

Johnson County Hospital District

BOARD MINUTES

February 24, 2021

The Board of Trustees of Johnson County Hospital District met for its February Board Meeting on Wednesday February 24, 2021 at 6:35 P.M. in the Lake Angeline Conference Room. The following members were present:

Mark Schueler, M.D., President  
Cristy Kinghorn, Secretary  
Tom Holt, Board Member  
Alecia Kozisek, Board Member  
Tom Berry, DVM, Board Member

Those Absent:

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Others Present:

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Sean McCallister – CEO  
Becky Rodriguez – Administration  
Crystal Smith – Family Medical Center Director  
Mary Litzel – JCHC DON  
Amanda Walter – Home Health/Hospice Director  
Laurie Hansen – Director of Administration  
Brenda Gorm – AHCC DON  
Jennifer Burden – Marketing  
Ryan Ludwig, M.D.  
Amber Kinner, D.O.  
Ryan – Buffalo Bulletin  
Aaron Palmer – Big Horn Mountain Radio

Dr. Schueler called the meeting to order. Alecia Kozisek made a motion to approve the minutes from the January 27, 2021 board meeting. Cristy Kinghorn seconded the motion. All members voted in favor of the motion.

Dr. Ludwig, Chief of Staff, thanked the board on behalf of all providers for the hazard payout. He informed the board that the changes with the compensation model have been well received. Also, COVID has been slowing and the number of active COVID patients has declined.

Crystal Smith, RN, stated that the clinic was slower in January, but February is busier. She mentioned that clinic nurses are acclimating to the new physician compensation model's impact on their traditional staffing model and workflows. Jolene Rodriguez will start going to Kaycee twice per week to serve as a receptionist and medical assistant.

Sean discussed the need for JCHC to acquire a new electronic medical record (EMR) system that creates a single medical record platform across the entire JCHC campus. He is scheduling demos at Sheridan Memorial Hospital and Red Lodge MT. In addition to the EMR, we want to learn more about swing bed and same-day clinic strategies when we visit Red Lodge.

Sean informed the board that Sheridan Memorial Hospital recently announced that they are fundraising to build a transitional care unit, which could compete directly with JCHC's swing bed program.

Tom Holt mentioned training for board members offered through the Wyoming Hospital Association and stated that he would like more information on the training. Sean

Discussion ensued about next steps for JCHC's master site plan. Sean mentioned that he and Tom Holt had discussed a potential funding opportunity based on Cheyenne Regional Medical Center recently refinancing its debt on a major 2012 expansion project. With interest rates at historical lows, this is an optimal time to further explore financing options. Sean stated that, with the board's permission, he will reach out to an investment bank representative with Tom Holt and Becky Rodriguez. Sean wants to reengage Plan One Architects to assess the master site plan status in relation to our completed COVID projects. The board agreed the time is right to move the work forward.

Becky Rodriguez and Sean McCallister presented the Board with December 2020 month-end and year-to-date financial performance results.

Dr. Schueler informed the board that JCHC is in a position to pay off its nearly \$600,000 loan to the Foundation for AHCC construction. The topic was raised previously in the 02/24/21 Foundation board meeting. General consensus is that the Foundation has the ability to invest the money either short- or long-term and will provide enhanced benefit to healthcare for the community. Meanwhile, JCHC will achieve significant savings in loan interest and end its biannual loan payment obligation. After further discussion, Tom Berry made a motion to pay off the remaining loan balance of \$594,196.63 plus \$2,279.11 in interest for a total of \$596,475.74, owed to the Foundation. Cristy Kinghorn seconded the motion. All members voted in favor of the motion.

Sean briefly discussed the concept of "funded depreciation" related to recent construction and remodel projects and stated he will present more information at a later meeting.

Cristy made a motion to go into Executive Session. Alecia Kozisek seconded the motion. All members voted in favor of the motion.

Alecia Kozisek made a motion to end the Executive Session at 8:15 P.M. Cristy Kinghorn seconded the motion. All members voted in favor of the motion.

