

Committee: Board of Trustees Monthly Meeting - Public Session

Meeting Date: October 1, 2019

Minutes Prepared By: Shannon Stec, Executive Assistant

Members Present:

Cynthia Hogan, Chair
Liz Masek, Vice Chair
Mike Tennican, Treasurer
Linda Aurelio, Secretary
Joe Albright
Bruce Hayse, MD
Scott Gibson

Members Absent:

Others Present:

John Kren, COO/CFO
Marsha Sensat
Lance Spranger
Richelle Heldwein
Marc Domskey, DO
Thom Kinney
Joan Goldfarb
Elizabeth Gilmour
Amrita Banjee
Tom Lubnau
Jim Johnston
Marty Trott, MD
Sandip Ray
Alisa Lane (phone)
Naomi Starceovich
Kate Finnegan
Terri Conger
Michelle Huntzinger

Board Advisors Present:

Sue Critzer
Debby Hopkins
Bill Best
Dave Robertson

Call to Order

The public board meeting was called to order at 4:05 p.m. by Chair Cynthia Hogan.

Approval of Minutes

Ms. Hogan asked for any questions or changes to the minutes of August 29, 2019.

A motion was made by Liz Masek to approve the minutes of the August 29, 2019 Board of Trustees regular meeting, the motion was seconded by Scott Gibson, and the motion passed unanimously.

Ms. Aurelio noted that the board would like to revise a motion from the August meeting in regards to change orders for Sage Living.

Ms. Aurelio moved to approve any Sage Living change order will be promptly reviewed by the CEO and his administrative team. If after review the CEO decides that any change order is necessary, the CEO will report the revision to the Facilities Committee members. If the change order is less than \$200,000, the CEO is authorized by the Board of Trustees to approve, modify, or deny the change order. Any change order that will cost \$200,000 or greater will require consultation with the Facilities Committee as well as Board of Trustee approval as provided in the board bylaws. The motion was seconded by Mr. Gibson. The motion passed unanimously.

Department Recognition by CEO

John Kren asked Marsha Sensat, CNO, to recognize the Case Management department. Ms. Sensat talked about the history of the department which has evolved from Social Services to a full Case Management department with a variety of different responsibilities. Just some of the tasks the department does on a daily basis include setting up services for patients once they are home (therapy, home health, hospice, Meals on Wheels, private care), facility placement for patients moving to different

care, prepare patients for admission into the hospital and follow them through discharge and prepare them for discharge, provide education to family members and caregivers, follow up with patients once they are discharged to reduce readmissions, and helping patients from out-of-town with travel and accommodations. The department was also crucial in building our swing bed program and helps to facilitate and manage it. Naomi Starceвич, Case Management Director, introduced her team.

Ms. Masek made comment and thanked the department for their work. We are so lucky to have case management as their work within the hospital is so important. Ms. Hogan noted that many times case management is dealing with patients when they are frightened and vulnerable and they can really make a difference in being there for the patient and their family. Mr. Kren said that case management has also been one of the reasons we've seen an increase in our patient experience scores.

Comments from the Chair

Ms. Hogan said that earlier today the Board of Trustees held interviews with four candidates as we look to find Ms. Masek's replacement. We had four very strong applicants which made the process really interesting. Each candidate had unique attributes that would be beneficial to the hospital. We hope to get to know each of the candidates more and possibly introduce them to the foundation. Thank you to each of our board members for participating in the interviews.

The board cast a anonymous vote and the unanimous decision was for Sue Critzer as the successor to Liz Masek's seat. Ms. Critzer thanked everyone for the opportunity to serve on the board.

Mr. Albright thanked everyone who applied for the position and said it was a very hard decision. Dr. Hayse said it's very encouraging to see such a strong field of applicants. Ms. Hogan said that she thinks the quality of the candidates is indicative of the good things going on within the hospital and the staff.

CEO Report

The CEO report was presented by John Kren, COO/CFO, in the absence of Dr. Beaupré.

