

Campbell County Health Board of Trustees

Strategic Planning Session – Deadwood Mountain Grand March 30-31, 2023 8:00 AM

Members present:

Alan Stuber, Chairman
Dr. Sara Hartsaw, Vice Chair
Tom Murphy, Secretary
Randy Hite, Treasurer

Dr. John Mansell, Trustee

Bill Rice, Trustee

Dr. Mark Hoskinson, Trustee

Also present:

Matt Shahan, CEO
Jerry Klein, COO
Dr. Dr. Neuwirth, COS
Dr. Attila Barabas, CMO
Adam Popp, CFO
Natalie Tucker, CNO
Kevin Unger, UCH
Grace Taylor, UCH
Diane Jackson, UCH
Matt Sabus, Information Tec

Alison Gee, CCH Attorney
Dawn Hodges, VP of HR
Kate Craig, Legacy
Brandi Miller, Executive Assistant
Jennifer Ford, Marketing
Jake Goodrick, GNR (Virtually)

Dr. Jonathan Hayden Nate White, Newpoint Brett Norrell, Newpoint

Matt Sabus, Information Technology VP

<u>Call to Order</u> – Chair Stuber called the meeting to order at 8:00 AM.

<u>Mission Statement</u> – Trustee Murphy read Campbell County Health's Mission Statement. <u>Vision Statement</u> – Chair Stuber read Campbell County Health's Vision Statement. <u>Roll Call</u> - Brandi Miller called the roll, all members present.

Approval of Agenda

TRUSTEE HARTSAW MADE A MOTION TO APPROVE THE AGENDA AS PRESENTED. TRUSTEE HITE SECONDED THE MOTION, MOTION CARRIED UNANIMOUSLY.

Strategic Planning Session Overview - Intro

Matt Shahan welcomed and introduced Adam Popp, CFO, and Dawn Hodges, VP of HR. Matt reported that two LDI meetings were held to gather input from organization leaders on items that could fall under the Strategic Plan. After all input was received the leaders were given an opportunity to rank the importance of each topic. The top items will be discussed over the next two days. After gathering input from the Board a 1-year Strategic Plan will be created and presented for review.

Public Comment

Chair Stuber opened the floor for public comment. No comments were made.

CHNA Updates

The recent Community Health Needs Assessment identified the following as top priorities:

- Behavioral Health
- Access to Care
- Behavioral Health Suicide Prevention
- Chronic Conditions

A community behavioral health needs steering committee that includes multiple entities providing a



variety of services to the community has been established and meet monthly. Dr. Mansell chairs the steering committee. The committee is focused on ensuring the community has access and knowledge of the available resources.

Mental Health needs across the nation continue to rise. Recruitment of counselors and psychiatrists is a priority for CCH. Currently we have three psychiatrists committed and others scheduled for site visits.

The Community EMS program continues to grow. The program allows patients who have recently had a procedure completed to be checked on by EMS without leaving their home. It is projected that the program will improve readmission rates for many of our higher risk patients.

In response to the Community Health Needs Assessment a variety of community health activities have taken place or been scheduled including:

- · QPR trainings (Question, Persuade, Refer) events.
- CME Continuing Medical Education
- Community EMS
- Population Health Events
- · Increased Behavioral Health Services
- · Recruiting Efforts Increased

Strategic Planning Discussion

Matt Shahan provided a recap from last year's Board priority list. Discussion about completed and ongoing priorities include:

- Define and Initiate Business Development Strategy Business Development leader was hired and is building/strengthening relationships with companies and practices.
- Enhance Engagement with Community Event/program sponsorships and participation with community events.
- Identify Opportunities to Improve Transparency Throughout the Organization A
 communication plan was created and implemented to disperse information throughout the
 organization to ensure staff/providers hear important information concerning the organization
 before information is released publicly.
- Engage, Develop, Retain Employees Work continues.
- Develop and Implement Physician Relations Plan The CEO continues to meet with community providers.
- Implementation of Epic frequent meetings/trainings and collaboration with UCH's Epic implementation team.
- Improve OR Efficiencies and Operations The organization has worked with Surgical Directions and has implemented a Surgical Services Executive Committee that Dr. Hartsaw chairs. A credo has been created and shared with the surgery department.
- Develop and implement education plan for the Board of Trustees An education calendar has been shared on the Board portal. We will begin holding education sessions in May.