# JOHNSON COUNTY HEALTHCARE CENTER 2021 KEY QUALITY INCIDATORS SUMMARY

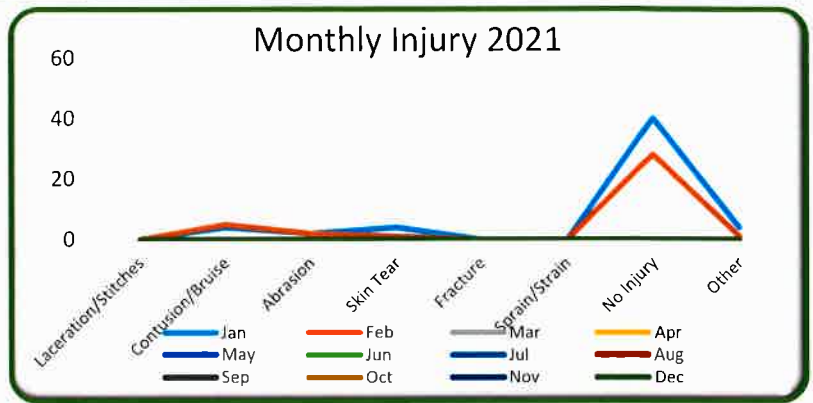
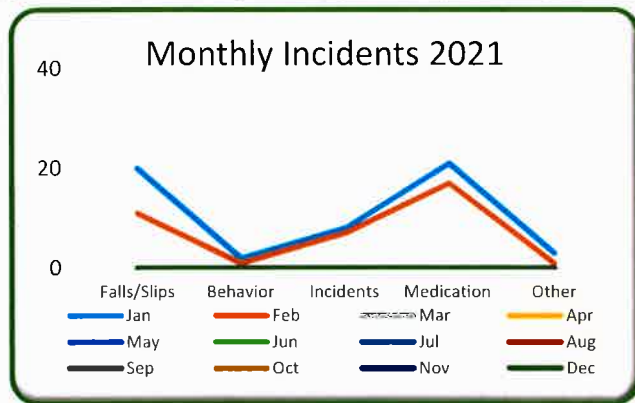
## KEY:

Red – the number / percent is worse  
Green – the number / percent is better  
Yellow = number / percent is unchanged

### INCIDENTS AND INJURIES

#### Patient/Resident – February 2021

Type of Incident	JCHC	AHCC	HH	Hsp	2/2021	2/2020	1 <sup>st</sup> qtr	2 <sup>nd</sup> qtr	3 <sup>rd</sup> qtr	4 <sup>th</sup> qtr	YTD	YTD 2020
Falls/Slips	2	7	2	0	11	22	31				31	36
Behavior	0	1	0	0	1	7	3				3	14
Incidents	0	7	0	0	7	7	15				15	22
Medication	2	15	0	0	17	3	38				38	8
Other	0	0	1	0	1	0	4				4	2
Type of Injury	JCHC	AHCC	HH	Hsp	2/2021	2/2020	1 <sup>st</sup> qtr	2 <sup>nd</sup> qtr	3 <sup>rd</sup> qtr	4 <sup>th</sup> qtr	YTD	YTD 2020
Laceration/Stitches	0	0	0	0	0	0	0				0	0
Contusion/Bruise	0	4	1	0	5	5	9				9	9
Abrasion	0	1	1	0	2	1	4				4	3
Skin Tear	0	1	0	0	1	8	5				5	15
Fracture	0	0	0	0	0	0	0				0	0
Sprain/Strain	0	0	0	0	0	0	0				0	2
No Injury	3	24	1	0	28	24	68				68	48
Other	1	0	0	0	1	1	5				5	5
<b>TOTALS</b>	<b>4</b>	<b>30</b>	<b>3</b>	<b>0</b>	<b>37</b>	<b>39</b>	<b>91</b>				<b>91</b>	<b>82</b>



#### Employee/Volunteer/Other – February 2021

Type of Incident	Emp	Vol	Other	2/2021	2/2020	1 <sup>st</sup> qtr	2 <sup>nd</sup> qtr	3 <sup>rd</sup> qtr	4 <sup>th</sup> qtr	YTD	YTD 2020
Falls/Slips	0	0	0	0	3	0				0	4
Lifting/Transfer	2	0	0	2	0	1				3	1
Blood/Body Fluid Exposure	1	0	0	1	0	0				1	0
Behavior	0	0	0	0	0	0				0	0
Medication	0	0	0	0	0	0				0	0
Other	1	0	0	1	4	2				3	9
Type of Injury	Emp	Vol	Other	2/2021	2/2020	1 <sup>st</sup> qtr	2 <sup>nd</sup> qtr	3 <sup>rd</sup> qtr	4 <sup>th</sup> qtr	YTD	YTD 2020
Laceration/Cut	0	0	0	0	0	0				0	0
Contusion/Bruise	1	0	0	1	1	0				1	1
Burn	0	0	0	0	1	0				0	1
Fracture	0	0	0	0	0	0				0	0
Sprain/Strain	2	0	0	2	2	1				3	4
Possible Exposure	1	0	0	1	0	0				1	0
No Injury	0	0	0	0	3	1				1	8
Other	0	0	0	0	0	1				1	0
<b>TOTALS</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>7</b>	<b>3</b>				<b>7</b>	<b>14</b>

