



**GOVERNING BOARD
REGULAR MEETING**

The Campbell County Hospital District Board of Trustees met in the Hospital's Fifth Floor Classrooms on Thursday, June 22, 2017.

Members present:

Mr. Harvey Jackson
Ms. Ronda Boller
Dr. Ian Swift
Mr. Mr. Dunlap
Dr. Sara Hartsaw
Mr. Randy Hite

Members excused:

Mr. Mike Dugan

Also present:

Mr. Andy Fitzgerald, Chief Executive Officer
Dr. Jennifer Thomas, Chief of Staff
Mr. Dalton Huber, CFO
Ms. Deb Tonn, Vice President of Patient Care
Mr. John Fitch, Interim Vice President of Human Resources
Mr. Bill Stangl, Vice President of Physician Services
Mr. Steve Crichton, Vice President of Plant and Facilities
Ms. Jonni Belden, Vice President of Long Term Care
Ms. Ellen Rehard, Recorder
Public

OPENING

Call to Order

Mr. Jackson, Chairman, called the meeting to order at 5:00 p.m.

Mission Statement

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

Vision Statement

Mr. Dunlap 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. Mr. Jackson, Ms. Boller, Dr. Swift, Mr. Dunlap, Dr. Hartsaw and Mr. Hite are present. Mr. Dugan is excused.

Approval of Agenda

Dr. Hartsaw moved, seconded by Mr. Dunlap to approve the agenda. Mr. Jackson, Ms. Boller, Dr. Swift, Mr. Dunlap, 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 May 25, 2017, Board meeting (copy appended to minutes).

Administrative Policy Review

Five Administrative policies, Corporate Compliance Program and Education, Electric/Hybrid Vehicle Charging, Law Enforcement Patient Investigation, Medical Records Storage and Security and Release of Information/News Media (copy appended to minutes). **No motion required.**

Administrative Policy Approval

One Administrative policy, Medical Staff Retention-Adherence to Stark and OIG Laws (copy appended to minutes). **No motion required.**

Finance Meeting

Items requiring Board Action from the June 19, 2017 Finance Committee Meeting (copy appended to minutes).

Committee Reports

Campbell County Healthcare Foundation
Physician Recruitment and Retention Committee
Quality Committee
Facilities Planning Committee

Mr. Hite moved, seconded by Dr. Hartsaw, to approve the consent agenda as presented. Mr. Jackson, Ms. Boller, Dr. Swift, Mr. Dunlap, Dr. Hartsaw and Mr. Hite voted aye. Motion carried.

RECOGNITION ITEMS

Provider of Month

June – Angela Biggs, M.D.

Dr. Biggs joined the medical staff in 2005 and is Board Certified in Obstetrics and Gynecology. A native of Worland, Wyoming, Dr. Biggs attended Creighton University School of Medicine in Omaha and completed a residency at Michigan State Medical Education and Research Center in Grand Rapids, Michigan. For Dr. Biggs, obstetrics and gynecology provides a terrific balance of her favorite parts of medicine — she is able to build long term relationships with patients while still having the opportunity to provide surgical solutions. She also says she loves birthday parties!

Dr. Biggs says she is a Wyoming girl at heart, and never thought about living anywhere else. She met her husband, Dr. Rodney Biggs, at the University of Wyoming. They completed their medical education and training together. They chose to return to Wyoming and Gillette specifically, because of the people.

In addition to the practice of medicine, giving back is also important to Dr. Biggs. She has served on numerous medical staff committees, and currently serves on the faculty of the



University of Washington for the WWAMI clerkship program. She is the medical director of the Women's Resource Center for crisis pregnancies. She believes in making the effort to create solutions if you can.

The Biggs' have four children, Zoe 17; Sophia, 13; Michael, 11 and John, 6. All the kids are involved in community activities ranging from the arts to sports. In addition to following her children's activities, she and the family love to go to the mountains to fish, hike, 4-wheel and snowmobile.

Employee Recognition

Mr. Fitzgerald recognized employees that have been selected for *Thanks for working here Thursday*:

Barry Shannon	EMS
Melissa Osborn	Pathology
Laura Schilling	Nutrition
Roy Buchanan	Rehab

Department Discoveries

Biomed June

Legend

Gemma Monthey

Gemma's nomination for a CCH Legend reflects her unwavering kindness and compassion for both the patients and families she serves, as well as her care and loyalty to her co-workers. The adjectives used in her nomination form are truly the epitome of a CCH LEGEND... "humble, hardworking, caring, honest, approachable, and dedicated."

