



Sublette County Hospital District Board Meeting Minutes
May 24, 2023 at 5:30pm
Pinedale, County Building

Board Members in Attendance

Tonia Hoffman – Board Chair
Jamison Ziegler – Vice Chair
Kenda Tanner – Secretary
Dave Bell – Treasurer
Ashli Tatro – Member

5:30pm: Board Education – The importance of a highly functioning medical staff – Dr. Dan Kirk

Dr. Dan Kirk, CMO from Star Valley spoke to the Board about the importance of having a highly functioning medical staff.

Dr. Kirk reported that he and his wife, Dr. Haggeman, have been in Star Valley since 1995. Both are family practice doctors and leaders at Star Valley Health. Dr. Kirk was appointed as the CMO in August of 2019. Why do we want to build a hospital? To take care of as many patients as we can. Changes occur to the administrative team and nursing staff and everyone that supports them. What is our mission? Our mission is to provide good medical care to our community. Dr. Kirk's main priorities are: 1. Patients; 2. Staff; and 3. Organization. Is it good for the patient? If no, then let's try to figure out something else. Is this going to help support our staff which are the number one asset of our organization. Without good staff you don't have a good organization.

The function of a hospital is to serve patients. The hospital does not exist so that you can practice your trade. Physicians are here to serve the patients and the community. It is a privilege to be able to practice medicine. Dr. Kirk told a doctor that people are trusting doctors to treat them. Hospitals do not exist to let providers prove how many procedures they can do. Procedures need to be done well and in a competent manner. Patients are not here to make doctors money. We understand that providers have put a lot of time and energy into their profession. Providers are here to serve patients that allow them to help. Staff are here to assist providers in a team-based model. Medicine is team-based now. Providers get blamed first if things go wrong. When things are successful, it's because the team performed well.

Patients are the most important person on the healthcare team. Patients aren't always easy to work with. Disagreements aren't necessarily bad. Providers aren't always perfect. They will make mistakes. They need to be competent, professional, and respectful. That is why we have policies and procedures in place set-up by medical staff to make it as safe as possible. Dr. Kirk went through nine months of training on how to be a leader. There are two purposes of medical staff according the Federal Regulations of 482.22. Conditions of participation – medical staff – a hospital must have an organized medical staff that operates under bylaws approved by the governing body which is responsible for the quality of medical care provided to patients by the hospital. In the Star Valley bylaws, the purpose of the medical staff is to organize the activities of physicians and other clinical practitioners who practice at Star Valley Health in order to carry out, in conformity with these bylaws, the functions delegated to the medical staff by the Hospital Board of Trustees. In the end, providers have to answer to the Board. The Board has final governance over the hospital. That is an important thing for the medical staff to understand. The authority of medical staff, per Star Valley Health, subject to the authority and approval of North Lincoln County Hospital District Board of Trustees, the medical staff will exercise such power as is reasonably necessary to discharge its responsibilities under these bylaws and associated rules, regulations and policies, and under the corporate bylaws of Star Valley Health.

There is also an idea of a unified medical staff, not necessarily in the bylaws, but it is an important component of understanding its function. A unified medical staff establishes and implements policies and procedures to ensure that the needs and concerns expressed by medical staff members at each hospital are given due consideration. That means that the medical staff needs to be fair. They need to be fair to each other. When bylaws are fair, it's easier to be good to one another.

Membership for the medical staff must be comprised of physicians of medicine or osteopathy. It can include other physicians as well as advanced practice providers. The decision is up to those making the bylaws.

Dr. Kirk had a private practice from 2006-2011 in Star Valley. A lot of physicians have figured out that it's easier to be employed. It's really important with employment that there is an understanding from administration and from the medical staff that those are two separate issues. You have a contract with the hospital to perform certain duties that you have contracted with the administration and they have agreed to compensate you. The medical staff is there to ensure that you are providing good quality care.

Right now, at Star Valley, they have two general surgeons. If someone wants to come and work for Star Valley, the hospital does not have to contract with them. However, that surgeon can apply for medical staff privileges. Depending on how your bylaws are written, you can deny employment based on the fact that there is not enough volume of patients for a doctor to practice and keep up their competency performing their procedures. They are looking out for the health of the community.

