

**WESTON COUNTY HOSPITAL DISTRICT
BOARD OF TRUSTEES MEETING
January 18, 2023**

Present: Dorothy Briggs, President; Jamie Farnsworth, Secretary; LeAnn Kenagy, Treasurer; Connie James, Trustee; Ann Slagle, Trustee; Karen Drost, Trustee

Absent: Nick Johnson, Trustee

Also Present: Randy Lindauer, Chief Executive Officer; Piper Allard, Chief Operation Officer; Allison Gee, Lubnau Law Office (via Zoom); Nick Dillinger, Lubnau Law Office (via Zoom); Kim Scharf, Quality and Compliance Director; Heather Boyer, Director of Home Health; Donalda Bennett, Interim Director of Nursing Acute Care; Melissa Thomas, Director of Long Term Care; Jana Suazo, Director of Human Resources; Sandy Dixon, Business Office Manager; Keisha Brueggemann, Radiology Manager; Denice Piscioti, Executive Assistant

Visitors: Marie Hamilton, NLJ (via Zoom); Nicholas Trandahl, WC Gazette (via Zoom); Brent Fuller, Tommy Davis and Shonna Cannaday from D & CO LLC/Discovery Analysts and Consultants.

Call to Order: Dorothy Briggs called the meeting to order at 5:30 pm.

Quorum: Jamie Farnsworth declared a quorum to conduct the business of Weston County Hospital District.

Honor an Employee: Kim Scharf is the Quality Compliance Director, and chairman of the committee, manages credentialing, checks the charts for peer review, manages HIPPA, risk management, and quality trainings for the staff. She teaches the C.N.A. classes and is working on making a C.N.A. testing center here. Also, she created a process for individuals to sign up for the C.N.A. classes.

Comments:

Additions/Changes to the Agenda- Changes to December minutes -move I section up above the action; Foundation is putting on a Daddy Daughter Ball -not WCHS. Foundation is paying for the dance. MRI's have increased.

Introduction to D & CO LLC/Discovery Analysts and Consultants will be next. Mandatory training as the last item under old business G.

LEANN KENAGY MADE THE MOTION TO APPROVE THE CONSENT AGENDA WITH AMENDMENTS, JAMIE FARNSWORTH SECONDED AND THE MOTION PASSED.

D & CO LLC/Discovery Analysts and Consultants – Three of the eight partners flew from Texas to meet the WCHS Board of Trustees. They explained they are a small boutique type of CPA firm with two entities to provide individualized services to healthcare communities and 50 to 55 employees across the state of Texas. They work all over the United States working with healthcare companies of all sizes with about half of their clients being Critical Access Hospitals. One of their focuses is healthcare government reporting. Maximizing reimbursement is a priority. Training staff and helping with strategies is important to them. They have built teams to assist with many different areas in healthcare. After answering questions, the recommendation was to do an assessment for WCHS. After the analysis they would know what the cost would be to accomplish what needs to be done to get WCHS where they need to be. They are available to get started right away.

Strategic Initiatives

A. Financial -

FY2023 Financial Report –

Finance Committee Report –

- Utilization Statistic Report - down except for observation discharges.
- Accounts reconciled for June.
- Good position for cash.
- No money was withdrawn from the money market account again this month.
- Bank increased interest rates from 4 to 5% for CD.
- \$100,000 was put into Money Market.
- Overtime report more information will be given about why it is up.
- Acute Care and Manor still need RNs.
- 5 traveling C.N.A.s at the Manor.
- AR days for hospital and professional billing - 67.8- decreased from last month.
- The primary denial rate was down to 8.5, the acceptable medium is 11.6.
- AR balances for self-pay accounts increased 76.222.
- iVitiFi is being used by some patients but not everyone qualifies.
- We will advertise financial assistant programs in the future.
- 42% represent self-pay, 43% are Medicare for professional billing.
- Medicaid dropped some of our providers in the system, so we had to add them back in.
- Atena Medicare Advantage plan noted as most difficult to collect from and caused denials and authorization issues.
- Projects discussed were HVAC and hospital OT.
- A grant of \$3,2227.13 for the OT and have until 2026 to utilize it or spend it.
- Sage Intacct goes live 2-1-24 instead of 1-2-24.
- Dr. Reimer was still concerned with the Medicare Advantage Plans. Open enrollment for people wanting to opt out closes on March 31, 2024. A discussion was held on how to get education to the public about the Medicare Advantage Plans with Kellee Reed, Kelly Page, and Seth Parsons.

