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

# July 10, 2019

The Board of Trustees of Memorial Hospital of Sweetwater County met in regular session on July 10, 2019, at 2:00 p.m. with Mr. Richard Mathey, President, presiding.

#### CALL TO ORDER

Mr. Mathey called the meeting to order and announced a quorum was present. 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, and Dr. Lawrence Lauridsen, Medical Staff President.

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

## APPROVAL OF AGENDA

The motion to approve the amended agenda to add approval of a resolution designating a public records person for MHSC was made by Dr. Sowada; second by Mr. Jones. Motion carried.

#### APPROVAL OF MINUTES

The motion to approve the minutes of the June 5, 2019, regular meeting as presented was made by Mr. Kelsey; second by Mr. Jones. Motion carried.

## ELECTION OF OFFICERS AND COMMITTEE ASSIGNMENTS

Dr. Sowada presented names for officers on behalf of the Governance Committee:

President – Mr. Jones Vice President – Mr. Mathey Treasurer – Mr. Kelsey Secretary – Mr. Tardoni

The motion to close nominations and approve the names as presented was made by Mr. Kelsey; second by Mr. Tardoni. Motion carried. Mr. Mathey turned the gavel over to Mr. Jones. He noted the thank you note included in the packet. Mr. Jones thanked Mr. Mathey for all he has done for the Board of Trustees and the Hospital. Mr. Jones thanked the Trustees for voting him in and allowing him to serve.

## **COMMUNITY COMMUNICATION**

Ms. Richardson presented a gift of appreciation to Mr. Mathey on behalf of the Board of Trustees and hospital staff.

Ms. Jodi Corley, Clinic Systems Analyst, reported on the Merit-Based Incentive Payment System (MIPS) score for 2018 from the Centers for Medicare and Medicaid Services (CMS).

Dr. Lauridsen recognized medical staff scholarship recipients Ms. Alyssa Klingensmith from Rock Springs and Ms. Joseline Alatorre from Green River. Ms. Deb Sutton, Marketing and Public Relations Director, recognized Ms. Niushia Gonzales as the Rock Springs High School Health Academy scholarship recipient.

## CENTRAL PLANT UPGRADE ENGINEERS PRESENTATION

Mr. Jake Blevins of Spacek, Timbie and Blevins (ST&B) Engineering provided an update on the central plant upgrade project. The bid document package is progressing nicely. The bid opening will be at the August Building and Grounds Committee meeting.

#### **OLD BUSINESS**

## Quality Assessment Performance Improvement (QAPI) Plan

Ms. Kara Jackson, Quality Director, reviewed the information provided in the meeting packet. She said we are focusing efforts to bring in Lean as our quality improvement methodology. The motion to approve the QAPI Plan as presented was made by Dr. Sowada; second by Mr. Mathey. Motion carried. Ms. Jackson said additional in-depth information will be provided at the special workshop on quality in August.

## **NEW BUSINESS**

# Approval of Proposed Changes to Medical Staff Bylaws

Dr. Lauridsen reviewed the changes to current bylaws approved by the general medical staff on June 25. Mr. Jones said the Board will take action at the August meeting.

# Resolution Designating a Public Records Person at MHSC

The motion to approve and adopt the MHSC resolution to designate a public records person as presented by Ms. Suzan Campbell, Chief Legal Executive and General Counsel, was made by Mr. Mathey; second by Mr. Kelsey. Motion carried.

#### CHIEF EXECUTIVE OFFICER REPORT

Ms. Richardson provided a Strategic Plan update. She said we continue to work on medical staff bylaws. The next ambulance service discussion is August 5 and we continue to look at all options. Ms. Richardson provided a physician recruitment update. An annual report was presented to the Board of County Commissioners in June 18. Town Halls will be held the weeks of July 15 and 22.

Ms. Richardson thanked Mr. Kelsey for walking with hospital staff at the Flaming Gorge Days Parade in Green River.

## **COMMITTEE REPORTS**

## **Quality Committee**

Ms. Jackson announced the Hospital received a quality award from the Mountain-Pacific Quality Health (MPQH) regional quality group. The application focused heavily on the patient experience. We detailed our work with Planetree and care coordination. Ms. Jackson said another focus was opioid reduction, readmissions, adverse drug reactions, and MIPS. She said a lot of work is being done across the organization and expressed appreciation for everyone's hard work.

## **Human Resources Committee**

Mr. Tardoni said work on the code of conduct has become more complex. He thinks we made some progress. The Committee is reviewing legal requirements and implementation procedures for telecommuting.

## Finance and Audit Committee

*Capital Expenditures:* The motion to approve FY20-1 for hospital website redesign and host service as presented was made by Mr. Kelsey; second by Mr. Mathey. Motion carried. The motion to approve FY20-2 for intranet upgrades and website design as presented was made by Mr. Kelsey; second by Mr. Tardoni. Motion carried.

*Narratives:* Ms. Love reviewed the narrative highlights included in the meeting packet. We continue to see an increase in reductions of revenue. Mr. Kelsey suggested including more detailed information in reports when there is a discrepancy to explain the differences and why. Mr. Kelsey thanked Ms. Love and her staff for their efforts.

**Bad Debt:** The motion to approve the net potential bad debt of \$1,035,513.85 as presented was made by Mr. Kelsey; second by Dr. Sowada. Motion carried. Mr. Kelsey said we talked about adding more metrics regarding what is represented behind these numbers.

