

BOARD OF TRUSTEES
Regular Meeting Minutes
September 25, 2024

Presiding Chairperson: Greg Cure, Chairman

Recording Secretary: Bre McEwen

Attendance:

Board Members present:

Greg Cure, Chairman
Patricia (Patty) Eckhardt, Vice Chairman
Sabrina Thompson, Secretary
Vicki Baker
Terry Nash
Travis Daise, MD, ex-officio
Brian James

Members absent:

Valerie Gavin, Treasurer

Guests:

Administrative Team Staff Present:

Amie Powell, Chief Operations Officer – via Teams
Gina Eastin, Regional Analyst
Heather Prideaux, Regional CFO
Ryan Marvin, Support Services Director
Stephanie Klinge, SPC Clinical Coordinator – via Teams
Allison Mulch, CCO
Tina Whisnant, Risk/Compliance Manager
Jeanette Filpi, Interim CEO
Gail Shepherd, HRD
Suzanna Koel, Foundation Director –

GRMC Staff Present:

Bre McEwen

Community Members Present:

Janet Craft

Call to Order:

- Board Chairman, Greg Cure, called the meeting to order at 5:00p.m. and opened the floor for Public Comments.
- Public Comments: none
- Recognition of Special Guests and Announcements: None
- Ms. Thompson moved, and Ms. Baker seconded to approve the agenda as submitted. Motion carried.
 - Discussion: none.

Consent Agenda:

- Minutes from the August 28, 2024, meeting presented for approval.
 - Discussed Corrections: Admin report for the well upgrade states it's 'Thomas Groves' and it needs changed to 'Thomas Brothers'.
- Reminder of the next regular board meeting date of Wednesday, October 23, 2024, at 5:00 pm.
- Ms. Thompson moved, and Ms. Nash seconded to approve the Consent Agenda with the correction of the minutes. Motion carried.

Presentations:

- None.

Senior Leadership Department Updates:

- Chief Operating Officer / Clinics – Amie Powell, COO
 - GFHC / Specialty: Primary care volumes are starting the upward trend. Dr. Ray was out for more than 5 days in August which trends his numbers down. Average visits per day are staying flat. Specialty clinic volumes are overall significantly higher in 2024 than in 2023. Continuing to look at service lines and ways to add there. Dermatology to start in October. Will look at other service line opportunities as the strategic planning conversations go on.
 - Questions: Why are Dr. Ray's numbers flat or going down? – In the mid-level realm, when GRMC lost two physicians, patients started seeing the PAs and APRNs and made them primary care providers. Dr. Ray is still 'new', and patients are happy with their current providers. Dr. Ray is picking up extra services within the hospital. Soon to start overseeing barium swallow studies. – Why is Dr. Ray not the one going to Atwood and the extra things that Dr. Daise is doing? – Dr. Daise is the Chief Medical Officer for Atwood as it's a combined position and continues to go with his administration duties. It's not a time factor at the moment. Can take a look at this internally. Amie and Jeanette looking at different strategies to build Dr. Ray's practice.
 - Rehab: Amie reported that all rehab numbers are trending upwards.
- Chief Clinical Officer
 - Allison Mulch, CCO, presented graphs for each ancillary department. Highlighted cardiac and pulmonary rehab numbers being higher than the last two years. PFT's are also increasing. Looking at adding direct access to lab. Reviewed pricing and such to see what all is needed to start up. Direct access lab is for patients to walk in and choose which labs they would like checked without a provider order and is cash pricing. There will be list of offered labs. Labs that have to be sent out to run will not qualify. No start date determined. Have to stay in compliance with Medicare rules but still trying to keep fair pricing. Will provide education around the difference with direct access versus having a provider order. Those that have an order are not able to utilize the direct access pricing. Outpatient nursing numbers continue to rise. Looking into adding another provider for pain management with Dr. Meyer. Dr. Fante's partner is hopefully starting soon to help with surgery numbers. Working on a new process to build swing bed. Case manager is able to reach out to patients having surgery to let them know about at home options.
 - Questions: How long does it take Allison to put these graphs together each month? – At first it was a lot to get everything set up. But now it's closer to an hour just plugging in numbers each month.
- Human Resources Director
 - Gail Shepherd, HRD, reported 122 full-time and part-time employees. Open positions are also posted to the GRMC website. Moving towards an HR strategy in tiers; recruit, retain, and reward. New on-boarding procedure in place cutting the time down almost in half. Will start a sign-on