They have three membership categories: active, affiliate, and honorary. Active means that you are doing a certain amount of work at the hospital. It also means that they have certain responsibilities and duties to the medical staff. Affiliate is someone that comes a couple of times per month. An affiliate doesn't have to attend certain meetings or chair committees. It is important that the medical staff understands that if they are a member of this staff and organization, they have responsibilities to perform in order to maintain the organization to its best capacity.

At Star Valley, providers are on their medical executive committee but they are non-voting members. They can only advise on the issues. Their officers are: Chief of Staff, Chief Elect, and two members at large that are

voted on a yearly basis. Those four people, as well as the chairman of the credentialing committee, serve as the medical executive committee. They can also have the past Chief of Staff and committee chairs also. Star Valley has a VP of Quality on their team. A Medical executive committee is very important to have as well as a credentialing committee. Star Valley also has four committees which are required for conditions of participation. Hospital committees work in conjunction with hospital staff and the hospital staff are voting individuals in those situations.

At Star Valley, they have quality, infection prevention, pharmacy and therapeutics, and utilization and review committees. Utilization and review will be important once we become a critical access hospital because it helps evaluate for stays that are more than 96 hours. They also have medical staff sub-committees.

Star Valley has utilized Chartis, which has been money well-spent. Chartis makes sure that they are in compliance with all rules and regulations.

The Medical Chief of Staff reports to the Board on a regular basis so that the medical staff is staying in compliance.

Dave Bell asked what constitutes a report from the Chief of Staff. Dr. Kirk reported that a report could be about problems with providers, incidences that have occurred, or progress being made on a certain subject. The report can be pretty specific at times. Dr. Kirk tries to bridge the gap between administration and the Board. Our organization may be too small for a CMO. We might only have a Chief of Staff.

One thing that the medical staff talks about is credentialing. They talk about a pyramid where the base is very big and the tip is very small. Level one is appointing excellent practitioners. Level two is setting up communication with those providers for them to understand those expectations and abide by those expectations. Level three is regularly evaluating performance in a very fair way. It needs to be fair and objective which can be hard in a small community. They need to provide feedback on the performance and take corrective action, if needed. Make sure that the bylaws are followed in a fair manner.

Tonia and Mike Hunsaker thanked Dr. Kirk for attending and presenting.

Meeting Call to Order 6:00 p.m.

Pledge of Allegiance / Set Agenda

It was reported that Dawn Walker could not attend the Board Meeting. The Board removed Dawn's report on the Sublette Center from the Agenda. Jamison Ziegler motioned to accept the agenda with the correction. Kenda Tanner seconded the Motion. Motion passed unanimously.

Department Reports:

Administrator's Report: Dave Doorn/Mike Hunsaker

(Nursing, Lab, Radiology, EMS, Business office, PR, Grants and Medical Directors' reports)

Dave Doorn reported that regarding the EMT-B class, 8 students have passed the hands-on portion of testing and now are in process of taking the written national registry test. They started with 18 students and ended up with 8 students. They were lost for a variety of reasons including test scores, students not doing homework, and some people left Sublette County. They have a verbal reply that we have received the

education grant for Community EMS. Waiting for the written grant to show up then will start the education. EMS participated in a Mass Casualty Training (MCI) with Sheriff's Office, Wyoming Highway Patrol, Unified Fire, Emergency Management, and Public Health. This was a great way to collect information and collaborate. There are lots animals are on move right now. EMS served as the High School rodeo standby. MS15 is back from its motor replacement. MS140 had to have a turbo replaced. Thank you to Billy Pape and his crew at County Road and Bridge for doing this for us.

On May 18 the lab and Brett in IT, began the process to update the Lab Information System (LIS) which is Harvest by Orchard Software. The LIS is a lab specific computer program that is used solely for laboratory work. This system is interfaced with our EMR which is Epic. It is interfaced with our reference lab which is St. John's lab and ARUP and it is interfaced with most of the laboratory instrumentation. This system allows for computer reporting of all our lab work. The update process has been started now in preparation for the move to the hospital lab. Sharon is doing a deep dive into our vendor contract with Henry Schein. Dave is researching the group purchasing side (GPO) which is Health Trust. We have been in contact with Evan Bennet, the lab sales representative, and he is spearheading this project on the Henry Schein side.