#### Complaints – February 2021

Person(s) Involved	Hospital	AHCC	Clinic	Other	Home Health	Hospice	2/2021	2/2020	1 <sup>st</sup> qtr	2 <sup>nd</sup> qtr	3 <sup>rd</sup> qtr	4 <sup>th</sup> qtr	YTD	YTD 2020
Staff – Patient/Resident	0	0	0	0	0	0	0	0	0				0	0
Staff – Other Staff	0	0	0	0	0	0	0	0	0				0	0
Staff – Other	0	0	0	0	0	0	0	0	0				0	0
Patient/Resident – Billing	1	0	0	0	0	0	1	0	1				2	0
Patient/Resident – Care	1	0	0	0	0	0	1	0	1				2	0
Patient/Resident – Dietary	0	0	0	0	0	0	0	0	0				0	1
Patient/Resident – Other	0	0	0	0	0	0	0	0	0				0	1
Family – Billing	0	0	0	0	0	0	0	0	0				0	0
Family – Care	0	0	0	0	0	0	0	0	0				0	0
Family – Other	0	0	0	0	0	0	0	0	2				2	0
Visitor	0	0	0	0	0	0	0	0	0				0	0
Other	0	0	0	0	0	0	0	0	0				0	0
<b>Totals</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>4</b>				<b>6</b>	<b>2</b>

## HCAHPS Scores for 2019, 2020

4<sup>th</sup> qtr 2019 – 75 sent and 32 returned = 43% response rate – up 10%  
 1<sup>st</sup> qtr 2020 – 92 sent and 45 returned = 49% response rate – up 6%  
 2<sup>nd</sup> qtr 2020 – 58 sent and 23 returned = 40% response rate – down 9%;  
 3<sup>rd</sup> qtr 2020 – 77 sent and 22 returned = 29% response rate – down 11%; small response rate

### Trend Information (Scores are % not number)

Top Box = Always; Middle Box = Usually; Bottom Boxes = Sometimes/Never

	3Q 2020 Top Box	2Q 2020 Top Box	1Q 2020 Top Box	4Q 2019 Top Box	+/- Trend
1. How often did nurses treat you with courtesy and respect?	95	91	84	94	7
2. How often did nurses listen carefully to you?	86	70	78	84	-8
3. How often did nurses explain things in a way you could understand?	71	78	71	80	7
4. After you pressed the call button, how often did you get help as soon as you wanted it?	65	71	71	79	0
5. How often did doctors treat you with courtesy and respect?	95	87	84	97	3
6. How often did doctors listen carefully to you?	86	68	82	87	-14
7. How often did doctors explain things in a way you could understand?	82	78	78	90	0
8. How often were your room and bathroom kept clean?	67	82	86	77	-4
9. How often was the area around your room quiet at night?	68	78	59	66	19
11. How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?	70	81	67	67	15
13. Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?	86	62	78	93	-16
14. Before giving you any new medicine, how often did staff describe possible side effects in way you understand?	64	54	60	69	-6
20. Preferences taken into account about healthcare needs when I left.	55	48	52	52	-4
21. When leaving, I had good understanding of my responsibilities for managing health.	62	43	45	61	-2
22. When leaving, I understood the purpose of each medication	82	63	43	76	20
16. Staff talked about whether you would have help when you left.	100	86	72	79	14
17. Provided information in writing about symptoms/health problems to look out for.	95	100	84	83	16

### Global Items

CMS October 2020 Report  
(Jan 2019 - Dec 2019 Discharges)

	Top Box = High (Yes)	Bottom Box = Low (No)	Middle Box	2Q 2020 Top Box	1Q 2020 Top Box	4Q 2019 Top Box	Top Box = High (Yes)	Bottom Box = Low (No)
Overall rating of hospital (Q18)	86	9	5	70	70	70	71	73
Willingness to recommend hospital (Q19)	82	5	14	74	71	74	72	72

### Supplemental Questions

#### Is there something our team members do well?

- Put patients at ease! Send me on to get help I needed.
- Gave me a very pleasant stay.
- Very caring, friendly, positive and comforting. They made me feel very comfortable and secure.
- Nursing, L and D, surgery and other team members were very compassionate and caring. We -myself, husband and newborn felt truly cared for.
- Personable, attentive, timely.
- Team effort.
- Very caring!
- They all seem to work well together and share all necessary information when changing shifts.
- Run a good tight ship.
- My stay was very pleasant with a very attentive staff. I personally resent being a burden to others. The staff helped alleviate that feeling. Thank you.
- Everything! They were all great! Thank you! :-)
- The nurses were excellent – even those in training. Transitions were smooth.
- Everything.
- Dr. Rice was phenomenal. She is an exceptional and attentive doctor. The nurses were helpful.
- Making you feel safe and truly cared about.

#### Is there something our team members could improve on?

- With hard of hearing. This is an ADA issue.
- All did their job well.
- Wish the hospital participated in the Bee and Daisy award program for the nurses and CNA's.
- No.
- Nothing.
- Pay more attention to the patients!
- Keep it up – it's an ever-changing both professionally and technically. [As written].
- When we were ready to leave the checkout procedure was on sure (*I think this should be unsure*). More information about checkout.
- No.
- I was supposed to be on a low carb/sugar diet due to high glucose levels, and the kitchen sent me French toast, juice, etc. Nutrition needs to be improved.
- Not that I can think of.



