



**BOARD OF TRUSTEES
SEPTEMBER MEETING MINUTES
Wednesday, September 25, 2024 4:00 P.M.**

MEMBERS PRESENT: Ron Mischke, Jenifer Shassetz, Kevin Kessner, Gene Davis, Shirley Coulter, and Richard Garber

MEMBERS ABSENT: Tobie Alsup

OTHERS PRESENT: Nyle Morgan, Ann Aksamit, Sue Belish, Kelly Lieb, Tommi Ritterbusch, Dr. Doughty, Joe Wright, Brady Shoemaker, Brittany Goodvin, Jennifer Smith, Cathy Bealer, Alaina Bergstrom, Amy Ligocki, Weston Pope with the Sheridan Press, Kristen Czaban, Payton Gambill, Jordan Lentz, Collette Miller, Sean Bonnet, Erin Oetken, Megan Ripley, Cody Sinclair, Dr. Shaun Gonda, Dr. Sierra Gross, Casi Morgareidge, Jasmine Slater, Liz Dearcorn, Mike McCafferty, and Sharon Krueger

CALL MEETING TO ORDER

Ron Mischke, Chairman called the meeting to order at 4:00 p.m.

PUBLIC COMMENTS, INTRODUCTIONS

Sue Belish is recognized as the new Foundation board President.

APPROVAL OF AGENDA AND MINUTES

Shirley Coulter moved to approve the agenda as presented. Richard Garber seconded the motion. Motion carried.

Gene Davis moved to approve the minutes of the board meeting held on August 21, 2024 as presented. Kevin Kessner seconded the motion. Motion carried.

QUALITY COMMITTEE REPORT

Kevin Kessner, Quality Committee Chair asks Tommi Ritterbusch, Director of Continuous Improvement to present a recap of the data reviewed by the committee relevant to discrepancies of pre and post op diagnosis, code blue/rapid response, restraints and seclusion, medication scanning, inpatient falls, core measures, readmission rates, safety events, and utilization review. The Utilization Review Management Plan was approved for 2024-2025. The organization is currently conducting the patient safety survey, measuring culture of safety in the hospital, with results to be shared with the board next month. There are no concerns or negative trends to address with the data reviewed.

PATIENT EXPERIENCE REPORT

Kelly Lieb, Director of Patient Experience is asked to report. Ann Aksamit, Director of Nursing continues to lead her nursing teams and we are seeing improvements on how care is delivered, which is evident with the 5 Star rating in responsiveness. The ICU value stream analysis has had great engagement within the ICU team. Med-Surg will implement sometime this fall, bedside reporting at 7am and 7 pm with the patient and family. Ron Mischke states that the patient experience within the hospital has changed and grown for the better in the time he has been a part of this endeavor.

MEDICAL STAFF REPORT

Dr. Gonda states that the quarterly medical staff meeting was September 10 and a new Chief of Staff was elected. Dr. Megan Ratterman will begin her duties as Chief of Staff in January 2025. Dr. Gonda is thanked for his time and efforts as Chief of Staff over the years.

Dr. Gonda, on behalf of the Medical Executive Committee and Credentials Committee recommends the following Medical Staff Initial Appointments and Medical Staff Renewals for consideration and approval.

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MEDICAL STAFF INITIAL APPOINTMENTS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization
Douglas Green, MD	Teleradiology/Delegated (No Membership)	Radiology		Real Rad
Kimia Kani, MD	Teleradiology/Delegated (No Membership)	Radiology		Real Rad
Surendra Pawar, MD	Teleradiology/Delegated (No Membership)	Radiology		Real Rad
Michael Wilson, MD	Teleradiology/Delegated (No Membership)	Radiology		Real Rad

MEDICAL STAFF RENEWALS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization
Lindsay Capron, MD	Active Staff May Admit	OBGYN	10/01/2024	SMH Women's Clinic
Sierra Gross, MD	Active Staff May Admit	Internal Medicine	10/04/2024	SMH Internal Medicine Hospitalist
Allison Summers, MD	Teleradiology/Delegated (No Membership)	Radiology	10/18/2024	Real Rad
Rebecca Thompson, MD	Active Staff May Not Admit	Pathology	9/30/2024	Sheridan Pathology Associates

Shirley Coulter moved to approve the initial appointments and renewals as presented. Richard Garber seconded the motion. Motion carried with Kevin Kessner abstaining from action on Dr. Gross.