Quality

- Our July HCAHPS scores were in the 90th percentile across all seven domains. This is a great achievement for our team as we often times see our scores slip during the summer months when we are busier. Several days in July we were full or nearly full so these scores are an impressive reflection of our team.
- DNV has accepted all of our action items and measures of success from our survey. We are currently conducting internal audits among our departments to get ready for ISO 9001 certification next year.
- We have started employee flu vaccines. Last year we had a vaccination rate of 99.1% and we hope to hit that mark or better this year.

Sage Living Update

- The modular medical offices are in place on campus and we are working to get them "sewn" together. We hope to have these offices occupied by late October.
- We are working on getting the infrastructure run to the new site. They are currently putting in water, sewer, and electrical. There will be a small power outage over the weekend as they run electrical to the site.
- Excavation for the basement begins next week and is expected to take approximately two weeks.
- We had our second Community Coffee on September 24th. The next one is scheduled for October 22nd.

Quarterly Medical Staff Meeting

- The medical staff reviewed and approved the Medical Staff Development Plan. We'll now start working on some of the action plans spelled out in the plan. The plan is not a legal document but rather a road map to help guide us.
- The group discussed the parking challenges around campus and administration shared some of the solutions we are working on to alleviate the challenges we are experiencing.
- There was a long discussion regarding our employed physicians and independent physicians and we are going to get a team together to try and better integrate these two groups.

Financials

- We've had a strong start to FY20 as compared to the past two years from an operating perspective.
- We are currently going through our preliminary audit on both the hospital and foundation side. We are still working on the final items but so far we have received positive comments from our auditors.

Community Outreach

- The Auxiliary Golf Tournament in early September was very successful with more than \$75,000 raised.
- We enjoyed a really fun evening with Rocking Sage Living. It was great to see the community's attendance and support of our project.
- Our urologist, Dr. Ted Morgan, did free prostate screenings last week. All appointment slots were booked and we had a long waiting list. We will offer a similar screening in Lander in November.
- Tonight at 5:30pm on the town square is our annual Light the Town Pink event. Everyone is invited to kickoff breast cancer awareness month with us.

Staff Updates

- Our Lander Medical Clinic will have a soft opening on October 28th and an official opening on November 4th.
- Thom Kinney, Director of HR, discussed our recent employee town halls. We conduct employee town halls quarterly and see these as an opportunity for an open dialogue with our staff. With our recent purchase of land in Alpine and as we prepare for the RFP process we decided it was a good time to get feedback from our staff on workforce housing. The staff who attended were very engaged and gave us some valuable feedback. From the town halls we were able to get a better idea of the demographic that would be interested in the Alpine housing as well as things that were most important to staff in terms of housing needs. We will look at options including having seasonal employees and travelers in Alpine as well as putting a time limit on the housing so that employees treat in more as transitional housing instead of permanent housing. We will continue to work with START on transportation options as well as look at partnering with other employers to fill all of the units.
- Lance Spranger, CIO, shared the "Customer of the Year" award we received in August from VMWare, one of our technology partners. As part of receiving the award VMWare made a video with our staff that highlights the efficiencies of our virtual desktop that allows us to focus on patient care. Mr. Spranger shared the video that was also played at two international conferences hosted by VMWare.

Mr. Kren asked for any questions.

Joint Committee on Quality and Safety – Ms. Masek reported on the committee meeting of September 23, 2019. Ms. Masek noted that there is so much discussion around quality and how we take it to every

part of the hospital. Ms. Masek asked Mr. Spranger to talk about a new AMA resource for physician burnout. Mr. Spranger told the group about a new app available to physicians aimed at reducing burnout.

Ms. Masek noted two policies from JCQS that require approval. The first is the Malpractice Insurance Policy. Ms. Heldwein clarified for Mr. Albright that the policy gives the board oversight on medical malpractice limits.

