## MINUTES FROM THE REGULAR MEETING MEMORIAL HOSPITAL OF SWEETWATER COUNTY BOARD OF TRUSTEES

## August 7, 2019

The Board of Trustees of Memorial Hospital of Sweetwater County met in regular session on August 7, 2019, at 2:00 p.m. with Mr. Taylor Jones, President, presiding.

#### CALL TO ORDER

Mr. Jones called the meeting to order. The following Trustees were present: Mr. Taylor Jones, Mr. Marty Kelsey, Mr. Richard Mathey, Dr. Barbara Sowada, and Mr. Ed Tardoni.

Officially present: Ms. Irene Richardson, Chief Executive Officer.

Mr. Jones led the audience in the Pledge of Allegiance. Mr. Mathey read aloud the mission and vision statements.

#### APPROVAL OF AGENDA

The motion to approve the amended agenda to move the Contracts Consent Agenda to follow Community Communication was made by Mr. Kelsey; second by Dr. Sowada. Motion carried.

### APPROVAL OF MINUTES

The motion to approve the minutes of the July 10, 2019, regular meeting as presented was made by Mr. Tardoni; second by Mr. Kelsey. Motion carried.

### COMMUNITY COMMUNICATION

Mr. Brian Schumacher presented to the Board his proposal to do a clinical study with the Hospital for his "All Around Gown". Mr. Schumacher told the Board his personal story and his reasoning for inventing this gown. He explained his proposal and he had one of his gowns that he did a demonstration on for the Board. Mr. Jones thanked Mr. Schumacher for presenting this to the Board and told him he would give the proposal to the appropriate people. Mr. Schumacher left a copy of his proposal and a sample of his gown.

### CONTRACT REVIEW

The motion to authorize the CEO to execute the Amendment to the Affiliation Agreement with the University of Utah on behalf of MHSC as presented was made by Mr. Mathey; second by Dr. Sowada. Motion carried.

Mr. Mathey requested the wording in the Facility Use Agreement for University of Utah Dermatology be changed to match the Affiliation Agreement with the University of Utah. Ms. Suzan Campbell, Chief Legal Executive and General Counsel, said that she would make the necessary changes and send the revised agreement to the Board. Because we have patients

scheduled for dermatology on August 23, Mr. Mathey made a motion to authorize the CEO to execute the agreement on behalf of MHSC with the attached changes; second by Dr. Sowada. Motion carried.

The motion to authorize the CEO to execute the NaVectis agreement on behalf of MHSC as presented was made by Mr. Mathey; second by Mr. Kelsey. Motion carried.

### **OLD BUSINESS**

### **Proposed Changes to Medical Staff Bylaws**

Ms. Kerry Downs, Medical Staff Services Supervisor, explained the changes to the Board and said these are the changes necessary for now and this was not approval of the full Medical Staff Bylaws. The motion to approve the proposed changes as presented was made by Mr. Mathey; second by Mr. Tardoni. Motion carried.

# **Code of Conduct Policy**

The motion to approve only part of the Code of Conduct Policy which was voted on by the Human Resources Committee was made by Mr. Tardoni. Mr. Jones stated the Board needed to vote on the full Code of Conduct Policy. Mr. Tardoni rescinded his motion. The motion to approve the full policy as presented was made by Mr. Tardoni; second by Dr. Sowada. Motion carried.

# **Credentialing Policy**

Mr. Jones stated this policy is not ready for Board consideration.

### CHIEF EXECUTIVE OFFICER REPORT

Ms. Richardson provided an update on the Strategic Plan. She stated that they had their fourth patient advisory committee meeting. She stated this committee has toured Med/Surg, ICU and the ED and that the next tour is of the OR. Ms. Richardson is very pleased with this group and stated that it continues to grow. She also stated that they are continuing with the Patient Care Workshops and 150 employees have completed the workshop. Ms. Richardson stated that they are still working on the Lean program and where they want to go with that. She updated the Board on recruitment and stated we have a pediatrician on-site visit next week. She stated we have also completed the on-site visits for radiation oncology and hope to make a decision on that soon. Ms. Richardson stated that Dr. Alicia Gray will start on September 1. Ms. Richardson reminded the Board of the hospital picnic on August 10 from 12:00 to 4:00 PM at Crossroads Park. Ms. Richardson thanked Ms. Tami Love, Chief Financial Officer, Mr. Ron Cheese, Patient Financial Services Director, and their staff on the good audit. Ms. Richardson reminded the Board of the Foundation Golf Classic on August 18. She reminded the Board of the Cancer Center five-year celebration on August 22. Ms. Richardson reminded the Board of the Quality Retreat on August 29. She asked if any of the Board members would be interested in attending the Wyoming Hospital Association meeting in Cheyenne.

#### COMMITTEE REPORTS

### **Quality Committee**

Dr. Sowada thanked Ms. Kara Jackson, Quality Director, for the great narrative. Dr. Sowada reminded the Board that the Quality Workshop would replace the September Board meeting. There was discussion on what time the Board should meet before the retreat to take care of necessary Board business. Dr. Sowada said she would get a time for the Board and get back to them.

## **Human Resources Committee**

Mr. Tardoni stated that they have been working on the Code of Conduct policy that was just approved. He said they also looking at the telecommunication agreement.

### **Finance and Audit Committee**

*Capital Expenditures:* The motion to approve FY20-3 for the Harris QCPR 6.3 upgrade with Linex server connection as presented was made by Mr. Kelsey; second by Mr. Mathey. Motion carried.