Thank you to everyone who supported the annual DAISY award dinner. Amber Burbank, LPN from the Sublette Center won the award this year. Nursing participated in the MCI (Mass Causality Incident) event. Attended the LEPC (Local Emergency Planning Committee) meeting. Participated in the Governors EMS Advisory committee meeting. Actively looking for an RN to replace Kristy Bartlett, RN who was promoted to Quality Director.

Kayla Bowers from Radiology completed MRI equipment site visits and one more site visit for Mammo equipment to go. Our PRN MRI technologist has been a huge asset regarding MRI equipment. The radiologist has been a great asset for Mammo, CT and MRI equipment as well. Echo training at Star Valley to start in June. Marbleton Big Piney Xray equipment is at the end of life. They have been struggling with this equipment. It is around \$145,000 to replace this equipment. The replacement costs are reflected in the draft budget which will be presented tonight.

Kari DeWitt is continuing with her PR six-prong approach. She has been organizing Health Roundtable discussions at Marbleton Senior Center and Rendezvous Pointe. She is working with the FMG marketing group to drive business to service lines that have capacity. On the grant side, there is some momentum building. She has some really good meetings set-up. Kari has meetings in June with Don Kendall Jr (and his brother) and Phelps Swift (and his siblings). She is waiting for people to come back to Sublette County so that she can schedule meetings. Dr. Burnett, Sharon Rutsch, and John Goettler met with Dr. Rich Sugden about a potential donation for the Marbleton Clinic. We are waiting for the Helmsley Charitable Trust group to get here. They are visiting other CAH's in Southwest Wyoming and will stop by Pinedale. Working on a Radiology equipment donation of about \$1.8 million for the hospital.

We did get the \$910,260 grant for new HVAC systems for the Pinedale and Marbleton Clinics. There is a long lead time for those units. They have one bid in right now. They are waiting for one more bid to come in.

We have one more ARPA grant that we have a shot at. This is a grant to help with inflation. They will release the guidelines in June. We are watching it and we will apply.

Kelli from billing reports that cash revenue from Billing is holding steady with a slow incline. She's forecasting to bring in \$4.5 million this calendar year. Dorraine and Kelli are attending a billing and coding conference next week. This conference has a strong focus on in-patient, out-patient, emergency, and clinic billing.

Dr. David Burnett reported that he has been attending meetings. He went to the Dr. Sugden meeting, providers meetings, medical executive committee meetings. He is also doing chart reviews and one-on-one mentorship with providers.

Dr. Buck Wallace reports that he is working on staffing and continuing to interview additional providers and physicians. Dr. Feinstein has neither declined nor accepted the offer out to him. He is setting up continuing medical education requests from EIRMC. Cardiology is planning on coming up June 20th to give an educational lunch. He is working on Medical Staff Bylaws. He is a current member of the Medical Executive Committee.

Dave Doorn reports that he is keeping an eye on interest rates. Dave contacted Lena and Abbi regarding setting up a sweep account. This would be an account where we can place money and maximize our interest rate. He is working on it and will hopefully have something for the Finance Committee Meeting next month. We have a new updated jail contract where we received an increase in our rate. Dave is working with Public Health to get some things completed from last Fall. They are working on replacing some sidewalks, windows, and doors.

Karl will talk about the Pre-Construction meeting from this morning.

Ashli asked if they have seen any results from FMG Marketing? Kari reported that she is meeting with them on the 24th. Kari will email the marketing data to the Board so they can track progress.

Committee Reports:

Finance Committee:

Dave Bell reported on the May 17, 2023 Finance Committee meeting. He reported that it was a so-so month with less than average tax revenue. There was a \$179,000 loss for the month. Tax revenue has been averaging about \$550,000-\$600,000/month. This month the tax revenue was \$350,000. The tax revenue is a guessing game as it fluctuates so much. We used about \$107,000 for capital replacing some items including \$35,000 for the Critical Access Hospital. Dave pointed out that going forward they will be looking at the two clinics separately. He wants to separate out income and expenses so that we can judge how we are driving revenue. The Pinedale Clinic is operating at a loss of \$1.7 million for the year. The Big Piney/Marbleton Clinic is operating at a loss of \$981,000 loss for the year. This is just operating revenue and revenue costs (without the mil levy, grant revenue, or rental income). These numbers reflect just the clinic charge revenue.