## Additional Patient/Resident Safety Information – FEBRUARY 2021

**Outpt includes: Outpatient: surgery, scopes, chemotherapy, and IV therapy**

JCHC	1st	2nd	3rd	4th	Year
Sentinel Event	0				
Near Miss	0				
Adverse Outcomes	2				
Complications of Surgery	3				
Complications of Scopes	0				
Unintended outcome of Surgery	1				
Transfusion Reaction	0				
Contrast Injection Reactions	0				
Complication of Radiology	0				
Adverse Drug Reactions	0				
Decubs - Hospital Acquired	0				

Home Health	1st	2nd	3rd	4th	Year
Sentinel Event	0	0			
Near Miss	0	0			
Adverse Outcomes	0	0			
Skin Breakdown	0	0			
Adverse Drug Reactions	0	0			

AHCC	1st	2nd	3rd	4th	Year
Sentinel Event	0				
Near Miss	0				
Adverse Outcomes	0				
Medication Errors	15				
Unaccounted Meds	19				
Adverse Drug Reactions	0				
Decubs at end of mth	8				
Weight Loss > 5% in 1 mth	?				
Weight Loss > 10% in 6 mth	?				

Hospice	1st	2nd	3rd	4th	Year
Sentinel Event	0	0			
Near Miss	0	0			
Adverse Outcomes	0	0			
Skin Breakdown	0	0			
Adverse Drug Reactions	0	0			

Cardiopulmonary Rehab 2021	Jan & Feb 2021	2nd qtr	3rd qtr	4th qtr
Cardiac Rehab patients	6			
Cardiac Rehab sessions	27			
Pulmonary Rehab/TRS patients	1			
Pulmonary Rehab/TRS sessions	0			
Holter Monitor	5			
Exercise Stress Test	3			
Six Minute Walk Test	1			
Pulmonary Function Test	7			

( ) = Lost sessions r/t COVID-19

**Prevent T2 Class** – the 12-month lifestyle change program to prevent or delay Type 2 Diabetes; none in Mar & Apr r/t COVID-19

Prevent T2 – 1 <sup>st</sup> session	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
# of participants/month	18	13	13	11	11	11	11	11	11	11	11	11
# of classes	3	4	3	3	4	4	0	0	2	5	3	1
Prevent T2 - 2 <sup>nd</sup> session	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
# of participants/month	7	7	7	7	6	6						
# of classes	4	2	4	4	3	3						

## 2021 MEDICATION PASSES



	February	Budget	Variance	YTD	Budget	Variance
<b>Gross Patient Revenue</b>	2,253,505	2,329,089	(75,584)	20,215,952	20,312,175	(96,223)
<b>Other Op Revenue</b>	2,500,249	(64,043)	2,564,292	2,918,280	223,548	2,694,732
<b>Deductions</b>	(439,483)	(811,595)	372,112	(5,927,962)	(7,167,455)	1,239,493
	\$4,314,271	\$1,453,451	\$2,860,820	\$17,206,270	\$13,368,268	\$3,838,002
<b>Expenses</b>	(2,735,698)	(1,919,425)	(816,274)	(16,848,328)	(15,083,312)	(1,765,016)
<b>Operating Gain/Loss</b>	\$1,578,573	(\$465,973)	\$2,044,546	\$357,941	(\$1,715,045)	\$2,072,986
<b>Non-Operating Revenue</b>	199,674	198,824	850	2,023,095	1,454,538	568,558
<b>Net Gain/Loss</b>	\$1,778,247	(\$267,149)	\$2,045,396	\$2,381,036	(\$260,507)	\$2,641,543

Other OP Revenue \$2,497,396 SLIB Construction Project

\*Remaining \$593,762 was received in March

Expenses

Salaries

\$850,000 Hazard Payout

Supplies

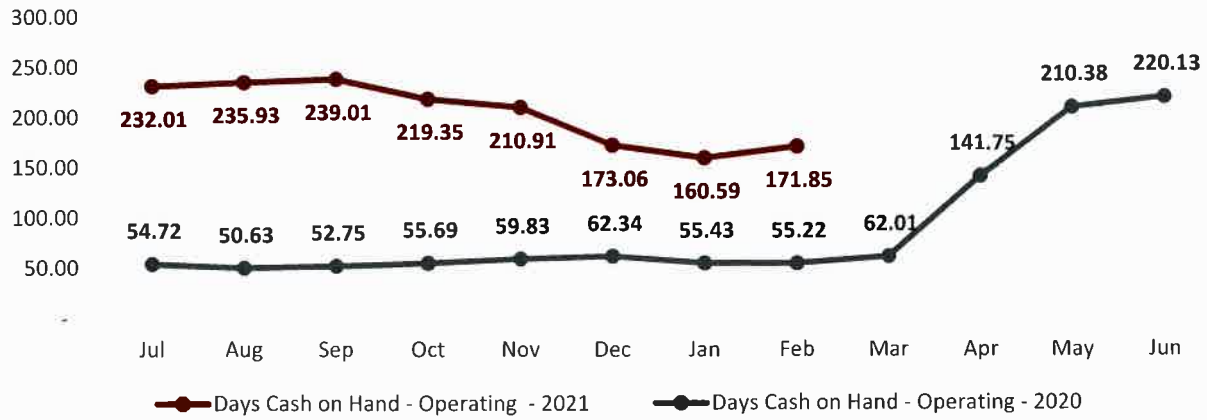
Surgery - additional \$58,800 in supplies related to specific surgeries