ADMINISTRATION REPORT

Outpatient Imaging Update - Mike states that we are building capacity to meet the needs of the community. The staff have done a nice job in establishing goals around access and responsiveness for our patients and physicians, insuring quick access and exceeding goals.

Surgical Services Update – SMH is on track to receive completed construction documents by end of year, with the potential to start construction in the first quarter of 2025. Again, we are growing capacity to meet the needs of the community and for future growth in outpatient services.

Green House Living Update – Cathy Bealer, CNO reports that SMH has on boarded 44 employees and continues to receive applications for open positions. SMESS boards are being utilized, which is the same communication tool used within the hospital. There has been a lot of progress made in a short period of time.

SLIB/ARPA Funding – Authorization for Obligation of Funds (Action) - This will be addressed under the building committee report.

FINANCE

Gene Davis, Finance Committee Chairman states that August results showed 41 days of cash on hand and a negative 6% operating margin, which is typical for this time of year. There was an improved payer mix and volumes were down across the board.

FOUNDATION REPORT

Richard Garber, Foundation liaison reports that things are going well and they are connecting with a lot of people on the Growing for You campaign and getting 100 Donor in 100 Days. Richard would like to see everyone be a part of this endeavor. Cody Sinclair, Chief Development Officer states the foundation is doing a lot of tours as this will make a huge impact on the community. The Link Partners in Pink event is in October and Cody looks forward to seeing everyone there.

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BUILDING COMMITTEE REPORT

SLIB/ARPA Funding – Authorization for Obligation of Funds (Action) - Joe Wright, COO states that the board has already approved the first two phases of the EmPATH project, which was the inpatient pharmacy and the pediatric unit. Joe presents on Phase 3, which pertains to the actual EmPATH and Crisis Stabilization Unit. It is the building committee's recommendation that the board of trustees approve SMH to execute a contract for \$8,128,152.00 with O'Dell Construction and their secured sub-contractors, which will obligate all remaining ARPA funds and provides contractual assurance that necessary resources are available to complete this project by 2026. We intend to follow up at the October board meeting to get board approval for the fixtures and equipment, which is not covered by the ARPA grant, but will represent completing the entirety of the project. Jen Shassetz moves to approve the execution of the contract with O'Dell Construction and their secured sub-contractors in the amount of \$8,128,152.00 as presented. Shirley Coulter seconded the motion. Motion carries.

Jordan Lentz, Construction Project Manager gave an update on the pediatric unit, with demolition completed, framing in progress and HVAC being addressed next week. The emergency room triage project is on schedule with no issues. The Welch Cancer Center LINAC replacement is on schedule with no issues. The SameDay Health & Imaging construction started today. The board thanked Jordan for the great job he does in keeping everything on track.

OTHER BUSINESS

None

EXECUTIVE SESSION

Ron Mischke requests a motion to move into Executive Session at 4:27 p.m. Kevin Kessner moved to go into Executive Session. Shirley Coulter seconded the motion. Motion carries.

General session reconvened at 4:37 p.m. to address medical staff credentialing. Please see above under the Medical Staff Report for action taken.

Ron Mischke motioned to go back into Executive Session at 4:39 p.m. to discuss personnel matters. Kevin Kessner seconded the motion. Motion carries.

General session reconvened at 4:54 p.m. with no action taken.

ADJOURNMENT

With no further matters to come before the board, the meeting adjourned at 4:54 p.m.

Patty Forister, Recorder

Kevin Kessner, Secretary