Dave Bell thought that it would be helpful to see the numbers on a monthly basis so that we can be less-dependent on the Mill Levy and we can be more dependent on our own income and expense. At this point in the year, we are in the black around \$936,000 (before this large check arrived from the Treasurer's Office). We currently have 233 days of cash on hand; the target is 225. We had a \$275,000 to hit our cash flow this month. The only vendor payment over \$15,000 was to Henry Schein. Their bill was \$27,580.00.

They received a \$2.5 million County tax payment. Dave would like recommend that the Board put \$1,250,000 into the Wyoming Star Account to build our reserves.

They have hired Eide Bailey to do our audit, which is a great decision. Dave Doorn reported that Eide Baily will look at the numbers from an audit and an operational point of view. The audit will be completed by December.

We have reached out to a consultant to help with our Rural Health Care Designation. We will have a plan by the June meeting.

Dave Bell reported that Jonah has offered us a free office building. Dave Doorn is working on the costs to get it moved. It comes fully-furnished. They can explore it and pull the trigger at the next meeting. Dave Doorn hopes to have the numbers by next month's meeting.

Dave reported that Altitude Drug is for sale. He will watch it carefully.

Dave will speak about employee housing in the Executive Session.

The Finance Committee also spoke about patient financial aid. They are working on being creative in payment plans.

Tonia mentioned that when we get the Rural Healthcare Designation, it has a sliding scale which might help with patient bills.

Dave Bell reported that they will present a draft budget to the Board tonight. They are recommending a COLA increase, merit-based raise, and PTO increase. The budget shows a projected net income of over \$4 million and a goal of increasing the reserves by \$2 million next year.

Dave Doorn reviewed the budget philosophy. The first part of the philosophy is: 1. Mature and responsible use of our tax revenues; 2. The process must be in sync with our strategic plan; 3. The budget must support excellent patient care and fair pricing; 4. The process must support fair employee compensation, wages, benefits, and educational support; 5. The budget must support adequate staffing levels of providers and support staff to meet the needs of the community; 6. The process must account for the additional expenses for the preparation of the Sublette Center merger and the Critical Access Hospital. As part of the budget process, we must manage our supply costs, identify opportunities for savings and GPO compliance, identify economic conditions which change our costs from year to year. Obviously, we have been dealing with inflation. Support new service line development to improve access to care and revenues. The process must support and take into account managing Medicare and Medicaid and margins.

Michelle Stauthamer reviewed the Budget Assumptions which is a comparison between prior years and highlights all of the changes. The Mill Levy is projected to increase 61% for the current year. We are planning on putting 50% of our bottom line back into reserves which is approximately \$2 million. The district will receive an employee retention credit of \$660,000 in the fall. The budget also includes a 5% increase in fee schedule as well as revenue from an additional provider. Dave Bell pointed out that they have verified the Mill Levy increase. The increases in operating expenses are inflation, preparing for CAH designation, and the County signing over the clinics to the district. The changes increase the budget by around \$1 million. We are also planning on hiring an additional four FTE's in preparation for CAH designation, and the other 3.5 FTE's will cover additional work and the extended hours of both clinics.

Lindsey Bond presented increases in staff PTO, COLA, and merit-based raises. For PTO, they currently have there are two different accrual rates. At this time, it is called PAL, now it will be called PTO (paid time off). The

committee wanted to standardize the two accrual rates so they went with the higher one but is similar with what Star Valley has. The COLA increase will be 3.5% and start July 1. The merit-based raise will be based upon performance evaluations and will up to 3%. The evaluations will start in September. The merit-based raise will start in January 1, 2024. The COLA increase will begin in July and will be cumulative and stay with the employee.