Matt Shahan shared input gathered from staff members during LDI sessions. The information gathered during the LDI sessions was compiled and organized by the four pillars, Care, People, Service and Business. Top issues discussed under each pillar included:

Care - Relentless Pursuit of Safety and Quality

- Patient and Provider frustrations with the patient portal
- Call Center
 - Patients hold time
 - Difficult for providers to reach other providers
 - CCH and UCH call centers will connect. UCH will assist with best practices.



- Patient advocates limited availability. Often when paying bills patients cannot meet face-to-face with someone to answer their questions.
- The Community EMS program is a positive for the community. There are currently 52 patients in the program.
- Decrease/eliminate adverse events (specimen labeling, fall rates, etc.)
- Staff wellness, including mental health
- Improve wayfinding for visitors. One of the LITE participants focused on wayfinding. Included in their project were kiosk and digital wayfinding platforms.
- Adding a roof to the parking garage to allow for additional parking during winter months.

People - Fairness and Dedication

- Create fairness, accountability, and consistency throughout the organization (standards of behavior)
- Build/maintain culture of empowerment through trust and accountability
- Advance Practice Providers to practice at highest level of skill
- Remove cultural barriers between medical staff and general staff
- Build a culture of support to increase participation and celebrate employees
- Decrease/remove bureaucracy
- Empower Staff, create an environment where it is safe to try new things
- Employee safety with violent patients

Service – Care and Compassion

- · Improve billing as part of the overall service
- Improve customer assistant/greeter service
- Recruit and retain quality people
- · Zero tolerance for people "punching holes in our ship"
- Refocus on our purpose and our why
- Marketing CCH as the only organization to provide a continuum of care
- Internal campaign to promote pride and ownership

PFM Asset Management Investment Presentation

PFM Asset Management Directors, Joan Evans and Brian Quinn joined virtually to present investment strategies. PFM manages and distributes funds on behalf of the Wyoming Government Investment Fund (WGIF). WGIF is a local government investment fund that complies with WY Statutes for public investing. It is 100% liquid and has a variable rate. CCH made an initial investment of \$40M with a current yield of 4.64%. In the past 60 days CCH has earned over \$700,000 in interest. Various investment strategies were discussed, including investment durations (how long the money is tied up for) and gross yields. PFM charges a fee based on the assets under their management, not per trade. A CCH investment recommendation will be presented at the April Board meeting.

Financial Presentation

February: Charity \$152,941.10; Bad Debt \$1,604,943.29; Grand Total \$1,757,884.39 Gross Revenues for January are \$814K higher than budget. Inpatient gross revenue is over budget by \$177K, Cath Lab under by \$42K, BHS over by \$102K, and Legacy over by \$154K. Year to date we are \$7.7M higher to budget and \$11.3M higher than last YTD actual. Tax levy accruals is higher to budget by \$864K. YTD we are higher to budget by \$1.4M and \$3.4M higher than last YTD actual. Cash decreased by \$3M in February. Days cash on hand decreased by 11 days to 135 days. Accounts Receivable increased by 1 to 61 and Accounts Payable decreased by \$1.2M.

The Finance Committee requested additional information be provided on the Slide Mate and Slide Printer prior to approval.



CCH needs to be diligent when reviewing capital requests that were not previously approved in the capital budget. When non-budgeted capital requests are presented to the Finance Committee and Board information on where the funding will come from needs to be included for example, if there was savings from a previous budgeted purchase. The running total by department for approved capital expenses should be included with requests. The Finance Committee asked Administration to include ROI and efficiencies be included on all capital requests and that Directors/Managers present their request to the Finance Committee.

Newpoint Presentation

Newpoint representatives, Nate White and Brett Norrell, updated the Board on Newpoint's engagement with CCH. The purpose of the engagement is to complete a thorough review and analysis of CCH, recommending financial and operational improvements opportunities. Their work includes three phases.

