

**WESTON COUNTY HOSPITAL DISTRICT
BOARD OF TRUSTEES MEETING
August 19, 2021**

Present: Connie James, Chairman; Georgenna Materi, Secretary; LeAnn Kenagy, Treasurer; Jeff Virchow, Trustee (via Zoom); Lisa Foster, Trustee (via Zoom); Mike Ratigan, Trustee.

Also Present: Maureen Cadwell, Chief Executive Officer; Thomas Worsley, Black Hills President (via Zoom); Alison Gee, Lubnau Law Office (via Zoom); JoAnn Farnsworth, Quality Director; Piper Allard, Director of Patient Services (via Zoom); Charlie Turner, Director of Human Resources (via Zoom); Carmen Allison, Home Health Director (via Zoom); Denice Piscioti, Executive Assistant

Visitors: Alexis Barker, News Letter Journal (via Zoom); Jamie Farnsworth; Katherine Jones; Dan Fouche; Stefanie Smith; Jeff Smith; Jeremy Dedic; Justin Steber; Caleb Carter

Call to Order: Connie James called the meeting to order at 6:00 pm.

Quorum: Georgenna Materi declared a quorum to conduct the business of Weston County Hospital District.

Visitors Comments: Jeremy Dedic spoke on behalf of Bents Sprockets for support of finding a space for Newcastle Pump Track Proposal and bike park. Hoping to have it built in 2022. The group helps and maintains trails in the county.

Katherine Jones read a letter written on the COVID-19 vaccine not being mandated.

Additions/Changes to the Agenda: None

LEANN KENAGY MADE THE MOTION TO ACCEPT THE CONSENT AGENDA MIKE RATIGAN SECONDED AND THE MOTION CARRIED.

LEANN KENAGY MADE THE MOTION TO ADD JAMIE FARNSWORTH TO THE WCHS BOARD GEORGENNA MATERI SECONDED AND THE MOTION CARRIED.

Financial –

In-patient days totaled 170 for July. Patient mix was 15% In-patient, 61% Skilled and 24% Intermediate Swing Bed. Year-To-Date In-patient days are 100% of budget and 156% of last year's volume. Swing bed days are 125% of budget and are 86% of last year. ER visits are 107% of budget and 109% of the prior year. PT visits are 123% of budget and 137% of last year. OT visits were 21% of budget and 163% of last year. Operating Income was a loss of \$97,529 for the month and a loss of \$97,529 for the year. Depreciation expense year to date was \$134,073. Net Income was negative for July, \$239,155. YTD was also negative, \$239,155. Accounts Receivable increased from last month, \$310,812 and A/R is higher than this time last year by \$504,622. In August we experienced a decrease cash flow of \$607,866. Acute and Swing Bed days 170. Days in A/R slight decrease from prior month to 81. In the Retail Pharmacy during July, 4,333 scripts filled. Increase of 69 from last month. Operating Revenue decreased this month compared to the prior month's total. Retail Pharmacy revenue was \$287,653 for the month

and budgeted for \$315,000 this month. The Operating Income for July was a loss of \$110,103 and YTD income was a loss of \$110,103.

MIKE RATIGAN MADE THE MOTION TO APPROVE THE \$98,462.31 PURCHASE FOR THE CLINIC ACQUISITION GEORGENNA MATERI SECONDED AND THE MOTION CARRIED.

MIKE RATIGAN MADE THE MOTION TO ACCEPT THE PHYSICIAN RECRUITMENT PROMISSORY NOTE OF \$ 100,000 FOR EACH OF THE TWO PHYSICIANS GEORGENNA MATERI SECONDED AND THE MOTION CARRIED.

Quality

1. **Medical Staff Credentialing** - none

2. **Medical Staff Report** – The medical staff have been reviewing the by laws.

Transportation of manor residents to specialist appointments has been challenging. They discussed using telehealth and looking to see if it is possible EMS non-emergent transport. Occasionally, hospital swing bed patients need transportation to appointments also. We don't want to pull staff off the floor. EMS is working diligently to acquire more staff to make transportation times faster.

3. **Pediatric Readiness** – The state of Wyoming decided to get on board with the National Pediatric Readiness Project. To receive the certification Tamie Wesley built policies for standard of care when treating pediatric patients. Patrick Gleason is the Physician Champion. All pediatric patients who visit the Emergency Room charts are reviewed. They look to see if the pediatric patients were treated appropriately and efficiently. Currently the state doesn't have a system to track how well WCHS is doing with the pediatric patients, but it is coming. WCHS was the third hospital in Wyoming to get the recognition. We now have full status for Trauma Survey we have been provisional for several years. Only the cases that meet the trauma criteria are reviewed and entered in the trauma criteria system. Tamie Wesley is now an instructor for all the certifications that nurses are required to have.

4. **Quality Report** – When employees leave, they are given an exit survey. All year, only one has been returned. Ideas are being discussed on how to get responses back. Emergency room surveys – February through July data was covered. These are sent to patients via text message. 100% said they were seen within 30 minutes; 98% said they were asked about meds they were taking; 84% said providers talked about possible side effects of medicines before they were given them; 84% said yes the providers helped with pain during the visit, 86% said yes were told about given information about tests; 88% did nurses listen carefully, 79% said providers listened carefully; 88% stated the nurses said things in the way you could understand, 82% said the providers explained so they could understand; 95% said they understood the discharge instructions when leaving the ER; 72% said they would definitely recommend facility to friends and family, 12% probably and 15% said probably not. Individual comments for Providers are given to each of them and they work on those. Have met goals and are above the state average. Goal is to get more surveys completed.

5. **Culture Index Survey** – Michelle Mott who performed the survey reported WCHS had one of the better surveys she has seen lately. We had no low scores. She did a gap analysis and each department graded themselves and prioritize what they would want to fix. The information was then sent to Michelle who compiled it together. Now each department is working on action plans to be brought to the Service Excellence Committee to report their findings. All the information will be compiled and have an organizational plan as well. There were things the staff like and things they thought we could improve on. Overall staff liked it and felt like they were being heard. It was a good change.

GEORGENNA MATERI MADE THE MOTION TO GO INTO EXECUTIVE SESSION AT 8:03 PM FOR QUALITY AND LEGAL LEANN KENAGY SECONDED AND THE MOTION CARRIED.

MIKE RATIGAN MADE A MOTION TO ACCEPT THE ORGANIZATION CHART CHANGE ADDING A CHIEF OPERATING OFFICER TO THE FACILITY LEADERSHIP. GEORGENNA MATERIA SECONDED AND MOTION PASSED.

GEORGENNA MATERI MADE A MOTION TO ADJOURN AT 8:59 PM, JAMIE FARNSWORTH SECONDED AND MOTION PASSED.

Connie James, President

Georgenna Materi, Secretary