

# GOVERNING BOARD REGULAR MEETING

The Campbell County Hospital District Board of Trustees met in the Hospital's Fifth Floor Classrooms on Thursday, February 28, 2019.

# Members present:

Dr. Ian Swift

Ms. Ronda Boller

Mr. Adrian Gerrits

Mr. Alan Stuber

Dr. Sara Hartsaw

Mr. Randy Hite

Ms. Lisa Harry

# Also present:

Mr. Andy Fitzgerald, Chief Executive Officer

Mr. Nicholas Stamato, Chief of Staff

Ms. Colleen Heeter, COO

Mr. Dalton Huber, CFO

Ms. Misty Robertson, CNO

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 George Keralis 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, Mr. Hite and Ms. Harry are present. Dr. Hartsaw will arrive later.

# Approval of Agenda

Dr. Swift requested to add committee reports following the Chairman's report.

Mr. Stuber moved, seconded by Mr. Gerrits, to add as a discussion item in reference to



# the 2<sup>nd</sup> floor room discussion that was discussed and voted on at the last Board meeting.

Dr. Swift suggested tabling the discussion until the retreat in order to spend more time on it and to enable Mr. Crichton to be prepared to offer more information. Mr. Gerrits stated that he would like a point of clarification of the motion that was approved.

Mr. Stuber amended his motion, seconded by Mr. Gerrits, to have a brief discussion, no greater than five minutes, on the 2<sup>nd</sup> floor topic. If further discussion is warranted, it will be made a retreat item. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Mr. Hite and Ms. Harry voted aye.

Dr. Swift will add 2<sup>nd</sup> floor clarification for brief discussion to #1, Discussion Items.

Mr. Gerrits requested to add a brief discussion on population health to Discussion Items. Population Health will be added to Discussion Item #4.

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

# Consent Agenda

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

# Approval of Minutes

Minutes from January 24, 2019 Board meeting (copy appended to minutes).

# Administrative Policy Review

Four Administrative policies, <u>Control of Records</u>, <u>Injuries in Public Areas</u>, <u>Nondiscrimination</u>, and <u>Observation Status</u> (copies appended to minutes). **No motion required.** 

# Administrative Policy Approval

One Administrative policy, <u>Expenditure Control</u> (copy appended to minutes). **No motion required.** 

#### Finance Meeting

Items requiring Board Action from the February 25, 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 Ms. Harry to approve the Consent Agenda as presented. Dr. Swift, Mr. Stuber, Mr. Gerrits, Mr. Hite and Ms. Harry voted aye. Motion carried.

# **RECOGNITION ITEMS**

Employee Recognition

Tonya Carlson

Legacy Living and Rehabilitation



Alice Rambo Sondra Dabney Cynthia Laakso CCMG WIC
Legacy Living and Rehabilitation
ICU

#### Department

**Emergency Preparedness Committee** 

# **Director Recognition**

# Colleen Heeter, Chief Operating Officer

Colleen pursued her Nursing degree after growing up with a dedicated and inspiring Grandfather--a general surgeon who also made house calls. She cannot remember a time when her family was not discussing something healthcare related. With a family full of relatives in the medical field, it was hard to avoid some type of medical conversation happening at the dinner table at family gatherings (her husband Joe still complains about the gross topics discussed while eating). Colleen's father died at a young age of 34 of pancreatic cancer, which also inspired her love of healing and healthcare.

Colleen graduated from Creighton University with her Bachelor of Science in Nursing. She later pursued her Master's in Business Administration so she could augment the administrative and financial side of the healthcare field she loved.

Colleen is inspired by the quote from Albert Pike that she knows also inspired her Grandfather: "What you do for ourselves dies with us. What we do for others and the world remains and is immortal."

She strives daily to emulate this quote and make a difference in Healthcare. While her love of Surgery is evident, Colleen began her career in Oncology and ICU. She also spent many years augmenting her career with Home Health visits because she enjoyed that aspect of nursing as a kid with her Grandfather. The majority of Colleen's career has been in the denovo development and management of surgery centers and surgical community hospitals.

Colleen married her high school sweetheart, Joe, and has two children, Madeline (22) and Jake (20). She was born in Davenport, Iowa but has lived her entire life in Overland Park, Kansas. Colleen enjoys traveling, golf, sports (especially the Kansas teams), and spending time with her children and extended family.

Colleen and her husband Joe are excited to join the Gillette community and Colleen is energized by the opportunities at Campbell County Health.

