

STEELE MEMORIAL MEDICAL CENTER

203 S. DAISY ST. ~ SALMON, IDAHO 83467 ~ (208)756-5600 ~ FAX (208) 756-4169

BOARD OF DIRECTOR'S MEETING

January 23, 2024

MINUTES

MEMBERS PRESENT: Jean Anders, Chair
Chuck Bloodgood, Vice Chair
David Weston
Chuck Mark
Diana Ketterling
Lori Stacy
Robert Frahme
Ex Officio:
Preston Becker, CEO
Joe Krakker, DO, Chief of Staff
Kim Kesl, Lemhi County Commissioner-Voting

OTHERS PRESENT: Ryan Larson, CFO
Kelly McNitt, CNO
Shawn Huston, CQO
Linda Taylor, Imaging Director

ABSENT: Dennis Krasowski, Treasurer

Minutes recorded by Judy Washbon, Executive Assistant / Med Staff Svc Director

CALL TO ORDER: The meeting was called to order at 4:30 p.m. by J. Anders.

EXECUTIVE SESSION: **MOTION:** Motion was made and seconded to move into executive session under Idaho Code 74-206(1)(a)(b)(c) to consider: Provider Credentialing; Property Acquisition; Personnel Discussion; Employee Compensation: Motion carried unanimously by rollcall. Executive session adjourned at 4:51 p.m.

PUBLIC COMMENT: None

FINANCE

COMMITTEE REPORT:

November – December

Financial Reports:

R. Larson reviewed and discussed both the November and December financial reports and provided a brief overview of the financial narratives. November saw strong revenue, but higher expenses. The December financials reflected less revenue than the previous month. The overall financial performance for December was a net loss of \$110,726. The month had a negative EBITDA of \$74,612K; EBITDA on a percentage basis was a negative 2.8% for the month. Total patient services revenue was \$4.5MM, which is lower than the prior month by \$500K; Day's cash on hand is at 98 days for the month. R. Larson reported that January financials are looking very positive.

MOTION: Motion was made and seconded to approve the November and December Finance reports as presented. Motion carried unanimously.

*Quarterly Quality
& Compliance Report:*

S. Huston reviewed and discussed the quarterly Quality & Compliance report and noted the Quality Council met yesterday morning. The summary included but was not limited to reporting and discussions on the following:

- Reviewed policies, no new policies for the previous quarter;
- Reviewed education and training;
- Reviewed compliance training, which is assigned to all employees and volunteers, including board members;
- There were no hotline reports;
- Reviewed and discussed Press Ganey; one of our goals is to create a campaign to market the importance of patient surveys. There are strict guidelines and patients cannot be advised or asked to complete surveys, etc.;
- Reviewed ActionCue, the quality monitoring dashboard. Several of the current PI studies were reviewed;

S. Huston will be presenting at the Yellowstone Risk Management conference and will be discussing and sharing our improvements with occurrence reporting. Occurrence reporting are learning opportunities for improvement and not intended to be punitive.

*Community Stakeholders
Committee Report:*

D. Ketterling reported on the recent January 3rd Community Stakeholders Committee meeting. The committee was originally created to involve the community and as a forum for community questions and concerns. D. Ketterling noted she feels the community is well informed on board meetings and the public is welcome and encouraged to attend board meetings. The committee has decided not to schedule any further meetings as there is no longer a need or clear objective. Meetings could be scheduled in the future should the need arise.

*Other Business:
Provider A-E Appointment
Credentialing Reports:*

MOTION: Motion was made and seconded to approve Providers A-E new appointment Credentialing Reports as presented in executive session. Motion carried unanimously.

*Employee Incentive
Compensation:*

MOTION: Motion was made and seconded to approve the employee incentive compensation recommendation as presented in executive session. Motion carried unanimously.

Board Education:

J. Anders led a discussion on board education and reviewed the previous assignment of reading the first chapter of "The Guide to Good Governance for Hospital Boards". Discussions followed on duty of obedience, duty of loyalty, and hospital stakeholders. Also discussed was the importance of confidentiality. Transparency is very important and if there are questions or concerns, they should be brought back to the board for discussion.

J. Anders assigned Trustees to read the second chapter and to discuss at the February board meeting.

Other: None

CONSENT CALENDAR: Included in the consent calendar were the following items:

- Minutes from the November 28, 2023 meeting;
 - Administration reports were discussed;
- P. Becker, CEO reported:
- A new PA has been hired who will start no later than Mar 1st;
 - Recruiting for one additional PA;
 - Two onsite interviews are scheduled for this week: One for a hospitalist position, the other is for a family medicine position and the candidate is currently in his 3rd year of residency;
 - Dr. Lee has started in a full time capacity;
 - Our OR utilization is being significantly increased;
 - The Foundation is pursuing several grants to support capital projects in the near future;
 - The back-up power for CT has been delivered and will be installed next week;
 - We are currently right at budget and looking good;
 - Legislative updates: There have been a lot of discussions which could impact hospitals. We receive regular updates from the IHA on issues that may impact health care. We currently receive a UPL (Upper Payment Limit) supplemental payment. It is a program supported by the federal government that helps support healthcare and lessens the loss from Medicaid. These are very important to hospitals and there are new discussions that the state may choose to allocate the funds toward other uses and not to healthcare. This is highly concerning and would be very impactful. A new bill was introduced to repeal Medicaid expansion. These discussions to repeal have been going on for several years. This would also be very impactful with Medicaid, charity care, etc. The IHA has been doing a great job as an advocate for Idaho hospitals;

MOTION: Motion was made and seconded to approve the Consent Calendar.
Motion carried unanimously.

Following adjournment, L. Taylor, Imaging Director will conduct a tour of the Imaging Department as the scheduled board presentation with discussion and Q&A. Board members are encouraged to attend the tour.

ADJOURNMENT: Meeting was adjourned at 5:43 p.m.