STEELE MEMORIAL MEDICAL CENTER

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

BOARD OF DIRECTOR'S MEETING
March 25, 2025

MINUTES

MEMBERS PRESENT:	Jean Anders, Chair Lori Stacy, Vice Chair Dennis Krasowski, Secretary/Treasurer Chuck Mark Diana Ketterling Rebecca Hilgendorf Kim Kesl, Lemhi County Commissioner (voting) *Ex Officio:* Preston Becker, CEO
OTHERS PRESENT:	Ryan Larson, CFO Kelly McNitt, CNO Shawn Huston, CQO Beth Miller, CCO Jo Gonnoud, Med/Surg/OB Director
ABSENT:	Steve Lish Robert Frahme Joe Krakker, DO, Chief of Staff

Minutes recorded by Judy Washbon, Executive Assistant / Med Staff Services 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)(i) to consider: Provider Credentialing; Personnel Discussion; Property Acquisition; Risk Management Regarding Potential Claims: Motion carried unanimously by rollcall. Executive session adjourned at 4:45 p.m.

PUBLIC COMMENT: No public comment. P. Becker introduced and welcomed Rhonda Katzdorn as the new Human Resources Director.

PRESENTATION:

Med/Surg/OB Department: Jo Gonnoud, RN, Med/Surg/ Director presented on the Med/Surg/OB Department and delivered a PowerPoint. Highlights included:

- Explanation and review of the med/surg floor;
- Reviewed staffing and the department team;
- Reviewed the various departments that collaborate with med/surg;
- Discussed quality improvements and PI studies;
- Explained the services of the OB Department;
- Reviewed the department's strengths, weaknesses, opportunities & threats (SWOT)

FINANCE
COMMITTEE REPORT:

February Financial Report: R. Larson reviewed and discussed the February financial report and provided a brief overview of the financial narrative. The overall financial performance for February was a net loss of $217,260. The month had a negative EBITDA of $127,850; EBITDA on a percentage basis was a negative -3.79% for the month; Total patient services revenue was $6.1M, lower than the prior month by $400K; Daily revenue for the month was $217K, the prior month was $211K; Day's cash on hand is at 39 days for the month.

MOTION: Motion was made and seconded to approve the February Finance report as presented. Motion carried unanimously.

Clinic Bond Payment: R. Larson discussed the request for the Clinic Bond Payment. It was noted this is a fixed amount and payments are due twice a year.

MOTION: Motion was made and seconded to approve the Clinic Bond Payment as presented. Motion carried unanimously.

Quarterly Quality & Compliance Report: S. Huston reviewed and discussed the Quality & Compliance report. Questions and discussion followed.

Other Business:

Providers A-C New Appointment Credentialing Reports: **MOTION:** Motion was made and seconded to approve Providers A-C new appointment credentialing reports as presented in executive session. Motion carried unanimously.

Providers A-C Reappointment Credentialing Reports: **MOTION:** Motion was made and seconded to approve Providers A-C reappointment credentialing reports as presented in executive session. Motion carried unanimously.

Provider A New Privileges Request: **MOTION:** Motion was made and seconded to approve Provider A new privileges request as presented in executive session. Motion carried unanimously.

Revision of Strategic Planning Committee: J. Anders discussed the Strategic Planning Committee and reported the committee is only needed to be an ad-hoc committee and not a standing committee.
P. Becker reported he has had a conversation with Todd Linden of Linden Consulting. Mr. Linden specializes on governing board process improvement and presented at the October IHA convention. The board is not required to have a facilitator, but it's a good idea and very

advantageous to have someone help navigate in strategic planning. He is preparing a proposal and should have it ready by next week. Mr. Linden has availability in May, June and July. Discussion was held on attending 2 half days of strategic planning vs. 1full day. 2 half days is preferred. A strategic planning committee meeting will be scheduled once the proposal is received.

Board Education:

Board Assignments: J. Anders discussed the previous month's board assignments and Trustees were asked for their ideas and what they would like more education on. Several suggestions were:

- Inviting K. Stanger back to present information to the board on governance. (He gave an excellent presentation at the fall Consortium Conference);
- Further education on financial reports and spreadsheets;
- Continuously pursuing best practices, e.g. how do we ensure the governing board is doing their job;

Creating a Governance Committee Discussion: J. Anders led continued discussions on creating a governance committee. Additional information including a sample charter was handed out to board members. It was noted a governance committee can be very complicated, but it doesn't have to be. The board can develop it around their needs. J. Anders re-iterated she really wants to see a governance committee created. Further discussions followed on:

- Finding out the "Why" we would we need a governance committee and what duties would we want them to perform. We must answer the "Why" question first;
- Discussed that hospital attorney, K. Stanger presented to the board on governance committees and reported it was rare and not usually necessary for a board this size;
- Examples were given on what could be included with a committee:
    - Enhancing the board job descriptions;
    - Ensuring the board is following policies;
    - Creating an annual work plan along with additional committees;
    - The committee could monitor our charter, measurements and other duties as assigned;

Continued discussions and concerns followed. The general consensus is the SMMC board is too small to warrant creating a governance committee. P. Becker reported he has never worked with a board that had one in place, but will reach out to other hospitals in the region to ask if their boards have one and get information on its purpose and duties and will report at next month's meeting. J. Anders asks if a new education committee is warranted. Further discussion on the need to pursue best practices.

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

- Minutes from the February 25, 2025 meeting;

- Administration reports were discussed;
  P. Becker, CEO reported:
    - Our leadership retreat was held earlier this month. Reviewed the topics covered and noted we have an LDI committee who decides the topics for education;
    - National Doctor's Day is March 30th;
    - We are beginning to pursue an evaluation of AI and are doing our due diligence and educating ourselves. There will be more information to come. Reviewed several examples on how AI can be incorporated with a provider's documentation workflow. The provider is the responsible party, AI is simply a tool;
    - We are pursuing a grant to help fund an MRI machine. A meeting to discuss was held today and we are making progress with a potential donor;
    - Discussed legislative updates, the potential for the change in property tax, etc. There are still lots of discussions in the state;
      - The Foundation's Annual Spring Reception is on April 3rd at 6:00. Board members are asked to please help support the hospital foundation;
      - Discussed and reviewed the organizational scorecard. We are meeting and/or exceeding 3 of our goals and making good progress with others;
      - Updates were given on the Lillian St. building;

R. Larson announced the hospital is set to go live with in-house billing on Monday. It was noted that ARS will still be around for about 6 months, but will slowly be phased out;
P. Becker discussed our patient advocate program and how to contact. Information cards can be given to board members to hand out if needed.

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

ADJOURNMENT: Meeting was adjourned at 6:17 p.m.