AVERAGE # PT. PER DAY	July	August	Sept	Oct	Nov	Dec	Jan	Feb	Feb Budget	YTD	YTD Budget	Variance
ACUTE CARE	1.5	1.6	2.0	3.4	2.9	4.5	2.2	2.4	2.1	2.6	2.0	0.6
ICU	0.2	0.2	0.2	0.0	0.3	0.3	0.4	0.6	0.5	0.3	0.3	0.0
SWING BED	2.3	2.5	2.0	3.5	2.6	2.9	4.6	2.0	3.8	2.8	3.2	-0.4
HOSPICE	0.3	0.6	0.0	0.3	0.1	0.1	0.2	0.2	1.0	0.3	0.3	0.0
TOTAL HOSPITAL	4.3	4.9	4.2	7.2	5.9	7.8	7.4	5.2	7.4	6.0	5.8	0.2
CARE CENTER	39.2	39.9	38.5	37.6	38.7	39.1	38.8	38.6	42.5	38.9	42.5	-3.6

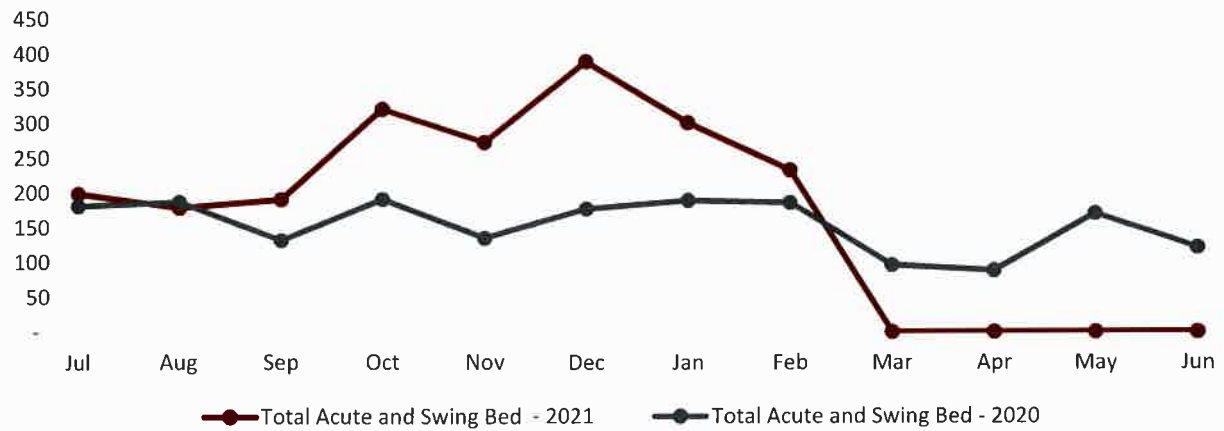
**STATISTICS BY DEPARTMENT**

	July	August	Sept	Oct	Nov	Dec	Jan	Feb	Feb Budget	YTD	YTD Budget	Variance
DELIVERIES	5	5	5	5	5	2	6	2	4	35	28	7
OPERATING ROOM	21	15	14	17	10	15	21	15	14	128	105	23
SCOPE PROCEDURES	52	34	35	46	26	29	30	47	28	299	268	31
ER	273	265	248	213	189	203	181	180	205	1,752	2,030	-278
EKG	52	59	70	68	45	43	48	51	51	436	63	373
RADIOLOGY	510	470	466	509	417	501	464	409	381	3,746	3,811	-65
PHY/OCC THERAPY	960	1,109	1,014	1,042	609	887	1,022	931	1,140	7,574	10,083	-2509
MINUTES- ANESTHESIA	3,079	2,156	2,239	3,107	1,807	1,772	3,898	1,955	2,416	20,013	18,468	1545
CLINIC VISITS	1,218	975	1,418	1,667	1,376	1,117	1,120	1,065	1,316	9,956	11,892	-1936
HOSPICE TOT VISITS	57	55	0	16	23	44	35	56	59	286	382	-96
HOME HEALTH VISITS	317	346	315	369	277	357	260	262	256	2,503	1,961	542