# **PUBLIC QUESTIONS OR COMMENTS**

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

# **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:

Courtesy - Telemedicine

Department of Medicine

David B. Wheeler, M.D. Neurology

Limited Health Care Practitioner (Dependent)

Department of Medicine

Candi J. Hallermann, APRN Internal Medicine / Ambulatory

Departments of Medicine AND Surgery

**Jason E. Higgs, PA-C** Family Medicine / Ambulatory and

**Reappointments** 

Active:

Department of Medicine

**Kelly McMillin, M.D.** Family Medicine

Department of Surgery

Theodore Lawson, M.D. Emergency Medicine

Department of Maternal Child

Michael Jones, M.D.

OB / GYN
Hollie Stewart, M.D.

Pediatrics

Departments of Medicine AND Surgery

Romer Mosquera, M.D. Neurology / Pain Medicine

Departments of Surgery and Powder River Surgery Center

**John Mansell, M.D.** Anesthesiology / Pain Medicine

Courtesy:

Department of Maternal Child

**Kyle Kusek, M.D.** Pediatric Gastroenterology

Limited Health Care Practitioner – Dependent

Department of Medicine

**Julie Jones, PA-C** Family Medicine

Active:

Department of Medicine

Vashu Thakur, M.D. Internal Medicine

Limited Health Care Practitioner – Dependent

Department of Medicine

Jennifer Frary, PA-C Family Medicine Sarah Smith, APRN Psychiatry



Active:

Department of Surgery

Scott Diering, M.D. Emergency Medicine

Departments of Medicine AND Powder River Surgery Center

**Jennifer Thomas, M.D.** Family Medicine

Departments of Surgery AND Powder River Surgery Center

Erik Johnsrud, M.D. Anesthesiology

Active:

Department of Surgery

Attila Barabas, M.D. Urology

Departments of Surgery AND Powder River Surgery

Thomas Davis, M.D. Otolaryngology

Active:

Department of Surgery

Jonathan Hayden, M.D. Emergency Medicine Mark Kellam, M.D. Emergency Medicine

Alan Mitchell, M.D. Radiology

Active:

Department of Medicine

Laine Russell, D.O. Family Medicine

Department of Surgery

**John Gall, M.D.** Emergency Medicine

Limited Health Care Practitioner:

Department of Medicine

Amy Hawk, APRN Internal Medicine

Active:

Department of Medicine

Erica Rinker, M.D. Family Medicine

Limited Health Care Practitioner (Dependent):

Department of Medicine

**Lynn Perlenfein, PA-C**Cardiology / Family Medicine

30 DAY EXTENSION REQUESTS Applications Not Received AND/OR Complete

Erin Clark, PA-C Mary Maymana, M.D.
Alexandru David, M.D.
Brenda Engle, APRN David Fall, M.D.
Landi Lowell, M.D.

Kirtikumar Patel, M.D. Thomas Repas, D.O. Philip McMahill, M.D.



James Naramore, M.D. Michel Skaf, M.D. Ian Swift, M.D. Timothy Bohlender, M.D. Suzanne Harris, M.D. Nathan Simpson, M.D.

#### **MEDICAL STAFF NOT RENEWING PRIVILEGES:**

Harshvardhan Chaobal, D.O. Current privileges expire February 28l, 2019 Chester (Chet) Rall, APRN Current privileges expire June 30, 2019

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

# **DISCUSSION ITEMS**

2<sup>nd</sup> Floor

Mr. Stuber asked for a clarification on what the recommendation was and the motion that was made at the January 24<sup>th</sup> Board meeting regarding the 2<sup>nd</sup> floor project. His understanding from the presentation was not a request for final approval, but an approval to go forward with bids and permits. Mr. Gerrits read the motion from the January 24, 2019 minutes "Dr. Hartsaw moved, seconded by Ms. Harry, to authorize administration to go forward with the construction of seven additional ICU rooms in the second floor project, with funds totaling \$2,964,444 to be allocated from the FY 2019-2020 fiscal year budget. Dr. Swift, Dr. Hartsaw and Ms. Harry voted aye. Mr. Stuber and Mr. Gerrits opposed." Dr. Swift reminded Board members that there can be a lot of discussion at a meeting, and the motion may not necessarily reflect the discussion. A motion may be re-read at the time if there are any questions. He added that the additional funds allocated for the project will be voted upon in July as part of the 2019/20 budget.

# **Board Webpage**

Ms. Boller requested that the Board information on the Board section of the CCH website include committee membership and list how the Board member votes on an issue. Ms. Karen Clarke reviewed the Board section on the CCH website and suggested including the Board member bio with their picture. She also demonstrated how to view previous Board minutes. Community Relations will work with Board members to update the Board page.