bonus of \$5,000 for a two-year commitment for nursing staff. Trying to attract outside RNs with 3 12-hour shifts and two free overnight stays. This will help the community and not require the nurse to live here. Pulse survey is going on right now. Will bring results back to the board once they are completed.

- Questions: Do we offer a ‘contract nursing’ option or only fully employed? – GRMC currently has two contract nursing that have been here for almost 17 years. Attempt to keep travel nursing staff after their travel contract is up. Most travel nursing company contracts come with a non-solicitation policy. Most nurses will not choose to be a 1099 employee due to having to cover with own liability insurance. – Why do we not try to reach out at the high school level for students going into school to talk about coming back home when school is completed? – GRMC is in contact with some students. Kept in contact with Nex-Gen interns with little luck. Suggestion to be in touch with Jennifer Lehman, high school counselor, who knows where students are going and in what major. Suggestion to hosting a ‘showcase’ for high school students to come in a have a tour and discuss all the opportunities within.
- Support Services Director
 - Ryan Marvin, SSD highlighted that GRMC is working with McClures to correct the bathroom issues in the GFHC lobby. Unfortunately, this will not be able to be fixed without disrupting patient care but working out the solution with minimal interference. Still working on the landscaping and keeping a better store front. I.T. still working on updating and installing new cameras to no longer have blind spots. Printer updates have been completed in the facility. GRMC apparel website is up and running as of Monday. Employees will be able to log in and purchase items with the correct logo on their own time.

Marketing:

- Suzanna Koel, Foundation Director, gave an update on marketing for August through October. Golf tournament profits are hoping to be between \$26,000-\$27,000. Still finalizing invoices and income tax. Reviewed top performing posts on social media for the last month.

Medical Executive Committee:

- The September 2024 Medical Executive Committee Report with Credentialing as well as September Policy and Procedures were presented by Travis Daise, MD, for board approval. Colorado Imaging Associates providers are starting to come in. Go-live date of October 1st with CIA. This will put GRMC, RCHC, and KCHSD on the same radiology group system. There were 19 policies and procedures recommended for approval this month.
 - Ms. Eckhardt moved, and Ms. Thompson seconded to approve the September Medical Executive Committee Report with Credentialing and all policies and procedures. Motion carried.

Financials:

- Heather Prideaux, CFO, presented a review of the August 2024 financials.
 - Total net income for the month of \$75,061.28. Higher net income this time last year due to a cost report receivable. Total income before expenses up 3.5% for the month, still down 4.2% year-to-date. Operating loss on the month of -\$24,529.82 before non-operational revenue. Purchased podiatry supplies which went over budget for the month by 60%. Getting reimbursed by Common Spirit for provider flights. Reviewed the year projected out. Starting to get ready for the 2025 budget soon.
 - Questions: What is the benefit of Reach Solutions vs onsite I.T. services? – Main thing would be the manpower. Reach has a team of people able to help at all times. This allows tickets to be resolved sooner. Second perk is the ability to upgrade devices. This doesn’t all hit the hospital budget at once. Reach is able to put everything on a rotation and keep track of everything. Cyber security is a huge deal. They have the expertise that someone in-house may not have. -Should we start seeing numbers come back up ending out the year? Yes. The summer months are always slow, and things pick back up with school starting and coming into the winter, and sick months. – Do you track operating expense ratio? No. This is not typically a hospital thing.
 - Days cash on hand and average daily expenses graph included again as well as the net patient revenue versus cash collections.

- Motion to approve the August 2024 financials as presented by Ms. Eckhardt, seconded by Mr. Nash. Motion carried.
- Days liquid cash on hand: 235 from August 2024 stat report.
- Days in A/R: 51.01 from August 2024 stat report.
- Average Daily Expense: \$62,380

Risk / Quality:

- None.

