

Niobrara County Hospital District Board of Trustees

Board of Trustees Meeting Minutes

November 17, 2020 4:00 p.m.

The Niobrara County Hospital District Board of Trustees met in the Training room at Niobrara Community Hospital in Lusk, Wyoming. In attendance were Mr. Mark Groh, Chairman; Ms. Shelly Larson, Treasurer; Ms. Randi Ross, Secretary, and JV Boldon, Member. Also, in attendance from RCI was Nick Doucette, CEO. Attending by telephone was Kyle Ridgeway, legal counsel.

Mr. Groh called the Public Session to order at 4:00 p.m.

A quorum was verified.

Ms. Larson moved to enter executive session at 4:01 p.m. Mr. Boldon seconded the motion. Motion carried 4-0.

The public session reconvened at 5:12 p.m. Mr. Ridgeway left the meeting

Mr. Boldon moved to send Mr. Groh, Ms. Larson and Mr. Krein, if he is available, to represent NCHD in mediation. Ms. Larson seconded the motion. There was no discussion. Motion carried 4-0.

The Board took a 15-minute recess.

The meeting reconvened at 5:30 p.m. at which time Dana Gilleland, RCI joined the meeting.

Acceptance of the Agenda

Mr. Boldon moved to accept the agenda of the meeting. Ms. Larson seconded the motion. There was no discussion. Motion carried 4-0.

Acceptance of the Minutes

Ms. Larson moved to accept the minutes of the October 12, 2020, October 27, 2020 & November 3, 2020 meetings. Mr. Boldon seconded the motion. There was no discussion. Motion carried 4-0.

Public Comments

No public comments

Community Needs Assessment – Jody Shields did a zoom presentation on the assessment for our community.

December Meeting Change - Mr. Boldon moved to change the December meeting to December 14 as December 15 will not work for all members. Ms. Ross seconded the motion. There was no discussion. Motion carried 4-0.

Executive Operation Report-October

Copy of report attached to these minutes. The hot water heater was ordered in September and installed in October.

Board Contract & Policy Approval Process

Nick indicated that there will be a lot of policy updates and contracts upcoming. He would like to be able to send to the board for approval and then will formally approve at the next meeting.

Ms. Larson moved to allow approval from the board for policies and contracts via email with affirmation at the following board meeting. Mr. Boldon seconded the motion. There was no discussion. Motion carried 4-0.

Financials

Balance Sheet Detail: there was a funds transfer planned into the operating account for \$350,000.00 for COVID expenses, however due to a processing error the funds transferred the opposite direction. It was corrected and transferred back into operating on 11/3/20 including the original \$350,000.00 that was to be transferred to account for COVID related expense.

Income Statement Detail: there was an overstatement of revenue in August; correction of \$75,494.52 was made in October. Negative contractual for October due to significant swing bed contractual booked. There was additional SPET income of \$59,643.00 collected that we will receive in one year. Dana is working with auditors on the Pension Retirement account. Group Insurance expense decreased due to receipt of one month's credit for 4 employees that should have been removed in January 2020.

Patient revenue, less adjustments, on October 31 was \$761,845.52; operating revenue was \$4,083.34; non-operating revenue \$194,213.69 for total income of \$960,142.55. Operating expenses for the month were \$592,894.03; non-operating expenses were \$100,353.12. This results in a net income of \$266,895.40.

Old Business

Construction Remodeling Projects & Funding – CMS came out with two updates on 10/28/2020 which are significantly disadvantageous to CAHs. Can depreciate expenses during period eligible to use relief funds; we cannot use relief dollars for all of our proposed projects. Room 23 – isolation room just be done by year end; Nick is trying to push the laundry room as well – might be able to use SLIB money for this. Cost reimbursement – costs that would be covered under cost base are not eligible for relief funds.

New Business

Audit & Cost Report update – we are in a wait and see scenario on the cost report; have applied for and received an extension until January 30, 2021. Nick is hoping for updated guidance. There has not been a square footage assessment of the facility for several years. One will be done the second week of December. The audit is going well.

WHA Staffing Resources – due to COVID, costs for travelers has increased significantly. At this time the state is subsidizing the costs at 100%, however the funding ends 12/31/2020.

COVID-19 Cases, Hospital Expansion, Prevention Plans – WY is to the point of being overwhelmed. We are still seeing patients and there is some opportunity for us to take some low acuity patients from other facilities. Nick has expanded the hospital to 8 beds to deal with the potential case load – at this time we have only had 3 COVID patients at one time. The current positives have been through the clinic and ER but not inpatients. We are still allowing limited visitation in the ECF. With the upcoming holidays there is opportunity for increased exposure. Residents will be allowed to

leave the facility for holiday gatherings with the stipulation that when they return, they will be isolated for 2 weeks in order to protect all of our patients. Public Health is providing COVID testing on Tuesdays and Thursdays with no questions asked. NCH/RRHC has two tests – rapid and 72-hour. We are screening for symptoms and exposure over the phone and the provider will determine which test is appropriate.

Next meeting is December 14, 2020 at 5:30 p.m.

Meeting adjourned at 7:30 p.m.

October 2020 Operational Summary

Competency week was held over the course of two days. There was good employee participation, and a makeup day will be scheduled for employees that were unable to participate. Each department head was responsible for contributing content that was relevant to both compliance and employment at the facility.

The employee evaluation process started, with evaluations due on November 16th. Compensation increases between 1%-3% are tied to the year end evaluations, which will be reviewed between HR, administration, and the department head to ensure accuracy and consistency.

The facility's IT infrastructure was temporarily hindered due to a firewall failing. The administrator procured a replacement within 24 hours from Medicine Bow Technologies in Laramie to mitigate security risk and infrastructure downtime.

A hot water heater was procured and installed for the newly acquired washing machines. This will serve as primary water source for the washer, while providing backup to the two current facility water heaters.

The administrator welcomed the CEO from Banner – Torrington, Zach Miller, for a brief site visit. Relationships and shared resources were discussed, an immediate result was Torrington's DON visiting with NCHD's DON for half a day to review program development, staffing strategies, quality metrics, and other content.

Staffing of clinical staff has been challenging in both ECF and the hospital due to concerns regarding COVID. The DON has worked shifts to cover vacancies while the facility looks to augment it's current staff with travelers.

More stringent COVID-19-related precautions were enacted due to the increased presence of the virus in the state and county. All staff, patients, and visitors are screened for temperature and symptoms, while visitor access to residents has been restricted to 15 minute visits.

The facility procured more rapid antigen COVID-19 tests to prepare for the increased testing demand. Supply of tests has not been a problem, however the facility has elected to purchase a projected three month supply in the event of a shortage.

Temporary negative air machines were purchased to allow more rooms to be used as temporary isolation rooms. These machines can be used in the hospital or extended care units to create a negative pressure environment to allow for isolation of potential or actual COVID-19 positive patients.

Contractors were invited and surveyed the facility to review proposed construction updates. Funding came into question at the end of the month, as CMS's updated guidance to the Provider Relief Funds casts serious doubt over use of funds for the project. Alternative funding is being reviewed.

Employee health insurance was approved through the Board of Directors and allows for both employer and employee savings on prior year cost. Open enrollment will be completed well before the end of the year, starting on November 10th and finishing 10 days later.