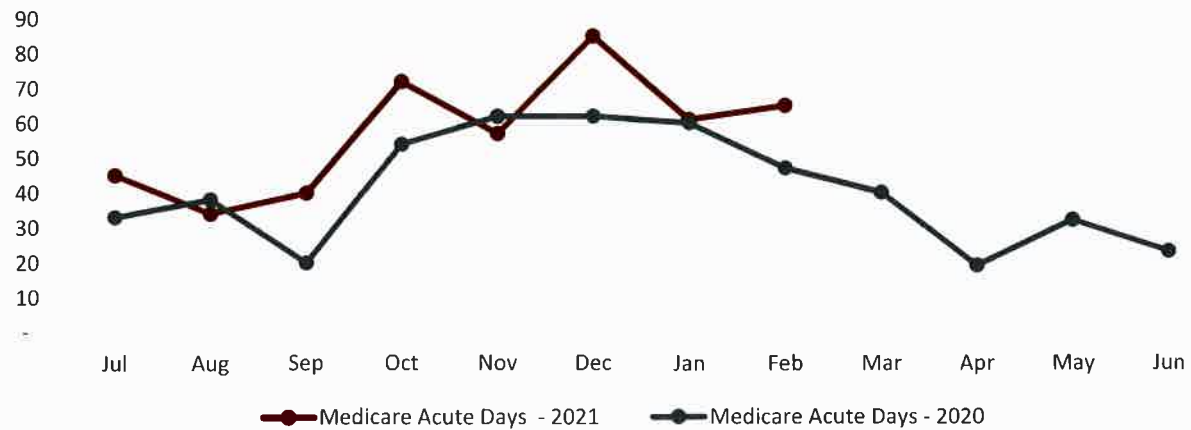
### Days Cash on Hand - Operating



### Hospital Inpatient Days

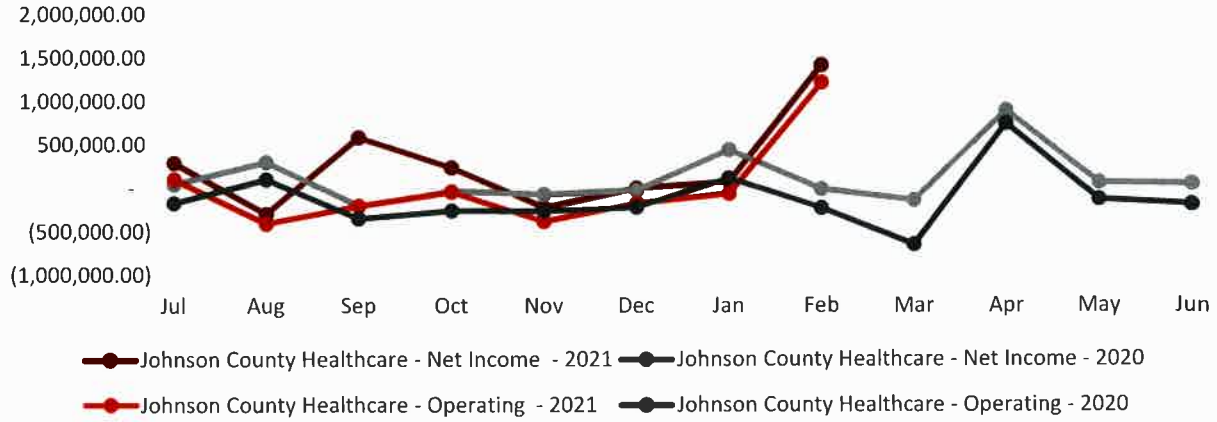


### Acute Days

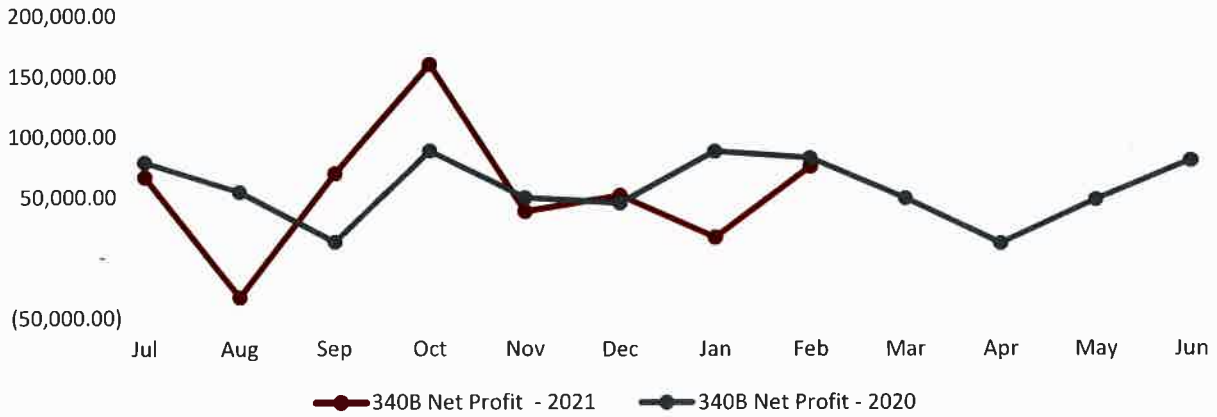




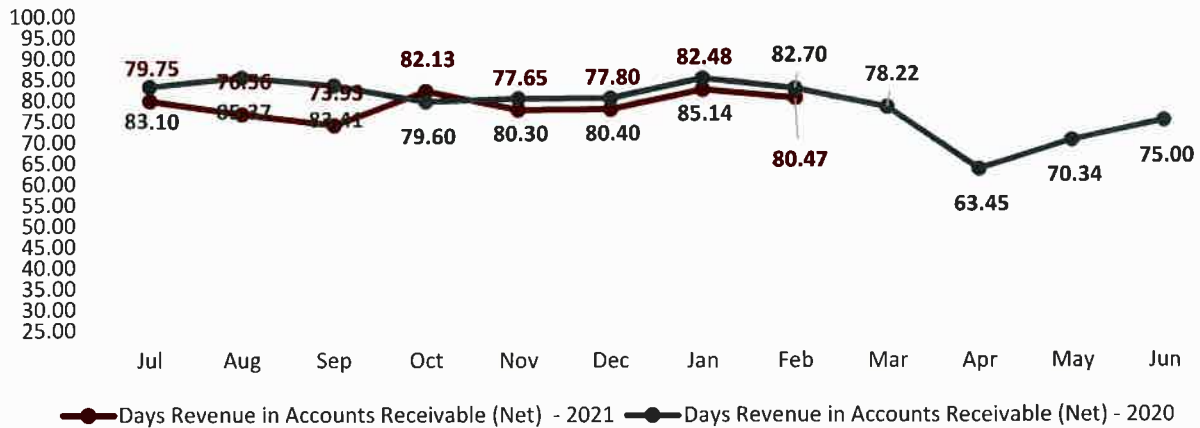
### Johnson County Healthcare Profit (Loss)