B. Quality

- **Medical Staff Credentialing** - none
- **Medical Staff Report** - did not meet in December.
- **Quality Report**
 - Monthly incident report was discussed and is down.
 - A report was given on the satisfaction surveys by Feedtrail.
 - Will be working on getting more Clinic Surveys returned.
 - We have five temporary C.N.A.s in LTC.
 - Manor will be working on their quality rating to get it back to a 5 star. This will require monitoring Manor residents in ER because it lowers the score. Working with Providers on ordering more outpatient testing.
 - Planning to routinely monitor residents on anticoagulant medications.
 - The Opioid stewardship is being monitored by both the Director of Quality and the Director of Nursing at LTC. The plan is to add more robustness to the quarterly audit by double checking residents' medication usage.
 - Infection Control is seeing positive COVID cases in the hospital and in outpatient care.
 - Emergency Department wait times were up a little bit from last month due to the accepting provider wanting more testing before receiving the patient.
 - The Malcom Baldrige Award is a goal Quality hopes to achieve.
 - A new Pharmacist has been hired for the Hospital Pharmacy.
 - Looking at quality performance measures with managers to see what they are tracking or need to be tracking. HR will be doing similar tracking of performance measures.
 - AR down .1 days

Quality Committee Report – A LPN for the Manor was interviewed and will be coming part-time and hopefully full time later. Acute care interviewed an RN as a traveler, but recently learned of an RN moving here so she will be interviewed soon. Incidents continue to go down. The current census in the Manor is 39.

OLD BUSINESS

- **Radiology Update**
 - The XRAY room needs updated, the Radiology Manager, CEO and COO have been talking with different vendors.
 - Have comparable room quotes from Phillips, GE, and Siemens.
 - A service the Radiology Manager wants to add is stitching, a technique used to create one single, high-resolution image used with Scoliosis, especially pediatric patients.
 - Bariatric patient size is also being considered, all three quotes have an 80-kilowatt generator which reduces patient dose and is stronger for larger patients.

- The Manager recommends Philips which comes with a 10-year and extended warranty for 6 months. She did have the opportunity to see the same machine in Hot Springs, SD.
- The next step is to have the company come in and look at the room.
- Rates comparable to what we are paying now.
- Quotes include taking apart room.

CONNIE JAMES MOTIONED TO ACCEPT PHILIPS AGREEMENT; JAMIE FARNSWORTH SECONDED MOTION CARRIED.

- **HVAC Update**
 - The CEO and Maintenance Manager toured the HVAC system in the Manor and discovered items that needed to be addressed that were not in the proposal.
 - The whole project needs to be put out for bid again and reviewed for what needs to be done.
 - Get as many bids in as possible and apply for another grant. Will need to update the grant to get additional money.
- **340B Update**
 - We have a proposal from Aventi and we are expecting a proposal from Wilco data. We will decide between the two companies after we have both proposals in.
 - We will not get a big savings return until after the clinics are provider based.
- **Clinic Update**
 - It is in our best interests to get the Newcastle Clinic to be provider based and to do that we need to bring the Newcastle Clinic over to the hospital.
 - The CEO recently spoke with the Health Resources and Services Administration (HRSA) and learned they have grant money available to help us put a Federally Qualified Health Center (FQHC) in Upton.
- **Influenza Policy**
 - Last month a couple of employees came and asked the board to investigate lifting the mandatory mask requirement for the employees who opt out of the influenza vaccine.
 - The President of the Board did a lot of research on regulatory needs.
 - It will be presented to medical staff next week.
 - There should be an answer at the next meeting.
- **Hospital Heat Exchanger**
 - It is about three weeks out from being installed.
 - Working with insurance companies on reimbursement.
 - **Mandatory Board training**
 - The Wyoming Hospital Association has partnered with Lubnau and created a 2.5-hour public officer training certified by the state to meet the statutory requirements.
 - There is also a self-study option of training with a quiz for those who cannot attend.