During Gemma's 16 years of employment at CCH, she has touched many lives, but one stands out...that of a man diagnosed with leukemia. He received care at CCH over the years for his cancer, and complications from the cancer. When he found out he had run out of treatment options, he wanted to tell his 2 "favorite nurses", and Gemma was one of them.

Gemma is constantly approaching leadership about ways to improve processes and care for patients at CCH. She is a great role model for new staff and her approach to others is humble, yet helps others stretch to meet the high standards of excellence we ask of staff.

We would love to clone Gemma...she is truly a CCH LEGEND. Congratulations, Gemma.

PUBLIC QUESTIONS OR COMMENTS

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

EDUCATION

Public Perception Survey

Karen Clarke from Community Relations and Jackie O'Hara from Jet Marketing gave a presentation on the Community Perception Survey that was conducted in March and April. An initial survey was conducted in 2014 and repeated in 2015 and again this spring. All surveys followed the same questions and were promoted in the same way. From 2014 to 2015 CCH saw a significant jump in public perception. The 2017 results showed a slight decrease in public



perception, a slight increase in overall satisfaction, increase in awareness of services and a slight decrease in people leaving town for healthcare services.

Between 2015 and 2017, awareness increased slightly for many services. Awareness raised the most for the following services:

- Oncology/Cancer Care Up 6% to 79%
- Cardiology Up 5% to 84%
- Maternal child Up 5% to 81%
(Nursery, L&D, neonatal ICU)
- Kid Clinic Up 5% to 67%

The trend of people leaving town decreased for the following specialty services:

- General Surgery Decreased from 30% to 15%
- Cardiology Services/surgeries Decreased from 15% to 12%
- Cancer/oncology Decreased from 11% to 9%
- High risk OB/GYN Decreased from 10% to 7%

There was a substantial increase in social media as a preferred method to receive communication about healthcare services. Direct mail, email and internet were rated at about the same level of preference as the previous survey. Recommendations include continuing to use patient and employee stories.

ACTION ITEMS

Medical Staff Appointments

Dr. Jennifer Thomas 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	
Stephen W. Houmes, MD	Emergency Medicine

Courtesy – Telemedicine:

Department of Medicine	
Hussam M. Elkambergy, MD	Internal Medicine / Critical Care

Reappointments:

Active:

Department of Medicine	
Travis Roberts, MD	Family Medicine
Billie Wilkerson, MD	Family Medicine

Limited Health Care Practitioner:

Department of Medicine	
Stefanie Garcia, PA-C	Family Medicine / Ambulatory
Chester (Chet) Rall, APRN	Family Medicine / Ambulatory

Department of Surgery	
Joseph Fischer, ID	Optometry
Crystal Skovly, PA-C	Orthopedics



Departments of Surgery **AND** Powder River Surgery
Daniel Allen, DPM Podiatry
Brian Austin, CRNA Anesthesia
Aaron Hall, CRNA Anesthesia
Amanda Phillips, CRNA Anesthesia

30-DAY EXTENSION REQUESTS

James LaManna, MD

MEDICAL STAFF RESIGNATIONS TO NOTE

Michael Vines, MD Psychiatry (Telemedicine)
 Jorge Mendoza, MD Radiology (Telemedicine)

Mr. Jackson, Ms. Boller, Dr. Swift, Mr. Dunlap, Dr. Hartsaw and Mr. Hite voted aye. Motion carried.

Legacy Living Cottonwood Remodel

Mr. Crichton submitted that Facilities Planning committee requests approval for installation of new doors and nursing station to expand the locked memory care unit to forty beds. The doors will be installed just beyond the elevators to create more security for dementia care residents. The project cost will be \$29,850 which includes the doors, a new nursing station, changes to security and fire alarm programming, and installation of additional badge access controls for the doors. Ms. Belden added dementia is becoming more and more of a problem and CCH would like to ensure that residents are safe. Nothing has changed in the area and residents will continue to have access to the courtyard.

Ms. Boller moved to approve the Legacy Living Cottonwood remodel. Mr. Jackson, Ms. Boller, Dr. Swift, Mr. Dunlap, Dr. Hartsaw and Mr. Hite voted aye. Motion carried.

Patient Room Remodel Mock-up Rooms

Mr. Crichton stated Facilities Planning committee requests approval to proceed with building two mock up rooms as part of the overall proposed budget for patient room remodeling. Facilities Planning committee recommends one LDRP room and one postpartum room to test the functionality of the design. The project cost is estimated at \$118,510 which will come from the existing project budget. Both rooms will be built in place and stay in place.

