Average Length of Stay is down slightly compared to July. Newborn admissions of 67, compared to the prior month at 45, are up over 48%. Newborn Admissions are ahead of Budget for the month and Year to Date. Case Mix is lower in August compared to July. Legacy Residency days were slightly down at 3,446 compared to July at 3,453. Mental Health visits were down for the month. August Surgeries were at 262; below Budget and below 2023's YTD surgeries. Robotic Cases are at 21 and Year to Date is 35. ED Visits for August of 1,800 are slightly below July (1,803). Year to Date ED is down about 5%. Pharmacy was up in August at 33,000 orders processed compared to July at 31,000. Wright Clinic patient visits are lower in August compared to July—due to the regular provider being out. WIC 2,130 down compared to Budget at 2,400. Nephrology's reported volumes in July were inaccurate; July's Nephrology visit was actually 154, August year-to-date is 363. August Family Practice Visits were slightly down at 396 when compared to Budget of 500. Total Clinic Visits of 8,175 are slightly behind Budget at 8,798. Xray procedures down slightly at 1903 compared to Budget at 2123; August Xray Procedures down slightly at 1900 compared to July at 1920. Total August Radiology 3622. Pediatrics were at 765 for August, July Pediatrics were at about 700. Kid Clinic volume is increasing.

Kudos to Dr. Dusek for her role as Medical Director. Dr. Parmley (FP) started very recently, Dr. McClenahan (FP) will start next week and Dr. Maremma (Ped @ KC) started very recently as well.

Discussion regarding cross training with Dr. Dusek and Dr. Black to pick up the Allergy service line upon Dr. Black's departure.

Discussion regarding the Pediatrics Numbers being lower than the Budgeted Expectation. Could be in relation to when doctors started compared to expected start.

Discussion regarding: OCC Health dropping 50%. Some results in timing; depending on when things are ordered throughout the year.

Days cash on hand is 119.

Discussion: We have presented 85-90% of what the auditors have requested. Will be submitted in full by Monday. CCH is substantially ahead of where we were a year ago. QRA Payments (upper limit payments) were booked as they had been done in previous years; once converted, puts CCH about \$5M better than expected. Still about .8 below Bond Requirement; however, that does not include the one-time expenses of approx. \$7.2M.

Total Gross Patient Revenue for August was \$36.7M compared to July at \$34.4M (6.6% fav), and about \$835K better than Budget. Total Operating Expenses were \$18.8M. Operating Income for August was (\$1.2M). Month-end Revenue in Excess of Expenses was \$174K. Total Net Revenue is \$17.6M, ahead of Budget Year to Date. Tax Levy came in heavier than last month at \$1.1M. The County is ending the end of their Fiscal Year and are doing true ups.

CFO Popp indicated that we do not anticipate an across-the-board price increase. There will be some targeted increases.

Charity came in at 1.7%, Budget is 1.5%. We are working with patients to get Financial Assistance Applications completed so that it is not just written off; can allow patients to receive Charity.

Year-to-Date Bad Debt is running 3.8% of Gross Patient Revenue and Contractual Allowances are approx. 48%.

Individually August's Contract Labor is up compared to Budget, as well as Non-Employed Physician Compensation. Contract Labor and Non-Employed Physician Compensation, specifically, Anesthesia and the Emergency Department are being reviewed by Accounting Staff.

Discussion from Trustee Rice: Financial Report out is very positive. Regarding Cash on Hand—looking stable for about 10 months. Year ago, September expenses were 10K less. As we move on Trustee Rice does not want CCH to forget what our real average daily expenses and keep having expenses coming down. Do not become complacent thinking average daily expenses are looking good. Looking to be \$82K daily increase from 2022. CFO Popp discussed the staff that are putting in their hard work cutting expenses and utilizing the expense tracker. Staff has identified approximately \$2.2M in savings that could be coming.

Trustee Mansell—do you believe Axiom is a step that the management team implemented in an effort of recognizing the need to address average daily expenses. Yes absolutely, there is only so much that can be done in Excel.