# **Building & Grounds Committee**

Mr. Jim Horan, Facilities Director, referenced the minutes from the last meeting in the packet. He reported we have LED lighting throughout the parking lot. The retaining wall project is almost complete. We experienced sprinkler and water issues. Mr. Horan apologized for the way the grass has looked and said things are turning around. He announced the Building and Grounds Committee meeting is moved to July 11 to take advantage of meeting with ST&B while they are on-site.

## Foundation Board

Ms. Tiffany Marshall, Foundation Director, said the golf tournament August 18 at Rolling Green in Green River is trending very nicely. The Donor Wall is still a work-in-progress. She hopes to have it up by the end of the year. The employee campaign third quarter numbers are higher than the annual goal and we still have three months to go. Dr. Jake Johnson has taken a step back from service on the Foundation Board. We hope to have a replacement medical staff representative soon. Trustees are invited to attend the Cancer Center 5 Year Celebration on August 22.

## **Compliance Committee**

Dr. Sowada reported Mr. Clayton Radakovich, Director of Compliance and Risk Management, continues to work on the risk assessment update. We are rolling out Fair Warning software which flags employees inappropriately in others' medical records. OSHA was onsite to look at heat in the laundry. Dr. Sowada reported we used a large part of the work Mr. Tardoni did when the Board first came together on the project to correct the heat issues. The Code of Conduct review continues.

Mr. Jones announced a ten-minute recess.

Mr. Jones called the meeting back to order at 4:10 p.m.

#### CONTRACT REVIEW

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

## MEDICAL STAFF REPORT

Dr. Lauridsen reported the Medical Executive Committee met June 18 and the General Medical Staff met June 25. Ms. Richardson treated the Medical Staff to a Bingo Night June 27. Dr. Israel Stewart is hosting Walk With A Doc July 16. Dr. Lauridsen said we need to meet as the Joint Conference Committee whenever the Board would like to meet. He reported the first half of the new bylaws are ready for review. Dr. Lauridsen presented an appreciation gift to Mr. Mathey and thanked him on behalf of the Medical Staff.

#### GOOD OF THE ORDER

Mr. Jones thanked Mr. Mathey for the note he included at the beginning of the meeting packet. The committee assignments will remain the same with the exception of Mr. Mathey replacing Mr. Jones on the Finance and Audit Committee. Mr. Jones said he is not a fan of keeping things the same but there is a lot going on right now and we will benefit from keeping things moving forward. Mr. Jones said that, as the new President, he will do things different. He asked that people not read anything into that. He is not sure what he will do different yet. Mr. Jones said Mr. Mathey did an excellent job and is to be commended because of his tremendous commitment of time and effort.

Mr. Kelsey asked again for staff to work with I.T. for microphones because the microphone we have on the podium is useless. He asked for information on anti-venom supplies at the hospital. Ms. Leslie Taylor, Clinic Director, reported we have anti-venom on-hand.

Mr. Tardoni said the increases in bad debt and reductions in revenue are significant. He said we are not going to compete our way out of it. He asked what can we do locally that is under our control. Mr. Tardoni asked if the Board would consider forming an ad hoc committee to see what we can do, something local and under our control to supplement these forces to find a gate in the fences closing in on us. Ms. Richardson agreed we want to look at every possible option to help us adjust to this new norm. She said the aggregate collected on charges for Medicare patients is 33%. Mr. Jones said he does not want to duplicate or create extra work. He asked Ms. Richardson and Ms. Love to get a group together to discuss.

#### **EXECUTIVE SESSION**

The motion to go into Executive Session for personnel reasons was made by Dr. Sowada; second by Mr. Kelsey. 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 June 11, 2019, Credentials Committee Recommendations for privileges as presented was made by Dr. Sowada; second by Mr. Mathey. Motion carried.

- 1. Initial Appointment to Locum Tenens Staff (1year)
  - Dr. Janene Glyn, Pediatrics
- 2. Initial Appointment to Consulting Staff (1 year)
  - Dr. Dipayan Chaudhuri, Cardiovascular Disease (U of U)
  - Dr. Albert Ybasco, Tele Radiology (Vrad)
    - o VRad schedule 1 list of Physicians
- 3. Initial Appointment to AHP Staff (1year)
  - Jacquelyn Lindsey, FNP Oncology
- 4. Reappointment to Consulting Staff (2 years)
  - Dr. Peter Hannon, Tele Stroke (U of U)
  - Dr. Roger Freedman, Cardiovascular Disease (U of U)
  - Dr. Lauren Theilen, Maternal/Fetal Medicine (U of U)
  - Dr. Marcela Smid, Maternal/Fetal Medicine (U of U)
- 5. Reappointment to Locum Tenens Staff (1 year)
  - Dr. Mary Murphy, Radiology (Advanced Medical Imaging)
  - Dr. Graham Brant-Zawadzki, Emergency Medicine (U of U)
  - Dr. Taylor Delgado, Emergency Medicine (U of U)
- 6. Reappointment to AHP Staff (2 years)
  - Bonnie Collins, LCSW (SWCS)

The motion to authorize the CEO to execute a new Chief Medical Officer agreement as presented was made by Mr. Mathey; second by Dr. Sowada. Motion carried.

## **ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 5:17 p.m.

Mr. Taylor Jones, President

Attest:

Mr. Ed Tardoni, Secretary