Meeting Title:	Board of Trustees Meeting	Chairperson:	James Moreau
Date/Time:	August 21, 2024	Location:	Norton County Hospital

Norton County Hospital Board of Trustees Meeting Minutes

Attended	Position
James Moreau	Board President
Jimmy Todd	Board Vice President
Jerry Hawks	Board Member
Randa Vollertsen	Board Treasurer
Lee Juenemann	Board Member
Garrett Beydler	Norton County Commissioner
Kevin Faughnder	NCH Chief Executive Officer
ReChelle Horinek	NCH Chief Financial Officer
Shannan Hempler	NCH Director of Human Resources
Mel Dewitt	NCH Clinic Manager
Klare Bliss	NCH Chief Information Officer
Sarah Mohr	NCH DON
Amanda Kuxhausen	NCH Quality Control and Risk Management
Lacey Ninemire	NCH Cardiopulmonary Rehabilitation Manager and
	Emergency Preparedness/Safety Coordinator
Judy Wenzl	NCH Surgery Department Head
Kera Brown	NCH Scrub Tech
Tabetha Harris	NCH HR Assistant/Public Relations

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	Agenda Item	Action and/or Time
1.	July 17th, 2024 Board Meeting Minutes	Motion by James Moreau to approve the amended minutes of the July 17th, 2024 meeting. Second by Jerry Hawks. Motion carries unanimously.
2.	Consent Agenda Items: a) Personnel Information b) Accounts Payable – Bills	Motion by Jimmy Todd to approve the Consent Agenda Items as presented. Second by Randa Vollertsen. Motion carries unanimously.
3.	Executive Session: Non-Elected Personnel	James Moreau moved to enter into executive session: K.S.A. 75-4319(b)(6) for the preliminary discussion of the acquisition of real property; with the Board, John McClymont, CEO, CFO, and county commissioner in attendance; not to exceed 15 minutes. Seconded by Jimmy Todd. Motion passed. The executive session begins at 6:33 p.m. Exit at 6:48 p.m.
4.	Board Action from Executive Session	No action to be taken

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5.	Medical Staff Credentialing Applications	n/a
6.	Surgery Department Updates Judy Wenzl and Kera Brown present proposed updates to the surgery department sink:	Motion by Jerry Hawks to approve newly proposed Surgery Department sink
	Current Situation: The department currently uses totes for rinsing. This method is less efficient and may impact sanitation practices. Proposed Solution: Installation of a three-tiered sink. Cost for proposed sink, \$9,670. This update will increase efficiency and improve sanitation practices.	upgrade as presented. Second by Andrew Black . Motion carries unanimously.
	Next Steps: The board is invited to visit the surgery department any day to see the current setup and understand the need for the upgrade. The maintenance and engineering team will handle the installation of the new sink.	
7.	Risk Management Amanda Kuxhausen, the Risk Management and Quality Assurance Coordinator, presented the following updates:	Motion by Andrew Black to approve the updated Risk Management plan to
	Risk Management Plan: Updated Risk Management Plan to include Bailey Renner, PA-C, on page 10. Recent Events and Insights:	include Bailey Renner. Second by Randa Vollertsen. Motion
	Fall KARQM Event: Attended the Kansas Association of Risk & Quality Management event on August 7th. The experience was highly valuable with excellent presentations focused on enhancing safety and fostering a culture of reporting and prevention.	carries unanimously.
	Quality Summit: Participated in the Kansas Healthcare Collaborative Quality Summit on August 8th. RaDonda Vaught delivered a compelling keynote on "When Seconds Change Lives: Patient Safety and Systems Breakdowns." Her message emphasized the critical role each person plays in patient and staff	
	safety. Patient Survey Results: Since January 2024, 47 surveys have been received, with 1 survey lacking a recommendation response. 97%	
	of respondents would recommend our services to family and friends. 6 surveys received through August 15, 2024, with all patients indicating they would recommend our services.	