CFO Popp: Axiom is Excel on steroids RE: how expenses are set up a person and schedule and shift differentials and overtime and ability to make MACRO Decisions that Accounting as the Admin and reporting abilities can be specialized.

Trustee Rice: Pointed out that the Expenses he referenced were already in place when CEO Shahan and CFO Popp came onboard.

CEO Shahan: Tracking Income is essential as well; there are likely 4 areas that are driving that. Leadership knows the areas that drive a lot of the expense, and reducing those expenses is a process that cannot be implemented immediately without affecting patient care.

Treasurer Hite: Appreciates Bill's comments; he's confused on the issue on the rolling 12; Finances are always at the top of our minds. Administration is refreshing to see things moving in right direction even though it's slow; historically data was not accurate; and now we have objective data to reference; Bill and Hoskinson are spoiled with the Administration sitting across. It has not always been so positive and forthcoming. Treasurer Hite is thankful for the work the everyone down to the staff is putting in to rectify the financial situation.

Chairman Stuber—In the six years he's been on the board he has not heard so many positive accolades given out for the hard work everyone in the organization is putting in to turn the ship around.

Trustee Hartsaw—interesting that Bill pulled information that was not readily available; it would be good information to hear what the daily revenue is and how it's changed overtime; and not to disparage previous members of Administration, it's a whole different system and a new team; everything is going in the right direction and Trustee Hartsaw looks forward to the future.

**TRUSTEE HOSKINSON MOVED TO APPROVE THE AUGUST FINANCES REPORT AS PRESENTED. TRUSTEE MANSELL SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.**

### **CEO Succession Plan**

This policy outlines what happens in the CEO's absence. This policy defines steps to be taken if the CEO is gone, ill or unable to fulfill his duties for one reason or another. CEO Shahan cleaned up verbiage; replaced dated titles of the administration; outlined who is in charge; and laid out the role of leadership as Administrator on Call. Non-Normal Business hours the Hospital Supervisor is in charge to determine if the AOC needs to be contact or the attorney needs to be called. It outlines members of the Leadership Council are in rotation to be Administrator on Call. The CEO Succession Plan sets the framework of the steps to take if the CEO is permanently absent and establishes an outline of what UCHHealth will do to assist CCH in selecting an Interim CEO.

**TRUSTEE MANSELL MOVED TO APPROVE THE CEO SUCCESSION PLAN AS PRESENTED. TRUSTEE HOSKINSON SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.**

### **INFORMATIONAL ITEMS**

Chairmans Report – Last night Chairman observed the Open Forum. Thank you for the support from current board members; hard questions and good questions. Only thing stuck out to Chairman Stuber is a comment made by one of the candidates (recording is GPA) about restoring integrity to the Administration. That is not the case, there are no integrity issues with our Administration and if anyone thinks otherwise or would like to have a conversation, Chairman Stuber's number and address is online, he would appreciate people reaching out to discuss that. Chairman Stuber wants the Administration to know that he has not seen any integrity issues; thank you to all you do. This is one of the best Administrations in Chairman's tenure. Of-Note: there is no additional payment for Administration On Call Hours.

Chief of Staff Report – No Report.

UCH Update – UCHealth specific Northern Colorado Construction continues at MCR once completed an additional 136 bed will be available. PVH is building their Behavioral Health Unit, which will add 10 more beds. Greeley Hospital is expanding their ED. Regional West going live on EPIC next Saturday, October 5, 2024. CCH specifically, the focus has been on EPIC; and connections with Dr. Houk. The annual UCHealth wide Leadership Meeting will be held on October 30, 2024, Matt and 2 admins will be attending.

Chairman Stuber commented regarding meeting with UCHealth's IT Department; it was a pleasure to meet with them. With our Board Retreat next month, can Diane give us an update on what CCH has gleaned from the UCHealth Affiliation.

CFO Report— At the October Education Session, the OCC Health question will be addressed; present info on the revenue side and expenses per day. A lot of work taking place at 2<sup>nd</sup> street building; sealed asphalt; put in a drain on north side of the west side of parking lot; replacing gutters; fire inspection completed; final code compliance report; renovating bathrooms to ADA Standards; fixing concrete on sidewalk on East side; prepping pad for generator. HMR continues to set new records; and now add painting to their skill set. Cubicles have been ordered; IT portion will be started; Oxygen Room will need updates to meet requirements.