Dave Doorn reported that a lot of work went into these increases. They want to reward good employees and keep retention high, as hiring nationwide is quite difficult.

Lindsey and her committee are also working on a bereavement policy, parental leave, and sick and mental health leave.

Dave Bell moves the Board to pass the Draft Resolution of Intent for 2023-2024 as presented by the staff. Jamison Ziegler seconded the Motion. Motion passed unanimously.

Jamison Ziegler moves the Board to transfer \$1.25 million into the Wyoming Star Account. Kenda Tanner seconded the Motion. Motion passed unanimously.

Dave Doorn reported that the Wyoming Class representative will come and talk to the Board next month about his account. Sublette County uses their services and it is State sponsored. They have better interest rates than Wyoming Star.

Building Committee:

Karl thanked Tonia Hoffman for running the Town Hall event on May 23rd. Right now, they are trying to put the exclamation point on the financing. They are waiting for the finalized financing from the USDA. The importance of finalizing the financing is the concurrence letter which will come from Justin Bailey which triggers the Notice to Proceed. That will allow Layton Construction to secure their contractors.

Karl has a handful of RFP's out right now: Nurse Call, Furniture Vendor, Medical Equipment, Full-time Construction Inspector, and Special Inspections. When they come back, they will give Dave's recommendation to the USDA. They have to go through the USDA process to actually contract these people. The employees will be contracted through the hospital.

The parties held a Preconstruction Meeting this morning. The meeting went through process and procedures. They went through the pay applications, change orders, and how to handle payments. July will be busy trying to get the payment process down. The ditch is complete and has water in it. Dave Doorn got the Builder's Risk Insurance Policy down by \$40,000. They are looking at a mid-June start date for construction. They still need the USDA's approval.

On the RFP's, Justin does not have the final say on who is selected. The hospital will make a recommendation and Justin's supervisor will make the decision. Ryan Wells and Jorgensen declined to apply for the Construction Inspector Position. There is also Ted and a local candidate. They are looking for a well-qualified third-party individual. This person's responsibilities will overlap with the contractor.

Tonia has someone interested in the position. Karl asked that the person give him a call.

Karl also reported that Pat Davis, State Inspector, will be involved in everything.

Ashli commented that it is good to have another set of eyes on the project. It's good quality control piece to make sure that we aren't neglecting anything.

Justin has said that anytime there is working going on, the construction inspector needs to be there.

Dave Doorn reported that Lena called with a term sheet for Greater Commercial Lending and MCM. Dave was able to eliminate \$300,000 in fees from the previous term sheet. He was able to lower the interest rate by .5% and the terms are better on the pre-payment penalty. He is waiting on the LOC which would trigger Karl and Jeremy to get going. Right now, everything is on track to have the money in the account for the bonds by mid-June. Dave will make a decision on a builder's risk policy by the end of the week. That policy has to be in place before construction starts.

Karl needs signatures on the Pre-construction contracts.

Merger Committee:

There is not a lot to report. They are moving along with the merger. Everything seems to be going well.

Compensation Committee:

Lindsey Bond reported that they are working on individual total rewards compensation package so that employees can see all of their compensation.

Tonia asked if the FTE's represent total compensation? Dave Bell answered yes and added that they will be staggered when hired.

Quality Committee:

Ashli reported that Press Gainey survey is looking pretty good in general. There were multiple comments about people being seen in the ER instead of Urgent Care. They are working with the front desk to communicate that better to patients coming in. Patient Experience and Grievances – they have developed a grievance policy which was reviewed in the grievance committee. They are currently working out the kinks. They are making sure that grievances received are being followed-up on, reviewed, and closed out. They are starting a grievance committee. Do we need a board member to serve on the grievance committee? Ashli volunteered to serve on the committee. Tonia appoints Ashli to be on the grievance committee. Mike recommends that they have an employee-based grievance committee, which might include a provider. That committee could then report to the quality committee. So, it would be a grievance sub-committee, which would report to the Quality Committee which has a Board Member. Three people from the staff selected appropriately to be on the sub-committee.

Dr. Kirk pointed out that it is important to monitor staff's progress over time. Some items addressed by the admin process or HR issue. The team needs to have a means of feedback to the provider so that the provider look at the grievances. Admin team can select people to be on the grievance committee. Mike said that Sadie, VP of Quality, can help with it and give guidance.