# **Board Rounding**

Ms. Boller reviewed information she has gathered over the last few months in regards to Board rounding. She met with Mr. Fitzgerald to review rounding guidelines and create a rounding script. Ms. Boller provided the Board members with a letter from James Orlikoff including his recommendations, Rounding Guidelines, a Rounding Script and sample questions from Sage West. A rounding schedule, reporting process and other details must still be worked out before proceeding. Mr. Hite asked what the Board hoped to accomplish from rounding on employees. Ms. Boller stated that rounding would help the Board learn about CCH services and support employees. Mr. Hite requested that a member of the Bylaws Committee be included in any additional discussions. Mr. Hite recommended that employees be asked their opinion on rounding in a survey to determine whether they would support rounding by the Board. A meeting will be scheduled with Mr. Lubnau to review CCH Bylaws and policies before engaging in rounding.



#### Population Health

Mr. Gerrits provided information on population health that he gathered from the Adverse Childhood Event sponsored by Campbell County that he attended today. He shared that a group in Vermont has identified the frequent flyers in their ER for non-emergent events. They have put a social worker in the ER 24 hours a day to help the patient access services in the community. People looking for help end up in the ER. Mr. Fitzgerald explained that true population health programs are reimbursable, but CCH currently operates only on a fee for service model. CCH would have to look at a partnership with the county, city and school district. Ms. Boller suggested using the community behavioral health committee to discuss the idea.

# **INFORMATIONAL ITEMS**

# Chairman's Report

Dr. Swift reported that he attended, along with several trustees and Administrators, the AHA Rural Healthcare Conference in Phoenix, AZ. Highlights from the conference are as follows:

- Governance models for Boards presented by Jamie Orlikoff. Governance is executive guidance. Mr. Orlikoff gave some historical facts on hospital boards:
  - ➤ The first hospital board that Mr. Orlikoff is aware of was formed in 1752 by Ben Franklin in Philadelphia to fund the hospital system. Things did not change much from 1752 to 1980. Boards were basically fundraising rather than offering any guidance, but in the 1980's boards started to evolve and took on more responsibilities. By 1990, the healthcare system became more complex. Payer structure and payer systems changed. Alignment between hospitals and hospital physicians changed. There were a tremendous amount of mergers and large healthcare systems developed. Boards became more important and best practices were developed.
- ➤ Boards should be practicing at a strategic level. Figuring out what the problems are that need to be solved and exploring the root causes by looking in at the grassroots level.

Dr. Swift added that medicine is changing and if CCH does not change, they could be left behind.

# Committee Reports

# Finance Committee

Mr. Gerrits reported that the Finance Committee is making progress on revenue cycle improvement, and AR days are coming down. IT continues to be a huge capital investment.

# Legislative Session

Ms. Boller explained that about a year she started exploring a way to have a special district for nursing homes. She worked with Representative Barlow who presented House Bill 181 in the recent legislative session. The bill passed in the Corporations Committee, went through the House, and passed. It then went to the Senate Labor Committee and passed, but failed in general committee. Mr. Lubnau stated that bills with any kind of tax or appropriation did not make it through this time. The issue will be studied in interim committee meetings for potential future consideration.

# Chief of Staff Report

Dr. Stamato reported that work continues on updating the medical staff demand tool. A



consultant has been hired to help CCH understand what recruitment needs are in the community. An electronic survey was sent to some members of the medical staff. A paper survey was sent to other medical staff that expressed a desire to complete the survey. The results will be presented at Physician Recruitment and Retention committee. Mr. Fitzgerald added that a population analysis will be done as well. Dr. Stamato also reported that members of the Credentials Committee did an in-depth chart review of medical staff filing for reappointment. This went very well for the first run. The medical staff Peer Review Committee is beginning to look at a larger number of cases that affect a greater number of patients. They will work with providers to set benchmarks and how to obtain those.

#### CEO Report

Mr. Fitzgerald provided an overview of the CCH Baldrige journey. Baldrige was developed by Malcolm Baldrige, the 26<sup>th</sup> Secretary of Commerce, in the mid 1980's when U.S. leaders identified that companies in America needed to put a bigger emphasis on the quality of their products to compete in an ever-expanding global market. The Malcom Baldrige National Quality Award was established by U.S. Congress in 1987 to raise awareness of quality management and to recognized U.S. companies that have implemented successful quality management systems. Every organization has a variety of improvement efforts they are involved in. Baldrige is the overall "Framework" to pull all those efforts into one cohesive approach to superior performance. Rocky Mountain Performance Excellence (RMPEx) is a partner program with Baldrige serving four Western states (Colorado, Montana, Wyoming and Nebraska). Once an organization receives the RMPEx Peak Award the organization is then eligible to apply for the National Baldrige Award. CCMH applied for and received the Foothills (level 2) Rocky Mountain Performance Excellence Award in 2017. In 2018, CCMH applied for the Peak (level 4) Performance award, but did not achieve it. CCMH will apply for the 3<sup>rd</sup> level in August. The CCH Baldrige committee is currently preparing to address issues in the report and prepare a new application. The Legacy is presently evaluating whether to begin their journey at either the High Plains (1) or the Foothills (2) level.