Dr. Hartsaw moved to approve the patient room remodel mock up rooms as presented. Mr. Jackson, Ms. Boller, Dr. Swift, Mr. Dunlap, Dr. Hartsaw and Mr. Hite voted aye. Motion carried.

DISCUSSION ITEMS

Electronic Board Book

Mr. Jackson opened discussion about incorporating an electronic Board book. The current technology the Board has been testing for the last few months has some technical challenges and the Board is not comfortable moving forward with the system. The Board will hold off on electronic books at this time.



INFORMATIONAL ITEMS

Chief of Staff Report

Dr. Thomas stated that during the last survey DNV pointed out a deficiency in some of the credentialing. Medical staff has created a simple policy that they are fine tuning to take care of those deficiencies.

CEO Report

Mr. Fitzgerald reported CCH plans to pursue the Baldrige quality award. The Baldrige award multi-year application process is extremely rigorous and competitive. The first step in the process is applying for the Rocky Mountain regional award. That application is due the end of August. The Baldrige Excellence Builder helps organizations assess strengths and opportunities for improvement. The award is given to businesses that demonstrate rigorous quality standards and is very difficult to achieve.

STRATEGIC FOCUS

People

Turnover

Mr. Fitch reported that turnover throughout the organization is at 17%. This rate is made up of turnover from the Legacy of 23.6% and all other areas at 15.7%. One hundred eighty one employees left CCH in FY17 compared to 166 in FY16.

Care

Venous Thromboembolism (VTE)

Ms. Ullrich explained venous thromboembolism, blood clots, is a concern for CCH because they delay healing and care, can cause pain, keep the patient in the hospital longer and if they migrate can cause serious outcomes. The VTE measurement on the Strategic Plan measures how well blood clots are prevented in the organization. CCH is consistently above 90%. Although this measure will not be included on the Strategic Plan in FY18, CCH continually measures. Preventative measures for VTE include ambulation, special support hose, sequential compression devices and medications.

Service

ED CAHPS

Ms. Tonn explained that ED CAHPS is a measurement exclusive to the ED. The Strategic Plan goal is to have 8 of the 17 domains above the 75th percentile. The current scores are 10 out of 17 above the 75th percentile. Patients expect competence, compassion, feeling valued and cared about and having their needs met. Leadership has worked extensively with the staff and they continue to strive for excellence.

Resident Family Satisfaction

Ms. Belden reported that the Resident Family Satisfaction survey is completed twice a year. Family members, residents and short term rehab patients/residents are surveyed separately and rolled into one 12-month rolling score. The Strategic Plan goal is to have 6 out of the 15 domains above the 50th percentile. Tactics to improve resident and family satisfaction include:

- Hardwire leader rounding and resident and family rounding.
- Development of a food committee.
- Lean project for Nutrition.



- Rounding tools developed.
- Family forums and resident councils.
- Consistent staffing.
- Accountability for documentation of follow-up.

Business

Mr. Dalton Huber reported the following:

- Operating revenues were under budget by \$400,000.
- Patient admissions were under budget about 16%.
- Outpatient numbers were down 8%.
- Operating expenses were under budget by \$200K.
- Tax levy at budget.
- Net operating loss of \$29K vs. a budgeted loss of \$220K.
- EBIDA – \$19,494M compared to a budget of \$18.611M.
- Days of revenue in accounts receivable at 70.
- Day's cash on hand is up to 174.
- Account receivable days are steady at 68.

Strategic Initiatives

Bundled Payments

Mr. Huber explained that bundled payments combine payment for physician, hospital, anesthesia, post-acute care, outpatient rehab and other provider services into a single payment for all services furnished during an episode of care. CMS has mandated bundled hips/knees in urban markets across the country and that mandate will probably come to Wyoming at some point because large employers like the predictability of the price. The hospital assumes the risk for any complications, but could ultimately benefit by brings more patients to local hospitals. CCH is researching the feasibility of bundled payments for joint patients.

EXECUTIVE SESSION

The regular meeting recessed into Executive Session at 6:33 p.m.

The regular meeting reconvened at 7:56 p.m.

ADJOURNMENT

There being no further business, the meeting adjourned at 7:56 p.m.

The next regularly scheduled Board meeting is July 20, 2017 at 5:00 p.m. in Classroom 1.

Ronda Boller, Secretary

Ellen Rehard, Recorder