The motion to approve FY20-5 for the GE Optima CT580 RT-16 – FMV lease buyout as presented was made by Mr. Kelsey; second by Mr. Mathey. Motion carried.

The motion to approve FY20-8 for MD-Staff Credentialing & Provider Enrollment Software as presented was made by Mr. Kelsey; second by Mr. Mathey. Motion carried.

*Narratives:* Ms. Love reviewed the narrative highlights included in the meeting packet. She said the packet for the Board was small, as they do not have the final figures for June. Ms. Love said that July looks good.

**Bad Debt:** The motion to approve the net potential bad debt of \$1,017,119.57 as presented was made by Mr. Kelsey; second by Dr. Sowada. Motion carried. Mr. Tardoni stated that he had met with Mr. Cheese about the bad debt and can see why this is such an important issue. Mr. Tardoni said he liked the numbers that Mr. Cheese added to the bottom of the bad debt sheet. There was discussion on what the patient navigator or case managers might be able to help with including finding less expensive medications for patients and helping with large deductibles. Mr. Cheese stated that he believes the patient navigator is one of the best decision we have made and will help the Hospital in many ways.

### **Building & Grounds Committee**

Mr. Jim Horan, Facilities Director, stated they are still working on the central plant project. He said the bids were advertised on July 23. We will look at the bids at the next Building & Grounds meeting. Mr. Kelsey asked Ms. Love to e-mail the bids to them so they can see where they came in.

### **Foundation Board**

Ms. Tiffany Marshall, Foundation Director, stated that she has been working on the donor wall and that it is moving forward. She said that they have had better sponsorship this year for the Golf Classic and a lot of volunteer support. Ms. Marshall stated that she had presented to the Kiwanis Club earlier in the day felt this went very well with great interest from the group. Ms. Marshall stated that they are planning on a guest at the Waldner House in the next few weeks. She said there was no change in the Foundation officers.

Mr. Jones announced a ten-minute recess.

Mr. Jones called the meeting back to order at 3:45 PM.

## **Compliance Committee**

Mr. Tardoni stated that they continue to work on the risk assessment and the Fair Warning software. He said he neglected to send his report and will forward that on to the Board.

### **Joint Conference Committee**

Mr. Mathey stated that the next meeting is August 21 at 6:00 PM. They will review the Medical Staff Bylaws at that meeting. Mr. Mathey asked Ms. Downs when she thought they might receive the copy of the Medical Staff Bylaws. She stated that she would try to have them to them by Monday.

#### MEDICAL STAFF REPORT

Dr. Lawrence Lauridsen was absent, so Ms. Downs read his report aloud. She stated the Medical Executive Committee met on July 23. Most committees have not met since the last Board meeting. Ms. Downs stated that Dr. Cielette Karn is the new Quality Committee physician.

#### GOOD OF THE ORDER

Dr. Sowada stated that she and Mr. Tardoni watched a webinar that touched on things that they, as a Board, need to look at that may impact the Hospital in the future. She said this impact would be both locally and nationally. Mr. Tardoni stated that we need to look outside the box for solutions for down the road. Ms. Richardson stated that this is something we could do with our Strategic Plan in the coming years.

Mr. Kelsey thanked Mr. Rich Tyler, Information Technology Director, for the improvement on the microphones. Mr. Kelsey also asked Ms. Richardson when the next Green River Board meeting would be. She stated that she will check with Ms. Bailie Dockter at Castle Rock and will try for the October meeting.

Mr. Mathey stated that he and Mr. Kelsey attended the Castle Rock ground breaking. He said it was well attended and should be completed in a year.

### **EXECUTIVE SESSION**

The motion to go into Executive Session for personnel reasons was made by Mr. Mathey; second by Dr. Sowada. Motion carried.

### RECONVENE INTO REGULAR SESSION

The motion to reconvene the meeting at 5:15 p.m. was made by Mr. Mathey; second by Dr. Sowada, Motion carried.

### ACTION FOLLOWING EXECUTIVE SESSION

### **Approval of Privileges**

The motion to approve the July 22, 2019, Credentials Committee Recommendations for privileges as presented was made by Mr. Kelsey; second by Dr. Sowada. Motion carried.

- 1. Initial Appointment to Associate Staff (1 year)
  - Christopher Hunnicutt, Radiology
- 2. Initial Appointment to Locum Tenens Staff (1year)
  - Dr. Johanna Delacroix, Pediatrics
  - Dr. Pamela Clegg, Pathology
  - Dr. Astrid Haaland, Emergency Medicine (U of U)
  - Dr. Christopher Kelly, Emergency Medicine (U of U)
  - Dr. Jane Yee, Emergency Medicine (U of U)
  - Dr. Anne Moore, Pediatrics
- 3. Reappointment to Active Staff (2 years)
  - Dr. Benjamin Jensen, Anesthesia
  - Dr. Christian Theodosis, Emergency Medicine (U of U)
- 4. Reappointment to Consulting Staff (2 years)
  - Dr. Majd Ibrahim, Cardiovascular Disease (U of U)
  - Dr. Douglas Hughes, Tele Radiology (VRad)
  - Dr. Kristi Sobota, Tele Radiology (VRad)
- 5. Reappointment to Locum Tenens Staff (1 year)
  - Dr. Brendan Milliner, Emergency Medicine (U of U)
  - Dr. Jamal Jones, Emergency Medicine (U of U)

## **ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 5:25 PM.

Mr. Taylor Jones, President

Attest:

Mr. Ed Tardoni, Secretary

Submitted by Marianne Sanders