# **Events in February**

- February 11 Cardiac Rehab Reunion for former patients from 5:30 7 p.m. at the Gillette College Tech Center.
- February 11-15 Classrooms 1 & 2 are closed to install new AV equipment and update the flooring and interior.
- February 26 Spring Leadership Development Institute (LDI) for directors and managers. Five CCH Trustees attended the Rural Healthcare Conference and discussed a variety of topics.

# **Upcoming events in March**

- March 1-22 Employee Engagement Survey is open for employees. This survey is conducted every two years.
- March 6 Becoming a Love and Logic Parent. A six-week program teaching practical parenting skills that can be used immediately. \$50 one-time fee per family. Childcare available.
- March 28-29 Board of Trustee's Spring Retreat in Deadwood, SD.
- March 29 Campbell County Healthcare Foundation's Chair Affair, 6 pm, CAM-PLEX Energy Hall. Unique, upcycled furniture pieces. Live and silent auction items. Tickets are \$50 pp and available at the Heptner Cancer Center.
- March 30 Doctor's Day. A national recognition day for physicians.



# Strategic Focus

# **People**

# Leadership Development Institute (LDI)

Ms. Natalie Tucker reported that a LDI Planning Team meets monthly to plan presentation topics. An annual survey is completed by Supervisors and Department Managers/Directors to assess training needs. Three LDI session have been completed in FY19 also with two monthly leadership hours to address items in a more condensed format. The evaluation score goal is 4.65 and the current score from the three LDI's held this year is 4.71. Supervisor LDI's are held two times each year as well.

#### <u>Care</u>

# Readmission

Ms. Sue Ullrich reported that the readmssions team meets monthly with Mountain Pacific Quality Health Foundation. Members of the team include Quality staff, Care Managers, ER, EMS, Home Health agencies, LTC and Chronic Care Management. The team reviews information by discharged location, procedure, DRG, length of stay, discharge day of week and length of stay. CCH has seen a downward trend for the first quarter of 2013 to the second quarter of 2018 on 30 day readmissions for patients over the age of 64. The Legacy is currently at .04 per 100 patient days compared to a .94 for all nursing homes in the collaborative.

#### Service

# **ED Patient Experience**

Ms. Robertson explained that the Centers for Medicare and Medicaid Services (CMS) is currently testing "ED CAHPS". CMS states that ED CAHPS are "under development" and there is no national release date. CCH ED scores are doing well, but not exceptional. Ms. Robertson is working with the ED charter team to focus on the scores and standardized approaches.

# Clinic Patient Experience

Mr. Stangl reported on the improved scores in the CCMG clinics. They are meeting 5 out of the 6 care domains over the 50<sup>th</sup> percentile on the overall clinic survey.

# **Business**

Mr. Huber provided the following financial report:

# January 2019:

- Revenues were short of budget.
- Operating expenses were over budget.
- Operating income is (2.4M).
- The month from operations was short of budget and the bottom line was a loss of \$1M.
- EBIDA is at 4% with a budget of 12%.

# YTD:

- Ahead of budget.
- Revenues are up from last year but under budget by \$1M.
- Operating expenses are under budget.
- Operating loss is (\$6.6M) compared to a budget of (\$6.9M).
- Doing well with investments.
- Tax levy is up from budget.
- Bottom line of \$1.8M over budget
- EBIDA Margin is at 13.61% compared to a budget of 12.07%



Accounts Receivable Day is down one day to 85 Days Cash on Hand increased one day to 170 Cash increased \$1M

# **EXECUTIVE SESSION**

The regular meeting recessed into Executive Session at 7:33 p.m.

The regular meeting reconvened at 10:09 p.m.

<u>ADJOURNMENT</u>
There being no further business, the meeting adjourned at 10:09 p.m.

The next regularly Deadwood	scheduled	Board	meeting	is	March	28,	2019	at	10:00	a.m.	at the	Lodg	e at
Alan Stuber, Secre	tary												
Ellen Rehard, Reco	order												