Accounting has been working very hard in addition to year end audit so much further ahead a year ago.

Rehab Director Shannon Sorenson moved from area; keeping her on remote for mentorship with Chelsey Jenner, the interim manager;

Steam Boilers at PRSC installed and functioning; small issue—air flow issue has been resolved. Exhaust fans at the new pathology area will be upgraded at their cost.

#### CHRO Report-

Prof Development 9/23 started cohort with CLIMB WY; 11 students for an MA program; CNA classes previously were not successful due to rotating schedule once employed. Working on Basic EMT Class with 14 community members; 3 are high school students through Kick Start Program; CNA with 6 community members—5 is part of Kick Start Program; 4 CCH employees participating in GALI. Code Orange Drill—Annual Decontamination drill; lots of things to be changed based on the drill. Annual Audit of Medical Library per policy is currently being conducted.

Patient Experience, Chaplain, and Customer Service—lots of work for the culture initiative; aligning department communication and staffing meeting; coaching and performance eval. Updating workflow for Patient Advance Directive. Last month 8 new grievances and closed 18; currently 17 open; 0 over 30-days old. The Customer Assistant stats last week 3363 contact by front desk; 302 were Way Finding and Chaplain 255 contracts last week.

Childcare—Brigg Ants Program, an assessment program for kids starting Kindergarten and design curriculum to help kids prepare for kindergarten. Child Care and the Nursing Program have partnered and Nursing students from Gillette College are able to come in and observe the classroom for all ages.

Human Resource—Annual Wellness Screening will be starting in October. Annual evaluations are being finalized. Objective in HR—combining performance evals, goal setting and all rounding into one program; which will allow us to shut 4 contracts down and save over \$170K. We were selected for the Department of Labor Audit. Thank you to HR and Adam's team, Julie especially, not only did HR Audit and a 1099 Audit for the last 3 years. The Audit has requested all of the data and taken it all and will have audit results in the next 6-8 months. Started market analysis for comp review for this year. That will take about 3-4 months.

Turnover 23.75% that was the calendar year for 2023. FY23-F24 was 35.68%; during same time 368 employees left; 127 were involuntary (12.31%); in August we hired 21 lost 21; 133 open positions; 72 at CCH and 61 at Legacy. Of the employees that left in August 1 did not return from LOA; 1 left for school; 1 got a new job in town; 2 were summer internships ended; 1 left due to medical issues; 2 moved out of Gillette; 1 retired; 8 resigned and 4 were terminated.

Radiology: Radiology Team attended the Sports and Wellness event at the Cam-Plex and were well received. Increasing volumes in Radiology—they are running short and still their patient satisfaction scores are ranking in the 80% percentile in the Nation.



Legacy—Clinical Recruitment continues to be a priority; traveler RNs reduced to 3 lowest in a year; still have 20 CNA travelers; HR at Legacy is working with CCH's new recruiter to start a new CNA class; the new Nutrition Manager will start next month. Hired an RN Care Manager with the goal and the hope to work admissions, marketing, rehab and discharge as a continuum of plan in hopes to increase communication and increase census. As of September 25, 2024, the census was 120, the highest it's been in 4 years. Introducing an initiative to hear residents' voices to improve quality of life.

Employee Health and Safety—Flu Vaccines are starting next week; COVID Vaccines will start tomorrow. Currently 47 employees are on FMLA. Our Safety Coordinator is revamping the Safety Suite Program and reinstating the Safety Coaching Program.

Discussion regarding pay revamp last year compared to DOL Investigation and how DOL may have perceived CCH had those changes not been made. DOL investigation was more for exempt and non-exempt. Compensation going from steps to market analysis was to make all those changes over a 2–3-year period. Last year was intended to get them on the playing field. The goal this year is to get everyone on the right yard line. In about a month we'll know that cost and can decide if that can be done in a 1-or 2-year period. All shift differentials were taken care of last year. Pay will put people in the right market. It's our hope that people who have held out and understood the 2-3-year plan will likely be happier.