Board Committee Reports:

- By-Laws Committee:
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- Building Committee:
 - No meetings have been put together yet. Updates come along with the Eide Bailly strategic planning.

Action and Discussion

- Ryan Marvin submitted a quote for a 2025 Ford Explorer in the amount of \$44,000. This was brought a few months ago to move the purchase up to the second quarter. It has taken some time to get a quote back. Dan Brenner Ford came in with this quote. Looked into used options to compare price but best option is to go new. Still working with another vendor in town to get another quote. Can keep with the used vehicle options to stay within the \$35,000 initial budget price or keep looking and continue with a ‘do not exceed’ motion to keep under \$44,000. Staff is all on board for a third row vehicle. Fleet vehicle is said to be 6-8 week out. Kent, maintenance manager has gone to look at a few used vehicle options. Nothing stood out as a concern. Most of these vehicles came with 20,000 – 35,000 miles. Going with a new vehicle comes with better warranties. Will not be trading any current hospital vehicles in; all are needed still. Anticipate coming back every few years to update those in the future. Motion to purchase a new company fleet vehicle but do not exceed \$44,000 by Ms. Thompson, seconded by Mr. Nash. Motion carried 4-2(Ms. Eckhardt and Mr. James).
- Allison Mulch, RN, submitted a quote to upgrade the radiology portable machine to Window’s 10 and replace the DR panel in the amount of \$38,690.00. This is an unbudgeted item. Updated needed to stay in compliance. DR panel needed as the current one has a crack in the glass. In the current budget, there is \$30,000 to upgrade the fluoroscopy room (where swallow studies are done) that will not be done. There are other plans for this moving forward. This would allot for most of this current purchase only putting \$8,690 as unbudgeted. Motion to approve the RadSource Imaging Technologies quote in the amount of \$38,690.00 by Ms. Eckhardt, seconded by Ms. Baker. Motion carried.

Items-Updates and New Business:

- No new business.

Interim CEO Report:

- CEO recruitment is underway; position as been posted. Common Spirit reviewing applications as they come in to make sure requirements are met before sending to the committee.
- Board governance manual in progress. Hoping to bring back to the next meeting if not sooner. Will provide one for each member.
- Interviews with Anchor Consulting are almost completed. Harry will compile information then present.
- Purchase approval authority policy addendum is with Common Spirit. They are reviewing and contemplating whether a whole new contract should be done to update from Centura to Common Spirit. Board has not voted on this internally yet. Jeanette getting things in place and making sure everything can be done first. Making sure spending limit will require CEO and CFO signatures both to help prevent any ill manors.
- Jeanette attended the Community Health Needs Assessment meetings and County Commissioners recently and gave a good update on the hospital. The topic of delivering babies came up again. Explained the reasoning for GRMC not looking at this in the near future. This is not a complete ‘no’ but a ‘no, for now’. Discussed strategic planning and what the building looks like as far as renovate vs rebuild. Working with

Eide Bailly on getting a survey out to selected individuals. Will have a strategic planning with senior team, GRMC board, and Eidy Bailly on October 21st.

Common Spirit Report:

- None.

Other New Business:

- Discussion from the board regarding the importance of sticking to the annual budget. Employees need to be cautious with continuing to bring items back to the board that are either over budget or unbudgeted all together. Appreciation with the fact that senior team is doing its due diligence deciding what is a need and what is a want or with the ability to shift about other items to add in new things and still stay within budget.

Old Business:

- None.

Executive Session:

- Ms. Eckhardt moved, and Mr. Baker seconded to enter into executive session to discuss personnel matters for non-elected personnel with the board, CEO and CFO for 30 minutes at 6:57.
- Resumed open meeting at 7:27.
- Mr. James moved, and Ms. Baker seconded to go into executive session for another 10 minutes at 7:27.
- Resumed open meeting at 7:37. No action was taken.

Adjournment:

- With no further business to discuss, Ms. Baker moved, and Mr. James seconded to adjourn at 7:38pm.

Sabrina Thompson, Secretary