Mr. Albright moved to approve the Malpractice Insurance Policy as presented. Mr. Tennican seconded the motion. The motion passed unanimously.

Ms. Heldwein gave an overview of the Patient Safety Program Policy. The old policy used the word "sentinel event" which is a Joint Commission term so we have changed that to a neutral term. Mr. Albright noted that JCQS recommended the deletion of the word "at" in the 3rd line of the policy.

Mr. Albright moved to approve the Patient Safety Program Policy with the deletion of the word "at" in the 3rd line. Ms. Masek seconded the motion. The motion passed unanimously.

Ms. Aurelio asked to approve the Organizational Structure Policy with no changes made from the previous policy.

Mr. Gibson moved to approve the Organizational Structure Policy as presented. Ms. Masek seconded. The motion passed unanimously.

Dr. Domskey presented the Credentialing Report and noted there were no issues.

Mr. Albright moved to approve the Credentialing Report as presented. Ms. Aurelio seconded the motion. The motion passed unanimously.

The full credentialing report appears in Appendix A.

Finance, Audit and IT Committee – Scott Gibson reported on the committee meeting of September 27, 2019. Mr. Gibson talked about why we care about finance when we are a non-profit. If we don't have financial sustainability than quality doesn't matter. While we don't look to maximize our profits as a non-profit we do require profitability to invest in equipment, modernization, and facility expansion. We take the cash that we make and reinvest it into programs and services that don't make money like our Living Center and our emergency department. Mr. Gibson talked about Sage Living and the positives to our community including providing a new, modern facility that fills a community need and will give residents a "home" setting in a beautiful location. Sage Living is one of the few projects that we have ever embarked upon that has the potential to be a financial detriment to us. While we don't anticipate the project to be detrimental it is why we are putting so many resources into making it a successful endeavor. The Finance Committee has spent a great deal of time going over assumptions, programs that will fill the facility, and policies being created. The committee will review all of these items at a minimum every three months going forward. We hope that this continual review of Sage Living will lower the chances that we get any surprises. Mr. Tennican and Mr. Gibson talked about the importance of educating the community about new service lines that will be available at Sage Living and allowing patients who once had to go to facilities further away the opportunity to receive those services locally.

We had a terrific second month of the fiscal year. Our variances from last year are far in excess of our price increase so that is very positive. We are up over last year in every area. As a reminder last year we were seeing revenue growth but we were also seeing expense growth, a trend that isn't sustainable. Last month we saw a 17% increase to net revenue and while expenses grew, they only grew at 13% which is why we saw the creation of cash. We are still seeing a high rate of expense growth and administration and finance will continue to monitor this. Mr. Gibson gave an update on claims payments from Blue Cross Blue Shield. We normally have about a \$6 million float with them and currently that is running about \$12 million. It's a tender balance with BCBS as we have a good relationship with them but we also would like to see them lower this balance. Because of the BCBS payment lag our cash declined even though it shouldn't have.

Ms. Masek mentioned the number of title 25 days, noting that we budgeted for four days and actually had forty-eight. Mr. Kren said that those are hard to manage and with title patients we typically have to double staff. Ms. Masek also asked about the cost of oncology supplies and the use of the foundation to help patients afford those. Bill Best said the foundation is currently looking at some options to help with oncology costs and Mr. Kren also noted that we are working with Cardinal Health on a pilot program to cover the cost of drugs.

Mr. Gibson asked for any further questions or comments.

Human Resources Committee – Ms. Hogan said the committee has nothing to report at this time.

Facilities Committee – Mr. Albright reported on the meeting held on September 26, 2019.

Collin Smith and our Sage Living Owner's Representative, Kyle Gillette, updated the committee on recent work at the site by GE Johnson. The main recent emphasis has been on burying the new water, electrical and other utility lines. GE Johnson recently found a previously unknown manhole cover that had been buried under asphalt an unknown number of years ago. This resulted in a change order of approximately \$2,000, which Dr. Beaupré approved after hearing no objection from the Facilities Committee.