- After the training is completed, please give a copy of your certificate to the Executive Assistant.

NEW BUSINESS

- **New Medical Staff Update** - We have a Family Practice Physician wants to practice here three days a week. A Pain Management Physician and his boss are also interested in coming here. Both will come to Board and Med staff in February.
- **Vaccine Consent Forms** – The Quality Director and Infection Control Nurse, Deb Hockett agreed on a consent form. A Vaccine Information Statement before the vaccine is given to the patient. The VIS sheets come from CDC which explains dosing, side effects, and general information.
- **Potential Medicare Seminars** – We are going to put a group together to speak to the public with updates on Medicare advantage and other plans. We held one in November at the Senior Center to help educate the public.
- **Community Needs Assessment** – We will be contacting companies to get one done this year. The last one was in 2020.
- **Employee Assistance Program** – The Director of Human Resources would like to start an EAP. There are two different options she would like to offer the employees. One option is for employees to talk to someone but not face to face. Blue Cross and Blue Shield offers an EAP called Work Partners. It is \$2.31 per employee per month and includes their immediate family. Staff that do not have insurance with WCHS can still use it. BCBS provides clinicians for individuals to connect with. The second option is for individuals who would rather talk face to face. HR has been talking to Jenny Pederson, a local life coach who is willing to meet with staff and do training. One thought is to have her meet with Mentors monthly and new managers to provide leadership training. Jenny will do a presentation for the board next month.

OTHER REPORTS

- A. **GOVERNANCE** – Still working on the orientation packet. We are also working on a check list for board effectiveness. Boards are supposed to evaluate themselves each year – self eval. It is to help each board member recognize if they feel confident or need more training in an area. Having a CEO check list for evaluation purposes every six months was also discussed. Once the bulk for the paperwork is completed, it will be sent to board members for review, and it will be discussed at the next meeting.
- B. **FOUNDATION** – As a board, they didn't meet for regular business in December. They did meet early in January for the committee to plan for the Daddy Daughter Red-carpet Ball. It will be at the Weston County Senior Center on Saturday, March 23rd. There will be a ticket charge which will include the limousine ride, dance, and refreshments. Extra items - photographer, flowers, tiaras, ... The goal is for anyone to be able to come so they are looking at a scholarship program, and community support. The purpose of this fundraiser is for Foundation scholarships. The Foundation is planning four fundraising events for this year – trying to make them community oriented. They will need lots of help. No limit on age. There will be a DJ

and music. Tickets are \$25 for a pair. The community is welcome to provide money for tickets or decorations.

C. ETHICS – will meet in March.

January 23, 2024	Joint Conference
February 7-26, 2024	May Special District Subsequent Director Candidate Filing
April 23, 2024	Publication of May Special District Subsequent Director Candidates
May 7, 2024	Special District Formation Elections

**CONNIE JAMES MADE THE MOTION TO GO INTO AT 8:14 pm
EXECUTIVE SESSION FOR AND PERSONNEL- W.S.16-4-405(A)(X) ANN SLAGEL
SECONDED AND THE MOTION CARRIED.**

Public session resumed at 9:16 p.m.

**CONNIE JAMES MOVED TO HAVE D & CO LLC/DISCOVERY ANYALISTS AND CONSULTANTS
CONDUCT A BOARD ASSESSMENT FOR UP TO \$5,000. JAMIE FARNSWORTH SECONDED THE
MOTION. THE MOTION WAS APPROVED UNANIMOUSLY.**

**CONNIE JAMES MOVED TO ADJOURN THE MEETING AND ANN SLAGLE SECONDED. THE
MOTION WAS UNANIMOUSLY APPROVED, AND THE MEETING WAS ADJOURNED AT 9:18 p.m.**

Dorothy Briggs, President

Jamie Farnsworth, Secretary