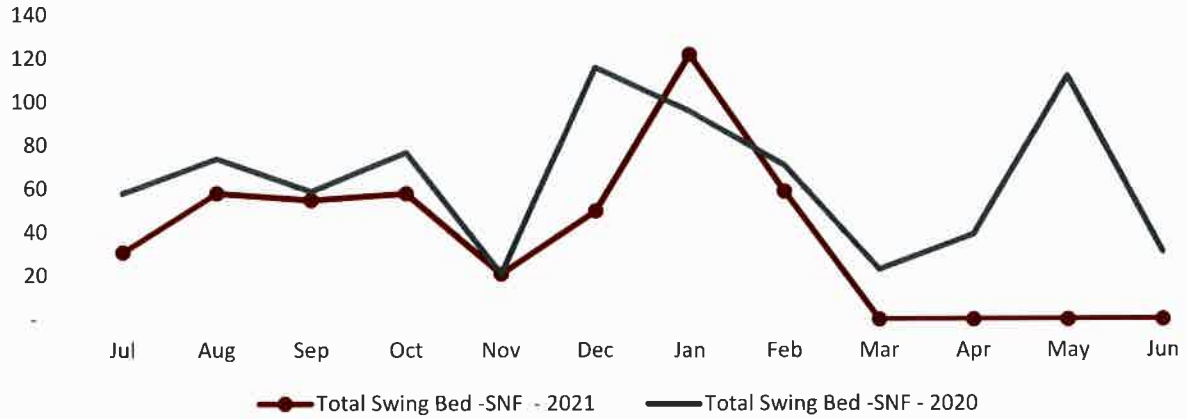
### 340B Net Profit



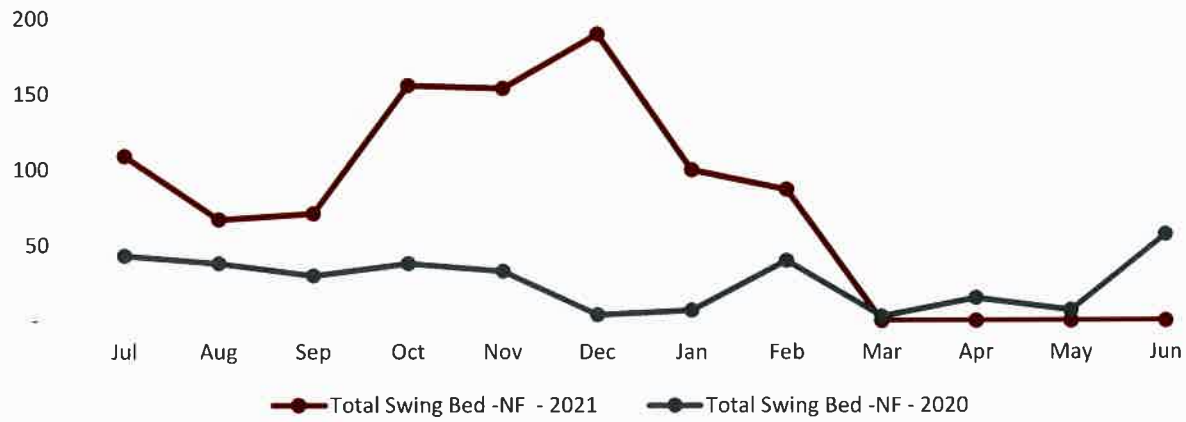
### Days Revenue in Accounts Receivable (Net)



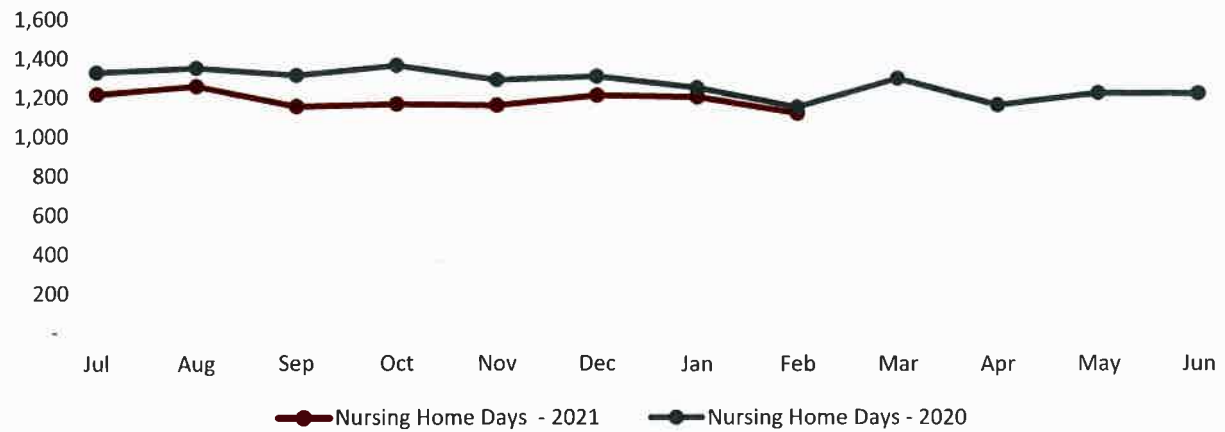
### Skilled Swing Bed Days



### Intermediate Swing Bed Days



### Nursing Home Days





# **CAPITAL PURCHASE REQUEST**

## **EMPLOYEE HEALTH SOFTWARE**

**3/31/21**

### **SITUATION**

JCHC can use CARES Act funding to purchase and implement software used to track, document and manager employee health compliance.

### **BACKGROUND**

Employees in a healthcare setting are at risk for exposure to a multitude of diseases and injuries. It is required that healthcare employers mitigate that risk wherever possible. This includes, but is not limited to, vaccination against vaccine-preventable diseases and fit testing to ensure proper protection from airborne diseases. Many of these tasks also require tracking and reporting to various agencies such as the Wyoming Department of Health and the National Health and Safety Network. This task has become increasingly complex with the addition of the COVID pandemic. In addition, employee incidents and injuries are tracked manually.

### **ASSESSMENT**

Currently, all requirements for each employee (including volunteers) are manually tracked vis-a-vis paper charts for all of our 263 employees and volunteers. Department/facility compliance is tracked manually as well. These processes are both inefficient and prone to errors. Workers compensation claims, employee incidents and injuries are not always reported or handled in a timely or correct manner.

After demoing products from two different vendors, the JCHC team selected Net Health's *Agility EH Software* based on interoperability, comprehensive features, ease of use and efficacy. Net Health guarantees that the software will be installed prior to the 06/30/21 CARES Act COVID stimulus funding deadline.

### **RECOMMENDATION**

Purchase Net Health *Agility EH Software* for \$57,145 that includes the software, implementation and a 3-year subscription. After 3 years, the recurring subscription cost is approximately \$1,000/month.

### **Agility EH Software Package includes:**

- **Agility EH Software:** 2 concurrent users
- **File Bridge Connectivity to HR**
- **Implementation/Training:** Net Health U; Live Remote
- **Adobe Active Forms License (2)**
- **Employee and Manager Portals**
- **Employee Health Dashboard**
- **Mobile Immunization Tracking Application**
- **Iron Bridge Interface to state of WY**
- **Lab Interface Orders and Results to hospital Lab**