The committee heard an explanation from Kyle Gillette and Collin Smith of the exact procedure GE Johnson goes through in initiating a change order. Dr. Beaupré and the rest of the committee then agreed that once GE Johnson submits a document proposing a change order, Kyle and Collin will jointly make a recommendation to Dr. Beaupré about whether the change order should be accepted. The proposed change order and Kyle and Collin recommendation will be circulated to members of the Facilities Committee by email. If Facilities Committee members have any comments, they will expeditiously send them to Dr. Beaupré, who will be free to decide on proposed change orders up to \$200,000 the morning after he receives the proposed change order request. All change orders over \$200,000 require board approval.

Dr. Beaupré and John informed the committee of the following other developments:

- As expected, electrical power will be shut down to the POB and the Brown Building on the weekend of October 5 and 6. Special arrangements have been made to make sure all medications in those buildings that need refrigeration will be kept refrigerated.
- The modular building is being readied for occupancy, with a target time of the end of October. The space will be used for medical offices.

- Our Facilities team is nearing completion of the refitting of approximately 500 square feet of space for the expansion of the hospital-run Physical Therapy. This space was formerly occupied by Teton Orthopedics.
- Work on the parking lot east of the Baptist Church across from the hospital is almost finished. It will have 22 spaces reserved for staff parking, which should leave more parking space for patients near the office building.
- Administration has taken two further steps to alleviate parking issues: a) an agreement is being negotiated with the LDS Church for approximately 40 staff vehicles to park in the LDS lot several blocks from the hospital from Mondays through Fridays; and b) valet parking will resume for the winter season.
- Interior remodeling work has begun in the hospital to accommodate the new CT scanner, which is expected to become operational in the spring of 2020.
- The \$1.5 million roof replacement project, which has been delayed due to labor shortages experienced by the roofing contractor, should be completed in six weeks.

Mr. Albright asked for any questions.

Strategy Committee – Ms. Hogan gave an overview from the September 23, 2019 meeting. The committee had a lengthy discussion about oncology drugs and how we can reduce the cost and our charitable donations which are typically what happen when a patient cannot pay. Ms. Hogan thanked administration for the follow up work and the pilot program they are pursuing with Cardinal Health. We are hoping to get a process in place for future patients. Ms. Critzer asked who handled the work on the program and Mr. Kren responded that it was a team effort and required a lot of coordination from various departments. Ms. Masek asked if we had hired a new Director of Oncology. Ms. Sensat said that we had and the new director will start on October 28th and our new nurse practitioner will start in December. Mr. Kren added that Dr. Benjamin Solomon, who will be working along with Dr. Ward, has started coming up from the University of Utah as well.

Ms. Hogan gave a brief update on the lawsuit involving the brown building. The case is currently in the hands of lawyers. The worst case scenario for the community is that it delays the Sage Living project.

The committee also talked about ambulatory care centers. These are the direction of the future and most patients prefer the setting and reimbursements are trending in this direction as well.

Organizational Committee – Ms. Aurelio gave an overview from the board retreat that was held on September 16th at Spring Creek Ranch. Attendees included the board, administration, and medical staff. The objective of the retreat was to improve our collective performance and communications to better serve St. John's Health and the Jackson community. Ms. Aurelio said they have heard that some staff are unclear on what the board does or why they are in place so she went through the ten basic responsibilities of a non-profit board. Mr. Kinney noted that we will be adding a piece on the board to our new hire orientation. Ms. Aurelio said that trustees act as a resource to provide value and enable administration to make better decisions to run the organization more effectively. One of assignments for the trustees for the retreat was to come up with three to four board goals for 2020. The goals identified by the trustees for 2020 are: improve effectiveness, develop a formal succession plan, and improve strategy. Ms. Aurelio thanked everyone for their participation in the retreat. Ms. Hogan asked what we are going to do with the 2020 goals and suggested we create an action plan. Ms. Aurelio said the Organizational Committee will formalize a plan.