Phase 1: Assessments & Phase 2 Recommendations

- Market Assessment
- Revenue Performance Assessment
- Leadership Conversations
- Financial Assessment and Benchmarking
- Report on Revenue Improvement

Phase 2 (Current): Priority Initiatives

- All Payer Log System
- Charge Master Review and Market Pricing
- Commercial Payer Contract Review
- Revenue Write Off Review (Financial Statement and Process Improvement)

Phase 3: Restructuring Opportunities

- Explore Hospital-Based Clinics and Rural Health Clinics
- Evaluate Inpatient Geriatric Psychiatric Unit
- Improve Utilization of Long-Term Care
- · Clinical Staffing and Productivity

Outcomes of the engagement include:

- Update and optimize CCH's revenue cycle processes (chargemaster and pricing) to ensure CCH is fairly and accurately paid for services provided.
- Implement financial processes and policies aligned with industry standard and auditor recommendations.
- Review payer contracts and identify rates and terms improvement for negotiation.

Specific charge and department data discussions continued in executive session.

EXECUTIVE SESSION

TRUSTEE HARTSAW MADE A MOTION TO ENTER INTO EXECUTIVE SESSION AT 2:11 PM TO DISCUSS MATTERS CONCERNING LITIGATION TO WHICH THE GOVERNING BODY IS A PARTY OR PROPOSED LITIGATION TO WHICH THE GOVERNING BODY MAY BE A PARTY; TO CONSIDER THE SELECTION OF A SITE OR THE PURCHASE OF REAL ESTATE WHEN THE PUBLICITY REGARDING THE CONSIDERATION WOULD CAUSE A LIKELIHOOD OF AN INCREASE IN PRICE; TO CONSIDER OR RECEIVE ANY INFORMATION CLASSIFIED AS CONFIDENTIAL BY LAW; TO CONSIDER ACCEPTING OR TENDERING OFFERS CONCERNING WAGES, SALARIES, BENEFITS AND TERMS OF EMPLOYMENT DURING ALL NEGOTIATIONS. TRUSTEE HOSKINSON SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

TRUSTEE HARTSAW MADE A MOTION TO COME OUT OF EXECUTIVE SESSION AT 5:16 PM. TRUSTEE MURPHY SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.



The regular meeting reconvened at 5:16 PM. Chair Stuber recessed the meeting until 8:00 AM, Friday, March 31, 2023.

March 31, 2023

Chair Stuber called the meeting to order at 8:00 AM.

Consent Agenda

TRUSTEE HOSKINSON MADE A MOTION TO PULL THE CAPITAL REQUESTS FROM THE CONSENT AGENDA FOR FURTHER DISCUSSION. TRUSTEE MANSELL SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

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

<u>Approval of Minutes</u> – 2/23/23

<u>Finance Meeting Minutes</u> – 3/27/23

<u>FY22 Audit</u>

Board Policy – Board Scholarship Committee

February 2023 Financials

Medical Staff Appointments

Capital Request Discussion

Additional information for the Lab's Slide Mate and Slide Printer capital request was provided to the Board earlier in the meeting. The Board was advised that the Surgery Department had savings in their capital budget to cover the cost of this request.

TRUSTEE RICE MADE A MOTION TO APPROVE THE EPIC EQUIPMENT, MP30 AND MP50 MONITORS, SLIDE MATE AND SLIDE PRINTER, AND ULTRASONIC SINK CAPITAL REQUESTS AS PRESENTED. TRUSTEE HARTSAW SECONDED THE MOTION. MOTION CARRIED.

CCH Board of Trustees Scholarship Recipients Approval and Report Out

Trustee Mansell reported that 61 applications were received. The committee reviewed all applications and selected key performance indicators to narrow the field. All applications were impressive. Many applicants are graduating with their Associates degree, CNA license, Phlebotomist certification, etc. The committee noted that the vast majority (57) applicants were female. At this time, we are not formally announcing the winners to allow them to be announced at their school's scholarship night. The committee would like to host a dinner for the winners and their families to congratulate them on winning the scholarship. Letters will be sent to the applicants that weren't selected for the scholarship thanking them for applying and letting them know about other opportunities CCH provides such as student intern positions, volunteering, certification classes, etc.

TRUSTEE HOSKINSON MADE A MOTION TO APPROVE THE FOUR SCHOLARSHIP WINNERS. TRUSTEE HARTSAW SECONDED THE MOTION. MOTION CARRIED.