Dr. Kirk said that the committee can do the investigation.

Ashli explained that a complaint is something that can be rectified immediately; a grievance is something that is brought up after the fact and needs further research and follow up in order to be resolved. A grievance may require an investigation.

Lindsey reported that they have already have a grievance committee. There is a provider on the committee, Ashli can be on the committee too, if she would like.

Tonia Hoffman reported that she gets weekly complaints. She needs to know where to direct the complaints and make sure that they get taken care of. Lindsey asked that the complaints be emailed to her and Kristy. The committee can discuss it and formulate a plan of action. Dr. Kirk reminded everyone to make sure that the proper procedure is followed and the complaints go to the Grievance Committee. He's seen when board members try to launch their own investigation and it gets messy. We all want to be sure the loop gets closed and make sure that everyone receives some follow-up.

Ashli reported that the Quality Committee wants to make sure that patients are receiving discharge summaries at the end of their visit or through MyChart. The front desk is trying to push patients to sign up for MyChart.

The committee is also looking at MIPS quality measures. They have already seen improvements. They are making sure that things are being documented correctly. They are working on reviewing medications, A1C, foot exams in diabetic patients, and depression screening.

Tonia thanked the committee for doing a great job.

Sublette County Health Foundation – Kari DeWitt

Kari reported that they have raised about \$80,000 in donations. They also received \$1 million from Joe Rickets. She has some good meetings set-up for June and July with individual donors. She is also making good progress with the energy companies. She feels really good about the progress now that people of wealth are coming back to the county. April and May weren't strong months for fundraising, as many landowners weren't in town.

John Goettler's contract will be up at the end of July. He will be in town on June 6th. Dave Bell would like to meet with him when he is in town.

Kari and the Foundation are planning on an end of summer party at Stockman's to thank donors. She is also seeing if she can raise \$25,000 through Wyo Gives day, which is July 12th.

New Business:

Policies – Chartis

Lindsey reported that she and Tonia attended the Wyoming Hospital Association event in Casper. They will also be attending a Wyoming Hospital Association event in August or September.

Teresa reported that she has been working on employee engagement activities.

Bill reported that he is looking to see if Community EMS can generate any revenue.

Lindsey reported that they have four policies ready to present to the Board. They are: 1. Laboratory Services; 2. Personal Medical Supply Purchases; 3. Radiologic Services; and 4. Respiratory Protection. They are still working on putting together policies and will use Chartis when they are ready. Med-Exec Committee will also be using Chartis.

Ashli asked which policies exactly the board will need to approve moving forward. Kathy reported that anything that the Board oversees directly, needs to be approved by the Board. Department level decisions don't need Board approval.

Dave Bell motioned to approve the four policies as presented to the Board. Ashli seconded. Motion carried unanimously.

Old Business:

Marbleton Services –Dave Doorn reported that they are reviewing all of the regulations on the State level to make sure that they know what needs to be done down there. There is a possibility that a remodel will not be needed. More information will be coming.

Dave Bell motioned to approve the meeting minutes from April 26, 2023. Kenda seconded. Motion passed unanimously.

Approval of Payroll and Bills – Dave Bell motioned to approve payroll and bills from April 15, 2023 – May 12, 2023 for \$885,717.79. Kenda seconded. Motion carried unanimously.

Public Comment - none

Executive Session: *Personnel and Legal 7:36 pm*

Jamison motioned, and Dave Bell seconded, to go into Executive Session for the purpose of discussing legal and personnel. Motion passed unanimously.

9:20 pm – Out of Executive Session. Tonia said that they would like to renew Dave Doorn's contract. They will be doing an evaluation. Dave Bell motioned to approve the new contract for Dave Doorn, Administrator, effective August 8, 2022 – August 8, 2024. Ashli seconded. Motion carried unanimously.

Adjournment – Jamison motioned and Kenda seconded to adjourn. 9:20 p.m.

Minutes taken by Julie Bell

Tonia Hoffman, Board Chair

Date

Dave Doorn, Administrator

Date