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	Culture of Safety Initiatives: Initiated efforts to build a Culture of Safety. We are tracking these contributions as Quality Measures and will start sharing updates on this progress in October.	
8.	Quality Assurance	
	Amanda Kuxhausen, the Risk Management and Quality Assurance	
	Coordinator; and Lacey Ninermire Cardiopulmonary Rehabilitation	
	Manager and Emergency Preparedness/Safety Coordinator,	
	presented updates on ther quality assurance project:	
	Overview: Healthcare workers face a higher risk of injury or illness	
	compared to those in construction and manufacturing sectors. To	
	address these risks, our goal is to proactively identify and mitigate	
	workplace hazards to prevent employee injuries and illnesses.	
	Core Elements of Our Safety System: Ensuring commitment to	
	safety at the highest levels of the organization, while encouraging	
	active involvement of employees in the safety processes and	
	decisions.	
	Systematic approach to identifying and evaluating potential	
	hazards in the workplace. Implementing measures to eliminate or	
	reduce identified hazards.	
	Providing ongoing education and training to employees on safety	
	practices and procedures and regularly assessing and enhancing	
	the safety program to ensure its effectiveness.	
	Implemented Programs and Initiatives:	
	"Good Catch" Program: Acknowledges and encourages	
	reporting of near misses and potential hazards before they	
	result in harm.	
	Near Miss Reporting: Focus on identifying and addressing	
	issues that could lead to accidents or injuries.	
	Employee Recognition: Celebrating individuals who	
	contribute to safety and health improvements.	
	Making Safety a Priority: Emphasizing the importance of	
	safety in all aspects of work.	
	Safety Action Committee: A dedicated team to oversee action in literature and answers continuous literature and and and answers continuous literature and and answers continuous literature and	
	safety initiatives and ensure continuous improvement.	
	Departmental Quality Improvement (QI) Projects: Ongoing projects almost an hopping sefety and quality.	
	Ongoing projects aimed at enhancing safety and quality	
	within specific departments.	
	By integrating these core elements and initiatives, we aim to create a safer workplace, reduce the incidence of injuries and	
	refere a safet workplace, reduce the incidence of injunes and	

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	illnesses, and promote a culture of proactive safety and	
	continuous improvement.	
9.	CNO Report	
"	Sarah Mohr, the Chief Nursing Officer (CNO), presented	
	comprehensive updates for the reporting period of July 1st to July	
	31 st	
	Admissions: Down to 1.2 this month.	
	ER Visits: 166	
	Outpatient Visits: 174	
	Trend: Activity is starting to increase with the approaching fall	
	season.	
	Staffing Updates:	
	 H1B Visa Techs: New techs have begun taking calls, and their training is progressing well. 	
	 Lab Manager: Actively searching for a new lab manager. 	
	Nursing Staff: All nursing staff will be fully trained by the	
	end of September.	
	Agency Nurses: All agency nurses will be off payroll by the	
	end of August.	
	Training and Development:	
	Clinicals with EMS: Collaborating with EMS to enhance	
	their training.	
	Trauma Training: Sierra is developing trauma training and	
	reference sheets.	
	Advanced Airway Course: Respiratory Therapy (RT) is	
	planning an advanced airway course for providers and	
	assisting staff.	
	Safety and Quality Initiatives:	
	 Call Don't Fall Campaign: Working on increasing awareness and implementation. 	
	Barcode Tracking: Consistently meeting benchmark goals.	
	Discharge Paperwork: Focus this month on ensuring that	
	discharge paperwork is completed in full.	
	Cerner Utilization: Educating staff on better usage of	
	Cerner for comprehensive service charging.	
	Customer Service: Enhancing follow-up phone calls and improving	
	the handling of issues.	***************************************

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	Credentialing and Partnerships: Completing credentialing with High Plains; will commence on September 7th through the specialty clinic.	,
10.	CIO Report	
	Klare Bliss, the Chief Information Officer (CIO), provided the following comprehensive updates for the last month:	
	Cerner EES Updates: The migration to Oracle Cloud Infrastructure (OCI) is rescheduled to September 2025. This delay is due to Cerner addressing remaining issues. Departments will receive a 90-day notice before migration to allow adequate preparation for downtime processes. RevCycle Optimization: Awaiting a quote from Cerner/Oracle Health for RevCycle optimization. New Patient Accounting System: Cerner will be introducing a new patient accounting system named RevElate. Experian Project: The Experian project is forthcoming, with scheduling details yet to be finalized. Cerner Change Governance: Setting up meetings with departments to discuss change requests and improvements. Service Requests (SRs) will be created based on these discussions. Current Change Governance Projects: Updating Provider Fax Stations, Lab ABN Process, Lab Scheduling, RT/Nursing EKG, Outpatient Charges to Auto populate, Outpatient orders & tasks. Cybersecurity: Turner Tech Meeting-Bringing in additional tools to enhance cybersecurity. Working on an Incident Response (IR) plan and updating policies. A security risk assessment was conducted with Microsoft Rural Program. Quote received from Artic Wolf for managed risk detection, incident response (IR), and cybersecurity education. Quote received from Critical Insights for managed risk detection, IR, and cybersecurity education.	
11.	Ni2 Update ReChelle Horinek, the Chief Financial Officer (CFO), provided the following comprehensive updates for Ni2 from the last month:	
	Cash Receipts: Over \$1 million collected in the last 8 months. Census Impact: Due to a low patient census, there has been a slight dip in cash receipts. Accounts Receivable: Improved collection processes have led to more timely accounts receivable management.	