WREMS Update

Wyoming Regional EMS meetings are held the last Friday of the month. Operations are going well. The WREMS Board is comprised of six Board members, three from Sheridan County Memorial Hospital and three from Campbell County Health. WREMS is on target to make a profit the first year in service. Other Sheridan County agencies have given very positive feedback on CCH's involvement. CCH has gotten inquiries from other counties about providing services to their communities. In the WREMS agreement we acquired six vehicles. Out of the six vehicles one ambulance was salvaged. WREMS now has a fleet of six. Proposed budgets will be reviewed at their April meeting. Trustee Murphy will report to the Board after budgets are discussed.



Business Development Lead, Lisa Jackson-Eldridge, is working with the Governor's office to schedule an open house in June that the Governor can attend.

Grant Process & Updates

Grant writer, Yvette Land, has worked to secure and fund \$186,343.00 year to date. Total grant applications to date are over \$12M. The grant process often requires items specified in the grant to be purchased and then the grant will reimburse the funds. Current policy requires these purchases to be approved through the Finance Committee prior to purchase because the items are over the \$30,000 threshold. Jennifer Ford and Yvette are working with Legal to create a grant policy to establish a process. The Finance Committee and CFO will review the policy.

Grant Writers Mission: To secure funding to enhance the budget for projects, programs and initiatives; or to cover expenses that cannot be covered in the budget or the cost cannot be recouped from revenues.

Human Resources Updates

Dawn Hodges, VP of HR, updated the Board on Human Resources recruiting efforts. There are currently 126 open positions (93 CCH; 33 Legacy). 107 positions have been filled since January 1, 2023. Recruiting statistics since hiring an HR Recruiter were shared:

	1/1/23 - 3/24/23	1/1/22 - 3/24/22
Positions Filled	107	73
Offers Extended	112	79
Average Time to Fill	15.58 days	87.8 days
Positions filled >60 Days	67	40
Applications Received	1128	1047

HR has implemented the use of various innovative tactics and technology to assist with recruitment efforts. CCH now utilizes Handshake, QR Codes, 12twenty, Indeed, and Geofencing. Work continues to reduce the overall time to fill positions, improve the candidate experience and track "silver medal" candidates (qualified candidates that were not offered the position are asked if they are interested in similar posted positions).

UCHealth Updates

Kevin Unger, President and CEO UCHealth Northern Colorado, updated the Board on national trends related to the healthcare industry. Approximately 50% of hospitals across the nation finished 2022 with a negative financial margin. Nearly all systems are seeing rising costs, labor shortages, and an uptick an increase in workplace violence. Mental Health issues are on the rise across the nation.

The affiliation between UCH and CCH has been beneficial in many aspects. CCH appreciates the ability to reach out for guidance and best practices. CCH Board members continue to hear the community's confusion on the affiliation. Matt Shahan and Jennifer Ford will craft a statement recapping the relationship in hopes of clarifying any confusion.

Strategic Plan Discussion

The Board provided input on Strategic Planning and organizational needs. The following information will be compiled to create a Strategic Plan with measurable goals. This Strategic Plan will be for 1 year with an extended plan to be created in the Fall.

Discussion points:

Care Pillar

- Mental Health (Community & Staff)
- Cardiology Services



People Pillar

- Staffing Shortages
- Employee Retention
 - o Leadership development within the organization
 - o Employee development
 - o Career ladder within the organization
 - o Improved staff wellness plan
- Mental Health (Community & Staff)
- Recruiting for the needs of the community

Service Pillar

- Leverage affiliation to learn what works within their organization to create the desired culture
- Service throughout the life-cycle of our patients
- Engage and strengthen relationship with community providers
- Access to care

Business Pillar

- · Investment portfolio/strategy
- Billing improvements
- Revenue Cycle improvements
- · Financial updates to our staff and community
- Evaluate efficiencies of management groups and how impactful that relationship is to the organization (Vivage, Unidine)

Once compiled Matt will share with staff members and the Board. The Strategic Plan will be presented at the April Board meeting for review and approval.

Adjourn

Brandi Miller, Recorder

TRUSTEE HOSKINSON MADE A MOTION TO ADJOURN THE MEETING AT 1:09 PM. TRUSTEE HARTSAW SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

The next CCH Board meeting is scheduled for April 27, 2023.

Tom Murphy, Secretary