

**Mountainview Medical Center  
Board of Directors Meeting  
January 24, 2018**

Present: Bill Galt, Shane Sereday, Bill Schendel, Rick Seidlitz  
Rob Brandt – CEO, Tony Pfaff– Cypress Healthcare

Absent: Otto Ohlson, Chris Schlepp, Tanya Hill

1. Call to Order

Bill called the meeting to order at 4:02 p.m.

2. Minutes

Review minutes from November 22, 2017. Rick moved to approve as presented, Bill S. seconded. **Motion Carried.**

3. DON Report

- Staffing – contract with traveler RN for December shifts is completed.
  - Zero LPN travelers
  - Zero shifts by Kari Jo
  - Tim still has to retake RN boards; is currently filling open LPN shifts.
  - Moving forward on nights: Tressa will pair with Sara (new RN grad) and Tim (once boards are passed) with no LPN. The regular RN is support to new grad and will do the med pass duties.
  - Still have RN in the wings trying to relocate here. Not sure if will work out.
- Yellowstone webinar and various committee meetings attended
- Cypress DON calls will be monthly
- New falls project through MHA. Had a goal last year of 40 or less, missed it at 44. Will try again this year; only 3 were acute patients – which is good.
- Switched HCAHPS survey provider; new one is cheaper and offers better service. They will do a phone survey with same standardized questions rather than mail; with a 4 time attempt, for all discharges. Plus will have an additional phone call for any with a risk for readmission. Report turnaround is almost instantaneous or weekly rather than 5 months after the fact.
- Fern did a good job with residents for Christmas Party; Power of One risk award for Brian in dietary.
- Survived norovirus outbreak; difficult to prevent and stop. Cleaning protocols and products adjusted.

4. Medical Staff Report

Will skip this for now. Dr. Stenseth was called out. If he doesn't return we will have him give a report next month.

5. Financials ~ December

- Days cash on hand: 238
- Liabilities: \$457,871
- Revenue: \$272,453 hospital, \$52,835 clinic, \$328,504 net patient
- Total operating expense: \$461,801

- Investments: US Bank \$1.08 million; Merrill Lynch \$1.07
- Slower month for utilization: 7 acute; 33 swing; 31 ER visits; 272 clinic visits; 582 intermediate
- AR days 50
- Loss of \$99,959; still up year to date: 78K

## 6. Quality

A new report will be sent out on Friday. Our lab director: Dr. Linfesty has to sign off the new lab additions. There were only 3 abnormal items, all medication errors: 1 was documentation, 1 missed dose and 1 improper disposal (remedied the issue). Other than those program is outstanding and improving.

## 7. CEO Report

Employee introductions:

Pat Kadrmas: new Chiropractor

Beck Parisi: RN from Harlowton: works casual status 2 days a week

Laura Kakuk: new LPN

Lab update: Michelle Swenson, lab manager gave a report of our last CLIA survey. Visit was the end of October. 4 deficiencies were found and had a revisit the middle of December. Surveyor expected Dr. Linfesty, our Medical Director for the lab- a pathologist from Billings Clinic, to visit during that time frame. (You have to be a pathologist to be the medical director.) Normally he visits the lab 3 times per year. If he can't come, the technical supervisor comes who helps, as well as does the quality assurance and quality control for all hospitals they supervise. In the write up it was indicated an extra visit would be added. The surveyor thought Dr. Linfesty would have been here before the revisit.

Dr. Linfesty's team did visit on the 10<sup>th</sup> of January and went through everything in the lab for quality assurance and quality control items, cross referenced all patients and made sure all signatures were completed. At the end of the day they met with Rob. There was a 2 page checklist of things to fix, check and monitor.

The surveyor came for a 2nd revisit on the 17<sup>th</sup>, she reviewed everything and is happy. Two things were requested: a tab to be included on the quality report for lab items and a communications log. She wanted a more definite way to show how information is being passed on information to other workers in the lab. It is a standardized excel spreadsheet for documentation.

There were issues with the coag analyzer. Data entry was not being done right; it is now fixed. We have gotten an end of life notice for the machine; we have had it for 10 years. It needs to be replaced. Michelle has a quote for a new one; the approximate cost is \$25K. Rob and Joni (Billings Clinic lab person) are going to check our buying groups to see if we can get it at a lower price. It will be included on this year's Bair Grant. Rob stated it was on the grant the year we had to replace the chiller. It will be purchased in 2018.

Question asked of what happens when we have deficiencies. If we get sited, we have 10 days to submit a plan of correction with 60 days to make the corrections. Sometimes you can submit an email or pictures to show they are fixed. They don't necessarily have to come back for a revisit. If the error continues and it isn't fixed, they can revoke our certificate. It's our understanding that sometimes there are monetary sanctions, but we have never had that or have knowledge of that.

Clarification was made that no patients were ever in danger. Dr. Linfesty had Michelle look back on 10 patients in the last 3 months. For the most part the error was a therapeutic range number that goes down to 2 decimal points. Those numbers are not clinically significant. We are completely assured no patients were affected.

This surveyor is extremely good and thorough; very black and white. Which is good for a lab. We have added to the internal quality report items she wanted and the lab communication documents. All trends can be watched, which is a positive, and will make our lab better. We are all good as long as we continue doing what we say we doing.

2018 Medicaid Swing Bed Rate: We received a letter from Medicaid that our reimbursement rate is increasing to \$181.52. We had to raise our rate to stay above that amount to \$182 per day. We were at \$178. It takes effect February 12<sup>th</sup>. It truly only effects 5 residents that are self-pay. They all have been talked to individually and they understand.

Medical Staff Privileges: Dr. Nieset. He has completed his initial year and needs to be renewed. He is Scott Meissner's oversight physician for the pain clinic and does mid-level oversight for Dr. Stenseth if he is unavailable. He has also expressed an interest in covering some shifts. It is good for him to have some exposure to MMC so he can step in immediately if needed. His application comes with a favorable recommendation from Dr. Stenseth. Rick moved to accept; Shane seconded to approve privileges for a two years. **Motion Passed.**

Information Items - none

Public Comment - none

Motion to adjourn into executive session by Rick at 4:26 p.m. Seconded by Shane.