

# STEELE MEMORIAL MEDICAL CENTER

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

## **BOARD OF DIRECTOR'S MEETING November 23, 2021 MINUTES**

**MEMBERS PRESENT:** Kristin Troy, Chair  
Dennis Lile, Vice Chair  
Ingrid Fulstone, Secretary/Treasurer  
Chuck Mark  
Melinda Ellison  
David Weston  
Ex Officio:  
Rick Snyder, Lemhi County Commissioner  
George Rohrich, Interim CEO  
Linda Powell, MD, Chief of Staff

**OTHERS PRESENT:** Lisa Loughran, COO/CNO  
Joshua Corbridge, CHRO  
Shawn Huston, Risk Management/Compliance/Quality Director  
Ryan Larson, Accounting Director  
Brian Ruff, Cardiopulmonary Director

**ABSENT:** Chuck Bloodgood  
Dennis Krasowski

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

**CALL TO ORDER:** The meeting was called to order at 5:03 p.m. by K. Troy.

**EXECUTIVE SESSION:** **MOTION:** Motion was made and seconded to move into executive session under Idaho Code 74-206(1)(a)(b) to consider: Provider Credentialing Reports A & B; Motion carried unanimously by rollcall. Executive session adjourned at 4:53 p.m.

**PUBLIC COMMENT:** None

**PRESENTATION:**  
Cardiopulmonary  
Services Dept.:

B. Ruff, Cardiopulmonary Director delivered a power point presentation on the Department. The presentation covered information regarding the functions of the Cardiopulmonary Department, current and new equipment, updates on ventilators; oxygen delivery and upcoming new services. Q & A discussion followed.

Quarterly Quality  
Report:

S. Huston, Risk Management/Compliance/Quality Director reviewed and discussed the Quarterly Quality Report. The summary included reviews on the ActionCue reporting system; Press Ganey reports and internal performance improvement studies. Q & A Discussion followed.

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

- Minutes from October 26, 2021;
- CEO Report;
- Patient Care Services Report;

G. Rohrich discussed the Federal CMS vaccine mandate and explained that this is now a COP (Condition of Participation) with CMS. We must comply or they can stop all Medicare and Medicaid reimbursement. CMS reimbursement is critical to the hospital. We have been meeting with staff to discuss and answer questions. Employees have options, and can get vaccinated or claim a medical or religious exemption. Employees with exemptions will be required to wear an N95 or KN95 mask be tested weekly. SMMC will pay for the testing and we are trying to accommodate all staff, remove the barriers so they can remain a part of the team. The mandate affects employees, volunteers and vendors.

L. Loughran and J. Corbridge were recognized for their work on researching, engaging and talking to staff.

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

#### FINANCE

##### COMMITTEE REPORT:

*October Financial Report:*

R. Larson reviewed and discussed the October financials and provided a brief overview of the financial narrative. Discussion followed.

**MOTION:** Motion was made and seconded to approve the October Finance Report as presented. Motion carried unanimously

##### OTHER BUSINESS:

*Provider Credentialing Reports:*

MOTION: Motion was made and seconded to approve new Provider Credentialing Reports as presented. Motion carried unanimously.

*Compliance 2021-2022*

*Auditing & Monitoring Plan:*

S. Huston discussed and reviewed the 2021-2022 Compliance Auditing & Monitoring Plan was reviewed. S. Huston reported an outside vendor will perform an independent compliance audit.

**MOTION:** Motion was made and seconded to approve the Compliance 2021-2022 Auditing & Monitoring Plan as presented. Motion carried unanimously.

Other:

K. Troy noted that the board does not have a regular board meeting in December, but would like to propose board education training with J. Rice in December. She will reach out to the board with a list of perspective dates.

K. Troy reminded board members to sign the annual compliance consent forms this evening.

K. Troy reported that she and G. Rohrich have met to discuss strategic planning. A draft has been created and we want to start working on the plan. We will be working on the process and discussed the importance of having a great facilitator to present. G. Rohrich noted that he will be working with Kristin on preparing proposals and should have some proposals for the board to consider at the January meeting.

K. Troy reported she attended the Foundation Board meeting last month and was able to give updates and answer questions. Discussed the importance of donating to the Foundation. N. Osmundson is back as the Foundation Director. The Foundation has given in excess of \$280K and is commended for their good work.

G. Rohrich reported the hospital was notified last week that SMMC has received a National Patient Experience Award for 2021. The data is compiled from submissions to CMS.

#### Board of Directors

#### Appointments

#### COMMITTEE

#### APPOINTMENTS:

K. Troy reviewed and assigned new committee appointments:

#### Quality Committee:

Adam Deutchman, M.D., Co-chair, Chuck Mark, Co-Chair, Dennis Lile, Kristin Troy, George Rohrich, Interim CEO. Members also include Shawn Huston and Lisa Loughran.

#### Bylaws Committee:

David Weston, Chair, Dennis Krasowski, Melinda Ellison, Kristin Troy, George Rohrich, Interim CEO.

#### Board Candidate Committee:

Dennis Lile, Chair, Chuck Bloodgood, Ingrid Fulstone, Kristin Troy, George Rohrich, Interim CEO, Chief of Staff.

#### Executive Committee:

Kristin Troy, Chair, Dennis Lile, Vice Chair, Ingrid Fulstone, Treasurer, George Rohrich, Interim, CEO.

#### Joint Conference:

Kristin Troy, Chair, Dennis Lile, Vice Chair, Ingrid Fulstone, Treasurer; George Rohrich, Interim CEO, Linda Powell, MD, Anne Healy, MD, Samuel Gardner, DO.

Dennis Krasowski will continue as a member of the Foundation Board.

**MOTION:** Motion was made and seconded to accept and approve committee appointments. Motion carried unanimously.

#### ADJOURNMENT:

Meeting was adjourned at 6:15 p.m.