Foundation Report – Mr. Best gave the foundation report. We are still pulling together numbers from Rocking Sage Living but the event was really high energy and fun.

The foundation has reached their fundraising goal of \$19 million with 76% of those funds already collected. The foundation will continue to fund raise and anything over the \$19 million will go to paying for the value engineered add-alternates that had to be cut to reduce the project cost.

The foundation had some financial reconciliation issues but with the combined effort of Debby Hopkins, Alisa Lane, finance director, and John Kren, COO/CFO, we have worked through them and resolved all issues. The foundation has also hired a new staff member to replace Mary Katherine King and she will be a great addition to the team.

Old Business – No old business.

New Business – No new business.

Public Comment – No public comment.

Next Meeting

The next regular monthly meeting will be Thursday, November 21, 2019. Public session will be held at 4:00 p.m., executive session will be held at 3:00 p.m.

Adjournment

Ms. Hogan adjourned the meeting at 5:25 p.m.

Respectfully submitted,
Shannon Stec, Executive Assistant

Appendix A

Initial Appointment Applications

The Credentials Committee reviewed and recommends approval of the following initial appointments from October 1, 2019 to September 30, 2020:

- A. Cutler, Michael, MD; Active- Provisional; Cardiology
- B. Day, John, MD; Active- Provisional; Cardiology
- C. Mahoney, Kyle, MD; Active- Provisional; Neurology
- D. Osborn, Jeffrey, MD; Active- Provisional; Cardiology
- E. Parkinson, Justin, MD; Active- Provisional; Urology
 - Recommendation that this provider be reminded that approval of Active staff membership will require participation in ER call.
- F. Parnes, Devyn, PA; Allied Health
 - Supervising Practitioner: C. Hills, DO
- G. Poteet, Lore, CRNA; Allied Health
 - Supervising Practitioners: M. Domskey, DO & D. Tomlinson, MD

Delegated Credentialing- University of Utah

- H. Peters, Angela, MD; Consulting- Provisional; Neurology- Telemedicine
- I. Newman, Blake, MD; Consulting- Provisional; Neurology- Telemedicine
- J. Arain, Amir, MD; Consulting- Provisional; Neurology- Telemedicine

Reappointment Applications

After review of the reappointment file, including OPPE information, the Credentials Committee reviewed and recommends approval of the following reappointments from October 1, 2019 to September 30, 2021:

- A. Carr, Kerry, FNP; Allied Health
 - Supervising Practitioner: J. Ward, MD
- B. Fisher, Brandon, DO; Active; Oncology
- C. Hayse, Bruce, MD; Active; Family Medicine
 - Conditional reappointment requirements have been verified as completed
- D. Hills, Christopher, DO; Active; Orthopaedics- Spine
- E. Little, Jr., Jim; Active; Family Medicine
 - 1 new privilege request
- F. Little, Sr., Jim; Active; Pediatrics
- G. Lofaro, Maura, MD; Active; Obstetrics & Gynecology
- H. McDaniel, Sarah "Katy, CRNA; Allied Health
 - Supervising Practitioners: M. Domskey, DO & D. Tomlinson, MD
- I. McKinney, Gregory, CRNA; Allied Health
 - Supervising Practitioners: M. Domskey, DO & D. Tomlinson, MD
- J. Racette, Aimee, CRNA; Allied Health
 - Supervising Practitioners: M. Domskey, DO & D. Tomlinson, MD
- K. Renner, David, MD; Courtesy, Neurology
 - 4 new privilege requests, 3 privilege withdrawals
 - Clarification will be obtained and privileges will align with updated practice plan
- L. Shlim, David, MD; Consulting, Family Medicine- Travel Medicine
- M. Su, Jason, DO; Consulting; Cardiovascular Disease- Pediatric Telemedicine
 - 8 new privilege requests