#### CNO Report-

Rad Onc.-- have some upcoming events—Paint Gillette Pink is today, 9/26. First Annual Breast Screening on 10/5; patients are asked to call to schedule those. A new program called Bold and Beautiful funded by Wyoming Breast Cancer Initiative Grant; 4 patients that finish chemo will be invited to get facials, makeup classes and other things to empower them and help them feel better after finishing chemo.

The ICU Department has created a Board in their area called Fall into Kindness. ICU invites all staff throughout the organization to pick a cutout and write a compliment as a shout out.

Med Surg and ICU Team are working on identifiers—if anyone must enter a patient's rooms; comfort care; violence; etc.

Dialysis: Numbers increasing and now crossed the threshold of having 30 people on dialysis can participate in the CAP surveys in April of 2025.

Maternal Child: Newborn Transport—reaching out to surrounding hospitals to get to know their needs; and provide care for infants closer to home. The Newborn Transport team consists of Maternal Child, Respiratory, EMS and Business Development. Maternal Child is also working on the NICU Verification Program through the American Academy of Pediatrics. The program outlines objectives and reviews resources to make sure we are maintaining quality of care.

Home Health & Hospice: Shout out to these departments, for the last 3 quarters have achieved their CAHPS Goal and the last two quarters have both been in 100% top box which puts them in the 99<sup>th</sup> percentile rating Nationally.

CMO Report –Regarding Leadership Initiatives. We have gotten passed the how and moved onto the what and implementation. Dr. Houk is meeting monthly with employed medical directors; hoping as it continues, we'll have a good dialogue regarding their voices and concerns.

Med staff services—meeting with UCHHealth's CMO's regarding credentialing around the areas; the back side of how we flow that through the process and delineate that.

Quality-- this month a new system to report incidents was implemented; automated peer evaluations to get quicker and better feedback from providers.

Recruitment and Retention- we had a game plan last month and executing—took a hit this month with losing key member of the recruitment team. Working through filling Amanda's various

#### CEO Report—

A lot is going on throughout the organization. CEO Shahan echos the Board's sentiment regarding the Administrative Team. We have a great team going in the right direction and CEO Shahan appreciates their help and he wants to recognize the staff throughout the organization. Compared to two years ago there has been a major culture change; staff showing up to paint; staff picking up extra duties; staff being a part of the change to crawl out of the financial hole. Elections are not a fun time for our employees. They are paying attention and hearing things being said. CEO Shahan would not be part of an organization that does not provide extraordinary care to our patients and that's what our staff does every day. CEO Shahan would remind the board politely that staff hears what is said—good and bad. CEO Shahan appreciates that staff will call and chat with him and that shows a level of trust that has been built inside the organization and the level of trust CEO Shahan has between himself and the Board. CEO Shahan appreciates all our staff and what they do on behalf of our community.

WREMS are going on as planned; the minutes and stats are included in the Consent Agenda.

Discussion Regarding the CEO Bonus; there is no legal date; it is contractual; changing the metrics caused data to come in slower.

Treasurer Hite: Kudos to everyone who was at the sports and wellness expo, there was a great community presence and Treasurer Hite appreciates the organization showing a strong community presence.

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

**EXECUTIVE SESSION**

**TRUSTEE HOSKINSON MOVED TO ENTER INTO EXECUTIVE SESSION AT 6:42 PM TO DISCUSS MEDICAL STAFF MATTERS PURSUANT TO W.S. 16-4-405 (a)(ix) and W.S. 35-2-618, 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.**

**TRUSTEES EXITED EXECUTIVE SESSION AT 9:10 P.M.**

**TRUSTEE HARTSAW MOVED TO APPROVE THE MED STAFF APPOINTMENTS AS PRESENTED. TRUSTEE HOSKINSON SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.**

The meeting adjourned at 9:12 P.M. The next meeting is scheduled for October 24, 2024

**Bill Rice**

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Bill Rice, Secretary

  
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Jamie Kay, Recorder