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12. | CFO Report of Statistical/Financial Information

ReChelle Horinek, the Chief Financial Officer (CFO), presented comprehensive financial and statistical updates for July 2024:

Gross Patient Revenue: Gross patient revenue for July was \$2,356,598, slightly below the budgeted amount by \$15,853. Outpatient Services exceeded budgeted revenue by \$160,085, compensating for lower inpatient numbers. Inpatient Services are running slightly below budgeted expectations.

July Operating Expenses: \$1,551,908. Continued increase in expenses due to contracted employees. Completion of contracted employees' contracts expected to lower operating expenses.

Monthly Net Loss: (\$38,605) for July. Year-to-Date (YTD) Net Loss: (\$7,366). Cash Balance: \$368,932 at month-end.

Days of Cash on Hand: Decreased to 7.37 days due to reduced cash receipts from low census.

Statistical Trends:

- Inpatient Numbers: Decreased compared to last year.
- Outpatient Numbers: Increased compared to previous year, showing positive trends.

Financial Audit and Compliance:

- Financial Audit: Scheduled with FORVIS from September 30th to October 4th, 2024.
 - Medicare Cost Report Preparation: Following the audit, preparations will begin for the 2024 FYE Medicare Cost Report.
- MRF Compliance: Expected to be compliant by the end of September.

Billing and Collections:

- New Policy: Implemented on July 1st, with initial positive response from patients utilizing pay-in-full discounts.
 - Future Target: Planning a one-time discount for tax returns in early 2025.
 - o **Price Increases:** Completed across the facility with updated flyers and statements.
- Social Media: Informational posts about the new billing & collections policies are being shared.

Experian Project:

• Implementation: Started with the machine-readable file for pricing transparency. Moving towards insurance verification system, with a six-month implementation schedule.

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	JG Consulting: • Engagement: Entered into an agreement with JG Consulting for audit and negotiation of payer contracts to help improve reimbursement rates.	
13.	Financial Affairs of Non-Elected Personnel Financial Assistance YTD: \$ 77,304 Bankruptcy YTD:	Motion by Randa Vollertsen to send an amount not to exceed \$ 16,175.00 for attempted collections, and to approve financials. Second by Andrew Black Motion carries unanimously.
14.	Medical Clinic Update Melody DeWitt, the Medical Clinic Manager, shared the following updates:	
	Chronic Care Management: Lana Jones is now overseeing Chronic Care Management, following our departure from Care Harmony. Annual Wellness Visits: 381 patients remain to be contacted regarding their annual wellness visits. All others have been contacted and the response has been positive. Same-Day Appointments: We are making every effort to accommodate as many same-day appointments as possible. Saturday Clinic: Has been consistant, with an average of 9 patient every weekend. Free Sports Physicals: The clinic provided around 80 sports physicals at the end of July, contributing to community outreach and support. Provider Coverage: Dr. Hatton is assisting in covering Dr. McKinley's vacation. Another provider has been brought in to offer additional coverage, minimizing the need for other doctors to cover outside their usual responsibilities.	
15.	CEO Report Kevin Faughnder, the Chief Executive Officer, provided a comprehensive report on various initiatives and updates:	

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Physician Recruiting: We conducted a Zoom interview with a potential new provider, the interview went well and we offered to bring them in for an onsite interview

Bed-side Scanning: We've made significant progress on scanning supplies and medications at the bedside. We were 94% for July. Communications Campaign: Kristin Vogel and I participated in a radio interview with KQNK on August 7*. The focus of our interview was to emphasize Wellness. Kristin did a great job with highlighting the services we offer in various age groups.

Facility Upgrades: HFG Architecture contacted us last week and they are waiting on the engineering firm's (PEC) proposal, possibly another couple of weeks. Once HFG gets that, they anticipate at least a month or so to give us a proposal for the entire project.

Women's Health Initiative: Tabby is building a new web page to highlight the comprehensive services we offer at NCH. We anticipate it will take about a month to finish the design. We'd like to debut it at the next BOT meeting if it's finished. Caryl and I are reviewing grant opportunities but want to have our webpage published before we start applying for grants.

Healthy Living Grant: We applied for a grant through KHA and was awarded \$2,500 to use for improvements to our facility that promote healthy living for our employees. Our Employee Committee is looking at options on how best to use that grant money.

High Plains Mental Health: We have targeted early September for when patients can get mental health support services at the hospital.

- Orthopedics: We continue to work with McCook Community Hospital on the logistics of getting ortho outreach going. Dr. Tice has applied for his KS license.
- Insurance Reimbursements: ReChelle and I met with a local business this month and explained that their insurance provider was not reimbursing us well. We provided several examples where our claims were reimbursed at less than 50%. The business was very helpful and put us in contact with their insurance broker and we are working together to get the contract updated to improve reimbursement services.

16. Commissioner Report none

17. Board Member Reports none

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18.	Other Business	
	none	
19.	Adjourn	Meeting adjourned at
		8:04 p.m.

Lee Jueneman, Secretary